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# Bomæopathic Record

DEVOTED TO THE INTERESTS OF HOM COPATHY AND OF THE MONTREAL HOM COPATHIC HOSPITAL.

Vol. VIII. No. 9.

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MONTREAL, SEPTEMBER, 1903

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# Montreal Homeopathic Record

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## HOMOEOPATHY AND ALLOPATHY CONTRASTED.

When asked for the difference between the two schools of medicine, I reply that in brief it is that allopaths prescribe for a diagnosis, whilst homocopaths seek in the history of the patient for the original cause or causes of the disease. For example, rheumatism has different causes, and therefore requires varying treatments. In all my experience with allopaths, before my good fortune led me to try homoeopathy, I found they prescribed for the diagnosis, and having alleviated the symptoms, were content and ranked the results as a cure. In truth there was no approach to a cure, and in a time more or less short, the conditions became as bad or worse than ever. This method is continued until the patient's vitality being exhausted, he dies. No discredit attaches to the doctors, because you see the case was incurable. Yet if homoeopathy is right in going back of the diagnosis to find out the original causes, then allopathy stands condemned as no more scientific than the practice of any quack who finds a certain medicine sometimes cures a disease (or rather drives it inward, as is the more common result), and forthwith prescribes that remedy in every case of such disease.

In chronic diseases, such as gout, rheumatism and kidney troubles, allopathy is powerless, as is demonstrated by the nobility and wealthy resorting year after year to famous baths and Allopathy merely plays with waters. these diseases, and at a high price too. for in addition to the legions of doctors maintained (there are 200 in Bath alone), think of the loss to the world of such a man as Lord Salsbury, retired long before he might naturally be counted out. Homoeopathy can and does cure these diseases. It teaches that the symptoms manifesting themselves at any one time are only a portion of the deep-seated malady, and that at the root of the conditions lies a chronic miasm which the body cannot throw off. Suppressed skin distases are believed to be the main cause of inherited and constitutional disease tensuppressed diseases dencies. Other cover the rest of this large field. This conception by Hahnemann is the highest flight of his genius, and would alone place him in the front rank of true physicians

The homoeopathic materia medica contains nothing but what has been the subject of close and wide experimentation on healthy human beings, so called drug-proving. If a drug produces certain symptoms on such persons, it may be relied on to be nature's remedy for the disease marked by those symptoms, according to the law of similia similibus curantur. Likes are cured by likes. This is the only scientific and rational method of ascertaining the action of medicines. It is a creative distinction, universal in its application, true for all time.

The size of doses is another distinction between the practice of the old the new and school. Hahnemann found by gradual experience that small doses were best. This has been much ridiculed, but "the proof of the pudding is in the eating." It is certain these small doses effect cures. It is quite evident that the old brutal dosing is obsolete, the public will not submit to it. Ridicule of homoeopathic doses, therefore, seems out of place by allopaths, whose practice has been so greatly modified by Hahnemann. "Im!tation is the sincerest form of flattery." The continued use of violent medicines in large and increasing doses produces chronic diseases, and may be safely credited to allopathy as one of its fruits.

Slowness of cure is urged against homoeopathy. People want quick results in these days. The desire is very natural, and there is nothing to be said against it, but is it obtainable? If the foregoing contrasts in the two methods are admitted to favor homoeopathy, then the impatient must accept nature's estimate as to the time required for a cure.

The or linary man, after reading this, will smile in a superior way and ask why such an advance 1 system should make so little progress. In reply, it may be said that any large organization is possessed of great vitality. That a system that can boast of the discovery of the circulation of the blood, of vaccination, of anesthetics, of antiseptics, must necessarily enjoy immense prestige. But although allopathy still holds the field, it is a modified allopathy, and less harmful than in former days. That it may gradually adopt all the teachings of homoeopathy without acknowledgment and without reserve, if necessary to its dignity, is to be hoped in the cause of human progress and happiness. EUREKA.

#### AMMONIA FOR POISON IVY.

#### By S. V. Clevenger, M.D.

Thirty years ago, a troop of soldiers, going up the Yellowstone River on a steamboat were badly poisoned by contact with poison ivy. I recalled that Maisch, of Philadelphia, had found what he called "toxicodendric acid" in the vesicles of this skin disorder, but whether he suggested the alkaline neutralization or not I do not remember. anyway, I told the regimental surgeon about it, and that probably ammonia water would be a good application. He let me try it on some of the soldiers, who were instantly and permanently cured, while the surgeon's old-fashioned acetate of lead and opium application did little if any good.

