the world for the admission of those who are able and willing to pay, and are in the early stage of the disease, the door is effectively barred against the great mass of sufferers who are poor, and others where the disease has passed the early stage. These outcasts for whom there is no Sanatorium accommodation are left to roam abroad, ride in our street cars, cough in the faces of our children, drink from the same cup at the fountain, expectorate in the public halls and conveyances. Some of them pass into the hospitals where little or no isolation from other patients is adopted, others are confined for months in small, unsanitory rooms, badly ventilated, and the whole family exposed to the contagion, and there they die, followed later on by other members of the family to a premature grave, and everybody wonders why so many people die of consumption.

In this Province in 1898, 3,291 persons died of tuberculosis. This disease may extend over one, two, three, four or more years; it is therefore within the mark to say that we have continually in Ontario eight to ten thousand afflicted with the disease—we have say 8,000 who should be brought within reach of Sanatorium treatment.

The Sanatoria accommodation of this Province is fifty beds at Gravenhurst Sanatorium—an excellent institution doing a good work and a credit to its promoters. Here only those are admitted who are in the early stage of the disease, and are able and willing to pay $6 or $7 a week.

For the balance, 7,950, there is no Sanatorium accommodation. To bring Sanatorium treatment within reach of these 7,950 is the problem that this Association is trying to solve.

The only Sanatorium that seems worth contending for is one where neither poverty nor advanced disease bars the door, where all those who are curable may be cured, where all those who are improvable may be improved, where all those who are incurable may be cared for until they pass over to the great majority, and where each patient may, if they wish, be under the care of their own family physician To secure this ideal Sanatorium always has been, is now, and shall continue to be the high aim of this Association.

After fully considering the question from every standpoint, the following plan was formulated and placed before the public in a paper read before the Canadian Medical Association last August:

1. The establishment of a rural Sanatorium in connection with each municipality or group of municipalities for the reception of such cases as admit of a reasonable hope of cure or improvement.

2. The erection and maintenance in connection with the above Sanatorium of suitable isolated buildings for the reception and treatment of such advanced cases of the disease as are unsuitable for Sanatoria treatment.

3. The co-operation of the Government, municipality, philanthropic and charitable organizations and individuals, in providing the necessary funds therefor.

On the 7th of March, a large representative deputation laid this plan before the Local Government, and asked for legislation on these lines. Within thirty days a bill was prepared, which passed the first,