

minds of the Canadian public with regard to the purity of the milk supply is to prove that all the dairy cattle are free from tuberculosis. It should also be shown that the animals are kept in clean, well-lighted, well-aired stables; that the supply of water is abundant and of good quality; that their food is ample and of good quality; that the utensils of the dairy are in good order; and that the methods of handling the milk, from the act of milking itself until the output passes into the possession of the purchaser, are of the most hygienic character. In obtaining such a report as to the purity of a milk supply a Board of Health is acting distinctly within its right; nay, more, it is its duty to protect the infants of the municipality against poor milk. Every Board of Health in carrying into effect a by-law to secure good milk ought to have the co-operation of all dairymen.

Unfortunately, instead of assisting such a good cause dairymen are sometimes a stumbling-block, fearing that inspection may lead to loss and infringement of their rights. The rights of a dairyman are to sell a good quality of milk at a fair price, and the rights of the Local Board of Health are to be satisfied that the output of his dairy is pure. A dairyman should invite and encourage municipal inspection, if for no other reason, because the demand for dairy milk will increase when its purity is assured. Under present conditions manufacturers of condensed milk, malted milk, and other infants foods are competing with the dairymen, and a good deal of money is paid for patent foods which, if people were satisfied of the purity of dairy milk, would naturally find its way into the farmers' pockets. In presenting this side of an important question it is to be hoped that a word to the dairymen will be sufficient for them, and that they will not be slow in taking the means to secure the confidence of the people.

It must not be concluded, however, that if lives are saved which formerly would have been allowed to perish by consumption, if mortality in child-life is diminished by isolation and disinfection, the saved lives are destined to reach old age. English vital statistics show that the number of individuals living to thirty-five years has increased, that of those living from thirty-five to forty-five years the number is stationary, and that there is a diminution in the number of persons living from forty-five to seventy-five years. In other words, if young people in England have a greater chance to reach forty years of age, those who survive to forty or sixty years of age are more in danger of death than their parents were at the same age fifty years ago. Two hypotheses may explain this fact, the vitality of the race has diminished, or the conditions of existence in adult life are more defective than formerly. Dr. William Butler, who discusses this question in an article published in *Public Health*, thinks it is principally the first factor which must be blamed. Turning to a second branch of the subject, he establishes a series of tables on mortality by groups of diseases occurring during the same period, and from the reading of these