

and in the care of sputum has had its marked influence in assisting to lower the death rate from tuberculosis in Ontario.

No brighter, cheerier wards are to be found anywhere for the care of pulmonary cases, whether those of the Cottage Sanatorium, where each patient has his own room with its transoms, open windows, and hardwood floors, or those of the Free Hospital, with from two to eight beds in each, large, airy and flooded with sunshine.

Every visitor to these institutions expresses himself as surprised at the extent of the buildings, their equipment and surroundings being quite beyond all expectations. There is a largeness about them unsuspected, and with their brightness, sur-



ADMINISTRATION BUILDING, MUSKOKA COTTAGE SANATORIUM.

rounded by beautiful park land and situated on the shores of Lake Muskoka, they seem placed in an ideal spot.

For statistical purposes patients are classified on admission as incipient, advanced, or far advanced, according to extent and character of the lesion; on discharge, as apparently cured, disease arrested, much improved, unimproved (stationary and failed).

The following charts, with a short explanatory text, show graphically the results of treatment. The results are not what *may* be accomplished, but what *has been* accomplished. A large proportion of patients, when their disease is well under arrest, wish to leave, to carry out the out-of-door life at home, and when feeling perfectly well, though cough is still present, this is quite natural, considering the long time necessary in the average case to secure apparent cure. Many of those classified with disease