boards and their opinions. Quite lately the public has been treated to several instances where lepers in this country have been hounded from pillar to post, and treated with all that may be said of "man's inhumanity to man," when the consensus of medical opinion based on reports of royal commissions and extended investigations in Hawaii, all go to prove the slight contagiousness—if any—of leprosy. Such inconsistent action as quarantine of leprosy becomes still more absurd, when the same health authorities who have become frenzied by farcical fear over one case of leprosy permit consumptives by the hundreds to live unmolested among them, ride in their cars, and frequent their playhouses; nay, more than that—offer inducements for this class of invalids to come among them. Leprosy will be shunned and the unfortunate will sooner or later hide himself or herself from the gaze of the public. Besides, leprosy is not anywhere near as contagious or infectious as tuberculosis.

When pellagra as a distinct disease came into prominence, and some of the health boards of the country went wild over corn and corn-bread as the producing cause, a hue and cry went up from the extremists in preventive medicine that cases of pellagra should be quarantined. Was the producing cause known? No. Was it contagious? Was the evidence that it was contagious convincing? No. But still pellagra victims must be secluded, and the edict went forth from—I am glad to say only a few—boards of health to quarantine pellagra. Now, a few years later a resolution is promulgated from the third International Congress on Pellagra that corn-bread does not produce pellagra, neither is it known what does, or how it is conveyed, and that it is not contagious. What do the people of those states think of? What confidence must they have in a board of health which is supposed to deliberately and maturely consider evidence before restricting citizens in their movements. And the same thing can be

said of the hysteria which is shown in dealing with cases of poliomyelitis. If we, as health officers, are not going to keep our heads clear, and sit steady in the boat, and refrain from emphasizing by our actions undigested opinion of contagion which some theorist may advance merely that we may be "the first on the ground to do something," we surely will lose the confidence of the thinking people of the community where we are supposed to have our strength.

It seems to me, therefore, that the aim of the sanitary teacher should be to remove false ideas and notions from the minds of the people which relate to their health, and to urge them to accept what has been proven out in practical ways.

Empiricism is no longer a standard of action. The ideas of yesterday may not be the correct teaching for today, but until the results of the laboratory, as applied to sanitary management, have proven to be faultless, we cannot afford to be other than conservative in everything that relates to the public health, if we would retain the confidence of the people in our ability to serve them.

SANITARY INSPECTION—REMEDIAL AND CONSTRUCTIVE.*

By DR. OSCAR DOWLING,
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Not many years ago, the health officer was identified in the public mind solely with epidemics. In the intervals of immunity he dropped below the horizon line, to emerge only when the deadly foe again threatened. Today things are somewhat better. He has gained somewhat and is now associated in the community mind with epidemics and nuisances.

This attitude reveals the main activities of health boards before the day of preventive medicine.

*Read as address of Chairman of Section on Hygiene and Preventive Medicine, Southern Medical Association, Jacksonville, Fla., November 12-14, 1912.

With the evolution of the science of sanitation, the field of these public servants widened until now the purview of the health officer, to his mind, includes every phase of community life. To the average citizen this may seem only an attempt to gain power, but to the student of social well-being, it is a logical development.

Health as a fundamental in the individual life and the nation's progress and permanence, is a modern civic concept. Its relative value both as a personal and community asset, heretofore, was unthought of. Material resources dominated men's minds. That this philosophy is unwise and uneconomic, applied to life, is now beginning to be understood. Health is coming into its own as the most vital of all the elements that make for human development and happiness.

Naturally, it was the physicians who led in the enunciation of this principle. They alone know how essential physical vigor is; they alone comprehend the effects of disease upon the social body.

The more deeply the subject is studied, the more its ramifications are understood. Housing, child welfare, environments of the working class, especially women, food supply, are some of the primary elements of the social order in which health is basic. It is interwoven with the ethical and spiritual advancement of a people equally with the physical. This is why, with increasing knowledge in science, the department of public health has enlarged its scope and activities.

In the light of the new interpretation of his duties, every intelligent health officer today is trying to find means of making concrete the discoveries which promise control or eradication of disease and betterment of conditions.

Your secretary suggested that I discuss sanitary inspection as a Branch of Public Health. He also added that I ought to be able to write a crackerjack paper because of my experiences. I take it he would like to have

a recital of incidents, but, apart from the setting, they lose in force and humor.

An old dairyman charged with making his milk supply elastic, said, "My cows have to wade through water up to their bellies every day. Of course the milk is thin." The humor of the situation was not in the old man's answer, but in his enjoyment of the fact that he had headed off the inspector with an entirely satisfactory explanation. The comment of another old-time citizen was interesting. On being told, "This hog pen outside your door is dirty and unhealthful. Don't you know that?" The reply was, "Why, Doctor, these hogs have been here four months and they ain't never been sick a minute." When directed to take a quarter of beef from his ice box and destroy it, the agitation of the old butcher, as he exclaimed, "My Gawd, man, I have call for dat meat. Dat meat, it sells; yes," cannot be given in words.

