

## THE CANADIAN MEDICAL TIMES.

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## PUBLISHER'S NOTICE.

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JAMES NEISH, M.D., Kingston.

The withdrawal of the homœopathic members from the Medical Council under the leadership of Dr. Campbell is a matter on which we are free to congratulate our readers as likely to be attended with relief and advantage. The circumstances of the withdrawal are such as to exhibit the homœopaths in the light of a body of men swayed by the personal feelings and wounded vanity of a single man; and if this action should result in the entire break-up of the unnatural alliance that has been enforced under the Medical Act of Ontario, as threatened, it will further be a matter for congratulation. We have termed the alliance unnatural; it has also cost the profession in Ontario some degradation in the eyes of foreign friends,—a feeling which we trust will soon be removed. Harmonious co-operation with the homœopaths having proved a delusion and an impossibility, it as well that the attempt at union and co-operation should cease; and for the sake of public opinion and influence it is also well that the first step in this action should be taken by the homœopaths themselves. As for the regular profession, its members must simply view the attempt at alliance as a justifiable experiment, which, while it has come to an end in four years, and has so demonstrated intrinsic elements of failure, has yet served to bring out some important results. It has been shown that students who have to prepare themselves in all the fundamental branches of medical science as thoroughly for eclectic and homœopathic practice as regular students, will not of themselves elect to be examined in homœopathic medicine. They prefer to become "regulars" while they have the opportunity. Not a single student has presented himself before the homœopathic examiners in four years; and this fact shows that under the system of a one portal, homœopathy would soon be extinguished in Canada. The alliance has demonstrated this inequality; and having demonstrated it, it has perhaps done all that could be expected from it.

One natural effect of the homœopathic rupture has been to attract more strongly to the affairs of the Medical Council the attention of the public. Accordingly, the secular press of the Province has been much more occupied in presenting medical matters to general readers than otherwise would have been the case. It may be noticed that the *Globe* now advocates what may be called free-trade in medicine, and recommends the discontinuance of protection by certificate. The *Globe*

having always dealt tenderly with the homœopaths, even now is blinded by sympathy. There is much in the tone of the *Globe's* remarks that is objectionable, and which betrays great ignorance on the part of the writer of the real position of modern medicine; but in the suggestion of free-trade in the practice of physic it will probably find an unexpected echo from many in the profession. We know that there has been of late years a current of opinion in medical ranks setting in this very direction; and though it is a minority opinion, yet it has been more generally looked forward to as the alternative of defective legislation than is possibly supposed. In such a case the efforts of educated practitioners would be directed to means of protecting themselves by establishing local and general medical societies, very much in the manner that is followed in the United States. They would depend upon a system of censorship for keeping out unqualified men; and as for the rest, it would have to be left, pretty much as the *Globe* wishes it to be left, for the public to find out who are and who are not qualified for the successful practice of medicine. Our people, however, have been too long familiarized with the system of legal qualification to lightly throw such a system, with its manifest advantages, aside; and under present circumstances it is not likely that a demand for its abolition will proceed from medical men. It could only be in the case of the Legislature refusing to legislate on the proposed Consolidated Medical Act, or in the case of great political grievance that any such demand would come from the profession.

Statistics compiled by the Registrar General of England show the following results with respect to the proportion of medical practitioners and population. Taking the whole of England and Wales, the proportion of qualified practitioners is about 9 for every 10,000 of the population; but in London the proportion is nearly 20, while in Wales it is less than 6, and in Cheshire and Lancashire less than 7. It may be held that in the settled parts of Canada a district must have at least a thousand of population to constitute a field for practice for one medical man. And this is about the average proportion, though in the cities the number of doctors is much exceeded, while of course, in the rear townships and poorer settled districts, medical men are very scarce, and the proportion is reversed.

A London contemporary very properly objects to a misuse, by hospital governors, of contributions given for the use of the sick. It appears to be a plan adopted by some of these institutions, to spend the greater part of a small donation in advertising its receipt in the "agony column" of the leading daily journal. Our contemporary observes:—"Take, for example, last Monday's paper. It may be gratifying to the honourable gentleman and lady who gave £1 to the funds of the institution to know that just half that sum has been expended in advertising the receipt of the donation; but it not unfrequently happens that the sum received (from donation box, &c.) is

absolutely less than the cost of the advertisement. Is it any wonder, then, that wards still remain unopened?" There is no doubt a great deal of hospital mismanagement in London and elsewhere, but as a rule no class of institutions are better managed.

Professor Struthers, in a letter recently published, states that the total annual value of bursaries in the University of Aberdeen is as follows:—in Arts £3646 16s; in Divinity £650; in Medicine £16; in other words, that the Arts bursaries are in the proportion of two to three students; the Divinity bursaries are to students as 29 to 44; the medical bursaries are almost of no value. Dr. Struthers argues that such a state of matters gives the Arts and Divinity students an advantage over medical students. Nevertheless, he shows that while the Arts classes have in point of numbers stood still, and the Divinity classes have rather decreased, the Medical classes have been steadily increasing. We venture the remark that a much similar condition of things would on investigation be found to exist in the Universities of Canada. Nearly all these hold out great inducements to students in Arts in the shape of bursaries and scholarships, and comparatively little inducement of the same kind to students in Medicine; indeed, in one institution that could be named the medical bursaries and prizes are nil. And yet an increasing preponderance of the number of medical over students in other faculties at all these institutions is to be noted. There is no doubt something fascinating and attractive in the study and practice of medicine which accounts for the choice of young men in thus selecting their profession. At all events it is apparent that teachers of medicine in colleges need not place any dependence on such artificial helps to obtain students as bursaries and prizes. The less any faculty depends upon such aid the better; and yet when we see such a disparity in the rewards held out to students of medicine and consider the growing cost of a medical education, we cannot but think that donors to Universities might well hold in their memory the struggles of the poorer class of medical students and award to them some share of their generous assistance. The foundation of prizes in medicine might also well engage the thoughts of moneyed men desirous of advancing the cultivation of medical science and of associating their names with such a worthy object of ambition and utility.

## NOTES IN PRACTICE.

## ANGEIOLEUCITIS FROM VACCINATION—DEATH.

By THOMAS R. DUFFIN, M.D.

Being desirous of adding a trifle to the matter of your weekly visitor, I cannot, in the hurry of business, do more at present than relate the following interesting case.

On the 9th ult. I was called in consultation with Dr. Meacham, of Odessa, to visit a gentleman, who, from the effects of vaccination, was in a precarious condition.

I found him with grave typhous symptoms,