

Pages Missing

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Original Articles.

NOTES FROM THE CLINICAL HISTORY OF A PATIENT SUFFERING FROM HEART BLOCK (STOKES-ADAMS DISEASE), AND DELUSION OF INFECTION OF SKIN BY INSECTS (ENTOMOPHOBIA)

BY GRAHAM CHAMBERS, B. A., M. B.

Physician to Toronto General Hospital.

The patient, aged 50, farmer, was admitted to Toronto General Hospital on complaining of itching and an infection of the skin by insects. He also complained of cold extremities and fainting attacks. Patient has a brother and a sister who also suffer from the same affection of skin. From boyhood patient has worked very hard, and received little education. For many years he drank heavily, but has not drunk much during the last four years. He does not smoke except an occasional cigar. When nineteen years old, he had typhoid fever. He has never had lues. All his life he has suffered much from headaches. The attacks would appear once or twice a month and last for two or three days. About eighteen years ago while at work he felt suddenly "all gone," "just played out," and could hardly do anything more. The next day he was all right; but from time to time he has felt this same sensation while working hard. About six years ago while working he suddenly felt a buzzing in his head, fell down and was unconscious for a minute or so. He soon recovered, and in a few minutes was able to go on with his work. That night, however, he felt the same buzzing in his head, but did not

become unconscious. One morning, about two years afterwards, he had a similar attack just after getting out of bed. A friend who happened to be present said that he lay on his back for about a minute and then looked around with a vacant stare. Patient states that he has had, off and on, perhaps twice a month, milder attacks of dizziness and buzzing in the head, but in these he never became unconscious. They usually came on after exertion or just after rising in the morning.

If he stoops over at his work he becomes dizzy and also gets a pain in the region of the heart.

About a year ago he first noticed the itching. This commenced in the hands. About two weeks later his legs and feet became itchy. The itching left his hands, feet and legs and went to his trunk. He says that he became "raw" in spots and that he can show marks where his skin was excoriated. During the last few months there have been no marks on the skin; but the itching has continued, particularly in the head and pubic region. He believes that insects in his skin are the cause of the itching, and that he can find "thousands of them on his head and scrotum."

PRESENT CONDITION.

Psychic State.—Patient has a very high and narrow palate, of the gothic type. He has a peculiar way of looking when telling one of his complaints. He seems to look past or above one. Orientation as regard time, place, person and date is intact. Memory is good. He has marked derangements of perception; delusion, illusions, and probably hallucinations. Patient states that there are thousands of insects in his skin. He describes them and says there are three varieties—red, white and black—some being very small, others as large as a house-fly. Inspection of the skin does not give any sign of the presence of animal parasites, but one cannot convince him that they are not present. The delusion is fixed. He takes particles of dirt, scales, etc., for insects. On one occasion he showed me a dead spider, which he had picked up in the bathroom, as an insect from his skin.

PHYSICAL EXAMINATION OF CIRCULATORY SYSTEM.

Inspection.—When the patient is lying down the external jugular veins become engorged and slightly pulsate. They do not fill from below. The pulsations appear to be more frequent than the radial pulse. The apical impulse is visible, as is also a pulsa-

tion in precordial region, diverging from the apex towards median line of body. The P. M. I. is in 5th intercostal space, 14 cm. from mid-sternal line.

Pulse.—The radial is somewhat sclerosed and tortuous. Frequency, 34. Rhythm is usually regular. Vessel is well filled, but pressure (115 mm, Mercury) is not above normal. Pulse wave is very slow.

Percussion.—Cardiac dullness is much enlarged. At the level of nipple the relative dullness extends 14 cm. to left and 5 cm. to right of mid-sternal line.

Auscultation.—Systolic murmur is heard over the whole precordia, also in axilla and root of neck. Slight blowing diastolic murmur is heard in left second intercostal space, near the sternum. The first sound is only heard distinctly in apical region. Pulmonary second sound is accentuated.

Radioscopic examination shows enlargement of the heart and dilatation of the aorta. The right auricle appears enlarged. The beats of the auricle are more frequent than those of the left ventricle. I am indebted to Dr. Samuel Cummings for verifying the results of my radioscopic examination.

The clinical examination of this patient, then, shows the presence of: (1) a psychosis, characterized by a delusion of infection of the skin by insects, to which I have given the name entomophobia; (2) bradycardia, and repeated attacks of syncope, which together might well be looked upon as manifestations of heart-block, or described as a disease picture known as Stokes-Adams' syndrome.

If I be permitted I shall make a few remarks on these affections.

By entomophobia I mean a psychosis characterized by fixed delusion, or by obsessions of infection by insects, itch mites, etc.

Entomophobia with fixed delusions is somewhat uncommon. The patients complain of itching, probably an hallucination of ordinary sensation. Illusions are always present. The patients will collect scales, crumbs of bread, particles of dirt, etc., and exhibit them as the cause of their trouble. They are very much in earnest in trying to rid themselves of the imaginary infection. They are continually washing their clothes and thinking of means by which the insects could be exterminated. In many of the cases there are signs of hereditary defect.

The disease pursues a very chronic course, and according to my experience it is seldom cured.

Entomophobia with obsessions is a much milder form of mental affection. It is frequently a sequel of scabies, and according to my experience is very common. When following scabies, acarophobia would be an appropriate name. The patients have no fixed delusions, but ideas that they are infected by itch are continually forcing themselves into their consciousness, which, however, they recognize as morbid, and try to correct them.

Pruritus is always present and probably in most cases is partly caused by organic changes in the skin which have resulted from treatment. However, in all the cases, psychic disturbance either gives rise to or aggravates the itching. The probable explanation of this is that the images in the perceptive centres formed during the attack of scabies in some way reveal themselves by external projections.

The affection is curable. In the treatment, antipruritics are useful, but psychotherapeutic methods are most potent measures. An authoritative statement that the patient has not the itch always does much good.

HEART-BLOCK.

The term heart-block is applied to a pathological condition in which the passage of impulses from the auricles to the ventricles is obstructed, so that the automatic mechanism of the cardiac contractions is disturbed, and in place of being equal number beats of auricle and ventricle there may be two or more contractions of the auricle for each beat of the ventricle. The results of the blocking of the impulse is to diminish the frequency of the pulse, so that bradycardia is a very common manifestation of the condition.

Gaskell, in 1883, was the first to make use of the term heart-block. He, experimenting on the heart of a tortoise, found that by compressing the heart at the auricular-ventricular groove by means of a clamp, that he could change the normal ratio of auricular and ventricular beats from one to one to two or more to one. From his experiments he came to the conclusion that stimuli were conducted from one part of the heart to another by muscles, but with this myogenic theory he was unable to explain how the stimulus was conducted from auricle to ventricle. This view of Gaskell receives much support from many physiologists, but for the following twenty years no one solved his difficulty, until, in 1903, His, Jr., dissected out a bundle of muscle fibres connecting the auricles to the two ventricles. The auricular end of this band begins near the coronary sinus and passes in the auricular

septum towards the tricuspid opening, and then into the ventricular septum. The structure of the bundle is quite different from that of anything else in the heart. Purkinje's cells are probably the end filaments of the bundle.

The discovery of this bundle afforded an explanation of Gaskell's experiments. It also gave an explanation of many clinical observations. The symptom-complex known as Stokes-Adams' syndrome is a natural result of disease of the bundle, the bradycardia being due to blocking of the stimuli from the auricle, and the fainting attacks and convulsions to anæmia of the brain. The conception has received support from the finding of disease-gumma, etc., in the bundle in cases of Stokes-Adams' syndrome.

Proceedings of Societies.

CANADIAN MEDICAL ASSOCIATION AND A FEDERAL DEPARTMENT OF PUBLIC HEALTH.

RESOLUTION RE DEPARTMENT OF PUBLIC HEALTH.

At the thirty-fifth annual meeting of the Canadian Medical Association, the largest and most representative meeting of the Canadian medical profession up to that time, and which was held in the city of Montreal on the 16th, 17th, and 18th of September, 1902, the following resolution was proposed by Dr. E. P. Lachapelle, Montreal, and seconded by Dr. J. R. Jones, of Winnipeg.

Whereas, public health, with all that is comprised in the term sanitary science, has acquired great prominence in all civilized countries; and

Whereas, enormously practical results have been secured to the community at large, by the creation of Health Departments under governmental supervision and control; and

Whereas, greater authority and usefulness are given to health regulations and suggestions when they emanate from an acknowledged governmental department;

Therefore be it Resolved, That, in the opinion of the Canadian Medical Association, now in session, the time is opportune for the Dominion Government to earnestly consider the expediency of creating a separate department of public health, under one of the existing Ministers, so that regulations, suggestions and correspondence, on such health matters as fall within the jurisdiction of the Federal Government, may be issued with the authority of a Department of Public Health. That copies of this be sent by the General Secretary to the Governor-General-in-Council and to the Honorable Minister of Agriculture.

This resolution was strongly supported by Dr. T. G. Roddick, M.P., the Honorable Senator Sullivan, Kingston, and other prominent and influential members of the Association, and carried unanimously.

The President of this Association, Dr. Walter H. Moorhouse, of London, Ontario, then appointed the following Special Committee to take the matter in hand and report at the annual meeting, which was held in London, Ontario, on the 25th, 26th, 27th, and 28th days of August, 1903: Dr. R. W. Powell, Ottawa (Convener); Dr. T. G.

