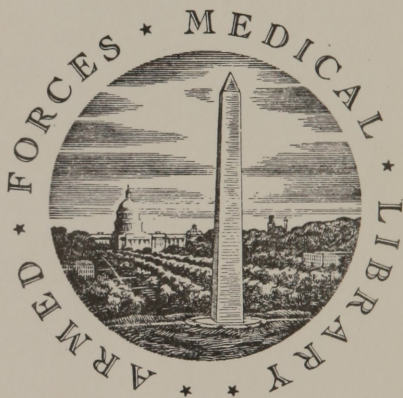


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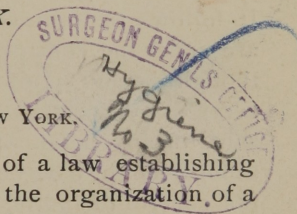
A STATE BOARD OF HEALTH.

A COMMUNICATION TO A MEMBER OF THE LEGISLATURE
ON
SANITARY ORGANIZATION AND ADMINISTRATION
IN THE
STATE OF NEW YORK.

BY STEPHEN SMITH, M. D., OF NEW YORK.

Taken in its broadest sense, the enactment of a law establishing a State Board of Health will result finally in the organization of a complete system of sanitary administration throughout the State. The Central Board will necessarily stimulate every community to organize local Boards for immediate sanitary protection and improvements. The consideration of a Bill for the creation of a State Board of Health involves, therefore, the larger question of the necessity and importance of official sanitary supervision of the public health interests of the people of the State. This branch of public service usually takes the form and name of a Board or Department of Health. The questions which naturally occur to those who for the first time seriously examine the proposition to establish a system of sanitary government in the State, may be grouped as follows:

1. *Why are Boards of Health required in civilized communities?*
2. *What are their functions?*
3. *What have they accomplished?*
4. *Are they required in the State of New York?*
5. *Is the Bill to establish a State Board of Health adapted to secure adequate sanitary administration in the State?*



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I. A BOARD OF HEALTH.

The facts which underlie all organized efforts to protect and promote the public health are these: In every community a certain number of persons die annually from inevitable causes or conditions, and a certain other number from diseases which might have been prevented by human means. The *inevitable* deaths result from diseases or states over which we have no special control, as from old age, accidents, malignant diseases. The *preventable* are caused by agencies which we may remove, destroy or counteract, as from the contagion of small pox, scarlet fever, diphtheria. It has been very accurately estimated that in rural communities 11, and in city populations 17, in every 1,000 deaths are due to inevitable causes. It follows that all deaths above that ratio are due to causes which are under the control of human efforts and agencies. These facts, though the subject of accurate scientific study, are also matters of every day observation. Of all the deaths of which we are cognizant, in any neighborhood, we recognize the fact that the larger number might have been prevented, if certain contingencies within the control of individuals, or of the united efforts of the resident population had been foreseen and properly determined. We recognize the fact that small pox destroys the unvaccinated; that scarlet fever, measles, diphtheria, and typhus spread by exposure of the sick to the well; that typhoid fever and cholera attack those who drink waters polluted by the discharges of the sick; that malaria arises from undrained soils.

But the deaths from preventable diseases are, after all, but a fraction of the damage to any community. The preventable sickness which terminates in death, has also its enormous margin of waste, misery, and chronic invalidism, not classified, and in fact not noticed in our mortality records.

Now, a Board of Health represents the organized efforts of a community to remove, destroy, or control the causes and sources of disease and unhealthfulness which exist within and around the homes of the people. Effectual sanitary works can not be accomplished by the individual living in the midst of a dense population. However well he may construct his own house, and however complete may be its appointments for health and comfort, the air he

breathes may be contaminated by a corporation's factory, the water he drinks may be befouled by a neighbor's cess-pool, and the food he eats may be adulterated by the salesman. If such a citizen would have a healthy home there must be some arbiter to whom he may submit his grievance, and who has power to secure to him the enjoyment of pure air, wholesome water, and unadulterated food. That power is the Board of Health.

