

The Nova Scotia Medical Bulletin

FEBRUARY 1928



Leading Features This Issue:

C. M. A. ANNUAL MEETING
CHARLOTTETOWN, P. E. I.,
June 18th to 23rd, 1928

EDITORIAL

PERSONALS

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Peace Through Toil

WHEN Sir Berkeley Moynihan, President of the Royal College of Surgeons, accepted the portrait of himself, painted by Richard Jack, R. A., he made this quaint confession:

“Fairies, I am told, preside at a man’s birth, bestowing gifts. Upon me they bestowed the gift of desiring leisure. I have always longed for the paths of Dallimarie. I was surely made for idleness, for the admiration and easy engagement of the beautiful and precious things in life.

“But into the company of languorous desires bestowed by the fairies there intruded the most mischievous imp, who made it his task to see that I should have no spiritual peace except through toil. I have often hated that imp and have been rebellious, yet I hardly know what I should have done without him. I expect he has been my best friend. He has kept me, tyrant that he is, to a high standard of attainment.”

(*Halifax Chronicle*).



The Fifty-Ninth Annual Meeting of the Canadian Medical Association

Charlottetown, P. E. I., June 18-23, 1928.

AT date of writing (January 17th) abundant evidence is before us that the Charlottetown meeting is going to be a great success. The Committee in charge of the scientific programme announces that the programme is two-thirds completed, and that the talent which has been secured represents the best in Canadian medicine. It is altogether likely that, in the next issue of the BULLETIN, it will be possible for us to announce the programme in detail.

This would appear to be an opportune time to say something about the policy of the Canadian Medical Association in arranging its scientific programmes. A few short years ago, the Council concluded that a Central Programme Committee should be established to assist the local committee appointed from year to year in preparing for the meetings. The Central Programme Committee first asks the Local Committee to suggest subjects and personnel. Using this as a basis, and augmenting it as may be desirable, the Committee then endeavors to outline a programme considered to be in the best interests of the meeting as a whole. As far as possible, Canadian talent is chosen. Of course, we always welcome a few guests and visitors from the Motherland and from our great neighbor to the South. It is our opinion that when the personnel of the programme is announced, compliments will be extended to the Central Programme Committee for carrying out their duties in a satisfactory manner.

Building for the Future

The Executive Committee of the Canadian Medical Association has great hopes that the Charlottetown meeting is going to present an opportunity to stimulate organization, co-relation and future activity in the Canadian Medical Association amongst the practitioners of the three Maritime Provinces. We have so many evidences today of the value of collective effort in the fields of business, finance, education, etc., that it seems only reasonable to ask if benefits might not accrue to the medical profession of Canada by pooling their resources in many instances for the common good of the profession and the public. While every loyal Canadian should, and probably does believe in the almost sacred rights of the provinces to retain their autonomy and provincial independence, yet there seems no reason in the mind of the writer why all of these rights could not be preserved, at the same time allowing for co-relative action between the provinces in some particular lines of endeavor. To illustrate—and merely by way of a suggestion—whereas it may be difficult for a Provincial Medical Association to employ a full time Medical Secretary, devoting all of his energies and interests to the welfare of the profession in his province, might it not be possible for two or more provinces to join and provide this service for all. This thought is simply thrown out for consideration. In the writer's opinion, it is worthy of discussion at the Charlottetown meeting. (Signed) T. C. ROUTLEY.

PRINCE EDWARD ISLAND ORGANIZATION
FOR THE
ANNUAL CONVENTION, 1928.

Chairman of General Committee

DR. W. J. P. McMILLAN, Charlottetown

Secretary of General Committee

DR. I. J. YEO, Charlottetown

GENERAL COMMITTEE

Dr. McMillan, Dr. Dewar, Dr. Warburton,
Dr. Jenkins, Dr. J. A. McPhee,
Dr. R. D. McLauchlan, Dr. Yeo,
Dr. J. R. Nugent, Saint John,
Dr. S. L. Walker, Halifax.
Dr. G. H. Murphy, Halifax,
Dr. G. A. B. Addy, Saint John.

COMMITTEE ON PROGRAMME

Dr. Dewar, Dr. Warburton, Dr. McPhee.

COMMITTEE ON EXHIBITS

Dr. Houston. Dr. Smith, Dr. R. Murchison,
E. A. Foster.

COMMITTEE ON ENTERTAINMENT

Dr. Tidmarsh (Chairman),
Dr. McGuigan, Dr. Tanton, Dr. Goodwill,
Dr. Simpson, Dr. McKenzie.

LADIES' COMMITTEE

Mrs. S. R. Jenkins and Wives of the Doctors.

TRANSPORTATION COMMITTEE

Dr. H. D. Johnson, Dr. McKenzie,
Dr. Smith.

FINANCE COMMITTEE

Dr. Warburton, Dr. J. F. McNeill, Dr. Yeo.

REGISTRATION COMMITTEE

Dr. Seaman, Dr. Ledwell, Dr. Sinclair.

HOTELS AND HOUSING COMMITTEE

Dr. J. S. Jenkins (Chairman)
Dr. Archibald, Dr. Dewar,
Dr. J. C. McDonald, Dr. W. J. P. McMillan

PUBLICITY COMMITTEE

Dr. McGuigan, Dr. McKenzie, Dr. Dewar.

C. M. A. ANNUAL MEETING

Charlottetown, P. E. I., June 18-23, 1928.

