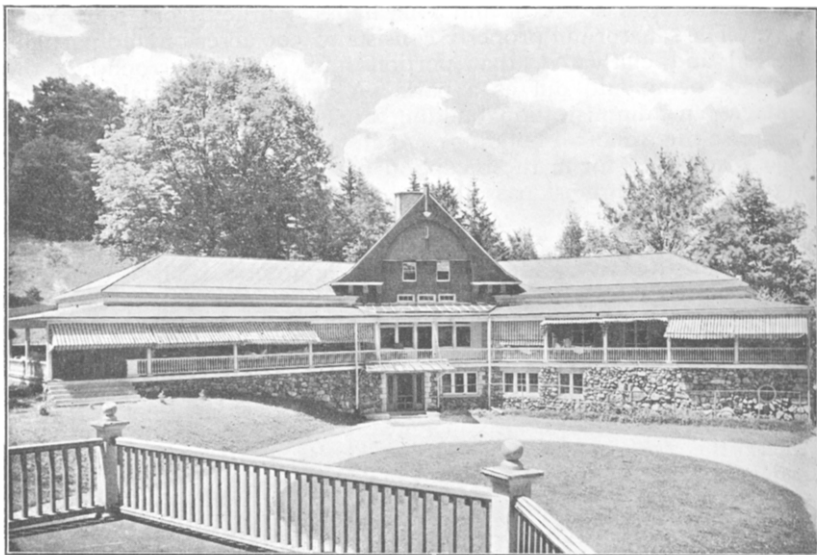


2,000 feet above sea-level and four hours' journey from New York City. The sanatorium property consists of 500 acres of land partially cleared and cultivated, that portion immediately surrounding the cottages being laid out as a park. A reception hospital, fourteen cottages, an administration building, a casino, a library, and a chapel comprise the principal buildings. Acute and advanced cases of tuberculosis are cared for in the reception hospital; but all patients entering the institution must pass through this hospital, where their exact condition is accurately ascertained, and from whence they are assigned to cottages when no longer in need of constant observation. There are four private cottages, each in charge of a nurse. These comprise independent units. Patients in other cottages, where the rates are lower, take their meals in the administration building. Inclusive of the reception hospital, there is accommodation for 125 patients and ample provision for visitors. In addition to the main sanatorium, there is an intermediate division with fourteen beds for patients of limited means. There is also an annex, accommodating forty patients, where the rate is nominal, and where twenty-three free beds are maintained. The institution is under the direction of a physician-in-chief, with a staff of assistants and a corps of specially trained nurses. There is also an advisory board of non-resident physicians.

HERBERT MAXON KING, M.D.,
Physician-in-Chief.

THE ADIRONDACK COTTAGE SANITARIUM.

THE Adirondack Cottage Sanitarium, on the northern slope of a wooded hillside, well protected from wind, at Trudeau, one mile north of Saranac Lake, in the county of New York, was founded by E. L. Trudeau in 1884 for patients who could not afford otherwise to remain in the Adirondacks. It consists of twenty wooden, brick, or stone cottages, given by wealthy patrons, designed usually for four patients, each having a separate room, and so arranged that each room opens on a spacious, sunny, but well-protected veranda, upon which the bed may be rolled; a chapel, a library, an infirmary; a medical pavilion, containing eight rooms for new patients, who spend two weeks here before going to the cottages; as well as an excellent laboratory, ray-room, hydro-therapeutic room, drug-room, examining offices, medical library, record-room, and fire-proof vault for records; an open-air workshop, an open-air assembly or amusement hall, and many other buildings, all grouped about a central administration building, containing the administration offices, the dining-room, the general and diet kitchens, as well as rooms for some members of the staff and for some patients. There are no *Liegehallen*. The buildings are heated by hot water, lighted by electricity; the floors are hard wood (chiefly native maple), and the walls tinted with a light water or oil paint. The medical staff consists of three resident physicians and four nurses, all of whom have had pulmonary tuberculosis. The records are very complete. Careful monthly records and examinations are made. Each patient is requested on the anniversary of his discharge, the average residence being seven months, to fill out a blank, varying from year to year, and the replies



THE CHILD MEMORIAL INFIRMARY OF THE ADIRONDACK COTTAGE
SANITARIUM.



A COTTAGE AT THE ADIRONDACK COTTAGE SANITARIUM.

noted in the records. Of the 2,348 patients discharged during the first twenty-two years, about 2,000 have been traced, of whom 1,045

are living and 936 are dead. Owing to the difficulties of watching the patients day and night in a cottage system, effort has been made to develop a "tradition" among the patients, which is handed down from one to another. They are told the institution should be looked upon more as a university than a college, a place where they will be so trained that, on leaving it, they will be fully prepared to meet the emergencies of life; in other words, after a few weeks in "college," where hygienic tasks are daily allotted them, they will receive a "university" training, where they will be helped to think "hygienically," and to solve all problems of life "hygienically." Instead of having "dons" or "tutors" to prevent cheating, the "honour" system is relied upon. The institution has been a great training-school for many medical men, and it is rare to have less than ten to fifteen among the 110 patients. The workers in the Saranac Laboratory for Research in Tuberculosis, under the directorship of Dr. Trudeau, have, with one exception, all been patients in the Sanatorium. Tuberculin has been used continuously since 1890, and the results are distinctly gratifying. The charge per patient is \$7 a week, and the annual deficit of \$20,000 to \$30,000 a year is raised by private subscription. There is an endowment fund of nearly \$500,000. At the open-air workshops two instructors teach the patients about book-binding, illuminating, the making of picture-frames and articles in leather. During the past year fifty former patients and semi-invalids have been employed in various capacities, and, in addition to board, lodging, and laundry, there has been paid over \$3,600 for their services. The *Journal of the Outdoor Life*, the official organ of the National Association for the Prevention and Study of Tuberculosis, is published monthly throughout the year at the Sanatorium, and has a circulation at present of nearly 5,000.

LAWRASON BROWN, M.D.,
Resident Physician.

ROYAL VICTORIA HOSPITAL FOR CONSUMPTION, EDINBURGH.

THE Royal Victoria Hospital for Consumption, Edinburgh, forms part of a comprehensive anti-tuberculosis scheme. Edinburgh is now well provided with accommodation for the treatment of consumption. In the centre of the city there is the Victoria Dispensary for Consumption, which was founded twenty-one years ago as the base of operations, and the "clearing-house" in relation to the varying types of consumptive patients. Closely related to this, and under the same administration, is the Royal Victoria Hospital for Consumption—the sanatorium for early cases—situated about a mile and a half to the north of Edinburgh. In the opposite direction, some little distance to the south of the city, stands the General Infectious Hospital, where fifty beds have been specially allocated for the reception of advanced and dying cases of tuberculosis. The operations of the Royal Victoria Hospital and Dispensary are not confined to Edinburgh. Patients are received at the hospital from all parts of Scotland. The hospital for advanced and dying cases receives patients from Edinburgh alone. The Royal Victoria Hospital was purposely founded in immediate