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CONTENTS.

	PAGE
Editorial—	
Female Cyclists	255
Proceedings of Medical Council ..	257
Reports of Societies—	
Canadian Medical Association	289
Executive Health Officers	291
Provincial Board of Health	295
The Doctor Himself.....	295
Correspondence.....	296
The Physician's Library	297
Births.....	298
Deaths	298



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PAGES

Jackson Sanatorium - 310
 Jahn, Franz - 317

LIST OF ADVERTISERS.

PAGES

Antikamnia Co. - 231
 Authors & Cox - 240
 Alpino Dairy Co. - 300
 Austen, J. E. - 248
 Automatic Bicycle Saddle Co. - 329
 Aikenhead Hardware Co. - 231
 Alpha Rubber Co. - 225
 Alma Sanitarium - 230
 A., T. and Sante Fe Railroad - 320

Battle Creek Sanitarium Health Food Co. - 325
 Bausch & Lomb Optical Co. - 246
 Bennett & Wright - 240
 Burns, P., & Co. - 320
 Bromo Chemical Co. - 237
 Buffalo University - 315
 Bengler & Co. - 244
 Bartlett, Wm. - 327
 Battle Creek Sanitarium - 325
 Bryce Photographic Studio - 252

California Fig Syrup Co. - 241
 Chicago Polyclinic - 315
 Colt, J. B., & Co. - 311
 Columbia Phonograph Co. - 304
 Carle, John, & Sons - 353
 Church's Auto-Voice School - 309
 Confederation Life Association - 333
 Cumming, W. - 311
 Croft, Wm., & Sons - 231
 "C. & B. Line" Steamers - 322
 Columbus Phaeton Co. - 320

Detroit College of Medicine - 300
 Dun, an, Flockhart & Co. - 240, 242
 Dietz, R. E., & Co. - 249, 324
 Dixon, J. - 314
 Detroit & Cleveland Steam Nav. Co. - 327
 Davis, S., & Sons - 320
 Detroit Metric Granule Co. - 308
 Dean, Alf. E. - 316

Eaton's Brewery - 302
 Empire Manufacturing Co. - 323
 Evans and Sons - 244
 Elliott Illustrating Co. - 249
 Everett House, New York - 252
 Eldorado Hotel, Ocean Grove, N.J. - 252

Farmer Bros. - 325
 Farwell & Rhines - 325
 Federal Life Assurance Co. - 327
 Feick Bros. - 253
 Fell, I. C. & Co. - 318
 Fellows' Hypophosphites - Inside back cover
 Fiddes & Hogarth - 327
 Forbes, Mr. and Mrs. - 306
 Fairchild Bros. & Foster - 226
 Fortier, J. M. - 332

Gibson, R. L. - Front cover
 Gormully & Jeffery Mfg. Co. - 250
 Griffiths Cycle Corporation - 305
 Gurney Foundry Co. - 214
 Gurd, Chas., & Co. - 248

Hamill, Dr. W. E. - 235
 Homewood Retreat - 310
 Howard, A. H. - 325
 Hyslop, Son & McBurney - 335
 Hann, Otto, & Bro. - 308

Keen, Robinson & Co. - 243
 Kearns, W. P. - 325
 Kent, B. & H. B. - 245
 Kennedy, S. H. - 317

Lambert Pharmacal Co. - Inside front cover
 Leeming, Miles & Co. - 278
 Lyman, Knox & Co. - 311
 Lozier, H. A., & Co. - 251
 Lakehurst Sanitarium - 302
 Laporte, Martin & Cie - 307
 Lugsdin, G., & C. - 325
 Lyman Sons & Co. - 237

Moor, J. C. - 228
 McGill University, Montreal - 239
 McKesson & Robbins - Outside back cover
 Mullin & Muir - 307
 McLeod - 307
 Macrae & Macrae - 327
 McGill, Wm. & Co. - 307

New York Polyclinic - 315
 New York Pharmaceutical Co. - 317
 New York School of Clinical Medicine - 312
 New York Post-Graduate School - 320
 National Prescription Blank Co. - 234
 North Shore Navigation Co. - 312

Od Chem. Co. - 300
 Ontario Vaccine Farm - 318
 Ontario Grape Growing Co. - 311

Parke, Davis & Co. - 254, 299
 Pickering, Mrs. F. L. - 326
 Pember's Turkish Baths - 306
 Provident Savings Life Assurance Society - 324
 Pond's Extract - 225

Renfrew, G. R., & Co. - 227
 Riley Bros., New York - 247
 Robertson, Dr. John - 331
 Rochester Optical Co. - 309
 Rush Medical College - 336

Scott & Bowne - 233
 Smith Manufacturing Co. - 308
 Schram Water Guard - 311
 Stearns, F., & Co. - 229
 Sutherland, J. A. - 325
 Shorey, H., & Co. - 321
 Sharp & Dohme - 232
 Scott & MacMillan - 236, 245
 Sole, Fred - 329
 Spalding & Bros. - 249

Toronto Nursing Home and Cottage Hospital - 303
 Toronto Salt Works - 311

Wampole, H. K., & Co. - 243
 Wabash Railroad - 333
 Wheeler, T. B. - 327
 Warner, Wm. R., & Co. - Red insert
 Walkerville Brewing Co. - 305
 Wilson, C. & Sons - 334
 Woolrich & Co. - 249

Walter's Sanitarium - 301
 Western Pennsylvania Medical College - 322
 Willits, T. A. - 250

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There is possibly no disorder more common than diarrhœa. The remedies for this affliction, too, are very numerous, and comprise the most diverse methods of treatment. It is the purpose of this article to deal with the principles of the correct treatment of this disorder, and suggest such remedies as have in my hands been productive of good results.

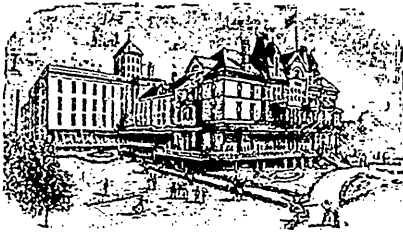
Mrs. J. S. S., age 31, was taken with a diarrhœa in the middle of the night, and had suffered with an active cathorsis for more than three days. She was given a dose of sulphate of magnesium, and told after her bowels had acted freely—and she had had a watery action, character-

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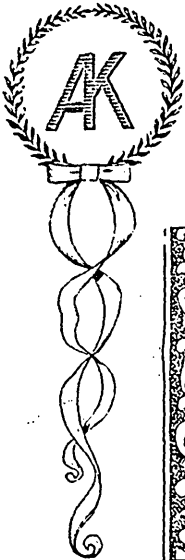
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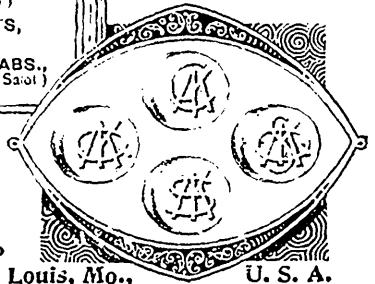
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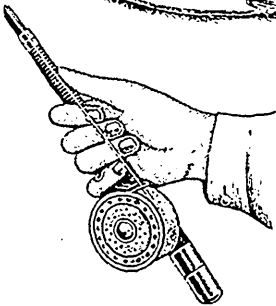


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slept out in a tent, and ate and drank intemperately. On his return home he was attacked with a violent diarrhoea. He was given a half-ounce of sulphate of magnesium. After this had acted freely he was put on Concentrated Extract of White Oak Bark (S. H. Kennedy's), this he took every two hours; in twelve hours he had made a substantial improvement and was well. Many other cases could be cited illustrative of the correctness of these principles, but they would add but little to what has already been said. I must not fail to add that in these cases the strictest orders as to attention were given.

DR. GRUFF (to fashionable patient) —“It's merely the same old ailment, my dear madam.” Mrs. Style—“Oh, no, doctor; I really am ill now!” Dr. Gruff—“H'm! If that really is so I'll have to change the whole course of treatment.”—*Judge.*

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pneumonia, migraine, rheumatism, pleurisy, typhoid, neuralgia, etc. Apolysin is phenetilin in which a hydrogen atom of the amido group is replaced by citric acid, water going out, and is thus closely allied to phenacetin, in which the hydrogen is replaced by acetic acid. It has been much extolled by Nencki, Hildebrandt, and others, as a rapid and powerful analgesic and antipyretic, which could be used in very large doses without danger of secondary effects, being particularly free from any tendency to depress the heart. Jez is able to confirm their views as to its innocuousness, no ill-effects resulting from the administration of 120 grs. a day; doses of 30 grs. were well tolerated by the fasting stomach, and in conditions of hyperacidity. Its administration led to a constant increase in the amount of urine, in which phenetidin could be detected

when 90 grs. of apolysin had been taken; glycosuria was never produced by it. The antipyretic action of the drug is, however, found to be very slight and slow, and while no relief of pain was afforded in neuralgia or rheumatic affections, in some of these cases indeed the administration of apolysin appeared to aggravate the symptoms. Jez therefore concludes that apolysin is an indifferent pharmaceutical product possessing no analgesic and but very slight antipyretic and diuretic properties.

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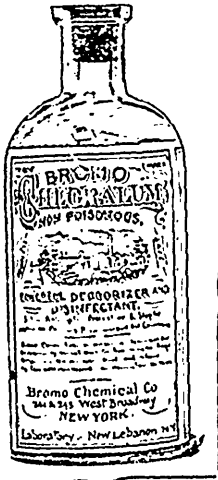
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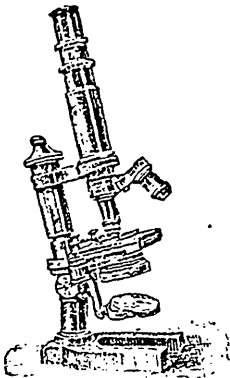
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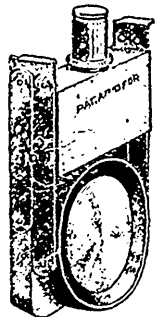
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the liver, the patient dying on the twenty-first day. Lendon's patient was a woman, aged 21, suffering from wandering and hypertrophied spleen. She was very anæmic, and had had "indolent" ulcers of the legs for some years. On palpating the abdomen a large tumor was immediately felt; it had a fluctuant feel, was elongated vertically, and was very movable laterally, but seemed to occupy the right side of the abdomen more than the left; no notch or edge could be felt; its lower edge reached to the true pelvis. The diagnosis seemed to rest between a tumor springing from the pelvic organs, a renal tumor, a hydatid of the omentum, and a chronic abscess. At the operation the tumor was recognized as splenic by its blue-slate color; there were no adhesions; three notches could be felt on the left side, indicating that the organ had become rotated half a turn. The incision was enlarged to five inches,

and the spleen easily delivered from the abdominal cavity. The pedicle was of such a length that the operation could be completed entirely outside the abdominal cavity, but beyond the splenic vessels it consisted of nothing but a little fat, enclosed in the flimsy thin layers of gastro-splenic omentum. The main artery was first tied with No. 3 silk, then a pedicle was made nearer the spleen with stout silk; clamps were applied to the splenic side of the ligature, and the organ cut away; for additional safety, other fine ligatures were applied to the stump, which was then dropped back into the abdomen, and the wound closed and dressed in the usual way. The spleen and the blood contained in it weighed 40½ ozs., afterwards 11 ozs. by weight of blood drained out of it. The viscus was quite solid, and sections showed under the microscope that there was some degree, not a great degree, of fibrous over-growth.

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The Collegiate Course of the Faculty of Medicine of McGill University begins, in 1896, on Tuesday, September 22nd, and will continue until the beginning of June, 1897.

The Primary subjects are taught, as far as possible, practically by individual instruction in the laboratories, and the final work by clinical instruction in the wards of the hospitals. Based on the Edinburgh model the instruction is chiefly bedside, and the student personally investigates and reports the cases under the supervision of the professors of Clinical Medicine and Clinical Surgery. Each student is required for his degree to have acted as Clinical Clerk in the Medical and Surgical wards for a period of six months each, and to have presented reports acceptable to the Professors on at least ten cases in Medicine and ten in Surgery.

About \$100,000 have been expended during the last two years in extending the University buildings and laboratories and equipping the different departments for practical work.

The Faculty provides a Reading-Room for Students in connection with the Medical Library which contains over 15,000 volumes.

MATRICULATION.—The Matriculation Examinations for entrance to Arts and Medicine are held in June and September of each year.

The entrance examinations of the various Canadian Medical Boards are accepted.

COURSES.—The Regular Course for the Degree of M.D.C.M. is four sessions of about nine months each.

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Recovery was interrupted by febrile disturbance, but was finally complete. Some six weeks after the operation an examination of the blood showed 486 red corpuscles to one white, and 4,860,000 corpuscles to the cubic millimetre, the normal being estimated at 5,000,000. One singular feature in the patient's case is the family history. One sister (deceased) was known to have had an enlarged spleen, although she does not appear to have died from splenic disease; one brother has an enlarged spleen, likewise a sister, whose child is also affected in the same way. Lendon adds that he is giving his patient bone marrow with the view of counteracting the cachectic state which is regarded by some as certain to become developed in patients who have had their spleen removed.

THE preliminary programme and announcement for the meeting of the

Mississippi Valley Medical Association at St. Paul, Minn., September 15th to 18th, has just been issued. Dr. Harold N. Moyer, of Chicago, will give the address on Medicine; and Dr. H. H. Grant, of Louisville, Ky., the address on Surgery. Amongst those giving addresses are the names of the best known men in the United States and Canada. The meeting will be of the greatest interest to all, and will more than repay for the distance travelled.

OPERATION FOR ATRESIA VAGINÆ. — Mackenrodt (*Centralbl. f. Gyn.*, No. 21, 1896) points out that attempts to keep the artificial vagina open by tampons after operations for this condition are seldom permanently, if even temporarily, successful, and states that he has recently in two cases successfully substituted a vaginal wall by transplantation of flaps obtained in operations for prolapse

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DIABETES INSIPIDUS IN CHILDHOOD.—Eichhorn (*fahrbuch. f. Kinderheilkunde*, Bd. xlii., Hft. 1) describes a case of this disease in a boy aged ten. He investigated the relation between the quantity of fluid taken in and that of urine passed. Taking a healthy boy as a control, and giving

to both the same quantity of fluid per diem, he found that the diabetic patient after the first twenty-four hours passed more than three times the amount of urine passed by the other. Attempts to reduce the amount of fluid taken by this patient had to be abandoned after twelve hours, owing to the severe constitutional disturbance set up. Polyuria, however, continued during this period, notwithstanding the reduction. The author gives a summary of the views of Strauss, Senator, Falck, and Neuschler on the mode of productions of the polyuria and then discusses the etiology of the disease. In this section he gives a valuable collection of previously recorded cases. He describes cases of diabetes insipidus occurring in connection with certain specific infectious diseases, such as diphtheria, cerebro-spinal meningitis, measles, scarlet fever, etc. These



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must be distinguished from the cases of transient polyuria described by Spitz which occur during convalescence after certain specific fevers, especially typhoid. In these cases the polyuria last from six to eight weeks, and is not accompanied by polydipsia. This condition is probably due to altered composition of the blood. Cases are also recorded in which degenerative changes have been found in the sympathetic system, notably in the cœliac plexus and the great splanchnic nerves. In two of these cases there was found ulceration of the intestines.

REMEDIAL institutions are by no means a creation of the nineteenth century. The works of ancient authors frequently contain records of resorts where the sick bathed in healing waters and drank of medicinal fountains. In Greece the temples of

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THE Chicago Polyclinic, 174, 176 Chicago Avenue, is giving a special course of lectures on "Diseases of the Eye, Ear, Nose and Throat," from October 5th to 30th. This course will be of special interest to not only those who make a study more particularly of those organs, but also to general practitioners. Full particulars will be furnished by Dr. F. Henrotin at above address.

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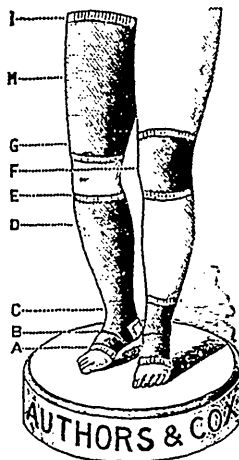
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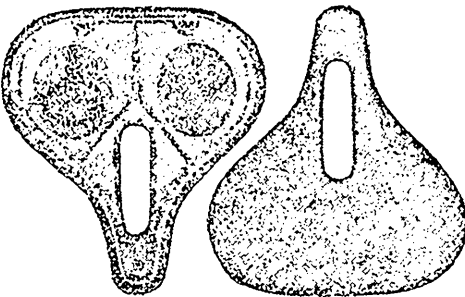
135 Church Street - - TORONTO.

UTERINE FIBROID DISEASE IN GIRLHOOD. — Brohl (*Monats. f. Geburtsh. u. Gynak.*, January, 1896) recently exhibited at a meeting of a German society, multiple myomata removed from a virgin, aged eighteen. The tumor was removed by operation, and detached without much difficulty from the uterus, and the patient made a good recovery.—*Brit. Med. Jour.*

ANTISTREPTOCOCCIC SERUM. — Schleicher (*Wien. medicin. Presse*, July 5th, 1896) records a case in which Marmorek's antistreptococcic serum was used with apparent success. The patient was a woman of twenty-nine, whose illness began with bronchitis, and a temperature ranging from 100.4° to 103.2°. There was violent cough both by day and night, with abundant frothy muco-purulent expectoration, showing little clots. On the fifteenth morning the tem-

perature rose to 104°, and signs of broncho-pneumonia appeared in both lungs; the sputum contained numerous pus corpuscles but no tubercle bacilli or blood. A week later the physical signs were unchanged, but the patient was very weak and wasted, and appeared to be in imminent danger; the temperature fell at night but rose every morning to 102°-104°. On the twenty-first day of the disease 20 c.cm. of antistreptococcic serum (obtained direct from Marmorek in Paris) were injected, followed twenty-four hours later by another 10 c.cm. The forearm, which was the seat of injection, developed an erythema, which spread over the entire arm but disappeared in two days. The patient became much better, the temperature falling to between 99.6° and 100.8°, and the appetite, to some extent, returning. Eleven days after the injection a general eruption broke out attended

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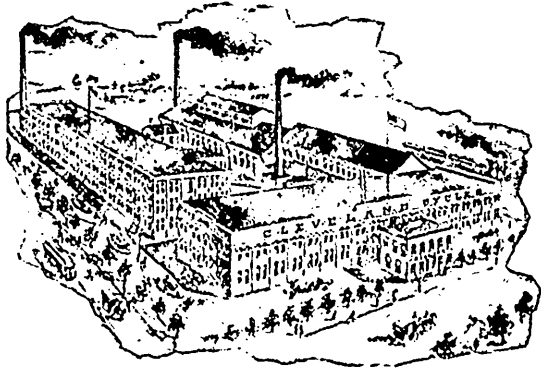
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with joint pains, and the diagnosis was made of peliosis rheumatica. Three days later there was a sudden rise of temperature to 105.8°, associated with trismus, loss of power in the lower limbs, and sense of impending death. This condition lasted for three days, when it terminated by crisis, associated with copious night sweating. The eruption cleared up, as also did the lung condition; the appetite returned, and though convalescence was slow the patient was perfectly well a month later. Schleicher considers the course of events to indicate that the eruption was not peliosis but an effect of the

serum, comparable to the similar results of diphtheria antitoxin. He also holds that the crisis was not spontaneous, but was also to be attributed to the action of the serum. With regard to this action he regards it as having been distinctly beneficial in his case, which would, therefore, indicate an extensive trial of the remedy.—*Brit. Med. Jour.*

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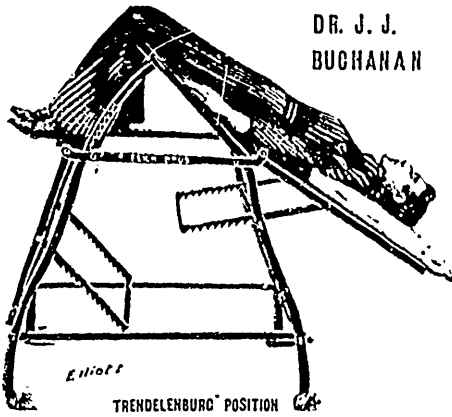
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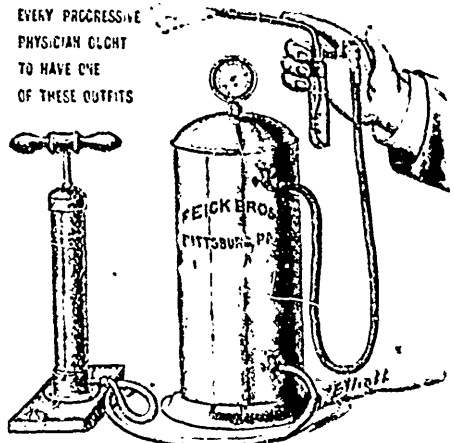
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VOL. VII.

TORONTO, SEPTEMBER, 1896.

No. 3.

FEMALE CYCLISTS.

Possibly no craze has taken so complete a hold on the people as cycling. It seems to be the ambition of every person, male and female, from the time they walk until they have reached the age of discretion, say about seventy-five or eighty, to own a bicycle. Much of this is undoubtedly due, first, to the introduction of what is known as the safety bicycle, second, to the booming methods of the bicycle manufacturers, and third, the feature with which we have to deal, the general introduction of bicycle riding among women. There are two classes of people who object to this, those holding the opinion that bicycle riding is good for women, and those who declare that it is injurious and should not be tolerated. The latter class again may be properly divided into those who object to bicycle riding on the grounds of propriety. As far as these latter are concerned, what is and what is not propriety is largely a matter

of opinion and custom, and with it we have very little to do. The others are those who object to it because it is injurious to the rider herself and decidedly immoral in its tendencies. While we admit everything that has been said in regard to the advantages to women of getting out in the open air and having healthful exercise, we object to this particular form of it. We are of the opinion that there never has been any law that we know of which prevented women in Christianized countries from getting out in the open air as much as they pleased, so long as it was compatible with the ordinary duties for which they were intended, raising a family and making a home comfortable. As far as exercise is concerned, the average woman will readily admit that she gets about all the exercise she wants in looking after her home. In this connection, too much praise cannot be given to the German system of beer gardens, not the music hall beer garden of the Bowery, but those respectable institutions of the Fatherland which are distinct family resorts and in which

an intoxicated man or woman is not seen or allowed, where the head of the family takes the wife and children in the evening out under the trees to listen to the bands and the older folks may enjoy their glass of light beer, while the children play around under their parents' eye and control. We now propose to consider directly and plainly, as far as experience has informed us, of the immoral and injurious effect of bicycle riding upon women. To first consider the position in which a woman is placed on a bicycle, we have a saddle so constructed that it fits more or less accurately the perineum and adjacent parts. In the saddle as used by men, and there is practically very little difference if any between the saddles for the respective sexes, the general report is that all the pressure comes on the soft parts of the buttock between the tuberosities of the ischium on the perineum and forward towards the scrotum, the latter being produced by the stooping position in which the person rides; and, as they explain it, they have got "to hinch backward" occasionally in order to relieve the pressure and irritation along the urethra. All of which brings us directly to the point that the strong pressure upon the like parts of the female goes a long way towards, as one of our exchanges expresses it, "filling a long felt want." While this, of course, expresses the effect produced it would be absurd to suppose that it was the primary reason for bicycling, nevertheless the consensus of opinion is increasing overwhelmingly day by day that bicycle riding produces in the female a distinct orgasm. We know of a number of lady riders who have been compelled to give up the use of the bicycle on this account; and even if an orgasm is not produced the continued erethism is decidedly more injurious and tends to the production of nervous diseases, and the general breaking down of the system. The only contention that can be made is that the orgasm or

erethism is not produced. This we know to be absolutely untrue, so much so that we have on good authority within the last few days heard of a case which is responsible for this editorial. This is simply that in one place where cycling is taught the saddle has been purposely raised to aggravate this condition, and that the attendants who steer innocent maidens around on their wheels find that at first erethism and then orgasm is produced; the lady complains of being tired and gets off her wheel. A condition of affairs so scandalous and abominable deserves the attention of every man who trusts his female relatives to bicycle riding, and if men are found who would purposely do this sort of thing, as there is no doubt that some have done it, a term in the penitentiary with an occasional application of the cat would be a mild punishment.

We would say, in conclusion, that in bicycle riding we have a woman pedaling away in much the same manner as running a sewing machine, and we know what this has been accused of in the way of producing female complaints. But add to all this the working with contracted chest in a stooped position with all the abdominal organs pressed downward, subjected to continued erethism, as well as an occasional orgasm, and you have a condition of affairs which will take a better authority than the bicycle manufacturer to prove to us that bicycle riding is a healthful exercise for women. It is not necessary to point out to physicians the relaxed nervous and moral stamina produced in a girl in taking a ride out into the country. We hope physicians will look earnestly into this matter, and our columns will be open for them to report. We have a number of cases now which have been carefully looked into by the physicians of our staff and we are absolutely satisfied, as far as we are concerned, that female bicycling must be sharply looked after, and care exercised in its indulgence.

PROCEEDINGS

AT THE

Meeting of the Medical Council of Ontario

JUNE, 1896.

MEDICAL COUNCIL BUILDING,

TORONTO, June 9, 1896.

The Medical Council of the College of Physicians and Surgeons of Ontario met this day, Tuesday, June 9th, 1896, at 2 o'clock p.m., in accordance with the by-laws of the Council.

The President, Dr. Harris, in the chair, called the Council to order.

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

Dr. HARRIS then addressed the Council as follows :

Members of the College of Physicians and Surgeons of Ontario:—I am very glad and proud to welcome you all back to our session at this our thirty-first annual meeting; I am sorry the political necessities and the discharge of his duties call for the absence of our friend, Dr. Roome. I do not come before you, gentlemen, prepared with any written speech; I do not think it is necessary I should, but there are a few points I wish to bring before you, a few matters that have arisen during my incumbency of office. During my year of office my time has been very fully occupied with matters of mutual interest pertaining to the welfare of this Council and of the profession. As you all know, I, with the Toronto members and the members of the Legislation Committee and Executive Committee, have been before the Legislature, and there have been meetings of the Executive Committee and many other matters to occupy the attention of your President. One of the important things brought forward, and one in which we are all interested, is the examinations of the Council. The Council examinations have been successfully and thoroughly carried out, I can assure you. I am in a position to speak with knowledge on this subject, because I acted as Chairman of the Board of Examiners both last fall and this spring. I am very pleased to be able to tell you that the assessment levied last year has been largely responded to, 1,129 members having paid; the Treasurer's receipts from that source amounting to \$7,200.00 to date. The payment by these members and the continued default by others make it quite plain to me, and I presume it must to you, gentlemen, that it may be necessary to bring Section 41*a* of the Act to bear upon the delinquents. Prosecutions have been carried on as vigorously as the funds at the disposal of the Prosecutor would permit. There is a point I wish to call specially the attention of the Printing Committee to, and that is, I think that the Announcement might be divided into three parts, the first to contain say the curriculum, examination papers and list of candidates, the second giving minutes and by-laws combined, and the third part minutes alone. I only offer this as a suggestion of a method by which we might reduce the cost of our printing and not as a hard and fast rule for publication of our Announcement. I am moved to make this suggestion by the fact that in the experience of the Registrar, and in my experience during my term of office as President, and to some extent prior to that time, it rarely happens that anyone applying for the Announcement desires the whole combination. On the subjects of the recent legislation as to matriculation and so on, the reports of the Executive and Legislation Committees will be submitted and will give you full information. I think these reports will pretty thoroughly cover the ground, for I understand that Dr. Thorburn, as Chairman of the Legislation Committee, has in his report gone very fully into the matter; and the Executive Committee's report also contains information in a brief and concise shape. It is gratifying to us to know that as a profession we stand second to none on this continent, or perhaps in the world, so far as our educational requirements are concerned.

