

Making a Difference:

Milestones in Public Health & **Biotechnology: Canadian Connections**

Lecture #2 – Plagues & Pioneers (1910-19)

By Christopher J. Rutty, Ph.D.

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Dalla Lana School of Public Health, University of Toronto

Living and Learning in Retirement, Course E Class #2, September 22, 2017 Glendon College, York U., Room A002

The

Canadian Cherapeutist Sanitary Engineer

INCORPORATING THE CANADIAN JOURNAL OF PUBLIC HEALTH

Vol. I

JUNE, 1910

Special Articles

HISTORY OF PUBLIC HEALTH IN CANADA

By P. H. BRYCE, M.A., M.D. Chief Inspector of Immigration, Ottawa, Canada

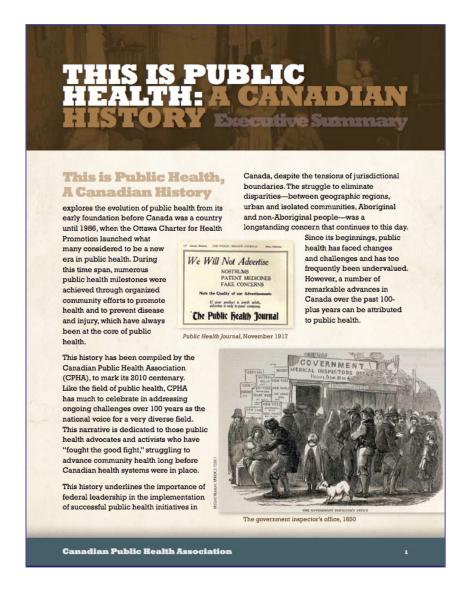
I find that one of the first references to public health in Canada was contained in a communication on the subject of cholera, published by the Executive Government in Quebec in October, 1831, on its receipt from the Colonial Office in England. A conference of physicians was thereupon called in Quebec to discuss the matter with the result that the government sent Dr. Tessier to New York to study the measures being adopted there to prevent the introduction of the disease. The first sanitary commission in Canada that I have knowledge of was appointed at Quebec in February, 1832, to deal especially with cholera, its members being Dr. Morin, Dr. Parent and Dr. Perrault: while some months later, a Board of Health was organized there, which adopted certain quarantine and general health regulations.

Grosse Isle in the autumn of 1831, hav-

ing with them a five-pounder to bring ships to anchor, and on April 28th, 1832, the first cases of cholera arrived on the ship "Constantia" from Limerick, carrying 170 emigrants, of whom 29 had died on the voyage. On June 10th cholera appeared in Montreal and on June 14th at Prescott. I find a letter dated the same day from Kingston sent to Sir John Colborne, Lieut.-Governor of Upper Canada, enclosing a copy of the proceedings of a meeting of citizens dealing with the matter of the disease called Asiatic Sporadic Cholera, which had appeared at Quebec and Montreal, in which inquiry was made of His Excellency, whether he had any fund at his disposal, with which to aid the committee in its charitable intentions. The letter was signed by Robert B. Cartwright, solicitor. A similar letter was sent on the 16th from Pres-A squad of soldiers was stationed at cott to which I find a reply dated the 19th of June to the effect that the Lieut.-

Introduction

- Class #2 focuses on the 1910s and the transformative public-health-building efforts led by pioneers like John FitzGerald in response to the diphtheria threat and the need for a Canadian source of affordable antitoxins and vaccines
- FitzGerald's initiative led to the establishment of Connaught Laboratories at the University of Toronto in 1914
- Especially transformative to Canada's public health system during and after World War I were venereal disease and the great influenza pandemic
- Some other elements of the story that didn't fit in the official course description:
- 1910, a watershed year in Canadian public health;
- Canada's first polio epidemic;
- More pro-active provincial public health leadership;
- Building a federal role in public health



C.J. Rutty, *This is Public Health: A Canadian History* (Canadian Public Health Association eBook, 2010) - https://www.cpha.ca/history-e-book

- In history, some years seem to hold more significance than others...
- January 3, 1910 The year started off well, at least from the perspective of The Times newspaper in London, England:

"Happiness and contentment are found from one end of Canada to the other"

- 1910 was such a year in the history of public health in Canada
- For Canada's population of 6,988,000, lots of things happened during that year...



Wilfred Laurier (right), Prime Minister of Canada in 1910; succeeded by Robert Borden (left) in October 1911

Canadian Journal of Public Health

January 1910 – Toronto physiciansturned-publishers, Duncan Anderson and Lester Coulter, restored a national public health journal – the *Canadian* Journal of Public Health – its first issue appearing some 18 years after the last issue of Edward Playter's Canada Health Journal

THE CANADIAN THERAPEUTIST AND SANITARY ENGINEER

Canadian Therapeutist Sanitary Engineer

INCORPORATING THE CANADIAN JOURNAL OF PUBLIC HEALTH

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THE CANADIAN THERAPRUTIST AND SANITARY ENGINEER (Incorporating, The Canadian Journal of Public Health) is published on THE FIRST OF FACH MONTH; it is devoted to the discussion of treatment and the dissemination of practical hygiene; and deals with all matteres of social and individual

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LETTERS will receive prompt consideration in the order of their arrival; those for the editorial department should be written only on one side of paper and have included with private addresses the pseudonyms, if desired, over which they may be published. SPECIAL CONTRIBUTIONS should be illustrated by photographs or drawings and

ADVERTISING RATES will be furnished on application

ADDRESS in every case "THE CANADIAN THERAPEUTIST AND SANITARY ENGINEER," 59 John Street, Toronto, Canada; adding name of department it is desired to reach as, "Editorial" or "Business." ENTERED according to the act of Parliament of Canada, in the year one thousand nine hundred and ten, at the Department of Agriculture. All rights reserved.

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January 1910 – Toronto physiciansturned-publishers, Duncan Anderson and Lester Coulter, restored a national public health journal – the *Canadian* Journal of Public Health – its first issue appearing some 18 years after the last issue of Edward Playter's Canada Health Journal

- The journal's name shortly changed to The Canadian Therapeutist and Sanitary Engineer
- Anderson and Coulter were well connected nationally and they soon set their sights on establishing a national public health association

THE CANADIAN THERAPEUTIST AND SANITARY ENGINEER

Canadian Therapeutist Sanitary Engineer

INCORPORATING THE CANADIAN JOURNAL OF PUBLIC HEALTH

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1910: Watershed Year in Canadian Public Health: Peter Bryce & Canadian Commission on Conservation

Jan. 18, 1910 – Coincidental with the launch of the new journal, public health became a prominent component of the federal government's "Canadian Commission on Conservation" set up to focus attention on protecting the nation's natural resources

WELFARE OF THE STATE THEIR AIM

Conservation Commission In First Annual Session.

BRILLIANT INAUGURAL.

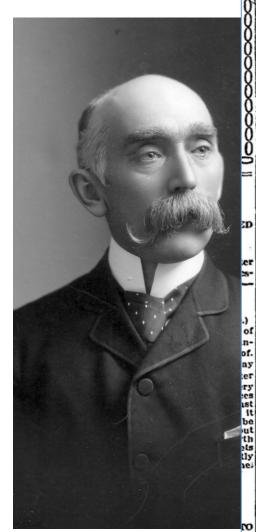
Masterly Address by the Hon. Clifford Sifton.

Will Attack Tuberculosis in Attempt to Check it, as Well as Grappling With the Question of Guarding and Conserving Natural Wealth— The United States as a Warning Example.

(Special Despatch to The Globe.) Ottawa, Jan. 18 .- Thorough appreciation of the coming greatness of the of. Dominion of Canada, inspired by an appreciation, even as intensified, of er the responsibilities of one who would ry strive mightly in paving the way to that greatness, gave to the inaugural Presidential address of Hon. Clifford be Sifton, at the first annual meeting of the Commission of Conservation this morning, the uplift and fire born of national prophecy or national warning. The speaker seemed to talk under the spell of broad rivers, lakes and seas. Some of their music, their majesty and their grandeur he communicated to his audience, made up, as it mainly was, of men who have given much time to the study and working out of Canada's national possibilities.

1910: Watershed Year in Canadian Public Health: Peter Bryce & Canadian Commission on Conservation

 Peter Bryce (right), now Chief Medical Officer of the federal Department of the Interior, stressed at the Commission's 1st annual meeting, while the Dominion had spent great sums on eradicating diseases of animals, he wondered why similar attention was not given to diseases of human beings



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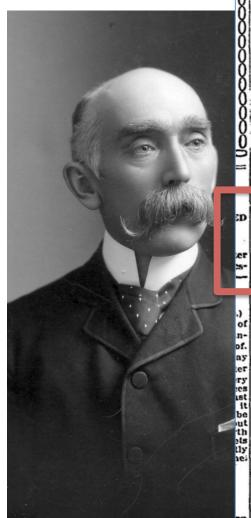
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 Thus, a sub-committee focused on developing a national plan for dealing with the cure and prevention of tuberculosis, an issue of particular interest to Bryce



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1910: Watershed Year in Canadian Public Health: Saskatchewan, Western Public Health Pioneer

- Saskatchewan was recognized at the Commission conference as taking a leadership role for preventing water pollution in rivers, especially in Regina and Moose Jaw
- But it was the province's new Public Health Act, passed in late 1909, that set a new standard for a more serious and progressive provincial approach to public health, particularly for TB care

SASKATCHEWAN IN LEAD.

