

Doctors' Efficiency is Aim of this Plan.

THE health of the producing element of the country is in the hands of the doctors. If John Smith is away two weeks from work through illness, or if John Smith dies, the country, temporarily or permanently as the case may be, loses a producer. If medical science can add 10 or 15 per cent. to a man's total usefulness by cutting down the length of his illnesses or prolonging his life, it is adding that much wealth to the state. Therefore, in a sense, the doctor is a direct producer himself, for he oils the wheels of production and keeps them flying without friction.

For some time the Ontario Medical Association now with upwards of 2,000 members, has been seized with the importance of the above ideas. It has felt that anything it can do to increase the efficiency of its own members is naturally going to result in better doctors throughout the province and better service to the public. With this end in view it has started this year a notable experiment, aimed at achieving as efficient a medical service as possible in the province. This, in brief, is putting within reach of every doctor a post-graduate course, not in Toronto or some other medical centre, but right in his own constituency.

The plan has been in the progress of formation for the last two years. It was successfully launched recently.

The plaint of the rural practitioner, often entirely alone and miles from a medical centre, has been that he cannot leave his community without a doctor while he

visits lectures or clinics or hospitals in Toronto or elsewhere to "brush up" his knowledge and learn of the latest advances made by his advancing profession. Overworked, ploughing a lone furrow, facing long hours, long drives, often hardship, he had little time or energy for further study experiment or research.

"What can we do for these men?" was the problem that faced the Ontario Medical Association. As a result the association approached, through recognized local medical societies in the province, the very ablest men in the profession, and asked for their services to instruct the rank and file. So, they have now gathered together a post-graduate school of itinerant lecturers who have grouped their subjects into a list numbering close on 200.

The province has been divided into ten medical districts headed by counsellors. And every county in the province, or most of them, has a medical society. These are the units of the association. Through this organization the scheme is working out. The affair is very democratically conducted. Every county society is supplied with a schedule of lectures listed under twelve group subjects from internal medicine and surgery to pharmacology and radiology; shortly a schedule will go to every individual doctor in the province. The county society chooses the subjects which interest it most and notifies the association which supplies a list of some four or five lecturers. From these the society may choose the man whom it