

in the Dominion, with about 800 students; while in the United States about 4,000 physicians were produced a year, and there were 90,000 doctors. He claimed that the average standard of the profession in Canada was equal to any in the world. The necessity of a high standard for students, so that uneducated men could be kept out of the profession, was pointed out. With regard to female medical education, Dr. Sullivan spoke in rather jocular, but at the same time friendly terms, declaring his belief that the presence of women in the profession would raise the standard, not lower it. With regard to the subject of medical service upon ocean steamers, if it was true that the British Act required that the surgeons be shipped only in Europe, then they should get the Act amended, as Canadians ought to have some of these appointments. Great need for reform was said to exist, and a bill was now before the American Congress requiring an extra physician on all ships carrying 600 people beside the crew. Nurses and hospitals were also demanded, and as the mortality was as high as 70.6 per 1,000, there appeared to be good grounds for such demands. Allusion was made to the researches now going on in regard to disease and to the germ theories, and particularly to the announcement that "the dread scourge cholera" was the result of a microbe, also to the inoculation for yellow fever, by Pasteur's method, which had been followed in Brazil with such good results that out of 450 foreigners inoculated with it, less than two per cent. died, while among the uninoculated the death rate was 30 or 40 per cent. He closed by referring to the fact that medicine was every year being held in higher estimation, and it was the duty of all medical men by deep study and research to keep up the standard of the profession. He also referred to the grand opportunity they would enjoy owing to the presence of the British Association in the city.

MEDICAL SECTION.

The first paper on the programme was "Puerperal Septicæmia," by Dr. Campbell, of Seaforth.

Dr. Sheard asked if Dr. Campbell had made any pathological investigations. He said cases occurred where the autopsy showed no lesions of the uterine tract.

Dr. A. Wright asked if the writer had discovered any other causes aside from laceration. He did not think it could be shown that the lacerations were the cause of the absorption.

Dr. Smith alluded to the identity of this disease with surgical fever, and advised disinfection of the hands and other antiseptic precautions.

Dr. Brodie (Detroit) thought in many cases he could predict before confinement that puerperal fever would follow. There was in some cases an erysipelatous element before birth.

Dr. Patterson thought puerperal fever and sep-

ticæmia were identical. It arises occasionally from atmospheric causes, without any other known source.

Dr. Mullin said that in the majority of cases he thought it due to decomposition of clots or shreds within the uterus. He did not think erysipelas was the potent cause it is sometimes represented to be.

Dr. McKay thought the poison might be generated in a debilitated system through imperfect resolution.

Dr. Campbell, in reply, thought the poison in his case originated entirely within—autogenetic.

The Chairman remarked upon the close alliance of erysipelas and puerperal fever.

Dr. Dupuis read a paper on "Nostrums and Medical Advertising."

Dr. Bray referred to the efforts that the Medical Council in Ontario had already put forth, and he hoped that the Councils in both Ontario and Quebec would be supported by the general profession.

Dr. Day said they were going to the Legislature to obtain power to strike from the register any member who should demean himself by unprofessional conduct.

In the Evening Session, Dr. R. MacDonnell exhibited two cases of "Lateral Sclerosis."

Dr. Osler remarked upon the probability of local focus being present in nearly all cases. He described cases of difficulty of diagnosis from caries of vertebræ.

Dr. Harrison of Selkirk read a paper on "Cerebro-Spinal Meningitis," describing several cases which had occurred in his neighborhood. He had alluded to a peculiar form of fever in a paper before this Association two years ago. He now considered that they properly belonged to the category of cerebro-spinal fever. The disease had occurred both in children and in adults.

Dr. R. P. Howard said the disease was rare in this country. In some few localities, as Sarnia, for instance, it is often seen. Its true pathology, and the explanation of these outbreaks would be interesting.

Dr. Bray had seen one epidemic of this fever in his district. The poor, and more particularly colored people were attacked. It was very fatal.

Dr. Geo. Ross took exception to arguments concerning the nature of the disease described, unless substantiated by *post-mortem* examinations. Tubercular disease of the nervous centres will often perfectly resemble the genuine cerebro-spinal fever.

In reply, Dr. Harrison said he treated his cases with bromide and iodide of potassium. The cases he had been describing occurred within a radius of six miles; the shortest lasted four weeks, the longest from 10 to 12 weeks. There was not always hyperæsthesia.

Dr. F. W. Campbell said the cases he saw in the epidemic 10 years ago were amongst the well-to-do.