There were two chambermaids on the boat, one was a respectable and worthy while woman, and the other a cantankerous drunken negress, who was mucn better off in bed, where the ivy poisoning kept her for four weeks, treated with the ancient lead method. The white woman, who was also poisoned, did not lose an hour from work after the ammonia water was applied.

During 1880, I published the result of using ammonia for ivy poisoning, also for stings of wasps, bees, etc., to destroy the formic acid that occasioned the pain, but, to my surprise, very few practitioners seem to have heard of this simple means of relief, though the publication was made in the Journal of the American Medical Association of the time.—Med. Brief.

## KILLING PEOPLE BY TELLING BRUTAL TRUTHS.

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Many people are killed by brutal truths. Some physicians are so conscientious-and so tactless—that thev think they must tell patients the whole truth when they believe they cannot recover, instead of giving them the benefit of the doubt, for every physician knows that nearly always there is a doubt which way the case will turn. Cheering encouragement has saved many a life by helping it to pass a crisis favorably when the actual truth might have killed the patient or reduced his rallying powers to the dan-ger-point. In all the affairs of life, cruel bluntness in stating cruel facts has caused untold misery and broken many friendships. Truth itself changes from a jewel to a dangerous weapon in the hands of a tactless person .--Success.

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#### REMEDIES IN HEMORRHAGE.

The following are the homoeopathic remedies most frequently called for, with a few of their leading indications:

Millefolium: florid, frothy blood without much cough.

Aconite: active congestion, fever, pulse bounding, red face, incessant cough, auxiety, restlessness, palpitation, feeling of fullness.

Ipecac: with cough, tickling behind sternum, bubbling in the chest, frequent hacking, nausea and debility.

Ferrum acet: bleeding out of proportion to physical signs, tickling in larynx, sallow complexion, poor sleep.

Hamamelis pure venous blood (min; up without much effort, mind calm, difficulty in lying down, not much (ough.

Digitalis: from mechanical embarrassment of the circulation, dark blood.

Ledum: nemorrhage very profuse, violent cough in paroxysms, tickling in larynx and trachea, burning pain in chest.

Phosphorus: frequent bleedings of small amount, hemorrhagic diathesis, inflammatory symptoms supervening.

China: alternate shiverings and flushes of heat, great debility, frequent sweats, trembling, patient pale and cold, fainling turns.

The great majority of cases of pulmonary hemorrhage come from tubercular disease. When the hemorrhage comes purely from organic disease of dilatation, without lung complication, the bleeding being mechanical, I often use the tincture of digitalis in two or three drop doses, to strengthen the heart.-Dr. H. C. Clapp, in Medical Era.

According to statistics, the number of femule physicians throughout the world is about \$,000, two-thirds of whom live in America.

Isychic life (says Professor Wundt) is not the product of the bodily organism, but the bodily organism is rather a rsychic creation.

The incumbent of the chair of Forensic Medicine and Toxicology at Berne, Dr. K. Emmert, recently celebrated his ainclicth birthday.

The authorities of Yale College have announced that hereafter the course in the Yale medical school can be made in three years instead of four.

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A law which has become operative in France, requires that a child must be vaccinated during its first year, revaccinated at the age of 11, and again at 21.

#### DIET FOR TYPHOID PATIENTS.

There is very general unavinity as to the dictuic management of typhold fever patients. The doctrine of Graves, who said. "If you should be in doubt as to an epitaph to be placed upon my grave, take this. 'He fed fevers'" is sound to-day. The only qualification is that the food shall be in such a form as to be easily digested and assimilated. Typhoid fever is a protracted and tedious disease. The functions of the various accessory glands of the alimentary canal are impaired, and nutrition is greatly disturbed, so that it is of the utmost importance that the food should be carefully selected and prepared.

Milk is undoubtedly the best food, as it contains all the necessary elements in a liquid form. If given alone, three te four pints, diluted with ordinary or sime-water, may be sufficient for 24 hours. It is necessary to examine the stools of the patient to see that the milk is fully digested. If there are undigested curds, the quantity of milk should be lossened, and chicken, or mutton broth or beef juice given. Peptonized milk may sometimes be given with advantage. Thin oatmeal or barley gruel answers a good purpose in some cases, and albumin water, flavored with lemon, may re given with benefit. It is important that too much food be not given, as excessive ali-mentation is likely to produce intestinwith tympany and al fermeriation, With good nursing and diarrhoea. careful regulation of the die\*, many cases may be safely conducted to recovery without the use of any frugs whatever. But the disease is one of great muscular exhaustion, and the heart muscle suffers with the others, so that in cases of enfeebled circulation, and the very large majority of them are of this class, I am in the habit of giving strychnine for its stimulating and tonic effect upon the heart nuscle, nor do I omit to give brandy or whiskey when indicated.

