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# Stearns' Wine of Cod Liver Oil

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## Stearns' Wine of Cod Liver Oil

Is one of the most popular remedies  
in the physician's armamentarium.

## Stearns' Wine of Cod Liver Oil

Is not a fatty food, but a metabolic  
stimulant.

## Stearns' Wine of Cod Liver Oil

Improves the appetite and digestion,  
and by stimulating the cell activity  
of the tissues eliminates poisonous  
materials from the system and builds  
new tissues from good food.

## All Authorities Admit

That the "alterative" virtue of Cod  
Liver Oil resides in the extractive, not  
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COD LIVER OIL contains the ex-  
tracts, not the fat.

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Is the source of the extractive. It  
exists in the oil only to the extent  
that oil is a solvent for it. STEARNS'

WINE OF COD LIVER OIL is  
prepared from carefully selected, *fresh*  
livers containing the oil, by a process  
of elimination by which the nauseous  
fatty matter is rejected and the active  
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OIL with it to assist their assimila-  
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ducts of tissue decomposition result-  
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the body of the patient and poison  
the system.

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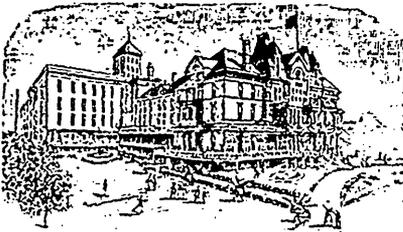
WE wish to draw attention to the advertisement of the Medical Practice Office, in this issue. Dr. Hamill, who is conducting this important department of medical affairs, presents chances each month which must be of much value to prospective buyers or sellers, or to those contemplating a change of location, and we advise such physicians to read it carefully each month.

**OVARIAN DERMoids:** "KUSTER'S SIGN."—Maudestamm (*South Russian Medical Gazette*) notes Kuster's teaching that ovarian dermoids rise out of the pelvis when much smaller than other tumors of the ovary which ultimately rise into the abdomen; they lie on the median line in front of the uterus, and if pushed sideways or downwards soon slip back to their usual place. In two cases Maudestamm observed this symptom, and

explains it by the low density of dermoids, which causes them to rise above the heavier pelvic viscera. In a third case, diagnosed by Kuster's sign, he dropped the dermoid into a basin full of water, and observed that it floated. A small ovarian cystoma or adenoma with the usual fluid contents will not float, but the oily liquid and hair in a dermoid are, it appears, not so heavy as the ovarian fluid and the contents of proliferous cysts.—*Brit. Med. Jour.*

MR JAS. CHRISTIE, the genial and popular western agent for the well-known firm of Fairchild Bros. & Foster, of New York city, whose headquarters were in Chicago, died at Duluth last month from typhoid fever contracted while on his vacation. The firm was represented by three of its members, and paid the entire expense of the funeral.

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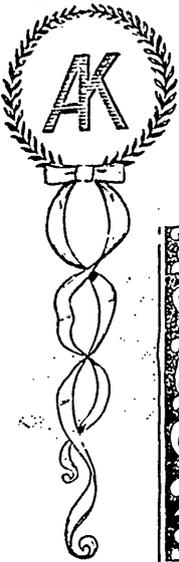
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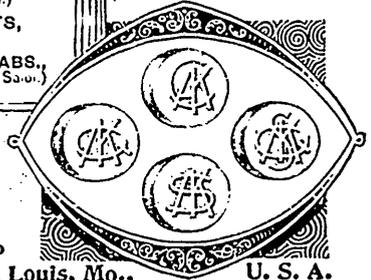


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LAPAROTOMY FOR PERITONEAL TUBERCULOSIS.—G L'Urso (*Il Policlino*) reports the case of a woman, aged twenty-six, who had been ill eight months, and had ascites for the last three months. Paracentesis was performed twice and six or seven litres of yellowish sero-fibrinous liquid withdrawn, containing 6 per cent. albumen, and paraglobulin; no tubercle bacilli were recognized. The patient improved somewhat after the second tapping, but this was only temporary, and laparotomy was performed on January 22nd, 1894. The fluid was found encysted, and there was abundant evidence of tuberculosis. The patient was much relieved by the operation. Tuberculous disease, of which there was slight evidence before operation, now developed in the left ring finger and in the right thigh, and twenty days after the laparotomy these fresh localizations

of the disease were operated upon radically. Twenty-three days after the second operation pain was felt in the left elbow; as this progressed arthrectomy was performed thirty-two days after the second operation. After this the patient rapidly recovered health and strength, and now, twenty-one months after the laparotomy, she has suffered no relapse, and is in perfect health. Inoculations into guinea-pigs, etc., of the fluid withdrawn from the abdomen clearly demonstrated the true tuberculous nature of the disease.—*Brit. Med. Jour.*

A CLAIM ON THEIR GRATITUDE.—Young Dr. B. is run down with business. "You must earn a mint of money," said a friend to him one day. "Not at all; my patients don't pay." "No? But their heirs ought to stand something handsome."—*Judge.*

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Foods are valuable because they become part and parcel of every tissue.

It is natural to look for an active principle in the former.

It is useless to look for an active principle in the latter.

Five grains of the active principle of a loaf of bread could never supply the material for building up tissue equal to that furnished by an entire loaf!

Cod-liver oil is largely a fat-producing food, possessing special and peculiar advantages distinct from all other foods.

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BACTERIOLOGICAL and strength tests of diphtheria antitoxic serum, as reported by Robert L. Pitfield, M.D., Assistant Bacteriologist of State Board of Health of Pennsylvania. (*Public Health*, August, 1896.) A number of samples of diphtheria antitoxic serum were purchased in the open market, and submitted to bacteria examinations, both for live bacteria and for the number of antitoxic units advertised to be contained in each. The method of testing pursued in brief is as follows: The specified amount of antitoxin together with toxin (ten times the minimum fatal dose) was injected into a guinea pig of known weight and good health. This animal was weighed and observed daily until he recovered or died, as the case might be. If it recovered, and the antitoxin and toxin in proper relative strengths had been injected, the antitoxin was up

to advertised strength; if it died the antitoxin was not of strength claimed. In the following table the results of these experiments are shown. Control animals injected with the minimum fatal dose of toxin alone, died in from five to ten days. A sample of antitoxin said to contain 200 units per c.c., made by Behring, was not up to strength. A sample of antitoxin said to contain 100 units per c.c., made by Schering, was up to strength. A sample of antitoxin said to contain 500 units per c.c., made by H. K. Mulford Company, was up to strength. A sample of antitoxin said to contain 250 units per c.c., made by H. K. Mulford Company, was up to strength. A sample of antitoxin said to contain 100 units per c.c., made by Pasteur Institute of New York, was not up to strength. From the above report it will be seen that Mulford Company's antitoxin is not alone up

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"Standard" No. 1, (100 units to each cc.) in vials of 500 units, \$1.00; No. 2, 1000 units, \$1.75; No. 3, 2000 units, \$3.25  
 "Potent" No. 1, (250 units to each cc.) in vials of 500 units, \$1.25; No. 2, 1000 units, \$2.25; No. 3, 2000 units, \$4.00  
 "Extra Potent" No. 1, (500 units to each cc.) in vials of 500 units, \$1.50; No. 2, 1000 units, \$2.75; No. 3, 2000 units, \$5.00

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to the strength claimed for it, but is more concentrated than the other samples tested, and in this respect more fully complies with the recommendations of the American Pediatric Society, in which they endorse not only the use of antitoxin, but advise that the most concentrated strength of an absolutely reliable preparation be used.

POISONING BY CHLORATE OF POTASSIUM.—Feller (*Med. Corr. Bl., Stuttg.*) relates that a nervous but otherwise healthy woman suffering from heartburn, took by mistake for bicarbonate of soda, a heaped teaspoonful of chlorate of potash, and again half an hour later the same quantity. She was soon seized with violent vomiting and severe abdominal pains, especially about the kidneys, followed by strangury and anuria and cyanosis of the extremities. Her skin was cold; her pulse almost imperceptible; the heart's

action irregular; respiration slow; but her intelligence was unaffected. Under artificial warmth and cardiac restoratives the pulse improved, and the next day she passed a small quantity of highly albuminous blood urine after severe nephritic colic. She could retain nothing on her stomach, but was given nutrient enemata, and on the third day the urine, though still scanty, and passed with pain, was less albuminous, but the heart's action remained irregular. On the eleventh day, against the doctor's orders, she got out of bed, fell down insensible, and very soon expired. No necropsy was permitted.—*Brit. Med. Jour.*

Doctor—"I guess it yaint so serious, aunty; wid a little care I reckon de ole man 'll pull through all right." Aunty—"Tank heaben, doctor! I was awful skeered, 'kase dar warn't a cent in de house fo' to buy enny mournin' wif."—*Judge.*

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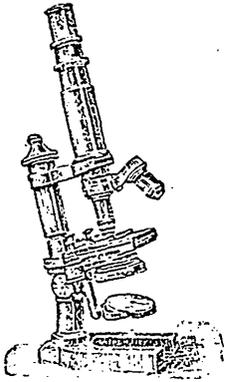
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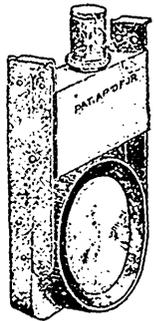
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**PROSTATIC ENLARGEMENT.**—Ciechanowski (*Centralbl. fur Chir.*) publishes the following results of an inquiry lasting over two years into the so-called hypertrophy of the prostate, and the anatomical conditions of senile insufficiency of the bladder: (1) Arterial sclerosis cannot be regarded as a cause of the morbid changes in the kidneys, bladder and prostate, which, according to Guyon, constitute a diffused morbid condition called by this surgeon "prostatism." (2) The anatomical basis of the insufficiency of the bladder in every case presenting the clinical characters of the so-called prostatism is a quantitative change in the relation of the vesical muscular structure to the connective tissue. (3) This quantitative change is a regular phenomenon of advanced age, and increases in intensity as the patient gets older. It has reached a high degree when the discharge of urine is prevented by

mechanical obstruction, and a still higher degree when a chronic inflammatory condition of the bladder has been established. Unless in very exceptional cases, it is only with an association of these three morbid conditions that any serious urinary trouble occurs. Such urinary trouble may be prevented to some extent by the compensatory hypertrophy of the vesical muscles which usually co-exists with the presence of a mechanical obstruction. The so-called hypertrophy of the prostate which, in the author's opinion, is the first stage in the morbid condition known as prostatism, is regarded not as a homoplastic new growth, but as the result of a chronic inflammatory process affecting sometimes the glandular portion, at other times the stroma, but most frequently both these elements. The occurrence of prostatic enlargement, which is not an invariable result of this inflammation, depends

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on the intensity of the process, and, above all, on the parts of the gland most affected. The more the glandular portion is involved the greater is the tendency to enlargement of the prostatic gland.—*Brit. Med. Jour.*

COPY of the editorial taken from the Philadelphia *Medical Council*: "During the late war, while dysentery was epidemic in the Southern States, it is said that a large proportion of those treated by the profession, in the then prevalent manner, died; while of those who were too poor to employ a physician, and were treated with infusion of white oak bark, the greater number recovered. Mr. S. H. Kennedy, of Johnstown, N.Y., makes a very fine extract of white oak bark for medicinal and surgical uses. For particulars, etc., address Llewellyn, Prescription Pharmacist, 1410 Chestnut Street, Philadelphia, Pa."

TREATMENT OF GANGRENOUS HERNIA.—Bogdanik (*Centrabl. für Chir.*) reports a case of prolonged and neglected strangulation of a femoral hernia in which gangrene of the constricted bowel was treated by enterectomy, and end-to-end approximation by the Lembert-Czerny method of suture. The patient—a woman aged thirty-six—made a speedy and complete recovery. The author insists on the importance in such surgical treatment of rendering the strangulated loop and the surrounding soft parts as clean as possible by antiseptic applications, before the stricture is divided or any communication established with the peritoneal cavity. It is pointed out that usually in cases of gangrenous hernia, notwithstanding long continued strangulation and complete death of a portion of bowel, both fever and symptoms of general peritonitis are absent. When death follows surgical treatment in such

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cases there can be no doubt that the fatal result is due to infection of the peritoneum during the operation. Thus it is necessary before opening the abdominal cavity to convert the foul and septic hernia into a clean wound by energetic cleansing with carbolic solution and sterilized gauze. In the course of his remarks on the treatment of strangulated hernia the author advocates prompt resort to a cutting operation without any previous attempt to effect reduction by other means. Taxis he regards as more dangerous than the use of the knife, as it necessitates more or less violence, and deprives the patient of a suitable opportunity of the benefits of an operation for the radical cure of the hernia.—*Brit. Med. Jour.*

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eight weeks he was completely recovered, having no cough, no crepitation, or other symptoms or signs. L. I. H—, had scrofulous adenitis. He also had a scrofulous disease of the ear. These afflictions gave his parents great trouble and they desired me to put him under treatment. He was eight years old. He was given two teaspoonfuls of Stearns' Wine of Cod Liver Oil four times daily before each meal and on going to bed. It began to exert a good effect on him at once—that in a week's time, and after he had used the treatment for seven weeks he was apparently cured. L. S. A. B—, had sustained an injury to her foot. She got, as a consequence of this injury, into a serious condition—general malassimilation. She was given Stearns' Wine of Cod Liver Oil in tablespoonful doses four times daily. This she could take readily, as it agreed with



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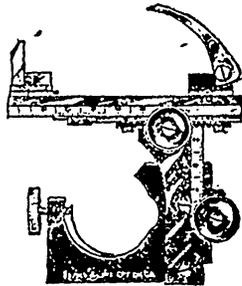
her. Under it she gained the flesh she had lost and the injury soon was relieved. I have other cases on record in which the effect of Stearns' Wine of Cod Liver Oil has been used with the most satisfying results. It is a most eligible preparation of Cod Liver Oil. These cases could not tolerate Cod Liver Oil.—*The New Idea.*

**DECIDUOMA MALIGNUM.**—J. Neumann, of Schauta's clinic, summarizes (*Wien. klin. Woch.*) the present state of our knowledge on this subject. The first symptom is, in the majority of cases, menorrhagia coming on at a most variable period after parturition; this is usually profuse, and since it is due to the opening up of vessels by the growth of a tumor, is not, as a rule, amenable to ordinary hæmostatic treatment. The patient soon becomes anæmic and cachectic, and the tumor increases in

size with great or less rapidity. Metastases appear in the vagina, but may be removed in many cases with permanent recovery; if, however, foci are set up in the lungs hæmoptysis occurs with a rapidly fatal issue. Infection takes place through the blood stream. The history of an untreated case is that of an extraordinary malignant uterine tumor leading to metastases through the blood stream, severe anæmia, cachexia and death. If the patient is to be saved the diagnosis must be made early, and depends upon the history, the hæmorrhage, the enlargement of the uterus, and the detection of a tumor within it; the disease can, however, at this period be absolutely diagnosed only by the detection of the typical deciduoma tissue in a scraping. It must be remembered that any pregnancy may be the starting point of a malignant deciduoma, the symptoms of which have already been enumerated,

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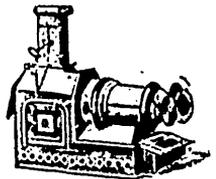
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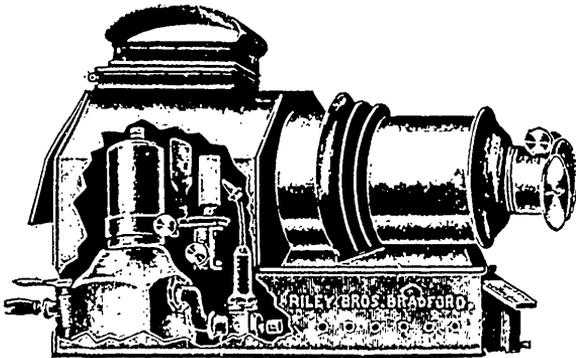
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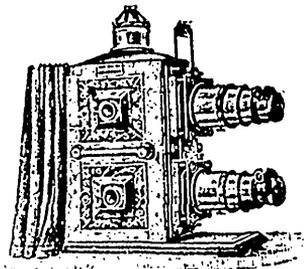


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and the corollary is that every puerperal woman requires medical attention until the flow of blood from the uterus has permanently ceased. Microscopically, the author adheres to the views laid down in his book on the subject, that both syncytial and ectoderm cells enter into the formation of the tumor. The former spread mainly between the muscle fibres, but the latter take on the characters of a typical epitheliomatous growth; both kinds of cells are intimately bound together, and both spread into the blood vessels. Hence a malignant deciduoma belongs histologically to the carcinomata, but pathologically to the sarcomata, exhibiting, however, sufficient deviation from the normal in its mode of growth to warrant its being placed in a special class. The recent researches of Metteus show that while the syncytium arises from the uterine epithelium, Vaughans's layer is derived from the fetal octo-

derm, and we have, therefore, the extraordinary circumstance of foetal elements proliferating in the maternal organism, which Neumann considers the most interesting discovery, from the scientific point of view, which the study of the subject has so far elicited. —*Brit. Med. Jour.*

SANMETTO IN AFFECTIONS OF THE GENITO-URINARY TRACT.—Dr. Robt. Park, M.D., L.F.P.S., Glasg., L.S.A., M.R.C.V.S., etc., 288 Argyle street, Glasgow, Scotland, says: "I find in Sanmetto an extremely elegant preparation, and one very effectual in remedying those medical affections of the genito-urinary tract for which it is especially designed. I was particularly pleased with its successful action in a case of irritation of the bladder neck, and frequent micturition and incontinence in a young adolescent female."

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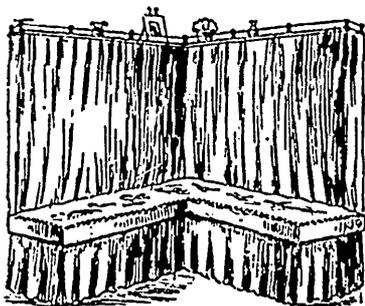
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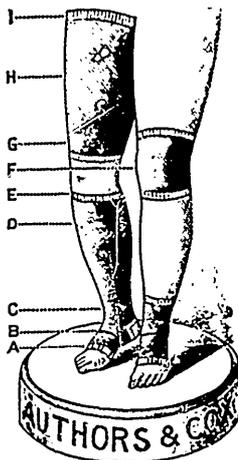
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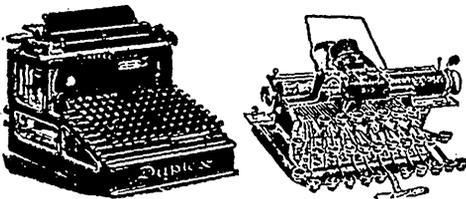
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WE are indebted to the bacteriologists for many things, but they have taught us nothing of more practical value than the lesson that a large number of our minor complaints, and a thousand-and-one of our aches and pains, which make life miserable, come from auto-intoxication. The ever present germs in the alimentary tract manufacture their toxins and these are absorbed much to the distress, if not to the actual danger, of the individual. The good old-fashioned theory that you must "keep the bowels open" if you wish to enjoy perfect health thus finds a scientific explanation in these latter days. It is now simply a question of common sense: keep the alimentary canal free from the poisons of germ life. You cannot do this better than by using California Fig Syrup. It is pleasant to the palate, and prompt to give relief.

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THE PASSAGE OF X RAYS THROUGH THE TISSUES. — Battelli (*Archives Italiennes de Biologie*) has investigated the transparency of the tissues and body fluids of man and other animals. He gives tables of the densities and transparencies as compared with water of thirty-five body solids and nine body fluids. Of the former, lungs and fat are the most, and horn and bone the least, transparent; of the latter, the two ends of the scale are formed by the aqueous



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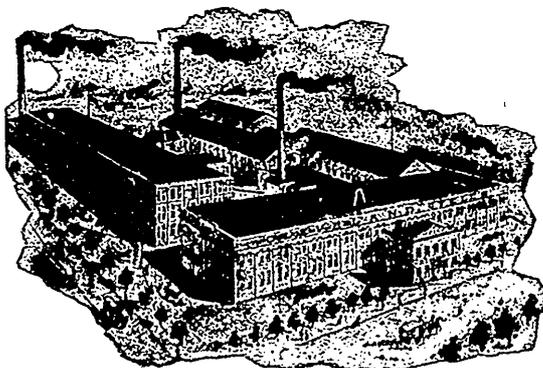
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humor and milk. His general conclusions may be thus summarized: The transparency of the tissues to Roentgen's rays varies in general inversely as their density, but there is no exact proportion between the two. There are three chief exceptions to this rule—tendon, blood and skin being more transparent than other and lighter tissues. It appears that in liquids the quality of substances in solution exerts no appreciable influence provided that the density remains the same. The transparency of a given tissue diminishes with, but less rapidly than, increase in its thickness. By an ingenious apparatus Battelli has also shown that the retina is for all practical purposes insensitive to the X rays.—Dutto (*ibid*) records that observations on the opacity of calcium salts to the rays induced him to inject calcium sulphate in the form of plaster-of-paris into the brachial artery. The substance was sufficiently liquid to penetrate the smallest ves-

sels, and when it had set a skiagraph showed that the vessels had become more opaque than the bones themselves. The interosseous vessels, and even numerous little muscular branches, could be distinctly seen, and the author concludes that the method will be of great service in anatomical investigations and demonstrations.—*Brit. Med. Jour.*

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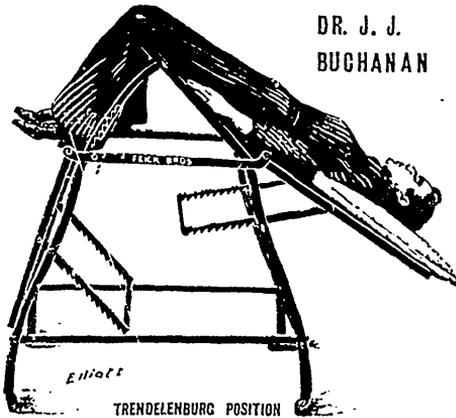
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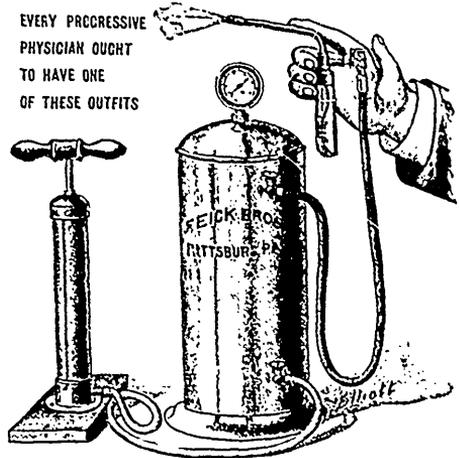
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VOL. VII.

TORONTO, OCTOBER, 1896.

NO. 4.

**PROCEEDINGS OF THE  
 COUNCIL.**

This year the proceedings will be found, notwithstanding the efforts that were supposed to be made to reduce the time and speech-making, to be not so very far behind those of last year in point of length. Yet it is interesting to read the medical Hansard, and become acquainted with those grave questions which are agitating the profession's representatives.

\* \* \*

There seems to be an undercurrent pervading the whole Council proceedings; it might be putting it too strongly to say that much of the discussion and some of the actions in Council seem to emanate rather from a desire for factional triumph than unselfish efforts to benefit the profession. Our point of view, of course, may be diametrically opposed to that of many members in the Council and the profession, and amongst the former are certainly

some most able controversialists, and all will find the columns of the medical press, so far as this journal is concerned, just as open to them as the newspapers.

\* \* \*

One of the earliest items we notice is the exclusion of Dr. Geikie from the Education Committee. While we may not agree with the Doctor in everything, there certainly is no doubt that he is one of our oldest medical educationists, and represents the largest body of medical students of any single school in this Province, and we certainly think it unfair and wanting in good taste that he should be excluded from this committee, where of all others his services would have been most valuable.

\* \* \*

With the large amount of discussion, following this, about sending a free journal to the profession we have very little to do. This journal took over the journal which was under contract with the Council, and we are

not responsible for any sentiments by any one but ourselves. As the proceedings go on we will take up the different points, making our position, we hope, sufficiently clear, and we do not think that it will be one that will differ from that which we have always held.

\* \* \*

The next point of interest was the motion by Dr. Shaw to amend By-law No. 70. and was a move in the right direction. It was to the effect that where the by-law said "that members or officers of the Council should receive \$12.50 per diem for days necessarily absent from home," there should be inserted in lieu thereof the words "\$10.00 per diem for every day's actual attendance at the Council's annual session." Dr. Shaw fairly upheld his contention, and showed from the receipts and expenditure of the Council that they were running behind at the rate of a thousand dollars a year, and that it was high time that they should economize, and what was much more to the point, asked them to start the good work at home. Dr. Armour followed and approved of Dr. Shaw's motion, but said that it did not go far enough, that the members should serve on the Council on account of the honor done them by the profession in electing them as their representatives. With this we heartily coincide, but the Council apparently would not, as they voted down even Dr. Shaw's amendment. We would suggest to the gentlemen who are actually in favor of this change in affairs, that the simplest way to give an object lesson to the other members of the Council and the profession at large, is for them to forego their sessional indemnity for one or two years, and we have no doubt that they will be upheld by the profession, and the principle unanimously supported at the next elections.

## "DRY GOODS DRUGGISTS."

—

In the *Globe* of Friday, October 2nd, we see a great display ad. of the T. Eaton Company. One of the catch-lines is, "No Substitution Here," and they go on to say that "there is one word we can say for our drug department, which every doctor in Canada can appreciate. We never juggle with life and health for the sake of a few more cents' profit. When your physician writes his prescription for P., D. & Co.'s phenacetine, for instance, we give you that precise make or we give you nothing."

We are quite sure that every doctor in Canada will appreciate this. In the first place, P., D. & Co. don't make phenacetine, which is quite a joke in itself. In the second place, we are sure that every physician will appreciate becoming a sort of annex to Eaton's big store. In the third place, physicians will appreciate the kind of accuracy in the drug department that is likely to follow the charming inaccuracy of their announcements. In the fourth place, it is simply a scandal and a shame that a concern like this should be able to drag in the name of a reputable house, because, while their intentions may be perfectly good, the impression is produced on the public and the profession that they regularly handle Parke, Davis & Company's preparations. Now it is no advertisement of Parke, Davis & Company to say, what is well known, that they are probably the largest drug house in the world and one whose success has depended solely upon their reputation for furnishing precisely what they claimed, to the profession, and it is a shame that their name should be used in connection with the advertisement of a concern which *cannot* do precisely what they claim in their advertisement: that is, furnish P., D. & Co.'s phenacetine.

# Proceedings of Meeting of the Medical Council of Ontario, June, 1896.

(Continued.)

only, and I have always thought that a sessional indemnity was the only way you could get at the matter. (Hear, hear.) Further than that, on the other side of the question, the idea that certain parties on this side of the House are, or a section of this chamber is to be held responsible for the prolongation of the session of last year I resent at once, though I will admit that we were here last year an unreasonably long time and we incurred a fearful lot of expense—I felt it at the time and expressed myself on it. But why did we go home from this Council chamber to return at a future date? It was because the committees had not reported, and we could do no further work in this Chamber until the committees reported. Go back to the position of those committees and you will see that in every committee the parties alluded to as prolonging the session were not only in a minority, but they did well if they had a single member on any committee, therefore they did not control those committees and consequently Dr. Harris' remarks with regard to the prolongation of last year's session are entirely out of place.

