

Technical and Bibliographic Notes / Notes techniques et bibliographiques

The Institute has attempted to obtain the best original copy available for scanning. Features of this copy which may be bibliographically unique, which may alter any of the images in the reproduction, or which may significantly change the usual method of scanning are checked below.

L'Institut a numérisé le meilleur exemplaire qu'il lui a été possible de se procurer. Les détails de cet exemplaire qui sont peut-être uniques du point de vue bibliographique, qui peuvent modifier une image reproduite, ou qui peuvent exiger une modification dans la méthode normale de numérisation sont indiqués ci-dessous.

- Coloured covers /
Couverture de couleur
- Covers damaged /
Couverture endommagée
- Covers restored and/or laminated /
Couverture restaurée et/ou pelliculée
- Cover title missing /
Le titre de couverture manque
- Coloured maps /
Cartes géographiques en couleur
- Coloured ink (i.e. other than blue or black) /
Encre de couleur (i.e. autre que bleue ou noire)
- Coloured plates and/or illustrations /
Planches et/ou illustrations en couleur
- Bound with other material /
Relié avec d'autres documents
- Only edition available /
Seule édition disponible
- Tight binding may cause shadows or distortion
along interior margin / La reliure serrée peut
causer de l'ombre ou de la distorsion le long de la
marge intérieure.
- Additional comments /
Commentaires supplémentaires:

Continuous pagination.

- Coloured pages / Pages de couleur
- Pages damaged / Pages endommagées
- Pages restored and/or laminated /
Pages restaurées et/ou pelliculées
- Pages discoloured, stained or foxed/
Pages décolorées, tachetées ou piquées
- Pages detached / Pages détachées
- Showthrough / Transparence
- Quality of print varies /
Qualité inégale de l'impression
- Includes supplementary materials /
Comprend du matériel supplémentaire
- Blank leaves added during restorations may
appear within the text. Whenever possible, these
have been omitted from scanning / Il se peut que
certaines pages blanches ajoutées lors d'une
restauration apparaissent dans le texte, mais,
lorsque cela était possible, ces pages n'ont pas
été numérisées.

THE
Maritime Medical News

A MONTHLY JOURNAL OF
MEDICINE AND SURGERY.

Vol. XIII.

HALIFAX, NOVA SCOTIA, APRIL, 1901.

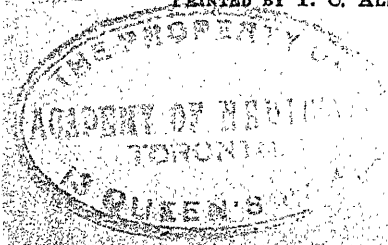
No. 4

PANOPEPTON contains in solution, in an agreeable form, the entire nutritive constituents of beef and wheat—the proteids, carbohydrates, savory and stimulant extractives, mineral constituents—phosphates, etc. **PANOPEPTON** is therefore, a nourishing, restorative, stimulant liquid food of incomparable value for the nutrition and support of the sick.

PANOPEPTON proves a grateful and sustaining food in many cases where other forms of food fail to be acceptable or digestible, and is entirely adequate for the nutrition of the acutely sick for even long periods. It is a valuable resource against insomnia due to mal-nutrition and exhaustion; for invalid travellers and all persons whose appetite and digestion are readily disturbed by excessive fatigue.

FAIRCHILD BROS. & FOSTER, New York.

PRINTED BY T. C. ALLEN & Co., 124 GRANVILLE STREET, HALIFAX, N. S.



Typhoid La Grippe Tuberculosis

and all diseases arising from impoverished blood and a depleted physical condition demand the most efficient

NUTRITION

The patient **MUST** have a new and continuous supply of all the vital elements in which the blood is deficient.

Introduce in all such cases **LIVE BLOOD**. All the leading and most successful practitioners to-day are using

BOVININE

It is **LIVE**, defibrinated arterial blood.
It is preserved by cold process and sterilized.
It retains all the vital and nutritive elements.
It contains 20 per cent of coagulable albumen.
It is a fluid food, pure and simple.
It aids digestion, and is promptly assimilated.
It is to a large extent directly absorbed.
It sustains and stimulates the heart.
It renders cardiac stimulants unnecessary.
It is a powerful aid to all forms of medication.

THE BOVININE CO.,
75 West Houston St., New York.

LEEMING, MILES & CO., Sole Agents for the Dominion of Canada.

"FOR LITERATURE APPLY DIRECT TO THE BOVININE CO., NEW YORK."

LISTERINE

The word Listerine assures to the Medical Profession a non-poisonous antiseptic of well proven efficacy; uniform and definite in preparation, and having a wide field of usefulness.

On account of its absolute safety, Listerine is well adapted to internal use and to the treatment of Catarrhal Conditions of the mucus surfaces.

Literature Describing the Best Methods
For Using

LISTERINE in the Treatment of Diseases
of the Respiratory System

will be mailed to your address upon application

LAMBERT'S LITHIATED HYDRANGEA !

RENAL ALTERATIVE—ANTILITHIC.

The ascertained value of Hydrangea in Calculous Complaints and Abnormal Conditions of the Kidneys, through the earlier reports of Dr. Atlee, Horsley, Monkur, Butler and others, and the well-known utility of Lithia in diseases of the uric acid diathesis, at once justified the therapeutic claims of LAMBERT'S LITHIATED HYDRANGEA when first announced to the medical profession, whilst subsequent use and close clinical observation has caused it to be regarded by physicians generally as a very valuable Kidney Alterative and Antilithic agent in the treatment of

Urinary Calculus, Gout, Rheumatism, Cystitis
Diabetes Hematuria, Bright's Disease,
Albuminuria, and Vesical Irritation Generally.

LAMBERT PHARMACAL CO., ST. LOUIS.

DOCTOR

Will you, in prescribing cod-liver-oil emulsion, write the name of the best one?

Don't leave it open. That gets one of the worst.

SCOTT & BOWNE, Toronto, Canada.

POST GRADUATE COURSE, 1901.

MCGILL UNIVERSITY, MONTREAL.

FACULTY OF MEDICINE

The sixth special course of special instruction for general practitioners has been arranged by the members of the Medical Faculty of McGill University. This course begins **Tuesday, April 30th** and continuing for six weeks, closes **June 8th 1901.**

The course will consist of:—

(a) LABORATORY COURSES.

Systematic Laboratory instruction will be given from 9 to 10.30 every morning in one or more of the following subjects:—Microscopical Methods, Clinical Microscopy and Clinical Bacteriology, including the histology of blood in disease, and serum diagnosis. These courses will be conducted by Profs. Adami and Wyatt Johnson, assisted by Drs. C. F. Martin, N. D. Gunn, Nichols, Anderson, Yates, Fraser, Fisk and Patrick. A course of operative surgery on the cadaver will also be given by Prof. Armstrong during the second, third and fourth weeks of the course.

(b) LABORATORY AND SPECIAL DEMONSTRATIONS.

These demonstrations will be given daily from 10.30 to midday and will consist of one or more, as required, of the following:—Recent Methods of Vaccination, Prof. Finley; Operative Midwifery, Prof. J. C. Cameron; Mental Diseases, Prof. Burgess, Medico-Legal Demonstrations, Prof. Wyatt Johnson; Clinical use of Rontgen Rays; with Photography, Prof. Girdwood; Anatomical Demonstrations on the Cadaver, Dr. McCarthy; Surgical Anatomy, Dr. Elder; Clinical Chemistry and Urinalysis, Prof. Ruttan; Morbid Anatomy of certain diseases, Prof. Adami; Infant Feeding (Modified milk etc.); Dr. Evans; Vaccine and its Preparation, Prof. Johnson.

(c) MEDICAL AND SURGICAL CLINICS.

For four days each week, during the first two hours of the afternoon, there will be clinics on groups of cases in the wards of the Montreal General and Royal Victoria Hospitals. Those given in the **Medical Wards** of the Montreal General Hospital will be given by Profs. Blackader, Finley and Lafleur; in the **Surgical Wards** by Prof. Shepherd and Dr. Elder; in the **Royal Victoria Hospital Medical Wards** by Prof. James Stewart, Prof. C. F. Martin and Dr. W. F. Hamilton; in the **Surgical Wards** by Prof. Bell and Dr. Garrow.

(d) CLINICS IN SPECIAL DEPARTMENTS OF MEDICINE AND SURGERY.

One or more of these clinics will be given in the hospitals each afternoon, after the regular medical or surgical clinic and during the entire afternoon on Wednesday and Saturday of each week.

The following special clinics will be given:—

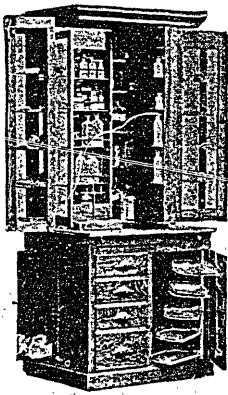
Ophthalmology in the Royal Victoria Hospital by Prof. Buller and Dr. Byers; in the Montreal General Hospital by Dr. J. Gardner; Dermatology, Prof. Sheperd and Dr. G. G. Campbell; Genito-Urinary Surgery, Prof. Bell; Laryngology, Prof. Birkett and Dr. H. D. Hamilton; Gynæcology, Prof. Wm. Gardner and Dr. Chipman, in the Royal Victoria Hospital, and Dr. Lockhart and Dr. J. D. Cameron in the Montreal General Hospital; Aseptic Midwifery (at the Montreal Maternity Hospital,) Prof. J. C. Cameron; Diseases of Children, Dr G. G. Campbell.

The above course of instruction is given wholly apart from the regular lectures, clinics, etc., for undergraduates in medicine. Graduates may enter on the course any-time.

The fees for full course, including hospitals, fees \$50. If any graduate so desires he may devote his entire time to any one or two subjects.

Practitioners who purpose attending this course may obtain fuller details on application, after March, to

PROF. R. F. RUTTAN, M. D., Registrar.



THE ALLISON PHYSICIANS' TABLE.

The style No. 34, our latest achievement, is the acme of perfection.

The Allison chair has no superior. It has been a leader for years.

Our line of Instrument, Medicine and Combination Cabinets cannot be equalled.



♦ ♦
CATALOGUE
FREE.

♦ ♦

W. D. Allison Co.,

NO, 133 E. SOUTH ST.,

INDIANAPOLIS, IND.

The Portraits of our Presidents with Biographical Sketches. By General Charles H. Grosvenor.

Title page designed by Tiffany.

This inaugural year, when the public mind is aroused over Presidential questions, is a fitting time to issue General Grosvenor's book. Its sale is already tremendous, and will perhaps exceed that of General Grant's Personal Memoirs.

Every patriotic American desires to read what General Grosvenor has to say of George Washington, Thomas Jefferson, Andrew Jackson, Abraham Lincoln, President McKinley and the other Chief Executives of the Nation. Everybody desires to read what General Grosvenor, the staunch old Republican leader in Congress, will say of that staunch old Democrat, Andrew Jackson, the Father of the Democratic Party. General Grosvenor has thrown into his sketch of Jackson, all the fire and energy of his nature. The biography of Thomas Jefferson is grand. The biography of Lincoln is as beautiful as a sunrise over the hilltops. General Grosvenor has personally known all the Presidents since the time of James Buchanan. The General's book will therefore contain history which has never before been published, written from his own personal observation of these great men. General Grosvenor has served in Congress for nearly twenty years, and he has served his country in war and in Congress for nearly forty years. The book contains twenty four large Photogravure Etchings as fine as Steel Plates, printed by hand, on heavy plate paper made especially to order. These 24 Photogravure Etchings are in different tints and are well worth \$2 each. These Portraits are made from the Paintings endorsed by the family and near relatives of the Presidents. Two years' time and a fortune have been expended in securing these reproductions. The complete book is well worth \$50, but the price has been placed so low that the most humble American citizen can own it. The biographical sketches are printed in large open type in two colors; the work is so beautiful that when people see it they want it. The advance sale is very large. President McKinley was the first subscriber. There is one edition known as the President Edition de Grand Luxe, initial letters hand painted, Portraits hand colored, title page hand illuminated, registered and numbered; subscription price, \$250. Orders and applications for territory are coming in rapidly. A high class man or woman of good social standing can soon make a small fortune taking orders in this community. Send references and apply for terms quick, as the territory will all be assigned soon.

Address THE CONTINENTAL PRESS,
CORCORAN BUILDING, — OPPOSITE UNITED STATES TREASURY,
WASHINGTON, D. C.

HALIFAX MEDICAL COLLEGE,

HALIFAX, NOVA SCOTIA.

Thirty-Second Session, 1900-1901.

THE MEDICAL FACULTY.

ALEX. P. REID, M. D., C. M.; L. R. C. S. Edin.; L. C. P. & S. Can. Emeritus Professor of Medicine
EDWARD FARRELL, M. D., President and Professor of Surgery and Clinical Surgery
JOHN F. BLACK, M. D., Emeritus Professor of Surgery and Clinical Surgery
GEORGE L. SINCLAIR, M. D., Professor of Medicine
DONALD A. CAMPBELL, M. D., C. M.; Professor of Medicine and Clinical Medicine
A. W. H. LINDSAY, M. D., C. M.; M. B. C. M., Edin.; Professor of Anatomy
F. W. GOODWIN, M. D., C. M.; L. R. C. P.; M. R. C. S., Eng.; Professor of Materia Medica
M. A. CURRY, M. D., Professor of Obstetrics and Gynaecology and of Clinical Medicine
MURDOCH CHISHOLM, M. D., C. M.; L. R. C. P., Lond.; Professor of Clinical Surgery and Surgery
NORMAN F. CUNNINGHAM, M. D., Professor of Medicine
C. DICKIE MURRAY, M. B., C. M., Edin.; Professor of Clinical Medicine and of Embryology
JOHN STEWART, M. B., C. M., Edin.; Emeritus Professor of Surgery
G. CARLETON JONES, M. D., C. M.; M. R. C. S., Eng.; Professor of Diseases of Children and Obstetrics
LOUIS M. SILVER, M. B., C. M., Edin.; Professor of Physiology
GEO. M. CAMPBELL, M. D., Professor of Histology
F. U. ANDERSON, L. R. C. S., L. R. C. P., Ed.; M. R. C. S., Eng.; Adjunct Professor of Anatomy
N. E. MCKAY, M. D., C. M.; M. R. C. S., Eng.; Professor of Surgery, Clinical and Operative Surgery
C. E. PUTTNER, PH. M., Lecturer on Practical Materia Medica
W. H. HATTIE, M. D., C. M.; Lecturer on Bacteriology and on Mental Diseases
A. I. MADER, M. D., C. M., Class Instructor in Practical Surgery
MONTAGUE A. E. SMITH, M. D., Class Instructor in Practical Medicine and Lecturer on Therapeutics
THOS. W. WALSH, M. D., Demonstrator of Anatomy
H. S. JACQUES, M. D., Univ. N. Y., Lecturer on Jurisprudence and Hygiene
E. A. KIRKPATRICK, M. D., C. M., McGill. Lecturer on Ophthalmology, etc
E. H. LOWE-RISON, M. D., Jeff. Med. Coll. Lecturer on Ophthalmology, etc
H. D. WEAVER, M. D., C. M., Trin. Med. Coll., Demonstrator of Histology
A. HALLIDAY, M. B.; C. M., Glas., Demonstrator of Pathology

EXTRA MURAL LECTURERS.

