TUBERCULOSIS AND THE POOR-LAW.



The British Journal of Tuberculosis, edited by Dr. T. N. Kelynack, always a most interesting publication, devotes considerable space this month to the important question of Tuberculosis and the Poor-Law. It truly points out that "tuberculosis, poverty, and pauperism are closely

linked—tuberculosis and poverty are national evils, ever acting and reacting. The relationship is often so intimate and intricate that it is frequently almost impossible to decide which should be viewed as cause and which must be dealt with as effect. When it is remembered that one-third of the mortality amongst adult workers is due to consumption, some faint idea may be formed of the bankruptcy of individual powers, the impoverishment of family life, and the far-reaching loss to our national resources due to this devastating scourge of humanity. Some of our philanthropic institutions which care for destitute children find that no less than 25 per cent. of their little charges are orphaned through this disease. A vast amount of pauperism is the product. Every year an enormous number of consumptives pass into our workhouse infirmaries. The annual death-roll of these unfortunates affords merely a fractional indication of the great army of tuberculous derelicts dependent on charity and State support. By universal admission, our Poor-law system has been found sadly lacking, and with regard to no class has this failure been more conspicuous, deplorable, and inexcusable than in the case of the destitute consumptive. . . . No satisfactory advance towards the elimination of this Great White Plague can be effected until rational means are found for the effective segregation and proper care of these infectious consumptive cases for whom no other aid is possible than that which should and must be provided by the State. . . . It is to be hoped that the Royal Commission now considering our Poorlaw system will give special attention to this subject."

Dr. F. S. Toogood, dealing with "Tuberculosis and Metropolitan Pauperism," speaks of the problem as one of exceeding difficulty as well as of surpassing interest. In connection with the "Hygiene of the Workhouse," Dr. Toogood writes: "When large numbers of people are massed upon a small superficial area, the most careful attention to matters of cleanliness is essential, yet the class of people with whom we have to deal in workhouses would speedily render the place uninhabitable were it not for the great vigilance and watchfulness exercised by the officials.

"My morning inspection rarely fails to discover some scores of purulent expectorations, although abundant facilities for their safe disposition are easily accessible; indeed, it is difficult to avoid the conclusion that their deposit is deliberately misplaced.

<sup>7</sup> In the past seventeen years I have known four officials of the workhouse to which I have been attached to be attacked by pulmonary tuberculosis. It is essential that no consumptive should remain in the ordinary wards of a workhouse—even doubtful cases should be transferred to the infirmary for observation. . . The great improvement in infirmary accommodation, and in nursing and medical attention, dates from the separation of the infirmaries from the workhouses, which was effected about thirty years ago. The general hospitals are now not more efficiently administered than **are** the infirmaries."

## FLY FEVER.

The "fly fever," which causes such ravages amongst the cattle in some districts in South and East Africa, has lately been investigated by Sir David Bruce and Dr. Koch, both eminent bacteriologists.

investigations, a result of As  $\mathbf{his}$ Dr. Koch is of opinion that the fly extinction of the tsetse is impossible, so long as it can find nourishment among the game herds; and Dr. Bruce, from independent investigation in Zululand, has arrived at the same conclusion. There, many authentic instances were reported of the disappearance of the disease when the game was driven out of a district and its return with the reappearance of the game.

It is contended that the extermination of the game would mean a much smaller loss than would result from its preservation.

The German Society for the Preservation of Game, however, challenges Dr. Koch's conclusions, and declares that the fly disappears when districts are cleared of bush, and that it exists where there is no big game. The Society is using every endeavour to induce the German Government to disregard Dr. Koch's proposals.

It was asserted at the Congress of the Royal Institute of Health at Buxton on Tuesday that the house fly is an active agent in the spread of infectious diseases, including phthisis, anthrax, ophthalmia, and enteric fever.



