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A MONTHLY JOURNAL OF  
MEDICINE AND SURGERY.

Vol. XVII.

HALIFAX, NOVA SCOTIA, APRIL, 1905.

No. 4

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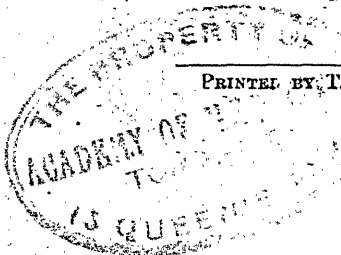
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**FEES.**—The total fees, including laboratory fees examination and dissecting material, \$125 per session.

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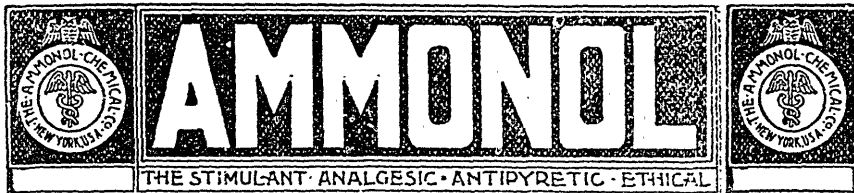
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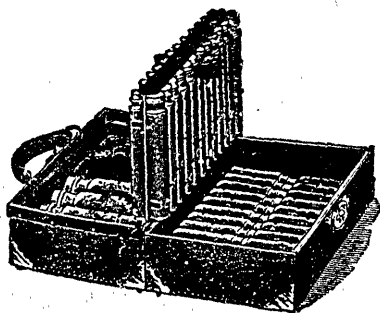
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2ND YEAR.—Organic Chemistry, Anatomy, Practical Anatomy, Materia Medica, Physiology, Embryology, Pathological Histology, Practical Chemistry, Dispensary, Practical Materia Medica. (Pass Primary M. D., C. M. examination).

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

(Pass in Medical Jurisprudence, Pathology, Therapeutics.)

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

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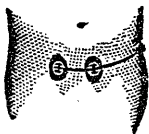
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## Original Communications.

### DUALITY OF MIND.\*

By GEO. G. CORBET, M. D., St. John, N. B.

Our president has requested me to write a paper for this evening, giving my views on psycho-therapy, as I saw it practised by Dr. Sahler, in Kingston, N. Y., during the two weeks I was studying that subject with him. Before telling you my experiences there, it will be necessary for me to go over the groundwork, so as to try and make my subject intelligent to you. So I have chosen the above title.

Substantial progress in any science is impossible in the absence of a working hypothesis, which is universal in its application to the phenomena pertaining to the subject matter. Indeed, until such a hypothesis is discovered and formulated, no subject of human investigation can properly be said to be within the domain of the exact sciences. Thus, astronomy, previous to the promulgation of Kepler's laws and the formulation of the Newtonian hypothesis of gravitation, was in a state of chaos, and its votaries were hopelessly divided by conflicting theories. But the moment Newton promulgated his theorem, a revolution began, which eventually involved the whole scientific world. Astronomy was rescued from the domain of empiricism and became an exact science.

What the Newtonian hypothesis did for astronomy, the atomic theory has done for chemistry. The fact that the literal correctness of a given hypothesis is not demonstrable except by results,

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\*Read before the St. John Medical Society March 29th, 1905.

in no wise militates against its value in the domain to which it belongs. Indeed, it would cease to be a hypothesis the moment it were demonstrated. Newton's theorem is undemonstrable except from its results. Its correspondence, however, with every known fact, the facility with which astronomical calculations can be made, and the precision with which every result can be predicted, constitutes a sufficient demonstration of its substantial correctness to inspire the absolute confidence of the scientific world. It is a trite and true saying that one antagonistic fact will destroy the value of the finest theory ever evolved. It is equally impossible to demonstrate the abstract correctness of the atomic theory. An appeal to the evidence found in uniform results is all that is possible to one who would give a reason for the faith that is in him. No one ever *saw*, *felt*, *tasted*, or *smelled* an atom. It exists for man only in hypothesis. Nevertheless, the fact remains, that in all the wide range of human investigation there is not a more magnificent generalization, nor one more useful to mankind in its practical results, than the atomic theory.

The most that can be said of any scientific hypothesis is, that whether true in the abstract or not, everything happens just as though it were true. When this test of universality is applied, when no known fact remains that is unexplained by it, the world is justified in assuming it to be true, and in deducting from it even the most momentous conclusions. If, on the contrary, there is one fact pertaining to the subject-matter under investigation which remains outside the domain of the hypothesis, or which is unexplained by it, it is indubitable evidence that the hypothesis is unsafe, untrue, and consequently worthless for all practical purposes of sound reasoning. In the field of psychological investigation a satisfactory working hypothesis has never been formulated. That is to say, no theory has been advanced which embraces all psychological phenomena. Many theories have been advanced, it is true, to account for the various classes of phenomena which have been observed. Some of them are very plausible and satisfactory—to their authors when applied to a particular class of facts, but utterly fail when confronted with another class. Thus, the students of the science of hypnotism are, and since the days of Mesmer have been, hopelessly divided into schools which wage war upon each other's theories and dispute the correctness of each other's observations of facts.

Mesmer's theory of fluidic emanations, which he termed "animal magnetism," seemed to account for the facts which he observed. John Bovee Dod's electrical theory—positive lungs and negative blood,—was sufficiently plausible in its day to attract many followers. Braid's physiological explanation of certain classes of the phenomena afforded in his time much comfort to those who believe that there is nothing in man which cannot be weighed in a balance, or carved with a scalpel. In our own day we find the Paris school, which holds that hypnotism is a disease of the nervous system, that its phenomena are explicable on physiological principles and that the suggestions of the operator play but a secondary role in their production, and that they can be produced, or successfully studied, only in diseased persons.

On the other hand, the Nancy school of hypnotists holds that the science can be studied with profit only in perfectly healthy persons, and from a purely psychological standpoint, and that suggestion is the all-potent factor in the production of all hypnotic phenomena.

Another class of phenomena, about which an infinite variety of opinion prevails, may be mentioned under the general head of mental therapeutics. Under this generic title may be grouped the invocations of the gods by the Egyptian priests, the magic formulæ of the disciples of Esculapius, the sympathetic powder of Paracelsus; the King's touch for the cure of goitre, and by the systems known as mind cure, faith cure, Christian science, and suggestive therapeutics.

One fact, pregnant with importance, pertains to all these systems, and that is that marvellous cures are constantly being effected through their agencies. To the casual observer it would seem to be almost self-evident that, underlying all, there must be some one principle which, once understood, would show them to be identical as to cause and mode of operation.

What is true of the phenomena embraced under the general head of mental therapeutics is also true of the whole range of psychological phenomena, namely, the want of a working hypothesis which shall apply to all the facts that have been observed and authenticated. No successful attempt has heretofore been made to supply this want, nor has success been possible until a very recent period, for the simple reason that previous to the discovery of certain facts in psychological science the scientific world was without the necessary data from which a correct hypothesis could be formulated.

The researches of Professor Liebault in the domain of hypnotism, seconded by those of his pupil, Professor Bernheim, have resulted in discoveries which throw a flood of light on the whole field of psychological investigation, their field of observation being confined to hypnotism, chiefly as a therapeutic agent. The discovery is this: that hypnotic subjects are constantly amenable to the power of suggestion: that suggestion is the all-potent factor in the production of all hypnotic phenomena. This proposition has been demonstrated to be true beyond the possibility of a reasonable doubt. This fact supplies the missing link in the chain of propositions necessary for a complete working hypothesis for the subject under consideration.

We will now state the three main propositions:

*First.* The dual character of man's mental organization. Man has an objective and subjective mind.

*Second.* The subjective mind is constantly amenable to control by suggestion;

*Third.* The subjective mind is incapable of inductive reasoning.