E. MACKAY, PH. D., etc., Professor of Chemistry and Botany at Dalhousie College
ANDREW HALLIDAY, M. B., C. M., Lecturer on Biology at Dalhousie College.

The Thirty-Second Session will open on Friday, August 31st, 1900, and continue for the eight month following.

The College building is admirably suited for the purpose of medical teaching, and is in close proximity to the Victoria General Hospital, the City Alms House and Dalhousie College.

The recent enlargement and improvements at the Victoria General Hospital, have increased the clinical facilities, which are now unsurpassed, every student has ample opportunities for practical work.

The course has been carefully graded, so that the student's time is not wasted.

The following will be the curriculum for M. D., C. M. degrees:

1ST YEAR.—Inorganic Chemistry, Anatomy, Practical Anatomy, Botany, Histology.

(Pass in Inorganic Chemistry, Botany, Histology and Junior Anatomy.)

2ND YEAR.—Organic Chemistry, Anatomy, Practical Anatomy, Materia Medica, Physiology, Embryology, Pathological Histology, Practical Chemistry, Dispensary, Practical Materia Medica

(Pass Primary M. D., C. M. examination).

3RD YEAR.—Surgery, Medicine, Obstetrics, Medical Jurisprudence, Clinical Surgery, Clinical Medicine, Pathology, Bacteriology, Hospital, Practical Obstetrics, Therapeutics.

(Pass in Medical Jurisprudence, Pathology, Therapeutics.)

4TH YEAR.—Surgery, Medicine, Gynaecology and Diseases of Children, Ophthalmology, Clinical Medicine, Clinical Surgery, Practical Obstetrics, Hospital, Vaccination.

(Pass Final M. D., C. M. Exam.)

Fees may now be paid as follows;

| | |
|----------------|----------|
| One payment of | \$260 00 |
| Two of | 140 00 |
| Three of | 100 00 |

Instead of by class fees. Students may, however, still pay by class fees.

For further information and annual announcement, apply to—

G. CARLETON JONES, M. D.,

Secretary Halifax Medical College.

1901.

Maritime Medical Association.

ELEVENTH ANNUAL MEETING.

The Annual Meeting will be held at Halifax, N. S., on Wednesday and Thursday, July 3rd and 4th.

Extract from Constitution :

"All registered Practitioners in the Maritime Provinces are eligible for membership in this Association."

All who intend to read papers at this meeting will kindly notify the secretary as early as possible.

W. S. MUIR, M. D.,
President,

TRURO, N. S.

GEO. M. CAMPBELL, M. D.,
Hon. Secretary,

HALIFAX, N. S.

You can
Buy
Medical
Books

from us at **PUBLISHERS' PRICES**
and in some cases for less,

When you want

LETTER PAPER, BILL HEADS
or Stationery of any kind, drop a post
card for samples and prices.

T. C. ALLEN & CO.,
HALIFAX, N. S.

THE LIGHT OF THE WORLD.

—OR—

OUR SAVIOUR IN ART.

cost nearly \$100,000 to publish. Contains nearly one hundred full-page engravings copied direct from the World's Greatest Paintings of our Saviour and His Mother. Contains History of Painting, Biography of Painter, and the Galleries in Europe where the Original Painting may be seen. The most beautiful publication ever issued. The strongest hearts weep at the sight of these wonderful pictures of Jesus and His Mother. Everybody says they are grand, sublime, matchless, magnificent, beautiful, inspiring and uplifting. The sale is unprecedented. The presses are running day and night to fill the orders. Twelve carloads of paper were required for the last edition. Small fortunes are being made by the thrifty with this marvelous work. Contains also a Child's story beautifully written to fit each picture. This wonderful book, matchless in its purity and beauty, appeals to every mother's heart and in every Christian home, where there are children, it sells itself. A Christian man or woman can soon clear one thousand dollars (\$1,000) taking orders in this community. Others are doing this. Why not you? We are advertising in nearly ten thousand newspapers in this country, Canada, England and Australia. Shipping books to every English-speaking country in the world. We shall promote our best workers to positions of State Managers, Correspondents and Office Assistants. We also own and publish large Photo-gravure Etchings of the great Paintings in the Galleries of Europe. One or more of these Etchings can be sold in every home, by carrying the book and the engravings your success will be tremendous. Mrs. Waite, of Worcester, Mass., has sold nearly four thousand dollars worth of books there. Mrs. Sackett has sold nearly two thousand dollars worth of books in New York. Both of these ladies answered our advertisement, and had never sold a book before. Took fourteen orders first two days—H. Colwell. Took five orders first day; twenty-three orders first week, clearing over \$50.00—Hattie Lemwell. Thousands of others like above. It is printed on velvet finished paper; bound in Cardinal Red, Green and Gold and adorned with Golden Roses and Lillies. Write quickly for terms as the territory is going rapidly. When you prove your success, we will promote you to the position of Manager and Correspondent under yearly contract.

We shall soon move into our new and elegant structure to be occupied solely by us, and to be known as the Light of the World Building.

Address **THE BRITISH AMERICAN CO.**

CORCORAN BUILDING, — OPPOSITE UNITED STATES TREASURY,

WASHINGTON, D. C.

PATENTS GUARANTEED!

Our fee returned if we fail. Any one sending sketch and description of any invention will promptly receive our opinion free concerning the patentability of same. "How to obtain a patent" sent upon request. Patents secured through us advertised for sale at our expense.

Patents taken out through us receive *special notice*, without charge in THE PATENT RECORD, an illustrated and widely circulated journal, consulted by Manufacturers and Investors.

Send for sample copy **FREE**. Address,

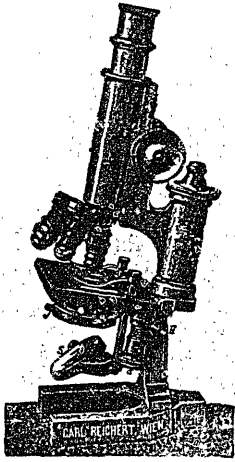
VICTOR J. EVANS & CO.,

[PATENT ATTORNEYS.]

EVANS BUILDING,

WASHINGTON, D. C.

SURGICAL INSTRUMENTS



—SOLE AGENTS FOR—
Reichert's
Microscopes, Etc.

One of the most complete stocks in the Dominion of up-to-date instruments manufactured mainly in England.

Quality is of first importance.

Prices as low as consistent with good workmanship.

Get our quotations.

Bacteriological apparatus, Micro,
Stains, Sterilizers, Batteries, and
all Surgeon's Requisites.

PATERSON & FOSTER,

21 PHILLIPS SQUARE,

MONTREAL.

A Step 

in advance of all others.



R Emnl. Ol. Morr. et Hypophos. c
Guaiacol, (Parks)

MANUFACTURED

BY

HATTIE & MYLIUS,

HALIFAX, N. S.

Price 50c. of all druggists

Park's
Perfect
Emulsion
Cod Liver
Oil

With the Hypo-
phosphites of Lime
and Soda with : :
Guaiacol.

A Flat Fact

When it is susceptible of definite proof always carries more weight than any amount of argumentative theorizing.

We make the positive assertion
(and stand ready to prove it) that

Pepto-Mangan ("Gude")

actually Builds Blood in cases of

Anæmia, Chlorosis, Rickets, Bright's Disease, Neurasthenia, Etc.

It increases the number of red corpuscles and the percentage of hæmoglobin. This has been and can be amply demonstrated by the use of scientific instruments of precision (hæmocytometer, hæmoglobinometer, etc.)

We can send you hosts of case reports, "blood counts," hæmoglobin-estimates, etc., as confirmatory evidence. If you want to prove it yourself, send for samples.

To assure proper filling of prescriptions,
order Pepto-Mangan "Gude" in original bottles (3 xi).

It's never sold in bulk.

M. J. BREITENBACH COMPANY,

LABORATORY,
LEIPZIG, GERMANY.

AGENTS
AMERICAN
CONTINENT

100 WARREN STREET,
Tarrant Building,
NEW YORK.

THE MARITIME MEDICAL NEWS.

A MONTHLY JOURNAL OF MEDICINE AND SURGERY.

EDITORS.

| | |
|---|---|
| D. A. CAMPBELL, M.D. Halifax, N.S. J. W. DANIEL, M.D., M.R.C.S. ... St. John, N.B. MURRAY MACLAREN, M.D., M.R.C.S., St. John, N.B. | JOHN STRWAALT, M. B. Halifax, N.S. W. H. HATIE, M. D. Halifax, N.S. R. MACBELL, M. D. Charlottetown, P. E. I. JAMES ROSS, M. D., Halifax, N. S. |
|---|---|

Communications on matters of general and local professional interest will be gladly received from our friends everywhere.

Manuscript for publication should be legibly written in ink on one side only of white paper.

All manuscript and business correspondence to be addressed to

DR. JAMES ROSS,
87 Hollis Street, Halifax.

CONTENTS FOR APRIL, 1901.

ORIGINAL COMMUNICATIONS.

Gastrostomy—*N. E. MacKay*..... 113
 A Visit to the Laurentian Sanatorium—
Geo. L. Sinclair..... 118

SELECTED ARTICLE.

When is Contract Practice Unethical?—*W.*
B. Davis..... 125

CORRESPONDENCE..... 133

EDITORIAL.

Public Charities..... 134
 Vaccination in Halifax..... 139
 Medical Advertising..... 141

Editorial Notes..... 142

PERSONALS..... 143

SOCIETY MEETINGS.

Nova Scotia Branch British Medical Association..... 144

Student's Soliloquy..... 146

BOOK REVIEWS..... 147

NOTES..... 148

The Subscription Rate for the Maritime Medical News is \$1.00 per annum.
 Advertising Rates may be had upon application to DR. JAMES ROSS, 87 Hollis St.

VACCINE (Calf)

TUBES GLYCERINATED,
AND POINTS. * * *

MULFORD'S. Fresh.

Celluloid Vaccination Shields, Clean, Effective, Cheap.
Latest American Idea.

SAMPLE BY MAIL 10 CENTS,

Simson Bros & Co.

WHOLESALE DRUGGISTS,

HALIFAX, N. S.

IN COLDS, COUGHS, CORYZA,
LA GRIPPE AND ALLIED COMPLAINTS.

ANTIKAMNIA & CODEINE TABLETS

LAXATIVE ANTIKAMNIA & QUININE TABLETS

SEND YOUR
PROFESSIONAL CARD
FOR
FREE SAMPLES.

THE ANTIKAMNIA CHEMICAL COMPANY, ST. LOUIS, U.S.A.

THE
MARITIME MEDICAL NEWS,

A MONTHLY JOURNAL OF MEDICINE AND SURGERY.

VOL. XIII.

HALIFAX, N. S., APRIL, 1901.

No. 4

Original Communications.

GASTROSTOMY.

By N. E. MACKAY, M.D., C.M., M.R.C.S., Eng., Professor of Surgery, Clinical Surgery and Operative Surgery in the Halifax Medical College, etc.

This operation was originally looked upon as such a formidable procedure that the general medical practitioner viewed it with such disfavour as to discourage its performance, and rested satisfied with keeping up life by nutrient enemata in cases of stricture of the œsophagus with irremediable dysphagia. Death by starvation in these cases is one of terrible experience to patients and their friends. This being the case the question then arises whether the views originally held about this operation are not erroneous and whether surgery does not now hold out better encouragement to this class of cases.

Why is gastrostomy in ill-repute? The reason is it is usually done as a last resort, when the patient's strength is so exhausted that even should he survive the shock of the operation, his healing powers are so weakened that wound complications are likely to supervene, and furthermore the assimilative powers are so impoverished that the patient will soon die of exhaustion. Then again when a direct opening is made into the stomach, in many cases the fistula enlarges and becomes patulous and it leaks, and the food and irritating gastric secretions excoriate the skin around the wound, so that prolongation

of life is attended with much discomfort. Do these conditions still apply? I think not. I am of opinion that if the operation is performed sufficiently early, and is done in accordance with improved methods, it will be found to be one of the most useful and beneficent operations the surgeon is called upon to perform. The case I am about to report demonstrates well the relief the operation affords. It is true my patient did not live long, and in view of the nature and extent of the disease and the intensity of her suffering I did not expect her to survive the operation long. However it gave her great relief and made death easier. The following case I had in my hospital practice in April 1900.