PUBLIC HEALTH ACT MOST EN-LIGHTENED IN CANADA.

Tuberculosis Made a Notifiable Discase—Public Health Commissioner Responsible to Government for Administration of Act Appointed.

The public health act recently enacted in the Province of Saskatchewan is so much in advance of similar legislation in other parts of the Dominion that it may be said to be in complete harmony with the proposals of the Public Health Committee of the Commission on the Conservation of Natural Resources. Many - of points touched on in the address of the Chairman, Hon, Clifford Sifton, have been anticipated in especially the conservation water, and the proper care of the individual in connection with tuberculosis.

1910: Watershed Year in Canadian Public Health: Saskatchewan, Western Public Health Pioneer

 This effort was led by Maurice Seymour (below), named 1st Commissioner of Public Health, with direct responsibility for implementing the new Public Health Act; in most other provinces the Chief Medical Officer of Health worked through a Provincial Board of Health



SASKATCHEWAN IN LEAD.

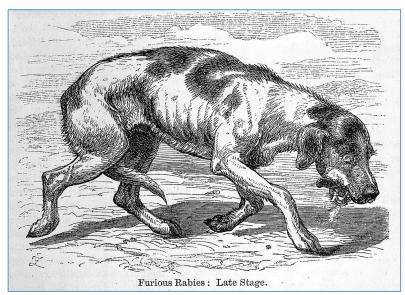
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1910: Watershed Year in Canadian Public Health: Rabies Outbreak in Ontario

- Feb-March 1910 While TB was a familiar threat,
 Rabies was quite rare in Canada, unlike in the U.S.
- Strict border regulations for animals limited the importation of rabies, but occasionally a rabid dog wandered into Canada, as was the case in early 1910 when a rabid dog crossed near Niagara Falls, sparking an outbreak among other dogs and animals, leading to the death of a young boy



RABIES IN ONTARIO.

DR. AMYOT SAYS THE SITUATION IS A SERIOUS ONE.

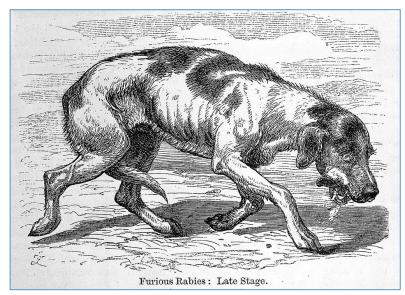
Members of the Canadian Medical Association Hear Interesting Addresses—Appendicitis in Children a Discase That Must be Watched With Care.

That there is rabics in Ontario without a doubt, and that the situation is a serious one, was the statement made by Dr. J. A. Amyot, director of the laboratory of the Provincial Board of Health, in an address on "Rabics" delivered before the section of pathology of the Canadian Medical Association yesterday morning.

"At 'present," he said, "it is confined to the western part of the Province. The district extends from Hamilton to Essex Centre, right through London, and the whole section between. It is to be found from London to Goderich, and there is some of it at Owen Sound. There has been one human death as the result of rables, that of the boy who died at Dundas. I performed the post-mortem examination in this case, and there is not the slightest doubt that the boy died of hydrophobia. There were five deaths in Canada previous

1910: Watershed Year in Canadian Public Health: Rabies Outbreak in Ontario

- While the Ontario Provincial Board of Health ordered the muzzling of all dogs, there was no supply of life-saving Pasteur Rabies Treatment available in Canada
- The closest supply was at the Pasteur Institute in New York City, the trip for the long course of vaccine treatment beyond the means of most



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Rabies Outbreak

 The rabies crisis brought medical and public health attention to the need for not only an affordable Canadian supply of rabies vaccine, but also other vital biological health products, such as antitoxins and other vaccines

 There was strong lobbying for the establishment of a "Pasteur Institute," preferably associated with the University of Toronto Canada Lancet, March 1910, p. 484

RABIES AND A PASTEUR INSTITUTE.

No private practitioner can successfully treat rabies. That it is a germ disease there is no doubt, and at times becomes epidemic. In Europe prior to the Pasteur treatment about 96 per cent. of those with rabies died, whereas now about 96 per cent. recover.

From time to time we read of Canadians who have to go to New York for treatment. This, we think, should not be allowed to continue. This country is large enough and wealthy enough to justify the establishment of a Pasteur Institute under State control.

To this any Canadian who might be unfortunate enough to be bitten, could betake himself. The institution ought not to be too great a burden upon the people. Many who would require treatment could well afford to pay for it; but even where they could not, it is the clear duty of the State to provide the means of proper treatment in such a disease as this.

With the recent order to shut up dogs or muzzle them, we are it full sympathy. There is no other known way of preventing the spread of this dread disease. Freventive medicine is now a definite science, and public men are coming to recognize the fact that the value of human life is more than all the other sources of wealth in a nation put together.

 In the meantime, the Ontario government made a special arrangement to import Pasteur Rabies
 Treatment from New York City and offer it at the Hospital for Sick Children

Perplexing Polio Outbreak

Toronto Star, Aug 17, 1910, p. 1

CHILDREN ARE ATTACKED

- Aug 1910 Just as the rabies scare subsided, the first widespread appearance of the "strange" and often deadly "new disease" of "infantile paralysis" sparked a similar wave of public and medical concern
- Initially concentrated in the Hamilton area, the outbreak began with a young girl originally thought to be suffering from rabies, who then died, however "poliomyelitis" proved to be the cause of death

Twenty Cases of Fever and Infantile Paralysis—Once Swept Over the States.

BY STRANGE EPIDEMIC

Special to The Star.

Hamilton, Ont., Aug. 17.—An epidemic of pollomyelitis, or infantile paralysis, a comparatively new disease, which is attracting much interest among medical men the world over, has broken out here.

A score of cases have been reported to the Health Department, and the disease scens to be spreading. It was first noticed three or four weeks ago when a little girl, supposed to be suffering from hydrophobia, was taken to the hospital, where she died. It was later discovered she was a victim of infartile paralysis.

The disease generally begins with a high fever and then the patient is suddenly stricken with paralysis.

While most of the cases here are children under four years of age, two or three adults are victims.

Some years ago the disease swept over a portion of the States, claiming

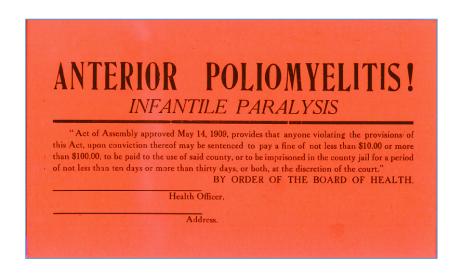
victims by the hundreds.

Perplexing Polio Outbreak

Toronto Star, Aug 17, 1910, p. 1

CHILDREN ARE ATTACKED BY STRANGE EPIDEMIC

- While most cases were children under
 4, there were several adult victims,
 and it was not a "new disease" at all
- Large outbreaks and epidemics of "infantile paralysis" were new, including in the U.S. and in Europe



Twenty Cases of Fever and Infantile Paralysis—Once Swept Over the States.

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1910: Watershed Year in Canadian Public Health: *Perplexing Polio Outbreak*

- "1910 was in a terrible sense a 'wonder year' for epidemic poliomyelitis. In that year it appeared all over the world..." as was stressed in a 1912 Maclean's article
- It was also clear that most polio victims were "not among the poor, or delicate," and yet its cause was was very much unclear

Paralysis: The New Epidemic

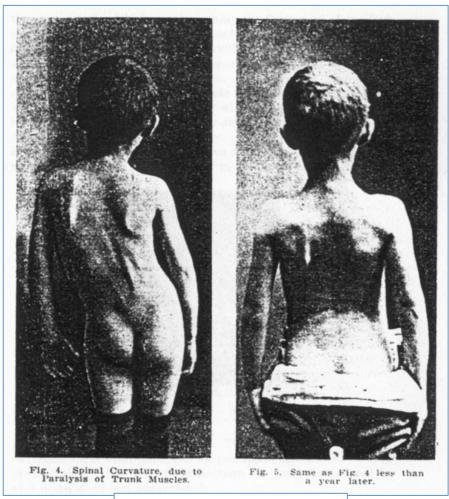
By Helen MacMurchy, M.D.

Infantile Paralysis is epidemic in some parts of Canada. The germ attacks rich as well as poor, adults as well as children. In Ontario last month half the cases were fatal. Dr. MacMurchy is able to give our readers the latest developments concerning this dread disease direct from the great specialists, having recently attended a medical congress where the question was discussed. It is now thought that the germ is carried mainly by the stable fly. Dr. MacMurchy says, Never let a fly rest on an infant.

