THE TUBERCULOSIS CONFERENCE AT LEEDS.

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BEFORE the opening of the Conference on Tuberculosis, held under the auspices of a joint committee representing the City Council of Leeds, the University of Leeds, the National Association for the Prevention of Consumption and other Forms of Tuberculosis, and the Leeds Association for the Prevention and Cure of Tuberculosis, attention was called to it by Sir Berkeley Moynihan in his speech at the opening of the Tuberculosis Exhibition in the Leeds Town Hall. Sir Berkeley is not only a great English master in surgery: he is also an artist in words; and on this occasion he was more than that when he said: "If I could be sure of having one prayer answered, I should pray that the early stages of cancer might hurt people." Pain, he said, would lead sufferers from such diseases as cancer and tuberculosis to seek the healer betimes, when a confident hope of cure could still be held out to them. The words were full of profound imaginative thought and were worthy of the speaker. Sir Berkeley then warned this generation that none of the plagues which from time to time had left a black trail across vast regions of the earth had had any impression made upon their ferocity or their frequency by care for the individual victims. Let mankind care for the victims; let Christian civilization lessen the misery due to the havoc of war; but science alone could abolish the war itself. It was a noble oration, statesmanlike and suggestive. It pointed in no commonplace terms but in living words to the necessity of using, for the purpose of prevention, all means now known or in the future likely to be discovered. Sir Berkeley Moynihan's speech was made at the Leeds Town Hall, where Dr. Jacob had arranged his popular exhibition; it was at the Leeds University that the next chapter opened. Here Sir William Younger spoke, facing a crowded hall of delegates. The platform held the Council of the National Association for the Prevention of Consumption; the members of this Council sat among the members of the Leeds City Council, and the message was addressed not to them only, but to all civilization. "What chance have the poor under such housing conditions? Why should a working man when he takes a house—probably the only house available, and at a rent he cannot afford—be subjected to conditions under which he runs many times greater risk of tuberculosis attacking his family than does his wealthy neighbour in the square or the park?" Lord Salisbury preached a limit of ten houses to the acre, a limit which had produced

excellent results, especially in the children. Mr. Michael Sadler, the Vice-Chancellor of the University of Leeds, asked for a combined campaign of science and compassion—a notable phrase. Sir Robert Philip took us in fancy to the house of the tuberculous patient and pointed to the absolute certainty of infection of the healthy by the sick under ordinary conditions; he asked the municipality, and indeed all patriotic citizens, to set to work and make such conditions impossible. Councillor Carby Hall spoke of the adequate but cheap houses that Sir Robert had demanded. Dr. Cameron mapped out Leeds for us and gave us in his paper a textbook of reference, most useful when we are willing to get to work. Colonel Kyffin-Taylor, M.P., showed Liverpool to be another City of the Plain, only not deserving destruction because there were just men in its Gomorrah. Dr. T. D. Lister, of the Mount Vernon Hospital, who with a Yorkshire name had a Yorkshire personality and appearance, deplored, as Sir Berkeley Moynihan had done, the failure of the stricken to perceive that they were hit. Dr. Harold Vallow, Chief Tuberculosis Officer for Bradford, condemned the back-to-back house, for in Bradford pulmonary tuberculosis attacked these houses in far greater proportion than should be the case even according to the rigid reasoning of Professor Karl Pearson. Dr. Collis, Medical Inspector of Factories, would make factories into sanatoria; and he advocated transference of trades, the sending of the clogs of Oldham to the plough. Miss Emily Sadler called for better ventilation in factories, and she quoted Miss Taylor, H.M. Inspector for the Leeds district, to depict 28,000 men and 12,000 women working in the factories from 8 o'clock in the morning until 8 o'clock at night, or from 7 o'clock to 7 o'clock, or from 6 o'clock until 6 o'clock. The reiteration of the time figures was impressive; the bodily strain, the feeble physique of the workers, and the dusty air breathed by these 40,000 toilers were all made evident to us. Dr. H. G. Sutherland was as eloquent in Leeds as he is everywhere and always. He pointed to a high death-rate from pulmonary tuberculosis in model dwellings, and he asked why such dwellings should give results which one would expect only in a London slum.

