

public wards, of people who are perfectly well able to pay for the same.

We hear this complaint of hospital abuse from all parts of our Dominion where public hospitals obtain, and it may not be out of place to suggest that this Central Board place themselves in communication with other hospitals throughout the country. In this way, it could be made possible for hospitals to provide better accommodation for a larger number of needy while preventing the abuse of the funds provided by a generous and charitable public for the care of the sick poor.

THE PLAGUE IN VIENNA.

It is but a few months ago since we saw a letter from a leading sanitarian in India who had himself worked for months attempting to stem the plague in Bombay, in which he expressed himself, to say the least, as doubtful concerning the future of the plague, and more especially the future of Europe. In India, he and those with him, had powers so great that they could remove whole villages and towns into temporary isolation, and could burn down the cheaply constructed wooden houses, and despite all this, yet were unable to overcome the epidemic. What it would be if the disease reached the solidly built houses of Europe, he scarce dare mention. At the time, we thought that these forebodings were excessive, but, slowly the disease is creeping northward along the old cholera route through Russia, and even though now we are not prepared to believe that Europe is in danger, we can readily understand that the recent episode in Vienna has caused great excitement.

In the *Vienna Clin. Woch* of Oct. 27, there is what seems to be a final account of the occurrence, and it disposes of the rather sensational statement copied into some of the leading journals here, to the effect that the now notorious Barisch, contracted the disease by being bitten on the hand by an inoculated rat, and subsequently suffered from symptoms of pneumonia, which eventually showed itself to be that form of plague pneumonia which had been one of the features of the Bombay epidemic. Such pneumonia, in the absence of axillary buboes, is not easily explicable on the theory of a bitten hand. The man had evidently been over-drinking and was in a susceptible condition in consequence.

Despite all care, Dr. Müller, who assisted in the disinfection of the death chamber, fell ill two days after the death of Barisch and died within 24 hours, while the nurse Pacha was taken ill about the same time as Dr. Müller, and died after 10 days illness. No wonder that