

us—the average surgeon of to-day is less a man of thought than a man of action. He is constantly liable to disturbance, either from the particular character of his calling, or from the agitation of all around him, of which he soon partakes. He is made to eschew the more meditative habits which would the better fit him to weigh well and to adopt or reject what should be adopted, or rejected, without reference to authority, or without being swayed by the influence, not always safe and reliable, of superiority of position or of condition.

Perhaps, at no time in the history of our art have the facilities been greater everywhere than they are at present of arriving at conclusions which may not be sound, and of being misled by representations which may not be strictly true. In the few intellectual centres, in ancient times, opinion was gradually formed in solitude. It advanced in regular progression, and from mouth to mouth, as it were. To-day, with steam and electricity and the wondrous and unceasing development therefrom of vast physical agencies, men are brought nearer to each other. Truth, to day, travels with the speed of lightning; but error also, and with like rapidity. Opinion, formed in large centres, acts especially on the imagination of those around, and more powerfully still, perhaps, of those at a distance. It does not always convince, but it impresses, and, to quote the words of a classical writer, it has the force of authority rather than of reason; and concurrence in it is not always an intelligent decision, but a more or less blind submission. Our minds are often misled by misrepresentations, and they remain misled till other and truer representations put them right again.

Surgical opinion, in an especial manner, is at first, and for some time, what seems to be thought by everyone in general, and by some one, or perhaps no one in particular. An opinion hurriedly expressed by eminent, or even prominent, or perhaps

only self-beguiled authority is adopted; it is propagated; it becomes the opinion of the general body, and although we may have resisted the influence of the individual authority in the first instance, we finally succumb to the voice of that general body of which we are constituents—each part having, without perceiving it, perhaps, done its share in diffusing truth, it may be in extending error.

The views on surgical questions, expressed ere they have been fully considered; hasty reports of surgical cases, and premature records of surgical operations—especially if the operations have been bold and novel—when published within a few days of their performance, are often misleading. Had the publication of so-called successful cases in medical journals for its sole object the elicitation of truth, error in time would be of small moment.

The haste in publishing enables the operator to scatter reports of his "triumphs" broadcast over the land as a bid for further subjects for his skill. Is the journalist quite blameless in facilitating the premature publication of cases which had, it is true, left the hands of the surgeon or the surgical ward of a hospital, but only to terminate fatally in the hands of a medical practitioner, or in a medical ward from the direct, though perhaps not immediate, result of surgical interference? Would that the tutelary deity who is supposed to preside over medical journalism might so ordain that there should be a little less hurry, a little less zeal in taking the public partially into one's confidence, and in publishing successes while they are yet problematical.

In every part of Great Britain error is quickly overtaken and corrected; not so in Canada—a country so vast that portions of it are nearer to Great Britain, and to France, and to Germany than they are to other portions of its own vast Dominion; and whence London or Paris or