Roddick, M.P., and Dr. E. P. Lachapelle, Montreal. This Committee reported through Dr. Powell to the Association at London on the 26th day of August as follows:

Ottawa, August 24th, 1903.

To the President and Members of the Canadian Medical Association:

Gentlemen,—Your Committee, consisting of Dr. T. G. Roddick M.P., Dr. E. P. Lachapelle, and Dr. R. W. Powell, convener, acting under instructions from your President, had the honor to wait upon the Prime Minister to represent to the Government the resolution passed at the last meeting of your Association on the question of the creation of a Department of Public Health under one of the existing Ministers. The whole matter was gone into thoroughly, and your Committee endeavored to press upon the attention of the Government the great desirability and importance of placing all matters included under the term "public health," with which the Dominion Government has to do, upon a higher basis than now obtains.

It was pointed out that this Association, representing the whole Dominion, in which there are over 5,500 practitioners, had concluded that it would be in the best interests of the general public welfare of the Dominion that such should be done, and that the time has come when Canada should be elevated from the entirely secondary place she now occupies among the nations in this branch of the public service, and that she should at once have a status conferred by Parliament whereby all questions relating to sanitary science and public health should be dealt with from a central authority, to be known as the Public Health Department.

Many matters of detail were not particularly discussed at the interview, inasmuch as your Committee felt that their duty consisted chiefly in pressing upon the Government the main idea by endeavoring to show that the present system of having the various subjects scattered throughout several departments, with consequent multiple division of authority, was not calculated to impress the public with the great importance of the administration.

Your Committee, moreover, insisted strongly that our profession was a strong, active body of earnest workers, and their number and influence entitled them to this consideration, which was for the public welfare, and not in any way directly or indirectly for their personal benefit, and finally it was pointed out that the skeleton of this plan is already well laid, and a Director-General of Public Health holds an appointment to-day, an earnest

hard-working able official at present issuing his orders in re quarantine from the Department of Agriculture, which is an anomaly *per se*, and lessens the authority in a measure, and yet he has nothing to say as regards sick seamen, sick Indians, adulteration of food, vital statistics, and has no laboratory under his control.

The Prime Minister was most courteous, and listened patiently to the arguments set forth, and finally authorized Dr. Roddick to place a resolution on the order paper, with a view to having a discussion in Parliament before the Privy Council took up the matter in earnest.

Sir Wilfrid Laurier also stated that, in the absence of the Minister of Agriculture, who was familiar with the whole question, he would not willingly go into the matter at greater length with a view to legislation, in the Minister's absence.

Dr. Roddick's resolution was as follows:

"That it is expedient in the public interest to constitute a Department of Public Health for the Dominion, charged with the execution of the various duties which are or may be, imposed upon or assumed by the Government, for the protection of the public health, and the prevention and mitigation of diseases, and that such Department of Public Health be administered under the direction of a Minister of the Crown, in conjunction with one of the existing Departments of the Government."

On the return of the Minister of Agriculture from Japan, your Committee was again convened, and waited upon him, when the subject was again carefully gone into. The Committee feel they have a warm advocate in Mr. Fisher, who is thoroughly alive to the necessities of the case, and if his colleagues in the Government would carefully consider this matter, and the justice and importance of the claim for consideration we as a profession are making, they would readily acquiesce. Some difficulties naturally stand in the way, and some difficulties are easily introduced into the way, but a way can be found for this measure to be put through, as has been found for other measures, and will be found for future measures, if only there is a willingness on the part of the Government to place this matter in the position it ought to occupy. Let me say that Parliament is still in session, and, therefore, it may yet transpire that the final decision of the Government may not be adverse, and the delay will be found to be due only to the great strain of urgent public business of weightier moment.

Your Committee expresses the hope that their efforts have not been entirely in vain, and they beg to report that, in their opinion, the profession as a whole must continue to press their claims for a

proper recognition of this question at the hands of the Government by influencing all those with whom they may come in contact, and, moreover, by continuing to further influence public opinion by definite announcements from time to time in the form of resolutions emanating from this parent Association, and others of a like character throughout the Dominion.

Respectfully submitted on the behalf of your Committee.

(Signed) R. W. POWELL, Convener.

Mr. I. H. Cameron, of Toronto, a Past-President of the Association, moved the adoption of this report, which was done unanimously, after a full and extended discussion.

Dr. Adam H. Wright, Toronto, then presented the following resolution, which was seconded by Dr. H. H. Chown, of Winnipeg:

Whereas, this Association at its meeting in Montreal in 1902 placed itself on record by resolution to the effect that it is expedient that a Department of Public Health be created by the Dominion Government, and administered under the authority of one of the existing Ministers of the Crown;

It is further Resolved at this meeting to again press upon the attention of the Government that Canada is not preserving her status among the nations in this branch of the public service, and that it is anomalous to have the various matters connected with the administration of public health, so far as it appertains to the Dominion Government, spread through four or five departments.

It is further Resolved, That, in the opinion of this Association, the profession of medicine in the country, being actuated in this matter solely in the best interests of the public welfare, and with an earnest wish to place Canada on a par with other civilized countries, is entitled to expect that the honorable the Privy Council of Canada will, at an early date, take this question into its best consideration, so that by the time our Association meets again in the autumn of 1904, we will be made officially acquainted with a decision.

That a copy of this resolution be transmitted by the Secretary to the Right Honorable the Prime Minister, to the Honorable the Minister of Agriculture, and to the Honorable the Privy Council of Canada through the Honorable R. W. Scott, Secretary of State. Carried unanimously.

Dr. S. J. Tunstall, Vancouver, B.C., the President-elect, reappointed this Special Committee, with instructions that they prosecute the matter still further, and be able to present at the next annual meeting, in Vancouver, in 1904, a more favorable report.

REPORT OF SPECIAL COMMITTEE ON PUBLIC HEALTH.

Vancouver, August 26th, 1904.

To the President and Members of the Canadian Medical Association:

Gentlemen,—Your Committee in charge of the question of the establishment of a Department of Public Health by the Dominion Government have the honor to report that the matter has, to a certain extent, been in abeyance since our meeting at London last year (1903). At that meeting you will recollect we reported certain interviews with the Prime Minister and the Minister of Agriculture, at which we were led to understand that it was not feasible for the Government to give us any assurance that our wishes in the matter could be practically considered. The resolution again passed at London pressing the subject on the attention of the Government as one closely associated with the country's welfare and best interests, was duly forwarded to the Dominion authorities.

It was also pointed out to the Honorable the Minister of Agriculture by the convener of your Committee that the medical profession of the Dominion, as represented by the Canadian Medical Association, were united in their desire to have such a department created, and that they were only actuated in the matter by motives of patriotism, feeling assured that the administration of public health in matters pertaining to the Dominion Government would be greatly facilitated and rendered more useful and satisfactory if it emanated from a central department instead of having a series of branches having executive authority scattered through a number of departments of the Government.

Your Committee are gratified to be able to report that there are evidences that, during the present recess, the matter will engage the attention of the Privy Council more seriously than it has hitherto done. Before legislation could be introduced certain questions involving much consideration will have to be settled, and we are given to understand that these preliminaries will be weighed before Parliament meets. While it is to a certain extent unsatisfactory to be obliged to report in such an indefinite way, yet we trust the Association will understand we have not been idle, but that in a matter of this kind we are in the hands of the goodwill of the Government, and that it would be neither judicious nor delicate to compromise the present favorable opportunity by referring in detail to the reasons that have enabled us to hazard our present opinions.

Respectfully submitted.

(Signed) R. W. POWELL,
Convener of Special Committee.

This report, on motion, was received and adopted.

RESOLUTION RE PUBLIC HEALTH.

Vancouver, August 26th, 1904.

Moved by Dr. H. A. Lafleur, Montreal, and seconded by Dr. O. M. Jones, Victoria, and

Resolved, That the Canadian Medical Association regret that the Dominion Government have not seen their way clear to carrying out the suggestions contained in the several strong resolutions of this Association passed during the past three years on the question of the establishment of a Department of Public Health under one of the existing Ministers of the Crown.

That it be further Resolved, That this Association continue to press the wishes of the medical profession of the Dominion on this subject on the attention of the Government, inasmuch as we feel assured that the difficulties to be overcome in order to bring about such a desirable end are of small consequence to the public welfare compared to the beneficial results that will follow.

That the sub-committee in charge of this matter be reappointed at this meeting and requested to continue their efforts of the past three years.

That a copy of this resolution be sent by the General Secretary to the Right Honorable the Prime Minister, the Minister of Agriculture, and the Secretary of State. Carried.

Halifax, N.S., August 24th, 1905.

The General Secretary read for Dr. R. W. Powell the report of the Special Committee on a Public Health Department for Canada:

To the President and Members of the Canadian Medical Association:

Gentlemen,—As convener of your Committee in re the creation of a Department of Public Health, as a Dominion measure, I have the honor to report that practically no advance has been made since we first presented your views to the Federal Government on this important question three years ago.

Strong resolutions have been passed by your Association, containing the views of the profession on this matter. Year after year they have been duly forwarded to the proper authorities at Ottawa, to say nothing of the personal representations of our Committee conveyed to the Government by way of deputation and personal interview. On the last occasion I waited on the Honorable the Minister of Agriculture he pointed out to me that he was familiar with the views of our Association as contained in the several reso-

lutions referred to above, and that it appeared to him to be unnecessary to call the Committee to Ottawa to reiterate what we had so clearly laid before him. He assured me that the whole question had his entire sympathy, and that he trusted to see such a scheme as had been outlined to him brought into operation, and he further said that it was his intention to bring the matter again to the attention of the Prime Minister, he hoped at a date sufficiently early to enable him to give something rather definite for our meeting at Halifax.

