

observation during the past winter and spring months as an attaché of the Chicago Health Department. So that well may we ask what kind of citizens are we importing now? I am thoroughly convinced that a certain class of the illiterate and poorer classes of immigrants should be prohibited from landing on our shores—only to become a burden to us instead of a benefit to our nation.

NATIONAL VACCINE FARM, BACTERIOLOGIC
LABORATORY, ETC.

Regarding this, and what might be regarded as kindred subdivisions of my topic, in the projection of sanitary improvements, etc., I will not attempt to discuss nor more than mention that they should be under the scientific observation of this department.

In concluding this imperfectly prepared paper, permit me to request of you to urge upon your representatives in Congress, your governors and others, in justice to the welfare of the people, in the name of science and humanity, the necessities and needs of our claim: That the medical profession and State medicine is broad and philanthropic and has made great strides and progress within recent years; that our medical representative or secretary will be a man of culture and intellect and *bon camaraderie*, thus assuring the profession and the world that our claim was not of the *ignis fatuus* kind; that at some future time the United States will have an ideal department of health with influence that shall be unsurpassed, will be our reward, for which posterity will bless us in my firm and sincere belief.

STATE MEDICINE IN PENNSYLVANIA AND HOW WE MAY INCREASE ITS EFFICIENCY.

Read in the Section on State Medicine, at the Forty-seventh Annual Meeting of the American Medical Association held at Atlanta, Ga., May 5-8, 1896.

BY EUGENE O. BARDWELL, A.M., M.D.

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The State Board of Health and Vital Statistics of Pennsylvania was organized in June, 1885, so that its existence covers a period of a little less than eleven years. The appropriation made for it on its natal day called for \$5,000 per year, and the appropriation made ten years later was for \$6,000 per year, so you may easily judge that there has been no great development of cerebral matter in the legislature of our good Keystone State during the past ten years. Out of this enormous sum \$2,000 is paid to the secretary and executive officer of the board. I understand that the clerk of the board receives \$1,500 per year, and this leaves the munificent sum of \$2,500, which according to the terms of the act is to be expended, or so much of it as may be necessary, for postage, telegrams, express charges, rent, incidental office expenses, traveling and other necessary expenses of the members and secretary of the board, and for sanitary inspections, analyses and protection of water supplies, and for scientific investigations. Think of it, \$2,500! Sanitary inspections, protection of water supplies, analyses, scientific investigations; and be sure to return an unexpended balance!

Pennsylvania in point of population is the second State in the Union. One of the oldest States. The

Keystone? Notwithstanding the parsimoniousness of our legislature in regard to appropriations for the protection of the public health, I am happy to be able to say that we have, as far as they go, as good legislative enactments for the control of contagious and infectious diseases and the regulation of health boards and all matters pertaining to the public health as could well be devised. In that respect nearly every session since 1885 has seen some improvement, chiefly through the efforts of one man, Benjamin Lee, M.D., to whose able and untiring work as secretary and executive officer of the State Board of Health, we primarily owe all our laws for the intelligent supervision and protection of the public health. To Dr. Benjamin Lee the State of Pennsylvania owes a debt she can never repay. But the people do not appear to appreciate the fact that to this one man all credit is due that the great State of Pennsylvania has, in sanitary matters, emerged from a condition akin to barbarism. Eternal vigilance, however, is necessary to prevent the repeal of our health laws. At every session of our legislature some learned member from Squeedunk, Daguscahonda or elsewhere will arise in his place with the air of a Solon, pull the fringe of whisker under his chin meditatively, and present a bill which, if passed, would destroy the result of the labor of years; labor, too, which has been done gratuitously without hope of reward, except such as comes through a man's inner consciousness of duty done. We have a large number of boards of health in small towns or boroughs, and the effectiveness of these boards is slowly increasing each year. The public is very slowly awakening to a knowledge of the utility of health boards and their work, but we are still woefully behind the times in many portions of the State. We have no boards of health in townships, although there is a total of 1,511 townships in the State. Now, such a state of affairs is a great drawback, and renders nugatory, to a certain extent, much of the effort put forth in towns and boroughs. In order to secure the best results every township should have its board of health and health officers; but our sapient legislature, having several times refused to legalize such boards, our State Board has, as a make-shift, appointed deputy inspectors who receive no pay, except when ordered by the State Board to investigate nuisances. One such inspector is appointed in each county, and when we consider the fact that many counties contain thirty, forty or more townships, it is easy to comprehend that such officer, serving without compensation, will not be able to exercise a very close or valuable supervision over sanitary affairs, the more so as the people are likely to look upon him as an outsider and give him no aid whatever. The cause of the apathy of the people in the matter is not general ignorance; it is ignorance on this one subject. The public control of matters pertaining to the health of communities is an idea comparatively new, and when it runs against that fetich of the American people, "personal liberty," it experiences a severe shock. Now how can we give an impetus to the dissemination of knowledge of this subject? To my mind the answer is easy and the result certain. Compel the State to pay for the service. It is entirely too much to ask men to serve on health boards for love of the people who abuse them. It has been my experience in the practice of medicine, that the people who pay promptly are my best friends in other ways. Nine times out of ten when a physician is stabbed in the

back it is done by some one to whom the physician has rendered services, either without fee or at a reduced rate.

