

hygienists concluded that a bona-fide disinfecting machine should be capable of raising steam to 248° F. Though the reasoning is correct, it has nevertheless resulted in restricting the progress of disinfection among the masses, and this is largely due to the great cost of disinfecting machines.

Recent studies have shown that the pneumococcus perishes at 113° F., the tricophyton at 122° , the bacillus of diphtheria at 136.2° , Koch's bacillus at 176° , that of cholera at 185° , and that of typhoid fever at 149° . Now, these are the microbes which are most dreaded, and yet they all perish at temperatures below that of boiling water. It seems, therefore, to be a blunder to spend a large sum of money in procuring a disinfector, warranted to kill Davaine's bacteria, at 248° F.; boiling water is sufficient to kill all the most dangerous microbial enemies of the human race, and it is easily procurable. What can be easier than to steep for an hour or two in boiling water clothing, linen, utensils of any kind, or, in fact, anything which may serve as a vehicle for contagia? Is it not rather illogical to wait for fifteen or twenty days, until a case of small-pox, scarlatina or diphtheria has run through its different stages, and then send to the town disinfector a miscellaneous collection of household goods, if during all that time they have been exposed to contagion, passing from hand to hand, used by different persons, frequently taken out of doors, used, in fact, in such a way as to scatter on every side the germs with which they are covered? Contagia should be destroyed as soon as possible; disinfection ought to operate without delays, and therefore, practically, it is most readily accomplished by the use of boiling water. Even in a city, people cannot send several times a day to the disinfector the sputa of a consumptive or a diphtheritic patient, the linen of a small-pox patient, or the

spoons, cups, etc., which they use; but it is quite easy to keep boiling water ready so that disinfection can be performed easily, surely, quickly and as often as may be required.

In addition to this, a patient with a contagious disease should be removed at the earliest opportunity to a room as bare as possible of furniture or anything else requiring subsequent disinfection. Proof that this precaution has been neglected should justify a local Board of Health in refusing indemnification to parties, who claim it for injury or depreciation of property, owing to exposure to contagion. In general, however, we favour the principle of indemnification for loss or depreciation of household goods from contagious diseases, because, if it is admitted, everybody will submit to the rules of disinfection without murmuring.

Disinfection is naturally divided into two parts: 1. the disinfection of the place where the patient has been, and 2, disinfection of all that has been in contact with the patient.

(a) *Place*.—The floor, wood-work, walls and ceiling of the room should be washed with a solution of corrosive sublimate (a tablet of 7.3 grains added to 16 ounces of water is probably the most effective, practical plan). All the wood-work should then be scrubbed with hot soapsuds. The ceiling and walls should afterwards be calsomined or repapered, the old paper being stripped off. The room should be aired for several days. Sulphur fumigation is unnecessary.

(b) *Articles*.—Articles of wood, leather or porcelain should be washed several times in the above-mentioned corrosive sublimate solution.

Soiled clothing, underclothing, quilt covers, bed linen, blankets, pillow-covers, mattress-covers, etc., should be immersed in boiling water for an hour. The contents of mattresses, if of small value, should be burned. Carpets, hangings,