Dr. HARRIS—I do not think so.

Dr. BURTON The charge has been made that certain committees were responsible last year for the prolongation of the session, for our going home and returning at the end of a week or ten days.

Cries of "Question, question."

Dr. BURTON—I rise to a question of privilege—

The PRESIDENT—You have a right to speak.

Dr. BURTON—As I said before, the statement has been made that the session of last year was prolonged, and unnecessary expenditure incurred because the committees had not done their duties—

Dr. THORNTON—No. I said a great amount of expenditure. I didn't say, "unnecessary expenditure."

Dr. BURTON—The inference would be drawn by any reasonable or sensible man that that was what you meant; one could draw no other inference; you were not speaking in a conversational, but in a criticizing tone.

Dr. THORNTON—No; I was speaking to Dr. Harris' remark.

Dr. BURTON—I speak regarding my own committee, the Educational Committee. I think it must be acknowledged by every member that was on that committee last year—and the personnel this year is very much the same—that there was more work brought before that committee than had been probably in the last fifteen years (hear, hear) and I think it will be endorsed by certain members who are called by themselves the "opposition"—I do not wish to use that term—I think Dr. McLaughlin and Dr. Sangster will both corroborate me when I say we had an immense amount of work to do, and my co-laborers worked hard and well to get the work through; and I know that I sat up to two and three o'clock almost every morning through the session of that committee and in the interim of the week or ten days; and this year, for that very reason, anticipating possibly the same amount of work, and knowing it was too much for one person to do, no matter what his physical capacity was, I declined the position of chairman, until it was very kindly suggested by certain members of the committee that a sub-committee should be appointed to assist me in doing this work. It must be obvious to all present that it was a very unfair charge for a member to make so far as the Educational Committee were concerned, and I think the other committees carried forward the work as well as they could. I do not know that I have stated heretofore, but I will say it now, that there were certain members in this room who were given to carping and speaking on little technicalities that did not amount to as much as a tinker's curse. I could name one of those members, a gentleman that raised a row here that lasted for half a day, and there was so much done in the way of scavenger work that eventually it was an open secret that those who acted as the scavengers were glad enough to go, or propose to go to certain of the leading papers in this city to suppress the language they had used and to keep it hidden, that they had done what was an imprudent and unwise thing.

Cries of "Names, names."

Dr. BURTON—I am not called upon for a name. Every member of the House will know who I mean.

Dr. McLAUGHLIN—Is that parliamentary language?

The PRESIDENT—I think Dr. Britton will withdraw the words "tinker's curse."

Dr. BURTON—I will use the words "tinker's condemnation." I do not want to take up your time, because it costs us \$70.00 or \$80.00 an hour for our discussions here (I perhaps have spoken ten minutes) and I am not going to speak any further, for I think I have exonerated myself and my committee; and I think I was perfectly justified in standing up for my own honor, dignity and integrity.

Dr. SANGSTER—I rise to a point of privilege. We have been charged here with being the cause of the length of last session. The charge was openly made by Dr. Harris that our speeches were the long speeches of the session; and in anticipation that Dr. Harris or some other body might make that charge, I have made a calculation which I will state, and which is open to verification by any member of the Council who has the Announcement before him. If you will take your Announcements and count the lines appropriated to the speeches of the five Defence men, Drs. McLaughlin, Armour, Thornton, Reddick and myself, and take the speeches made by the present President of the Council, by Drs. Britton, Williams, Moore and Campbell, you will find that the aggregated speeches of the five Defence men come to rather less than 4,400 lines, while the aggregated speeches of the five gentlemen named come to 4,800 lines, or one-tenth more. I hope Dr. Harris will take note of this and feel rather ashamed of what he said.

Dr. HARRIS—I do not retract anything that I have charged, and I believe it to be true that they obstructed the Council right through the session last year.

Cries of "Question, question."

Dr. McLAUGHLIN—There have been some very hard words used by four or five of us here, and I rise to a question of privilege. I want to express my extreme regret that these unkind words should have been introduced into the chamber; I am sorry we should spend this little half hour in the use of such language. So far as misconduct or my part in the last session is concerned, I cannot look back and see that I was guilty of any impropriety in the course that I pursued. I do not know that I did anything that any member could truthfully apply the word "scavenger" to. We came here to discharge a certain duty and we have endeavored to discharge that duty. You will all confess there were a good many irregularities going on in this Council before we came here that have been rectified—

Cries of "No, no."

Dr. McLAUGHLIN—I think when the profession know what we have done that such language as Dr. Britton has applied—but I won't refer to that further, because I understand he has withdrawn it, but we cannot discuss questions here openly and quietly if the use of such language as we have listened to to-day is permitted, and I hope this will be the last.

A voice On both sides.

Dr. McLAUGHLIN—Yes, on both sides.

Dr. THORNTON—Speaking on behalf of the Finance Committee, and one or two other committees, I want to say that any cause of delay was not attributable to us. It may have been to some extent due, perhaps, to the desire on the part of one or two new members to know more about our affairs than they already knew, that made them very anxious and oftentimes delayed our meetings very much, but as far as we were concerned there was no unnecessary delay.

Dr. SHAW—I think I have a right to make a remark or two. Without any desire to delay the Council I want to say in the first place that I am exceedingly sorry if by the introduction of this bill I have created a little unnecessary feeling on the part of the members of the Council, either on one side or the other. I regret that anything of that kind should be the result of a bill introduced by me. I am aware there are many ways of reducing the expenses of the Council; one way would be to make the Council just about one half as large as it is. Without going into details, it seems to me that is a serious question, and one which must come up at an early date. The Council is too large, it is unnecessarily large—

Dr. BRAY—That is not the question.

Dr. SHAW—When I sat down before and listened to the early remarks of Dr. Armour, I was under the impression I would get some support for my proposed amendment to By-law No. 70, but I find now that I stand entirely alone on this question. My idea is not that we should give our services entirely gratuitously, but we should have sufficient remuneration that there would be no financial, no pecuniary loss to any member of the Council by attending here. The position was always intended as an honorary one, and the amount of money is not a remuneration or fee for our services, but is simply an honorarium. I said I hoped I would get more support when I listened to the remarks of Dr. Armour, although I had no conversation with him on the subject, in one way or the other; I hoped he would agree with the views I have referred to. I am not wedded entirely to the terms of my by-law; my own idea would be \$8.00 per day for the days in actual attendance, with a mileage allowance as at present arranged, which in a session of five days' duration would make a saving to the Council of \$900.00, and \$900.00 every year is a consideration in our present financial condition, and I would be quite willing to go that far. However, I introduced the by-law in such terms as I thought would be acceptable to a majority of the members of the Council. Dr. Bray was kind enough to refer to me a little while ago, saying he was sorry to see me put so little value on my time. I do not put so little value on my time, and I think the citizens of Hamilton, if Dr. Bray desires the information, put as much value on my time as perhaps the citizens of Chatham and the surrounding country may put on his. At any rate I am

not ashamed of the value which they put upon my time. My constituents have never spoken to me on this subject, but I have spoken to one or two of my constituents before coming here and told them what my views were, and I think the men who are the best men in the constituency quite agree with the idea that we should not have a full remuneration for our time here, that we should simply accept an honorarium. I have no desire to bring this up for the sake of playing to the grand stand. My friend, Dr. Harris, whom I have known for twenty years and more, will give me credit for something else than that, because he is an old friend of mine, and I know he would not say quite so strong words about me when he reflects. I might say now, that I am not playing to the grand stand at all, and whether the Council will give me credit or not for being conscientious in bringing this matter up, I have brought it up because I believe it is in the interests of this Council and in the interests of the profession. I believe that to begin to curtail our expenses we should begin at the fountain head.

Dr. WILLIAMS—I have not spoken on this by-law perhaps for the reason I have a great deal of sympathy with Dr. Shaw in introducing this by-law; I am aware that last year when the Council came to what seemed to be a unanimous position on the subject that Dr. Shaw, while he did not take active opposition, did not feel at the time that he was just perfectly satisfied with the matter. When it was brought up here a good many of us thought an amendment might be brought about in some way, and it was referred to a Committee of the Whole and from them to a special committee, and after that special committee had discussed the matter from one standpoint and another they arrived at a certain conclusion, and that conclusion was finally embodied in a by-law and was adopted by the Council. While there might be certain views in that with which I do not feel harmonious myself, some that I think might be amended and might be changed, yet the committee agreed, making concessions on one side and the other, that they would come to a certain report; they made that report to the Council and the Council adopted that unanimously, and having done so I feel disposed to stand by the position the Council took until we have the matter further investigated and see further reason why we should make some change. We have not found that reason yet; our Finance Committee has made no report to the Council to show us in a better or worse position than we were at the time we adopted that by-law last year, and before we should be asked to change from that and take a step lower or any other step, we should know there is a good and sufficient cause for that beyond question. I do not sympathize very strongly with Dr. Sangster in the views that he has expressed, and I want to say this, that Dr. Sangster or any other member who wishes to be a reformer, and who wants to get his views to prevail in the Council, should not first have insinuated improper motives to all the other members of the Council. His correct method, if he wishes to make a success and to be a reformer, is to put his views in such a reasonable and plausible way that they will commend themselves to the whole of the members of the Council. There are gentlemen here that are quite as anxious to further the interests of the Council as Dr. Sangster is; but when he gets up and makes one insinuation after another, attributes one evil motive and another evil motive in rapid succession, he cannot hope that the Council will willingly accept what he suggests as an improvement. I object in the strongest terms to Dr. Sangster or any other member of the Council using insinuations of that kind. I hold, no matter who the man here is, we have a right to treat him as though we believed he was honest in his motives, and I do not think that when the doctor uses such terms as that a member was "insufficiently ductile," and terms of that kind, he is using the proper expressions to members of this Council. (Applause.) I object in the strongest terms, and I think if reforms are sought they cannot be secured in that method, but I believe that, as some of the leading politicians in this country say, you can secure by mild methods what you cannot drive out of the Anglo-Saxon. I do not propose to consider this question any further, for the Council have had it discussed in various ways. I may say frankly that if you went into Committee of the Whole I might be prepared to vote for some change that might be brought about in that by-law; but it is a question now whether it will ever get to the committee. It may get to the committee, but the way to get it to the committee is not to attribute wrong motives to the Council; that is the means by which it will be killed, and every time you want to kill a resolution you must get up and insinuate that other members of the Council are not acting honestly and fairly. I do not know that Dr. Sangster intends always when he uses strong language to be particularly harsh in it. Sometimes a man may do that without knowing that he is putting so much spice into his remarks. I will excuse such a man. I admit that sometimes when I get just the least shade warm myself I may put items of spice in that were stronger than I thought, and perhaps Dr. Sangster does the same; and if he does I think if some of his friends, some whom he believes to be his friends, would call his attention to it he might make it a little more mild; and if he did so the points he suggests would find a great deal more favor with men who are constituted after the ordinary type of human nature. (Loud applause.)

Dr. MOORE—Mr. President and gentlemen of this Council : This discussion has lasted quite a long time, and I think it has now cost the Council about \$282.00 for this little folly, this little explosion of wind. While I have no desire to find fault with the generosity of members of this Council, yet if Dr. Shaw's conscience is pricking him because he has taken \$4.50 a day too much last year—

Dr. SHAW—No.

Dr. MOORE—Surely he can refund it and then his mind will be free again ; and if my friend Dr. Armour finds that the \$112.00 and better which he got last year is pricking his conscience, he can refund it and go on this year and not take anything for his attendance. I do not see why, if a man finds he is rich enough, and he is generous enough and loves the profession enough to give his services free, we should find any fault with it ; and if Dr. Armour sees fit to give his time for nothing he is at perfect liberty to do so, and I am satisfied the Council will not find any fault with it. Dr. McLaughlin can act in the same way. Dr. McLaughlin says he is not playing to the grand stand, but he also tells us he is not coming back again. Dr. McLaughlin will be only two sessions longer here, and he is also in a better position than some of us because he has his practice, and besides a nice little office that brings him in a little something while he is away, while with the majority of us "the shutters are up." Dr. McLaughlin, under these circumstances, could very well afford to do for two sessions without the little indemnity. But my friend, Dr. Sangster, likes an indemnity, a little indemnity ; \$50.00 will do him. I want more than \$50.00. I think everybody wants more than \$50.00. I do not think the profession expect us to come here and sit here for one or two weeks without being paid. I say if these gentlemen want to give their services free let them give them free, but the rest of us that do not feel like that can vote as we see fit on this motion.

The President here put the motion, and on a vote having been taken declared it lost.

Dr. Sangster called for the yeas and nays.

The Registrar took the yeas and nays as follows :

Yeas—Armour, Dickson, Hanly, Henry, Machell, McLaughlin, Reddick, Sangster, Shaw and Thornton—10.

Nays—Barrick, Bray, Britton, Brock, Campbell, Emory, Fowler, Geikie, Graham, Harris, Henderson, Logan, Luton, Moore, Moorhouse, Rogers, Rosebrugh, Thorburn and Williams—19.

#### MISCELLANEOUS BUSINESS.

Dr. WILLIAMS—I have a proposition written out in the form of a notice of motion, that I would like to be permitted to put in as a notice of motion, so that it will go to the Educational Committee. I do not think it will take any time or cause any discussion. It is that it be an instruction to the Educational Committee when revising the Announcement, to omit the names of all matriculates and the names of those who have a first, second or third year or primary standing, and also the names of those who have obtained their membership through examination, and to substitute in lieu of those the names of all who have become registered since the publication of the last Register.

Moved by Dr. BRAY, seconded by Dr. MOORHOUSE, That the rules be suspended to allow this to come in as a motion. Carried unanimously.

The President read the motion.

Dr. WILLIAMS—You have heard the motion read and I will explain what the purpose is in a few minutes. What I want to accomplish is this. You have here a long list of matriculated students, followed by a list of names of first year's standing, and a list of second year's standing, some in the third and then the primary standing ; and then you turn over and find a list of those who have become practitioners by examination. I conceive that those names in the Announcement serve no good purpose whatever, and it is my suggestion that those be all eliminated from the Announcement, and that in their place we should put in the names of those who have become registered after the last Register was issued, so that in our Announcement we would get a full list of all the registered practitioners after the date of the last published Register.

Dr. BARRICK—This motion appears to me to be so reasonable that we ought to pass it without any further discussion. It would be an advantage to the Printing Committee in getting their tenders if they could relieve the person tendering from putting all those names in.

The PRESIDENT—Should this not be referred to the Printing Committee rather than to the Educational Committee, Dr. Williams ?

Dr. WILLIAMS—The Educational Committee deal with the Announcement, and if this passes here it becomes an instruction to the Educational Committee, and the other committee know about it, it becomes a matter of knowledge to them, so it doesn't matter which committee gets it.

The President put the motion, and on a vote having been taken declared it carried unanimously.

Dr. CAMPBELL—I would ask permission to introduce a matter at this stage which could be referred to a committee at once, and it is something that does not commit the Council to anything. I did wish to give notice of motion, and when the matter came up for consideration ask that it be referred to a committee, but my idea now is if there is any objection to it from the Council, that it be referred to the committee now. It is to amend By-law No. 39, by adding to Rule 3 the following: "And provided further that should there at any time be only one candidate in nomination, he shall be declared elected by acclamation." I wish to move the reference of this to the Committee on Rules and Regulations, that they may consider it when considering the other matters referred to them which have a bearing on the same subject.

Dr. DICKSON—You might further add, in the event of three being nominated, that after the first ballot the one having the least number of votes should be dropped.

Dr. CAMPBELL—I will do that. If there is no objection I would like it to go to the committee.

The President put the motion, and on a vote having been taken declared it carried unanimously.

Dr. McLAUGHLIN—I do not want it to be understood that I am agreeing with the principle.

The PRESIDENT—No. This is simply referring it to the committee.

On motion of Dr. Armour, seconded by Dr. Harris, the Council adjourned to meet at 10 o'clock to-morrow morning.

## THIRD DAY.

THURSDAY, June 11, 1896.

The Medical Council met at 10 o'clock a.m. in accordance with motion for adjournment.

The President, Dr. Rogers, in the chair, called the meeting to order.

The Registrar called the roll, and the following members were present: Drs. Armour, Barrick, Bray, Britton, Brock, Campbell, Dickson, Emory, Fowler, Geikie, Graham, Hanly, Henderson, Henry, Logan, Luton, Machell, Moore, Moorhouse, McLaughlin, Reddick, Rogers, Rosebrugh, Sangster, Shaw, Thorburn, Thornton and Williams.

The minutes of the previous meeting were read by the Registrar, confirmed, and signed by the President.

### NOTICES OF MOTION.

Dr. GRAHAM—That a committee consisting of Drs. Campbell, Moorhouse and Reddick be appointed to furnish regular and daily reports of the proceedings of the Council to the public press.

Dr. CAMPBELL—To submit a by-law amending By-law 69, in accordance with the resolution on that subject adopted by the Council on the 10th inst.

Dr. GEIKIE—That for the remainder of the session, in order to enable the Council to finish all necessary business by Saturday next and thereby reduce the cost of the session, members will be restricted on the time of speaking to ten minutes, and the introduction of matters irrelevant to the discussion will be considered out of order, and therefore not permissible.

Dr. GEIKIE—That it be an instruction to the Educational Committee to amend Clause 9, Section 3, page xi. of the Annual Announcement by substituting the word "fifty" for the word "sixty" in the first line of the said clause; also to change the pass percentage in chemistry, theoretical and practical, from fifty to forty, so as to enable students to devote more of their time to the study of anatomy, physiology, histology and materia medica.

### COMMUNICATIONS.

The Registrar read a communication from Dr. O'Reilly, Superintendent of the Toronto General Hospital, inviting the Council to visit that institution; and a communication from B. H. Lemon, who was erased from the Register for unprofessional conduct some five years ago, asking to be reinstated on the Medical Register.

The latter communication was referred to the Discipline Committee.

### MOTIONS OF WHICH NOTICE HAS BEEN GIVEN AT A PREVIOUS MEETING.

Moved by Dr. ARMOUR, seconded by Dr. SANGSTER, That the advice of Mr. Christopher Robinson, Q.C., be had on the following: 1st. Had the Medical Council, at the annual session of 1895, the legal right to assess an annual tax on the medical profession for the years 1893 and 1894, as enacted in Clause 3 of By-law No. 69? 2nd. To what proportion

of the arrearages of the annual tax which are outstanding at various dates from 1874 to the present time Section 41a of the Medical Act can be legally applied for their collection. 3rd. Are there any members of the medical profession as it now exists exempt from the operation of Section 41a? Also, that Drs. Williams, Henry, Campbell, Armour and Sangster be appointed a delegation to wait on Mr. Robinson and secure the above advice.

The President read the motion.

Dr. ARMOUR—Mr. President, we had thought, after the legislation of 1893 changing the functions of this Council and placing the penal and coercive measures entirely under the control of the elected members, that one of the chief objects for which the Medical Defence Association was constituted had been remedied; but the occurrences of last session will make it imperative on us to still take active measures in defence of what we believe to be the common interests of the profession. Then a majority of the territorial representatives came here, I understand, pledged to their constituents against supporting or approving of the penal clauses of the Medical Act; but so successfully was the matter manipulated in the Council last year that the alternative was placed before them of either foregoing their sessional indemnity or voting for those clauses. It occurred that there were only five territorial members that succeeded in withstanding this pressure at that time, and the result was that the penal clause was re-enacted, the sessional indemnity was forthcoming, and the well-known wishes of the great majority of the profession were ignored. It should be the first duty of those who desire to apply this penal coercion against their fellow-practitioners to know that this Council is acting within its legal rights in making the application of those penal clauses. After the many humiliations to which past Councils have been subjected for illegal acts, I cannot believe that even the most ardent coercionist can desire that there should be a repetition of the former trials and troubles—

Dr. BROCK—I rise to a point of order. Is it right for members to read their speeches?

The PRESIDENT—No. But I think Dr. Armour is not reading; I think he is speaking from notes.

Dr. ARMOUR—I am not reading; I am refreshing my memory from notes. I was saying that before attempting to execute their penal coercion they should be willing to learn from the best legal authority that they have the right, or to what extent they have the right to do so. It looks absurd to suppose that, when given power by the Medical Act to assess a tax for the current year in which it is assessed, this Council could legally assess a tax for years when the transaction of affairs was in the hands of another Council. There is nothing contained in the suspending clauses of 1893 that would warrant such a presumption. There are important legal points involved in the application of the penal clause, and the Council should not be satisfied with anything but the best legal advice as to their legal right to use it, before attempting to coercively apply it to a rebellious profession. There are many of those who entered the profession before the existence of the Council who believe they are exempt from the tax and exempt from Section 41a. And there are many who believe it cannot be retroactively applied, that is to accounts that existed before the clause was enacted. It may be that it cannot be legally applied to accounts that would, in the ordinary course, be outlawed. The medical men of the Legislature who were induced to consent to its passage did so with the understanding that it would not be so applied, and I understand that the opinion of the Attorney-General was that it should not be applied to accounts of more than six years' standing. It is only reasonable to assume that it is the duty of this Council to procure for the profession the best legal opinion on these questions. And when the members of the profession are assured of their legal responsibility, I am confident it will do much to restore the harmony between them and this Council which it is desirable to have. While it may suit the needs of our treasury to procure funds regardless of the means, it should be beneath the dignity of this body to stoop to means which may be put on a level with blackmailing by others, using penal enactments for the collection of the accounts where such could not legally apply. I trust, Mr. President, there will be no objection to securing this advice and that this motion will pass unanimously.

Dr. WILLIAMS—I have listened with some considerable interest, though I admit with some little surprise, to the remarks of Dr. Armour. I think it is within the knowledge of every man in this Council—I must be mistaken, because apparently it is not within the knowledge of Dr. Armour—that Mr. Osler's special advice was taken on this subject and that Mr. Osler wrote out the by-laws under which this Council was to act. (Hear, hear.) Now, Dr. Armour says we want the best possible legal advice; well, gentlemen, it is an open question whether Mr. Osler's or Mr. Robinson's is the best possible legal advice. I will say this, my own conviction is Mr. Osler stands second to no man in this country in his legal opinions (hear, hear) and in his standing in the profession. Now, under these circumstances, Mr. Osler himself, in his own office, having prepared the by-laws for this Council and having sent them up under his special directions, I think there should be no question in the mind of any man here as to whether or not we were within our exact legal

authority or right. My opinion is that if there is any person who thinks we are not within our legal right, who thinks we are taking some money from him to which we are not entitled, and who wishes to pit the opinion of some other man against that of Mr. Osler, the chance is open for him. But when we have secured the advice of one who is recognized as one of the best counsel in this country and have got his opinion, I think we ought to be satisfied with that opinion and not take a certain percentage of the money of this Council and cast it away for another opinion which may put us in a divided position, so that we do not know exactly what we are going to do and do not know where we stand. It is notorious that doctors differ; it is equally true that sometimes lawyers will present things in different shapes, and it may leave the client somewhat in a muddle. Dr. Armour has said that a majority of the territorial men came here pledged against the penal clause. I am not aware whether that is true or not, but I am one of those territorial men, and I know this, that while I saw the majority of the men in my division I did not pledge myself to any position, but I took the position that "whatever becomes necessary that I am prepared to do and take the responsibility. If it is necessary to have a penal clause, then that penal clause shall go in with my sanction." I said, this is necessary and this must be carried out, that if one man pays his fee every other man practising the profession must pay or else stand aside. (Hear, hear.) I hold that it is unjust and unfair, it is dishonest, to take the fees from one part of the profession and allow the other part to go scotfree. If there are some men who are so mean that they will not come forward and pay their fee honorably there should be a law in such a way that they cannot take advantage of the upright men who do stand by their profession. And I hold that to make an insinuation that members of the Council after they came here were hoodwinked is an insinuation that is altogether too strong against the members of this Council and ought not to have been made by a fellow member. (Hear, hear.) Dr. Armour says the present Council cannot assess for debts or collect fees that were due under the previous Councils. Now, I think in this respect Dr. Armour is under a serious misapprehension; he seems to suppose that this Council terminates every time an election comes about, or possibly every year. I do not think a much greater fallacy could exist; I think this Council stands exactly in the position that a council does in a municipality, or that a school board does; it is never dead, it is continuous from year to year; the succeeding Council is always responsible for the acts of its predecessors and it is a continuous body; it does not terminate with the end of the session or with the election of new members. That view, as implied by Dr. Armour's expressions, is entirely a mistake. Furthermore, if that was not a mistake we have the Solicitor's opinion on that point, for he himself drew the clause bearing on that special subject. And are the Council going to take upon themselves authority to act in direct opposition to what the Solicitor told us we had a right to do in a matter of that kind? By acting in opposition to that we would be doing a dishonest thing to those members of the profession who had paid their way all the time and allowing those who had kept their money down quietly in their pocket and enjoyed the benefits of membership to go scotfree, or at the most, as Dr. Armour says, only collecting for the six years, they forsooth wanting to take the benefit of the Act which would allow them to escape by saying this debt is six years' old. Gentlemen, would members of this profession stoop to so mean a thing as that under these circumstances? I think not. Then, it is insinuated that it is something like blackmail, that it shall be beneath the dignity of the Council to blackmail members who are owing for a period of over six years. Gentlemen, I have yet to learn that you can justly charge it as being blackmail when you make a man pay his own statutory debt that has run for longer than six years. (Hear, hear.) If that term can be applied it is a kind of blackmail that is just and honest in this country and ought to go on for all time and make those men who seek to shirk their honest debts, by getting the length of the law, bear their share of their honest debts and responsibilities the same as others do. I think it is unfair to say you will accept the fee from one man each year right along, and use that for the benefit of the profession, and allow other men to lag behind, and then when six years have elapsed, tell them that it is blackmail to make them pay. Gentlemen, that is a morality in the profession that I for one do not believe in. I believe in every one of our members being placed exactly on the same platform, and if I pay my fee year after year, and you pay yours there is no reason why every other man should not do exactly the same thing, providing it is right and proper under the Statutes by which we are governed. Under these circumstances I do not favor Dr. Armour's proposition; I hold we have got the best legal opinion we can get (hear, hear), and until we have good reason to believe that that is wrong I do not propose to change from it and I will, so far as my vote can, prevent the change. (Hear, hear.)

