

ON THE PRACTICAL CLINICAL TEACHING OF STATE MEDICINE.

By WYATT JOHNSTON, M.D.,

of Montreal,

Assistant Professor of Hygiene and Legal Medicine, McGill University.

By instruction in State medicine, I refer to that beyond what is required to qualify the average medical student for his degree, up to what is required to qualify him as a medicolegal or sanitary official. Though the term State medicine has by usage come to signify, in this country and England, merely public hygiene, it should properly include legal medicine as well, and it is in this wider sense that I employ it.

On comparing American facilities for instruction in State medicine with those existing in Europe, we find ourselves handicapped by the absence of official connection between the medical schools and the State. Professors of hygiene and legal medicine do not with us, as they do in Europe, become as such entitled to official positions which give them opportunities to study and practice the specialties which they teach; hence, except in the case of a comparatively few State universities, it is evident that our schools must select their teachers in these branches from among those persons holding State positions, or that the latter must obtain teaching positions in order to make practical teaching possible. Evidently, active cooperation between teaching bodies and State or municipal authorities is highly desirable.

The largely increased number of teachers who now occupy State positions, as compared with that of a few years ago, naturally leads one to inquire to what extent the teaching had become more practical. We find, however, that beyond a decided augmentation in the amount of laboratory work, the State medicine courses are still largely modeled on the old plan, and little or no teaching analogous to clinical instruction is given.