

water supply and facilities for the disposal of its sewage. These two factors are of more importance than any other in their effect upon a city's health.

**DISPOSAL OF REFUSE.**—No municipal collection of garbage, rubbish, or ashes is in effect. Such matter has to be disposed of as the individual sees fit, which is a costly and very unsatisfactory system. It prevents the city from having the desirable cleanly appearance, accumulations of refuse are certain to be common, and the inspectors of the Board of Health are obliged to spend much of their time abating such nuisances when they should be engaged in work with real relation to the Public Health. The city authorities should plan to remedy this condition without delay, and they should not fail to consider the financial advantage to be gained by feeding the garbage properly cooked to hogs.

#### FOOD SUPERVISION.

**MILK.**—A good milk ordinance was passed by the Board of Health in 1915, but, up to the present time, it has been possible to put only a portion of it into effect. The 62 dealers and 180 stores where milk is sold are licensed, and a dairy inspector gives part of his time to visiting the 300 farms supplying milk to the city. Considerable improvement in their condition is reported. The requirement that all cows shall be proven free from tuberculosis by the tuberculin test is not enforced. Samples of the milk are tested for fats and solids, but, owing to lack of laboratory facilities, no bacteriological examinations can be made. From one-quarter to one-third of the supply is pasteurized and about half is bottled, but little supervision is exercised over either of these operations. Loose milk to be sold from stores has to be kept in stone crocks and must be handled under sanitary conditions. Outbreaks of typhoid fever and diphtheria were traced to milk supplies several years ago, but were promptly controlled by excluding the infected milk from the city.

**MEAT.**—The city slaughter house and market are not