Maclean's. Nov 1912

1910: Watershed Year in Canadian Public Health: *Perplexing Polio Outbreak*

- Charles Hodgetts, Medical Advisor to the federal Commission on Conservation, investigated the 1910 polio outbreak, his survey of physicians across the country revealing 658 cases and 46 deaths
- Ontario was hardest hit with 354 cases, half of which were fatal

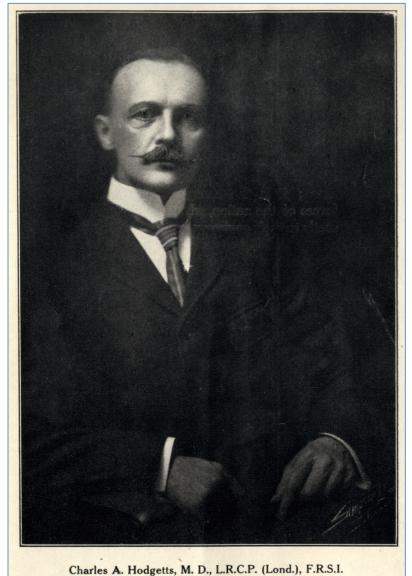


Canadian Journal of Medicine & Surgery, Jan 1911, p. 9

1910: Watershed Year in Canadian Public Health Charles Hodgetts & Public Health Education

Fall 1910 – Charles Hodgetts (right)
had followed Peter Bryce to Ottawa
to serve on the Conservation
Commission after previously
succeeding him as Ontario's Chief
Health Officer in 1903

 While leading Ontario's public health work, Hodgett's focused a large part of his time on public health education



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1910: Watershed Year in Canadian Public Health Charles Hodgetts & Public Health Education

 Most notable was his creation of a popular traveling tuberculosis exhibit, consisting of charts, maps, photographs and models of sanatoria set up at fall fairs and other public places in, and sometimes outside, the province

Ontario Tuberculosis Exhibit.

Windsor, Feb. 14.--(Special.)—The Ontario tuberculosis exhibit has been loaned to the city of Detroit, and is attracting much attention in the new Y.M.C.A. building there.

The Globe, Feb 15, 1909, p. 9

AGAINST TUBERCULOSIS.

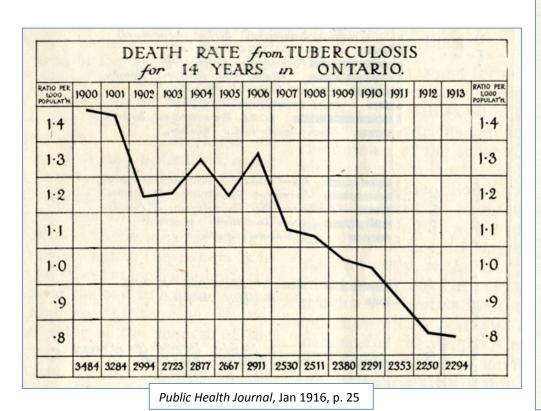
GOVERNMENT DECIDES UPON AN INTERESTING CAMPAIGN.

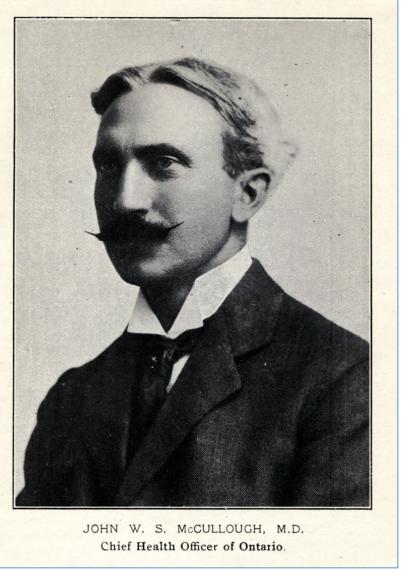
To Secure a Permanent Exhibit for Display in the Cities, Towns and Villages of the Province —Exhibit Will be a Most Extensive One-

The Ontario Government has decided upon a practical experiment with a view to educating the people of the Province to the dangers of tuberculosis and the best methods to be pursued in preventing that disease. An arrangement has been made to secure a duplication of the tuberculosis exhibit, similar to that shown here during the recent meeting of the British Medical Association, from the National Association for the Study and Prevention of Tuberculosis. with headquarters at New York. This will be supplemented by materials from Europe, the whole forming an extensive and valuable exhibit illustrating the methods, appliances and mechanisms used in the fight against the white plague. The arrangements for the exhibit are being made by Dr. C. A. Hodgetts, Secretary of the Board of Health, whose department is a branch of that of the Provincial Secretary's.

1910: Watershed Year in Canadian Public Health: J.W.S. McCullough, Pushing Public Health Forward

 Fall 1910 – John W.S. McCullough (right) succeeded Charles Hodgetts at Ontario's Chief Health Officer





1910: Watershed Year in Canadian Public Health: J.W.S. McCullough, Pushing Public Health Forward

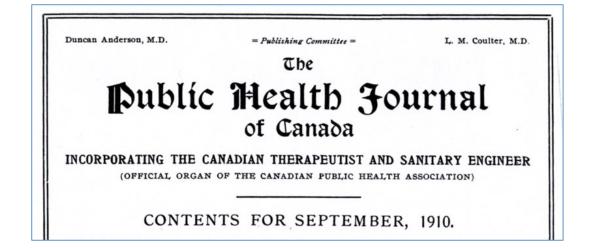
 Among McCullough's many initiatives to push public health forward, was setting up the travelling TB exhibit, in a more literal sense, with expanded exhibits inside a railway car that stopped at stations across the province



 At each stop, materials were exhibited at the station, while public demonstrations and lectures were also conducted

1910: Watershed Year in Canadian Public Health: Birth of the Canadian Public Health Association

Sept. 22, 1910 – With considerable momentum behind them since launching their Canadian Journal of Public Health,
 Drs. Anderson & Coulter proceeded to establish the "Canadian Public Health Association" with the granting of letters of incorporation from the Ontario government



1910: Watershed Year in Canadian Public Health: Birth of the Canadian Public Health Association

 Their journal was rechristened The Public Health Journal of Canada, to reflect its role as the Association's official organ



Inter Alia.

Our readers will note that name of this publication has been reversed from The Canadian Therapeutist and Sanitary Engineer (incorporating The Canadian Journal of Public Health) to The Public Health Journal of Canada (incorporating The Canadian Therapeutist and Sanitary Engineer). This change has come into effect as the result of the formation of the Canadian Public Health Association and our election—as The Public Health Journal of Canada—to the official organ position in that association.

1910: Watershed Year in Canadian Public Health: Charles Hodgetts & the Commission on Conservation

- October 1910 A few weeks after the CPHA's birth, Charles Hodgett's led a national public health conference of the Commission on Conservation in Ottawa
- Representatives of provincial health departments and boards met with federal health officials involved with the Commission

HEALTH MEASURES

FEDERAL AND PROVINCIAL DE-PARTMENTS IN CONFERENCE.

Dr. Hodgetts Blames Impure Water for Much of the Sickness in Cities —Recommends the Creation of a Federal Department of Health.

Ottawa, Oct. 12 .- The main feature of to-day's meeting of the Dominion Conference of the members of the Conservation Commission and of the Federal and Provincial Health Departments, called to consider gen. eral questions of Provincial and Federal co-operation on health protection measures, was an address given Dr. Charles A. Hodgetts, Medical Adviser to the Conservation sion. Dr. Hodgetts with the problem of preventing contamination by sewage, etc., of waterways from which public supplies of drinking water were obtained. emphasized the urgent necessity of more adequate Governmental action to prevent the pollution of streams, and recommended the creation of a Federal Department of Health to cooperate with the Provincial Health Departments.

1910: Watershed Year in Canadian Public Health: Charles Hodgetts & the Commission on Conservation

- Hodgetts took a bolder approach than Peter Bryce had at the 1st Commission conference to expanding public health efforts, particularly against the persistent incidence of typhoid fever in several cities, including Ottawa, due to water contamination
- A key recommendation was for more efficient federal legislation, "the enforcement of which should in the main, rest with some central, well-organized and wisely administered Federal Department, co-operating with each of the various Provincial Departments of Health."

HEALTH MEASURES

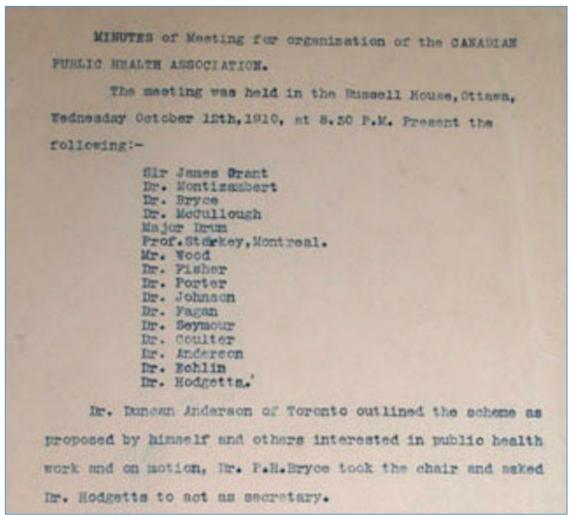
FEDERAL AND PROVINCIAL DE-PARTMENTS IN CONFERENCE.

Dr. Hodgetts Blames Impure Water for Much of the Sickness in Cities —Recommends the Creation of a Federal Department of Health.

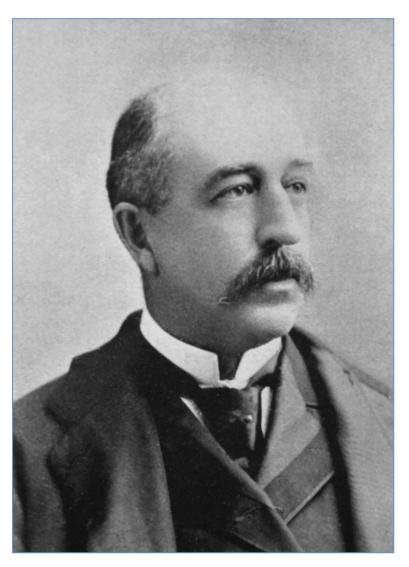
Ottawa, Oct. 12 .- The main feature of to-day's meeting of the Dominion Conference of the members of the Conservation Commission and of the Federal and Provincial Health Departments, called to consider gen. eral questions of Provincial and Federal co-operation on health protection measures, was an address given Dr. Charles A. Hodgetts, Medical Adviser to the Conservation Dr. Hodgetts with the problem of preventing contamination by sewage, etc., of waterways from which public supplies of drinking water were obtained. emphasized the urgent necessity of more adequate Governmental action to prevent the pollution of streams, and recommended the creation of a Federal Department of Health to cooperate with the Provincial Health Departments.