As I stated when I rose to address you, I have not prepared any written address. I have been in ill-health for some time and have been very busy, for I have not only had my own professional work to look after, but also, as you all know, considerable work to do for this Council. I do not wish to occupy your time further than to avail myself of this

opportunity to thank the members of this Council most heartily for the kindness and courtesy each and every member has shown me, and the assistance they have rendered me in carrying out this work. The man who assumes the office of President of this Council, the highest position in the gift of the profession in the Province of Ontario, needs no little help, but I must say that the members of this Council have not been in any sense reluctant to aid me in fulfilling the duties of my office, and in every way in their power to prevent my work from being onerous. Again thanking you for your kindness and countenance, and for the honor you have done me, I will now retire from the chair, and ask you, gentlemen, to elect a President for the ensuing year. (Applause.)

Dr. BRAY—I have very great pleasure in moving that Dr. A. F. Rogers, the present Vice-President, be elected President of this Council for the ensuing year. It is not necessary for me to make any remarks in support of Dr. Rogers' nomination, because you all know him.

Dr. LOGAN—I take much pleasure in seconding that nomination.

The President called for further nominations.

There being no further nominations,

Dr. MOORE moved, seconded by Dr. BURTON, there being but one person nominated for the office of President, That Dr. Bray cast one ballot on behalf of the members of the Council for Dr. Rogers.

The President read the motion.

Dr. SANGSTER—Mr. President, I beg to call your attention to Section 3 of By-law 39, which says, "The election of President shall be by ballot. A majority of all the votes of the members present shall be necessary to an election." I do not approve of the mode of procedure that has been followed by this Council in the selection and election of their Presidents, and I object to that by-law being departed from. It is not competent for this Council to alter a by-law in this way; a by-law can only be altered or amended by another by-law, and as there has been no by-law amending By-law 39 in that particular, I, as a member of the Council, object to any departure from our by-law. I do not think that any thoughtful, independent man can approve of the mode of procedure that has been adopted by this Council in the election of their President, a mode of procedure that practically renders the presidency the reward of subserviency to any section, or combination of sections in this Council. I have no wish to go back into the past when ruling power in this room had no opposition; but I claim that under existing circumstances a system which rotates the office of President among the different sections of the Council, conferring it in turn upon each individual member of his section, provided only he has not placed himself on record as being insufficiently ductile, is a pernicious system, and one that is utterly fatal to all independence and freedom in debate. I can conceive that under a more rational plan the presidency of this Council might be and would be a most distinguished and most honorable position within the reach of any member of the profession in the Province, and that the most exalted members of our ranks might be enulous of filling it. But a system of rotation which seldom or never confers the office twice in succession to the same gentleman, no matter how worthy thereof he might have proved himself to be, and which is open even to the suspicion that manly independence is no part of the qualification for its occupancy, is a mischievous system, purely evil in its tendencies, and so derogating from the dignity of the office as to make it worthless in the estimation of right-thinking men. The President's chair has been filled in the past, and more than once, by a really eminent man. It has at times been filled—not on many occasions—by men who by the general claim of the profession would have been declared worthy to fill it. But your unhappy system, while it does not in any case raise the actual man to the level of the position, does in every case lower the position to the level of the actual man. I claim, therefore, that in selecting a gentleman to fill the chair of this Council, the most eminent, the most respected, the most distinguished of our members, or one of the most, should be selected and placed there, one whom the general feeling of the profession would acknowledge as such; and I claim, moreover, that once a proper man has been placed in that chair, although our Act requires us to elect a President annually, he should be expected to fill it during—

The PRESIDENT—You must allow me to stop you, Dr. Sangster. I cannot permit you to throw out any insinuations against any gentleman who has occupied the chair.

Dr. SANGSTER—I am not throwing out any insinuations against any gentleman who has occupied that chair. I have said that at times it has been filled by really eminent men, and there is no insinuation in that.

The PRESIDENT—I am referring to the latter part of your remarks. I am only stopping you to caution you, because you are transgressing.

Dr. SANGSTER—I claim that without proper reason a member should not be interrupted when speaking. I was about to remark that I think your system is vicious, inasmuch as it does place a premium upon a general pliability to the wishes of the dominant sections in this Council. I was remarking when you, Mr. President, stopped me, that I thought the most

ominent man in our ranks should fill that place, and he should be expected to fill it from year to year during the life of the Council, or better still, during the lives of several successive Councils, as long as he remains a member of this body. I think everyone will agree with me in that respect; and I think, further, that a ballot should be placed in the hands of every member of this Council, and that he should be required, in accordance with your by-law, to cast it. However much we may esteem and admire Dr. Rogers in his private personality or as a member of this Council, as a candidate for the office of President he is not *persona grata* to a section of its membership; such being the case, we cannot permit his election to be declared unanimous. I am not saying this from any spirit of hostility to Dr. Rogers; I have no doubt he deserves the position, and has done much to earn it in the work he did last year. In reference to the imposition of the tax, he certainly displayed a great deal of zeal, and a great deal of even exalted eloquence, in that respect. I am moved to these remarks, and I desire to say that I have no wish to see one of my friends in this chair, because we have unanimously decided that until we have secured the reforms which in the interests of the profession we are seeking, our place in this Council is upon the floor of this chamber, and we have not concealed from ourselves the fact that in placing ourselves in opposition to the mode of procedure that has been adopted in the Council we have made ourselves, individually and collectively, presidential impossibilities. I claim that a ballot should be passed.

Dr. CAMPBELL—I will just say that the by-law requires that these officers shall be elected "after nomination, by ballot," and there is one nomination, I believe.

Dr. McLAUGHLIN—Surely you don't claim you are prepared to override the by-law which declares that "the President shall be elected by ballot." Do you propose by resolution to override a by-law?

Dr. REDDICK—The by-law not only requires that the election shall be by ballot, but it requires a majority of the votes of the members present to elect a President.

Dr. WILLIAMS—The decisions of the Council in the past have been that the method pursued was in accordance with this portion of the by-law. The word "nomination" being put in there is intended to imply that there shall be one or more nominated. If there are not two nominated it is expected to imply that there is no opposition to the man who is nominated in the first place. The question has been discussed before and it was considered it would save time simply to put in one ballot; it is not because there is any disposition not to pass the ballot around and let everybody vote, but the belief was that only one nomination taking place and one ballot being put in, that complied with the law, that if any other persons wished to vote differently they would have made a nomination. The Council had no thought in the past, when adopting this course, that they were overriding that by-law at all.

The PRESIDENT—I have one motion before me and I will put it to the meeting—

Dr. ARMOUR—I rise to a point of order. As I understand it, it is provided in this by-law that it is necessary, even though there is only one nomination, to take the sense of the meeting and be sure by the ballots that a majority of the Council favors the election of the nominee. I understand, Mr. President, that you have ruled against that, and that you propose to put the motion to this meeting and ask that one ballot be cast and that that will suffice for the election of the President. I appeal against the ruling.

The PRESIDENT—I have not given any ruling yet; you don't need to appeal.

Dr. McLAUGHLIN—The point of order is made that you are not able by that motion to overcome the by-law. That by-law declares that the President shall be elected by ballot and the motion is that he shall not be elected by ballot, but by one individual. I ask you for your ruling.

Dr. BROCK—I would like to ask for more information before we are asked to support your ruling, or the contrary.

The PRESIDENT—I have been present ever since this by-law was first introduced in the Council, and there has never been a ballot taken in the way suggested by Drs. Sangster, McLaughlin and Armour for the office of President; the ballots have never been passed around but once, and that was for the office of Vice-President on the occasion of my election to that office. It has always been customary in this Council for some one to move, as has been done to-day, that some member, perhaps the gentleman who made the nomination, should cast the ballot. It has been customary to conduct the business in this way, but if Dr. Sangster would move a resolution in amendment to this, or if he would nominate some other member for the presidency, we would take a ballot. My ruling is that this motion is perfectly in order and I shall put it to the meeting.

Dr. ARMOUR—I desire to appeal to this Council, and I will tell them my reasons, because I want them to endorse my appeal. We have a by-law here which has evidently been overlooked, which has been ignored in the past as a matter of custom, but it is here, and I think it is properly here—

Dr. WILLIAMS—Excuse me, it has not been overlooked in the past.

Dr. ARMOUR—This meaning of it—

Dr. WILLIAMS—A different interpretation was put upon it, and the course taken was supposed by the Council to be in accordance with the meaning and spirit of that by-law.

Dr. ARMOUR—This is the point I want to call your attention to and on which I want to get the sense of the Council: the by-law requires that the President shall be elected from among the members of the Council after nomination by ballot, and a majority of the votes of the members present shall be necessary to elect him. Now, Mr. President, I appeal to the Council to endorse and maintain their own by-law.

Dr. SANGSTER—Mr. President, I wish to point out that your ruling is defective on this ground: It may be there is actually a section in this Council that would fail to nominate some other gentleman to that position, they are not unaware that the matter has been cut and dried beforehand and they know that as far as electing a man is concerned they are powerless, but they object to being placed as unanimously consenting to the election of the gentleman who has been nominated; and I claim that the only way in which we can protect ourselves is to claim the right, the inalienable statutory right, of casting a ballot whichever way we please.

The PRESIDENT—I have ruled that this motion is in order; Dr. Armour has appealed from the ruling of the chair. Shall the ruling of the chair be sustained?

The President declared the ruling of the chair to be sustained.

Dr. McLaughlin called for the yeas and nays.

Dr. GEIKIE—I am in favor of putting things right; I think there should be a ballot.

The Registrar took the yeas and nays as follows:

Yeas—Mrs. Bray, Britton, Brock, Campbell, Emory, Fowler, Harris, Henderson, Logan, Luton, Machell, Moore, Moorhouse, Rogers, Thorburn, Williams.—16.

Nays—Drs. Armour, Barrick, Dickson, Graham, Hanly, Henry, McLaughlin, Reddick, Rosebrugh, Sangster, Shaw, Thornton.—12.

Dr. Geikie declined to vote.

The President put the motion as follows: "Moved by Dr. Moore, seconded by Dr. Britton; That as there has been but one person nominated for President, Dr. Bray cast the ballot." And on a vote having been taken, declared the motion carried.

Dr. Bray then cast a ballot, and on the ballot being examined by the President he declared Dr. Rogers elected President of the Council for the ensuing year.

Amid very hearty applause, Dr. Rogers, the President-elect, was conducted to the chair and addressed the Council as follows:

Dr. ROGERS—Gentlemen of the Council, I have not come to this meeting prepared with any set speech to represent the feelings I have of appreciation for the honor which has been conferred upon me in electing me to the position of President of the Council of the College of Physicians and Surgeons of Ontario, an honor which I realize is one of the highest in the gift of the profession in this Province, one of the highest, perhaps, in the gift of the profession in Canada. I thoroughly appreciate the honor, and I ask you all, individually and collectively, to give me that support which you have given my predecessors in this office. I crave heartily the good will, and the esteem, if I can get it, of every individual in this room, of every member of this Council; and I can assure you that while I occupy this position I will always endeavor to fill the duties to the very best of my ability, and to always act as fairly in every ruling I am called upon to give as it is possible for a man to do. While I regret the little discussion that has occurred, I hope that any little irritation which may have been felt will be forgotten, and that you will unite together in promoting the business of this Council as expeditiously as possible.

The President called for nominations for the office of Vice-President.

Dr. HARRIS—I beg to move, seconded by Dr. BRITTON, That Dr. Thorburn be Vice-President of this Council for the ensuing year. In the past year, while filling the office of President of this Council, I have come very closely in contact with Dr. Thorburn as Chairman of the Finance Committee, and I have also been brought in close contact with him prior to that time during the many years he has been chairman of that committee, and I know that he has been a hard-working member of this Council, and has devoted a great deal of time to their work, not only in our Council meetings and as Chairman of the Finance Committee but also as Chairman of the Legislation Committee, particularly during this past year; and I do not think that to-day in this Council there is any man more deserving of the position than Dr. Thorburn.

Dr. GEIKIE—I beg to move, not from any opposition to Dr. Thorburn—in fact I had no idea that he would be nominated for this office, and I intended to have made this motion first, if I had been quick enough—That Dr. Henry, who is an old member of the Council, should be Vice-President for the ensuing year.

Dr. WILLIAMS—I beg to move, seconded by Dr. CAMPBELL, That Dr. Rosebrugh be Vice-President for the ensuing year. I do not know that I need make any remarks on this subject, because you all know Dr. Rosebrugh as well as I know him, and he comes before the Council on his own well earned reputation.

The President declared the nominations closed.

Dr. McLAUGHLIN—I want to congratulate you and the Council on the fact that we are very likely to have an officer now. It is as clear to me as the sun shines that we have no President.

The PRESIDENT—Order. You must withdraw that.

Dr. McLAUGHLIN—I believe there is a by-law that states that the majority of the votes of the Council must be cast for President and Vice-President; one vote, an lone vote only, has been cast, and in my judgment we are without a President, and I am very glad we are to have a Vice-President.

Dr. HARRIS—We have more than one nomination this time, and we may have a ballot.

Dr. McLAUGHLIN—The President ought not to be in the chair; he is there by one ballot, which is not within the by-law.

The Registrar then passed the ballot.

The PRESIDENT—The ballot has been cast and I find that neither one of the gentlemen named has received a majority of the votes of the members present, consequently this vote will have to be taken over again.

Dr. MACHELL—The lowest man should drop out.

Dr. WILLIAMS—I do not think that that is necessary.

Dr. GEIKIE—Give us the result.

The PRESIDENT—The ballot shows Dr. Thorburn to have received twelve votes, Dr. Henry ten votes, and Dr. Rosebrugh seven votes, of the twenty-nine present.

Dr. MOORHOUSE—Let the lowest vote drop out.

Dr. CAMPBELL—To be strictly in accordance with the by-law, as that seems to be a very necessary thing, we shall have to keep on balloting until one has the majority, unless some one of the three chooses to withdraw of his own accord.

The PRESIDENT—The ballot will again be passed to be taken on the three nominees for the office of Vice-President.

Dr. SANGSTER—May I ask, while the ballots are being cast, whether it is not usual in bodies as grave and important as ours is, to have scrutineers to examine the ballots?

The PRESIDENT—It has heretofore been the custom to have the Registrar count the ballots, and I am now following that custom.

The Registrar then passed the ballot.

The PRESIDENT—The ballot has again been cast and neither one of the nominees has received a majority of the votes. The votes stand now, Dr. Thorburn twelve, Dr. Henry eleven, Dr. Rosebrugh five.

Dr. ROSEBRUGH—I see plainly the choice is not likely to fall on me, so I beg to retire from the contest and leave it between the other two gentlemen.

The Registrar again passed the ballot.

The PRESIDENT—I find on the last ballot taken that Dr. Thorburn received eighteen votes and Dr. Henry eleven votes. I have much pleasure in declaring Dr. Thorburn duly elected Vice-President of this Council for the ensuing year.

Dr. THORBURN then said—Mr. President and gentlemen, I thank you very much for the honor you have conferred on me, and if I ever have occasion to be in the chair I have no doubt I shall receive the same loyal, royal support you have given me to-day. I will do the best I can in the high office you have elected me to.

The President then called for nominations for the office of Registrar.

Dr. CAMPBELL moved, seconded by Dr. BRAY, That Dr. R. A. Pyne be elected Registrar for the ensuing year.

There being no other nominations, the President put the motion, which was carried unanimously.

Moved by Dr. BRITTON, seconded by Dr. HARRIS, That Mr. B. B. Osler, Q.C., be appointed the Council's Solicitor for the ensuing year.

The President put the motion, which was carried unanimously.

Moved by Dr. BRAY, seconded by Dr. MACHELL, That Dr. W. T. Aikins be Treasurer of the Council for the ensuing year.

The President put the motion, which was carried unanimously.

Moved by Dr. WILLIAMS, seconded by Dr. HARRIS, That Mr. Alex. Downey, C.S.R., be appointed Official Stenographer for this Council for the ensuing year.

The President put the motion, which was carried unanimously.

Moved by Dr. WILLIAMS, seconded by Dr. SHAW, and resolved, That the following gentlemen constitute the Committee to Nominate the Standing Committees: Drs. Logan, Moore, Dickson, Machell, Brock, Sangster, Barrick, Henry, Moorhouse, Thorburn, Bray, Harris, Reddick and the mover.

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

Moved by Dr. HARRIS, seconded by Dr. CAMPBELL, That the Council do now adjourn for half an hour to enable the Committee to Strike Standing Committees to meet and prepare their report for submission to the Council.—Carried.

On the Council resuming, Dr. WILLIAMS presented the report of the Striking Committee, naming the various Committees as follows :

Registration Committee.—Drs. Rosebrugh, Campbell, Dickson, Barrick, Hanly, Roome and Shaw.

Rules and Regulations.—Drs. Emory, Hanly, Luton, Roddick and Machell.

Finance Committee.—Drs. Dickson, Armour, Bray, Brock and Henderson.

Printing Committee.—Drs. Luton, Emory, Henry, Barrick and McLaughlin.

Educational Committee.—Drs. Britton, Fowler, Graham, Harris, Logan, Moore, Moorhouse, Sangster and Williams.

Property Committee.—Drs. Emory, Barrick, McLaughlin, Machell and Thornton.

Complaints Committee.—Drs. McLaughlin, Armour, Reddick, Henry and Geikie.

Moved by Dr. WILLIAMS, seconded by Dr. BRAY, That the report of the Committee to Strike Standing Committees be received. Carried.

Moved by Dr. WILLIAMS, seconded by Dr. BRAY, That the report of the Committee to Strike Standing Committees be now read and adopted.

The President read the motion.

Dr. McLAUGHLIN—I see that I am put upon three committees here of considerable importance, and I would be very glad to be relieved from one of the three. I see that I am put upon the Printing Committee, Property Committee and Complaints Committee. You all know that I am a miserable man with complaints, and I wish to be taken off of that committee, and I would be glad if some person would name a substitute.

Dr. MACHELL—I notice that Dr. Shaw's name, by oversight, appears only once on the committees. I beg to move, seconded by Dr. MOORHOUSE, That Dr. Shaw's name be substituted for Dr. McLaughlin's name on the Complaints Committee.

The President, having asked for and obtained the consent of the Council, put the motion, and on a vote having been taken declared it carried.

Moved by Dr. WILLIAMS, seconded by Dr. BRAY, That the report of the Committee to Strike Standing Committees as amended be adopted.

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

NOTICES OF MOTION.

No. 1. Dr. EMORY—For the appointment of a special committee to take into consideration the question of the examinations of the Council, with a view to make them a more equable and genuine test of the attainments of the candidates.

No. 2. Dr. BRITTON—That tenders be forthwith advertised for for the printing required by the Council; that no part of any agreement entered into by the Council shall provide for the publishing in any journal of a report of the Council's proceedings or for the issuing of a free journal; that the profession be kept fully informed by a verbatim report of the proceedings, published in the Announcement; and that the accepted tenderers be required to furnish security satisfactory to the Finance Committee for the proper fulfilment of the contract.

No. 3. Dr. SHAW—To introduce a by-law to amend By-law No. 70.

No. 4. Dr. WILLIAMS—To amend By-law No. 39 in its 31st clause.

No. 5. Dr. BROCK—That all the accounts of the College of Physicians and Surgeons for the past five years be examined by a chartered accountant, and a full report presented to this Council as soon as possible.

No. 6. Dr. CAMPBELL—That it is expedient to amend the by-law levying an annual assessment, by providing that members of the College of Physicians and Surgeons resident in Ontario who are not engaged in practice and members not resident in Ontario be relieved from the payment of assessment.

COMMUNICATIONS.

The Registrar then read a number of communications, which were referred to the various committees.

ENQUIRIES.

Dr. SANGSTER—Mr. President, I have an enquiry or two I desire to make. I believe at the present moment the College of Physicians and Surgeons send, or profess to send, to every member of the profession in Ontario a monthly journal. It may not be within your knowledge that there was no journal furnished to the profession during the month of April. Is there any assignable reason for that omission?

The PRESIDENT—I can only refer the matter to the Registrar; I do not know of any reason.

The REGISTRAR states that he does not know of any reason.

Dr. SANGSTER—On the last journal issued, at the top of the page, there is a charge made of one dollar per annum, though this Council profess to send to every member of

the profession in Ontario a free journal. Is it the intention of the Council no longer to supply that journal free?

Dr. THORNBURN—There has been a notice of motion given bearing on that subject.

Dr. SANGSTER—There is another point which I suppose will come up for discussion afterwards. It is broadly stated that the Council did send that journal to every member of the profession in the Province free, and then to place a professed charge of one dollar per annum on the cover is a simple attempt to defraud the post-office revenues. If that is the case, I, as a member of the Council, object to the Council being placed in the humiliating position of being in any sense a party to a fraud of that kind.

Dr. BRITTON—I gave notice of motion a few minutes ago that I think will cover this matter referred to by Dr. Sangster. I feel perfectly satisfied that that motion of which I gave notice will be carried almost unanimously. It is not our fault that anything of the kind spoken of by Dr. Sangster has appeared upon the pages of the journal. I, perhaps, have been more opposed than any other member of the Council to the issuing of a free journal; but I never noticed on the cover of the journal that one dollar is mentioned as the subscription price, or I would have objected to it. However, this Council cannot be called in question in regard to the matter, because the placing of this price on the journal is only a recent occurrence, and as we have had no opportunity of considering it, and if the matter had been allowed to remain over till to-morrow it would have been settled forever, without the necessity of interference with that journal.

Dr. WILLIAMS—That price may apply to people outside of this Province. As a matter of fact I saw that journal in Prince Edward Island last summer, and had a read out of it there; and I saw it in Nova Scotia. That dollar may, as I say, apply to the other Provinces, because the journal goes to Manitoba, to British Columbia and elsewhere throughout the Dominion, and while the Council furnish it free to the members in the Province of Ontario, it does not follow that it is free to all outsiders, and I think in that sense the dollar is legitimately put on there.

Dr. SANGSTER—I think that merely confirms the view I take. It is well known that that journal has been sent, without paying postage, to every member of the College, and the post-office has to that extent been mulcted in proper postage, and I claim that this Council, not only this year but in past years, have been made a party to that by permitting their name to be on it as sending it to the members of the College of Physicians and Surgeons of Ontario.

Dr. HENRY—I want to know what induced the Honorable Mr. Ross, Minister of Education, to interfere with our matriculation and to threaten to introduce a bill to take the power of the matriculation examination out of the hands of the Council.

The PRESIDENT—I will answer Dr. Henry's question by stating that that matter will come up in the report of the Committee on Legislation and the Executive Committee's report and be fully dealt with by them.

REPORTS OF THE SPECIAL AND STANDING COMMITTEES.

None.

CONSIDERATION OF REPORTS.

None.

UNFINISHED BUSINESS FROM PREVIOUS MEETINGS.

None.

On motion the Council adjourned to meet at ten o'clock to-morrow. The committees in the meantime to organize and prepare their reports for presentation.

SECOND DAY.

WEDNESDAY, June 10, 1896.

The Council met at 10 o'clock a.m., according to motion for adjournment.

The President in the chair.

The Registrar called the roll. Present—Drs. Armour, Barrick, Bray, Britton, Brock, Campbell, Dickson, Emory, Fowler, Geikie, Graham, Hanly, Harris, Henderson, Henry, Logan, Luton, Machell, Moore, Moorhouse, McLaughlin, Reddick, Rogers, Rosebrugh, Sangster, Shaw, Thornburn, Thornton, Williams.

The minutes of the preceding meeting were read by the Registrar.

Dr. GEIKIE—I desire to move a slight amendment to the minutes, namely, that my name, if I am not mistaken, is mentioned as being on the Committee on Complaints, and I wish to move that the minutes be amended by the exclusion of my name, for I decline to act on the committee. As a representative of Trinity Medical College, one of the largest, if not the largest of our Ontario medical colleges, the only committee on which

I have a claim and the committee on which, perhaps, from my several years' experience as a teacher, I might have been most useful, was the Education Committee. I may say that I do not personally regret my exclusion from that committee, inasmuch as excluding me means a great saving of labor on my part and a great saving of my time; but on the other hand, I feel that, as the only representative on this Council of Trinity Medical College, it is my duty very strongly to object to this omission, and I would be derelict in that duty did I not make a strong objection to the exclusion of that body in me from all share, for this year at all events, in the deliberations of the Education Committee. Some may think that perhaps the representative of Trinity University is our representative—

Dr. ARMOUR—I rise to a point of order. We are now considering the adoption of the minutes, which must be adopted as they were put down at the last session; we have no power to amend them at this stage, and Dr. Geikie is out of order in discussing that matter now.

Dr. GEIKIE—I am speaking on a question of privilege; I move that the minutes as read be amended.

The PRESIDENT—I will have to rule you out of order, Dr. Geikie, for the present. After the minutes are adopted you can move to have this matter rectified.

On motion the minutes were confirmed as read.

Dr. GEIKIE—As to the question of privilege, I will ask to be heard for a few minutes. Some of the members may think the representative of Trinity University, my friend Dr. Harris, is our representative, but he is no more so than is Dr. Williams, Dr. Thorburn, or Dr. Moore; the relations existing between Trinity University and Trinity Medical College being one of affiliation only. We are a distinct corporation, having a distinct Act. Our Act gives us the legal right to be represented here and gives us other rights in connection with the Council besides. The exclusion of the representative of the College, whether intentionally or otherwise—and I do not say it is intentionally—is unfair and I regard it as a wrong to the entire faculty of our College and to every former student who is now practising in Ontario or elsewhere, and I am perfectly sure it will be so regarded, not only by us, but by the teachers and graduates of other Colleges as well as our own, for I have reason to know and am proud to know that the colleges co-work and that each one regards a wrong inflicted on another as though it were inflicted upon itself—

Dr. SANGLER—I again rise to a point of order. If the rules of order of this Council are to be transgressed with impunity by one, they must be transgressed by all. There is a proper time for this discussion, and I claim your ruling, Mr. President, that the order of business shall be maintained.

The PRESIDENT—On the question of privilege, Dr. Geikie is in order.

Dr. SANGLER—I thought the proper time was under the head of Miscellaneous Business.

The PRESIDENT—No, under our rules a member may rise to a question of privilege at any time.

