

a large proportion of these being adults who made no pretence of having been re-vaccinated since their infancy; and seven were children, who had never been vaccinated at all. On several other mail steamers a similar condition of affairs was found to exist in varying numbers. Eight hundred and eighty persons in all were thus vaccinated, between Rimouski and Grosse Isle. The doctor refers to the difficulty of examining and vaccinating a number of passengers suffering from sea-sickness, with all its attendant disturbance of mind and body, during the first few days of the voyage; and when postponed until later, the vaccination cannot be depended upon to prevent the development of small pox contracted before embarkation. "To secure the protection for Canada sought for by these vaccination regulations, every proposed passenger should be examined, and protection in accordance with them established or ensured, prior to admission to the vessel or before she leaves the calm waters of the port of departure." This would certainly be a great improvement, if carried out.

Dr. Montizambert asks for an electric search-light and a deep water wharf, both doubtless much needed. Vessels have to be boarded off Grosse Isle on arrival by night as well as by day. On dark and stormy nights this is often a matter of difficulty, not to say danger. Such a light would greatly facilitate the prompt recognition and the boarding of vessels at night. It would also lessen the risk of injury by collision, as, for instance, occurred between the "steamer 'Challenger' and a Norwegian barque I was endeavouring to board in the gale of the 1st of June last."

"The great deficiency of the quarantine station of Grosse Isle is that of a deep water wharf. A wharf to which infected vessels could be brought to land their passengers and effects for disinfection; and on which could be placed the steel cylinders for the prompt and approved disinfection of the effects by superheated steam, the elevated tanks for drenching with the mercuric chloride solution, and the steam fans, furnaces, etc., for changing the atmosphere in the holds and steerages and replacing it by one charged with sulphur dioxide." Such a wharf would cost about \$120,000. This sum would not go far in paying the costs of an epidemic, should one spring up through want of it. It would be but the *ounce* of prevention.

THE ONTARIO Provincial Report relating to Births, Marriages and Deaths in the province in 1888, by the Inspector, Mr. H. S. Crewe, has recently been issued. The best possible seems to have been done to compile a useful and interesting report from the imperfect material which is "returned," and reaches the Inspector. It is very difficult to make much out of statistics which are incomplete. There was an increase over the previous year, 1887, of 1,460 registrations; yet, as the report states, the increase was not equal in proportion to the increase in population in the province.

From consumption 2,521 deaths were registered, a larger number than from any other disease; although in the report this disease is classed as second in fatality, and inflammation of the lungs, bronchitis and other lung diseases are classed together as first. Yet from all these only 2,537 deaths were recorded. As from "old age" 2,365 deaths were registered; from "nervous diseases," including diseases of the brain and infantile convulsions, 2,275; and from general debility, 2,271. Heart disease came next, counting up to 1,567 deaths. From diphtheria, 1,088 deaths were registered, 252 less than in 1887; while in 1887 there were 66 less than in 1886. The number of deaths registered from diarrhoeal diseases (934) had increased; while from the different kinds of fevers grouped together the mortality had increased to so large an extent [that they appear for the first time in the ten highest causes of death. "Typhoid fever continues to be the most fatal of the fevers, although there was a slight decrease in the number who died," or were registered. In the following counties more than the average mortality from typhoid was returned, viz., Brant, Essex, Lambton and Oxford. In the cities of Stranford, Brampton and Ottawa it was quite prevalent. In the towns of Woodstock, Picton, Windsor and Owen Sound, the death-rate from all kinds of fevers was unusually high, viz., 1.8, 1.3, 1.0 and .9 respectively, while the average for all the towns was only .56 per 1,000. More deaths are reported from fevers at ages between 20 and 30 years than at any other period in life. The rural districts present a low death-rate from fevers, in comparison with that of the cities and towns." But it must be borne in mind that the registrations from the rural districts are much more imperfect than from the towns. And so do imperfect statistics mislead.