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MONTREAL

Homœopathic Record

DEVOTED TO THE INTERESTS OF HOMŒOPATHY AND OF THE MONTREAL
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EDMOND JULIEN BARBEAU

Since the last issue of this journal there has passed away one of the staunchest friends of the Montreal Homœopathic Hospital. Edmond Julien Barbeau was a homœopath by the conviction of experience. He had seen in his own family the beautiful workings of the principle of Similia and ever thereafter was a vigorous and intelligent advocate of its merits. A man of conservative judgment and of logical mind, his convictions were always the result of a careful examination of all the facts and he was therefore a counselor of exceptional value. He was instrumental in founding the Montreal Homœopathic Hospital, was one of its first life governors; a contributor to the building fund and quite recently gave a very handsome sum toward the extinction of its floating debt. He was one of the most constant attendants at the Governor's meetings and gave valued counsel when points of difficulty were encoun-

tered. His presence at those meetings will be much missed and his place will be difficult of filling. He was one of the three trustees of the Hospital's Jubilee Endowment Fund and it will be the sad duty of the Board at its first quarterly meeting to elect his successor.

EXPERIENCE WITH APPENDICITIS

At this time of radical differences of opinion and practice in the profession in regard to appendicitis, the experience of Dr. R. N. Foster, as published in the May number of the "Medical Visitor," is very significant, to say the least.

Those who believe this dreaded disease may be best cured without the knife, will be glad to have so good an authority as Dr Foster on their side.

"I have no specific record of the number of cases coming under my observation during the past five years, but it is easily within the mark to say that in all there were thirty cases. Eight of these cases were seen by other physicians, and were classified without hesitation as appendicitis. If the diagnosis was correct in these eight cases, it was also correct in the remaining twenty-two, in which number I include no case that could be regarded as doubtful. Two of the cases were chronic and recurrent. The others were acute. Two were operated upon by very skillful surgeons. Both died. The operation was undertaken in both cases as a forlorn hope merely. No discredit should attach to the operation in either case, both being undoubtedly fatal without operation.

"I do not feel sure that all of the cases were to be classified simply as appendicitis. Peri- or para-appendicitis may frequently be the proper designation,

and without opening of the abdomen this cannot be decided.

"This I regard as a very large death rate—ten per cent. As a rule one or two per cent. ought to cover our losses in this disease. It is only the cases that begin with extreme violence and progress rapidly that are really dangerous. All others, whether acute or chronic, will surely recover perfectly under careful treatment.

"Resort to surgery in the early stages of the disease will necessarily increase the mortality.

"Surgical procedure ought to be limited to those cases which have reached a dangerous stage, whether this be early or late in the course. Only a few cases, say five per cent., ever reach this stage. The others will recover. Then why operate? It is not the time but the condition that indicates the surgical procedure. Symptoms of perforation or of threatened collapse surely call for surgical interference. I know of no other positive indication. There is no man living who can be absolutely sure enough of the conditions to say in any case, without the above indications, that the surgical procedure is necessary to save the life, or more certain to do so than any other treatment. On the contrary, experience proves to all of us that recovery is certain in at least ninety per cent. of all cases.

"There remains, then, on this exceedingly liberal basis of estimate, only ten per cent. of which the question of surgical interference ought ever to arise.

"As to the treatment, the diet is of greater importance in appendicitis than in any other acute disease, not excepting typhoid fever. Water, mutton broth and broth of salt cod-fish, ice-cream (made of cream) in small quantities, cocoa, black tea, olive oil, and not too much of these, are sufficient, and seldom harmful. Beef, chicken, eggs, shell fish, and solid foods generally are hurtful. So are broths of beef and chicken. The utmost quiet and rest are indispensable. Hot poultices are not now in high favor, but they will be again in due time; for no external adjuvant equals them in value. They are best when made of ground flaxseed, lard, turpentine and boiling water; and the more acute the inflammation the hotter they ought to be kept applied. They are said to be hotbeds of microbes. Perhaps they are. The fact does not impair their great value

in allaying pain and inflammation.

"The patient ought to be kept in bed until he is perfectly well. Here is where imperfect work causes the "recurrent" form of the disease. Thoroughly cured cases do not "recur." And they can be thoroughly cured; I know of none of the twenty-seven cases having had subsequent trouble.