My paper this evening will deal principally with our first proposition—*The Dual Character of Man's Mental Organization.*

Man has, or appears to have, two minds, each endowed with separate and distinct attributes and powers; each capable, under certain conditions, of independent action. It should be clearly understood at the outset that, for the purpose of arriving at a correct conclusion it is a matter of indifference whether we consider that man is endowed with two distinct minds, or that his one mind possesses certain attributes and powers under some conditions, and certain other attributes and powers under other conditions. It is sufficient to know that everything happens just as though he were endowed with a dual mental organization. This idea is far from being new. The essential truth of the proposition has been recognized by philosophers in all ages and nations of the civilized world. Plato's idea of terrestrial man was that he is a "trinity of soul, soul-body, and earth-body.

Of modern writers who accept the dual theory, Prof. Wigan, Dr. Brown-Sequard, and Prof. Proctor are notable examples.

The objective mind takes cognizance of the objective world. Its media of observation are the five physical senses. It is the outgrowth of man's physical necessities. It is his guide in his struggle

with his material environment. Its highest function is that of reasoning.

The subjective mind takes cognizance of its environment by means independent of the physical senses. It perceives by intuition. It is the seat of the emotions and storehouse of memory. It performs its highest functions when the objective senses are in abeyance. In a word, it is that intelligence which makes itself manifest in an hypnotic subject when he is in a state of somnambulism. And the real distinctive difference between the two minds seems to consist in the fact that the "objective mind" is merely the function of the physical brain; while the "subjective mind" is a distinct entity, possessing independent powers and functions, having a mental organization of its own, and being capable of sustaining an existence independently of the body. In other words, it is the soul. And the following propositions cannot be intelligently disputed:

*First.* That the objective mind, or let us say, man in his normal condition, is not controllable against reason, positive knowledge, or the evidence of his senses, by the suggestions of another.

*Second.* That the subjective mind, or man in the hypnotic state, is unqualifiedly and constantly amenable to the power of suggestion.

The two minds being possessed of independent powers and functions, it follows as a necessary corollary that the subjective mind of an individual is as amenable to the control of his own objective mind (auto-suggestion), as to the objective mind of another.

For instance, it is well known that a person cannot be hypnotized against his will. As the hypnotic condition is usually induced by the suggestion of the operator, his failure is due to the contrary auto-suggestion of the subject. One of the most important distinctions between the objective and subjective minds pertains to the function of reason:

*First.* The objective mind is capable of reasoning by all methods—inductive and deductive, analytic and synthetic.

*Second.* The subjective mind is incapable of inductive reasoning. The subjective mind never classifies a series of known facts, and reasons from them up to general principles; but, given a general principle to start with, it will reason deductively from that down to all legitimate inferences, with a marvellous cogency and power.

It must not be understood from the statement of the general proposition regarding the subjective process of reasoning, that persons

in the subjective state necessarily go through the forms of syllogistic reasoning. On the the contrary, they seldom, if ever, employ the forms of syllogism, and it is rare that their discourses are argumentative. They are generally, in fact, dogmatic to the last degree. It never seems to occur to them that what they state to be a fact can possibly be, in the slightest degree, doubtful. A doubt expressed or implied, of their perfect integrity, of the correctness of their statements, or of the genuineness of the phenomena which are being exhibited through them, invariably results in confusion and distress of mind. Hence they are incapable of controversial argument, a fact which constitutes another important distinction between the objective and subjective minds. To traverse openly the statements of a person in the subjective state, is certain to restore him to the normal condition, often with a severe nervous shock. The explanation of these facts is easy to find in the constant amenability of the subjective mind to the power of suggestion. They are speaking or acting from the standpoint of one suggestion, and to controvert it is to offer a counter suggestion which is equally potent with the first. The result is, and must necessarily be, utter confusion of mind and nervous excitement on the part of the subject.

From the above it will be seen that while the subjective mind may not employ the forms of the syllogism, its conclusions are syllogistically correct, are logically deducible from the premises imparted to it by suggestion.

One of the most striking peculiarities of the subjective mind, as distinguished from the objective, consists in its prodigious memory. It would perhaps be hazardous to say that the memory of the subjective mind is perfect, but there is good ground for believing that such a proposition would be substantially true. It must be understood that this remark applies only to the most profoundly subjective state and to the most favorable conditions. In all degrees of hypnotic sleep, however, the exaltation of the memory is one of the most pronounced of the attendant phenomena. Psychologists have recognized this phenomenon and many have declared their conviction that the minutest details of acquired knowledge are recorded upon the tablets of the mind, and that they only require favorable conditions to reveal their treasures.

Sir Wm. Hamilton, in his lectures on metaphysics, says: "The evidence on this point shows that the mind frequently contains whole

systems of knowledge, which, though in our normal state they have faded into absolute oblivion, may in certain abnormal states, as madness, febrile delirium, somnambulism, catalepsy, etc., flash out in luminous consciousness, and even throw into the shade of unconsciousness those other systems by which they had, for a long period, been eclipsed, and even extinguished. For example, there are cases in which the extinct memory of whole languages was suddenly restored and, which is still more remarkable, in which the faculty was exhibited of accurately repeating, in known or unknown tongues, passages which were never within the grasp of the conscious memory in the normal state."

A highly interesting case is given by Mr. Coleridge in his "Biographia Literaria." (Edit. 1847.) "It occurred," says Mr. Coleridge, "in a Roman Catholic town in Germany, a year or two before my arrival at Gottingen. A young woman, four or five and twenty, who never could read or write, was seized with a nervous fever, during which, according to the asseverations of all the priests and monks of the neighborhood, she came possessed, and as it appeared, by a very learned devil. She continued incessantly talking Latin, Greek, and Hebrew in very pompous tones and with most distinct enunciation. This possession was rendered more probable by the known fact, that she was, or had been, a heretic. Voltaire humorously advises the devil to decline acquaintance with medical men, and it would have been more to his (devil) reputation if he had taken this advice in the present instance. The case had attracted the attention of a young physician, and by his statements many eminent physiologists and psychologists visited the town and cross-examined the case on the spot. Sheets of her ravings were taken down from her own mouth, and were found to consist of sentences coherent and intelligible, each for itself, but with little or no connection with each other. Of Hebrew, only a small portion could be traced to the Bible, the remainder seeming to be in the Rabbinical dialect. All trick or conspiracy was out of the question. Not only had the young woman been a harmless, simple creature, but she was evidently laboring under a nervous fever.

"In the town in which she had been resident for many years as a servant in different families, no solution presented itself. The young physician, however, determined to trace her past life step by step, for the patient herself was incapable of returning a rational



answer. He at length succeeded in discovering the place where her parents had lived, travelled thither, found them dead, but an uncle surviving; and from him learned that the patient had been charitably taken by an old Protestant pastor at nine years old, and had remained with him some years, even till the old man's death. Of this pastor the uncle knew nothing, but that he was a very good man. After much difficulty and search the physician discovered a niece of the pastor's who had lived with him as his housekeeper. She remembered the girl. Anxious inquiries were then made concerning the pastor's habits, and the solution of the phenomena was then solved. For it appeared that it had been the old man's custom for years to walk up and down a passage in his house into which the kitchen door opened and to read to himself, with a loud voice, out of his favorite books. A considerable number of these were still in the niece's possession. She added that he was a very learned man and a great Hebraist. Among the books were found a collection of Rabbinical writings, together with several of Greek and Latin Fathers, and the physician succeeded in indentifying so many passages with those taken down at the young woman's bedside that no doubt could remain in any rational mind concerning the true origin of the impressions made on her nervous system."

You will not fail to observe that subjects reproduce simply what they have seen, heard, or read. The impressions on the objective mind of this case must have been superficial to the last degree, but the result demonstrated that the record upon the tablets of the subjective mind was ineffaceable.

This is not an isolated case. Thousands have been recorded by most trustworthy observers. Their significance cannot be mistaken. In their light the wonderful mental feats of trance-speakers are easily explicable without the aid of supernatural agency. Speaking in "unknown tongues" is seen to be merely a feat of the subjective memory. Objective memory has an absolute localization in the cerebral cortex. Subjective memory is the inherent power, and free free from anatomical relations.

