

CONTAGIOUS AND INFECTIOUS DISEASES.

MARCH 23, 1886.—Committed to the Committee of the Whole House on the state of the Union and ordered to be printed.

Mr. DAVIS, from the Committee on Commerce; submitted the following

R E P O R T :

[To accompany bill H. R. 4959.]

The Committee on Commerce, to whom was referred the bill (H. R. 4959) to prevent the introduction of contagious and infectious diseases into the United States, and to establish a bureau of public health, beg leave to submit the following report :

The importance of an organized public health service in connection with the General Government is generally conceded. Every civilized country has made such provision for the health and safety of its inhabitants. The necessities of modern life require such sanitary supervision.

The increase in population within recent times and its concentration in large communities, the rapid growth of commerce, and the largely increased communication between different countries and various portions of the same country, owing to the improved facilities for intercourse, have tended to diffuse more rapidly and generally the several forms of contagious, infectious, and epidemic diseases, and increase their danger and fatality.

It becomes important, therefore, that the facts relating to the nature of these diseases, and especially the laws of their dissemination, should be ascertained in order that proper and efficient measures of prevention may be adopted. Such diseases are not localized or limited by State lines. They spread rapidly and widely and become a national scourge, calling for national measures of relief.

The most alarming disease of modern times has repeatedly moved westward on its errand of death from its birthplace in Southeastern Asia across countries and continents, seas and ocean, and completed its course upon this hemisphere, and hereafter, with the increased communication between our western coast and the islands of the Pacific, it will probably encircle the globe in its fatal journey.

Yellow fever is another pest whose ravages are not confined to any locality or State, but which, imported from its home in the tropics, has spread over large portions of our country, producing most disastrous results. Measures to check the progress or prevent the invasion of this class of diseases must be national in their character, authority, and the extent of their application.

In 1869 one of the States of the Union recognized the necessity of a public sanitary service, and established a State board of health. Since then similar boards have been organized in more than thirty States, and

during this period they have in every instance commanded the confidence of their respective governments and the people. Through their annual and special reports they have spread before the public a mass of valuable information respecting the laws of health and the conditions which produce or aggravate disease in communities, and the methods of preventing the same; the importance of preserving the sources of water supply for towns and cities from pollution; the necessity to the public health of good and ample drainage and freedom from sewerage gases. They have warned the people respecting the various adulterations of food and have secured legislation for the prevention of such frauds. They have investigated and reported upon the effect of occupations and of long hours of employment upon the health of the laborer. And they have procured salutary legislation for the protection of the health and lives of the people.

It would seem that when so much has been accomplished by State health organization, a national health service, covering a wider field and controlling conditions which they either separately or conjointly cannot reach, must, if properly organized and prudently and efficiently administered, be beneficial to the public interests. Congress, in 1879, recognized the propriety of creating such a service and established the National Board of Health, which still exists. It performed good service for several years, but the fact cannot be disguised that it does not now command the confidence of Congress or the country and is no longer useful.

Your committee are of opinion that the medical profession do not desire its continuance, and one of the provisions of the accompanying bill repeals the law establishing it. This bill places the service in the hands of a commissioner connected with the Department of the Interior. It thus secures efficiency of action and full responsibility, being always under the supervision and control of the Secretary of the Interior. In case of the inefficiency of the commissioner, or from any cause a change being required, one person could be easily removed while a board of eleven members could not be changed without difficulty, delay, and embarrassment. No patronage is conferred upon this office and no executive functions are created that can in any way touch upon the rights or powers of the States or other Departments of the Government.

This bureau could utilize for the public service the vast amount of facts already in possession of the General Government or that can easily be obtained by it, viz, the information in the possession of the State Department obtained from consular officers aboard, the statistics of mortality and disease that can be furnished by a very large number of cities and towns throughout the land, only now available by an investigation of many hundred separate documents which cannot at present be found collected in any one place, and yet of consequence as showing the prevalence of diseases in some one part of the country which we know by experience will appear in certain other portions and of which we should have timely warning to enable us to prepare measures of prevention if possible.

In the four last census reports of the United States an attempt has been made to furnish statistics of mortality and disease. The director of the vital statistics of the Tenth Census remarks :

The fact that it is impossible in any large community to collect complete and reliable data with regard to births and deaths by means of an inquiry made only at the end of the year for which the data are desired, is well known to all who are familiar with the subject of vital statistics, and the experience of the United States census furnished no exception to this rule. But as the United States has no system of reg-

istration of vital statistics, such as is relied upon by all other civilized nations, for the purpose of ascertaining the actual movement of population, our census affords the only opportunity of obtaining even an approximate estimate of the births and death rates of much the larger part of the country, and the data which the census gives, imperfect as they are, are the only ones by which we can compare the healthfulness of this with that of other countries, or can ascertain even approximately the relative salubrity, or liability to particular forms of disease, of different parts of our own territory.

This bureau could do much to supply the deficiencies above noted. At present every new census is obliged to recreate forms for vital statistics, and each census has had a method of its own. The bureau could do much of this preliminary labor, and its experience would be of the greatest value to the Superintendent in charge of the work. It would be of even greater value in stimulating the various portions of the country to a more active interest in their respective vital statistics than the census authorities, because this bureau is permanent, and its action continuous. The rules for which provision is made in the third section would, as a measure of only common prudence, be framed after consultation with the various State boards of health and quarantine officers of the principal ports. Requirements for the satisfactory condition of ship, crew, cargo, and passengers, would, if agreed to by the officers of the leading ports of the country, go far towards producing uniformity in these respects where now the greatest diversity exists to the detriment of commerce and the public health; and, finally, it being the province of the bureau not only to investigate the nature and origin of contagious and infectious diseases, but to adopt measures for their prevention or control, Congress, relying upon its competency, would not, in the event of an invasion of yellow fever or cholera, be likely to pass, under the spur of popular apprehension, hasty or ill-considered and improvident legislation; indeed, it need only legislate with reference to the amount of the appropriation to be used by the commissioner in checking the progress of the disease.

It may be urged that all the work contemplated in the establishment of this bureau could be equally well done by the medical officers of the Army, the Navy, or the Marine Hospital Service. These services are, however, created for limited and special purposes, and their officers have not the general training possessed by the sanitary officers of civil life, who deal with men, women, and children under different conditions of age, occupation, and habits of life. A bureau whose officers are appointed from civil life would more surely harmonize with and secure the confidence of the medical profession, as is shown by the repeated action of the American Public Health Association in asking for a distinct organization for the protection of the public health.

Your committee therefore recommend the passage of the bill, with the following amendments: In line 12, on page 3, strike out "board of health" and insert "bureau, who shall immediately notify the quarantine authorities of the port of destination." At the end of section 5 add "subject to the approval of the Secretary of the Interior."