

very hazy. Though there never was any paralysis of the extremities, yet he never attempted to help himself, and appeared to have great difficulty in finding words to express his wishes. Aphasia was well marked. His progress towards recovery was never satisfactory. About a week before his death his strength began to fail and he was obliged to remain in bed. Symptoms of serous effusion set in, and he became comatose about forty-eight hours before his death. The diagnosis was white softening of the left anterior lobe of the brain. There was no *post mortem*.

His death is a loss of no ordinary value, and will leave a blank very difficult to fill, for medical men of his ripe experience and acknowledged skill are very few in number in this or any country. He was much beloved by those of his patients and friends who knew him best. Although sometimes brusque and abrupt in manner, he was yet kind at heart, and his loss will be sadly felt by many patients and friends all over the country. In his death the profession also loses one of its brightest ornaments; one whose gifts were of no ordinary character, and whose talents were almost entirely consecrated to the faithful discharge of professional duty and the well-being and advancement of the highest interests of his profession.

His funeral was largely attended by the students and members of the Faculty of both medical schools, the medical profession and the general public.

SANITARY BOARDS.

It is a matter for congratulation that the Legislature has appointed a commission to enquire into the best mode of procedure for guarding against the numerous factors of disease now existing in our cities, towns, villages, and country generally, and that to assist in this important task, they have availed themselves of the experience of a number of competent medical men. We would fain hope that the commission will not confine itself to the task of devising the best scheme for the government, in the future, of Boards of Health, but to that labor add another very important one, viz., an improvement in the means at present employed for collecting medical statistics. Averages, as Sir H. Holland observes in his "Notes and Reflections," may, in some sort, be termed "the mathe-

matics of medical science," and the success with which it has been employed of late by many eminent observers, particularly Mr. Simon, affords assurances of the results that may hereafter be expected from this source. We must compare together, says M. Louis, (*Memoires de la Societ Medecale d'Observation de Paris*) "a great number of cases of the same disease of equal severity, some relating to subjects in whom the disease was left to itself, others of individuals to whom certain medicines were given. After doing this, we must study the action of the same therapeutical agent on those in whom the disease was severe, and on those in whom it was slight, or those on whom the remedy has been used in large or small doses at a period near to, or remote from the commencement of the disease. This last circumstance is very important. So, likewise, we must mention whether the medicine is used alone, or in conjunction with other remedies. But not only does this method require much labor, but it also supposes a considerable series of facts, the connection of which is difficult, especially when treating severe affections in which we are accustomed to make new attempts, and which will not allow of our remaining a mere spectator of the progress of the disease. For it must be evident that we do not seek to know by approximation what remedies have appeared to be more or less successful, but to demonstrate in a rigorous manner, that a certain remedy, or certain method is useful or hurtful, and in different degrees, according to the manner in which we employ it." A glance at the history of medicine shows, that it has suffered more from faulty observation and false facts, than from false theories; for after all most of the theories have been based upon fancied observation. Averages and numerical methods can in no case, however, afford more than an approximation to the truth, yet the approximation is closer than can be attained in any other method. Accuracy in diagnosis is the first essential. If, as there is too good reason to suppose, in epidemics of diphtheria, ordinary cases of inflammation or ulceration, are included in the estimate of number, what value attaches to the percentage of deaths and recoveries, or to the therapeutic agent employed? Without that accuracy, what reliance is to be placed in the vaunted cures of "all the ills that flesh is heir to," by the most recent craze electric baths? History repeats itself; some sixty