Dr. GEIKIE—I have been here for twenty years, and should be familiar with the orders and rules of the Council. I felt, even before your ruling, Mr. President, that my remarks were in order. I regret, as far as this Council is concerned, that this wrong has been done. I know that in the Council it is the body that inflicts without cause a wrong on another, and not the body on which that injury is inflicted, that really suffers; and for the sake of the Council I do say that I very, very deeply regret that this has happened. I am sure that it will cause very, very widespread feelings, easy to create but difficult to allay, and which that ordinary sense of fairness and justice which I think is to be looked for in all learned bodies like this should have rendered absolutely impossible. I may say that since I have come to the Council this morning I have been informed that it is some idea with regard to my views as to matriculation that led to my exclusion; with regard to that I maintain that no views that I could hold, or that I could not hold, should have militated to the exclusion, not of myself personally, but of the representative of that great college which I have the honor to represent: and I have to say that the idea is utterly wrong, my views were those of the Legislature, those of the Minister of Education, views the adoption of which has now been made absolute by the Legislature upon the Council, and which, I think, are founded on common sense and on nothing else, and which should not have been taken as a reason either for the exclusion of the representative of Trinity College or any one else from any committee of this Council.

NOTICES OF MOTION.

No. 1. Dr. ARMOUR—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 a 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 can Section 410 of the

Medical Act passed in 1891 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 41? Also that Drs. Williams, Henry, Campbell, Sangster and Armour be a delegation to wait on Mr. Robinson to secure the above advice.

No. 2. DR. SANGSTER—That it be an instruction to the Registration Committee to carefully examine the credentials on which registration has been granted to such persons as have become members of the College during the twelve months preceding the second Tuesday of June of each year, and to report thereon to the Council during the current and succeeding sessions.

No. 3. DR. HANLY—That the opinion of our Solicitor be obtained regarding the possibility and probability of removing malpractice cases from juries and placing the decision in the hands of the Judges, and also how security for costs can best be secured.

No. 4. DR. GEIKIE—To have his (Dr. Geikie's) name struck off the Committee on Complaints.

COMMUNICATIONS, PETITIONS, ETC.

Communications were received from Mr. Foster and from Dr. F. H. Young, which were referred respectively to the Complaints and Finance Committees.

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

Dr. EMORY moved, seconded by Dr. WILLIAMS, That the following be a committee to take into consideration the question of the examinations of the Council with a view to make them a more equitable and genuine test of the attainments of the candidates, and to report on the same to this Council at this meeting: Drs. Harris, Moore, Sangster, and the mover and second.

The President read the motion.

Dr. EMORY—It is not necessary for me to detain the Council but a moment in speaking to this motion. Having but a few years ago the honor of being appointed by this Council to serve upon the Board of Examiners, and having so served I had opportunities of seeing what seemed to me some points which could be improved upon; and I have thought of the matter since then, and during the past examinations I visited the hall during the oral examinations. I do not know that it is necessary at this time to go into the particulars which seemed to me might be improved upon, but if a committee is appointed they will no doubt enter fully into the consideration of the case, and when the matter is considered by them and reported upon by them and the report brought in it can be fully discussed in Council.

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

Moved by Dr. BRITTON, seconded by Dr. MOORE, That the Printing Committee be instructed to advertise forthwith for tenders for the printing required by this Council; that no part of any agreement entered into by the Council should provide for the publishing in any journal a report of the Council's proceedings, or for the issuing of a free journal; that the profession be kept fully informed by a verbatim report of the proceedings in the Announcement; and that the accepted tenderers be required to furnish security satisfactory to the Finance Committee for the proper fulfillment of the contract.

The President read the motion.

Dr. BRITTON—I do not know as it is necessary for me to say much in regard to this motion. I feel confident there will be very little discussion on it and it will pass in the Council without any opposition. The matter has been under discussion for many years. On the first occasion when it was discussed, there were only two of us who opposed the method of printing that has been adopted recently, that is, by a journal publishing company; and there were only two of us who, I think, opposed the issuing of a free journal. On the next occasion it came up I stood solitary and alone. I mention this to indicate to you the strong convictions I have had upon the matter, straight through, from first to last. Last year there were quite a number who stood beside me in this matter, and when I moved a resolution almost identical with this I think it had a good many supporters; and it would be only taking up the time of the Council unnecessarily to go into the merits of the case, because I think the resolution shows upon the face of it, and the changes that have taken place in the personnel of our journal—I call it our journal by way of courtesy, although I disclaim any responsibility for anything that has been stated in that journal at any particular time—and the succession of events that have taken place during the past few years, are quite sufficient to warrant this Council in doing their business in a businesslike way, like any corporate body, like any private individual, or like any wholesale or retail dealer in the City of Toronto. I have to pass some reflections upon what was formerly done. I am not going to find too much fault with the members present who were opposed to me formerly; they certainly did what they believed to be right, at the same time I think they were guilty of errors of judgment. I have had no conversation with any member regarding this matter

excepting two—I think the matter came up between two individuals and myself—and I do not know definitely what the feeling of the Council is in the matter.

Dr. WILLIAMS—I think Dr. Britton is rather premature in assuming that the Council are willing to come to his views in one jump after, as he says, the year before last he himself voting alone, and on previous years with a very slight support. I think he is wrong also in assuming that this Council's position was governed by the personnel of the parties publishing the journal. I think there is a stronger motive at the back of publishing the journal—

Dr. BRITTON—Excuse me, I am afraid Dr. Williams drew a wrong inference from what I said. I intended to say there has been an entire change, not only as to the caption of the journal, but in addition to that, the parties who at present are responsible for the fulfilment of that contract took rather peculiar views formerly regarding this Council. That is what I referred to. I made no reference to the gentleman who was awarded the contract, nor had I at any time thought that the personnel of the publisher had any influence upon this Council in securing the contract. The error arose from my speaking briefly, not wishing to take up time.

Dr. WILLIAMS—To the balance of the resolution I would offer no objection, and would agree with it; but to assume, as Dr. Britton seems to think, that we would continue the parties now doing the work is unfair; to assume as well that because the personnel of the journal that we have been publishing is changed, that therefore we do not think it necessary to have a journal sent out at all is wrong altogether. (Hear, hear.) My recollection of the object of having that journal sent free to the different members of the profession is that it was to keep the profession in touch with the Council. (Hear, hear.) It is true you can get to them through the Annual Announcement, but that Annual Announcement won't get there till next fall. They know the profession is meeting now in the early part of the year. Is it fair to keep them from any information until next fall? Now is when they want to be in touch, when the matter is a live question, when it is up; and to put it in the Announcement and send it next fall at a time when it won't probably be read at all, is not just what we want. Another thing I desire to draw your attention to is—it is within the experience of every member of this Council—and I do not hesitate to say the members here will admit it, that when the Announcement comes it is too big a thing to look at, and they throw it aside to be looked at when they have time. Generally the time don't come. While if a medical journal comes it is likely to be read for its medical information, let it be good or bad, and it is read for that purpose, and, being read, it brings under their notice the proceedings of the Council, and the profession is kept in touch with the proceedings of the Council as it cannot be by any other method. Another thing, the profession are getting but a small thing when you send them a journal free. They, to a large extent, have appreciated that. In my own division I have taken occasion, at least twice, to go largely over my division, and have entered into conversation with the medical men throughout the riding, and I found that the medical men appreciated getting the journal, and looked upon it as a means by which they were kept informed of the proceedings of the Council and what was being done. Now, I think, under these circumstances, inasmuch as it costs almost nothing above what our ordinary printing would cost, to send a journal, it would be most unwise to stop that means of keeping the profession well informed of what is being done in the Council. We got into difficulty before we had an association spring up that called itself the "Defence Association." Why did that occur? It occurred simply because the profession were not kept informed of what the Council were doing. We could not expect the daily newspapers to publish our proceedings fully; our medical journals would not do it, and the profession were therefore in absolute ignorance of what the Council were doing, and hence there was the ground to grow up a suspicion of the Council and the belief that the Council were not acting fair and proper. Under these circumstances I hold the Council would be taking a radical backward step and doing itself a gross injustice, and injuring the profession as well, in not keeping them informed of what is done. I agree with the balance of Dr. Britton's resolution, that we should take tenders and come to an understanding what journal is going to publish it, and have proper security. That is perfectly right, I do not object to it; but when you have done that, do not say by a vote of that kind that we are going to take a retrograde step and not keep the profession properly informed of what the Council are doing. If we want our Council matters to progress satisfactorily we must do our business above board, and do it in such a way that we are not ashamed. Not only that, but we will take pains to have the profession acquainted with what we do. Having done that we can hope to stand well with the profession, but we cannot hope so outside of that.

Dr. McLAUGHLIN—I do not intend to discuss this at length. Probably Dr. Williams would suggest how the profession has been kept in touch with the actions of the Council during this last year. The journal started out at a jolly gait to publish a little of what was done here, but he fell off his bicycle into the ditch before he got half way through, and went no further. That is the way the touch has been kept between the Council and the profession by this journal. I am disposed to think that the members of this Council are

perfectly competent to select their own journal and get what information they please. I do not wish to advocate the idea that this Council should get a journal and send that journal gratuitously to members of the profession. The profession are perfectly competent to pay for their own journals, and I think they ought to do so. I think the first part of Dr. Britton's resolution unnecessary, for, if my memory serves me correctly, I think Dr. Thorburn brought in a motion about the close of last session that no contract for the expenditure of the money of this Council should be entered into for any purpose whatever unless it was by tender; that would cover what the first part of our friend's resolution covers, and I think would do away with the first portion of this resolution. With the second part of the resolution I entirely agree. I think that satisfactory bonds should be given by every person who enters into a contract to do certain work for money for this Council, just as would be done in any ordinary transaction.

Dr. THORNTON—Mr. President, I think the first copy of the journal we had issued last year should be a sufficient lesson to any of us with regard to the propriety of engaging further in this journal publishing. I have not a copy here in my hands, but it is not necessary to read the exact wording. We all remember the efforts that were made to secure the printing and issuing of that journal in the manner decided upon at the time; and a reference by any member of the Council to the first pages of the journal will show the impressions that were conveyed in its publication. I contend that those impressions were entirely misleading, and there is always a danger that they will be misleading. A matter of that kind is very apt to perpetuate friction. We had an unusually long sitting last year, and the conclusion to be drawn from the first pages of that issue of the journal was—I say this without qualification, because I do not think that anyone will disagree with me—that the prolonging of the session was entirely owing to the addition of a certain number of members to the Council; I say this is misleading. We had an unusually long session, but it could not have been a very short one when some of the committees did not bring in their reports until the time that every previous session of the Council had closed its sittings. There was a source of irritation conveyed by that journal at once, and to get rid of this I think the motion that Dr. Britton has made is a very businesslike motion, and it will obviate further friction of that description.

Dr. HANLY—I think, with Dr. Britton, that we should use ordinary business methods in having our work done; that if we have such a journal as we have had it does not serve the purpose it should, that is, to keep the profession in touch with what is being done, because it has done that. I had no knowledge of some of the changes until I received a private letter from the Registrar informing me the Announcement had not been sent out as it should have been. I was at a meeting of the Medical Association in my district, and about fifteen of the members present stated that they did not receive the Announcement.

Dr. BARRICK—I quite agree with the motion as it is now before the meeting.

Dr. ARMOUR—There is one respect in which I think it may be advantageously amended by adding to it. I believe there is nothing in the resolution that removes the present journal from being, or commands it not to be, the journal of the medical profession. It is now published as the official journal, I believe, of the medical profession, and I think there should be an addition to the motion nullifying that, if there is a reason for it. I do not propose to go into the discussion of the matter further, because this matter was pretty thoroughly discussed last year. But I do hope that Dr. Britton's view that there will be few to oppose his motion at the present time may be correct. I may also say that I think Dr. Williams has formed a rather false estimate as to the value of that journal to the profession and to some views held by the members of this Council. I can assure Dr. Williams that instead of quieting that feeling and those views that led to the organizing of the Defence Association, those views are stronger in the profession to-day than ever before. When he says that it had removed those, as he called them, erroneous views, I think he is altogether mistaken with regard to them.

Dr. BRAY—As regards what Dr. Armour has said about putting an additional motion to discontinue the journal, I submit that there is no necessity for that. The contract only calls for a year, and the contract has expired now, so that Dr. Armour's suggestion is not necessary at all. As to the publication of the journal, I think that it is almost absolutely necessary that the proceedings of this Council should be published in some journal; whether it is wise to give that monopoly to one journal and send that journal free to every member of the profession, is a question I am not prepared to answer by saying it is in the interests of the profession that it should be so sent. That is a question for our consideration. Dr. Britton has been a little bit mistaken in saying that he stood alone, because while I did not express any very strong opinion in the matter, I did say that I did not believe that we should have a journal set out unless we had full control of that journal and sent it out under the lines of the British Medical Association's journal. I said if we were strong enough to do that, then I was perfectly willing that that should be done; and we should hire a man who would be responsible to this Council to do so, and let all remuneration coming from adver-

tisements, and so on, in that journal go to increase the revenue of the Council. But I was and am opposed to the way the journal has been conducted, and I am on record to that effect. At the same time, I agree that it would be very nice and a very proper thing to do if we could make some arrangements with the existing journals, as they come out every month, to publish our proceedings, so that the members of the profession throughout the country would see through the journals what the Council were doing. I agree a good deal with what Dr. Williams said about the Announcement. The Announcement comes very late in the year, when it has lost its interest; the time has gone by; people want to see what is going on without waiting three or four months to do so, and I think if we could have those proceedings published in a journal it would be a very great advantage. But I am not prepared to say whether or not such an agreement could be come to. I do think, under the existing circumstances, that it is better for the Council to drop the journal under the present management, at any rate.

Dr. WILLIAMS—I understood you to say a moment ago that the contract terminated with the year, that it is terminated now; therefore you have no contract, and it would be with some journal that you would make a contract.

Dr. BRAY—The contract with the present journal is done—it has terminated. I do not say that a contract should be made; but I think if there was some arrangement come to by the existing medical journals whereby the proceedings of this Council should be published, they would reach every medical man. I think that it is certainly very much against the interests of the existing journals for this Council to send a journal free; at the same time, that free journal has been appreciated by the profession; the members of the profession in my constituency were almost unanimously in favor of having a free journal sent to them. I think, however, if the journal could be sent in the way I suggest, under the control of the Council (edited by somebody hired by this Council), so that none of these advertisements would appear which are to be seen in the journal which published our proceedings during the past year. I do not think there should be any advertisements in the report of the Council's proceedings; I think the report should be devoted entirely to the Council's business, and if that can be accomplished I would hold up both hands for it. But I am opposed to such a contract as we have had.

Dr. GRAHAM—I concur very much with Dr. Britton's resolution, but I think that there is part of it unnecessary. If I understood the printing contract of last year, I understood that it was no part of the contract to issue this journal free. When I went back to my constituency it was mentioned, and I said it was not our official journal. I wrote to an authority on that subject, and he repudiated the idea of it being the official journal, and I think he was right. I do not remember that phase of the thing entering into the contract at all. That part of the resolution is, I think, entirely unnecessary; otherwise, in the resolution I agree with Dr. Britton.

Dr. CAMPBELL—I think the Council at large is quite in accord with the first part and the last part of the resolution, that there should be tenders got, and so on; the second part of the resolution is one on which there may be reasonable differences of opinion as to whether the Council shall send a copy of a journal, or of several journals for that matter, to the members of the profession without charge, in order, as Dr. Williams says, that they shall have the proceedings of the Council at an early season, when they can become acquainted with it and with its work, and when they can have some interest in its work. That is a matter about which I think there may be reasonable differences of opinion. The journal that has been sent in the past has not been one that has contained very much reading matter in which I myself was personally interested; but I have heard of quite a number of physicians in my own neighborhood who found a great deal of interesting matter in it—I mean outside of Council questions altogether—on medical subjects and were very much pleased with receiving the journal in that shape, and looked upon it as some return for the assessment which they were called upon to pay. So far as I am personally concerned it is a matter of indifference to me; I could get along without a copy of a journal of that description being sent to me; but I think there is ground for a difference of opinion on that point, and if Dr. Williams would make a motion to amend Dr. Britton's resolution by striking out that particular part, I would be pleased to support it, in order to leave that an open question. Striking out that portion of Dr. Britton's resolution will not commit the Council to adopting the plan of sending a journal or several journals to the profession. It will leave that, so far, an open question, which may be decided on the lines suggested by Dr. Bray by an arrangement with several journals to have it printed and sent to the members.

Dr. SANGSTER—I am fully in accord with Dr. Britton's motion. I do not believe that this Council had better go into the printing and publishing business. It went into real estate once and burned its fingers badly, and I think it had better keep out of all such transactions and proceedings. The objections to Dr. Britton's motion seem to turn upon two points—first, that there is a prevailing wish in the profession to obtain a free journal; next, that there is a prevailing wish in the profession to get a knowledge of the proceedings

of this Council at an earlier date than the Announcement furnishes them. With regard to the last, let me say I see no reason, if our proceedings are published by contract with reasonable expedition, why the profession should have to wait more than a very short time after the close of our session before the proceedings are put in proper form before them. I think we could reach the profession at as quite an early date through the Announcement as we do at present, and much more profitably than we do through the medical journal. Then, with regard to the prevailing wish to obtain this medical journal, let me say that at present there is another medical journal published and sent free to every member of the profession; and a short time ago there was a second one, and a little while ago we had three free journals all sent to the members of the profession in this Province. I do not think the profession is so dying, as might be inferred from remarks here, for information supplied through the columns of medical journals; and I do not think that they are not able and not willing to pay out of their own pockets for any information of that kind that they may desire. There is one other point I want to suggest before I sit down, and it is this: if there is a desire on the part of the profession to obtain access to the proceedings of the Council through a journal, I should think in these days of sharp business enterprise that the proprietors of the different medical journals would themselves, of their own motion, publish the proceedings of the Council gratuitously at as early a date as they could issue them. I really can see no force made in the different objections that have been urged against Dr. Britton's motion; on the other hand, I could, if I dare venture on your time, point out a score of, as I think, very strong and valid reasons why this Council should not only in the present cut themselves free from any connection with any medical journal, but they should carefully refrain from forming any such connection in the future.

Moved by Dr. WILLIAMS, seconded by Dr. HARRIS, That the resolution be amended by striking out the second part, "That no part of any agreement entered into by the Council shall provide for the publishing in any journal a report of the Council's proceedings or for the issuing of a free journal."

The President read the amendment.

Dr. BRAY—When Dr. Williams spoke I was just going to explain that by voting for Dr. Britton's resolution, which I favor to a great extent, it takes away the power of the Printing Committee, the committee which this resolution will go to, and it is in fact an instruction to them not to do this. Now I think a committee is the proper place to discuss the pros and cons of any question, and after due deliberation they make a report to the Council, and the report would and should have more weight, and should be more intelligible than if there was free discussion going on now, because the committee will go into the matter thoroughly and their report is the thing that should be here discussed. But if Dr. Britton's motion, as it is now, is carried, it cannot be discussed; it shuts off discussion on that part of it entirely. That is the objection I have to that portion of Dr. Britton's motion; the other part I quite agree with.

Dr. WILLIAMS—If Dr. Britton's resolution is carried as it stands it prohibits the Printing Committee from ascertaining or not if a reasonable contract can be made with any journal. It prohibits as well the sending of the journal to members of the profession. I object strongly to that, because before the committee have had an opportunity to ask for tenders for printing, and when they might get what would be very satisfactory offers for doing this work, the Council have been committed. If that printing can be done and the publication issued to the profession free, without incurring any material increase in cost to Council, I think there are few members of the Council that would not be willing it should be done. That the journal that gets the printing contract should be considered the official journal of this Council is certainly no part of this Council's business. The Council do not undertake to establish an official journal, and it is only a business representation made by that paper for which we are not responsible in any sense whatever; and if it becomes necessary that we shall place a veto upon the person getting that contract to prevent him doing that we can do so in an agreement—we can easily do that. "As we do not accept this as our official journal, and we are not responsible for it; therefore you shall not on that journal make a statement setting forth that it is the official journal of this Council." That is a mere matter of detail that is easily carried out. Then, there have been some objections raised on the ground that the contracts during the last year have not been satisfactorily carried out by the journal we were dealing with. As to that, while we may have failures with one journal, perhaps because of some unfortunate business arrangement, it does not vitiate the entire system; it simply says that so far as that particular journal is concerned it is not wise to enter into a contract with it unless they can give some satisfactory proof that they are going to have better business management. It does not say anything against the system whatever. The statement has been made that I have said, or was understood to say, that this journal had done away with the feeling that there was among the profession. I did not intend to say that. What I did say was that if the profession is kept thoroughly and properly informed of the doings of the Council as they proceed, it should have confi-

dence that we do our business in such a way that the profession should be satisfied ; and I think it is the right of this Council to see that the profession is kept fully informed of what the Council are doing, and unless that is done the profession are not in a position to judge of the Council's business. Within the last year I had a letter from a gentleman in my own division who was one of the strongest opponents that this Council could have, and he wrote me stating that he had had the journal and had read up the proceedings carefully, that he had read the Announcement and had completely changed his mind, and had sent in his fee ; and that he considered it an honor to belong to such a body and to have the privilege of paying his fee, while previously to that, when I was there, he had expressed the very strongest possible opinions in the other way. I hold it is the right and duty of this Council to take steps to keep the profession regularly and well informed about every step they take ; and when they have done that they have done their duty and nothing less. The question then comes up, if that is their duty, which is the best way to go to work to accomplish it ? I believe there is no more efficient way than having a publication in a medical journal so that it reaches every man in the entire Province. On that ground I object to Dr. Britton's resolution, because it ties our hands and prevents the Printing Committee from asking for tenders that would carry out that idea in any shape whatever.

Dr. McLAUGHLIN—I only rise to call the attention of the Council to what I said a little while ago, namely, that we discussed the propriety of having our printing done by tender. I have advocated it time and again here and it was advocated by other members of this Council. And on the twenty-seventh day of June last, Dr. Thorburn moved, seconded by Dr. Machell, that in future before any contracts are made involving any expenditure of money, tenders for such expenditure be asked for and, all things being equal, the lowest tender be accepted. Dr. Britton will see, therefore, that the next part of his resolution is unnecessary, because it is already provided for by a general resolution of the Council. Only one word in reply to Dr. Williams. Neither Dr. Williams nor any other man of this Council has pointed out or can point out why we should not have a report of our proceedings in the hands of the profession as quickly as we would have it dribbled out month by month in the journal ; and if this Council are desirous of having their proceedings in the hands of the profession as rapidly as possible, the proper way is to print the whole thing as quickly as possible and send it to the profession, and not have, as last year, a little dribble sent one month and a little dribble another month and finally have it disappear.

Moved by Dr. Brock, seconded by Dr. Logan, in amendment to the amendment, That this Council postpone discussion of this matter until the reports of the Printing and Finance Committees are received.

The President read the amendment to the amendment.

Dr. Brock—I will not take up the Council's time very long, but I have had a good deal of experience about journal business, and I think after this Council get a report from the Printing Committee we shall find it is quite possible to have the proceedings of this Council published without any expense to the Council. Medical journals have been published which have given the proceedings of the Council so long ago that I do not wish to go back that distance ; but it is possible to publish the proceedings of this Council and the proceedings of our Association by the medical journals if they wish to do so. There is not a reporter here this year from the daily papers, and (though last year we had three or four) there will consequently be no report of the proceedings going out this year in the daily press that will be at all satisfactory to the profession. I think the Printing Committee can give us a report that will be satisfactory to this Council and that will settle the question, and Dr. Williams' arguments are sufficient to my mind to say that the amendment to the amendment should carry ; he uses the arguments I would use myself.

Dr. MACHELL—Dr. Pyne informed me two months ago that this Announcement could be printed in from four or six to eight weeks at the very longest. Heretofore the proceedings of the Council have not been printed in the journal in anything less than from two to three months—two to three months is the shortest time. Now, if this Announcement could be got out and in the hands of the profession in from two to six or possibly eight weeks it is the simplest way to do. Last year I was not in favor of giving the contract to any particular journal and I am still of that opinion, I have no reason to change my opinion.

Dr. LOGAN—The only point I wish to make in connection with the amendment to the amendment is that if Dr. Britton's motion as amended by Dr. Williams is carried by the Council it will then become the opinion of the Council, and if you refer it to any committee that committee are debarred from changing the opinion of the Council ; or if the committee see proper to make a change in the resolution you send to them, and it is brought back to the Council, the Council cannot go back upon their previous opinion and would debar themselves in that sense from changing their own opinion. I see the necessity of this or other similar questions being placed before the committee to which it is properly assignable first, and then if the committee suggest any change in the matter, the Council have a right to consider it, to be consistent and to carry out their opinion.

Dr. GEIKIE—Would it not simplify the matter to give the committee an instruction that the Registrar shall see that the Announcement is published and mailed to practitioners not later than the 1st of August in each year? Our last Announcement came to the profession in the end of the month of February of this year. Its encyclopaedic character probably explains this, and we may not have such an Announcement again. If our Announcement were in the hands of the profession in August, it would keep everyone in touch with what was going on.

Dr. ARMOUR—I am opposed to Dr. Brock's amendment for the reason that if we entertain the amendment and refer this first to the Printing Committee, we will not have an opportunity or time to advertise for tenders and utilize them during this session; for that reason, if for no other, I think it should not be entertained. I desire to refer again to Dr. Williams. He seems to think I misapprehended his meaning in regard to his views of the effect of this journal, though I think in his reply to me he practically reaffirms the views I apprehended he insinuated here. I have in my hand the *Ontario Medical Journal* for last June, and I desire to read you a brief portion of an editorial contained in that number, and to show you the undesirability of perpetuating a journal of this kind, and I will be very much surprised if after hearing this that even Dr. Williams will approve of a repetition of this kind of work in the name of the Medical Council. The article is as follows: "When the idea of increasing the number of members was promulgated, our voice [that is, the *Journal's* voice] was against it; and now the wisdom of our stand is clearly evidenced. There was more breath used, more trouble caused, and more money spent this year than ever occurred in the history of the Medical Council. Useless bickerings, unparliamentary methods and language pervaded the meeting from beginning to end. We may be asked why this was so, but we only need to point to the fountain-head, with its three attached spouts, which unfortunately has been foisted on the Council by the misjudgment, and in many of the cases by misrepresentation, from the elected to the electorate [whatever that means]. A letter which is public property, in that it can be produced at any time, states, and that forcibly, that one of the new members got most of his votes by promising to help insist on the immediate payment of all back assessments owing by the medical profession of the Province. And yet he gets up in his place in the Council chamber and asserts that he never canvassed for a vote, and, to add to his record, proceeds to vote against the reinstatement of the clause dealing with the annual assessment. Truly we will be sorry for this gentleman when his words and actions are reviewed by his constituents on the production of the printed report of the proceedings. All thought that this wonderful Defence Association would surely be able to send good, strong men to represent them, but their actions proved straight from start to finish that the composition was principally wind, after the style of what the lay people call water-brash—bitter." I will not proceed further—that is enough to show you the style that that journal has been carried on in, in the name of the profession. I would be surprised that any member would approve of such writing, such references, such misrepresentations as are contained in this article.

