

both Medicine and Surgery in a hospital of at least fifty beds. We hope that attendance at the out-door department of such a hospital or at an out-patient dispensary will be equivalent to the same time spent in the wards, for our experience has been that the young practitioner is far better qualified to diagnose and treat rare diseases of which he is not likely ever to see a single case, than he is to attend to the ordinary every day diseases such as he has to battle with from the very day he commences practice. The subject of dispensing, a most important one, seems to have been entirely forgotten. In a country like this where one may often travel many miles without coming to a drug store, a physician who is unable to dispense his own medicines is of comparatively little use. Another serious grievance against the bill was that it was intended to be retroactive to the extent of applying to the students who began their studies in 1892; but this injustice has, we understand, been remedied. We must give the promoters of the bill the credit of desiring by means of it to raise the standard of the profession in this Province. We wish that they could have added some clause by which every county would be compelled to have its medical society, in the same way that the provincial board of health can and does compel every municipality to have an active board of health. It is a fact that we must admit with shame, that outside of Montreal there is only one small local medical society in the whole Province, there not being one even in the great and ancient city of Quebec. What must be the result of such isolation it is easy to see, and we can leave it to our readers to understand.

#### BRADYCARDIA.

At the last meeting of the Medical Society of Montreal, Dr. Lafleur reported a case of slow heart in a medical student suffering from valvular disease. Sphymographic tracings showed that the arterial pressure was considerably diminished, and to this fact the reader of the paper attributed the symptoms. We think, however, that the explanation must be sought rather in the innervation of the heart than in the merely mechanical condition of fullness or emptiness of the arteries. For if we argue that slow heart depends upon empty arteries, how can we explain the rapid pulse of sudden hemorrhage

in which the arterial tension is greatly reduced, or on the contrary why we have slow heart in digitalis poisoning in which the arterial tension is greatly increased. It is much more likely that the cause of the slow pulse in the case reported was some irritation of the pneumogastric nerve which controls the too rapid impulse of the great sympathetic. We have frequently seen a great slowing of the pulse in jaundice and other disorders of the liver, while we have still oftener observed irregular and very rapid pulse in disorders of the stomach or uterus which irritate the sympathetic, quite irrespective of the condition of fullness or emptiness of the blood vessels.

#### CORRESPONDENCE.

##### A REPORT ON THE ORIGIN AND PROGRESS OF THE AMERICAN-BERLIN MEDICAL SOCIETY.

GENTLEMEN:—The constantly increasing number of students that yearly seek the advantages of a course of study in Berlin is my excuse for jotting down these few details regarding this Society, knowing that this information will be of immediate and material importance to them.

The meeting for organization took place in February, 1891, with an attendance of twelve, and at the next meeting there were about thirty-five American students present, and an organization was at once effected by appointing a president, vice-president, secretary, treasurer and various committees with special duties. At the next meeting there was an attendance of about fifty, and several very interesting and valuable papers were read, some of which were entirely original. At the second regular meeting of the Society there was an attendance of about sixty, and another profitable evening was spent in the discussion of papers that were presented to the Society. Many of these papers were accompanied by microscopical preparations, and these demonstrations were greatly appreciated by all present. At the next meeting, the writer resigned the presidency in favor of Dr. W. D. Miller, of Berlin, who has since held the chair, and the good work of the Society can be best understood by the following *résumé* of the incidents that have happened since April, 1891.

During the first full year there were twenty-three meetings held at intervals of two weeks, with the exception of the vacation months of August and September. Thirty-five papers were read by the members, and there were three debates or discussions, nineteen microscopical demonstrations and five patients were pre-