

chronic course on Long Island than in the mountains. The histories, physical findings and subsequent course of the disease in a large number of patients leads me to believe this to be true. If this is so, it is a rather desirable thing. Many far advanced chronic cases enjoy fair health and are able to do a certain amount of work for years. The ages of the patients possibly indicate this also. 43 per cent of the patients admitted were over 35 years of age; 32 per cent. over 40; 13 per cent. over 50 and 4 per cent. over 60. One patient was over 80 years of age.

In conclusion I wish to emphasize the following points:

There is no specific climate for the treatment of tuberculosis.

Although many patients are greatly improved by a change of climate, the improvement can be attributed to the effect of the change, rather than to the virtues of the particular climate.

Proper care, which means proper rest, good food and open air, and competent medical supervision is of much greater importance than climate. Competent medical supervision includes proper medical and surgical treatment for symptoms and complications. It is probable that to these four well known and thoroughly proven essentials in the treatment of tuberculosis should be added heliotherapy, sunlight, either natural or artificial.

No patients acutely ill should be sent a long distance.

No patient with insufficient funds irrespective of his physical condition, should be sent to a tuberculosis resort, unless he can enter an institution. A patient with suffi-

cient funds should not be sent away unless he can and will place himself under proper medical supervision and follow instructions absolutely.

A change is indicated in a chronic case, which has reached the point where his condition remains stationary after a sufficient length of time, providing he can receive equally good care somewhere else.

Institutional treatment is preferable to "taking the cure" in a hotel or boarding house.

With proper treatment the outcome in any particular case of tuberculosis depends largely upon that very indefinite individual factor, namely, allergy or resistance. Not all patients are equally resistant to the disease or can build up sufficient resistance even under proper treatment. Unfortunately we have no method of accurately estimating the individual resistance and must depend upon the subsequent progress of the patient to learn whether or not he possesses sufficient resistance to overcome the disease. This makes prognosis uncertain.

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