

Dr. P. H. Bryce, of Ontario, chairman of the committee on interstate notification of infectious diseases, introduced his report for the year by referring to the fact that nearly all of the States, excepting New York, had become signatories to the arrangement to notify by telegraph or mail contiguous Boards or those on common lines of travel of cases of smallpox, cholera, etc. He went on then to speak of the provisions which State and Provincial Boards should urge upon the Local Boards to make, thereby causing all the States feel that not only was notification of outbreaks carried out, but also that what was more important, the prompt isolation of cases was being thoroughly performed. Not only were isolation hospitals a necessity in smallpox and cholera, but he urged the importance of the isolation of all cases of diphtheria, scarlatina, and other infectious diseases of that type, and stated that the only means by which the necessary isolation could be obtained was by the establishment and maintenance of hospitals of that nature by town and rural municipalities. He admitted that when the proper isolation could be obtained in private residences a removal to the hospital was unnecessary, but contended that as a general thing isolation was not to be had, especially among the poor people of the large cities. His conclusions were, that where notification with attempted isolation in the houses of the people had failed to limit these diseases, then that economy of time, lives, and money which was the result of the prompt isolation of first cases by removing them from the houses which become infected by their continued presence in them, reasonable the demand for such removal.

Dr. Probst agreed that isolated hospitals for the treatment of infectious diseases would be a good thing, but he doubted its practicability. Dr. Taylor, of Indiana, coincided with Dr. Bryce as to the results to be obtained by his plan, but doubted that it could be carried out. It might be practicable in large cities where superb hospital conveniences were abundant, but in small towns and sparsely settled districts it would be impracticable, the effect of removal long distances being dangerous. Dr. Thompson, of Kentucky, supported Dr. Taylor. Dr. Lee, Philadelphia, agreed with Dr. Bryce in his conclusions as to the practicability of the plan proposed, as also did Dr. Hewitt, of Minnesota. Dr. H. S. Orme, of California, also advocated the plan. The Chair appointed Dr. Orme, Dr.

Hewitt, and Dr. Bryce as a committee to investigate the subject and report further.

The next of a series was included in the questions, "Should the National Government assume the control of quarantines at all ports of entry?" "Under which control should quarantine be both in Canada and the Union, under National Government or under State Governments?" which occupied the time of the conference at the next morning session. Dr. Lee, of Philadelphia, an eminent Pennsylvania authority on sanitation, advocated the strict regulation and control by the Government of all ports on the coasts where it was at all possible that infectious diseases could be imported.

Dr. Lee offered the following resolution, which was referred to the regular standing committee:

"Resolved, that this conference, recognizing the failure of local authorities to administer quarantines effectually in a large number of cases, respectfully urges upon the National Government the duty of assuming the control of quarantine at all ports of entry."

Dr. Hewitt said, in reference to the resolution, that it was impossible to look to Congress for action in the premises; that no appropriation was available for adequate quarantine protection, and that if anything was to be done it must be done separately by the State Boards of Health.

Dr. Rauch, Illinois, agreed with Dr. Hewitt as to the inability of obtaining the necessary national legislation in quarantining the coasts. He was, of course, in favor of a national system of protective quarantine from pestilential diseases, but he was opposed to putting them, if obtainable, in the hands of the U. S. Marine Hospital Service.

Dr. Baker, had no confidence in the efficiency or practicability of a national system of coast quarantine. He favored the continuance of action on the part of the State Governments, and the obtaining of national aid in emergencies therefor if it were possible. In support of his statement he quoted the well-known—to physicians—efficiency of the New Orleans quarantine station, which is under the control of the local authorities, an efficiency which, he said, would be weakened were the national authorities to be placed in control.

The New York quarantine service was notably inefficient, but if the proper efforts were made the service would be brought up to the degree of efficiency of the New Orleans stations. Dr. Baker