trusted to take medicine intelligently. Thus I rounded up any cases I could, together with any available information regarding contacts, and started them towards Norway House and the hospital. Some I made walk; some I sent by dog train; and for some I sent a plane. Since then I have treated around 40 cases of gonorrhea. Also, I had my first experience with penicillin. I believe it is revolutionary. Imagine curing a case of gonorrhea in twelve hours. Think of the saving, both in money and in hospital days. It now becomes a disease for the out-patient department, or for office practice.

In the meantime, I had received a wire that a pregnant woman at Island Lake, 200 miles from where I was, was two weeks overdue, and had felt no movement for two weeks. Ordinarily I see few maternity cases from any distance, although I handle all the cases at Norway House. Thus, when I am wired that something is wrong, I generally go. I wired for a plane to pick me up. I sent my wire at 4 p.m. and the plane was in at 10 a.m. the following morning. I decided to return to Norway House for an obstetrical bag first, and then we started out. We had to buck a head wind, and my pilot was unfamiliar with the country. Finally, at 5 p.m. as the sun was setting, we decided that we were lost, and went down on to a small lake for a look-see, and prepared to spend the night in the bush. As we circled down we spied a cabin. landed in front of it, and we were in luck. A white trapper, and his wife, were living there. We were 100 miles off our course. They offered to put us up for the night, but, more important, they gave us a map of the country. We were off again at daylight next morning, and arrived in Island Lake about an hour later—too late. The woman had had twins the day before. It had been a wild goose chase. Mother and babies were doing well.

We returned to Cross Lake that day, where I picked up my dogs, and returned home in the course of a few days. I found a wire waiting for me, saying that there was a man dead at God's Lake, and the Indians claimed that his death was not due to natural causes. Also, there was a man with an injured

leg at Oxford House.

As soon as I could get a plane, we started off again. There is an abandoned mine at God's Lake, and 20 miles from where we had to land, we flew over an open river. Immediately we struck a thick fog, so that we had to drop down to 500 feet and follow an old power line across country. However, we landed without mishap, but I don't like flying at that height. That night the local R.C.M. Police and I spent our time thawing out the body and yarning. Early next morning, I was able to do a postmortem. The man had died of pneumonia. The Indians had been alarmed at the amount of postmortem lividity, and claimed he must have been poisoned. At daylight we were off again, and arrived at Oxford House by noon. There I found a man with a fractured tibia. He had been cutting logs and had struck his leg with the pack of the axe. Then he had picked up a large log and carried it on his shoulder, and his leg gave way under him. No wonder. He had a long spiral fracture. How he stood the pain I don't know, but he claimed it was not very sore. I made a box splint and had the man loaded into the plane, and we were away again. We arrived home that evening and I had still to x-ray and set a leg, apply a plaster cast, and clear up jobs which had accumulated in my absence. It was my habit to let a few cases of elective surgery accumulate, and then have one of my confrères come over from The Pas by plane, and clear it all up between us. Last month he was over, and we did an interval appendix, took out a gall bladder, an ovarian cyst, an old pus tube, and repaired a hernia. This month again we did a Cæsarean section; suspended a retroverted uterus; did a perineal repair; and sutured a quadriceps tendon that had been cut with an axe six months before. To finish off, we did a hæmorrhoidectomy after dinner that evening.