Mrs. J. N.—Widow, age 39, came to the the Victoria General Hospital on the 22nd March 1900. She gave the following history: Was never robust; had occasional attacks of indigestion; was never very ill till the present sickness began about two months ago. She first noticed that when she ate anything but the plainest kind of food it caused great pain. The pain, as a rule, came on immediately after eating and it lasted from twenty to thirty minutes. At first she did not vomit much but latterly she did. The pain is now constant and gnawing in character, and she has a sensation of weight behind the lower end of the sternum. Family history negative. On the fourth of April the patient was transferred from the medical to the surgical ward. When the woman came into my service she was a great sufferer; was nothing but a skeleton and she could not swallow even a drop of liquid. Any attempt at swallowing produced an intense fit of coughing which nearly strangled her. The bougie shewed that there was complete obstruction of the cardiac end of the œsophagus. She never vomited any blood nor passed any by the bowels. Her suffering was appalling. I suggested an operation and explained to her the nature of it and what I wished to accomplish, but she would not listen to it. She was sinking fast and her suffering became so desperate that she at last asked to have the operation performed—so to take her out of misery and make death easier I performed gastrostomy on the 9th of April. The method I used was that of Mayo Robson. Very little shock follows the operation when it is done by this or Frank's method.

The patient was prepared in the usual way. When she was taken into the operating room her pulse was so weak that it was scarcely perceptible. Ether was the anæsthetic used. It was administered

with great care and very little was given. An incision two inches long was made, an inch to the left of the linea alba, beginning an inch below the cartilage margin. This incision was carried down to the rectus whose fibres were separated by blunt dissection to the extent of the skin wound. The posterior part of the sheath of the rectus and the peritoneum were divided together and a cone shaped portion of the stomach wall was pulled up through the incision and seven or eight stitches were put in the base of this cone to fasten it to the peritoneal edge of the wound. Then a transverse incision, half an inch long, was made an inch above the first incision, and the skin between the two undermined by blunt dissection and connected subcutaneously, and with a pair of forceps the apex of the cone was drawn up through the second opening and transfixied with two hair pins. The lower skin wound was then closed by three or four catgut sutures. A few stitches were placed in the upper wound to better fasten the viscus there. Both wounds were then dried well and sealed with sterilized collodion after which a small opening was made with a tenotomy knife in the apex of the stomach cone between the pins, and a size 8 rubber catheter inserted therein and retained in position for six days. The patient was given at once four ounces of egg nog.

She stood the operation well, which took fifteen or twenty minutes in its performance. She was practically free from pain the first thirteen or fourteen days, and she took nourishment well, in small quantities, frequently repeated. Her face lost its distressed look and her skin got bright and clear. Her temperature during the same time kept between 97 and 98.4 F., and her pulse ranged between 74 and 112 and had good volume. The transfixion needles and feeding tube were removed on the sixth day, subsequently the tube was introduced only when the patient was being fed. The feeding of the patient was entrusted to the house surgeon solely, and he was given special directions to be careful not to tear the adhesions between the skin and viscus or force the stomach cone back into the wound when introducing the feeding tube, as such an accident would seriously embarrass the after treatment of the case. The house surgeon instead of attending to the feeding of the patient in person, delegated it, without my knowledge, to a nurse with the result that on the night of the 23rd the very accident that I was trying to guard against occurred. The day following she took a severe pain in the neighbour-

hood of the wound, which shot up towards the heart, and her temperature dropped to 96.4 and her pulse was very weak and frequent. On the morning of the 25th the temperature registered only 95 and she died at 6.30 a.m. No post mortem was held.

The stricture in this case was no doubt malignant. Treatment by tubes and bougies in such cases does more harm than good. They (bougies and tubes) irritate the growth and make it grow more rapidly.

I performed the operation simply to take the patient out of misery and make death easier. In this it was successful. To effect cure I did not expect. Death by starvation is an appalling one to both patient and friends. Feeding after the operation, before the accident, was quite easy and there was no regurgitation of food.

Gastrostomy is too long delayed. It should be performed as soon as the patient fails to swallow solid or semi-solid food. The average duration of life after gastrostomy for malignant stricture is thirty-five days and for non-malignant three hundred days. My case lived sixteen days, and despite her desperate condition at the time of operation I am confident she would have lived at least the average duration of life after operations for malignant strictures if my directions had been faithfully carried out. Some authorities put down the mortality of the operation in cancerous strictures at 84% and in non-malignant strictures 60%. But whether the stricture be malignant or non-malignant, its mortality, if the operation is performed in time, should not exceed 2 or 3%.

There are various ways for doing a gastrostomy. The methods usually employed now-a-days are Mayo Robson's, Frank's and Witzel's. I did the operation devised by Robson. It resembles Frank's in technique. Robson's differs from Frank's in the situation of the parietal incision and in the use of the transfixion hare-lip pins, but these may be employed in the latter as well. In the operation devised by Frank the first parietal incision is made an inch to the inner side of and parallel to the seventh, eighth and ninth left costal cartilages and the second incision is over the left costal cartilage an inch above the centre of the first incision and parallel to it. The cone of the stomach wall is pulled up through these incisions as in Robson's operation.

Witzel's operation on the other hand consists in establishing an oblique canal in the stomach wall. It is performed by making a small

opening in the stomach-wall and inserting a rubber tube in it over which the stomach is stitched and a canal is thus formed.

The margins of the upper portion of the canal are united to those of the abdominal wound, and the remaining portions of the parietal incision closed.

Its disadvantages are, 1st: It takes a much longer time to perform it, and hence the shock is proportionately greater. 2nd: The fixation to the abdominal wall is less secure than in the other methods. 3rd The inner and outer openings, after a time, approximate leaving a straight direct canal, with as much, if not greater, tendency to leakage as after any other method. So long as the canal remains long and oblique so long is leakage not likely to occur.

Gastrostomy as performed by Robson's and Frank's method is very simple and can be done in fifteen minutes and is practically free from shock. If the patient is very weak the anæsthetic may be dispensed with and cocaine substituted therefor. The operation is painless except in the skin incision. The fixation to the abdominal wall is more secure than in Witzel's, and the danger of subsequent regurgitation of food is not greater, if as great, as after the latter. For these reasons I prefer Frank's or Robson's method to that of Witzel.



A VISIT TO THE LAURENTIAN SANATORIUM.

By GEO. L. SINCLAIR, M. D., Halifax, N. S.

At the recent tuberculosis conference held at Ottawa, it was my good fortune to meet Dr. Richer, director of the Laurentian Sanatorium, and to have him extend to me a cordial invitation to visit the Sanatorium and remain long enough to see its methods and witness the daily life led by its inmates, and also possibly to note the results obtained.

Of course I accepted the kindly offer and in what follows I shall attempt to impart to you the knowledge thus gained.

Doctor Richer is a French Canadian who, after graduating in Montreal about ten years ago, went to Europe for further study. While on the continent he contracted tuberculosis and became himself an inmate of a German sanatorium. He recovered and since then has devoted his entire energies to putting into operation the ideas he acquired as a patient in and as well those accumulated by careful study of the methods of well known continental sanatoria.

One result of his work after returning to Canada, is the erection of the Laurentian Sanatorium, another, the recent conference called to stimulate interest in the subject of tuberculosis throughout Canada, and as time passes I have no doubt other evidences of his labour in the same field will become manifest.

The sanatorium with which he is connected is situated about a mile from the village of St. Agathe, and is reached by a branch line of the C. P. R., distance from Montreal about 64 miles in a N. W. direction.

The village itself is nestled among the Laurentian range of hills and has an elevation of 1600 feet above sea level. It is a typical French Canadian settlement, but of late years a number of well to do Montrealers have selected it as a summer resort, and as a consequence many very modern and attractive cottages are sprinkled among the houses of the habitant.

The climb to reach this elevation is nearly all made in the last thirty miles. As you can imagine the grades are steep, and, added to

the curves and wild scenery of a rugged country, cause many a thrill both ascending and descending.

A drive of about a mile from the station brings you to the sanatorium, which is nearly at the summit of one of the highest hills and is sheltered from north winds by the peak itself. There are sixty acres of land connected with the institution, including some woods.

The building is a plain frame one nearly square, three stories high, lighted by electricity, heated by moist furnace air and the inside sheathed with wood. On two floors there are verandas upon three sides of the building and a portion of each is capable of being closed in by glass to form shelter in bad weather.

On the first floor there is a sitting room, dining room, office, dispensary and the physician's room, and, in an ell, the kitchen.

On the second floor are bedrooms, the larger number for one person, a bath room and water closet. The second floor of the ell accommodates the domestics, and the third story contains bedrooms and another bath room and water closet. There are transoms over all the doors which can be closed by glass sashes, but which ordinarily are open for ventilation and to allow heat to enter from the halls.

The full capacity of the house is for twenty patients. At the time of my visit there were I think seventeen. The institution has been in use a little over a year and I understood had treated about seventy patients. It is a private sanatorium and the prices charged are from \$10 to \$15 per week.

The resident staff consists of a physician, himself a "lunger," a trained nurse who is also matron, a cook and three domestics. Dr. Richer is the medical director and visits the institution at least once a week. There is a large advisory board composed of some of the most eminent medical men in Montreal, a consulting physician, Dr. Lafleur, and a therapist, Dr. Wilson. Both of these gentlemen live in Montreal also.

The water supply of the house is from a spring of remarkable purity and unfailing quantity which is piped into the house and by a pump forced to the upper floor. Drainage is easily managed and sewerage is conducted into a large vault some distance from the house which is regularly emptied and cleaned.

The furnishing of the rooms is plain and simple, consisting of an iron bedstead, two or three chairs, screens, a wash hand stand and bureau for each room and some rugs to cover part of the floor. The

windows nearly all have double sashes, both movable. Each room is fumigated with formaline gas, generated by a Parke, Davis & Co. apparatus, after a patient leaves and oftener if thought necessary.

Eating is one of the principal duties of the inmates. There are three regular meals at 8 o'clock, a.m., 12.30 p.m. and 6 p.m., and there are light lunches at 10.30 a.m., 3.30 p.m. and 8 p.m. The patients retire shortly after 9 p.m. The food is largely nitrogenous and the patients are urged to eat more than they actually want.

Cases of advanced disease are not received and all applicants for admission have to be examined by Dr. Richer. In some instances, where the question of the stage of the disease admits of doubt, the patient may be sent to reside in the village of St. Agathe at one of the many boarding houses under the observation of the doctor, till time shows whether improvement occurs, when he can be sent to the sanatorium.

Upon admission a new patient is subjected to a very thorough physical examination of which a record is made. The weight, temperature and pulse rate is taken and as well the frequency of respiration. Where there is a temperature of over 100 in p.m., undue frequency of breathing, excessive cough and a general febrile state, the patient is sent to bed there to remain till all these lessen or disappear and a more natural condition sets in. Each patient is provided with a cuspidore of the S & J pattern and all of his expectoration goes into this, the paper pulp receptacle being daily burned. While in bed the patient is encouraged to eat largely. To relieve the febrile condition he may be sponged, and for the cough some simple lozenge be given. Medicine as a rule is not administered, and the main dependence is placed upon life in the open air, plenty of nourishing food, well ventilated bedrooms and as cheerful surroundings as possible. About once a week every one is weighed and in the early days of treatment a patient is weighed and his temperature taken to see if any harm has followed exercise or any departure from the ordinary routine of the life, for increase of weight accompanied by a normal temperature are two most important indications of improvement.

The life led is simple and one might say monotonous. The patient whose condition permits him to be up, rises in time to wash and dress leisurely for breakfast at 8 o'clock. This meal consists of porridge and milk, eggs or fish or meat with bread or toast, tea or chocolate or

coffee or milk. As soon after as possible the patient gathers his wraps and furs and hot soap stone and adjourns to the veranda, selecting the most sheltered side and seats himself in an easy chair. He may or may not be permitted to talk or read or both. He is told to resist the inclination to cough and if he reads, the book must not be one appealing to the emotions; if he talks it must not be about his disease. He is not allowed to smoke anywhere as a rule, and never on the verandas. At 10.30 he has some milk or cocoa and he remains out till nearly 12.30 p.m., when he goes in and gets ready for dinner which is served at that hour. This is a substantial meal consisting of soup, fish, meat, pudding, dessert, milk and of course vegetables. No stint is put upon his eating, in fact he is urged to overeat. If the patient has to cough he leaves the table, returning after the paroxysm is over. It is endeavoured to make the conversation as bright and cheery as possible and no one refers to his or her case.

About 2 p.m. after wrapping up, the patient again resumes his place on the veranda to remain till 4 o'clock when he again has a light meal and continues in the open air till nearly 6 p.m. when he comes in for tea. This meal is nearly a repetition of breakfast. At 8 o'clock another light meal is taken consisting usually of some milk and bread or toast and cocoa and by nine o'clock the majority of the patients retire. The time between the ending of tea and the last collation is passed in the drawing room with music or games or light conversation or reading.

In the weather does not permit the use of the open veranda, the enclosed portion is occupied. The patient is gradually accustomed to sleeping with his window open in winter until he can rest comfortably with it wide open in a temperature any where from forty degrees down. The heat is usually turned off the house at night and remains off till an hour before the time for rising. Until a normal condition of temperature, an increase of weight, a loss of cough and improvement of appetite occur, no exercise is permitted. The patient does nothing except lie off in the veranda or eat. When I was at the institution only one of the inmates was permitted to do any walking and some were not allowed even to talk or read while on the verandas. They could commune with their own hearts and be still, except when they were eating. From the first, if the patient follows directions and really desires to get better he will gain a mastery over his cough. There seems much habit in this act and indulgence in it irritates the

air passages. The spittoon goes with the patient and on no account is he to expectorate in his handkerchief or upon the ground. As a preliminary to walking exercise patients can go driving, but the temperature is taken upon the return and any rise stops even this privilege. The patient takes his own temperature in the morning, afternoon and evening and he is officially weighed every week. The stay of the patients varies and depends upon the evidence of benefit. Three or four months is about the average. If a patient continues to decline in health he may be sent home or recommended to get board in the village, still remaining under the medical care of the sanatorium. Positive improvement is usually necessary to prolonged residence.

When the patient has gained weight, lost his cough, breathes naturally as far as rhythm is concerned and has a normal temperature, he is allowed to take exercise as a means of "hardening" him, by which I judge is meant that it is desirable to convert some of the accumulated fat into a more highly organized and useful tissue. I heard of one patient who in less than four months increased in weight sixty-five pounds. The process of sitting out in the open air is known as "taking the cure."