PRINCE EDWARD ISLAND MEDICAL SOCIETY.

COME TO CHARLOTTETOWN IN JUNE

Publicity Committee of Canadian Medical Association

At the Annual Meeting of the Prince Edward Island Publicity Association held in the Board of Trade Rooms, Dr. G. F. Dewar, representing the Publicity Committee spoke of the Annual Meeting of the Canadian Medical Association in Charlottetown, June 18th-23rd, next. About 700 people are expected, 500 Medical men with wives and friends. Almost all the delegates from Nova Scotia and New Brunswick and a number from other points are coming by cars. The Steamer Northland will bring from 150 to 175 delegates from Ontario and Quebec and they will live on board the Steamer. An appeal will be made to citizens owning Autos to assist in entertaining the visitors. The hotel and housing problems are engaging the attention of the Committee, and any citizens who can provide bed and breakfast for delegates are asked to send in their names to Dr. Yeo, Secretary of the General Committee, or to Dr. G. F. Dewar. The Beach Grove Inn is caring for about 100 people. During their stay here the visitors will be driven to Cavendish and other points, also to Dalvay, where they have been invited by Bishop O'Leary.

Dr. Dewar spoke of the splendid assistance the C. M. A. Publicity Committee is receiving from the Island Association, and mentioned that the President, The Honourable Mr. Justice Arsenault had written an article of fifteen hundred words descriptive of the many attractions of P. E. Island. This excellent article will appear in the C. M. A. Journal in February.

PRINCE OF WALES COLLEGE

Where the C. M. A. Convention Meets in 1928

In 1829, during the term of office of His Excellency Lieutenant Colonel John Ready who had frequently called attention to the need of Classical Schools, a bill was passed in the House of Assembly for

the establishment of a Central Academy in Charlottetown. This was opened in 1836 and did splendid work in the cause of higher education. In 1860 it gave way to the Prince of Wales College, a Provincial Institution, which has done splendid work in the past in an educational way, and which at the present time occupies a very high place in organizations of its kind in Canada.

The old wooden building gave place to the splendid new brick structure which was opened in 1900. Sir William C. McDonald, who was a native of Tracadie, P. E. Island, and who was so lavish in his gifts to McGill University, donated a magnificent sum of money in 1907 to erect an addition to this building which gives increased library facilities, a beautiful Assembly Hall, where the C. M. A. meetings will be held, and also an enlarged model school. Prince of Wales College does not grant degrees, but the holder of a third year diploma is admitted to second year arts in any University in Canada. The first Principal of Prince of Wales College was Alexander Inglis who was succeeded by Alexander Anderson, L.L.D., in 1868, and he in turn was succeeded by S. N. Robertson in 1901, who occupies the position at present. Many distinguished Islanders passed through Prince of Wales College and two outstanding figures were the Late Sir Louis Davies, K.C. M.G., at one time Minister of Marine and Fisheries and later Chief Justice of the Supreme Court of Canada, and Dr. Jacob Gould Schurman, first Gilchrist Scholar, then President of Cornell University and at the present time United States Consul at Berlin.

Insidious:—A good man and his beautiful wife were in the garden.

"I have been reading in a cheap magazine," whispered the beautiful woman, "an article called 'Talk it over with your wife.' Now you and I never talk things over."

The good man bit his moustache, but he was anxious to please. So that it came to pass that the talk in the garden turned upon Smith's overdue account, and Brown's writ, and the subtle and wicked devices of Jones, not to mention the sheer idiocy of Robinson, who kept a bank and hadn't the horse sense to let people have overdrafts.

And at first the beautiful woman was delighted and proffered much endearing advice. Then she began to lose weight, and there was grey in her hair.

And ultimately the beautiful woman and the good man both went mad.

W. J. E.

C. M. A. ANNUAL MEETING.

THE NEW BRUNSWICK MEDICAL SOCIETY.

Forty-Eighth Annual Meeting, Fredericton, September, 1928.

- President.....Dr. John B. McKenzie, Chatham.
- First Vice-President.....Dr. C. J. Veniot, Bathurst.
- Second Vice-President.....Dr. D. M. Ross, Fredericton.
- Treasurer.....Dr. V. D. Davidson, Saint John.
- Secretary.....Dr. John R. Nugent, Saint John.

Registrar of The Council of Physicians and Surgeons of New Brunswick.
Dr. S. H. McDonald, 56 Coburg Road, Saint John, N. B.

C. M. A. ANNUAL MEETING.

Charlottetown, P. E. I., June 18-23, 1928.

THE NEW BRUNSWICK MEDICAL SOCIETY.

To the Members of the New Brunswick Medical Society.

Gentlemen:—

The Canadian Medical Association meets this year with the Prince Edward Island Medical Society in the beautiful City of Charlottetown. This allocation was made in Moncton in March 1927 at a conference attended by representatives of the C. M. A. and each of the Maritime Medical Societies.

Though placed in Charlottetown it was felt the Profession throughout the Maritimes should make this meeting their own and exert their best efforts towards its successful conclusion.

Will you kindly therefore make early entry in your appointment book of the dates of this meeting, June 18 to 23, 1928, reserving them for your attendance. I am sure you will find the trip both profitable and pleasant, judging by the preliminary work done by the Committee in charge.

Personal accommodation for the meeting ought to be applied for early, not because there is any scarcity of accommodation, but rather to facilitate the work of the Committees.