Much care is necessary in the management of convalescence. The patient must be kept in bed for eight or ten days after defervescence, and solid food should not be allowed until ten days after the subsidence of the fever. These precautions are made necessary by the fact that perforation has occurred as late as two weeks after normal temperature has prevailed. Indeed, it happened to a ratient of my own-a young noon of twenty years, who had been walking about the ward for several days, when he was seized with violent pain in the abdomen. Perforation was suspected, and the surgeon on duty at the hospital, Dr. J. Ford Thompson, performed a laparotomy, and closed the perforation, but unfortunately the patient died.—N. Y. Med Journal.

#### THERAPEUTICS.

#### Notes by Wm. Boericke, M.D., San Francisco, Cal.

Tuberculinum.—Should not be given lower than the 30th, preferably in higher potencies, and in infrequent doses. According to Dr. Nebel it is contra-indicated in the aged, in arterio-sclerosis, in nephritis unless preceded by other remedies, and in children with dry, harsh skin.

Antimonium Crudum.—Is an excellent remedy for the vocal cords. When, after laryngitis or fatigue of the volce, a singer has a harsh and badly pitched voice, this remedy will certainly give suppleness to the vocal cords [Cartier]. Cough worse coming into a warm room, with burning and itching of the chest. Loss of voice from becoming overheated.

Ipecacuanha.-Dr. Cartier says that this is the remedy for hoarseness more or less complete in inflammatory laryngitis. It rapidly dissipates hoarseness at the end of a cold. Nearly no cough, but complete aphonia. have happened to give Ipecae 30 several times every half hour, resting the voice several hours. When the voice returns and the cough increases, we must 3.00 Ipecac. Its place is in inflammatory aphonia.

Carbonicum Sulphuratum.—Is to be remembered in peripheral neuritis. Gradual failure of muscular power, showing itself chiefly in the extensor muscles of the extremities, with formication and rheumatic pains, numbness and icy coldness of the extremities. Remember it also in sciatica.

Secale.--Is the only drug that presents lesions akin to those observed in locomotor ataxia, a slow degeneration of the posterior columns of the spinal cord; impossibility of standing with the eyes closed, girdle pains, absence of the knee jerk; formicati m, anaesthesia and severe pains.

Thallium.- Relieves the violent pains of locomotor ataxia more markedly, however, lancinating pains, like electric shocks, Paraplegia, Pain in stomach and bowels, like electric shocks.

Lactic Acid.-Diabetes, with rheumatic symptoms. Constant nausea, better by eating. Specially suited to anaemic, pale women. Locally, in tuberculous ulceration of vocal cords.

Abr Janum. In metastasis of rheu-

matism to the heart, shown by sharp and severe pain in region of heart, weak small pulse and a troublesome cough, this is the remedy.

The Abrotanum patient has piles, with a burning pain when touched and when pressing. These get worse as his rheumatic pains abate, the rheumatism in turn comes on as the diarrhoea is checked. Haemorrhoidal co'ic, with the pain in sacrum, ebuilitions with general heat and distended veins in forehead and hands. Evil results of checked diarrhoea or suppressed piles or ulcers.

Lemna Minor.—Asthma from nasal obstruction, worse in wet weather. Nasal polypi. Atrophic rhinit's when crusts and muc.»-purulent d'scharge is abundant. Foul smell from nose and foul taste. Worse in heavy rains.

Lobelia Cerulea.—Gives a perfect picture of sneezing influenza, involving the posterior nares, palate and fauces. Dull aching pain over root of nose. Eustachian eatarrh.—Med. Century.

#### LARGEST FEES ON RECORD.

One of the largest fees on record is that received by Dr. Dimsdale, an ancestor of the ex-Lord Mayor, for inoculating Catherine the Second, Empress of Russia, against smallpox, in 1762. The fee itself was 50,000, but, in addution, the fortunate physician got \$10,000 for travelling expenses, with a life pension of \$2,500, the title of baron, the rank of a councillor of state, and the office of physician-in-ordinary to the empress, who further graciously gave him her portrait.