Struck by the large amount of nitrogenous material consumed by persons doing absolutely nothing I asked if no unpleasant symptoms ever occurred, and was told that occasionally attacks of slight albuminuria came on, but that yielded to a change of diet. The object of feeding so high was to increase metabolism generally.

Stimulants find no place as a routine treatment.

The discipline of the house is good. The patients have the regulations explained to them and are told that intentional infringement will render them liable to dismissal.

There is a general air of cheerfulness among the people, who are disposed here as elsewhere to exhibit that hopefulness with which we are familiar as an accompaniment of phthisis.

The resident physician is himself a "lunger," and has already had a year in Dr. Trudeau's sanatorium at Saranac. Part of this time he was a medical interne. He is therefore quite familiar with the line of treatment in use. Two others of the employees are "graduates" of the institution, i. e., have recovered from tuberculosis and are making their restoration more sure by continuing to reside under sanatorium regulations.

In the case of the medical interne there is no salary, his own treat-

ment being considered an equivalent for his professional services. Dr. Richer told me this was quite a common method and that if we started a sanatorium we would be able to get a man under the same terms.

This institution at St. Agathe is self-supporting. All the food stuffs except milk and vegetables are bought in the Montreal market.

At the particular sanatorium I am trying to describe the patients seemed to get along very nicely together and to live as members of a family. Three, were I think confined to bed on account of their high temperatures and other unfavourable symptoms. I know they had bad coughs because my efforts to sleep were not very successful owing to the noise made by them. Dr. Richer claims a large proportion of cures. Those getting well are spoken of as "graduates."

He, like all the other people with whom I spoke, is a strong believer in the necessity of individuals being treated at sanatoria the atmospheric conditions of which are similar to those in which the patient has subsequently to live. As to high altitude he thought that the advantage gained was that you had a rarer atmosphere and one therefore better able to penetrate deeper into the lung tissue.

I do not think hydrotherapy is relied upon to any great extent and I know that respiratory gymnastics is not approved of. If cure takes place by encapsulating the bacilli it would seem that forced breathing would not conduce to this result.

The visit was an interesting one and the simplicity of the methods was very much in evidence.

Following are the rules for the guidance of the patients.

DIRECTIONS TO PATIENTS.

Patients should gradually accustom themselves to leading an out-of-door life, that is, remaining eight or ten hours in the open air each day. The sheltering sides of the piazzas to be used in stormy or windy weather.

Violent exercise is injurious. Patients will be informed by the physician how much exercise their case requires.

Patients are required to use the sputum cups or pocket cuspidores provided both in the house and on the grounds.

Any patient infringing this rule by spitting on the grounds or on the floors, fire places, wash basins, etc., will be liable to dismissal.

Patients are on no account to expectorate in their pocket handkerchiefs.

The expectorations are on no account to be swallowed, as by so doing other organs of the body may become infected.

Patients are urged to avoid coughing except when absolutely necessary or unavoidable. *This is important* Coughing is harmful by keeping up the irritation. The improvement will depend upon the control the patient will have upon their cough. If at table they must retire to cough.

The regular meals will be served as follows:

Breakfast, 8 a. m. Dinner, 12.30 p. m. Supper, 6 p. m.

Patients are advised to take a light lunch at 10.30 a. m., 3.30 p. m. and 8 p. m.

All lights must be extinguished at 10 p. m. at which hour the patients will have retired.

Calling upon or visiting those who are sick in bed is prohibited, except with permission from the physician or nurse.

Conversation between patients as to their disease, their symptoms or any other subject relating to their illness is forbidden during meals.

Patients are requested not to smoke at all unless permission is given by the physician. Smoking in the house, sun parlors or on the verandas is strictly forbidden.

NOISES at all times must be avoided. Between the hours of 9 at night and 9 in the morning this is absolutely necessary. During the day, in order to secure comfort to those who are kept in bed through illness, the slamming of doors, walking heavily, or speaking loudly are also to be religiously avoided.



WYETH'S

Elixir Uterine Sedative Specific.

Viburnum Opulus (Cramp Bark), Piscidia Erythrina (Jamaica Dogwood)
Hydrastis Canadensis (Golden Seal), Pulsatilla (Anemone Pulsatilla.)

The above combination cannot but at once appeal to the intelligent practitioner as almost a specific in the treatment of the various kinds of pain incident to the diseases of the female sexual organs so varied in their character and such a drain upon the general health and strength.

In the new preparation of Viburnum now submitted to the profession, the unquestionable utility of this agent is greatly enhanced by the addition of remedies possessed of analogous powers. Not only is the value of Viburnum thus promoted in the special field of its therapeutical activities, but a more extended range of powers is thereby secured. In other words, our new preparation possesses all the virtues of Viburnum, and in addition, all of the therapeutic properties of Hydrastis, Pulsatilla, and Piscidia.

Each fluid ounce of this Elixir contains forty grains Viburnum Opulus (Cramp Bark), thirty grains Hydrastis Canadensis (Golden Seal), twenty grains Piscidia Erythrina (Jamaica Dogwood), ten grains Anemone Pulsatilla (Pulsatilla).

DIRECTIONS.—The Elixir being free from irritant qualities may be given before or after meals. It has, indeed, the properties of a stomachic tonic, and will promote, rather than impair, appetite and digestion. The dose for ordinary purposes is a dessertspoonful three times a day. When the symptoms are acute, or pain is present, it may be taken every three or four hours. In cases of dysmenorrhœa, neuralgic or congestive, the administration should begin a few days before the onset of the expected period. In irritable states of the uterus, in threatened abortion, in menorrhagia, etc., it should be given frequently conjoined with rest and other suitable measures. For the various reflex nervous affections, due to uterine irritation, in which it is indicated, it should be persistently administered three times a day. When the pains are severe or symptoms acute the above dose, a dessertspoonful, may be increased to a tablespoonful at the discretion of the patient, or advice of the attending physicians.

Samples for experimental purposes sent free
to any practicing Physician on application.

DAVIS & LAWRENCE Co., Limited,
MONTREAL.

SOLE AGENTS FOR CANADA

SYR. HYPOPHOS. CO., FELLOWS,

IT CONTAINS

The Essential Elements of the Animal Organization—Potash and Lime;

The Oxidizing Elements—Iron and Manganese;

The Tonics—Quinine and Strychnine;

And the Vilitizing Constituent—Phosphorus; the whole combined in the form of a Syrup, with a Slight Alkaline Reaction.

It Differs in its Effects from all Analogous Preparations; and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

It has Gained a Wide Reputation; particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulative, tonic and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt; it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation with the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; hence the preparation is of great value in the treatment of mental and nervous affections. From the fact, also, that it exerts a double tonic influence, and induces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE—CAUTION.

The success of Fellows' Syrup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of several of these, FINDS THAT NO TWO OF THEM ARE IDENTICAL, and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen, when exposed to light or heat, IN THE PROPERTY OF RETAINING THE STRYCHNINE IN SOLUTION, and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing to write "Syr. Hypophos. FELLOWS."

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) bear can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

FOR SALE BY ALL DRUGGISTS.

DAVIS & LAWRENCE CO. (Limited,) Montreal.
WHOLESALE AGENTS.

Selected Article.

WHEN IS CONTRACT PRACTICE UNETHICAL?*

By WILL B. DAVIS, M. D., Pueblo, Colo.

Several times during the preceding year the question of contract practice came up in this society. I was opposed to raising the question in any form, as I expressed myself at the time, giving as my reasons that any discussion of this threadbare subject could, or would, not result in any good. That nothing which had not already been said by other societies could be added by ours—that any discussion would end where it began, and that the result would not be a declaration that contract work was ethical, but that whatever breach of ethics was attached to, or implied by, its pursuit, would be ignored.

This, I believe, is about the disposition—whatever disposition has been made—of the subject by leading medical societies elsewhere.

In my contention against airing this question in this society, I did not suppose that any of its members would develop the hardihood to not only try to maintain that contract work was not a violation of medical ethics; but that if it was, every member of the society was guilty of contract work in one way or another; and that any member who did not have contract work would be glad to accept it—would take it if he could get it—or at least words to that effect.

If such is the case, Mr. President and gentlemen of the Pueblo County Medical Society, I wish to withdraw my objections to a discussion of the subject, and to substitute, instead, the remark, that I think it is high time we are taking an account of ourselves; or in other words, to use a slang expression, "seeing where we are at."

To treat of the subject in its comprehensive sense, or to undertake a review of its history, would be a laborious task, not only to the writer in preparing it, but also to you, in listening to a lot of posthumous schismaticisms. I will therefore leave out all study of ethics except in its practical application, all abstruse considerations under the head of contracts, any and all action taken by any other medical society under the sun, and present the subject in its essence, and apply

* Read before the Pueblo County Medical Society, September 5th, 1900.

it to ourselves as we have existed as a society, and as we stand today.

First, then, what are ethics—practical ethics? I may say that practical ethics, and laws, in a general sense, mean about the same. For instance, in one of the selected definitions of law, given by the the Century Dictionary, I find the following copied from Sedgewick's Method of Ethics: "We must define laws to be rules of conduct which we are morally bound to obey, or, more briefly, commands imposed by rightful authority." The same dictionary gives this definition of ethics: "A particular system of principles, and rules, concerning moral obligations and regard for the rights of others; rules of practice in respect to a single class of human actions and duties; as social ethics; medical ethics." From same authority: "The science of right conduct and character; the science which treats of the nature and grounds of moral obligations, and the rules which ought to determine conduct in accordance with this obligation; the doctrine of man's duty in respect to himself and the rights of others." Dungleson's Medical Dictionary defines medical ethics to be "the duties and rights of medical practitioners." All definitions of ethics hinge on "rights" and "duties." Webster gives under the head of law, in human government: "Any edict, decree, order, ordinance, statute, resolution, judicial decision, usage, etc., made or recognized, and enforced by the controlling authority."

In all courts of law, in the absence of statutory provisions governing any particular question, common law rules are invoked. Indeed, it is the purpose of statutory provisions to interpret and apply common law principles to conditions in the particular community for whose benefit the controlling authority legislates.

The Code of Ethics of the American Medical Association is a part of its laws—its interpretation of the proper application of general ethics to the needs and wants of the medical profession. This celebrated code of ethics is a part of the organic law of every medical society organized under and in affiliation with the American Medical Association. It is the general governing law for regular practitioners everywhere in this country.

But all regularly organized medical societies possess legislative authority to enact laws, rules and regulations adapted to their own particular needs, not to conflict, however, with any of the laws, rules and regulations of the American Medical Association. Such laws, rules and regulations as local societies do enact for their own government,

CREOLIN-PEARSON

[SAPONIFIED COAL-TAR OIL]

Disinfectant, Antiseptic, and Germicide

Manufactured by WM. PEARSON, Hamburg.

DESCRIPTION AND GENERAL PROPERTIES

Creolin-Pearson is prepared from coal-tar oil after the complete removal of carbolic acid, by the addition of resin and caustic soda. It is a dark brown, syrupy, tarlike fluid with a smoky odor similar to that of tar, and has an aromatic, subsequently burning taste. Dropped into water, it at first forms whitish clouds, which soon coalesce into a milky, uniform emulsion, slightly alkaline in reaction.

POWERFUL ANTISEPTIC

Creolin-Pearson is an antiseptic and disinfectant of the first rank. According to the bacteriological investigations of von Esmarch, it acts decidedly more powerfully than carbolic acid on pus-micrococci, on typhus-bacilli, and on cholera bacilli. A 1 : 1000 solution kills the cholera bacilli in 10 minutes ; a 5 : 1000 solution in 1 minute ; whereas it takes a 1 : 1000 solution of carbolic acid 4 days to do the same. The typhus bacilli are distinctly checked in their formation by a 1 : 1000 solution of Creolin-Pearson, and are powerfully affected in 24 hours ; a 1 : 1000 solution of carbolic acid exerts no restricting influence on their formation even after 22 days. Pus-bacilli are distinctly hindered in their growth in 1 hour, and are killed in 4 days ; carbolic acid fails completely to produce any effect in 4 days.

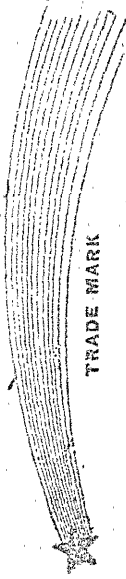
CONVENIENCE AND SAFETY

Creolin-Pearson is easy to carry : 1 to 1 $\frac{5}{8}$ fl. oz. suffice to prepare from 7 to 11 pints of good disinfecting fluid. It readily mixes with water and distributes itself uniformly. It does not stain the clothes, nor injure the hands or instruments. Creolin-Pearson presents an obvious and decided advantage over carbolic acid in its comparative non-toxicity.

FAC-SIMILE OF LABEL

The only authorized package for Canada bears the name of

LYMAN, SONS & CO., MONTREAL,
Sole Agents for the Dominion.



TRADE MARK

ONE POUND
OF

CREOLIN-PEARSON

SUFFICIENT TO MAKE
16 GALLONS
DISINFECTANT.

DIRECTIONS

For Disinfection where contagious or Infectious Diseases are prevailing (such as on shipboard, in barracks, in hospitals, etc.)
Use as follows:—
Measles, Typhoid, Cholera, Small-Pox, Scarlet Fever, and Diphtheria, closets, slinks, and chamber pots should, after every using, be treated to liberal supplies of Creolin-Pearson, 4 tablespoonsful to one gallon water. Before a sick-room is again occupied it should be thoroughly cleansed with the same solution.

Teaspoon.

- As a Gargle in Sore Throat, Colds, etc. ¼ to ½
- To Heal Wounds and Sores and to stop Bleeding 1
- To wash the face and neck with lint and cold silk 1
- To keep Air Pure in Houses, School-Rooms, Hospitals, etc. 1
- Sprinkle freely 1
- In Skin Diseases, as Barber's Itch with Kingworm, Bathe 1
- Parts with 1
- For Preserving the Teeth and Purifying the Breath, same amount with 3 to 6 drops in tumbler of water.
- In Mosquito and other Bites rub pure Creolin-Pearson Well into the wound.

