expense of retaining the Junior Regimental Medical Officer is a mere bagatelle, and should not for one moment be considered when the greater efficiency their presence would ensure is taken into account. In the formation of the Bearer Companies and Field Hospitals, Canada has been too slow. within a month of two years since Director-General Neilson announced the scheme we have alluded to, and with the exception of at Halifax nothing has been done. The late General Officer commanding the militia, Major-General Hutton, conceived the insane idea of establishing Bearer Companies out of medical students at the various medical schools in Canada. Had he consulted some who could have given him good advice before taking the preliminary steps towards their formation, his scheme would have been spared the inglorious fiasco which met it. Had Director-General Neilson's programme been promptly put into action we might have been able to send one or two Bearer Companies and Field Hospitals to South Africa, where they would have been quite as welcome as are the magnificent fighting material from Canada now there and en route. No contingent from the colonies has done more notable and valuable work than the Bearer Companies and Field Hospitals from Australia.

THE WAR IN SOUTH AFRICA.

The following extract from the British Medical Journal of 24th February, written by Clinton T. Dent, of the Consulting Staff of Surgeons, will be read with much interest:

PENETRATING WOUNDS OF THE HEAD.

Bullet wounds actually penetrating the skull and some portion of its contents are numerous enough, and constitute at first sight the most remarkable cases met with in the military hospitals. First, with regard to the effects on the skull itself: The range will, as is well known and as has been determined experimentally, greatly influence the amount of injury inflicted on the bone. Unfortunately reliable information can very seldom be obtained on this point. All who have read the accounts of the engagements near the Modder River