

the disease spread. Now, if we do anything, we quarantine all, sick and well, by closing the schools. An active health department should at all times have as perfect knowledge of the location of cases of diseases which endanger the people under its protection as the fire department has of the buildings which are burning, and thus endangering the property under its protection. With such knowledge as this the health department could furnish the teacher of every school in the city with a list of all families in which there was a person sick with a communicable disease, and, if necessary, an agent of the health department, or some other qualified person, could act as sentry at each school and keep out persons liable to communicate disease. As an additional precaution, even where there has been no known infection, all articles likely to convey disease into the school could be easily disinfected, if it were only a custom to do so and provision were made for such disinfection. It would be easy to have a small room at every school-house where the outer wearing apparel, etc., could be disinfected and aired while the wearer was in school, instead of having, as is now so commonly the case, the clothing of all closely packed in an unventilated closet.

#### A SANITARY INSPECTOR OF SCHOOLS

Is needed in order to secure the best results. He should be one of the executive officers of the Board of Health, and should act with reference to general cleanliness, and especially with reference to the spread of communicable diseases. In some places it is customary to permit attendance at schools from families where communicable dis-

eases exist, and of convalescents from such diseases, on the certificate of the family physician that it is proper and safe. Sometimes the time which has elapsed since the sickness is made to determine the return to school. I think this should not be permitted, but that the Board of Health, the health officer, or a sanitary inspector of schools, should control this whole subject, and that no convalescent from diphtheria, scarlet fever, etc., should be allowed to return to school except after all his clothing has been thoroughly disinfected; and this without regard to the time which has elapsed since recovery, if the time is less than a year.

One great obstacle to progress in dealing with preventable disease in the schools, and out of the schools, is the inertia of established usages of the people and of local boards of health. In many places it has long been the custom for the successful political party to appoint a board of health, and to deny it money and other means for active work; doctors and others have accepted the situation and gone through a certain routine, which often has begun and ended with the abatement of a few nuisances, the making of a report of such feeble efforts, and then giving place to another board composed of new men from the same or from the opposite political party, which repeats the same old story. For any effective work for the prevention of diphtheria in the schools, indeed for any effective public health work, it seems essential to have a new system of selecting local boards of health, and a new system of supplying them with the necessary money to carry on their work. Permit me to suggest a plan for