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acquainted with the various conditions. He will see a report from a certain hospital—Ramsgate, for instance. Ramsgate hospital conveys a certain definite picture to him. If a man has been there six or eight months the overseas medical officer knows he has had such and such treatment, and the man who has never been overseas lacks that knowledge.

Q. I know from what I have seen that many boards have dealt, as I thought, unjustly with men, especially when they first come in. Have you ever seen anything of that kind?—A. Yes, I have.

Q. How do you think that could be obviated?—A. Change the board.

Q. In what way?—A. Change the men on the board.

Q. You find that a certain class of doctor would be more inclined to give due consideration to the men than another class of doctor?—A. If it is reported to the A.D.M.S. office that the attitude of a medical officer is otherwise than that of giving the soldier due consideration, the man is replaced. Of course I do not mean by that sympathy.

*By Hon. Mr. McCurdy:*

Q. Have you part-time medical men in your district?—A. We have our surgical and medical consultants.

Q. Have you any part-time men who are attending to their regular medical duties?—A. We have one, you might say, who gives his whole time to it and draws his military pay.

Q. Have you any on your medical boards?—A. No, sir.

*By Mr. Redman:*

Q. Would it not be more advisable to let the doctors attend to their ordinary practice and hold a meeting of the board at a certain hour two or three times a week?—A. We cannot do that.

Q. Why not?—A. Too many men to be examined. We consider fifteen men per day sufficient for one board.

*By Mr. Nesbitt:*

Q. You know about that attestation business. Do they give them a real examination now?—A. Yes, they do; but in spite of that unfit men will get in.

*By Hon. Mr. McCurdy:*

Q. Do any fit men not get in?—A. Yes; it works both ways. That raises the point Lieut.-Colonel Connell spoke about. The medical sheet made out at the time of enlistment states "slight defects, but not sufficient to cause rejection." In regard to that we desire our board to indicate the defects. The man may have slightly flat feet, or something of that kind. Then the point regarding aggravation of something pre-existing enlistment. The great bulk of these are discovered overseas. A man is back probably from a wound, and he develops symptoms pointing to a cardiac condition. He will go on then and give his medical attendant his history and may tell about having had rheumatism or diphtheria some years before, probably dates his valvular disease from a time previous to enlistment. Another point that the lieutenant-colonel mentioned is the consideration of the man's present disability due to service. It seems to me that a case of nephritis, syphilis, cardiac disease or tuberculosis, ought to be considered. The present incapacity of a man from any one of those four cases ought to be considered as due to service, irrespective of whether he was in service three months or six months, because he was a fit man in civil life and had carried on and his family did not know he was not fit. He perhaps never missed a day's work. He might join the army to-day and be put on heavy physical training to-morrow, and the undue exertion might break down his cardiac compensation, and the consequences are just as serious as if he were six months on service.

[Dr. D. J. McKay.]