Union and from Canada, with the various professors, journalists, and trade representatives, possibly sufficiently represented the varied conditions of the drug trade throughout the length and breadth of the western hemisphere.

The American Pharmaceutical Association is supposed to keep itself aloof as much as possible from the ordinary affairs of the drug trade. The desire is to look upon itself as a scientific body for the advancement of pharmacy and the cognate sciences; but for all that they have a mercantile section, and it has been the object of the association at each meeting to elect as chairman on that section the most pronounced opponent obtainable to the departmental store and cutting evils.

You will see at once how futile all efforts on the part of the association have been in fighting the enemy, when I tell you that not only by way of experiment, but because of the man's eminent intellectual qualities, Mr. Joseph Jacobs, of Atlanta, Georgia, and a cutter of cutters, was elected for 1898 to that position. Everybody now is wondering, as a matter of course, what remedies that gentleman will be ready to recommend at the next meeting.

The higher education of the pharmacist was, of course, a prominent topic, and at one of the sessions I took the liberty of pointing out some of the good features of our pharmacy laws and of the pharmaceutical training in Manitoba.

As Professor Halberg, who was chairman of the session, very properly remarked: "In Canada you are much in advance of the mother country in pharmaceutical legislation," and I felt like rejoining, "and very much in advance of yourselves." A compulsory curriculum is an exception to the rule over there. In fact, a college training is an unknown quantity in many of the states, and Professor Sayre, in a paper which he read at the meeting, urged what he called the ideal method, viz.: "The candidates for recognition as registered pharmacist by the State Board of Pharmacy must first have a systematic course of training in a reputable school of a certain standard, and must possess a diploma certifying to this fact, and then be examined," plainly showing that it is customary and always possible for young men, by cramming, to pass state board examinations even without having the slightest drug store experience.

But what about ourselves? Have we reached the acme of perfection in pharmaceutical training and education? Very far from it. Are our methods of business as professional pharmacists conducive to the strengthening of the bonds connecting us with our medical friends? The cordial relations between the physicians and pharmacists of the province, as referred to by Mr. Howard in his paper at our convention last July, must in some way or other be made secure. This can be accomplished only by a little more self-respect in lifting ourselves up a few notches in the scale of education, and thus placing pharmacy where it ought to be, on a level with medicine. Equally educated with the physician, not only will there be mutual professional regard, but the pharmacist will be looked up to and be listened to more than ever before by the public. This first step would alike be the first towards the gradual banishment of patent medicines from our shelves. It is time for the druggist to quit being the medium for this branch of industry. He has too long been the willing servant of the public and has been too thoughtless of his medical friends. Only by fostering and building up the professional side of his calling, can the pharmacist expect to be successful in his business. We are not the only people alive to this fact. On the other side of the line, they consider as we do, that legislation should be obtained to compel patent medicine manufacturers to publish the formulæ on the labels. Of course we cannot lose sight of the question of supply and demand of the carrying on of any branch of trade. The rule holds just as much with the drug business as with any other. Yet we can, to a great extent, stem the tide in our own favor by making the drug trade more of a profession. If, in short, we become skilled in the art and science of pharmacy we shall receive better attention from the public and the people will after awhile learn to do away with self-medication. In the meantime it is the paramount duty of the pharmacist to educate the public out of the patent medicine vice. I have talked with medical men, who have endorsed my opinion which I have long held and shall continue to hold, that it is perfectly right and judicious for the druggists in certain instances to prescribe. A customer asks if a certain patent medicine is good for a particular ailment. How can the dispenser behind the counter give a conscientious answer? Would it not be better, and more professional of him, to confess that he did not know, but to say that he could dispense some medicine that would, to the best of his belief, prove beneficial. This would be justifiable dispensing and much more satisfactory to the medical fraternity than tacitly recommending a patent medicine, of the composition of which nothing can be known. The doctor will readily see by this means the possibility of dealing a death blow to his worst enemy—the patent medicine. The provision, however, must be made, that the pharmacist shall be competent enough to discover the true ailment of his customer, and to fit himself for this position his training should be in accordance with this view. I do not say he should diagnose, but in simple cases, where the customers could not be expected to consult their physicians, the pharmacist should certainly have the privilege of dispensing. But touching higher ground there is still more money for the pharmacist if he become the true helpmate of the physician. It is possible for the former to do much of the work of the latter. The busy doctor has no time for urinalysis, and microscopical, and other work and would gladly turn such labor over to the scientific pharmacist. The scientific pharmacist, bear in mind, must be scientific in the strictest sense of the term. He will then inspire confidence in the physician on the one side and in the public on the other. Whilst speaking of the relationship of the physician and the pharmacist allow me to point out that there are very few druggists who are awake to the importance of bringing to the notice of the medical men, the "National Formulary of Unofficial Preparations" published by the American Pharmaceutical Association. It is a book that should be as familiar to the physician as any standard work on physiology. It should be, in fact, the physician's companion. Our medical friends would not, for instance, continue to prescribe elixir of lactopeptine and be ignorant of what they were doing, but would turn to number 59 of the National Formulary and see for themselves the composition of compound digestive elixir. One could spend an hour descanting on the merits of the book; but this address must come to a close and in conclusion I would strongly urge immediate action in securing the reforms herein outlined. The first step is to do away with the third class certificate requirement. A young man before entering his apprenticeship should be as well educated as he who enters as a medical student. This fact is apparent if they are subsequently to be placed on the same level. Either the faculty of arts preliminary examination or the medical entrance examination would be infinitely better than our wretched makeshift of a so-called preliminary. The time has arrived that we should begin to move for affiliation with the university, and with this in view it is imperative for us to raise the entrance standard. Dr. Hutton gave some very sound advice on this subject at last year's convention. In the course of a year, or two or three years, our finances will probably enable us to build a college for ourselves either on the medical college grounds side by side as it were, and which we would devoutly wish, or standing proudly by itself elsewhere. This is the expiration of my term of office. I have tried to do my best, and I sincerely hope my successor will bring these much needed reforms to an issue.

RESOLUTION OF CONDOLENCE.

Moved by Mr. W. Pulford, seconded by Mr. J. F. Howard,

"That this association in annual meeting assembled this day views with deepest regret the removal by death of one of its most esteemed members, Dr. A. Fleming, of Brandon. We feel that the province loses one of its best citizens; the medical profession one of its most active and brilliant members, and the Pharmaceutical Association a firm friend. We fully endorse the following remarks made by our president, Mr. Flexon, on his annual address before the association. 'No country can afford to lose men of such incomparable qualities as were