

But in addition to these duties and these reports made to the district authority they have certain duties towards the central authority, the Local Government Board, which indeed contributes to their salaries. The Medical Officer of Health is required to inform himself as far as possible of all influences affecting the health of the district, and as to the cause, origin and distribution of disease in the district, and means of removal or modification of the same; he is required to make a systematic inspection of the district at certain periods for these purposes; he is to be prepared to advise the central authority with reference to the framing of by-laws and regulations to meet special conditions. On hearing of the outbreak of an epidemic of disease it is his duty to visit the spot and enquire into the circumstances. To go further into his duties, he has to report in writing to the central authority on the outbreak of epidemic diseases, and to prepare an annual report each December of the sanitary state of the district in general, with tables of sickness, mortality, etc., etc.

The point that I wish here to make is that the English law recognizes and has taken steps to meet the fact that the Medical Officer of Health owes a double allegiance: while he is the servant of the local sanitary authority he is at the same time an officer of the federal authority, and the only way to obtain a satisfactory Health Service in the United States is by recognition of the same fact.

The same necessity which has compelled matters of quarantine to be under the federal control compels the Government of the United States to have cognizance of epidemic outbreaks throughout the States for the protection of the people of the United States as a whole. Not only must immediate knowledge of such outbreaks be forwarded to Washington in order to ensure a direct common action, but the Federal Government must possess the ultimate (though not necessarily the immediate) power of stepping in and establishing regulations for the stamping out of an outbreak in any State. To the same end it follows that it must possess a general knowledge of the health conditions of each individual State and district in that State, and this it can only gain systematically by direct reports upon these matters from the several districts. Along the same lines similar direct reports are requisite bearing upon birth and marriage rates, mortality and morbidity.

Now the experts capable of affording this information, which should be demanded by the central federal authorities from each district, are the medical officers of health of those districts. For the public weal it would be absurd to have two different sets of experts each endowed with the right to make personal enquiries regarding epidemic disease from house to house, and armed with powers to enforce regulations