"If a chronic or recurrent case presents, the cure again is diet, as overeating is probably the most frequent cause, even of the acute attacks. Not only overeating, but eating too rich foods, especially animal foods. The animal world does not suffer from appendicitis.

"The remedies most frequently used and found useful by me are veratrum viride, bryonia, colocynth, turpentine, chamomilla, merc. corr., lycopodium, silicea, belladonna. Opium ought to be given in sufficient doses to relieve pain and allow both the patient and the irritable bowel to rest. In doubtful cases this may obscure the diagnosis. But in doubtful cases this is obscure anyhow; and I would not recommend a laparotomy just to make it clear—especially as the patient is almost certain to recover. In cases that are free from doubt from the beginning or soon after, opium does not obscure, and it does aid the cure.

"I fear these views are not popular with the profession—just now. But I am asked for my experience, and here it is as plain as I can make it. I am consoled by the knowledge that we are all biased, or liable to be, medical men and surgical men alike. Several of my thirty cases were pronounced incurable except by surgical procedure, by eminent surgeons of large experience. But they are now quite well, nevertheless. And the sum of my conviction is that at least ninety-five per cent. of cases of appendicitis are bound to recover perfectly under rational dietetics, hygiene, and remedies. And I want to add, that of all the pernicious and dangerous things that can be done in a case of appendicitis, the giving of enemata or of purgative medicine is the worst." The Critique.

If a dog wants to bark, you can keep him quiet by holding his jaws shut, but the bark is still in him. So, when you give a man morphine, he may not know he is in pain, but the pain is still there.

AN OLD FRIEND.

What Homœopathic physician of experience has not become really attached to the old remedies that time and again have come to his aid, like faithful friends, in the time of need? When all else has seemed to fail, and a careful study points unerringly to a certain remedy which works a certain cure, one becomes attached to that remedy.

Time and again does every homœopathic physician have such experience with aconite, belladonna, bryonia, chamomilla, colocynth, ipecac, sulphur, and most of the other polychrests. But of all these much-used remedies no one comes to the rescue in time of need oftener than bryonia. Its action on serous membranes and the viscera they contain, makes it a most valuable remedy in rheumatisms, gouts, pleurisies, dropsies and pulmonary and liver troubles; and its lesser action on the mucous membranes makes it a frequently indicated remedy in a variety of diseases of the alimentary tract.

A man aged forty had a chronic pain in the right hypochondrium. This was not the sharp stitching pain, but was of a more steady and aching nature. It was, however, always worse on motion. Bryonia 3^x relieved in twenty-four hours, and in four days the pain was so thoroughly cured that it has not returned in eight weeks. This pain was of long standing, and had resisted the efforts of several physicians to cure it.

The exact pathology was not apparent. There was neither constipation nor jaundice, and the patient was not weakened or prostrated. But the pain presented a prime characteristic of bryonia, worse upon motion, and the cure was prompt and complete.

A woman aged 36, a recent convert to the Christian Science cult, had an attack of rheumatism about a year ago which lasted

six weeks. From this she never fully recovered, and notwithstanding her faith in Christian Science, she sought relief at my hands. Her hands were so swollen she was unable to close them, and her feet were so swollen and sore that she could not walk without limping. She was in good flesh and in other respects felt well. Years before she had suffered from periodical headaches which apparently came from a catarrh of the bile ducts. This condition was always relieved with iris 2^x.

I gave her bryonia 3^x and in a week she was relieved in every way. The first time for many weeks she could walk without pain, and the swelling in her limbs had all disappeared. She was greatly rejoiced over the complete relief she had received, and was profuse in her praises of homœopathy.

These two complete cures made my attachment for an old therapeutic friend all the closer, and more than ever before am I very careful to see that my bryonia case vial is well filled as I go out on my daily round to visit patients.

—The Critique.

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EARLY EXPERIENCES WITH BACILLINUM OR TUBERCULINUM.

By W. Younan, M.B., C.M. (Edin.)

(In Calcutta Journal of Medicine.)

About the year of my conversion to Homeopathy I hailed with delight the appearance of a new book by Dr. James Compton Burnett, of London, entitled "New Cure of Consumption with its own Virus." The impatience with which I waited for its receipt was only natural, considering the subject matter of the work and the promises for good that it contained. For who could be indifferent to the sufferings of thousands of consumptive humanity when medical science had proclaimed a "new cure of consumption," that fearful disease before which physicians had so often stood with bowed heads and folded hands.

