

lation of steam containing carbolic acid is important, especially when the membranous exudation has extended into the larynx and trachea. Externally, poultices, Tr. iodine, spts. terebinth, etc., have usually been thought advantageous.

3rd. Constitutional treatment is sustaining from the beginning. Depressant remedies are inadmissible at any period. Stimulants are very important in severe attacks, when prostration is severe from the effects of an excess of poison in the blood. Wine, spirits, amm. carb., etc., should be administered *ad. lib.* When pneumonitis sepevenes, poultices to the chest and between the shoulders are essentials, with stimulant expectorants. Of internal remedies, a mild purgative should be administered at first; subsequently, little if any purgative medication is advisable. Internally Tr. ferri mur., with pot. chlorat., administered frequently, is chiefly relied on, by all. The Tr. ferri has the effect of preventing or removing the attendant dyscrasia of the blood, in this as well as other diseases, to a greater extent than any other known remedy; and the chlorate is a tonic and febrifuge of no mean power; while both have a specific action on the local disease, and are applied every time it is swallowed. We are convinced, by a somewhat extended experience, that calomel, in small and frequent doses, is also of much benefit, and especially when the membrane extends into the trachea. We are aware that many physicians in the past have condemned it as being useless, if not positively injurious, yet we know that the practice of administering it is gaining ground, notwithstanding the prejudice existing against it. Where suffocation is threatened, and all other remedies have failed, tracheotomy as a last resource should be performed, with the faint probability of rescuing the sufferer from otherwise certain death. When it is followed by paralysis, strychnia and electricity are the remedies chiefly relied on, while massage is important, as a substitute for the necessary exercise of the paralyzed muscles. Nourishing diet, tonics, reconstructive remedies, are all-important in every case, not only during the attack, but for some weeks subsequently.

MEDICAL REGISTRATION IN ONTARIO.

In another column will be found a letter on the above subject which is very timely. The question

as to registration is certainly a burning one, with the hundreds of students now in our colleges, who are, we believe, memorializing the Council for better terms than those proposed, of insisting on every practitioner taking the Council examinations. We may say that we are entirely in accord with the sentiments expressed by our correspondent. It seems absolutely absurd, in consideration of the action spoken of by our correspondent by the authorities in Britain, as also in our own Provinces of Manitoba and Quebec in regard to reciprocity, that our Council should undertake to build a wall around our little medical institution in Ontario, through which none may enter except by the door of Council examinations and Council fees. There has long existed a feeling that certain members of the Council look askance at practitioners who have registered here under old country licenses, even though such practitioners may have spent some time in attendance upon one or more of the great hospitals of London or Edinburgh. The old cry of "evading our laws," crops out from these men continually, though, as we have previously pointed out, laws must be made before they can be evaded. Surely a graduate of one of our Universities who spends say a year under the instruction of the best men in London and Edinburgh, and who secures a license to practice from one of the Colleges there, is a better man than he would have been had he simply passed the Council here. Why then should we insist on so close a corporation in medical matters, unless, as has been hinted by our correspondent, the fees are the object. Do the members of our Council wish to exclude British licentiates on the ground that their scientific or professional standing is lower than ours? If they do so, not only the members of the Council but the profession at large in Ontario may well become the laughing-stock of medical men wherever our name is heard. We hope the letter of D. E. J. may be followed by others showing the position held by the profession in various parts of the Province, on this very important question.

TAKING BLOOD DIRECTLY FROM THE LIVER.

Dr. Haley read a paper before the last British Medical Association, in which, among other therapeutical procedures for the relief of congestion of