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[S. B. H. No. 264. 4M—3—16—'85.]

ILLINOIS STATE BOARD OF HEALTH.

OFFICE OF THE SECRETARY,
SPRINGFIELD, ILL., March 16, 1885.

IN FURTHERANCE of the plans of the BOARD with reference to the protection of the State against the threatened invasion of Asiatic cholera during the coming season, the following report of the proceedings of the Sanitary Council of the Mississippi Valley at its Seventh Annual Meeting, held in the city of New Orleans, March 10-11, is published for the information of local health authorities and others interested.

By order of the BOARD:

JOHN H. RAUCH,
Secretary.

MUSEUM OF HYGIENE,
Rec'd MAY 21 1885

SANITARY COUNCIL

OF THE

MISSISSIPPI VALLEY.

THE Seventh Annual Meeting of the SANITARY COUNCIL OF THE MISSISSIPPI VALLEY was held in the city of New Orleans on Tuesday and Wednesday, March 10th and 11th, 1885, at the rooms of the Louisiana State Board of Health, representatives from the following organizations being present:

ILLINOIS.—W. A. Haskell, M. D., W. R. McKenzie, M. D., State board of health; J. M. Hall, M. D., Chicago health department; R. E. Starkweather, M. D., Chicago medical society; J. L. Million, M. D., Springfield board of health; James E. Cowan, M. D., health commissioner, Galesburg; B. T. Buckley, M. D., health department, Freeport; A. N. Kimbrough, M. D., Vermilion county medical society; John H. Rauch, M. D., State board of health, Secretary of the COUNCIL.

IOWA.—W. S. Robertson, M. D., President state board of health; A. W. Cantwell, M. D., health commissioner, Davenport.

KENTUCKY.—Pinckney Thompson, M. D., president State board of health.

LOUISIANA.—Stanford E. Chaillé, M. D., National board of health; Joseph Holt, M. D., President State board of health; S. S. Herrick, M. D., secretary State board of health; Hon. A. W. Shakspeare, State board of health; Hon. Edward Fenner, president New Orleans auxiliary sanitary association; W. H. Watkins, M. D., sanitary director New Orleans auxiliary sanitary association; D. C. Holliday, M. D., New Orleans medical and surgical association; Gustavus Devron, M. D., Hon. T. G. Ryan, New Orleans city council.

MICHIGAN.—Henry F. Lyster, M. D., State board of health; R. C. Kedzie, M. D., American public health association.

MINNESOTA.—D. W. Hand, M. D., president State board of health.

MISSISSIPPI.—Howard P. Brisbane, M. D., health officer, Vicksburg.

OHIO.—Prof. Edward Orton, president State sanitary association; G. C. Ashmun, M. D. health officer, Cleveland; C. W. Rowland, health officer, Cincinnati; L. C. Carr, M. D., Cincinnati college of medicine and surgery.

TENNESSEE.—Daniel F. Wright, M. D., State board of health; Hon. David P. Hadden, president legislative council, Memphis, President of the COUNCIL.

WEST VIRGINIA.—L. D. Wilson, M. D., State board of health.

WISCONSIN.—K. Hoegh, M. D., State board of health; R. Martin, M. D., health commissioner, Milwaukee.

UNITED STATES NAVY.—A. C. Rhodes, M. D., medical director, U. S. N.

Before proceeding with the regular order of business, Dr. Joseph Holt, president of the Louisiana State Board of Health, welcomed the COUNCIL, on behalf of his Board and of the city of New Orleans, in the following address:

GENTLEMEN, THE DELEGATES OF THE SANITARY COUNCIL OF THE MISSISSIPPI VALLEY:—With unfeigned pleasure the Board of Health of the State of Louisiana welcomes you not only to our State and city, but

to the enjoyment of our most cordial hospitality here in the office of the Board itself, begging you to make this your rendezvous, where each one will find himself in a new house, but among old friends.

We do not tender this as an obligation to the strangers within our gates, nor are we in the formal relation of host to guests, but as members of one family we greet you. Identity of purpose, unity of spirit, together with the relationship of States, have made us kith and kin. There is not a feature but is possessed in common by us and declares the family likeness. Most conspicuously, we are the representatives, not of ourselves, not of personal theories, caprices, petty aspirations, nor of some friends at home, but of that great unit, the Mississippi Valley. We are the conservators of its public health, upon which the happiness and material prosperity of its teeming millions directly depend.

It is impossible for the mind to over-rate the magnitude of this question involving the maintenance of the public health. It radiates, divides and subdivides, until we find entangled in its meshes the most important interests of the State, the growth and prosperity of every city and hamlet, of every family, and the existence and happiness of every individual member thereof. Capital and labor are alike involved. When we think for a moment of ourselves as we truly are, the custodians of so great a trust as is confided in us, the conscience and judgment are bound to admit that any intrusion of self, whether from pride or the spirit of general combativeness, is inimical to the public welfare, and seems but little less than criminal selfishness and audacity.

The convocation of this Council was exceedingly wise—how else could we understand each other?—the first step toward mutual assistance. A very large majority of the controversies existing between men are brought about by misapprehension or a misinterpretation of the intentions of each other. We first become suspicious, then hostile. To remedy this is very simple: First, to feel assured, each of his own purity of heart and singleness of purpose, and then to credit our neighbors with the same virtues. A little plain, honest talk, and open, above-board dealing will wipe away all differences that ever have occurred or may occur.

