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Springfield, Ill., Feb. 16--Of the total of 3,457 beds available in 24 tuberculosis sanatoria in the state, 911 were vacant at the end of 1961, Dr. Franklin D. Yoder, director of the Illinois Department of Public Health, reported today.

During 1961, there were 5,127 admissions to the sanatoria for diagnosis and treatment, and 5,039 discharges. This represents a decrease of 437 admissions and 570 discharges when compared with 1960 figures.

In addition to sanatorium beds, there are more than 300 beds in veterans' facilities, several hundred in mental and penal institutions, and a few isolated beds available in general hospitals, for the care of the tuberculous.

During 1961, two institutions in Cook County closed their tuberculosis services and are utilizing the beds for the care of acute and chronic diseases. These institutions were the chest hospital facility at Oak Forest, with 64 beds, and the 49-bed ward for chest diseases at the Cook County Hospital.

The need for beds for the treatment of tuberculosis has gradually diminished, particularly during the last 10 years, not so much because of a rapid decline in the number of cases needing hospitalization, but rather because the average length of stay has been shortened, Dr. Yoder said.

Prior to the development of newer techniques of chemotherapy and surgical procedures, the average length of stay in a sanatorium was about two years. Under present methods of treatment, and particularly since 1952 when the chemotherapeutic agent INH was introduced, the average length of stay has been reduced to nine months or less.

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By the end of 1960, there were 990 vacant beds, compared with 911 at the end of 1961. There is still need for considerable planning for a more rapid reduction in the number of sanatorium beds available. The high per diem cost of operation should cause sanatorium boards to carefully evaluate their position in the field of tuberculosis care and treatment, Dr. Yoder stated. There is a great need for beds for the convalescent and chronically ill, and in some areas, sanatorium beds could be advantageously used for this purpose.

"While the number of surplus beds indicate that fewer tuberculosis sanatoria are desirable, those strategically located in the larger urban areas should plan, at least in the foreseeable future, to maintain their institutions," Dr. Yoder said. "A study of the distribution of new cases indicates that in all probability, tuberculosis in the major urban areas will decline at a much slower rate than in the more rural parts of the state."