Dr. HENRY—I just rise to say that this matter was discussed last year, and we had the expressions of this Council on this very question that has been under discussion so long this morning. I am strongly in favor of Dr. Williams' amendment. I think this Council never did an act that gives such satisfaction to the medical men in the country—I speak of my own constituency—as the sending of a free journal; and I think it would be a very unwise thing to dispense with that journal. It has given universal satisfaction. We have spent the whole morning discussing this thing that was threshed out last year, and the expense of this discussion will be very nearly that of the printing; and we are also wasting time discussing what was discussed thoroughly last year, and I do not think this Council wants to stultify itself after what was said last year.

Dr. THORNBURN—I thoroughly agree with a great deal of what has been said in regard to the action of this Council on this matter, but I think it has been before the members every session, and perhaps there is no subject so thoroughly discussed, with more or less satisfaction, or dissatisfaction. I think it is a very important thing, and before any action is taken I think it should be submitted to the committee as suggested by Dr. Brock's amendment to the amendment, and let the committee discuss it and bring in their report, and then let the matter come up for discussion in Council.

Dr. EMORY—You have a Printing Committee here whose duty it is to bring in a recommendation to the Council, and I am in favor of Dr. Brock's amendment that it is left to that committee for a report, and on that report a proper discussion may come up. Dr. Armour has just told us if the amendment to the amendment carries it will be too late to call for tenders. I submit that in pursuance of the resolution carried last year, which Dr. McLaughlin read to us, the Printing Committee must immediately advertise for tenders, they have no option in that matter, that is their duty, their instruction; and when those tenders are received I think they will be in a position to bring in a recommendation which will save a great deal of time and discussion. As one gentleman has said, the discussion has cost us as much as the whole printing would cost.

Dr. BARRICK—I will just say that in dealing with this matter one objection I have to referring this to the Printing Committee is that we are now dealing with a principle, and I think the Printing Committee have other duties to perform than the deciding of a principle, and especially a principle that has been before the Council for a number of years. The principle is, shall or shall we not have a free journal? If that matter is settled then the committee know exactly what they are doing; and I think it is the place of this Council now, when this resolution is before the meeting, a resolution which has been before the Council for some years, to settle this and let it be an instruction to the Printing Committee to act thereon. We expect to have a short session, and we have to get tenders for the printing and present them and have it all settled in a few days; but if that committee is to take up their time in discussing a principle which has been discussed and thrashed out by this Council for a number of years, I think there will be very little time to get tenders and get the business done properly. While this is up now, it seems to me we should have the matter settled and have a tender for this printing, as called for by Dr. Thorburn's resolution of last year. But, are we to send out and get tenders from the various journals for the publishing and sending of a free journal to the profession? What Dr. Williams has said is perfectly true, that we want to do the business of this Council above board, and we want to do nothing here but what we want the profession to know, and we want the profession to know what is done here as soon as possible; but Dr. Williams' argument that in sending a free journal we do get this communication to the medical men sooner is not borne out by the facts. I am sure that scarcely any member of the profession could be satisfied with the little dribble we got last year, waiting on for six or seven months before the medical profession knew what was done by this Council. Let us drop altogether that free journal business and direct the efforts of the Printing Committee to the speedy publication of our proceedings, and also urge on the people who take the contract for printing and publishing and sending this Announcement to the practitioners. As Dr. Machell has said, this can be done within four or six weeks; even if it takes two months we would then have, as Dr. Williams desires, the report of our proceedings in the hands of the profession while it is fresh, and before it gets old and stale, as our Announcement of last year was when it came to the hands of the profession. I can see no reason why, if we leave alone the publication and sending of a free journal, we cannot place in the hands of every medical man in this Province the proceedings of this Council in the course of at least two months (and that I think would be far more satisfactory than the method adopted in the past) and let us cut loose from this publishing business altogether. I think it is derogatory to this Council to have any journal posing itself as the official or quasi-official organ of this Council. I do not think we should go into that business at all. Let us now, while we are here, settle this principle, shall or shall we not continue to perpetuate the sending of a free medical journal to the practitioners of this Province?

Dr. SANGSTER—I have only a few short remarks to make; I wish to say that I thoroughly agree with what Dr. Britton has been saying. It appears to me that there is a tendency here, as on other occasions, to put the cart before the horse, and the impression seems to prevail that it is the business of the Committee on Printing to instruct the Council, but I think it is the business of the Council to instruct the committee; and I think it would be absurd to let this go to the Printing Committee and then come back here, wasting all the time we have already devoted to it, and have us go *denovo* over the whole business again. I claim it would be a great loss of time, and I hope, therefore, that Dr. Brock's amendment to the amendment will not be entertained, and that we may be permitted without further loss of time and consequent expenditure of money to proceed to a vote upon the question.

Dr. BURTON—After having listened to the discussion that has taken place, my convictions regarding the propriety of issuing a free journal have not been changed one particle.

Dr. WILLIAMS—Nobody could expect it. It has been your stand for years.

Dr. BRITTON—Yes, but I do not think I have been prejudiced at all in the matter. I would not feel very much inclined to take credit to myself for changing my views year after year, although anybody should feel free to change his views when he feels he is incorrect. As I said before, I have not changed my views in regard to the advisability of issuing a free journal. I might give a good many reasons for that. I know in the discussions that have taken place, in the public press especially, there has been a good deal of reference to the remarks made in the journal published by the company that did our work; and no matter how much we may disclaim responsibility in connection with those utterances, we cannot throw them from our shoulders completely; that is an utter impossibility, for the reason that part of the contract entered into between the Council and those who did the printing for the Council was that a free journal should be issued and sent to the profession throughout the country, which constituted it at least a quasi-official journal. We have absolutely no control over the utterances of this journal; we do not know who may be the editor of next month's journal, and we do not know what sub-editor may edit the following issue;

we do not know what his views may be; we are not consulted; there is no committee appointed by the Council to be consulted by the editor of the journal, yet we forsooth are held responsible for what that journal may say. In addition to that, I take it, it is an unbusinesslike way to do things, and it is unfair. In having a free journal issued and our business transacted in that way, we do not do as straightforward business men ordinarily do; it is not a straightforward business transaction. We are entering into a sort of speculation, and that certainly is derogatory to this Council. We are also guilty of an act of unfairness towards vested interests, there are other journals published in addition to the journal that may be doing our work, and some of those other journals have worked in the interests of the profession for many, many years. It has been said that the medical journals have not taken sufficient interest in the proceedings of this Council to publish them; but, sir, I know that for many years a full report was given—that is, a report of the minutes—and it was only when the special circumstances arose which made it appear necessary, some years ago, that the profession should know every word that transpired in this Council chamber that a resolution was introduced that a stenographer should be employed and the profession be given full information as to what the Council were doing. We for many years were utterly ignorant and oblivious to the fact that there was occasion for the profession to know all that we did; yet we have blamed those journals, blamed all the journals, because they did not do what we did not think was necessary to be done. It is only a few years ago that we thought it necessary to do this, and that was on the occasion when a radical change was being made in the curriculum, and I think it was Dr. Bergin who introduced the resolution. It is very necessary the profession throughout the country should be in close touch with the Council; everybody will admit that; just as necessary as it is that the public at large should know fully the proceedings that take place in our local Legislature or in the Federal House at Ottawa. There is no necessity for having the proceedings published in any journal, and there is no objection to having them so published; but there certainly is an objection to entering into an agreement with any journal that our proceedings shall be published. Let the journal publish the proceedings if it desires. If the proprietor of any journal thinks it is going to magnify his journal in the eyes of the medical community and render it more interesting, he is at liberty to publish them; but we have no right to allow that to be part of an agreement, because if that be part of the agreement, that means we are paying something for it. It may be represented in a certain way that it costs him more to do the printing than we are paying him for it; he may say that, and he may make it appear so, therefore the publishing of the proceedings in the journal is really a gratuitous matter, and the issuing of a free journal also is gratuitous, in a way; that is, we are paying nothing for it. But I say, so long as those two items form part and parcel of the agreement equitably, we must say we are paying for it in some way. I think myself that perhaps it would be a mistake to refer this to the Printing Committee, unless the Printing Committee will report in a very short time, say to-morrow. If that can be done, I think there would be no great objection to referring the matter to the Printing Committee, because that committee knows pretty well, I think, what the views of the Council are; and when the recommendation comes from the Printing Committee, if there is necessity for further discussion, I suppose it can be discussed then. As there appears to be a diversity of views regarding this matter, and the three or four or five gentlemen who comprise that committee in the space of an hour's session can discuss the matter fully among themselves, therefore I have no objection to referring my motion to the Printing Committee, provided that the Printing Committee be instructed to report to-morrow morning.

Dr. Brock—I claim my right, as mover, of the amendment to the amendment, to reply to Dr. Sangster. No one has claimed in this Council a greater right of full and free discussion before this Council than Dr. Sangster himself. Dr. Sangster used the argument that after this report returns from the Printing Committee if we commence discussing it, it will take a great deal of time, but I think the common sense of this Council will recognize we have discussed it pretty fully at present and any resolution which may be brought in will be very quickly settled. I think it was very bad taste in the first place to place ourselves on record that no matter what the evidence may be before the Printing Committee they should be debarred from bringing in a report which is their opinion, and not only their opinion, but an opinion based on the facts presented. There are certain facts that may be presented to that committee; the possibility is that tenders may be submitted; the journals in this city may be prepared at once to give us full satisfaction with regard to the publication of the discussions in this Council immediately; if so, the Printing Committee will be able to direct us in such a way that we can settle the question immediately. In my amendment to the amendment I have the words "the Finance Committee's report;" that can be amended by leaving out the words "Finance Committee." But I think it is very important for us to know how we stand financially. We were in a very bad position this time last year, but we may be in a much better position this time this year and we may be able to spend a little more money in having our report sent out. I think it would be well that the amendment to the amendment should be carried.

Dr. BRITTON—I would suggest that it should be referred with instructions to the committee to report to-morrow morning or, at all events, as soon as possible.

Dr. WILLIAMS—I want to say a word or two to the amendment to the amendment that is simply passing over the principle for the time being, and it leaves it, after the committee reports back to the Council, to be re-discussed. It is doubling time on the work, when it comes back it will take no less discussion probably than it has taken to-day, and I agree with the remark made by Dr. Sangster that the Council should settle the principle.

Dr. BARRICK—Hear, hear!

Dr. WILLIAMS—And then, when it goes to the committee, the committee simply carry out the details. I think that is the correct principle, and of course, believing that, I shall have to vote against Dr. Brock's amendment, because I believe the Council must settle the principle in any case and the committee only the details. Under these circumstances I stand by my resolution that I think the Printing Committee should have an opportunity to ascertain what the cost will be, and when they have done that and reported to the Council, to say we will either continue that or we won't; but let us settle the principle now.

The President put the amendment to the amendment, and on a vote having been taken declared the amendment to the amendment lost.

The President then put the amendment, and on a vote having been taken declared the amendment lost.

The President then put Dr. Britton's motion, and on a vote having been taken declared the motion lost.

Moved by Dr. SHAW, seconded by Dr. HENRY, That the by-law to amend By-law No. 70 be now read a first time. Carried.

The by-law received its first reading.

Whereas power hath been granted to the Medical Council of the College of Physicians and Surgeons of Ontario to fix the amount to be paid its members and officers, under Sections 12 and 13 of the Ontario Medical Act, be it therefore and it is hereby enacted:

"That Clause 1 of By-law No. 70 be amended by striking out the words "\$12.50 per diem for days necessarily absent from home," and inserting in lieu thereof the words "\$10.00 per diem for each day's actual attendance at the Council during the annual session."

Moved by Dr. SHAW, seconded by Dr. HENRY, That the Council do now go into Committee of the Whole for the purpose of the second reading of the by-law to amend By-law No. 70.

The President read the motion.

Dr. SHAW—It will be within the recollection of several of the members of the Council that last year when this question came up I expressed disapproval of the by-law, as then introduced; and it will also be remembered that when it was brought before the Council it was referred to a large and representative committee of this Council. In now venturing to bring it before your notice, I realize fully that when a question of this kind has been referred to as important a committee as it was referred to last year, composed of some of the oldest and ablest members of the Council, and they having given it their careful consideration, their consideration should not be lightly questioned. I do not propose to make a speech; I can't do that, but I think I will be able to give you some reasons why the by-law should be amended in the lines I have proposed. In the early days of the Council, up to the year 1874, the members of the Council received the small allowance of \$5.00 per diem; in the year 1874 and up to 1880 it was increased to \$8.00 per diem; and in the year 1880, when the Council were becoming possessed of a little more funds, and about the time the site was purchased on which this building stands, the amount was increased to \$10.00 per diem with a reasonable amount for expenses; and you are all aware that about 1887 that amount was again increased by an allowance of \$3.50 for hotel expenses. Now, Mr. President, in discussing this question, it is somewhat interesting to note the practice that prevails in other bodies having powers and duties similar to the College of Physicians and Surgeons of Ontario; and while we should not be guided entirely by the practice that prevails in these bodies, yet the information which we obtain may be of advantage in enabling us to come to a correct decision on a question of this kind. I have taken the trouble to look into the allowances paid to the members of the various medical councils of the Provinces of the Dominion; and beginning with the Province of Manitoba, having duties and powers very similar to our own, I find there the members living in the country, not residing in Winnipeg, are paid \$5.00 per day while in attendance at the Council and an allowance of ten cents per mile one way, and the members residing in Winnipeg are not allowed anything. We heard last year a good deal said about the New Brunswick Act. It was cited in the strongest possible terms as a reason why we should impose the annual dues. Now, if we take up the New Brunswick Medical Council Act we find that their powers and duties are very much the same as our own, and we also find that the members of that Council residing out of Fredericton, where the Council meets, receive no indemnity, no sessional allowance whatever, but simply the mileage travelling to and from their places of

residence. We find the same practice prevailing in Nova Scotia. The members residing out of Halifax, where the Council meetings are held for the transaction of business, receive a mileage allowance with no per diem gratuity. The same thing precisely prevails in Prince Edward Island. I do not know that I should have gone outside of our profession to obtain cases in support of my contention but for the example which was set us last year. But I feel that I may take up the same bodies that were taken up last year in the Council in bringing another matter before us. I refer you to the Pharmaceutical Association, an old established body, very much better off than we are, with assets in round figures of sixty thousand dollars and a debt of only ten thousand dollars, its business carried on by eight or ten members (I am not sure, perhaps it is thirteen), meeting in session twice a year for three or four days each session; and we find they carry on their business very much less expensively than we do, although they are in a much better condition financially. The members of their Council for the first twenty-five years of their Council's existence received only \$3.00 per diem, with an allowance of four cents per mile for travelling expenses each way; and last year the allowance was increased to \$4.00 per diem.

Dr. MOORE—What association is that?

Dr. SHAW—The Pharmaceutical Association.

Dr. MOORE—Surely you don't compare them with doctors?

Dr. SHAW—I didn't compare them with doctors, nor would I have referred to the matter at all if the argument had not been used last year.

Dr. MOORE—When the members of that Council are attending its sessions their shutters are not up on their places of business, but their business goes on as usual.

Dr. SHAW—If it be supposed their time is not so valuable as that of medical men, and if we should not have compared them at all, let me refer to another society, of which the time of its members, I think you will all agree with me, is quite as valuable as the time of members of this Council; I refer to the Benchers who are elected to represent the Law Society of Ontario. The Law Association of Ontario is conducted by an organization called "The Benchers of the Law Society," all elected, with the exception of two or three members. Their powers and duties are quite as onerous as ours, in fact, more so. They have to deal with the standard of matriculation, the period or term of study, the examinations, the amount of fees that shall be paid by students entering their ranks, and they have in addition to our duties a Law School, to which the Benchers have the duty of appointing the professors to give lectures, they have the appointing of instructors; they have care of a part of the library at Osgoode Hall, and care of a portion of Osgoode Hall; and their duties, I understand, are by no means light. As I have said, they are nearly all elected, all with the exception of two or three, and they are composed of some of the most eminent men in the Province of Ontario, and I think that they are quite as representative a body as the Medical Council of the College of Physicians and Surgeons of Ontario; in that body there are perhaps more eminent men than in the Medical Council. Now, what are they paid for their services or for all the work which they do; and I am told the work which many of them do is a very large amount of work? They do not even get any travelling expenses in attending the sittings. They meet from twenty to twenty-five times a year—true, their sessions are comparatively short, and they receive not one cent for all their services in connection with managing the affairs of the Law Society of the Province of Ontario; while here the Medical Council, managing the affairs of the profession in the Province of Ontario, have received what I conceive to be too large an allowance.

Dr. HARRIS—Perhaps we are not all as rich as you are.

Dr. SHAW—I am a millionaire; I will admit that. Still, I am not so rich that I refused to take my indemnity last year. Now, pertinent as these arguments are to my mind why this sessional allowance should be reduced, there are other reasons stronger than these why the amount should be reduced. The most important of these is that our financial condition will not permit of us paying out so much money for the attendance at the Council sessions. I have taken a little trouble to look into the financial position, and I can submit some figures for your consideration—figures which are approximately if not absolutely correct. If you take the past five years of the Council since the imposition of the \$2.00 annual dues, you will find the revenue of the Council from all sources, excluding assessment dues, is \$82,931.72. For the sake of argument, supposing the penal clause had been enforced during this period and every member of the College had paid the annual assessment with the regularity of the seasons—I have excluded in the figure I have just given any assessments that were paid—and if the \$2.00 had been paid by every member, it would have given an additional sum of \$22,500.00, making a total of \$105,431.72 for the past five years. During the same period of time the expenditure has been \$103,220.36, leaving a net gain during the five years of \$2,211.36, or a gain each year of \$442.00. Now, Mr. President, I think we can get more correct information by making the same calculation including the past three years, because I find that during the years 1889-90, 1890-91, 1891-92 and 1892-93 the receipts from fees, and so on, were very much larger than they have been during the last

three years. I had a little difficulty in explaining that away, but in talking the matter over with the Treasurer, he thought possibly it was due to the fact that in the fall of 1892—a little more than three years ago—the increased matriculation standard and the increased period of study came into force, and since that time there has been less received from fees for registration and from students, and for two or three years before that there was a very much larger amount received. To my mind, the last three years gives a more correct statement of our financial condition, and if we take those three years, we find the revenue from all sources, not including assessment dues, is \$46,159.27. If to this, as I did in the former calculation, we add the full assessment dues for these three years of \$2.00 on 2,250 members of the College, it then gives us the amount of thirteen thousand and some odd dollars, making a total revenue, providing that every man had paid his assessment for the last three years, of fifty-nine thousand and some odd dollars; for the same years the total expenditure was \$63,000.00. I am sorry to weary you—

The PRESIDENT—You have gone over your time allowance of fifteen minutes. You have spoken seventeen minutes.

Dr. ROSEBROUGH—I would move that Dr. Shaw be allowed a few minutes' more time to finish his discourse.

The President took the sense of the Council and granted Dr. Shaw leave to conclude.

Dr. SHAW—That would leave a balance on the wrong side of \$3,370.86, or an actual loss each year of the last three years of \$1,126.00. Now, if those figures are correct, and I believe they are correct, we to-day are running behind at the rate of over \$1,000 a year, and I think it is time that we should economize a little more, perhaps, than we did last year; and it is with that end in view I introduce this by-law. I do not want you to infer that I do not think our services are not worth the amount paid us; but I think the financial condition of the Council will not permit us to pay so large an indemnity. In framing the by-law, I had some difficulty in my mind as to the amounts I should place in it. A sessional allowance of a certain amount would perhaps shorten our session to a certain extent; but, on the whole, I have come to the conclusion that if we made it \$10.00 per diem for the actual days in attendance it would remunerate us for our attendance here and prevent any actual loss. It was never intended that we should be paid the full compensation for our time and attendance here; we were never sent here with the expectation we should receive the full remuneration. I look upon the position of a member of this Council as largely an honorary position, and there are plenty of men quite as good as we are who would be quite willing to come here and look after the affairs of the profession in Ontario for a less amount of money; and apart from that, I think the finances of the Council will not permit of our paying out so much money. I am sorry to detain you so long, and yet there are some things more I would like to have said.

Dr. ARMOUR—I approve of Dr. Shaw's by-law so far as it goes, but the chief objection I have to it is that it does not go far enough. I think there are many reasons why the members of this Council at the present time should forego their sessional indemnity altogether—

Dr. McLAUGHLIN—Hear, hear!

Dr. ARMOUR—In the first place it appears to me that it would be adding greatly to our dignity, as members of this Council, if we were willing to forego it in consideration of the honor the profession has done us in sending us here to represent them. Emoluments of this kind are very much the outgrowth of this continent; there are very few such in European countries, and where they exist they are very small. In the great countries of Germany and Austria their parliamentary representatives receive what would amount in our currency to from about \$1.50 to \$3.00 per day; in France those emoluments vary from \$3.00 to \$5.00; in the Imperial Parliament of Great Britain and Ireland, the peer of all the representative institutions the world has known, such services are given gratuitously. In the United States, which this country and this Council to a considerable extent have copied, the representatives of the people are paid very liberally, but it is not observable that this has conduced to the dignity or the usefulness of these bodies, perhaps the reverse might be said. When you look at this proposal to wipe out our sessional allowance altogether from the view of our present financial stress, which Dr. Shaw has very properly referred to, it presents many prepossessing features. It is a strange coincidence that the cost of carrying this building during the past years amounts to about the same figure as was paid to this Council in indemnity for the last session. It cannot but be a reasonable proposition to such members as are now with us who were responsible for engaging in the enterprise of the construction and maintenance of this building as well as those who are in favor of still carrying it, for I presume they would be willing to forego their sessional allowance that they may indulge in this luxury. The retention of this building gives no satisfaction to anyone save those members here who insist on retaining it. A thorough canvass of the profession shows that it is not desired by the profession and the majority of the profession refuse to say a tax for it. Instead of resorting to penal coercion to collect a tax from an unwilling

profession, why not meet this liability in this way? It may be objected that those who have been and are willing to relieve the Council of its costly maintenance by its prompt sale should not be asked to make the sacrifice in favor of its maintenance; but it may be that those members constitute the most generous part of the Council, for I believe every one of them will vote, not only for this by-law, but for a by-law to wipe out the sessional indemnity altogether in order that penal coercion Acts and the consequent calamitous effects may be avoided and peace and concord reign among us. I will not detain you longer, but I hope when it comes to a test that this by-law or one going even a very much further will be carried.

On motion of Dr. Williams, seconded by Dr. Brock, the Council adjourned to meet at 2 o'clock p.m.

AFTERNOON SESSION.

The Council met at 2 p.m. in accordance with the motion of 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, Brock, Campbell, Dickson, Emory, Fowler, Geikie, Graham, Henderson, Henry, Logan, Luton, Moore, Moorhouse, McLaughlin, Reddick, Rogers, Sangster, Shaw, Thorburn, Thornton.

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

NOTICES OF MOTION.

By Dr. GEIKIE—That it be an instruction to the Educational Committee that the Annual Announcement of the Council shall be got ready and mailed to the members of the profession in Ontario not later than August 1st of each year.

COMMUNICATIONS, PETITIONS, ETC.

The Registrar, Dr. Pyne, read several communications, which were referred to the committees.

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

Moved by Dr. GEIKIE, That the by-law amending By-law No. 39, page 1. be amended by adding after the word "election" on the third line from the top, the words "and in every case each member present shall be furnished with a voting paper for such election."

Dr. GEIKIE—My object in moving that motion is very, very simple. I hold that ballot papers or voting papers should certainly be furnished and a regular ballot gone through with in the election of our officers. It will not take more than two or three minutes to do this, and then no one can find fault with the method of our election; and if the future President has the vote of every man so much the better for him. I have not brought this motion to cause any discussion, because it is so simple and plain that I do not think there can be two views on the subject.

Dr. WILLIAMS—I have a notice of motion bearing upon the amendment of the same clause in the by-law, and I have also a by-law prepared for the purpose of such amendment. I think it will be well to deal with both Dr. Geikie's motion and mine at the same time, and that it would save time to do so.

Dr. CAMPBELL—It is evident there are going to be two or three motions in regard to this matter, and it is possible there may be some others. It seems to me the proper course is to refer them to the Committee on Rules and Regulations, from whom this by-law originally emanated, and let that committee consider it. I therefore move that it be referred to the Committee on Rules and Regulations.

Dr. GEIKIE—On the understanding that it does not mean its death and burial.

Dr. BROCK—I will second Dr. Campbell's motion to refer it to the Committee on Rules and Regulations.

Dr. McLAUGHLIN—It does seem to me in a Council like this, where we are pressed for time, that we should not be asked to undertake any work of supererogation, and if there ever was a work of that kind it seems to me it is this. If you can get a few words of the Queen's English that will indicate more clearly what we are to do than the words we have in our by-law I would like to see them. The third clause on page 1. reads as follows: "The President and Vice-President shall be elected from among the members of the Council, after nomination, by ballot, and a majority of the votes of the members present shall be necessary to an election." How can you put in the English language better and more clearly that in electing the President and Vice-President of this Council they shall be balloted for, and that a majority of the ballots and votes of the members present shall be necessary for election?

Dr. GEIKIE—We saw yesterday somebody didn't understand it.

Dr. DICKSON—The only advantage I see in the amendment to the by-law proposed by Dr. Geikie is that the members shall not be required to furnish their own paper.

Dr. McLAUGHLIN—Looking a little further on in the book at Section 14 I see, "A motion must be put in writing and seconded before it is stated by the President, and then shall be disposed of only by a vote of the Council, unless the mover, by permission of the Council, withdraws it. Every member present shall vote unless excused by the Council." I think the previous clause is perfectly clear that a ballot is to be taken, and that the majority of those present must vote, and that for election a candidate must receive the votes of the majority of those present. If a by-law was to be brought in, a sort of Remedial Bill, to relieve us of our difficulty, we not having a President, in my judgment, and by that remedial bill or by-law you would clothe our friend in the chair with authority to act as President, I would be very glad to harmonize with a movement of that kind, but, as I understand Clause 3, the language seems to be perfectly clear.

Dr. HARRIS—I presume those remarks are directed against me particularly. You, Mr. President, are charged with not being properly elected to the presidency of this Council. If you are not properly elected now, then I presume that I was not properly elected last year; and I presume, if the last speaker goes on, that we will find that we have had no President for years, simply because we did not comply with his reading of that clause. I do not agree with him. I maintain that yesterday we conducted our election strictly according to the method laid down in our rules and regulations when you were elected to the presidency of this Council. A ballot was taken, though Dr. McLaughlin said no ballot was taken. If there had been two members nominated for the office then there should be a ballot taken all round, as was done in the case of the election of Dr. Thorburn to the office of Vice-President. But we never had yet a contest for the presidency, never had yet to pass ballots around to elect a member to that office; it has never been required. The method followed yesterday has obtained in this Council over and over again, and I maintain that the method is perfectly right. If Dr. McLaughlin wished to object yesterday when a motion was put that Dr. Bray cast a ballot, why did he not get up and nominate some other member? No, he would not do that, he just simply arose to obstruct—perhaps it is unparliamentary to say that he rose to obstruct the business, but it nevertheless was obstructing business all the same, and he should not have done it.