Your Committee feel that they have done what they could to induce the Government at Ottawa to create a Department of Public Health under one of the existing Ministers in order to place this important branch of the public service on the same footing as it stands in nearly all progressive countries. We regret, however, to be obliged to report that so far our efforts have been unavailing, and as we believe that a more powerful and influential committee is needed from this Association, to more seriously impress the Government with the great importance of this question, we respectfully ask to be discharged.

(Signed) R. W. POWELL, Convener.

Dr. George Elliott moved, seconded by Dr. Stewart, Palmerston, that the Committee be discharged. Carried.

The General Secretary then proposed the following resolution in the name of Dr. Powell:

Resolved, That a Committee be appointed from this Association to wait upon the Dominion Government and lay before them the several resolutions now on the books of this Association in reference to the creation of a Department of Public Health, in order that all matters pertaining to the public health over which the Dominion Government has jurisdiction may be administered under one official head.

That the Committee be requested to impress upon the Government the great importance and public utility of the matter, and that it is the wish of the medical profession in the Dominion, as represented by the Canadian Medical Association that such an advance be made in this branch of the public service.

That the Committee consist of Dr. E. P. Lachapelle, Montreal (convener); Dr. R. W. Powell, Ottawa; Dr. J. W. Daniel, M.P., St. John; Lieut.-Col. Carleton Jones, M.D., Halifax; Dr. H. A. Bruce, Toronto, and Dr. H. H. Chown, Winnipeg, with power to add to their number. Carried.

Montreal, Sept. 13th, 1907.

On motion by Dr. R. W. Powell, Ottawa, seconded by Mr. I. H. Cameron, Toronto, the Association reaffirmed its opinions in the various resolutions upon the minute book as to the creation of a Department of Public Health for the Dominion of Canada; also re-appointing the Halifax Committee and adding thereto those members of the Canadian Medical Association, who were members of Parliament.

Special Committee on Public Health Department:—Dr. E. P. Lachapelle, Montreal (convener); Dr. R. W. Powell, Ottawa; Dr. J. W. Daniel, M.P., St. John; Lieut.-Col. Carleton Jones, Ottawa; Dr. H. A. Bruce, Toronto; Dr. H. H. Chown, Winnipeg, Man.; Dr. J. B. Black, M.P., Windsor, N.S.; Dr. Wilbert McIntyre, M.P., Stratheona, Alta.; the Hon. M. Sullivan, M.D., Kingston; the Hon. J. H. Wilson, M.D., St. Thomas; the Hon. L. George DeVeber, M.D., Lethbridge, Alta.

Ottawa, March 3rd, 1908.

A deputation comprising members of the Special Committee on Public Health of the Canadian Medical Association was introduced to the Prime Minister and the Honorable the Minister of Agriculture by Dr. Black, M.P. Dr. Lachapelle, the Convener of the Committee, then presented the following memorandum:

MEMORANDUM ON THE DESIRABILITY OF ESTABLISHING A
 "NATIONAL BUREAU OF PUBLIC HEALTH," PRESENTED
 TO THE DOMINION GOVERNMENT ON BEHALF OF
 THE CANADIAN MEDICAL ASSOCIATION.

The progress of hygiene and preventive medicine, known under the name of "Public Health," has been so rapid and marked in the last decade that there is now an ever-increasing demand for governmental recognition of its importance. In England they are moving for a Minister of Public Health. In the United States, the Marine Hospital Service has been, by Act of Congress, enlarged into a Public Health Service. There are already Departments of Public Health in some of our sister colonies, and the medical profession of Canada, speaking through the Canadian Medical Association, has called upon the Government to create a Department or Bureau of Public Health under one of the existing Ministers. The importance of the subject will thus be recognized; and the reiterated demand comes from the representatives of the 6,000 medi-

cal men who move amongst and influence the 6,000,000 people of Canada.

The intention of such a department or bureau would be the consolidation within it, with a view to both efficiency and economy, of those matters concerning public health and sanitary questions which are already within the jurisdiction of the Dominion Government, although scattered amongst the different departments hereafter alluded to. The establishment of this department or bureau would obviate the confusion and extra correspondence often caused by the public's ignorance of the Minister of Agriculture's jurisdiction in public health matters, as well as facilitate the business of those coming to the Capital in connection with the various sanitary matters now divided up amongst the different offices of the Government, and many of them under non-medical heads.

There is no intention whatever, either direct or remote, of infringing in any way upon the autonomy of the Provinces or the matters of public health which are now within their jurisdiction. It is simply a matter of internal domestic consolidation within the Dominion Government itself. And its further objects are the governmental recognition of the importance of public health and the authority that such a department would have to issue rules, regulations, etc., in the name of the Department of Public Health. Our own experience, and the example of other countries, have taught us to believe that such publications so issued carry much more weight than similar ones issued in the name of any other department.

Amongst the sanitary and public health subjects now scattered over several departments, and without co-ordination or homogeneous supervision, that should be grouped together in a Department of Public Health, may be mentioned the following:

From the Department of Agriculture :

1. Sanitary advice to Dominion Government.
2. Quarantine, maritime and frontier.
3. Leprosy throughout the Dominion.
4. Public Works Health Act.
5. Health of animals.
6. The sanitary part of the census.
7. Vital statistics, Dominion.

From the Department of the Interior :

8. The sanitary and medical side of immigration affairs.
9. The sanitary and medical side of Indian affairs.

From the Department of Marine:

10. Sick seamen and marine hospital.

From the Department of Inland Revenue:

11. Adulteration of Foods and Drugs.

Additional:

12. Supervision of sanitary measures and sanitary police in the territories which have no organization corresponding to a Provincial Board of Health.

13. Sanitary direction of the service of protection of international waterways.

14. Sanitary supervision of the protection of the public health against the invasion of tuberculosis or other diseases by the importation of sick animals or of unhealthy articles of food.

15. National Bacteriological Laboratory. The Department of Public Health could be equipped with a national bacteriological laboratory, as is the case in other countries. Such a laboratory could report promptly on suspected specimens of micro-organisms from vessels, trains, etc., held under quarantine of observation.

The quality and purity of the various protective and curative agents—such as vaccine, tuberculin, Haffkine's prophylactic plague fluid, and the anti-toxins and serums of plague, cholera, diphtheria, typhoid, anthrax, etc., are of the utmost importance to the public health and to the well-being of the country. Their manufacture should, therefore, be controlled by the Government and not left in the hands of private interests as a commercial enterprise. They should be prepared by salaried officials in a national laboratory, and issued under the supervision and stamp of the Department of Public Health. In this way the maximum protection of the people of Canada in this matter can alone be obtained, and that confidence secured which will induce the people to properly avail themselves of these all-important means of protection from epidemic and infectious diseases.

With a Department or Bureau of Public Health so equipped Canada should then take a place worthy of her great position and destinies in original research under governmental control, towards the advancement of science, and the consequent benefit of all mankind.

The Provincial Board of Health of Manitoba, the Medical Society of St. John, N.B., and the American Public Health Association, have passed resolutions similar to those of the Canadian Medi-

cal Association, asking for a National Department of Public Health, under one of the existing Ministers.

On behalf of the Canadian Medical Association.

The Committee: E. P. LACHAPELLE, M.D., Convener.

R. W. POWELL, M.D.

CARLETON JONES, M.D.

J. W. DANIEL, M.D.

H. A. BRUCE, M.D.

H. H. CHOWN, M.D.

J. B. BLACK, M.D.

WILBERT MCINTYRE, M.D.

Dr. R. W. Powell, Ottawa, the General Secretary of the Association, Lieut.-Col. Carleton Jones, M.D., Dr. Schaffner, M.P., and Dr. Wilbert McIntyre addressed the Premier and his Minister.

The Prime Minister and Mr. Fisher were very much interested in the different addresses, at the close of which Mr. Fisher, in response to the query of Sir Wilfrid, as to whether it were feasible, stated in his opinion it was, but that he could foresee some difficulties in the way of an immediate re-organization and consolidation of the different medical services of the Government.

ONTARIO MEDICAL ASSOCIATION

The 28th annual meeting of the Ontario Medical Association will be held in the Normal College Building, Victoria Avenue South, Hamilton, May 26th, 27th and 28th, 1908.

OFFICERS.

President—Dr. Ingersoll Olmsted, Hamilton.

Vice-Presidents—Dr. H. J. Hamilton, Toronto; Dr. D. E. Mundell, Kingston; Dr. C. E. Casgrain, Windsor; Dr. T. S. T. Smellie, Fort William.

General Secretary—Dr. Charles P. Lusk, 99 Bloor St. West, Toronto.

Assistant Secretaries—Dr. Samuel Johnston, 169 Carlton St, Toronto; Dr. J. Heurner Mullin, 201 James St. S., Hamilton.

Treasurer—Dr. Frederick Fenton, 75 Bloor St. East, Toronto.

Chairman, Committee on Papers and Business—Dr. R. R. Wallace, 113 Main St. W., Hamilton.

Chairman, Committee on Arrangements—Dr. A. B. Osborne, 42 Charlton Ave. E., Hamilton.