When an idea again recurs without the operation of the like object on the external sensory, it is a remembrance (subjective memory); if it be sought after by the mind, and with pain and endeavor found, and brought again into view, it is recollection (objective memory). We will proceed to detail other peculiarities which

distinguish the two minds, and to offer a few practical illustrations of the principles involved from common observation and to apply the principles to the solution of various problems of everyday experience. If any one doubts the wisdom of the all-wise Providence in investing objective mind with the controlling power in the dual organization, let him visit a mad-house. There he will see all shades and degrees of subjective control. There you will see men whose objective minds have completely abdicated the throne, and whose subjective mind is in pursuit of one idea, controlled by one dominant impression, which subordinates all others. These are the mono-maniacs—the victim of false suggestion.

These suggestions may be given from without, in a thousand different ways, which will be readily recognized by the student of insanity, or by auto-suggestion. Long and intense concentration of mind upon one subject, and inordinate egotism, will be readily recognized as striking illustrations of the power of auto-suggestion as a factor in monomania. The maniac is one whose objective mind is disorganized by disease of its organ, the brain, the result being distortion of objective impressions, and consequently false suggestions to the subjective mind.

The question arises, what part does the subjective mind play in the normal operation of the human intellect.

This may be answered in a general way, by saying that the most perfect exhibition of intellectual power is the result of the synchronous action of the objective and subjective minds. When it is seen in its perfection the world names it Genius. In this condition the individual has the benefit of all the reasoning powers of the objective mind, combined with the perfect memory of the subjective mind, and its marvellous power of syllogistic arrangement of its resources. Probably the most striking examples which history affords were Napoleon Bonaparte and Shakespeare.

True genius is the result of the synchronous action of the two minds, neither unduly predominating or usurping the powers and functions of the other. When the subjective is allowed to dominate, the resulting acts of the individual are denominated the eccentricities of genius. When the subjective usurps complete control the individual goes insane.

Poets and artists are examples of persons whose intellectual labors are characterized by subjective activity in a marked degree, so marked

is the peculiarity of the poetic mind in this respect that it has become almost proverbial. Lord Macaulay, in his essay on Milton uses language which shows that he clearly recognized the subjective element in all true poetry. He says :

“Perhaps no man can be a poet ; or can even enjoy poetry without a certain unsoundness of mind,—if anything which gives so much pleasure, ought to be called unsoundness. By poetry we mean not, of course, all writing in verse, nor even all good writing in verse. Our definition excludes many metrical compositions which on other grounds deserve the highest praise. By poetry we mean the art of employing words in such a manner as to produce an illusion on the imagination, the art of doing by means of words what the painter does by means of colors. Thus the greatest of poets has described it in lines universally admired for the vigor and felicity of their diction, and still more valuable on account of the just notion which they convey of the art in which he excelled.

“As imagination bodies forth  
The forms of things unknown, the poet's pen  
Turns them to shapes, and gives to airy nothing  
A local habitation and a name.”

These are the fruits of the “fine frenzy” which he ascribes to the poet. A fine frenzy doubtless, but still a frenzy. Truth, indeed, is essential to poetry, but it is the truth of madness. The reasonings are just, but the premises are false. After the first suppositions have been made, everything ought to be consistent, but those first suppositions require a degree of credulity which almost amounts to a partial and temporary derangement of the intellect. Hence of all people children are the most imaginative. They abandon themselves without reserve to every illusion.

Every image which is strongly presented to their mental eye produces on them the effect of reality. No man, whatever his sensibility may be, is ever affected by Hamlet or Lear as a little girl is affected by the story of poor Red Riding Hood. She knows that it is all false, that wolves cannot speak, that there are no wolves in England, yet in spite of her knowledge she believes, she weeps, she trembles, she dare not go into a dark room, lest she should feel the teeth of the monster at her throat. Such is the despotism of the imagination over uncivilized minds.”

In other words such is the despotism of suggestion over the subjective mind.

This is an age of purely objective cultivation. All of our inductive reasonings are strained to their highest tension in an effort to penetrate the secrets of physical nature, and to harness her dynamic forces. Meantime the normal exercise of that co-ordinate power in our mental structure is fast falling into desuetude, and its manifestations not being understood, are relegated to the domain of superstition.

The perfect memory of the subjective mind, its instant command of all the acquired knowledge of the individual, however superficially attained, or imperfectly remembered, objectively is a source of power. But it is liable at times to be a source of inconvenience, for it sometimes happens that in ordinary composition a person will unconsciously reproduce, verbatim, some long forgotten expressions, perhaps a stanza or even an entire poem. It may be his own composition, but it is likely to be something he has read years before and forgotten, objectively, as soon as read. In this way we may explain many cases of plagiarism.

Another class of persons who possess the faculty of evoking at will the powers of the subjective mind, are the great orators, as Patrick Henry, Charles Phillips—the Irish orator, Henry Clay, Daniel Webster, and many others.

Two important conclusions are deducible from the premises laid down :

- 1st. Develop the objective and subjective faculties harmoniously.
- 2nd. The subjective mind should never be allowed to usurp control of the dual mental organization, for to give the subjective mind control is for reason to abdicate her throne.

Having established the first, second and third propositions by the preceding facts, we will present a subsidiary proposition, namely : "The subjective mind has absolute control of the functions, conditions and sensations of the body."

If you can agree with me that these propositions are correct, we will be able to account for everything that is superusual. I will try and relate a few instances coming under my observation in Kingston, N. Y. Dr. C. O. Sahler has on an average about sixty patients which he treats daily in his sanitarium. His patients are mostly nervous and mental cases, from all parts of America. I have seen him giving his nephew a whole teaspoonful of cayenne pepper while in the

suggestive state, and he asked for more calling it sugar. Ammonia he would call perfume, and perfume, ammonia. No tricks in this case, as I tasted or smelled each article before letting the subject do so.

One hour after my arrival, a physician arrived who had suffered with asthma since 1894. He was a graduate of both schools of medicine, homeopathic and allopathic, having practised in Brooklyn previous to his illness. In 1889 he had an attack of influenza from which he dates his illness. He had the best medical advice for years from both schools, and being wealthy he was able to live where he liked. He spent several years in California. When he arrived in Kingston he was cyanotic and could not eat, and anything cold like ice cream brought on a severe paroxysm, during which he would almost choke to death for want of breath. He had failed in weight about 40 pounds and told me he wished he were dead. I saw him in company with Dr. Sahler and saw him relieved in five minutes so he could breath by the power of suggestion. Dr. Sahler made him take ice cream and full diet, without any return of shortness of breath for seven hours. In three days he was able to go out and enjoy life and improved steadily while I was there. There were many other cases which were improving under suggestive treatment. Such cases as chorea, hysteria, mental diseases, etc. While there I also tried suggestion on some patients with success. But it is only in a place like a sanitarium that you can get your greatest success. Dr. Sahler gets only chronic cases, but I think his percentage of cures would be greater if he would combine other treatments, as electro-hydro-drug-therapy. I wish to state that Dr. Sahler is a medical practitioner in good standing.

Remarkable recoveries have been occurring through all the ages, as the results of mental states and nature's own power. They will not be able to displace either the skilled surgeon or educated physician. Most sensible persons will prefer a physician who understands both the body and the mind, who can be "father confessor" to the sick man, relieving him of the responsibility of treating himself, quieting his mind, strengthening him with hope and stimulating him by his personal presence, one who, understanding the mineral, plant, and animal substances included in the *Materia Medica* can assist nature, interfering only when absolutely necessary and certainly safe, too learned and honest, when not knowing what to do, never to do he knows not what. They will also prefer a physician who can relieve their pains when incurable, smooth their pathway to the inevitable end, or when he has the happiness to see them convalescent, will be able to give them such hygienic hints as may prevent a recurrence of the malady, or save them from something worse. Let us investigate : sceptically, if you will, but investigate.

*References, Hudson, Buckley.*

## THE RESIDUUM.\*

By GEORGE W. T. IRVING, Provincial Education Department, Halifax, N. S.

I have been asked by your secretary to contribute a paper to your association on some aspects of social life. To me has been allotted the task—or rather the privilege—of speaking to you on the seamy side of life, or as it has been called in your notice slip, the residuum—that which is left over as unfit for the building up of a strong, healthy and vigorous community.

The subject is a large one and the ramifications in all directions so extensive, that I shall only have time to treat briefly a few of the phases, passing over many others entirely.