An English authority has forcibly expressed the same idea as follows: "Wherever masses of human beings congregate, whether in towns or villages, or in armies in the field, camp or barrack, an artificial existence, to a certain extent springs up. Each individual is no longer dependent upon himself, for the habits of those around him influence his own position. The preservation of the health of every class in a community is equally important to the rich and to the poor. It is important to the wealthy that the poor should be kept in health, for the influence of infection, once introduced into the dwellings of the poor, often spreads far and wide, and is no respecter of persons. It is important to the poor man, for his health is his wealth. Sanitary laws and regulations are intended to give power to communities which single individuals cannot possess, viz, the power to promote general measures calculated to secure or improve the state of the public health."

2. THE FUNCTIONS OF BOARDS OF HEALTH.

From the preceding statement it is not difficult to infer what must be the functions of Boards of Health. They may be formulated as follows: 1. The removal or destruction of "nuisances dangerous to life and detrimental to health;" 2. The control and suppression of contagious and infectious diseases; 3. The improvement of all the conditions affecting unfavorably the public health. The best summary of the functions of a Board of Health is found in the following official instructions to the medical officers of a well organized and efficient Board. Each medical officer is required

"To make himself acquainted with the topography of his district, the nature of its rock, formation and soils, the positions of its drains and sewers, and the direction towards which its drainages

flow; to become acquainted with the social condition and habits of the humbler classes, and the nature of their employments; to ascertain the nature of the manufacturing carried on in the district with the view of determining their action upon health; to ascertain whether the drinking water is of good quality, and available in sufficient quantities; to discover whether or not water is polluted; and if so, in what way and by whom; to personally inspect the houses in order to ascertain whether or not they are over-crowded, untenable, provided with sufficient accommodation for disposing of house refuse, and to inquire generally into their sanitary condition; to investigate into the causes of sickness from any cause that may be preventable by hygienic means; to inspect foods; to search out contagious diseases and cause their isolation; to disinfect or destroy all infected matters or things; to secure the drainage of all wet soils and the construction of proper sewers."

It will be seen from this schedule of duties how completely every condition unfavorable to the public health is examined by the Health officer. The nuisances in every civilized community "dangerous to life and detrimental to health," are innumerable. Many of these are open and patent to every observer, as heaps of decomposing filth, putrifying animal and vegetable matter, seething cess-pools, etc. Others are obscure, and their effects upon health are discoverable only by an expert, as damp soils, poisoned wells, mephitic gases. Whatever the nature of the cause may be, and wherever it may exist, it is the duty of the Board of Health to discover and remove, or destroy it. Filth of every kind is removed or disinfected, and thus rendered innocuous. Whatever pollutes the air or poisons the water, or adulterates the food, is sought out and corrected. Every person or family suffering from a nuisance created or maintained by a neighbor, is protected by the abatement of the evil. Practically these duties are now performed by the Board of Health of New York City, and under disadvantages which will be found in no other city in the State. Its control over nuisances extends from the suppression of a crowing cock, which disturbs the morning slumbers of the sick, to the removal of the gigantic corporation of Butchers, numbering 250 establishments. No citizen's complaint is overlooked, but his grievance is immediately investigated, and the nuisance abated. Twice in each year every accessible dwelling is examined from cellar to garret, and every source

of ill health remedied as far as possible. Not the least of the beneficent works of Sanitary Boards is the control and suppression, or "stamping out" of infectious and contagious diseases. These infections are our indigenous and imported pests which are allowed to spread "without let or hindrance" where no sanitary organization exists. But every one of these diseases spreads according to certain fixed laws which are perfectly under the control of human means. Small-pox, scarlet fever, measles, typhoid, diphtheria, are perpetual pestilences which are entirely amenable to sanitary measures and precautions. Isolation of the sick from the well, and disinfection, will always control that large brood of domestic affections which are propagated by contagion and infection. Cholera and yellow fever can gain no foot hold on our soil where competent preventive measures are vigorously enforced. The ability of Health authorities to "stamp out" the outbreaks of contagious and infectious diseases is limited only by the accessibility of the cases to their preventive measures. In New York cholera was met in 1866 with such appliances that it could not develop an epidemic. Small-pox has been unknown as an epidemic in that city for three or four years. Scarlet fever and diphtheria would never spread if the health authorities had access to, and the management of, the cases in their earliest development. Said the Secretary of a State Board of Health, "No epidemic of diphtheria can occur in this State if our Board is informed of the first cases."

