

Millions for Cure, but not one cent for Prevention." . . . It seems to me that the weakness of our present system lies in this one fact, that it gives us such an extremely limited opportunity for what has been well called the practice of preventive medicine. No one thinks of consulting us until they at least "feel unwell," and in many instances not until days, or even weeks of precious time have been wasted or worse, in trying to "wear the trouble off," or in blindly applying every crude remedy which household experience, patent quackery, or superstition can suggest; all because they are "not sick enough to call a doctor"—in other words, don't feel uncomfortable enough to be willing to pay more than the price of a bottle of patent medicine for relief. . . . Would not a system of constant medical attendance, remunerated alike in sickness and in health, enabling us to give advice or treatment just when we see it is needed, even if unasked, and rendering professional counsel, not only in disease, but in health, the first thought, the easiest and most natural thing, the rule instead of the exception; would not such a scheme as this, if practicable, most happily modify the condition of affairs and prove a long step toward securing the health and happiness of the race?

Again, when installed in full charge of a case, are we even then freed from the perplexities of our financial system? Scarcely even then. How often are we annoyed, in the very midst of a serious case, when every shadow of change must be instantly noted and promptly met, by the remark of the family, friends, or even of the patient, that they "can't afford to have us come so often." When we reach the period of convalescence, another head of the hydra springs up to confront us:

"Really, doctor, I feel so much better this morning that I don't think you need call again until I send for you," is the remark of our wan-lipped and languid patient, blissfully ignorant of the hundred and one pitfalls which yet lie between him and health . . . . How frequently does the convalescent, dissatisfied with the slow and uncertain progress he is making, conclude with charming consistency that it is the fault of our treatment, "too much strong medicine," perhaps, and resort to some rival physician, quack, or vendor of patent medicines, to whom he ascribes all the credit of the cure. . . . . How many of our most serious and most obstinate chronic troubles spring directly from the half removed result of some acute attack! How often are the germs of evil which will curse generations yet unborn, left lurking in the system, simply because the subject thinks himself cured, and doesn't want to make his bill any larger! . . .

What influence does our present system of attendance give us over the sanitary surroundings, diet, or habits of life of our patients? Almost none. It is true we have the priceless privilege of giving any amount of excellent advice on these subjects, which they may perhaps remember for a week, though usually they regard it simply as a customary and harmless prelude to the prescription, which they regard as the "value received" for their fee. . . . Over the home life of our patients we have almost no control, or even supervision, until after the mischief (which often might have been averted by a few timely precautions) has been done, and even that ceases almost as soon as we began to exercise it. What sort of success would we expect from a nurseryman who was not permitted to prune his trees until they were already