

those most appreciated being that given by the Rev. Dr. Barclay, who, with Surg. Lt.-Col. Lawrie, was called upon to respond to the toast of the Army, Navy and Auxiliary Forces. The regrettable absence from disposition of the Lieutenant-Governor of Quebec deprived the company of again hearing his eloquence. A pleasing incident was the presentation of an address to Lord Lister by the members of the Medical Faculty of the Universities of Dalhousie, Halifax, to which his Lordship made a graceful reply.

The important question of securing for the Dominion a uniform standard of medical education has been a prominent topic of the week. It was debated at the annual meeting of the Canadian Medical Association on Monday and Tuesday, when also a scheme for inter-provincial registration was discussed and adopted by the provinces of New Brunswick, Quebec, Manitoba and Prince Edward Island. It was also referred to by the President of the British Medical Association in his opening address, and commenting upon this, Lord Lister, in moving the vote of thanks to the President, made some judicious remarks. Lord Lister thought that the great objection to a central examining board was that the examinations would be conducted by those who were ignorant of the curricula of the various schools, and for himself preferred the system obtaining in England of a central controlling body (the General Medical Council) with power to inspect and visit the various licensing bodies. Any opinion of Lord Lister's must have great weight,—although it cannot be forgotten that some twenty years ago the idea of a conjoint Examining Board for England was on the eve of accomplishment, some of the bodies concerned voluntarily consenting to abrogate their right to grant licenses. Theoretically a single and uniform standard for the whole country would seem to be the ideal to be aimed at—all additional qualifications and degrees being regarded as academic distinctions; but it may be, as Lord Lister evidently

fears, that the practical working of such a scheme could not be effected without injustice to candidates trained on various methods.

The sentiments so well expressed by Dr. Roddick in the opening words of his address are those which must have been dominant in the hearts of all his hearers, for they emphasize the fact that such meetings do more to knit the nations together than the labors of statesmen and legislators or the interchanges of commerce. In one important respect the British Medical Association stands on a different and a higher level than the British Association. That body exists from year to year and from place to place, having a fluctuating roll of members, with a central permanent organization. The British Medical Association, on the other hand, has grown, as the President reminded us, from the small society of provincial medical men in England, to a body of 17,000 practitioners of medicine in Great Britain and the colonies—an organization which is fixed and representative, and capable of still wider expansion.—*Lancet*.

PART OF DR. RODDICK'S ADDRESS ON MEDICAL EDUCATION IN CANADA.

The general question of medical education is one of great importance and of unceasing interest, nor is this interest confined to the profession; it is becoming universal. The needs of medical education are fortunately being more fully realized by those who on account of their wealth and influence are in a position to render substantial assistance which is so requisite. The time was when every medical school was a purely proprietary concern "run" for the money that was in it. We feel in Canada, and I think I can speak for the profession in the neighboring Republic, that this day is passed, that high-minded philanthropists like the Right Hon. Lord Strathcona and Mount Royal, the late John Henry Molson, the McDonalds, the Drakes, and others with us, and the Johns Hopkins, the Standfords,