(SAPONIFIED COAL-TAR OIL)

NON POISONOUS NON CAUSTIC

Acknowledged by the Scientific World to be

THE IDEAL DISINFECTANT,

DEODORANT AND ANTISEPTIC,

A POWERFUL ANTIPARASITIC.

CREOLIN-PEARSON is more than ten times stronger than Carbolic Acid or any other household disinfectants.

My trade mark consists of the word "CREOLIN," and any infringement will be severely prosecuted.

WILLIAM PEARSON.

Sole Agents for Dominion of Canada: LYMAN, SONS & CO., Montreal.

DIRECTIONS

- To Destroy Insects and all Parasites, to keep off Flies wash the animals (especially head and neck) with Parts 1 in 50
- As a Radical Cure for Mange (in Dogs, Sheep, etc.) A few Drops suffice: The hair will grow again. Parts 1 in 20
- For Horses, as a Preventive and Cure for Mange the coat of animal should be well saturated with solution of Parts 1 in 50
- Scrub the Stables daily with a similar solution. Will keep animals in perfect safety from infection.
- For Broken Knees, Guttors, Greases, Cracked Heels, etc., rub well with Parts 1 in 30
- For Worms in Horses five internally, on empty stomach, a quart solution of Parts 1 in 20
- Throat-worms in Lambs, Diphtheria in Poultry, all Internal Parasites eradicated by GIVING solution of Parts 1 in 30

If the above Directions are not perfectly clear, please request the Druggist to explain the same.

W. PEARSON'S TRADE MARK IS A SOLUTION, SHAKE WELL.

then, are laws unto the members of such society, and constitute in an especial sense a part of their code of ethics. The very fact that a local society specifically adopts certain laws, rules and regulations, is prima facie evidence of their recognition of the need of such for the government and conduct of its members. It is in fact and substance a practical admission on their part that general ethics, or the code of ethics of the American Medical Association are not specifically sufficient for the proper regulation of certain matters in their individual community, and they therefore adopt and subscribe to certain measures especially, that no room for doubt or mistakes may be made as to what they construe to be the ethical duties and rights of its members touching such matters.

I hold that such laws, rules and regulations as such local society so adopts and subscribes to, do constitute and are an important part of the ethics of the members of such society. It is in fact the legislating an especial code for themselves, with reference to particular things in their own community, and specifically prescribing how its members shall deal with them.

Second, what is contract practice? This would be as tedious to discuss, in its unabridged sense, as the subject of ethics might prove. It can justly be claimed that all work was by implied, if not expressed, contract. Admitted. But what is the nature of such when applied to the practice of medicine and surgery? Simply this: the patient, by his act in employing the physician, legally binds himself to pay such physician reasonable compensation for his services. What is reasonable compensation? The rulings of most courts on this point have been in substance this: to determine what reasonable compensation would be, the nature of the services must be considered in connection with the prevailing custom of charges for such particular services, in the community where such services were rendered.

But contract practice, as we understand it, and as applied to medicine and surgery, has nothing to do with statutory or common law practices governing the question of fees for professional services. Indeed, the very nature of the compact sets aside this feature. The doctor, on his part, agrees to serve so many heads of people in a professional capacity, for such or such consideration. His legal recourse extends only to the enforcement of his contract. The "heads of people" in such contract usually refers to employees of corporations, or members of secret and so-called mutual benefit societies.

This, in the abstract, is not a violation of anybody's rights or duties according to this society's ethics, provided such member of this society entering into such, contracts for reasonable compensation for his services, determinable by considering the nature of the service in connection with the established fees of this society, prescribed and adopted by this society, and subscribed to by every member of this society for the government and guidance of its members, touching the question of compensation for professional services.

But does contract practice, in the sense we use the term, and as followed by some of the members of the Pueblo County Medical Society, imply, or even contemplate anything of the kind? Has not every member of this society who has accepted, and done, contract work, by his acceptance, waived even all common law recourse as to obtaining reasonable compensation as we understand it? And more: has he not, by his daily and nightly professional pursuits, trampled under foot the very schedule of charges which he himself helped frame, formulate and prescribe?

The Century Dictionary defines the word contract thus: "To make a bargain; to enter into an agreement; to covenant; as a contract for a load of flour; a contract to carry the mail." Contract also means to draw up; to make smaller; to reduce in size, etc.

In focalizing this analysis upon the Pueblo County Medical Society I find among other things which it has officially prescribed and enacted for the guidance and government of its members, a fee bill. It is at least a part of what this society, in its legislative capacity, has declared to be the duties and rights of its members, and its observance is necessarily therefore a part of what it officially announces shall be the ethics of its members. You and I, Mr. President, or another, may differ on some points as to ethics in general, but I hold that there can be no difference between any of us as to the entire correctness of this statement.

I therefore maintain that any member or members of this society who have violated the provisions of the fee bill adopted by the society, whether under the guise of contract work or not, have been guilty of unethical conduct.

Members may resort to hair-splitting subterfuges to their own full pleasure, pose as models of ethical conduct, label themselves as the very pinks of professional perfection, or offer themselves as living asints of ethical consistency, if you please; yet, Mr. President, if they

have been doing contract practice in Pueblo, they are guilty of a gross violation of ethics.

More than this: they have plainly laid themselves liable to suspicions of duplicity, or to put it in the mildest manner possible to both professional inconsistency and ethical insincerity, in that they took part in the enactment of, and subscribed to, laws for the government of the members of this society, well knowing at the time they were doing it, that they did not expect or intend to observe them.

If any want to deny this, then I ask, in the name of conscience, what does this fee bill mean? And what did they mean when they took part in its adoption at the very time they were under agreement, and are still obligated, to corporations or secret societies in tenor that committed them, and to which they have remained committed, to violate it in its every part?

And they violate it grossly, for I am reliably informed that the average compensation received for such work in Pueblo would amount to very little, if any; more than one-fourth of what they themselves helped to enact as a minimum schedule of charges as a part of the rights and duties of the members of this society, under these words: "We, the members of the Pueblo County Medical Society, believing it for the best interests of the public, and ourselves, that uniform minimum fees for professional services should be established, have adopted the following schedule of prices, and in all ordinary cases will be governed by them. For cases requiring unusual skill or the expenditure of time, the fees shall be in proportion thereto."

Mr. President, I hold that there is no provision, by any act of this society, which exempts contract practice from the operations of this fee bill. I also hold that there does not exist, among any of its official laws, by-laws, rules and regulations, the most remote allusion to contract work in any manner whatsoever, to say nothing of acts of exemption.

Is there anything in contract practice that entitles it to self-exemption from the operation of the provisions of this fee bill in the case of any of the members of this society? If there is, why has it not been so declared?

Again, is any one, or a set of members, to be privileged above others as to their ethical—or unethical—conduct in this society? If so, why not define the particular duties and rights separately, and by name,

that we may know who are, and who are not subject to the operation of this or that of our own regulations?

The question of corporation wants and necessities are matters for their own consideration and treatment, and it is not sufficient for any one to claim, in this society, any such excuses for violating our own rules. Corporations are generally able to take care of themselves which they usually do, whether at the expense of all principles of ethics, or the setting at naught all municipal, state and national laws.

But if this society is going to continue to permit its rules to be so ruthlessly violated, why not put itself on record in manner to correspond? Why not concede, by legislative enactment, the over-towering interests and influences of corporations as compared to medical ethics and the rights of the individual citizen? Will you do it? Can you do it and maintain anything like ethical equity? Can you take such action and not violate the very spirit of the code of ethics of the American Medical Association which some of our contract brethren would have us believe they dote so much upon?

Mr. President, I protest that after, as a profession, we have so long suffered the blighting effect of contract practice in our midst; after we have been so unrelentlessly and continuously shorn by the contract doctor, it is beyond human patience and forbearance to further sit in lamb-like meekness, and hear them claim upon the floor of this society, that they are not guilty of a violation of ethics, or, if they are, that all are equally guilty with themselves. If this is not akin to adding insult to injury, then the saying is a misnomer. It is calculated to engender a strong sentiment on the part of those suffering the injury, for sweeping and thorough reforms. It begets a feeling of appeal, in the name of justice and equity.

And when members will do, and wink at such practices, and also resort to clandestine advertising by such means as half-column article reports of an operation upon some insane subject (and suppress the sequel),* or under the guise of a personal correspondence from abroad, members of this society are glaringly advertised as to some special lines of work**—which not only contemplates an abuse of ethics, but the duping of the friendly disposed newspaper man to the extent of beating him out of just compensation for such advertisements that

* An account of a case at insane asylum, published in the Daily Chieftain.

** Correspondence of a member of this society from Europe, stating his special mission there was to study up on hernia, published in the Daily Chieftain.

are cunningly parenthesized, as it were, among some matters of general interest to the public—and at the same time are found raising their hands (and voices) in holy horror at the thought of permitting members of this society to publish (and pay for) simple directory cards in the local papers, a thing which the judicial council of the American Medical Association has repeatedly declared was not a violation of the code of ethics of the Association. I can but exclaim that anything suggestive of a professional millenium for the membership of this society strikes me as being too far distant in the dim future for this deponent to venture even a speculative guess upon its coming.

More than this, as to the fee bill—it has been so thoroughly emasculated, as it were, by the contract members of this society, as to render it practically inert as a guide or evidence in court, if needed, and as was one of the purposes of its adoption. Suppose, for instance, in a given suit to recover compensation for professional services, this fee bill was introduced in court. Then suppose the attorney for the defence made the point that the bulk of surgical work, and the only legally confirmed practice of any nature by actual agreement was to be found among the contract practices of the city. Can you not see what effect it would have? Its uses in this respect has not only been destroyed for the contract doctor, but for those who do not contract work.

Now, in such a contingency, suppose the attorney for the defence would have summoned some of the contract members of this society, and questioned them somewhat after this manner:—"You say, doctor, that the Pueblo County Medical Society is the representative body of medical practitioners in this community, and that you are a member of said society, but at the same time you admit that you are under contract with the X.Y. Z. company to do the practice of its employees at the rate of 50 cents a visit, and 25 cents for office prescriptions; then why is it, in the case of the defendant, because he happens to be so unfortunate to incur the expense of medical attendance, your organization, and its so-called schedule of charges, would require such member of your society as he might employ to charge him four times as much as you are actually under contract to render the same character of services to the employees of the X.Y. Z. company for?" How would our highly ethical (?) contract brother answer such a question, may I ask? Or, and in other words, why should one John Smith, because he works for the X. Y. Z. company, be charged only one-fourth

of what you require from John Doe, an employee of A. B. & Co., or, for that matter, who has no employment at all? Or, why should you charge, for the same character of services, Slim Slack, whose wages amount to only \$45 per month the sum of \$2 per visit, when, at the same time, you are under contract to do the practice of Rotund Corpus, whose salary is \$150 per month, at the rate of 50 cents a visit? How do you suppose that would sit upon the mental stomachs of the average juror? What could you do, if a juryman yourself, with such evidence to guide you as to what reasonable compensation for professional services were? Would you take the ipse dixit of the Pueblo County Medical Society, or would you take an entity—a contract—a tangible something to guide you, instead of this jack-o'-lantern intangibility, designated a fee bill, whose ethical purposes have been ignored by you ever since its promulgation by the Pueblo County Medical Society, of which you claim to be a member?

Why, sirs, such attempted duplicity as would be implied by the introduction of this fee bill into a court of justice, after such complete and thorough nullification at the hands of its framers and pseudo-guardians, would appear so much like unto an effort of trickery and deception as to cause the spirits of the most unscrupulous mediæval diplomats to hold high carnival for joy, to riot in bacchanalian ecstasy, and to point in weird felicity at a picture so remindful of their own lives of fraud, dissimulation and hypocrisy.

Think of it. A body of men, purporting to be worthy members of an honored profession, standing as it were, self-convicted in a court of justice of such questionable work! It will be claimed, perhaps, that this is drawing the picture too strong. I do not think so.

If the fluoroscopic rays are needed in the detection of foreign bodies in the flesh or of tumors and injuries of the bony structures of the physical man, why not X-ray the moral occasionally, that, if any unhealthy invasion of our body politic has been made, or if the skeleton of our laws and ethics has sustained any deep seated fractures or dislocations, they may be detected and mended.

To conclude, Mr. President, whether contract work is unethical in a general sense or not, I maintain that it is a violation of ethics in a special sense, for any member of the Pueblo County Medical Society to engage in it under our present laws, rules and regulations.—*Colorado Medical Journal*.

WYETH'S Granular Effervescing

Each Dessertspoonful contains 30 grains of the salt.

SODIUM PHOSPHATE

A Remedy for Constipation, Obesity, Rickets, Jaundice, Etc., Etc.

Sodium Phosphate is Unexcelled:

1. As an Hepatic Stimulant with beneficial effect on the appetite.

2. As a Treatment for Diabetes.

3. As a "Nervetone" in cases characterized by Debility, Spermatorrhœa, etc.

4. As a Purgative in cases of Exanthematous Fevers.

5. As a cure for Bilioussness, Constipation, Jaundice, Diarrhœa, Dysentery, etc., especially in children.

Sodium Phosphate has long been the favorite purgative, inasmuch as it acts gently but surely, has little or no taste, and is easily taken by children and delicate persons. In the present form—the effervescing—it is a delightful remedy, constituting a refreshing sparkling draught of land action.

1. Sodium Phosphate is a mild but certain hepatic stimulant, and relaxes the bowels both by promoting an excretion of bile and by acting directly upon the mucous membrane of the intestines. It does not cause "griping," nor does it derange the stomach or excite nausea; unlike many other purgatives, it has a beneficial effect upon the appetite and digestion, stimulating the flow of gastric juice and increasing assimilation.

2. Diabetes is treated with decided advantage by means of the Sodium Phosphate. Not only are its cholagogue properties beneficial in this malady, but also its well-known power of arresting the secretion of sugar in the liver.

