

Now, while I have been exalting the value of *asepsis* in surgery, I desire to avoid leaving the impression that, in my opinion, the days of *antiseptis* are numbered. On the contrary, we still find, and no doubt shall always find, antiseptic measures indispensable in preparing the field for our operations; in the disinfection of foul and sloughing ulcers and abscesses, in cleansing recent wounds of infective material, and in purifying wounds which have been infected before coming under our care. Manual dexterity, ingenuity in designing operations, and mechanical skill in carrying out these designs, we can scarcely expect will ever be greater than in the days of Syme and Liston. These qualities are not hereditary in the same sense that the term applies to the scientific aspect of surgery. The education of the hand and eye, familiarity with mechanical principles, and dexterity in the use of instruments, are attributes that each surgeon must acquire for himself, and it must be acknowledged that the facilities which we place in the hands of our students for this object are all too small.

PREVENTIVE MEDICINE.

In the practice of medicine, as distinguished from surgery, the question of prevention of disease assumes a more comprehensive and cosmic aspect. The physician, in his capacity as a hygienist, shapes his measures so as to prevent outbreaks of disease in communities. The surgeon concerns himself with the limited area of a wound and its environments, but the physician has the larger task of surrounding a locality with the safeguards of good drainage, clean lanes and streets, pure water for drinking and cleansing purposes, and prompt and complete removal of sewage and garbage. The importance of the work of Boards of Health and of Medical Health Officers is becoming, year by year, more apparent.

In olden times, epidemics and plagues were looked upon as visitations of a retributive Providence, exasperated by the sins and shortcomings of the people; but, in these enlightened days, the advent of an epidemic of smallpox, cholera, scarlet fever, diphtheria, or typhoid fever is greeted with a feeling bordering closely on indignation, and the omniscient people immediately proceed to make a pretty careful canvass of the sins and shortcomings of the unfortunate Medical Health Officer, or Board of Health. In short, the profession has "educated the people up" to the belief that, when such a calamity happens, "some one has blundered," and hence the feeling. Is it too much, then, to hope that in a few decades some, at least, of the preventable diseases may follow the plague, or Black Death, to oblivion? Typhus fever is well on the way, and smallpox might, in a few years, be relegated to the realms of tradition were it not for the senseless opposition of a few addle-pated obstructionists.

THE FIELD OF THERAPEUTICS.

But, while great advances have been made in the prevention of disease, it must be acknowledged that the list of our *effective* therapeutic