1910: Watershed Year in Canadian Public Health CPHA Formally Established

Oct. 12, 1910 – After the first day of the Commission on Conservation conference, Anderson and Coulter were joined by 14, mostly provincial and federal public health officials, to formally organize the Canadian Public Health Association



1910: Watershed Year in Canadian Public Health CPHA Formally Established



- A key leader of the CPHA's organizing committee was Dr. Frederick Montizambert (right)
- He played a major role in the federal government's public health work, starting from his appointment as Assistant Superintendent of Grosse Isle Quarantine Station in 1869, to his appointment as Director General of Public Health in 1899

Public Health Consolidation in Ontario

- 1911 Led by Dr. McCullough, the Ontario
 Provincial Board of Health undertook a
 particularly strong, if not "tyrannical,"
 approach to public health reforms, especially
 towards infectious disease control
- Such a strong approach was necessary in response, in particular, to a major typhoid epidemic that struck Ottawa during 1911-12 and was traced to sewage contamination of the water supply

OTTAWA IN THROES OF TYPHOID EPIDEMIC

A REPETITION OF LAST YEAR'S EXPERIENCE IS FEARED.

(Canadian Press Despatch.)
Ottawa, July 19.—The Ottawa,
Journal says this evening:—

"The water situation in Ottawa has suddenly assumed a most serious aspect. A typhoid epidemic is abroad in the city. Only a few days have gone by since the Medical Health Officer issued his warning to the people to 'boil the water,' and already the situation is perilously near that of last year in the beginning of the epidemic. It will be remembered that matters ultimately became so grave that about twelve hundred cases of typhoid developed and about sixty deaths resulted.

"Only a few days have elapsed since the water was declared polluted, and already there are at least sixty cases of typhoid in the city. There are twenty-three certain cases in the hospitals and several suspected cases. Besides these there are many cases being treated at home.

"It is probable that there are many more cases, as The Journal was unable to reach all the doctors of the city this morning, and one doctor refused to say whether he had any typhoid cases or not. In addition, there are many suspected cases."

Public Health Consolidation in Ontario

The Globe, Sept 26, 1912, p. 9

ONTARIO LEADS IN MANY PUBLIC HEALTH MATTERS

COMPULSORY NOTIFICATION IS AHEAD OF MANY STATES— VACCINATION ENFORCED.

Dr. J. S. W. McCullough, Secretary of the Provincial Board of Health, returned to the Parliament buildings yesterday from attending the meetings of the International Conference of Hygiene and Demography at Washington. This was a notable gathering, said Dr. McCullough, with five thousand delegates in attendance, but the meetings of the American Health Association were not as large as those of the Canadian Association which met in Toronto ten days ago.

Dr. McCullough himself read a paper on the new Public Health act of Ontario, and received many congratulations on the forward character of the work here. Germany, Norway and Denmark were much ahead of Canada in their efforts to stamp out smallpox where vaccination was enforced, but few states were as advanced as Ontario in providing for compulsory notification in cases of tuberculosis, although many had better systems of local sanatoria. There were between four and five acres of exhibits.

The seven district officers of health will shortly go to Gravenhurst sanitarium and spend a week on study and observation of the work carried on there.

- 1912 Comprehensive revision of the Public Health Act included a stronger Vaccination Act, the division of the province into 10 health districts, and the appointment of full-time medical officers of health
- Prospective MOHs would now have to pass a post-graduate course from the University of Toronto's Department of Hygiene



Public Health Consolidation in Ontario: John Amyot @ University of Toronto

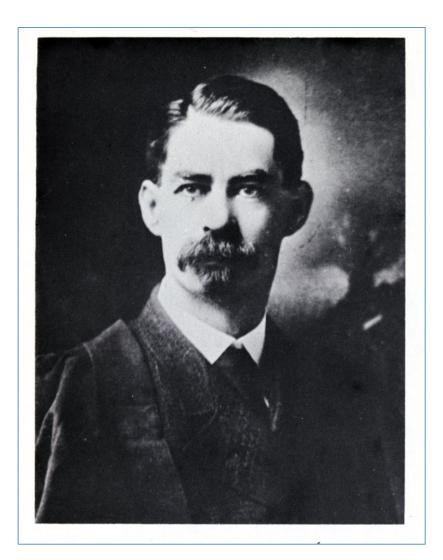
- As Professor of Hygiene, Dr. John Amyot (right) was a popular lecturer, effectively promoting the specialty of public health to promising medical students.
- From the 1890s, Amyot had vigorously campaigned to bring pure water and pasteurized milk to Ontario

PURE WATER CAMPAIGN.

DR. J. A. AMYOT TELLS RESULTS OF FILTRATION PLANTS.

Toronto's Typhoid Death Rate Places Her Water Supply in Third Rating—What it Would Cost to Operate a Plant.

A meeting in the pure water campaign was recorded yesterday afternoon, when Dr. J. A. Amyot of the Provincial Board of Health addressed a gathering under the auspices of the National Council of Women in the Medical building of the university, dealing with the cost, construction, operation and efficiency of water filtration plants installed in various cities, and showing comparative figures of the death rates in such cities,



The Globe, June 16, 1908, p. 12

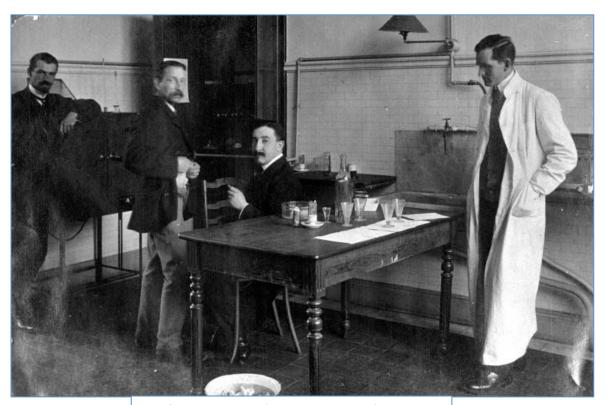
John G. FitzGerald: Public Health & Vaccine Visionary

- Of particular promise in the eyes of Amyot was Dr. John G. FitzGerald (right), who had graduated from U. of T.'s Medical School in 1903
- 1908 After initial work in psychiatry, specifically trying to apply the new tools of microbiology to preventive psychiatry, FitzGerald shifted his focus to public health
- He wanted to apply the same biological tools to the much greater promise of controlling and preventing infectious diseases, particularly diphtheria



John G. FitzGerald: Public Health & Vaccine Visionary

- 1910 FitzGerald begins intense period of international travel and studies in bacteriology at the Pasteur Institutes in Paris and Brussels, learning how to make antitoxins and vaccines
- 1911-13 Blistering pace of travel and network building continued through studies in Germany, London, New York City and California

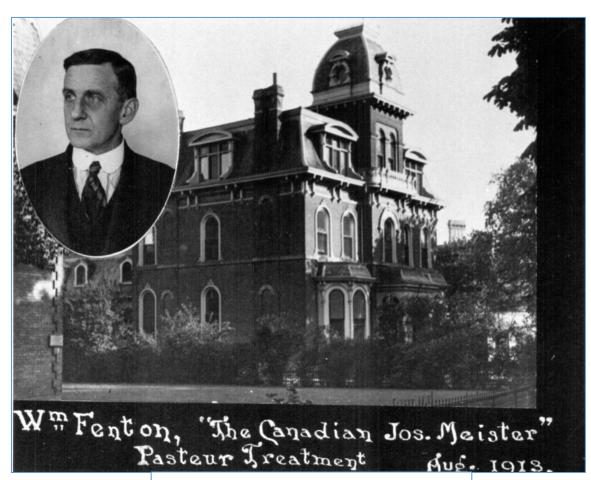


Sanofi Pasteur Canada (Connaught Campus) Archives

• 1913 – The aftermath of the Ontario rabies outbreak, and the need for a local supply of Pasteur Rabies Treatment, prompted Amyot to ask FitzGerald to return to Toronto to prepare it in the Provincial Labs.

