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(London Times, Aug. 16, 1912, p. 6.c)

## THE TUBERCULOSIS CAMPAIGN - 0 Sir William Osler's appeal.

(undated)

## To the Editor of the Times.

Sir: - May I ask the hospitality of your columns for a few remarks on three points on the tuberculosis question?

<u>i</u>. In any campaign, organization is the first essential, and in so complicated a struggle as that in which we are engaged, and which must extend over three or more generations, success or failure will depend on the character of the general staff of the army engaged.

We are fortunate in having in the Local Government Board an effective working machine dealing with public health, and at its head a man both sympathetic and intelligently enthusiastic in all that relates to tuberculosis. It is to be hoped that a comprehensive scheme may be laid down, on lines suggested by the Astor Committee, coordinating the various agencies - (a) At the head, departments of the Local Government Board, with, if it is possible, lay and professional representation. (b) Central institutions, in each of the three capitols, dealing with the educational, social service, and scientific aspects of the work. For research purposes it is to be desired that the energies should be concentrated in one large laboratory. (c) Dispensaries officered by trained men, whose work would be supervised directly from the central office. (d) Sanitoria and hospitals. (e) The general practitioners, medical officers of health, and nurses, who constitute the fighting units of the army. Coordination in the work of these factors is essential. Let me give an illustration of the kind of work needed at once.

All are agreed that the fighting line will centre about the dispensary. No provision exists for the training of their officers, who should have special instruction in methods of work, and particularly in diagnosis. The appointments will be well paid, and the public has the right to demand well trained men. It should be a duty of the general staff to arrange suitable courses at the dispensaries and special hospitals. In London it would be easy to arrange an attractive program utilizing the Brompton Hospital, the existing tuberculosis dispensaries, and the lister institute. In Edinburgh Dr. Philip and a few of the younger men at the Royal Infirmary could arrange courses for Scotland. The diagnosis of tuberculosis is often very difficult, mistakes are common, mistakes are going to cost money, and it will pay the public to demand that the men in charge of the dispensaries are thoroughly equipped for the work. To make provision for the training of this officers' corps should be the first duty of the tuberculosis sub-departments of the Local Government Board.

2. May I make an appeal to link when possible the tuberculosis work with existing hospitals and dispensaries? The scheme, as you emphasize in your editorial of the 7th ult., is a general one, over-reaching the provisions of the special clauses of the insurance act. Why dissociate this work from our general hospitals? Why ask them to cut off one-tenth of their patients? It will be an easy matter to arrange for the payment of insured persons, and it should not be difficult to attach the tuberculosis officer to the staff of the hospital. The advantages are: (a) many patients apply to the dispensary who

CUSAI7/114,39 2/2

(London Times, Aug. 16, 1912 - 2)

are not tuberculous and can be turned over promptly to the proper departments.

(b) Many cases of bone, gland, and other forms of local tuberculosis need surgical advice and treatment, which they can receive while attending the special dispensary. (c) Patients applying in other departments and found to be tuberculous are transferred at once. (d) Doubtful cases, many patients abdominal, gland, and bone disease, and early forms of pulmonary tuberculosis, may be admitted to the wards at once for observation. (e) It is an incalculable advantage to the tuberculosis officer to have affiliation with a general hospital. (f) For the sake of the public I should be sorry to see the members of the staffs of our general hospitals deprived of the opportunity of seeing so important a disease as tuberculosis.

And this plan works well. One of the most successful of existing tuberculosis dispensaries I was able to start, by the generosity of Mr. Henry Phipps, in connexion with the Johns Hopkins Hospital. It now forms an important part of a great medical school through which every student as a matter of routine passes as a clinical clerk. If for no other purpose than this, every general hospital with a medical school should have its tuberculosis department. The tuberculosis work of the Oxfordshire branch of the National Association has centred about the Radcliffe Infirmary, the treasurer, committee, and staff of which, with a commendable liberality, have not only given the dispensary accommodation, but have for the past two years set aside from twelve to twenty beds on the balconies for tuberculosis. Doctors, nurses and patients are all the better for this association.

3. Before any great outlay upon sanitoria, let us have the dispensaries in full working order, in which way alone, in each district, we can ascertain the cases needing home and shelter, sanitorium, and hospital treatment.

Let me conclude with an appeal for organization, for a general staff, which will control the government funds, direct the campaign, plan the education of doctors, nurses, and the public, organize research, and act as coordinating centres for the manifold activities engaged in the work.

Yours, &c.,

William Osler.