At our Annual Meeting at Chatham last Spring it was decided to postpone our 1928 meeting until September in order not to interfere with attendance at Charlottetown. The feeling at that meeting, as you will recall, was very general that the New Brunswick profession should do its utmost by a good attendance to support the members of the profession in P. E. I. in their efforts.

Yours very truly,

(Signed) JOHN R. NUGENT,

Secretary.

36 Carleton St., Saint John.

C. M. A. ANNUAL MEETING.

Charlottetown, P. E. I., June 18 to 23, 1928

MEDICAL SOCIETY OF NOVA SCOTIA.

THE Executive of the Canadian Medical Association will make an important announcement at the next annual meeting of the Association regarding the establishment of a Department of Hospital Service.

Again the Sun Life has shown a practical interest in supporting medical education in the Dominion. Besides the annual grant of \$30,000.00 for post graduate lectures and clinics a further grant of \$15,000.00 has been made which will be devoted to the purpose of standardizing the smaller hospitals all over this Dominion. What the American College of Surgeons has done for the larger hospitals in Canada and the United States, and no matter how critical we may be we must admit an enormous amount of good has been done even in our own Province, the Canadian Medical Association will undertake for the rank and file of our Dominion hospitals.

The Executive announces that they have been very fortunate in securing as a full time Associate Secretary of the Association Dr. G. Harvey Agnew, of Toronto, who is to be Secretary of the Department of Hospital Service. Dr. Agnew's training and experience, coupled with splendid organizing and executive ability, fit him for this new position. It will be his purpose to bend every effort to familiarize himself with all phases of hospital problems, and the Association believes, that in the not distant future, he should be a real asset to the hospitals of Canada desiring his services.

It is the intention of the Executive to organize from amongst the medical profession in Canada particularly interested in hospitals, a Hospital Advisory Committee to which Dr. Agnew will look for a good deal of assistance and advice in the development of this Department.

With further reference to Dr. Agnew the General Secretary writes the Secretary of the Medical Society of Nova Scotia as follows:—"The new Secretary is a man who will command admiration and respect from the people whom he will meet throughout Canada. May I earnestly speak for him a full measure of your support, which I feel sure you will be glad to give him."

The Editorial of Dr. G. H. Murphy in our January issue was so timely and valuable that the C. M. A. desire to give it publication all over Canada. Dr. Murphy does not know this little item is appearing in this issue of the BULLETIN. Mea Culpa! S. L. W.

C. M. A. ANNUAL MEETING.

Charlottetown, P. E. I., June 18-23, 1928.

THE NEWFOUNDLAND MEDICAL ASSOCIATION.

Newfoundland Medical Association Annual Meeting, St. John's,
Nfld. June 25 to 30, 1928.

President.....DR. A. R. ANDERSON, Heart's Content.
Secretary.....DR. JOHN GRIEVE, St. John's.

Registrar Dominion of Newfoundland Medical Board, Dr. T.
M. Mitchell, St. John's.

In the March BULLETIN attention will be given to the Newfoundland Annual Meeting. Indeed we would have filled this page with thoughts suggested by a personal letter from Dr. Mitchell to the Secretary of the BULLETIN, but we didn't have permission. We are, however, indebted to him for a mailing list of Newfoundland practitioners. We hope all will receive copies of the BULLETIN regularly.

The Newfoundland Medical Association hopes to have some of the prominent speakers of the C. M. A. meeting at Charlottetown also visit St. John's and address their meeting. We would suggest a good delegation from St. John's to go to Charlottetown and escort the visitors to their Dominion's Capital. Then with many men from the West Coast, viz.—Port-au-basque, Bay of Islands, Curling, Corner Brook, Grand Falls and Bishops Falls, Newfoundland would be well represented. The C. M. A. will cordially welcome all who can come. To some it will be the opportunity of years.

Newfoundland's Big Week is from June 25 to 30, 1928.

The Radio-Broadcasting and Publicity Committees of the Medical Society of Nova Scotia have started a series of articles in the newspapers under the general heading of "Health Advice." The Press generally are giving these articles a very kindly reception and full publicity. From many we have received cordial expressions of support. One says,—“You are doing a fine work and we are with you.” Members of the profession can assist by friendly comment when opportunity offers and, why not, an occasional contribution either to the Committee or to the local press.

The Maritime Medical News

(The following notes are not intended to be of any great historical value, but are comments, by the writer, Dr. S. L. Walker, occasioned by a recent reading of the early issues of the above named Journal, the first official journal of the Profession in the Maritime Provinces. The completed volumes of the News are available to all members of the profession in the Medical College Library, to which they were donated from the library of the late Dr. D. A. Campbell of Halifax. Dr. Campbell was the inspirer of its founding and its chief supporter).

PART II

"The Provincial Board of Health of Nova Scotia has taken a step in advance by the appointment of a Bacteriologist and in making provision for a laboratory. . . Dr. W. H. Hattie has received the appointment." This appears in the February 1896 number of the *News*. It is noted that it took four years of effort to secure this advance. It also illustrates the versatility of talents of the appointee, which his subsequent career has fully verified.

In April, 1896 Dr. E. J. Elderkin of Weymouth, in an honest and finely descriptive manner, reports thirteen cases of "Diphtheria Treated with Anti-Diphtheritic Serum." Dr. Elderkin is still an active member of the Valley Medical Society and has many times contributed to the Provincial meetings.* The same issue has the first instalment on inter-provincial registration, arguing in favor of a Dominion wide recognition of Provincial Councils.

