

These remarks are mere introductory generalities; my real object is to present the findings of an Ontario health officer, Dr. G. A. Dickinson. He prepared very admirable statistics of the infractions of the sanitary code in his town, Port Hope, and at my suggestion divided the deaths and diseases of his town according to the condition of the premises where they occurred, putting together in one group all premises showing infractions of the sanitary laws, and in the other all premises showing obedience.*

If it is essential to health and long life that all manure piles should be covered, all garbage collected, all privies kept in a sanitary condition (whatever that means), no water in the cellar and so on, surely the deaths and disease amongst the law-breakers should be higher than amongst the law-keepers. If our sanitary code is really sacred, as it is often regarded; if it has the real weight of ripe years of well-checked-up experience; if it is truly physically harmful to break its injunctions, if it is really protective to keep them; then the distribution of death and disease should show some relation to the two groups, the law-keepers on one side, the law-breakers on the other.

We are not disappointed; a relation, at least on the surface does appear; it is this: The law-keepers have in proportion about one third more deaths than the law-breakers, and over twice as many cases of infection! The actual figures were as follows: From 303 dwellings showing various infractions there were 13 deaths and 13 cases of communicable diseases; while from 901 dwellings showing no infractions there were 52 deaths and 89 cases of communicable diseases. In other words for every 100 deaths and every 100 cases amongst the law-breakers there would be, in proportion, 135 deaths and 232 cases amongst the law-keepers!

So if we insist on any relation at all, if we claim that the sanitary code affects death and disease, we must on this showing admit its relation to be that of increasing, not diminishing, both; and increasing both very markedly! Where lies the fallacy? Dr. Dickenson has searched for it carefully and found none, nor any explanation for the figures at all. The premises showing infections were scattered at random all over the town, not grouped in any one "unsanitary" neighbourhood. The people who lived in those premises were the average citizens, no better or worse or richer or poorer than the others. The reporting of deaths and disease was equally good for both groups. I know of no similar

* Dr. G. A. Dickinson presented his results at the Ontario Medical Officers Health Convention, May 7th and 8th, 1913, Toronto.