

The above, then, represents a total loss to the Dominion through sickness, and what we may term premature deaths, of \$388,600,000 per year; and to Ontario of \$147,540,000. And this, without taking into account the loss sustained by those who die under 20 years of age not living on to 70 years. Could all their lives be prolonged to 70, they would earn probably \$300,000,000 more per year in the Dominion. But we may leave these out of the estimate for the present.

In this money estimate no account has been taken of the loss of stamina—the debility—the “muscular tenuity,” which cannot be estimated, neither as regards the present generations nor the generations of the future, as resulting from sickness, much of which might be prevented.

HOW MUCH OF THIS IMMENSE LOSS MAY BE PREVENTED?

The best living authority, Mr. Simon, late of the Government Board, Great Britain, says, in reference to the deaths in Great Britain, “The deaths which occur in this country (Great Britain) are fully a third more numerous [life being proportionately prolonged] than they would be if our existing knowledge of the chief cause of disease were reasonably well applied throughout the country.”

In some towns in England the total death-rate has been lowered over 20 per cent.; in many towns the death-rate from typhoid fever has been diminished from 33 to over 50 per cent., and in others the death-rate from consumption has been lowered from 20 to 40, and even 49 per cent., all by thoroughly cleansing the towns, providing a pure water supply for domestic purposes, and drainage.

According to the *Lancet* (London), the mortality statistics have shown a steady decline in the death-rate from fevers during the past few years from 80 to 45 per 100,000 persons living, while in preceding years it had averaged 93 per 100,000. The *Lancet* points to this as “a preliminary triumph of Sanitation.”

It is believed that by means of the practical application of Sanitary work, a greater proportionate reduction can be made in the sickness rate than in the death-rate.

In Canada probably as much can be done as in England, where very much had previously—from 20 to 40 years ago—been done in public health work. The death-rate in Canada is probably as high as it is in England, if not higher. The cities here are not so densely populated, it is true, but it must be borne in mind that two prevalent and fatal diseases, typhoid fever and diphtheria, are here as elsewhere more prevalent or fatal in rural than in urban municipalities.

Now if instead of a one-third reduction in the death and sickness-rate, a reduction of one-tenth could be brought about, what a large sum of money would be saved annually thereby; over thirty-eight millions of dollars in Canada, and over fourteen millions in Ontario, taking a low estimate. And this could doubtless be accomplished with a small outlay. A few thousands of dollars spent in educating the people would do a great deal. No other investment pays nearly so well as that spent in promoting the public health.