

painful micturition. Of her own motion she stopped the mixture for a time, the painful symptoms at once ceased, but upon again renewing her treatment they began to return, when she stopped it entirely. I then gave her a tonic, without strychnia, which benefited her at once. Case 1 had an abortion, but not for some time (about two weeks) after finishing her mixture. Case 3, whose infant was only four months old, had an abortion very soon after commencing her tonic. She stopped it while ill, began it after recovery, with no other ill results. Case 4, to her astonishment, also suffered an abortion, the first one in her life.

REMARKS.—Now admitting, for the sake of argument, that there are many causes, over which patients have no control, quite sufficient to produce abortion; admitting also that these three cases may have been merely accidental, they are very unpleasant, not to say dangerous, and as I do not care to run any more risk of such occurrences, I have therefore ceased prescribing strychnia for any patient where conception has taken place.

The moral pointed is this: In nearly every tonic elixir, strychnia forms an ingredient, and amongst the laity many do their own prescribing where a tonic only is needed, although the principle is a bad one. When one reflects, therefore, that these elixirs are often prescribed in this way, many of them containing not only strychnia but arsenic, he cannot but ask himself the question, if so much mischief may be done quite unintentionally in such cases as mentioned, how much more may be done designedly?

I would suggest that, if it be possible, the profession should unite in urging upon manufacturers the propriety of excluding both strychnia and arsenic from all elixirs and leaving these two dangerous remedies solely in the hands of physicians.

Reports of Societies.

CANADA MEDICAL ASSOCIATION.

The seventeenth annual meeting of the Canada Medical Association was held in Montreal on the 25th, 26th and 27th August. There was a large attendance of members from all parts of the Dominion.

The President, Dr. Sullivan of Kingston, took the chair at 10.30 a.m., and Dr. Hingston, chairman of the Local Committee of Arrangements, welcomed

the members on behalf of the profession of the city of Montreal. Mr. Lawson Tait of Birmingham, Drs. McGraw and Brodie of Detroit, Dr. Murphy of Kansas, and Dr. McMillan of Hull, Eng., together with the past Presidents, were invited on the platform.

The minutes of the last meeting were read and approved. A large number of new members were proposed and elected.

Dr. Fulton read the report on Necrology, giving the names of members who had died during the year.

The Secretary read the report on public health by Dr. Canniff, and it was referred to the proper Committee.

The following officers of sections were nominated by the President, viz: *Medical Section*—Chairman, Dr. Thorburn, Toronto; Secretary, Dr. Burt, Paris. *Surgical Section*—Chairman, Dr. Roddick, Montreal; Secretary, Dr. Tye, Chatham. The meeting then adjourned.

The association again met at 2.30 p.m. The President read his address, of which the following is a brief abstract, after which the meeting resolved itself into sections:

After an introduction in which he referred to the manner in which the Association had been established immediately after confederation, and to the great good that resulted from these friendly meetings, he referred to the varying death rate in the Dominion as revealed by the last published volume of the census. In Ontario the death rate was 11.81 per 1,000, in British Columbia, 20.38, in Quebec, 19.07. Thus, Ontario, with a population 600,000 greater than Quebec, had actually 3,000 less deaths per annum, the figures being, Quebec, 25,930; Ontario, 22,727. This was due he found to the great mortality among children in this Province, the number of deaths from 1 to 11 years being more than sufficient to account for the difference. The figures show that in the Province of Quebec children between the above ages to the number of 16,142 die, a majority of 1,973 being boys, while in Ontario the number is 10,471, with a majority of 973 boys, the difference in favor of Ontario being 5,671.

Each child was valued at \$40 to the state by good authority, thus a heavy infantile death rate was an enormous loss, and it could be greatly reduced, as the diseases most fatal, such as small-pox, measles, scarlet fever, typhoid and typhus fevers, could be prevented or confined within narrow limits by proper precautions.

The importance of a bureau of vital statistics was also touched on. There were 3,567 physicians