

# The Canada Lancer

VOL. XLIII.

TORONTO, APRIL, 1910

No. 8

---

## EDITORIAL.

---

### THE DOWNEY TUBERCULOSIS BILL.

Mr. J. P. Downey, M.P.P. for Wellington, introduced again his bill calling for the reporting of cases of tuberculosis. The bill was supported by Mr. D. J. McDougall, of East Ottawa, and Mr. R. R. Gamey, of Manitoulin. Hon. A. G. MacKay added his endorsement of the measure. He thought the government should appoint a commission of experts who could bring in a report. He said the bill was a perennial one, but it had justified its existence. Dr. Forbes Godfrey said that the government would be wisely advised if they directed an investigation prior to adopting any statutory enactment. Sir James Whitney said the government were unable to see any advantage in the proposals outlined.

*The Globe* in an editorial note remarked thus:—

“The annual discussion on Mr. Downey’s bill to lessen the spread of tuberculosis has shown a growing interest in the subject and an eagerness to adopt all known preventive measures. The government is unusually tardy in this regard. There is a strong feeling in favor of more effective means of preventing contagion, and this will soon force practical action.”

With this we concur. We have on many an occasion urged the advisability of reporting cases of tuberculosis. It is one of the most terrible of all known infectious diseases. By knowing the whereabouts of infected persons much might be accomplished to check the spread of the disease.

So far as Canada is concerned there are at least 50,000 persons always ill with the disease. One-half of these are practically unfit for work, and are maintained at an immense cost by those who are able to work. Then there are at least 12,000 deaths from this disease each year. These cases are advanced ones, and in the condition to spread the infection on all sides.

We are not alarmists, but we must be sensible. If people would take proper care, tuberculosis would not be a specially dangerous disease from the standpoint of infection. But people do *not* take care, or they do *not* know. Here comes in the value of knowing the location of the sick. They can be visited or have suitable instructions sent to them.