Dr. GEIKIE—Dr. Williams has very very ably stated in his excellent speech a great many reasons why every man should be treated alike in this matter. I would not think of going over the same ground, although I endorse most thoroughly every position he took, and I am glad to hear him take the stand he has taken. There is another position that struck me since the subject was brought up, and that is, the injurious effect it has outside

of this Council chamber to have doctors talking about and trying, apparently, to get out of the little payment of \$2.00 a year as an assessment for the maintenance of what is necessary to the dignity and good conduct of the profession. I have had occasion to mention the matter casually to lawyers of good standing; I have done it just to draw them out on the subject; and in every instance there was an unconcealed expression of contempt for the smallness of those who, in a profession such as ours, would meanly haggle and wriggle about the payment of a dollar or two a year for the maintenance of the profession. I have no sympathy with that sort of thing whatever. If the tax is a dollar let every man pay his dollar, and if for some reason he has not paid it for some years let him pay it up to the last as well as the first farthing. Even if it is two dollars, that is very little compared with what the lawyers have to pay and what they pay cheerfully and without a grimace, without saying a word, and without any long discussion such as seems to be threatened here, a discussion which, to my mind, is not at all to the credit of the profession.

Dr. SANGSTER—I rise to a point of order. Is it in order to discuss the general question of the payment of the fee when the question before the House is whether a Solicitor's opinion shall be obtained or not?

The PRESIDENT—I allowed Dr. Armour to digress very very far from the point of his motion; and I did not call him to order, although I did not think he was right; therefore having allowed one member the privilege I am per force compelled to allow the same privilege to others.

Dr. SANGSTER—I do not think it should be allowed on the part of any one.

Dr. BRAY—Dr. Sangster thinks this now after Dr. Armour has got his remarks in.

Dr. GEIKIE—I claim I am perfectly in order and that what I am saying is perfectly relevant. I have a feeling of intense shame that a committee of this Council should go regarding such a petty matter and ask either Mr. Osler's opinion or the opinion of Mr. Christopher Robinson. I do not like the idea even of one medical man stooping so as to ask any lawyer, do you think we ought to pay our little annual assessment or not? Or, if we have not paid it, do you think we ought to be forced to pay it or not? Pride makes me feel that is an ignominious position for this Council to sanction on the part of even one of its members. (Hear, hear.)

Dr. McLAUGHLIN—It seems to me this question is not a proper subject for discussion, but you cannot allow one member to discuss it without giving the privilege to all.

The PRESIDENT—I granted the privilege to Dr. Armour, who introduced the motion.

Dr. McLAUGHLIN—Yes, and you have allowed other speakers to discuss it, and it is therefore open to others; that being so, I will say a few words. I regret that a question of this kind cannot be discussed without bringing passion in and charging people with dishonesty—

Dr. MOORE—And blackmail.

Dr. McLAUGHLIN—Yes. I do not approve of any of those expressions; I am free to admit that. I think in this Council we ought to come up to a fair dignity and discuss questions purely on their merit; if there is merit on one side and merit on the other let them be discussed fairly and squarely without the introduction of these miserable terms, charging every man who does not pay up his two dollars with dishonesty as has been done ever since we came to the Council. I am just as honest as any man in this Council, and I do not think it is proper to apply this unpleasant epithet; and I say there is no argument in saying a man is not honest; that is merely a wild assertion that has no force whatever. In regard to the relative merits of the two lawyers, because that has been brought up, I want to say that no one esteems Mr. Osler higher than I do; he is a personal friend of my own, and in his own branch in law no man I think can touch him; but Mr. Osler is not what you might call a constitutional lawyer; he is not one of those lawyers who pry down into knotty questions such as may be involved in the interpretation of Statutes; that is not his line at all; he is a criminal lawyer, and in that line he is without a peer in this Province. Mr. Christopher Robinson, on the other hand, is a gentleman to whom such questions are constantly referred; he is the one, above all others, who is consulted upon all knotty questions arising out of municipal law, more so than any other counsel. While I make that distinction between the men I make it honestly, because I have had reason to consult on matters of that kind and I know that lawyers in the country go to Mr. Robinson when they want to get the interpretation of such laws as this as well as of municipal laws. I say nothing against Mr. Osler; I say he is, in his particular line, without a peer in this Province. Coming to the question involved, that is the right of payment of this money or not, the two gentlemen who spoke on the other side characterized the refusal to pay two dollars a year as a mean, little, miserable, nasty thing. If that was the only question involved I thoroughly agree with these men; if it was only the payment of a couple of dollars it would be a contemptible thing for us to waste one minute of time of the Council in discussing it. I have said before, and I say now, if this assessment is based on principle, based upon sound statutory grounds, I am prepared to support it. I am prepared to do more than

give \$2.00, to give \$20.00 if necessary, to sustain our Council and profession in an efficient manner. You and I have read with more or less disgust, I am sure, during the last six months of the occurrences in the Transvaal; we have heard there of the Parliament governing and ruling a people without the people being represented in that Parliament; that the men who pay the taxes in the Transvaal are the most responsible men, the best men intelligently, the most useful men to that country; and Mr. President, you to-day occupy an analogous position to President Kruger. President Kruger does not represent the people he rules over, neither do you represent the members of the profession of this Province; you are there not by the votes of the profession of the Province at all but you are there in that chair to-day because of the votes of men who do not represent the profession. This Council is represented in part by territorial members; these members truly represent the profession, but all the others do not. It is upon this anomalous ground that I have objected to this tax from beginning to end. If the profession of Ontario levied this tax, if they alone had control of the money and the distribution of it, then I would submit to any tax they put upon us. You, Mr. President, last year, and other members of this Council, referred to other bodies such as the Pharmaceutical Society, the Law Society and to other medical societies throughout the Dominion; but we stand alone in this anomalous position of being non-representative of the profession. True, in the Law Society there are four or five members who are ex-officio members of the Society who never attend, but the great mass—I think thirty-six or thirty-eight members—of that Law Society, the Benchers, are elected; these others of whom I spoke, the Minister of Justice and some of the Judges, are ex-officio members. Practically, the Law Society is self-governing. The trouble with us is the profession is not self-governing, and so long as this Council remain not self-governing I object to this Council taxing the profession or doing anything with the taxes of the profession; and I claim that if we tax the profession the profession must have full and plenary power to say what shall and shall not be done with the taxes of the profession, that they shall have exclusive power. That is my ground. If we had that in this Council then I am entirely with you. But the gentlemen who represent the schools, and our homeopathic friends (who only represent a constituency of some fifty or sixty members of the profession while each one of our rural members represents 130 to 150) come here and dispose of this money, take it themselves, and vote it for other purposes. I say that this is not in harmony with the age in which we live; the age in which we live demands if there is taxation there must be full representation; and it is upon that principle I have objected to this tax all along. Let us have representation of the entire profession in this Council, and only representation of the profession, and then I will go with Dr. Williams, and I will go with my friend, Dr. Geikie, I will go with this whole Council and say, "levy upon the profession, let the profession levy upon itself as much money as you think proper in order to carry on the affairs of the Council efficiently and carry them on economically." That is my ground. Am I a dishonest man because I stand on sound principle and refuse to submit to these matters I have just objected to? Will my friend, Dr. Williams, not allow me the right of judgment; will he not allow me the right to say that that is a sound principle and upon that principle I stand? The sum of money called for from each individual member amounts to nothing. You say it is only \$2.00. I do not care if it was only two cents; I stand on a sound principle, the violation of which belongs to the dark ages and belongs to President Kruger, a man in the Transvaal, and should not find a place in the Province of Ontario.

Dr. GRAHAM—I do not wish to say anything offensive about Dr. McLaughlin, because he is an old friend of mine, but it appears to me he is laboring under a mistake in regard to this tax being unconstitutional; he is applying the constitution of Ontario, perhaps, or the constitution of the Federal Parliament, to our constitution. What is the British constitution? Of course it is the laws that have been enacted for all time, and will be enacted for all time. I consider our constitution is the Ontario Medical Act. The constitution may not be just, it may not be right, but according to our constitution the tax is right. As I say, our constitution is the Ontario Medical Act, and any by-laws that we pass in the meantime. I may be wrong, but I have always thought that Dr. McLaughlin was wrong in applying other constitutions to our constitution. I do not mean to be harsh at all, but I contend if he thinks that this tax is iniquitous, he must go further back than that and change the constitution, and I think he should say no more about the constitutionality of the tax until he tries to change the constitution. (Hear, hear.)

Dr. MOORE—Just a word or two. I do not intend to detain the Council very long. I am going to stay, I think, within bounds—I will stay at all events in Toronto and not go over to the Transvaal; and I will try and stay with matters concerning this Council and not with matters concerning any other sect or society. The part of this resolution that appears to me the most offensive is the gratuitous insult we offer to Mr. B. B. Osler, whom we have elected year after year as our Solicitor. That resolution asks us now to go outside to Mr. Christopher Robinson, a gentleman for whom I have every respect. If we did that we would be ignoring our own Solicitor, who is the peer of any lawyer in the Kingdom of Great Britain.

a man who stands deservedly high, and whose name is a household word all over this Dominion of ours. To offer this gentleman a gratuitous insult is something this Council ought to be above, and I only wish that this motion and the whole discussion concerning it could be obliterated, that our profession and the world should not see that we have had such a resolution brought into this Council, offering a gratuitous insult to the man who has honored us by accepting the position of our Solicitor, a position he did not accept for the emoluments of the office, but because of the respect he had for the profession; and I tell you he has enabled us to rid this profession of quackery and to raise the standard of and benefit our profession, and the public at large. To say that this man is not able to interpret his own Act seems to me simply ridiculous, and is an insult to the ability and genius of this man whose transcendent ability is acknowledged all over this continent. So far as the constitutionality of this portion of the Act is concerned, we are acting under an Act given to us by the local Legislature, and if our Act is unconstitutional we should go back to Sir Oliver Mowat and the Government and ask them to make it right; tell them it is not constitutional. We are acting within the Statute, and there is not an act we have performed where we have gone outside of the powers given us by that Statute. I am sorry to see such a resolution as this before this Council, and I am sorry also that such a gratuitous insult should be offered to a man of the ability of our Solicitor; and I say this idea was born in ignorance, conceived in malice, and I don't know hardly what I should say it was delivered in, if it was not in want of good common sense. I trust that this will be voted down, as it ought to be voted down, and I ask you, gentlemen, to vote it down and not thrust an insult in the face of so eminent a man as Mr. B. B. Osler.

Dr. SANGSTER—Mr. President, is it in order for a member of this Council to say that any act on the part of a fellow member in an argument upon a point of interest to all is conceived in malice?

Dr. MOORE—I will say "in ignorance."

The PRESIDENT—I do not think it is exactly in order, but I might say in answer to Dr. Sangster's question, that I allowed a great deal of latitude in language here, more perhaps than I ought to have allowed. But I want it understood from this time out that I propose to stop all personalities. (Hear, hear.) Every word that I believe comes within the range of our by-laws as personalities I shall call upon the member uttering it to withdraw. And I am going to ask the members to keep entirely and strictly within the parliamentary rules of debate, and to use no word which may be construed as offensive to another.

Dr. SANGSTER—Mr. President, is it your ruling that the word "malice" is not unparliamentary?

The PRESIDENT—I will rule from this time onward that it is not parliamentary.

Dr. SANGSTER—Do you rule that it is unparliamentary as to this?

The PRESIDENT—No, because I have allowed you to use similar words.

Dr. MACHELL—When Dr. Armour commenced to read his motion I felt rather inclined to support it, but before he had finished I felt he had made a great mistake in introducing it at all, and I shall certainly vote against it. I think it would be a deliberate insult to Mr. Osler, and I fancy he would consider it as such, and I am not very certain but Mr. Osler would say to us, "Take your Council matters elsewhere, I do not want to have anything more to do with them."—

Dr. MOORE—He would be quite right.

Dr. MACHELL—He would stand very much in the same light that a medical man does who has been attending a case for weeks and weeks, and whose patient has got on fairly, and then without any reason some person else is asked to step in and make a diagnosis or prognosis, which you will all agree with me would not be fair to the medical attendant; and for that reason I do not think it is quite fair to Mr. Osler, and I think he would probably resent it. I shall certainly vote against the motion.

Dr. SANGSTER—Mr. President, with regard to the remarks that have fallen from Dr. Machell, I beg to say that if Mr. Osler were to give up the Solicitorship of this Council, I do not think the Council would necessarily be stranded thereby. However, I will touch upon that before I am through, probably. Dr. Graham is evidently a little at sea. He said that what we should attack in this matter is the constitution that we are under, and that while we are under that constitution we must accept all that it involves. I do not think that at all. Constitutions are reformed and remodelled. Our constitution may be such that we cannot approve of it, and it is our duty and our place as rational beings to seek its repeal by constitutional means. That is what we have been doing from the outset in this Medical Defence Association; but it does not appear to have got through Dr. Graham that that is what we are at. That is the only point for which the Medical Defence Association was formed and for which we have been striving throughout. Now, I am somewhat surprised that this resolution does not commend itself to the members of this Council. I think the concession that it asks for is a reasonable one for this Council to grant, and that, to my mind too, without any loss of dignity or prestige; and that by so doing it will show a spirit

of compliance and conciliation that could not fail to be appreciated by the profession, and which would therefore make for peace. I do not attach any importance to the argument that has been urged on the score of economy. The economy of this Council is so one-sided, partial and spasmodic that it cannot be genuine. It is only when information is sought in the interests of the profession that we are treated to platitudes on expense and histrionics on economy. When it is with the object of bolstering up the very debatable acts of the majority and their obstructive votes that legal opinions—

Dr. BRITTON—I rise to a point of order. Is it correct to use the term “obstructive” vote?

The PRESIDENT—Dr. Sangster, will you be kind enough to withdraw the word?

Dr. SANGSTER—Yes, I will withdraw the word. When it is a question about bolstering up the very debatable contentions—the word “debatable” is not out of order—of the majority in this Council by legal opinions of doubtful validity and by \$20.00 quasi-legal letters not touching one point of law, but merely tendering to the territorial members in this profession instead of pertinent advice as to how they should conduct their business in the interests of their constituents, then the gentlemen who are now so loudly and suddenly eloquent about economy are perfectly dumb. I do not suppose the whole sum involved in obtaining that opinion now asked for would reach \$100.00, and it would perhaps not reach \$50.00; and, under the circumstances, I think that might be money profitably and well expended. We heard last year and on other occasions expressions dropped by members of this Council which showed that the Council have, as a whole, a just dread of law suits and their incidental expenses. Now, it is well known there is a great deal of angry feeling in the profession regarding the points which this opinion is intended to cover. That feeling of irritation has not been allayed; it has been strongly intensified by the acts of the Council last year in reinstating the coercive clauses of the Medical Act; and whenever your preliminaries regarding erasures from the Register shall have ripened into deeds, in all probability this Council will have to face not one but many actions at law; and even though the decisions of the courts should be, as they may be—I am not lawyer enough to determine—favorable to the position of this Council, and if the courts decide that all the Acts and by-laws reviewed were *intra vires* of the Legislature and *intra vires* of this Council, any one of such affirmative decisions, founded as it would be on an action at law, would cost the Council many times \$100.00. I think, therefore, provided you are sure of your ground, as you profess to be, it would be a wise thing to obtain this opinion, and to thus stave off possibly some very vexatious and costly law suits by satisfying those concerned that in resisting the tax they have not, legally speaking, a leg to stand upon. I do not sympathize with the remarks made that in seeking this opinion we are offering any mark of censure or want of confidence to Mr. Osler. I conceive that Mr. Osler is out of the case in this matter. The object concerned is not to support, not to confirm the unwavering faith of the Council in Mr. Osler, but to satisfy the unbelieving, to convince the sceptical who are disputing the legality of this tax, in some or all of its aspects that they are wrong and that the Council are right. This Council, or rather the older members of this Council, have fixed upon Mr. Osler the paternity of the coercive clauses of the Act. That being the case, that partiality which all parents show to their offspring, especially to their brain progeny, renders Mr. Osler a prejudiced and therefore an incompetent witness; he is in the position of a jurymen who has not only formed an opinion of the case about to be tried, but who has repeated it publicly over and over again, and is therefore on that subject very properly ruled out of court. At any rate, it is clear to all that he is not likely, under the circumstances, to be anxious to pick flaws or to find holes in his own workmanship. If the opinion of Mr. Christopher Robinson were obtained, and it confirmed Mr. Osler's opinion, as very possibly it might do, it would greatly strengthen that opinion. You profess you are quite sure that Mr. Osler is quite right, and therefore I cannot understand why, in order to remove a bone of contention from the profession, you refuse to expend the small sum that is asked for so as to carry the matter outside of the present deadlock that seems to exist between the profession and the Council. I have nothing to say disparaging to Mr. Osler's great ability; I acknowledge his great eminence in his profession, and I believe that in his own line, as my friend Dr. McLaughlin remarks, he stands unapproached; but at the same time, I may remind you that it is by following Mr. Osler's advice that Section 41a was obtained, and that this Council provoked and have promoted a rebellion that will never be allayed until it eventuates in revolution. Moreover, I may proceed to say that in legal matters this Council have been in the keeping of Mr. Osler for ten years past, and during the whole of that time they were also forensically brooded over with watchful care by a very distinguished territorial representative who, on account of his eminent legal attainments and knowledge of law, I believe was commonly known in this chamber by the sobriquet of the “Chief Justice” of the profession, and yet, notwithstanding their double legal guardianship and legal nourishment from without and from within, this Council—not this Council, but the last Council and their predecessors—were suffered to go on year after year. Council after Council arose, were elected, lived, blundered and died

in blissful ignorance of the fact that every year of their existence they were breaking their own by-laws and grossly overriding the several provisions of the Medical Act. Now, I claim that a legal gentleman who did not notice or did not object to the many breaches in those respects that were committed by our predecessors can scarcely feel insulted if intelligent and interested men refuse to swallow his legal opinions, *hokus bokus*, without any question. I do think it would make for peace, that it would remove the trouble with most of those who are non-payers if you can obtain from a perfectly impartial and independent source an opinion that the Council are right on these matters. It is well known that among many eminent lawyers the opinion prevails that it was not *intra vires* of the local House to make an Act overriding the Statute of Limitations, especially in the face of the fact that the Legislature consented to that Act in 1891, and consented not to repeal that Act in 1892 upon the distinct assurance—as we have Mr. Meredith and other members of the House in evidence—that there was no intention on the part of this Council to make that principle retroactive in its application. There are many lawyers who deny that a certificate, a diploma, a license to practice medicine purchased thirty or forty years ago, paid for and secured unconditionally from the Dominion authorities, over the signature and seal of the Governor-General, can be revoked and made of no effect at the will of a body created by a local and provincial Parliament. There are many of us who believe that Section 3 of By-law 69, passed last year, was *ultra vires* of the Council. Here is my own feeling about the matter—I notice you are looking at your watch, Mr. President; is my time nearly up?

The PRESIDENT—You are one minute over time.

Dr. SANGSTER—I will sit down at once. I do think you should have called Dr. Geikie to order when he began to encroach on that subject; he is not technically out of place, but he is in reality, because the Act of 1893 decided that university representatives should have no voice in the reinstatement or the suspension of those by-laws. Last year we suffered Dr. Britton and one or two university representatives to express themselves both during the time that by-law was being considered and before, but I do not think it was good taste for them to do so. The matter is purely within the purview of the territorial representatives.

A voice—That is for voting only.

Dr. BRITTON—My good sense has been called in question just now as to my act of last year when I spoke in favor of the assessment; and I must say a few words. It is very true that the amendment of 1893 to our Act (as I said last year) paralyzed my arm and I cannot vote in favor of an assessment, but I am very glad that I have an opportunity of saying a few words, and in this connection I think I am not out of order; I am speaking now on a question of privilege.

The PRESIDENT—You are quite in order.

Dr. BRITTON—It is quite in order for me to go backward a little to see how it came about that I and the representatives of the different universities and schools were deprived of certain privileges which we had formerly; I shall go as far back as the time that we had a joint committee. The origin of that committee was this, in this Council it was resolved that a committee be appointed for the purpose of conferring with a committee to be sent by the so-called Defence Association. The initiative was taken in this Council, so far as I know; and in accordance with that a committee was appointed by the Defence Association, and we met in this room. I need not go over the deliberations that took place on that occasion, but I will say this, that it was stated by one member of that committee, after all efforts had been made that could have been made for conciliation by the committee of the Council, that the efforts of the Defence Association would not cease here. This gentleman spoke in a very excited manner, and he used threats; I think that the threats that he used were corroborated by other members of that committee—I would not say that positively, but at any rate their acts subsequently went to show that they quite approved of these threats. The threats were of this nature, that the Legislature would be approached, that they had already been using their private influence with members of our local Legislature, that they would continue to do so; that this body was not constitutionally organized because the representatives of the schools should not have any voice in the disposition of the funds of this Council nor in the collection of the funds necessary to carry on their work. I do not think that that gentleman, nor any other gentleman who was a member of that committee, will deny that that course was pursued; what we saw from time to time, week in and week out, year in and year out I was going to say, in the public press is quite sufficient to convince anybody that that was the line of procedure; and I know as a matter of fact that members of the Legislature were approached in that way. As I say, the threat was made that the public would be appealed to, that the efforts would not be limited to trying to convince the members of the profession, but that their efforts would be extended in other directions; that is, to convince the public, and, as I said, to convince the legislators by speaking to them privately. The charge, if not already made, was made very shortly after that, that the School men had managed to attach to them a sufficient number of territorial representatives, and that they had whipped the homeopaths into line, so that they were able to control

the deliberations of this body. The School men were an obnoxious class here, they had no right to be here, they were not sent here by those who were paying any fees, and, therefore, they should not even sit here—that the profession should be governed by those elected by the profession itself alone. Now, I say that statement (and I am within parliamentary rules when I say it) that the School men were controlling the deliberations of this body, and leading by the nose respectable men, men of intelligence, men who knew just as much as they what the profession required, men who were looked upon as respectable men in the community, was without a foundation or tittle of truth. That was the representation made to our legislators. I say, then, by unfair means, by using an argument which was not truthful in any sense of the word, certain legislators were influenced, and the result of it was the School men were deprived of using their franchise in the way of determining how much funds it was necessary that this Council should have for the purpose of conducting their affairs in the proper way, and how those funds were to be raised. I say that was unfair, I say it was unjust, and I say it is unfair to-day that the representatives of the universities and colleges have not an opportunity of voting on a question of that kind, no matter what certain few men may think regarding it. I do not know that those men have ever thought of it; possibly they have; if they have, they will pardon me for repeating what they already know. I wonder if it has ever struck them that the large proportion of funds used by this Council for their purposes comes from the students of this country? It has been said by them that I represent the members of the medical faculty of the University of Toronto. I deny any such imputation. What do I come here for? Do I come here for the purpose of looking after the interests of the few individual men, members of that faculty, or looking after the interests of the faculty itself? Do I not come here for the purpose of looking after the interests of the students of the University of Toronto? I say I do; that is my business here. It is my business to see that a proper curriculum is formed; it is my business to see to it that the provisions of the curriculum are observed; it is my business to see that no favors are granted to any other institution; it is my business to see that no special favors are granted to the University of Toronto; and it is my business to stand here and see that justice is done between the schools, and to see that men are properly educated; and I say that the argument of those gentlemen that I am not a representative tax-payer—I will use that term—falls entirely to the ground. This tax is only a small affair compared with our complete and total revenue; it is a comparatively small affair compared with what has come in from the students even during the present year. During the present year we have received from students coming up for the fall examination \$1,410.00, and from those who went up for the recent spring examination, \$8,505.00, making a total of \$9,915.00, and the amount of assessments paid during the year is \$7,083.00 as against over \$9,000.00, nearly \$10,000.00, paid by the students; and forsooth, then, I must not even be allowed to say a word, because I am the representative of a university. I know the ultimate end and aim of those gentlemen who have taken this ground in opposition to the representation of the schools, because they have stated it. When they first started out on their campaign they stated it,—that they would not rest satisfied until the profession was properly represented, and until the schools had no voice in this matter. I am correct, I think, when I make this statement, and I am satisfied it cannot be successfully confuted. It has been stated time and again—it was stated in their original manifesto—it was stated certainly by one of their exponents in some of the letters, that that was the ultimate end and aim—

Dr. SANGSTER—May I just put Dr. Britton right on one point on which he is a little astray? The claim was that the representatives of the universities had a right in this Council so far as education and examination went, but their right to meddle with the government of the profession was what was attacked.

Dr. BRITTON—Mr. President, is my time nearly up?

The PRESIDENT—You have two minutes more.

Dr. BRITTON—Of course I must endorse what has been said by others regarding Mr. Osler's ability. We have had no reason so far to find fault with Mr. Osler's acts in relation to this Council; he has done his work well, and I, for one, can not vote for any measure which would cast a reflection upon a man who is worthy of our confidence. We have a solicitor that I think is the peer of any. No matter what litigation I should be at any time forced to enter upon, I would be perfectly satisfied to put my case in the hands of Mr. Osler, and I think this Council should likewise be satisfied to do so. We have no right to pass over him, and to do so would be really offering him an insult. I can not vote for the motion. There is one other matter on which I wish to speak. I wish to make a correction in the speech, I think, of Dr. Sangster. I inferred from what Dr. Sangster said that Mr. Meredith—the present Chief Justice, Sir W. R. Meredith—manifested opposition to any enactment in this Council which would be retroactive in its character. I happened, not as a member of the Legislation Committee, but on the invitation of Dr. Thorburn, who at that time was the chairman of that committee, to be present at an

interview which was held with Sir Oliver Mowat and other members of the Government in relation to the Meacham Bill, which was then before the committee appointed by the House. I recollect very well that Mr. Meredith was present, and that he said very little. Mr. Meredith did say, "Gentlemen, is this thing necessary, or is it not? is this money required, or is it not? Two dollars a year is a very trifling matter; if it is necessary then of course it ought to be paid." But he never took any exception to the fact that we were seeking to collect what had been due, never said a word against it. I have something more to say, too. Mr. Meredith was in opposition, as we all know. I had a long conversation regarding the matter with a leading member of the Government, and he concluded the conversation by saying, "Well, Britton,—(I know him very well)—all that I have to say is that it is a very picayune matter;" and he used some rather forcible expressions, quite as forcible as that.

Dr. ARMOUR—Would you name the member?

Dr. BRITTON—No; I do not name the member. You should be satisfied to take my word. I believe I am an honest, truthful man.

Dr. ARMOUR—I am not questioning your word; I want the information. Do you refuse it?

Dr. BRITTON—I do refuse it.

Dr. McLAUGHLIN—I think it is a matter of customary usage that men shall not make statements and base arguments upon them if they are not prepared to give names.

The PRESIDENT—I shall rule on that matter that it is not necessary for Dr. Britton to give the name. It is not parliamentary practice to give the name, but the practice is contrary to that entirely.

Dr. BRITTON—The subsequent acts of the Government, I think, will fairly convince us that the opinion expressed by that individual member of the Government was also held by his colleagues. I am not going to call anybody names, but I do want to say that I should be ashamed to accept the privileges granted by the corporation of the College of Physicians and Surgeons and to be a member and get all the benefits and pay nothing for them. I pay my \$2.00 as a matter of principle and as a matter of self-protection, and as a matter of right to myself. I pay it individually outside altogether of my constituents, and as far as I can, I shall insist upon it, with the exception of those for whom we have consideration as shown in the resolution introduced yesterday by Dr. Campbell, as far as my humble voice goes, that every member of the profession in this Province will pay his honest debts and make a fair recompense for what he receives.