To the Members of the Profession of the Province of Ontario—

We have pleasure in announcing to you the 28th Annual Meeting of the Ontario Medical Association, which will be held in the Normal College Building, Victoria Avenue South, Hamilton, May 26th, 27th and 28th next. In response to the very evident feeling of the members at the last meeting, that the work of the Association could be broadened and the sympathetic co-operation of a larger number of the Profession secured by a departure from the routine of the last few years, it was decided to hold the 1908 meeting in Hamilton. The members in Hamilton have enthusiastically responded in making preparation for the event, as a perusal of the programme will show.

The meeting will again be divided into sections of Medicine and Surgery, and probably sections in Obstetrics and Pediatrics in the Eye, Ear, Nose and Throat, and in Preventive Medicine, which will meet in the morning for the reading of papers and their discussion, and General Sessions meeting in the afternoon,

during which the addresses will be delivered and papers of general interest read. These will be followed on Wednesday and Thursday afternoons by the Business Sessions. The evenings will be given up to pleasure. Tuesday evening there will be a Smoking Concert at the Yacht Club at Hamilton Beach, and on Wednesday, at 8 p.m., the Annual Dinner at the Royal Hotel, when the visiting members will be the guests of the Medical Profession of Hamilton. For each of these evenings suitable programmes are being arranged so that nothing in the way of entertainment will be wanting.

The Business Session on Wednesday afternoon, May 27th, will demand the attendance of every member of the Association, to hear the reports of the Committees and for the election of the officers for the ensuing year. The Committee appointed to revise the Constitution in harmony with that of the new Constitution of the Canadian Medical Association will present its report and as the discussion of this matter is fraught with interest of moment to every practitioner, involving as it does the question of the organization of the medical profession of the Province and of the Dominion, you ought to be there.

The following gentlemen from outside the Province have promised to attend, and the list of names is such as will of itself lend pre-eminent interest to the scientific side of the programme.

Charles G. Stockton, Professor of Medicine, University of Buffalo, and

Charles L. Scudder, Surgeon to the Massachusetts General Hospital, Boston, who will respectively deliver the addresses in Medicine and Surgery.

Virgil P. Gibney, Professor of Orthopedic Surgery, Medical Department, Columbia University, New York City.

Harry C. Buswell, Adjunct Professor of Medicine, University of Buffalo.

Thos. McCrae, Associate Professor of Medicine, Johns Hopkins University, Baltimore.

Lewis G. Cole, New York City.

Benson P. Cohoe, Assistant Physician to Johns Hopkins Hospital, Baltimore.

Harry P. Lyle, Surgeon to St. Luke's Hospital, New York City.

J. C. Meakins, Pathologist to the Presbyterian Hospital, New York City.

Hermon Sanderson, Detroit.

George E. Armstrong, Professor of Surgery, University of McGill, Montreal.

A. E. Garrow, Associate Professor of Surgery, University of McGill, Montreal.

John W. Stirling, Montreal.

Campbell Howard, Assistant in Medicine, University of McGill, Montreal.

Colin K. Russell, sometime Chief Resident Officer at the National Hospital, Queen's Square, London; Assistant in Medicine, University of McGill, Montreal.

Time Limits—Papers read in Sections, fifteen minutes. Discussions, in Sections, five minutes. Discussions, in General Sessions, ten minutes.

MEMBERSHIP—HOW OBTAINED.

Any regular practitioner of the Province in good standing is eligible for membership. Secure from the Treasurer a blank membership form, have your application endorsed by two members of the Association, deposit it and two dollars, the annual fee, with the Treasurer. The application must come before the Committee on Credentials for final acceptance.

RAILWAY ARRANGEMENTS.

The Committee have secured the regular convention rates upon the lines of the Eastern Canadian Passenger Association from points east of and including Port Arthur. Ask your railway agent for a Standard Certificate as a member of the Ontario Medical Association, and buy a full single first-class fare ticket to Hamilton. On arrival hand the certificate to the Secretary. The Passenger Association will have a special agent at the buildings at noon, each day, to supervise the certificates, to cover the cost of which a fee of 25 cents will be charged. If 50 members, bearing certificates, are present who have paid 50 cents or more for their tickets to Hamilton, you will be returned for one-third the lowest regular first-class fare on presenting your certificate, duly signed and vised. If 300 are present you will be returned free; but if less than 50, two-thirds will have to be paid. Let each member coming to the city take the time to secure a standard certificate, and thus help those coming from a greater distance to make sure of their reduced fares.

PROPOSED PROGRAMME.

The final order of papers will be announced in the Programme to be sent out early in May.

TUESDAY, MAY 26TH.—MORNING SESSION.

Medical Section—

- "Vaccine Therapy in Medicine and Surgery."—W. L. Silcox, Hamilton. Discussion to be led by W. Gibson, Kingston, and G. W. Ross, Toronto.
- "Diphtheria Antitoxins as Prophylactic and Curative Agents."—W. Goldie, Toronto.
- "Some Points in the Treatment of Puerperal Septicemia."—Adam H. Wright, Toronto.
- "Neurasthenia from the Etiological Standpoint."—H. B. Anderson, Toronto.
- Paper—Title to be sent.—Benson Cohoe, Baltimore.
- Paper—Title to be sent.—A. Dalton Smith, Mount Forest.

Surgical Section—

- "The Treatment of Dislocations of the Acromial End of the Clavicle."—L. W. Cockburn, Hamilton.
- "Method of Treatment of Sprained Ankle."—J. Sheahan, St. Catharines.
- "Obstruction due to Cancer of the Large Bowel."—H. A. Bruce, Toronto.
- "The Third Dimension in the Visualization of Surgical Procedures (with Lantern Slides)."—N. A. Powell, Toronto.
- "The Hyperemic Treatment."—H. P. Lyle, New York City. Clinic and Luncheon at the City Hospital.

TUESDAY AFTERNOON—GENERAL SESSION.

President's Address.

Symposium—Arteriosclerosis.

Pathology—J. J. Mackenzie.

Cerebral Manifestations—Colin K. Russell, Montreal.

Aortic Arch Manifestations—Thomas McCrae, Baltimore.

Muscle Manifestations—Harry C. Buswell, Buffalo.

Visceral Manifestations—J. A. Bauer, Hamilton.

Treatment—H. A. McCallum, London.

TUESDAY EVENING.

Smoking Concert at the Yacht Club, Hamilton Beach, under the management of the Committee on Arrangements, who are providing an entertaining programme.

WEDNESDAY, MAY 27TH.—MORNING SESSION.

Medical Section—

- “Remarks on the Duties of the Medical Examiner in Life Insurance.”—G. S. Glassco, Hamilton.
- “Some Complications of the Puerperium. Report of a Case.”—J. R. Stanley, St. Mary’s.
- Paper—Title to be sent.—R. J. Dwyer, Toronto.
- Paper—Title to be sent.—J. C. Connell, Kingston.
- “Hypodermic Anesthesia.”—D. Dunton, Paris.
- “Obstetrical Technique.”—Frederick Fenton, Toronto.
- “The Treatment of Pneumonia.”—George Hodge, London.
- “A Fatal Form of Eclampsia.”—K. C. McIlwraith.
- “Missed Abortion.”—R. Ferguson, London.

Surgical Section—

- “Lateral Sinus Suppuration Compared with Cerebellar Abscess.”—J. P. Morton, Hamilton.
- “Exstrophy of the Bladder. Report of a Case.”—F. N. G. Starr, Toronto.
- “Report of an Extraordinary Case of Foreign Body in the Bladder.”—Edwin Seaborn, London.
- “Mechanical Ileus—Operation, Recovery. Remarks on the Treatment.”—George T. McKeough, Chatham.
- “Ulcer of the Stomach.”—W. E. Olmsted, Niagara Falls.
- “Transplantation of the Omentum in Hepatic Cirrhosis.”—Edmund E. King, Toronto.
- “The Absurdity of Quarantine in Cases of Small Pox.”—H. Sinclair, Walkerton.

WEDNESDAY AFTERNOON.—GENERAL SESSION.

- “Address in Surgery.”—Charles L. Scudder, Boston.
- “Gangrene and Abscess of the Lung.”—George E. Armstrong, Montreal.
- “Results of the Bier-Klapp Treatment of Tuberculous Sinuses and Joints at the Hospital for the Ruptured and Crippled, New York City.”—Virgil P. Gibney New York City, and C. E. Preston, Ottawa.

BUSINESS SESSION.

Reports of Committees, election of officers, etc.

WEDNESDAY EVENING.

The Annual Dinner, to be given in the Royal Hotel, at which the members will be the guests of the medical men of Hamilton.

THURSDAY, MAY 28TH.—MORNING SESSION.

Medical Section—

- "The Opsomic Treatment of the Diseases of the Skin."—
D. King Smith, Toronto.
- "Malignant Endocarditis."—J. T. Fotheringham, Toronto.
Paper—Title to be sent.—A. R. Gordon, Toronto.
- "A Plea for Rational Therapeutics."—George Acheson, Galt.
- "Some Points in the Diagnosis and Treatment of Diabetes Mellitus."—Campbell Howard, Montreal.
- "The Treatment of Appendicitis."—G. R. Cruickshank, Windsor.
- "Rheumatism."—J. C. Meakins, New York City.
Paper—Title to be sent.—W. P. Caven, Toronto.
- "Mouth Breathing."—John Hunter, Toronto.