Physicians who are supposed to act as health officers in most places, are surely the last people who should be expected to serve the State without fee. Physicians who give to individual members of the State from one-fourth to one-half of their total labor should not be expected to do more than that much for the public. In this State health officers receive all the way from nothing, in many cases, to \$100 per month, in very few instances, in towns of the same size; and where the salary is largest, there is the officer most appreciated and there is the intelligence of the people in sanitary matters the most marked. The increased knowledge of the people is partly the cause and partly the effect of the high salary of the health officer. Where a health officer receives no salary, the people very naturally think his services are worth just what he gets. Aside from the fact that the health officer gets no credit for philanthropy, which is a small thing, his work is thereby rendered of little value to the people and to the State, which is a very important thing. Even ministers of the gospel, followers of the meek and lowly Savior, do not labor for nothing, and I most earnestly protest against physicians serving the State free of charge. I have just noticed in a recent medical journal that a well-known surgeon of Philadelphia has declined to serve as consulting surgeon to a State hospital for the reason that he thinks physicians ought not to serve the State gratuitously. All honor to Dr. John B. Deavor, and may his example be widely followed. It is a small thing to ask doctors to make reports of contagious or infectious diseases for the benefit of a community, and very few physicians object to making such reports free of charge; at the same time it is rank imposition to frame laws making such services compulsory, and the supreme court of Illinois has recently decided that doctors can not be compelled to make such reports without compensation. In Pennsylvania the State prescribes the duties of health officers, and imposes the pains and penalties attaching to non-performance of those duties; such being the case, it is clearly the duty of the State to fix the salaries of these officers and see that they are paid; and this same plan should extend to townships. Every township in the State should have a board of health, or at least a health officer, and the State should fix the salary and in case of a board, of the secretary as well. The salaries should be small, but even in small townships, where a salary of not more than \$25 or \$50 a year would be paid, it would be easy to find good men willing to serve who would do their duty faithfully and well.

So long as the old plan is followed of no pay but curses, it will be found almost if not quite impossible to get men, especially in townships, to take any interest in public health problems, or to give such matters any efficient support. Large cities may be trusted to attend to the administration of health laws, but outside of cities the State should control and should fix the salary of every health officer and inspector and every secretary of a board of health, at a rate proportioned to the number of inhabitants in the territory covered by such official.

In the State of Pennsylvania a few years ago the State authorities printed, by order of the legislature, a bird book which was of no use to man, woman or

child, at an expense of about \$40,000. Every session the State votes hundreds of thousands of dollars to city hospitals, sufficient, one would think in some cases, to pay all legitimate expenses of the hospitals which pay, in most instances, nothing for medical services, yet a patient from outside the city can not be accommodated in any of them for a sum less than is amply sufficient to pay all expenses incident to the care of such patient while in the hospital. Why does money flow so easily for such purposes? The answer in each case is the same. The publisher or editor of the bird book and the managers of the hospitals each have a "pull."

Shall we not take a hint from this state of affairs? We have talked and reasoned with our legislators, we have explained the benefits to be derived by the people from a more liberal expenditure in the public health department, we have treated our lawmakers as gentlemen, and we get \$2,500 per year for expenses, scientific investigation, protection of water supplies, etc.

Now, in the writer's opinion, it is time to adopt a different plan. If we must adopt the methods of the politician in order to obtain anything from the State, then let us even do so and "fight the devil with fire." We all have friends who help make the laws; let us say nothing to them about benefits for the people, let us not appeal to reason or say anything concerning moral obligation. Let us say: "I am a friend of yours; I have voted the straight party ticket, lo, these many years; I supported you for school director and also for the Assembly. I carried a torch in the illustrated parade; I howled and hooted and yelled when the news came that you were elected, but now times have changed; I intend to fight your nomination in the caucus, or, if you should be nominated, to work against you at the polls, and get all the friends I can influence to do the same thing, unless you will promise to favor honestly and heartily an appropriation large enough to pay all health officers, inspectors and secretaries of health boards in the State, and also to pay for physicians' reports and to carry on scientific investigations as may be thought necessary or desirable by the State Board of Health, unless you show something like the liberality in providing means for preventing disease that you show in supporting hospitals and publishing bird books. If you promise to do this I will work for you in season and out of season; but it will not be enough for you to introduce a bill of this nature, or get some one else to introduce it, and then lay it under the table; you must work for the bill and work hard." Such a course is not a pleasant one to follow, but I confess I can see no other way that offers any reasonable hope of success. I am positive that we can never hope to have health boards in every township until we pay for the service rendered, and I am equally positive that were it possible to have a health officer in every township serving gratuitously, the benefits derived from such service would be infinitesimal as compared with that which would be received in case each health officer received a salary. Salaries should be made small enough to keep the office out of politics where it is possible to do so, but even a nominal salary tends to preserve the officer's self-respect and enhance his importance in the eyes of the public. That physicians will labor solely for love of humanity, work against their own interests to prevent sickness and do it without remuneration, the public will not believe, and such services are, in the end, of questionable utility.

