

Ontario should not be to the fore in the fight against the enemies of life. There is much that is of a provincial nature—the work of the Provincial Board of Health, the care of the insane, the public hospitals, the relief of inebriety, medical legislation, including medical education. A matter of no little importance, too, as it brings the members of our profession into closer touch with each other. It is to the benefit of the individual member. He cannot fail to have his mental horizon extended—in union there is strength.

It has been said that surgery has about reached its limit and that there is little left for us to do in the way of improvement. Surgery is in as active a stage as ever. While much of the work that is being done now appears marvellous compared with the work of a quarter of a century ago, there is no doubt, and many of our surgeons recognize it, that there is still in sight a great field for improvement, and that we may be looked upon as Lilliputians compared with those who will do the work at the end of the next quarter or half century. While our knowledge is actually great, it seems little after all, when we consider the possibilities of the future. When the tubercle bacillus was made known to us we were congratulating ourselves that the white plague would disappear forever. Although we are wondrous wise, we have no reason as yet to boast of any great wisdom. No matter how much we quarantine the microbes they still produce—I say this advisedly—such diseases as the white plague, enteric fever, the infectious diseases and many others, and by their flank movements get in their deadly work. On the part of the physician it will always be a fight to the finish—the French proverb, *Après la mort le médecin*, expresses it aptly—on the part of the microbes a fight to the death. The discoveries that have already been made impress us only too strongly that research work must be pursued on a larger scale than ever, and our multi-millionaires, benevolently, philanthropically inclined, in their later days at least, could not do better than aid in the great work of research. While we can felicitate ourselves for much that has been done in the matter of serum treatment, especially in diphtheria and rabies, we may look forward to even greater things; great as these advances seem, the possibilities seem greater. The surgeon, as is well known, is too often the victim of so-called blood-poisoning. It has claimed as its victims many of the most skilled and cultured of our profession, besides placing many others near the brink of the great beyond. It is needless to mention names, they are well-known to us all. There are many living to-day who feel that they have narrowly escaped the jaws of death—I might say the jaws of the microbe—and only a vigorous constitution, or a rather attenuated attack of the microbe, has spared them a few years more. I appeal again to the philanthropist to assist us in our work of research. There is no fight on now of greater import than the battle against the disease-pro-