

tunity to contribute to the funds necessary to meet the current expenses of the Council.

If prophecy were in order, we would say that there will not be enough funds collected in this way by a good many hundred dollars. It is just as sensible for a physician to say to his patient "My charge is thus and so; you may pay it or leave it as it is, and I shall offer no resistance," as to trust to the goodness of heart of a great many members of our profession to pay what they feel they will not be forced to pay.

Suppose we were to say to students coming up for examination that the fee is so much, and then to let it be noised abroad that this fee would not be exacted unless the student was anxious to pay it from a sense of duty, how would the expenses of examinations be met?

Men who refuse persistently to pay, on principle, that which is legally and morally right (and boast of it), are men that we would expect to find turning the family out of house and home, and leaving the wife, whom he had promised to love and honor, to earn a precarious livelihood at the washtub.

The Law Society enacts its annual assessment, lodges enact their annual dues, and why should a noble profession like ours go into paroxysms of anger when asked to contribute to the funds necessary for our own protection? Of course, we have heard the oft-repeated statement (repetition, however, does not make it a fact) that these are not parallel cases. The only point upon which they differ is upon the fact that non-payment means non-membership in the case of the Law Society, while the Medical Council is, we think, prone to be too lenient.

EDITORIAL NOTES.

Dr. Rogers, of Ottawa, was elected Vice-President without opposition. The position was the right of the Eastern Territorial men, and Dr. Rogers was entitled to it both from length of service and from his ability.

Dr. Harris, of Brantford, was elected President of the Medical Council. He discharged the duties of chairman with credit to himself and satisfaction to the members of the Council. In our next issue will appear a brief history of his medical career.

Dr. Williams, who has been ill most of the winter, was able to resume his seat at the Council Board and do some very effective work. It is the hope of his many friends in the profession that he may soon be restored to perfect health.

The speech made by Dr. Rogers, the Vice-President, when the Assessment By-Law was brought before the Council, showing the necessity for its introduction, comparing the mode of collection and amount collected with other colonies and countries, was perhaps the ablest and best prepared address delivered during the past session.

The Registrar is now preparing the circular *in re* the Assessment in accordance with the instructions from the Council, and the same will be sent out in a few days. The instructions were as follows: "That the Registrar be required to send to each practitioner a registered letter, enclosing a copy of the By-law, together with a circular letter explaining the necessity of imposing the fee, and calling special attention to the suspension of *Act* until June 1st, 1896."

Some peculiarities in statistics which will be interesting to the medical profession, and show them that, as a body, they are in favor of the assessment, came up in the discussion on that point.

Arrears to December 31st, 1892. . . .	\$7,000
Number of members in arrears	1,287

Of these, 52 owe \$20 and over; 119 owe more than \$9 and less than \$20; 464 owe more than \$3 and less than \$9; 652 owe \$2.

That is, practically 652 are paid up, owing only \$2, and have made no objection to the payment; 1,251 have paid up in toto, making 1,903 medical men who are not against the annual dues or the method of collecting them.

Judging by the proportion of the Council who voted against the assessment, *i.e.* 5 to 25, we are afraid that they each represent a very small number of their constituents, unless the non-payers happen to be hived all in one or two spots.