would be beneficial to the members of the profession. But while we, as outsiders, think so, the editors, upon whom rests the responsibility of managing the papers, apparently do not look at the question in the same light; for we find the merest epitome of the Council proceedings is all that goes out to the profession; and they are left without that light, on the proceedings of the Council, which they are anxious to get and ought to receive.

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Because of this want of publicity, or largely because of it, a misconception exists with the public, as well as with many members of the profession, as to the utility of the College of Physicians and Surgeons. It is not uncommon to hear from the public, that it is a huge monopoly gotten up and maintained for the benefit of the profession, to the detriment of the public; and from the profession, we not infrequently hear that free trade in medicine is a desideratum.

I need not say to you, that this is a great mistake, not only in so far as the public are concerned, but also the profession; for the public are the beneficiaries in the first place, and the medical men, in a secondary sense, receive more than compensation for all they have been called upon to contribute to the funds of the college. That we may understand to what extent the public and the profession are interested, it may be wise to hastily review some steps which have led up to the present status, and to mention some of the difficulties that we have had to overcome. To understand this fully, we must look to the status of the profession previous to 1865, the date of the first Act by which the Council was established. We practically had free trade in medicine, though not in the letter of the law. We had three medical schools in Ontario. We had three licensing boards, including Eclectic and Homeopathic. Each one of these had its own standard, and each its own curriculum; and each vied with the other to turn out the greatest number of students. The Province of Quebec sent up a goodly number, and the American schools of all shades, Eclectic, Homeopathic and Regulars, not a few, while Europe drenched upon us her surplus graduates. Thus this Province was more than full with imperfectly qualified medical men. Under these circumstances, the schools sought legislation, each thinking the other a greater culprit than itself, in letting loose upon the country poorly qualified

men; and they hoped by legislation to restrain the offenders, while they had a common desire to preserve the Province for the practice of their own graduates to the exclusion of foreigners.

The Medical Act of Upper Canada, passed in 1865, was the result. This Act established "The General Council of Medical Education and Registration of Upper Canada," subsequently known as "The Council." It was a compromise Act. universities and schools, whether granting degrees or teaching medicine, were either consenting parties to this Act, or were compelled to come under its provisions; their interests being protected, by their being given representation in the Council, and by a further provision, that any curriculum established by the Medical Council, must receive the approval of the Governor-in-Council, and be published once in the Canada Gasette, before it became binding on the universities and schools. Provision was also made for the election of twelve persons for a period of three years from among the registered practitioners of medicine in Upper Canada. These with the representatives of the universities and schools, made up the entire Council. The taking into the Council of the territorial men was viewed differently by different parties. To one it was the giving of representation to the profession in the Council, that it might have a voice in its control and management; while to others it was a further guarantee that one school should get no advantage over the others, the territorial men holding the balance of power. The electoral divisions then accepted were those established for the election of members of the Legislative Council. These were convenient in those days, and perhaps as fair as any could have been. It was before the science of gerrymander had secured a footing.

The Act provided for registration. It stipulated what the qualification should be, and the fees to be paid, and gave to the Council the general control and management.

The Council was given power to establish a uniform standard of matriculation, and also to "fix and determine from time to time the medical curriculum," though it was not allowed to conduct the examinations. Each individual school conducted its own examinations after its own fashion. I may call your attention to the fact, that the British Medical Act has only reached this stage up to the