

portance, while scarlet fever, diphtheria and even measles, may be conveyed long distances from one country to another. Some diseases of animals, as farcy and glanders in horses, for example, are communicable to man, and may be also so conveyed and in like manner.

The object of international sanitary regulations, then, is that every nation concerned or contracting shall use every means practicable and possible in order to prevent the development and extension, and the introduction, or conveyance from any one of the countries to another, of any such disease. To use such preventive means is an obligation which one country owes to another, just as one family in a community is under obligations to use every means possible to prevent the conveyance to another family of any infectious disease with which it may be afflicted. As Dr. Cabell, chairman of the National (U. S.) Board of Health, said at the Washington Convention, "it would, indeed, be a most desirable consummation if each civilized nation would assume the responsibility of preventing the transmission of its epidemics into other countries, since the end could be accomplished more certainly and with less obstruction to commerce by such means than by throwing upon other nations the burden of adopting costly methods of excluding such epidemics."

As before observed, the great superiority of the internal or domestic sanitary regulations in some countries, as compared with those of others, makes fair reciprocity almost impossible. Until a change is brought about in these last referred to, equal, mutual benefit could not be obtained. Hence difficulties and hesitations on the part of nations.

In reference to this question of mutual benefit and reciprocity, the delegate from

Spain, Dr. Cervera, at the Washington Convention, observed, "if we give to a nation the authority to visit our ships as they leave our ports, and if they give to us the same right, at first sight it looks like a perfect reciprocity, but it is only apparent. In Spain, for instance, we have a perfect sanitary organization. What reciprocity can exist between two countries where the one has a perfect sanitary organization and the other has none at all, or an imperfect one? A bill of health delivered by a physician who is at the head of the Board of Health of a port, deserves, of course, more consideration than another bill of health delivered by a person who is not a physician." This naturally leads to the

Second part of our subject, international sanitary regulations, as they relate to each country in itself.

There are means by which the development, outbreak and spread of infectious diseases may be more humanely and effectually prevented than can be accomplished by the most perfect foreign inspection of ships, or the most rigid quarantines. These are more perfect internal or national sanitary organizations, and the adoption and practical carrying out in every country of efficient domestic sanitary measures, such as have proved in some countries to be eminently successful and satisfactory—more perfect systems of drainage in cities and towns, and more complete methods for the removal of all waste organic matters therefrom, with abundant supplies of pure water, and systematic regulations for the immediate suppression and stamping out of chance outbreaks of epidemics. Much has already been accomplished by internal sanitary work in mitigating the ravages of cholera.

It is universally believed, however, that the carrying out of some international sani-