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## MEDICAL AMALGAMATION.

VICE-CHANCELLOR MULOCK, in his reply to the "Affiliated Universities" at the Trinity medical dinner, brought forward the suggestion that the two Schools of Medicine at Toronto might be strengthened by amalgamation. He said: "With two medical schools in affiliation with the University of Toronto, that institution has endeavored, and I believe with some degree of success, to strengthen the hands of those teaching bodies in their efforts to promote medical education in Ontario; and I have it upon the authority of a distinguished professor in a London hospital, who visited Toronto lately, that while Canadian students are principally deficient in practical knowledge of the healing art, their theoretical attainments quite equal those of English-trained students. The explanation for this state of affairs lies, no doubt, partly in the fact that our Canadian hospitals, with our limited population as compared with that of Great Britain, cannot reasonably be expected to present the same opportunities to the medical students as do those of the great City of London. This disadvantage time alone can remove. If, however, the Ontario student labors under disadvantages remediable at our hands, it would be in the interest alike of the student and of the whole community that such disadvantages should be removed. I have heard it suggested that medical science in Ontario would be advanced if the profession Were to concentrate their forces in promoting one school in Toronto instead of dividing them in support of two as at present; whilst against this proposition, amongst other arguments, it is said that separate faculties in friendly rivalry serve the good purpose of stimulating each other."

Both schools depend entirely upon their undergraduates, as well for the maintenance of the professorial staffs as for the support of the Colleges, so that a concentration of the two incomes would leave the double revenue to be expended upon a single cause. The fact that promising men leave our arts institutions to complete their after course in medicine at Magill, would seem to prove that our lectures here are as a whole weak, at least when compared with the staff of that institution. The clinics here are admittedly very incomplete. Separate existence then tends to weaken, amalgamated interests to strengthen; for increased income permitting of better paid and consequently more able professors, renders a thorough Practical course possible. As a result, the public would be benefited by a more able and especially a more practical body of surgeons and physicians. As Mr. Mulock points out, any stimulating effect produced by rivalry would be removed, but it is hardly advisable to engender in early life rivalry between men who may at any time be called upon to act in harmony.

It is more than likely that an attempt to carry out such an idea as that suggested by Mr. MULOCK would meet with much opposition, the strongest perhaps coming from the existing staffs of Professors; but while these obstacles stand in the way of the furtherance of the plan, yet there seem to be good reasons for holding the question up to consideration.

## CLOSED DEBATES.

The first meeting this year of the Debating Society augured brilliantly for a change where change is so much needed. The debate was an open one, and hopes were raised that its decided success would cast corresponding discredit on the stilted performance known as the closed debate. The committee, however, which has charge of the choice of subjects and the appointment of speakers, promptly set to work to counteract the good effects of a good start. The freedom and friskiness which characterized the discussion on the abolition of scholarships seem to have made no impression on the phlegmatic mildness of the Society's officers. These gentlemen, of course, know all about the rules. If the argument is repeated, that since open debates, as experience has shown, have been uniformly entertaining and closed ones just the reverse, the former should be continued to the exclusion of the latter, they shake their heads with becoming official gravity. "Such a course would be unconstitutional," it is replied. And certainly, to promote the best interests of the Society, instead of standing sentry over a dead-and-alive constitution, would be a shocking dereliction of duty. Our cousins on the other side of the lake manage things better; there the closed debate is reserved for prize competition and commencement days, when dull comedies are not only tolerated but expected.

There is one other contention we have heard made in favor of what may be justly called the prohibitive policy. The appointment system is maintained to be the proper nurse for the incipient oratorical talent of Freshmen. The assumption is that these reticent youths are too much frightened by the august presence of the upper Years to take part in the open debate. Speaking for ourselves, we were never possessed by the belief that the Freshman stands in awe of the majesty of the Senior, and if some of the committee-men are so possessed, they deserve to be congratulated on their glorious imagination. The probability is, the First Year thinks it can take care of itself, and might perhaps resent in strong terms the charge of childish timidity implied in this plea. In any case, there is not the shadow of a reason why the greater number should be sacrificed for the few; and if any regulation tends to violate the maxim, the blessing from letting it fall in abeyance will be unmixed. The dictum that the constitution is made for the Society becomes ludicrous when reversed, but unfortunately the devotees of red tape have not a fine sense of the ludicrous.

The undergraduates who wish to improve themselves in the arts of extempore speech and ready discussion are, for the most part, against closed debates; the opposing party consists mainly of the lovers of prepared harangues, written discourse, and "tall spouting. So long as the latter are in the ascendant, the Debating Society will be the sleepy elephant of the University.

MEDICAL.