

els of their kind. Tenement houses and schools, as exhibited, present nothing of unusual interest. The first-named are distinctly inferior to the better English models.

This volume closes with a review by F. O. Kuhn, architect, in Berlin, of structures exhibited by plan, for the shelter of soldiers in times of peace. The most conspicuous example shown was the new caserne at Dresden,—a complex of buildings, containing shelter for seven thousand men. A characteristic feature of this caserne is the complete separation of the rooms for day use, sleeping, eating, washing, and working,—an arrangement from which the Saxon authorities already claim a marked improvement in the health of the inmates.

If Dr. Börner's second volume is as satisfactorily edited as this has been, the work will have a permanent place in the history of preventive medicine.

COMFORT AND LONGEVITY.

JOSEF KÖRÖSI is the director of the Bureau of statistics in Budapest, and he has apparently brought to his work a mind well adapted to the difficult task of handling figures in bulk. The essay which he presents to us under the above title was read in September last, before the Association of hygiene in Berlin, and in it he has confined himself to a few points only. He has endeavored to determine the influence which the varying pecuniary conditions of life, with their attendant privileges or privations, have upon the longevity of the people of his city. For convenience he recognizes four classes, according to their endowment in worldly goods; those who are very rich at one end of the category, and those who suffer from abject poverty at the other. Between these extremes lie the great mass of the people, whom he divides into the middle class and the ordinary poor.

He does not claim that his figures possess an absolute mathematical value, because he could not determine the number of living individuals in each category; but by excluding children under five years of age, and taking the average age of those dying during a period of eight years, he found that

The rich class averages	52 years of life.
The middle class averages	46 years 1.1 months of life.
The poor class averages	41 years 7 months of life.

From this it is obvious that the possession of wealth, and the resultant exemption from

privation, lengthen the average life nearly ten years.

The second point which he studied was the relation existing between epidemic infectious diseases, and the pecuniary status of the different grades of the community. Upon this point he finds that poverty does not exercise a uniform influence upon the occurrence of these diseases: indeed, viewing them as a whole, the well-endowed, excepting the very richest, are more seriously afflicted than the poor.

Viewing the infectious diseases separately, he finds that cholera, small-pox, measles, and typhus are more prevalent among the poor, while diphtheria, croup, whooping-cough, and scarlet-fever are more prevalent among the rich. Consumption and pneumonia claim the poor, and brain-troubles attack the rich.

In view of legislative action regarding the abodes of the poor, Körösi next studied the influence of basement tenements upon the occurrence of epidemics; and he found, that, taking the infectious diseases as a whole, they are 60% more frequent in the cellar than in the elevated tenements.

The cellar residence, however, does not favor all diseases alike. Measles and whooping-cough are very prevalent there, croup less so, while diphtheria and scarlet-fever are 10% less frequent among cellar inhabitants than among those more loftily housed. This is in accordance with statistics from other places, and notably from Boston, where epidemics of diphtheria have swept over the finest parts of the city, and have left the low sections and cellar regions almost exempt.

Lastly, Körösi considers the influence of crowding upon epidemics. To obtain a standard, he noted the number of rooms in each house, and the number of people occupying them. Combining these figures, he obtained the average number of persons per room. A possession of one or two persons to each room was taken as normal, while three, four, and five persons per room were considered overcrowding. He found that the intensity of some infectious diseases was notably increased in the crowded tenements. This increase amounted to 364% for measles in houses inhabited by more than five persons per room. Whooping-cough is likewise greatly intensified by crowding. On the other hand, it does not appear that scarlet-fever and diphtheria are similarly favored by the increased number of people in the house. These are rather surprising conclusions, and may find their explanation when we discover the manner in which these various diseases are transmitted from person to person.

Ueber den einfluss der wohlhabenheit und der wohnverhältnisse auf sterblichkeit und todesursachen. Von JOSEF KÖRÖSI. Stuttgart, Enke, 1885. 8°.