

Again, if the Council has power under the act as it at present stands, then why was an amendment introduced into the Ontario Legislature to give power to charge British graduates a registration fee of \$400?

We desire to uphold the Medical Council in its efforts to elevate the standard of the medical profession in Ontario, and to establish a uniform curriculum and standard of examination, but we do not at all sympathize with it in its attempt at exclusiveness and trades-unionism. The action of the Council in regard to this question is much to be regretted, as it is not only damaging to its prestige but also positively certain to lead to further litigation, a course which the funds of the institution will not warrant. If the Ontario Medical Council can enforce the payment of differential registration fees, then there is nothing to hinder other Provinces of the Dominion from doing the same thing. If the Council can charge \$400, why not \$1,000 or \$10,000, and absolutely *prohibit* all British practitioners?

We would not have alluded to this subject, as a matter of very great moment, were it not for the fact that such a policy on the part of the Council is likely to destroy all hope of obtaining reciprocity in medical registration between Canada and the mother country.

A NEW METHOD OF PERFORMING TRACHEOTOMY.—At the meeting of the American Medical Association, Dr. Henry Martin, of Boston, made the following suggestions with regard to tracheotomy. He considers tubes entirely useless, and performs the operation as follows:—The incision is made in the usual manner down to, and through the trachea; a central stitch is then introduced into each side of the wound through the tissues, including the trachea; this is loosely tied so as to form a loop, through which a long strip of adhesive plaster is placed, and upon this a very slight traction is made, the plaster being crossed at the back of the neck. This keeps the wound open, and unless the traction be too strong, the loops will not cut through for two or three weeks.

THE SPHYGMOPHONE.—The *London Lancet* for May 24th gives a brief description of a new invention by Dr. Richardson, which he calls the Sphygmophone. The apparatus is a combination of

Pond's sphygmograph, and the telephone, so adapted that the tracings are accompanied by sound, which may be distinctly heard by an audience of several hundred people—or by the extension of the telephone wires, a mile or two away from the patient. The sounds produced by the natural pulse are said to resemble the words "bother it."

COMPRESSION OF THE AORTA IN UTERINE HEMORRHAGE.—Dr. Griffith, in the *Obst. Four. Great Britain and Ireland*, reports a case where the life of a patient was evidently saved in post partum hemorrhage, by compression of the abdominal aorta. Compression of the abdominal aorta in uterine hemorrhage is not altogether new, although the plan recommended by Dr. Griffith is somewhat out of the ordinary, and is deserving of consideration. When the abdominal parietes are dense and the omentum covered with fat, so that compression cannot be readily exercised directly, he recommends the introduction of the hand into the uterus, in order to compress the aorta through the posterior wall. The presence of the hand in the uterus also acts as an irritator and favors contraction. A full report of the case will be found in another column.

TRINITY COLLEGE CONVOCATION.—The following gentlemen received their degrees in medicine at the convocation of the University of Trinity College, Toronto, held on the 7th ult.

M.D.—J. D. Bonnar, W. H. Doupe, W. A. Daffoe, K. Henderson, A. M. Lynd, and R. A. Ross.

M.B.—J. D. Anderson, J. W. Caughlin, R. E. Eccles, W. B. Duck, A. C. Graham, A. J. Geikie, T. A. Kidd, D. Lowrey, R. P. Mills, J. A. McKinnon, J. J. McIlhargey, C. O'Gorman, G. O'Reilly, E. Prouse, J. W. Sharpe, and E. M. Thuresson.

HONORS.—Gold Medallist, R. P. Mills; Silver Medallist, J. A. McKinnon. Certificates of Honor, W. B. Duck, J. N. Caughlin, J. J. McIlhargey, T. A. Kidd, and C. O'Gorman.

THE DETECTION OF SOUND BY THE TEETH.—That sound may be detected and conveyed to the sensorium by means of the teeth, and that the faculty of hearing is improved by opening the mouth is well known, and often practically illustrated in public audiences, where spell-bound hearers engaged intently in listening are often described as sitting with open mouths, as well as