

without any direct remuneration by them as all expense would be borne by the state. There is quite a percentage of our people who would apply for advice or treatment for every trivial complaint in the hope of an opportunity to loaf. This class is of more value to the state and their homes under our present regime. The family physician will be of the past. He at the present is the confidante of many a patient. The family home life of a large part of his clientele is known by him fairly intimately. In their illnesses he knows the mental attitude of the various members of the family toward each other and hence can measure what effect this may have on recovery and how far he may be able to influence and so make all things aid in the restoration of his patient to health. How often do the kind and wise words of the family physician bring hope and comfort and encouragement to the sick wife and mother, and have more restorative properties than the drugs he administers. In State Medicine this would not be, the physician or surgeon then would have interest only in the disease or injury.

How many apparently very trivial things the family physician is consulted about in which the advice given prevents an illness that might cause serious consequence or end in death. Such consultations under State medicine would not be thought of.

In our present system families choose their physician and this is wise, and on the whole much more beneficial than having no say in who shall treat them.

Seventy-five per cent. of the

ills we are called in to treat are better cared for than they would be under the State; and of the remaining twenty five per cent it is very doubtful if all in all they would be any better treated than as at present where the family physician having an interest in his patients, knowing their history and the incidents leading to the illness as well as its history calls to his aid the skill he deems best qualified to assist him in the occasional case that baffles his skill.

The more one compares State medicine with that now in vogue the more disadvantageous does it appear to the best interests and welfare of the public.

What would be the effect of nationalizing medicine on the Profession and on the State? The government would determine the number in the profession, and how many, and who would be allowed to study medicine. They would devise means likely through senior men in our profession what students are to be eye specialists, ear specialists, nose and throat specialists, who are to be abdominal surgeons, thoracic surgeons, brain surgeons, who would be obstetricians. Then there would be the various divisions in medicine proper, and in diseases of children, the dietitians, the pathologists, the research men, and a host of others, and lastly the poor general practitioner who would be the double of the son in the rich man's family of long ago who was given to the church. These men would be stationed by the State and would have no choice as to climate, city, town or country, but might be fortunate enough to get to some of the favored spots such