

Efforts have recently been made to give the outside academies, as those of Lyons, Nancy, and Bourdeaux, such advantages as would put them on a similar basis to that of Paris. Whether this movement will be successful or not remains to be seen.

In Germany and Switzerland one is struck by the wonderful development of the universities of the smaller cities. I had the privilege of spending a few days in Lausanne, Geneva, Zurich, and Heidelberg, and of looking somewhat into the educational systems in each of these cities.

In Lausanne the University was not fully equipped until a few years ago, when it received a very large legacy. It now possesses a very good medical faculty. In the University of Geneva there is also a medical faculty. Zurich, however, possesses the most distinguished medical faculty, as well as the best faculties for the study of medicine. The pathological, physiological, and physical laboratories, are very complete, and quite large enough for the class of students in attendance.

The hospital, although small, containing about 150 beds, must be very rich in clinical material. Although daily clinics are given, both in medicine and surgery, there seems to be an abundance of interesting cases.

The course of instruction in the medical department of the German Universities is excellent. In the first place a thorough and practical training is given in the primary branches. A mere book knowledge of these subjects is considered of little use, and nothing short of a laboratory training is demanded. In the final branches the instruction given is of the most practical character. Didactic lectures are largely done away with, and those of a clinical character substituted. Two clinics, of an hour and a-half each, one in medicine and the other in surgery, are given daily.

In Zurich I had the pleasure of hearing Dr. Eichorst give a clinical lecture on two cases: one of floating kidney, and the other of tuberculosis of the kidney.

The patients were both females, and were brought in on their beds. They had a very easy and convenient way of moving the beds from the wards into the lecture room.

In the first case the lecturer wished to demon-

strate that the tumor to be felt in the abdomen was not connected with the stomach. To do this he dilated the stomach by giving the patient first a small teaspoonful of sodæ bicarb., followed by one of tartaric acid. The stomach was known to be large, and an œsophageal tube was at hand in case of unpleasant symptoms. The patient was exposed to a much greater extent than is usual in our hospitals, and the rapid increase in size of the abdomen was watched with interest and some amusement by the class. It served, however, the purpose for which it was intended. The second case the lecturer examined very carefully. The history, read by one of the students, was very full, and must have been written after a thorough supervision by either the professor or one of his assistants. The differential diagnosis was then taken up, and the urine was then examined, chemically and microscopically. It was found to contain not only pus, but tubercular bacilli.

In Heidelberg I heard Professor Erb, and was even more astonished at the apparent wealth of material there, although the hospital is a small one.

He first demonstrated the varieties of gait in different nervous affections, and for that purpose exhibited three or four cases of ataxia. Three of hereditary spasmodic tabes, one of pseudo hypertrophic muscular paralysis, two of paralysis of groups of muscles in the legs, two of partial paraplegia from transverse myelitis, and a case of ankylosis of the hip joint.

He afterwards gave a lecture on a case of subacute ascending anterior polio myelitis, combined with some peripheral neuritis, at least that was the diagnosis made. He went thoroughly into the differential diagnosis between these conditions, acute ascending paralysis and multiple neuritis. He also referred to the theory recently promulgated by Dejaïene, that all these are really cases of multiple neuritis. He did not agree with Dejaïene, but at the same time admitted that both conditions were frequently found in the same patient. The lecture was most interesting, and evinced a large amount of work in its preparation.

After visiting these universities, I came to the conclusion that a very large hospital is not necessary in order to give a good course in clinical medicine. There are, however, certain