

more than begun—much earnest work has yet to be done to secure a marked decrease in the death rate throughout the Dominion.

There is still much apathy shown when active measures for the suppression of the disease are adopted—lax enforcement renders them useless. More than one local medical health officer has reported: "We have an anti-spitting by-law, but it is never enforced." In another town where no measures have been outlined, the health officer writes: "Public interest in this question is dormant. It is a labor of Hercules to even try to arouse it. Our Board of Health takes no interest in tuberculous patients."

The work of prevention requires the co-operation of all the forces available. We must first deal with those suffering with the disease, for inasmuch as the disease is spread only from those having an open-tuberculosis, we must concede (leaving out of discussion here the communicability to man of bovine tuberculosis), that the disease would soon all but disappear could all who have an open tuberculosis be placed under proper discipline, and all sputa and other bacilli bearing discharges be destroyed.

This entails much work on the part of the physician who is attending the patient—full personal instructions must be given and these instructions must be carried out. Leaflets of instructions to patients are very useful, but personal instruction is more efficient.

For those patients who will not follow the directions given and are careless, special hospitals for detention are necessary, and such should be provided for such people as are wilfully unclean and whose habits are such that they are spreading disease about wherever they may be.

Sanatoriums are a necessity for the care of those who cannot be kept under close supervision at home or whose surroundings are not conducive to recovery, whether this be from unsanitary conditions, the presence of meddlesome relatives and friends, or the thousand and one petty things which prevent a patient following the necessary out-of-door life and observing the prescribed rest or exercise. More Sanatoriums are required throughout Canada, particularly for the poor, who are not in a position to go far from home.

Separate provision should be made for incipient and far-advanced cases.

Special dispensaries can do much for those who must continue at work, as in the case of the bread winner in a poor family. The dispensary physicians and nurses can see that his house is suitable, and can assist in arranging for out-of-door sleeping, can see that he is provided with all necessities and also be assured that he is careful of those about him. The dispensary staff too should examine at intervals all of the family, so that any infection may be discovered while still a closed tuberculosis.

Physicians in attendance upon all cases, whether poor or in good circumstances, should endeavor as far as possible to see that all the members of the family are carefully watched; particularly so in houses where the patient has been known to be careless, or where, as is not infrequently the case, he has been suffering with an open tuberculosis, the presence of which has not been suspected or recognized.

The members of tuberculous families should be given special instruction in hygienic living and be warned of the dangers of lowered vitality, whether due to disease, over-work, poor food, or vice.

The physician should be proficient in diagnosis and should endeavor to make diagnosis early, remembering that under sanatorium treatment 75% of incipient cases recover, of moderately advanced about 15% and of far-advanced cases barely 1%. To state that the physician is often careless is unpleasant writing, but again and again we meet such cases. An instance, such as the following, is unfortunately far from uncommon. A young man came to me for examination and treatment. I found far-advanced disease involving all of the left lung and half of the right, with well marked cavity formation in the left upper lobe. There was also intestinal tuberculosis. Sputum one ounce daily, teeming with tubercle bacilli and much elastic tissue present. I gave his mother a report with necessarily an opinion of hopeless prognosis. He is the only son and she a widow. She writes:—

"It is all so uncalled for. I have had him under medical treatment for five months and all along urged that he have the best attention, and if his lungs were in danger I would send him away from home if necessary. I have been exceedingly anxious for four months and wanted a consultation, but my physician assured me only a few days before my son left home that there was nothing wrong with the lungs. I was so anxious, however, that I sent the sputum to the Provincial Bacteriologist the next day on my own account, with the result that my worst fears were realized."

No comment is needed. In my work I see this too frequently.

Notification of all cases of tuberculosis is necessarily a part of efficient work in the crusade, and where there is a live earnest Board of Health, which will co-operate with the physicians, no time should be lost in enforcing compulsory notification.

Local associations can do much in assisting the authorities. They can carry on an educational campaign, disseminate knowledge concerning the methods to be adopted for the prevention of tuberculosis, assist in movements for the erection and maintenance of sanatoriums, special hospitals, dispensaries, etc.

We must not forget that every measure that makes for a higher standard of living is of value in the campaign against tuberculosis. We should see that our houses, our