If we wish to study the problem of the residuum to any advantage, to see its magnitude, to find out the causes that have produced and are still producing it, to trace its debilitating effects upon society, and to suggest remedies, we shall have to take off the lid and look into this seething caldron. In doing this we shall discover many things that are by no means pleasant or agreeable. But I presume all present have passed beyond the days of childhood and even of adolescence, and are looking seriously on all social problems. If in the discussion of this subject it is found necessary to call a spade a spade, I wish you to remember that the surgeon who fails through indifference or timidity to strike deep enough to reach the source of the trouble might almost as well keep his lancet in his pocket.

You will have noticed in your slips, a tentative division of this residuum into, *Poor, Unfit and Criminal*. As these different classes spring from the same soil, we may for our present purpose group them all together under a general name, *Incapables*.

Incapable of keeping pace with the march of modern civilization, through some physical, mental or moral defect, some fall out by the way exhausted by the struggle for existence, others unwilling to submit to honest toil to obtain a living, become veritable Ishmaelites, their hand against every man and every man's hand against them.

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\*Read before Nova Scotia Branch British Medical Association, March 22nd, 1905.

In this country the conditions of life with respect to climate, food supply and our general surroundings are conducive to a vigorous manhood and womanhood in those blessed with a sound mind in a sound body. On the other hand those of delicate mould find the climatic conditions very trying. If it is necessary for the intelligent, industrious man to employ his whole time and talents in order to get the best out of life, what is the chance for the weakling? If we were living within the tropics, where we might tickle the ground with a hoe and it would laugh with a harvest, the problem of existence would be much easier. Here we have to spend an enormous amount of energy in protecting our bodies from the cold of winter by means of clothing and fuel. There, these things are superfluous. Seeing that to meet the cost of living requires such an output of energy, any means by which the number of our incapables could be reduced to a minimum should be heartily welcomed.

In all civilized countries, and particularly in those localities where there are large aggregations of humanity, the problem of how to deal with the lower strata of society is attracting great attention from statesmen, philanthropists and sociologists. While in large cities only is there full scope and opportunity for the vicious to prey upon the law-abiding, still in smaller cities like our own there is a very undesirable element. Nor is this confined to our towns; in many sparsely settled country districts may be found one or more families whose presence is a menace to the health and morals of the neighborhood.

A half century ago, when life was not so strenuous as to-day, the need of institutions for the care of the unfortunate and the unfit was not so pressing as now. Then voluntary assistance was more readily obtainable. To-day time is money, and service, rendered no matter by whom, has its cash value, and for this reason we must look at this problem from the economic rather than from the philanthropic point of view. Now some may think that we are going backward when we seek to transfer to the state the charge of all unfortunates, many of whom have been hitherto the special care of the humane. I think it will be found, that after we have systematically cared for all pronounced cases among the incapables, there will still be a wide field for the exercise of the altruistic spirit in assisting those among our friends and neighbors where a little timely aid or counsel might prevent misfortune or ruin.

I have said that from the same soil we get the different varieties of incapables, both harmful and harmless. In order to test this statement, it will be necessary to look abroad for illustrations, since there are no available data in this country to work upon.

One of the most searching inquiries that I am acquainted with is that of Robt. Dugdale of New York, in his history of the "Jukes" family, "a study in crime, pauperism, disease and heredity." The name "Jukes" is a pseudonym used to reduce the forty-two family names included in the lineage to one generic application." After a careful study of the life history of this family, stretching through some six generations and including hundreds of individuals, he makes the following statement :

"*Fornication*, either consanguineous or not, is the backbone of their habits, flanked on one side by *pauperism*, on the other by *crime*. The secondary features are *prostitution*, with its complement of *bastardy*, and its resultant neglected and miseducated childhood; *exhaustion* with its complement *intemperance* and its resultant unbalanced minds; and *disease* with its complement *extinction*."

This statement, the result of a careful and searching analysis of the facts obtained in his inquiry, shows the close connection between the different classes of our residuum. He also states, as many other students of this subject have observed, that the elder sons of a degenerate family are likely to be criminals while the younger ones are paupers. Thus we may find that from the same stock, if not from the same household, may come the bold desperado as an extreme type of the criminal and the poor weakling totally unfit to provide for his own wants. Fortunately for us we have no such formidable array of degeneracy in this country. Ours appear to be chiefly isolated cases. Perhaps if some one had the time to investigate the past history of all those persons who are either pensioners on our charity or inmates of our prisons and preventive institutions, we might find some of them a last link in a chain that reaches back through several generations of vicious ancestry.

If we look at the various institutions in this city for the care of those unable or unfit to care for themselves, we shall be surprised at the number of them and the amount of work they are doing. There is not one of these we can do without. In fact there are others needed. However much it may cost to maintain them it will be cheaper to do so than to turn the inmates on the street.



The cost of maintaining our charitable and penal institutions might be taken as a measure of the extent of the pressing misery and suffering around us. Not less than one quarter of a million dollars is spent annually for maintenance; this is in addition to the original outlay for equipment. This sum does not include the amount spent in charity by churches, families and individuals.

A marked feature of these institutions is their rapid growth, the percentage in many of them being larger than the rate of growth in the population of the Province. Whether this state of affairs is due to increased vigilance on the part of those in authority or whether it is due to a more rapid decadence among our people than in the past, or whether the removal of so many of our strongest and most progressive people to the United States and our own North-west has lowered the general power of resistance to the various kinds of vice, disease and crime, or whether all these causes may not be in operation at the same time, we cannot now consider. At any rate we find ourselves confronted by a condition and not a theory.

Taking for granted that we have a large measure of misery in various forms in our midst, let us see if we can discover any of the causes—either proximate or ultimate—that are producing this state of things. I presume there are no exceptional circumstances in our case that distinguish us from other cities.

The two great factors in the production of the submerged are heredity and environment. The first fixes the organic characteristics of the individual, the latter affects modifications in that heredity. Heredity furnishes the elements of character derived from the parent; environment all the conditions after birth that help to shape our careers.

One of the first problems to be considered in dealing with the unfit, whether on the side of pauperism or of crime,—and it is by no means a simple one—is to discover the part played by each of these factors in the formation of the character of the individual under consideration. If it is found that the taint from ancestral blood is but slight, then a change of environment will in all probability effect a great change in conduct. If on the other hand the investigation reveals a pronounced degenerate ancestry, the chances for an honest course of life are upon the whole very problematical. As soon as the general public has recognized the fact that the residuum is a diseased

portion of the social organism and requires treatment and care just as much as disease in the human body, we shall be on the way towards a rational solution of our problem.

I wish here to draw your attention to the distinction between poverty and pauperism. Poverty as such brings no charge to the state. A man may be poor, have barely enough of this world's goods to prevent suffering in his family, yet if he retains a spirit of manly independence and would sooner live on a penny of his own earning than accept pounds at the hand of charity, we should have no fear either of him or of his offspring. But the pauper on the other hand is a different person. Unable through some mental or physical defect to earn a living, he seeks it where it can be obtained the easiest. He follows the line of least resistance, through private beneficence, through churches or societies, and when these fail, he finally lands in the poorhouse.

You will remember a short time ago, the British press drew the attention of the public to the official statement of the recruiting sergeant that the British race was deteriorating as shown by the large number rejected when applying for enlistment in the army. This was up for discussion at a late meeting of scientific men on the other side. The large inflow from the country districts into the towns and cities—the change from an agricultural to an industrial life—was considered the chief contributing cause of this deterioration.

Those of the better class usually succeed and serve to replenish the exhausted ranks in the professions and in mercantile life in the cities. But the recruits for our residuum come largely from the unskilled workmen who are so poorly prepared for the great change in their mode of life. Working all day in close and unsanitary quarters and spending their nights often among worse surroundings, we cannot wonder that they show signs of deterioration very soon. Although the first generation fresh from the country may be able to withstand for some time the debilitating effects of their surroundings, it is in the second and third generations that the weakening process begins to show itself. Insufficient food at irregular intervals, in consequence of the fitful employment of the unskilled laborer, results in an inferior physique in the offspring, as may be seen in certain specimens of slum children that come to this country from abroad. The huddling together of large families in one or two small rooms does perhaps more than anything else to blunt the moral sense of the young.

