

It is well known that the question of reciprocal registration of medical degrees, between Great Britain and the Colonies, is one presenting many difficulties of detail, and necessitating some considerable re-arrangement of the standards of requirement in the different provinces. But those difficulties, while they will occasion delay in their adjustment, will not, we feel sure, prevent an ultimate successful arrangement.

Sectional prejudices, local shortcomings or eccentricities of standards, will give way to a general worthy standard, acceptable to all.

During the May Session of the General Council of Medical Education and Registration, held in London, the President, in the course of his address, observed that the formation of either a Colonial or a Foreign Register (*i. e.*, in G. B.) was not yet within measurable distance.

During the recent session, (Nov. 27, 1888) the President remarked that no entry, either in a Colonial or a Foreign Register, had yet been made.

He said that a request had been received that a graduate of the University of New Zealand might be registered as a Colonial practitioner under the act; and that the Executive Committee had, after due inquiry, recognized the diploma of the University of New Zealand as deserving of registration.

It appears that the Privy Council decides as to the eligibility of colonies or foreign countries to come under the provisions of the act; while the Executive Committee of the General Council decides upon the value of the diplomas of particular universities of the admitted colonies and countries as deserving registration.

In reference to inquiries as to when there would be a chance of registering these Foreign and Colonial degrees, the President explained that the Council were in nowise responsible for the delay. They had to obtain certain guarantees of reciprocity, and that was a very difficult matter to carry out. He said that no university had, so far, complied with their requirement, except that of Otago. The delay arose from ignorance of the conditions of registration.

We understand that correspondence, which has been referred to the Prov. Med. Board, has passed between the Prov. Sec. of New Brunswick and the Imperial authorities upon the matter, and it will be remembered that Dr. Black has given notice of his intention to bring the subject before the Nova Scotia Board at an early date. So the conditions and "sine quibus non," of a mutually acceptable basis, will, no doubt, gradually be evolved and understood.

MEETING OF MEDICAL MEN IN ST. JOHN.

THE largest meeting of purely local medical men ever in session at one time in this city, met yesterday afternoon in response to a call sent out for the purpose of giving an expression of opinion regarding the Public Health Act and the regulations of the provincial board of health; also to consider the act dealing with the registration of births, marriages and deaths. Those present were: Drs. Laurence Maclaren, John Berryman, D. E. Berryman, Johnston, McCleary, Murray Maclaren, Inches, Travers, Bayard, McCarron, Steeves, Addy, Kenny, Jas. Christie, Wm. Christie, Musgrove, Preston, Walker, Daniel, Hutchison, Holden, Hetherington, Gilchrist, Emery, F. McFarland. M. MacFarlane and Crawford.

On motion, Dr. L. Maclaren was appointed chairman and Dr. J. W. Daniel secretary.

After a few remarks concerning the object of the meeting, Dr. Walker delivered an able speech. He pointed out that the regulations promulgated were vexatious and in many cases unnecessary; that they exceeded the powers given by the act; that they imposed work upon physicians which should be done by the health officials, and that the system adopted by the Health Act of compulsory reporting of infections by both the householder and physician had been proved a failure in limiting the spread and mortality of zymotic disease; it was really a detriment instead of a benefit to the public health. He also objected to the act, in that it required the physician to notify the principal of the school the pupil may be attending, of the existence of infectious disease, arguing that that work should be done by the health officer. Dr. Walker concluded a forcible address by moving the following preamble and resolutions:

Whereas, The dual compulsory system of reporting infectious diseases adopted by the public health act, 1887, has been proved ineffectual in controlling the spread of zymotic disease and actually a detriment to the public health;

Whereas, The act aforesaid imposes in addition on the medical attendant the duty of notifying the principal of the school attended by any pupil the subject of an infectious disease; and

Whereas, The bye-laws and regulations of the Provincial Board of Health, which are supposed to be made under and by the authority of the act aforesaid, require also information as to "name of school attended by children of that house"—measures employed for isolation and disinfection, and an additional report showing length of time sick, death or recovery, means of disinfection employed and when employed; and

Whereas, The blank forms furnished by the health office require in addition to the above, the name of the parents and their place of occupation, and the chief health officer of the province orders every physician to send in a monthly report whether he has anything to report or not.

Therefore Resolved, That in the interest of the public health the dual compulsory system of reporting infectious diseases by physician and householder should be changed, and the single system adopted of reporting by the householder, upon whom alone the onus and responsibility of such report should fall, and not on the physician;

Resolved, That the officials of boards of health are the ones to collect the information required by the regulations and blank forms; and

Further Resolved, That, as under the act, the chairman of local boards of health shall be medical men, and, as their work is laborious and a benefit to the public, we consider that they should receive adequate remuneration.

The resolutions were seconded by Dr. Preston.

A lively debate followed in which nearly every physician present made a speech.

After about two hours of debate the preamble and resolutions were finally disposed of, the first clause in the