3. Phosphorus is a fundamental constituent of nervous matter, the substance of brain, spinal cord and nerves. Hence, the usage of the present compound in diseases characterised by a deficiency of "tone" of the nervous system in Debility, Spermatorrhœa, Impotence, Locomotor Ataxia, Neurasthenia, etc., is strongly to be recommended. In Asthma and the debility of the advanced stages of Phthisis it is serviceable. In such cases it acts as a restorative and respiratory stimulant.

4. In grave, exanthematous fevers, where a purgative, to be safe, must be simple and efficient, the Sodium Phosphate can be relied on. In such cases its cooling, saline qualities render it grateful and refreshing to the patient.

5. Sodium Phosphate, causing a marked outflow of bile, whose consistency it renders thinner, is an incomparable remedy for Bilioussness, constipation, and, above all, for Jaundice, especially in children, on account of its absence of taste, and its efficient but unobjectionable properties. Diarrhœa and Dysentery in children are effectively controlled very often by the action of this salt in cleansing the mucous membrane of the lower bowel, and evacuating in a complete and unirritating manner the rectum and large intestine.

DOSE.—For children, to relieve diarrhœa, constipation, etc., a small dose only is necessary, $\frac{1}{2}$ to 1 teaspoonful according to age and effect desired. As a purgative in adults, one or two dessertspoonfuls. As an alterative in gout, obesity, hepatic derangement, etc., one dessertspoonful morning and night. As an excellent substitute for Carlsbad water (which depends largely for its beneficial effect upon the presence of this salt) may be obtained by adding a dose to a tumbler of water and taking it gradually on getting up in the morning. The glass cap on our Effervescing Salt bottle, when filled, is equivalent to one dessertspoonful, and also embodies a time device adjustable to any hour at which the next dose is to be taken.

PREPARED BY

DAVIS & LAWRENCE CO., LIMITED,

Manufacturing Chemists,

Sole Agents for Canada.

MONTREAL, Can.

WYETH'S SOLUTION

IRON & MANGANESE PEPTONATE

(NEUTRAL.)

Liq. Mangano—Ferri Peptonatus—Wyeth's.

Iron and Manganese as offered in the shape of numerous inorganic preparations are, at the best, only sparingly absorbed after a long and tedious process.

When combined with Peptone in a neutral organic compound, the result is complete assimilation and absorption, thus deriving the full benefit of the ingredients as tonics and reconstituents, and rendering the remedy invaluable in

Anæmia, Chlorosis, Scrofula and Debility.

The improvement accomplished by the administration of the solution is permanent, as shown by the increase in amount of Hæmoglobin in the blood: i.e. 3 to 8 per cent.

As regards the digestibility and rapid assimilation of the preparation, its aromatic properties and the presence of peptone in it renders it acceptable to the most susceptible stomach.

DOSE.—For an adult, one tablespoonful well diluted with water, milk or sweet wine, three or four times a day; dose for a child is one to two teaspoonfuls, and for an infant 15 to 60 drops.

Offered in 12 ounce bottles (original package) and in bulk at the following list prices.

Per Demijohn, \$6.25; Per five pint, \$4.50; Per doz. 12 oz \$11.00.

WRITE FOR LITERATURE.

DAVIS & LAWRENCE CO., LTD.,

Manufacturing Chemists,

MONTREAL, CANADA.

General Agents for Canada.

Correspondence.

Editor of the Maritime Medical News:

SIR,—I did not see the December number of your journal, but Dr. MacKay's report of Dr. Murphy's case in your February issue struck me as being very interesting, calling attention as it did to some really fine work done by Dr. Murphy in his attempt to save his patient's leg. He had hard luck but his procedure was up to date, a fact very gratifying to the average practitioner in the province, for it fosters his confidence in our provincial hospital.

I am glad also to see the cordial relation that exists between the members of the surgical staff, for differences unfortunately often occur and tend to professional jealousies and other kindred evils. It is pleasant indeed to find the senior surgeon—for so I take it Dr. MacKay is, calling attention to the good work done by his junior in office.

This should ever be so, yet so often not seen. "How pleasant a thing it is for brethern to dwell together in unity."

Yours truly,

W. HUNTLEY MACDONALD,

Antigonish.

THE MARITIME MEDICAL NEWS,

A MONTHLY JOURNAL OF MEDICINE AND SURGERY.

VOL. XIII.

HALIFAX, N. S., APRIL, 1901.

No. 4

Editorial.

PUBLIC CHARITIES.

FORTY-THIRD ANNUAL REPORT OF THE NOVA SCOTIA HOSPITAL FOR THE INSANE.
THIRTY-FOURTH ANNUAL REPORT OF THE SUPERINTENDENT OF THE VICTORIA GENERAL HOSPITAL.

GOVERNMENT BLUE BOOK "PUBLIC CHARITIES."

TWENTY-NINTH ANNUAL REPORT OF THE HALIFAX SCHOOL FOR THE BLIND.

FORTY-THIRD ANNUAL REPORT OF THE INSTITUTION FOR THE DEAF AND DUMB.

FOURTH ANNUAL REPORT OF THE ABERDEEN HOSPITAL.

Except in one particular the perusal of these reports is a very pleasant task, and furnishes justification for the pride with which Nova Scotians regard their public institutions.

With regard to the quality of the work done in them, and particularly in the enthusiasm and ability of those in charge of the educational departments, two of these institutions can challenge comparison with any of the kind. We refer to the Institution for the Deaf and Dumb, and the School for the Blind. The marvelous progress made in the methods of imparting instruction to those unhappy children to whom so many gateways of knowledge have been barred, is one of the glories of the century which has just closed. There is something almost superhuman, there is indeed something divine, in a work which, in truth, brings light to them that sit in darkness, and makes the tongue of the dumb to sing.

It is pleasant to note that the health of the pupils in these schools has been excellent. In this connection, Mr. Fraser, the energetic superintendent of the school for the blind says: "The physical training of the pupils is so essential to their health, so necessary to their development, and has so much to do with their success in life, that

its importance should never be overlooked in a school for the blind." And this is the department of education which is practically ignored in our public school system. We could wish that our council of public instruction would read and ponder Mr. Fraser's opinion.

Turning now to the department more distinctly concerning our profession, we take the Report of the Victoria General Hospital for 1899-1900. A perusal of Mr. Kenney's report justifies the conclusion of Dr. Sinclair, as stated on page 534 of his report on Public Charities, "a well-managed institution, a boon to the sick and suffering of the land and a credit to the Province."

From the table published on page 15 of Mr. Kenney's report we gather information which reflects credit on the medical and surgical staffs, and testifies to the financial skill of the superintendent. This is a table of statistics from fourteen hospitals, of various sizes, chiefly in the United States, and a comparison of figures shows that the death rate in the Victoria General Hospital is the lowest, and that the daily cost per patient is also the lowest.

A perusal of Tables IV and V shows the wide range of diseases and injuries admitted for treatment, and Table VII (Record of Operations) shows that the surgical staff is ready to undertake, and is successful in undertaking the most serious surgical operations. In these statistical tables we think there should be a column for totals, and in the surgical division one for "cases operated on." Thus under the head of "appendicitis" in Table V, we have 8 cases recovered, 1 improved—a total of 9. Then in Table VII (Record of Operations) these cases come under the heading "Removal of appendix." We presume they are the same cases, 7 being male patients and 2 female. Of these 7 are noted as "recovered," 1 "improved" and 1 "died." This death is not indicated in Table V, or there is some discrepancy. It would also appear from the information supplied here that all the cases of appendicitis were operated upon.

Under the heading of "Abscess—pelvic," 2 cases are entered under the heading "remained."

The heading "laparotomy" is too indefinite: the purpose of the operation should be stated. The table gives 4 "laparotomies." But there are 7 "abdominal hysterectomies" and over 20 "ovariotomies" (presumably by the same route) and *laparotomy* is a stage in all of these. Why does it figure by itself?

The term "opening abscess" is too indefinite. There is a great

difference between an ischio-rectal abscess and appendix abscess, or a cerebral abscess.

There is room for improvement in these tables. The column for "Nativity" too is rather vague. Why should Cape Breton be reckoned apart from Nova Scotia? Does Halifax mean county or city or both? We would suggest two columns, one for nationality and one for place of birth.

Not the least service rendered by the hospital is that supplied by its training school for nurses. Many very excellent nurses have now been trained here, and are doing good work all over the province. But we are bound to say that all the graduates are not of equal merit, and we would heartily commend Mr. Kenney's remarks on nurses and nursing, on page 17, to the attention of those who think of taking up this calling.

The Aberdeen Hospital at New Glasgow is one of the best conducted and most successful hospitals of its size to be found anywhere. The cost per patient is a fraction less than in the Victoria General Hospital and the death rate also is lower.

The success of this hospital justifies the opinion that similar institutions should be established in our larger towns. And the management of these hospitals should be by a board of directors or trustees, as is the case in New Glasgow. We are convinced that if this were the case in Halifax, if the hospital were administered by a board of directors, and free from the atmosphere of politics, it would command in an even greater degree the confidence of the public and the profession.

Dr. Hattie's report of the Hospital for the Insane is like many of its predecessors, tinged with melancholy; "that ignoble melancholy which springs from a sense of pecuniary embarrassment." But Dr. Hattie's is a "noble melancholy," his heart aches at the sad condition of the poor blighted souls about him, and with the thought that in some cases, for a certainty, the hopes and chances of cure are being lost, for the want of a few dollars. More room, more scope for segregation and classification, more means of employing the time cheerfully and healthily, those are denied because, we suppose, the estimates must be kept down. Insanity is in some respects the saddest affliction of our race, but the sad fate of those who fall victims to this form of disease seems to be regarded with callous indifference. The treatment costs too much money; the taxpayer averts his eyes and passes by on the other side.

It is the cursed "love of gold." This is the one particular to which we referred at the commencement of this article. And the extent to which this dry rot of selfishness and parsimony has eaten into the heart of the people is even more strikingly seen in the indictment which Dr. Sinclair brings against the management of some of our poor houses and county asylums.

These lines are written in a medical journal and for the perusal of medical men, and we know that it would be hypocrisy for us to pose as defaulters in this matter and to class ourselves with the mercenary crew who practically regard poverty as a crime, and grudge comfort and even cleanliness to the poor and helpless. We know, that if we do sometimes growl about it, we do more for the poor than all the rest of the community together. We know how by day and by night, in summer and in winter, from Yarmouth to Sydney, we give in gratuitous services to the poor an amount which if reckoned by the lowest tariff fees in the country, would make the total annual taxation of many of our neighbors a shabby trifle. And we face the bill year after year, with no hope of reward from municipal authorities, or any other powers of this present world. But let us not be too hard on the municipal councillor. He is in his place to do the bidding of his constituents and that bidding is to save money.

Dr Sinclair's reports are always admirable. His position as Inspector of Humane and Public Institutions is beset with many difficulties, and he meets these with exceptional tact and sagacity. When he has to suggest improvements he does so in a practical way and with a full knowledge of his subject; where he has to criticise, he does so with courtesy and a certain natural *bonhomie*, which must disarm resentment; where he condemns, his condemnation is stern and unmistakable, and when he praises he does so with a generosity which must warm the hearts of those who have striven for improvement.

Dr. Sinclair is a relentless enemy of the old, shiftless, miserly method of conducting poor houses, and some of his reports must have been bitter medicine for certain municipal authorities. And yet, as we have good reason to know, he is a popular as well as an efficient Inspector. And the bitter tonic is having its effect, a healthier current of sentiment is circulating in the community, the tone of the poor-farm is rising, and we have hope of some warmth and colour yet suffusing the dull gray life of the pauper.

And it is high time such a beneficent change should take place.

The treatment of the poor is still, in too many places, a burning disgrace to the country. Men, women and children, old and young, healthy and diseased, the decent poor who have seen better days, and the lazy, dirty, incorrigible jail-bird, the melancholic, the simpering idiot and irresponsible epileptic are herded together in tumble-down, leaky old houses, and sleep in ill-ventilated, over-crowded, and vermin infested rooms. In one of these houses the death-rate was thirty per cent!

Why should a man be punished because he has lost his property, or treated as a criminal because he has lost his reason?

At one poor farm—and it is not a hundred miles from Halifax, “the contract for meat calls for the *same quality as supplied to the jail.*” At another no sugar is allowed. At another an excitable and dangerous lunatic is locked in his own room. If he were where he should be, at Mount Hope, he might have freedom, under skilled supervision, and would then certainly be in a better environment. It also appears that insane persons are kept in some of the county asylums, who have not been medically certified.

To one of Dr. Sinclair’s recommendations we would draw special attention, as we believe its adoption would be fraught with very great advantage to all concerned and especially to the insane poor. It is that a “women trained in the care specially needed by the insane” should be added to the staff of each county asylum. Thoroughly competent nurses are now trained at Mount Hope, and one of the pleasantest pages of the Report on Public Charities tells of the improvement in the Annapolis County Asylum at Bridgetown, resulting from the management of a well trained and competent woman.

Yes! there is some pleasant reading as well as depressing. The picture drawn for us has its shadows too truly, dark spots where miserliness and uncharitableness lurk. But it has its high lights also, and its far-off bright horizon. The preaching of the Golden Rule is rousing even the municipal conscience. Kindlier airs and a warmer sunshine are breaking through the wintry sky of the poor.

VACCINATION IN HALIFAX.

An outbreak of small pox at Digby and Kentville, localities not far distant from and in easy communication with Halifax, aroused the City Health Board into activity. Late in March a wholesale vaccination of the inhabitants was ordered, to be carried into effect not later than April 15th, which date was subsequently extended to April 30th. A staff of physicians was appointed to vaccinate the poor and persons of limited means free of charge. For various reasons the edict of the City Health Board aroused considerable opposition. The School Board promptly refused to co-operate and the City Council declined to endorse the procedure of the health authorities. The physicians appointed to assist the City Medical Officer refused to act for the remuneration offered.

