

We gather from recent announcements from Ottawa that there is some prospect that some forward step is about to be taken. We hope the rumor will be followed by fulfilment.

The question is not "what is there for such a department to do?" but the other one "is not this the most important of all the departments?" With politics the *Canada Lancet* has no concern; but with the health of the people it has every concern.

When we find that about 12,000 Canadians die annually of tuberculosis, and that about 50,000 are always ill with the disease; that about 2,500 die annually of typhoid fever, and that about 25,000 are yearly ill with it, it is time to seriously think. In these two diseases at least there is a money loss of \$50,000,000 a year.

Such a Federal Department would find other duties to perform. The large question of immigration is very close to that of national health. There is the very important topic of the pollution of public waters. There is the subject of international health regulations. There is the work of getting the provinces to act in harmony with each other so as to accomplish most on least outlay.

In union there is strength. No one would go back to the days of separate provinces. Let us have something more than mere political union of the provinces.

FEE SPLITTING.

We had not intended to refer to this subject at this time. It was discussed at some length at a recent meeting of the Toronto Academy of Medicine, but no decision was reached. We do not know to what extent the practice of dividing fees between physicians and surgeons may exist in Toronto or other Canadian centres, but we are free to state that we have heard of very few instances.

It is to be hoped that this practice will not take root in this country. It is a practice that does harm to both giver and receiver. It is not like the "quality of mercy" spoken of by Portia that "blesseth him that gives and him that takes." Fee dividing is a bad practice and will give rise to many evils.

It would have the effect of putting "cases" up for auction, and being turned over to the highest bidder. The surgeon who would be willing to give the highest commission would get most of the "recommends." This state of affairs will bring no good to the ranks of the medical profession.