Dr. SANGSTER—I rise to correct some statements made by Dr. Britton with regard to myself personally. Dr. Britton rose to show that I had made a mis-statement with regard to Mr. Meredith, but I do not think he did show it in the least. I agree with Dr. Britton that Mr. Meredith was in favor of Section 41a, and that I heard him in committee say that if the money had to be collected that was the only way to collect it. I am frank enough to say what I heard, but it seems to me Mr. Meredith and other members of the House are in evidence in the reports of the debate to the effect that it was understood that that clause was not to be made retroactive in its application.

Dr. THORBURN—I rise now merely to corroborate what has fallen from the lips of Dr. Britton in reference to the committee at the House. Not only did Mr. Meredith express himself in that way, but nine-tenths of the profession as represented in the House were of that opinion. I also want to say that I quite agree that it is a most contemptible thing to object to a small contribution paid to the support of our profession. There is no other profession in existence that is a corporate body, the members of which do not contribute something to its support; even the mechanic and the laboring man have organizations, and they contribute something to the support of those organizations. I shall vote against the measure.

Dr. BARRICK—I have a very strong feeling against this Council or against anybody spending the time of one session to legislate and the time of the next session to undo what they have done the session before (hear, hear); it was upon that ground that I voted against Dr. Shaw's resolution that he brought in and spoke to yesterday. Last year we settled that matter, and I think it would be a very unwise expenditure of the money of this Council to upset the work we did last year. I am one of the territorial representatives that came to this Council unpledged in any way at all. Every one knows that there has been a bone of contention before the profession for a number of years; every one knows that that bone of contention has been placed under the nose of nearly every practitioner in this Province, until the odor of that decaying bone has been such that every medical man really got disgusted with it. (Hear, hear.) I was very sorry last year to find that this bone had been brought before this Council, and I acted last year in the way I did with a view to having this bone buried, and I was very glad to follow my friend Dr. Williams, and my friend Dr. Bray, in an effort that promised to restore peace and harmony to the profession, and to secure what I fondly hoped would be the last burial of this bone of contention. Last

year we said it was right and proper that we should have this clause, but we were willing that the penal clause should be held in abeyance for one year in order that we might restore the good feeling and harmony of the profession, and to see the results thereof, and to be guided by the results of our action in re-instituting this section of the Act. I am gratified to see in the collections last year, amounting to \$7,083.00, ample proof and testimony that the course we adopted last year was the proper course to pursue, but I am very sorry to find the bone that we thought was buried last year has been resurrected this year. I cannot give my consent to this motion, but I shall again take the position I did last year and endeavor to keep the bone buried as long as it is possible to do so. Dr. Williams, in his able speech, and the other members who have spoken, have stated the case most clearly, but the strong ground I take is that we should not in one session undo what we have done the session before, but should let it stand for a few years and see how it works out, and I am satisfied if we do so the sore will get less, but if we do not the constant irritation will be sure to make it worse. The only object I can see in getting another opinion upon this matter would be to do what we had to do in the city of Toronto; we had to bring an expert engineer from England to settle a difficulty here that seemed so plain that everybody thought it was an unnecessary expenditure of public money. Now, if every man in connection with this Council will solemnly pledge himself to bury that bone forever, if Christopher Robinson's opinion is in harmony with what we have done, that is the only reason I can see, and the only good I can see. But if Christopher Robinson's opinion is given, I am just as satisfied, if it is in harmony with what we have done, there will be other members who will want some other opinion next year, and have the same bone resurrected again next year. The only advantage in getting that opinion that I can see would be for every man to pledge that he would be bound, and that he would never again bring that bone before this Council, if Christopher Robinson says the imposition of the fee is right.

Dr. THORNTON—I only want to say a word or two in regard to the nature of the discussion. It seems to me we may discuss this subject to any length on the lines on which we are going and yet accomplish nothing whatever. The first question to my mind is, Are we loyal in our support to this Council? I, for one, declare my loyalty to the support of this Council. Then the next question that arises is, How are we going to get the necessary funds to carry out our aims? If we find in the transaction of our business we are incurring losses—you may think I am entirely out of order, but I see no other way to get at it—that necessitate a certain amount of money being in our treasury, the question will arise, Can these troubles be obviated or not? I twice or three times said last year in this Council that we were continually keeping the cart before the horse. We are doing the same thing now, and it seems to me we are going to have to put our heads together before we ever get it turned round. We may wander all over the field, we may discuss the matter in every shape we like, but unless we settle the one question as to the necessities of this Council first, and the necessary expenses to carry on their undertakings, we will never get the other point settled. Dr. Barrick has talked a great deal about burying this bone of contention; there is not a member more anxious to bury every bone of contention than I am. I say, and I say positively, that this Council have never buried the bone of contention with a decent burial; they have undertaken to bury it, but invariably have left one end of the bone sticking out, and until we get away from that mode of procedure I do not see how we are going to settle this trouble.

Dr. HENRY—I regret very much indeed that this resolution has been brought before the Council this morning. I thought last year, after the discussion and the time and attention given to the subject, we would never hear it moved again. I think what Dr. Armour asks for—a special committee to consider this question—is quite unnecessary. We have had, and acted upon, the opinion of Mr. Osler, and in that opinion I have every confidence. More than that, I may say that through the country where I live I find the constituents I represent do not object to the payment of a small fee, but they do object to the coercive character of Section 41a, and that I myself object to strongly; as I objected to it years ago, so I am prepared to object to it to-day. But I maintain that every gentleman who is a member of the College of Physicians and Surgeons of Ontario should be honest enough and manly enough to pay his \$2.00 a year, and I think it would be a great injustice to the men who have paid year after year to get an opinion from another lawyer in the city of Toronto that would let other gentlemen escape. I say every man should pay, or if they will not pay, then those that have paid and have been loyal to the Council should get their money back. I hope the resolution will not carry, and I am sorry we have wasted the whole morning at an expense, I suppose, of \$250.00 or \$300.00. It is perfectly absurd to talk of economy, and then indulge in such a long-winded discussion as this has been. We have talked about going home on Saturday night, but it seems to me the way we are going we shall be here two weeks, and the Council will have another \$4,000.00 to pay, and I leave it to you to say where the money is to come from.

Dr. DICKSON—I have preferred to keep my seat rather than take the floor since I came.

here, because I have observed that much of the time occupied has been really of no value either to the Council or to the profession. When this matter was brought before the Council this morning it seemed to me that we have been beating about the bush, and are yet very far away from catching the bird. It has occurred to me the wisest course to pursue would be to allow a test case to be brought up ; it would not be necessary that every man in arrears should be at once pounced upon and an action instituted. If a test case were brought up it might be that Mr. Christopher Robinson would be selected to defend, and the probability is that we would thus be able to determine the question finally and certainly ; and the Council, I think, have sufficient good judgment if we lost in that case to refrain from any further action of that kind. It seems to me that is the only practicable way in which we could reach a determination in this case, and it certainly would be a more sensible course than to quietly sneak off and ask an opinion from another solicitor, when we have a solicitor who has been engaged and who, so far as I can learn, has given the utmost satisfaction in the past. There is another point in reference to the remark that fell from Dr. Armour to which I must offer some reply, and that is, that most of the territorial members, if not all of them, came here pledged to—

Dr. ARMOUR—I said a majority.

Dr. DICKSON—I thought you said all the members.

Dr. ARMOUR—I said I understood a majority.

Dr. DICKSON—I thought Dr. Armour said they were all pledged to vote against the penal clause. I do not know what the other territorial representatives did, but I know that I for one came here perfectly free in that matter. I stated in my circular to the electors (for I was unable to see them all personally, and I had to approach them by means of circular) that so far as I could see it would not be a thing that was likely to be an objection at all ; if it were found that it was necessary to impose a fee that it would not likely be objected to, but to my mind it would be really necessary to impose a fee from year to year.

Dr. SHAW—I rise only to say that it appears it is quite necessary that an assessment on the members of the profession should be made ; and I quite agree with the idea that every member should pay his \$2.00 a year. I think it would be quite time for us to take up this matter when a case is brought before the Council, then the Council would be prepared to get a solicitor to defend them, and it is not necessary until then that they should move in the matter. I am prepared to vote against the motion.

Dr. BRAY—I want to say in the first place, I take exception to Dr. Armour's statement as to how I came here, pledged or unpledged. I have always endeavored since this difficulty has arisen between the members of the profession to conciliate, if possible ; and it was I who moved a resolution in this Council for that purpose. Since some of these gentlemen have come into the Council I personally tried to conciliate them, but apparently they will not be conciliated. I have consulted my constituents, and they have approved of my course not only in this matter but in the votes I have given in this Council. Before I came down here last year I laid the matter of the imposition of this tax before them ; and they said to do so ; and I brought a resolution from one of the societies authorizing me to do so. I met that same society a short time ago and they said, "We very much approve of your action in that respect, excepting in one particular, and that is, we believe that every man should pay his fees, and if they do not do so you must put into effect the clause that has been suspended, and unless you do that we will have to send somebody else to the Medical Council." That is the opinion of my constituents, and that being the case I must abide by that, and as a consequence must vote against this motion. My constituents are perfectly satisfied with the method to be used in collecting these dues ; they are satisfied it is necessary and they are perfectly willing to pay it. Under those circumstances I must certainly vote against the motion.

Dr. BROCK—As all the territorial representatives are protesting, I rise also to make a statement ; I never heard a medical man yet object to the payment of that fee ; the only thing I have heard is that they are wondering at our not putting in force Section 41a ; they believe we should take every measure possible, and, as I stated at the last session, that we should leave nothing undone to collect that money immediately ; if we had done so at the last session we would have had all our money in. The discussion in this Council reminds me of a case that was brought before a judge, who when he saw that there was going to be a good deal of discussion, and a great deal of time taken up, and consequently a great deal of money expended on both sides, asked the amount of money at stake, and when he was told it was one dollar, he pulled a dollar out of his pocket and settled the case at once. I think this case could be settled by asking our people to pay down their dollars or have the Defence Association pay for them.

The President put the motion, and on a vote having been taken declared it lost.

Dr. Sangster called for the yeas and nays.

The Registrar, Dr. Pyne, took the yeas and nays, as follows :

*Yeas*—Drs. Armour, Hanly, McLaughlin, Sangster and Thornton.—5.

*Nays*—Drs. Barrick, Bray, Britton, Brock, Campbell, Dickson, Emory, Geikie, Graham, Henderson, Henry, Logan, Luton, Machell, Moorhouse, Rogers, Rosebrugh, Shaw, Thorburn and Williams.—21.

Moved by Dr. GEIKIE, seconded by Dr. GRAHAM, That it be an instruction to the Printing Committee that the Annual Announcement of the Council shall be got ready and mailed to the profession as early as possible in August of each year.

The President put the motion, and on a vote having been taken declared it carried.  
On motion, the Council adjourned to meet again at 2 o'clock p.m.

AFTERNOON SESSION.

The Council met at 2 o'clock p.m., in accordance with motion for adjournment.  
The President, in the chair, called the Council to order.

The Registrar called the roll, and the following members were present : Drs. Armour, Barrick, Bray, Britton, Brock, Campbell, Dickson, Emory, Fowler, Geikie, Graham, Hanly, Henderson, Henry, Logan, Luton, Moore, Moorhouse, McLaughlin, Reddick, Rogers, Sangster, Shaw, Thornton and Williams.

The minutes of the last meeting were read by the Registrar, confirmed, and signed by the President.

Moved by Dr. BRAY, seconded by Dr. MOORHOUSE, That, instead of going into the order of business, the Council do now adjourn, in order that the committees may meet and prepare for the evening session. Carried.

The Council adjourned to meet at 8 o'clock p.m.

EVENING SESSION.

In accordance with motion for adjournment, the Council met at eight o'clock.

The President, Dr. Rogers, in the chair, called the meeting to order.

The Registrar called the roll, and the following members were present : Drs. Armour, Barrick, Bray, Britton, Brock, Campbell, Dickson, Emory, Fowler, Geikie, Graham, Hanly, Henderson, Henry, Logan, Luton, Machell, Moore, Moorhouse, McLaughlin, Reddick, Rogers, Rosebrugh, Sangster, Shaw, Thorburn, Thornton and Williams.

The minutes of the last meeting were read by the Registrar, confirmed, and signed by the President.

NOTICES OF MOTION.

No. 1. Dr. HENRY—For the formation and establishing of a medical tariff for the Province of Ontario.

No. 2. Dr. GEIKIE—In any examination covering four subjects, only candidates passing one-half or more of these shall be credited with the subjects passed. Where the examinations comprise more than four subjects, candidates must pass three or more of these at one time in order to receive credit for the same.

COMMUNICATIONS, PETITIONS, ETC.

None.

MOTIONS OF WHICH NOTICE HAS BEEN GIVEN AT A PREVIOUS MEETING.

None.

ENQUIRIES.

Dr. SANGSTER—It seems to me I have something to enquire about, but I don't know what it is. I will not be brought to a close for want of something, so I will make an enquiry, at any rate. To how many members of the College has the Registrar, since the last meeting, sent a certificate of having paid the annual fee as required by law ?

The PRESIDENT—The Registrar informs me that he has sent to 1,131 members.

Dr. SANGSTER—Were the certificates sent in every case ?

The PRESIDENT—Yes, as a receipt.

Dr. SANGSTER—At our last meeting, the Registrar, I believe, was instructed to enquire as to or to take the necessary steps to procure, if possible, the seals and documents belonging to the old Eclectic and Homeopathic and Provincial Boards of Examiners. Have any steps been taken in that matter ?

The PRESIDENT—The Registrar informs me that he wrote several communications to Dr. Hall, the ex-Secretary of the Eclectic Board, and registered one communication to him,

but has not received any reply. That is all that has been done in regard to the Eclectic Board.

Dr. SANGSTER—And in regard to the Homœopathic and Provincial Boards ?

The PRESIDENT—The Registrar informs me that he has not done anything at all with reference to those, because he does not know who to write to, unless he wrote to the representatives in the Council.

Dr. SANGSTER—Then we are just where we were last year.

The PRESIDENT—I presume it is a very difficult matter indeed to get information about. If any member of the Council has any information now which he can furnish, or has heard of any information and would furnish it to the Registrar, it would help to forward the matter.

#### REPORTS OF STANDING AND SPECIAL COMMITTEES.

Dr. BRAY presented and read the Report of the Discipline Committee.

*To the President and Council of the College of Physicians and Surgeons of Ontario :*

GENTLEMEN,—Your Committee on Discipline beg leave to report that they have had under consideration the cases referred to them at the last meeting of this Council in June, 1895, viz. : Those of Dr. Parsons, of Coehill, Ont., Dr. J. F. Danter, of Toronto, and Dr. H. O. Martin, of Toronto.

In reference to the former, although every effort has been made by your committee and the Detective to serve Dr. Parsons, we have so far been unable to do so. Your Detective has visited various places where the said Dr. Parsons has been heard of, only to learn that he had gone to some other locality, and he finally discovered that he was in Manitoba. Your committee did not deem it advisable, owing to the enormous expense it would entail, to have the Detective visit Manitoba in order to personally serve him. Consequently no action has been taken in this case further than to consult our Solicitor in regard to the evidence now in our possession, which he informs us is sufficient to warrant your committee in going on with the trial so soon as Dr. Parsons can be served. Acting on his advice, we have decided to wait until an opportunity occurs to accomplish this without any great expense to the Council. Your committee learned through the Detective a few days ago, that Dr. Parsons had returned to Ontario, but they did not instruct him to issue a summons for him to appear before your committee, as there was no time to hear the case before the present meeting of the Council, it being necessary to give him two weeks' notice. Your committee, however, will have him served, and go into the investigation at as early a date as possible.

2. After examining the evidence and considering all the circumstances in connection with the cases of Doctors Danter and Martin, we would recommend that no action be taken at present, in view of the fact that these parties are not now, nor have they been for some time, acting in an unprofessional manner so far as your committee are aware. But this report is not intended in any way to convey the idea that no action shall be taken on the original charges should your committee deem it advisable to do so, or circumstances arise making it necessary to proceed with the investigation.

3. With regard to the following resolution referred to your committee, viz. : " That the Discipline Committee consider whether or not it is possible to arrange a method whereby the cost of trials of members of the College charged with infamous conduct can be reduced without in any way interfering with the efficiency of said trials, and further, that the said committee shall report to this Council at their next session [1896] whether or not they can suggest any means of reducing the cost of public prosecutions, and that they confer with the Attorney General if necessary, "

Your committee beg leave to report that they have considered the matter of Discipline trials in all its bearings, and have consulted with the Deputy-Attorney-General with this result : That it is impossible in our opinion, under the present Act, to lessen the expense connected with such trials to any appreciable degree. Mr. Cartwright went thoroughly into the question with us, and that gentleman could suggest no better or cheaper way of conducting those trials than the one your committee has always adopted, having due regard for efficiency ; and he further said that he was doubtful if any amendment to the Act could be made that would insure the desired result as economically and perfectly, and in his judgment the present Act could not be improved upon.

4. In the matter of the public prosecutions of unregistered persons, we put the question to the Deputy-Attorney-General as to whether or not the Government would take upon itself to conduct and pay the cost of such prosecutions. His reply was that he would not undertake to answer that question in the absence of Sir Oliver Mowat, as it was one of policy. But he did not believe that the Government would entertain any such proposition, as the fines in such cases went to the College.

Your committee have sought information wherever it could be obtained, hoping to be able to suggest some scheme whereby the expenses of these prosecutions could be materially lessened, and at the same time satisfy the general profession by ridding the Province of unlicensed quacks, and in seeking this information we have found that no action of the Council is so much appreciated by the practitioners as the thorough carrying out of this portion of the Act. It has been suggested to us by Mr. Wasson that a committee be appointed with whom he could consult and to whom all evidence could be referred, and that this committee take upon itself the responsibility after considering the evidence in each case, whether or not a prosecution should be instituted, and should they deem it advisable to instruct him to prosecute, then all the costs connected with such prosecution should be borne by the Council, he to be responsible and under the instructions of such committee. Your committee are not prepared to say whether under this plan the expense to the Council would be lessened, but we are of the opinion that the work would be more efficiently and satisfactorily performed than under the present system, and would recommend this suggestion for your consideration.

All of which is respectfully submitted.

JOHN BRAY, Chairman.

Adopted as amended by Committee of the Whole.

J. P. ARMOUR,  
Chairman Committee of Whole.

Carried. A. F. ROGERS.

Motion to amend Discipline Committee's report :

It was moved by Dr. MACHELL, seconded by Dr. DICKSON, That the committee mentioned in No. 4 clause of this report be composed of the following members, viz. : Doctors Barrick, Emory, Thorburn, Britton and the mover. Services to be gratuitous. Carried.

The report was received.

Dr. THORBURN presented and read the report of the Property Committee.

*To the President and members of the Medical Council of the College of Physicians and Surgeons of Ontario:*

GENTLEMEN,—Your Committee on Property beg leave to report that the building is in a fair state of repair.

The instructions received by your committee from the Council in June, 1895, have been carried out.

The building and property was advertised for sale last year in the months of September and October, 1895, in the daily *World, Mail and Evening Telegram*, published in Toronto, and in February, 1896, in the daily *Globe, World and Evening News*, in Toronto, and I may say that every endeavor was made to find a purchaser. A number of enquiries were received from capitalists and others, but up to the present time no definite offer has been received.

Your committee feel, however, that the time is fast approaching when the building may be sold at a fair price. It was the opinion of several real estate men that it was not a good time to offer the building for sale. They also expressed the opinion that the property was a good one and would be one of the first properties to sell as the real estate market increased.

You will find attached to this a report of an inspection made of the boilers, elevator and machinery, and a report on the condition of the building by the Caretaker, with some recommendations as to cleaning, alterations and repairs which are thought necessary if your Council see their way to do the same.

Your committee ask that in the event of the property not being disposed of, that they be empowered to re-arrange the loan, as on the first of November, 1896, the existing mortgage can be paid off. We are of opinion that if this power is granted, a substantial reduction of interest can be secured, and are of the opinion that the money can be had for 4½ per cent. if not for 4 per cent.

The revenue for the year's rents amounts to \$3,215.16, nearly \$400.00 more than last year. This, of course, is not taking into account our own premises or any allowance for the same.

We are pleased to say that we look for a larger revenue from rents next year, as a great portion of the vacant offices will be rented. The number of vacant rooms has been reduced to six.

Our supplies, such as fuel, etc., have been purchased after receiving tenders for the same.

All of which is respectfully submitted.

JAMES THORBURN,  
Chairman Property Committee.

Adopted. A. F. ROGERS.

## PROPERTY REPORT.

*To the President and members of the Medical Council of the College of Physicians and Surgeons of Ontario:*

GENTLEMEN,—I beg leave to lay before you my report on the Medical Council building.

1. The boilers have all been inspected and found in good order. I have had them all cleaned and painted.
  2. The lavatories are all in very fair order; we require one particularly for ladies.
  3. The elevator wants a good overhauling and some of the ropes replaced.
  4. The walls, ceilings and stairways require calsomining or painting, as they are in a very bad state.
  5. The woodwork of halls and stairs requires painting or varnishing.
  6. Several of the offices require calsomining, repapering and varnishing.
  7. Babcock's or some other fire appliances are required in all the halls.
- All of which is respectfully submitted.

THOMAS WASSON.

TORONTO, June 1st, 1896.

## REPORT OF INSPECTION OF ONE PASSENGER ELEVATOR.

Situate at south-east corner of Bay and Richmond Streets; owned or controlled by the College of Physicians and Surgeons; date of inspection, April 18th, 1896; name of inspector, F. Idenden.

Car or platform, good. Safety apparatus, good. Shipping apparatus, good. Cables, hoisting, good. Cables, counterweight, good. Cables, shipping, good. Hoistway, car and counterweight, guides and counterweight, good. Counter shafts, none. Overhead sheaves, timbers and bearings, good. Automatic stop, good. Belts, none. Brake and connections, good. Pulleys, tight and loose, none. Machine bearings, good. Thrust bearings, none. Keys and set screws, good. Cylinders, good. Piping, good. Pump, none. Valves, good. Pressure and discharge tank, none. Doors, gates or other guards to car, good. Doors, gates or other guards to hoistway, good. Annunciator good. Gas or electric wire cable? Gas. Lighting in car, good. Elevator attendant, apparent age, 27 years. Is he competent to run elevator? Yes. Is there an inspection sign suspended in car? None.

Remarks.—This elevator is clean and well oiled.

Liability Department, the Travellers' Insurance Company of Hartford, Conn.

## INSPECTION REPORT.

*The Boiler Inspection and Insurance Co. of Canada, To R. A. Pyne, Esq., M.D., College of Physicians and Surgeons, Toronto:*

We beg to inform you that the two steam boilers insured under Policy No. 2715 were inspected with steam "off" on the 19th inst. and as far as could be ascertained, found in the following condition:

Both boilers were fully examined and found quite clean inside. No leaks at any of the riveted joints and no sign of any overheating.

There is some corrosion around the back hand-holes and care should be taken to make these joints perfectly tight.

The brickwork is all in good order. The steam gauges were tested and set right, as they were a little heavy.

Boilers had better have some compound or soda put in them and then be filled up entirely full of water.

GEO. C. ROBB, Chief Engineer.

TORONTO, May 27th, 1896.

The report was received.

Dr. THORBURN presented and read the report of the Legislation Committee.

*To the President and members of the Medical Council of the College of Physicians and Surgeons of Ontario:*

GENTLEMEN,—As convener of the Committee on Legislation, I beg leave to report that I personally watched all proposed legislation at the last session of the Legislative Assembly, and had the Registrar assist me in the supervision of all medical matters likely to come before the House, and kept myself in constant communication with the medical members of the House and others.

After consultation with prominent medical men and others in the Assembly, and the chairman of the Executive Committee, it was deemed necessary to call the Legislation Committee together and also the Executive Committee. The chairman of the Executive Com-

mittee, who was familiar with the situation, gave instructions for the Executive Committee to meet, and they will no doubt report the result of the Executive Committee meeting.

Your committee met on the 27th of March, 1896, the following members being present : Drs. Thorburn, Barriek, Emory, Sangster, Williams, who were joined by Drs. Harris and Rogers of the Executive Committee, the following members of the Council also being present : Drs. Britton, Geikie and Machell.

The local House appointed a special committee composed of the following members of the House to consider the bills to amend the Medical Act, namely : Hon. Mr. Hardy, Hon. Mr. Ross, Drs. A. McKay and J. McKay, Meacham, Ryerson, Willoughby, Messrs. Biggar, German, Haycock and St. John.

Mr. German's bill was first discussed and a compromise arrived at, the Executive Committee agreeing to carry out a certain understanding ; the bill was withdrawn.

Hon. Mr. Ross' bill was then considered, and after a lengthy discussion in which all the members of the Council present took part, contents of the bill were agreed upon, Mr. Ross undertaking to withdraw the bill on the distinct understanding that the Medical Council at its next meeting would carry out the principles of the bill, and agreeing to "clean the slate," as the Hon. Mr. Ross said, *re* all applications for registration as matriculates down to 1st November, 1895.

Mr. Haycock's bill was not considered before the committee, as it had been decided by the House upon the moving of the second reading.

The three bills, with the understanding arrived at regarding matriculation, as per Hon. Mr. Ross, are appended hereto.

All of which is respectfully submitted.

JAMES THORBURN,

Adopted. A. F. ROGERS.

Chairman Legislation Committee.

No. 136.]

BILL.

[1896.

An Act to amend the Ontario Medical Act.

Her Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Ontario, enacts as follows :

1. Sub-section 1 of Section 23 of the Ontario Medical Act is hereby repealed, and the following sub-section substituted therefor.

(1) Notwithstanding anything in this Act contained, any person holding a medical or surgical degree or diploma of any University or College of Physicians or Surgeons of England, Scotland or Ireland, entitling such person to register in Great Britain or Ireland, shall be entitled to present himself for the Final examination prescribed by the Council for Ontario candidates for registration, and upon passing the said examination, and paying the same fees as are payable by such last mentioned candidates, he shall be entitled to registration.

BILL.

An Act respecting Matriculation in Medicine.

Her Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Ontario, enacts as follows :

1. (1) Notwithstanding any by-laws or regulations which may have been passed by the Medical Council under the Ontario Medical Act, any person who presents to the Registrar of the Medical Council a certificate that he has passed the examination conducted by the Education Department on the course prescribed for matriculation in Arts and approved by the Lieutenant-Governor in Council, shall be entitled, on payment of the lawful fees in that behalf, to registration as a medical student within the meaning of Section 11 of the Ontario Medical Act, being Chapter 148 of the Revised Statutes of Ontario, 1887.

(2) Any person who before the passing of this Act has not passed the examination in all the subjects prescribed for matriculation as aforesaid, shall be entitled to registration as a medical student on submitting to the Registrar of the Medical Council a certificate that he has completed such examination by passing in the remaining subjects of such matriculation, including Chemistry and Physics.

