

British Congress on Tuberculosis.

Nursing societies which are sending delegates to the British Congress on Tuberculosis will be interested to learn some of the arrangements which have now been made for the meetings. In Section I, which is one of the most interesting sections to nurses, the following points will be discussed:—

Division I.

STATISTICAL.

What conclusions may be drawn from the statistics available as to connection between mortality from phthisis and the conditions contributing to it?

In this connection regard will be had to the following points:

1. The behaviour of mortality from phthisis in England and Wales during the reign of Her late Majesty Queen Victoria.
2. The geographical distribution of phthisis in England and Wales.
3. The incidence of phthisis mortality in particular occupations.
4. The age and sex distribution of phthisis.
5. The distribution of phthisis in the several sanitary areas of London.
6. The statistical evidence against the heredity of phthisis.
7. *Tuberculosis mesenterica* in relation to milk supply.
8. A statistical study of phthisis in relation to soil.
9. The indications for future statistical research.

Divisions II and III.

THE NOTIFICATION OF TUBERCULOSIS.

How can the voluntary notification of advanced tuberculosis be best encouraged and effected? What has been the experience of compulsory notification in the States of New York, Buffalo, and Washington?

THE INFLUENCE OF HOUSING AND AGGREGATION.

(a) By what means can a higher standard be attained in respect of personal cleanliness, and in the case of households invaded with phthisis? How far are additional lighting and ventilation necessary to ensure a much higher standard of bacteriological cleanliness, and what additional legislation, if any, is required to render these advantages available?

(b) How may cleanliness with a sufficiency of light and pure air be secured in factories and workshops, and in places of assembly generally, including steamships, railway carriages, and other means of transit?

Division IV.

CONTROL OF MILK AND MEAT SUPPLIES.

(a) What changes are requisite in existing

legislative measures and administration for improving the conditions of cowsheds, and ensuring the health and cleanliness of milch cows?

(b) What *exact* statistics are there to show the certainty or otherwise of the tuberculin test, and by what means may the application of this test towards the eradication of tuberculosis be best secured?

(c) What relative advantages in the prevention of tuberculosis are secured by the use of sterilized milk, pasteurised milk, and milk obtained from herds free from tuberculosis, and kept properly cooled down from the time of milking to the time of reaching the consumer? How far is it possible to bring about the general use of one or the other?

(d) What administrative measures are necessary in order to prevent the sale to the public of tuberculous meat?

Division V.

THE PROVISION OF SANATORIA.

(a) What are the best means of promoting the erection of sanatoria for phthisical patients in which (1) the curable may have the best chances of recovery afforded to them; (2) the incurable, while ceasing to be a source of danger to the community, may have their lives prolonged, and receive the comfort necessary to their condition?

(b) What are the causes which have led to the recent development of sanatoria for consumption in Germany and in the United States; and how far may the same influences be expected to operate in Great Britain, her colonies and dependencies? Would it be in the interests of the industrial insurance societies or other public bodies to contribute towards the erection and maintenance of such institutions?

In Section II, on Thursday, July 25th, a discussion on "Sanatoria for Consumption" will be opened by Professor Clifford Allbutt, and on Friday, 26th, demonstrations will be given on "Cases of Skin Tuberculosis and their Treatment," and "The Use of the Röntgen Rays in Diagnosis."

An interesting feature of the Congress will be the temporary museum, which will illustrate the pathology, treatment, or prevention of tuberculosis.

The Museum will consist of:

SECTION I.—Pathological and bacteriological preparations and specimens illustrating tuberculosis in man and animals.

SECTION II.—Plans and models of hospitals and sanatoria, charts, and documents bearing upon the historical, geographical, and statistical aspects of the subject.

The educational value of such exhibitions is great and, no doubt, the opportunity thus afforded will be largely used.

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