

All cities must do the same. If it is of very little moment that Toronto should destroy all infection in its sewage and Buffalo pour its sewage into the lake untreated.

The real remedy, therefore, is the strong arm of the law, and adjoining countries must unite. What a travesty on honesty, and knowledge to have an extradition law to surrender a murderer, and allow cities to slay there tens of thousands by the pollution of our large bodies of water! Well might we exclaim: "Lord, what fools we mortals be."

THE HOSPITAL ASSOCIATIONS.

For a number of years there have existed in this country and in the United States Associations for the study of hospital management. A short time ago the American Hospital Association met in New York. There were a number of Canadian delegates present. Many important questions were discussed.

The hospital management of Canadian institutions was highly praised for its efficiency. Special attention was given to the hospital system found in Ontario.

A good deal of attention was given to the subject of hospital architecture. The need for ample balcony accommodation was accentuated. Spacious verandahs were favored as compared with roof gardens. Some hospitals which had tried roof gardens were now installing verandahs.

Much attention was paid to the social side of hospital work. The visiting of patients is a very important one. It is not possible to prevent the friends of patients calling to see them; but this must be regulated. Convalescent patients may be granted greater liberties. There is difficulty, however, in finding the accommodation in the hospitals where they may receive there friends. The arranging for homes in the country for convalescents to be removed to received attention and was strongly recommended. There is no doubt this is an ideal plan for hospitals in large cities. Many would adopt the system of convalescent homes if they had the means for defraying expenses.

The cost of maintenance is a problem that is ever before the mind of the hospital management. This is steadily going up. It is to-day double what it was thirty years ago. There is now a vast deal more operative surgery and this calls for so much in the way of dressings that large bills are incurred. Then foodstuffs have been steadily becoming dearer. Help also costs more. There is no way in sight of reducing this cost. It then comes to the other side of the account. The hospitals must charge the patients more, and the municipalities and governments must give more in the form of grants.