The permanent improvements made by Boards of Health are of incalculable importance to the future populations of all communities. The drying of soils by deep drainage is the first of sanitary improvements. No substantial security against ill health can be obtained without this preliminary work. Hence, Health authorities everywhere make deep drainage the basis of their operations. In the twenty-five English towns thus drained, fevers, diarrhœa, and even consumption fell to a minimum.

Scarcely second in importance is pure drinking water. In all towns, especially those long settled, the wells become foul with the soakage of surface waters, and though these waters sparkle and seem pure, their apparent purity depends upon the impurities which they contain, such as animal and vegetable matters, earthy

salts, etc. Through the medium of these old wells diarrhoeal diseases propagate themselves, for the germs of the disease, cast off from the bowels of the sick, are thrown upon the surface, or into porous privies, and by soakage reach the well. Pure water, therefore, from sources above or beyond defilement is among the earliest wants of every town, and this want sanitary authorities endeavor to supply.

The improvement in the dwellings of the poor is always a constant care and effort of Health Boards. No town of any considerable size fails to have its section devoted to the laboring classes. The homes of these people are always in an insanitary condition. The chief evils are over-crowding, collections of filth, want of ventilation, proximity or domesticity of animals, etc., etc. These unsightly portions of any town are the breeding places of contagious and infectious diseases which spread to the quarters of the wealthy and respectable. In every town which has a competent Board of Health these plague spots are removed or renovated, not only greatly to the relief of the town itself from a constantly-threatening source of infection, but greatly also for the benefit of the people who inhabit these insalubrious dwellings.

3. RESULTS OF SANITARY WORKS.

Let us next consider some of the results of sanitary works. Have the claims of preventive medicine been realized? We answer, yes, one hundred fold. We will first refer to England, which has a complete system of sanitary administration throughout the kingdom. It is but twenty-five years since the British Parliament first began sanitary legislation. At that time the metropolis, the cities, and the rural towns were in a neglected condition, and the death rate was enormous. As frequently happens, public attention was aroused by a terrible visitation of cholera which found its appropriate field of operations in these filth-stricken communities. Dr. Farr well says:

“Wherever the human race, yielding to ignorance, indolence, or accident, is in such a situation as to be liable to lose its strength, courage, liberty, wisdom, lofty emotions—the plague, the fever, or the cholera comes, not committing havoc perpetually, but

turning men to destruction, and then suddenly ceasing that they may consider. As the lost father speaks to the family and the slight epidemic to the city, so the pestilence speaks to nations, in order that greater calamities than the untimely death of the population may be arrested."

From ten to fifteen years after sanitary improvements had been introduced into English towns, the Medical Officer of the Privy Council caused an examination to be made of twenty-five towns in order to determine how far the public health had been affected. The improvements which had been made consisted in general of sewerage, drainage, good water supply, better disposal of human excreta and other filth, improved housing, etc. In every town great improvement of the public health was reported, the degree of improvement depending upon the extent and thoroughness of such works. The following are but few of the details given in the instructive report of that officer :

"Of the monstrous mortality which Cardiff suffered before its sanitary works were constructed, nearly a third part has now ceased. Fevers have fallen 40 per cent; diarrhœa 75 per cent; consumption 7 per cent.

"In Newport the total mortality fell 32 per cent; fevers 36 per cent; diarrhœa 26 per cent; consumption 32 per cent.

"In Croydon, the total mortality fell 20 per cent; fevers 63 per cent; consumption 17 per cent.

"In Merther Tydfil the total mortality fell 21 per cent; fevers 60 per cent; diarrhœa 45 per cent; consumption 11 per cent.

"In Macclesfield the total mortality fell 23 per cent; fevers 48 per cent; diarrhœa 3 per cent; consumption 31 per cent.