The May number prints the paper on "Prophylaxis of Tuberculosis" presented by Dr. R. F. McDonald of Hopewell, N. S. at the 1895 annual meeting. He was one of the earliest apostles of Prevention of this disease in Nova Scotia; he continued the campaign all his life, and was a great influence in creating a public sentiment that resulted in the establishment of the Nova Scotia Sanatorium. It is very fitting at this time to pay this slight tribute to his great work.

At the July 1896 annual meeting a prominent place was taken by two practitioners who have ever since been active workers for medical progress in Nova Scotia,—Dr. J. G. McDougall, then of Parrsboro, now of Halifax, and Dr. S. J. McLennan, then of Port Morien, now of Halifax. Dr. George D. Stewart of New York was expected to contribute to the programme, but, as on several subsequent occasions, he failed to appear. The late Dr. Wm. McKay at that meeting made the positive statement, in the discussion on Abortion, that there were "two periods of the year when abortions were most common, viz. 15th of March to 15th of April, and 15th of September to 1st of November." The reason for this is not recorded although the question was asked.

* Since this was written Dr. Elderkin has passed to his reward, as was noted in the BULLETIN of November, 1927.

This year Dr. John Stewart delivered the Address in Surgery at the 29th Annual Meeting of the Canadian Medical Association; a good title would have been,—“Lister, the Pathologist!” In the December issue appears a paper entitled “Some Instructive Mistakes of Eminent Clinicians.” It was written by the late Dr. James A. Coleman of Granville Ferry, who had been a steady contributor to the programmes of medical meetings. It is mentioned as it was a posthumous article, Dr. Coleman having died of a malignant intestinal condition, September 5th, 1896.

The January 1897 issue appears in an enlarged form and with some changes in the Editorial Staff. It appears that Doctors D. A. and G. M. Campbell were bearing the greatest part of the editorial burden. Dr. G. M. Campbell retired from the Board entirely and the late Dr. James Ross, 87 Hollis St., Halifax, became the business Editor, a position he held until the Journal ceased publication. He also wrote contributions on Dermatology and Syphilology. From 30 to 40 pages of reading matter and 16 pages of advertising constituted each issue.

Many case reports are recorded in the *News* in its early 1897 numbers. We note the names of M. A. B. Smith, Dartmouth; C. H. Morris, Windsor; T. C. Lockwood, Lockeport; S. J. McLennan, Glace Bay; L. M. Silver, Halifax; L. R. Morse, Lawrencetown; H. H. McKay, New Glasgow; as contributors, who are still active members of the Medical Society of Nova Scotia. For several years there had been insufficient anatomical material for the needs of the College which, a March 1897 Editorial notes, was overcome by special legislation.

In the May issue 1897, P. 153, appears an article,—“Notes of cases of Midwifery” read by the late Dr. R. S. Black, before the Halifax Medical Society, 20 years previously, 1877. He presented statistics of his obstetrical work from 1838. He says,—“My diary dates as far back as 1838, in which year the labor involved in taking notes was not great, as I find but one case recorded . . . Any professional man who claims to have been invariably successful in the treatment of these cases, is either laboring under a mental hallucination or is lacking in the essential element.” The paper makes interesting reading especially as it was written 51 years ago, and may appear in the BULLETIN.

The May 1897 Editorial refers to the completion of the Halifax Medical College year as “the most successful year in its history.” Total student body numbered 60 of whom 55 were in Medicine, eight degrees were conferred.

Frequent references are made in most of the issues of this year to the meeting of the British Medical Association in Montreal August 31st to September 3rd, 1897. The October issue has an editorial report. About 200 were present from Great Britain and three hundred from the United States. Regarding the entertainment, which was on a large scale, Dr. A. F. Currier, wrote in the *New York Medical*

Journal thus,—“Those of our profession who had the privilege of attending the recent meeting of the British Medical Association at Montreal, could not have failed to be touched by the gracious and whole-souled manner in which they were entertained by their Canadian Hosts. It rarely happens that courtesy and hospitality to strangers are more delightfully manifested. The social enjoyments were limited only by the capacity of the guests to take advantage of these. . . Of all the Americans who were there, I know of none who did not come away with a higher esteem than ever of the excellent qualities of our neighbors across the border.”

Perhaps the most distinguished visitor present was Lord Lister and the *News* Editorial quotes from the *Canadian Practitioner*,—

“No man of the Empire, no man of the World, has ever received a more cordial welcome from Canadians than Lord Lister. The members of the medical profession of this Dominion are especially enthusiastic over his visit to Canada. We recognize the fact that we have amongst us the greatest surgeon of this century—the greatest surgeon of all time. We all admire him for the great work he has done for the human race; we all love him for his kindly manner; we all respect him as a hero among men. Who can forget his face—full of dignity, full of strength, full of sweetness? Some think that the surgeon, who has handled the scalpel for many years, must become hardened and cold-blooded. Lister is a noble, living evidence of the fact that such is not the case, that there is nothing in the practice of Medicine and Surgery that has any such effect on a good and broad-minded man. The whole world is paying honor to Lister for his greatness; and yet he, who has received the highest honours ever bestowed on any man of science, is one of the most modest and unpretentious men living.”

