

As even cases of suspicious nature are kept until we are satisfied that they are harmless, it is becoming understood that, in the interest of all, such cases had better be kept on the other side until their condition is ascertained; it is the best way to avoid conflict of opinion. The consequence is that lately, a number of ships carrying several hundreds of passengers did not leave a single patient in the hospital. It is evident that the law, such as interpreted and applied, is producing the desired results.

I recently visited some of the Montreal dispensaries with a view to ascertain from the physicians in charge if they could appreciate in their practice the effect of this inspection such as carried out since the last couple of years.

At the Notre Dame Hospital, Dr. St. Dennis told me that until about a year ago they used to see an average of about twenty new patients every week, while now they see only an occasional old case. I received practically the same answer at the Hotel Dieu, from Dr. Lesalle. At the Montreal General, Dr. Sterling had only one old case to show, and he recognized that the law, as applied, seems to have cut short the importation of trachomatous immigrants. Dr. Sterling added that until recent years it was appalling to see at what a rate the shipping companies were bringing these people into the country.

The experience of Dr. Boulet of the Ophthalmic Institute, was corroborative of this statement.

At the Royal Victoria Hospital, I am told, they have had seven new cases, since the first of the year, out of 557 cases of diseases of the eye; but I do not know how this compares with the previous years.

In Quebec, at the Jeffrey Hale, where they used to see by far the largest number of trachomatous patients—as many as fifty a day—they report that they did not have six cases during the last year. At the Hotel Dieu, ten cases only are recorded during the last four years.

On the other hand, Dr. Prowse, of Winnipeg, informs me that the Winnipeg and St. Boniface Hospitals seem to have more than their share yet of trachomatous patients, but I do not suppose those cases are of very recent importation.

To the question often asked, "What line of treatment do we follow in dealing with trachoma?" our answer has been, "There is no universal method apart from strict hygiene, antiseptics and wholesome food," and there cannot be one, on account of the varied manifestations of the disease. The leading maxim must be a careful and conscientious individualization.

On their arrival at the hospitals, all patients are submitted