In 1792, an English physician, Dr. Francis Willis, went to Lisbon to undertake the treatment of the Queen of Portugal on the following terms: Five thousand dollars per month as salary, the extenses of his journey, a table for himself and suite and \$100,000 if he were successful.

The largest medical fee of which we can find record is that said to have been given to the blind physiclan, Dr. Gale, of Bristol, who received \$250,000 from a wealthy patient, whose knee he lad cured by electric treatment.



2417 St. Catherine St., MONTREAL

### SUBSCRIPTIONS AND CASH DONA-TIONS IN AUGUST.

The hospital treasurer acknowledges with thanks the following:

| Mrs. Samuel Bell     |         |
|----------------------|---------|
| Mrs. George A. Weber | 5.00    |
|                      | \$40.00 |

#### THE DISINFECTION OF ROOMS.

Drs. Novy and Waite, in the Medical News, conclude a paper upon this subject with these general directions:

1. All cracks or openings in the plaster or in the floor or about the door and windows should be caulked tight with cotton or with strips of cloth.

2. The linen, quilts, blankets, carpets, etc., should be stretched out on a line in order to expose as much surface to the disinfectant as possible. They should not be thrown into a heap. Pooks should be suspended by their covers, so that the pages are all open and freely exposed.

3. The walls and floor of the room and the articles contained in it should be thoroughly sprayed with water. If n.asses of matter or sputum are dried down on the floor they should be soaked with water and loosened. No vessel of water should, however, be allowed to remain in the room.

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4. One hundred and fifty centimeters (five ounces) of the commercial forty per cent. solution of formalin for each 1,000 cubic feet of space should be placed in the distilling apparatus and as rapidly as possible. The key-holes and spaces about the door should then be packed with cotton or cloth.

5. The room thus treated should remain closed at least ten hours. If there is much leakage of gas into the surrounding rooms a second or third injection of formaldehyde at intervals of two or three hours should be made.



#### PHILLIPS TRAINING SCHOOL NOTES.

Miss Warner, '02, who was in  $N_{2W}$ York last month on a visit to her sister has returned to town.

Miss Egan, '96, has returned from her long vacation and again taken up work.

Miss Crutchlow, '99, has been on private duty at the Royal Victoria Hospital for some time past.

Nurse Routhier, who was again called to her home in Alexandria, by the serious condition of her mother, has again returned to duty. Her mother is very low and there are no prospects of her recovery.

Miss A. Johnson, of Granby, Que., has entered the training school as a probationer.

Nurse Richards is rapidly convalescing from typhoid fever and will soon leave the hospital for home to rest and recruit her strength.

All the nurses have had their holiaays now, Nurse Haines, being the last one, returned to duty this month.

Miss Duval, '99, having completed her post graduate course in New York, has returned to town and is again ready for work.

Miss Spence, '02, is away enjoying a well earned vacation after a pretty full summer's work.

Miss Ryan, '99, who is now resting at home, will shortly return to town to resume work.

Miss E. Trench, '02, who was acting lady superintendent during the past three months, has returned home and is again ready for private duty.

The delegation from the training school at the reception on Lord Brassey's yacht, Sunbeam, was the "event" of that function and carried off the henors among the representatives from other city hospitals.

The newly painted beds in the dormitory, are quite attractive, but are too closely crowded together to appear to full advantage. A little more (twice as much) room would enable the nurses to retire in a desirable manner and preserve the paint on the ends of the beds.

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#### HOSPITAL NOTES.

THE HOSPITAL work was heavy the first half of August, becoming light in the later half.

HOSPITAL WANTS drew the attention of a lady visiting the city last month, and as a result our private ward is adorned with a very handsome oak table.

HAVE YOU been around to see the front entrance since the palater has finished his work. The number is still 44 McGill College ave.

REMEMBER the quarterly meeting of the Governors to be held Thursday, Sept. 24th. As the vacation season is now over, we hope for a full attendance. Some interesting reports will be presented.

WE WCULD like to interest you in the matter of better accommodation for our nurses. We would like to acquire the house adjoining the present quarters for that purpose. If we cannot buy, we might rent it, and would like to have your support to that end.

NO HOSPITAL in this city or province offers such facilities for care of all classes of patients and thorough training of nurses, under one roof and management.

MISS E. R. LORENZ, our Lady Superintendent, returned to duty this month, after a three months' vacation in Europe, very much benefited by the change und rest. While in England and Germany Miss Lorenz visited the principal hospitals and clinics, seeing and learning much of interest and value to her work.

