is, the necessity ok of ventilation occupations are ers, tailors and

of. In houses ost common. low vitality and of disease. Its of lessening the iced water, bad nt and worry of guard the body we should keep od-factory—the d fresh air, and to prevent and atorium treatf each patient ith a moderate e. This is the ill only show a

ontagion, there is a food. Good we have. It is the nutrition of prevention and tissue is kind. It is a tot only rich in milk, it should

e unfavourable

of their milk r meals just as as it is generilk. Another s often enough e milk to make means a great in easy prey to has the same

ooked upon as opinion among houses. It is ut it is almost blished, in all r this purpose, tht, good food pervision, can

t be admitted an unfit place ghting chance to the other patients, as they are exposed to the contagion and are in danger of contracting a new and fatal disease, instead of being cured of that for which they entered the hospital.

When I was a house physician to the Charity Hospital, New York, some years ago, a circumstance occurred, the force of which can now be understood. It was deemed wise by the governing powers of the hospital to put all cases of consumption in one ward, and as no precautions were taken except ordinary cleanliness as to infection, this ward was soon reeking with tubercle bacilli, so that treatment was as futile as an endeavour to stem the rising tide. One day when I was on duty in the distribution office, where the patients were allotted to the various wards, a poor woman whom I had directed should be sent to the ward I mention, looked up at me with an appealing glance and said: "Oh, doctor, do not send me to that ward; I have heard that no one ever comes out of it alive." For the poor, then, especially, sanatoria must be provided either by governments or by private charity or both. How we are to get them must be

left for further consideration.

During my stay in Berlin, I visited the sanatorium at Grabowsee, so that I might have a better idea of the practical management of such institutions, the requirements of which a description of this sanatorium will indicate. It is situated on a wooded hillside with a gentle incline, but only slightly above the level of the surrounding country. It has a southern aspect. The soil is dry and porous and the green sward is preserved as far as possible to avoid dust. It is also sheltered from severe winds. It is arranged on the pavilion plan, each pavilion containing eight beds. These are but sheds with large windows on each side. There were also open pavilions or covered verandahs for shelter in case of rain. An executive building contained offices, bath rooms, billiard room and weighing room. It was heated with hot water coils, and the patients' pavilions with an open fire. In two separate buildings were: in one the sterilizing room and laundry, and in the other the dining room and kitchen. The floors of the pavilions were covered with linoleum. Accommodation was provided for one hundred and sixty patients. As far as possible only those in the first stages of the disease were admitted. Every detail of treatment was carried out under medical supervision. The patients were obliged to live all the time in the open air, and about the lawns were scattered extension chairs in which the patients rested, being well wrapped up if the day was cold. A daily bath was given, in the beginning warm, but the temperature gradually lowered each day to a cold bath, as the patient improved. A very full diet was given with plenty of sterilized milk and a moderate quantity of wine or beer. There was more rest than exercise prescribed, but the amount of each was under the direction of the medical officer. It was considered a serious offence to expectorate upon or about floor or grounds. A violation of the rule was severely punished. Each patient was provided with a small wide mouthed dark glass bottle with a tight screw cap which he carried in his pocket as a receptacle for the sputum; this was sterilized as often as necessary.

This report is already too long, but I found it difficult to deal with the subject in a shorter space. I will conclude with the loope that the Dominion Government, in concert with provincial and municipal authorities, will see the pressing against tuberculosis as will stamp it out of Canada in a few years. In writing this report I have avoided using medical terms as far as possible so that the Government could, if it was thought well to do so, submit it to the sanitary authorities of districts in the country where public

opinion has not been aroused on the subject.

I have to acknowledge much kindness at the hands of Lord Strathcona and Mount. Royal, and also from Sir Francis Lascelles, the British Ambassador at Berlin.

All of which is respectfully submitted.

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