John G. FitzGerald & Billy Fenton: *Making Pasteur Rabies Treatment*

- 1913 While at the Ontario Provincial Laboratory to prepare Pasteur Rabies Treatment, FitzGerald was assisted by William "Billy" Fenton (right)
- Fenton also volunteered himself as "human guinea pig" to test the Pasteur Rabies Treatment; no ill effects reported
- Fenton served a similar role as Joseph Meister had for Louis Pasteur in 1885, although Fenton wasn't bitten by a rabid dog



Sanofi Pasteur Canada (Connaught Campus) Archives

John G. FitzGerald & Billy Fenton: Making Diphtheria Antitoxin in a Backyard Stable

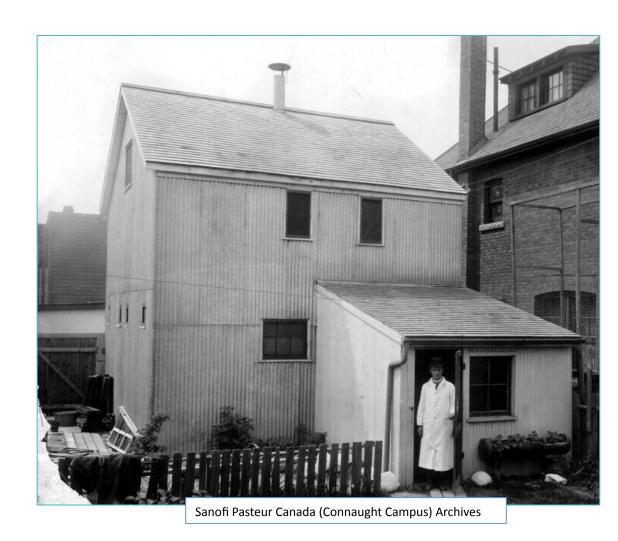
 1913 – While making Rabies vaccine at the Ontario Provincial Lab, FitzGerald and Fenton discussed the increasingly urgent need for a local supply of diphtheria antitoxin



 Disturbed by high cost of imported diphtheria antitoxin and other essential health products from the U.S., FitzGerald investigated how to prepare and distribute them in Canada as a public service

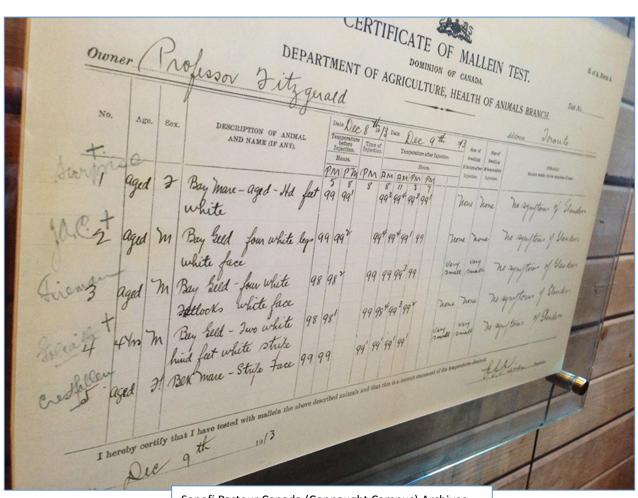
John G. FitzGerald & Billy Fenton: Making Diphtheria Antitoxin in a Backyard Stable

- It didn't seem that difficult to prepare the antitoxin;
 FitzGerald just needed some horses, a place to house them, and a small lab to process the antitoxin
- Fenton offered his backyard at 145 Barton Ave in west Toronto to build a small stable
- FitzGerald's wife helped pay to build the stable and buy the first 5 antitoxin horses using her inheritance and dowry



John G. FitzGerald & Billy Fenton: Making Diphtheria Antitoxin in a Backyard Stable

- Dec. 1913 The horses were bought for \$5 each, and literally rescued from the glue factory
- They were also given names: "Crestfalllen," "Fireman", "J.H.C.", "Goliath" and "Surprise."
- They were older horses and given a second life providing a vital public health service



Sanofi Pasteur Canada (Connaught Campus) Archives

John G. FitzGerald & Billy Fenton: Making Diphtheria Antitoxin in a Backyard Stable

- Today, the Barton
 Avenue Stable stands in
 "Heritage Square" at the
 Sanofi Pasteur Canada
 Connaught Campus site
 on Steeles Ave. near
 Dufferin
- It has been restored and serves as a museum

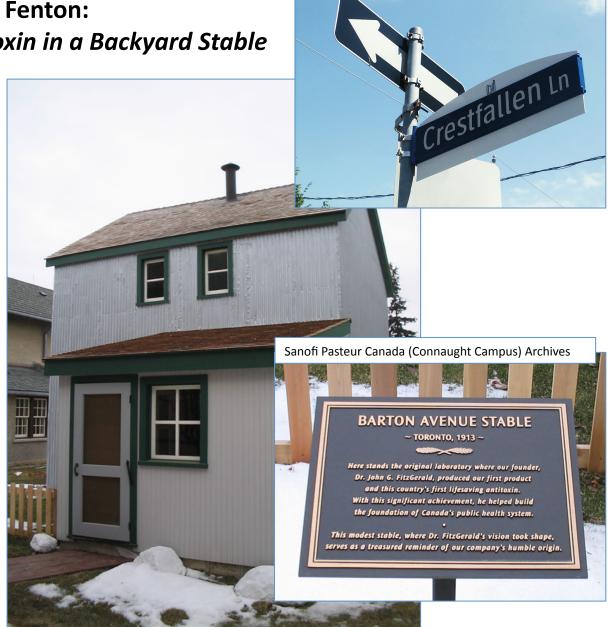


John G. FitzGerald & Billy Fenton:

Making Diphtheria Antitoxin in a Backyard Stable

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 Dufferin
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Also, a laneway off
Barton Avenue was
recently given the name
"Crestfallen Lane," after
FitzGerald's first
antitoxin horse

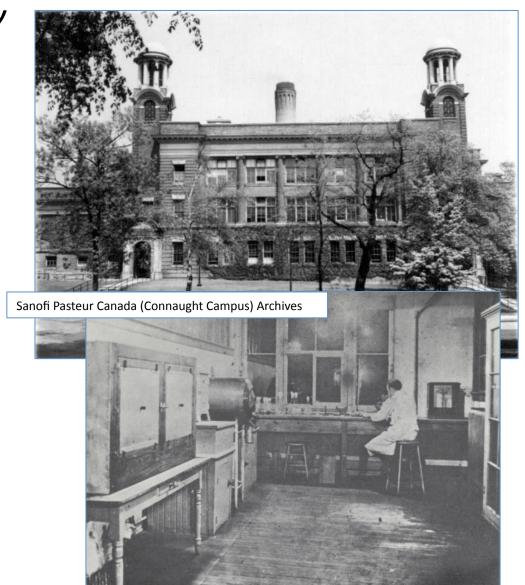


John G. FitzGerald & University of Toronto:

Birth of The Antitoxin Laboratory

 FitzGerald secured the support of Ontario's Chief MOH, McCullough, who committed the government to buying antitoxin at cost and would provide it to physicians at a much lower price than the imported product

 May 1, 1914 – U of T Board of Governors assumed responsibility for FitzGerald's Antitoxin Laboratory, providing modest space in the Medical Building basement



John G. FitzGerald & University of Toronto: Birth of The Antitoxin Laboratory

 The Antitoxin Laboratory would be self supporting, any proceeds directed to research into product improvement and the funding of graduate public health education in the Department of Hygiene

 The Antitoxin Lab was a bold venture for the University of Toronto, and a unique entrepreneurial initiative for any university in the world British Medical Journal, May 9, 1914, p. 1042

Canada.

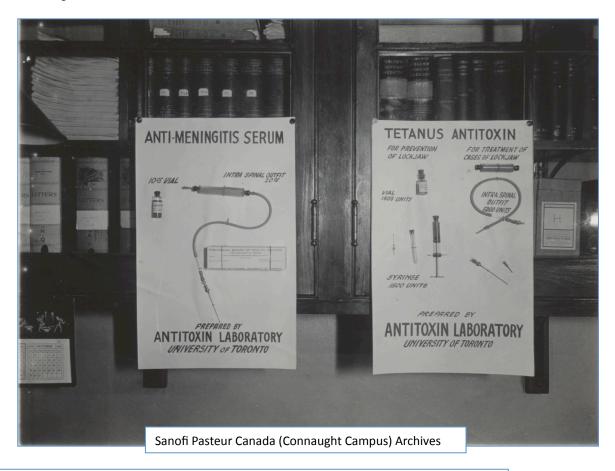
[FROM OUR SPECIAL CORRESPONDENT.]

VACCINES AND ANTITOXINS.

The Provincial Board of Saskatchewan now supplies antityphoid vaccine free of charge to the various municipalities in the province. The only stipulation made is that it shall be administered by a competent person. In Ontario arrangements have been made by the Provincial Board of Health, whereby local boards of health druggists may obtain diphtheria antitoxin at The efforts of the Provincial Board a reduced charge. of Health of Ontario to make the various vaccines available at a low price are to be supplemented by the Department of Hygiene of the University of Toronto. The department has undertaken to prepare and distribute diphtheria antitoxin, tetanus antitoxin, antimeningitis serum, and rabies vaccine at a price only The proceeds of the slightly above the actual cost. sale of these substances, after deducting the expenditure incurred in their preparation, will be applied to research in preventive medicine and hygiene.

John G. FitzGerald & University of Toronto: Birth of The Antitoxin Laboratory

 Other provinces soon followed Ontario's lead for their supply of antitoxins and other essential biological products from the Antitoxin Labs, ultimately distributing them for free to physicians, hospitals and local health departments



 In its first year, in addition to diphtheria antitoxin, the Antitoxin Laboratory also prepared Pasteur Rabies Treatment, Anti-Meningitis Serum and Tetanus Antitoxin

- Aug 1914 The start of World War I caused considerable uncertainty for the still fledgling Antitoxin Laboratory
- 1915 However, tetanus soon became a major health threat to injured soldiers fighting in the trenches on the European front
- Tetanus antitoxin was an effective treatment, prepared like diphtheria antitoxin, and dependent upon horses

Canadian Medical Association Journal, April 1915, p. 308

Case Reports

THE CURATIVE VALUE OF TETANUS ANTITOXIN

WITH CASE REPORTS

By J. G. FITZGERALD

Associate Professor of Hygiene; Director, Antitoxin Laboratory, University of Toronto

G. W. Ross, M.B., M.R.C.P. (LOND.)

Junior Assistant Physician, Toronto General Hospital, Demonstrator in Clinical Medicine, University of Toronto

AND E. Z. STIRRETT,

House Surgeon, Grace Hospital, Toronto

THIS communication deals with the value of tetanus antitoxin as a means of treatment in well developed cases of tetanus, when properly administered; and when given in sufficiently large doses.