(3) Any student in medicine who submits to the Registrar of the Medical Council certified tickets that he has attended not less than two courses of lectures at any chartered medical school or college in Canada, shall be entitled, on the payment of the lawful fees in that behalf, to take the Primary examination or the examination of said Council taken by students at the end of the second year, provided that the standing obtained at such examination may not be allowed until such student presents to the Registrar of the Council the matriculation certificate prescribed by this Act.

(4) A certificate from the Registrar of any university in Canada that the holder thereof has passed the examination in Arts prescribed for students at the end of the first year, shall entitle such student to registration as a medical student under the Ontario Medical Act.

2. Any by-laws or regulations of the Medical Council for determining the admission or enrolment of students varying the examinations for registration hereinbefore mentioned, shall not be valid or binding unless and until approved by the Lieutenant-Governor in Council.

Memorandum respecting Matriculation in Medicine, containing the conclusions arrived at with the members of the Executive and Legislation Committees of the Medical Council at the Parliament buildings, on the 27th day of March, 1896.

1. Any person who presents to the Registrar of the Medical Council a certificate that he has passed the examination conducted by the Education Department on the course prescribed for matriculation in Arts, including Chemistry and Physics, and approved by the Lieutenant-Governor in Council, shall be entitled, on payment of the lawful fees in that behalf, to registration as a medical student within the meaning of Section 11 of the Ontario Medical Act, being Chapter 148 of the Revised Statutes of Ontario, 1887.

2. Any person who before the passing of this Act has not passed the examination in all the subjects prescribed for matriculation as aforesaid, shall be entitled to registration as a medical student on submitting to the Registrar of the Medical Council a certificate that he has completed such examination by passing in the remaining subjects of such matriculation, including Chemistry and Physics.

3. Any student in medicine who submits to the Registrar of the Medical Council certified tickets that he has attended not less than two courses of lectures at any chartered medical school or college in Canada, shall be entitled, on payment of the lawful fees in that behalf, to take the Primary examination or the examination of said Council taken by students at the end of the second year, provided that the standing obtained at such examination may not be allowed until such student presents to the Registrar of the Council the matriculation certificate prescribed by this Act.

4. A certificate from the Registrar of any chartered university conducting a full Arts course in Canada, that the holder thereof matriculated prior to his enrolment in such university, and passed the examination in Arts prescribed for students at the end of the first year, shall entitle such student to registration as a medical student under the Ontario Medical Act.

5. Any person who on or before the first day of November, 1895, has passed the examination of any university in Canada for matriculation in Arts, or the matriculation examination conducted by the Education Department entitling to registration in Arts with any university in Canada, or an examination entitling to registration with the Medical Council when the said examination was passed subsequent to July 1st, 1888, shall be entitled to registration as a medical student.

Commencing from 1st July, 1888, to 1st November, 1892, second class non-professional certificate, with Latin.

Since 1st November, 1892, the junior matriculation certificate, with Physics and Chemistry, as prescribed by the Education Department of Ontario.

No. 105.]

BILL.

[1896.

An Act to amend the Medical Act.

Her Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Ontario, enacts as follows:

1. Notwithstanding anything contained in the Ontario Medical Act, or any amendment thereto, the Council of the College of Physicians for Ontario shall not have power to impose any greater fees or charges upon any person being a candidate for admission to practice medicine, surgery and midwifery in the Province of Ontario, and for registration under the said Act, than will amount in the whole to the sum of fifty dollars (\$50.00), which shall include fees for registration certificate and all examinations required to be passed by such person for admission and registration.

The report was received.

Dr. HARRIS presented and read the report of the Executive Committee.

*To the President and members of the Medical Council of the College of Physicians and Surgeons of Ontario:*

GENTLEMEN,—The Executive Committee met on the 9th of October, 1895, for the purpose of fixing the name of the matriculation, as proposed by the Council in June, 1895, so that it would harmonize with the name fixed by the Education Department, to read as follows: "The Junior Matriculation examination as conducted by the Education Department of Ontario," and to take the place of the name as indicated by the Council at its last session, namely, "The Pass Art Matriculation," as it was found to confuse intending candidates, and it was necessary to rectify the same.

We also considered the applications of persons for registration, and the Registrar was instructed as to the same.

We recommend that the special case of W. C. P. Bremner, B.A., University of Toronto, who asks for registration and a three years' course under special circumstances, be granted by the Council. This application will appear before your body at this meeting.

Your Committee again met on the 27th of March, 1896, after the co-joint meeting of the Legislation Committee and Executive Committee at the Parliament buildings, and gave your Registrar instructions in accordance with the understanding arrived at between the Hon. Mr. Ross and the special committee of the Assembly, which are appended to this report.

All of which is respectfully submitted.

Adopted. A. F. ROGERS.

WILLIAM T. HARRIS,  
Chairman Executive Committee.

Moved by Dr. Rogers, and resolved, That the Registrar be and is hereby instructed to admit all candidates applying for Primary examination who present two courses of tickets in medicine, whose matriculation is not completed, on the following conditions: "The Matriculation examination is to be completed before the Primary examination shall be allowed, even if successful in passing the examination of the primary subjects." Carried.

WILLIAM T. HARRIS, President,  
Chairman Executive Committee.  
A. F. ROGERS, Vice-President,  
C. T. CAMPBELL.

Moved by Dr. Rogers, and resolved, That the Executive Committee of the Council, having had a consultation with the Hon. G. W. Ross, Minister of Education, in regard to the Council's matriculation standard, and upon the request of the Minister of Education and the Government amounting to a demand, therefore the Executive Committee hereby instruct the Registrar as follows:

"That any person who on or before the first day of November, in the year eighteen hundred and ninety-five (1895), had passed the examination of any university in Canada for matriculation in Arts, shall be entitled to registration as a matriculated medical student on submitting to the Registrar of the Medical Council a certificate to that effect signed by the proper officer in that behalf, and paying the fees for registration as a matriculant."

WILLIAM T. HARRIS, President,  
Chairman Executive Committee,  
A. F. ROGERS, Vice-President,  
C. T. CAMPBELL.

Re the case of Dr. Young, who applies as a British licentiate for leave to take the Final examination, and if successful to be registered, moved by Dr. Rogers, and resolved, That inasmuch as the case of Dr. Young presents special features, that the Registrar be and is hereby empowered to permit the said Dr. Young to present himself for the old Final examination (which is practically the same as the Intermediate and Final examinations at the present time), and upon passing the same and paying all fees (\$100.00) he shall be allowed to register.

WILLIAM T. HARRIS, President,  
Chairman Executive Committee,  
A. F. ROGERS, Vice-President,  
C. T. CAMPBELL.

March 27th, 1896.

The report was received.

#### CONSIDERATION OF REPORTS.

Moved by Dr. BRAY, seconded by Dr. HENRY, That the Council go into Committee of the Whole to consider the report of the Discipline Committee. Carried.

Council in Committee of the Whole.

Dr. Armour in the chair.

Dr. Bray read the preamble and clauses 1, 2, 3 and 4, and on motion the said preamble and clauses were respectively adopted as read.

Dr. Bray read clause 5 and moved its adoption.

Dr. BRAY—Before this is adopted I wish to say that this is an important matter, and perhaps it would be as well to refer this clause of the report to the Finance Committee or whoever is dealing with the matter of prosecutions.

Dr. ROSEBROUGH—We have a Discipline Committee, and I do not think any committee could be formed which could more properly deal with this than that Discipline Committee, who have a very great deal of information connected with each case.

Dr. BRAY—This is not the business of the Discipline Committee; this clause refers to public prosecutions of unlicensed practitioners, while the Discipline Committee have to deal with licensed practitioners.

Dr. WILLIAMS—I think if that clause is read over again, till we all get the pith of it through our minds, perhaps we can give a vote on it now and decide whether it is satisfactory or not as well as at any other time; each member can form his opinion in a very short time, I think, if the clause is read over again.

Dr. Bray reads 5th clause of report.

Dr. WILLIAMS—Have the Discipline Committee given any thought to where this committee should be located, or anything as to the practical carrying out of the suggestions?

Dr. BRAY—Yes, we have thought of that; we have talked it over a good deal and have asked the opinion of others; and it has been suggested that it should be placed in the hands of some committee, and it was suggested (not by any member of the Discipline Committee) that the Discipline Committee were the proper committee to deal with this for two or three reasons; the first reason is that they will, in all probability, have to meet on purely discipline business, and when so meeting, the Prosecutor could gather up a number of cases and present the cases to the committee without any extra expense to the Council; another reason is that perhaps the Discipline Committee are more familiar with this part of the business of the Council than almost any other members of the Council. It was also suggested that the committee for this purpose should meet four times a year, and it was afterwards suggested twice a year. In reference to that, my opinion is that there should be no time fixed for the meetings of this committee, but that they should meet as seldom as possible, and only when meeting for other business; that is, if you give it to the Discipline Committee. If you give it to some other committee, it will entail more expense than if given to the Discipline Committee. Do not think, however, that the members of the Discipline Committee are looking for any more work or honor; we are not. We are making these suggestions purely with a view of lessening the cost of these trials. I dare say you all have seen the Prosecutor's report—I think it was put on the desk of everybody here. You will notice in that report that while there has been about twenty-five cases where convictions have been got and fines paid, the larger number of cases where no convictions have been got, and a number of cases where convictions have been got and the parties have gone to jail in preference to paying the fine, have been a source of expense to our Prosecutor, and he has derived no revenue from them, and I am told that this year he is \$400.00 behind. I think, perhaps (not reflecting on Mr. Wasson), he has not used quite as much discretion in some of those cases as a committee of this Council would use. I think if a committee were appointed that the committee would go over the evidence and instruct the Prosecutor and curtail his expenses as much as possible. I think, myself, if the prosecutions are to continue, that something of this kind must be done; and I certainly think the prosecutions must be continued, because if we allow the prosecutions to drop, no matter what the funds of the Council are, for one year, we will be over-run with those unlicensed quacks. One reason why Mr. Wasson is so much behind is that these quacks are becoming very sharp; where, three years ago, he would have had no difficulty in convicting a good many, now, when they have been up a couple of times before, their wits are sharpened; and it is in such cases I think a committee would be valuable; the Prosecutor would obtain reliable information from all sources he could, and submit that information to the committee, who would, if necessary, submit it to the Solicitor, and on being satisfied proceed with the case, but would not allow the Prosecutor to go to any unnecessary expense before he obtained the necessary evidence.

Dr. MACHELL—When the members of the Property Committee were going over the building this afternoon, or after we had gone through the building, Mr. Wasson spoke to two or three of us very much in the same strain that he evidently did to the members of the Discipline Committee. Bearing that in mind, I wrote out a motion after I came here this evening, very much on the lines that Dr. Bray has spoken on, with one exception. I will read it and then give my reasons for it: "Moved by Dr. Machell, seconded by Dr. Dickson [one of those Mr. Wasson was speaking to], "That a committee, composed of Drs. Barrick, Emory and the mover, be appointed, with whom the Official Prosecutor shall consult before instituting legal proceedings for infractions of the Medical Act." I selected the three names I have mentioned because we are three men here in Toronto, whom the Detective might call up at any time, and this would be a committee that would entail absolutely no expense to the Council, though of course it would be a committee that would not be able to give the same legal opinions, or opinions bearing perhaps as good legal value as the Discipline Committee would; but it would, on the other hand, have the advantage that it would not be a committee which would have to be called together from different parts of the Province; it would be a committee which could be called on a few minutes notice; and while the Discipline Committee, meeting four or five times a year, would be sufficient for the purposes Dr. Bray spoke of, I think there are circumstances where action might have to be

taken within a few days or within a short time, in order to catch a man before he got out of the particular town where he would be practising illegally. I do not know that I intended to go quite so far as Dr. Bray did, that is, committing the Council to all the expense of the prosecution after the Prosecutor once had the sanction of this committee; that was not my intention. The Prosecutor said there were a number of instances in which medical men wrote in from the country saying that such and such a man was practising illegally, and asking to have the Prosecutor sent out. In such a case as that if he were not sent out it would look as if the officers of the Council—Dr. Pyne and probably the Prosecutor—were not doing their duty. But if the Prosecutor could say to any party writing him in that way, the committee did not approve of or did not sanction this prosecution, it would relieve the executive officers of the Council of a certain amount of responsibility, and it was more for this reason that I suggested the formation of this committee.

Dr. BRAY—I may say that we thought over this matter and that what Dr. Machell speaks of was suggested, and I think perhaps that may be a better suggestion. I do not wish it to be understood that when I suggested the Discipline Committee I meant we were going to meet four or five times a year specially for the purpose of dealing with these matters, because we might receive the information by letter and conduct our deliberations by letter; letters might be written to each member of the Discipline Committee by the Prosecutor, conveying to them the information on which they could advise him; and it would not follow that the committee would actually meet to consider these matters; it was not the intention of the motion that the Discipline Committee should meet to consider this class of prosecution except when meeting on Discipline Committee business. I would be very glad indeed to have this work taken off the Discipline Committee; there is nothing would please me better, and I quite fall in with the suggestion of Dr. Machell, if it is agreeable to the rest of the members; I am agreeable to any method by which this matter can be efficiently and cheaply dealt with. I know very well, as Dr. Machell has said, that there are cases where the offender is only a few hours in a place, and prompt action is necessary to secure his conviction. I have been written to, and I have no doubt each of our territorial representatives has been written to, to send the Detective at once, without giving us any evidence. Another point to be noted is that doctors throughout the country will write to their representative, or to the Registrar, or to the Prosecutor, saying "we want the Prosecutor sent up;" and then when he gets there he cannot get one word of information out of these very gentlemen who wrote asking for his assistance; they do not want to have their names mixed up with the prosecution, and do not seem to want to give any information to the Prosecutor. I think this matter should not be considered hastily, but should be considered thoroughly, in order to bring about the results we desire.

The PRESIDENT—Do I understand that no prosecutions can go on unless sanctioned by this committee?

Dr. BRAY—No; I do not mean to take away all responsibility from the Prosecutor; there are lots of little cases where he is sure of a conviction, but I have reference particularly to doubtful cases and cases where there will be likely a lot of expense. Our Prosecutor has informed me that there is one case in Dunville that has cost about \$200.00; that is the kind of case the committee might deal with. I do not mean that we should take away all discretion from Mr. Wasson; and I do not mean that the Council should be responsible except for a case where this committee advised a prosecution. My idea is only to provide for difficult or doubtful cases; and my object is not only to endeavor to ensure success, but to control the expenditure.

Dr. MOORE—As a member of the Discipline Committee, I am very much pleased to hear Dr. Machell's motion; I am glad to know that he is willing, and that other members of this Council, resident in this city, are willing to take upon themselves this duty. So far as I am personally concerned, I shall be very glad to be relieved from it, but it is to my mind very necessary that we should have such a committee; it is also very necessary that the committee should be as inexpensive as possible. One reason this committee is necessary is, the Prosecutor is notified by some medical gentleman within the Province that there is some man practising medicine without a license in his neighborhood; our Prosecutor goes to the place indicated and prosecutes this man, and the offender is convicted and fined \$25.00 or \$30.00 or \$40.00, as the case may be, but he prefers in lieu of payment to take a month in jail; he takes the option of the month in jail, and the Prosecutor is out his expenses; and at the end of the month your unlicensed practitioner gets out of jail and in two or three days is back at his old tricks again. Then the Prosecutor, we will say, follows him up again and has him convicted and fined; as before the offender goes back to jail again and pays his fine by being housed and fed at the public expense for another thirty days, and at the end of that time is set at liberty and goes on with the old work again. Our Prosecutor gets a salary of only \$600.00 a year, and is entitled to whatever he can make out of these prosecutions. The Prosecutor, as a matter of fact, is \$400.00 out this year. We cannot expect him to go on in this way; and he himself says he cannot go on, and we know

as business men that he cannot. It seems to me that any case submitted to this committee, in which the committee decide to prosecute, the Council should pay the expense, provided there is a loss. If that were decided upon, I think more efficient work might be done and in that way our public Prosecutor would not be out of pocket. We can hardly expect him to go on next year and prosecute where there is any doubt, especially as he has met with a financial loss of \$400.00 this year. We talked this subject over in the Discipline Committee, and thought we might probably make the experiment of approaching the Legislature at its coming session, although we are timid about applying for further legislation; and we thought it well to state our views to the Council so that the Council may form their judgment and act as they deem best. We know that if a man sells liquor without a license, he may be fined \$50.00 for the first offence, with the addition of a month or two months in jail; on the next conviction there is no option of a fine, he has to go to jail for three months; and if he is found guilty a third time, he has to go to jail for four months, without the option of a fine; so that you see in this case the punishment is progressive. But the punishment is not progressive under our Act; and really a designing man with a little capital could put this Council to a very great deal of expense. If we can only obtain from the Legislature the same law as that which applies to liquor sellers, we then would be enabled to put the unlicensed practitioners and quacks to flight to a moral certainty. We spoke to Mr. Cartwright, the Deputy-Attorney-General, on this subject; and Mr. Cartwright thought as we had a precedent in the license law we might safely go to the Legislature and probably get an amendment to our Act. I am making this statement now merely as a suggestion for the information of the Council. I shall be very glad, indeed, if this matter is handed over to such an able and representative committee, as has been suggested by Dr. Machell, in this city. I am very much in favor of Dr. Machell's resolution and I shall vote for it.

Dr. DICKSON—As seconder of the resolution and in answer to Dr. Rogers' remark I wish to say I think that every case should be referred to this committee. I think the Prosecutor should have no option, because it might be that in many cases he would feel from the evidence he received almost certain of securing conviction which to the committee might not perhaps seem just likely to be an accomplished object. The members of this committee proposed by Dr. Machell live in the city and are easily reached by telephone. For those reasons, I think every case should be brought before this committee.

Dr. BROCK—This report and Mr. Wasson's proposition have a bearing on the Finance Committee's report. I find that in the Finance Committee we are about considering this question. We examined the vouchers and looked over the report of the Registrar and over Mr. Wasson's report, and we were also endeavoring to find some recommendation by which we would be enabled to save this Council the enormous expense of these discipline trials. I think if any member of this Council would personally examine the vouchers he would see at once the great leakage which we have had; I have noted one case, that of the Rose trial. This matter was receiving our serious consideration, and I think it was because it was receiving our serious consideration that Mr. Wasson probably has made this proposition. I think Dr. Machell's motion will settle the whole question most satisfactorily. It will remove a great deal of the expense and will prevent Mr. Wasson acting on his own responsibility and leading this Council into expenses that we do not know anything about.

Dr. BRAY—I think Dr. Brock has misunderstood the position of affairs. Dr. Machell's motion suggests a committee for the public prosecution of unlicensed practitioners, a work the Discipline Committee have nothing at all to do with. I take it for granted that Dr. Brock means that Mr. Wasson in doing any work for the Discipline Committee should submit all his evidence to the Discipline Committee before he goes on. Do I understand you aright, Dr. Brock?

Dr. BROCK—Yes.

Dr. BRAY—You have got the two things confused. This motion and our discussion have been in reference to the prosecution of unlicensed persons, a work which the Discipline Committee have nothing to do with. The Discipline Committee have only to do with registered practitioners who transgress. I quite agree with Dr. Brock's suggestion that it should be an instruction of this Council to the Prosecutor to submit everything of this kind to the Discipline Committee before he goes on. It has not been done heretofore and I think it should be done just the same as he would submit to the committee Dr. Machell suggests anything in ordinary prosecutions. But I am very much afraid if Dr. Dickson's suggestion, that every case should be presented to the committee, was acted on they would have a great deal more work than they bargained for; but if they are willing to do it, I am quite willing they should.

Dr. BRITTON—There is just one point in connection with this I wish to refer to. It has already been suggested that it could be arranged in this way, that the Prosecutor could be allowed to proceed with cases in which he was pretty sure he would secure conviction, but cases about which there was even a shadow of doubt he might submit to the committee, and even though they appeared to be doubtful cases, if the committee recommended he would

prosecute and then the Council should assume the responsibility of paying any expenses in connection with such prosecutions. I think, therefore, it would be unwise to have a resolution framed in such a way as to direct that all cases, doubtful and otherwise, should be submitted by Mr. Wasson to the committee. If some such provision as has been recommended be not adopted I think it would be very difficult to make an arrangement with Mr. Wasson for the coming year in view of his report that he has lost \$400.00 during the past year. I think it would be far better that he should be allowed his discretion to proceed where he is satisfied of success, and in cases where he is doubtful to refer all the evidence to the committee named by Dr. Machell. That committee could determine, before instructing Mr. Wasson to proceed with prosecution, whether or not the merits of the case would warrant them recommending the Council to assume the responsibility of the expenses.

Dr. CAMPBELL—While Dr. Bray was speaking, explaining that clause, the idea struck me it would not be expedient to have the Discipline Committee attend to the work for the reason he had mentioned himself, that they could only attend to it at great expense except during their meetings, which meetings would be only occasionally. I think the appointment of a committee composed of some of our members resident in Toronto, if they were willing to serve, would certainly be the wisest plan; and I thought the four members mentioned by Dr. Machell, the two territorial representatives, Dr. Emory and Dr. Thorburn, the Vice-President of the Council, would be gentlemen in whom the Council would have such confidence that if they advised the Prosecutor to go on with the work we would all back them up in the action that they had taken. The general sentiment of the Council seems to be that something of the kind proposed is necessary and that the committee suggested by Dr. Machell would be the best; and now I would simply suggest to Dr. Bray to amend the clause of the committee's report, that a committee consisting of these four gentlemen be appointed, and then it will not be necessary to bring it up by a separate motion to-morrow, but settle it now and save time.

Dr. HENRY—Do we understand that the proposed committee is not to be a spending committee, that those gentlemen will do the work without expense? I do not see anything to prevent the Discipline Committee from attending to that duty of advising the Prosecutor; I think it is part and parcel of their duty. I know, of course, it is the duty of the Discipline Committee to look after regularly licensed practitioners, but there is nothing in the Act to say they could not advise the Detective in dealing with unlicensed parties. Of course there is the difficulty that they are at different ends of the Province, but that difficulty can be easily obviated; we could have them all in Toronto, where I think they ought to be. However, I have no objection to the formation of this committee provided there is no expense.

Dr. BRAY—The Discipline Committee does not want the job. We are very happy indeed to think there are gentlemen in Toronto who are willing to undertake this arduous duty.

Dr. MACHELL—I have just a word or two to say in explanation. If you will look at the writing in the motion, you will see that my original intention was that "the Prosecutor may consult this committee," but my seconder thought that we had better put in the word "shall." My intention originally was that in doubtful cases the committee should be consulted, but where, as Dr. Britton suggests, the Prosecutor had no doubt about his case, it would not be necessary for him to consult the committee. I named Dr. Barrick and myself as territorial representatives, and named Dr. Emory, but did not name Drs. Thorburn and Britton for the reason that I did not want to make the committee too large. As Dr. Thorburn's name, however, has been suggested, I would also like to add it with Dr. Britton's, and then the committee would include the whole of the Toronto members, and in that way would divide up the responsibility.

Dr. BRITTON—Mr. Chairman, I would like to see the committee as small as possible. I think that three men who are possessed of good judgment would be quite a sufficient guarantee to this Council that the advice given would be the best. So far as I am personally concerned, I think it would be unwise to add my name to those already mentioned as members of the committee; it would be far better the committee should consist of three or four at the outside than of five or six, unless the members of the committee are disposed to do the work gratuitously.

Dr. MACHELL—That is what we want to do—to work gratuitously on this committee.

Dr. BRITTON—If that is the case I am perfectly willing to have my name put on. (Hear, hear.)

Dr. DICKSON—When I expressed the opinion that the word "shall" should be put instead of "may," I understood that Mr. Wasson's proposition was that he should receive a salary as heretofore, and that the fines should go to the Council and the Council should bear all expense where fines were not secured. Of course, in the event of the present arrangement being adopted, I clearly see it would be desirable to allow the Prosecutor in such cases as he felt he could secure a conviction to go on, and only in such cases as he was doubtful of, and where the possibility was he might not succeed, to consult with the committee proposed

before taking any steps or incurring any expense. After having received further light on the subject from the discussion, I am quite willing that the word "shall" should be changed to "may."

Dr. THORNBURN—I think this committee is a very important one. The expenses in connection with prosecutions are something alarming, and one sometimes asks, is it worth the shot? Isn't it waste of money? Perhaps it is to our advantage that quacks should go on and treat the public. We are doing this work of prosecution as much for the public as for ourselves. Another point I wish to mention is, I think a small committee is a more effectual one than a large one. Where there are quite a number of men on a committee they reason with themselves in this way, "I cannot go, but there are plenty of other fellows there;" while if you name a smaller committee, each man feels that the thing cannot go on without him. So far as remuneration is concerned, while I am as fond of money as most men can be, if it is thought desirable I shall be happy if you choose to put my name on and keep it on to give my services gratuitously. But I do not see why we should as a committee be different from other committees altogether. There is a good deal of work in this thing, and a good deal of bad feeling is oftentimes created, and I would like if possible that the Discipline Committee should undertake this duty, but I see difficulties in the way. Calling them to Toronto from different parts of the Province would be attended with a very great deal of expense. I think the committee proposed would be of very great advantage to the Council.

Dr. McLAUGHLIN—There is no doubt the enforcement of any law that is calculated to punish scamps is envired with a great many difficulties; and even if you appoint this committee I have not the slightest idea you are going to overcome these difficulties. In my judgment a good, sharp detective, who has had experience in failures, ought to be able to suggest as much wisdom as to future action as any one else, more particularly one of a judicial mind or one who has had judicial experience in such cases. If any of our members here were magistrates and had to deal with the enforcement of the License Act, they would know how difficult it is to enforce that Act, and there you are dealing with men a good deal like the rascals we are trying to reach with the Medical Act for the benefit of the public. I agree with Dr. Machell. I think it is well, if we have a committee at all, that they should be in Toronto, where their labors should not be attended with much expense to the Council, and I think this committee would be able to give as good advice as the other committee proposed, and they certainly should say to Mr. Wasson that he should not run to all parts of the country when he gets a little hint that something is wrong, that he ought not to go until some medical man or some person in that locality assumes the responsibility of placing, as far as he can, substantial evidence in his hands in order that a prosecution might proceed, and when that has been obtained I think it is well that it should be submitted to this committee. Whilst I quite agree with the motion to have the committee, I do not look for a vast improvement upon prosecutions in the future over the past, because I say if you attempt to get hold of those fellows they are a class of men always, I think, who will not scruple to make a statement, after kissing the Bible, that is not in harmony with the truth, and they won't scruple to do anything to get others to do the same in order to relieve them of the punishment that is likely to be inflicted upon them. I agree with the suggestion of Dr. Moore that the Act should be altered so that the punishment should be progressive as it is under the Liquor License Act. I think under the Liquor License Act the punishment for the first offence is \$25.00 to \$50.00, the next \$50.00 to \$100.00, and the punishment for the third offence is imprisonment without fine, and a surrender of license. These are my views. I concur in the appointment of this committee, and I hope good will come out of it.

