

act so as to show a determined hostility to this large body of Governors, much of this support will be withdrawn. We know that our assertion is true; we point to the subscription list of the Hospital for the last year, to show that this withdrawal of support has *already* commenced. Unless wise counsel prevail this will continue and largely increase. The Hospital cannot afford to allow the private interests of a few to alienate from it any large amount of public support. Let the medical men who have wielded this power learn the lesson in time.

This warning is necessary. Although not generally known, an attempt has been made by a portion of the Medical Staff of the Hospital, to so arrange the vacancies which will be created by the appointment of a Gynecologist and a Laryngologist, as to operate against one of the candidates for these vacancies. This was attempted in this wise. It having been decided that the out-door staff should, like the in-door staff, be divided into a medical and a surgical staff, a division was made, placing the two gentlemen who are about to leave it to become specialists—on the surgical staff. This would make two surgical vacancies. One of the candidates, whose entrance to the Hospital is opposed by the medical clique in power, is better known as a physician than as a surgeon, although like the *entire* medical profession in Montreal (except two oculists) he is a general practitioner. This fact was made to do duty against him a year ago, and in the manner indicated preparation was attempted to be made, for its doing duty again. By the determined action of two members of the Medical Board, the attempt was frustrated. The division was postponed, and now practically these two men hold the game in their hands. Nevertheless the animus was shown.

Is it not time that a truce was called between the two parties, and an arrangement come to whereby the two vacancies shall be filled by a candidate from each being elected. Such it seems to us should be done. Each should then be satisfied, the hospital would be the gainer, and a calamity which now threatens the institution be averted.

Then again it is a question worthy of consideration whether it would not be wise to increase the

staff. There is plenty of material to give work for at least four more men. That such an increase would be highly advantageous does not, we believe, admit of a doubt. One has only to visit the wards during the session of our medical school, to be convinced of this. The crowd of students that follow the present staff is absurdly large, both as regards benefit to the students and the welfare of the patient. This fact is recognised by the students themselves, and is a loud cause of complaint among them—moreover it drives students from the city. We know this to be a fact. Montreal should be the chief centre of medical education in the Dominion. It was at one time. We doubt much if it is now. The oldest medical school in Montreal had, one year ago, only increased about eleven students in nineteen years. And this notwithstanding the fact that many students have come to Montreal from the Maritime Provinces since Confederation, who previously went to the States for their education. In Toronto, during the same time, one of its medical schools has increased from about seventy to nearly three hundred students. All this increase is of course not due to the cause we complain of, but some of it is. The staff of the Toronto General Hospital is arranged so as to suit nearly all. It is useless for us to praise our method of clinical instruction. We know it to be good. We would not wish for better men. But to have to stand on the top of a bed, climb a chair, or force through a dense crowd of fellow-students to get a glimpse of a patient, will sooner or later drive students from us. Nay it is doing so every year. We believe the policy which perpetuates this to be foolish in the extreme. It is suicidal to the interests of Montreal as a medical teaching centre. It is against the interest of the medical school which, having the present medical control of the hospital, fears the admission of the member of another school. In many other cities the members of different schools are attached to the same hospital and they work harmoniously together. We do so here in private practice—why it cannot be done in hospital work we fail to see.

It can be done. Thirteen years ago, when a new English medical school was started in Montreal, and its students began attendance at this hospital and applied for admission to its clinical lectures, it was said there would be disagreement with the students of the senior school. We have