On Tuesday afternoon Professor Lawford Knaggs spoke of Surgical Tuberculosis. Mr. Gauvain, of the Treloar Hospital, Alton, also spoke. The medical men especially found these addresses of great professional interest. We did not expect concurrence of views, and we did not get it. Professor Lawford Knaggs advocated early operation, while Mr. Gauvain held that the knife was the worst instrument a surgeon could use. Mr. Dobson explained that the Lord Mayor Treloar Hospital and College at Alton had advantages of equipment, situation and staff, which were almost impossible in a city hospital of the present day. Dr. Nathan Raw, of Liverpool, whose views are probably even

better known in Germany than in this country, looked keenly into the milk-can; the question of safeguarding the milk-supply was also dealt with in his own dry, incisive, quietly emphatic way by Mr. Harold Stiles, of Edinburgh, whose speech found great favour with his audience, as did also the impressive words of Professor Sims Woodhead, of Cambridge. The electrical treatment of milk was explained by Alderman Skelmerdine, of Liverpool. Mention should be made here of three addresses which were *not* given. Time was passing only too quickly, and in order to enable their colleagues from a distance to address the Conference, three Leeds representatives—Dr. Watson, Dr. Vining, and Mr. Daw—most courteously waived their claim to a hearing. I have seen the proof of Dr. Watson's paper on Tuberculosis in Childhood; it is full of thought and originality, and should command general attention when it appears in the Transactions of the Conference, which will be published shortly by the National Association at its office, at 7, Hanover Square, London, W. Dr. Watson thinks there are so many other causes than milk for tuberculosis in children that milk is receiving too much attention, while the other causes are receiving too little. Dr. Vining, who is also, like Dr. Watson, on the staff of the Leeds Infirmary and of Armley Hospital, had a paper on Local Tuberculous Infection. The omission of this paper was a loss to the Conference, for Dr. Vining is one of our individualists, looking at the problem of tuberculosis with a rare analytic skill. Mr. Daw's paper was on Surgical Tuberculosis in Children, the writer being impressed by the splendid work done in the infirmâry wards.

On the second day Sir William Osler, of Oxford, opened with a comprehensive view which brought us back from detailed studies to general principles. He startled the lay delegates by diagnosing tuberculosis in every palpitating breast before him and around him, and he finished a fine speech, delivered in perfect English with an occasional Americanism, by asking for a living wage for the worker, and a sober population in houses of hygiene. Dr. Cecil Wall, Physician to the London and Brompton Hospitals, spoke of the Home Treatment of Consumption among the poor of the Metropolis. He discussed only the treatment of those with limited means, and in listening to his paper one felt that the whole problem could be mastered by following Dr. Wall in his visits to the unhygienic house of the ordinary consumptive. He reflected on the unhygienic life and the insufficient food of the average working-class patient, and he criticized much of the teaching in vogue. He preferred free ventilation to a large air-space, though he asked for both; and he totally objected to impervious waterproof covers for the beds of the tuberculous. The capacity of the individual for work can be discovered only by experiment; and until that capacity has been discovered, the patient should be watched even

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to a tedious extent. Dr. H. J. Campbell, Senior Physician to the Bradford Royal Infirmary, speaking of Domiciliary Treatment, believed that the chief value of a sanatorium in all but early cases was educational, and that the establishment of a cure depended upon the use made by the patient of the lessons inculcated in the sanatorium. Dr. H. W. McConnel, who knows more of after-care than any living physician, described the Kelling sanatorium system and asked for a happy combination of the voluntary and official agencies. Dr. J. E. Squire pointed to the confusion which arises when the sanatorium is expected to do the work of the Poor Law. "It frequently happens that when a patient has been discharged from a sanatorium to domiciliary treatment, an appeal for readmission is based, not on any medical necessity or advantage to the patient, but on the poverty of the home. Surely here an appeal is made to the wrong authority." Miss McCaw, of the National Council, impressed us with the advantage the voluntary dispensary held; in that the patients were treated in their homes by the medical officers of such institutions. She asked for a steady re-creation of the hygienic home by the patients themselves, and desired that nothing should be done which would destroy the self-respect of the patient requiring help. Dr. Vallow gave a second paper full of statistics, proving that in his practice tuberculin had its value. Dr. Clark, of Killingbeck Hospital, in a paper on his work as a sanatorium superintendent, deplored the number of patients who were returned to him as relapses, and he demanded a more business-like and scientific method of after-care. Dr. Dennison, Chairman of the Leeds Sanitary Committee, spoke vigorously of the obstinacy of ignorant patients who steadily refused to carry out the wishes of the medical attendant and continued to infect a house in spite of all warnings from the doctor.

Much might be said of the visits of the delegates to the various institutions in the city, of the admirably arranged Tuberculosis Museum at the Medical School, in charge of demonstrators who did their work so clearly and so well; of the unwearying efforts of Dr. J. J. Perkins and Miss Stickland to insure perfection in the arrangements; and of the various entertainments provided by Leeds citizens for their honoured guests. But time is short, and space is precious: it is well also to leave something to the imagination. And now the writer apologizes for anything suggestive of light-heartedness in this sketch. It was, of course, written when the sky was not black. A greater calamity even than the one we are permanently at war with has come upon our people. Pray God it will pass and let us return in full vigour, all of us, all nations, to fight in a struggle in which we are all on one side.