

risks of exposure to infection. But looking at more recent experience, can this protection be considered so important a factor now that epidemics are so far apart and our health authorities, with the aid of emergency vaccination, can deal with them confidently and certainly when they arise? Such questions, of course, owe most of their importance to the purely artificial position brought about by legislation. Parliament has never attempted to prevent epidemic smallpox by vaccination. Had it done so the law would have required general and compulsory re-vaccination; or, if only a single vaccination could be insisted upon, it would at least have shifted the compulsory age to young adult life, as has often been proposed. Since the first Vaccination Act all official systems of vaccination have related, with greater or less efficiency, only to the vaccination of the infant, and have been determined quite as much by political as by medical or epidemiological considerations. So far as these systems have promoted vaccination they have consistently received support from medical opinion, and when regard is had to the many thousands of people who have owed their escape from attack by smallpox to their vaccination in infancy, and to the many others who owe to the same cause the fact that when attacked by smallpox they have not suffered severely or been seriously disfigured, medical action in the matter has been justified and fruitful for good. But, meanwhile, outbreaks of smallpox, when they occur, are dealt with by an increasingly efficient system applicable alike to those who have been vaccinated in infancy and to those who are unprotected. Epidemics are kept under by administrative measures which secure the prompt detection of cases and their removal to hospitals where they are surrounded by well-vaccinated persons who do not—it would be no exaggeration to say who cannot—contract smallpox, and are there kept till their infectiousness is over. Those who have been in contact with the cases before isolation are sought out, watched, and vaccinated wherever possible, any who develop smallpox being treated at the earliest possible moment in the same way as the first cases.

The system has steadily developed and many circumstances have combined to produce its continual improvement. The fact that smallpox hospitals have themselves been associated with the spread of smallpox when placed in populous neighborhoods has been recognized, and properly isolated sites are now chosen. The system of compulsory notification, the interchange of notifications between health officers, the telephone, the motor-car, and all that these imply, have made the tracing of contact and suspected cases