

come under my observation within sight of the Institution. By promptly vaccinating every person connected with the Institution directly or indirectly, the introduction into our midst of this terrible disease was effectually prevented.

At the re-opening of the Institute the present term, one of our old pupils returned to us with febrile symptoms, which in a few days developed a true typhoid character. His home is at Port Colborne—a highly malarial region and the concentrated miasm no doubt acted as a predisposing cause of his disease while the exciting cause may be traced to an accidental tumble from a wharf into the water along with a blind companion, whom he rescued from drowning by a most heroic effort. In this case every precaution has been taken to prevent the spread of the fever by a thorough use of disinfectants to destroy the germs of the disease by burying the dejections of the patient in dry earth a safe distance away, and by isolating the disease as far as practicable. The fever has completed a typical course of typhoid, and at the present writing convalescence is fairly established with every prospect of good recovery. This is the first case of illness of a zymotic origin which has occurred in the Institution, and it is most gratifying to know the poison was not contracted within our precincts.

It is my duty to record the one death which has taken place during the year in the Institution, of F. Irwin, of London, who suffered an attack of pneumonia in January last. He was very deficient physically and mentally, and it was quite apparent in the first stage of the disease from the extremely frequent and flickering pulse and other grave symptoms, that the case must have a fatal termination. Notice to this effect was accordingly sent to his parents who had the mournful satisfaction of waiting upon him to the closing scene. Pneumonia as a cause of death stands near the first in mortality tables, and if my own limited experience is a criterion from which to judge, it is especially fatal to the blind.

I may here remark as a curious fact, that there has never been a death on the female side of the house since the Institution was founded, and the circumstance, if it proves anything, may tend to show how much there is in individual hygiene, the gentler as compared with the rougher sex, being naturally much less exposed to the rude shocks and fierce elements of our every-day life.

The class of eye-diseases has largely increased in number and importance, and demands daily a large share of our time and attention. A large proportion of the number are suffering from that common chronic affection of the eyes known as granular lids, into the treatment of which the virtue of patience and perseverance largely enters. In these cases, it is well known that after apparent cure takes place, relapses frequently recur, and it is a great advantage to have such persons under continual observation, that the first signs of returning disease may be promptly met by appropriate treatment.

It has been the ambition of the Principal and myself to make the Institution a model in respect to its sanitary condition, and considering the obstacles encountered, our success has been encouraging.

Certain representations have been made in my previous reports, as to the lack of accommodation for our large numbers, and also to the defects in our heating apparatus. I have only space to say that the causes for these complaints still exist with as much force as when made originally. There are other requirements such as improved modes of ventilation, in the accomplishment of which ventilating towers should play an important part, but to these we cannot now make further reference.

I cannot conclude without expressing my thanks to the Principal and all the officers and teachers for kindness and courtesies extended in the performance of my various duties.

I have the honour to be, Sir,

Your obedient servant

WILLIAM C. CORSON, M.D.