we think the home-grown baby is better than one imported from Galicia, etc.

The following figures prove beyond a shadow of doubt what can be done in other places by what has been done in Toronto. The deaths under one year of age are as follows:

1904	 903	1911	 1.432
1905	 935		
1906	 918		
1907	 976		
1908	 1,215		
1909	 1,410		
1910	 1,402		

It will be noticed that the number of infantile deaths in Toronto kept on increasing up to 1913, since which time it has steadily dropped. The population, of course, was also increasing, but the terrible toll of child life in 1913 resulted in emphatic action being taken by the Health Department, which redoubled its efforts in connection with the milk supply and reorganized the child welfare division along the lines on which that important branch is now operating. How the above figures work out when the increase in population is taken into consideration is shown by the following table, on the basis of every 100,000 of the population:

1904		1911	999
1905	392	1912	386
1906	362	1913	421
1907		1914	331
1908		1915	
1909	452	1916	300
1910	410	1917	293
	110	1011	235

If anyone doubted the efficacy of the Health Department's campaign to safeguard life, the foregoing figures would be convincing. The reduction during the past four years, during which the infant welfare department has been in operation in reorganized form is splendid. Putting 1913 to one side as an abnormal year, and going back to 1911 for a comparison, it may be pointed out that the infant death rate of 382 per hundred thousand of population, which then prevailed, would have meant, continued in 1917, that 1,810 babies under one year of age would have been carried to their graves last year. Instead of that, there were only 1,115—a saving of 695 lives.

According to Dr. P. H. Bryce, medical inspector of immigration, the