Dr. SANGSTER—I rise to a point of order. I object to any gentleman using the word "obstruct" in a case like that. Dr. McLaughlin got up in order to make the business conducted in this Council conform to the method in which the business of similar bodies is conducted—

The PRESIDENT—What is your point of order?

Dr. SANGSTER—My point of order is, it is not in order for any member to get up and charge another member with obstruction.

The PRESIDENT—Dr. Sangster's point of order is well taken, and I think Dr. Harris will withdraw the objectionable word.

Dr. HARRIS—I do not think Dr. McLaughlin is an obstructionist, and I do not think I should have used that word, and I will withdraw it, for while it did rather annoy me at the time, I do not now think he did it intentionally at all. However, I do think that our course yesterday was perfectly right, that our President is properly elected to the chair, and that my ruling yesterday also was perfectly right; and I also want to say that I do not think our by-law needs amending at all.

Dr. SANGSTER—Mr. President, I would like to ask a question through you of Dr. Harris, just in order to put before you what is my view upon the matter. Supposing things had been so that I had attended that caucus the night before last, and I was apparently cordially *en rapport* with the other members there present, and I agreed with those present that Dr. Rogers should be in that chair, and supposing that I, having in my heart animus against you, got to my feet and moved that you should be President, as Dr. Bray did, and then, in accordance with what is said to be the usage of this Council you had deputed me to cast a ballot; and supposing that I had cast that ballot against the nominee, as I presume I would have a right to do, because you have no right to know positively how I am going to cast a ballot, what would be your position under those circumstances?

Dr. HARRIS—Do you ask me the question?

Dr. SANGSTER—I am speaking to the President.

The PRESIDENT—You ask me the question, and I suppose I will have to answer it. The answer must be this. You have one nominee, and if Dr. Bray in this case had cast a ballot for a person who was not nominated, that would not be an election.

Dr. McLAUGHLIN—Supposing he had marked "nay" instead of "yea"?

The PRESIDENT—I say in that case if Dr. Bray had cast a ballot for any other person than the one nominated it would not have been a ballot, and there would be no election; the ballot would have to be cast over again. That is the answer to that question.

Dr. WILLIAMS—The change I wish to make in the clause is a little different one to the one taken up, and I think would settle the point we are dealing with effectually, while I am getting at it for a different purpose. The amendment I want to put in is to strike out the words "after nomination" and put in "without nomination;" that would be my amendment. If "without nomination" were put in there, it would make it absolutely clear that a ballot must be taken all round in every case. I think it would have another very material advantage and that is, that the man who wished to be President would not be put in the humiliating position of being obliged to ask somebody to nominate and second him. By my amendment, if you put in the words "without nomination," it allows every member of the Council to vote for just whosoever they please, and whoever gets the majority of votes comes to the front. That, I believe, would be the correct solution of the case, and would be the proper amendment. I think if we went into Committee of the Whole on Dr. Geikie's amendment and mine together, we would effectually settle the whole matter in a few minutes.

Dr. GEIKIE—My reason for proposing my amendment is, there is a question in my mind that I cannot answer now satisfactorily, it is this: Can any one member of the Council casting a ballot be regarded as the Council giving a ballot? I do not think so.

Dr. HARRIS—I think it can be done in that way. If the Council by resolution directs a member of this Council to cast a ballot for the Council, I think that is the Council giving a full ballot.

Dr. MOORE—When we are at this ballot business I think we had better fix it so as to have no more trouble. What is the object of a ballot? Is the object to have a secret ballot? If we use a ballot such as we have now, we might just as well have no secret vote, but hold up our hands in the ordinary way. I voted against this ballot years ago, and had it staved off for one year, and I think now if we are going to have a secret ballot, we should have a ballot box and vote with white or black balls. What is the use of writing a name on a piece of paper and sending it up to your scrutineers or your Registrar? They know how you are voting, if they know your handwriting. Let us have a ballot box and then we can vote secretly if we want to.

Dr. McLAUGHLIN—The motion of Dr. Williams covers different grounds from those I anticipated it was going to cover, and it will meet the difficulty. It seems to me that if we discussed this further we would still have different views; the late President would still think he is right, and I would think I am. I think we had better adopt Dr. Williams' motion and have this discussion ended.

Dr. CAMPBELL—I am not satisfied with either the proposition of Dr. Geikie or that of Dr. Williams. I would like to have our by-law amended in this way, "Provided that where only one candidate is nominated, he shall be declared to be elected by acclamation." That is the way I would like to have it. There are two propositions already in, and you now have mine, and I think for that reason it would be well to refer them to the Committee on Rules and Regulations and let them report, when we can adopt their recommendation or vote it down.

Dr. THORBURN—I quite approve of the action of the President, Dr. Harris, yesterday. I have for a number of years attended meetings of public institutions where votes have been taken for the election of the presiding officer, sometimes where there have been hard expressions used and where there has been strong opposition; but invariably, where only one candidate was nominated or proposed, it was held to be in the power of the meeting to appoint some person to cast a single ballot. It was quite in order to nominate another person, and then a vote would be required. I know that the mode adopted yesterday is the universal usage, and I am almost surprised that Dr. McLaughlin, a man who is well posted in these things, should object to it; for, while he may prefer his own view, he knows that this is the way it is done.

Dr. SANGSTER—Where everybody wishes it.

Dr. THORBURN—There might be strong objection to the candidate, but these persons objecting had not proposed another name, therefore a single ballot was considered quite sufficient. I do not like the idea Dr. Williams suggests, that we should mix up and every man put down a name without some consideration; we might name ten or fifteen men, and prolong the election or nomination for an indefinite period. I think the suggestion of Dr. Campbell is the correct one, but I do not see any necessity of altering our method of casting a ballot at all.

Dr. GEIKIE—You would have no caucus?

Dr. THORBURN—That is universally the case, I think.

Dr. REDDICK—The rules and regulations provide that there will be a nomination, and they also say very plainly that the President and Vice-President shall be elected by the votes of the majority of those present. Suppose that some other person had got a motion in ahead of the motion that Dr. Bray should cast the ballot, that some person else cast that ballot, and suppose that person cast that ballot against what was generally understood to be the

majority of the Council, what would be the result? I have not the least objection to the election, but I wish to have this cause of difficulty removed, because it looks to me like child's play. I have never seen it in any societies where they pretended to do things according to strict rule or according to anything like rational rule. While I have not the least doubt but that the wish of the great majority of the Council would be sustained, I do think there should be some provision made that if only one candidate is nominated he should be the elected candidate.

Dr. THORNTON—I think the views expressed correspond in a great measure with the experience of the majority of the Council, and I quite agree that we should have a ballot in every case. One of the reasons I had intended to mention has been mentioned by Dr. Reddick, namely, as to the party that is to cast the ballot; a difficulty might arise as to the person who should cast the ballot for the Council. With regard to the experience of the members of the Council, to get us all of one mind, we would require to make a change, and the representatives of the schools on this Council be sent out into the territories and the rest be appointed, and then we would be all on the same footing. Some of the members of the Council may think objection is taken to this merely for the sake of taking objection. No such thing. When we go back to our constituents, they say, "You voted so-and-so." We reply, "No, that was not my idea at all." "But," they answer, "the thing was unanimous; there was only one way for you to vote." Then, in this point Dr. Reddick mentions the whole matter hinges on the particular individual that is appointed or voted by the Council to cast the ballot. Those of us that represent territories—I am not casting any reflection on anyone—have a lot of questions to answer and a lot of questions to get round, and sometimes all the ingenuity that we can make use of is required to get around them, and I do not care to have them covered up. I think in every case we should follow the plain reading of our rule, and that the President and Vice-President should be elected by ballot and by a majority of the members present, and that we should take a ballot in every case.

Dr. BROCK—As seconder of Dr. Campbell's motion, I wish to say that I think it would be well for us, as we ask, to refer this matter to the Committee on Rules and Regulations, for the simple reason that if there are any evils connected with the election of the officers, if the caucus system is dangerous to the independent action of the members of this Council, it would be well to have a report from the Rules and Regulations Committee, considering this question and providing some means of getting rid of that evil.

The President put Dr. Campbell's amendment to refer to the Committee on Rules and Regulations, and on a vote having been taken declared the amendment carried. Dr. Geikie's motion was also referred to the Committee on Rules and Regulations.

Moved by Dr. WILLIAMS, seconded by Dr. HARRIS, That the by-law to amend the third clause of By-law No. 39 be now read a first time.

The President read the motion.

Dr. WILLIAMS—This is dealing with exactly the same clause but in a different manner to that proposed by Dr. Geikie.

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

Dr. WILLIAMS read the by-law a first time.

Whereas power hath been granted to the Medical Council of the College of Physicians and Surgeons of Ontario to make by-laws establishing rules and regulations to govern the conduct and proceedings of meetings of the said Council,

And whereas By-law No. 39 makes provision for this purpose,

And whereas it is expedient that Section 3 of the said by-law be amended,

Therefore be it enacted, and it is hereby enacted, that Clause 3 be amended and made to read as follows:

"The President and Vice-President shall be elected from among the members of the Council without nomination, by ballot, and a majority of the votes of the members present shall be necessary to an election; provided that in case of a tie the election shall be decided by the member representing the greatest number of registered practitioners."

Moved by Dr. WILLIAMS, seconded by Dr. SHAW. That the Council do now go into Committee of the Whole on the by-law to amend By-law No. 39.

Moved in amendment by Dr. CAMPBELL, seconded by Dr. BRITTON, That instead of the Council going into Committee of the Whole, the by-law be referred to the Committee on Rules and Regulations.

Dr. HARRIS—I think, inasmuch as Dr. Geikie's motion has gone to the Rules and Regulations Committee, perhaps Dr. Williams might let his by-law also go to that committee, to be dealt with and reported on by them. I agree with Dr. Campbell that that committee is the proper place for it.

Dr. ARMOUR—I wish to say that I approve of Dr. Williams' by-law. We are all conversant with this matter, and are as well prepared to vote on it now as we would be if it were threshed out in committee for the next week. For that reason I disapprove of the amendment of Dr. Campbell, and I hope that Dr. Williams' by-law will be referred to Committee of the Whole and passed on by them, and have done with it.

The President put Dr. Campbell's amendment, and on a vote having been taken declared it carried.

Moved by Dr. CAMPBELL, seconded by Dr. WILLIAMS, That it is expedient to amend the by-law levying the assessment by relieving from its operation members of the College of Physicians and Surgeons of Ontario resident in this Province who are not engaged in the practice of medicine, and those members not resident in the Province; and that the Solicitor of the Council be instructed to prepare the necessary amendment.

The President read the motion.

Dr. CAMPBELL—Mr. President and Gentlemen, you will notice I have put this in the form of a simple resolution in order that the opinion of the Council might be obtained upon the matter involved in the question, for the reason that if it is approved it should go to the Solicitor to have the amendments properly prepared, so that no person may take undue advantage of the provisions of the by-law, while on the other hand, if the sense of the Council is against it, the matter will of course drop, and there will be no expense in preparing the proposed amendment to our by-law. It seems to me that the proposition I have made is one that would commend itself to the sense of fairness and justice of the members of the Council. As I understand, the object of having an assessment at all is based on the theory that certain expenses have necessarily to be incurred in the carrying out of the Medical Act, and those people who receive the benefits of that Act are assessed a certain amount to pay. Whether that is a sound theory or not—whether it is right and proper to collect an assessment or not—is a matter not necessarily involved in this proposition. The ground I am taking is that if an assessment be collected, then it does seem to me there are certain classes of persons who ought to be relieved from the operations of the law assessing them. There are those who have retired from the practice of medicine, some few who have gone into other occupations, some who from chronic disease or from the misfortunes of old age are incapacitated from active work, and who are not practising medicine themselves (though resident in the Province), and are not receiving the benefits of the Medical Act. They are not interfering with anybody else in the practice of medicine. Then there are also those who have removed from the Province, either for a time or permanently, and it does seem advisable that the parties included in these three classes should not be cut off the Register, but that they should remain there and be relieved from the payment of assessments; that seems to me only a matter of justice. I will admit there is another class I would like to see brought under the same law—some, possibly not many, I hope not many—who have become old, not incapacitated for work, but who have found themselves superseded in the race for business by other more energetic and possibly more competent men, and they are unable to make a living, the little amount they do is a trifle. These men appeal to our sympathies; they are good men, but men morally capable but physically incapable of doing a certain amount of work. I would like to have seen certain individuals of that class, of whom I am told there are some—for I have no personal acquaintance with any, but I believe there are some few men in the Province of that class—relieved from this assessment, for I believe that upon them the imposition of this assessment really comes as a burden. I understand, however, from the opinion obtained from the Solicitor, that the Council have no power to relieve persons of that class, and that men who are actually practising in the Province must pay the assessment—that if any pay, all must pay. But we have power to relieve the classes spoken of in my motion, and I presume there will not be any objection on the part of the members to offering them this small relief.

Dr. SANGSTER—I concur in what has been said by the last speaker, but I think his resolution scarcely goes far enough. There is a class of practitioners, I do not think a large class, who have been out of the Province for a certain number of years, and who have returned to it, and by the retroaction of our assessment they are held liable for their whole arrearage. In one particular case that I know of, not in my own constituency but in the far east, a man who was out of the Province for fifteen years, returned, and he thinks it a great hardship that during that fifteen years, while he had no benefits from this Council, received no Announcements, no documents, no privileges of any kind, he should now be held liable for the fifteen years' assessment. I think that that is a class that may as well and quite as properly be considered as those that have been named.

Dr. WILLIAMS—Mr. President, in seconding this motion, I beg to say that it is one that fully harmonizes with the views that I have entertained for some time, but I did not believe that the Council had power by a by-law to effect this purpose. I was under the impression that it could only be brought about by getting an amendment to our Medical Act giving the Council optional power by which they could deal with cases of this kind; but I am informed the Solicitor states we can by by-law deal with these cases. If that is correct, and I have no reason to doubt it, then I fully harmonize with what Dr. Campbell has said. There is a class of practitioners, too, on which Dr. Campbell has not laid much stress—has only spoken incidentally of, and I think it is because of his kind feeling that he did not wish to mention them—I mean the class who are incapacitated by physical infirmity, and there are a few, unfor-

unately, of that kind, though there are none in my own division, that I have felt exceedingly sorry for. I think of one practitioner who lost his eyesight and is now unable to practice, and is left in rather straitened circumstances. I think that if the Council have the power, as we are advised we have, to adopt a by-law of that kind, it is only right and fair that we should do so. With reference to the class that Dr. Sangster refers to (those that have returned after being absent from the country for some time) it is, in a measure, though not entirely, covered by one of the classes mentioned by Dr. Campbell, that is the class of persons absent from the country; they should not be expected to pay, and should not be stricken from the rolls because of non-payment while absent. Of course, in order to reach the class Dr. Sangster refers to we would have to make the clause retroactive, so that those who have returned after being absent for some time should not be called upon to pay the full assessment. I have no doubt the details can be worked out so that these different classes can be fully and effectually covered.

Dr. SRAW—I was just going to rise before Dr. Sangster did to speak of the class to which he alluded. I know from personal knowledge that there are some practitioners resident in Ontario who are in the position he states. They have lived out of the Province of Ontario and have been members of other bodies, in which they have had to pay an annual fee; and they think it is rather unfair that, while living in another Province or another country, after their return to Ontario after an absence of fifteen or twenty years, they should be obliged to pay the Council dues during the interval. I quite endorse Dr. Sangster's remarks on that class of practitioners, and I sympathize fully with Dr. Campbell's motion in regard to the others.

Dr. BRAY—Mr. President and gentlemen, I quite agree with Dr. Campbell's motion, though he rather forestalled me. I was going to bring in a motion of a similar nature. I think all the classes mentioned deserve consideration, including the class Dr. Sangster named, and I think the by-law should be made retroactive to cover these. There is another class of practitioners who live out of the Province that we must make a discrimination against. For instance there are registered practitioners who have large practices in Detroit and Buffalo and all along the border who come over here and practice occasionally; that class should be made come over here and pay their fees. I know of my own knowledge there are a good many registered practitioners living in Detroit, who are registered here, who often come over and practice here. I think you will all agree with me that those persons should not be included in that class that has been mentioned to-day. That matter came up before the Lambton Medical Association two weeks ago, and I promised that Association to enquire into the matter, but Dr. Campbell forestalled me, and I am very glad it was he who did, for he is much more capable than I am of bringing in a by-law of that kind, and I want to support him, because it is a matter that should be dealt with.

Dr. MOORE—I heartily agree with all that has fallen from the lips of Dr. Williams and Dr. Campbell and the other speakers; but I want to refer to a class spoken of by Dr. Sangster: those who go to the country to the south of us and come back again. I want to know, for instance, in the case of a man who goes over there and stays for six months and comes back again, are we only going to charge him \$1.00, or shall we charge him \$2.00? He may go there and stay for a year, and then claim to be exempt for that year. I think we should put some limit on it, because in the case of an absence of ten years or five years it would seem a hardship; but if they are to be exempt if only absent for one year or so, it would entail a great deal of work being done by our Registrar. I think that our by-law should state the time that practitioners must be out of the country before this exemption will apply.

Dr. ARMOUR—I fully agree with the object of this by-law, but it appears to me it might be accomplished in another and a better way. Dr. Moore and Dr. Bray have raised objections that may arise out of any general by-law we might pass which would have a great many provisions and conditions in it; I think it would be better, and I know it is usually customary in cases of this kind to move to remit the tax, that the members of the profession in indigent circumstances, or members who have been living outside of the Province, may ask for a remission of the tax when the Council is in session; then the Council may pass a resolution to remit those taxes from year to year. I believe the object would be better accomplished in that way.

Dr. McLAUGHLIN—Would it not be better to leave all these minor details for consideration when the by-law comes in.

Dr. CAMPBELL—I have a letter from the Solicitor addressed to Dr. Harris. I submitted this question to Dr. Harris and I presume he did not wish to take the responsibility of answering that himself, so he submitted it to Mr. Osler, in order that we might know the exact power of the Council. I will read the letter.

William T. Harris, Esq., M.D., Brantford.

MY DEAR DR. HARRIS,—I have your letter of 30th ult., and have read Dr. Campbell's letter and the questions propounded by him.

Having regard to the provisions of 56 Vic., Cap. 27. Sec. 6, empowering the Council to modify Sec. 41a of the Ontario Medical Act, I am of opinion that it is in their power to pass a by-law providing for the remission of fees in the case of a practitioner who is absent from the Province, or who has entirely ceased to practice during one year; and further providing under certain conditions that Sub-sec. 5 of Sec. 41a shall not apply to such cases.

I am of opinion that the Council cannot make distinctions in individual cases, that is to say, that it is not within the power of the Council to determine that by reason of partial disability, or other circumstances, that it is reasonable that a member of the Council should be relieved from the operation of the section in question.

The result is, in my opinion, that if a practitioner ceases entirely to practice in the Province, he may be relieved of payment of fees and of penalties for not taking out certificate; but if he practices he must take out certificate and pay the fees.

Yours truly,
B. B. OSLER.

TORONTO, June 2nd, 1896.

The PRESIDENT—That places the matter before the Council in a very clear light.

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

Moved by Dr. HANLY, seconded by Dr. EMORY, That the opinion of our Solicitor be obtained regarding the possibility and probability of removing malpractice cases from juries and placing the decision in the hands of Judges; also, how security for costs can best be secured.

The President read the motion.

Dr. HANLY—This is a subject, I think, on which we will not differ much and on which we may be somewhat unanimous, and I also think it is of a good deal of importance, especially to those unfortunate persons of our membership who have been in that boat, and I thoroughly sympathize with them. It is well known to you that juries give verdicts often in direct contradiction to the facts. I am not acquainted with the procedure, but I think there are some classes of cases in our country that are now not placed before juries, but that the Judges are empowered to decide. What called it to my attention was this: In my own neighborhood there is a fellow practitioner who was prosecuted for failure of a result in the case of a broken thigh-bone, and that case has been three times before the Assizes, and is now, I think, under appeal, and the expense to the practitioner has almost ruined him. I do not wish to say much about this question, nor to occupy much time, but I want to open the subject and see if anything is to be done, and get an opinion, and, if possible, make a further movement in the matter to try to secure some satisfactory result.

Dr. WILLIAMS—This would have to be done by an Act of the Legislature. The point as to obtaining security for costs has been brought up before. When some of the amendments to the Medical Act were obtained, application was made to the Government to have that matter covered by the amendments to the Act. But the Government objected in the strongest terms; they said that an Act of that kind would appear like legislation in favor of the class, that is, in favor of the doctors; and that an action for damages in that way must stand upon the same basis as every other action for damages, and that there could be no special Act put through and justified upon that basis. I fear nothing can be accomplished in that way.

Dr. MOORE—I think there is no doubt whatever about that. As Dr. Williams has stated, this matter was brought before the Legislature and the Hon. C. F. Fraser, now dead, took very strong grounds against it because it would be class legislation. It is true, I believe, that at the last session of the local Legislature some cases have been taken out of the hands of juries, such as cases brought against corporations, which I believe are now tried by Judges. I am afraid we would not be able to accomplish anything of that kind even if we went before the Legislature; when we were before them, very strong opinions were expressed by the Government.

Dr. McLAUGHLIN—I think the introduction of a bill into the House for the purpose of accomplishing that would secure its rejection; I think it would be quite impracticable to succeed on that line. I think a great many of our practitioners are at fault in not thoroughly guarding themselves against actions, though I admit it is not always possible to do so. I have set many a fracture, and I think the longer I live the better I am able to treat them, but the longer I live the more I am disposed to call in two or three practitioners to have their testimony to the correctness of my treatment and to assume responsibility. I think if practitioners, through the country especially, where little, miserable jealousies prevail, were to live and work in harmony together and cast aside those petty jealousies—not to combine against the public, because if bad work is done the man ought to suffer, but we ought to guard ourselves against people who are not seeking what is just but what is often very unjust. I have no doubt the case referred to by my friend Dr. Hanly was very well treated, but I think the solution of the difficulty is for the medical men of the country to

guard themselves by having consultations, and in that way they will not be so liable to have actions brought against them.

Dr. GRAHAM—I would move that the motion of Dr. Hanly be referred to the Legislation Committee when one is formed.

Dr. HENRY—Before that motion is put I wish to know what the question is for; is it to get the opinion of counsel?

Dr. HANLY—That is what is asked for.

Dr. HENRY—If what you ask for cannot be got without legislation it would be better to refer it to the committee; we cannot get an opinion from Mr. Osler without paying \$15.00 or \$20.00 for that opinion.

Dr. HANLY—The question as to security for costs has not been touched on now.

Dr. McLAUGHLIN—That question has been up and has been discussed in the newspapers and by others, and they have not been able to effect anything in respect to that.

Dr. CAMPBELL—I think if we refer the matter to the Solicitor for advice it will show that the Council realizes that injustice has been done, and that we are anxious to do all we can. Then if the Solicitor informs us that we cannot do anything, there is no harm done, and we have shown that we are anxious to relieve practitioners who are suffering in this matter.

Dr. HANLY—I bring this forward at the solicitation of the Medical Association of my district. I am satisfied that the question should be referred to the Legislation Committee for them to take such action as may be deemed proper.

Referred to the Legislation Committee.

The PRESIDENT—Dr. Geikie gave notice of motion to have his name taken off the Committee on Complaints.

Dr. GEIKIE—That is not a motion; it is simply a request that my name be struck off the Committee on Complaints, for I shall not attend the meetings of that committee.

ENQUIRIES.

Dr. SANGSTER—I desire to know whether any member of this Council received during, or subsequent to, our last meeting, opportunities of revising and correcting the speeches that were delivered by him in this Council chamber last year.

The PRESIDENT—I am not aware that any did.

Dr. SANGSTER—Did you yourself have any opportunity of revising?

The PRESIDENT—None whatever.

Dr. SANGSTER—And I understand no gentleman present had any such opportunity?

The PRESIDENT—I can't say as to that; that would be a personal matter between him and Dr. Orr.

Dr. SANGSTER—I suppose I may take silence to be a negative answer to my question.

Dr. HARRIS—Perhaps I, as retiring President, might be expected to answer that. So far as I am personally concerned I had no opportunity to do anything of that kind, and did not do anything of that kind. Does Dr. Sangster mean statements taken down by the stenographer and published in the report?

Dr. SANGSTER—Yes; I mean opportunities to correct the speeches made.

Dr. HARRIS—So far as I am aware I do not know of a single case where any member of the Council had an opportunity to revise his speeches. As Dr. Sangster will remember he asked me the question, Had the Printing Committee or any one else the power to instruct the stenographer to cut out or change anything, and I answered that no one had that power but the Council. I am not aware of any single case where anyone went to the stenographer and asked him to make any changes, and I am sure, as President of the Council, that I did not do so.

REPORTS OF STANDING AND SPECIAL COMMITTEES.

Dr. HARRIS presented and read the report of the Board of Examiners.

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

GENTLEMEN.—I beg leave to report that as President of the Medical Council and chairman of the Board of Examiners, I inspected the Examiners' and Registrar's schedules, and I therefore report on the result of the professional examinations held in Toronto in September, 1895, and in Toronto and Kingston in April, 1896.

For the Primary examination in September, 1895, 38 candidates presented themselves, of whom 19 passed and 19 failed, the percentage being 50 per cent.

For the Final examination in September, 37 candidates presented themselves, of whom 23 passed and 14 failed, the percentage being 62 per cent.

In April, 1896, 133 candidates presented themselves for the Primary examination, of whom 79 passed and 54 failed, the percentage being 60 per cent. passing.

For the Final examination 123 candidates presented themselves ; of this number 88 passed and 35 failed. 72 per cent. passing.

The number of each candidate with the number of marks obtained on each subject will be found in the schedule of the Registrar, the number of marks in each case being taken from the schedule of the Examiners. The Registrar's schedule so prepared has been inspected by me and certified correct.

The examinations were as practical as possible. In Anatomy, wet and dry preparations were used of the whole human body, the viscera, bones and models.

In Pathology, Histology and Therapeutics, microscopic and gross specimens were used.

In Chemistry, practical work was required in the laboratory.

In Medicine and Surgery, clinical examinations were held in the General Hospitals in Toronto and Kingston.

In Midwifery, Medical and Surgical Anatomy, the subject, models and instruments were used.

The members of the Board of Examiners have been requested to submit any recommendations or suggestions they might be disposed to make in connection with the examinations, and no response has been received.

All of which is respectfully submitted.

WILLIAM T. HARRIS, Chairman Board of Examiners.

June 9th, 1896.

Dr. SANGSTER—I would ask Dr. Harris if the Examiners in marking the papers put the value of each answer in red chalk on the margin, thereby fulfilling the requirement made by the Committee on Education at the last meeting.

Dr. HARRIS—I have referred the matter to the Registrar and he informs me that the Examiners marked according to instructions, giving the number of marks in red chalk in every instance, and that they were furnished with pencils specially for that purpose.

Dr. SANGSTER—Is there any means by which the Registrar could, without any serious labor, give us an intimation of how many were registered during the year outside of those who were registered through the examinations.

