

continent. We quote as follows from Hamilton's "System of Legal Medicine" (an admirable work, by the way): "Who owns the prescription? is a question frequently asked by physicians, but not as yet answered by the courts. In his treatise on medical jurisprudence, Ordonaux has devoted some pages to its discussion; but the matter is one of academic rather than of practical interest. The patient pays for advice. He receives a prescription orally or in writing. It is his. He can take it as often as he wishes at his own risk, or give it to his friends. No one has ever pretended that a lawyer can forbid a client repeating the legal advice given to him. Perhaps a contract might be made with the patient not to 'repeat the prescription'; but then, if he breaks the agreement, what is the physician's measure of damages? If, indeed, the patient put up the prescription as a patent medicine, and advertise under the physician's name, this might be a libel; but the gist of the offence would be not selling the prescription, but imputing unprofessional conduct. There is no practical method of preventing a patient from repeatedly swallowing a prescription intended for a single occasion, except to give him the actual remedy, after the old fashion, now again coming into vogue, or else to make the dose so disagreeable that to take it will be a pain rather than a pleasure."

(2) Shall we seek remedial legislation from the Ontario Parliament?

No, decidedly no, for the simple reason that we can't get anything of the sort. If we asked for it the cry of "class legislation" would speedily swell into a roar which would effectually drown our plaintive cries.

We have nothing original to suggest in the premises, and can only recommend one of two courses: (1) Either make some amicable arrangement with the druggists, a portion of whom are disposed to treat the profession fairly; or (2) dispense our own medicines.