It has long been maintained that tetanus antitoxin given as a prophylactic agent has a wide field of usefulness, but little evidence until recently has been available to prove that it possesses marked curative properties. Within the past year work on tetanus has been reported which has been distinctly more encouraging. Ash-

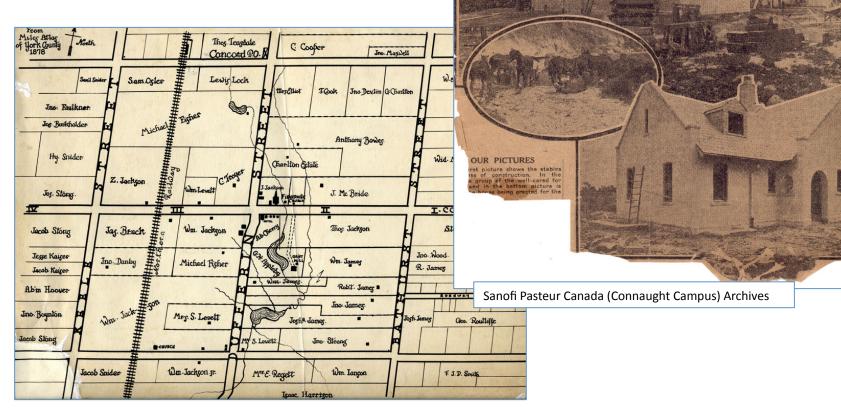
 The Antitoxin Laboratory, however, couldn't meet the demand due to very limited accommodations for horses

Spring 1915 – Distillery magnate, Col. Albert
E. Gooderham, well connected with Red
Cross and U. of T. and seeking supply of
tetanus antitoxin, impressed by FitzGerald's
Lab, but saw need for larger facility



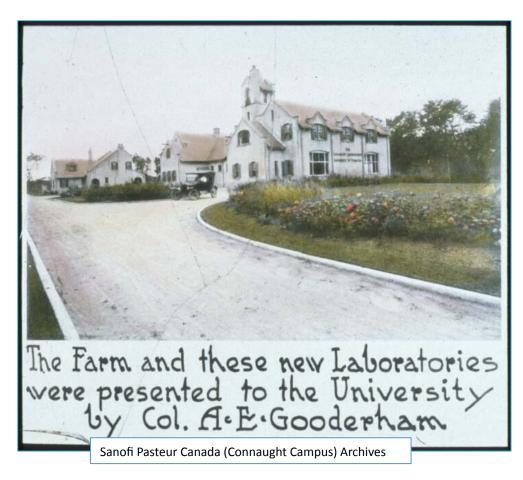
Sanofi Pasteur Canada (Connaught Campus) Archives

 Gooderham finds vacant farm site north of city (Steeles & Dufferin), buys it, arranges for new lab buildings, and donates it all to U. of T. to add to Antitoxin Lab



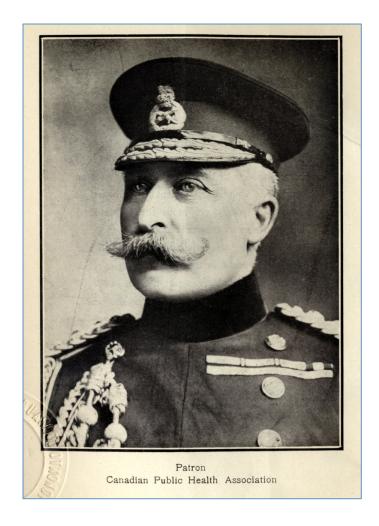
 Oct 25, 1917 - "Connaught Antitoxin Laboratories and University Farm" officially opened





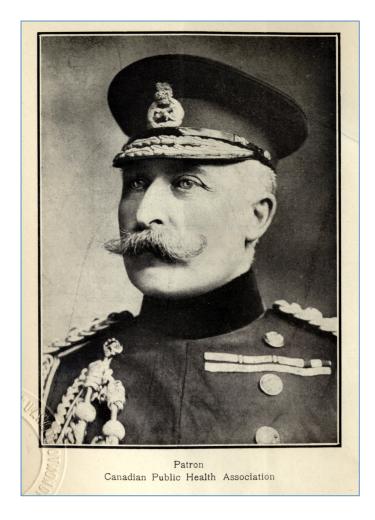
Mail & Empire, Oct 26, 1917

 The expanded Connaught Labs was officially named after Duke of Connaught, Governor General of Canada, 1911-16, and patron of the Canadian Public Health Association



- The expanded Connaught Labs was officially named after Duke of Connaught, Governor General of Canada, 1911-16, and patron of the Canadian Public Health Association
- In addition to producing tetanus antitoxin, the expanded Labs also supplied Canada and the military with smallpox vaccine





Sanofi Pasteur Canada (Connaught Campus) Archives

Robert D. Defries: Public Health & Vaccine Pioneer



- FitzGerald's efforts in building Connaught Labs depended upon the partnership of Dr. Robert D. Defries
- 1913 Soon after Amyot had asked FitzGerald to teach bacteriology in the Department of Hygiene, Defries was chosen as FitzGerald's course demonstrator
- 1914 Defries was the first student and then first graduate of the Diploma in Public Health (DPH) program designed to fill need for better qualified medical officers of health in Ontario

Sanofi Pasteur Canada (Connaught Campus) Archives

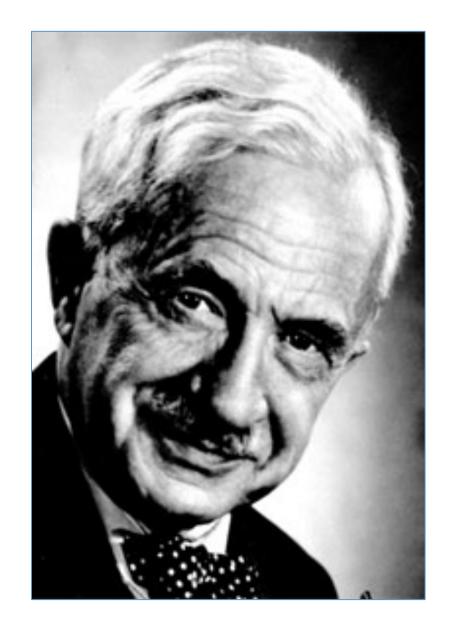
Robert D. Defries: Public Health & Vaccine Pioneer

- Defries had intentions of becoming a medical missionary, but FitzGerald convinced him to instead apply a missionary zeal to the pursuit of public health and preventive medicine
- Defries' skills as a bacteriologist were especially significant for the production of anti-meningitis serum, tetanus antitoxin and smallpox vaccine

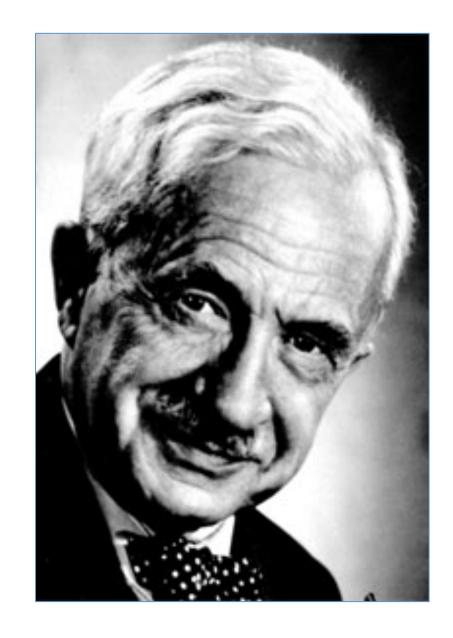


Sanofi Pasteur Canada (Connaught Campus) Archives

 1915-17 – A contemporary of FitzGerald and Defries, and possessing a similar type of fearless passion for public health promotion as Edward Playter had earlier, Gordon Bates almost single-handedly brought the complex and controversial issue of venereal disease into the public domain, initially in the context of WWI and then more broadly



- 1915-17 A contemporary of FitzGerald and Defries, and possessing a similar type of fearless passion for public health promotion as Edward Playter had earlier, Gordon Bates almost single-handedly brought the complex and controversial issue of venereal disease into the public domain, initially in the context of WWI, and then more broadly
- 1916 Not unlike Playter had with his journal, Bates would assertively promote the VD and other issues as Editor of the Canadian Public Health Journal



- of Canadian troops were infected by venereal diseases and some 13% of public ward patients in Toronto General Hospital had syphillis
- 1917 Bates led a group of Toronto physicians to a meeting of the Commission on Conservation to plead for efficient federal action not unlike taken in the military, to stem the growing venereal disease threat

Che Public Health Journal

VOL. VIII.

TORONTO, CANADA, AUGUST, 1917.

NO. 8

The Control of Venereal Diseases*

By Gordon Bates

Capt. C.A.M.C., Officer in Charge Venereal Sect.

Base Hospital, Toronto.

THE question of the control of venereal disease is so large that it is difficult to attempt to deal withit in a brief paper. One may roughly resolve it into two topics, namely, the control of prostitution, and the control of venereal disease itself. Both of these are perfectly legitimate public health fields.

