

the use of the 'non-naturals,' as the old writers called them, had replaced other forms of treatment, but in diet, exercise, massage and hydrotherapy, we are every day finding out the enormous importance of measures which too often have been used with greatest skill by those outside or on the edge of the profession.

Thirdly, the study of morbid anatomy combined with careful clinical observations has taught us to recognise our limitations and to accept the fact that a disease itself may be incurable and that the best we can do is to relieve symptoms and to make the patient comfortable. The relation of the profession to this group, particularly to certain chronic maladies of the nervous system, is a very delicate one. It is a hard matter and really not often necessary (since nature usually does it quietly and in good time) to tell a patient that he is past all hope. As Sir Thomas Browne says: "It is the hardest stone you can throw at a man to tell him that he is at the end of his tether;" and yet, put in the right way to an intelligent man it is not always cruel. Let us remember that we are the teachers not the servants of our patients, and we should be ready to make personal sacrifices in the cause of truth, and of loyalty to the profession. Our inconsistent attitude is, as a rule, the outcome of the circumstances that of the three factors in practice—heart, head, and pocket; to our credit be it said the first named is most potent. How often does the consultant find the attending physician resentful or aggrieved when told the honest truth that there is nothing further to be done for the actual cure of his patient? To accept a great group of maladies, against which we have never had and can scarcely ever hope to have curative measures, makes some men as sensitive as though we were ourselves responsible for their existence. These very cases are 'rocks of offence' to many good fellows whose moral decline dates from the rash promise to cure. We work by wit and not by witchcraft, and while these patients have our tenderest care, and we must do what is best for the relief of their sufferings, we should not bring the art of medicine into disrepute by quack-like promises to heal, or by wire-drawn attempts at cure in what old Burton calls 'continue and inexorable maladies.'

Fourthly, the new studies on the functions of organs and their perversions have led to most astonishing results in the use of the products of metabolism which time out of mind physicians have employed as medicines. The old recipe books are full of directions for the use of parts of animals or of various secretions and excretions. Much of the humbuggery and quackery inside and outside of the profession has been concerned with some of the most unsavory of these materials. The 17th century pharmacopœias were full of them, and in his oration at the Hunterian Society, 1902, Dr. Arthur T. Davies has given an interesting historical sketch for their use in practice. Metabolic therapy represents