

Among the selected articles in this issue, a paper read by an eminent Philadelphia Barrister before the Philadelphia Medical Society will be perused with interest. The testimony of medical expert witnesses in the law courts of this province demand the attention of our profession. Up to the present time the crown, in all prosecutions when medical expert testimony has been called for, has, in its pecuniary treatment of such witnesses, acted in a most niggardly manner. The fee of four dollars a day, though a most inadequate one for ordinary testimony, we are content to receive, that is, when called upon to state the bald facts of the case as an ordinary witness. But testimony so remunerated should end there, and the medical witness should refuse to go beyond it without a distinct understanding as to the fee he is to receive for his skilled evidence, founded on research and experience. No medical man called as an expert witness should accept less than \$25 a day for each day of his attendance. The practice hitherto prevailing in this province of summoning medical men as ordinary witnesses, and then tapping their brains for expert evidence for the miserable remuneration of \$4 is one that the profession should no longer tolerate. The crown engaging a lawyer gives him a fee of seventy-five dollars a day. We have yet to learn on what ground the remuneration of the lawyer should be over seventeen times that of the doctor, on whose evidence so many cases turn. Of course medical men called for the defence make their own terms, but that the governing authorities should descend to such mean subterfuges to cut the medical profession of their just fees is a blot on their administration, and medical men in this province should early come to such an understanding as will render it as impossible in the future as it has prevailed in

the past. The willingness of the medical profession to work without remuneration is gradually educating the general public into the idea that the honor conferred by soliciting his opinion is sufficient remuneration for a physician. This is altogether our own fault. What other profession is required to give certificates for one thing and another gratuitously? With what a smile of derision would the bar regard such a proposal. But the bar is integrate while the medical profession is disintegrate. Such has been so in the past. There is multiplying evidence that if we desire to hold our legitimate position in the battle of life in the future it behoves us to act in unison, to bear in mind *Æsop's* fable of the bundle of sticks, to thoroughly decide as a body on what we ought to do, and what we ought not to do, and once that decision is arrived at, carry it out in the spirit and the letter, when governments and individuals will have to cease playing on our generosity and taking advantage of our want of cohesion.

We read in the dailies that the Dynevo Indian Hospital is in need of funds. Before making this appeal to the public the officials should make a statement of the number of patients admitted, died or discharged since its formation so that the public may know what they are subscribing for.

LIBRARY TABLE.

Rheumatism, Gout, Rheumatic Arthritis and allied affections, by Edmund L. Gros, M. D., Paris.

New medical publications, Lea Brothers & Co., Philadelphia.

Climates and health resorts of Canada, issued by the Canadian Pacific Railway.

Anderson's Physical Education, Wilson & Co., Toronto.