Usually the inspector is met in a friendly spirit but there are exceptions. For example, one butcher said, "I have been killing meat here for twenty years and the people say it is the best sold in this town. Who are you anyway, what do you know about this? Did you ever butcher anything?"

"If five hundred of you doctors and five hundred lawyers with you were killed off, we'd get along better, all of us," was one of the unfriendly speeches. I am frequently reminded by irate managers of eating establishments that the President of the Board of Health doesn't know anything, and especially that he doesn't know cleanliness when he sees it. Some few thrilling incidents relative to the use of a gun ended in warm and friendly assurances that compliance with the law would be evident within twenty-four hours.

Inspection at present is one of the best means of getting before the public primary facts pertaining to health. The purview of sanitary inspection includes all the fundamentals of community life, namely, water and food

supply, street cleaning, garbage collection and disposal, pollution of streams, sale of drugs, abatement of nuisances, conditions of public buildings, and the hygiene of industrial environments. From the nature of the work it touches vitally both the individual and the community. As a nation, we have failed to develop a system of inspection as a necessary adjunct to state and municipal administration. We lead the world in the development of the science of sanitary plumbing, but sanitary inspection with us is yet in its infancy. Its possibilities are not even apprehended.

Inspection poorly done were better left undone. If superficial, it provokes antagonism; if hastily or lightly done, it cheapens the entire health effort in the public mind. Persistence and system are essential and success depends largely upon effective routine work.

Attacking, as it does, things vital in community life, sanitary inspection brings an immediate return. A visit to over four hundred bakeries revealed the fact that one hundred and eighty-seven of the employees needed a bath and clean clothing. One of the men volunteered the information that he had not had a bath or change of linen for six days, but as that was Saturday "scrub night," my visit was not out of place. Reports of these inspections given to the press and sent to the proper authorities resulted in a general cleaning, and in a few instances permanent improvement. For a time at least, cleanliness of employees was emphasized. On the whole efforts of this kind may be considered superficial, yet they have a real value.

An order prohibiting the use of every slaughter house in a town of twenty-five thousand inhabitants seemed arbitrary. It worked a hardship on the people, as cold storage products, higher in price than home slaughtered meat, had to be purchased for a short time. But the result justified the measure as one entirely new slaughter pen was erected and all the others brought up to the standard required by the sanitary code. Adverse criti-

cism was not lacking, but the agitation itself awakened the community.

Inspection of a thousand grocery stores in rural districts has eliminated from the shelves of these establishments and others of like character, harmful patent medicines. No feature of the state-wide inspection trip of 1910 in Louisiana was more productive of good than this special effort.

This phase of the work may be considered distinctly—if superficially—remedial. It is to be expected that many will do as little as they dare, not as much as they can. If two dogs and a cat sleep habitually in the market the permanent elimination of one dog becomes a cause for congratulation. If out of ten bakeries in a town, five are screened as a result of the inspector's visit, danger from flies is lessened just that much. Any improvement, however slight, becomes an object lesson if nothing more. Fortunately, there is satisfaction in the betterment of environments, for example, a restaurant owner in reply to a compliment from a traveling man said, "Yes, those *exceptors* cost me forty dollars, but my place, it looks fine, don't it?" He seemed to grow several inches both ways while he said it.

Inspection is a stimulus to community co-operation. To quote from an editorial in the progressive paper of a town severely criticised, "We are all mad. When we get madder we'll do something." After the inspector's visit the community eye sees trash piles, old cans, and debris on vacant lots. Later the community mind gets around to the notion of removal.

The remedial effect goes deeper in that it reaches out to the cooperative activities of the people. Cleaner stores make for better stores and supplies. Efforts to make sanitary an antiquated jail leads to the erection of a new building.

Inspection is not only remedial in effect; it is primarily educational. Practically these two elements are one; logically they are separate.

Giving opportunity as it does for specific

instruction on the subjects uppermost in the mind of the individual, inspection is an ideal mode of teaching. It touches a vital interest, with many the dominant interest of life—the business of making a living. In addition, the health officer is armed with the authority which compels obedience to his instructions. This makes the application of the principle a further training, and proves to the individual the usefulness of the knowledge imparted.

The printed score card for dairies is an example in point. The officer teaches, in his inspection, how to score every feature. Each one has a fixed value; to bring up the score certain things must be done otherwise the dairy will be closed. When improvements are complete the product is worth more, therefore, the value of the instruction is apparent in terms of dollars and cents.

If the evidence in eradication of disease were as clear there would be less apathy and indifference to hygienic instructions. But the danger of infection from impure water or unclean food or surroundings always seems remote and the origin of a contagious malady often doubtful. But it is worth while to risk criticism, even failure, to spread the gospel that dirt is a propagating agency in the transmission of disease.

