such cases of paralysis could depend upon a peripheral origin ? In favor of this view, we notice that the first appearance of the disease is in the hands and feet, and that all the other symptoms come on just as it progresses upward along the nerve trunks; and finally when the cord becomes affected, we have the conditions of a paralysis due to central mischief. These cases were suspected to depend on some abnormal state of the nerve endings, although there were no pathological proofs of such. Within a short period, Prof. Leyden, who has devoted much time to the subject, has made a number of post mortems, and collected the records of others. It is not often that an opportunity is granted of making a post mortem, as the cases are not generally fatal. There are, however, examples where the patient was killed accidentally, or perished of some other discase, and thus offered means of verifying conjecture by actual observation The results of these observations go to show that there is a diffused neuritis of the peripheral ends, and that this influmed condition spreads along the larger trunks and reaches the cord. Under this view anomalies of these cases of paraplegia become easy of interpretation, and a more rational treatment is likely to be adopted.

Nothing very definite is yet known as regards treatment. So far, a judicious system of shampooing, tonics and the long and continued use of ergot, have met with the best results.

NOTES ON THE NEW YORK HOSPITALS.

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One might be accused of presumption in writing an article on such a subject as the New York Hospitals, as they have, no doubt, been visited by a very large number of the readers of this Journal. Impressions have been made, however, on the mind of the writer, during a recent visit which he has the hardihood to publish, and which the profession can take for what they are worth. The remarks about to be made, may, perhaps, be of some use in the management of our own hospital. There are many features of the New York Hospital system which we would do well to copy, while there are many other characteristics which we would do equally well to avoid.

So far as the nursing, and general treatment of patients go, nothing better can be desired. In fact, in passing through the New York Huspital one is inclined to think that it is too luxarionsly fitted up. It is doubtful if it is good policy to have a simply charitable institution fitted up almost like a massion or palace. There are probably many treated there who could well afford to remain at home and pay their medical attendant for his services.

One is struck with the great number of very excellent courses of instruction which are given in the various Hospitals and Schools. The almost universal ability shown by the various lecturers, places them, in my opinion, equal, if not superior to any similar class of men in the world. The question has often arisen in my mind, why do not students come from Europe to America to finish their education in as large numbers as they go from America to Europe ? When one thinks of the almost inexhaustible amount of clinical material, and of the excellent standing of the lecturers, one would be puzzled to answer the question. The reason generally assigned is that there are no such highly endowed institutions on this Continent as in the Old World, and that lecturers have to spend too much time in simply making a living, and consequently, cannot devote themselves to teaching so much as they otherwise would. There is, no doubt, some truth in this argument, but it does not furnish the real reason for the comparatively speaking incomplete education which is received by medical students here. The fault lies in the whole system as it is now conducted, and if radical changes are not made education will still remain defective, and students will continue to flock to Europe for advantages which they could just as well enjoy on this side of the Atlantic, if some changes were made in the school management.

As it is at present there are only three classes of students, whose education can be said in any sense to be complete. (1) Those who after graduating, spend two or three years in Europe in large hospitals. (2) Those who have been fortunate enough to receive hospital appoint-