And now, gentlemen, having welcomed you, let us have a little of this plain talk.

The Board of Health of the State of Louisiana recognizes not only its membership in this family council, but is sensible of the singularly important position it occupies, and of the responsibility resting upon it in its office as janitor at the gateway of the Valley of the Mississippi. Holding the most important sanitary outpost, perhaps, on this Continent, our responsibilities are not limited to the protec-

tion of New Orleans and Louisiana, but we hold also in trust the safety of the millions of people inhabiting the Interior.

We boldly maintain the principle of States' rights, but we fully recognize that our fellow-citizens of adjoining and interior States have natural rights in every question of protection which we are bound to respect, whether it be the invasion of a foreign enemy or a foreign pestilence. They have, too, a perfect equality with us in every question affecting commerce through the Mississippi and the Gulf. Our sentiments on this subject have already been published to the world. Holding the keys as janitor at the gateway of the great Valley of the Mississippi, Louisiana is compelled, by every obligation, to recognize the importance of her trust.

She can no longer bolt and double-bar these doors, six months out of the twelve, with an antiquated quarantine of detention, when through a scientific sanitation, it is optional to fling open the entry of this National highway, this inland sea, to the unobstructed ingress and egress of all who may apply. The interior States of this Continent have a natural right in every question touching the navigation of the Mississippi, from its head waters to the Gulf. They have a right to free pasturage in the commercial fields beyond. This claim is supreme, and one we must heartily allow.

We recognize other questions of right in this matter. Occupying the delta of the Mississippi, and therefore exceptionally exposed, it is, in our opinion, neither equitable nor proper that Louisiana should bear the entire brunt of expenditure in fending from our shores an invading fleet or an invading pestilence. As we are by no means the only ones who enjoy the security to life, the peaceful occupancy of our homes and the fruition of our labors by the successful repelling of such invasions, it is only fair that all concerned should alike contribute their full proportion of expense. It follows, therefore, that we have a right to call upon the National Government to aid us in warring against these common enemies, yellow fever and cholera. The Lousiana State Board of Health not only petitions, but demands this, as just and fair. As to the question of the channel through which such assistance shall be applied, we have perfect faith in the wisdom of the President of the United States.

We confide in the integrity, the sense of justice and soundness of judgment of the overwhelming majority of these States of the Mississippi Valley, represented in this Council to-day. We are now in line with you, gentlemen. When we were young in office we approached these questions not only with delicacy, but with fear. You were strangers to us, and we supected danger at every turn. Since that time free association with you has dispelled these doubts. The deep villain in a heavy tragedy has turned out, upon acquaintance,

a most agreeable gentlemen. Being afraid of you at first, we now consider you one of ourselves.

In the opinion of the Louisiana State Board of Health there is no reason why the most perfect harmony and unity of action, as we all have unity of purpose, should not exist at all times between these several elements composing this COUNCIL. In times of danger, as in times of actual disaster, so far from being opposed and wrangling over petty differences, we should be more solidly united. When it is our cue to fight we can draw a valiant sword and smite with it, but our line of interest is not in controversy, but in peace,

Delegates of the COUNCIL, I again bid you welcome.

At the conclusion of Dr. Holt's address the President of the COUNCIL, the Hon. D. P. Hadden, (Tenn.), assumed the chair, and the regular order of business was proceeded with.

The minutes of the Sixth Annual Meeting, held at Memphis, Tenn., March 21, 1884, were read and approved.

The Secretary presented the following annual report:

MR. PRESIDENT: It is a subject for congratulation that, during the interim since the last annual meeting of the COUNCIL, there has been nothing in the pubic-health conditions of the Valley necessitating action on the part of the Executive Committee or any of the officers.

The year has been a satisfactory one, in that it has been characterized by freedom from excitement or alarm with reference to the actual existence or threatening of the class of epidemic diseases with which the COUNCIL is especially concerned. It is true that the extension of Asiastic cholera from Egypt to Southern Europe, and its probable introduction into this country, awakened some apprehension during the summer and fall; and, as the members of the COUNCIL are aware, representatives of State boards of health and of municipal health organizations of the United States and Canada, together with the quarantine officers of many ports, assembled in conference upon this subject during the month of October in the city of St. Louis, and again at the National capital in December. The action had at these conferences has already been fully published in the public press and in the various medical and sanitary periodicals, so that the members are doubtless familiar with the matter, and it is only necessary here to allude to it.

Following the line of action hitherto pursued by the COUNCIL—that is, to be prepared for emergencies and to have a definite plan decided upon in advance—I have to suggest that a committee be appointed to formulate, and to report to this meeting, the measures which should be adopted and carried out by the COUNCIL in the event

that action becomes necessary through the appearance of Asiatic cholera at any point in the Valley.

The measures to be enforced in such case would include: 1) A prompt notification of the outbreak. 2) The local treatment of the outbreak. 3) Supervision of travel from the infected point.

Concerning the first of these there is little new to be said; but I think it desirable that specific instructions be prepared with reference to the local treatment of an outbreak, including the duties of the health authorities; the provision of hospital facilities, and of accommodations for those removed from infected buildings or localities; the action concerning water-supply; the subject of disinfection and disinfectants; the care of water-closets and privies, especially those belonging to public buildings, hotels, schools, factories, workshops, railway stations, etc.; the daily personal examination of those living in the vicinity of a cholera case, and the prompt treatment of diarrhea, cholerine or other suspicious symptoms among such; the securing of early reports of cases by the attending physician, and other details.