Without multiplying these figures it may be stated that the gain of life and health in the rural towns of England has been immense since sanitary works have been inaugurated. London itself is a remarkable example of a great metropolis which has a constantly diminishing death rate, while its population is rapidly increasing. Glasgow has had her poor quarters entirely reconstructed, with the result of not only reducing her death rate 50 per cent, but of diminishing crime 95 per cent.

But we need not go abroad for striking illustrations of the results of sanitary works. When the Board of Health of New York

City went into operation, one-half of the population lived in tenement houses, and 75 per cent of the mortality occurred in these tenements. In ten years the mortality in tenement houses fell 15 per cent, and is still falling. In one year the Board caused 50,000 ventilating windows to be put in these houses, and the following year the mortality in those houses fell 5 per cent, and is still diminishing. The Board has underdrained large sections of the city, with the effect of completely eradicating malarial diseases from those portions of her territory. Small-pox is unknown except as an imported disease; scarlet fever is suppressed when accessible to the Board; and the same is true of diphtheria. In a word, the general mortality of New York City is steadily diminishing as its population increases.

If sanitary works yield such results in a large city whose topography cannot be changed, and whose population, long educated to insanitary habits, and accustomed to unhealthy surroundings, is exceedingly intractable; what may we not anticipate of the results of sanitary care and supervision of the 250 villages of the State, whose foundations may yet be reconstructed, and whose population may be moulded into new forms? The experience of England, already referred to, gives the answer in a death-rate diminished often 25 per cent.

4. IMPORTANCE OF SANITARY ORGANIZATION AND WORKS IN THE STATE OF NEW YORK.

New York has a population of nearly 5,000,000. Of this number about one-half live in cities or villages, or in what is known as aggregated communities, and the other half in more or less completely isolated homes.

Consider, first, the sanitary conditions under which those live who reside in towns. What has been the normal growth and development of the average city and village of our State? They originated in settlements. The pioneer family of the settlement selected a point to locate adapted to secure some slight advantage of trade. That point was on a stream, usually at a low level. He built his house in the rudest manner, around it constructed out-

houses for family conveniences and for domestic animals, and in the porch, or near by, he dug the well. As family after family join the settlement, each located its house around the central point, without regard to other than temporary conveniences. The village gradually spread in a straggling manner over the plane to the neighboring elevations, which the wealthy selected as the places of their abode. As the town grew the insanitary conditions rapidly multiplied; dwellings, shops, factories, stores, slaughter-houses, stables, become inexplicably intermixed. At no distant day diseases unknown to the early residents began to prevail. Typhus and typhoid fever, diphtheria, consumption, are now constant factors in the mortality list at all seasons, and quietly carry off their tens or hundreds.

This is no fancy sketch, but will faithfully apply to nine-tenths of the larger towns of this State. Like Topsy they grew; they had no paternity in a sanitary government. We may justly assume, therefore, that half of the population of this State are living under conditions unfavorable to health and longevity; that they have not only inherited the evils of their ancestors' domiciles, but have immensely added to them. Except in the two or three cities which have properly organized Boards of Health, this large population has no official supervisions of the conditions under which they live. There is not a village in the State in which the most common observation does not detect innumerable sources of ill-health that might and ought to be promptly removed. If we add to these the nameless, unseen causes of sickness which a skilled sanitarian would discover, we can readily understand why our healthiest thickly settled populations make large returns of deaths from preventable diseases. Every case of fever, whether typhus or typhoid, malarial, or remittent, occurring in the rural towns of this State, is an indictment of its authorities for neglect of nuisances which they might and should have removed. Every epidemic of small-pox, scarlet fever, measles, whooping cough, and diphtheria, in those towns, proclaims in trumpet tones the absence of all proper official control of these domestic pestilences.