The REGISTRAR—There has not been one put on the Register this year except those that took the examinations.

Moved by Dr. HARRIS, seconded by Dr. BRITTON, That the report of the chairman of the Board of Examiners be referred to the Committee on Education. Carried.

UNFINISHED BUSINESS FROM PREVIOUS MEETINGS.

The PRESIDENT—Dr. Shaw's motion may now come up.

Moved by Dr. SHAW, seconded by Dr. HENRY, That the Council do now go into Committee of the Whole for the purpose of reading a second time the by-law to amend By-law No. 70.

Dr. GEKIE—Is it in order to move an amendment?

Dr. ARMOUR—A motion to go into committee can not be amended.

The PRESIDENT—I will rule that under our rules a motion to amend can be made.

Dr. GEKIE—I move in amendment that the by-law settling the allowance be so changed as to allow nothing to members of this Council, wherever they live or wherever they come from, in the shape of expenses or anything else ; that they shall do the work absolutely gratuitously.

The PRESIDENT—That is not an amendment, and I cannot accept it.

Dr. GEKIE—I think it will increase the dignity of the Council before the public.

The PRESIDENT—That is not an amendment ; the motion is that the Council go into Committee of the Whole.

Dr. GEKIE—I would not have done it, but you gave me permission ; that is my motion and I will move it at the proper time.

Dr. WILLIAMS—This is a motion to go into Committee of the Whole. There are two ways of dealing with it ; you may vote it down here, or you may vote to go into Committee of the Whole and then amend as the Council decides ; but if you are wholly and totally opposed to it the way is to vote it down now ; if not, go into Committee of the Whole, when you may amend it as you see fit.

The President put the motion and called for a vote.

Dr. McLAUGHLIN—Do I understand that if this is negatived it puts an end to this motion?

The PRESIDENT—Certainly.

Dr. McLAUGHLIN—In that case I wish to ask liberty to say a few words before you submit the motion. When corporate bodies or private individuals find their financial condition is not very safe, if they are wise and hope to live through any financial depression, they must begin to curtail expenses. The Council are going back year by year, they are not

going forward, and if we are actuated by wisdom in my judgment we ought to do something to cut down this enormous increase in expenses in connection with the sessional indemnity or payment of the members of this Council, which this last year has almost doubled anything that existed in previous years. I think, Mr. President, we would not act wisely if we go on during this session and take out of the funds of this Council, if the money is to be found there, another \$4,189.49, or possibly more. I do not harmonize with the by-law; I agree with Dr. Geikie personally, and I want to be understood as meaning exactly what I say. There are men possibly who may say—I do not know that there may be found any in this Council, but possibly some outside—that this is simply claptrap, and that I am making this proposition for the purpose of securing popularity in my division or in the country. That you may understand that that is not true I want to tell this Council that I have no intention of being a candidate for re-election. I was brought out contrary to my wishes by the unanimous voice of the people of my division, so unanimous that when a gentleman entered the field to oppose me—the returning officer appointed by this Council—he was unable to get twenty names in that whole division, to be nominated. I have given my friends notice that I have no desire to return to this Council; I would rather return to private life and to the practice of my profession. Therefore, what I am now saying is not claptrap, and I mean exactly what I say when I express my opinion that every member of this Council ought to render his services during the present financial depression gratuitously to his profession. It is an honorable thing to be a representative of a noble profession like ours, and I am perfectly willing to do it free of charge. If that cannot be done my next proposition would be, and I am not willing to go beyond it, to grant to each member an indemnity of \$50.00 per session. I think that would enable us to have a little remuneration and to cover our expenditure; and if we did that the figures would work out something like this: there are thirty members in attendance here, or may be when Dr. Roome is with us—that would be \$1,500.00. The railway expenses last year were something over \$500.00 I believe, covering two rates, to and from the city. I think if we manage our time economically we may not have to go home, and therefore the expenditure in connection with travelling may be limited to \$250.00, making together \$1,750.00. Last year the session cost \$4,189.00. Deducting this \$1,750.00 from that sum we have a saving to the Council of \$2,439.00. I claim it is the bounden duty of this Council to economize in every direction. The city of Toronto here is in debt and running into debt, or running behind, and what are they trying to do? I do not say how far they are succeeding, but there is an effort on the part of the City Council to curtail expenses. And, go where you will, you see the same tendency on the part of all corporate bodies where they are acting wisely. Banking concerns are finding they have difficulty to make both ends meet; and all over the country they are endeavoring to curtail expenses, and the number of their employees is being diminished, and I say the Council ought to make an honest effort to reduce their expenditure. Therefore I say the motion to go into Committee of Supply should carry in order that we may give this by-law a careful consideration, and if goes into Committee of the Whole I shall move to have it amended either for us to do away with the sessional indemnity altogether or, if that should fail, to give to each member \$50.00 of an annual indemnity.

Dr. SANGSTER—I strongly disapprove of killing a proposition in that way, because the effect would be to kill, too, a proposition that aims at the reduction of the expenditure of the Council. I do not like the by-law as it is proposed, although I think it is a step in the right direction; it reduces, or attempts to reduce, the per diem allowance to what we proposed it should be last year. But I personally am opposed to a per diem allowance; I would very much prefer a free service on our part, as Dr. McLaughlin suggests, or a sessional indemnity, say of \$50.00. A sessional indemnity of \$50.00 would cover our incidental expenses of being here and would leave a margin of some kind, but I do not think under the circumstances that prevail now we should expect or accept more than that. The Council's strong box is troubled with an aching void; there are several leaks in its bottom, from which things are escaping—

A voice—Fistulae.

Dr. SANGSTER—Yes, there is not only a main vent emptying into this corner lot, but there are several fistulous openings surrounding; one running into subsidized journals, another into too expensive examinations, another into very large per diem allowances, another into large salaries, into extravagance, into \$300.00 speeches, and several other fistulous openings of that kind. Propositions looking to the closure, or partial closure, of any of these exhaustives by knife or ligature or any other process seem not to command the attention of the Council; they do attempt to plaster over the openings by words, but they are only to be stopped by deeds, and I think the time has come when a stoppage of some kind is necessary. Some of our friends say that our constituents do not want us to do the work for nothing, and I have heard others say if the profession is not prepared to recoup them for the outlay in time and money they are quite willing to resign and let some others

take their places. I do not think, under the circumstances, that the profession would be probably very fastidious about accepting our services for nothing, especially in the present empty condition of the treasury, and considering the services we render the profession are practically not of much value. It may be questionable how far the profession could assign any substantial value to the services we render to the profession in this Council as at present conducted; and if any of us were unwise enough to resign because of too low remuneration being received, or because of the absence of all remuneration, I do not think our constituents would meet with any great difficulty in getting, in any constituency, a dozen or a score of men quite as able as we are who would be perfectly willing to do the work for the honor and for nothing beyond it; for it is an honor to represent a hundred and fifty or two hundred of our fellow practitioners in this Council, and I think we should not only esteem it an honor but should show we esteem it by showing a willingness to reduce the money we receive. I do not suppose any of us came to this Council under the impression that we would receive any pecuniary advantage from doing so. I know that we, not resident in the city, all understood that our acceptance of the position would result in financial loss. I do not conceive that we are going to have as short sessions in the future as we have had in the past; our membership is one-fifth larger, and the Council is no longer a mutual admiration society, as it was when every meeting of this body was a love feast, and taffy pulls were the order of the day, and the presidency was the glittering prize to the most amiable and least long-winded and least tenacious, and personalities and long speeches were at a discount.

Dr. BRAY—I wish they were now.

Dr. SANGSTER—At that time the whole business, or the main business, of the session consisted in preparing and applying a strong atropine collyrium to the eyes of the profession so as to enable it to properly see the real estate and tax business, and perhaps manufacture a new solution of cocaine and apply it to its conscience whenever it becomes restive on the questions of coercion, and extravagance, and overcrowding. Now, to use a trite saying, *nos vovimus clump tout cela*, we have here a somewhat lively opposition troubled with a pestilent itch to dip beneath the surface of things and to know why things are as they are in this Council and not as they ought to be. We have a small but a very stalwart opposition which may not be hypnotized and cannot be coaxed, or whispered, or coerced into line. We have a number of men here endeavoring to correct what we think is done wrong in the interests of the profession, and we know our rights and mean to maintain them; we are quite content to keep within the limits of rule and regulation, but we insist that we shall be permitted to express ourselves moderately and correctly and rationally on any subject that may come up. When there was no opposition in this Council, when it was all government, there was no real fighting, there may occasionally have been a sham battle, but it was with button foils; but now, if I may so express myself, we are fencing with sharpened points, and we mean business, and business means the consumption of time, so that it is vain to expect you are in the future going to limit your Council sessions to five days. You may count upon a session of seven days at the very least, and seven days with the intervening Sabbath—because we were told distinctly last year that if you had to sit over Sunday the members would expect payment for that day—would mean eight days, and eight days' session would cost the Council, at our present rates, in addition to two travelling expenses, \$3,000.00; while, on the other hand, a sessional indemnity of \$50.00 a member would make the whole cost \$1,500.00, so that if we can go into it and amend the by-law to that effect, if we do not amend it so that we should give our services gratuitously, we shall at least save this Council annually \$1,500.00 and if the session is prolonged much, as it would inevitably be prolonged if the government is as long-winded and tenacious as it was last year, the saving to the profession would be twice or thrice \$1,500.00. We know profession is cheap, but it has been customary for the members of this Council at times to profess a great deal of anxiety to relieve the profession from the annual tax, which is regarded by so many of us as vexatious and odious, and unconstitutional and unnecessary. Now, here is a practical mode of reaching the difficulty; we do not expect to carry our friends the appointees and the homœopaths completely in our attempt to change the mode of paying the members so as to reduce the expense to a half or a third of what it is at present, but it certainly will be a curious thing to see how the elected members vote so as to keep this matter from going into committee, and in that manner to choke it off and stifle it. While I think the arguments in favor of the proposed movement to make it a sessional indemnity instead of a per diem allowance, or to make the service free, are strong on the ground of economy, yet there is another reason which appeals to me very strongly on behalf of supporting that contention; I conceive that either free services or a sessional indemnity would largely conduce towards thorough debate and well-considered legislation. All through last session whenever discussion tended to touch any of the special privileges of certain classes in this body, so as to remove or tend to remove customs that were expensive or otherwise, a very determined effort was made to choke off discussion on the plea of

expense, and if that failed then an attempt was made to place the odium of continuing the session, and thereby increasing the expense, upon the opposition. We are quite content to allow our constituents to judge us in that matter. We know, as I have said, our constitutional rights, and we mean to insist upon their being observed. We intend to express ourselves on every question that comes up, and we are not going to be prevented from asserting our claims by any threat that upon us will be thrown the onus of continuing the length of the session and thereby increasing its expense. We do not propose to have any of our number fed upon starch for a month and being deprived of any opportunity of obtaining *taka diastase*, which would digest the starch and prevent flatulence, and then come to this Council pregnant with a gentle zephyr which, for want of *vis-a-tergo*, took five mortal hours for delivery; but while we keep within the limits of the fifteen minutes we claim to be heard.—

The PRESIDENT—You must also keep within the lines of debate; you are away from the subject before the chair.

Dr. SANGSTER—I bow to your decision, but my opinion is I am speaking within the subject. I will not speak much longer; I will close with one remark. If there is any reality, if the members of this Council are sincere in their expressions and desirous of lessening the expenses of the Council, they should give practical evidence of that desire by helping us to go into Committee of the Whole and pull down the annual expense of the session. If the members of the Council are not willing to do that, cannot see their way clear to do that, the only other alternative will be to be less tenacious themselves and not to place a premium on flatulence.

Dr. HARRIS—I want to say this, and I think the majority of the members of the Council feel as I do, that we have had this subject up long enough and it is pretty near time we took a vote on it. This playing to the grand stand, to use a baseball or lacrosse expression, by gentlemen getting up here and putting themselves on record before their constituents, posing here as great economists, we all understand. It is done because it goes in print and is circulated about; they are endeavoring to make it appear that we are the men who are putting the profession to expense. But who put the profession to expense last year? These very men who have spoken for this motion are the ones. Who are doing it now? These very men. I would be ashamed to stand up here in this Council, as Dr. Sangster has, and occupy the time of intelligent members by taking as he has talked and yet has said nothing; there is nothing in it at all. We all know that and I trust you will take a vote on it and not allow this motion to go to Committee of the Whole.

Dr. BRAY—I believe Dr. Sangster was a member of the committee that considered this subject last year and took up a great deal of time and brought in a unanimous report which this Council adopted towards the close of last session, and now at the very commencement of a new session, Dr. Sangster and those with him try to upset this work that has already been done. I would ask who was responsible for the expenditure of this money in connection with the last session? Who was responsible for all the long-winded speeches that Dr. Sangster speaks of?

A voice—These men.

Dr. BRAY—They had a good representation on that committee, and they did not take exception to amount to anything, yet this year, almost at the very commencement of the session, they try to undo what we did last year, and I maintain that that is squandering money for no good at all. Dr. Sangster says, What will our constituents think? I can tell him what my constituents think. My constituents have told me that we are not paid half enough, and that they were willing to pay us a great deal more. I feel satisfied if I were to vote for this by-law or any by-law to reduce the indemnity of the members I would be voting contrary to the wishes of my constituents. Dr. Shaw may be perhaps in a little different position because he is of the opinion that his services are not worth \$10.00 a day, and perhaps he fears his constituents have the same view as he has on this matter. I am very sorry to see any member of this Council put such a low estimate on his time and attainments, because just as we value ourselves are our constituents apt to value us. Gentlemen, I do think that a great deal of the discussion we have had is nonsense, and for my part I do not intend to occupy your time further than to say I think it is childish to endeavor at the opening of this session to undo and negative what it was last year unanimously decided upon to do.

Dr. THORNTON—With regard to this matter of indemnity, speaking for myself, I do not propose for one moment, although I am in favor of economy, to do anything that would virtually disqualify the poorest member of the profession from representing his fellow practitioners in this Council (hear, hear), and I say if we have to come here to do the work of the profession for nothing there are many of us that certainly would be in all justice and all reason disqualified. (Hear, hear.) On the other hand, I am in favor of all reasonable econ-

(To be continued.)

Reports of Societies.

CANADIAN MEDICAL ASSOCIATION.

The twenty-ninth annual meeting of the Canadian Medical Association, held in Montreal, August 27th, 28th and 29th, was a grand success.

Dr. James Thorburn, of Toronto, presided. There was a large attendance of delegates from every province except British Columbia and the North-West Territories, which were unrepresented.

Dr. Thomas Roddick gave an address of welcome, calling attention to the various features of interest in the city, and to the honor done it by the British Medical Association in choosing Montreal as the next place of meeting, and also to him in choosing him as its next president. He then introduced the President.

A matter which added much interest to the Association was a discussion of the report of the Committee on Registration appointed last year. The following is the report, and explains itself:

"The committee appointed at the last meeting to look into the question of inter-provincial registration would beg to express their regret that by the system which at present obtains, a graduate in medicine entitled to practice in one province is not free to exercise his functions in all the provinces of this large but sparsely settled Dominion;

"That this condition of things prevents the names of medical practitioners in this Dominion being placed on the British Register, becoming thereby British practitioners, which the Council of Medical Education of Great Britain has more than once signified its willingness to grant;

"That with this end in view it is, therefore, most desirable that there should be a uniform standard of

matriculation, a uniform standard of medical education, and a uniform method of examination for the whole Dominion;

"That to effect this purpose, the Secretary be instructed to communicate with the various provincial Councils before their next meeting, asking that each Council discuss the question, and, if possible, appoint one or more delegates to a Dominion committee for the purpose of adjusting a suitable curriculum and carrying out the suggestions herein contained, and that such committee be requested to forward their finding to each of the provincial Councils and to the Secretary of this Association before the next annual meeting."

Dr. Charles Martin, of Montreal, read the first paper, on

Observations on the Relation between Leuchæmia and Pseudo-Leuchæmia.

The essayist said that a diagnosis of these and allied conditions from a blood examination alone was impossible; it was, however, a great aid. The clinical symptoms must always be taken into consideration. The doctor described the appearance of the various types of cells found in the blood in these diseases. He thought that too much stress was laid upon the leucocytosis in forming a basis of classification. From investigations Dr. Mathewson and he had made they were to include these two diseases under the one name, as did the old French writers.

The Association then went to the General Hospital.

Dr. Shepherd gave a clinic. The first patient was a young woman aged 24, who was admitted to the hospital in November, 1894. Suffered from great pain in the abdomen and shoulders. She gave a history of vomiting dark fluid two days previous, accompanied with pain. On admission, the limbs were drawn up, the tongue was dry, the abdomen distended and tympanitic. Diagnosis, perforated ulcer of the stomach.

Temperature, $101\frac{1}{2}$; respirations, 40; pulse, 120. On making an abdominal incision, cavity was found full of stuff from the stomach. This was sponged out and a drain put into the pelvis, which was drained separately from the stomach. Fourth day food was given by mouth. Patient suffered from small fistula for a time, but made a good recovery.

Case No. 2.—Patient was brought to the hospital unconscious. He had been bicycling down hill and the wheel had run away with him, and he was thrown off. Beside the unconscious condition, his head was badly cut. He recovered consciousness, which was again lost. Vomited on admission. There was a slight paresis on the right side. Diagnosis, meningeal hæmorrhage. The wound ran from the anterior superior borders of the parietal bone downward and forward two inches. There was no depression. Trephining was done and a clot was found between the dura mater and the skull. This thickened as the operator went down. He made an incision at the lower end of the wound. Found the clot thicker; came down upon the meningeal artery. Not being able to get the clot removed, he chiselled out a piece one and one-half inches wide and an inch long, corresponding to the whole area of the meningeal artery. It was traced to the foramen spinosum; there it was ruptured. It could not be tied very well. He tied the common carotid. The hæmorrhage stopped. Pulse, 190; respiration, 50. Saline injection per rectum. Pulse fell to 140. Subsequently there was a great amount of oozing and a little paralysis of the opposite side. An immense amount of hæmorrhage followed; plugged firmly. Hæmorrhage was controlled. This remained in ten days, and was then taken out. No suppuration of any kind. A good recovery followed.

Case No. 3.—Boy was shown with cicatrix in the forehead, showing where a piece of burst emery stone

had struck him, fracturing the skull, the internal plate to a much greater extent than the external. In taking away the piece, the superior longitudinal sinus was quite torn across. But hæmorrhage was stopped with sutures. Was doing well.

Case No. 4.—A girl aged 13, who a month ago had an excision of the ankle done for tuberculosis of that joint. The doctor described the technique of the operation. He removed the head of the astragalus and of the tarsus, except the posterior part of the os calcis, and also the end of the tibia and fibula, chiselling away all the degenerated tissue.

Case No. 5.—A man aged 44, who had malignant disease of the bulbous portion of the urethra, following stricture. The disease extended about two inches. Everything was removed down to the prostate. Care was needed, as the man had enormous hernia on the left side which had been strangulated a few days before.

Dr. Blackadder presented a patient suffering from progressive muscular atrophy. The patient first noticed pains in the legs and later wandering pains throughout the body. Had been exposed to a great many hardships, being a lumberer, at which he worked four or five years. No specific history. There was great wasting of the thenar and hypo-thenar spaces. There was inability to close the thumb and forefinger. There was very great weakness of the muscles. There was a great deal of tenderness in the trapezius and deltoid. The lower limbs were but little wasted. A considerable amount of tremor was present and pains ran down to the toes. In such cases lateral sclerosis was usually present, with increased reflexes and a spastic condition of the legs, but this condition had not developed in the patient presented. There was, however, a slight stammering in the speech.

Case 2.—Man entered with a spastic walk, and a certain amount of ataxia. Patient quite unable to stand with

eyes closed. Intention tremor of the hand was present, and a certain amount of nystagmus and blurring of the vision. The history of the case was then given in full. The diagnosis was disseminated sclerosis.

Case 3 was a child suffering from multiple neuritis. A full history of the case was given, and the diagnosis between this and anterior polio myelitis pointed out.

The next patient was a man who had lead palsy. It was peculiar, from the extent of the muscular involvement. Such cases were usually of the brachial type. But in the case presented the brachial type was not only exemplified, but also anti-brachial type. There was wasting of the thenar and hypo-thenar eminences and the small muscles of the hand, and also in the prehensile muscles. The patient entered the hospital first for lead colic. He had used alcohol to excess and was careless about leaving paint on his fingers. The wrist-drop was marked. Motor power was considerably lessened in the extensors and flexors; electrical reaction was absent.

Dr. Hutchinson presented a patient who had sustained a fracture of the femur at the juncture of the middle and upper third. The periosteum was denuded for several inches. A silver wire suture was put in. Fear was entertained of the result, owing to the extensive amount of damage done to the periosteum, but a good recovery followed.

Case 2 was amputation of the arm of a woman who had met with an accident in which there was dislocation of the wrist and elbow and ulceration of the extensor tendon of the arm at the shoulder joint. Expectant treatment was first tried, but gangrene set in, and amputation was found to be necessary. It was subsequently learned that the gangrene had been induced by the extensive injury and tearing of the veins.

The doctor also reported a case in which there had been fracture of the

ninth dorsal vertebra and probably rupture of the cord.

Dr. Shepherd showed a woman who had a cervical rib. He called attention to the differential diagnosis. He also showed a case of a patient suffering from urticaria, and also a case of psoriasis.

Dr. C. W. Wilson showed a patient suffering from flat-foot. The device he had used for maintaining the corrected position was Wiseman's plates.

Dr. G. C. Campbell brought in a patient suffering from scurvy. The man was an Italian, who lived four days' journey from Montreal, and had come for treatment to the out-department of the hospital. There was extreme amount of swelling of the gums. This was fungoid, and extended to the base of the teeth. He could not use his teeth; the slightest touch made them bleed profusely. He complained of pains in the limbs and general weakness, which had commenced three weeks before. There was some œdema about the ankles, and a good deal of ecchymosis of the skin. It was to be seen on the left side and on the lower part of both legs, and two large patches were to be seen on the forearms; these were greenish-yellow in tint. His diet for three months had been pork and beans. He had eaten no fresh food of any sort. When he came in he could eat no solid food. He was given fresh vegetables and the juice of two or three lemons daily. He received internal medical treatment for the hæmorrhage from the gums; a ten-grain solution of the nitrate of silver was applied.

A luncheon was then tendered by the hospital staff.

Dr. Meek, London, read a paper on a report of

Three Cases of Abdominal Section for Conditions Comparatively Rare.

The history of the first patient was as follows: A single woman aged 28, with a good family history. Was regular as to her menstrual periods until May, 1895, when she received a

blow on the right side of the abdomen. A short time after this, she noticed a swelling to the right and above the pubes. Increased for about a year. There was some irregularity in the flow. On examination by the essayist, the abdomen was found enlarged and a tumor felt, more to the right than the left, extending an inch above the umbilicus. The uterus was in normal position. It seemed to be surrounded on all sides by cystic growth. On opening, a trochar was plunged in and a small quantity of fluid came out. There were no adhesions. The tumor and appendages were lifted out and a *serre-nœud* thrown around the pedicle, and the stump fixed in the abdominal wound. A good recovery.

The operation in the second case was for solid sarcomatous tumor of the left side. The family history of the patient was tubercular. On entering the hospital she was observed for ten days before operation. Temperature sub-normal in the morning; $99\frac{1}{2}$ and 100 in the evening. Pulse, 80 to 100. Also, shortness of breath, night-sweats and vomiting. On examination, lungs, heart and urine gave negative results. There was some delay in recovery owing to a stitch abscess. These cases were quite rare.

The third case was one of *volvulus* of the splenic flexure of the colon. The patient was a farmer, aged 48, who had suffered from severe attacks of colic with *tympanites*. The attack commenced Wednesday, August 14th. He had been well, except for constipation, for a year previous. Had eaten several sweet apples during the day. Morphia was given to control the pain. Purgatives were given but the bowels would not move. Thursday, no improvement; Friday, patient became worse; Saturday, paroxysms were extremely severe. Patient had had no movement of either gas or solid. Had only taken small quantities of liquid. Temperature, 100. Pulse, 65. Sunday, there being no improvement, operation was done.

Two or three ounces of serous fluid escaped from the peritoneum. The obstruction was found at the splenic flexure, and due to a half twist of the bowel upon itself, apparently caused by old inflammatory adhesion bands in its mesentery. The gut was opened by longitudinal incision and emptied of its contents. Patient did well for some days, and then developed an attack of acute mania, from which he died. The peculiarities about this interesting case were: (1) The rarity of the splenic flexure of the colon; (2) The pre-existing pathological condition which appeared to be the cause of the *volvulus*; (3) The post-operative sleeplessness of the patient followed by acute mania, notwithstanding the smooth progress of the case so far as the operation was concerned. (4) The very slow pulse the third and fourth day after the operation, viz., 45 per minute. An examination of the brain might have thrown some light on the cause of the mania, but it was not examined.

Dr. A. Proudfoot, of Montreal, presented a patient, a baby aged two months, with a deformity of the auricle and an *imperforate meatus externus*. He purposes making an incision to retract the auricle, and then opening the meatus later.

Dr. R. Ferguson, of London, read a paper on

Ophthalmia Neonatorum.

Statistics showed that this disease was the most common cause of blindness. In Canada, the census for 1891 enumerates the blind at 3,368, one for every 1,430 of the population. At a low estimate, there must have been 600 or 700 of these due to *ophthalmia neonatorum*. Researches had undoubtedly proven that the infection which causes the disease is gonorrhœal. The disease is the same as gonorrhœal ophthalmia, its less severity being due to the fact that the virus which attacks the new-born has lost much of its virulence through chronicity. Prophylaxis consisted

(1) in thorough irrigation with antiseptic solutions of the vaginal canal twice daily for a week or more before confinement, and more frequently as labor approached. Credé's method of the instillation of two or three drops of a 1 or 2 per cent. solution of silver nitrate between the lids of each eye after cleansing had given splendid results. The treatment was so simple and harmless that it was a question if it should not be employed as a routine treatment in all cases of the new-born. The period of development of the infection is about three days. The onset is soon followed by swelling of the conjunctivæ and lids and the appearance of a muco-purulent secretion, at first tenacious, but soon creamy. The eyes should be cleansed frequently. A tuft of sterile absorbent cotton may be tied about the mouth of the nozzle of the irrigating tube; this acts as a filter and breaks the force of the current. A quart of water, at least, should be used. A saturated solution of boracic acid would probably answer best. Cold compresses early in the disease are useful; but as redness, tension and swelling subside, these should be used less frequently. Silver nitrate, 2 per cent., is a strong germicide. It is a most valuable aid when the lids are relaxed and the swelling subsided, when the discharge is free and creamy and the papillæ are swollen. It should be applied with a cotton mop.

After dealing with complications, the doctor advocated in strong terms the necessity for legislation looking to the prevention of this dangerous disease. He proposed a resolution to the effect that ophthalmia neonatorum should be placed on the category of contagious diseases and be subject to the same restrictions.