In my judgment, also, a cholera outbreak would demand an extension of the system of sanitary inspection and supervision to travel by rail as fully at least as the system has hitherto been applied to travel by water with reference to yellow fever. Owing to the mode of the diffusion of the cholera poison, and the greater magnitude of railway travel as compared with that by river, this is a matter of much importance. All cases of diarrhea or looseness of the bowels, among travelers, should be carefully and continuously watched, and the dejections be thoroughly disinfected. Water-closets and privies at railway stations should receive strict attention; and it is highly-desirable that the closets on passenger coaches should be so arranged as that every dejection may be disinfected before discharging it on the ground, to be possibly washed into a water-supply or to affect workmen on the track, etc., and thus extend the disease.

No train or boat should be allowed to proceed without being properly supplied with disinfectants and the ordinary cholera or diarrhea remedies, with plain, specific directions for their use and for the care and treatment of a cholera patient until a physician can be procured.

It has been suggested that the Council would do well to issue instructions to the public similar to its address on general sanitation in 1879, to be published in the newspapers and otherwise, respecting the measures, both public and personal, which should be adopted to prevent cholera and also to limit its ravages if once introduced. It is urged that such advice from the Council would be heeded and do good.

I would also suggest that a communication be addressed to the chairman of the Committee on Disinfectants, appointed at the meeting of the American Public Health Association, requesting that a plain, practical paper on disinfection and disinfectants, for popular use and distribution, be furnished to the executive committee of the Council, and that the committee be instructed to procure its immediate and widespread publication.

It is taken for granted that there will be entire harmony of action and the fullest co-operation possible between the various organizations represented in the Council. The Illinois State Board of Health is pushing a sanitary survey of the entire State, which, in the State outside of Chicago, will cover 330,000 houses. This is supplementing the work begun last July and continued until cold weather, It is hoped that by the middle of May this inspection will be finished and the sanitary defects and evils thereby disclosed will have been remedied, nuisances abated, and the whole State put in the best possible condition to resist cholera, yellow fever and all other epidemic contagious and infectious diseases.

A contingency appropriation of $85,000 has been asked for from the General Assembly now in session, to be used in quarantining, inspecting, disinfecting, caring for cases of epidemic and contagious diseases, etc., at twenty-four different points of entrance of important railroad lines along the eastern and southern boundary of the State, and at the necessary points on the Ohio and Mississippi rivers, as well as for defraying the expense of the necessary measures for preventing the spread of such diseases from point to point within the State, should they or any of them be introduced.

These two measures—the sanitary survey and the State quarantine—will, if successfully carried out, render Illinois practically independent of outside assistance or co-operation. Therefore it is conceived that the delegate representing that State Board of Health may, without offense, urge upon other representatives in the Council the necessity for such action as will insure the greatest measure of protection to the public health of the entire Valley. Her commercial interests, her geographical relations, and her position as the great entrepôt and distributing point for immigrants to all parts of the Valley, make the health conditions of every part of the country, from the St. Lawrence to the Rio Grande, matters of supreme importance to Illinois.

While protecting her own borders she is ready and willing to aid and co-operate with others, and to do, at least, her full share in protecting the health of the Valley. And, as already intimated, it is believed that such protection requires the formulation of a definite plan of action for the Council in the event that Asiatic cholera

makes its appearance in the country; popular instruction and information concerning the measures which should be at once instituted in order to prevent such introduction, or to limit its spread; the vigorous prosecution of these measures as soon and as long as the weather will permit; and guarantees from the representatives here present of concert of action and mutual co-operation on the part of their respective organizations, so as to inspire public confidence in the work of the COUNCIL and of health authorities everywhere throughout the Valley.

Such confidence is one of the most valuable factors in preventing an epidemic, especially a cholera epidemic, toward which fear is one of the most potent predisposing causes. As to the possible advent of yellow fever, I do not see that anything special need be said. What can be done has been already demonstrated, and the prospect of successfully dealing with the subject in the future is certainly as encouraging now as at any previous time. With the various State and local organizations co-operating in good faith, the protection of the public health in the Valley would seem fairly well assured—either by guarding against the introduction of foreign pestilences on the one hand, or by limiting their spread on the other.

All of which is respectfully submitted.

JOHN H. RAUCH, *Secretary.*

Dr. Pinckney Thompson (Ky.) moved that the Secretary's report be received and that a special committee, to consist of Drs. Kedzie (Mich.), Holt, (La.), Chaillé (N. B. H.), Rauch (Ill.) Robertson (Ia.), and the president, Hadden (Tenn.), be appointed to formulate an expression of the views of the COUNCIL concerning the measures necessary to the exclusion of Asiatic cholera and yellow fever from the Mississippi Valley, and the limitation of their spread should they be introduced. Adopted.

The Treasurer submitted his annual financial statement, which was received and referred to the Committee of Audit.

Dr. Rauch (Ill.) moved that the representatives of the State Boards of Health, members of the COUNCIL, submit statements of the precautionary measures being adopted in their several localities, and of the sanitary conditions prevailing. The motion was adopted, and the meeting adjourned to noon of Wednesday, the report of the special committee being made the special order of business for that hour.

