

astic tuberculosis workers in this country, the mission of sanatoria is very manifold:

1. Removal of a tuberculous patient to a sanatorium means the removal of a center of infection, which may claim sooner or later many lives.

2. A sanatorium gives the best chance of cure, particularly to the patient in the first stage.

3. The consumptive learns to live right and on his discharge is the most earnest propagator of the ideas of right living.

4. It trains physicians in the methods of early recognition of tuberculosis and the only rational method of treatment of this disease.

5. It teaches the gospel of a closer communion with nature and orderly life, which means a sturdier citizenship, freed from all kinds of disease due to overcrowding, filth and contaminated air.

Under ordinary conditions the regular mode of life of the Jew, his abstinence from alcohol, etc., protect him to a considerable extent against the ravages of tuberculosis. The diabolical persecution by certain European governments, with its attendant lack of opportunity to earn a livelihood, constant anxiety, frequently starvation—have undermined to a great extent his resistance to this disease. Thus, we witness at present a greater prevalence of tuberculosis among the Jewish masses than ever before; this has reference also to the acute type of the disease, "quick consumption," infrequent among Jews under normal conditions. at present claiming numerous victims in every large city. It is our sacred duty to provide better housing conditions and suitable occupations for our immigrant class.

The physical make-up of our brother citizen is one of our greatest concerns. Among all agencies helping to build a healthy citizen, be that a settlement, a city homes association, an agricultural colony, etc., a sanatorium occupies a prominent place. Its influence reaches far beyond the consumptive himself; it stands as an exposition of a right kind of living. The Jewish Charities of every large city have provided bountifully for the treatment of every kind of disease.

Is it not about time to extend a helping hand to the poor consumptive by building local sanatoria in every large city?

THE CARE OF ADVANCED CASES OF PULMONARY TUBERCULOSIS.

A PLEA FOR SCIENTIFIC, PRACTICAL AND HUMANE METHODS OF ERADICATING THE WHITE PLAGUE.

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The crusade against contagious diseases in general, and against pulmonary tuberculosis in particular assumes with each succeeding year a more definite form. From the survey of the voluminous literature on the subject of tuberculosis, two uncontrovertible facts have been established: First, that tuberculosis is an infectious disease, and, second, that tuberculosis is a curable disease. The solution of the problem must be reached, therefore, through two avenues: First, in so far as it is infectious, how can it be prevented, and, second, in so far as it is curable, what are the best methods to be pursued. There are two distinct ways; the one does not include the other.

The crusade against tuberculosis, as I understand its meaning, and purport, does not occupy itself with the cure of the disease, but it copes with the greater and more important problem, that of preventive medicine. It undertook the task of checking the spread of the disease, with a view of eventually exterminating it from the face of the earth.

It took more than twenty-five years to elaborate the method of combating tuberculosis, and yet more than three thousand years ago, the method of combating infectious diseases was laid down in such lucid and clear terms that one is amazed at the stupidity of being obliged to call our ignorance "civilization," sluggish thinking "progress," and the doling of alms "charity."

"Let us bring the book and see," as the Talmudists were wont to say. Open the book of Leviticus, Chapter XIII. Moses handled the crusade against infectious diseases thus: "If a man

shall have in the skin of his flesh a swelling, a rising, or a bright spot" which *might* develop into an infectious disease, then he shall be brought for an examination before an expert health officer—a priest. If the symptoms are obscure and lack definiteness, the suspected man shall be quarantined, and be re-examined at intervals of seven days until a final diagnosis is reached. Should the symptoms warrant the diagnosis of an infection, "the priest shall pronounce him unclean. . . . And he on whom the plague is— . . . shall cover himself to his upper lip and 'unclean, unclean' shall he call out. All the days whereon the plague which rendereth unclean is on him, he shall be unclean; alone shall he dwell, *without the camp* shall his habitation be."

Thus spake the great law-giver!

The theory that certain diseases are "unclean," which was enunciated centuries ago, has, after three decades of hesitation, at last been accepted, and we now gleefully pride ourselves that we are, forsooth, really and truly, a civilized race. The practice, however, that one thus afflicted shall be removed from his surroundings, so as not to be a menace to the community, "alone shall he dwell; *without the camp* shall his habitation be," this social prophylactic measure has not as yet been fully understood, nor thoroughly recognized.

The work that is now being carried on throughout the so-called "civilized" world will remain merely an abortive attempt at eradicating the evil, as long as the rules and regulations laid down by the Mosaic law are not fulfilled to the letter.

Let us briefly review the lesson we learned about tuberculosis:

Tuberculosis is an infectious disease. But not all tubercular patients are a menace to the community. Tuberculosis of the glands of the neck, of the spine, of the hip and knee-joints, etc., are perfectly harmless. They do not sow the seeds of tuberculosis, because the tubercle bacilli are locked up in the body and cannot come in contact with the outer world. Such cases are called "closed" tuberculosis.

Tuberculosis of the lungs and throat does not become a source of infection, until cough and expectoration appear. It is only when the sputum, loaded with tubercle bacilli, comes to the surface and in contact with the internal organs of another human

being that it becomes dangerous. Such cases are called "open" tuberculosis.