The book arrived in time, and the eagerness with which I devoured its contents ensured my happy digestion of it. To secure a sufficient supply of the virus, which could not then be locally obtained, I wrote to Dr. Burnett for the same, and he directed Mr. Heath, Homeopathic Chemist of Ebury Street, London, to send me half an ounce of Bacillinum C. (one hundredth potency) in small globules, the very thing the doctor had been using himself. My satisfaction at having been so armed was immense, and I set about looking for cases to try the new remedy upon.

Some two or three months after there came under my care a young lady, fifteen years of age, suffering from continued fever of a remittent type. No impression could I make upon the course of the fever, which had already run into the third week with persistent high temperatures. One element of gravity seriously complicated the case: the heart was damaged from early childhood by a sharp attack of rheumatic fever, and there was present a loud mitral "bruit." At this stage typhoid symptoms supervened with an alarming diarrhoea and an incessant cough, which was short and dry. An allopathic physician, a mutual friend, examined the case with me, and gave a very unfavorable prognosis, the state of the heart arresting his attention particularly. The ordinary typhoid remedies had been given in vain, and I was resigning myself for the worst, when suddenly

a very bad fit of coughing suggested to me the possibility of the whole being latently tubercular. For I had repeatedly examined the chest for physical signs and could find none. What a straw is to a drowning man, so was the tubercular inspiration in favor of the administration of Bacillinum C. to me. Two globules were administered at my morning visit, and I left in fear and trembling for the possible loss of most valuable time. Imagine my surprise and delight, however, when on visiting the patient in the evening I found that the fever had been less high during the day, the number of stools diminished and the cough less frequent and troublesome. For the following days a placebo was prescribed, and I had the supreme satisfaction to note how slowly and yet surely the patient went into convalescence. A second dose of Bacillinum was not necessary. The young lady went up country for a change, and when some months after she returned to town, looking greatly improved, I made an examination of the heart and was surprised to find the mitral insufficiency less pronounced. I lost sight of her for over a year, when one day being called to attend her sister I found my interesting patient had just returned from school up country, where she had enjoyed the best of health. I questioned her as to the heart, and she informed me that that organ had given her less and less trouble as her general health had improved. A final examination conclusively showed me what I had never dared to expect: a complete restoration of the heart. Not a trace of the once too evident mitral bruit could be detected, and I have since learnt to believe in the curability of organic valvular disease of the heart. I have lately heard that the young lady remains in good health.

Not long after my experience with the case related above I attended the two youngest children of a family living in one of the healthiest localities in town. Both of them came down with continued fever, which, in the third week of its course, developed typhoid symptoms, those of the lungs and bronchial tubes being specially marked. Rhus tox., Arsenicum, Phosphorus and Sulphur had failed to benefit, and both the doctor and the patient were in a bad way. I well remember being called out one night to one of these children, as the mother had

became quite alarmed at her breathing and general condition. I cannot say why I questioned the anxious mother as to the milk supply of the house except that the wish to trace her children's disease to tuberculosis was father to the thought. Her answer was definite and assuring to the effect that the "goula" (milk-man) had been supplying very bad milk for two or three months, and that, in consequence, since the children's illness, she had been using condensed milk. I fear the stable door here had been shut when the horse had run away! However, I jumped to the conclusion that tuberculous milk was at the root of the children's typhoid fever, and what more was wanted than to give the little patients a hair of the dog that bit them! Two globules of Bacillinum C. were given to each and a placebo administered every three or four hours as a fever mixture. Bacillinum C. proved as true as steel, and that single dose of orthodoxly ridiculous magnitude was sufficient to kill the whole army of tubercular bacilli that had presumably invaded the organism of each sick child. Both children went into speedy convalescence, and I, their doctor, incurred a deep debt of gratitude to Bacillinum C., which has become deeper and heavier with subsequent years of experience with it.

I am also thankful to Dr. Burnett for having taught me the use of this very potent drug, without which many a morbid condition would remain incurable. Let others laugh at Isopathy and call it filthy and revolting. The Isopathic virus in the C. or CC. potency is as clean and inviting as the homœopathic vegetable or mineral drug, and acts as safely and pleasantly. Unlike our brethren of the opposite school we possess a very simple method for converting rank and deadly poisons into beneficent medicines. But that method is apparently too simple for learned orthodoxy! It is some consolation at least for us homœopaths to know that the researches of modern "regulat"

medicine tend towards Isopathy. If the virus of a disease can be so modified as to become a curative agent in that very disease, why cannot a vegetable or mineral drug be so treated as to have an effect on the sick body SIMILAR, if not IDENTICAL, to that which it can be shown to produce on the healthy body.