Surgical Section—

- "Pyelonephrosis in Pregnancy."—J. F. W. Ross, Toronto.
- "Duodenal Ulcer."—A. E. Garrow, Montreal.
- "Paper"—Title to be sent.—H. Sanderson, Detroit.
- "Pancreatic Cyst."—D. E. Mundell, Kingston.
Paper—Title to be sent.—John W. Stirling, Montreal.
- "The Surgical Treatment of Compression Paraplegias."—
A. Primrose, Toronto.
- "The Treatment of Acute General Septic Peritonitis without Drainage."—C. F. Moore, Toronto.

THURSDAY AFTERNOON.—GENERAL SESSION.

- "Address in Medicine."—Charles G. Stockton, Buffalo.
- "X-Ray Diagnosis in Medicine and Surgery, with Lantern Slide Demonstration."—Lewis G. Cole, New York City.
- "Psychiatry in Relation to General Medicine."—C. K. Clarke, Toronto.

BUSINESS SESSION.

Unfinished business; installation of officers.

STANDING COMMITTEES.

On Credentials.—W. O. Boyd, Bobcaygeon; W. T. Connell, Kingston; Murray McFarlane, Toronto; W. J. Hickney, Ottawa; and M. Stalker, Walkerton.

On Public Health.—C. J. Hodgetts, Toronto; D. H. Arnott, London; Emerson Bull, Lambton Mills; J. W. S. McCullough, Aliston; Ira Freel, Stouffville; A. E. McColl, Belleville.

On Publication.—John Hunter, Graham Chambers, D. J. Gibb Wishart, George Elliott and H. S. Hutchison, Toronto.

On By-Laws.—Alex. Taylor, Goderich; W. J. Charlton, Weston; W. T. Parke, Woodstock; T. D. Meikle, Mount Forest; J. Lindsay, Guelph; C. J. Hastings, Toronto.

On Ethics.—H. T. Machell, Toronto; H. A. McCallum, London; Geo. T. McKeough, Chatham; John Caven, H. J. Hamilton; A. A. Macdonald, Toronto; H. S. Bingham, Cannington.

Advisory.—Daniel Clark, Toronto; J. H. Richardson, Toronto; J. A. Temple, Toronto; W. H. Moorhouse, London; R. A. Reeve, Toronto; R. W. Bruce Smith, Brockville; F. Le M. Grasset, Toronto; Wm. Britton, Toronto; W. J. Gibson, Belleville; A. H. Wright, Toronto; Angus McKinnon, Guelph; N. A. Powell, Toronto; J. C. Mitchell, Enniskillen; J. F. W. Ross, Toronto; Wm. Burt, Paris, and G. A. Bingham, Toronto.

TEMPORARY COMMITTEES.

On Audit.—D. G. Storms, Hamilton; W. J. McNicholl, Hamilton; Wallace Scott, Toronto; J. A. Dickson, Hamilton.

On Necrology.—A. Dalton Smith, Mitchell; G. R. Cruickshank, Windsor; J. D. Courtenay, Ottawa; D. Hoig, Oshawa; James Russell, Hamilton.

On Papers and Business.—R. R. Wallace, Chairman; J. A. Bauer, J. W. Edgar, J. P. Morton, G. S. Glassco, J. Heurner Mullin, L. W. Cockburn, D. G. Storms.

On Arrangements.—A. B. Osborn, Hamilton, Chairman; G. S. Rennie, H. S. Griffin, G. S. Glassco, J. H. Mullin, A. E. Malloch, J. E. Davcy, E. P. O'Reilly, F. E. McLoughlin, J. T. Rogers, Jas. Anderson, F. Coleman.

SPECIAL NOTICE.

Through the courtesy of Mr. J. J. Morrison, the President, and the Committee of the Hamilton Golf Club, the privileges of the Club House and Links are extended to the visiting members of the Association. Golf enthusiasts are requested to bring their clubs.

The privileges of the Thistle Club are extended to the visiting members of the Association by the courtesy of Mr. T. G. Haslett, the President, and Dr. H. A. Wardell, the President of the Bowling Club. Bowls will be provided for members desirous of trying their skill on the green.

HOW TO GET TO THE PLACE OF MEETING.

Members arriving by the T.H. & B. or by the C.P.R. may walk directly eastward along Hunter Street, upon which the depot

is, to Victoria Ave., a matter of five minutes' walk, or may take the King Street East Cars.

Those arriving via G.T.R. will take cars to King Street, transfer to King Street East, and thence to Victoria Avenue.

Streamers will direct you to the Normal College Building.

HOTELS AND BOARDING HOUSES.

Royal Hotel, accommodation for 100 guests, \$3.00 to \$3.50 per day. American plan.

Waldorf, accommodation for 100 guests, \$2.00 to \$3.00 per day. American plan.

Terminal, accommodation for 40 guests, \$2.00 per day. American plan.

Hotel Cecil, accommodation for 50 guests, \$2.00 per day. American plan.

TELEGRAMS, LETTERS, ETC.

These may be directed to the care of the Secretary, Normal College, Victoria Ave. South, where they will be held for you at the Bureau.

PROGRAMME OF THE CANADIAN HOSPITAL ASSOCIATION

Second Annual Convention, to be held in the Parliament Buildings, Toronto, on Easter Monday and Tuesday, April 20th and 21st, 1908.

MONDAY, APRIL 20TH.

2 p.m.—President's address, Miss L. C. Brent, Superintendent Hospital for Sick Children.

"How to Deal with Tuberculosis as a Social Problem."—Dr. W. J. Dobbie, Superintendent Weston Sanitarium. Discussion by: Drs. Gordon and Kendall, of Gravenhurst, and Dr. Holbrook, Mountain Sanitarium, Hamilton.

"The Milk Supply."—Dr. Helen MacMurchy, editor *Canadian Nurse*. Discussion by: Dr. Robertson, of Ottawa.

"Fumigation."—Dr. A. D. Macintyre, Superintendent Kingston General Hospital. Discussion by: Miss Miller, Lindsay.

Appointment of Nominating Committee.

8 p.m.—Reception by Miss Louise C. Brent, President of Association, at the Nurses' Residence, Hospital for Sick Children.

TUESDAY, APRIL 21ST.

9.30 a.m.—“Contagious Diseases in Relation to Hospital Management.”—Dr. Chas. Sheard, Medical Health Officer. Discussion by: Miss Brent and Miss Matheson.

“Some Observations on European Psychiatric Hospitals.”—Dr. C. K. Clarke, Superintendent Toronto Hospital for Insane. Discussion by: Dr. Ryan, of Kingston; Dr. Hurd, of Johns Hopkins Hospital; Dr. R. Bruce Smith and Dr. D. C. Meyers.

“The Hospital and the Public.”—Del T. Sutton, Esq., editor *National Hospital Record*. Discussion by: J. W. Flavelle, Esq., LL.D., W. T. White, Esq., J. Ross Robertson, Esq., and J. W. Atkinson, Esq.

Report of Nominating Committee.

2 p.m.—“A New Typhoid Hopper.”—H. E. Webster, Superintendent the Royal Victoria Hospital, Montreal.

“The Nursing of Incurable Patients.”—Miss M. M. Grey, Superintendent Hospital for Incurables.

“The Proper Length of the Period of Study for Nurses.”—Dr. H. M. Hurd, Superintendent Johns Hopkins Hospital, Baltimore. Discussion by: Miss Patton, Miss Tolmie and Miss Chesley.

Physician's Library.

Diseases of the Heart. BY PROF. TH. VON JURGENSEN, of Tubingen; PROF. DR. L. KREHL, of Greifswald; and PROF. DR. L. VON SCHROTTER, of Vienna. Edited, with additions, by GEORGE DOCK, M.D., Professor of Medicine, University of Michigan, Ann Arbor. Octavo of 848 pages, illustrated. Philadelphia and London: W. B. Saunders Company, 1908. Cloth, \$5.00 net; half morocco, \$6.00 net. Canadian agents, J. A. Carveth & Co, Ltd, Toronto.

This is a translation of the heart sections of Nothnagel's "Specielle Pathologie und Therapie." The excellence of the system of internal medicine issued under the editorship of Professor Nothnagel is recognized by German physicians and those of other nationalities who are sufficiently familiar with German to read the original works. Unfortunately, the great majority of English physicians are unfamiliar with the German language and consequently are unable to benefit themselves by reading the original monographs. The translation, therefore, of this, as well as of the other volumes of the system, is a great addition to medical literature in the English language.

The translation of the monograph before us is under the charge of Professor Dock, University of Michigan. The contributors are Professors von Jurgensen, von Schrotter and Krehl, all of whom are well known for their scientific attainments and wide clinical experience.

The Production and Handling of Clean Milk. BY KENELEM WINSLOW, M.D., M.D.V., B.A.S. (Harv.), formerly Instructor in Bussey Agriculture Institute and Assistant Professor in the Veterinary School of Harvard University; author of a "Text-book on Veterinary Materia Medica and Therapeutics"; Chairman of the Committee on Milk of the Washington State Medical Association, etc. New York: William R. Jenkins Co., publishers, 851-853 Sixth Avenue.

The production of clean milk, which concerns many, particularly the consumer, is at the present day prominently before the public in every walk of life. The medical profession, always on the alert to prevent as well as to cure disease, takes an active part

in the campaign. Physicians will, therefore, be intensely interested in a book which presents the question to them in its many aspects. As the writer of this book is so well qualified to instruct upon the subject, it can be taken for granted that his work has been admirably done in its preparation. It is freely illustrated, excellently gotten up and written in a clear and intelligent manner.