It has been said that one of the greatest steps made by man in his upward progress, was when he discarded the circular hut or tent for the square cornered house. In the hut there is no opportunity for privacy, as it is not constructed for division, but the square cornered house is expressly adapted for division into rooms where there may be complete seclusion for any members of the household. No people or tribe or family can rise above a certain low level who sleep promiscuously around a camp-fire with their toes in the ashes. Any community that permits the packing of families into cramped quarters like sardines in a box is sowing the seeds of a noxious plant that will most surely spring up, flourish and produce as its fruitage, vice and misery, if not crime itself. The overcrowding of rickety tenement houses, where the ordinary decencies of life cannot be observed, is one of the most fertile sources of moral decadence.

A fundamental prerequisite for the moral upbringing of a family is the proper facilities for the due separation of the sexes. When this cannot be observed, the community itself becomes responsible for the consequences. No condition of affairs should be suffered to exist that would tarnish the crowning glory of our social fabric—female modesty.

Looking at overcrowding from the standpoint of physical health, Rowntree in his "Poverty, a Study of Town Life," says: "Overcrowding causes debility. The air is vitiated and the people herd in their unhealthy beds, in their unhealthy rooms, in their unhealthy slums, and become languid and worn out. They go about with a jaded and spiritless air." Her late Majesty's Commission for inquiring into the housing of the working classes, says: "The general deterioration in the health of the people is a worse feature of overcrowding even than the encouragement by it of infectious diseases. It has the effect of reducing their stamina and thus producing consumption and diseases arising from general debility of the system, whereby life is shortened."

During the late autumn I visited quite a number of tenements in different parts of the city, for the express purpose of becoming acquainted with the housing of the extreme poor and wretched. Here I wish to thank various members of the medical profession who assisted me in my search; several ladies who are spending their time and strength in ministering to the wants of the sick and needy, and whose knowledge of existing conditions has been a great service to me; also those connected with the different societies and institutions in

the city, and many others who have kindly aided me. The definition of "overcrowding" adopted by writers on social questions, and that also of the Registrar-General of England, is: "Overcrowding is said to exist when the average number of persons per room is *more than two*." In one tenement I found a family of six, husband, wife and four children living in one room and by no means a large one. On the floor was a child three years old that had never walked, while the infant in the mother's arms looked so emaciated and languid, I fear it will never reach the walking stage. I was told of a case where a family of *nine*, father, mother and *seven* children, were living in one room. When found the man was making a sled in the room, and to add still more to the misery a child sick with a contagious disease was lying on a shelf, there being no other place to put it.

Had I the pen of a ready writer, I could a tale unfold that would appear to border on the sensational, a tale of poverty, misery, disease, squalor and vice, and the material for such a story can be found within a few hundred yards of this place. But the title of this lecture course forbids such treatment, one is expected to state facts and those only in a plain manner.

Passing along one of our residential streets, where the outward appearance of the houses seemed quite respectable, I was switched off into a lane where some three or four shanties were huddled together. The outward appearance was exceedingly uninviting. The general tumble down look on the outside augured poorly for comfort within. We entered one of these houses, directly from outside into the living room, which I should judge was about 12 feet square. Adjoining this was a smaller one about 5 by 7, in which a young man was lying in an advanced stage of consumption. This poor fellow was within a few feet of the cooking stove in the larger room. One very small window in each admitted light; they never seemed to have been used for the purpose of ventilation. The walls and ceiling were reeking with the accumulated grime and smoke of years. The air was stifling and laden with effluvia from the inmates and their belongings. Besides these two rooms there was an attic reached by a ladder. This I presume was used as a sleeping-room, though the quarters must have been very cramped. These houses had no cellars, they were simply resting on the ground, no sewerage, and no water inside except what came through the roof when it rained. So disreputable looking was this place that I do not think any of our

farmers would use it for a pig-stye, much less for a cow-shed or a horse-stable. I have chosen this one, not because it was particularly worse than many others, for it was not, but because the condition of the inmates appealed to me.

On one of the coldest mornings this winter there was discovered a case of such extreme poverty and helplessness that I would scarcely have credited it, had I not visited the place myself. The room occupied was in a large building near the centre of the city. The outside door was kept closed by means of a small log braced against it. This door admitted to a kind of hall or vestibule, which I judged was occupied at times as a tenement. Opening an inside door, which did not come down to the threshold by about an inch, we entered a room, cold, cheerless, windswept, in which were two women. The elder one—the mother—past middle life, was lying in a bed with very scanty covering, ill of pneumonia; the younger—her daughter—about 30 years of age, was paralyzed on one side and was subject to epileptic fits. They were found that cold morning with the wind whistling through the room, absolutely without food or fuel, perishing of cold, sickness and hunger in the midst of plenty. I know nothing of the causes that brought them to such a state except what appeared on the surface. Before the sickness of the mother, who was the only wage earner, they must have been living very near the poverty line. At the best the struggle for existence must have been very severe. When misfortune came they succumbed. These two are types of two classes of the poor; one was able to earn her living until sickness came, and will need assistance to tide over the present; the other belongs to the number of those who are unable both physically and mentally to care for themselves.

There is a third class, by far the largest, who are poor from wastefulness or extravagance. The following example will illustrate.

During the summer a man went away from the city, leaving his wife and family a charge on the charitable. Just before Christmas they were visited by one of our workers among the poor, who gave the mother \$1.50 from her own purse to help purchase some necessaries for the home. What was her surprise when she found the woman had taken one half the money and bought a bracelet for one of the children as a Christmas gift. To know what to do with such as this woman is one of the most perplexing problems in dealing with the poor. We have no data, so far as I am aware, that will enable us to estimate the amount of poverty in our midst.

Rowntree says that in the city of York, 10% of the population exist below the poverty line, being unable to earn enough to place them above penury, while 17% more are in the same position through waste and extravagance; that is more than one fourth of the population are living in poverty. The statement has been made that *one* in every *eight* of the population of the United States is either a pauper or is on the verge of pauperism, and that *one* in *ten* of those who die in New York is buried at public expense. Using the average of the United States we would have about 5,000 living in poverty in this city, but if that for the city of York is used, we should have more than double that number.

From these wasteful, extravagant homes there comes a constant stream of irresponsibles who produce their kind, recruits for the great army of the unfit. I found a specimen of the kind in a miserable shanty. Seated before a cooking-stove in an untidy room was a young woman scarcely out of her teens. On her knee was an infant, two weeks old, a puny, miserable little mite, looking too feeble for a cry. There she sat in unwomanly rags, with unwashed face and unkempt hair, a picture of utter helplessness and hopelessness. Should this infant live, what are the chances of its becoming a useful citizen, seeing that the father of the young woman is mentally defective besides bearing stigmata of degeneration of a very pronounced character?

*(To be Continued.)*

## SOME EXPERIENCES DURING FIFTEEN YEARS' GENERAL PRACTICE.\*

By C. P. BISSETT, M. D., M. P. P., St. Peters, C. B.

When some weeks ago your secretary was kind enough to ask me to contribute a paper to be presented at a meeting of the Nova Scotia branch of the British Medical Association, I promised to do so. This evening I might pardonably be excused from fulfilling my promise on the ground that my consent had been obtained in a moment of weakness, and when the temptation to promise was still strong upon me.

With the distractions incident to attendance at the Provincial Legislature, I have found it almost impossible to present anything of a technical or scientific nature which would be acceptable to this meeting. I have therefore decided instead, to relate incidents in my professional life still fresh in my mind, which have occurred during fifteen years actual practice in the country.

In the year 1890 I saw a case in the practice of the late Dr. A. K. McLean at West Bay, a relation of which will perhaps interest you. A boy aged 12 years was driving a truck through a gate when the horse, taking fright, jammed the lad between the truck and gate post so forcibly as to burst the abdomen below the liver level, on the right side to the extent of a hand's breadth, through which opening a large amount of intestines protruded. The intestine was returned, the wound sutured and drained. Copious bleeding from the kidneys followed for 36 hours, and on the sixth day two round worms six inches in length escaped from the wound. The lad made a good recovery, but lost his life by drowning three years later.

