

most febrile diseases in which high temperature is a prominent feature, and I have never had cause to regret its use. In saying this, it is not to be understood that other medicines are to be neglected or other indications overlooked.

Correspondence.

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DR. SANGSTER.

To the Editor of ONTARIO MEDICAL JOURNAL.

SIR,—As a preliminary to the discussion of the ethics of the professional tax, it is necessary to inquire in whose interests the Medical Council was created and exists—since, it is obvious that, the onus of support necessarily runs with the service rendered. We are met here, if not with a variety of opinions, certainly, with a diversity of statements.

1. Individual members of the Council, notably the late president, have time and again asserted that a main function of the Medical Council is the protection of the public. You yourself, (*Ont. Med. Jour.*, vol. 1, p. 290), in speaking of it, go a long step beyond this, and declare that “Its chief object is the protection of the public.” This is sufficiently explicit. If it were correct, it would follow that the Medical Council should subsist chiefly on a subvention from the public chest, and the injustice of attempting to specially tax the profession, in the public service, would need no comment. The statement, however, is not correct. The Council was not created and is not run in the special interests of the community. It does, indeed, afford some protection to the public—not directly, but incidentally—in the same way, and, to the same degree, that the Benchers of the Law Society, the Council of the College of Pharmacy, and the Board of the College of Dentists protect the public. In the interests of the medical schools and the medical profession, it strictly exacts a high standard of professional requirements, and, in doing this, it in some measure guards the public, indirectly, from incompetency on the part of medical practitioners. To this extent, but no farther, the Council exists in the interests of the people.

2. A large section of the profession has, for years past, labored under the impression that the

Medical Council was established and is maintained, solely or mainly, for the benefit of the medical electorate. There are now, comparatively, few medical men in the province, who have not been thoroughly disabused of this flattering but misleading fiction. The idea was engendered, perhaps, by the fact that all other professions are strictly self-governed, and it is, I confess, hard for us to admit that we are not equally favored. Then, too, the annual tax—though only moderately successful as a means of securing funds—greatly strengthened the notion that the Council is exclusively a professional institution. I have no desire to deny the fact that it does, in a subordinate degree, protect the profession, and care for its welfare. It does this both directly and incidentally, but chiefly the latter. It directly protects us by instituting proceedings against illegal practitioners, and, also, in some small measure, by the action of its Committee on Discipline. But the poverty and inadequacy of its efforts in this direction—if, indeed, efforts they can be called—is evidenced not only by the extent to which quacks, illegal practitioners and itinerant vendors of their own nostrums, still abound, but also by the fact (*Financial Returns*, 1869-90), that for the first twenty years of its existence, or up to 1890, its net outlay, on this phase of protection, in excess of its receipts in the same connection, amounted to just \$448.27, or an average of \$22.41 annually! Even this appears to overstate the facts of the case, as, although the sums are not given in the returns, the fines seem to have been a source of revenue to the Council, during the ten years preceding 1880. Section 40 of the Ontario Medical Act is conceived purely in the interests of the profession, and, although its application does not in any sense depend upon the Council, to that body belongs the credit of having procured the provision from the legislature. The protection afforded by the stringency of its examinations, and by the extent of its professional curriculum, was primarily devised in behalf of the schools, and is still principally so applied. The Council, in effect, says to all aspirants for its diploma: “Here is a very advanced course of medical studies, conformed to fully only by our own provincial colleges, and this is supplemented by several rigid examinations, largely conducted by the teachers in those colleges; it ought not to require any special