

ing apparent, and we are coming to realize that treatment at a sanatorium, for the working man at any rate, should only be recommended for those in the early stages of the disease, in what at one time was spoken of as the "incipient stage." These cases after a suitable period of treatment may be returned to their homes, to suitable or some more favourable employment, with every prospect of their becoming of real economic value. Indeed, sanatoria supported by public money should only be used for such cases, for it is only by adhering very rigidly to this rule that the full economic value of sanatorium treatment is to be secured.

To fill our institutions with cases to be patched up temporarily and then discharged is to put these institutions to an utterly wrong and wasteful use, but under the present system of treatment of the tuberculous soldier this is exactly what we are doing. We appear to be afraid to tackle the question fully and firmly, and we seem to ignore the fact that the problem involves questions far more important than the individual treatment of the tuberculous patient.

To allow our tuberculous soldiers to drift into infirmaries and workhouses would be a blunder and a crime; to allow them to die in their own homes would be more than uncharitable and ungrateful. Here is an opportunity, then, of encouraging these men, many of them at the outset of an entirely new life, to make a fresh start in their old homes, if suitable, or of placing them in new homes where conditions are at least not so far from the ideal as in many of those formerly occupied by them.

A NATIONAL SCHEME.

Such a plan must embrace the nation as a whole, as local endeavours are only mischievous, and would be able to do nothing more than tinker with the problem. The question should be considered and decided under the following heads:—

1. The treatment at a colony of the early cases, and their "after-care" followed up as in the Cambridgeshire scheme.
2. The treatment of the second-stage cases at a sanatorium, whence they should be transferred to a colony for further treatment as in Case 1, and their subsequent "after-care" taken in hand on land and in a settlement specially acquired for their reception, and on which their energies may be turned to remunerative account at some occupation—as nearly like their original work as possible.
3. The advanced cases should be kept under treatment at a central institution in the settlement, where they could be properly nursed,

tended, and looked after, all danger of infection being eliminated. For single men this would work admirably, but with married men with families some difficulties would no doubt be encountered at the outset.

SUITABLE TRAINING MUST BE PROVIDED.

The report on the effort to be made to place soldiers on the land* should be followed as regards the after-care of soldiers discharged from the colony as early cases, as also with those discharged from the colony after undergoing their sanatorium treatment. They would then, eventually, be placed in houses on the settlement or estate, where occupations would be found for them. Eventually they would form a nucleus around which to crystallize a tuberculous garden city.

A certain number of discharged soldiers would undoubtedly refuse treatment under this scheme, but from our experience we are convinced that, under proper medical supervision, discharged soldiers suffering from tuberculosis would gladly remove from unsuitable surroundings and migrate to the tuberculous garden city.

The scheme would have to be financed by the State, but part of the outlay might be met by a certain fraction of the patient's pensions. This, together with the aid proffered by Friendly Societies, would put the married man into a fairly favourable position; whilst the money now expended upon the transient treatment of soldiers in sanatoria, usually followed by relapse at home, would be put to a sound use, and ultimately benefit the community by preventing the spread of infection.

Further, several counties are at the present time considering the desirability of segregating the advanced cases of tuberculosis; unless this is done humanely, more harm than good must result.

DISCHARGED TUBERCULOUS SOLDIERS AND AGRICULTURAL WORK.

The next step is to follow the instructions of the committee of recommendation *re* discharged soldiers and the land. There some assistance from the State must be forthcoming. Money granted by the State for the purpose would be well spent, for there has never been such a golden opportunity to insure the segregation of advanced cases of tuberculosis and put a stop to the spread of infection. The measure brought to a successful issue would afford one of the finest examples of preventive medicine ever inaugurated.

* See Report of Departmental Committee on Land Settlement for Soldiers and Sailors.

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