

that the term "cure" is a more or less elastic one on account of the personal equation and other factors which enter into the various estimates of results obtained, there is no reason to suppose that this is the case to any greater extent in tuberculosis than in any other disease. The fact remains that the curability of tuberculosis is a part of the common knowledge of the most prominent physicians of the day, and in this connection a few opinions may be quoted:—

Dr. G. Cornet, of Berlin, says:—"Of the possibility of a cure there can be no doubt."

Dr. Osler says, in connection with the subject of Tuberculosis:—"Not all persons in whose bodies the bacilli gain a foothold present marked signs of tuberculosis. Infection does not necessarily mean the establishment of a progressive and fatal disease. In my autopsies, excluding cases dead of pulmonary phthisis, 7.5 per cent. presented tuberculous lesions of the lungs—a low percentage in comparison with the records.

"In many cases a natural or spontaneous cure is effected, for the conditions favorable to the development of the disease are not present—in other words the tissue-soil is unfavorable. Apart from this group, a

majority of which probably do not show any sign of disease, there may be spontaneous arrest after the symptoms have become decided."

Dr. Lawrence F. Flick, Medical Director of the Henry Phipps Institute, says, in the report referred to elsewhere:—"Tuberculosis is quite amenable to treatment. Nearly all cases can be benefitted for a time, at least, and many can be cured. The curability of the disease depends upon the stage and somewhat on the chronicity. Even advanced cases, however, often can be benefitted. It is indeed remarkable how much even the most advanced cases improve for a time when put at rest in the open air and properly fed."

Similar statements from other authorities of recognized standing might be given in great number. Suffice it to say, that while it is the hope and expectation of the medical profession that further advances in medical science may, in the near future, discover improved methods of treatment for this most common disease, that hope and expectation but serves to emphasize the belief now held that, as it is communicable and preventable, so also is it curable.

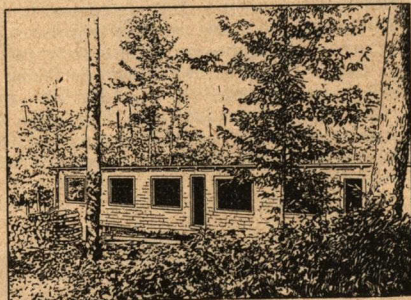
## SANATORIA NOTES

The Manitoba government have agreed to grant to the trustees of the proposed Manitoba Sanatorium the sum of \$25,000, when the Association shall have raised \$50,000.

At the Muskoka Cottage Sanatorium seventy patients are in residence, representing almost every province in the Dominion, and not a few from different parts of the United States.

The new buildings being erected on the property of the Toronto Free Hospital for Consumptives, and which will constitute a new sanatorium for pay patients in the advanced stages of the disease, are being well pushed forward to completion.

In the Nova Scotia Provincial Sanatorium, at Kentville, there is a uniform charge of five dollars per week, this being less than one-half the expense to the government. A similar rule is followed in the State Sanatorium at Rutland, Mass., and again in the more recently erected New York State Sanatorium at Ray Brook, in the Adirondacks, N. Y. This is different to the practice of the Muskoka Free Hospital for Consumptives and the Toronto Free Hospital for Consumptives, where it can be said that no applicant has ever been refused admission because of his or her inability to pay. The trustees carry the large deficit on maintenance account, trusting to a philanthropic public to cover the amount.



VIEW OF HENNERY AT THE MUSKOKA FREE HOSPITAL FOR CONSUMPTIVES

"I shall pass through this world but once. Any good thing, therefore, that I can do, or any kindness that I can show to any human being, LET ME DO IT NOW. LET ME NOT DEFER IT OR NEGLECT IT, FOR I SHALL NOT PASS THIS WAY AGAIN."

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