EDITORIAL.

cerned, our great defect is too many didatic lectures and too little laboratory work. The preliminary training of those who enter is probably equal to that of the most progressive European countries. The clinical teaching and requirements compare also favorably. As to the shortness of the course, all who intend practising in any of the provinces are required to attend four full collegiate years, but some of the schools do not require four years attendance at college from those presenting themselves for their degree.

The Ontario Medical Council, it is reported, are about taking steps to lessen the number of didactic lectures and increasing the laboratory and clinical work. Should they succeed in effecting this it will probably stimulate the medical boards of the other provinces to do likewise, and the result will be a great boon to the over-lectured Canadian medical student.

KOCH'S TREATMENT OF TUBERCULOSIS.

As experience accumulates relative to the value of Kochine, it is becoming clear that it is far from being either an agent useful for diagnostic purposes or for the cure of either local or general tuberculosis.

It is not uncommon to meet with cases where neither a general or local reaction follows its employment, and already numerous cases have been recorded, where it has worked mischief.

Prof. Drasche, of Vienna, recently exhibited a patient with tuberculosis of the tongue, before the Society of Physicians of that city, after several weeks treatment, the only change noticeable was a marked extension of the infiltration. If any form of local tuberculous disease is amenable to this treatment, we should think such would be a case of tuberculosis of the tongue.

Prof. Drasche referred to the results in the treatment of twenty-two cases of pulmonary tuberculosis under his care. In a few cases in the early stages symptoms of improvement were noted. In some, on the other hand, there was a decided change for the worse, setting in so promptly after the injection