

the sick and wounded arriving from the front the percentage of Canadians is very small indeed, the average being about 10 per cent. We have in France on an average 2,000 beds in excess of the number of Canadian patients. On August 18th of this year we had in England 12,018 cases, of whom 6,747 were overseas sick and wounded requiring active treatment. Of these 5,135 were being taken care of in British hospitals and only 1,612 in Canadian hospitals. The balance of these cases had arisen locally or were convalescents. The 5,135 Canadian patients were located in 100 British hospitals, widely scattered over England, Scotland, Wales, and Ireland.

Both in France and England we find our Canadian soldiers asking and begging to be taken to Canadian hospitals, and yet, as we have seen, no effective steps have ever been taken to secure this end. Further, I find Medical Officers constantly complaining that, although they have sacrificed their practices at home with the object of helping to take care of our soldiers overseas, yet in consequence of the existing conditions they rarely have the opportunity of treating a Canadian patient.

I am informed that the Imperial Authorities at the front are in the habit of sending instructions to the base that so many British wounded, so many native wounded, and so many men belonging to the Royal Flying Corps are being sent back, and that these three classes of wounded are to be distributed to their respective hospital centres at the base. If the Royal Flying Corps can thus be separated from the other arms of the British Service, it surely ought to be possible to separate another class as "Canadian," to be directed to Canadian hospitals in France. Even if this plan is found to be impracticable, Canadian patients, proceeding from the base in France on hospital ships to England, could easily be labelled "Canadian," and be collected at the point of disembarkation. From here they would proceed directly to a Canadian hospital. This procedure would be facilitated if we had a concentration of Canadian hospitals in one place, such as is proposed in the Shorncliffe area. The ideal arrangement would be to take the Canadian wounded in motor ambulances directly from the ships to hospitals in the vicinity, thus sparing them the fatigue and discomfort of a long railway journey, and incidentally also saving the country the expense of such a journey.

On removal from the base hospitals I find that the Imperial cases are to a great extent separated, and sent as near their homes as possible. For instance, after a recent engagement in France the wounded Somersetshires were sent to Bristol—that is to say, a town in their own county, so as to be near their friends.

In this connection I should like to point out that if we had a concentration of primary hospitals with 3,000 or 4,000 patients under our control it would be possible to secure the services of consulting experts in the various departments, and thus ensure the best possible treatment for our men, whereas the present policy of scattering hospitals all over