

the country, the prohibition of marriage to all lepers, and the prohibition to all uninfected persons of the inhabiting of infected houses, the policy of absolute and implacable exclusion.

A minority report, by Dr. Hoegh, who was a native of Norway, and had made a thorough study of the disease in both countries, was to the following effect: He held the opinion that the danger of contagion was very much exaggerated in the majority report, and that we shall, in all probability, be able to exterminate the disease in the United States without having recourse to such measures as are unnecessarily severe, and which disregard the ordinary rights of the diseased individuals. The Government of Norway had provided for the patient to live in his own home when this was approved by local officers under the condition of using a separate room, clothing and utensils. This was extensively practised, and the marked diminution of leprosy in Norway was due, he thought, to an improvement in the habits of life as much as to strict segregation. He thought the present immigration restriction of the United States Government sufficient, and recommended that patients already in America should not be allowed to go into public places, travel from home or share the room with others, and that their

families should be inspected at stated intervals to make sure the disease was not spreading. The CANADA HEALTH JOURNAL is rather in accord with this report.

The discussion was generally participated in, and a motion in substance finally prevailed that for the present the action taken by the United States Government in the premises was sufficient.

Another subject considered was: "To what extent is it necessary to moisten the air of rooms at the time sulphur is burned for the purpose of disinfection after the occurrence of diphtheria, scarlet fever and small-pox." The preponderance of opinion was in favor of using moisture in connection with burning sulphur for purposes of disinfection. Dr. H. B. Baker, of Michigan, stated that from observation made by fifteen hundred health officers in his State during the years 1886-7-8 in outbreaks of diphtheria and small-pox where disinfection and isolation were employed there were only one-fifth the number of resulting cases, and one-fifth the number of deaths that there were in those local epidemics where these methods were not employed.

A strong resolution was passed urging upon Governments to pass laws for the preservation and planting of forests.

MISCELLANEOUS NOTES AND EXTRACTS.

THE DISEASE GERMS IN THE SOIL.

Pathogenic germs evidently exist in the soil. The bacilli of tetanus, typhus and cholera have been observed, and it is probable that the bacillus of tuberculosis, the pneumo-coccus, will be found.

The superficial strata of the earth are extremely rich in pathogenic germs; at a certain depth there is a limit beyond which the number of germs rapidly diminishes until they cease altogether.

In the deep strata of the bacilliferous zone pathogenic species do not exist. Grancher and Deschamps have observed the arrest of the typhus bacillus at a depth

of 50 centimeters. In the cultivated superficial strata there are fewer micrococci than bacilli. The bacilli exist in the soil chiefly as spores. Under this form they best resist destructive agents and may remain latent for years retaining their virulence.

It is probable that the pathogenic bacilli germinate in the soil.

The cholera bacilli form numerous colonies at a depth of 3 metres during the months from August to October; from April to June at a depth of two metres there is no development, while at a depth of 1.50 metres the bacillus vegetates. At