

industrious, the cruel kind, the harsh of language civil, the sullen cheerful, and so on. But due care must be had that all this improvement is not a scheme, and, therefore, true vice. Criminals are often very cunning; and to earn their liberty may be their one desire.

We would urge the system of indeterminate sentences; but we would also couple with it the parole and suspended sentence systems. A criminal may live within the bounds of the law from fear, though no change whatever has taken place in his nature. The pugilist ceasing fighting when he has had sufficient punishment. When a criminal has earned his freedom under the plan of indeterminate sentences, that freedom should only be accorded him on parole, and the sentence still remain in force. This would be a wholesome deterrent.

The psychology of the criminal classes is a very interesting study. Criminals, as a rule, are cowards so far as physical pain is concerned. What they would not hesitate to do so far as any public odium is concerned, or the fear of imprisonment, they might shrink from if they ran any risk of corporal punishment. For many offences against society we think that there is no other form of punishment as effectual as the cat. Flogging should be introduced for certain offences, and the number and severity of the floggings should be kept a secret from the offender, both while he is in prison, and when he is out on parole or suspended sentence.

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### THE PRECEPTOR IN MEDICINE.

In our issue for January we had occasion to say something in favor of the apprenticeship system. We could invite the careful attention of our readers to the following words from *the Journal of the American Medical Association*, of 12th December, 1908.

"With the advance of medical education, with the constantly increasing requirements for admission to the medical school, and with the lengthening and elaboration of the course of study necessitated by the enlargement of the field of medical knowledge, there has almost disappeared from view an erstwhile important factor in medical education—the preceptor. Formerly, before going to college, the student spent a year or more studying with his preceptor, going about with him, seeing his patients, and learning not only how to diagnose and treat disease, but, above all, how to conduct himself in his relation to his patients. His vacations were spent in the same manner, and thus from the beginning he was taught to meet his patients on a plane of personal relationship rather than to regard them merely as scientific problems. The graduate of to-day is often woefully lacking