

EDITOR'S SPECIAL DEPARTMENT.

PUBLIC OR GOVERNMENT AID FOR POOR CONSUMPTIVES.

Already on more than one occasion we have referred to this important subject. Thousands of poor persons die in Canada every year from consumption, who, if they were timely and properly treated could be cured and would probably live on to a good age as useful members of society, but who have not the means to provide the proper timely treatment. Here is a wide and inviting field for the philanthropic and toward an object for which we think Government aid, better probably Provincial Government aid, should be liberally "voted." There are asylums for the insane, and asylums are proposed for inebriates. There are institutions for orphans, for young infants, for imbeciles and idiots, and the dumb and the blind and the deaf, for all sorts of surgical cases, for the more especially infectious diseases, and all other diseases, but not a place to which a consumptive can be taken with a good prospect of recovery or a cure; not a place specially adapted or at all fitted in any way for such cases. True, general hospitals are open to all such cases, but general hospitals are about the last places to which a consumptive should be taken, as all physicians will admit. Consumption is a special and somewhat peculiar disease, and requires a more special treatment than almost any other disease; moreover, it adds more than any other cause of death to the death-roll, and the very want of the comforts, and perhaps even of what are termed the luxuries, of life, acts as a cause of the disease and adds largely to the number of its victims. There are in Ontario alone not less than 4,000 deaths from this disease every year, nearly all of men and women or young people in their teens just coming into manhood or womanhood. Probably one-third, perhaps one-half, of these are not so circumstanced as to be able to secure proper treatment could it be at all conveniently obtained; while the remainder, however able to pay for the best treatment, can hardly obtain it in Ontario. True, a few intelligent patients, especially in the early stage of the disease, who have comfortable homes in a healthy locality, and who will probably follow strictly the advice of their physician, may, and occasionally do recover. But it is not likely as many as ten in a thousand do so. Change to a warmer climate is not now much to be relied upon; but rather, out-a-door treatment in the climate to which the

subject of the disease has already become accustomed. Then they may recover in a large proportion of cases. On the continent of Europe, as Dr. Daremberg writes, in the *Journal des Debats*, "While medical men in general send their phthisical patients to warm climates—Mentone, Cannes, Algiers, Madeira, etc., the directors of the institutions here expose theirs to the vicissitudes of the season. The patients leave their rooms at eight o'clock in the morning, and after partaking of a light breakfast are carried (for they must not walk) down into the garden, and placed in a reclining posture under galleries surrounding a park, or in open kiosks. They are covered with blankets, and there they lie, winter or summer, whether it rains, hails, or snows, until he evening, five o'clock in winter, and eight or nine o'clock in summer. Proper shelter is afforded in time of rain or great wind. When a patient comes to the establishment having high fever, he is watched closely for a few days in his room. The window is kept open night and day, and finally he joins the rest below. Nothing is more curious than the sight of over a hundred patients camping out under the galleries covered with their blankets. Short walks are taken by those who are the strongest." Recently at the New York Academy of Medicine, Dr. Paul H. Kretzschmar read, in the form of a paper, "An Appeal for the Establishment of an Institution for the Rational Treatment of Pulmonary Consumption," in which he set forth the special benefits of out-a-door, pure air treatment, to the exclusion of medicine. We have no doubt whatever that if there were a good institution of this kind established in some pine-wooded district in central or northern Ontario, say one or two hundred miles northward of Toronto, to which all phthisical patients could be sent, whether able to pay or not, with special provision for those able to pay, that many hundreds of lives might be saved to the province every year which now fall victims to this very common and most fatal disease.

TWO VERY IMPORTANT MOVEMENTS.

One very important movement is that taken by a labor organization of Montreal and we believe also of Toronto, for building homes for artisans and laborers; and another good movement is that advocated by some papers, for legislation giving an exemption to the value of