

discussion of this particular subject, I have the mind "even of a weaned child."

The importance of the subject need scarcely be insisted upon before an audience like this, to whom the preventability of the "Slaughter of the Innocents" caused by diarrhoeal disorders is coming to be known—I have pleasure in presenting to you the following tables kindly prepared for me by Dr. D. McGillivray from statistics placed at my disposal by Dr. P. H. Bryce, of the Provincial Board of Health, to both of whom my thanks are due. These tables have reference to the city of Toronto and the Province of Ontario—and constitute a powerful argument for an educational campaign by this Association against public ignorance in the matter of Infant Feeding. Yet even among ourselves it may be well to look for the beam in our own eyes. I was struck recently by the forceful character of some of the remarks of Mr. Marmaduke Shield in a lecture given in St. George's Hospital, in London, "On the Management of Some Cases of So-Called Simple Fracture." After expressing surprise and regret at the little importance attached by students and "especially," he says, "junior practitioners" to the study of these common accidents, he goes on, with, I fear we must admit, great truth, to single out this very disorder, as follows:—

"It is the same in medicine; obscure maladies, which usually terminate in pathological investigation and speculative methods of treatment, fascinate the modern student more than the treatment of pneumonia and *Infantile Diarrhœa*. All must fly before they can swim. I regret to say that one cannot excuse teachers and examiners from complicity in fostering this hollow and foolish tendency in modern clinical education. It is most detrimental to after success in practice and reputation."

After undertaking the preparation of a tabulated statement of the incidence of *Infantile Diarrhœas* I found that only for the past two years has a satisfactory method been in vogue in the Registrar General's Office. The Bertillon classification of diseases now adopted is very satisfactory, but previously to 1897 *Cholera Infantum*, *Diarrhœa Acuta* and *Dysentery Acuta* were so mixed up that absolutely accurate statistics cannot be compiled for my purpose. The accompanying tables will clearly show, however, (1) The incidence of the disease by months, July and August, having an especially bad pre-eminence; (2) The enormous preponderance of deaths from *Infantile Diarrhœa* before the end of the first year, the remarkable falling off in the second year, and the still more marked "zone of safety" upon which the child enters with the third year, so far as diarrhœas are concerned.

Taking the figures for 1897 for Toronto, as a basis—it will be seen that 31.23 per cent. of all deaths in Toronto occur under one year, and