

From the records at the City Health Office, to which Dr. Laberge, City Health Officer, kindly gave me access, I find that during the period in question 849 cases of diphtheria and diphtheritic croup were reported at the health office, besides 83 cases reported as simple croup.

The mortality from diphtheria and diphtheritic croup was 282, and in addition there were 100 deaths from so-called simple croup. Probably three-fourths of the cases of this latter disease were really diphtheria. In Montreal the term of "simple croup" was recently invented to cover obscure throat cases in which notification is permissible but not obligatory, in the hope that it may lead to cases being reported which would otherwise not be heard of. If the cases thus reported were examined bacteriologically valuable information would be obtained. The deaths registered under this heading, in spite of its harmless and reassuring sound, are twice as many as those occurring from typhoid fever in Montreal.

The total mortality for diphtheria and croup was thus in the neighbourhood of 400 for the twelve months under consideration and double that observed in any one year since 1888, the mortality from diphtheria and croup in the intervening years being as follows: 1888, 427; 1889, 200; 1890, 170; 1891, 78; 1892, 54; 1893, 65; 1894, 99; 1895, 419.

Without going into the proportion of the deaths in the different years to the increasing varying population of the city, I wish to call attention to the fact that during the first year of the antitoxin treatment, and in spite of the fact that this treatment was very generally carried out in private patients who could afford it and among hospital patients who get it without paying, and while special statistics show a decided lowering in the death rate, nevertheless in Montreal, twice as many persons died from diphtheria during 1895 as during any of the previous six years. This probably does not depend at all upon any better enforcement of notification in diphtheria cases, as it includes both diphtheria and croup.

My reason for emphasizing this is to show that the rigorous enforcement of the standard quarantine measures of isolation and disinfection is not rendered less necessary by the introduction of the new specific remedy. Indeed I consider that by converting a severe disease into a mild one the tendency of the patients to go about before the danger of infection had disappeared must be increased to an extent which offers a new element of danger, unless quarantine is very strictly enforced. Even physicians hardly realize the necessity of enforcing a tedious quarantine and isolation for what has apparently been trivial illness which improved promptly under antitoxin.