WEDNESDAY, March 11. The COUNCIL met as per adjournment, present as before, and the following report was received:

MR. PRESIDENT:—The committee appointed by the SANITARY COUNCIL OF THE MISSISSIPPI VALLEY to formulate a system of concerted action by the States and municipalities represented in the COUNCIL, to prevent the introduction of foreign epidemics into the Valley, and to prevent their spread, if introduced, respectfully present the following report:

The ever-recurring danger of an irruption of yellow fever and the imminent danger of an incursion of Asiatic cholera from European ports, causes all eyes to turn with solicitude to the gateway of the Mississippi. New Orleans is the Thermopylæ of the Mississippi Valley. If sanitarians valiantly "hold the pass" all is secure beyond. Defect here means disaster to the imperial region drained by the Father of Waters.

The quarantine of simple detention has so far passed away that it now requires a mental effort to realize that it means forty days. Detention by itself is neither preventive nor curative.

Its period of duration cannot be fixed arbitrarily, but must be determined with reference to two objects:

1st.—Observation.

2d.—Sanitation.

Observation—to await the development of the particular contagium in those already, but not obviously, infected. As the time required for this development—the period of incubation—varies with the character of the disease, it is obvious that no uniform term can be set. A longer period of detention is required for yellow fever than for Asiatic cholera, and a still longer period for small-pox than for yellow fever.

Sanitation—including the cleansing, disinfection and sanitary treatment of ships, cargoes, passengers and crews. The sanitary treatment to be given a ship arriving from a foreign port will depend in a large degree upon its previous history as well as its present condition. For example, an old wooden vessel which had previously been infected with yellow fever would require more thorough and prolonged disinfectant treatment than a modern iron or steel hull steamer, on which the disease appears for the first time. The prodroma of cholera are sometimes so indefinite—what seems to be a simple diarrhea finally developing into, or causing, an attack of true cholera—that it is important to know whether the ship comes from a port where cholera prevails, before final decision is made in regard to danger from this disease.

It becomes, therefore, a matter of vital necessity that health officers shall receive early and full information of the existence of epidemic diseases, such as yellow fever, cholera and small-pox in the foreign ports in commercial relations with this country.

The Sanitary Council of the Mississippi Valley, earnestly petitions the honorable Secretary of State that he cause the consuls and consular agents of all ports from which ships clear for the United States, to furnish not only the usual information embraced in bills of health, but all particulars in regard to the existence of contagious, infectious or epidemic diseases, which may endanger the public health by importation through vessels reaching our shores.

The best method of quarantine should begin its work at the port of departure and be completed at the port of entry, to include approved methods of ship sanitation under competent authority, pending the voyage of a vessel from one port to another. The hazards of importation of infectious diseases would certainly be immensely reduced if there could be a guaranty that all vessels loading in foreign countries for ports in the United States are thoroughly cleansed and rendered non-infected before receiving their cargoes. Such a system of international sanitation, by preventing the shipment and exportation of disease, would insure safety and promote commerce.

The Sanitary Council regards the exclusion of all vessels unmistakably infected with cholera or yellow fever from the Mississippi river as vital to the safety of the West, South and Northwest. The Council, therefore, petitions the honorable Secretary of the Treasury to place a revenue cutter at the mouth of the Mississippi river to prevent the entrance of all such infected ships, and to send them to the Ship Island, or other, refuge, station, for quarantine and purification.

If, however, an infected vessel, or one suspected to be infected, enters the Mississippi river, the State Board of Health of Louisiana should remand such vessel to a station of detention and absolute isolation until all danger of the spread of the disease from ship, cargo, crew and passengers has been entirely removed; the ship to be thoroughly cleansed and disinfected; the cargo and baggage thoroughly disinfected, and the crew and passengers kept under observation until free from all suspicion of danger to the public health.

The Sanitary Council is gratified to learn that Congress has appropriated a sum of money to be placed in the hands of the President of the United States, to be used, in his discretion, in aid of State and local boards of health, in the event of an actual or threatened epidemic of cholera or yellow fever, in preventing the introduction and spread

of the same, and in maintaining inspections and quarantine at points of danger. Asiatic cholera threatens an incursion into the United States in the near future, and realizing—in the interests of life, health, and commarcial and industrial welfare—the vast importance of such preventive measures and adequate preparations for effective quarantine before the advent of foreign pestilences, so that they shall not come upon us defenseless and unprepared, the SANITARY COUNCIL respectfully but earnestly petitions the President of the United States to immediately convene the National Board of Health, and authorize its use of so much of the epidemic contingent fund as may be necessary for preparing, and promptly enforcing, a vigorous system of preventive measures in co-operation with, and in aid of State and local health organization, with especial reference to Asiatic cholera.

In the event of cholera or yellow fever, the first condition of concert of action among health officers is mutual confidence. This can be secured only by early, full and free information of all the essential facts at points of outbreak. To secure such information,

Be it resolved, That each and every health organization represented in this SANITARY COUNCIL hereby pledges itself to promptly furnish to every other organization all information in regard to the appearance of cholera and yellow fever, or suspicious cases of cholera or yellow fever.

The committee recommends that for the purpose indicated in the above resolution the following groups of symptoms shall be considered to indicate yellow fever and suspicious cases:

I. Groups of Symptoms which shall be Considered to indicate Yellow Fever.

Group 1.—A person, after a sudden attack, has a fever of one paroxysm, attended with marked congestion or blood stasis of capillaries of surface, conjunctivæ and gums, with a history of probable exposure to infection, and no history of a previous attack of yellow fever.

Group 2.—A person, after a sudden attack, has a fever of one paroxysm, followed by unusual prostration, albuminous urine, yellowness of conjunctivæ and skin, and having no positively authenticated history of a previous attack of yellow fever.