One cannot but feel that in regard to these subjects we are hampered by our ignorance of both their extent and seriousness. I am unable to find any extensive Canadian statistics as to the prevalence of prostitution, and only lately has the work of a few investigators using the Wassermann reaction given us the idea that in dealing with venereal diseases we are attempting to solve a problem of extreme gravity.

method of obtaining exact information must be undertaken.

Since this method of history taking has only commenced, I am only able to report the result of the examination of 100 cases. Since, however, venereal admissions to the Base Hospital are approximately 1,500 yearly, probably a more comprehensive report will be possible next year. The method of case-taking is simply to ask each venereally infected man a definite series of questions in regard to matters in connection with his infection which are felt to be significant.

Briefly our results are as follows:

89 men were infected through illicit sexual intercourse.

11 men were apparently infected by

 Most needed were free diagnosis and treatment services and a broad public education program

- Bates determined to bring the details of the VD problem to the public through any means – newspapers, public lectures, motion pictures
- His obituary noted "Dr. Bates was the first Canadian physician to use the words syphilis and gonorrhoea in public speeches. He nagged newspaper editors until they admitted the words to their news and editorial columns."

The Globe, Sept 28, 1917, p. 4

ALARMING EFFECTS OF DREAD SCOURGE

Capt. Gordon Bates' Outspoken
Paper on Venereal
Diseases

RESULTS OF AN INQUIRY

Immediate Steps Urged to Check Spread—Address to Health Association.

(Canadian Press Despatch.)

Ottawa, Sept. 27.—A remarkable paper on venereal diseases was read at the annual meeting of the Canadian Public Health Association this morning by Captain Gordon Bates, C.A. M.C. The paper was prepared in collaboration with Captain Morris Mc-Phedran, C.A.M.C., and Captain Donald Fraser, C.A.M.C.

Dr. Bates contrasted the efficiency with which this menace is dealt with in the army, and the comparative indifference of the civic authorities. The necessity for efficiency in the army led to the adoption of radical measures, such as periodical inspection and quarantining, from which it has been possible to obtain statistics impossible in civil practice.

- Jan 1918 Bates worked closely with Ontario's Chief MOH, Dr. McCullough, leading to the Ontario government to pass a Venereal Diseases Act
- The Act gave public health departments the power to detain women suspected of having VD
- Those infected were to seek professional medical treatment through provincially-funded hospitals, and the provincial government was to be the only source of educational literature about VD

The Globe, Jan 11, 1918, p. 1

NTARIO DECLARES WAR ON VENEREAL DISEASES

Legislation to Restrict Evil Consequences of Deadly Disorders Will be Passed by Ontario Government During Next Few Weeks

of venereal diseases and restrict the evil consequences of such disorders will be passed by the Ontario Government at the approaching ression of the Legislature, which meets on February 5th next.

While the Government has not yet definitely decided upon the terms of the proposed legislation, The Globe of insanity and feeble-mindedness is informed that the measure will be are the result of venereal diseases. based upon the report of Hon. Mr. Justice Hodgins was commissioned Justice Hodgins, who, in November under the Public Inquiries Act to last, was commissioned to undertake consider and inquire into the existthe important work of investigating ing methods of dealing with imbethe problem on behalf of the Pro- cile, feeble-minded and mentally devincial Government.

ed an exhaustive investigation into, isting legislation or other measures the study and practice of medicine, which will, in his opinion, improve and the Covernment asked him to present conditions.

Legislation to prevent the spread proceed with a study and investigation of the problem of the fcebleminded and the question of venereal diseases. The feeling was that these problems are intimately related to each other. A large percentage of cases of venereal diseases can undoubtedly be traced, it is believed, to the habitually immoral, and many of this class are considered to be mentally defective. On the other hand, it is believed that many cases feetive persons in the Province, with Justice Hodgins has just complet- power to suggest amendments to ex-

The Globe, Feb 4, 1919, p. 14

Gordon Bates: Venereal Disease & World War I

- 1918-19 Bates' focus for action shifted more directly towards the federal government to act on venereal diseases within the context of fulfilling long-term demands – stretching back to Playter's efforts - for the establishment of a federal department of health
- Bates worked with FitzGerald in this effort, starting with setting up an Advisory Committee on Venereal Diseases based in Toronto, which involved physicians, the National Council of Women and the YMCA and YWCA; this effort grew into a "nation-wide campaign against vice" during 1918

FEDERAL HEALTH BOARD

Its Immediate Establishment
Favored by Conference on
Social Hygiene

AMEND CRIMINAL CODE

Vigorous Measures Advocated for Control of Venereal Diseases

(Canadian Press Despatch.) Ottawa, Feb. 3.-The first steps toward the organization of a social hygiene program for Canada were taken to-day, when representatives of a number of the Provinces met here at the call of the Acting Premier, Sir Thomas White, to discuss legislation for the control of venereal diseases. The Conference was brought together at the suggestion of the military authorities, and each Province was invited to Chief Health Officer. of these were unable to be in attendance, those Provinces which could not send representatives sent telegrams of sympathy with the objects of the Conference.

Widely Representative.

The Globe, Feb 4, 1919, p. 14

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- Plans for a Canadian National Committee for the Control of Venereal Diseases were delayed by another, much larger and more urgent national public health challenge, the "Spanish Flu" pandemic

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"Spanish Flu" Pandemic, 1918-19

- **1918-19** The great "Spanish Flu" pandemic had little to do with Spain, but it was where news of it was first reported
- The new strain originated in China in early 1918 and via transitory workers found an ideal environment in war-torn Europe, and then via returning soldiers into the U.S. and Canada, spreading efficiently via the railway across the country during the summer



Widespread Ravages of Spanish Influenza and Consequent Diseases

In Montreal Alone There Are 20,000 Cases of Influenza and From All Points Come News of Its Spread.—In Halifax We Have 500 Cases.

practically all filled and the de-MONTREAL. October 13 — For showed to attend funerals of person who have died from influenza. The works when appeared in court yes enza in the wards of hospital for enza in the

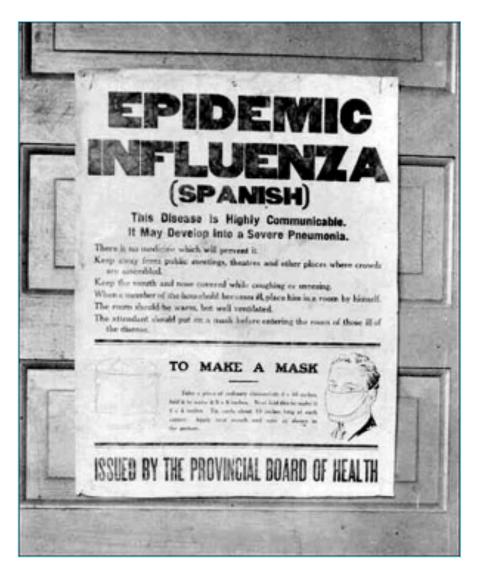
OTTAWA Oct. 13-It is esti-Omated six hundred new cases of Five Hundred Cases MONTRIAL, October 13 — ot soldiers in this district being treated, there have been ninety-three of deaths.

ople assemble in numbers are to Canadian cities, and shows daily means been adopted by the health closed and departmental and that the precautions y measures board, before the epidemic street her stores, dining rooms, street takes in the garly stages were fully way reached. Prospects are attill

Newspapers of the day carried alarming reports of the spread of the disease. (The Halifax Herald, October 14, 1918. Photo courtesy Public Archives of Nova Scotia)

"Spanish Flu" Pandemic, 1918-19

- 1918-19 By the time the pandemic eased, some 1/6 of the Canadian population affected, especially young adults with no immunity to the novel strain, with 50,000 deaths accelerated by complications such as pneumonia
- Globally, there were some 50 million deaths linked to the flu pandemic
- Quebec and Alberta hit hardest, and the indigenous population, especially in B.C., severely affected, with 3,694 deaths out of a national indigenous population of 106,000



- Influenza was not a reportable disease in Canada and most provinces saw the impracticality of trying to impose strict quarantine measures
- With little understanding of the viral cause of influenza (the virus was not isolated until 1933) local and provincial health authorities, already hampered by war-time shortages of medical and nursing staff, saw many health workers fall ill to the flu
- It seemed that little could be done to treat, control or prevent the disease



The Provincial Board of Health of Ontario Spanish Influenza

The following information upon Spanish influenza (so-called) has been issued by the Board to all the physicians and Medical Officers of Health in Ontario.

Investigations carried on by the Canadian Army Medical Corps overseas, have developed the fact that the so-called Spanish influenza has a different causation from that of the ordinary la grippe of 1889 and which is due to the bacillus influenza commonly called Pfeiffer's bacillus. The causative organism in the present outbreak is believed to be a very small gram-positive diplococcus found in the upper air-passages of infected persons. The infection is commonly passed on by direct personal contact, drinking utensils, towels, etc.

