chief trouble is due to bad water. The average peasant, we found, drinks about ten pints of water daily, mostly from infected wells. Many of them also drank a native liquor resembling denatured alcohol. It is not astonishing, then, that most of them complain of stomach trouble.

But the cure can come only through the improvement of living conditions. In a large percentage of cases, we followed the patients to their homes and examined their drinking water, which was usually found infected with pathologic bacteria. Instructions were given for properly cleansing the water and avoiding further infections.

A large proportion of our patients had worms, which we treated with a combination of thymol, soda, santonin and bitter salt. Many patients were suffering from old wounds and infected bruises of various kinds. Venereal diseases were widely prevalent, and were given the recognised scientific treatment. Tuberculosis was present in every form—pulmonary, scrofulosa, eye, lupus, bone, &c.

The history given by most of our patients showed that they had received no medical treatment in a number of years, as there have been almost no doctors available in these districts since the early part of the war. The regrettable fact is that as soon as a patient had received one or two treatments, and was on the road to recovery, he felt so much improved that he considered it unnecessary to continue the treatments. In scores of cases, we followed neglectful patients to their homes and insisted on the continuance of the necessary attention.

The ignorance and timidity of the primitive people of these remote provinces is almost unbelievable. When we first came into some of the more distant villages the people were so afraid of a doctor that they would carry all of their sick people into the woods. But we persisted with all the patience at our command, and eventually won the confidence and respect of the inhabitants. Frequently, however, we had to make long tours into the woods to search out parties of patients and coax them to come in for treatment. Fortunately, we had the invariable assistance of the city authorities whenever a little persuasion was necessary.

During August a sudden epidemic of dysentery developed in our district. Emergency measures were necessary, and we were ill-equipped to cover the rather extensive territory affected by the epidemic. We distributed our available forces as best we could, and established dispensaries and nursing stations equipped with the most necessary drugs to fight the disease. The death-rate, however, was very high in all the villages. For instance, in Siroke-Luhu, out of 1,500 inhabitants, 250 were sick and 57 died. In Novoselice, a smaller village, the number of deaths was 24, showing about the same proportion as Siroke-Luhu. In Neresnici and neighbouring villages, only two persons died, owing to the fact that we succeeded in establishing definite control of all drinking water early in the epidemic.

The ignorance of proper medical treatment which prevails throughout these villages is well illustrated by the remedies which are in common use. Dysentery is generally treated by application of powdered brick or with fresh blood from brook trout. Wounds and cuts, no matter how serious, are treated with cows' dung, leaves and leeches.

The difficulties which we met in making 2,800 vaccinations are unbelievable. Our lives were repeatedly threatened, but smallpox was present everywhere throughout the district, and vaccination was frequently an absolute necessity. Most of the country people had a feeling that by vaccination we were injecting a serious sickness into their blood. But patience and plenty of sincere explanation usually won the day. These country people, though ignorant, have a great eagerness to learn. When they begin to believe in our work by seeing its effects, their co-operation is unstinted and their faith absolute.

American Red Cross Child Health Train No. 1: Eastern Czecho-Slovakia.

Make-up of Train.—Seven cars of 27-30 ton capacity, fully vestibuled, with special hospital-car springs, as follows :—

Car I: Personnel car.

Car 2: Pantries, kitchens, &c.

Car 3: Operating room, sterilising room, dental room.

Car 4: Dispensary and stores.

Car 5: Offices, supplies, sleeping compartments. Car 6: Heating plant and garage with two motor ambulances and trailer.

Car 7: Cyanide disinfecting plant.

STATEMENT BY DR. PROCHAZKA, MINISTER OF PUBLIC HEALTH, AUGUST, 1921 :---

"The American Red Cross hospital train as it now stands forms a fundamental part of our epidemiological equipment. We place great reliance upon it, because it is the only way we can send quickly our sanitary personnel with the necessary equipment to the remote eastern parts of our Republic, where a focus of infection may appear at any time.

appear at any time. "The train is operating at the present time in the Carpathian district near Rust, with eminently satisfactory results. The Carpathian Board of Health at Uzhorod gives the highest praise to the work done there. Prof. Selskar M. Gunn recently had an opportunity to travel with the train and reported very favourably on the activity and results of its humanitarian work.

"The original intention was that the work of the train should be confined to child-welfare. To a certain extent we have been compelled to modify that intention, but nevertheless the chief function of the train now is to protect the well-being of the child by a campaign against epidemics, especially typhus and small-pox. Its work may be considered the first step of the extensive child-health programme which will immediately follow. The benefits which result from this work in small rural communities are very great, particularly its educational activities."



