our streams, it is an efficient regulator of many natural phenomena.

Thus it appears that the value of the forest does not consist entirely in its output of lumber and other forest products, but also in the profits resulting from its regulating influence. Not until it has disappeared entirely does mankind seem to realise its importance in the household economy of Nature. With the disappearance of the forest cover, there ensue the disastrous spring freshets, low water at midsummer when it is most needed, and the gradual conversion of fertile regions into deserts. History furnishes many examples of this very thing, and whole reams might be written upon this phase of the subject. Usually more indignation is expressed over the felling of a single tree by the roadside, or in an open field, than by the wanton destruction of whole acres, yes, even square miles, of forest and wooded land. Only a few of the nations of the earth seem to realise the necessity of husbanding their timber resources. Resources in land are of a more or less permanent nature, and as population increases no effort will be spared to bring all that is idle under cultivation. With improved methods of agriculture, too, the area under cultivation will become more and more productive. In the same way our forest wealth should be so managed as to yield a regular and permanent revenue. Other countries are able to do this, so why not Canada?

MILLIONS FOR A HOSPITAL

The Most Completely Equipped Hospital in Canada.

TWO million and a half of dollars for a hospital is to be spent by the Hospital Trust of the city of Toronto; said money to be expended within the next few years on a scheme which for magnitude and private enterprise on a public basis has no equal in Canada. The new public General Hospital has for two years been under discussion. It has been looked at from the standpoint of expertism—medical, civic and architectural. Newspapers have devoted columns to its advocacy among the citizens, some of whom have come forward handsomely—one to the tune of a hundred thousand. Delegates have been sent to the leading hospital and university centres of the United States and Great Britain to profit as much by the experiences of other communities as might be before millions of dollars were locked up in a scheme which could never be expected to pay a dollar of dividend and would always be contingent upon an element of benevolence for support.

More than a year ago the Hospital Board with its shrewd business chairman, Mr. J. W. Flavelle, bought the site, eight acres in the upper downtown district on College Street. The land cost half a million. It is land which up to the present has been a shacktown, squalid, microby, and largely unproductive except on the basis of tenement-house rent. It was the upper end of St. John's Ward which for years has been the civic and housing problem of Toronto; a section which has for its western limit a beautiful street, University Avenue, leading up to the Parliament Buildings in Queen's Park with the university over to the left. Descriptive writers a few years ago used to comment upon the splendid environs of the most abject area in Toronto. The new hospital will put a new face on the picture.

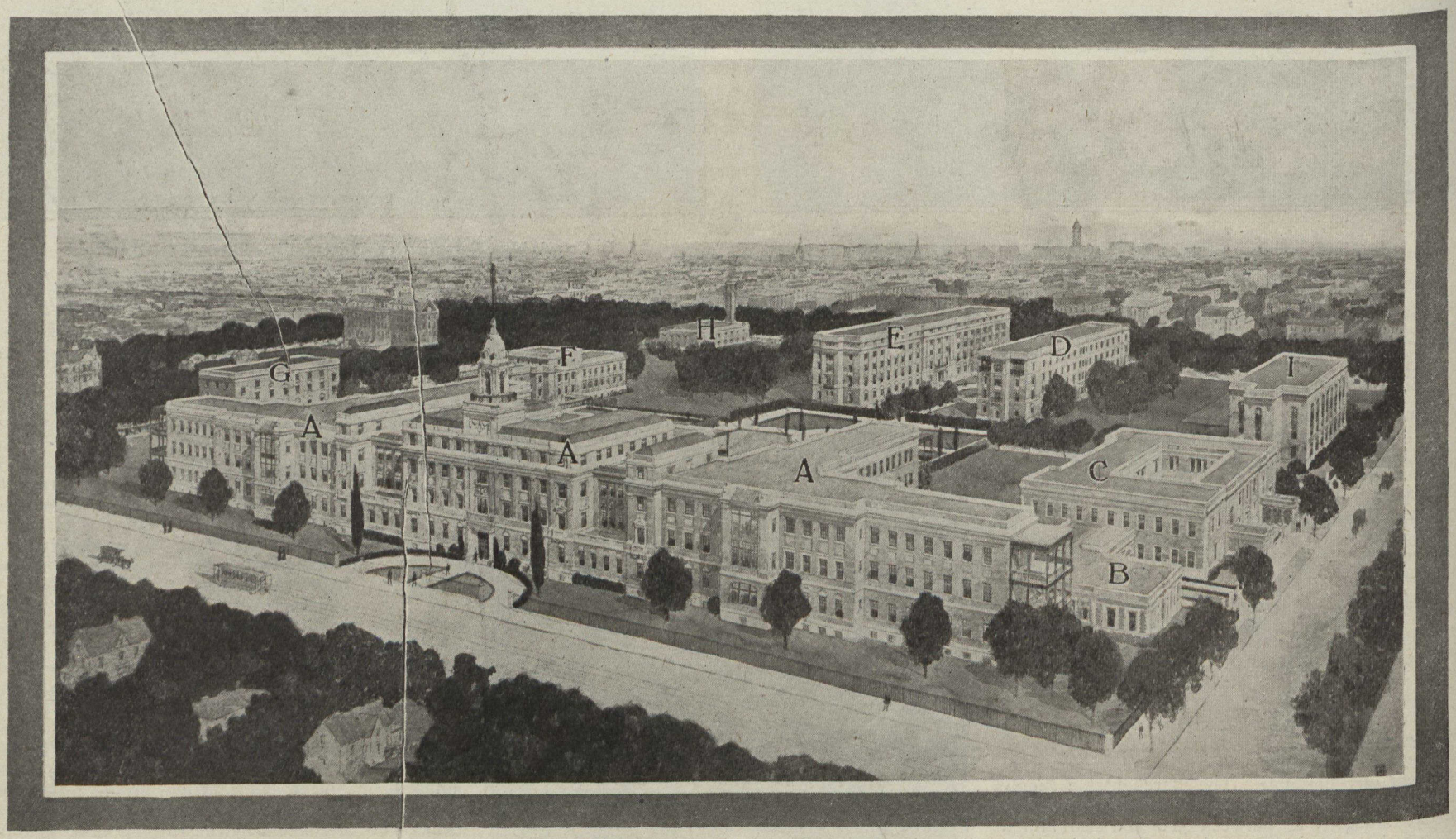
Early last summer the authorities commenced the work of demolition. It was something of a spectacle. There were hundreds of shacks to pull down and back yards to clear up. There were on University Avenue several decent and habitable brownstone fronts to tear away. On the east end there was the Dental College, built less than ten years ago—a four-storey building. All are gone now. Medical experts learned on the ravages of microbes advised clearing the site early and leaving the premises to the disinfection of a stiff Canadian winter before beginning to plough and to build; for of all places to avoid infection the hospital is first. So that an entire section of a city was pulled down and carted away to give the hospital room.