Then the editorial goes on to say,—“A pleasing feature of the annual dinner was the address of congratulation to Lord Lister by Dalhousie College and University, which was read by Dr. Farrell. Lord Lister in reply said that he had been absolutely astonished by the kindness shown to him by his Canadian and American friends during the meeting. He had long ago expressed the belief that the principles of antiseptic surgery would continue to spread until it permeated and dominated the profession, but he had not anticipated such rapid progress as had actually taken place. He deeply regretted the absence at the meeting of his old house surgeon, Dr. John Stewart, one of the signatories of that address, a man for whom he had a great respect and even reverence.”

In the spring of 1897 Drs. Murdock Chisholm and John Stewart “spent some time in visiting leading hospitals in the neighboring republic.” The medical graduates this year included Dr. R. D. Bentley, who was killed on the street in Truro about four years ago, Dr. E. E. Bissett now in Windsor and Dr. H. A. Payzant of Dartmouth.

In the June issue is found a paper by Dr. Andrew Halliday entitled “Experimental Work on the Properties of Antipyrine.” Although doing a country practice at Shubenacadie and Stewiacke Dr. Halliday was a wonderful student and research worker. The editorial note

in this issue recognizes this,—“A perusal of this abstract gives but a small idea of the immense amount of experimental work performed by Dr. Halliday, which was gone into in detail in the original paper. All who were privileged to hear the reading of his paper, were impressed with his methods of investigation, and with the industry and energy with which he carried on his work. On previous occasions, Dr. Halliday has favored the Branch with reports upon his original work on the Diuretics and on the Cardiac tonics. These contributions, to our knowledge, are all of a high order of merit, and coming from, as they do, one busily engaged in a large country practice, should prove excellent stimuli to those who are more favorably situated for carrying on original investigations.” Then let us remember, too, that Dr. Halliday was by no means a strong man, had several severe illnesses, and passed away at a comparatively early age.

The Medical Society of Nova Scotia, in 1897, met on July 7th and 8th, in Pictou, the preliminary programme called for 18 papers, and of the contributors, all but the following have passed away,—Dr. G. Carleton Jones, Italy; Dr. W. H. Hattie, Halifax; Dr. George E. Buckley, Guysboro; Dr. H. H. McKay, New Glasgow; and Dr. J. J. Cameron, Antigonish.

At this annual meeting, the Society was asked to endorse the project of Lady Aberdeen to establish the Victorian Order of Nurses. This “led to an animated discussion, in which it was made manifest that few present approved of the scheme. It was decided to allow the matter to lay over for a year in the hope that more private information, as to the manner of working etc., would be by that time available.” In 1926 this same Society nominated one of its members, Dr. C. S. Morton of Halifax, to the General Council of the V. O. N. It is rather curious to note the early hostility or indifference of medical men to lay agencies engaged in philanthropic health work. Perhaps a better course would be to step right in and see that these agencies are properly directed, and not be to such a considerable extent critically aloof.

In his Presidential address the late Dr. J. F. McDonald said,—“Twenty-nine years ago, the Medical Society of Nova Scotia was organized in this town” (Pictou). He probably referred to the first occasion where a meeting was held elsewhere than in Halifax. As noted in the March BULLETIN, the first Annual Meeting of “The Medical Society” (Provincial) was held in Halifax October 5th, 1854.

Mention is made in the November issue of the appearance from the press of J. P. Lippincott Co., of Vol. I and II of *International Clinics*. There are many of the Profession who have received these volumes continuously for the past thirty years.

The *News* gives an explanation why old prints of physicians represent them with canes to their noses,—“It was formerly the practice among physicians to use a cane with a hollow head, the top of which was gold, pierced like a pepper-box. The top contained a quantity

of aromatic powder, or of snuff, and on entering a house or room, where infectious disease prevailed, the doctor would strike his cane on the floor, to agitate the powder, and then apply it to his nose.

1898. In the January number the "Editorial We" extends the seasons greetings in a somewhat lugubrious manner:—"In wishing our readers a very happy and prosperous New Year, we desire it to be noted that we begin a new year with the New Year, and that we are now in our teens. As far as the "editorial we" are personally concerned, we have ceased to expect much happiness in the sanctum chair, and we might as well "fess up" that we don't know what prosperity is, but we are still hopeful for ourselves, and have not become so spleened by the buffetings of the world but that we rejoice in the happiness and prosperity of others. It is, therefore, with the utmost cordiality that we extend the Season's Greetings to our subscribers, advertising patrons and exchanges."

The same editorial comments on the small number of original communications that had been submitted by the profession. The 1898 volume is also lacking in these particulars and in case reports. Of those who did make these contributions but three, Dr. J. J. Cameron of Antigonish, Dr. M. A. B. Smith of Dartmouth and Dr. M. Chsholm are still with us.

Referring again to the V. O. N. episode a further explanation appears in this January issue. But it only goes to show how *touchy* we can be about some things and especially of importations from the United States. Then "preferring to remain neutral" did not appear to be very brave to say the least and it also seemed to savor of an *armed neutrality*. There was one phase of promised V. O. N. service that has not, at least as far as Nova Scotia is concerned, materialized,—attendance upon those who are ill and "isolated from centres of habitation." The V. O. Nurse is essentially a city and town nurse and the rural districts continue to neglect themselves.