After some delay and probably in deference to public sentiment, the order of the Health Board was withdrawn, and a new order issued to the effect that all persons under sixteen years should be vaccinated not later than April 30th. A new staff of physicians was chosen to assist in the work, all those who had previously protested against the fee being passed over. The work is now in progress—with what results remains to be seen.

The necessity for a general vaccination in Halifax cannot be questioned. A very large proportion of the population is either wholly unprotected or inadequately secured against an outbreak of small-pox. At least 95 per cent of persons under sixteen years of age have never been vaccinated, and there is unfortunately a widespread belief that the dangers of vaccination are nearly as great as those of small-pox. Freedom from epidemics for thirty years has created the inevitable feeling of false security which leads people to look lightly upon the dangers of the disease or to neglect vaccination. The epidemic of small-pox in Gloucester, Eng, a city having about the same population as Halifax, presents facts that the citizens and constituted authorities should ponder over.

At one time vaccination was fairly well carried out in Gloucester. About 1886 an agitation in opposition to vaccination was organized, which was so effectual that ten years later over 80 per cent. of the children born were left unvaccinated. Small-pox obtained a foothold

in the city in 1896, and the results were most disastrous. Nearly 2,000 persons contracted the disease of whom 434 died; 706 children under ten years of age were attacked, 38 of these were vaccinated, of whom one died; 680 were unvaccinated of whom 279 died. The financial loss sustained by the citizens in consequence of the epidemic was enormous but does not admit of exact statement. Apart from the cost of 20,000 vaccinations and revaccinations, the expenses of the health authorities in controlling the epidemic amounted to upwards of \$75,000, a very large price to pay for ignoring the advice of the medical profession.

What happened to Gloucester in 1896 may be repeated in Halifax at any time in the near future, exposed as it is to the risk of infection by sea and land, and containing so large a population prepared for the reception of the germs of the disease.

The attitude of the profession has been wholly satisfactory in private and in the press. As members of the various constituted authorities they have not wavered in their duty, and if a day of reckoning should unfortunately come, they cannot be charged with neglect. As usual the stale slander of being influenced by pecuniary motives has been freely circulated, it being overlooked that an outbreak of small-pox would be far more profitable to the profession than the limited amount derived from vaccination.

The opposition of the City Council and School Board, more particularly the latter, calls for unqualified condemnation. Unless unvaccinated children are excluded from schools, the efforts of the Health Board will be frustrated to a very large extent. The opinion of the Chamber of Commerce should have some weight in modifying the views of the school authorities for they have much at stake in this question, and should strongly sustain the stand taken by the medical profession.

The protest of the medical staff first chosen against vaccinating the poor at the rate of 25 cents each was well founded and a more generous course should have been followed, in view of the fact that they were required to hunt people up to vaccinate them, to revaccinate in the event of failure, and to supply certificates in all cases.

The plea of the "groaning taxpayer" urged by well paid lightly worked officials was, to say the least, very amusing.

MEDICAL ADVERTISING.

This age is said to be the age of advertising and every person appears to be imbued with the principle that he must advertise in order to push his business. The patent medicine men advertise their wonderful cures and the druggists also advertise their wonderful skill in compounding drugs, and even to prescribing for all the ills to which the flesh is heir. The doctor or regular practitioner appears to be an exception to the rule unless we include the specialists who are now as abundant as the patent medicine man. If a doctor changes his residence, he must not refer to his experience and years of practice in another field—nor say that general medicine includes the specialties, but a specialist can claim immunity and refer to his work on the eye, ear, nose and throat, or uterus, and claim by visiting certain hospitals in London or Edinburgh or New York that he has special qualifications for his work. This may be true and he may be a man of exceptional attainments, yet there ought to be a clearly defined boundary to show how far a man should go in this direction without violating the ethics of an old and honoured profession hitherto very conservative in its practices with regard to advertising. There are different ways of advertising. Some men get hospital nurses to advertise them, clever operations are noticed and it may be legitimate to carry the tidings from mouth to ear and thus advertise the operator, but he himself must not go to the press and even modestly invite the public to call upon him or say what his line of practice is. This may be all very well and quite honourable so far as the medical man is concerned but we find the profession have different views on the matter, and we think the different members of the profession might with propriety give expression to their ideas in the columns of the MARITIME MEDICAL NEWS as a means of procuring harmony of views.

EDITORIAL NOTES.

THE ETHICS OF CONTRACT PRACTICE.—We have been requested to reprint an article read by Dr. W. B. Davis, of Pueblo, Colo., before a recent meeting of the Pueblo County Medical Society, entitled "When is Contract Practice Unethical?" We do so, feeling that while in some respects the strictures of Dr. Davis' paper are inapplicable to the conditions affecting the medical profession in our maritime provinces, there is nevertheless much in the paper which does apply. It is unfortunately a fact that of recent years the multiplication of lodges of various benefit societies has led to a much greater infringement of the code of ethics than was formerly the case. We commend the article to the consideration of our readers, and would be glad to have correspondence upon this subject from those who are interested.

AMERICAN ACADEMY OF MEDICINE.—The 26th Annual Meeting of the American Academy of Medicine will be held at the Hotel Aberdeen, St. Paul, Minn., on Saturday, June 1st, 1901, at 11 a. m. (Executive Session: the Open Session beginning at 12.00 a. m.), and continuing through Monday, June 3rd.

The principal features of the meeting will be a Symposium on "Institutionalism;" and another on "Reciprocity in Medical Licensure." Series of valuable papers on both topics have been promised, as well as interesting papers on some other subjects. The President's Address (Dr. S. D. Risley, of Philadelphia) will be delivered on Saturday evening, June 1st, and the Annual Social Session held on Monday evening, June 3rd.

Members of the profession are always welcomed to the open sessions of the Academy. The Secretary (Dr. Charles McIntire, Easton, Pa.) will be pleased to send the programme, when issued, blank applications for fellowship, etc., when requested to do so.

CANADIAN MEDICAL ASSOCIATION,—The first meeting in the new century will take place at Winnipeg on August 28th, 29th, 30th and 31st next, and from present prospects it will be a record breaker, in

LACOTOPEPTINE TABLETS.

Same formula as Lactopeptine Powder. Issued in this form for convenience of patient—who can carry his medicine in his pocket, and so be enabled to take it at regularly prescribed periods without trouble.

"Everything that the science of pharmacy can do for improvement of the manufacture of Pepsin, Pancreatine, and Diastase, has been quietly applied to these ferments as compounded in Lactopeptine."

—*The Medical Times and Hospital Gazette.*

CAN BE ORDERED THROUGH ANY DRUGGIST. SAMPLES FREE TO MEDICAL MEN.

NEW YORK PHARMACAL ASSOCIATION,

88 WELLINGTON STREET WEST, TORONTO.

Liquid Peptonoids with Creosote

Beef, Milk and Wine Peptonised with Creosote,

Liquid Peptonoids with Creosote is a preparation whereby the therapeutic effects of creosote can be obtained, together with the nutritive and reconstituent virtues of Liquid Peptonoids. Creosote is extensively used as a remedy to check obstinate vomiting. What better vehicle could there be than Liquid Peptonoids, which is both peptonized and peptogenic? It is also indicated in Typhoid Fever, as it furnishes both antiseptic and highly nutritive food, and an efficient antiseptic medicament in an easily digestible and assimilable form.

In the gastric-intestinal diseases of children, it also supplies both the food and the remedy, thereby fulfilling the same indications which exist in Typhoid Fever.

Each tablespoonful contains two minims of pure Beechwood Creosote and one minim of Guaiacol.

Dose.—One to two tablespoonfuls from three to six times a day.

THE ARLINGTON CHEMICAL COMPANY,

—TORONTO.

"BOROLYPTOL"

Is a combination of highly efficient antiseptic remedies in fluid form designed for use as a lotion whenever and wherever A CLEANSING AND SWEETENING wash is required. It possesses a delightful balsamic fragrance and pleasant taste, and can be employed with great advantage

AS A CLEANSING LOTION AS A VAGINAL DOUCHE
AS A NASAL DOUCHE AS A MOUTH WASH
AS A FRAGRANT DENTIFRICE.

THE PALISADE MANUFACTURING CO.

Samples sent
on application.

88 WELLINGTON STREET WEST, TORONTO

To the Medical Profession :

ABBEY'S EFFERVESCENT SALT is without doubt the most elegant, palatable, and efficient saline laxative and antacid within your reach.

It possesses every requisite that such a salt should have; the slight granulation enables the patient to obtain the fullest benefit of the slower development of the carbonic acid gas; its action upon the bowels is gentle, but positive, and its valuable antacid properties render its use particularly beneficial in many cases where a harsher aperient might prove deleterious.

The use of Abbey's Effervescent Salt is growing daily, and is now regarded as a standard preparation, put up in the most high-class manner, and sold through druggists only.

The preparation is manufactured in the most perfectly appointed laboratory in America, under the supervision of expert chemists, and is in every way guaranteed to meet the many requirements for which its properties render it useful.

that large numbers from the East are so arranging their holiday trip as to make Winnipeg the trysting place in August, while the men from the West are a unit in their enthusiasm to make this Western meeting the best the Association has held.

The Address in Medicine will be delivered by Dr. J. R. Jones of Winnipeg, and the one in Surgery by Mr. O. M. Jones, F. R. C. S., Eng., of Vancouver, B. C. An evening will be devoted to a discussion on Tuberculosis, and another evening to some Surgical topic. An extensive Pathological Exhibit will be an interesting feature as well.

By way of entertainment an Excursion to Fort Garry, and on Saturday, August 31st, a trip to Brandon, with a luncheon, returning through Southern Manitoba, will be arranged.

At present we are not in a position to state what the Railways will do, but from negotiations now going on we can safely promise a cheap rate. This in itself should insure a large and representative gathering.

Personals.

Dr. L. B. W. Braine has gone to St Margaret's Bay to take the practice of the late Dr. Chase.

Dr. J. W. Daniel has just been re-elected mayor of St. John, by acclamation.

Dr. W. C. Crocket was recently elected mayor of Fredericton.

Dr. M. T. McLean has lately returned from London and is at present acting house surgeon to the Victoria General Hospital.

Dr. A. A. Shaffner, formerly of the cable steamer "Mackay-Bennett," has also returned from London, after taking up post-graduate work for some months.

Dr. John M. Purcell, of this city, is seriously ill with pneumonia, at the Victoria General Hospital.

Society Meetings.

NOVA SCOTIA BRANCH BRITISH MEDICAL ASSOCIATION.

FEBRUARY 6th, 1900 Dr. G. C. Jones, President, in the chair.

Meeting held at the Nova Scotia Hospital for the Insane.

The President read a letter which he had received asking for an expression of opinion concerning the Victorian Order of Nurses and enclosing a copy of report and testimonials on their behalf.

Several members spoke in appreciation of the work of the order, and Dr. Murphy gave notice that at next meeting he would move a resolution on the subject.

The President then called upon Dr. Hattie who asked Dr. McKenzie to show some cases.

Dr. McKenzie first presented a case of schirrus of the breast which was first operated on about three years ago, and recurred in the glands above the clavicle. Symptoms of pressure on the cervical sympathetic had developed due to enlargement of cervical glands—ptosis and contracted pupil, and also a flushing of right side of chest and swelling of the arm on affected side.

Next was exhibited a case of paralysis agitans. The patient was a man of 40 years of age, and had noticed tremor 19 years ago. The characteristic gait was present in his case.

Drs. Walsh and Smith mentioned the use of hydrobromate of hyosine and asked if it had been used.

Dr. Hattie said he would give the drug a trial. The pathology of the case was obscure.

Next case was general paresis of the insane occurring in rather a young man.

Dr. Hattie then read an interesting and instructive paper upon the statistics of his first twelve months as superintendent, analyzing and comparing the ratio of recovery with that generally expected. He regretted that lack of means of occupation for the men prevented

much being done which would be possible had they workshops in which to keep suitable cases employed.

After the meeting at Dr. Hattie's invitation, the members adjourned to the dining-room, where they were hospitably entertained at supper.

A vote of thanks was passed and conveyed to Dr. Hattie for his kindness.

Feb. 20th, 1900, meeting held at the Halifax Medical College.

Dr. G. M. Campbell was called upon and presented the following for the consideration of the branch :

1. Tape-worm with head. This was removed by a mixture of chloroform, glycerine, malefern, one dram of each, with two drops of croton oil.

2. Heart with adherent pericardium.

3. Larynx showing erosions, kidney showing dark congested condition and dark urine—due to carbolic acid poisoning.

4. Gastro-enterostomy for malignant growth at the pylorus. Patient lived five months after operation.

5. Heart showing diseased aortic valves with warty growths, and a white fibrous growth behind and around the aortic ring.

6. Kidney with cyst at one extremity.

7. Cancer of omentum and stomach.

8. Case of supposed Addison's disease. Skin bronzed, enlarged mesenteric glands, lungs and pleuræ tubercular, bronchial glands enlarged and pigmented, spleen enlarged and tubercular, kidneys pale and cystic, suprarenals sac-like and tubercular, heart pale, tumor attached to upper part of pericardial sac.

Several interesting microscopic sections were also shown.

The President expressed the branch's obligation to Dr. Campbell for the trouble he had taken in preparing the specimens. He remarked that there was the maximum of pathology with the minimum of diagnosis.

STUDENT'S SOLILOQUY.

(Found on the street—supposed to be written by a third year student of the Halifax Medical College)

Now we meet the awful trial,
I'm afraid I'm plucked sure,
Soon we'll go in single file
To face at last the dreaded Muir.

Pulv. Doveri! What is in it?
Of course I've got to make a splurge,
Memory's gone within a minute,
Calomel is sure to purge.

Pilocarpine's got an action,
(Something makes me sweat)
Once time's up there's no retraction,
O the questions they have set.

All its preparations! O the deuce,
They will say I'm but an ass,
If I only had my Bruce
I think that I could make a pass.

A prescription I'm to frame,
Well they all begin with R,
And below I sign my name
While above I call the star.

Spanish flies aren't taken whole,
Must not put mag. sulph. in pills,
Do not mix (to reach the goal)
Ammonia carb. with syrup of squills.