There had been discussion as to the wisdom of a central location. Some said the land was too dear and the air too dusty and the noise of passing traffic too great. Money has obviated the first. Space will do more to get rid of the other two. There is to be plenty of ground room; eight acres for a single scheme of buildings. Others argued that proximity to the university was not the main thing. With a suburban hospital up on a hill students would be willing to travel a mile or two for clinics. Which might have been true enough; but the same remoteness would put the hospital out of touch with population, both patients and the friends of patients who desire to have a hospital easy of access. Besides, it is important to consider the facts of the case; which are that any hospital on so large a scale necessarily exists very largely for many who can't afford to pay for private wards and who sometimes depend upon friends and relatives or private citizens to maintain them at the cost of seventy cents per day—which by no means covers the actual cost of maintenance. Such patients are perfectly willing to be treated somewhat as clinical material for which the University pays to the extent of a subscription of $600,000.

The experience of hospital authorities is that hospitals centrally located are better than those in suburbs. The present hospital when completed will be one of the most extensive in America and will certainly be the most complete in Canada. It will be the repository of the most advanced science in the treatment of disease, and for equipment will be a model and a study and therefore a stimulus to hospital enterprise all over the country. It will tend to centralise hospital work. It will also be a feature of scenic interest to the city. The hospital group of buildings will be as much an object of interest to tourists as the University or the Legislature—and considerably more than the City Hall.

Meanwhile the enterprise has served as a vehicle for the benevolent interests of a coterie of busy men who might easily have found vent for their surplus activities in other directions. On the whole the project will be one of the most interesting in the country and will have a great deal more human interest than most. Cash subscriptions to date from private citizens total $950,000, including Mr. J. C. Eaton's recent bequest of $250,000; City of Toronto, $200,000; University, $600,000; aggregate, $1,750,000—leaving three-quarters of a million yet to be got by private subscription as soon as possible.

It is sometimes said that a hospital is not the sort of enterprise that appeals to the public imagination; perhaps because it lacks the element of speculation. But if an enterprise the magnitude of the new public General Hospital of Toronto can elicit the practical sympathies and plain everyday humanity of the people, it is better than making a spectacular appeal to the speculative pocket.



TORONTO'S NEW HOSPITAL, WHICH WILL BE READY ABOUT 1912, AND WILL COST $2,500,000.

A—Main building fronting on College Street.

B—An emergency building equipped, including ambulances, which is the gift of private benefactors, whose names cannot at the moment be disclosed.

C—The out-patient department, the gift of Mr. Cawthra Mulock.

D—Building for private and semi-private patients.

E—Nurses' Home, with accommodation for 174 nurses.

F—Burnside Building for obstetrical cases.

G—Servants' quarters, to accommodate servants.

H—Central power house, which will supply light and heat for the entire plant.

I—Pathological Building, to be built and maintained by the University, in addition to the cash grant of $600,000 which they have made to the enterprise.