

suspect that the Yankee public have tired of the good old word "cold" as an etiological explanation, and for a time at least have adopted a more classical term.

The Dispensary and Hospital evil has perhaps not become so pressing as it is in London, but it thrusts itself upon one's observation everywhere. People—well dressed people—present themselves daily at the charitable institutions, and obtain relief which they ought to have paid some hard-working doctor for. The necessity on the part of teaching institutions for clinical material, the want of unanimity upon this subject among members of the profession, and the cupidity of the patients themselves, here as elsewhere, combine to prostitute the proper use of these charities. A side issue lately arose out of this matter. It was found (and I know that it is not an uncommon thing to do here, even among some of the so called better class of practitioners) that a certain attendant upon one of the largest hospitals was in the habit of diverting such of their patients who were worth anything to his own private office, and getting out of them what he could in the way of fees. I do not propose to discuss the morality or the medical ethics of the affair, but I think that the action of the medical board in calling for his resignation was, on the whole, commendable.

Intubation of the larynx, especially as a substitute for tracheotomy, is still under trial. It may safely be said that even if no better results are obtainable from it than from tracheotomy for the cure of croup and diphtheria, it will always be valuable as a relief measure. Parents who refuse to permit a "bloody operation" will allow intubations to be performed. I have seen O'Dwyer's latest modification of his introducer, tubes and extractor, and they are marvels of mechanical ingenuity. The introduction and extraction of O'Dwyer's tubes, under the circumstances which commonly call for their use, is no easy matter. "Let them who think it is just try it," said an instructor to his class in laryngology the other day.

A phase in the attempt, old as the hills, to cure epilepsy by operative procedure has presented itself here in the field of ophthalmology. Dr. Stevens, an oculist in large practice, is the author of a work on nervous diseases, in which he claims to have cured a large number of epileptic and allied cases by operations upon the ocular muscles. Everybody knows that muscular insufficiencies, as well as

disturbances of the normal relation of one set of eye muscles to another, will bring about dizziness, nausea, and other subjective symptoms. Dr. Stevens claims that they also give rise to much more serious neurotic troubles, whose relief lies on the connection of such muscular deficiencies and insufficiencies. The matter must be regarded as yet *sub judice*, but when one remembers in how many parallel instances similar extravagant claims have been made, it is best to maintain for the present an attitude of intelligent scepticism.

Lately, in the Academy of Medicine, Dr. Kratzshmar read a very interesting paper on Dettweiler's treatment of phthisis, and entered a plea for the erection of his pavillion hospital convenient to large cities like New York, where unfortunates might make a stand against this terrible disease.

To-night I am going to attend the dinner given by that most delightful of all the New York social and literary gatherings, "The Twilight Club." The subject for discussion,—“How would you spend a million dollars for the public good?” suggests the Royal Victoria Hospital in Montreal. What a grand position for a consumptive hospital on the Dettweiler principle! About one-eighth of the population in temperate climates dies of phthisis in some of its forms, and notwithstanding all the workers from Æsculapius to Koch we get now no better results from treatment than came to St John Long or any other empiric,—ancient or modern. Enforced fresh air breathing in all weathers, full and generous feeding, the most rigid hygienic observances—all these could be carried out on the southerly slope of Mount Royal, as it hardly can be within the limits of any other city on this continent; and, in my humble opinion, it would do more good and be, consequently, a more lasting monument to the munificence of its founders than it can ever hope (from its remote, inaccessible and inconvenient position) to accomplish as a General Hospital.

About Dettweiler's plans it may be said that while his theory is old and commonplace, the means to the end he would reach are at least practical, somewhat novel, and infinitely more effective than any kind of drug treatment. Of all the plans which in common with my fellow practitioners I have tried for the relief of phthisis, I render thanks that I have always been a follower of the searchings of that medical free lance, Dr. Felix Oswald's, and I always regretted that a severe Canadian climate prevented my carrying out his