Group 3.—A person has a fever of one paroxysm, albuminous urine, black vomit, suppression of urine, general hemorrhagic tendency, under circumstances where exposure to infection is a possibility.

II. Suspicious Cases of Yellow Fever.

The following symptoms associated with a fever of one paroxysm, in a patient who has apparently been exposed to infection, and has never had yellow fever, shall be held to justify in either of the six following cases a suspicion of this disease, viz.:

1. Suddenness of attack, either with violent pain in the head and back, injected eyes and face, or with marked congestion of the superficial capillaries.
2. Want of that correlation between pulse and temperature usual to other forms of fever.
3. Albuminous urine.
4. Black vomit.
5. General hemorrhagic tendency.
6. Yellowness of the skin.

The following cases shall also be deemed suspicious:

7. Any case respecting which reputable and experienced physicians disagree as to whether the disease is or is not yellow fever.
8. Any case respecting which efforts are made to conceal its existence, full history and true nature.

In the event of death of a suspicious case a post-mortem examination should be made when practicable. Both before and after death, yellow fever is especially and pre-eminently characterized by the fact that it is, par excellence, a hemorrhagic fever, marked by capillary congestion and its sequelæ; hence post-mortem evidence of a general hemorrhagic tendency in internal organs, especially in the digestive, in preference to the urinary tract, shall be held to confirm the suspicion.

The following conditions shall be held to justify a suspicion of Asiatic cholera, and to require from sanitary authorities the same preventive treatment as if known to be cholera:

1. Any case of disease resembling cholera and attended with "rice-water evacuations," shall be reported and treated either as cholera or as a suspicious case.
2. Any case respecting which reputable and experienced physicians may disagree as to whether the disease is true Asiatic cholera or not, shall be reported and treated as suspicious.
3. Any case rumored to be cholera, and respecting which efforts are made to conceal its existence, full history and true nature, shall be reported and treated as suspicious.
4. Any notable and exceptional increase in the number of cases of, and of deaths by, such bowel disorders as cholera morbus and diarrhea, shall be promptly reported.

Concerning the sanitary supervision of commercial and personal intercourse during the existence of cholera or yellow fever, the committee recommends a revision and modification of the rules and regulations which have governed the inspection service in the Valley during the past six years—such revision and modification to be made for the purpose of embracing the contingencies and the special features of Asiatic cholera, as well as of yellow fever.

Your committee further recommends that a special committee of three members be appointed, to prepare an address on General Sanitation, and the details of precautionary measures for the prevention of epidemic diseases, and especially of Asiatic cholera, together with such revision of the rules and regulations above referred to as may be deemed necessary—with power to publish in behalf of the Sanitary Council.

All of which is respectfully submitted.

R. C. Kedzie, *Michigan.*
S. E. Chaille, *N. B. H.*
W. S. Robertson, *Iowa.*
David P. Hadden, *Tennessee.*
John H. Rauch, *Illinois.*
Joseph Holt, *Louisiana.*

The report was received, adopted as a whole, and ordered published as the report of the Council.

During the discussion which ensued upon the reading of the report, the Secretary read the following telegram which he had received the day previous:

CHICAGO, March 10.—Dr. John H. Rauch, New Orleans; Official reports showed cholera present in Paris constantly up to the time I left, January 20, though very cold and snowy. Think it well to be on the alert. Sorry I returned too late to be with you.
CHARLES W. PURDY.

Dr. Hand (Minn.) moved that the various petitions to the President of the United States, and to the Secretary of State and Secretary of the Treasury, recommended in the report of the special committee, be prepared and forwarded by the Secretary. Carried.

Dr. Kedzie (Mich.) moved that Drs. Rauch (Ill.), Holt (La.), and Thompson (Ky.) be appointed as the committee to prepare the address on General Sanitation. Carried.

On motion of Dr. Chaillé (La.) the following resolution was adopted:

Resolved, That the Secretary request from the chairman of the Committee on Disinfectants, appointed at the last meeting of the American Public Health Association, a plain, practical paper on disinfection and disinfectants, for popular use and distribution, to be furnished to the chairman of the special committee on General Sanitation.

On motion of Dr. Thompson (Ky.) it was resolved that the various State boards of health, represented in the COUNCIL express to the President of the United States their views as to the employment of the contingent fund recently appropriated by the National Congress for sanitary purposes, and that this action of the COUNCIL be transmitted to the various boards.

The various States represented in the COUNCIL were then called upon to furnish the meeting, through their delegates, with a report of the sanitary work being performed by them.

Dr. Holt, representing Louisiana, spoke of the excellent health of New Orleans at present, and the perfect accord with which the various sanitary associations are working.

Dr. Devron said New Orleans was fully awake as to its duty in sanitary questions, and as a member of the city council he was pleased to say that he concurred with Dr. Holt as to the perfect accord of the Council, Board of Health and Auxiliary Sanitary Association. He reviewed the various large sums expended by the city for levees, draining-machines and dredge-boats, and assured the COUNCIL that should an epidemic threaten the city the authorities would, with the State Board of Health and Sanitary Association, find the neccessary funds to stamp it out.