Of the remaining half of our population, living in their own

dwellings, and in less aggregated communities, is it safe to allege that they are exempt from the evils incident to crowded communities? We answer, No! Though the isolated family is not so liable to be poisoned by its neighbor, it is not less liable to be poisoned by itself. It is not the common nuisances, those simply offensive to the senses, as decomposing and putrifying filth of every kind, with which the modern Health authorities chiefly occupy themselves. They find the grosser and more dangerous nuisances within the precinct of the family and its home. Sanitary science teaches that every family in domicile is a perpetual source of unhealthfulness to itself and to the neighborhood by the constant outflow of excrementitious matters, and the accumulations of waste animal and vegetable products. Probably no more offensive remark could be made of any family in its own home, than that it is a nuisance. And yet is it not what may be truthfully said of every family living in its own domicile? For what is a nuisance? The laws of this State define a nuisance to be "Whatever is dangerous to human life or detrimental to health; whatever building or erection, or part or cellar thereof, is over-crowded with occupants, or is not provided with adequate ingress and egress to and from the same, or the apartments thereof, or is not sufficiently supported, ventilated, sewerred, drained, cleaned, or lighted, in reference to their or its intended or actual use; and whatever renders the air, or human food or drink, unwholesome." On one of these counts, on, in most cases, on several of them, every family in our present social condition may be convicted of being, or creating, or maintaining a nuisance. For it must be apparent that the physical life of the family is an incessant change—a constant absorption of food, and a perpetual out-flow of the waste products of the body. Wherever, therefore, the family locates permanently it immediately fills the surrounding air with poisonous gases and vapors, and saturates the earth beneath with fluids charged with the elements of disease and death.

Consider for a moment the average rural dwelling, and the methods adapted to dispose of domestic filth. The house is usually located at some point convenient to the high-way. The condition of the soils and stagnant and standing waters are not considered, nor

the relations of the out-buildings to the dwelling. The cellar is an excavation in the ground, walled up with loose stones. It is the store room of perishable food, and is kept cold and damp. Standing water in the cellar, damp and mouldy walls, decaying vegetables, etc., are not regarded as injurious, but rather the normal condition. From mere dampness, to large collections of standing water, even at times covering the cellar bottom, we may find every degree. Who that spent his early life in the country does not recognize the truthfulness of the description of the cellar of the house in which he lived, as given by a New England Judge, only perhaps a trifle exaggerated. He says:

"You creep half down the cellar stairs with only the light of a single tallow candle, and behold by its dim glimmer an expanse of waste as boundless as the sea. On its surface, in dire confusion, float barrels, planks, hoops, and staves, without number, interspersed with apples, turnips, and cabbages, while half-drowned rats and mice scramble up the stairway for dear life, and drive you back to the kitchen."

A writer estimates that half of the cellars of the dwelling houses in the country resemble the one here described. Now, what must follow in such a dwelling? Why the upper part of the house is always warm, in the summer by external heat, and in winter by the fires. This high temperature above constantly evaporates the water or dampness of the cellar, and sends its vapors, laden with mould, foul gases, and putrid organic matters throughout every room in the entire house, saturating the air with the odors of mould and putrefaction. The good wife purges her children every spring to free their systems of the supposed causes of disease which they have accumulated during the winter, but the cellar remains uncleaned.

Notice next the provisions for disposing of the house refuse. It is usually cast upon the ground near the kitchen, where it forms a cesspool of putrefying or fermenting filth, which every one incontinently shuns. If this collection of putridity simply evaporated and filled the air with noisome gases, its dangers, great though they be, would have a definite limit. But that is not the extent of damage which it inflicts upon the household. In that cess-pool the most active chemical and vital changes are incessant-

ly going on. New forms of life appear, live, and die, within each twenty-four hours; they arise and float in the air, and thus pervade every part of the dwelling, or are carried down into the soil with the wash, and enter the well. Throw into that seething mass a germ of typhoid or cholera, or a diarrhœal poison, and it at once multiplies and propagates itself *ad infinitum*.

Notice again the method of disposing of the most dangerous excreta of the family—that of the kidneys and bowels. The receptacle is a vault, with open, porous bottom, and located near the well. Why do those vaults so rarely become full? Because the greater portion penetrates the earth, and thus passes away. But where does it go? The volatile elements fill the surrounding air; of the solid matters, part reaches the well, and the cellar, part comes to the surface at lower levels of the adjacent grounds, and the remainder is dissipated in the soil waters.