On March 13th 1898 Dr. John Somers, one of the best known of Halifax physicians, died at the comparatively early age of 54 years. He had long been identified with the Halifax Medical College only resigning the Chair of Surgery the previous December. The death of another prominent physician occurred this year in the person of Dr. W. B. Slayter. He had returned to Halifax upon the death of his brother, Dr. John Slayter, the hero of the cholera epidemic in 1866. He, too, was comparatively young being but 57 years old. Dr. J. Howard Slayter, who died January 7th, 1926, was a son of Dr. W. B. Slayter. One cannot peruse these journals, or even look over the Bulletin for the past two years, to note how many members of our profession die before they reach the sixty mark. What is the answer?

Here is an editorial prophecy in the May issue.—"Mr. W. W. Kenney took up the duties as superintendent of the Victoria General Hospital on May 1st. The appointment of a layman to this important

post is, in a measure, an experiment, but Mr. Kenney is not only a gentleman of wide business experience, but also brings to his new position an extensive knowledge of men and things generally. He is also possessed of good executive ability, and will doubtless prove a most efficient officer. We wish him much success." In May 1928 Mr. Kenney will have filled this position for thirty years to the great good of the Hospital and to his own great credit. He is, perhaps, the best authority in Eastern Canada on practical hospital management.

The April Editorial refers to the boosting of the Maritimes for tourists, going on to say that efforts should be made to bring invalids here, to "attract health-seekers as well as pleasure-seekers. Let us not lose sight of these facts. We are surely privileged to advance our interests in any legitimate way. There would appear to be scope here for an honest effort to broaden our field for practice, and still be ethical and possibly even humanitarian in the effort." This is *so rich* we wonder why some Branch Society or some medical promoter has not attempted to carry out the suggestion.

Of the nine graduates from the Medical College this year five are in active practice in Nova Scotia:—Doctors A. F. Buckley, W. Forrest and A. McD. Morton of Halifax, Dr. G. G. Gandier of Dartmouth and Dr. M. D. McKenzie of Parrsboro.

The eight annual meeting of the Maritime Medical Association was held in Halifax and was the best in point of numbers and excellency of papers. One is struck with the large number of papers presented by local men even when visitors like Dr. Armstrong of Montreal and Dr. Cushing of Boston were present. Neither did they neglect the entertainment for it was on a lavish scale. The explanation is that each Provincial Society had its own annual sessions at which they did their business and there was very little encroaching on the scientific time-table.

1899. The subjects of Inter-Provincial Registration and the care of the tuberculous were much in the foreground in 1898 and 1899. One of those who helped to keep the tuberculosis question before the public was Dr. A. P. Reid who, although he had retired to his farm at Middleton, could not retire from his loved work of prevention of disease. Not only did he talk and write but he drew plans and constructed. In circularizing the profession on the sanatorium question he actually constructed a model building and illustrated his circular with actual pictures. It was to be a house of iron and glass, surrounded by verandahs also of iron and glass and each open to sunlight and air from all sides. The use of wood would be limited as far as possible. The supporting structure would be tubular and so arranged as to permit a hot water circulation through it, thus doing away with coils while assuring an equable distribution of warmth. There would be no cellar or basement, and instead of lathe and plaster walls there would be adjustable hanging screens, 6 feet high coming down to within a few inches of the floor. There would thus be no

obstacle to the free circulation of air. This model did not receive editorial endorsement, nor do we recall that it was ever given serious consideration by anyone in authority.

Early in this year one of the editors went on a little vacation to one of the provincial towns. While there he heard a heated argument of four ladies regarding the action of some church authorities letting the Sunday School Hall of the local Presbyterian Church for the purpose of a lecture, advertising "Viavi" remedies. He then adds,— "One—evidently a maiden lady—supported her contention by asserting that all women should know what a lady physician told her, that all of women's diseases are "given" to them by their wicked husbands. The force of this argument was to some extent offset by the statement that some women who didn't have husbands get sick." This editor had ideas on three things.—(a) Viavi Treatment, (b) The gratitude of some parsons, (c) The talkativeness of some lady physicians. *But*, "as language which is unparliamentary does not look well in print he refrains from expressing his ideas. His tale is, therefore, unvarnished, but his mind is, to some extent, eased." It may be recalled that about this time there was a regular epidemic of quacks and irregulars operating in this province. Not until 1921 was legislation passed that made it possible to lessen this danger to the community; one sees fewer advertisements of quacks and irregulars in the press to-day than for many years.

As antisepsis was a comparatively new procedure it is not strange that much space should be given its discussion. Even poetry was invoked to tell the story of the microbe. Thus M. H. A. contributes an Ode dedicated to "The Microbe." The style is *a la Kipling* and the several refrains after each verse are worth repeating.—

Here's *to* you, little microbe! and your chum—the bacillus;
We are "on to you," but ages you have been 'a-doin' us."
Here's *to* you little microbe! in your secret habitats,
While you've been absorb'd in business, we've been talking thro' our hats.

Her's *to* you, little microbe! and the cocci and the spore,
You're a microscopic robber, that's killed lots and's after more;
Here's *to* you little microbe! you Frenchman epileptic,
We have Waterloo'd you squarley with the Lister antiseptic.

Here's *to* you, little microbe! with your confidential style;
We couldn't navigate you 'till we had your chart on file;
Here's *to* you little microbe! you are no aquatic sport,
In the antiseptic ocean you can never get to port.

Here's *to* you, little microbe! You're no sluggard in a fight,
You used to be a slugger, and a wrestler out of sight;
Here's *to* you, little microbe! we can box and twist you now,
With the Lister antiseptic you're "not in it," in a row.