In 1894 a brother of this same lad, 22 years of age, was shot with a 38 calibre revolver in the belly and died very soon after. It was alleged that the shooting took place on a mountain path, and that the man walked 250 yards to the spot where he was found dead. An autopsy done almost immediately, discovered the following facts: the abdominal cavity was filled with blood, the aorta half an inch above

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\*Read before Nova Scotia Branch British Medical Association, April 5th 1905.

its division was punched out and a deep trench ploughed through the underlying and vertebra, the ball finally lodging in the muscles behind. The medical testimony in this case was to the effect that the man must have died almost at once, and that the statement as to the victim having walked 250 yards after receiving such a wound could not be entertained. The testimony remained unshaken and subsequent evidence established that the facts were in accord with this testimony.

Up to July, 1897, I never saw, to my knowledge, a case of acute inflammatory process within the belly of a male person in my practice. Shortly thereafter I had in charge a case of what I decided was appendicitis in a boy 14 years old. This diagnosis was concurred in by Dr. Stewart of this city, and its history is of interest. For what seemed sufficient reason at the date of Dr. Stewart's visit, it was decided to postpone operation. Some three weeks later fluctuation behind, in the flank, was noted, an incision there liberated a large collection of pus, and the patient himself was able to demonstrate the presence of blueberry seeds in the matter discharged. In a month thereafter the wound had closed and all seemed well. One year later some tenderness was noted with rise of temperature and loss of flesh. Percussion behind revealed dullness over the right lung base, and the boy was thought to have acquired tuberculosis. Suddenly, one night he was seized with a violent coughing fit—pus in considerable amount was raised, and after a month, this condition having gradually improved, the boy was restored to health and continues in good health to this day. It seems as though the process became rekindled and ended by evacuation of its purulent product through the bronchial tubes.

Puerperal infection, at least in its grave forms, is not often found in country districts, and this too, in spite of the fact that many midwives carry large real estate holdings beneath long finger nails anointed with any old kind of grease and often vigorously employed in stretching the birth. The explanation is, I suppose, to be found in the great individual resistance of women in the country to this form of poisoning. I have seen perhaps 8 cases of eclampsia at or near term. These were freely bled, chloroformed and given morphia in large quantity, and recovered with one exception. Labour, if not in progress, was in every case induced. The last case I saw with Dr. John McDonald had taken twenty-five fits before assistance could be



called, was unconscious when delivered by forceps of a living child, but the woman herself never regained consciousness, dying in less than 2 hours.

I saw two cases of acute inversion following labour, one died, the other recovered. There was not great loss of blood, but in both there was intense shock. Drs. McDonald and Fixott both saw cases, one each in the time covered by the relations of this paper.

I have encountered one case only, of arm presentation. Version under chloroform anæsthesia proved very difficult, but I was much surprised at the ease with which the after coming head was delivered compared with a forceps operation on the same woman just one year previous. I am told by a man of vast experience, Dr. W. H. McDonald, (Antigonish) that he has seen version succeed in a case where forceps employed by three experienced obstetricians utterly failed in the purposes for which they were applied.

Diphtheria in 1890 proved fatal in full 40 per cent of cases. In a family of 8 children attacked by the malady from 3 to 5 were certain to die. Since then I have seem epidemics in which children were attacked by undoubted diphtheria, proved to be such by subsequent palsies without one death, and this too, in the absence of special treatment.

I have seen three cases of acute intestinal obstruction due to causes other than demonstrable hernia. None were subjected to operation and all ended in death. No treatment directed to an evacuation of the intestine such as massive enemata or gaseous injection, etc., seemed to exert any influence on this distressing condition sometimes called the "Iliac Passion," and which I believe in the absence of surgical treatment is utterly hopeless.

Surgeons therefore, who lament the loss of such cases in their hands, may in my judgment console themselves by the reflection that left to themselves these cases must prove uniformly fatal.

I once saw a woman eight days in labour. It was a foot presentation, the woman was still in full strength. During a tremendous pain I made strong traction and I have no doubt it was tried many times already, but without the slightest effect. I discovered that the obstruction was due to the enormously distended belly of the child. This was punctured and an immense quantity of fluid drained away. The head was found to be in the same condition. This was reached

through the spiral canal and thereafter delivery was easy. I should have stated that decomposition had set in. Nevertheless this woman made a splendid recovery. I did not again attend her during that illness.

Some years ago a man presented himself to me for advice with respect to an ulcerated cornea. The eye was so badly damaged that I advised its removal. This was declined, and some days later a member of the family wrote enclosing a lump which came out of the father's eye. It was the lens which had escaped through a large opening in the cornea.

I have knowledge of one case which was deemed miraculous when it happened. A woman aged 95 years slowly and painlessly became blind, I presume from cataract. Having occasion to arouse her neighbours one night, in attempting to do so she fell against the sharp pointed forge-made latch of a door. It penetrated the eye, but some days later the poor woman who thought her eye utterly lost was overjoyed to find her sight in great measure restored. The lens was accidentally couched.

I have presented these cases somewhat at random. To those who looked for something better they will be disappointing. Yet I beg of you to accept them as the only contribution I could offer to your secretary in the circumstances in which I am at this time situated.



## Selected Article.

### SOME OF MY MISTAKES IN OBSTETRIC PRACTICE.\*

By J. T. GRAHAM, M. D., Wytheville, Va.

“Nothing succeeds like success” is a bright, catchy phrase, very popular with the causal observer; but those who delve deep into the philosophy of human endeavor and reason from cause to effect, find it is often a perversion of truth. “The man who never makes a mistake rarely makes anything” is absolutely true; and we always find the temple of success built upon a foundation whose chief stones are mistakes and failures.

You will notice in the rather unusual title of this paper that my modesty forbids recording all my mistakes, lest you might conclude that the foundation of my success is out of proportion to the superstructure.

Do we ever forget the first case of labor we attended?

We were so top heavy with knowledge that it makes us weak in the knees to carry it; at least my knees were weak and trembling when I attended my first case. It was the most difficult case, I then thought, that I would ever be called on to manage. The woman was about a 12 para and knew much more about labor than I did. Yet I went prepared for trouble and found it. About two hours after my first examination, in which I couldn't make out anything definite, I yet assured the mother and numerous neighbours that everything was all right, the bag of waters broke with such a rushing sound that I jumped clear out of my chair. By the time I had recovered my senses and regained my equilibrium the pains were coming hard and fast. I was sure that woman was going to die, but just before the end came, the child was born, and the sounds of many waters followed it. I called for hot water, vinegar, ice, and ergot all in one breath, to check that awful hemorrhage. On closer examination, I found a few blood clots and the bedding well soaked with liquor amnii. Then I took a long breath, my heart went back to its usual position, I finished the operation, and the patient made a good recovery.

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\*Read before the Southwest [Va.] Medical Society during its semi-annual session at Bristol, Tenn., December, 1904.

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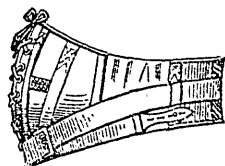
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The next three cases I attended had eclampsia. I have sometimes thought what nerve I must have had to keep on practicing after such a record. Puerperal convulsions cannot be described; they must be seen to be appreciated, and once seen not forgotten. No physician ever wants a second case, yet I had the misfortune to see three cases during the first six months after beginning practice. The first case was attended by an ignorant midwife, who told the family that the convulsions were very hard pains and would stop as soon as the child was born. In this she was mistaken, and I was called in to see the patient after she had a dozen spasms and was in a state of coma. Venesection and chloroform had no influence on the severity or frequency of the convulsions. Hypodermics of morphine masked the symptoms for a while, but the spasms continued every half to two hours until the patient died, just 24 hours after I first saw her. I had consultation in this case, but all our efforts were futile.