Here is Homœopathy in a nutshell!

Here is the law SIMILIA SIMILIBUS CURANTUR!

FOR THE SICK ROOM

An unstarched dress that does not rustle, a soft hand that knows how to rub and bathe an aching brow, that applies cold bandages for a fever headache and warm ones for neuralgia, is the hand that helps the sick to get well.

It is delightfully refreshing to burn a sprig or two of lavender in the sick room: it diffuses the sweet, elusive fragrance of an old garden, and is an English custom we might well adopt.

All stains should be removed before clothes are laundered. Soap is an alkali and sets vegetable stains. Remove a stain immediately if possible. Boiling water poured through fruit stains will cause them to disappear. Grass stains should be rubbed in kerosene or molasses. Tar or oil stains should be rubbed with lard.

A bottle of oxalic acid is a good thing to have in the laundry, to use when fruit stains do not yield to boiling water.

An added luster and whiteness is given to ironed articles by the use of turpentine in starch. One tablespoonful to one quart of starch.—Health.

If you want "good health" you must work for it. It seldom comes from toxic drugs, prayers, baths, drink or diet; but Nature has it ready for you if you will only earn it. Ask your doctor what you should do, not what you should TAKE.

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Dr. J. R. Kippax, Professor of Medical Jurisprudence in the Chicago Homœopathic Medical College, writes: "Radnor Water is an agreeable and exceedingly pure table water, and surpasses the leading German Waters in therapeutic value."

ANTI VIVISECTION.

The Inaugural Addresses at the opening of the Medical Schools, in connection with the great hospitals, were remarkable this year by the fact that several of the principal lecturers warned their audiences of the dangers which threaten medical education, by reason of the present rage for physiological research, which can exert little, if any, good influence in the curriculum of the doctors. Medicine is an art and not a science; it can never become a true science because the human body is not a test-tube in which certain re-agents always act in an identical manner. Yet strange to say, the theory of medicine which holds the field to-day is that which endeavors to reduce the healing art to certain laws and rules, like those which obtain in the chemists' or the electricians' laboratories.

The movement against physiological cruelty which daily gains strength in this and other countries is beginning to tell on the medical authorities, loudly as they protest against it as a crusade of sentimentalists and faddists. The influential, though relatively small, body of medical scientists who are striving to dominate our physicians, and control not only the medical but the lay press, are already aware of the real nature of the anti-vivisection movement. It is no longer possible to despise the crusade against scientific cruelty. There are signs that it must be reckoned with,

Dr. Byron Bramwell, delivering the introductory address at the Yorkshire College, Leeds, said:—

"There seems to be an impression that, from a scientific point of view, the results obtained from the observation of the effect of disease in the living man are on quite a different, an inferior, platform to the results obtained from the observation of the effects of experimental lesions in the lower animals. It seems too frequently to be thought that because an observation is made on man, and because it is clinical, or rather clinico-pathological, it is of comparatively little value. Generally speaking, far more importance seems to be attached to the experimental observations made in laboratories on monkeys and dogs, or even on guineapigs and rabbits, than to the clinical and clinico-pathological observations made in hospitals on man. Against this way of looking at the

matter, I desire to enter an emphatic protest."

Dr. Garret Anderson, at the London School of Medicine for Women, declared that the experimental "method in physiology does not necessarily include vivisection." While protesting that her school afforded its alumni the best possible medical education, she declared that "at this School there never has been any vivisection."

At a debate on vivisection, held recently at university College, London, the lecturers of the National Anti-Vivisection Society so ably presented the case against cruel experiments in physiological research, that an opponent was fain to confess that he would concede seven-eighths of the Anti-Vivisection case, but would take his stand for research on the fact that experiment was necessary for abstract science, leaving aside altogether its utility to practical medicine. It is openly admitted in the Vienna schools that the object of medical education is to train men to make an exact diagnosis, as for treatment of disease that is of no consequence. In the words of a professor, the object of a hospital physician is "to make a diagnosis of his patient's case during life and verify it on the post-mortem table."—Herald of Health, London.

