

private wards upon the basis indicated by Dr. Ferguson.

Yours truly,

CHAS. A. HODGETTS.

Toronto, Feb. 13th, 1893.

To the Editor of ONTARIO MEDICAL JOURNAL.

SIR,—Will you be good enough to grant me sufficient space in your next issue to say a word or two with reference to that most important subject, treated in an able manner by Dr. John Ferguson in his letter as published in your January number—I mean the attendance of patients in the Toronto General Hospital.

There is not one physician practising in this city but will allow that, under its efficient management, the Toronto General Hospital has proved itself a boon to all. Gentlemen composing the Hospital Board have worked late and early in its interests. There are some points, however, in the management which most urgently require changing, and that as speedily as possible—I refer to the fact that no physician who has not been appointed by the staff can have the privilege of attending his own patient in that institution.

I ask you, Mr. Editor, why should the hospital draw large subsidies from both the provincial government and the corporation of the city of Toronto, and yet dictate to the patients as to what physician they *must* have while in the building? More than that: Is it fair or proper that even private ward patients who are paying \$15 per week, should not be allowed to use their judgment and preference as to what medical man they would rather have?

The claim which Dr. Ferguson has established is certainly a good one, and the Trustee Board of Toronto General Hospital should see that this state of matters is not allowed to go on any longer.

Hoping that this matter will be taken up and the proper remedy applied, I am, yours etc.,

D. A. YOUNG.

Toronto, February 10th, 1893.

To the Editor of ONTARIO MEDICAL JOURNAL.

SIR,—I would just like to state that I approve of Dr. Ferguson's letter in the last number of the

JOURNAL. I think the medical men in the city who are taxed to support the General Hospital, ought to have the privilege of attending their own private pay patients. It would not do the hospital any harm, but a great amount of good; it would make it more popular with the medical profession, increase the number of private ward patients, and increase the confidence of the public in the institution.

I remain, yours,

J. A. TODD.

Toronto, February 11th, 1893.

To the Editor of ONTARIO MEDICAL JOURNAL.

DEAR SIR,—Permit me to say that I quite agree with Dr. J. Ferguson in his article in your last issue, concerning the Toronto General Hospital. I am quite convinced that it would be a decided advantage to the public generally as well as the profession.

Sincerely yours,

C. J. HASTINGS.

AMERICAN TEXT BOOK OF SURGERY.

(Published in 1893.)

To the Editor of ONTARIO MEDICAL JOURNAL.

SIR,—On page 873 I find the following:

"Prostatic Abscess.—When, during an attack of acute prostatitis, the patient suddenly has rigours, followed by increased fever and sweating, it is probable that suppuration has occurred in the gland. If the abscess opens into the urethra, as it usually does, no special treatment is necessary, if it points toward the rectum, however, or if, with unmistakable symptoms of suppuration, the abscess shows no disposition to point in either of these directions, it becomes necessary to evacuate it. An incision should be made in the median line until the pus cavity is reached."

On page 385, vol. 2nd, International Encyclopedia of Surgery (published in 1882) I find what follows:

"Prostatic Abscess.—When, during an attack of acute prostatitis, the patient suddenly has rigours, followed by increased fever and sweating, it becomes probable that suppuration has occurred in the gland. This does not involve any change in treatment, but digital examination of the rectum should now be made once or twice daily. If