Is it surprising that low forms of fever, dysentery, and other diarrhœal diseases, prevail, often so fatally among the farming class, and residents of any small hamlets? And can any one doubt that if a competent medical man should carefully inspect every private residence of the rural district of this State, and if all the improvements which he should suggest were scrupulously attended to, that nine-tenths of the sickness, and ninety-nine one-hundredths of the deaths, now occurring, would be prevented?

These and kindred facts which might be added without number seem to prove beyond all question that, so far as the welfare of the State depends upon the health of the people, the public weal would be greatly promoted by an efficient system of sanitary government, not only of the city and town, but of the rural populations.

5. THE PLAN OF ORGANIZATION, AND THE RESULTS A STATE BOARD WILL ACCOMPLISH.

In regard to the Bill itself it should be said that it was drawn up by one thoroughly familiar with sanitary legislation, and with the practical operations of the Boards of Health. It has also received the sanction of the best sanitary students of this country. The plan

of organizing the Board is novel, and yet would seem to meet every indication. First, the plan gives permanency to the Board by incorporating three State offices in its membership, which represent three important branches of knowledge essential to the daily work of the Board. These are law, topographical and engineering science, and the external sanitary police of the State—quarantine. Second, the State at large is represented by three Commissioners of Health, two of whom must be physicians of proper educational qualifications, and of medical skill and experience. Third, the expert knowledge of existing local Boards of Health is obtained by giving representation to three of the best organized in the State. This membership also insures against the possible encroachments of the State Board upon the functions of municipal authorities. This plan of organization seems, therefore, admirably adapted to insure efficiency and to protect every interest.

The prescribed duties of the Board are two-fold, viz.: 1. *Investigation* of the sources of unhealthfulness, and 2. *The supervision of vital registration*. The investigations are to be undertaken under two conditions. 1. The Board is required by section 6, as a constant duty, to take cognizance of the interests of health and life among the people of the State, and to make inquiries in respect to the causes of disease, and especially of epidemics, and to investigate the sources of mortality, and the effects of localities, employments, and other conditions upon the public health; also to obtain, collect, and preserve such information relating to deaths, diseases, and health as may be useful in the discharge of its duties and contribute to the promotion of health or the security of life in the State of New York. 2. It is also provided by section 8, that at any time the Governor of the State may require the State Board of Health to examine into nuisances, or questions affecting the security of life and health in any locality; and in such case the said Board shall have all necessary powers to make such examinations, and it shall report the results thereof to the Governor within the limits of time which he shall prescribe for such examination and report. These investigations will prove of immense importance. Those undertaken by the Board will extend to all the obscure sources of unhealthfulness, the origin of epidemics occurring in

the State, and the diseases peculiar to trades, localities; etc. Those directed by the Governor will lead to the investigation and abatement of nuisances affecting the public health, on the appeal of citizens, in localities where no Board exists; or to the determining of questions relating to the public health about which there may be a difference of opinion among sanitary authorities having limited jurisdiction, and which authorities may require an arbiter.

The supervision of vital registration in the State is scarcely second in importance to the preceding investigation. The neglect of this branch of public service can have no other apology than that, heretofore, there has been no organization in the State qualified to systematize such work and give any accuracy to returns. But a State Board of Health will be competent to perform that duty with a thoroughness which will make the vital records of this State as accurate as the most favored State in the world.

As to the general results which will flow from the organization of an efficient State Board of Health, we have the experience of other States to guide us. In twenty States, Boards of Health have now been organized, and in several these Boards have been in existence many years. The results of their works have been stated in a recent publication, as follows:

"In each State the medical profession, civil engineers, naturalists, teachers, and the managers of organized industries heartily support the State Board of Health and encourage the organization and duties of the local Boards. In the brief period of a few years the results of such work of the Boards in Michigan, Wisconsin and some other States, have been to greatly increase the security of health in all the cities and villages, and generally to reduce the death-rate year by year. In the States above mentioned the first efforts were directed to securing local sanitary organizations and good local Boards, and to bringing about a faithful registration of vital statistics and an exact method of certifying the causes of death. Instructions, explanations, the publication of brief reports on the leading sanitary questions of the times, and the skilled investigation of particular subjects which most affect the public health, have been the methods adopted by these Boards. One of the Boards has, in seven years, investigated and reported upon upwards of sixty subjects, and the Legislature during that time enacted twelve important laws to give practical effect to great improvements which the people required as a result of those investigations.