Dr. T. T. S. Harrison, of Selkirk, read a paper on

Some Observations on the Heredity of Carcinoma.

The essayist, in opening his paper, reported having seen a case of car-

cinoma under his father's care. The patient, a female, was one of a large family to which he had since been the medical adviser. Since her death, a brother, a son, two nephews and a cousin had died of cancer of the stomach; a niece of cancer of the liver; a granddaughter of cancer of the breast. The diagnosis in the majority of these cases had been verified by a post-mortem. The doctor reported one case in which he had operated for recurrence of the disease after fifteen years' quiescence. He asked if in the first operation he had left any cancer cells which lay dormant for these fifteen years, and were then suddenly awakened by a bad tooth, or was there rather a cancerous diathesis which was aroused to activity by the long-continued irritation, especially on tissue of a low vitality, which irritant might have caused the same trouble if the first attack had never occurred?

Sir William Hingston said he did not know whether he could answer the question propounded. He saw cases which made him think cancer was hereditary, and he saw as many cases in which heredity seemed to play no part.

EVENING SESSION.

When the Association re-assembled, on motion of Dr. Bray, the following were elected a nominating committee:—Drs. T. G. Roddick (Montreal), Grasett (Toronto), Carroll (Halifax), Christie (St. John, N. B.), Harrison (Selkirk, Man.), H. P. Wright (Ottawa), Thornton (Manitoba), Bray (Chatham), Garrett (Kingston), and Beausoleil (Montreal).

The President, Dr. Thorburn, then delivered his address. After expressing how honored he felt at being elected to this honorable position so many bright men before him had filled, he entered into a review of the present position of scientific medicine. He dealt with the question of serum therapy at length and reverted to the great work of Jenner and Pasteur

which had led up to it. He thought the Association should record their appreciation of the services these men had rendered to the world in the advancing of medical science.

The President then paid a high tribute to the memories of Dr. K. N. Fenwick and Dr. J. H. Saunders, of Kingston, and Dr. L. McFarlane, of Toronto, members of this Association, whose lives had been sacrificed at the post of duty during the past year. The question of inter-provincial reciprocity then came under review. The committee appointed at last year's meeting would submit a scheme for the approval of the Association which would further the desirable end aimed at more than had ever been done before. To procure a uniform standard, he believed a spirit of concession and conciliation would be shown by the representatives of the various Councils. On account of the President's long medical college work and in the Medical Council of Ontario, his remarks on the question were listened to intently and frequently applauded. The relation of medical men to insurance companies was dealt with in a comprehensive manner. The question of professional secrecy was also dealt with. From a careful study of cases in Britain, he had learned from the decision of judges there that it was compulsory for a medical witness to tell all he may know, whether obtained in his capacity as a medical man or otherwise—which knowledge divulged may involve the witness without incriminating himself. This, the speaker thought, was not wise. A fixed rule was not always possible.

Electricity in its relation to medicine and the Roentgen rays in particular were next considered in an able way.

The President then complimented Montreal and its citizen, Dr. Roddick, on the honor conferred by the British Medical Association.

He hoped the Canadian Medical Association would more and more

extend its usefulness and maintain its high reputation.

A hearty vote of thanks was tendered Dr. Thorburn, several of the members beside the mover and second adding their congratulations.

Some Applications of Entomology in Legal Medicine,

was the subject of a most interesting talk by Dr. Wyatt Johnson. It consisted in a discussion of the various fauna found in dead bodies at various stages during decomposition. Prepared specimens of these insects were shown.

This closed the work of the first day.

(To be continued.)

EXECUTIVE HEALTH OFFICERS.

The eleventh annual meeting of the Executive Health Officers' Association of Ontario, 1896. It having been decided after full consideration of the Executive Council of the Association that owing to the annual meeting of the American Public Health Association in Buffalo, during the week of September 15th to 18th, to which representatives are invited from Mexico, the United States and Canada, that it would be in the interests of the Medical Officers of Health of the Province, as well as of the International Association, for them to attend this great meeting of the foremost sanitarians of the continent. The Executive Council have to this end decided to call the annual meeting of this Association to meet at Niagara-on-the-Lake, on Monday the 14th day of September. The following will be the programme of the meeting:

First session, Monday, 14th September, 10.30 a.m.

1. Prayer.

2. Address of Welcome—by the Chairman of the Local Board of Health.

3. Reading of minutes of the last annual meeting and announcements—by the Secretary.

4. Notes on Ten Years of the Work of the Executive Health Officers' Association in Ontario—by J. J. Cassidy, M.D., Member of Provincial Board of Health, Toronto.

5. Domestic Health Officers—by C. N. Hewitt, M.D., Secretary of State Board of Health, Minnesota.

6. The Bacteriology of Diphtheria—by Professor Shuttleworth.

Second session—2 p.m. to 6 p.m.

1. President's Address—by Dr. Hall, Chatham.

2. Impediments to Sanitary Progress—by C. O. Probst, M.D., Secretary State Board of Health of Ohio.

3. The Practical Place of the Laboratory in Municipal Public Health Work—by J. J. Mackenzie, B.A., of Laboratory of Provincial Board of Health.

4. How the New Registration Act does Public Health Work—by P. H. Bryce, M.D., Secretary for Provincial Board of Health.

5. The Practical Aspects of Sewage Disposal—by Willis Chipman, C.E., Toronto.

PROVINCIAL BOARD OF HEALTH.

A special meeting of the Provincial Board of Health was held August 18th, at 10.30 a.m., at the Parliament buildings, when the specification of the proposed sewerage system to be put into the city of London was discussed. It is one of intermittent filtration, and its estimated cost is \$177,000. New sewers are to be constructed and the sewage will be carried over to the south side of the Thames River, in the western portion of the town, where a farm is to be purchased. A by-law was submitted to the citizens on September 2nd. Dr. T. Cl. Campbell, Chairman of the London Board of Health, was present

and explained the system. Plans for the extension of the sewerage system of Cobourg were also discussed. The scheme for mechanical filtration of the public water supply of the town of Deseronto was also considered. All the matters were approved of by the board. The members in attendance were Dr. McDonald, Hamilton; Dr. Cassidy, Toronto; Dr. Kitchen, St. George; Dr. Vaux, Brockville, and Dr. Bryce, Toronto.

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.

DR. FREDERICK WINNETT has removed to 525 Sherbourne Street.

DRS. G. A. PETERS, Nevitt, and Duncan have returned from England.

DR. J. H. CAMERON is expected to be back from the Old Country very soon.

DR. RAY, of College Street, has moved to the corner of McCaul and Grange Road.

DR. JOHN MCMASTER, has removed from 306 College Street to 78 McCaul Street.

DR. R. O. SNIDER has removed to the corner of Wilton Avenue and Berkeley Street.

DR. W. H. B. AIKINS, of College Street, has left Toronto and gone to British Columbia for an airing.

DR. LIND, of Parkdale, has removed to the corner of Jamieson Avenue and Queen Street.

DR. ARTHUR SUTHERLAND, son of the late Rev. D. G. Sutherland, has settled at North Bay.

DR. APPELBY, of Parry Sound, an old Toronto School boy, was in the city during the Exhibition, as also Dr. Shaw of Orillia.

JOHN WESLEY SIFTON, M.D., Comber, has been appointed to be an associate coroner in Essex, in the place of R. H. Abbott, M.D.

DR. HAGEL, who for so many years practised on Queen Street West, has returned to Toronto and taken an office at 150 Simcoe Street.

DRS. ALTON H. GARRATT and Harris, of Toronto, returned from England on the 18th ult., after spending three months in London and Paris.

DR. GRAHAM CHAMBERS has purchased the residence of the late Dr. Laughlin McFarlane, 26 Gerrard Street East, and will reside there in future.

DR. E. P. GORDON has removed from Queen Street East to 492 Yonge Street, the residence occupied up till a month or two ago by Dr. Fotheringham.

WE are pleased to be able to announce that Dr. J. H. Lowe, of Manning Avenue, is progressing favorably and recovering from his recent serious illness.

DR. LAMBERT, of the General Hospital residential staff, who has been suffering from a severe attack of typhoid fever for some weeks past, is now rapidly convalescing and was able to be out in the hospital grounds several times lately.

AT the meeting of the Canadian Medical Association last month at Montreal, the following officers were unanimously elected for the ensuing year: President, Dr. V. H. Moore, Brockville; Vice-Presidents, Prince Edward Island, James Conroy, Charlottetown; Nova Scotia, J. T. Black, Halifax; New Brunswick, T. Walker, St. John; Quebec, J. M. Beausoleil, Montreal; Ontario, W. W. Dickson, Pembroke; Manitoba, R. S. Thornton, Deloraine; North-West Territories, E. H. C. Rouleau, Calgary; British Columbia, Dr. Harrington, New West-

minster; General Secretary, F. N. G. Starr, Toronto (re-elected); General Treasurer, H. B. Small, Ottawa (re-elected); Local Secretaries, Prince Edward Island, H. D. Johnston; Nova Scotia, A. T. Mader, Halifax; New Brunswick, G. A. B. Addy, St. John; Quebec, J. B. McCarthy, Montreal; Ontario, W. G. Anglin, Kingston; Manitoba, W. H. Smith; North-West Territories, Geo. Macdonald, Regina; British Columbia, A. Weld, Vancouver.

Correspondence.

The Editors are not responsible for any views expressed by correspondents.

Correspondents are requested to be as brief as possible.

To the Editor:

SIR,—The Rev. A. McGillivray, a Toronto clergyman, editor, I believe, of the Canadian Forester, and a Supreme Court officer of the I. O. F., visited this place two weeks ago and gave what was called an interesting and instructive address to his brethren of the local lodge or court. I propose to give a sample of the quality of the instruction given. Let me explain first, however, that in the North-west we have a medical association, the members of which have pledged themselves not to make any insurance examination for a less fee than five dollars (\$5.00). There is reason to believe that there are occasional lapses from good faith in the adherence to this agreement, but on the whole it has been fairly well kept, and has been not unprofitable to the physicians. The lapses from good faith spoken of have generally been brought about by the beneficiary societies, with whom the \$5.00 fee has always been a source of irritation, who think they should be treated on a different basis to the line companies, and whose agents are ever ready, with specious arguments, pleas on behalf of charity and appeals to self interest, to urge the wavering or weakbacked doctor to cast in his lot with them, and break his agreement with his fellow prac-

tioners. It was reserved, however, for the *reverend* gentleman above mentioned to point out the way by means of which the good doctor could examine for his lodge for \$2.00 and yet *not* break faith with his practitioners. It is not original, but it is the first time within my knowledge that it has received the sanction of ecclesiastical authority, and I think perhaps it is well that medical men in the North-west, and in Eastern Canada too, should become seized of a plan by which, without imperilling their immortal souls, they can serve two masters, walk abroad as upright and honorable men, and at the same time play the part of the consummate sneak. Here is the plan as propounded by the reverend Supreme Court officer. An *arrangement* is to be made with one of the doctors who will make all the examinations. The applicant or the lodge representative is to hand the doctor the \$5.00 at the close of the examination. That \$5.00 is then the property of the doctor. It is his to do as he likes with. But as per the arrangement spoken of, the doctor now makes a present of \$3.00, or whatever portion of the fee is agreed on, to the applicant or to the lodge. By the first part of the arrangement, the doctor keeps faith with his professional brethren: he charges the \$5.00 and actually receives it. By the second, the lodge, through the transcendent generosity (*sic*) of the doctor, gets the examinations made at what it is pleased to call a reasonable figure. One or two things it would be interesting to know. Does the I. O. F. countenance such a method of doing business? In other words, does it expect, by encouraging dishonesty in its medical examiners, to get honest examinations? What system of morality is it which could permit the serious putting forth of such a proposition as the one in question? Thanking you in anticipation for the insertion of this letter.

Yours truly,
E. A. KENNEDY.

The Physician's Library.

Twentieth Century Practice. An International Encyclopedia of Modern Medical Science. By leading authorities of Europe and America. Edited by THOMAS L. STEEDMAN, M.D., New York City. In twenty volumes. Volume VIII. "Diseases of the Digestive Organs." New York: William Wood & Co. 1896.

As was the case with Volume VI, it has been found necessary to issue the eighth volume out of the regular order. Volume VII. will be the next volume to appear, upon publication of which the series will be consecutive as far as Volume VIII. The publishers cannot but congratulate themselves that they have been enabled, notwithstanding the fact that the authors of this series are so widely scattered over the world, to issue the volumes with great regularity at three-month intervals, as announced at the beginning of the series. The present volume, it will be seen, has been prepared by eight different authors, four of whom are Americans and four Germans; is illustrated by over one hundred original engravings, and it is believed will be found fully to sustain the high reputation already attained by this great work.

A Treatise on Appendicitis. By JOHN B. DEEVER, M.D., Surgeon to the German Hospital, Philadelphia, containing 32 full-page plates and other illustrations. Philadelphia: P. Blakiston, Son & Co., 1012 Walnut Street. 1896.

Unfortunately there are some medical works put on the market which, no matter how good the matter may be, prove to be unreadable owing largely to sometimes poor paper, but more frequently still poorer presswork. One has, however, to simply take up Deever's "Appendicitis" to feel that he has in his mind "something worth while." The paper is of beautiful quality, highly calendered, and the type of just such size as to induce

the reader to keep on reading. From a medical and surgical standpoint, the work is highly interesting. The author is sufficiently well known to guarantee his book a very large sale, especially now when one hears on almost every hand so much of this disease. No inflammatory affection of the abdominal cavity, however, is capable of such varied symptoms, and of so many serious complications, all of which demand the most thorough knowledge for the proper treatment. There has been presented in this volume such a systematic study of the disease that not only the usual symptoms may be traced from their inception to their termination, but also that the various anomalous conditions so frequently met with may be recognized with equal facility,

Minor Surgery and Bandaging. By HENRY R. WHARTON, M.D., Demonstrator of Surgery in the University of Pennsylvania. New (3d) edition. In one 12mo volume of 594 pages, with 475 engravings, many being photographic. Cloth, \$3.00. Philadelphia: Lea Brothers & Co. 1896.

The call for a third edition of Dr. Wharton's excellent manual has afforded another opportunity for thorough revision. In a certain sense the title is a misnomer, for the work covers more than is usually included under its subjects, and details many special surgical procedures clearly and authoritatively. Full instructions will accordingly be found for the manipulations and operations connected with fractures, dislocations, amputations, excisions and resections, trephining, operations on nerves and tendons, tracheotomy and laryngotomy, intubation, operations on the kidney and colon, lithotomy and osteotomy. The subject of Minor Surgery is treated in ample detail, the materials, methods, dressings and procedures being described in conformity with the most approved

aseptic and antiseptic practice. The section on Bandaging is equally thorough, the use of these most important dressings being given in the text and their application being admirably illustrated with a large number of engravings, mostly photographic, which show the successive turns and folds with a degree of clearness otherwise unattainable. The work is illustrated with equal profusion throughout, and is to-day probably the most satisfactory manual obtainable upon the subject of which it treats so admirably.

Births.

PEPLER—On August 30th, the wife of Dr. W. H. Pepler of a son.

Deaths.

WRIGHT—On August 27th, at Toronto, Gus, son of Dr. H. H. Wright.

BANKS—At Weston, September 2nd, 1896, Dr. J. H. Banks, in his eighty-third year.

BENSLEY—At 229 Dunn Avenue, on Saturday, August 29th, Alma Gladys, infant daughter of Dr. R. R. Bensley.

CLOSSON—At his late residence, 633 Spadina Avenue, on Sunday, September 13th, Lorenzo Dow Closson, M.D., in his sixty-eighth year.

WISHART—On Sunday, September 6th, at 22 St. Vincent Street, Toronto, David Bannington, son of Dr. D. J. Gibb and Rebecca M. Wishart, aged nine months.

HARRIS—At East Lodge, Brantford, August 26th, William T. Harris, M. D. C. M., Surgeon-Major Dufferin Rifles of Canada, and a member of the Medical Council of Ontario, aged forty-four years. The funeral took place on Sunday afternoon, August 30th.

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### Miscellaneous.

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#### TWO CASES OF TETANY.

By F. U. FERGUSON, M.D.,  
Gallitzin, Pa.

ON December 12, 1893, I was called to M., aged ten months, a large, well developed, healthy-looking boy. The day before the mother noticed that he would take nothing in his hands. Intermittent pain was present, and he had spells of crying. The noise of the trains, particularly the whistling of the engines, would cause him to start, although he had not been annoyed before.

The muscles of all the extremities had typical tonic contractions. The thumbs were adducted into the palms.

The wrist and first phalanges were flexed. The second and terminal phalanges were extended. The fore-arms were pronated and the arms drawn toward the chest. The toes were bent down and adducted; the soles of the feet hollow and the backs arched as in equinus. The backs of the hands and feet were slightly tumid; the veins prominent.

Trousseau's test was not thought of at the time. The parents could see no intermission, but I am sure the contractions were firmer during pain. The urine was scanty but contained no albumen. A coryza was present and some fever, but the thermometer was not used.

Three teeth were through, and one upper incisor was cut during the sickness.

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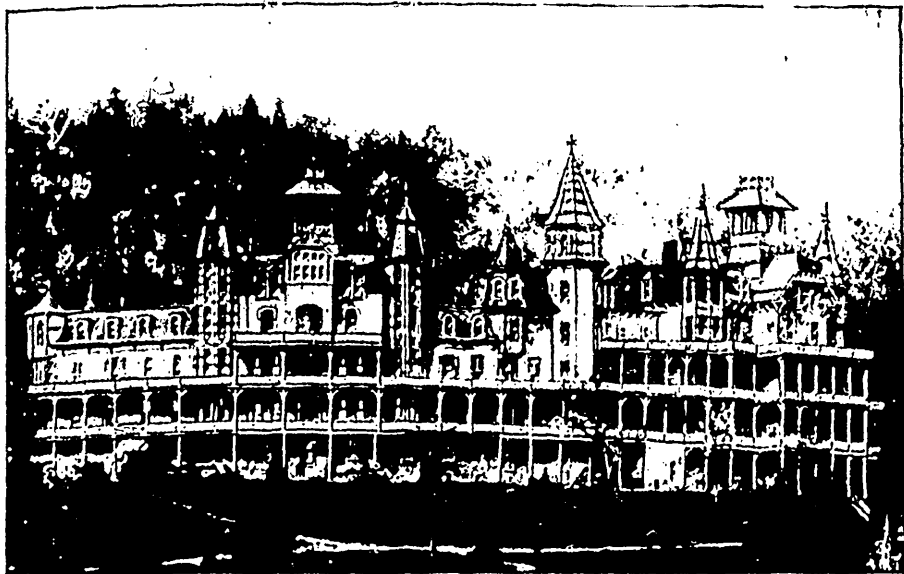
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I prescribed  $1\frac{1}{4}$  grains of chloral and 2 grains of potassium bromide, every two hours

December 13th, 9 a.m.—The child was resting better, but the contractions were still firm. At 3 p.m., seeing no change, I examined the prepuce and found it adherent. After the glans penis was shelled out and a quantity of smegma removed, the parts were anointed with rose water ointment. The first prescription was then stopped and small doses of belladonna were given.

December 14th.—The contractions were weaker, and in twenty-four hours they disappeared. Two weeks later the disease had not returned.

I did not attend the child afterwards, but I learned that he had frequent attacks for several months, and

that circumcision was performed without effect. When he appeared on the street last summer I noticed a waddling walk; the joints seemed heavy, the nose was flat and the lips thick.

Case 2. On March 7, 1896, I was called to see a boy, eighteen months old. He was bottle-fed and was suffering with a severe attack of vomiting and diarrhoea. After two or three days' illness he improved and in a week was well.

On the 14th he had contractions of the hands and feet, which were similar to those described in Case 1. In addition, however, the chin was pulled down on the sternum, giving it a "double" appearance. The orbicularis oris and the inferior maxillary muscles were also affected, making a

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Patients will be admitted for Surgical Operations, Confinements, Massage, Electrical Treatment, and all non-infectious diseases.

Massage, etc., may be obtained at the Home without residence if so wished.

Both male and female patients will be received.

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Medical men and others interested are cordially invited to call and see the Institution.

The charges for Rooms, Nursing, and Medical Attendance, will be \$25.00 per week in advance.

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.

“verge of tears”—old womanish expression. The eyes looked up like one trying to look over his glasses. Pressure on the median nerve made no difference.

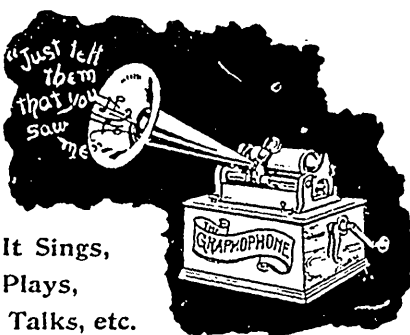
The temperature was 101°, the respiration rapid. He was fretful, slept lightly, and cried when an effort was made to overcome the contractions.

The treatment consisted of easily digested food; cod liver oil inunctions over the whole body twice daily; two grains each of chloral and potassium bromide with one minim of tincture of belladonna, every two hours. It was three days before improvement was noticed, when the contractions became gradually weaker and passed off. In a week he was

able to pick up his food and toys, and by the first of April he could walk.

Cholly—“Doctah, do you think that smoking cigawettes impairs my mind?” Doctor—“Nonsense Nothing could impair your mind, young man.”—*Chicago Record.*

“Dr. Bone, I want you to write a poem on the death of my uncle. Will you undertake it?” “I don’t think I am equal to it.” “Oh, it’s easy enough. Bring in something to the effect that he is ‘not dead but sleeping.’ You know the rest.” “Unfortunately I can’t undertake it. I couldn’t truthfully write in that strain. You see, I signed the certificate of death.”—*The Kings’ Jester.*



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INFANT FEEDING.—In France it is forbidden, under severe penalties, to give infants under one year of age any form of solid food, unless such is ordered by prescription, signed by a legally qualified medical man. Nurses are also forbidden to use, in the rearing of infants confided to their care, any nursing-bottle provided with a rubber tube.—*Charlotte Medical Journal*.

required ligature in segments. An extensive raw surface was left, with considerable redundancy in the vaginal wall. A portion of each vaginal flap was resected, the area of denudation diminished by a deep, continuous catgut suture, and the vaginal flaps united by a similar suture. The patient, thirty years of age and three months pregnant, was delivered at term.—*Brit. Med. Jour.*

CYST OF ANTERIOR VAGINAL WALL.—Vineberg (*Amer. Gynec. and Obstet. Journ.*, June, 1876) operated, during pregnancy, for the removal of a cyst as large as a hen's egg. It closely resembled a cystocele, and contained thick colloid material. It required free dissection and there was a broad, thin vascular pedicle connecting it with the bladder, which

A FEMALE medical student, says the *Medical Record*, who failed at a recent examination in London so effectually lost control of her inhibitory moral sense as to retaliate in the following ungrammatical convulsive outburst: "Very soon doctors will be drawn from we pure, noble-minded women, and you vile, drunken, filthy men expelled forever."

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Alphabetical Index of Formulæ.

(Concluded.)

VOMITING (Continued).—

℞ Creasoti ℥iv.
Aquæ f ℥vj.

M. Sig.: Tablespoonful, repeated as necessary.—*Niemeyer.*

℞ Aloini gr. v.
Strychniæ sulphat. . . . gr. j.
Ex. colocynth. comp. . . gr. v.
Ex. hyoscyami ℥j.

M. Et ft. pil. No. lx. Sig.: One pill after each meal. (In obstinate vomiting due to chronic constipation.)—*Da Costa.*

℞ Tr. benzoin. comp.,
Acid. sulphuric. dil. f ℥ss.
M. Sig.: Give thirty drops with sugar.—*E. G. Clark.*

℞ Bismuth. subnit. ℥ij.
Acid. hydrochlor. dil. . . f ℥ss.
Mucil. acaciæ,
Aq. menthæ pip. āā f ℥ij.
M. Sig.: Tablespoonful three times a day. (With gastric ulcer.)—*Da Costa.*

℞ Liq. calcis,
Lactis recentis āā f ℥ij.
M. Sig.: Tablespoonful every half hour or hour.—*Wood.*

℞ Liq. potass. arsenitis. . . f ℥ss.
Sig.: Half drop every half hour for six or eight doses. (Vomiting of drunkards and pregnancy.)—*A. A. Smith.*

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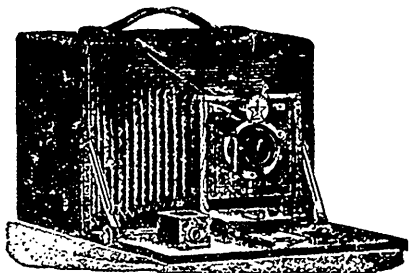
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VOMITING (*Continued*).—

℞ Chloroformi f ʒ ss.

Sig.: Two to five minims on sugar.
(In non-inflammatory vomiting.)—
Ringer.

℞ Ex. belladonnæ,
Ex. physostigmat,
Ex. nucis vomicæ,
Aloini āā gr. xv.
Ferri sulphat. exsicc. ʒj.

M. Et ft. pil. No. lx. Sig.: Pill
at bedtime. One grain of permangan-
ate of potash in water is also taken
three times a day. (In hysterical
vomiting.)—*Bartholow*.

℞ Sodii bicarb. gr. xv.
Acid. hydrocyanic. dil. ℥ iss.
Aq. camphoræ f ʒ x.

M. Sig.: To be taken three times
a day after meals. (When due to
acidity.)—*Chambers*.

℞ Ex. nucis vomicæ gr. j.
Ex. conii gr. xij.

M. Et ft. pill No. vi. Sig.: One
pill three times a day. (When due
to malignant disease of the stomach.)
—*Barlow*.

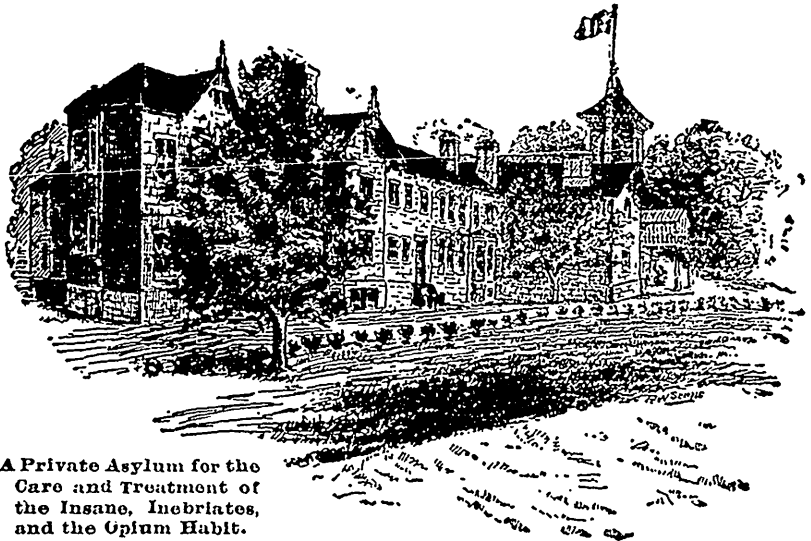
℞ Cerii oxalat. gr. j.
Ipecacuanhæ gr. j.
Creasofi gtt. ij.

