

dren's ward, and an out-patient department of considerable size.

On Saturday last the hospital was *en fête*, and the large out-patient hall was crammed to the utmost with patients and visitors, who enjoyed to the full the most excellent concert, followed by the Christmas tree, from which the fruit was distributed by a splendid Santa Claus, and the rows of happy children were a picture in which any artist would have delighted, while the women and girls in pale blue dressing-gowns with pink ribbons in their hair looked charming. Miss Pote Hunt, who had previously dispensed tea most hospitably in the Board Room, assisted by a willing staff, looked well after both patients and visitors, and a delightful thought was to give to each of the latter a delicious bag of lavender, always a most acceptable gift.

Lastly, mention must be made of the fine Nurses' Home, erected and furnished about ten years ago by Mr. Thomas Hellyar Foord, of Botley Grange, Hants.

M. B.

The Class Method of Treating Pulmonary Tuberculosis.

The Public Health Sectional Committee of the Women's National Health Association of Ireland has passed the following resolution:—

"That the Public Health Sectional Committee recommends that the branches should bring the subject of Tuberculosis Classes before their members, in order that steps may be taken to start such classes in their own districts."

The Committee are also circulating a pamphlet on the Class Method of Treating Pulmonary Tuberculosis," by Dr. Marion B. Andrews, the physician in charge of the first Tuberculosis Class started on this side of the Atlantic. Dr. Andrews says that the treatment of pulmonary tuberculosis among the lower classes presents one of the most important problems of the day, whether viewed from the personal, social, or economic, standpoints. A time is coming, she believes, when every illness will be considered in its social and economic aspects. At present we have only got as far as considering one group of illnesses in this way, *i.e.*, the acute specific infections. We have no compunction about isolating infectious patients for a period of some six weeks, but we shrink, except in cases of mental alienation and leprosy, from curtailing the perfect liberty of persons suffering from chronic and incurable diseases, though that liberty involves the begetting and bearing of children. In regard to leprosy, Dr. Andrews points out that

there were in the thirteenth century 19,000 leper houses in Christendom, and the public conscience was alive to the dangers of leprosy, and the necessity of dealing with them to a degree which would be highly creditable to us in this 20th century. The stern duty of looking to the public welfare was tempered with exquisite compassion for the victims of this loathsome disease. But there was no faltering. Once the "crueller mark than Cain's" had been set on the "poor ribgrated dungeon of the holy human ghost" it became dead to the world. A service similar to the burial service was read, the leper was forbidden to enter the church or the company of others during life, and after death he was buried in his hut. One old ritual added, "You are not to be indignant at being thus separated from others, and as to your little wants, good people will provide for you, and God will not desert you." The result of this stern action was that by the end of the 16th century leprosy had been practically stamped out of Europe.

But with tuberculosis, the case is, says Dr. Andrews, very different. Why the host of the *lepra bacillus* should be considered as a matter of course an outcast from society, for the mitigation of whose sentence no man will plead, while the host of the kindred, and at least as infectious, *tubercle bacillus* should be almost the petted darling of that same society it is impossible to say. But the fact is such. Any attempt to curtail the liberty of action of the latter for the good of the community is met by a wild storm of remonstrance and agitation, not the least frequently used reproach being that the tuberculosis patient will thus be made "a leper."

What the Middle Ages did instinctively as it were, guided by the strong and unfaltering policy of the Church, that our age will have to be taught to do by education of its reasoning faculty, guided by the unwavering knowledge of scientists.

After showing the utterly inadequate number of beds in hospitals and sanatoria available for the treatment of pulmonary tuberculosis, and the inadequacy of out-patient treatment, as attendance is apt to be irregular and desultory, Dr. Andrews says that fresh air, nourishing food, and rest, have proved of more importance than any drugs. And constant encouragement to persevere in these measures through times of despondency and times of buoyant hope alike, is the outstanding need of the victim of pulmonary tuberculosis.

She then describes the Class Method of treating and instructing consumptives, of which an account was published in a recent

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