

should endeavor to see more of each other. There is no better way to do this than by attending the annual meetings of our Provincial and Dominion Medical Associations. A man like our able and genial friend, Dr. Harrison, of Selkirk, who always attends these meetings, is a broader and more generous man than Dr. Jones, of Selkirk (if there be such a man there) who never attends them. When we meet in groups of two or more we might be a little more charitable in speaking of absent ones. I heard, a short time ago, a friend of mine speak to a small group of doctors in Toronto who were talking about a physician, whom I will call Jones, in terms not altogether complimentary, as follows: "Why is it that you fellows never have anything nice to say about Jones? He has at least nine good points for one bad. Why can't you sometimes refer to some of the nine instead of eternally harping about the one?" I think it would be well for us to act on my friend's advice and cultivate more than we do that greatest of all virtues, charity, in criticising the characters and acts of our professional brethren. I have but little to say about our ethical codes which are intended to promote peace and brotherly love between us. They are well enough in a way and accomplish much good, but we must not rely too much on them because there never was and never will be devised a code which will make a crooked man straight.

I do not wish, however, to be considered a pessimist in this connection. As a matter of fact I am not. I love and respect my profession and my friends in that profession. As I have frequently said to my student classes, our profession is a great and noble one in the sense that it gives us grand opportunities for good work in the interests of suffering humanity. If we work honestly and conscientiously, having regard to our duties to God and man, we will make the profession of medicine good, great and noble in the best sense of the words.

This country has produced many specimens of the better and higher type of physician. I will refer simply to one, James Elliot Graham, whom we hoped to have as our presiding officer at this meeting. He was the father of our Association in a sense, as he first conceived the idea of its establishment, and was one of the chief promoters of its organization. Dr. Graham was one of the greatest men and one of the most high-minded physicians that this country has produced. I think I can speak for the whole profession of Canada when I say that through his death this province and this medical Association have suffered an irreparable loss.

There has been, I think, no time in the history of this Association when its members were doing more in the interests of the public than now. Our Public Health Committee had an interview with the Hon. G. W. Ross and the Hon. J. R. Stratton during the last session, and asked the government to make some provision for the treatment of inebriates and dipsomaniacs. The Government had before that declined to do anything because of the expense, but when it was suggested that the probation system, as carried out in Massachusetts, was not expensive, the interviewing committee was asked to draft a bill to be introduced into Parliament. This was done, and the proposed bill was presented to the Premier. The bill did not, however, come before the House, although