And here's *to* you, little microbe! tho' your star is on the wane
And you'll never be the aggressive social potentate again.
Here's *to* you, little microbe! for your death we've cast the die,
Tho' we still must hold your mem'ry blazon'd on sarcophagi.

This year recorded the death Oct. 23rd of Dr. A. C. Page of Truro. A man of ability he filled many official positions and was a steady worker in the Medical Society. About a year before his death he filed his last report as Inspector of Humane Institutions. Although he was a man who was never afraid to speak out his mind, perhaps knowing this was his last report, he spoke more freely in portraying some of the conditions existing in some of the County Asylums. Especially did he criticize the mingling of the violent insane with the so-called "harmless insane." He reported forty such cases and the *News* raises a strong note of warning, referring to a tragedy at the County Asylum at Annapolis, "still fresh in our minds." In one asylum with 99 inmates, of whom 97 were insane, ten of these were violent and ten "filthy," and only the keeper, matron, and five assistants to attend to all duties. "There are considerably over 300 insane patients in our county asylums, many of these violent and filthy." Nor have we yet dealt fully with this problem. The principle guiding Councils in the maintenance of these asylums was that of keeping the cost per inmate per day or week at the lowest possible rate. Indeed it is only a few years since a Council boasted of an asylum where the cost per inmate was only *90 cents per week*. Of course there may have been some error in their bookkeeping, but it shows the spirit that too often inspires individual councillors. One cannot but contrast the great community efforts made to establish and maintain hospitals in even small towns with the apathy shown towards those who suffer from mental disease.

Eleven degrees, M.D., C.M., were conferred this year. Those in practice now in Nova Scotia are,—Dr. W. B. Almon Halifax, Dr. E. P. Atkinson of Oxford and Dr. V. V. Goodwin of Pugwash.

Under the heading,—*"Matters Personal and Impersonal,"* the May issue devotes two pages to personals such as we publish in the BULLETIN, but it could not keep up the gait and nearly all issues only had five or six items. The BULLETIN will endeavor to keep up this personal nature of its publication with the idea that the more we know of each other the more friendly will we become.

The matter of a Sanatorium for cases of Tuberculosis was very actively considered by the Nova Scotia Branch of the British Medical Association this year. A Committee was appointed to present the matter to the Government. This Committee was composed as follows—Doctors M. Chisholm, C. D. Murray, Trenaman, Farrell, M. A. B. Smith, Jones and D. A. Campbell. Several schemes were suggested.—

1. Two wards in the Victoria General Hospital.
2. Two cottages in the Hospital ground.
3. To build a sanatorium or cottage in the vicinity of the Park and Young Avenue.
4. The building of a modern sanatorium in a more remote part of the province.
5. The Government to pay for 20 or more consumptives treated at any sanatoria.

Evidently someone had it in mind that private capital might be induced to invest in an institution for paying patients. In a shorter time than might be expected this found its solution in the establishment of the Kentville Sanatorium.

(To be continued)

A "Great Officer" in China

By Dr. K. A. Baird, Canning.

LET it be explained at the start that the writer himself was the "Great Officer", and that this is only the literal translation of the phrase the Chinese usually apply to a medical doctor, especially one with Western training. Until last spring there were several hundred foreign doctors in the various mission hospitals and centres in China. Owing to the extremely uncertain conditions the consular authorities have withdrawn all foreigners from the interior, even from places where there were no local disturbances. The writer spent several years in the interior of China during the unsettled times which have led up to the present chaos, and left in the spring of 1926. It was suggested to him about a year ago that readers of the BULLETIN might find something of interest in an account of certain of his experiences, especially those with a more distinctly medical and surgical character. Most of these experiences, if not identical to, are at least representative of, those of many another medical missionary in that country.

From the standpoint of post-graduate study there is much to be said for life in a mission hospital. There you have everything except the teacher. Of clinical material in endless variety you have no lack. Your older colleague will show you some little tricks you will need to know, and which you didn't learn at college or in a hospital in the homeland. He will also, in the majority of cases, be glad to have you show him anything new you have to contribute. The teacher is lacking it is true; but you have a few good books, and you know that *you* are the only hope of recovery the patient has; so you go ahead if you can offer him a reasonable hope of improvement, and if occasionally you are disappointed in results you at least have the knowledge that there is no one else available who could do half as well. The result is that you are justified in doing, and actually do, operations and administer treatments, which in this country you would not be justified in attempting without some special training. And in the doing you get the training. On the other hand there are certain types of work which are common to the general practitioner in Canada but which you seldom have any call to do while on the mission field.

With these preliminary remarks we shall confine ourselves pretty much to very sketchy notes to indicate the type of cases one had to deal with, picking out some interesting ones from the brief records of four months.

Removed a fibromatous lump from right side of scrotum.

Under local removed a speck of stone from an arm (Said to be part of a bomb. The fight occurred in Shansi some 60 miles away across the mountain and patient says there are 20 or 30 others wounded. He wants to hurry back to urge some friends to come to our hospital).

Amputated a leg, patient aged 61, T. B. knee, 5 months duration.

Amputated a finger, hopelessly injured in explosion. (It seemed to be a favorite trick of beggars to find an unexploded rifle cartridge or hand grenade and pick it to pieces, as witness this note: "Did a skin graft on a hand which had had three fingers and top of thumb blown off a month ago." This is the patient who four months later came in a considerable distance to present us with a basket of 100 eggs. He was a really poor man, and this represented several days wages).

