

CONSUMPTION—A HOPEFUL OUTLOOK.

BY JOHN FERGUSON, M.A., M.D., PH.D.

CONSUMPTION is the great plague of to day. In Great Britain some seventy thousand die annually from this disease, in Canada probably not less than ten thousand, and in the United States about one hundred thousand. In some countries in Europe the death rate is as high as four, five and even eight per thousand living. In Britain, Canada and the United States about ten per cent. of the total death rate is due to consumption; in some instances, as in Maine, it has reached fourteen. Between the ages of 15 and 45 years, about one-third of those who die perish of this disease: while, from the age of 15 to 35, nearly one half of all deaths is due to it. It will be seen that in the productive years of the race, this exceeds every other disease in fatality. When it is further borne in mind that the average period of illness, according to several of the greatest authorities, is some three years, the vast importance of this disease becomes at once apparent. The question is raised, can anything be done to lessen this dreadful scourge, and prolong life in its most useful period? This question I shall endeavor to answer in the affirmative.

First, then, take the influence of heredity. Few things die harder than a common belief in any view of an important question. If there be any notion more firmly believed in than another it is that consumption is hereditary. This belief, to a great extent, is beginning to give way, or to undergo very marked modifications, however, in the minds of some of the ablest observers. If one holds in view the fact that fifty per cent. of the deaths that occur between the ages of 15 and 35 is due to consumption, it must be admitted that heredity is likely to be

found in about one-half of all the cases. If uncles, aunts and grandparents are dragged into the investigation, the net is likely to break and at once holds no solid conclusion.

Dr. Walshe obtained from his very extensive hospital experience that 26 per cent. of consumptives came of father or mother or both parents who had been similarly diseased. He contends that "this ratio is no higher than the consumptive portion of the population generally." He concludes that it does not prove heredity. Many families in perfect health, leaving the country and afterwards residing in crowded quarters of the large cities, lose members of the family from this disease. He is strongly of opinion that heredity has much less to do with consumption than is commonly supposed.

The researches of Drs. Quain, Pollock, Williams, Lugol, Lebert, Galton and many others, fix the heredity influence at about 25 or 30 per cent. Few physicians who have been long in practice doubt the existence, to some extent, of a family predisposition to the disease. One half of all the deaths from 15 to 35, or one-third from 15 to 45, is caused by consumption. Now, if these deaths, say from 15 to 35, happened in one-half of the families in a given district or country, it would go a long way to disprove any hereditary tendency. This, however, is not quite the case. According to my own statistics bearing upon this point, the deaths from consumption that take place between the ages 15 to 35 are not distributed over fifty per cent. of the families; but limited to, at the most, twenty-five or thirty per cent. of the families in a given area. Thus, in one district which I have studied, the population