

culates in the last three years at schools operating under the four years' course. The fiscal matriculation at the University of Pennsylvania and Columbia is, approximately, eight hundred, Harvard five hundred, and others in proportion; while that of the recognized low-grade institutions have sensibly fallen off.

Notwithstanding the trend of public opinion, we are firmly of the conviction that our only safety consists in the establishment of efficient legislative acts in substantially every State. The high grade schools are undergoing a period of evolution, and are determined to inaugurate greater system in methods of work; with low-grade schools little evidence is at our command pointing to improvement.

The elevation of the standard of requirements in the latter class of schools have seemingly been entirely in response to the requirements of the respective State boards of medical examiners.

The indifference of the profession to methods of medical education has been far-reaching in its pernicious influences. Blinded by our own shortcomings, we did not awaken to a realization of our environment until our interests were greatly jeopardized. We found ourselves drifting, in the estimation of both the public and profession, towards a condition of professional inefficiency, not unlike that of French medicine in the seventeenth century, so graphically described by Molière. One of the greatest evils of our system was the flooding of our ranks with a horde of poorly educated practitioners far in excess of our legitimate demands. The latter assertion is convincingly illustrated by the statistics gleaned from the recent excellent paper of Professor Pepper on Medical Education, affording comparative statistics relating to the proportion of practitioners to the population in different countries of the globe.

TABLE INDICATING PROPORTION OF PHYSICIANS TO THE POPULATION.

Austro-Hungarian Empire.....	1 to 3,857.
Belgium.....	1 to 2,841.
France.....	1 to 2,666.
German Empire.....	1 to 3,038.
Italy.....	1 to 3,536.
Netherlands.....	1 to 2,484.
Norway.....	1 to 3,961.
Russia.....	1 to 8,551.
Spain.....	1 to 3,375.
United States.....	1 to 500.

The number of medical colleges indicates a similar disproportion.

NUMBER OF MEDICAL COLLEGES TO THE POPULATION.

Austro-Hungarian Empire....	1 to 5,153,917.
Belgium.....	1 to 1,534,111.
Brazil.....	1 to 7,001,167.
Canada.....	1 to 3,336,877.

Chili.....	1 to 2,887,552.
France.....	1 to 5,477,591.
German Empire.....	1 to 2,471,923.
Great Britain.....	1 to 2,358,767.
Italy.....	1 to 1,445,109.
Netherlands.....	1 to 660,249.
Norway.....	1 to 1,988,771.
Sweden.....	1 to 1,600,917.
Russia ..	1 to 14,403,317.
Spain.....	1 to 1,950,027.
United States.....	1 to 440,151.

It will be observed from the above that the proportion of practitioners and the number of schools are greatly in excess of other countries. Medical colleges in foreign countries are likewise independent financially, being, as a rule, directly supported by the State, or possessing a direct university connection.

An investigation of this subject reveals beyond the possibility of successful controversy that the most efficient profession is found in those countries protected by efficient legislation; while a correspondingly low standard of professional fitness exists in countries not similarly protected.

At one time considerable opposition existed to the regulation of medical practice by legislative enactments. With the defeat of attempts to destroy the effects of this form of legislation by litigation and the moral support afforded by the recent decision of the Supreme Court of the United States and Supreme Courts of the several States, as well as the apparent benefits from the successful operations of the law in a large number of States, it is pleasing to note a decided change of sentiment in favor of this form of legislation.

The existing opposition to this form of legislation is greatly disappearing, being greatly confined at present to the charlatan, the faculties of a few of our low grade schools and the public press. We can trace the existence of statutes regulating medical practice from the thirteenth century; in the year 1237, licenses were only obtainable in Italy upon attendance at medical lectures for a period of five years, with preliminary entrance requirements demanding three years' work in philosophy.

The first degrees in medicine were evidently conferred in Italy in 1384. Laws regulating medical practice have existed in all civilized countries for many centuries. It is unfortunate that in this country the diploma has been given a legal interpretation; in foreign countries it is simply an evidence of scientific value. With the advent of statutes regulating medical practice this custom upon the part of the courts is becoming abrogated. We cannot but conclude that in the older countries we have a superior profession in point of intelligence, with a more desirable environment; while with us we have, as a whole, men somewhat inferior in their preliminary training,