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MONTREAL, APRIL, 1889.

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**COLLEGE OF PHYSICIANS AND  
SURGEONS, PROVINCE OF  
QUEBEC.**

We direct the attention of the profession in the Province of Quebec to an advertisement which appears in this number, signed by Dr. Larue, the Registrar of the College, whose residence is Quebec city. The annual contribution of two dollars, which every member is required to pay, should be promptly paid. If paid yearly the amount is so small as hardly to be missed, but when the accumulation of several years has to be paid it is apt to appear large. Let the motto of all be: "Pay as you go."

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**PURE VACCINE.**

We see by the *Hospital Gazette* that a doctor in Leeds has not only got himself into trouble, but brought vaccination into disrepute in his neighborhood by employing human lymph instead of calf lymph, as the mother had requested, the consequence being that the child died of vaccine syphilis three months later. The cause of death

was found to be such not only by the coroner's jury, but also by the Government inspector, who was sent specially to investigate the case. That medical men should use any but animal lymph is greatly to be regretted, notwithstanding the fact that it is much easier to get humanized lymph to "take" than the calf lymph, and notwithstanding that the latter is much dearer. We are not sure whether either our local or federal government at present support any vaccine institute for the benefit of the people; but, if they do not, no money could be better invested, as the sense of security that would ensue among the people upon the knowledge that the vaccine supplied to their physicians was absolutely pure, would soon do away with their very natural dread of having the constitutions of their children poisoned by humanized virus. We cannot too highly commend the action of the Montreal Board of Health in supplying free to any demanding it for use in the city the animal vaccine of the New England Vaccine Company the reputation of which, we believe, is beyond reproach.

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**COLD FEET.**

If the first case which stumbled into the consulting room of a young practitioner were a wealthy patient suffering from cold feet, on the permanent warming of which his first successful start in life depended, we wonder what remedy he would prescribe. It is doubtful whether he had ever seen such a case pure and simple admitted to the hospital wards or even treated in the out-patient room, nor would he be likely to find it entered in the year-books of treatment. Although he might be *au fait* in endocarditis and gastrostomy, and knew how to shorten the supports of the uterus, he might leave the college without understanding anything about the pathology and treatment of the humble but simple supports of the body. And yet it is a positive fact that people do have cold feet, and that