The Hon. Edward Fenner, President of the New Orleans Auxiliary Sanitary Association, supplemented the statements of Drs. Holt and

Devron, with the following resumé of the history, objects and operations of that organization :—

MR. PRESIDENT AND GENTLEMEN OF THE SANITARY COUNCIL: As I remember the resolution adopted by your body yesterday, calling upon representatives of boards of health to submit statements of the measures being adopted in their several localities and the sanitary conditions prevailing, the words "and other health organizations," were included. Whether I am correct or not, my past experience, as an old member of your COUNCIL, assures me that a report from the New Orleans Auxiliary Sanitary Association will not be considered obtrusive.

This Association, which I have the honor to represent, is a voluntary body organized under the laws of Louisiana in the year 1879. Its members and contributors number several thousands of the most intelligent and progressive citizens of New Orleans. Its corporate powers are vested in an Executive Committee composed of fifteen members elected annually. Said committee, at its annual meeting, elects a President, nine Vice Presidents, a Treasurer, Sanitary Director, Secretary and Corresponding Secretary.

The purposes of the corporation are the execution of such measures as may be necessary for the preservation of life and the public health, and to prevent the introduction or spread of disease; and to these ends to adopt systematic measures for the collection and proper distribution of money or property derived from voluntary subscription, or otherwise, in such manner as will tend to preserve life and property, and promote the prosperity and health of New Orleans.

The functions, powers and responsibilities of two of the most important officers of the Association are thus defined:

"The duty of the Treasurer shall be to take charge of the funds of the Association, to appropriate the same as directed by the Executive Committee; to keep fair and regular accounts, subject at all times to investigation by order of the Association or Executive Committee, to exhibit the same at the annual meeting, together with a statement of the funds in his possession; and he shall give satisfactory security, to be approved by the Executive Committee and the President, for the faithful performance of his trust.

"The Sanitary Director of this Association shall have power,

"1st. To appoint, remove, and direct all sanitary officers and their subordinate employés, who shall obey and execute his orders, and report all their acts to the Executive Committee through the office of the Medical Director; such appointments, removals, acts and orders shall be subject to the approval of the Executive Committee.

"2d. To prescribe and execute measures of inspection and auxiliary precaution against the introduction or dissemination of infectious or contagous disease.

"3d. It shall be his duty to make an estimate of the amount necessary monthly for the payment of the salary and wages of the officers and their subordinates, for the purchase of materials and implements, as also of any extra service or labor, incidentally necessary for performing the duties of inspection. He shall present the bills for such estimate, together with the requisition for the payment thereof, to the Finance Committee, who shall audit such bills and estimates before payment thereof.

"4th. To visit all vessels and other vehicles, buildings, or other places in which cases or symptoms of infectious or contagious disease may have manifested themselves, and to adopt such immediate measures not incompatible with the corporate powers and obligations of this Association, as may be proper to prevent the introduction or arrest the spread of such disease.

"5th. To report at least weekly to the Executive Committee the communications he may have received, the business he may have transacted, with such other matters as may in his opinion require the consideration of the Committee, with such professional advice as may appear to him pertinent to the object of this Association."

This cursory review of our organization I deem necessary for the information of those who who have but recently become members of the SANITARY COUNCIL OF THE MISSISSIPPI VALLEY. I will not encroach upon your valuable time by relating the work that has been done by the Sanitary Association, a very important part of which has been educational, in that it has brought the public mind, as never before, to consider the imperative necessity and the inestimable value of sanitation as a preventive measure. Our Association, composed as it is in greater part of laymen, derives, as you may suppose, the inspiration which directs its efforts from the Medical Director, and, it gives me the greatest pleasure to add, from the medical faculty of New Orleans

and elsewhere. At times such intelligent and purely disinterested support has contributed in no small degree to re-animate not only the working members, but those citizens who, perhaps very naturally, are prone to think that six years of warfare against filth and all other promoting causes of disease must by this time have accomplished the object of our organization, and should render any further efforts or expenditures of money unnecessary. We, however, the working members, who have devoted these six years to the study of the means best adapted to banish for all time at least one ruinous disease from this locality, know but too well that the price of exemption is constant, unremitting vigilance—it may be for years to come—and firm, intelligent persistence in sanitary reform.

Death and removal from the city have deprived us of several active members, whom, strive as we may, we can never replace. With those exceptions the Sanitary Association exists to-day as when first organized. The same men who gathered together in the dark days of 1879 to reclaim, with the aid of our intelligent citizens, the lost reputation of New Orleans, have not failed to devote much of their valuable time for the best interests of all.

For six years the Sanitary Association has earnestly striven to improve the sanitary condition of the city. Large sums of money, the voluntary contributions of citizens, have been expended in permanent sanitary works, and in aid of the present State board of health, to stamp out small-pox, which, in the winters of 1882-3-4, had increased to epidemic proportions. This the State board has most effectually done. To-day there is not a known case of small pox in New Orleans. Our relations with the present State board of health are most friendly. We have the fullest confidence in the intelligence, the scientific methods and firm purpose of its members.

Should extraordinary causes compel our Association to come to the aid of our State board, as was the case last year, no human efforts will be left untried on our part to do so. And in conclusion, furthermore, let me assure you that an urgent call upon our citizens will not prove—it never has—in vain.

