

patient comfortable, or send him to the hospital to die.

We still have doctors who depend on cod liver oil and change of climate; who never think to advise a patient how to care for his sputum, or pay any attention to the conditions of his home.

When, oh, when will the medical profession grasp the opportunity that is open to them where private philanthropy has provided means to assist them in controlling this most dreaded disease of modern times?

One of my duties as visiting nurse was to provide for and oversee the cleaning of premises which had been occupied by the patients under my care. Many and various were the experiences I had in visiting landlords and real estate agents. Sometimes they were very pleasant and promised to do what I asked, but we never knew what was or what was not done. Often I think the owner promised in order to get rid of me; he knew I had no special authority, and he could rent the house whether he carried out my instructions or not.

Again, I was blamed for all the faults and mistakes of the Health Department. After the first year, the efforts which had been made met with so little response from the people, that gradually this part of the work was neglected, and at the present time I don't think anything is done by the visiting nurse to see that the homes of her patients are cleaned.

The New York State Tuberculosis Law, which passed the Legislature last spring, and went in effect May 17th, is the broadest and most far-reaching piece of legislation that has been passed to prevent the spread of tuberculosis. Definite lines of procedure are laid down for the medical profession and the Health Department. Cleaning and disinfection receive special attention. Do the people realise that it was for their own protection that this law was passed?

The community can have what it demands in the enforcement of this law, but it will have to make its demands so forcible that they cannot be disregarded.

Although our health officer was one of the active supporters of this Bill, and is anxious and willing to enforce it, nothing has been done by the city to provide the extra help to do the work which the rigid enforcement of the law entails on the Health Department.

Rochester, a city of nearly 200,000 people, provides its Health Department with a staff of two, a man and a woman, to do all the disinfection that the law requires. I understand it has been suggested that the present staff is ample to look after the tuberculosis work, too.

Another law which apparently does not interest the public is the one which prohibits expectorating in the street cars, on the side walks, and in public places. Once in a while a complaint is made, but the people have never demanded the enforcement of this ordinance.

The National Tuberculosis Committee, in its efforts to know to what extent preventative work was being done in the United States, sent out letters last spring to the health officers of several hundred cities, asking a series of questions relating to the attitude of the community regarding tuberculosis.

Recently, when I was in New York, I had the privilege of looking over the answers to these letters. Owing to lack of time, and the abundance of the material which had been collected on the subject, it was necessary to confine my investigations to the reports from the cities where I knew active preventative work was being done.

The one fact that is recognised is that tuberculosis is an infectious, and, therefore, a preventable disease. But the laws which are on the Statute Books to prevent its spread are by no means enforced. It is not compulsory for physicians to report cases, except in one or two cities; therefore the health officers have no complete record of the number of cases within their jurisdiction. The cleaning and disinfection of premises occupied by the victims of tuberculosis is not a regular or popular procedure. Some departments disinfect "on request," or "when notified," or "when the force is able to do so." Philadelphia, with the great influence of Phipps' Institute, does not disinfect, and Chicago is one of the cities which does "on request."

It is readily seen that the people do not know or realise the extent of the danger that exists in houses that have been occupied by tuberculosis patients. The well-to-do consumptive ordinarily receives competent medical advice, and is intelligent enough to take the proper precautions in his own home. When he falls a victim, every care is taken to clean and disinfect not only the patient's apartment, but the whole house. The intelligent people are waking up to the infectious nature of tuberculosis; but the importance of providing means so that the homes of the poor may receive the proper attention, and that they may be taught how to protect themselves, does not seem to permeate the minds of the people or even of the medical profession.

So long as tuberculosis was supposed to be a fatal disease, indifference was to be expected, but with the light that modern science, and especially hygiene, has thrown on the subject, public apathy is indefensible.

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