

If one can be satisfied that the handlers of bread are non-tuberculous, that they are not in contact with any communicable disease, that they are always free from any venereal disease, cleanly, scrupulous in their private hygiene, all danger could be considered as reduced to the minimum and the sanitary handling of bread a mere bugbear. This, however, cannot be guaranteed. Therefore, it must be worth while when so much is being done for the prevention of disease through contaminated food stuffs that the most universal of all be properly protected.

Each loaf should be completely wrapped, bagged or boxed. Unwrapped bread carries countless bacteria; wrapped bread, few.

It is the plain duty of health officers to see that all bread is properly handled.

Brill's disease, the new name for typhus fever, health officers and physicians should be on the look out for, as it has apparently been epidemic in many places of the United States, and the Chicago Health Department has recently issued a warning to physicians to be on their guard.

This disease, the old famine or ship fever, typhus, is said to be of a mild type, and because it has been investigated and reported upon by Dr. V. E. Brill, of New York, carries his name. He has observed 255 cases in his vicinity without a single death.

Being transmitted by the body louse, the disease necessarily appears amongst the poorer classes, unlike typhoid which is no respecter of the rich or the poor.

The typhus virus is extracellular and free in the circulating plasma; while the serum of virulent typhus blood is constantly infective.

The onset of the disease is sudden with chill or chilly sensations, body pains, increasing headache, the temperature reaching its maximum on the third day. Here it remains between 103 and 104, sometimes as high as 106, lasting for 12 to 14 days, falling mostly by crisis.

On the 5th or 6th day a maculo-papular rash appears, dull red in color, irregular in outline, usually ovoid, 2 to 4 m.m. in diameter. It is erythematous in character.

The rash appears on the extremities and trunk, rarely on the palms and soles. The eruption is permanent until the end of the disease.

With defervescence, the spots fade rapidly, leaving brownish-yellow stains often gone in 24 hours.