Woman—A Treatise on the Normal and Pathological Emotions of Feminine Love. BY BERNARD S. TALMEY, M.D., Gynecologist to the Yorkville Hospital and Dispensary; former Pathologist to the Mothers' and Babies' Hospital, etc., New York. For Physicians and Students of Medicine and Jurisprudence. With twenty-three drawings in the text. Second enlarged and improved edition. Price, \$3.00. New York: Practitioners' Publishing Co.

That a second edition of this unique book in medical literature has been called for in ten months' time shows that there has been an appreciation of it on the part of the medical public. It certainly fills a want in medical literature. To read and understand in this book is better than teaching and instruction imparted by the professor. Medical students would be far too apt in classes to receive the instruction with levity, no matter in what seriousness it was delivered. The young man goes into practice poorly equipped in this sort of knowledge. Probably many suffer needlessly thereby. That is nicely corrected by Dr. Talmey's book.

Treatment of Internal Diseases. BY DR. NORBERT ORTNER, of the University of Vienna. Edited by NATHANIEL BOWDITCH POTTER, M.D., Visiting Physician to the New York City Hospital, and to the French Hospital; Instructor in Medicine, Columbia University. Translated by FREDERICK H. BARTLETT, M.D., from the Fourth German Edition. London, Philadelphia, Montreal: J. B. Lippincott Company. Octavo, 658 pages. Cloth, \$5.00 net.

The scope of this book is treatment, not prophylaxis, only so much of the pathological physiology of the diseases being discussed as bears upon their rational treatment. The reader is shown the importance of mechanical, dietetic, climatic, and all extra medicinal methods, then the applicability of certain drugs,

their respective advantage, disadvantage, and limitations, with useful prescriptions from the author's own experience and that of others, leaving the reader better armed to meet casual indications and the various contingencies which arise and require symptomatic treatment.

One of the most attractive features of the book is the citation and description of numerous climatic resorts, the discussion of hydrotherapeutics and all extra medicinal measures, and the judicious reasons for the application of those selected.

Dr. Bartlett has translated the German text into idiomatic English, thoroughly Americanizing the book and without losing the spirit or the details of the original. Climatology, hygiene and dietetics have been adapted to the needs of the American practitioner, and the prescriptions to conform to the American Pharmacopœia. Where the editor's views differ from the author's, he has selected suggestions from the American or English clinicians. Such additions have been enclosed in brackets.

It contains a carefully selected list of American resorts and a brief mention of their most important features, with a tabulated list of drugs, many of the tables including those of the various iron compounds, of the iron-containing waters, and of arsenical water, which will prove very useful for ready reference.

Surgery: Its Principles and Practice. In five volumes. By sixty-six eminent surgeons. Edited by W. W. KEEN, M.D., LL.D., Hon. F.R.C.S. (Eng. and Edin.), Emeritus Professor of the Principles of Surgery and of Clinical Surgery, Jefferson Medical College, Philadelphia. *Volume III.* Octavo of 1132 pages, with 562 text illustrations and 10 colored plates. Philadelphia and London: W. B. Saunders Company, 1908. Per volume: cloth, \$7.00 net; half morocco, \$8.00 net. Canadian agents, J. A. Carveth & Co., Ltd., Toronto.

The fact that the Mayo brothers, Moynihan, Edmund Owen, Kocher and Mayo Robson contribute to this volume makes it a valuable one. The surgery of the head, neck and thyroid gland diseases is elaborately treated of, as is that of the stomach, liver, gall-bladder, biliary ducts, pancreas and spleen. The illustrations are fine and numerous, quite a number being colored. Should the remaining volumes come up to the standard of the first three, Keen's "Surgery" will assume front rank amongst works of a similar class.

Dominion Medical Monthly

And Ontario Medical Journal

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VOL. XXX.

TORONTO, APRIL, 1908.

No. 4.

COMMENT FROM MONTH TO MONTH.

The Physicians' Pedagogue.—The members of the medical profession in these parts, and a very considerable proportion of the laity at large, have recently been treated to some very (supposedly) sound advice by the editor of *The Globe*. This gentleman, an acknowledged master among the members of his profession, has seen fit to take it upon himself to make some very scathing remarks about the members of the medical profession in this Province, and more particularly about the Ontario Medical Council. He has endeavored to prove—and has, doubtless, quite succeeded, in so far as he is personally concerned—that the Medical Council is guilty of gross negligence in that it has not caused the arrest, trial and summary punishment of certain doctors of physic, who are under suspicion of being guilty of the practice of criminal abortion.

Let it be granted in the start-off that the editor in question is sincerely desirous of bringing about real reform along the line he is indicating. Every intelligent member of society, lay or professional, will gladly wish him God-speed, and aid him to the best of his ability.

At the same time it seems to us there are certain requisites which are indispensable in the character of any moral reformer, viz:

1. He should be honest.
2. He should be consistent.
3. He should have sufficient mental acumen to enable him to distinguish between things which differ.

Let us, therefore, see to what extent our self-constituted mentor measures up to this standard.

In an article in the November issue of this journal—one which was mailed to him in a sealed envelope, and which may reasonably be supposed to have reached him, albeit so far as we are aware no notice was paid to it by him in the editorial columns of his paper—we respectfully drew his attention to the facts of the case, from the standpoint of the practitioner. Subsequent to this, other articles, similar in character to that referred to in our editorial of November, appeared in the editorial columns of *The Globe*, from which it was evident to us the reverend editor had ignored the facts of the case, as pointed out by us. Was this fair, or even honest? Does this gentleman ever realize the tremendous responsibility which rests on him, filling as he does the position of moral and political adviser to over 50,000 daily readers? It is not too much to say there are thousands of people in the lower walks of life who glean their chief ideas, moral and political, from the Bible and *The Daily Globe*. What, then, shall be said of a great moulder of public opinion who consciously misapplies the facts in any given case, and thus creates a bias, which is calculated to do infinite injustice, if not distinct harm, to a considerable portion of the community?

Is it well that the editor of a paper should cry out against the sins of a profession, which, as a body, has nothing to blush for, while at the same time that paper is publishing advertisements of quack remedies, which purport to bring about cures, which every physician, and most intelligent members of the laity, know full well are beyond the bounds of possibility? Is this consistent? But, it may be urged, the admission of these advertisements rests with the advertising department, and so the matter in no wise concerns the lofty fashioner of faiths and fancies—the editor-in-chief. If he be not cognizant of such improper advertisements, he should be, and it would be as fatuous for him to disclaim his share of responsibility in this contemptible method of making money, as it would be for the quack to justify the failure of his nostrum to cause a cure, because the ignorant purchaser thereof had failed to properly diagnose his own ailment. A little wholesome backbone on the part of the press, in refusing to advertise such palpable

methods of procuring money from the public under false pretences, would meet with the grateful approbation of a large part of the community and aid materially in stamping out this heartless method of imposing on all too credulous humanity.

In the November issue already referred to, we drew the reverend editor's attention to the fact that "it is *not* the function of the Medical Council to try, sentence and execute or imprison the medical criminal, but rather that this duty devolves upon the legal officers of the Crown." And still we are treated to the ridiculous spectacle of our would-be moral mentor insisting that the Medical Council should arrest and duly punish such offenders; and herein it would seem that the gentleman is unable to distinguish between things which differ. In other words, he is barking up the wrong tree. Does he know what is meant by the term "criminal offence"?

He has been good enough to say the whole medical profession is on trial (because of the supposed offences of the few). This is an erroneous and wholly unwarranted charge to make, and a splendid specimen of gratuitous insolence. Lives there a medical man who would be such a consummate ass as to charge the whole ministerial profession with soiled skirts, because some few of the brethren may have fallen from grace? The charge is not alone unjust—it is unnecessarily stupid.

In closing, we beg to repeat what we said in our former article: "The Medical Council of Ontario is doing its utmost to maintain a clean profession in this Province, and is also doing its utmost to safeguard the interests of the people at large, by keeping out quacks, and God knows what 'pathies,' as well as by keeping up a high standard to which all its graduates must conform. If the public and the press do not possess the brains to appreciate this fact, so much the more are they to be pitied. Such an unwarranted attack on our professional honor is as groundless as it is cowardly; but, then, after all, the dog sometimes bites the hand of the master who feeds it!"

The Ontario Medical Association.—The attention of the profession is again called to the Twenty-eighth Annual Meeting of the Association, which will be convened in the Normal College Building, Victoria Avenue South, Hamilton, on the 26th of May next and continue in session for the two succeeding days.

The provisional programme has been distributed throughout

the Province. The prominence given to the scientific side of the meeting, and this will be of exceptional merit, will not be permitted to dwarf its social aspects. At the smoking concert at the Yacht Club, Hamilton Beach, on Tuesday evening, there will be a most entertaining programme presented. On the succeeding Wednesday at the Royal Hotel the visiting members will be the guests of the medical men of Hamilton at dinner.

Outside members who are fond of golf are asked to take their clubs, as the privileges of the Hamilton Golf Club have been extended to all visitors, through the courtesy of the President, Mr. J. J. Morrison, and of his committee. Members who are visiting the meeting are also extended the privileges of the Thistle Club, by courtesy of the President, Mr. T. C. Haslett, and of the President of the Bowling Club, Dr. H. A. Wardell. Bowls will be supplied.

