

for with unrelenting determination. Our perfected knowledge of pathology has helped us in diagnosis and preventive medicine, but it can never supplant or equal the practical utility of experience. While the revelations of the laboratory are teaching us new ideas relative to the habit and propagation of disease, the practical theory of the curative principle is too frequently lost sight of. The doctor who plods along in the everyday experience of practice is still able to give us many points regarding the management of disease. It is often a serious question whether the physician of large experience and practical attainment is not able to do more good at the bedside than all the students with up-to-date accomplishments.

This train of thought is not to be interpreted as a reflection upon the modern teaching and the modern education. It is rather a suggestion of a greater need to adopt the plain teachings of experience in conjunction with all that science may tell us. We have many illustrations of the highly accomplished physician, who perchance is a successful teacher, and who knows all about the principles of pathology, and yet this very man may be an utter failure in the treatment of disease. This shows the need of two acquirements which must be gained by every successful practitioner. First, he must inherit or cultivate the intuitive principle which comprehends the character of disease and the management of the same through the agency of his treatment. Secondly, he must utilize his scientific knowledge to the end that he may practically apply it to dethrone disease. Any other method in the acquirement of medical education is bound to bring about eventual disappointment in practice.

One has only to look into many of the standard text-books of present date to see how much is said of etiology and pathology and how little is said about treatment. It might also be inferred that when the diagnosis is made the physician's duty is performed. Is it a wonder then, if this line of thought prevails in colleges, that students enter upon their practice with so little ability to take care of disease? If it were only necessary to find the pneumococcus to treat pneumonia or discover the Widal reaction to manage typhoid fever, then the extreme laboratory idea would be the correct theory. This, however, is not sufficient, as we know; the young doctor must understand how to relieve the lung consolidation by means of his remedies and general treatment else his patient may die; he must know how to care for the febrile condition of typhoid, after the blood analysis has been made, or the toxemic danger gains supremacy. And so we might apply illustrations without number to show the necessity of something more than the scientific knowledge of disease.