

in. What of the interval, and why the neglected opportunity, except that it "does not pay."

It certainly is not incumbent on the physician to accept the responsibilities of any case unless he sees fit to do so; but, having once taken charge, the question of moral responsibility is one which cannot be ignored, even if after the expenditure of time and skill the reward may be no larger than duty well done.

Old Dr. James Jackson, in his "Letters to a Young Physician," says, "You are bound as by an oath, though you have never held up your hand before man, to use your best judgment in the treatment of those who are committed to your care," and while "a desire for profit and reputation might be enough to prompt him (the physician) to do all this, it would also be good policy. But he will not do it with a full certainty of success if he be not influenced by still higher motives, by a true love of science and humanity." With the average physician the quality policy is one which is generally well cultivated, and yet in the matter of the care of pregnant women a surprising shortsightedness is often manifested, so that, the unexpected happening, the practitioner is taken off his guard, to his own and the patient's detriment.

While pregnancy is a physiological process through which the great majority of women pass without untoward manifestations, the condition, as remarked by Robert Barnes, is the great test of bodily soundness, and the effects of the growing ovum on the maternal organism are such that the demarcation between health and disease is often very shadowy, trivial causes not infrequently serving to turn the balance from well-being to serious or even fatal consequences. It is to the anticipation and prevention of these morbid showings that the aim and purpose of the physician should be directed, no matter what the cost in personal discomfort or the possibilities of future remuneration. To accomplish this it is of the utmost importance that the practitioner keep in touch with his patient from the moment she comes under observation to the completion of puerpery. This is not only good policy, but a paying investment, for by so doing the physician enlarges his knowledge, increases his proficiency, and puts himself on the best footing with his client; but he also fortifies himself against the unexpected, and insures against the possibilities of mortification and chagrin on the sudden development of unforeseen contingencies.

Moreover, if we must accept the sordid motive for well doing, every woman, however poor or degraded, appreciates relief from suffering and escape from serious consequence, and, whether