Dr. BARRICK—There is just one thing I wish to be perfectly clear upon; I am not sure whether I understand this motion right. Is it the understanding that in all cases where the Prosecutor assumes the responsibility himself of taking proceedings that he himself is responsible for the expenses of those proceedings, and he gets the fines in those cases?

Dr. MOORE—That is correct.

Dr. BARRICK—And that any case where he is doubtful, where he might say, "Here is a case in which I am not sure whether the fines will pay me for my trouble," he will submit to this committee, and if this committee undertake to recommend the prosecution, then this committee commit this Council to the expense of those prosecutions and the Council will get whatever fines come from them?

Dr. MOORE—That is our idea of what the understanding should be.

Dr. ARMOUR—You are under a misapprehension as to how it is at the present time. We now pay our Prosecutor \$600.00 a year salary, and if his fines do not amount to sufficient to cover his expenses, then he must meet them out of that salary.

Dr. BARRICK—That is what I say. I understand he gets \$600.00 a year apart from prosecutions altogether.

Dr. ARMOUR—And he pays his own expenses.

Dr. BARRICK—He gets \$600.00 a year and he must bear the expense of these prosecutions, but he gets the proceeds of the fines. This proposition is that he shall do the same thing, only where he is doubtful and thinks he is going to fall short, and it would not be safe for him to assume the responsibility, he will then consult the committee, and when the committee once decide that they shall prosecute they make the Council liable for that particular prosecution, and the Council get the benefit of the fine, if any.

Dr. ARMOUR—That is the intention, I understand, of this proposition.

Dr. CAMPBELL.—Of course, that would have to be afterwards definitely arranged in the new contract entered into by the Prosecutor. The adoption of the report and the amendment will not, of course, definitely fix that.

Dr. WILLIAMS—I think there is one advantage in having a committee, whether it results in cheapening the matter or not. This Council have a responsibility as to the kind of cases that are prosecuted, and when it goes into the newspapers that the Prosecutor has had some person up and fined, the Council of the medical profession are held responsible. Under those circumstances, I think that we should have a committee which would pass judgment on the cases before they are prosecuted, and should know whether or not they are proper cases to take before the public. There are sometimes cases that seem to be vexatious more than anything else and that the profession would be ashamed to have prosecuted, and would prefer that they were not interfered with. I heard of one case, I think in the neighborhood of Barrie, where information was laid and the Council were urged to have a prosecution pushed against a man who was not a registered practitioner, because he had used a syringe. The ground was taken that it was a surgical operation, and that under the Act he was open to prosecution. To my mind, that sort of case would be very vexatious to the public, as well as to the profession. And sometimes prosecutors, in their zeal, might take some kind of cases that we would rather, for our own reputation and for the pleasure of the public, were left alone entirely; and I think it is a good thing that a share of those cases should be submitted to a committee before they are put before the public on the responsibility of the Council.

Dr. SANGSTER—I agree with a good deal that has been said, and I do not agree with much more. I am not second to anybody in my desire to see those who are breaking the law prosecuted; I think they should be prosecuted condignly; but, as I have already stated, I think this Council is not the body that should have the responsibility of prosecuting them. I know, from much conversation with members, that the great reason why the medical profession is just now so unpopular in our Legislature is due partly to our public prosecutions, partly to our tariff or attempts at a tariff, and partly to a—I do not know what else to call it—pure cussedness on the part of the Patrons and others in the House. I think that when we have a public Prosecutor, and it is understood he prosecutes at his own risk, he is merely like a bloodhound sent through the country by this Council to hunt its prey. If he does that under theegis and sanction of a committee, I think the public will hold this Council much more directly responsible for those prosecutions even than it does now. And I submit that the law is wrong in that matter. I do not care what the feeling of the House is, or what the expressions of Mr. Cartwright may be on the subject, if proper representations were made to the Legislature, and the whole matter was placed properly before the Legislature so as to show that these prosecutions are made not in the interests of the profession, but in the interests of the public, and that it is police work that belongs not to this Council, but to the Attorney-General's office or to some other office, I cannot conceive that we should fail to obtain justice in the matter. I ask you to imagine what would be the condition of the lawyers throughout the country if they were in the same condition? Suppose the lawyers obtained an Act (which they have been too wise to do) authorizing them to appoint a public prosecutor to go through the country and to haul up and fine every township and county clerk and every broker who ventured to draw deeds or to write wills, would the lawyers not in a very short time have as great a howl against them on the part of the ignorant public as the doctors have now? I do think it is and has been a great weakness to this Council that they ever assumed those prosecutions; and I do think that under happier auspices the work might have been placed at first, as I think it might yet be placed, where it properly belongs—not in the hands of this Council, or in the hands of a committee of this Council, and not in the hands of a prosecutor appointed by this Council. I would like to see steps earnestly taken, taken with a firm determination to push them to the end, to place the matter properly before the Government; and I am quite sure that if the Government were convinced that the prosecutions were in the interests of the public, as I am confident they are, steps might be taken to relieve us of what is a very unpleasant and very expensive duty.

Dr. BRITTON—I would like to know before the vote is taken upon this motion, whether this work is to be done gratuitously, because if it is not, it would be far better if the committee consisted only of three members.

Dr. ROGERS—J think you had better add to Dr. Machell's motion that the work of the committee shall be done free of charge.

Dr. SHAW—We should not be willing to ask a committee to do a lot of work for nothing when we are not willing to do our work in the Council for less than we were paid last year.

Dr. MACHELL—It was my intention we should do the work free because we live here, but I have not spoken of the matter to Dr. Emory or Dr. Britton.

Dr. MOORHOUSE—Is it the intention of the committee to visit outside places?

Dr. MACHELL—No.

Dr. MOORHOUSE—I do not see, under those circumstances, what expense they may be put to; they may have to meet for half an hour, but that is all the mover intended.

Dr. BRITTON—There might be half a dozen cases submitted at once, and a lot of evidence to be gone over that would take half a day.

Dr. MOORHOUSE—The Prosecutor will be given authority to undertake certain work on his own responsibility; I think the intention of the mover of this amendment was that the committee should not be put to any great expense or loss of time. I think if they are they should certainly be paid.

Dr. EMORY—The first intimation I had of the proposition was when Dr. Machell read his motion. I for one am quite willing for this year to give my services on that committee gratuitously. It is largely an experiment; we may have nothing to do, but if we find the duties so onerous as to interfere with our professional duties, I am sure that next year the Council will relieve us of them. (Hear, hear.)

Dr. BARRICK—I would like it made perfectly clear in that resolution whether it is just those cases that the Prosecutor does not wish to undertake himself will be submitted, or that all cases will be submitted.

Dr. SANGSTER—I would like to know whether the public Prosecutor has, under existing circumstances, and whether it is intended he shall have under this committee, unlimited power to prosecute and pay for solicitors or counsel in these prosecutions?

Dr. ARMOUR—That is not covered in this resolution. Subsequently it might be arranged, but if this is to be a final disposition of the matter possibly it would be better to add something further to this resolution.

Dr. THORBURN—When the Finance Committee's report is taken up there will be an opportunity given for discussing that.

Dr. BRITTON—I should think the committee would control details of that kind in its conference with the Prosecutor. I think he would be expected to act in all respects under the instructions of that committee when the committee is called on.

Dr. BARRICK—I think the point raised by Dr. Sangster is a very important one. Suppose this committee say, "we think that is a proper case to go on to prosecute," does that give the Prosecutor *carte blanche* to employ counsel and to go into any expense he may see fit, and run this Council into perhaps more expense than ever before? The point is, what control the committee would have in respect to controlling the expense that might be gone into?

Dr. CAMPBELL—It strikes me we had better leave that open now, and on consideration of the report of the Finance Committee, or whatever committee deals with the engaging of a Prosecutor, fix all the details and terms.

Dr. DICKSON—It was the intention of the seconder, and, I think, of the mover, that the Prosecutor should receive all his suggestions in these cases from the committee.

The CHAIRMAN put the motion as follows: "Moved by Dr. Machell, seconded by Dr. Dickson, That the committee mentioned in the fourth clause of the report be composed of the following members, viz.: Drs. Barrick, Emory, Thorburn, Britton and the mover," and on a vote having been taken declared it carried.

Moved by Dr. BRAY, seconded by Dr. MOORE, That Clause 5 as amended be adopted.

Carried.  
On motion, the committee rose and reported the adoption of the report as amended.

The committee rose, the President in the chair.

Moved by Dr. WILLIAMS, seconded by Dr. BRAY, That the report as amended be adopted.

Dr. SANGSTER—I want to ask the Committee on Discipline whether they have received any communications or taken any action on any communications *re* Dr. McCully, who is under suspended sentence by this Council. He is, I believe, at present in Milwaukee. Some months ago I was almost deluged with marked newspapers sent from the city of Milwaukee, containing portraits of Dr. McCully, and large advertisements in which he flourished the fact that he was "none of your doctors that were ex-flunkeyfied,"—or some such word—"by the Medical Councils, and I would like to know what Dr. McCully's standing is with this Council now, or if he is to be suffered to travel through the United States as a member of this College, and to flourish that fact in connection with his advertisements. If such is the case, then the sooner the Discipline Committee revoke his suspension the better. I have just now been handed by the Prosecutor one of his advertisements in which Dr. McCully says after the most flourishing heading, "Young men, have you sapped your vitality by vicious habits, is your manhood almost gone, your nervous system nearly wrecked, is your memory bad, your

brain dizzy, and are you on the verge of self-destruction? Then, apply to the greatest specialists. We warrant our work in every case. Old men, have you burned the wick of life at both ends—is your sexual life gone? We bring it back; we guarantee our work," and so on.

Dr. MOORE—I made a motion that the report be adopted as amended, and Dr. Sangster's remarks seem to me to be quite irrelevant.

Dr. SANGSTER—I may be out of order in reading this, and if so, I will sit down. I merely wanted to enquire whether that man was to continue to travel through the United States as a member of this College.

The PRESIDENT—Dr. Moore, as a member of the committee, might give you some information.

Dr. MOORE—I am glad to say I have never received any of those papers, and I did not know he was touring the United States in this manner; but I suppose he has a right to tour the United States as he pleases; he is out of our jurisdiction. He is under suspended sentence, and if he comes back here I presume he will be taken in hand right away (the sword is over his neck), and probably at the next meeting of the Council the full penalty of the law will be meted out to him. But at present he is out of our jurisdiction; we cannot follow him to Milwaukee.

Dr. MOORHOUSE—I wish to remark that I do not think we as a Council, in the face of this proof that Dr. Sangster has just read, should allow this man to go abroad under our cover or protection. True, he is under suspended sentence, but I think that this is a fresh proof that the old Adam is still operating in him as lively as ever. I think we ought to strike him off the Register, or he will be back here, no doubt, before long. I think we have been long-suffering enough and that he ought to be stricken off without further delay.

Dr. DICKSON—Does not suspended sentence mean that he must commit another offence before we can take further action?

Dr. MOORE—No.

Dr. DICKSON—Then cut him off.

Dr. SANGSTER—Certainly, if another man is brought up under the report of the Discipline Committee and it is pleaded we should allow him to go under suspended sentence, in view of the fact that he can go and travel through the States, though under that suspended sentence, and circulate foul stuff of that kind, then the Council will be very loath indeed to let him off under suspended sentence.

Dr. MOORHOUSE—Is the discussion of Dr. McCully's character before the chair on that report?

The PRESIDENT—No, it is out of order.

Dr. McLAUGHLIN—Can we not amend that report by instructing the Discipline Committee, if they are still alive, to strike Dr. McCully's name off the Register?

Dr. THORBURN—Does his name appear in that paper as a licentiate of this College?

Dr. SANGSTER—Yes.

Dr. BRITTON—When Dr. McCully's case came before the Council for consideration, I was one of those who pleaded that he might go under suspended sentence, notwithstanding he had acted in such a way as to humiliate and disgrace this profession largely in this country, and notwithstanding I had to say on that occasion, he was, amongst all sinners against decency and propriety, one of the greatest—at the same time because of the promises he made and because I had a certain amount of confidence in his word that he would keep those promises, I pleaded for him. Now I feel just as strongly the other way. We have dealt with the matter very patiently; and I am not very certain whether—supposing we pass that resolution as an amendment to that report, and instruct the Discipline Committee to have his name taken off the Register—we would not be acting *ultra vires*; and it might be that an appeal from our decision to a higher court would be sustained. I will move that the Discipline Committee be instructed to get the advice of our Solicitor as to the speediest and best method of proceeding for the purpose of removing Dr. McCully's name from the Register.

Dr. MOORE—This man is out of our country and out of our jurisdiction entirely. He can commit what crimes he has a mind to in a foreign country, and while he remains there we cannot punish him here for what he does there. Dr. Sangster has read an advertisement, but we do not know, as a matter of fact, that Dr. McCully instigated that advertisement. We have no proof whatever that Dr. McCully authorized anybody to put that in the paper; and for us to take from a man his license and erase his name from the Register upon an advertisement appearing in a paper, without any proof that it was upon his authority or at his instigation, seems to me would be an action totally unwarranted. And I also wish to point out that the Discipline Committee have no power to strike a man's name off the Register; they simply take the evidence and report to this Council. It is only this Council that can strike a name off the Register; and to ask this Council to-night or to-morrow to strike a man's name off the Register simply because we find an advertisement with his name attached to it—not his signature—to my mind would be a very dangerous course to pursue.

The PRESIDENT—I think so, too ; I shall have to rule the matter out of order. There is a motion before the House to adopt this report.

Dr. MOORE—I have no desire to defend Dr. McCully ; my only desire is that we shall not in our haste, or by any rash act do something whereby we might put ourselves in a very awkward position.

The President put the motion, and on a vote having been taken declared the report adopted as amended.

Dr. Britton asked leave to introduce a motion at this stage without formal notice.

The President took the sense of the meeting, and granted leave to Dr. Britton to introduce his motion.

Moved by Dr. BRITTON, seconded by Dr. THORBURN, That the case of Dr. Samuel Edward McCully, now under suspended sentence, be referred to the Discipline Committee.

The President read the motion.

Dr. McLAUGHLIN—The question is, Has Dr. McCully's crime been such that we can strike his name off ? I agree with Dr. Moore, that we have not a tittle of evidence against S. E. McCully on which to erase his name from our Register.

Dr. WILLIAMS—My view harmonizes with the remarks made by Dr. Moore, that we really have no ground to proceed against this man at the present time at all ; and I believe, as long as he is in the United States and is not interfering with us here, we would bring ourselves very much into disrepute if we took action against him and struck his name off. I do not think he is harming us—he is not harming the practitioners of the Province of Ontario, and whatever he may say in the United States I do not think is any material business of ours. And I think if we trouble ourselves to follow all over the United States people who are not just what they should be, we will incur an unreasonable amount of expense and, what is still worse, a considerable amount of censure, and my conviction would be we would deserve the censure. I think we should be perfectly satisfied that Dr. McCully has got out of the country, and so long as he will stay out we should let him alone. When he comes back to Ontario, I think, is time to take prompt action and deal with him, provided we have something against him ; but I do not think it is reasonable, after you have let him once out on suspended sentence, to bring that matter up again and erase his name unless it is shown that he is not keeping the contract entered into.

Dr. CAMPBELL—I think there can be no objection to passing Dr. Britton's motion. It does not commit the Council to anything, and the Discipline Committee have to report to the Council before anything is done.

Dr. MOORE—Except to add to the motion that the Discipline Committee should not act.

Dr. WILLIAMS—I agree with Dr. Campbell that it should be added that they do not act or incur any expense. I would like added to the end of the motion, "With instructions to take no action until he enters Canada."

Dr. BRITTON—I would not like to add that, because in case the taking of his name off the Register be advised by our Solicitor, if that addition be made it would strengthen his case on appeal.

The President put the motion, and on a vote having been taken declared it carried.

Moved by Dr. THORBURN, seconded by Dr. MOORE, That the report of the Property Committee be adopted. Carried.

The PRESIDENT—There is another report which Dr. Reddick has which we might consider now and get out of the way, but it has not yet been presented.

Moved by Dr. EMORY, seconded by Dr. MOORE, That the rule be suspended to allow Dr. Reddick to present his report. Carried.

Dr. REDDICK presented and read the report of the Committee on Rules and Regulations. The report was received.

#### REPORT OF COMMITTEE ON RULES AND REGULATIONS.

*To the President and members of the Council of the College of Physicians and Surgeons :*

Your Committee on Rules and Regulations beg leave to report as follows :

With reference to some suggestions as to amending of Rule 3 relating to the election of President and Vice-President, your committee beg leave to recommend that no change be made in the rule.

R. REDDICK, Chairman Committee.

Adopted without amendment. A. F. ROGERS, President.

Moved by Dr. REDDICK, seconded by Dr. MACHELL, That the report of the Committee on Rules and Regulations be adopted.

The President read the motion.

## Reports of Societies.

### THE CANADIAN MEDICAL ASSOCIATION.

(Concluded.)

#### THURSDAY MORNING.

The forenoon session of the Association was held in McGill College. A demonstration of the Roentgen rays was given by Dr. H. P. Girdwood.

Dr. Price-Brown, of Toronto, presented a paper on

#### Clergyman's Sore Throat.

The writer, in selecting this title for his paper, has done so on account of the still common practice among clergymen and general practitioners of applying it to all cases of chronic soreness of throat to which the former are liable. By most of the older writers the term was confined to chronic follicular pharyngitis. Sajous, in his recent issue, limits it to chronic laryngitis; while Bosworth ignores it altogether. Hence, being indefinite in meaning, ignored by some writers, differently defined by others, and the symptoms complained of being produced by a variety of diseases, it would be better for both lay and professional men to discard it altogether, and to name the throat disease on the basis of etiology.

A large majority of cases of chronic throat disease in clergymen arise from nasal or naso-pharyngeal obstruction of one form or another; and to cure the disease we must remove the stenosis.

The nose in a normal state performs the threefold function of cleansing, heating and saturating the air of respiration before it reaches the throat, duties which can only be efficiently performed when nasal respiration is unimpeded. To produce this air saturation, the turbinateds throw out by transudation from  $\frac{3}{4}$  xii. to  $\frac{3}{4}$  xvi. of serum per diem. No other bodies possess the venous sinuses re-

quired to produce this supply; and consequently when nasal stenosis exists the scant pharyngeal moisture is quickly absorbed by the air, leaving a dry mucosa.

Oral breathing when established, in voice users particularly, frequently produces follicular pharyngitis, chronic laryngitis, or a boggy infiltrated mucosa, singly or combined, and often attended by the secretion of a thick tenacious mucus or muco-pus—the screatus required for the removal of which increases the pharyngeal irritation.

Hypertrophy and elongation of the uvula are also not infrequently the direct results of the irritation produced by this kind of breathing.

It is possible that the throat symptoms enumerated may sometimes arise by reflex action from digestive disturbances; but as a rule they owe their origin to nasal obstruction of one form or another.

The writer concludes by giving the history of ten cases of throat disease in clergymen, selected from a record of twenty-five. They were chosen as representative cases, all differing from each other as to cause, but all presenting similar throat symptoms. Four-fifths of them, or 80 per cent., owe their origin to nasal obstruction.

The treatment in all cases was the removal of whatever obstructions existed, followed by mild spray treatment during the process of healing, care being taken always not to excise too deeply, or to remove in any way the normal tissue. As a result, the throat symptoms in all cases improved and in many disappeared. The cases are epitomized as follows: In one there was a large polypus in one nasal cavity; in one, a dislocated columnar cartilage; in one, a twisted or contorted uvula; in one, hypertrophy of the faucial tonsils; in one, ulceration in the left hyoid fossa; in two there were septal ridges; in two, septal spurs; in two, catarrhal hypertrophies of the post-septum; in two, pharyngeal granulations; in three, turbinal

hypertrophies ; while in one only, the most hopeless case of all, and in which there was no hypertrophy anywhere, there was uncomplicated laryngeal disease.

The Address in Medicine was delivered by Dr. George Wilkins, of Montreal. He chose for his subject,

**The Modern Treatment of Some Diseases as the Result of Experimental Investigation.**

When Jenner vaccinated the eight-year-old boy from the infected hand of a dairy-maid, and subsequently inoculated him with small-pox, he laid, it might be said, the foundation of microbial pathology, although he knew nothing of microbes. But Linnaeus, fifty years before, thought minute organisms were the cause of disease. Later, Lister astonished his audience by proofs that many surgical conditions were due to germs. The essayist showed that as a result of Pasteur's investigations as to the cause of disease in the silk industry millions of francs had been saved to France. The progress of anthrax had been arrested by his plan of protective inoculation. Following Jenner and Pasteur, many investigators were studying other diseases, and serum therapy was now recognized as the most advanced and most successful form of treatment.

The work of Pasteur next passed in review, which had contributed the most important of all links yet made between science and therapeutics. He outlined the wonderful progress made in the study of the pathology and treatment of diseases, both medical and surgical. What with the microscope and the promulgation by Virchow of cell pathology, much has been done to place medical science on an intelligible basis.

The essayist, after alluding pretty fully to experiments made in forwarding this work, discussed incidentally the question of auto-intoxication. The question of treatment by animal extracts was then reviewed.

**Etiology and Treatment of Acne Vulgaris.**

A paper thus entitled was read by A. K. Robinson, of New York. He said many men regarded acne as a constitutional disease and the eruption as a local manifestation of the general condition present, a necessary consequence of a particular period in life associated with certain developmental processes or with abnormal physiological actions during this period from the abuse of certain organs and to be corrected by moral training ; or as incurable infection until the youth had reached full manhood. Others regarded it as dependent upon functional or structural diseases of such organs as the uterus, stomach, liver, etc. The eruption, being the result of reflex action, was the attempt on the part of the organism to remove deleterious substances from the body through the agency of the sebaceous glands. Others held that it was partly a local disease. His own effort in this paper was to show that in the great majority of cases the disease was essentially a local one, and in the treatment the local conditions demanded our principal attention, and that only in a limited number of cases does the condition of the general system or of some internal organ play more than a subsidiary or accessory part and demand most consideration. He held that this affection of the sebaceous glands had its direct and exciting cause from an organism, and that the principal predisposing and accessory factors were also local abnormal conditions, whilst systemic conditions only in certain cases required but little attention.

The clinical features of the disease were then described and pathological anatomy thoroughly outlined. A knowledge of this he considered necessary to a rational treatment. The comedone was also described. In all cases he had examined the staphylococcus pyogenes albus was present and sometimes aureus, upon which the suppurative process likely

depended, and not upon the bacillus described unna. This latter, which was found in seborrhœic conditions, might have much to do with the hyper-keratosis and comedo formation. In addition, the decomposing sebaceous matter would also tend to increase the folliculitis. The treatment, when the disease was established, consisted in thinning the corneus layer and emptying the follicles. This could be done by the use of a potash soap and hot water. All the soap should be removed. In addition to this, to lessen the keratosis, resorcin, sulphur and beta naphthol must be used—the sulphur from 6 to 25 per cent. strength, resorcin, 2 to 4 per cent. This also acted as anti-parasitics; but perhaps the best of all, after the acne lesions have been removed, was corrosive sublimate.

Dr. Coventry, of Windsor, President of the Ontario Medical Association, telegraphed his regrets at not being able to visit the Association, and extended a friendly greeting as spokesman for the sister society.

Professor Wesley Mills presented a pigeon, two cats, a rabbit and a puppy, from which he had removed the motor centres of the brain. The motor power in the limbs of the pigeon was very little affected; but to an increasing degree in the other animals in the order named. The power, however, in all was gradually returning.

#### The Theory of the Eliminative Treatment of Typhoid Fever.

Dr. W. B. Thistle, of Toronto, read a paper with this title. He had discussed this question in a previous paper; but the idea he had intended to convey by the term "eliminative" had been misapprehended, even by a well-known writer of a recent work on the practice of medicine, who had stated that the treatment was based on erroneous ideas as to the pathology of the disease. The first of these was that the specific bacteria are confined chiefly to the intestine.

The writer of the book had made the positive statement that the specific bacteria were not present until the ninth day of the disease. Dr. Thistle then proceeded to show that the upholders of the eliminative treatment did not hold that the bacteria were confined to the intestinal tract only. He also called attention to recent researches which proved that the bacillus typhosus was to be found in the early days of the disease, even before disease had become pronounced. By the use of purgatives given daily throughout the disease the process of infection was interrupted by sweeping out the intestinal contents; then augmentation of toxins was prevented by the carrying away of the toxic bile and to further deplete the volume of the toxins by causing a free secretion into the intestine containing the poison in solution. Antiseptics, chiefly salol, were given, too. To compensate for the withdrawal of so much fluid from the body, as well as to dilute and facilitate the elimination of the poison, the ingestion of large quantities of water was to be enjoined.

Dr. Osler stated that the theory was a good one, like many other theories in medicine; but the practice was a bad one—of purgation throughout the disease. He admitted the error of the recent work Dr. Thistle had referred to in regard to the presence of the bacilli in the early days of the disease.

The idea of elimination in typhoid was carried out, he considered, best by the baths through their action on the skin and kidneys. He considered purgatives dangerous. This idea was not new, he said, as it had been advanced by a French author years ago.

The Association then adjourned to Hotel Dieu, where Sir William Hingston gave an interesting clinic, and where luncheon was partaken of.

Dr. Hingston gave a little history of the progress of surgery as practiced in the Hotel Dieu since his

connection with it. He referred to most of the common operations, commencing with those at the head and ending with those at the feet. He spoke first of the treatment of abscess and tumors of the brain, referring next to cases of depressed fracture. He said it was wise, where a depressed fracture was suspected, to make a crucial incision and examine the bone. The doctor then discussed his method of treatment of polypi with broad bases. His early practice was to lift the nose and turn it over as you would lift a hive of honey, putting this back again to its position. After seeing Hamilton operate, he adopted another method of working one index finger through the nostril and another through the mouth until the fingers met. In one case of this sort there had been an immense amount of hæmorrhage. The doctor then gave his experience in the treatment of tuberculous cavities, referring more particularly to empyæma. He then discussed the question of stone in the bladder and stricture following this. He outlined his method of treating cancer of the breast. The subject of appendicitis then came under his notice. He leaned to the conservative side of the treatment of this disease. He presented a patient with club-foot, and gave an account of his method of treating it. He discussed the question of ingrowing toe-nail, recommending that the patient should be put to bed and applications of sulphate of zinc with granulations. He did not advise removal of the nail. He next discussed the treatment of ulcers and the question of how best to stop hæmorrhage. In closing he discussed the question whether it was right to open the abdomen to establish a diagnosis. His answer to this was emphatically, no. From his own experience, he stated that on only one or two occasions had he ever failed to make a diagnosis.