But even cases of open tuberculosis differ in their degree of infectious virulence. Men and women in the incipient stage of the disease, those of cleanly habits and who are able to take care of themselves are perfectly harmless. I would prefer as a companion an intelligent consumptive to a Hercules of dirty habits. The most dangerous patients, however, are those who are ignorant of the rudiments of personal hygiene, or who have reached such an advanced stage of the disease, when through weakness and exhaustion they have become helpless, and are unable to take care of their expectoration. We must remember that the danger of tuberculosis lurks not alone in the expectorated solid sputum, but also in the tiny, almost microscopic droplets which are showered all around during violent coughing, and even during the process of articulation.

Now, viewing the question of tuberculosis from the above standpoint, which is the standpoint accepted by all students of tuberculosis, let us see what method do the modern crusaders pursue in their efforts to exterminate tuberculosis from the face of the earth. While they provide sanatoria and hospitals for incipient cases, for such who do not spread contagion at all, or whose liability to spread the disease is but infinitesimal, they permit the advanced cases—open tuberculosis, the source and fountain head of all contagion—to continue the work of wholesale destruction. Such a method, ladies and gentlemen, is scientifically absurd, practically futile, and morally brutal.

The war cry of the physician and the sanitarian is: "Remove the cause." I shall not speak of the predisposing cause—poverty. Let the sociologist grapple with this problem. The direct cause of every case of tuberculosis is a preceding advanced case; and, therefore, it is evident that the cure of an incipient case is tantamount to removing the effect, which is not scientific.

That we cannot hope to diminish or even check the spread of tuberculosis while harboring the advanced cases in our midst, is such a self-evident truth, that all our efforts hitherto made in building hospitals and sanatoria for incipient cases are practically futile.

And, since from a psychological standpoint, the sympathy of normally constituted human beings is in direct ratio to the intensity of the suffering they witness—the greater the suffering the greater the sympathy it arouses, the more the helplessness the greater the pity it evokes—surely it is the advanced case, the man or woman who is racked with pain, shattered with cough, consumed with fever, a helpless living corpse, in short, the advanced case with all the horrors and tortures it represents, who should bring forth all our latent humane feeling, and, therefore, the decadent tendency of all modern sanatoria to help only those who can help themselves is brutal.

Had the contemplation of the mistakes made by groping humanity not been such a sad affair, the present movement to exterminate tuberculosis by such unscientific, unpractical and brutal methods would appear Quixotic—a sort of fighting the windmills.

The question of exterminating tuberculosis cannot be solved by cheap talk, sickly sentimentality, and fear of looking squarely into the face of truth. Especially cheap talk will not do it. If we cannot organize our campaign of crusade upon such a basis that eventually every advanced case "alone should dwell, without the camp shall his habitation be," if we cannot build sanatoria wherein the thousands upon thousands of advanced cases could be isolated and taken care of, we may just as well admit to ourselves that we are spending money, time and breath for no purpose.

Hear what Robert Koch said in his Nobel Lecture delivered at Stockholm, Nov. 12, 1905: "We must not hide from ourselves the fact that the crusade against tuberculosis requires money. In fact, the whole movement is a question of money. The more free beds there will be established for the consumptives, and the better the families of the afflicted will be taken care of at their homes, so that the sick may be free from worry as to the fate of their dear ones, the sooner will tuberculosis cease to be the disease of the masses."

Once the question of eradicating tuberculosis will be viewed from the above standpoint, namely, that *all advanced* cases must be isolated, I am optimist enough to entertain the hope, that the

means wherewith to carry on this work will be forthcoming. Tuberculosis although a disease of the poor masses, yet respects not the rich. With men in our midst who own millions which they cannot use up while living, nor save with them their children when stricken with the White Plague, it should not be at all a difficult matter to raise a fund of ten million dollars with which to place this movement upon a scientific, practical and humane basis. The poor cannot do it. The rich can and must do it. Not only do they owe it to the poor who have helped them to become rich, but they owe it to their own children whose welfare they must protect.

Permit me to cite an imaginary example: In a certain city there stand two institutions for combating tuberculosis: one erected by the munificence of the rich for taking care of incipient cases of tuberculosis, who present the least menace to the community wherein they dwell; the other institution, erected on the pennies of the poor for taking care of advanced cases of tuberculosis who are a constant menace to their fellows. One institution cures tuberculosis—a noble mission, no doubt. The other institution helps to exterminate the disease. Which of the two institutions is in the vanguard of the crusade against the White Plague, I leave to your wisdom to decide.

In conclusion I wish to say that the care of the advanced cases of pulmonary tuberculosis consists in isolation, and that you must not delude yourselves into the comfortable attitude of mind and soul that you are doing great things by helping incipient cases. You commenced at the wrong end. Read once more the Bible: "All the days whereon the plague which rendereth unclean is on him, he shall be unclean; alone shall he dwell; without the camp shall his habitation be."

THE PRESIDENT: The next paper—one postponed from yesterday—by Mr. Alfred Muller of Denver on "Sanatoria for Consumptives," in connection with the subject of the "Statistics of Institutional Management."