

sufficient to produce entero-colitis is, however, obvious. In elevated localities in the country there may be intense and long-continued heat, and yet in such places intestinal inflammation of infants is not common. It is no doubt the noxious exhalations from various sources with which the atmosphere is loaded, as a consequence of the heat, which render the disease so prevalent in certain localities in the summer months. The exact character of these exhalations or vapors is not fully known, but the following fact is clearly established by many observations. Enterocolitis prevails mostly on low grounds.' Experience and observation concur in stating that, when children suffering from diarrhoea are removed from malarious miasmatic districts to elevated spots, they rapidly recover. One physician goes so far as to suggest that a sanatorium should be built on an elevated site outside the town of Boston, and that all children under one year of age should be sent there from June till the end of September.'

It appears it is not the dampness of soil, *per se*, which causes the disease, but the evaporation of moisture containing low forms of life, and their dissemination in the air; which condition is of course accompanied by a fall in the subsoil water. The heat favors rapid evaporation and evolution of these low forms of animal or vegetable life—different forms of bacteria.

Dr. Parkes observes that dampness of soil affects health 'by aiding the evolution of organic emanations.' The decomposition which goes on in a soil is due to four factors, viz., presence of decomposable organic matters (animal or vegetable), heat, air, and moisture; these emanations are at present only known by their effect, they may be mere chemical agencies, but more probably they are low forms of life which grow and propagate in these conditions; at all events, moisture appears to be an essential (though not the only essential) element in their production.

The death-rate in Toronto in 1876 was exceedingly high, especially among young children, and from diseases of the alimentary canal, such as diarrhoea and cholera infantum. A good deal of rain had fallen during the first half of the previous month, July, and some during the second half of this month, but none fell in August. It was an unusually dry month, and the temperature was high—conditions most favorable to the rapid evolution of organic emanations. In such conditions the level of the subsoil water would be reduced to the lowest point, exposing a series of decomposing foci; and the large amount of evaporation caused by the heat would be highly favorable to the diffusion of these organic emanations. The highest point in the mortality was reached in the second week in August, at a time when the evaporation would be greatest.

In the London *Lancet* for December is a very excellent paper on this subject by William Johnston, M. D., health officer, Leicester Borough, from which we give the following extracts:—

Much speculation at present exists with regard to the causes of this annually recurring and universally distributed epidemic. Many