M. Sig.: This is to be taken every
hour until nausea is controlled. (In
pregnancy.)—*Goodell*.

Take the fourth part of a seidlitz
powder every fifteen minutes.—*Wood-
bury*.

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VOMITING (*Continued*).—

℞ Ceri oxalat. gr. j.
 Pulv. ipecac. gr. j.
 Creasoti gtt. j.

M. Sig.: Take every hour.

℞ Cocain. muriat. gr. ¼.
 Ex. nucis vomicæ. . . . gr. ⅙.
 Pulv. assafœtidæ. . . . gr. ij.

M. Et ft. capsulas No. i. Sig.:
 Take one capsule three times a day,
 half hour before eating.—*M. W.*
Everson.

℞ Tr. opii. camph.,
 Syr. ipecac. āā fʒj.
 Syr. scillæ fʒij.
 Syr. tolu. fʒss.
 Liq. potass.citrat.,q.s.ad fʒij.

M. Sig.: Teaspoonful every two
 hours for catarrhal stage.—*Penrose.*

℞ Ex. belladonnæ. gr. j.
 Syr. toltutan. fʒiv.

Sig.: Three to four coffeespoonfuls
 for a child one year old.—*L'Union*
Medicale.

WHOOPIING-COUGH.

℞ Ex. belladonnæ gr. ss.
 Pulv. aluminis. gr. xxiv.
 Syr. zingiber.,
 Aquæ āā fʒiss.

M. Sig.: Teaspoonful every two
 hours for a child of one year.—*Good-*
hart and Starr.

℞ Pulv. belladonnæ rad. gr. i-5.
 Pulv. Dover. gr. ss.
 Sulphuris sub. gr. iv.
 Sacch. alb. gr. x.

M. Et ft. chart. No. i. Sig.: One
 powder from two to ten times a day,
 according to age.—*Germain See.*

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WHOOPING-COUGH (*Continued*).—

℞ Antipyrin,
Quiniæ sulphat āā ℥ ss.
Ēlix. glycyrrhizæ f ℥ iv.

M. Sig.: Teaspoonful every two to four hours.—*Wighl.*

℞ Thymolis gr. xx.
Acid. carbolicæ,
Ol. sassafras,
Ol. eucalypti,
Picis liquidæ,
Ol. terebinthinæ āā f ℥ ij.
Ætheris f ℥ iv.
Alcoholis q. s. ad f ℥ iij.

M. Sig.: Put about thirty drops upon a pad of such a size as to be conveniently hung around the child's neck, renewing the application every two or three hours.

In severe cases the inhalation treatment is supplemented by the internal administration of—

℞ Acid. carbolicæ gr. iij.
Sodii bromidi gr. j.
Tr. belladonnæ gtt. xx.
Glycerinæ f ℥ iij.
Aquæ q. s. ad f ℥ ij.

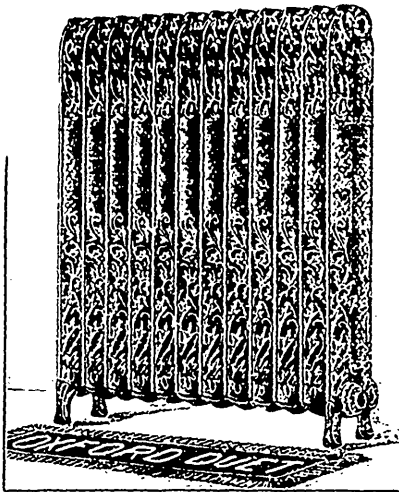
M. Sig.: Teaspoonful for a child three or four years of age occasionally.—*Beall.*

℞ Ammon. brom.,
Potass. brom āā ℥ j.
Tr. belladonnæ f ℥ j.
Glycerinæ f ℥ j.
Aq. rosæ f ℥ iv.

M. Sig.: Use as spray from four to six times daily.—*Keating.*

℞ Quiniæ sulphat gr. xij.
Ol. theobrom q. s.

M. Et ft. suppos. No. xii. Sig.: Use one or two three times a day for a child of two years.

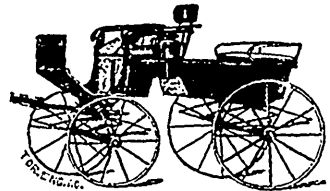


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WHOOPIING-COUGH (*Continued*).—

℞ Terpene,
 Antipyrin.....āā gr. xv.
 Syr. aurant..... f̄ij. ʒvj.
 Mucilaginis f̄ij.

M. Sig.: One or two teaspoonfuls several times a day for a child under four years.—*Salamon*.

℞ Acid. carbolic
 Alcoholāā gtt. xv.
 Tr. iodin..... gtt. x.
 Tr. belladonnæ gr. xxx.
 Aq. menth. pip f̄ij. iss.
 Syr. opiat..... f̄ij.

M. Sig.: A teaspoonful every hour to a child of one year.—*Rothe*.

℞ Pulv. acid. boric..... gr. xxxvj
 Div. in chart. No. xii. Sig.: Blow one powder into nose with insufflator every three hours.—*Monti*.

℞ Chloroformi..... f̄ij.
 Æther. sulphuri..... ʒij.
 Ess. terebinthinæ rect. f̄ij. iiss.

M. Sig.: Pour a teaspoonful upon a compress and hold close to the child's mouth. (During paroxysm.) —*Wilde*.

℞ Codeinæ sulphat..... gr. j.
 Acid. carbolic..... ℥viiij.
 Syr. simplicis..... f̄ij. ss.
 Glycerinæ f̄ij.
 Syr. limonis..... f̄ij. ss.

M. Sig.: Teaspoonful every two or three hours.—*Hughes*.

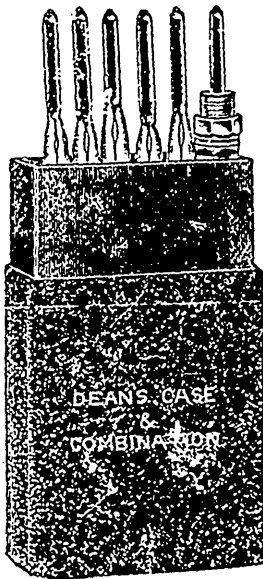
℞ Ex. castaneæ fl f̄ij. iij.

Sig.: Dose for a child five years old, teaspoonful every two hours for three days (during the night after each paroxysm); afterwards three or four times a day.—*Gerhard*.

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WHOOPIING-COUGH (*Continued*).—

R Antipyrin..... gr. ij.
Sacch. alb..... ℥j.

M. Et ft. chart. No. xiv. Sig.:
One powder three times a day and
once at night for very young children.
—*Sonnenberger*.

R Tr. lobeliae,
Syr. scillae.....aa ℥j.
Ex. belladonnae..... gr. iv.

M. Sig.: Thirty drops three times
a day.—*Hazard*.

R Acid. carbolic..... ℥ss.
Potass. chlorat..... ℥ij.
Glycerinae ℥iv.
Aqua.....q. s. ad ℥vj.

M. Sig.: Use with a steam atomizer
three times a day.—*J. Lewis Smith*.

R Sol. cocaini muriat. (5
per cent.)..... ℥ss.

Sig.: Paint the throat and fauces
several times a day.—*Labric*.

R Acid. carbolic. puri... gtt.xv-xx

Sig.: Drop on cotton or in an in-
haler, and inhale for several hours
daily.—*Peck*.

WORMS.

R Pulv. kamala..... gr. v-x.
Syr. aurantii..... ℥ss.
Mucil. tragacan ℥j
Aqua ℥vj.

M. Sig.: Take early in the morn-
ing, and follow by a purge in four
hours. For a child from two to five
years. (Tapeworm.)—*T. H. Tanner*.

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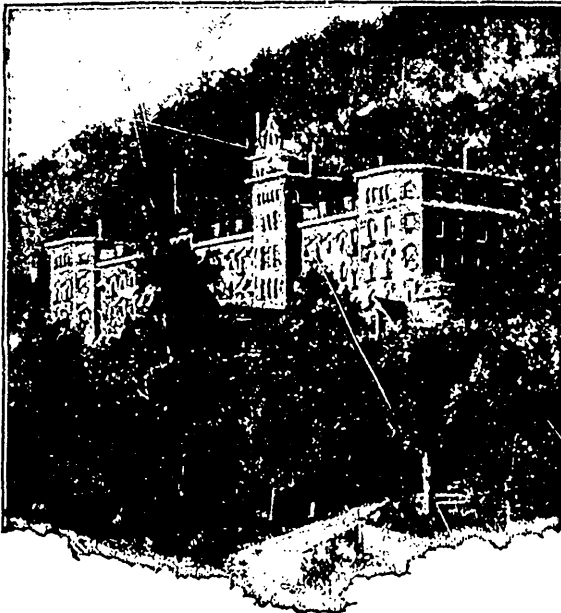
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WORMS (*Continued*).—

℞ Chloroformi,
Ex. aspidi fl. aa fʒj.
Emul. ol. ricini (B. Ph.) fʒij.

M. Sig.: To be taken in the early morning; no food until after thorough action of the bowels. (Tapeworm.)
—*Hughes*.

℞ Granati corticis ʒij.
Ft. infusum. Sig.: To be taken before 11 a.m., and followed after two hours by—

℞ Ol. ricini fʒij.
Ol. terebinth fʒj.
Ex. filicis maris æther. fʒj.

M. Ft. haustus. Sig.: Fasting unnecessary. (Tapeworm.)—*Wilde*.

℞ Thymoli ʒij.

Div. in chart. No. xii. Sig.: First take a dose of castor-oil, then one powder every fifteen minutes, and follow with a second dose of oil. (Tapeworm.)—*Campi*.

℞ Tr. kamalæ fʒss.
Syr. zingiber fʒj.
Syr. acaciæ fʒss.

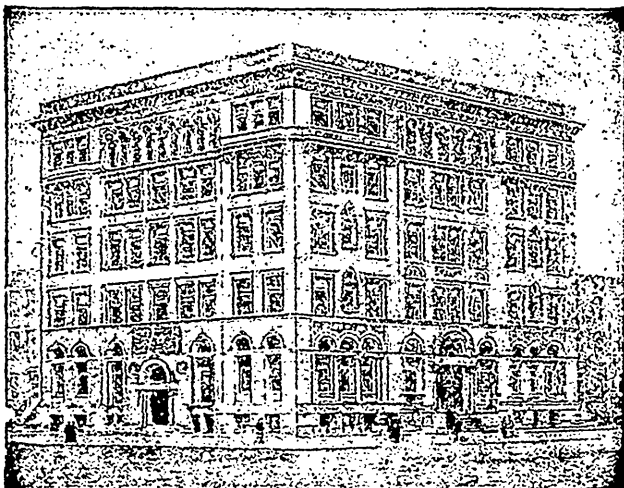
M. Sig.: Take at one dose at bedtime, followed by a purge in the morning. (Tapeworm.)—*L. Starr*.

℞ Flor. koosso ʒiiss-iv.
Ex. filic. mar. æth. fʒiss-ij.
Aq. destillat. fʒij.

M. Sig.: Take in three portions half hourly. (Tapeworm.) *Kinder-Arst*.

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WORMS (*Continued*).—

℞ *Ol. filicis maris æther.* ℥ ii-ij.
Emuls. amygdal. dulc.,
ad...... ℥ vj.

M. Sig.: In the evening a light meal is eaten. At bedtime, about twenty minutes apart from each other, this medicine is taken in two doses. The next morning early, about five o'clock, two tablespoonfuls of castor oil are administered, and these followed about an hour later by another tablespoonful. (Tapeworm.)—*Hugo Engel.*

℞ *Peponis decort.*..... ℥ v-x.
Sacch. alb...... ℥ vj-gr.xv.
Lactis recentis...... ℥ xv.

M. Sig.: Take before breakfast. Follow in two hours by a dose of castor-oil. (Tapeworm.)—*Dupont.*

℞ *Chloroformi*..... f ℥ j.
Syr. simp...... f ℥ j ℥ xl.

M. Sig.: Take in three equal doses at 7 a.m., 9 a.m., and 11 a.m. At midday give two tablespoonfuls of castor oil. (Tapeworm.)—*Le Courier Médical.*

℞ *Ol. terebinthinæ,*
Oleoresin. filicis maris. āā ℥ j.
Mucil. acaciæ...... f ℥ ij.

M. Sig.: Give day before treatment liquid diet and one drachm of compound jalap powder. Give the above the following morning, fasting. Half-hour later a dose of castor oil. (Tapeworm.)—*F. A. A. Smith.*

℞ *Sodii chloridii*..... ℥ x.
Aquæ...... f ℥ vj.

M. Sig.: Inject into the rectum. (Seatworms.)—*Eillard.*

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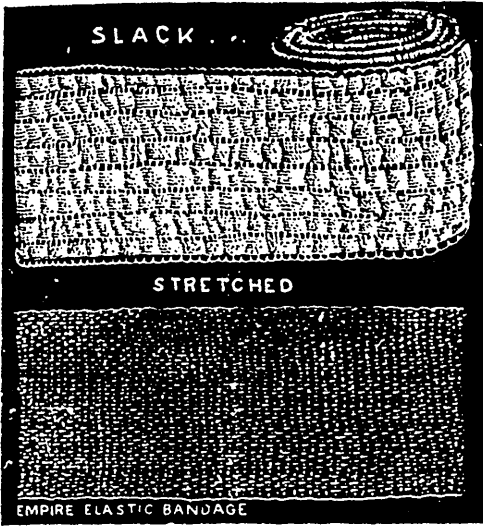
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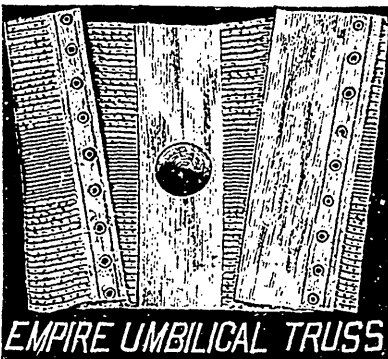
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WORMS (*Continued*).—

℞ Tr. rhei..... gtt. xxx.
Magnesii carbonat. . . gr. iij.
Tr. zingiber..... gtt. j.
Aquæ.....q. s. ad f̄j. iv.

M. Sig.: Warm and use as an injection three times a day. (*Seatworms.*)—*Annals of Gynecology.*

℞ Ferri sulphat..... ʒj.
Infus. quassiaë..... Oj.

M. Sig.: After cleansing the lower bowel with an enema of warm soapsuds, inject the third part of the above on alternate mornings. (*Seatworms.*)—*L. Starr.*

℞ Santonini..... gr. xij.
Ol. theobromæ..... ʒj.

M. Et ft. suppos. No. iv. Sig.: Insert one at night. (*Seatworms.*)—*Hartshorne.*

℞ Santonini..... gr. i-ij.
Hydrarg. chlor. mit... gr. i-ij.
Pulv. aromat..... gr. iv.

M. Et ft. chart. No. iv. Sig.: One at bedtime, to be followed by a dose of castor oil in the morning.—*Goodhart and Starr.*

℞ Ol. chenopodii..... gtt.lx-ʒj
Mucil. acaciæ..... f̄ʒij.
Syr. simplicis..... f̄ʒij.
Aq. cinnam..... f̄ʒij.

M. Sig.: Dessertspoonful three times a day for three days, and repeat after three days. For a child of two years.—*Meigs and Pepper.*

℞ Trochisci santonini (U. S. P.)..... No. xxiv.

Sig.: One to six at bedtime, followed by a dose of castor oil in the morning. (*For lumbrici.*)—*Bartholow.*

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WORMS (*Continued*).—

℞ Ol. filicis maris fʒ iij.
 Ol. chenopodii fʒ j.
 Ol. terebinth fʒ ij.
 Emul. ol. ricini (50 per cent.) q. s. ad fʒ ij.

M. Sig.: Teaspoonful twice a day for a child of six years. (Tapeworm).—*L. Starr*,

℞ Hydrarg. chlor. mit. gr. j.
 Resinæ jalapæ gr. ij.
 Pulv. scammonii gr. v.

M. Et ft. chart. No. i. Sig.: To be taken at bedtime for a child of six years. (Seatworm).—*Goodhart and Starr*.

℞ Tanret's pelletierini. 1 bottle.

Sig.: In the evening use a large laxative injection and take only milk.

The next morning mix the contents of a bottle with a glass of water, and take at one dose; one hour after, take one ounce of compound tincture of jalap mixed with a half glass of water. (Tapeworm).—*L. Starr*.

After a light diet the evening before, give the following on an empty stomach :—

℞ Ol. tiglii gtt. j.
 Chloroform, purif. fʒ j.
 Glycerinæ fʒ j. fʒ ij.

M. Sig.: Take in two doses, half an hour apart. (Tapeworm).—*Pharmaz Zeit.*

℞ Tr. ferri chlor. fʒ ss.
 Aquæ Oj.

Sig.: Inject one-fourth to one-third. (Seatworms).—*Ringer*.

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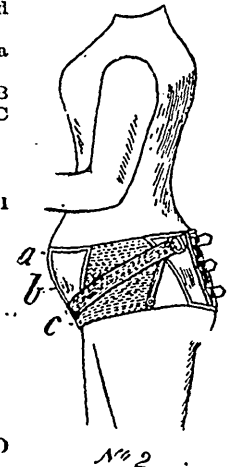
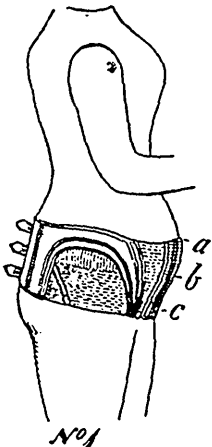
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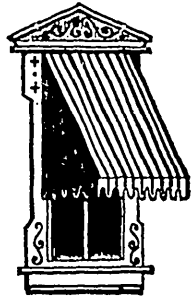
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WORMS (*Continued*).—

℞ Pelletierine sulphat. . gr.vi-viiss.
 Pulv. acid. tannic gr. viiss.
 Syr. simp. f℥ ij.

M. Sig.: Take only milk the night before, and at bedtime an injection. Take the above the following morning before breakfast. Fifteen minutes after take two tablespoonfuls of castor oil. (Tapeworm).—*Labbé*.

℞ Ex. spigelie et senuæ fl f℥ j.
 Santonini gr. viij.

M. Sig.: Teaspoonful for a child of five years. (For lumbrici).—*J. Lewis Smith*.

℞ Tr. kamalæ f℥ iss.
 Syr. aurant, cort f℥ ss.
 Aquæ q. s. ad f℥ iv.

M. Sig., Take in broken doses and at frequent intervals until all is taken. If the worm is not expelled within

two hours after the last dose, give castor oil. (For lumbrici).—*Du Jarradin Beaumetz*.

WOUNDS.—

℞ Iodoform gr. c.
 Thymoli gr. cc.
 Sacch. lact. gr. j.

M. Et ft. pulv. Sig.: Apply as a powder three times a day.—*Witherstone*.

℞ Iodoform. ℥ ij.

Sig.: Use as a dusting powder with dry dressings.—*Bartholow*.

℞ Acid. carbolic,
 Ol. ricini āā f℥ ss,
 Collodii f℥ j.

M. Sig.: "Carbolized collodion."

℞ Hydrarg. chloridi corros gr. viiss.
 Aq. ferventis Oij.

Sig.: Solution (1 to 2000).

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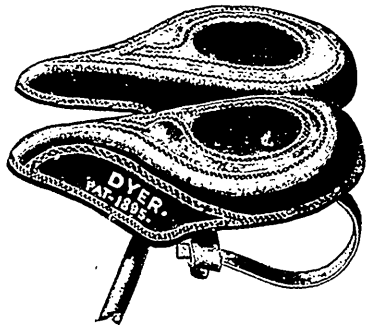
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- ℞ Acid. boracic. ℥ iiss.
Ess. eucalypti f ℥ iiss.
Vasellini ℥ xxv.
M. Sig.: Use as a dressing.—*Brondel*.
- ℞ Tr. eucalypti. f ℥ ij.
Aq. destillat f ℥ iv.
M. Sig.:—*Gimbert*.
- ℞ Phenol sodique f ℥ vj.
M. Sig.: Use pure or diluted with water.—*J. W. White*.
- ℞ Iodol,
Glycerinæ. āā ℥ j.
Vasellini ℥ vij.
M. Sig.: Use locally.—*Wolfenden*.
- ℞ Pulv. acid. salicylic. ℥ j.
M. Sig.: Use as a dusting powder.—*Thiersch*.

- ℞ Iodoform. ℥ j.
Collodii flex. ℥ vij.
M. Sig.: Stitch the edges of the wound together and apply with a brush.—*Bruns*.
- ℞ Pulv. naphthol ℥ j.
M. Sig.: Use as a dusting powder.—*Bouchard*.
- ℞ Acid. carbol. f ℥ j.
Glycerinæ f ℥ ij.
M. Sig.: Use locally.—*Hazard*.

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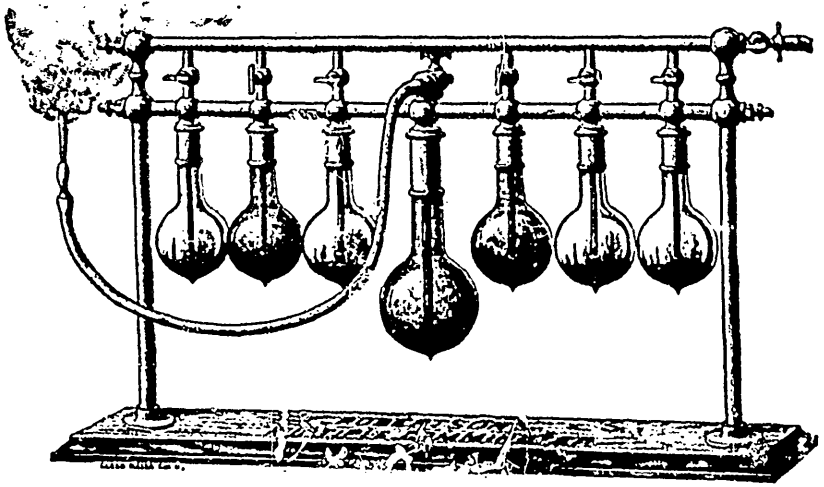
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EXPERT TESTIMONY.—Recently a man in New York died of tuberculosis, eight months after having been struck by a cable car, which inflicted an injury to his knee. In a suit instituted by the widow for damages, expert testimony was introduced to show that the knee became diseased in consequence of the accident, and that the base of operations thereby afforded allowed the bacilli to attack the system and establish their throne in the lungs. Though the defence produced a witness who testified there could be no connection between the injury and the death, the jury returned a verdict of \$6,500 for the plaintiff. A'most a precisely parallel suit recently occurred in the city of Detroit, whereby a woman obtained damages from the municipality on

the strength of testimony that her consumption was the result of a miscarriage induced by a fall upon a defective sidewalk. Strange to say, there was no difficulty in obtaining expert testimony to uphold the pleas made by the attorneys for the plaintiff, and even an expert witness for the defence was so twisted about that his testimony was affirmative rather than negative.—*Medical Age.*

A PROFESSIONAL COMPANION.—Young doctor (on his honeymoon): "Just observe, wifey dear, the curious tints of the sky. That cloud poised on the mountain crest over yonder is exactly the color of a diseased liver."
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ABOUT THE TRUTH OF IT.—Client (to lawyer)—“I’m afraid the physician’s testimony will convict me.” Lawyer (reassuringly)—“Don’t be alarmed about that. I’ll read up a little about poison in the stomach, and in ten minutes I’ll have that doctor in a cold sweat, and make the judge and jury think he is a hired perjurer.”

LOGICAL.—A physician was relating a curious case to a lady. Her grand-daughter was present. “Just fancy!” said he, “last year in one of the Paris hospitals two old people were married, and this morning a son was born to them.” “How old was the husband?” “Eighty.” “And the wife?” “Sixty-five.” “And the child?” asked the little girl.—*Judge.*

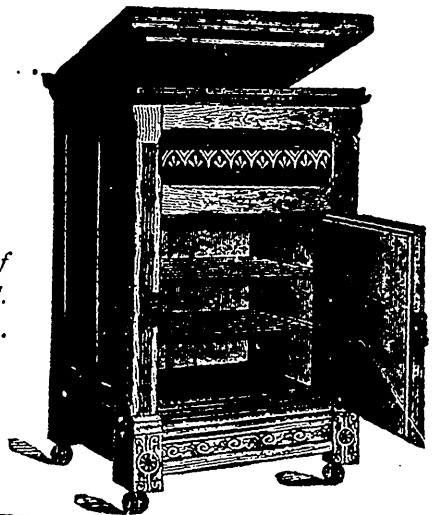
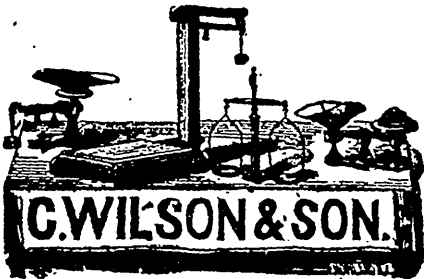
CASTRATION FOR ENLARGED PROSTATE.—London (*Australasian Medical Gazette*) records a case of this operation in a man aged eighty-two years and four months, which he believes to be the greatest age at which it has been successfully performed. The patient first had retention of urine on February 11th, 1894, but had shown symptoms of prostatic enlargement for some months previously. Subsequently he required the use of a catheter, and chronic cystitis supervened. At the beginning of December he was in a pitiable condition owing to want of sleep resulting from the constant need for catheterization. On December 3rd a drainage tube was inserted into the bladder through the perineum, and on the 11th double orchotomy was performed. There

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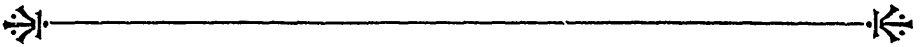


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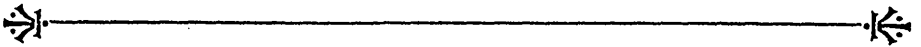
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was no shock, and the wound united by first intention. Drainage and washing out of the bladder was kept up for nearly three weeks. Strength was rapidly regained, and the cystitis had practically disappeared by January 1st, 1895. The urine was at first passed at frequent intervals and in small quantities, but after a few days he was able to retain it for as long as four hours, passing as much as nine ounces on one occasion. He never again required the use of a catheter till his death, which occurred about two months later from an attack of erysipelas of the leg. At the meeting of the South Australian Branch of the British Medical Association before which this paper was read, Dr. Poulton related three cases in men aged

sixty, sixty-one and seventy-three years respectively, in which he had successfully performed castration for the dysuria resulting from prostatic hypertrophy.—*British Med. Journal.*

THE PASTEUR CHAIR.—Until recently there has been no appointment to fill the chair in the French Academy of Medicine left vacant by the death of Pasteur. It will no be occupied by Dr. Roux, who has been made an associate.

When the well meaning young doctor makes his morning call, as usual, and finds his patient dead, it is enough to make him lose confidence in the integrity of his fellow-man.—*Ph. Era.*

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