In three weeks after this experience, I was called to see another woman, a near neighbour of the first, who had a severe headache, very nervous, and some slight jerking of muscles, which I regarded due more to fear or suggestion, on account of having seen the case just described, than to toxemia. Her symptoms improved under diuretics and sedatives. She was within six weeks of full term. I was not with her in her confinement, but I learned afterwards she had convulsions for several hours and died. The mistake I made here was in letting her go on to term. Labor should have been terminated, and the life of the mother and child would have probably been saved, but both perished. It is often easy to see some better course to pursue after it is too late. The third of case eclampsia I saw, and I hope the last, was three months after the second. I was called in to administer chloroform while the attending physician dilated the uterus and delivered the woman with instruments. She was under the influence of chloroform for nearly two hours, and had four severe convulsions during that time. She died twelve hours after delivery. I was taught that chloroform would control puerperal convulsions. In the two cases in which I have given it the failure was complete. Venesection did no good. Morphine seemed to relieve for awhile.

The fearful experience I had in these cases caused me to study eclampsia more thoroughly. I compiled a very learned article, as I thought, on the subject, in which I tabulated nearly one hundred cases in such a way as to prove my theories. I worked out on paper the

cause, showed how it produced its effect, and evolved a treatment that to my mind was a specific. Strange as it may seem, this article did not set the medical world on fire, and has even been overlooked by the authors of our text books on obstetrics. My treatment for eclampsia now is preventive rather than curative. Keep the excretory organs of every pregnant woman in good condition, and we will rarely have a case to treat. If we do meet with such a misfortune, elimination of the poison by any and every means possible is the best we can do.

Another case of labor in which a mistake came very near costing the patient's life will never be forgotten. The woman was a delicate primipara, whose labor progressed normally in every respect up to the end of the second stage. Before the cord was tied and child handed to the nurse, I noticed my patient breathing badly, face and lips colorless, pulse rapid and feeble; in fact, she was in a state of profound shock. I at once thought of hemorrhage, but found no flow from the vagina. Placing my hand over the abdomen I felt a soft uterus almost as large as before labor. The short cord had detached the placenta, which plugged the cervix, and the uterus was rapidly filling with blood. I grasped the uterus firmly with no uncertain grip and delivered that placenta, which was followed by an enormous quantity of blood. I found this concealed hemorrhage not a minute too soon, for it was by the most heroic and persistent treatment that her life was saved. The lack of pulsation in the cord, together with the marked symptoms of shock, ought to have called my attention to the true state of her condition sooner.

I had another case of hemorrhage which was anything but concealed, and that was bad enough, but of all the enemies we have to contend with, we fear the most the one that fights in the dark.

Another case in which I made a mistake was a young primipara 17 years of age, very large and apparently well developed, but whose pelvic capacity was below the normal. The head of the child, which was large, refused to enter the pelvic strait. I insisted on chloroform and delivery with forceps. This was refused at first, but after 36 hours of tedious, inefficient labor, I sent for assistance, and proceeded to deliver with long forceps. The operation was very difficult, requiring the combined efforts of myself and assistant for three hours in the hardest task of this character I ever tackled. The effect was a badly bruised parturient canal, a lacerated perineum, and a still

born child; which, although it received no blood from the mother after birth, weighed 17 3-4 pounds. This was clearly a case where craniotomy should have been performed, and the injury to the mother prevented; but the family objected to the operation so strenuously, that I yielded with the consequences already described.

Now, gentlemen, if you agree with me that our success is built upon our mistakes and failures, you will discuss this paper and tell us of similar cases in your experience, or what you would have done, had these cases fallen in to your hands; for by not discussing it, you will give tacit acknowledgment to the fact that your success is without foundation.—*The Virginia Medical Semi-Monthly.*





# THE MARITIME MEDICAL NEWS.

A MONTHLY JOURNAL OF MEDICINE AND SURGERY.

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VOL. XVII. HALIFAX, N. S., APRIL, 1905

No. 4.

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## Editorial.

### THE OPTICAL AND MEDICAL COSTS AND FEES' BILLS.

In a previous issue the attention of the profession was called to the attempt made by the so called "opticians" to have an incorporated act placed upon the statutes of this province, and as the character of the legislation sought to be obtained is now known to our readers, it will not be necessary to dwell upon this part of the subject.

That the Bill in question was defeated will be a matter of intense satisfaction to the medical profession in Nova Scotia goes without saying, but we deeply regret that it should have passed the Assembly where its pernicious character was fully exposed, and where the sound judgment of that body dealing with the question solely on its merits should have secured its immediate and well merited defeat. Unfortunately, as is often the case, the deflection of a certain number of physicians, confined, let it be known, chiefly to one town where the malign influence of the optical fad seems to have been paramount, contributed in no small degree to this result, and it remained for the sound judgment of the Legislative Council once again in its independence to check ill-advised legislation, which indeed should never have passed the Assembly. We direct special attention to this fact and commend to our readers another editorial in this issue which though not strictly within the province of this journal will be of general interest.

Re the Medical Costs and Fees' Bill, this was amended in the Assembly and further amended in the Council. It was then found to be so distorted that it was deemed advisable to let it lie over until next session.

If the physicians of this province took an active part in these as well as in other matters they could wield a large influence, and thereby would not be received with such scanty courtesy as they have in the past by some of our legislators.

To Dr. Bissett, M. P. P., our profession is greatly indebted for overseeing our rights and defending the citizens from undesirable legislation.

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### THE LEGISLATIVE COUNCIL.

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Most of our readers will recall the fact that a very few years ago it was quite the fashion to decry the Legislative Council; to point out that Ontario, in some respects the foremost province of the Dominion, got along without a second chamber, and for these reasons the Council in this province should be abolished. It was pointed out that a considerable saving to the province in the matter of expenditure could thus be effected.

By way of reply to this last statement we may at once say that inasmuch as the sum of sixty thousand dollars is allowed by the Dominion Government to Nova Scotia for legislative expenses, and that this is amply sufficient to meet its requirements, it cannot be argued that the Council is in this respect a burden upon the province that could be lightened by its abolition; for should that be effected, then the Dominion authorities would be justified in deducting from the grant for legislative expense the amount so saved, for we submit that this or no other province should be permitted to exploit the Federal Treasury, upon the pretext that a certain sum was required when as a matter of fact it was not required for such purposes.

With reference to Ontario, we may be permitted to remark that had the salutary check for a second chamber existed during the last twenty years in that province, the whole Dominion would have been spared the details of political jobbery which in that time have been furnished by the banner province of Canada.

There never was, and we trust there never will be, a sincere desire on the part of the people of this province to abolish the Council. Demands of this kind have come not from the people but from designing politicians actuated solely by a desire to embarrass, those to whom they were opposed.

It is just as well to recognize at once that men occupying seats in the gift of a fickle and not infallible public, may not at all times be depended upon to deal with cases solely upon their merits. And instances have come under our observation during the last few years in which almost diabolical legislative was permitted to pass the Lower House, and was checked by men who occupy seats at the Council Board.

The Legislative Council occupies a large place in the law making machinery of Nova Scotia, and upon the Government rests a responsibility which it cannot shirk, that of appointing to that honorable body the best and brightest men only, men who can be relied on in the day of trial to do the right thing regardless of what is often the passing whim of restless public opinion.

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#### THE CANADIAN MEDICAL ASSOCIATION MEETING.

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We have every reason to believe that the meeting of the Canadian Medical Association to be held in Halifax next August, will be very largely attended. Leading members of the profession in Quebec, Montreal and Toronto have signified their intention to be present, and we have good reason to expect a number from Winnipeg, the prairie country, and British Columbia. Throughout the Far West there are settled many practitioners who have gone from the maritime provinces and who will, no doubt, make an effort to revisit their old homes and renew old acquaintanceships.

The arrangements for the meetings of the Association, and for the entertainment of our guests, which were outlined in the February number of the NEWS, have been very favourably received.

The final announcement of railway rates cannot be made for some weeks, but we expect to secure the friendly corporation of all transportation companies.

It remains to secure the hearty and substantial assistance of each individual member of the Medical Society of Nova Scotia, which has assumed the honour of entertaining the visiting members of the Association.

## Society Meetings.

### SAINT JOHN MEDICAL SOCIETY.

Jan. 11th, 1905. Dr. Pratt read a paper on "Neuroses." The physiology of the nervous system was considered and a case was described, which illustrated many features of the condition of neuroses. A full discussion followed, in which Dr. Harper referred to herpes zoster and Dr. F. D. Walker to Raynaud's disease.