The investigations related to the improvement of local sanitary government, the prevention of the pollution of water supplies, the system of records of mortality, nuisances and noxious trades, homes for the poor, adulterated and deleterious foods and beverages, school-room hygiene, the vending of poisons, the propagation and neglect of contagious pestilences, the local sources of fatal diseases, the avoidable causes of consumption.

CONCLUDING REMARKS.

The Bill to establish a State Board of Health has been characterized in high places as a "doctors' job", "a method of extorting money from the State," etc. This is not the first time that similar phrases have been used in the Legislative Halls of this State. Fifteen years ago the medical men of New York City brought to the Capitol the Metropolitan Health Bill, and they were greeted with the same remark. But true statesmen like Hon. Geo. H. Andrews, Hon. Ezra Cornell, Hon. Andrew D. White, in the Senate; Hon. Henry J. Raymond, and Hon. Henry R. Selden, in the Assembly; defended and sustained the measure, and it became a law. And what has been the result? New York to-day has the best sanitary government in the world. Three thousand lives are now annually saved, that before were lost; life is more secure than in many a rural district; and as a place of residence no commercial metropolis can compete with it in health, comfort, and attractiveness. Of the value of that Board to the commercial interests of New York, we need cite but a single instance. Said one of its largest merchants in a public meeting a few evenings since :

"The cash value of the Board of Health of this city to the branch of business in which I am engaged cannot be estimated at less than \$100,000,000."

In England the medical profession receives due credit for its efforts to promote the public health. Says an eminent English authority, who not only compliments in strong language the labors of our profession, but explains the reason for its interest in preventive medicine :

"The medical men of this country have, as a rule, acted like true philanthropists in generally taking the lead in all questions relating to the prevention of disease. To no body of scientific persons are the effects of an unsanitary condition made more painfully manifest. Disease in unsanitary districts sits like a vampire on its victim, which is never satiated till the last drop of life blood is exhausted. Medical men know full well that it is almost futile to

apply their healing art in unsanitary places. The removal of the patient, even in the most rapid disorders, to a healthy hospital in a more salubrious neighborhood, renders the effects of disease less fatal."

For my own part I am proud of the accusation that this bill originated with the medical men; and I trust that if it becomes a law, that stigma will be inwrought in the future history of the beneficent work of the Board of Health of New York. But whatever may be its fate all the signs of the times indicate an awakening interest in State, or preventive medicine, which will insure its eventual triumph. The people of this State, not less than the physicians and philanthropists, will demand that protection from foreign and domestic pestilences, and those safeguards to health, which sanitary administration has so abundantly demonstrated its power and capacity to provide. And the voice of the people will be heard and heeded by our legislators, as it has been in Europe, where State medicine has become an acknowledged power, and an indistructible element in the system of national politics. This dominating influence of preventive medicine in the State policy of England is recognized by the leaders of both parties. Referring to the agitation of sanitary questions among the people, the present Premier remarked, "The next political canvass may be largely influenced by sanitary questions." Not less emphatic are the utterances of Gladstone, who declares that, "The most important concern of the modern statesman should be the advancement of sanitary knowledge and the promotion and the protection of the public health."

Already the agitation necessary and incident to the effort to secure the passage of this Bill has produced the most gratifying results in awakening thoughtful minds all over the State to the value of preventive medicine. Not only medical men, but laymen in every pursuit of business, have expressed their surprise at their previous apathy, and their determination now to press these questions upon the attention of the Legislature until adequate legislation is obtained. I cannot enforce this statement with more suggestive language than the following from a recent letter written by one of the leading and ablest statesmen of New York:

"I am deeply interested in the subject and become daily more so as I read and reflect. I have read far enough to become profoundly amazed at my own and the general ignorance that prevails in regard to the laws of life and health, and of sanitary science."

