"Justice" complains that this official does not do his duty. This, if true, is a great pity, since he exists chiefly for the benefit of such timid practitioners as your correspondent yclept "Justice," who are more afraid of the opinions of the ignorant than zealous for the honor of their profession, and and for the public weal. Any person can lay the complaint before a magistrate and have the unlicensed fined. I have done so, without any injury to my professional success, and intend to look after such matters in this county (Brant), and not ask for a public prosecutor.

As for "old women midwives" looking after a case of ordinary labor, few medical men would care to contend with them about their right to do so. It has been customary from time immemorial, and these same medical men who object to them would not say a word about their administering a dose of the orthodox "goose grease" for croup; which is a much more serious trouble. "Justice" objects to pay the small sum of one dollar yearly for the maintenance of the Council. The clergy of the different denominations are organized bodies, and they do not object to being so, although it costs them something. The lawyers, without grumbling, pay a considerable sum annually to keep up their perfect organization. Why should the medical men of this Province have less *esprit de corps?*

"Justice" cavils because he believes the Ontario Medical Council has not *perfectly* succeeded in carrying out all the objects for which it was organized, and would apparently have us go back to to the evils which existed before the establishment of the board. If every medical man would leave aside prejudices, exert himself to elevate the tone of the profession, and abide by legal enactments we would be better off than we are.

Yours truly,

WILLIAM T. HARRIS.

Brantford, 19th May, 1879.

TREATMENT OF CHRONIC ABSCESS.

To the Editor of the Canada Lancet.

SIR,—With your permission, I wish to offer some remarks upon the treatment of chronic abscess, anent your editorial notice, in April number, of an article by Dr. Bœckel, published in *Le Practicien.*

To the statement that "all surgeons agree in recognizing the dangers which result from the opening of chronic abscesses to a free exposure to air," I beg to dissent; while I fully endorse the statement that "in leaving them to spontaneous opening, in order that they may empty themselves slowly and gradually by a small orifice, we often avoid the accidents of the outset, because the air does not penetrate into the cavity." But the statement that "infection rarely fails, sooner or later, to break out in the course of the illness," I think cannot be supported by practical experience. Again, it is stated that the "source of this accident" (that is infectious fever) "has always been attributed to the air, but without giving an exact *rationale* of the way in which the air becomes poisonous." Dr. Bœckel goes on to say that "since the investigations of Pasteur and Lister we have learned that the microscopic germs floating in the air are the agents of decomposition of pus, and of consecutive septicæmia." The conclusion arrived at appears to my mind to have no solid ground to rest upon; that it is fallacious and misleading, and therefore mischievous. Dr. Bœckel's reading has not been very extended, if he has never learned that decomposition of pus takes place after the opening of a chronic abscess not merely because air has found entrance to the cavity, but in consequence of its being pent up, thus establishing those chemico-physical conditions most favorable to decomposition of devitalized organic matter.

In the course of my practice I have treated and seen treated not a few cases of chronic abscess, among which were psoas abscess, lumbar abscess and iliac abscess. I remember particularly one of each of these mentioned, which I had under my care some years ago. The course of treatment pursued in each instance was to open the abscess as soon as it became certain that pointing was about to take place. (And I would here state that a chronic abscess should never be regarded as incurable by absorption until indications of pointing are evident. I learned the possibility of spontaneous cures in this way, by protracted rest, from reading the cases recorded by Hilton; and my own experience has corroborated the fact.) The opening made was not small, but sufficiently large to prevent closure of the wound by adhesion. The patient was always placed in bed before the operation, and