Dr. D. Campbell Meyers presented a patient with hereditary cerebellar ataxia. The patient was a boy whose family history was neurotic (a grandfather dying of ataxia) and diabetic. The patient himself suffers from diabetes insipidus. The present illness began three years ago with a peculiar affection of the speech; suffers from obstinate constipation. Patient is a well-developed boy and has no noticeable deformity of head or body, except that the arch of the palate is high. The knee-jerks are decidedly increased, and there is a moderate ankle clonus on both sides. If either foot is forcibly flexed and the tender achilles tapped with a percussion hammer, trepidation in the foot is set up, which continues as long as the upward pressure is maintained. The reflexes of the wrist and elbow are very active, and the same may be said of the superficial reflexes. Jaw jerk is absent. There is no disturbance of sensibility or any portion of the body. The gait is uncertain and staggering, the feet being placed widely apart. He is unable to start to do anything quickly. On attempting to walk he hesitates for a moment, then starts and walks with uncertainty, and turns around with difficulty. On being asked a question he hesitates an instant, and then replies in a slow and scanning manner, the separate syllables all being pronounced. Movements of the muscles of the face are slow, which gives him an unusual expression. The innervation, however, seems equal on the two sides, and these muscles do not remain unduly contracted, nor is this found in any of the stretched muscles. His movements generally are awkward. He says at school boys poke fun at him because when laughing heartily he could prevent himself from falling backward only with difficulty. He has a certain amount of difficulty in bringing his finger tips together with eyes closed. There is some titulation on standing with his feet

together, which becomes more marked when his eyes are closed. He cannot retain his balance when one foot is placed immediately before the other with the eyes open; he at once falls sideways. *Dynam. R.* 77, L. 60. No defect in smell, hearing or taste is found. Discs normal; conjunctivæ will bear touch quite well. The essayist outlined the subsequent history of the case and gave a full description of its pathological anatomy.

Dr. John Stewart gave the Address in Surgery. It reverted mainly to the pathological work done by Lister. He first referred to Lister's work on the essential nature of inflammation, which he (the speaker) considered to be the keynote of all his teaching. Lister's experiments to discover the part played by the nervous system, the blood vessels, the blood and the tissues themselves in the process of inflammation were related. His accidental discovery that tissues possessed inherent powers of recovery made this a favorite idea in his teaching. His studies on healing wounds and ulcers were outlined. His ideas regarding antiseptics were not exemplified by those who used carbolic acid and other antiseptics so freely to injured tissues. He believed they needed not to be stimulated or treated with any mysterious "specific." All they needed was to be left alone. Lister's ideas on absorption, suppuration and counter-irritation were then quoted. The spirit in which Lister worked was commended. On the one hand, devotion to the good of his fellow-men; on the other, a reverent attitude toward the Eternal Power who manifests himself in these mysteries of life.

Dr. D. Marcil then read a paper in French on "Thyroidectomy."

Dr. G. Lenox Curtis read a paper on

#### Oral Surgery.

This paper consisted in the relation of cases of blundering in treating diseases of the mouth, particularly those

of the teeth and jaw, such diseases as the dentist would refer to the doctor and the doctor to the dentist. He pleaded strongly that the subject of oral surgery should receive more attention in the curriculum of studies in medical colleges.

Dr. F. Buller, of Montreal, read a paper on "Some Cases of Foreign Bodies in the Eye in which the Electro-Magnet was used Successfully."

In the evening the members sat down to a sumptuous banquet at the Windsor Hotel.

#### FRIDAY MORNING.

Dr. James F. W. Ross, of Toronto, delivered the Address in Midwifery, subject

#### Abdominal and Pelvic Operations for the Relief of Conditions Incident to the Puerperal State.

Fibroid tumors and pregnancy was the first subject dealt with. The essayist reported three cases which showed that one must carefully weigh the question before deciding on the performance of Porro's operation, or of oophorectomy in young women suffering from fibroid tumors. The production of abortion was not always easy in these cases. A fourth case was reported in which the induction of abortion was exceedingly difficult, so much so that the reader maintained that a complete hysterectomy would have been an easy task compared with the removal of the placenta. He was satisfied that there was less shock from the delivery through the anterior incision than there was when the foetus was pulled by main force down through the parturient canal. Septic inflammation and suppuration often followed in these cases of fibroids after delivery. If the case for any reason has gone on to term, and craniotomy or embryotomy or difficult forceps delivery were under consideration on one hand, while delivery through the abdominal incision is under consideration on the other, abdominal section should be done.

The reader held strongly that such patients should not be allowed to become almost collapsed before their cases were carefully considered. In such cases total extirpation should be done. In dealing with the subject of ovarian cysts complicating pregnancy the essayist held that it was safer to leave them untouched until after delivery was accomplished, unless the life of the patient is seriously threatened by their presence. As to puncture, this should only be resorted to when the cyst was impacted, as another course to be pursued beside abdominal section or mutilation of the child. Hydramnios simulating ovarian cyst with pregnancy was next discussed. In two cases reported an abdominal operation was prevented by a preliminary puncture of the membranes from below. The question of pelvic contractions and pregnancy was next dwelt upon. Where the child was dead there could be no objection to craniotomy. Cæsarian section should have the preference always, as it aimed at saving the life of both mother and child. The next topic dealt with was pregnancy and intra-abdominal disease, such as intestinal obstruction, by bands, volvulus, intussusception, perforated appendix, etc. A case of operation for strangulation of a coil of intestine beneath a band in a pregnant woman was described. The question of rupture and perforation of the pregnant uterus was then considered at length, and the description of a case given. The patient miscarried at the fourth month, accompanied by rupture of the posterior uterine wall. Twenty-four hours after he opened the abdomen, washed out the blood from under the liver and spleen and from among the intestines. A large rent was found extending from the left corner down into the base of the broad ligament on the right side. The patient was suffering from much shock. The edges of the tear were too ragged and friable to permit stitching. A pair of forceps was passed up through the

vagina, and a rope of iodoform gauze drawn through the laceration, the upper end being cut off level with the peritoneal surface of the uterus. A drainage tube was placed in the cul-de-sac of Douglas from the front. The patient made an uninterrupted recovery.

Dr. J. C. Webster, of Edinburgh, read a paper on

#### The Place of Pessaries in Gynæcological Treatment.

In this paper the doctor discussed the various malpositions of the uterus in which the pessaries in times past had been used. He pointed out the fact that pessaries were daily coming into disuse through the closer study of accompanying conditions of the pelvic organs which led to these misplacements. These conditions being treated, the various flexions and versions would be corrected, incidentally.

Dr. Laphorn Smith read a paper on

#### One Hundred and Ten Operations for Retro-displacement of the Uterus with Subsequent Results.

They were performed for the most part upon women who had not only had retroversion with fixation, but the ovaries and tubes were at the same time prolapsed and bound down by more or less dense adhesions. In many of these also there was laceration of the cervix and perineum with a cystocele and rectocele. In those cases in which he had performed seven operations at one sitting, occupying from an hour and ten minutes to an hour and a half, he had obtained the most gratifying results. These operations were: (1) Rapid dilatation with Goodell's dilator; (2) Curetting with Martin's curette; (3) Repair of lacerated cervix by Emmett's method, or amputation by Schroeder's method; (4) Tightening up the relaxed anterior vaginal wall by Stoltz's method; (5) Repair of the perineum by Hegar's method; (6) Removal of diseased tubes and ovaries and breaking up all adhesions by binding the uterus

down; (7) Scarifying the anterior surface of the uterus and posterior surface of the abdominal wall and stitching to the latter by two fine buried silk sutures most carefully sterilized. The disasters following ventrofixation were two hernias and one relapse, all of which were subsequently remedied by a second operation. At the present time Alexander's operation has no death-rate; while ventro-fixation, while it has not any death-rate in simply non-adherent cases of retroversion, yet it must have a small death-rate when it follows the removal of very bad pus tubes.

Dr. J. E. Graham, of Toronto, read a paper on

**The Influence of Mitral Lesions on the Existence of Pulmonary Tuberculosis.**

The doctor gave a resume of the literature dealing with this subject, all of which went to show that when the two diseases, mitral stenosis and phthisis, occur in combination during the period of life between the ages of thirty and fifty, when the cardiac compensation is complete, the evolution of tuberculosis is much delayed. On the other hand, when the disease takes an individual after middle life, or when, from bad habits or bad hygienic surroundings, there is a low state of vitality, the process is often very rapid. A case of slow evolution had come under his observation ten years ago. The patient was a lady, twenty-four years of age, who, suffering from phthisis, consulted him as to the advisability of going to Colorado. Distinct synovitis were found as well as others of pulmonary tuberculosis. The sputum contained bacilli. The patient was advised to go to Georgia. She has been examined several times since, and the last time, about a month ago, there were signs of decided improvement. The doctor's conclusions were, judging from the statistics and the observations of eminent physicians: (1) That primary mitral disease

and pulmonary tuberculosis rarely exist in the same individual. It would appear that in uncomplicated cases, viz., those in which the other valves are healthy, mitral stenosis occurs more frequently in combination with tuberculosis than mitral insufficiency; where, when the other valves are affected, insufficiency is the most frequent condition. (2) That pulmonary tuberculosis is a very frequent sequel to pulmonary stenosis. (3) The presence of mitral disease acts as a preventive to pulmonary tuberculosis, especially when the vital processes are at or near their normal standard, and this prophylactic agency is shown in those who have a strong hereditary tendency to the disease and whose surroundings are of a decidedly unhealthy character. (4) In the small number of cases in which tuberculosis follows a mitral lesion during middle life, the evolution of the process is very much delayed. When, on the other hand, from age or bad habits, the vital powers are on the decline, the process is often as rapid as in ordinary cases. In accounting for the immunity from tuberculosis which patients suffering from mitral stenosis had, the essayist said the apices of the lung were subject to greater expansion by reason of the passive congestion at their bases. Thus there was an increased amount of blood in the lungs, hence greater germicidal action; besides there was an increase of involuntary muscular fibres of the bronchial and alveoli. From this the author deduced that an active hyperæmia which was producible would have a somewhat similar effect of immunizing persons from tuberculosis. This could be accomplished by suitable chest exercises, in which the apices would be expanded, allowing of a free exchange of air; a moderate hyperæmia would be produced and the muscular tissue would be probably increased in amount. The essayist thought if these exercises were properly taught in public schools they would be continued

throughout life, and they would be the means of preventing tuberculosis in many who are predisposed to it.

Dr. W. Tobin, of Halifax, read a paper on "Militia Medical Reorganization."

Dr. J. B. McConnell read a paper on "Tetany following Scarlet Fever."

Dr. F. J. Shepherd read a paper on "Excision of the Scapula."

**Streptococcic Puerperal Infection—Injection of Marmorek's Antistreptococcic Serum—Recovery.**

This was the title of a paper by H. L. Reddy, of Montreal.

Case.—Primipara, normal confinement, 7th July. An enlarged varicose vein of the left labium, near the posterior commissure, the only abnormality, became sit of a streptococcus infection which gradually caused a rise in temperature from 100 on the third day to 104 on fifth; pulse rate correspondingly high. Inoculation and direct microscopical examination showed the infection to be as stated. Staphylococci and the strepto-bacilli were also found. In a few hours after treatment by the anti-streptococcic serum the temperature dropped. There was tingling and numbness of the extremities for forty-eight hours. Within thirty-six hours hæmaturia appeared as a direct result of the injection. Local antiseptics was employed in addition to the other treatment.

Dr. A. L. De Martigny read a paper on "Electric Baths and Dyspepsia."

Dr. H. D. Hamilton read a paper on "Non-Malignant Tumors of the Tonsil," with a report of a case.

Votes of thanks were unanimously passed by the Association to the Reception Committee, to the Secretary, to the St. George's Church authorities, to the Treasurer, to the railroad and navigation companies, and to the President.

The retiring President, Dr. James Thorburn, introduced the newly-

lected President, and said that he felt sure he would discharge his duties with great ability.

Dr. Moore replied that he would endeavor to discharge his duties to the best of his ability, and thanked the members of the Association for the kindness they had bestowed upon him.

The meeting just ended has been the most largely attended since the formation of the Association twenty-nine years ago, and it is expected that next year's gathering will be still better attended.

Messrs. W. M. Grant and H. C. Taylor, familiar faces to the profession in Ontario, represented the Parke, Davis Co., and Mr. Chas. E. Frosst interested the members in the Wampole remedies.

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**PROVINCIAL BOARD OF HEALTH.**

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A meeting of this Board was convened, 10 a.m., September 15th, at Long's Hotel, Niagara-on-the-Lake. There were present, Dr. Macdonald, Chairman, Dr. Cassidy, Dr. Kitchen, Dr. Vaux and Dr. Bryce, Secretary. The Secretary read a report by Mr. Mackenzie, analyst of the Board, on the results of the examination of samples of potable water taken at Huntsville. The water was reported to be quite pure. The report was adopted. The final settlement of the disposal of the sewage of Hamilton was left to the Committee on Sewage. Dr. Cassidy reported on a nuisance caused at Formosa, Co. Bruce, by a piggery kept in connection with a creamery. The report recommended that the piggery be closed up. The report was adopted. Dr. Cassidy also read a report on the pollution of Silver creek, which discharges into the Saugeen river at Walkerton. The report showed that Silver creek receives the drainage of three tanneries and a brewery. The odors arising from the creek in some places

are disagreeable. The report recommended that Silver creek be regularly cleaned out, and the channel straightened until such time as a sewer is put down to receive the drainage of the above mentioned works. An addendum to the report contained the bacteriological character of a sample of Silver creek water taken close to its discharge into the Saugeen. Number of bacteria per c.c., 606,000.

Mr. Mackenzie also reported on three samples of water taken from the Saugeen, in order to test the effect of the discharge of a town sewer into that river. First sample, taken 100 feet above sewer, per c.c., 22,400; second sample, 35 feet below sewer, per c.c., 4,940; third sample, 300 yards below sewer, per c.c., 2,140. From these results and the very small amount of sewage discharged, the modern conveniences being used by only seventy-three persons, Dr. Cassidy concluded that the pollution of the Saugeen river from that cause would be of little account, and recommended that the use of a filter-bed for sewage be not insisted upon until pollution of the Saugeen could be proved to result from the discharge of the Walkerton sewage. The report was adopted.

Mr. VanBuskirk, C. E., Stratford, asked leave to introduce a lateral sewer in connection with the Stratford system. Permission was granted.

A deputation from Ottawa, consisting of Dr. Robillard, M. H. O., Mr. Keefer, C. E., Ald. Grant and Ald. Campbell, addressed the Board respecting the plan for draining the western portion of Ottawa, which had been approved of by the Drainage Committee of the City Council. It is proposed that the outlet of this sewer will discharge into the waterworks tail-race, which empties into the Ottawa river at the west end of the city. Objection was taken to this outlet by Dr. Robillard, who contended that the outlet should be carried into deep water, because if dis-

charged into the tail-race, the large deposits of sawdust in the quiet bays along the river shores would be defiled by the sewage, and evil results would necessarily follow. The decision reached by the Board was that the by-law sanctioning the present plan should be submitted to the people. Later on the Ottawa Council can be obliged to carry the outfall into deep water if a nuisance should result from the one described in the plan submitted.

The Board decided to print the report of the proceedings of the annual meeting of the Association of Medical Health Officers held at Niagara. The Board then adjourned.

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### ONTARIO ASSOCIATION OF MEDICAL HEALTH OFFICERS.

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The eleventh annual meeting of this meritorious Association was held at Niagara-on-the-Lake on the 14th ult. Though not as well attended as some of the previous gatherings, and though the meeting lasted but one day, there was no diminution of interest felt by the workers who were present, and no inferiority in the quality of the papers read, or the tone of the subsequent discussions.

The President, Dr. W. B. Hall, of Chatham, occupied the chair. There were also present, Dr. P. H. Bryce, Secretary, Toronto; Ald. Allan, Chairman of the Toronto Board of Health; Dr. Sheard, Medical Health Officer, Toronto; Drs. Cassidy, Kitchen and Vaux, of the Provincial Board of Health; Major Patterson, Chairman of the Chatham Board of Health; Dr. Beaudry, Chief Inspector of the Quebec Board of Health; Dr. Wyatt Johnston, analyst of the Quebec Board of Health; Mr. J. J. Mackenzie, analyst of the Ontario Board of Health; Dr. Wardlaw, Galt; Dr. McCrimmon, Palermo; Dr.

Griffin, Brantford ; Dr. Robillard, Ottawa ; Dr. Anderson, Dr. Chrysler and Dr. Avery, Niagara ; Dr. Hewitt, Secretary, State Board of Health, Minnesota ; Dr. Lee, M.H.O., Philadelphia, Penn. ; and Dr. Hutchinson, M.H.O., London, Ont.

The meeting opened in the Pavilion of the Queen's Royal Hotel, where the members of the Association were welcomed by Mayor Paffard, Ald. Evans, Rev. J. C. Garrett, Rev. N. Smith and Dr. H. L. Anderson, the local Medical Health Officer.

Dr. J. J. Cassidy, who has been connected with the Association since its inauguration some ten years ago, briefly reviewed the reforms which it had wrought in sanitary matters during its existence, showing the great progress made in hygiene throughout this Province. He spoke also in flattering terms of the high moral status of the sanitarian.

Dr. Hewitt read a paper entitled, "Domestic Health Officers," in which he advocated that more sanitary improvements be provided for the small houses in municipalities, which at present are somewhat neglected, as compared with shops and dwellings in the business parts.

Prof. Shuttleworth read a paper entitled "Experimental Studies of Diphtheria." This was a reflex of the scientific work done in the laboratory of the Toronto local Board of Health.

At the afternoon session Dr. Hall read the President's address.

Dr. C. O. Probst, Secretary of the Ohio State Board of Health, read a paper on the "Impediments to Sanitary Progress." He said that a good many of the doctors were slow to take up and work out to the utmost the reforms in sanitary matters established by the medical health officers. He was of the opinion that the public did not appreciate the efforts of the health officers, and in many cases looked upon any new sanitary law as an infringement upon their rights.

Mr. J. J. Mackenzie, the analyst of

the Ontario Board of Health, dwelt at some length upon the work which his department had accomplished. He dealt particularly with epidemics in cities, and showed clearly how, by analyzing water and food stuffs, a disease might be traced to its source.

Dr. P. H. Bryce explained the working of the law passed at the last session of the Local Legislature regarding registration. The results derived from the new law, he said, were eminently successful.

The Secretary-Treasurer submitted his report for the year, showing a good balance to the credit of the Association, and it was decided not to charge any membership fee for the ensuing twelve months.

The election of officers was then proceeded with, resulting as follows: President, Dr. C. Sheard, Toronto; Vice-Presidents, Dr. McCrimmon, Palermo, and Dr. J. J. Cassidy, Toronto; Secretary-Treasurer, J. J. Mackenzie, B.A., Toronto. Council, Dr. Wardlaw, Galt; Dr. Griffin, Brantford; Dr. Coventry, Windsor; Dr. Hutchinson, London, and Mr. Bowman, C.E., Berlin.

In the evening a banquet was held, which was largely attended.

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## The Doctor Himself.

The Publishers will be pleased to receive at any time, local or personal items from physicians which will prove of interest to the profession generally.

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DR. I. H. CAMERON has returned from England.

DR. FRANK P. COWAN has settled in practice at Durham, Ont.

DR. A. M. CLARK, Woodstock, was in the city ten days ago.

DR. FIELD has removed to the corner of Classic Avenue and Spadina.

DR. FERRIER has removed from 411 Parliament Street to 114 Sherbourne Street.

DR. GRAHAM CHAMBERS has moved into his new residence, 26 Gerrard Street East.

DR. J. M. JOHNSTON has moved from 14 Bismark Avenue to Elm Street, near Yonge.

DR. RECKER (Homœop.) has commenced practice on King Street West near Jamieson Avenue.

DR. J. L. DAVISON is building a handsome residence on Charles Street. It will be completed very soon.

DR. GIBB WISHART has been appointed lecturer on Laryngology and Rhinology at Trinity Medical College, and surgeon to the throat and nose department of the General Hospital.

DR. BRYANS has purchased the practice of Dr. Duncan, of Parliament Street. Dr. Duncan has just returned from the Old Country and intends taking up eye, ear, nose and throat work as a specialty.

DR. GEO. A. PETERS delivered the opening address of the winter session of Toronto University (medical department) on Wednesday evening, September 30th. He chose as his subject Serum-Therapy.

DR. H. P. H. GALLOWAY, who for eight years past has practised on Euclid Avenue, has given up general practice and entered into partnership with Dr. B. E. McKenzie, the orthopedic specialist. Dr. W. J. Fletcher has succeeded Dr. Galloway. Dr. Galloway left ten days ago for New York, where, for the next six weeks, he will make a special study of orthopedic surgery.

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### Births.

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WATT—On September 26th, 1896, at Victoria, B.C., the wife of Dr. A. T. Watt, of a son.

## The Physician's Library.

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*A System of Surgery.* By American authors. Edited by FREDERIC S. DENNIS, M.D., Professor of the Principles and Practice of Surgery, Bellevue Hospital Medical College, New York; President of the American Surgical Association, etc., assisted by JOHN S. BILLINGS, M.D., LL.D., D.C.L., Deputy Surgeon-General, U. S. A. Complete in four imperial octavo volumes, containing 3652 pages, with index, 1585 engravings and 45 full-page plates in black and colors. Volume IV., 970 pages, 441 engravings, and 23 plates. Price per volume: \$6.00 in cloth; \$7.00 in leather; \$8.50 in half morocco, gilt back and top. For sale by subscription. Full circular free to any address on application to the publishers, Lea Brothers & Co., Philadelphia. List of contributors: Robert Abbe, M.D., Gorham Bacon, M.D., Hermann M. Biggs, M.D., John S. Billings, M.D., W. T. Bull, M.D., W. H. Carmalt, M.D., Henry C. Coe, M.D., Phineas S. Conner, M.D., Wm. T. Councilman, M.D., D. Bryson Delavan, M.D., Frederic S. Dennis, M.D., Edward K. Dunham, M.D., William H. Forwood, M.D., Geo. R. Fowler, M.D., Frederic H. Gerish, M.D., Arpad G. Gerster, M.D., Virgil P. Gibney, M.D., Wm. A. Hardaway, M.D., Frank T. Hartley, M.D., Joseph T. Johnson, M.D., Wm. W. Keer, M.D., Wm. T. Lusk, M.D., Charles McBurney, M.D., Rudolph Matas, M.D., Henry H. Mudd, M.D., Chas. B. Nancrede, M.D., Henry D. Noyes, M.D., Roswell Park, M.D., Willard Parker, M.D., Lewis S. Pilcher, M.D., Wm. M. Polk, M.D., Charles B. Porter, M.D., M. H. Richardson, M.D., Jno. B. Roberts, M.D., Geo. E. DeSchweinitz, M.D., Nicholas Senn, M.D., Stephen Smith, M.D., Lewis A. Stimson, M.D., Robert W. Taylor, M.D., Louis McL. Tiffany, M.D.,

J. Collins Warren, M.D., Henry R. Wharton, M.D., Robert F. Weir, M.D., William H. Welch, M.D., J. William White, M.D., Horatio C. Wood, M.D.

We venture to believe that from two different aspects this fourth volume will seem to be worthy of special attention. First, because of the extremely practical, teaching character of the important articles, and secondly, because of the unusual beauty of the illustrations. Our readers will be particularly interested in the results recorded by Dr. Maurice H. Richardson, of Harvard, in his article on Surgery of the Stomach and the Intestines, the use of the Murphy button, Senn's plates, etc. McBurney, of New York, is naturally regarded as pre-eminently the authority on Appendicitis, and his clear enunciation of the technique of the operation will, beyond doubt, prove exceedingly helpful. Lusk's contribution, on Symphysiotomy, is a beautiful example of how to write an article so as to give a word-painting of the operation so clear in outline and so distinct in detail as to make it easy for any intelligent practitioner to meet every indication with perfect readiness. The illustrations, too, greatly assist in elucidating the text. The thoroughly up-to-date character of the book is displayed in the addition of a chapter on the Röntgen rays in Surgery from the pen of Dr. W. W. Keen, of Jefferson. The other articles in the volume are as follows: Tumors, by F. S. Dennis; Hernia, by W. T. Bull; Surgery of the Alimentary Canal, by L. S. Pilcher; Surgery of the Liver, by Robt. Abbe; Diseases of the Uterus, by W. M. Polk; Surgery of the Ovaries and Tubes, by Joseph Taber Johnson; Minor Gynæcological Surgery, by H. C. Coe; Surgery of the Thyroid Gland, by Robert F. Weir, and Surgical Peculiarities of the Negro, by R. Matas. The publishers claim that these four volumes of Dennis'

System of Surgery form a handsome and thoroughly practical exposition of the Surgery of to-day, offered by those whose positions as teachers and writers qualify them in the highest degree for the task they have assumed. It is with sincere pleasure, too, that they acknowledge that the profession throughout the entire country has not been slow to show their appreciation of the opportunity to obtain so grand an encyclopedia of the surgical art.

*Pltomains, Leucomains, Toxins and Antitoxins*; or the Chemical Factors in the Causation of Disease. By VICTOR C. VAUGHAN, Ph.D., M.D., Professor of Hygiene and Physiological Chemistry, and FREDERICK G. NOVY, M.D., Junior Professor of Hygiene and Physiological Chemistry in the University of Michigan. New (3d) edition. In one 12mo. volume of 603 pages. Cloth, \$3.00. Philadelphia: Lea Brothers & Co. 1896.

It is now generally recognized that those diseases which cause the greatest mortality, and consequently are of the greatest importance, are in reality cases of poisoning; that pathogenic germs are living poisons, and that every infectious disease is actually an intoxication. Not only are these chemical factors in the causation of disease, but furthermore, specific chemical agents are now being employed in its prevention and cure. In the present volume will be found a systematic exposition of etiological, preventive and curative chemistry. The widespread interest in its department, and the acceptance of this volume as the standard authority, have led to the demand of three editions. These opportunities have been utilized by the authors to keep it always abreast with the rapidly advancing knowledge in its department. The present edition has not only been thoroughly revised throughout, but also greatly enlarged, ample consideration

being given to the new subjects of Toxins and Antitoxins, which have assumed great and merited practical importance in recent years.

*Practical Diagnosis.* The use of Symptoms in the Diagnosis of Disease. By HOBART AMORY HARE, M.D., Professor of Therapeutics and Materia Medica in the Jefferson Medical College of Philadelphia, Laureate of the Medical Society of London, of the Royal Academy in Belgium, etc. In one octavo volume of 566 pages, with 191 engravings and 13 full-page colored plates. Cloth, \$4.75. Philadelphia and New York: Lea Brothers & Co. 1896.

The experience of the author in both didactic and clinical teaching has shown that the all-important subject of diagnosis can be relieved of much of its difficulty by treating it exclusively from a clinical standpoint, and the object of this volume is to place before the physician and student a guide to this art as it is actually used in practice. To accomplish this the symptoms used in diagnosis are discussed first, and their application to determine the character of the disease follows. Thus, instead of describing locomotor ataxia or myelitis, there will be found in the chapter on the Feet and Legs a discussion of the various forms of and causes of paraplegia, so that a physician who is consulted by a paraplegic patient can, in a few moments, find the various causes of this condition and the differential diagnosis between each. So, in the chapter on the Tongue, its appearance in disease, both local and remote, is discussed. In other words, this book is written upon a plan quite the reverse of that commonly followed, for in the ordinary treatises on diagnosis the physician is forced to make a suppositious diagnosis, and, having done this, turn to his reference book and read the article dealing with the disease supposed to be present, when, if the description

fails to coincide with the symptoms of his case, he must make another guess and read another article. In this book, however, the discovery of any marked symptom will lead directly to the diagnosis. Thus, if the patient is vomiting, in the chapter on Vomiting will be found its various causes and their diagnostic significance, and the differentiation of each form of this affection from any other. The two indexes form an especially valuable and practical portion of the work. In the *Index of Diseases* under each heading will be found annotated references to the various symptoms which constitute its clinical picture. Conversely, the *Index of Symptoms, Organs and Terms* furnishes a ready-reference list of the various diseases in which any given symptom may appear as a feature. It would be difficult to conceive of a work of greater utility. In connection with it the same author's "Practical Therapeutics" may be most advantageously consulted for the most approved treatment.

