

No Restrictions Placed on Lepers in New York.

In the report of the Leprosy Commission of the Marine Hospital Service, sent to the United States Senate by the Secretary of the Treasury on March 24th, it is stated that out of 278 cases of the disease now in this country, seven are in the city of New York, four in Brooklyn and three in Manhattan. While formerly lepers found in New York were isolated, at present no restrictions are placed upon them, as it is held by the health authorities that in this climate the disease has no contagious element.—*Boston Medical and Surgical Journal*.

The Open-Air Treatment of Tuberculosis.

Since the meeting of the British Congress on Tuberculosis there has been a general exploiting of the necessity of open-air treatment in this disease. It bids fair to become a fad, and as such to be prescribed in an indiscriminate fashion, which will sooner or later bring a valuable means of treating tuberculosis into undeserved discredit.

A few articles have appeared which have shown an understanding of the basic principles in the treatment of this disease and in the application of the open-air method to the indications. Others manifest overweening confidence in the method, thinking all that is necessary is to turn patients into the open air to have them get well.

One is reminded of the general discussion upon the cold-bath method of treating typhoid fever. Exploited as it was as a cure-all in this disease, and from being indiscriminately employed, it is now used with some definite idea of its limitations and some individualizing of the treatment. Even with a treatment so near a specific as quinine in malarial fever, it is still necessary to pre-cribe it with judgment in reference to its absorption, and with a dosage based upon individual indications.

In the open air treatment of tuberculosis, it is not sufficient that a patient be turned out-of-doors to live in a tent in order to have him recover. Indeed, tent life may be even more objectionable than living within doors, as ventilation of a tent in the cold season when the openings must be closed and the interior heated with a stove may be much poorer than in the average house. Much can be done in the home open-air treatment of tuberculosis, particularly in the rural districts and smaller towns. Most houses can be provided with a balcony or other suitable shelter which admits of the details being carried out with some degree of persistence. For the town dweller, the open-air treatment to be efficiently applied must be in a sanitarium or in a camp especially prepared for tuberculosis patients. The treatment must be under medical supervision and must be individualized.