What's the dose that I may say
For the drug hydrarg bichlor?
Teaspoonful three times a day
Would be sure to make a score.

Time is up! There goes the bell,
Have I got that question proper?
If the oral does not tell
I'll be sure "to come a cropper."

Book Reviews.

STUDENTS' EDITION—A PRACTICAL TREATISE ON MATERIA MEDICA AND THERAPEUTICS, with special reference to the Clinical Application of Drugs, by John V. Shoemaker, M.D., LL. D., Professor of Materia Medica, Pharmacology, Therapeutics, and Clinical Medicine and Clinical Professor of Diseases of the Skin in the Medico-Chirurgical College, of Philadelphia; Physician to the Medico-Chirurgical Hospital; Member of the American Medical Association, of the Pennsylvania and Minnesota State Medical Societies, the American Academy of Medicine, the British Medical Association; Fellow of the Medical Society of London, etc., etc. Fifth Edition. Thoroughly Revised. $6\frac{1}{4} \times 9\frac{1}{2}$ inches. Pages vii-770. Extra Cloth, \$4.00, net; Sheep, \$4.75, net. F. A. Davis Company, Publishers, 1914-16 Cherry Street, Philadelphia.

Professor Shoemaker's work is a volume of over seven hundred pages which is well bound and printed in clear distinct type. In Part I there are the usual introductory chapters found in a volume of this kind, all of which are lucid in explanation, those on prescription writing and the administration of remedies being particularly good. Part II deals with the drugs in *alphabetical* order which in our opinion is the weak point of the work as a *student's* book. It would have been better to have classified the drugs according to their physiological action. Take for example, the belladonna group—in knowing belladonna, one knows, in a sense, hyoscyamus and stramonium. Again, drugs which produce sleep have some actions in common and some more or less wide differences. Classifying and comparing remedies aid the much taxed memory of a student. This change suggested, however, could be easily carried out in a future edition if the author's ideas conform to our own. The metric system of weights and measures is given, as well as the English system, with every prescription—of which there are many valuable combinations, which will prove of much assistance in the course of study. The description of individual drugs is written in a clear, practical way and cannot but commend itself to every reader. Only official drugs are included in this work and practitioners will find it of great assistance particularly as a book of reference.

THE LADIES' HOME JOURNAL FOR APRIL.

As usual this enterprising paper contains numerous interesting and instructive articles to peruse in one's quiet moments. "About once a week there comes a man, a vagrant or confidence man of some sort, who would take your order for ten dollars for a set of books you know to be worth a hundred—you paying him five dollars on the order," writes Rev. David M. Steele, of "The Lovers of a Cheerful Giver." "Now and then the woman calls who would take your jewelry and clean it for almost nothing. When you are out a man asks the sexton for your clock, or gun, or bicycle, to repair it, or the tailor (?) comes for 'that dress-suit Doctor So-and-So wants pressed.' He got one from the wife of a neighbor of mine

one day last summer. He called an hour after her husband had gone to business. The suit was a good one and cost eighty dollars. Perhaps that is the reason it takes so long to press it. At any rate it has not been returned yet."

"Keep the house and surroundings clean, dry and well aired if you want to keep out pests," writes Maria Parloa. "Do not keep kitchen garbage, wet cleaning-cloths, dishcloths or towels in the house. Burn or otherwise dispose of the garbage; wash and dry all cleaning-cloths every day. Keep cereals in tin, stoneware or glass receptacles; wood harbors insects. Fill all the cracks in walls and floors. Wash floors, closets and drawers with carbolic water. If unwelcome visitors appear in any part of the house use a strong solution of carbolic water for injecting into cracks and grooves; five ounces of water to one of carbolic crystals."

Notes.

SANMETTO AS A GENERAL TONIC.—Dr. J. W. Russell, of Clyde, Ohio, writing, says: "I have used Sanmetto extensively in genito-urinary irritations, and in atony of the generative system, with splendid results. I am also pleased with its action as a general tonic in cases debilitated as a result of La Grippe."

FEMALE NEUROTICS—THEIR TREATMENT.—Prof. Chas. J. Vaughan, Chair of Gynecology, Atlanta College of Physicians and Surgeons, writes: "Cerebro-nervous affections peculiar to women associated with pathological disturbances of the reproductive organs are legion, and most trying to physician and patient. Physicians are aware of the wide prevalence of these nervous disorders, for comparatively few women are entirely free from some phase of the ailment. Neurasthenia, neuralgia and other manifestations, either of an active or passive character, are common and are always peculiarly rebellious to treatment. Neuralgia constitutes the great cause of danger from the employment of hypnotics and narcotics, which only afford relief by numbing, but effect no cure. On the other hand, the formation of a drug habit rather aggravates the condition from which relief was originally sought. I have found nothing so well suited to these cases as five-grain antikamnia tablets, administered in doses of from one to three tablets and repeated every one, two or three hours according to the attendant's judgment. These tablets not only afford complete relief without fostering a drug habit, but they do not endanger weakened hearts. Their exhibition is attended with no unpleasant after-effects. I use them in preference to any other preparation in the treatment of female neurotics and experience demonstrates that they are safest and best."

\$900

YEARLY to Christian man or woman to look after our growing business in this and adjoining Counties, to act as Manager and Correspondent; work can be done at your home. Enclose self-addressed, stamped envelope for particulars to J. A. KNIGHT, General Manager, Corcoran Building, opposite United States Treasury, Washington, D. C.

H

HAYDEN'S *Viburnum* Compound

ANTISPASMODIC, NERVINE
AND UTERINE TONIC.

V

Indicated in ailments of women and in obstetrical practice. Is free from all narcotics. A remedy of ascertained value with no deleterious after-effects. Used by leading hospitals and practitioners everywhere.

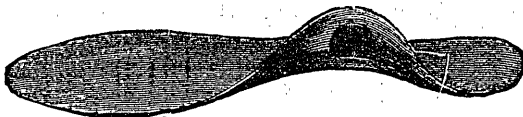
C

New York Pharmaceutical Co.

BEDFORD SPRINGS, MASS.

HOLLAND'S IMPROVED INSTEP ARCH SUPPORTER.

NO PLASTER CAST NEEDED.



A Positive Relief and Cure for FLAT-FOOT,

80% of Cases treated for Rheumatism, Rheumatic Gout and Rheumatic Arthritis of the Ankle Joint are Flat-Foot.

The introduction of the improved *Instep Arch Supporter* has caused a revolution in the treatment of *Flat-foot*, obviating as it does the necessity of taking a plaster cast of the deformed foot.

The principal orthopedic surgeons and hospitals of England and the United States are using and endorsing these Supporters as superior to all others, owing to the vast improvement of this scientifically constructed appliance over the heavy, rigid, metallic plates formerly used.

These Supporters are highly recommended by physicians for children who often suffer from *Flat-foot*, and are treated for weak ankles when such is not the case, but in reality they are suffering from *Flat-foot*.

IN ORDERING SEND SIZE OF SHOE, OR TRACING OF FOOT IS THE BEST GUIDE.

Sole Agents for Canada: **LYMAN, SONS & CO.,** Surgical Specialists.
380-386 ST. PAUL ST., MONTREAL,

SANMETTO FOR GENITO-URINARY DISEASES.

A Scientific Blending of True Santal and Saw Palmetto In a Pleasant Aromatic Vehicle.

A Vitalizing Tonic to the Reproductive System.

SPECIALLY VALUABLE IN
PROSTATIC TROUBLES OF OLD MEN—IRRITABLE BLADDER—
CYSTITIS—URETHRITIS—PRE-SENILITY.

DOSE:—One Teaspoonful Four Times a Day.

OD CHEM. CO., NEW YORK.

WHEELER'S TISSUE PHOSPHATES.

WHEELER'S COMPOUND ELIXIR OF PHOSPHATES AND CALISAYA A Nerve Food and Nutritive Tonic for the treatment of Consumption, Bronchitis, Scrofula, and all forms of Nervous Debility. This elegant preparation combines in an agreeable Aromatic Cordial, acceptable to the most irritable conditions of the stomach: Bone-Calcium Phosphate $\text{Ca}_2 \text{2PO}_4$, Sodium Phosphate $\text{Na}_2 \text{HPO}_4$, Ferrous Phosphate $\text{Fe}_3 \text{2 PO}_4$, Trihydrogen Phosphate $\text{H}_3 \text{PO}_4$, and the active Principles of Calisaya and Wild Cherry.

The special indication of this combination of Phosphates in Spinal Affections, Caries, Necrosis, Ununited Fractures, Marasmus, Poorly Developed Children, Retarded Dentition, Alcohol, Opium, Tobacco Habits, Gestation and Lactation, to promote Development, etc., and as a physiological restorative in Sexual Debility, and all used-up conditions of the Nervous System should receive the careful attention of the Therapeutists.

NOTABLE PROPERTIES.—As reliable in Dyspepsia as Quinine in Ague. Secures the largest percentage of benefit in Consumption and all Wasting Diseases, by determining the perfect digestion and assimilation of food. When using it, Cod Liver Oil may be taken without repugnance. It renders success possible in treating chronic diseases of Women and Children, who take it with pleasure for prolonged periods, a factor essential to maintain the good-will of the patient. Being a Tissue Constructive, it is the best general utility compound for Tonic Restorative purposes we have, no mischievous effects resulting from exhibiting it in any possible morbid condition of the system.

Phosphates being a NATURAL FOOD PRODUCT, no substitute will do their work.

DOSE.—For an adult, one table-spoonful three times a day, after eating; from 7 to 12 years of age, one dessert-spoonful; from 2 to 7, one teaspoonful. For infants, from five to twenty drops, according to age.

Prepared at the Chemical Laboratory of T. B. WHEELER, M.D., Montreal, P.Q.

To prevent substitution, put up in pound bottles only, and sold by all Druggists at ONE DOLLAR.

C. G. SCHULZE, PRACTICAL WATCH AND CHRONOMETER MAKER,

—IMPORTER OF—

Fine Gold and Silver Watches, Clocks, Fine Jewelry and Optical Goods,

Chronometers for Sale, for Hire and Repaired.

Rates determined by Transit Observation.

All kinds of Jewelry made at shortest notice. Special attention given to repairing Fine Watches

165 BARRINGTON STREET, - HALIFAX, N. S.

High-class Tailoring

AT

E. MAXWELL & SONS,

132 GRANVILLE STREET, HALIFAX, N. S.

Kelley & Glassey

(Successors A. McLeod & Sons.)

Wine & Spirit Merchants,

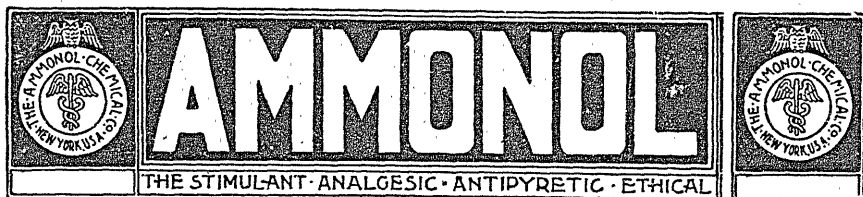
Importers of Ales, Wines and Liquors.

Among which is a very superior assortment of

Port and Sherry Wines, Champagnes, Bass's Ales, Guinness's Stout, Brandies, Whiskies, Jamaica Rum, Holland Gin, suitable for medicinal purposes; also (Sacramental Wine, and pure Spirit 65 p. c. for Druggists.)

WHOLESALE AND RETAIL.

Please mention the MARITIME MEDICAL NEWS.



AMMONOL
THE STIMULANT · ANALGESIC · ANTIPYRETIC · ETHICAL

THE AMMONOL CHEMICAL COMPANY, Manufacturing Chemists
NEW YORK CITY.

Gentlemen's Outfitter.

G. R. ANDERSON,

—Importer and Dealer in—

English, Scotch, German and Canadian
UNDERWEAR.

Hosiery, Shirts, Ties, Gloves, Braces, Dressing
Gowns, Pyjamas, Umbrellas, Waterproof Coats.

125 Granville Street - - Halifax, N. S.

Keresene at One

Cent per gal.,

WILL not produce the same value of light as is ordinary cost of the "Canton Incandescent Vapor Lamp." No cleaning, care, no noise, smoke or smell. It is the only fixture which lights in an instant with "one match." All others have the "alcohol torch," &c. Beautiful designs. Address:

M. R. BENN,

General Agent, Maritime Provinces,
DOUGLASTOWN, N. B.

50 YEARS' EXPERIENCE

PATENTS

TRADE MARKS
DESIGNS
COPYRIGHTS & C.

Anyone sending a sketch and description may quickly ascertain our opinion free whether an invention is probably patentable. Communications strictly confidential. Handbook on Patents sent free. Oldest agency for securing patents. Patents taken through Munn & Co. receive special notice, without charge, in the

Scientific American.

A handsomely illustrated weekly. Largest circulation of any scientific journal. Terms, \$3 a year; four months, \$1. Sold by all newsdealers.

MUNN & Co., 361 Broadway, New York
Branch Office, 625 F St., Washington, D. C.



STANDARD OF THE WORLD

*No other Serum German,
French or American, has
ever yielded such high
percentages of recovery*

205

CASES OF DIPHTHERIA WITH
ONLY 2 DEATHS

During the recent epidemic of diphtheria prevailing in Peekskill, New York, there were treated with Parke, Davis & Co.'s Antidiphtheritic Serum 205 cases, with only 2 deaths—a mortality of less than 1 per cent.

Use our Antidiphtheritic Serum in all exposed cases—it PREVENTS as well as CURES diphtheria.

MARKETED IN HERMETICALLY SEALED BULBS.

SOLE OFFICES
& LABORATORIES
DEPT. OF HEALTH
BOSTON, MASS.
BIRMINGHAM, ENGLAND
WALKERVILLE, ONT.

PARKE, DAVIS & CO

BRANCHES IN
NEW YORK, KANSAS
CITY, BALTIMORE,
NEW ORLEANS,
LONDON, ENGLAND,
& MONTREAL, QUE.

Write us at WALKERVILLE, ONT