SYMPTOMS.—Clinically the disease simulates influenza. It is an acute febrile infectious condition of three or four days' duration. The most striking symptoms are: Sudden onset with chills, severe headache with pain in cervical, dorsal, and lumbar regions, also pain in limbs and general

malaise. The in a few cases 99 degrees to maximum ten highest point i and on the fo develop a cou and constant proper, but is the appetite p



Rutty, C.J - "Making a Difference: Milestones in Public Health & Biotechnology - Canadian Connections" - Lecture #2 - "Plagues & Pioneers, 1910-1

"Spanish Flu" Pandemic, 1918-19

- During the pandemic there were frantic efforts to identify the cause of the disease and hopefully prepare a vaccine that might prevent it
- Scientists in the U.S. targeted a bacterium,
 B. influenza, which was isolated from cases and thought to be the cause of the disease, and then prepared a vaccine based on it

American Journal of Public Health, Oct 1918, p. 754



THE USE OF INFLUENZA VACCINE IN THE PRESENT EPIDEMIC.

TIMOTHY LEARY, M. D.,

Professor of Pathology and Bacteriology, Tufts College Medical School,

Boston, Mass.

HREE strains of influenza bacilli obtained from cases during the present epidemic have been used in the manufacture of vaccine. Strain "Carney" came from a culture from the nose of a nurse at the Carney Hospital. It was present in association with a white staphylococcus in abundant growth, in contrast to the picture obtained in most nose and throat cultures, which do not usually show the influenza bacillus. Strain "Navy" was procured from Lieutenant Keegan at the Chelsea Naval Hospital. Strain "Devens" was obtained from Major Spooner through Doctor Allen.

The technic used in the preparation of vaccine follows: $1\frac{1}{2}$ per cent agar has been

prepared from meat infusion (beef hearts) without glucose, and made 1 per cent acid to plenolphthalein. This is autoclaved for forty-five minutes at fifteen pounds pressure after tubing. Three to five drops of human blood are added to each tube. Blood is collected from the median basilic vein-15 to 40 cc. Poorest growth occurs when the blood is added to agar at 60° C. or below. Most abundant growth appears in tubes to which blood is added, with the agar at 80° to 90° C. The greater heat leads to a brown discoloration of the blood. Colonies on red agar (60° C.) are small, translucent and discrete, and produce a fine frosting on the surface. The growth on brown agar (80° to 90° C.)

"Spanish Flu" Pandemic, 1918-19: Influenza, Connaught Labs & Federal Public Health

The Globe, Oct 21, 1918, p. 1

FIND VACCINE FOR EPIDEMIC

Connaught Laboratories of University of Toronto Announce Discovery

SEND IT TO HOSPITALS

Though Difficult to Prepare, Large Supply May Soon be Available

A preventive vaccine for influenza has been discovered in Toronto, and already its distribution to Ontario hospitals has commenced. Announcement to this effect was made last night by the Connaught Laboratories at the University of Toronto. The vaccine consists of dead germs of influenza, and eighteen strains of these germs are used in its preparation. The preparation of the vaccine in large quantities is difficult, but 7,000 doses already have been sent out.

The Director of the Connaught Laboratories, Major J. G. Fitzgeriad, is at present overseas as officer in command of No. 39 Mobile Laboratory, France. Dr. R. D. Defries, the acting Director, is in charge of the

The statement issued by the Connaught Laboratories is as follows:

"The Connaught Laboratories, University of Toronto, have announced the production of a preventive vaccine for influenza.

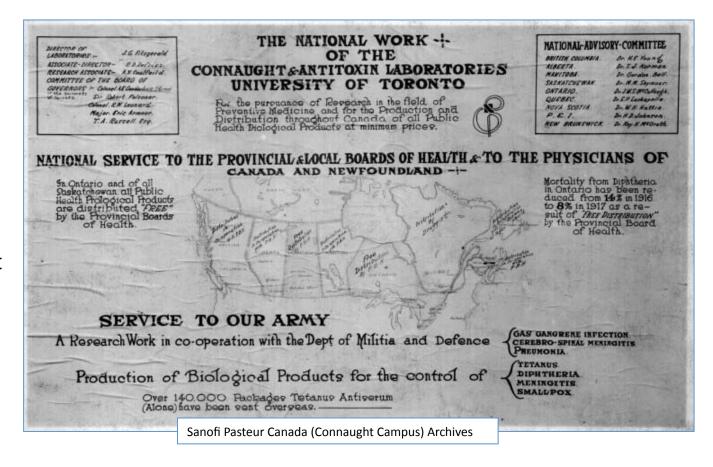
Work Commenced on Outbreak.

 At Connaught Labs, a small team under the direction of Robert Defries (below), worked 24/7 to prepare a vaccine and supplied it free of charge to provincial health departments, hospitals, the military and other public health services across the country



"Spanish Flu" Pandemic, 1918-19: Influenza, Connaught Labs & Federal Public Health

 Due to this unprecedented emergency, Connaught made no claims for the effectiveness of the vaccine, but kept careful records so that it could be evaluated.



 Connaught's efforts were greatly appreciated by provincial health departments, and helped solidify the Lab's public health role across Canada

- The end of World War I, coupled with the high-profile public health threats of venereal disease and the Spanish Flu pandemic, brought intense pressure on the federal government to finally establish a nationally focused department of health
- Feb. 3, 1919 Echoing events in Ottawa 9
 years earlier, a national conference was held,
 initially focused on creating a national
 venereal disease program, but which set in
 motion a political process that led to the
 drafting of legislation creating the federal
 department of health

The Globe, Feb 4, 1919, p. 14

HEALTH BOARD

Its Immediate Establishment
Favored by Conference on
Social Hygiene

AMEND CRIMINAL CODE

Vigorous Measures Advocated for Control of Venereal Diseases

(Canadian Press Despatch.) Ottawa, Feb. 3.-The first steps toward the organization of a social hygiene program for Canada were taken to-day, when representatives of a number of the Provinces met here at the call of the Acting Premier, Sir Thomas White, to discuss legislation for the control of venereal diseases. The Conference was brought together at the suggestion of the military authorities, and each Province was invited Chief Health Officer. of these were unable to be in attendance, those Provinces which could not send representatives sent telegrams of sympathy with the objects of the Conference.

Widely Representative.

- Feb. 20, 1919 In its Throne Speech, the federal government formally commits to creating the new department
- May 1919 The Federal Department of Health was officially launched



FEDERAL HEALTH DEPT. SANCTIONED

Senate Committee to Report on Improving Administration

Ganadian Press Despatch)

Ottawa, May 6..—Authority for the creation of a Dominion Department of Public Health has been given Parliamentary sanction and now requires only the assent of the Governor-General to become law. The measure to-day was given third reading in the Senate, having previously passed the Commons.

To Improve Administration.

The improvement of Canadian Government administration will be considered by a committee of the Senate, with a view to making suggestions for the improvement of the existing system. The proposal was put forward some days ago by Senator McLennan, and to-dny he secured the appointment of a special committee "to consider and report on the possibility of bettering the machinery of Government." Those named to the committee were: Senators McLennan, Beique, Dandurand, Foster and Ross (Middleton).

- John Amyot (centre) was named the Department's first Deputy Minister of Health
- Dominion Council of Health was established as an advisory body to the new federal department of health and based on Connaught Labs' Scientific Advisory Council that had been set up in 1918



- Starting in 1920, Dominion Council of Health would meet twice a year
- It was made up of provincial deputy ministers of health, the federal deputy minister and five appointed members, including representatives from labour, women's groups, social service agencies and universities, including Dr. John FitzGerald from the University of Toronto (rear row, 3rd from right)



The 1910s:

A Very Eventful Decade in Canadian Public Health

- Much had certainly happened in public health in Canada since January 1910
- It had been a very active and creative decade, it ending with the new Federal Department of Health funding with the provinces a national venereal diseases initiative

Public Health Journal, Dec, 1919, p. 583

Editorial

NATION-WIDE campaign is being launched as one of the first activities of the newly-created Federal Department of Health. The Dominion authorities have granted \$200,000 to assist in combating venereal diseases, conditional upon the same amount being raised by the Provinces. Each Province will frame its own statutes and evolve its own plans, but unity from coast to coast in educational work will be given by a voluntary agency, the Canadian National Council for Combating Venereal Diseases, representing all the Provinces. This organization will endeavour to enroll members in every community in Canada and impress on the public mind the gravity of the problem. The lecture platform, the moving-picture, the newspaper, and the magazine will be used. It is probable that definite surveys will be made by trained investigators in police courts, reformatories, and jails to ascertain what can be done in a preventive way. The social aspects of sex offences will be also the subject of thorough inquiry.

Ontario made a beginning with the statute that took effect in July, 1918. A year's experience has justified it, but has revealed certain defects which should be removed. Conferences have been called by the Chairman of the Provincial Board of Health to consider means of strengthening the Act. Greater clinic facilities are required, and it should be less easy for victims of the disease to evade the compulsory provisions of the law and become a public menace. Ontario's share of the Federal grant will be \$57,000, and the late Government had intended to ask the legislature to duplicate it. No doubt the new Government will avail itself of the Federal offer and enable the Province to do its share in the fight against a dreadful scourge.

Reprinted from the Toronto Globe, November 17th, 1919.

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Smallpox in Toronto

A widespread outbreak of smallpox occurred in Toronto early in November. The cases were mainly of a mild type. The rush of citizens to be vaccinated was so great that those responsible both for the production of smallpox vaccine virus and for the vaccinations had great difficulty in coping with the demand. A small but noisy minority in the city rushed into print to express the condemnation of the Health Department in organizing a campaign of vaccination. A member of the Board of Control is reported in the daily press to have declared that

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- However, smallpox still threatened, despite an effective vaccine
- As we'll see in classes #3 and #4, the pace of public health development in Canada will increase during the 1920s & 1930s, especially in infectious disease control and with major advances in biotechnology, such as insulin...

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