

THE CANADIAN MEDICAL TIMES.

A WEEKLY JOURNAL OF
MEDICAL SCIENCE, NEWS, AND POLITICS

KINGSTON, SATURDAY, NOVEMBER 8, 1873.

TO CORRESPONDENTS.

Communications and reports solicited. Correspondents must accompany letters, if intended to be printed anonymously, with their proper signature, as a guarantee of good faith.

TERMS OF PUBLICATION.

THE MEDICAL TIMES is supplied six months for ONE DOLLAR. Address orders and remittances to JAMES NISBET, M.D., Kingston.

POSTAGE ON THE MEDICAL TIMES.—The rate of postage on the Medical Times is Five Cents per quarter.

REMITTANCES.

Gentlemen who have not sent on their subscriptions for the MEDICAL TIMES are requested to remit One Dollar for the current six months without further delay. The system of advance payments must necessarily be adhered to.

A death from Mrs. Winslow's soothing syrup took place in Providence, Rhode Island, lately. The City Registrar, in relating this in his official report, observes:—"There ought to be some power to stop the sale of a rank poison like Mrs. Winslow's soothing syrup, under the false pretence that it is perfectly safe." The observation applies to many similar proprietary articles containing dangerously active constituents and vaunted as perfectly safe. A certain preparation much advertised in Canada contains corrosive sublimate enough to poison in a dose but little in excess of the dose directed. To be complete, the schedule to the Sale of Poisons Act requires the addition of not a few poisonous proprietary medicines.

The London *Medical Times and Gazette*, in an article on the remuneration paid to scientific men, deploras the fact that there is no work in life so likely to lead to disappointment and penury as the pursuit of science for its own sake, and that there is no kind of labour so poorly paid as that of scientific men. In Great Britain the medical man of to-day is more poorly paid for his services than he was half a century ago, and all scientific professions are fast falling behind the commercial and business classes at the present rate of remuneration. For this result and tendency the author blames those who have attained the highest round of the ladder of success, and whose position enables them to refuse everything except the most remunerative practice.

In Canada, the custom of charging exceedingly small fees, in vogue with many distinguished medical men, acts injuriously on the profession. It may be observed in every town that there are some leading medical men who, by reason of attainments, skill, and long experience, are entitled to the highest scale of fees for their services, are yet eager to keep up a large practice by making low charges; and they have of course to do a great deal of work in order to make a comfortable income. This habit is very hurtful to the young practitioner, and checks his career at the time of his greatest need and difficulty. Practitioners of standing and reputation owe it to the profession as well as to themselves that they should maintain a proper scale of remuneration. If they were to make their charges as high as is com-

patible with the wealth and position of their clients they would undoubtedly make a better income with less labour; and by fixing a minimum fee at double or treble what is commonly charged they would also benefit themselves and do a good turn to the younger members of the profession, who must, in the natural order of experience, find their beginnings in practice amongst those less able to pay the higher fees which ought to be exacted by men of mark in the profession. We think the blame attached by the writer in the *Medical Times and Gazette* to the leading members of the profession in England much more applicable in this country and in the United States, where there are less distinctive gradations of rank, so to speak, in the medical profession. What is wanted here, indeed, is the adoption of certain English notions as to the rank of medical men professionally. For instance, as in London, a physician holding a hospital appointment, ought to give himself up as much as possible to consultation practice, and should demand the highest rate of fees for attendance. In like manner, an operative surgeon ought to be very exacting in appreciating the value of his skill and special training. Again, some English practitioners let it be understood that their minimum midwifery is a guinea, while there are lower grades who do it for ten shillings and sixpence or fifteen shillings.

Undeniably medical men by self-appreciation have it in their own hands to obtain a proper rate of remuneration. The only difficulty is that of concerted action. Here a good deal of reliance has been placed on published tariffs, though these fail to be adhered to in many cases. The physicians of Toronto lately framed a tariff, which would be an admirable one could it be carried out; but we have information from Toronto that it is practically disregarded, and that there are men in the city running about for what they can get, and accepting fees much below the minimum rates of the tariff. Notwithstanding such defects, it will be well, we think, to maintain the system of published tariffs, and to try and educate the public up to their requirements. The new Medical Bill for Ontario contemplates the legalizing of tariffs adopted by local medical societies by making them a scale of "reasonable charges" within the meaning of the Act. If obtained, this legislation will make tariffs of much greater importance and value, and will demand great care and attention to be given by medical men in framing them. It is evident that if practical adjustment and legal force can be made to combine, great advantage must necessarily follow. There will be a stronger inducement to adhere to a fixed legal scale, and we may expect a serious difficulty to be got over.

MIXED MEDICAL CLASSES.

I fully and respectfully recognize the high qualities, capacities, and vocation of women. I recognize, especially, the fact, that the elevation of women in domestic and social position, is one of the blessed fruits of Christianity. There are few, indeed, who hold intelligent and virtuous women in higher estimation than I do. It is

very much for their own sake, and on account of the respect which I entertain for them, that, on this particular point, I feel it my duty to state my decided opinion, that the promiscuous attendance of men and women in mixed classes of medical study, such as anatomy, surgery, and obstetric science, with concomitant participation in dissection, demonstration, and clinical exposition, is a thing so unbecoming and so shocking—so perilous to the delicacy and purity of the female sex, to the very crown and charm of womanhood, and so reacting on the spirit and sentiment which sustain the courtesy, reverence, and tenderness of manhood—that the law and constitution of the University, bound to promote, and seeking to promote the advancement of morality as well as knowledge, cannot sanction or accept such attendance."—*Judge Ardmillan, in the Edinburgh case.*

THE PROPER POSITION OF THE DISPENSING CHEMIST.

Mr. George Webb Sandford, in the course of an address to the students at the London College of Pharmacy, made the following appropriate remarks on the duties of dispensers:—

"A dispenser of medicine is a member of the noble medical profession. Always remember, I pray you, that, although members of that profession, you must not account yourselves qualified to assume the position or to exercise the duties of its higher branches, or you will cease to acquit yourselves honourably in your department. In the army there are generals, field officers, captains, and subalterns, each with their appointed duties, and the success of a campaign depends on the concerted action of the different grades. So in the medical profession. It is for the physician to prescribe and the dispenser to obey his instructions. According to my judgment, the moment the dispenser attempts to reverse this order of things, and to usurp the province of the physician, he gets into mischief; he assumes a duty for which he is not qualified, to his own disgrace, to the public disadvantage, and manifestly to the disadvantage of his class. Nothing can be more certain than that it is of the utmost importance that the prescriber should have perfect confidence in the dispenser, that there should be a mutual good understanding between them; and it is to me equally certain that this confidence and this good understanding must be destroyed if the dispenser be not a man of intelligence, an honourable worker in his department, and careful not to outrage the discipline of the profession."

MEDICAL EXPERTS.

With certain medical gentlemen there seems to be a strong desire to be medical experts. Especially is this disposition shown in cases of questionable insanity before our courts. We have always considered that to be an expert required a thorough and practical acquaintance with the subject, but the apparent necessity of the times seems to have rendered this unnecessary. The pleas of moral insanity, emotional insanity, and the like, are now considered to be such forlorn hopes that the lawyers seem to be willing to take the opinion of any one who may