occupied, in which the native must have a certain advantage on account of local knowledge and intimate association. There are many towns, however, especially in the West, which have sprung into existence within the past few years, others which have doubled in population within the past ten years, and all will more than double in the next five if the present rate of increase is maintained. These are the places in which a well-trained man—that is, one who is competent to diagnose and treat all diseases, and is qualified to perform all ordinary operations in every department of surgery—may surely hope to succeed. Up to the present moment the attempt to obtain a full measure of

Up to the present moment the attempt to obtain a full measure of reciprocity between Canada and England, or even between the nine provinces themselves, has failed, although it has been persisted in for the last ten years. This is due to the fact that under the British North America Act of 1867, which governs the Confederation of Canada, all matters pertaining to education—elementary, scholastic, and professional—lie within the authority of the various provinces; and Quebec, which is French and Catholic and in possession of a system of education peculiarly adapted to those conditions, has guarded this right with jealous care.

To all requests for reciprocity the General Medical Council of Great Britain made the obvious reply that the provinces of Canada should first agree among themselves in establishing one standard of entrance to the study of medicine and one standard of final qualification. To this Quebec would not agree. That would be to surrender the inalienable right to the control of education.

To meet this difficulty, the Medical Acts Order of 1906 was passed by the Privy Council, under which each province of Canada was constituted a separate State for the purposes of negotiation. Nova Scotia and Prince Edward Island immediately applied. They granted and received a measure of reciprocity under which their qualifications were registrable in Great Britain, and, therefore, in each other; and practitioners registered in England were free to practise in those provinces. Quebec also applied for and offered reciprocity. This was mutually agreed to after provision had been made for adequate preliminary education, and to prevent a graduate who had for cause been refused the Quebec licence from registering in England, and so evading the local regulations. Only three persons from Quebec and about a dozen from Nova Scotia have availed themselves of the privilege; but I cannot find that any licensees from England have signified a desire to be enrolled upon the registers of these provinces.

The attempt to secure one register for all Canada has not been abandoned, as it is felt to be an anomaly that each province should have its