A luncheon at the City Hospital has been arranged, following the morning sessions on Tuesday. Other entertainments are under consideration and full announcement made in the final programme, which will be issued in May. The Committee on Arrangements hope that visiting members will bring their wives and daughters, who will be happily cared for by the local ladies, and they trust that this may be one of the features of the meeting.

The Preliminary Programme of the Ontario Medical Association's annual meeting at Hamilton appears on another page. The Programme Committee is to be congratulated upon the excellent character of the papers to be presented. There is to be a number of able men from the United States, and what is particularly happy is that there are to be several of Montreal's leading physicians and surgeons present to present papers and take part in the discussions. It is important to emphasize the need of a large representative meeting, as the constitution is to be revised to provide for affiliation with the Canadian Medical Association. It is hoped county and city as well as district societies will be well represented.

A Public Health Department for Canada is the title of a pamphlet sent out from the office of the General Secretary of the Canadian Medical Association. It has been sent to the press, medical and public, members of the House of Commons, the Senate, provincial secretaries of health boards, and medical socie-

ties all over Canada, as well as to medical health officers in the large cities and to professors in the universities having to do with public health matters. As the question is to come up for discussion in the House of Commons again this session, especially as there are several members interested in it other than those belonging to the medical profession, medical societies and the medical press and all others should early press the matter on the attention of members of the House. Recent events at Ottawa suggest the possibility of the reorganization of more than one department of the government in the immediate future; and the opportunity thus presented to the medical profession of Canada should be seized eagerly and prosecuted with vigor and "sticktoitiveness." It may be considered wise on the part of the Special Committee on Public Health to again press the matter upon the Prime Minister and his colleagues, and especially so now that the Canadian Association for the Prevention of Tuberculosis will join hands with the Canadian Medical Association in urging the Government to consolidate the various branches of the medical service, when the former meets in Ottawa next June. If so, we can only urge upon the attention of the profession, and particularly upon those directly engaged in public health matters, the desirability of their presence and support at that meeting.

The Report of the Ontario Commission on Insanity is before us. It shows that the Commission went carefully and very fully into the methods employed in caring for and treating the insane in different university centres in Great Britain and Europe. Particular attention was given to the investigation of the organization and methods and equipment of psychiatric hospitals and psychiatric clinics, and the most important of the Commission's recommendations is set forth in these words: The psychiatric hospital being the ideal institution for the treatment of all acute forms of insanity, we would recommend the establishment, as necessity arises, of such hospitals at university centres. The other recommendations are: The enlargement of the present staffs of physicians and nurses; the isolation of the tuberculous; the proper care and treatment of insane criminals. Regarding the first of these, we would express the hope that the appointments of physicians be made purely on merit and fitness and not on any political pull, and that the advice of the heads of the institutions be followed rather than that of the ward patronage committee. The

recommendations as to the tuberculous and also the criminal insane are abreast of the times and should be rapidly adopted by the provincial authorities. Reference is made to those who have a "horror of the name 'asylum.'" If we mistake not, hospitals for the insane perpetuate this "horror" largely by continuing themselves to carry it on their letter paper, make mention of it in official communications, as well as in the writings of those engaged in this branch of medicine. If the word were quietly dropped and never mentioned in the medical press, in scientific publications and official documents, it would rapidly become obsolete in this connection.

What Word Do You Use when you find yourself chewing a bread label the cook has failed to remove? Some people when putting a stamp on a letter lick the stamp instead of the envelope. It would be interesting to know which the bread-labeller applies the tongue to. Who started this silly system anyhow? Who should put an end to it at once? There has been a great deal in the public press lately about light-weight bread and standard loaves. It shows that the people are alive to the question of the production and handling of the staff of life. Some dealers put wrappers on some loaves. Why not have them properly and fully dressed? Many years ago we advocated the putting of all loaves into paper bags. We are coming to it by degrees. Why not adopt it at once and be done with it?

Speaking of Bread leads us to say a word about "Gluten" breads and crackers. The elimination of the overcharged starchy cereals from the diabetic's diet paves the way for the gluten article. A writer in *Scientific American* says to take ten minutes and find out what gluten is. Obtain a tablespoonful of white flour, add water in a saucer and make your dough into a compact ball. Take it to the tap and let the water run on it through your hands. In ten minutes' time you have a nodule of yellow, firm, vegetable gum. Take and chew this gum for a couple of hours. It is smaller. The tap water washed away the large starch cells; the saliva, the infinitesimally fine starch cells. Take the small ball of gluten left to an analytic chemist. The report will be: Starch 15 or 18, gluten 85 or 82. The writer then argues that "where a case is a desperate one, and starch or no starch will turn the balance of life, it is very easy to procure and analyse a sample of

the flour or cracker of "gluten" the patient is to use. He says such a course would save a physician many a perplexing hour, and maybe an esteemed patient now and then.

The Use of the Cinematograph in Medicine for recording and illustrating movements of patients, victims of various nervous diseases, has been successfully employed, says Dr. H. Campbell Thomson in a recent issue of *The Lancet*. Photographs taken at the rate of sixteen in a second of time clearly show these movements and have been utilized for imparting instruction to students. The cinematograph has been used by some eminent surgeons, particularly one in Paris, showing mostly the actions of the operator, and it may be that there will open up a field in this direction which, while interesting and delightful, may prove of useful help to the student of medicine, particularly in class teaching. It may in time supersede to some extent the lantern.

Editorial Notes.

Phimosis and Circumcision in Infants.—Phimosis is nearly always present at birth, and is due to a small preputial orifice as well as to adhesions between the glans and prepuce. The glans, in growing and during the erections which occur with difficult defecation in infants, gradually dilates the preputial orifice, and breaks up the adhesions between glans and prepuce, a process which is usually not complete until the eighth year. In other words, a certain degree of phimosis is physiological in early childhood. Many reflex phenomena, including most of the functional diseases of childhood, have been attributed to it, and circumcision has been recommended for their cure. That the symptoms are really not caused, at least not always caused, by the phimosis, is proved by the fact that in at least one-half the cases they are not relieved. In a plea for fewer uncalled-for circumcisions, appearing in the *Correspondenz-Blatt für Schweizer Aerzte* of Dec. 1, 1907, G. Rheiner mentions a few of the indications and contraindications for the operation in early childhood. He considers a phimosis pathological only when it acts as a mechanical obstacle in urination. The urine is passed in a thin stream, or only a drop at a time, the space between glans and prepuce balloons out, the urine decomposes in this space, and is thus liable to cause balanitis. The straining at urination is liable to be followed by hernia or prolapsus

ani, the balanitis incites to masturbation. These patients of course require circumcision if the prepuce cannot be retracted after any adhesion between it and the glans have been broken up. On the other hand, there are patients who have difficulty in urinating which is attributed to a phimosis though it is really due to other causes. Thus in cystitis and balanitis the infected urine or purulent discharge will cause an inflammation of the prepuce which renders urination painful, and this may lead to voluntary retention while there is no mechanical hindrance to the flow of urine. In such a condition circumcision, which is often advised, is really strongly contraindicated, as the wound readily becomes infected, thus aggravating the symptoms and possibly causing sepsis. In patients in whom small ulcers follow herpes preputialis similar urinary symptoms may set in, but here, too, a circumcision is contraindicated. Rheiner also draws attention to conditions which are often attributed to phimosis and in which a circumcision will do no good, though it may not cause any harm. Thus it is quite natural to attribute urinary symptoms due to a stricture (congenital or after an early urethritis) to phimosis. A more frequent source of error is the condition in which urine is passed in small quantities, its voidance being accompanied by bearing down pains. This condition exists in children troubled with constipation due to faulty diet or to fissures about the anus, and the liability to error in diagnosis is increased by the erection reflexly caused by the constipation, for during erection the small preputial orifice is more noticeable. It can readily be understood that a circumcision will not cure these patients.

In many children the physiological phimosis seldom causes any trouble, and if it does circumcision is not always necessary as one can frequently relieve the condition by retracting the prepuce after breaking up the adhesions between it and the glans. The best treatment lies in prophylaxis. We can avoid all future trouble by retracting the prepuce over the glans immediately after birth. This usually requires slight stretching of the preputial orifice, most easily accomplished by inserting a closed scissor artery forceps into the orifice and then separating the blades. Thus sufficient dilation is brought about without causing any bleeding, after which the adhesions between glans and prepuce are broken up and the latter is easily retracted. After the removal of any smegma present, a drop of oil is placed on the glans and the skin is drawn forwards. The skin should then be drawn over the glans daily until there is no longer a disposition to a recurrence of the adhesions. This little manoeuvre is probably not practised by many obstetricians, but it cannot be too strongly recommended, as it does no harm and may prevent much trouble.—*Med. Rec.*

News Items.

DR. JOHN PARKE, of Arcola, Sask., is dead at Feversham, of heart failure.

DR. FRED GUEST, St. Thomas, has been appointed coroner for Elgin County.

CANCER caused 50 deaths in Hamilton last year, and 10 to date this year.

DR. HOPKINS, of Marshville, formerly of Dunnville, has been appointed a coroner.

DR. SPOHN has resumed practice at Penetanguishene, with his son, Dr. Howard Spohn.

DR. W. J. GRAHAM, formerly of Ashgrove, has moved from Tonawanda to Brooklyn, N.Y.

DR. STANLEY BURNS, of Caledonia, has accepted a position as assistant to Dr. Jacques, Jarvis.

DR. D. A. SHIRRES, Montreal, has gone to Jamaica.

DR. J. H. O. LAMBERT, Winnipeg, will go to Europe in May.