It is the duty of every good citizen to preserve order and to suppress rioting or any public violation of the laws of the commonwealth, but such action is invariably left to the executive officers of the municipality or government, who are paid for performing those functions. I have looked the matter over carefully and I fail to find the slightest justification, the faintest shadow of a reason why the physician should serve the State gratuitously in any capacity. There is no class of men who give so much to the worthy poor ungrudgingly, there is no class who are so imposed upon and defrauded of their just dues as physicians, and it is time we refused to allow the State to add anything whatever to the sum total of the impositions we already suffer from individuals. In the way of public sanitation the Legislature of Pennsylvania has next to nothing to be proud of; but in coming generations, when our bones are dust, when the people understand fully the value, the immense benefits accruing to the State from public sanitary control and all that pertains to the functions of a State Board of Health; when our Christian civilization, so-called, shall present fewer elements of barbarism, when the true spirit of Christ is abroad in the land, and men who save lives are considered the heroes, then will the name of one physician stand high on the roll of honor as a public benefactor, as the founder and father of the State Board of Health of Pennsylvania, and the letters of that name, when written in order, will spell BENJAMIN LEE.

In preparing a paper on this subject to be read before this body, I have not thought it desirable to take up your time with an exposition of the reasons for advocating the establishment of health boards in townships, reasons which are patent to you all.

We ought to be and we are heartily ashamed of the position our State occupies on this question. Still, it is sometimes a good plan to air one's dirty linen in public, to the end that when the housewife learns that such a condition has become a matter of public notoriety, she may perchance reform.

SHOULD THE STATE PROVIDE HOSPITALS FOR THE TUBERCULOUS POOR?

Read in the Section on State Medicine, at the Forty-seventh Annual Meeting of the American Medical Association, at Atlanta, Ga., May 5-8, 1896.

BY J. F. JENKINS, M.D.

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Tuberculosis prevails in almost every region of the habitable globe. It is the most destructive of all the contagious diseases, requiring no new proofs at the present to establish the fact of its contagious character. To control the spread of tuberculosis, which stealthily enters into so many households in every community, is a problem which our profession is called upon for solution.

Pulmonary tuberculosis is so insidious in its nature, so slow in its evolution, so chronic in its course, frequently requiring months for its development, while its duration may extend over many years. From its incipency to its termination the tuberculous patient is a menace to society, and although the subject of the disease neither excites public attention nor alarm, still he is more dangerous to the community than the leper, whom society abhors, or Asiatic cholera, which is feared by mankind everywhere.

We are well aware of the fact that many wealthy patients, or those of moderate means, may prolong

life and a certain percentage regain their former health by a residence in a suitable climate, or they may undergo treatment at their homes without endangering the public health; but there is a large class in every community without means, and with bad hygienic surroundings; this dependent class should be provided by the State with proper treatment, and the public protected by having the tuberculous poor conveyed to a hospital for consumptives, because it is this class of patients that spread the disease in all directions.

In the rural sections of the country these dependents frequently occupy hovels, while in cities they are the denizens of tenement houses, cellars and garrets, which are usually almost destitute of light and air, deluged in filth, and surrounded by abject poverty. In this position tuberculous patients are the disseminators of the bacilli, sowing the seed in the well prepared soil which has been so richly fertilized by their insanitary surroundings. In the condition above described it is impossible for them to secure the treatment that humanity dictates, for temporary aid is almost valueless, principally from the fact that the disease is essentially chronic. The alternating hopes and fears of a dependent family constantly come under our observation; frequently a father with a half dozen children depending upon him, a mother or son, the only support of a family, is stricken down with this inveterate disease, which is so graphically described in the following lines by the pen of Dickens in the death of Smike:

"There is a dread disease which so prepares its victims, as it were, for death; which so refines it of its grosser aspect, and throws around familiar looks unearthly indications of the coming change—a dread disease, in which the struggle between soul and body is so gradual, quiet and solemn, and the result so sure, that day by day and grain by grain the mortal part wastes and withers away so that the spirit grows light and sanguine with its lightening load, and feeling immortality at hand, deems it but a new term of mortal life; a disease in which death and life are so strangely blended that death takes the glow of life and life the gaunt and grizzly form of death."

From the shores of the Great Lakes to the Gulf of Mexico, and from the Atlantic to the Pacific Ocean, wherever towns and cities are built, there will be found special or general hospitals, and even the few lepers within this wide domain are either segregated, or are carefully provided with lazarettos, but for the "great white plague," consumption, which carries off one-seventh of the human race, scarcely a beginning has been made in the way of building and maintaining hospitals for their accommodation.

Our country is far behind England and Germany in providing hospitals for the treatment of consumptives, and it will be well for us to look over the field, in order to ascertain what has been done abroad and what may be done at home to stamp out a disease which is more destructive to the youth of our land than war itself; and when we place a commercial value on human life the aggregate annual loss would amount to many millions of dollars.

Over a century ago England began building hospitals for consumptives, and at present there are eighteen hospitals containing over seven thousand free beds for tuberculous patients, the result of which has been to materially lessen the death rate from pulmonary tuberculosis in that country.