

noted that in 1908 only 618 places could be placed at the disposal of 898 physicians who were seeking localities to practise through the intermediation of the League. In that year only 6,000 persons were studying medicine, but the number of students of medicine has risen continually since 1905 from 6,080 in 1906, to 8,568 in 1908-09, and in the summer semester of 1909 to 9,509. That the income of German physicians is quite small has been recently shown by a statement of the statistical bureau of Saxony. According to this, in the entire Kingdom of Saxony, 34.8 per cent. of the physicians had not yet an annual income of \$1,050 (4,300 marks), and only 44.8 per cent. of the physicians received more than \$1,500 (6,300 marks). In this calculation of the income, the professional expenses have been deducted, but on the other hand the income from private property of man and wife and all other outside sources are included. These economic conditions will become even worse after the introduction of the new imperial insurance law, for then all persons who have an income of \$500 (2,000 marks) and under will be entitled to sick insurance. This means that in Prussia, for instance, 92 per cent. of the population will belong to the Krankenkassen.—*Berlin Letter, J.A.M.A.*

---

Sleepiness should not be overcome as a rule, as it is Nature's signal to stop work. If efforts are continued in spite of fatigue, the quality of the work is poor and the exhaustion inordinate. Students constantly make this error, and do all sorts of things to keep awake to burn the midnight oil, when if they would go to bed and rest they could accomplish far more in half the time in the morning, with little or no fatigue. Yet there are times when sleepiness and fatigue must be overcome without resort to stimulants which injure the judgment. The tired physician with a critical obstetric case, for instance, must have his wits about him, and it will aid him vastly to go to an open window every fifteen or thirty minutes to take a dozen or two of deep inspirations of cold air. His exhaustion in the end will be great, but he can make it up later. As a matter of fact, surgeons and others whose work requires the keenest perceptions, instinctively choose the early morning for their best efforts, reserving the afternoon for "low-pressure" tasks or recreation. That is, it is far better to so live that we do not need the stimulus of these extraordinary methods of respiration.—*American Medicine.*