

half of the public health of the Dominion. From a pretty general canvass of members, it may be stated, it appeared that had not Dr. Roome been asked to withdraw his motion, it would have been carried by a good and probably a very large majority. There appeared indeed to be hardly any opposition to the proposal, members nearly all agreeing, it appears, that some such action was desirable; while Sir John concludes his remarks with the words, "we cannot ignore" the subject.

ON THE REGISTRATION OF DEATHS, Dr. Beaumont Small, of Ottawa, in a paper written for the Brockville meeting of health officers, said: In this paper I wish simply to direct the attention of the Association to the important subject of the registration of the causes of death in this Province. We are now becoming interested in, and commencing to study the statistics furnished by our governments, particularly the mortuary returns of the Dominion Government and the report of the Registrar-General of Ontario on the births, marriages and deaths. Both of these are arranged in a very creditable manner, and provide us with a fund of information which should prove of inestimable value; unfortunately, however, there is a prevailing suspicion that the figures are not trustworthy, that there is a want of care in their collection, and an absence of that accuracy which is so essential to make them of service. The latter of these reports being confined to this Province, this Association cannot do better than investigate, and if found to be defective the fact should be made public at once, and the attention of the authorities directed to the source of the error.

THE SECTION of the Act that relates to the physician was then read by Dr. Small and he continued: From this it will be seen that our duty is very clearly defined, and it is so simple and reasonable that we can have no proper excuse to offer, if it is not observed. Any neglect is the more culpable, when we consider that it is upon our own efforts that the correctness or incorrectness of the returns depend. The question then is, do physicians obtain the blank forms, and regularly furnish certificates of death, or if not, how does the Registrar in preparing his returns, obtain the causes of the deaths that are registered? In the city of Ot-

tawa I regret to say, the returns are collected in such a manner, that as a record of the cause of death, they are of little value. It is only on rare occasions that a physician gives a certificate of death. . . . All the information the Registrar receives is that obtained by the caretaker of the cemetery, from the friends at the time of burial. It is easy to realize how untrustworthy such facts must be.

THE VALUE of infectious disease notification is well illustrated in the following statistics by Dr. Cameron, medical officer of Leeds and Huddersfield, Scotland. In Huddersfield, the deaths from the four diseases, small-pox, scarlet fever, diphtheria and fever, in 1874 to 1876, before notification was compulsory, was per 1,000,000 respectively 23, 940, 123 and 357. In 1886 to 1888, when notification was compulsory, the deaths were 7, 337, 250 and 123, in all cases, except diphtheria, showing a marked reduction. The death rate from measles and whooping-cough, which were not notified were much increased. The following table, given by Dr. Cameron, showing the deaths per 1,000,000 for the eight years previous to notification, and the twelve years after, speaks for itself:—

	Small-pox.	Measles.	Scarlet Fever.	Diarrhea.
1869-76 . . .	116	330	925	640
1877-88 . . .	4	474	394	243
P.c. decrease, 96.9	57.4	62.0
" increase, ...	43.6	43.8

SOME YEARS AGO we received censure from several English medical and sanitary journals (Canadian and United States Journals are more liberal) because in an article in this JOURNAL relative to the value of vaccination, we strongly urged the importance of strict isolation as a prophylactic, and in so doing rather belittled, though unintentionally, the value of vaccination. In January last, a paper on the "Working of the Notification of Infectious Diseases Act" was read before the Glasgow Medico-Chirurgical Society by P. Caldwell Smith, M.A., M.D., D.P.H. Camb., who is Lecturer on Hygiene, Western Medical School, Glasgow, and Examiner in the Sanitary Association of Scotland, spoke as follows:—Take the case of Leicester. It is notorious that this town is the head quarters of anti-vaccination, and that a large proportion of the population are unvaccinated. Yet, in 1888, according to Dr. Tomkins, small-pox was