Dr. Rauch of Illinois, referring to the passage in his annual report as Secretary of the Council in which he had already outlined the work being done in his State, said that since his arrival in New Orleans he had received a telegram from Senator Cullom in Washington, stating that Congress had appropriated $340,000 as a contingent epidemic fund, and had made a deficiency appropriation to cover the expenses of the National Board of Health for the past year, as well as a regular appropriation for its maintenance during the current year. He had little doubt that the President would select the National Board as the agency through which to administer the contingent fund, and believed the history of the Board justified the expectation that it would pursue, if so selected, the same judicious and efficient system, in its relations with State and local boards of health, as it had in the past. He was further re-assured by the tone and temper of the present meeting of the Sanitary Council. It was obvious that much efficient sanitary work was being prosecuted throughout the entire Valley. The spirit of harmony which prevailed among the various organizations represented—and, without being invidious, he might refer to the present attitude of the Board whose guests in some measure they were—and the evident intent to heartily co-operate and aid each other in fighting the common enemy, inspired a feeling of confidence and security which was very gratifying.

These various considerations would cause him to modify his estimate of the contingency appropriation asked from the General Assembly of his State. With the co-operation and aid of the National Board of Health, with the individual effort of communities in pushing local sanitation, and with the concert of action of the various members of the COUNCIL, the burden, responsibility and expense of every State would be materially diminished. Meanwhile, he felt assured that the work of preparation would be vigorously prosecuted throughout the whole extent of his State.

Dr. Hand, of Minnesota, said that during the past year, they had had no active epidemic to contend with in Minnesota, and had devoted their attention largely to the education of the public mind, by means of printed circulars on sanitation and public-health conferences, as to the duties of citizens generally in regard to the prevention and spread of disease. "We have directed attention particularly to the water-supply of towns and cities, and are glad to find the people are becoming anxious on that subject.

"While no epidemics have prevailed, we have been greatly distressed by frequent sporadic outbreaks of diphtheria in many parts of the State. A committee of our Board has, for a long time, been studying that disease, but the only practical observation yet made is the fact of the disease nearly always arising from contagion. In consequence, we insist on rigid isolation and quarantine whenever it is practicable.

"In relation to the approaching cholera epidemic, our Board has been in close communication with the Secretary of the Illinois State Board of Health and the health officer of Chicago, as through their domain we may look for greatest trouble. The assurance of vigorous action on their part is a safeguard in itself.

"We have issued a circular-letter to all town authorities throughout the State, instructing them as to the necessity for a thorough cleaning-up this spring., and, so far as possible, a general sanitary survey, so that they may be prepared to meet, under the best attainable conditions, any case of cholera that may occur. Instructions to the people at large will only be issued when the epidemic has appeared on this side of the ocean.

"The Legislature which adjourned on Friday last, appropriated as an epidemic fund $15,000, to be expended by our Board and the Governor, and has shown great interest in the work we are doing. The Legislature also passed a number of bills looking to better sanitation throughout the State. One of these requires the organization of local boards of health in every town, village, borough and city, and specifies the organization and functions of such boards;

it also provides the method of paying expenses incurred by such boards of health in the control of infectious disease.

"Another law is intended to prevent the pollution of rivers and other sources of water-supply, by giving to the State Board of Health general supervision of the same, providing for methods of procedure under the act and for enforcing the orders of the Board, subject to appeal to the district courts. Another regulates offensive trades, by giving to the State and local boards of health control of the same, as affecting health. A bill was also passed to prevent the spead of contagious diseases among cattle.

"Altogether, we feel that there has been great improvement in the general understanding of sanitary matters in our State, and we are gratified that the Legislature so readily adopted our suggestions."

Prof. Orton, of Ohio, said his State had no board of health, but a number of physicians of the State have formed the Ohio State Sanitary Association. Ohio, however, has a rapidly growing interest in sanitary necessities, and much attention is given to them by the people at large.

C. W. Rowland, health officer of Cincinnati, said he concurred with the Professor. The State has given certain power to local boards which exist, but the power is not sufficient, and the local boards are seeking more. He then gave the Council an account of the workings of the local board of health in Cincinnati. Nothing was discouraging in the sanitary condition of the city except the want of funds. The board, however, is prepared for any advent of cholera.

Dr. Ashmun, health officer of Cleveland, said a board of health has been in existence there since 1873. Very little work was done during the past winter owing to the excessive cold. The board, though, has made a thorough house-to-house inspection.

Dr. Wright, of Tennessee, said his State Board of Health could inspect, report, and advise, but had no power to act. He showed, however, how, in an indirect way, the Board had performed some very good work and obtained excellent results, especially as to vaccination.

Col. Hadden, president of the Legislative Conncil of Memphis, corroborated what was said by Dr. Wright. He spoke of the incomplete laws of the State as to vaccination and other sanitary measures, which are not compulsory. He thought, however, that the sentiment of the people was changing. He gave a long history of the sanitary system of Memphis, which, he said, was now perfect.

Dr. Lyster, of Michigan, gave a history of the workings of the Michigan State Board of Health since its organization in 1873. The

nature of the work has been chiefly advisory, as the Board has very little power, but is constantly educating the people in sanitary measures, and the success in that direction has been marked.

Dr. Kedzie, also of Michigan, spoke of the importance of educating the people in sanitation. The work done by the State Board of Michigan was very efficient, and is continuously progressive.

Dr. Thompson of Kentucky, said, though somewhat handicapped by the want of money, the Kentucky State Board of Health had done some good work in the past few years. In his opinion, nothing was more profitable and beneficial than the education of the people in sanitary measures, and it proved more efficacious than labored articles of boards and councils which are sent to doctors, who discuss the questions among themselves.

He gave an account of the sanitary measures adopted in Bowling Green, and explained the powers of the council in that city ordering the enforcement of sanitary measures.