*A Treatise on Obstetrics.* For students and practitioners. By EDWARD P. DAVIS, A.M., M.D., Professor of Obstetrics and Diseases of Infancy in the Philadelphia Polyclinic, Clinical Professor of Obstetrics in the Jefferson Medical College of Philadelphia. In one very handsome octavo volume of about 700 pages, with about 200 engravings, and many full-page plates in colors and monochrome. Philadelphia and New York: Lea Brothers & Co. 1896.

Professor Davis' new work will afford students and practitioners a concise yet comprehensive guide to the whole art of obstetrics in its most modern development. The author is widely known as a teacher, writer and obstetrician of unsurpassed ability. His thorough acquaintance with foreign literature has enabled him to place at the command of his readers the best material derivable from the

vast sources of obstetrical knowledge in the old world, and his own ripe experience and metropolitan facilities have been equally well utilized in the preparation of the volume at hand. A marked and attractive feature will be found in the exceptionally rich series of engravings, among them being a large number of photographic reproductions of obstetrical scenes carefully selected in view of the amount, vividness and permanence of the knowledge which can be so well conveyed in no other way. The book will likewise be embellished with a number of most instructive colored plates. It will be found more comprehensive than ordinary treatises, as it deals with those cognate subjects best handled in close connection with their obstetrical precedents, such as the repair of lacerations and injuries, the care of the mother, of the infant, jurisprudence of midwifery, etc.

*A Practical Treatise on Medical Diagnosis.* For the use of students and practitioners. By JOHN H. MUSSER, M.D., Assistant Professor of Clinical Medicine, University of Pennsylvania, Philadelphia. New (2d) edition, thoroughly revised. Philadelphia and New York: Lea Brothers & Co. 1896

Professor Musser's work has easily achieved the foremost place as a full and systematic treatise on the practical side of its most important subject, a fact rendered clear by the prompt exhaustion of the first edition. The author has taken advantage of this opportunity to give his work a thorough revision, and to incorporate in it a full account of all trustworthy advances that have been made in its department, one of the most progressive in medicine. Every page will show evidence of revision, and the work will be enlarged not only in text but also in illustration, by the addition of numerous handsome engravings in black and many full-page plates in colors. The position of Musser's *Diagnosis* is assured as the

leading text-book for students, and equally the best reliance of the physician.

*Food in Health and Disease.* By I. BURNEY YEO, M.D., F.R.C.P., Professor of Therapeutics in King's College, London. New (2d) edition. In one 12mo. volume of 592 pages, with 4 engravings. Cloth, \$2.50. Philadelphia and New York: Lea Brothers & Co. 1896.

The subject of this volume is one of unexcelled importance. The character, force and destinies of nations are determined in large measure by the average of their food, and in sickness the results obtained by physicians often depend more upon proper nutrition than upon drugs. Conversely, errors in the prescription of diet may be quite as serious as mistaken medication. In this authoritative volume Professor Yeo, one of the ablest therapeutists, furnishes specific guidance for the physician in the proper use of foods in the various diseases, approaching the subject naturally and rationally from the qualities and values of foods in health. Every physician will therefore find in this compendious and convenient work an aid of the utmost value.

EUCAINE.—Gorl (*Therap. Monatshefte*) having used a solution of eucaine to anæsthetize the vesical mucous membrane in a patient with a tumor of the bladder, found that the introduction of the liquid caused slight smarting, and also rather abundant hæmaturia. This confirms previous observations to the effect that eucaine, unlike cocaine, produces hyperæmia at the seat of application. It must, therefore, be used cautiously when there is reason to fear hæmorrhage. As regards the local anæsthetic effect of eucaine, Gorl confirms, from an experience of several cases, the statements of other observers who have been satisfied with its power of dulling or abolishing sensation.—*Brit. Med. Jour.*

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are most disagreeable to many people. I always suffered untold misery when I had taken even a small dose of morphia; itching and nausea especially continuing for about two days. There is none of this following the use of antikamnia, and I have never heard of a victim of the antikamnia habit. I have yet to see the first case where any alarming symptoms have followed its administration. I have for a long time been in the habit of prescribing it in a little larger doses than are recommended and any bad results from its use must be due to some idiosyncrasy on the part of the patient."

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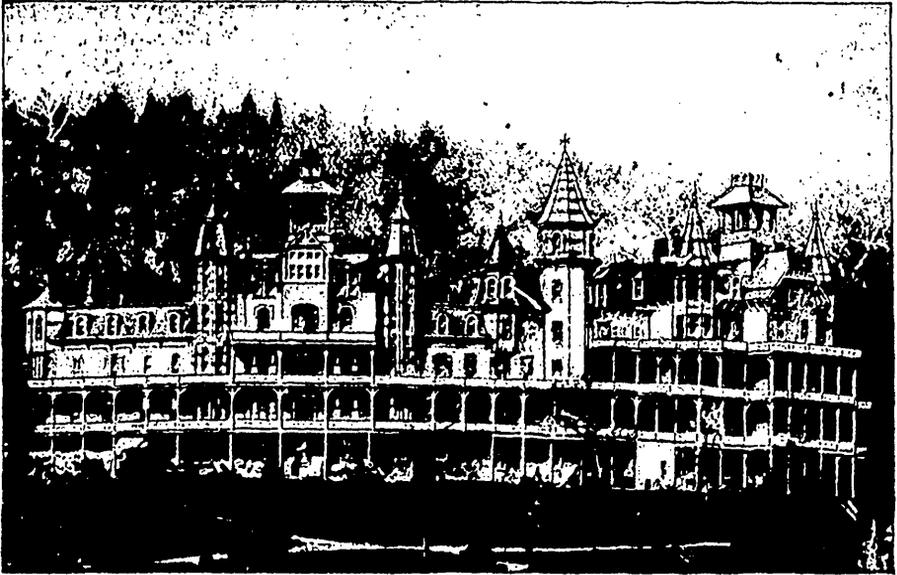
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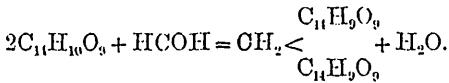
For Rooms, Nursing, etc., without Medical Attendance, the charge will be \$6.00, \$10.00 and \$12.00 in advance.

For Massage, Electrical Treatment, etc., without residence, the fee will be \$1.00 per treatment.

References given when required.

TORONTO, September 4, 1893.

**THERAPEUTIC USES OF TANNOFORM.**—D. De Buck and L. De Moor (*Belgique Medicale*) report the results of a series of clinical experiments with a compound of formaldehyde with tannin, to which the name of "tannoform" has been given. This substance is formed according to the following equation :



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and the red cells are destroyed. The author's method consists in obtaining a deposit by the centrifugal machine. This deposit is then placed in a concentrated solution of corrosive sublimate and centrifugalized again. It is then washed and preserved in a solution of formol. The hardening in sublimate may be omitted if no red blood cells are present. If there is much albumen the deposit may be washed with advantage in normal saline solution. If the urine contains urates the deposit should be washed with warm water or a concentrated boracic solution. The washing of a deposit by means of a centrifugal machine has long been in use in the laboratory. No washing is necessary if sublimate is not used. The strength of the formol solution may vary from 2 to 10 per cent. The author says that urinary deposits thus preserved can hardly be distin-

guished from fresh deposits. Cover-glass preparations may be made, but it is well to wash off the formol. The cells maintain their shape, and the nuclei of the cells take the stain in the usual way. Casts, and especially red blood cells, are well preserved. Fat is readily distinguished. Micro-organisms are easily recognized even when unstained—*Brit. Med. Jour.*

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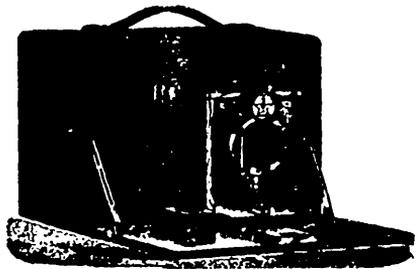
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Professor of Surgery and Clinical Surgery in the University of Louisville, etc., Louisville, Ky.

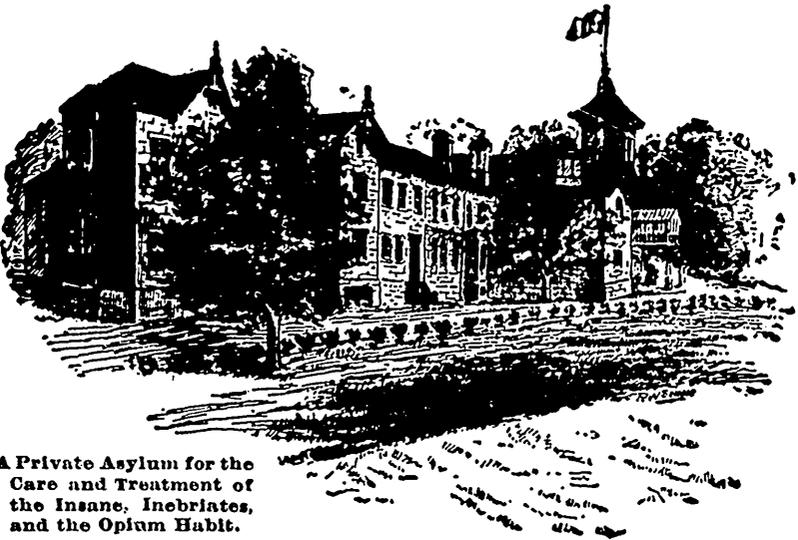
The patient before you is twenty-three years of age, with a good family history. No member of the family, as far back as he can remember, has ever been the subject any disease of the nervous system. This young man, up to September a year ago, was in perfect health in every sense of the word. At that time he was in the South, and while sitting on the porch talking to a young lady, another one, who was about ten feet from him, called to him, saying that she was going to shoot, having a gun in her hands and fooling with it at the time. He turned his face toward her and

just then the gun was discharged, the bullet striking him just above the left eye. He became unconscious and remained so for something over a week. At the end of that time he came to himself partially, then relapsed into unconsciousness, and it was several weeks before he could be sufficiently aroused to know where he was, what had happened, etc. When he came to himself he was completely paralyzed in the right arm, but nowhere else excepting his tongue. The paralysis developed immediately.

The shooting occurred in the morning at eleven o'clock, and he was not seen by a physician until ten o'clock that night. The doctors trephined his skull, but did not find the bullet. Complete paralysis of the arm continued for several months, then gradually improved until he can now use his arm well, but it is not so strong as before the accident. At the time he was a clerk, and has only recently

\* Reported to the Louisville Surgical Society.

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been able to write by placing the pen between his second and third fingers. He still has numbness of the little finger and ulnar side of the third finger. He complains nearly all the time of pain in the back of his head, at a point about half an inch above the occipital protuberance and one inch to the left of it. When this pain is severe, he becomes restless, nervous, wants to be moving about; but the most distressing part of it is that he does not know where he is going. On one occasion recently he went to Baltimore during one of the attacks of severe pain, and it was some time before he could explain who he was and where he lived. One night, in his room, he became very restless on account of the pain, and came down to the street and got away. He got on a train during one of these attacks without knowing where it was going, nor did he seem to realize what he was doing.

This has been his condition ever since he has been able to get about. On the left side of the scar over the opening in the skull, there is a little hard substance under the skin, which is exceedingly sensitive to the least pressure. There has never been any trouble with his vision, except at times, when a bright light strikes his eyes he has to shut them for a moment. There has been no trouble with the sense of smell, or with the sense of taste; no paralysis of the face, but, as I have stated, there was paralysis of the tongue for a short time. There has been no trouble with his lungs nor with any of the internal organs.

*Remarks.*—Dr. W. C. Dugan: The case is one that presents many points of great interest; but, to me, just what to do is the most serious question. The position of the boy, when the shot was fired, ought to be carefully investigated. He claims that

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the shot was directed from his left side, and that would account for the injury to the opposite side, the ball striking just above the eye and ranging across. The bullet may be found on the other side (right), which will account for the paralysis of the left hand. Inasmuch, however, as he is having what is known as "cycle equivalent," which is a form of epilepsy, the attacks from which he suffers may be due to injury or to irritation of the ball. He has as well-marked epilepsy of the mental variety as I have ever heard of in my life. This form of epilepsy is a mental convulsion, so to speak, due to an irritation of that part of the brain which presides over mentation or cerebration, instead of an irritation of the motor region which would cause motor disturbance — convulsions. From the fact that he will get on a train during one of the epileptic convulsions, it appears that it is a condition of the

mental faculties rather than of the motor.

The case should be carefully investigated before any operative interference is undertaken for his relief. While we all know that exploratory craniotomy is fairly safe, I am not disposed to advise the operation unless the symptoms are such as to enable us to locate the lesion with a degree of certainty commensurate with modern cerebral localization. His personal and family history should be looked into carefully, to be sure that these symptoms are due to this injury.

Dr. A. M. Cartledge: There are many interesting features about this case: first, the immediate symptoms which followed the injury; when he regained consciousness he had paralysis of the right arm, also of the tongue. Now, that would point to the fact that the traumatic lesion must have at least involved the right arm centre

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of the left side, and the tongue centre ; the leg centre, being above that point, escaped.

That far it would give some evidence as to the probable posterior situation of the bullet at this time. Undoubtedly the bullet penetrated these two regions, the arm centre and tongue centre, which is below the arm centre, not being high enough to involve the leg. All these facts, taken together, have a certain positive significance, and would fairly well correspond to about such an antero-posterior situation of the missile. That is to say, if the missile is anywhere within a radius of one and one-half inches from the location of this sensation, it would have to pass beneath the foot centre, and to arrive at that point would have penetrated the arm and tongue centres and probably a portion of the face centre in its course through the brain.

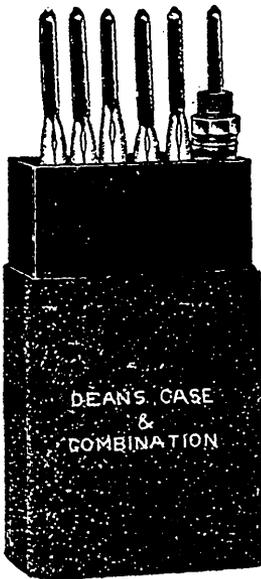
As to the question whether or not anything be done in this case, it seems to me it is a very debatable one. The question arises, if you seek this point of irritation : "are there any peripheral symptoms that would indicate its location ?" At the present time there are none. About the only guide we have in this unfortunate case is the very uncertain one of sensations in his head. There are no localized symptoms present, or a symptom of his having motor or central epilepsy, though the attacks he has might be considered a manifestation of epilepsy ; but we have nothing in this expression to assist in localizing the trouble.

Now, the question is, would we be justified in considering the duration of the symptoms following immediately after reception of the injury, tracing the bullet in this way in its course through the brain, taking into

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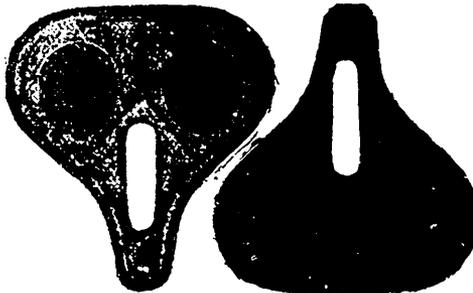
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consideration his subjective symptoms, is that a sufficient guide to justify an exploration? If the symptoms are such as not to endanger the man's life, certainly I should say let him alone, because if the missile is anywhere near the place he describes as being the seat of pain, it is not a good situation to apply a trephine. It is just to the left of the large sinus, and would probably necessitate the involvement of this sinus to extricate the bullet. But in view of the fact that trephining under aseptic precautions is, practically, a harmless procedure, it seems to me it would be justifiable, with a full explanation of the case to the patient, the doubtful character of the operation as far as giving relief is concerned, to make an exploration to the left of the point where he locates the pain, and by gentle manipulation to determine if the missile can be located, and attempt to remove it if possible. I believe the

bullet is not far from the point where he locates the sensitiveness, as the evidence shows that it has passed through the arm centre, which is not a favorable place to trephine, and we recognize the very doubtful utility of trephining under such symptoms as mere sensitiveness of the head without any localized manifestations.

There are arguments for and against an operation, but if the man persists in getting up while suffering from these attacks, and going about the country, it seems to me his life is endangered by such a course more than it would be by an exploration in the manner I have mentioned.

Dr. H. H. Grant: I would be disposed to think twice, and study this case very thoroughly before attempting any operative interference. In the first place, I do not believe an exploration would be justifiable. It occurs to me that to trephine and search for the bullet would be entirely

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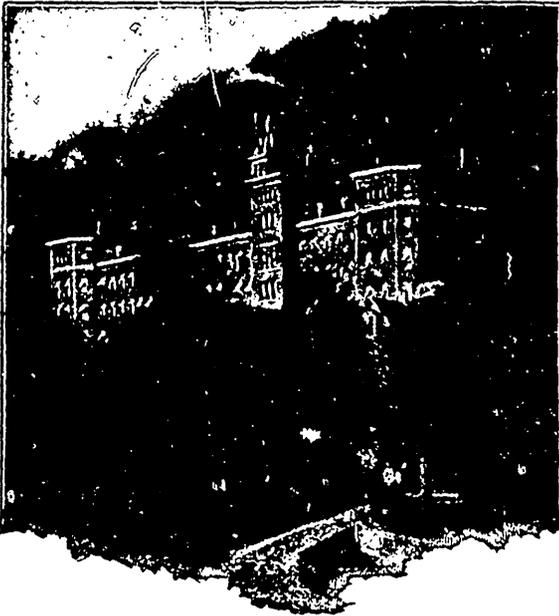
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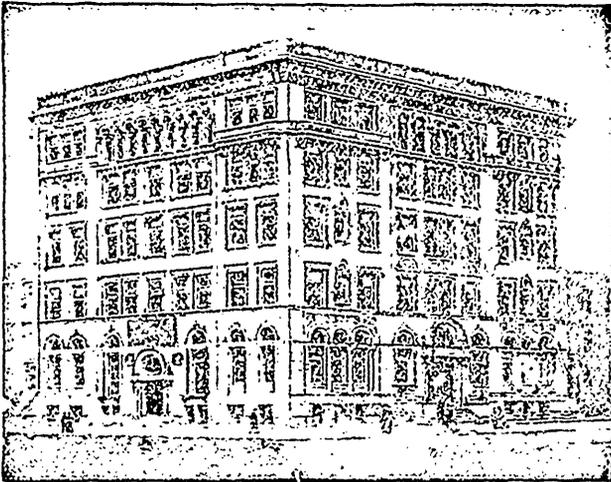
out of the question. It might have been possible, immediately after reception of the injury, to have carried out a procedure of this kind; but certainly such a course would not be justifiable at the present time. By making an incision over the seat of the injury, perhaps some depression of the bone would be found, which, pressing upon the cerebral structures, would account for the symptoms which, this man has. Further than this, I should think there was little to be hoped for. If there is anything definitely settled about cerebral localization, it is that its uses are of value only when we can definitely fix the pathological point, and may then do an operation upon structures which are dangerous to disturb, with great success; but in the case under discussion, we cannot determine by any

of the known methods of cerebral localization the point or situation of the injury or disease, and it is unjustifiable to attempt to invade these structures because the danger is greater than the probability of benefit. As Dr. Cartledge has very clearly indicated, to a certain extent we can trace the course of the bullet, yet we cannot say even probably where it is; and the symptoms are too indefinite to justify an operation based on these indications, and to trephine and search for the lesion seems to me to be outside of prudence.

The suggestion made by Dr. Dugan, that some of the symptoms are really indications of epilepsy, I believe is a good one, and relief might be obtained by making an incision over the original site of the injury and removing any compression upon the surface of

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the brain. Further than that I should feel that we were not justified, and unless these symptoms are clearly determined as characteristic of epilepsy or pressure, even that, it occurs to me, would be unwise. No one knows what underlies these structures, nor whether or not this injury is the cause of all this trouble. We have no information that the trephine has ever been applied in this case, or, if applied, that it was thoroughly done. The depression that we see may have been caused by entrance of the bullet, as it evidently entered at this point.

Dr. A. M. Vance: It is my opinion that we ought to trephine, in this case, over the tender place in the back of the head. It is more than likely that a trephine was applied at the site of the original injury and a button of bone taken away, and there are no signs now of irritation about that point, except one little spot,

which is probably a neuroma. In many cases of Jacksonian epilepsy, with nothing to guide us except a tender point, by taking out a small button of bone we may bring about marked relief. Trephining over the tender spot in the back of this boy's head could be practiced without going into a sinus, and might be productive of a great deal of benefit. Certainly the operation would be unattended by any grave dangers.

Dr. J. G. Cecil: I would like to ask Dr. Roberts if the attacks of epilepsy are growing gradually worse? *i.e.*, is the disease progressive? Is he worse now, or does he have attacks of mental disturbance oftener than he did six months ago? The question as to the advisability of operative interference would depend largely upon that.

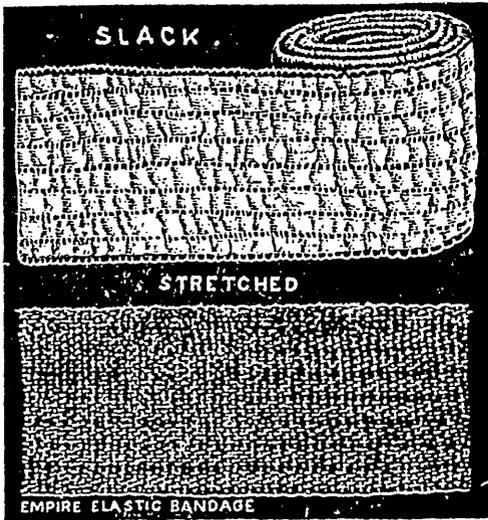
Dr. W. O. Roberts: It strikes me, as Dr. Vance says, that we would

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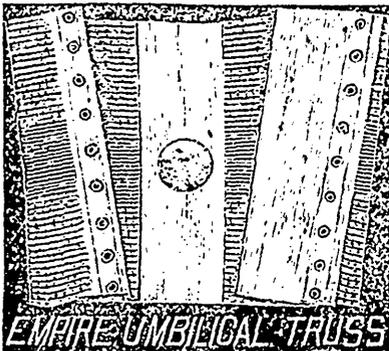
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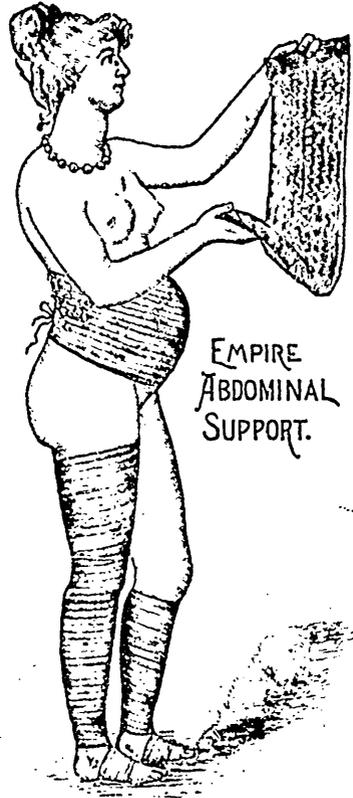
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likely find something under the point at which this patient locates the pain—in the back of his head. I have seen him every day for four or five days, and he puts his finger upon the same spot each time in indicating the seat of pain. No pain has been manifested at any other point, except the small tender spot where you observe a small nodule near the site of the original injury. We sometimes have attacks of epilepsy from irritation from cicatrices. The only question in my mind is whether or not removal of this tender spot in front would have any effect upon the case. The condition of the arm is still improving, and if the nerve centre of the arm had been cut through, it seems to me there would not have been such marked improvement.

I am inclined to think that the best thing to do is to remove this little nodule in front first, and if that fails to relieve him, then trephine over the

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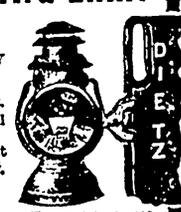
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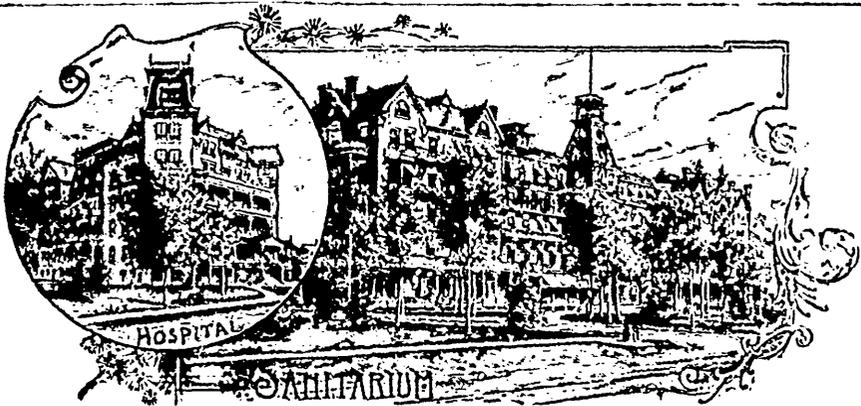
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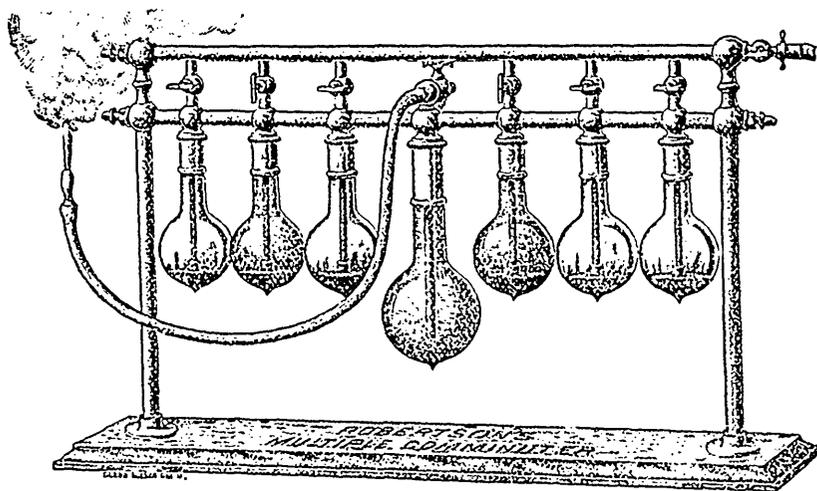
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