

\$600 on all homes. One of the first essentials of health is a comfortable dwelling place—a home, wherein a man and his family can feel free and unencumbered. There can be no great sanitary progress, no great general improvement in the public health in cities and towns until there be less overcrowding, better ventilation and better means of disposal of household and personal waste matters. There is moreover, much truth in these words of Dr. Carpenter: "There is an intimate relation between the sanitary state of our bread-winners and their families and our political system." In England associations have provided model tenement houses for artisans and laborers, which at a very low rent have returned fair interest on investments. There is no reason why these people should not join and provide means themselves for the construction of cottage homes (or even tenements, well constructed). As we wrote in this JOURNAL a year ago: "One square mile of land would give ten thousand families one-twentieth of an acre each and allow for streets. With an average of five in a family this would accommodate fifty thousand souls. Five square miles would provide a twentieth of an acre plot for each family of a quarter of a million of a population. And such allotment, besides giving room for a cottage (or a double cottage on two allotments) would by cultivation take in all refuse matters—kitchen slops, excreta, etc.; and so the sewage difficulty would be overcome. With the present and improving facilities for conveying large numbers of people, the carrying of fifty thousand men a few miles out of a city would not be an insurmountable difficulty." And then to exempt such homes from taxes and in the case of individual homes, from seizure for the payment of debt, would be a wise thing to do; this last would at least tend strongly to prevent debts being incurred. We would urge strongly that agitation and effort be continued until both these objects above alluded to be generally attained.

OVER-CROWDING.—Dr. Vivian Poore, of London, Eng., argues that the greatest of all sanitary evils is overcrowding, and that the professional sanitarian would scarcely be needed if it were not for the fatal tendency of populations to concentrate in towns. The science of sanitation, he says, "is practically the science which enables persons to live in crowds with the least

amount of damage to themselves; and we must not lose sight of the fact that big schemes of water-supply and sewerage tend indirectly to cause a concentration of population in itself most undesirable." While there is much truth in this, it is plain that if there were no overcrowding or concentrating in towns, the ventilation of dwellings, the proper disposal of excreta and other waste matters, dietetics and other important essentials of life would require much attention, even in rural districts.

ON "PREVENTION OF EMERGENCIES," Dr. R. S. F. Perry writes thus sensibly: Numerous works have been written on "what to do in emergencies," "first aid to the injured," and kindred subjects, all of the same general tenor. As yet, so far as I know, no one has ever put forth a work on the prevention of emergencies. Of course, there are many emergencies which cannot be prevented, but with judicious care some of them can. The frequent suits brought against corporations for damages following some avoidable accident shows the necessity from a financial view, of studying the best methods of preventing such emergencies. The sufferings of the patient justify the study from a humane point of view. Occasionally a poisoning case occurs which is due to carelessness, or to a mistake in compounding medicines. There never should exist in the household the possibility of a case of poisoning from the careless handling of drugs. Fractured bones and dislocated joints are a frequent source of expense in winter when the streets are covered with ice and the pavements are slippery, and they are apt to occur in summer when the banana-skin lurks about seeking to cast down pride.

AN IMPORTANT RESOLUTION was passed at the last quarterly meeting of the State Board of Health of Tennessee as follows: That this Board repeat its resolutions of April 24, 1888, in regard to a National Bureau of Health, which is substantially that the Federal Congress established a National Bureau of Health to prevent the introduction of epidemic diseases into this country by maritime quarantine, and the spread of such diseases from one state to another, should they be introduced. Also, that this Board now calls upon other State and local Boards to co-operate with it through their representatives in Congress to enact necessary laws to this end. We italicise a portion which is applicable to Federated Canada and the provinces.