Dr. Hoegh, of Wisconsin, explained that his State Board had only advisory powers, but through it a large number of local boards had been formed. Every precaution has been taken for the possible appearance of cholera.

Dr. Martin, health commissioner of Milwaukee, spoke of the excellent drainage-system of that city and the improvements being made in the water-supply. The city is extremely healthy.

Dr. Wilson, of West Virginia, reported that the State Board in that State was thoroughly organized, with certain sanitary authority, and local boards had been established throughout the State, with authority in their various counties.

Dr. Robertson, of Iowa, said that his State has done some good work, and the State Board is interesting the local boards by circulars and other methods of instruction and information.

Dr. Brisbane, of Mississippi, presented to the Council a memorandum of the projected sanitary work of the city of Vicksburg.

At the conclusion of these reports, Dr. Thompson (Ky.) offered a resolution which was adopted, requesting all boards of health, sanitary associations and societies to at once resort to all possible means to give the widest publicity to information calculated to enable communities and individuals to protect themselves from an invasion of cholera, and from all those causes which tend to spread the disease after it has been introduced—which resolution was adopted.

The meeting then adjourned to 7 : 30 o'clock in the evening.

WEDNESDAY EVENING, March 11, 7:30 o'clock. At the evening session the following-named gentlemen were unanimously elected officers for the ensuing year:

PINCKNEY THOMPSON, M. D., of Henderson, Ky., President.
JOSEPH HOLT, M. D., of New Orleans, La., Vice President.
JOHN H. RAUCH., M. D., of Chicago, Ill., Secretary and Treasurer.
W. H. WATKINS, M. D., of New Orleans, La., Assistant Secretary.

Appropriate remarks were made by the newly-elected officers—the Secretary-elect unsuccessfully protesting against his re-election to a post which he had filled for six years, and which made demands upon his time and attention which he could illy afford.

Dr. Rauch (Ill.) moved that the various petitions, addresses, etc., called for in the report of the formulating committee be prepared and signed by the Executive Committee, consisting of the President, Vice President and Secretary. It was so ordered.

A resolution thanking the Illinois Central Railroad and all of its routes for favors extended to the COUNCIL, in furnishing transit to and from New Orleans, was adopted.

A resolution thanking Dr. Joseph Holt and the members of the Louisiana Board of Health and of the Auxiliary Sanitary Association, for courtesies shown the COUNCIL during its session, was adopted.

Thanks were also tendered Col. Hadden, President of the COUNCIL, for the able manner in which he had conducted the affairs of the COUNCIL as President.

On motion of Dr. Robertson, the thanks of the COUNCIL were tendered to the press of New Orleans for the faithful reports made of the meeting.

Dr. Holt spoke in flattering terms of the great interest always taken by the New Orleans press in the sanitary measures proposed, and the able manner in which these measures were treated by them. He, therefore, heartily indorsed the motion.

A vote of thanks was then tendered the Secretary, and the Seventh Annual Meeting of the COUNCIL was declared adjourned *sine die*.

[ADDENDUM.]

SANITARY COUNCIL OF THE MISSISSIPPI VALLEY.

OFFICE OF THE SECRETARY,
SPRINGFIELD, ILL., March 16, 1885.

GROVER CLEVELAND, *President of the United States.*

SIR: During the recent Seventh Annual Meeting of the SANITARY COUNCIL OF THE MISSISSIPPI VALLEY, held in the city of New Orleans, March 10–11, inst., the health organizations and commercial and transportation interests of twelve of the Valley States being represented, a special committee was appointed to formulate an expression of the views of the COUNCIL concerning the action necessary to be taken by municipalities, States and the General Government with reference to the imminent danger of an invasion of Asiatic cholera during the coming season. The report of this committee was unanimously adopted by the COUNCIL, and it was subsequently—

Resolved, That the Executive Committee be, and hereby is, instructed to forward to the President of the United States a copy of so much of the formulated views of the COUNCIL as relates to the use of the contingent epidemic fund and the National Board of Health.

In accordance with this instruction we have the honor to submit the following extract from the report as adopted by the COUNCIL:

The SANITARY COUNCIL is gratified to learn that Congress has appropriated a sum of money to be placed in the hands of the President of the United States, to be used in his discretion, in aid of State and local boards of health in the event of an actual or threatened epidemic of cholera or yellow fever, in preventing the introduction and spread of the same, and in maintaining inspections and quarantine at points of danger. Asiatic cholera threatens an incursion into the United States in the near future, and realizing—in the interests of life, health and commercial and industrial welfare—the vast importance of such preventive measures and adequate preparation for effective quarantine before the advent of foreign pestilences, so that they shall not come upon us defenseless and unprepared, the SANITARY COUNCIL respectfully and earnestly petitions the President of the United States to immediately convene the National Board of Health, and authorize its use of so much of the epidemic contingent fund as may be necessary for preparing and promptly enforcing a vigorous system of preventive measures in co-operation with, and in aid of, State and local health organizations, with especial reference to Asiatic cholera.

It is not believed that any argument on the merits of this request is necessary; but should Your Excellency desire such, the Committee will take pleasure in responding to an intimation to that effect.

Very respectfully,

Executive Com. Sanitary Council.

PINCKNEY THOMPSON, *President.*
(Kentucky State Board of Health.)

JOSEPH HOLT, *Vice President.*
(Louisiana State Board of Health.)

JOHN H. RAUCH, *Secretary.*
(Illinois State Board of Health.)