In all health work, the hygienist is confronted with the crass ignorance of the masses in the simplest phases of healthful living. The conceded remedy is education, not just conviction as to the truth of the principle of sanitary science, but conviction vitalized into the habits of the individual and the activities of the community.

In principle, both psychologically and pedagogically, this form of hygienic work is perfectly adapted to raise health standards. Not in a day or a year, but ultimately.

In its educational aspect inspection is clearly constructive. It is a phase of prevention; it implies the elimination of conditions and practices injurious to health and the substitution of those which will conserve and de-

velop all the potentialities of the human being.

To be effective this branch of health administration must, primarily, be fair, systematized, and authoritative. For success, justice to all, favor to none must be the cardinal principle of the policy. If friendship, influence, social position, political patronage bias the health inspector, happily, the work will fail. Criticism, impersonal, favorable when possible, adverse when needed, for all, with each case judged on its own merits, without comparison, is the only permissible line of action. From this it will be clear that only trained men of integrity, discretion, and force are fitted to be inspectors. The experience of two years covering more than four thousand inspections is convincing as to the qualifications of the men who should be employed in this work.

In this effort, as in no other, eternal vigilance is the price of success. Slipshod, haphazard, spasmodic attempts will not avail. Wise supervision with systematic management is necessary.

Authority is a determining factor in the efficiency of this phase of health administration. Prompt legal procedure against offenders is important and if the courts are not unbiased and sympathetic, the health officer, no matter how efficient, is powerless.

Lest your kindly patience be exhausted many arguments have been omitted and I fear I may not have made the strongest case for my client. But, from the results of conscientious, unremitting endeavor for three years, I am fully convinced that in the present state of the public mind toward health, inspection well done, affords more satisfactory returns than any other agency.

Perhaps you will pardon a last word. It relates to the public attitude toward the sanitary office, and the phase of the work he represents.

By whatever name the inspector may be known, he is looked upon by many as himself a "nuisance." He exposes insanitary

places and things which have been considered good enough for generations, and worst of all he insists on changes of a radical nature. It may be true that these improvements are in the interest of all citizens, but that doesn't "pay" for the trouble involved. Too often the sanitary inspector is looked upon merely as a foreman scavenger, a subordinate of the Medical Inspector. His part in the prevention of everything that will advance disease and retard the preservation of life is unknown, or unappreciated, by the majority, even by some who are members of local and state boards of health.

But this estimate is passing. The work of inspection is being recognized as of fundamental importance in the collection of facts which give a basis for the proper arrest of causes underlying the public's moral and physical health. Every branch of health activities, whether statistical, analytical or epidemiological, depends on the material gathered by this officer. The chemist and bacteriologist of the department, likewise, need his data for their conclusions; in fact, all researches in every field of sanitary science are dependent, more or less, on the facts gathered at first hand.

Intrinsically, inspection as a measure can be made the most useful agent of the health department in reducing to a definite surety many problems which have been hitherto complex and doubtful. But, let me repeat, the application must be made with a due sense of justice and a right notion of the scientific principle involved.

THE OPEN AIR TREATMENT OF PNEUMONIA.*

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To those of you who think most of enzymes, hormones, the nitrogen coefficient, etc., as well as those of you who are engaged principally

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with the technique of certain "ectomies" and "ostomies" and the management of ileus and "Lane's kink," this paper will no doubt sound like kindergarten talk.

However this may be, my only apology is for the incompleteness of the paper and not the subject matter.

The highest ideals of modern medicine, in my judgment, are embraced within the realm of preventive medicine and next to this, in point of appreciation and utility, should be "simple medicine." Under this term (my own coinage by the way) are embraced those principles and methods which utilize natural God-given agencies in a practical way. This idea, together with a temperate and judicial use of artificial agents is what constitutes the art of medicine. And a very beautiful art it is to ally the products of the laboratory as evolved by science with nature's own physical resources, thereby producing a harmonious expression which can be applied for the relief of afflicted humanity. Nothing could be more exalted or ideal, except perhaps the actual prevention of disease.

Happily the laity are beginning to appreciate and relish the use of simple measures in the treatment of their ailments. In fact, while not the rule, some place a higher value on simple hygienic measures than does the medical man.

Is not this a reflection upon the profession? Should we wonder that our patrons or former patrons, perhaps, consult the Ladies' Home Journal and other periodicals for advice? Or be chagrined to see intelligent people and valued lives committed to the care of professional trainers rather than the medical adviser? Reflect on the significance of a place like Muldoon's in New York State, an institution established, managed and owned by an ex-prize fighter, always, I am told, patronized to its capacity. What are the features that make this place attractive and successful? Why just simply *exercise, food, air, and sleep*. Of course we know the significance of these things, but their practical application from a