

has been carefully suppressed and concealed; and, so far as regards the territorial share in the examinations, the records will show what amount of fairness has been displayed. I have known the nominees of some of the territorial representatives objected to for no other reason than that they did not answer the purpose of the dominant section of the Council. At one time the domestic character of the candidate was at fault, at another want of qualification was put forth as an excuse, and so it went from the beginning. The territorial representatives in the Council are in the minority, in a measure powerless; and if a territorial man is not a pliant voter, and a sycophant to boot, he is not likely to be permitted, as the Council is now constituted, to do more than answer his name at the roll call and occupy his seat.

Can it be possible that a large majority of the profession will submit to being snubbed in this fashion, and at the same time pay an annual tax to be squandered at the will of the few? Time will tell.

W. COBURN.

Oshawa, June 10, 1892.

Miscellaneous.

THE ASSOCIATION OF MEDICAL OFFICERS OF THE MILITIA OF CANADA.—The first annual meeting of this association was held in the Canadian Military Institute on Thursday, June 2nd, at 2 p.m., President Dr. F. W. Strange in the chair. Among those present were Drs. G. S. Ryerson, secretary; A. A. Dame, W. T. Stuart, Baldwin, Moore, Elliot, Orton, Preston, Osborne, Rennie, Leslie, Rice, McWilliam, Saunders, McCrimmon, Grasset, Warren, Raikes, King, and Clark. After the constitution and by-laws, which were submitted by the secretary, had been adopted, the president, Dr. F. W. Strange, delivered his address to the association. For the past twenty-six years, during which the militia of Canada as at present organized has existed, the medical officer of a battalion, he said, has been but a regimental unit, and one of the objects of the formation of this association was to draw these regimental units out of their retirement, and by binding them together to give them their proper position in the military history of the country, and impart an interest and increased efficiency in the work in which they were engaged. The status and rank of the regimental medical officer, he said, also needed some consideration. The medical officer should be an officer in the ranks the same as any other officer, and length of service should be considered in his promotion, as is done with the militia officers. "Let us have surgeon-captains, surgeon-majors, etc., and the officers promoted according to length of service and quali-

fication, and the injustice of chance will no longer assist the officer in obtaining his proper position in the militia." The most important object in the formation of the association, he said, was the purely professional aspect. The reading and discussion of papers on topics relating to military medicine, surgery, and hygiene has received no attention in Canada, and the contribution of papers on military matters will always be one of the main features of this association. Dr. Warren then read a paper on "Ambulance work during the Franco-Prussian war," and Dr. Daniel Clark, once Inspector of Surgeons in the United States army, contributed a very interesting paper on "Some brain wounds, with results."

In the evening a smoking concert was held at Dr. Ryerson's residence, when the officers of the Toronto Garrison were invited to meet the association. At the meeting following the secretary read, for Dr. Wm. Canniff, a very interesting paper on "Some Experiences of a Surgeon during the American War." Dr. Canniff was late assistant-surgeon in the Royal Artillery. The election of officers resulted as follows: Hon. President, Surgeon-General Bergin; President, Surgeon F. W. Strange; Vice-Presidents, Ontario, Surgeon V. H. Moore, 41st Brockville Rifles; Quebec, Surgeon Roddick, 1st P.W.O. Rifles, Montreal; New Brunswick, Surgeon-Major Connell, 67th Batt.; Nova Scotia, Surgeon D. A. MacGillivray, 94th Highlanders; P.E.I., Surgeon Jenkins, Garrison Artillery, P.E.I.; Manitoba, Surgeon G. T. Orton, 90th Winnipeg Rifles; British Columbia, Surgeon Duncan, R.C.A., Victoria; Treasurer, Surgeon Tracy, 49th Hastings Rifles; Secretary, Surgeon G. Sterling Ryerson, R.G., Toronto. It is likely that the association will hold a special general meeting at Ottawa in September, during the meeting of the Dominion Medical Association in that city. Ninety-one active members have joined the association.

PRIVATE HOSPITAL.—We are informed that Dr. Ryerson's Private Hospital for Eye and Ear Disease, to which attention is directed in our advertising columns, has been running satisfactorily for the last two years.

GOOD OPENING FOR PRACTICE.

BEING about to retire from practice, I am prepared to sell or rent the premises in Trenton, in which town I have practised for thirty years. For further particulars, address

DR. HENRY W. DAY,
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