

danger of inoculation with dust from rooms that have been occupied by consumptives may be obviated if the windows are regularly opened. The antiseptic properties of fresh air are very great, and if consumptives are taught to open the windows they will help themselves and lessen the danger of infecting healthy people with their disease. Probably the best way of disinfecting apartments is by exposing them to the sun, after a thorough cleaning; but where this method is impracticable formaldehyde gas disinfection or some similar method may be used. It is my pleasing duty to observe that Dr. Hutchinson, Medical Health Officer for London, has referred in his last report to the duties and responsibilities resting on citizens and municipalities in opposing the spread of consumption. His advice is timely, and if his recommendations are put into practice there will be a considerable decrease in the prevalence of consumption in this city. As Dr. Hutchinson says, "In London during 1897, out of 472 deaths 99 were from consumption, and 54 from diphtheria, scarlet fever and typhoid fever, so that about twice as many died in this city from consumption as from all other infectious diseases. Two deaths in every nine were from consumption."

There are several different opinions as to the money value of a human life. The State Legislature of Illinois places it at \$5,000. Assuming that a valuation of \$1,000 is correct, the loss of 99 lives per annum from consumption in this city means a direct money loss of \$99,000, and an indirect loss of a very large sum besides. The financial method of appreciating the value of sanitary methods and legislation naturally appeals to every intellect, and moreover, places the loss resulting from preventable diseases in a peculiarly effective way. That all must die at some time is a truism; but statistics show that, with proper precautions, the evil day may be delayed. Lives now sacrificed to contagious disease might be preserved, if not to the scriptural "threescore and ten years," at least for many years of useful and productive activity. In 1896, in a report to the Provincial Board of Health on the hygiene of the Canadian railways, I referred at considerable length to the upholstering of seats in railway carriages, and also to the current methods of cleaning floors, seats, etc., in carriages. Preference was expressed for seats trimmed with leather instead of the ordinary well-stuffed seat covered with plush, because plush is retentive of dust, and the dust of railway carriages is rich in bacteria. Quotations were made from a report of bacteriological work done in Germany by Drs. Petri, Kolb and Freidrich, who examined specimens of dust taken from railway carriages, and found numerous pathogenic bacteria. In nearly half the cases there was obvious evidence that the passengers had expectorated on the floors of the carriages, and the presence of the Koch bacillus was proved. In fourth-class carriages, which were unclean and rarely washed, the number of bacteria in dust swept up from one square metre of the floor surface was estimated at 12,624; in the