

A MOVE IN THE RIGHT DIRECTION.

Under this head the *Boston Medical and Surgical Journal* has the following excellent remarks :

"In our own practice we are constantly cognizant of cases of malpractice on the part of apothecaries who overstep the bounds of their legitimate business. That a pharmacist occupies a corner store in a crowded locality, and enjoys a local repute as a 'Doctor,' is no reason that he should treat venereal diseases, surgical injuries, and supposed constipation, or prescribe for 'the chiel who is a little ailing,' but may be on the threshold of serious disease. It is true, the patient, who may have but little money in his pocket, gets his advice for the price of the medicine administered, but the remedy is often dearly paid for by aggravation of disease, when a moderate fee to our younger brethren would secure sound advice and a satisfactory cure.

"We cannot help calling the attention of our friends the apothecaries to a sign we have just seen conspicuously posted in the shop of one of their own number. It is not for our sakes alone, but for their own good, that we advise them also to set up as a public notice,— 'We are pharmacists, but not physicians; we dispense medicines, but do not prescribe for diseases;' and when they have done so, we trust they will keep to their own legitimate calling and allow physicians to *treat* diseases."

To the Editors of the Canada Medical Journal.

GENTLEMEN,—In the brief report contained in the May number of the *Canada Medical Journal*, of the few observations upon a case of pleurisy and miliary tubercle made by me at a late meeting of the Medico-Chirurgical Society, I am unintentionally represented as attributing views to the late Professor Niemeyer which he would disclaim could he read the report, and as holding an opinion upon the great pathological question discussed that I did not advance. The tenor of my remarks was as follows: "The point of greatest interest to myself in this case is the combination of pleurisy with effusion and miliary tubercle of the lung and kidneys in an old man, and the relation of the lesions to each other." Niemeyer and his school would maintain that the pulmonary tubercle was secondary to and a consequence of the pleurisy; but I did not think that that doctrine had been proved as yet, and I was rather disposed to believe that the tubercle preceded the inflammation of the pleura, or at most that the constitutional deterioration and local disturbance of nutrition incident to the pleurisy had evoked a pre-existing tendency to tuberculosis. It was a question of great scientific interest, which I was not prepared then to discuss, but which I submitted for the consideration of the Society." The patient took *one* of Addison's pills, not "two" twice a-day—and thirty-five or forty ounces of fluid, not "about five ounces," were removed from the right pleural cavity after death.

Your obedient servant,

R. P. HOWARD, M.D.

Beaver Hall Hill, 18th July, 1871.