SOME "HEALTH" RECIPES

GRAPE CATSUP

Grape catsup is an especially delicious table sauce, and is made as follows:

Boil seven pounds of grapes, merely pinched from the stems, and mashed a little, in a bowl set in a kettle of boiling water. When they have cooked in this way for an hour, strain through a sieve fine enough to keep back the skins and seeds. Add three and a half pounds of sugar, a pint of vinegar, a teaspoonful of cinnamon and the same of cloves. Cook the mixture until it is thick.

BAKED TOMATOES

Six large smooth tomatoes, one teaspoonful of salt, a little pepper, one tablespoonful of butter and one of sugar, one cupful of bread crumbs. Arrange the tomatoes in a baking pan; cut thin slices from the smooth end of each tomato, with a small spoon scoop out as much of the pulp and juice as possible without injuring the shape. Mix the

pulp and juice with the other ingredients and fill the tomatoes, then replace the slices. Bake three-quarter of an hour. Place on a platter with a cake turner. Garnish with parsley and serve.

CORN OYSTERS

One pint of grated corn, two eggs, one tablespoonful of flour, salt and pepper. Beat the eggs separately, add the yolks and then the beaten whites to the corn. Mix gently and season. Fry in small cakes on a griddle. When fresh corn cannot be obtained, canned corn may be used.

CORN OMELET

One dozen ears of corn grated, one cup of sweet milk, four eggs; beat the whites and yolks separately, add one tablespoonful of sugar, salt and pepper to taste. Lay bits of butter on top, and bake a rich brown. Stir the whites of eggs in the last thing.

FRIED CUCUMBERS

Cut large cucumbers in thick slices, let stand in salted water half an hour. Dip in egg batter and fry in butter.

SQUASH

Summer squash dipped in batter and fried brown, is a good substitute for egg plant. Season with pepper and salt and serve hot.

CAULIFLOWER WITH CHEESE

Boil the cauliflower whole, pour over a drawn butter sauce. Cover this with grated cheese, and place in the oven to brown.

PARSNIP CAKES

Scrape, boil, and mash four parsnips. Season well with butter, pepper and salt. Make into round flat cakes and fry.

PRUNES IN JELLY

Half box gelatine soaked in half cupful cold water one hour. Take two coffee cupfuls of large prunes and wash them in three waters, rubbing them well between the hands. Then put them in a

saucepan with one pint of cold water and simmer slowly one hour and fifteen minutes. Then skim the prunes, carefully remove the stones, and put the prunes back into the water they were cooked in, and let them boil up once. Remove from the fire. Now add the soaked gelatine, stirring until all is dissolved. Then add a coffee cupful of granulated sugar, juice of two lemons. Set in a pan of ice water and beat the mixture well until it begins to harden. Then pour into a mould and put in cool place. Serve with whipped cream.

WHOLE WHEAT MUFFINS

One pint sweet milk, one pint flour, three eggs, one and one-half spoons baking powder. Put a piece of butter in each hot gem pan.

SCOTCH PUDDING

Two cups of bread crumbs, one cup of cold water, one cup of flour, two heaping teaspoonfuls of baking powder, one well beaten egg, pinch of salt. Steam two hours.

Sauce for this pudding is made as follows:

One cup of sugar, one-half cup of butter beaten to a cream, one large spoon of flour rubbed smooth in cold water. Slowly add a pint of boiling water, and stir until smooth.

GRAHAM BREAD

One cup of brown sugar, one cup of molasses, one quart of tepid water, one teaspoonful of salt, one teaspoonful of soda. Graham flour to make a stiff batter. One cup of yeast. Add yeast last after mixing ingredients together. Put in pans and let rise well before baking. Bake slowly.

CREAM GINGERBREAD

One cup of sour cream, one cup of molasses, a pinch of salt, two even cups of flour, heaping teaspoonful of soda. Beat thoroughly. Flour the pan.

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CORN SOUP

One can of corn will make enough soup for six persons.

Boil the corn in as little water as possible for twenty-five minutes. Then put through the colander, saving the water the corn was boiled in. Press corn thoroughly through colander. Add quart of milk to juice of corn. Season with pepper and salt. Thicken with little flour or corn starch.

A great many of us could be happier than we are if we would cultivate the art of being happy. One thing to do is to refuse to allow to enter into the stream of consciousness, the painful and uneasy feelings that come to us through our senses. This is best done by calling up other and more agreeable feelings. It may be difficult at first to do this; but in the end success will come to those who will it.

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