A PARTV of six of the senior nurses, under the chaperonage of Nurse Routhier, accepted the invitation of Lord Brassey to a reception on his yacht "Sunbeam" last month. A very pleasant afternoon was enjoyed, and much appreciated by those participating, who were enthusiastic in their praises of the delightful outing.

WE PUBLISH in this issue a letter from a recent convert to Homoeopatny, in which is set forth clearly the reason for faith in a system "that Coes things" for those who suffer in the most reasonable and safest manner. This is the kind of testimony that counts, as results are what most of us look for when sick and suffering.

DON'T FORGET the annual bazaar. This function has become one of the social events of the season, and eagerly looked forward to. As the privilege of working for it only comes once a year, don't miss your opportunity.

THE REGULAR monthly meeting of the Committee of Management was held August 24th. Attendance was small, being slightly more than sufficient to form a quorum. After reading of minutes of previous meeting, routine business was transacted. A vote of chanks was tendered to Miss E. Trench for her painstaking and efficient work as acting Lady Superintendent.

Reports were presented showing steady progress in improvements, tending to preserve and increase the hospital's efficiency. Hardwood floors were ordered to be laid in the main kitchen and the large private ward. The coal contract for the year was reported to have been satisfactorily arranged for. The questions of fire escapes and new elevator were inquired into, also that of improving the means of communication to the laundry, and ordered to be reported on at next meeting.

The Lady Superintendent's report showed that the work in the hospital had been fairly good up to the present, and the summer had been a more prosperous one than last year's. Since the enlargement and improvement of the diet kitchens, the breakage list had been diet kitchens, the

Three facts worth knowing about children are (Calcutta Journ, of Hom..); 1. A child cannot raise its head from the pillow before the second month. 2. A child cannot sit erect before the fifth month. 3. A child cannot walk before the tenth month, and should walk at the twelfth month. If the preceding facts could be borne in mind, and mothers instructed as to just what a child can do, and cannot do at cer-tain periods of its early existence, then there would be less work for the orthropedic surgeon. If the young infant is allowed to sit or stand at too early an age, the superincumbent weight of the large head tends at once to exaggerate the physiological curves of the spine to a point where they may become pathological.

#### DONATIONS IN AUGUST.

The Lady Superintendent acknowledges with thanks the following:

Mrs. G. Reed, 1 basket of apples. A Friend, Raspberries.

Mrs. A. Lagace, magazines.

Mrs. T. W. Boyd, 2 baskets of flowers.

Fairbanks Co., 1 box gold dust, 2 bars soap (samples).

Mr. Dawson, two electric lights and wiring in semi-private ward.

Flower mission, cut flowers every week.

#### TREASURER'S REPORT.

#### June and July, 1903.

Receipts-

| Cash on hand, June 1st        | \$ 800.50 |
|-------------------------------|-----------|
| Patients' fees, June and July | 1,654.67  |
| Donations                     |           |
| Pank of Toronto dividend      |           |
| Dispensary receipts           | 5,46      |
|                               |           |

\$2,756.63

Disbursements-

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| Salaries and wages, June and         |         |
|--------------------------------------|---------|
| July \$                              | 402.00  |
| Groceries                            | 36.74   |
| General expense and laundry          | 10.88   |
| Medical and Surgical supplies        | 97.99   |
| Repairs (less \$10.00 rec.'d for in- |         |
| surance),                            | 237.75  |
| Furnishings                          | 6.1S    |
| Insurance                            | \$4.00  |
| Special nurses                       | 18.00   |
| Mrs. Phillips' interest              | 225.00  |
| Lighting                             | 25,32   |
| Accounts paid in June and            |         |
| July 1                               | ,032.79 |
|                                      |         |

\$2,1\$1.65

Balance cash on hand and in bank, August 1st .... \$ 574.98

#### HOSPITAL WANTS.

Rugs for two private wards.

Straight chairs (antique oak), for private ward.

Preserved fruit, to fill cupboard.

A barrel or two of apples.

Sugar, flour, in barrels.

Hardwood floors in private wards.

A real elevator.

Better nurses' quarters.

Your interest, encouragement and sympathy.

Only \$1.00 from every homoeopath in Montreal.

