

under two years of age, of one-half grain every four hours, and to adults after the following formula :

R Salicin, 3j.;
Fiat pill, No. 24;
Sig. two pills every four hours.

"Its employment," he says, "is followed, after a short time, by a decrease in frequency of the evacuations, a return to their normal colour and consistence, and subsequent restoration to entire health."

CURE FOR CORNS.

Bathe the feet well in warm water, then with a sharp instrument pare off as much of the corn as can be done without pain or causing it to bleed, and dress once a day with the following salve :

R Black oxide of copper, gr. xv.
Lard, $\frac{3}{4}$ ss. M.

COLLODION IN ERYSIPELAS.

M. Broca recommends the application of collodion in cases of erysipelas, in the following manner : a layer of collodion should be applied around the margin of the erysipelatous blush for a distance of three inches, and also over the affected part. The object of the former is to exercise a circular compression, so as to separate the affected part from the rest of the cutaneous surface. It is necessary to examine these layers once or twice daily, and to repair the fissures which occur. The collodion used must be free from oil. It is rare to see the erysipelas spread after these applications, under which it is in a short time extinguished.—*Edinburgh Medical Journal.*

THE CANADA MEDICAL RECORD

A Monthly Journal of Medicine and Surgery.

EDITOR :

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SUBSCRIPTION TWO DOLLARS PER ANNUM.

All communications and Exchanges must be addressed to the Editor, Drawer 56, Post office, Montreal.

MONTREAL, JUNE, 1873.

MONTREAL GENERAL HOSPITAL.

In the May number of the *Record*, we mentioned that we had received a letter, signed "*Junior Practitioner*," stating that the Committee of Management of the Montreal General Hospital, had lately discussed the propriety of increasing the Medical Staff of the Institution, as well as the propriety of some of its older members retiring on the Consulting Staff; that at a conference held between the Hospital Board and its medical staff, the latter unanimously opposed the proposed change, the result being that, for the present,

the matter had been allowed to drop. Although we presumed that upon all medical matters, in Montreal, we were tolerably well informed, we were obliged to confess that the information given by our correspondent, was news to us. Since then we have heard the details of the interview between the Hospital Committee and the Medical Staff, and we confess not a little surprise at the arguments used to upset some of the means proposed by the Board of Management for increasing the hospitals efficiency. We could understand opposition to the retiring of some of the older members of the staff, for it has not been customary in the history of the institution, and it was too much, we confess, to have expected them to graciously acquiesce in a compulsory retirement. Upon this point it might perhaps have been advisable for a time, to use 'moral suasion'; to have had a distinct expression of opinion from the Governing Body of the Institution, that, after a certain term of service, attending physicians should be promoted to the Consulting Staff, rather than come boldly forward with an almost direct request that certain members should retire. Human nature, in spite of all the restraints which may surround it, will kick when kicked, and it is therefore no matter of surprise to know that this point was strongly opposed. If, after a time, however, the hint was not acted upon, then the remedy would be entirely in the Committee's own hands. Candour, however, compels us to say that, while we believe that, as a general rule, a physician or surgeon should retire upon the Consulting Staff after twenty-five years active work, we hold strongly to the opinion that exemption should be made in favor of those engaged in clinical teaching. To be able to impart information at the bedside, to work out cases, so as to make the more important points impress themselves on one's memory, is not a gift given to every medical man. At a time, therefore, when a clinical teacher would be most valuable, he should not be compelled to retire. It may be said that this argument is equally applicable to the plain attending physician. We, however, do not think that it is; for the clinical teacher, if compelled to retire, could not make his experience at all available to his successor, while the physician retiring upon the Consulting Staff, is at all times at call to assist in all difficult cases and dangerous operations. Still, as we have already said, this point is one quite capable of discussion, and in the way brought forward, that it excited unanimous opposition does not surprise us. With regard to the proposed increase of the staff, especially that portion intended to have the charge of the outdoor department, under the name