

I desire to mention the excellent results at the Sanatorium de Turban at Davos, where 40 per cent. of the cases were cured and 40 per cent. improved. The above results are extraordinarily favorable, if one keeps in mind the virulence of the disease, which only 40 years ago was considered incurable. The results at the Royal National Hospital, Ventnor, are also remarkably good when one considers that hardly one per cent. of the cases admitted were in the first stage of the disease; 17.14 per cent. of all the cases were cured, and 61.11 per cent. improved. Allow me to emphasize these excellent results. By referring to the first table you will see that they are as good as those obtained at Liberty and better than those obtained at Gravenhurst. Ventnor is a practical proof of what can be done by hospital treatment of tuberculosis. It differs essentially from the other English hospitals in advantages of climate, locality, and the structural arrangements, having been originally designed for the purpose of obtaining the utmost possible exposure to open air and sunshine, as a fundamental principle in the treatment. I feel confident that equally good results can be obtained from consumptive hospitals situated outside the limits of our Canadian cities, provided the hygienic-dietetic treatment be employed.

As you are doubtless aware, consumptive hospitals for the poor have existed for a long time in England. Among them are Brompton, founded in 1841, with 321 beds; Victoria Park, in 1848, with 164 beds; North London, in 1860, with 75 beds; The City Road Hospital, in 1873, with 75 beds; and the Royal National Hospital, Ventnor, with 138 beds. It is worthy of mention that to them is very largely due the remarkable decrease in deaths from phthisis which has taken place in England since a date corresponding to their establishment. Roughly speaking, the deaths from phthisis in England have decreased by one-half since the seventies. This fact is often mentioned by continental authors as being an indirect result of consumptive hospitals.

Allow me to carry this idea of establishing consumptive hospitals for the poor a little further. If, in addition to the hospitals situated outside the city limits, we could establish sanatoria in suitable climatic localities not too far removed from the centres of population, I see no reason why results should not be obtained similar to those of the most famous continental sanatoria.

Roughly speaking, the number of cures from almost all sanatoria is estimated at one-third the number of those treated, provided they remain a reasonable time, say from three to nine months. I do not think I go too far when I express the hope that the number of cures will be much larger if patients undergo methodical treatment while they are in the incipient stage of the disease, and that almost every person under the foregoing supposition has the prospect of cure.