#### HOSPITAL REPORT FOR AUGUST.

| Private patients  11    Semi-private patients  8    Public patients  5    Maternity  3    Discharged—  27    Private patients  19    Semi-private patients  10    Public patients  6    Maternity  38    Died  38    Died  11%    Number of days private nursing in hospital  11%    Number of days private nursing in hospital  8    Remaining in hospital Sept. 1.  10    Viz.—  7    Private patients  4    Public patients  4 | Number of patients in the hospital<br>Aug. 1 Admitted—       | 19   |
|---|--|------|
| Discharged—<br>Private patients   | Private patients<br>Semi-private patients<br>Public patients | 8    |
| Discharged—<br>Private patients   | •  | 27   |
| Semi-private patients  10    Public patients  6    Maternity  33    Died  1    Operations  5    Number of days private nursing outside  11½    Number of days private nursing in hospital  8    Remaining in hospital  8    Private patients  1    Viz  1    Private patients  4    Public patients  4    Maternity  1  | Discharged—  |      |
| Public patients  6    Maternity  3    Died  38    Operations  1    Operations  1    Number of days private nursing outside  11½    Number of days private nursing in hospital  8    Remaining in hospital Sept. 1   | Private patients   |      |
| Maternity  3    Died  38    Died  1    Operations  5    Number of days private nursing outside  11½    Number of days private nursing in hospital  8    Remaining in hospital Sept. 1  10    Viz  Private patients  1    Semi-private patients  4    Public patients  4    Maternity  1   |  |      |
| 38    Died  1    Operations  1    Symbol of days private nursing outside  11½    Number of days private nursing in hospital  11½    Number of days private nursing in hospital  8    Remaining in hospital Sept. 1  10    Viz  7    Private patients  4    Public patients  4    Maternity  1   |  |      |
| Died  1    Operations  5    Number of days private nursing in outside  11½    Number of days private nursing in hospital  8    Remaining in hospital Sept. 1  10    Viz.—  9    Private patients  4    Public patients  4    Maternity  1   | Maternity  | 3    |
| Died  1    Operations  5    Number of days private nursing in outside  11½    Number of days private nursing in hospital  8    Remaining in hospital Sept. 1  10    Viz.—  9    Private patients  4    Public patients  4    Maternity  1   | -  | 20   |
| Number of days private nursing<br>outside  11½    Number of days private nursing in<br>hospital  11½    Number of days private nursing in<br>hospital  8    Remaining in hospital Sept.  10    Viz  9    Private patients  1    Semi-private patients  4    Public patients  4    Maternity  1  | Died   |      |
| Number of days private nursing<br>outside  11½    Number of days private nursing in<br>hospital  11½    Number of days private nursing in<br>hospital  8    Remaining in hospital Sept.  10    Viz  9    Private patients  1    Semi-private patients  4    Public patients  4    Maternity  1  | Operations   | 5    |
| outside   |  | -    |
| hospital  8    Remaining in hospital Sept.  10    Viz  9    Private patients  1    Semi-private patients  4    Public patients  4    Maternity  1   |  | 11/2 |
| Remaining in hospital Sept. 1 10    Viz.—    Private patients   |  | _    |
| Viz  Private patients  1    Semi-private patients   |  |      |
| Semi-private patients   | Viz.—  |      |
| Public patients  4    Maternity  1  | Private patients   | 1    |
| Maternity 1   |  |      |
|   |  |      |
|   | maternity  | 1    |
|   | -  | 10   |

Statistics go to prove that people usually live longer in islands and on small peninsulas than on continents. Barbadoes, Greece, Maderia, and the Shetlands are all favorable to long life.



MONTREAL HOMCEOPATHIC RECORD

# FRUIT SEEDS AND APPENDICITIS.

Many very intelligent people are deterred from swallowing the seeds of berries, grapes and other fruits, lest the lodgment of these small bits of indigestibleness may induce that dreaded accident, appendicitis.

This fear, says the Dietetic and Hygienic Gazette, is utterly baseless, since the healthy appendix is protected by a valvular arrangement which prevents even the smallest of seeds from entering it. It is only after inflammation has already destroyed its normal protection that any foreign substance can gain access to it.

To feel compelled to eschew all seedy berries and fruits is to seriously curtail one's dietary, and it is entirely unnecessary. In fact, the free and constant use of ripe berries and fruits of all kinds is one of the best preventives of this dangerous disease. Fruit-eating prevents or helps to overcome constination, and constipation is the most prolific cause of appendicitis.

The physician should thoroughly disabuse his patients of this mistaken notion. All the smooth seeds are harmless.



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