Jan. 18th. Dr. Grey read a paper on "Arterio-Sclerosis," in which etiology, pathology and treatment were dealt with. Iodide of potash was considered the most efficient remedy.

Feb. 1st. The paper before the society was "Facial Paralysis," by Dr. Crawford. The anatomy of the facial nerve was fully given and the value of the faradic and voltaic forms of electricity as diagnostic and therapeutic agents explained.

Feb. 8th. Dr. Skinner exhibited a specimen of hæmorrhagic mammary sarcoma and gave a report of the case. Secondary growths were found in liver, heart, uterus, omentum, stomach and kidneys. An examination of the brain was not obtained.

Feb. 22nd. Dr. G. G. Corbet gave a demonstration of hypnotism. The subject was a young male adult and the various phases of hypnotism were well exemplified.

March 1st. The meeting was held in the General Public Hospital. Dr. Murray MacLaren showed the following: Epithelioma of the face; two cases of facial paralysis; conical stump; fæcal concretions from perforated appendix; pyosalpynx; ovarian tumour; also a man aged 21 years with probable actinomycosis. Dr. G. A. B. Addy reported that the examination of the discharge and small yellow bodies did not show the presence of the characteristic ray fungus. Dr. T. D. Walker discussed the following cases: Pleurisy with effusion; pneumonia; locomotor ataxia; diabetes; enteric fever; central softening.

March 22nd. Dr. J. R. McIntosh exhibited a piece of bone removed from larynx and then read a paper on "The Laryngoscope." Manuel Garcia was especially referred to as his centennial is now being celebrated.

## N. S. BRANCH BRITISH MEDICAL ASSOCIATION.

March 8th, 1905, Meeting held at City Council Chamber, the President, Dr. C. D. Murray, in the Chair.

Dr. Goodwins motion *re* change of medical examiners by Life Insurance Companies (see last issue) was discussed and carried, and the Secretary was instructed to forward copies of the resolution to the different companies doing business in Halifax.

The President and Dr. Farrell referred to the practice of some life insurance agents who dangle before the eyes of the medical practitioner a prospective appointment as medical examiner, in order to obtain a policy. This could be obviated by the physician writing to the head office and asking if the agents were authorized to canvas insurance in this way.

Notice was received from Dr. M. A. B. Smith, in reference to the date fixed for medical bills to be discussed before the Provincial Legislature.

Dr. Chisholm then read a most interesting paper on "Intestinal Obstruction," giving a resumé of the principal symptoms and detailing cases in his own practice.

Dr. Finn urged early operation in all cases of intestinal obstruction.

Dr. Bissett, M. P. P., mentioned a case of obstruction he had seen recently. Dr. MacKeen, of Glace Bay, operated, removing several stitches of gut, with recovery.

Dr. G. M. Campbell strongly opposed purgatives in this condition.

Dr. Trenaman referred to the value of the high enema.

The President mentioned a case of obstruction due to impacted feces.

Dr. Finn reported a case of greenstick fracture of both bones of the forearm in a girl aged fourteen and a half years (see March number, page 97.)

Dr. Murphy exhibited a specimen of a gall-bladder that he had removed recently, which contained fourteen large stones. It was very much thickened as a result of the continued inflammatory process. Before operation it could be distinctly felt through the abdominal wall. There had been no jaundice. The only symptoms were frequent attacks of pain in the region of the gall-bladder with vomiting.

Drs. Chisholm and Farrell, who had assisted at the operation, complimented Dr. Murphy on the good result.

## Personals.

Dr. W. H. Hattie is attending the meeting of the American Medico-Psychological Society, at St. Antonio, Texas.

Dr. H. S. Slayter has gone to Germany for a few months, where he will visit some of the hospitals.

Dr. D. A. Campbell had the misfortune to have his leg severely scalded by the bursting of a hot water bag, but is now fortunately fully recovered.

Dr. A. W. H. Lindsay had a severe attack of la grippe last month from which he has fully recovered.

Dr. E. E. Dickey, formerly of Wolfville, and Miss Annie Louise Tremaine of this city, were married last month.

Dr. G. L. Sinclair of this city was married on the 13th inst. to Mrs. Martha Jean Curry.

Dr. M. A. B. Smith is at present at Baltimore, doing hospital work at Johns Hopkins.

Dr. E. A. Kirkpatrick has gone to New York to visit some of the special hospitals. He is accompanied by Mrs. Kirkpatrick.

Dr. F. S. Yorston and Mrs. Yorston of Truro have been visiting Pinehurst, North Carolina, whither the doctor had gone to recuperate after his recent illness.

Dr. W. W. White, was reelected Mayor of St John by acclamation.

The News extends its sympathy to Dr. G. E. DeWitt of Wolfville, in the death of his daughter.

## Therapeutic Notes.

NO MORE POULTICING IN THE U. S. ARMY.—In a recent notification by the Surgeon General of the U. S. Army, it is asserted that all the good results from poultices can be obtained in a more cleanly way by the use of wet hot compresses. Hence the order to the army surgeons to drop linseed and linseed meal from army medical requisitions. —*Virginia Medical Semi-Monthly.*

We highly approve of this order as far as discarding poultices made of putrescible and bacteria-breeding materials is concerned, for that is what has been done by all up-to-date physicians in private practice, but we can hardly recommend the substitute offered. We supposed that every one in this enlightened age was using Antiphlogistine in all such cases because of its cleanliness. Compare Antiphlogistine, renewed but once a day, with hot compresses renewed every twenty minutes and we cannot imagine any one using compresses when Antiphlogistine is available.

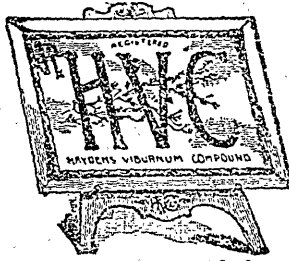
SANMETTO IN NEURASTHENIA FROM OVERWORK IN INTELLECTUAL LINES.—I have found Sanmetto useful in several cases of neurasthenia from overwork in intellectual lines, without being associated with sexual irritations or excesses. In these cases where it seemed to do most good there was depression of energy, consequent upon exhaustion of the vital forces. As a tonic in such cases it has proven satisfactory in a number of instances.

Mount Vernon, N. Y.

M. W. VAN DENBURG, M. D.

AN ELIGIBLE COMBINATION.—A number of years ago Dr. James J. Sullivan (University Medical College) New York City, applied the remark, "An Eligible Combination" to a then new preparation of well known synergetic remedial agents. It is almost unnecessary to state that the preparation to which he referred is now well and favorably known as Antikamnia & Codeine Tablets, each tablet containing 1/4 gr. codeine and 4-3/4 grs. antikamnia. *A fact which should not be overlooked, is that the codeine used in this tablet is specially prepared and purified, is non-constipating, and does not induce a habit. These are some of the particularly advantageous features of the Antikamnia Chemical Company's codeine and are well worth bearing in mind.*

In the harrassing cough of phtthisis, or in the the pain of pleuritis, in the painful sensation accompanying bronchitis when the tubes are dry and irritable—as they usually are—the blending of the two drugs composing Antikamnia & Codeine Tablets will not be found wanting in action, but will give results that are gratifying to both the patient and the medical attendant. This tablet is a sedative to the respiratory centers in both acute and chronic disorders of the lungs. Cough, in the vast majority of cases, is promptly and lastingly decreased, and often entirely suppressed. In diseases of the respiratory organs, pain and cough are the symptoms which especially call for something to relieve and this tablet does the work. In addition it controls the violent spasms accompanying the cough, which are so distressing.



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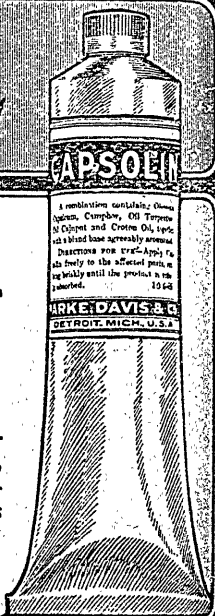


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