ONTARIO hospitals are to receive an increased grant from the Government.

DR. CHAS. C. GURD, Montreal, will spend the next five months in Germany.

VANCOUVER is considering the adoption of the medical inspection of its schools.

DR. WM. B. HOPKINS, of Hamilton, has been appointed associate coroner for Wentworth County.

BANFF objects to the establishment of a sanatorium for consumptives in the National Park bounds.

DR. JOSEPH M. JORY, of St. Catharines, has been appointed an associate coroner for Lincoln County.

DR. MURDOCH CHISHOLM, Halifax, has succeeded Dr. H. L. Dickey as immigration inspector at that port.

NEW buildings, to cost \$60,000, will be erected in British Columbia for the accommodation of the insane.

DR. T. H. WHITELAW, of Edmonton, Alta., has been appointed to the position of Medical Health Officer of Edmonton, at a salary of \$2,000.

DR. DOUGLAS G. MACROBBIE, formerly of Shelburne, has disposed of his practice at Victoria Harbor, and is now located at Hamilton.

HEALTH OFFICERS have been appointed by the Canadian Government along the Minnesota and North Dakota border to enforce quarantine regulations.

DR. MCCOLLUM, late of London, who succeeds Dr. Spohn as Superintendent of the asylum at Penetanguishene, has taken charge of that institution.

THE Quebec Board of Health now excludes from the schools of that Province pupils affected with scabies and pediculi.

THE cigarettes consumed in Canada in 1906 amounted to 277,000,000; for the nine months ending March 31st, 1907, the number was 275,000,000.

DR. JOHN SLOAN and wife have left Blyth for California, where they will visit for a couple of months, whence they will journey to Nome, Alaska.

DR. R. W. IRVING, late of Gananoque, Ont., has been appointed Superintendent of Tranquille Sanitarium for Incipient Consumption at Kamloops, B.C.

DR. J. F. CATTERMOLE, of Toronto, formerly of Milverton, has been appointed to the position of assistant physician at the Penetang Asylum for the Insane.

A HYGIENIC INSTITUTE, to cost \$30,000, is to be erected at London, Ont. The Ontario Government contributed \$50,000, the balance being for equipment. The City of London gave the land free.

DR. AUSTIN HUYCKE, Cobourg, left on Tuesday for New York to take a post-graduate course in the New York City Hospital. After finishing his course he will go to British Columbia to practise his profession.

DR. UNSWORTH, Hamilton, physician in charge at the Consumptives' Sanitarium on the Mountain, has resigned and intends going abroad for a year to take up hospital work. His successor has not yet been named.

DR. A. T. WATT, Superintendent of Quarantine for British Columbia, has returned to Victoria from Seattle, where he was investigating the work being done to combat the outbreak of bubonic plague in that city.

DR. W. C. USHER, son of Mr. William Usher, Wicklow, was highly successful in his examinations for the position of house officer for the Rhode Island General Hospital in Providence. Duties to commence July 1st.

THE Canadian Association for the Prevention of Tuberculosis, at its recent meeting in Ottawa, decided to appoint a medical travelling secretary, and also to urge the Dominion Government to establish a Department of Public Health.

DR. K. D. PANTON, son of Mr. Wm. Panton, Milton, has passed his third and final examination at London, England, for the degrees L.R.C.P. and M.R.C.S. On his return he is likely to practise at Portland, Oregon, or Vancouver, B.C.

CANADIAN MEDICAL ASSOCIATION.—The different sections of the Canadian Medical Association are busily at work preparing programmes. There are to be sections in General Surgery, General Medicine, and one session in each of the following: Eye, Ear, Nose and Throat, Obstetrics and Gynecology, Public Health, Military Surgery, Mental Diseases, Pathology. The dates of the meeting are 9th, 10th and 11th of June; the place of meeting, Ottawa.

DR. T. B. RICHARDSON, our Associate Editor, has recently been advanced to the rank of Major in the Canadian Army Medical Service, and appointed Assistant Surgeon to the Toronto General Hospital, in the service of Dr. George A. Bingham.

DR. and MRS. J. T. MULLIN celebrated the fiftieth anniversary of their marriage on Tuesday of this week. Fifty years ago they were married in Toronto, after which they settled at St. George. From there they moved to Tullamore, where they resided for a few years. They have resided continuously in Brampton for nearly forty years.

WE regret to have to announce the untimely death of Dr. Archie H. Anderson, of Webbwood, Ont., at the early age of 28 years. Dr. Anderson was one of the popular students in the last days of Trinity Medical College. He had served his country in the South African War. Drs. H. B. and D. M. Anderson, Toronto, were brothers of deceased.

STATISTICS gathered from medical men of Manitoba by Dr. Gordon Bell, Winnipeg, show tuberculosis to be on the increase in that Province. One hundred and five doctors replied out of 350 letters sent, and the replies showed 398 cases in the Province. From these, Dr. Bell concludes there are 796 cases in the Province.

WINNIPEG is to have a by-law submitted to it to raise \$225,000 for hospital purposes. It will be expended as follows: Isolation hospital, \$100,000; morgue building, \$15,000; hospital for tubercular patients, \$40,000; maternity and children's hospital, \$60,000. Last year the expenditure in connection with the Winnipeg General Hospital was \$169,000.

DR. A. A. JACKSON, a Mono Mills young man, has bought out the medical practice of Dr. Lepper, of Bolton. Dr. Jackson, who practised for two years at Everett after graduation, has just returned to Ontario after taking a post-graduate course in the hospitals of London and Dublin. Dr. Lepper, who has practised in Bolton for twenty years, will remove to Toronto.

THE students of the University of Pennsylvania Medical School have formed an organization the purpose of which is to acquaint the undergraduates with the workings of the American Medical Association, after which it is very closely modelled. The various student societies take the place of the State organizations

and elect members to a House of Delegates, which transacts all the business of the association. An annual meeting is held, at which papers are read by chosen members, thus encouraging original research and a scientific spirit. The organization is named the Undergraduate Medical Association of the University of Pennsylvania and already has over two hundred and fifty members.

Publishers' Department.

THE *University Magazine* for April continues to be a most excellent quarterly. It is a credit to those who put it forth, and is a journal Canadians are, and will be, proud of in the future.

THE *Bloodless Phlebotomist* for February, 1908, has an interesting article on a new method of Treatment by Hyperaemia, by Dr. A. Lübbert, of Hamburg, Germany: How to treat a pneumonia patient, treatment of ulcers, pelvic diseases, facial neuralgia and broncho-pneumonia, by the well-known product, Antiphlogistine. The number is an especially good one.

THE Battle Creek Sanitarium System: Its History, Organization and Methods, is the title of a handsome, beautifully illustrated brochure, telling all about this world-famous institution. It tells vividly of the growth and expansion, as it does of the scientific methods and equipment installed.

MR. CULLEN ANDREWS BATTLE, head of the well-known house of Battle & Company, Chemists' Corporation, St. Louis, died on March 22nd. He had been in failing health for some months and had not been permitted to attend to his multifarious duties in connection with the large business interests of his company.

THE DR. HUTCHISON SANITARIUM, 218 Simcoe St., Toronto, is a new institution, which is devoted exclusively to the treatment and cure of liquor and drug habits. A gentleman who has for many years been a subscriber to this journal, and one whom we have known personally for several years, is in charge as medical director. This is Dr. J. Hutchison, who is an experienced general practitioner, and one who for several years now has been actively engaged in this branch of medicine. We are, therefore, in a position to say a good word for his institution, which we do

with considerable pleasure. Dr. Hutchison very kindly showed our managing editor through his admirably appointed place, and there are several points which we would particularly call the attention of our readers to. The situation is an ideal one, but a minute's walk from the street car line on Queen Street. It makes a comfortable home, well lighted with electricity, the best hot-water system of heating, handsomely and comfortably furnished, and, therefore, combines arrangements of refinement and comfort. The club room, parlor and private rooms are all that could be desired, in fact we doubt if they could be improved upon. Of course, in a well-appointed institution, as this is, there is every facility for making life enjoyable and happy. Dr. Hutchison is a capable man for his work and the medical profession will find in him one both affable and courteous, anxious and willing to discharge his obligations to both patient and physician to the best of his ability. Indeed, it should be extremely satisfactory to the medical profession of this city that there is now an institution in their midst where this class of patient can be treated along the lines of ethical medicine. To those of our readers who are in the surrounding towns and cities, we may say that their patients sent in here will receive the very best care, treatment and attention, from the hands of a man who is experienced and qualified to attend them.

WHEN you wish to prescribe a preparation of beef which will produce the effect which the assimilation of prime lean beef should produce, you may safely prescribe "Bovril."

"Bovril" is produced entirely from prime beef selected specially for that purpose. It presents the whole of the valuable properties of beef in a form which is easily assimilated. Every operation is carefully supervised, and scrupulous cleanliness is exacted. The preparation is guaranteed not only to be pure, but also to be of an absolutely uniform quality. That is, the component parts are always in a fixed proportion. There is always a certain percentage of the extractives of beef combined with another certain percentage of albumen, fibrin, and the other important elements of beef. This result is obtained by careful analysis at different stages in the course of manufacture, and by a final analysis of the finished product before it is filled into bottles.

It has been recognized by medical men that beef tea and extract of meat possess merely stimulative value. "Bovril" is unique in that it contains the nutritive as well as the stimulating elements of beef, and its uniformity of composition is a very strong recommendation from the medical standpoint.