

patients. In order to minimize the risk from fire each wing of the building is provided with an emergency staircase at the end furthest from the main staircase, and two of the wings are cut off from the rest of the block by a corridor of fire-resisting construction with a glass roof. Nothing seems to have been neglected which could in any way add to the comfort of the patients or which is needed for the treatment of early consumption. This addition to the Brompton Consumption Hospital will enable the charity to increase still further the benefits which it has been able to confer on the consumptive poor since its foundation seventy years ago.

PREVENTION OF CONSUMPTION.

CANADA.

Association for the Prevention of Tuberculosis.—At a recent meeting of the Executive Council of the Canadian Association for the Prevention of Tuberculosis, a Committee consisting of Dr. P. H. Bryce, convener; Dr. J. D. Lafferty, Calgary, N.W.T.; Dr. C. J. Fagan, Victoria, B.C.; Dr. Gordon Bell, Winnipeg, and several laymen, was appointed to take steps to secure the co-operation of municipalities and of the governments of the several provinces, and of the Government of the Dominion of Canada, for the establishment of one large sanatorium in each province for the treatment of consumption. The Secretary of the Association was instructed to visit Prince Edward Island, Nova Scotia, and New Brunswick in August and September to lecture on the cause and prevention of consumption, and to lecture in Ontario during June and July; and, in addition, a special Committee was appointed of all members of Association resident in Ottawa, with Dr. H. B. Small as convener, to take steps to organize for the work in that city.

Nova Scotia.—The Province of Nova Scotia, by an Act passed March 30th, 1900, appropriated a sum of money for the erection of a sanatorium for tuberculous disease of the lungs. The institution has been formally opened, and will be ready for patients on July 1st. The sanatorium is situated about three-quarters of a mile from the town of Kentville, about 70 miles from Halifax. The building, which cost £4,000 exclusive of furniture, has accommodation for 20 patients. The Act provides that there shall be appointed two examining physicians, and that both shall be residents of Halifax, but these have not as yet been selected. There will be no resident physician, but one of the practitioners of Kentville will pay frequent visits to the institution.

UNITED STATES.

Massachusetts.—We have received a reprint of a paper by Dr. S. W. Abbott, Secretary of the Massachusetts State Board of Health, on the Decrease of Consumption in New England. He says the six adjoining States (Vermont, Connecticut, New Hampshire, Maine, Rhode Island, Massachusetts) known as New England, form a distinct division of the United States, having the advantage of a fairly accurate system of vital statistics, extending over a period varying from 1842 in one State and from 1892 in another, down to the present time. The populations of these States present variable conditions as to density, occupations, the people, and other social conditions. His conclusions are: (1) The death-rate from consumption in New England at the present time is somewhat less than 20 per 10,000 living inhabitants. (2) The death-rate from this cause has diminished largely in all the New England States, in some, with fairly accurate registration, as much as 50 per cent. in the half century; and this decrease appears to be going on now more rapidly than in earlier years. (3) The death-rate of women from consumption has decreased more rapidly than that of men, and is now less than that of men; while in earlier years it was greater. (4) The death-rate from consumption at every age of life has also decreased, but more at higher than at lower ages.

A MEDICAL DIPLOMATIST.—The statements which have recently appeared in various quarters that there is some chance of an agreement being come to between the Pope and the King of Italy recalls the fact that a similar arrangement was contemplated in 1860 by Cavour. The negotiations were conducted by Dr. Diomede Pantaleone, a physician of Rome. There is said to be still extant a minute of the proposals revised and corrected by Cavour himself. Owing to his sudden death the negotiations came to nothing. It may be added that Dr. Pantaleone was a strong advocate of professional representation in legislative assemblies.

PROPOSED REMOVAL OF ST. GEORGE'S HOSPITAL.

A SPECIAL Court of the Governors of St. George's Hospital was held at Westminster Palace Hotel on June 21st to receive the report of the Committee appointed at a special Court held on March 20th, 1903, to consider the desirability of removing the hospital to a larger site.

The chair was taken by Lord WINDSOR, and the reports of the majority and the minority of the Committee were presented by Mr. A. W. WEST, the Treasurer of the hospital. The majority report was in favour of leaving the hospital on its present site, the minority report in favour of removal.

A memorandum circulated at the meeting contained the following summary of arguments in support of the opinion of the Medical School Committee, that it is not desirable to move the hospital from Hyde Park Corner:

1.—The hospital only possesses a fraction over two-fifths (26,145 sq. ft. out of 61,645 sq. ft.) of the present site.

2.—It is assumed by the Financial Sub-Committee of Governors appointed to consider the question that £325,000 to £425,000 might be obtained for our interests. Even if this assumption prove correct the sum is quite insufficient to justify removal.

3.—As no offer is before us after sixteen months' publicity of the fact that the Governors are prepared to receive offers, we are justified in assuming that even this sum is not likely to be forthcoming in the immediate future.

4.—St. George's Hospital is wanted where it is. The demand for admission and the number of out-patients treated at the present time are as great or greater than ever. The number of accidents and emergencies treated in 1903 was 20,817.

5.—The position and accessibility of the hospital cannot be equalled in London.

6.—The removal of the hospital would be a hazardous experiment, and as a result the financial position of the hospital and the welfare of the school might be wrecked.

Mr. C. G. HEATHCOTE then moved:

That it is not desirable at the present time and under existing circumstances to remove St. George's Hospital from its present site.

He said the Governors of the hospital were asked to give up a position at Hyde Park Corner the surroundings of which were unequalled in any large town in the world for healthiness, convenience, and access. The position filled so large a space in the public eye that the hospital had great benefactions in the past and might expect them in the future. Mr. Heathcote concluded a long speech by appealing to those present not to sacrifice for a shadow or a dream the great advantages which the hospital possessed in the finest site in the world.

Mr. C. T. DENT, in seconding the resolution, said that the three cardinal points to be considered were: First, was St. George's Hospital to be moved or not? secondly, it was essential that the matters in dispute should be definitely decided at that meeting; and, thirdly, it was of importance to avoid arriving at any sort of compromise. Mr. Dent explained that at the outset of the discussion some time since he thought that it might be advantageous to move the hospital, and he was at any rate wholly in favour of ascertaining if such were the case, but he had been forced step by step to the conviction that it was impossible, and that if it were possible it would be unwise; in fact it would be almost fatal to the institution to do anything in the way of removing the hospital from its present site. He had been forced to that conviction not only by the arguments of those who thought the hospital ought to remain where it was, but also by the arguments of those who considered that the hospital ought to be removed. Referring to the criticisms of Sir Henry Burdett, every one admitted that the criticisms themselves contained their own refutation and contradiction. It was like putting an acid with an alkali, so that the result of Sir Henry Burdett's criticisms was a "fizzle." He pointed out, with regard to moving the hospital from its present site, that the wards of a hospital were filled more in consequence of its reputation than because of the site it occupied. No one would be more pleased than the medical staff to work in an up-to-date hospital, but experience taught them that in the course of a few years the medical staff would not be satisfied, because more improvements would then be obvious. While, however, the medical staff would be very pleased to have an entirely new hospital, nevertheless by a majority of 21 to 3 the medical staff were in favour of remaining as they were. Mr. Dent considered that the burden of proof rested on those who said the hospital ought to be moved. He believed that any endeavour to remove the hospital as suggested would be prejudicial to the interests of the institution. It was said that the hospital occupied too valuable a site, and Mr. Dent asked for proof that it was of such value. There had been much