Haemorrhoids constituted an affliction from which many sought relief in the mission hospital, most of the operations being done in the out patient department of the hospital.

Fistulae in and around the anus were so common that the operative treatment might well be said to be *the* routine operation of the hospital. Small ones were done under local anaesthetic,—larger ones under general.

Curettage of infected sinuses was another common operation. The majority of the sinuses were probably T. B. A fair percentage of good results was obtained, especially when one considers the number of months and sometimes years the condition had existed.

A left arm was amputated because of extensive T. B. of the radius and elbow joint.

One day a number of the Red Spear Society members tried to enter the city to protest to the magistrate against the increased taxes for military purposes. This society was composed largely of ignorant villagers, members of what in some countries would be called the peasant class. The Society is a secret one, with various mysterious rites which are supposed to render those who pass the tests successfully immune from injury by weapons or bullets. In this case the soldiery fired on them from the wall of the city and killed several. A number of wounded were brought to our hospital. We operated on one man who had been shot through the left abdomen, sewing up four holes in the bowel. Patient made good recovery. Throughout the spring of 1926 this little matter of sewing up puncture wounds of the bowel became quite common, due to the bad habit the Chinese had developed of being careless or vicious with firearms. The writer remembers one occasion when several young fellows were brought in wounded, some seriously. They were members of the Society just mentioned, and had been taking a sort of examination to test or prove their immunity. They were stood up at about twenty paces distant from their friends the examiners and fired at with native made shot guns. The result in all cases appeared to us to be that they were "plowed."

The day after the above mentioned shooting by soldiers we had several more wounded in, two of whom died. Also we enlarged open-

ings of a sinus of the arm, the result of a bullet wound, with fracture, received some weeks before. This was January 30. On Feb. 20 a brief diary note mentions about this case. "Opened counter-openings in arm sinuses,—difficulty in removing bullet as near artery, so left it in."

Curetted persistent sinus from radius of boy, from whom we removed a "slate-pencil" of sequestrum some months before.

On Feb. 9 this note occurs in the sketchy diary, "Heard shots last night at 1.30 a. m.—heard one bullet whistle overhead. This morning two patients taken into hospital, wounded. It was bandits on the Horse Market Street."

Feb. 19. A bad cellulitis case came in. He had been needled in the left arm by his father for a headache. His condition was bad, the whole side of the chest and arm being involved. He died next day.

Feb. 23. Operated on a huge carbuncle. Extracted teeth for two patients. Gave intravenous quinine to a nurse for obstinate malaria. Had two 606's given in the Out Patient Dept.

Mar. 8 contains a note that things have been very quiet for a few days. The Second People's Army has departed north and the troops from the south occupied the place. A man came in who had been shot through the superior maxilla nine days before. The bullet was still inside.

Mar. 9. The case of yesterday was eating a piece of Chinese steamed bread when a vessel burst and he rapidly bled to death, being about gone when the doctor was called from the residence compound. While he was still at the hospital three wounded came in from about 15 miles away where two villages were burned by bandits and some 20 persons killed. Next day several more wounded came in.

Mar. 11. More wounded came in from the same place. One had been shot through the abdomen from side to side. As it had been done for some 48 hours it was thought best not to attempt an operation, but to treat him with morphia. Under this treatment he seemed better for some days, but later took a turn for the worse. On March 23 he showed fever and all signs of peritonitis. As a last resort we put a drain into the abdomen, but he died next day.

It will be seen that there was a good deal of war surgery that year in addition to the usual run of sickness and accident. The diary has a note, Mar. 16, saying there were 12 patients in the wards and 20 living in the Outpatient Hospitals, all with gun shot wounds. And they continued to come in after that.

In a good many of these cases the little X-Ray plant was invaluable, as it enabled us to remove fragments of bullet or bomb, reduce fractures etc., in a way that would have been impossible without its aid. In addition to the ordinary medical and surgical activities, one had to supervise such matters as ordering and controlling the drugs, keeping the electric light plant in order, supervising such little tasks as the making of a new operating table, or a peg leg to replace the useless

one removed by amputation from some patients, etc., etc. An occasional hernia, cataract, lipoma, cyst, etc., gave opportunity for aseptic surgery of a kind more often seen in this country. One wonders perhaps how busy a mission doctor is. Sometimes he is comparatively idle, but usually he finds enough to do. The busiest time the writer had was twelve days while his colleague was away, and there was a special rush of work. During that time from one Sunday morning to the following Saturday night he was responsible for 1,011 treatments and did 17 operations. Of course most of the treatments were given by assistants and nurses, but even so the "Great Officer" on that occasion thought he was fairly busy.

After several years in a mission hospital one naturally remembers some cases of peculiar interest.

In one case a young woman had very definite signs of some irritation in or around a Fallopian tube. The hospital at that place had no satisfactory facilities for abdominal surgery, and as the husband could well afford the trip we sent her up to Peking to the Union Medical College Hospital there (Rockefeller Hospital). The head of the department there was Dr. Maxwell. He wrote the case up in the *China Medical Missionary Association Journal*, and thanked me for sending him so interesting a case. When they opened the abdomen they found that the Fallopian Tube contained an ordinary round worm! I do not know whether there are any other such cases on record in medical history or not. It might be a very good subject for debate as to how the worm arrived in the tube, but a more practical lesson to be learned from the case is probably that one should be prepared for the unexpected!

A young man came to hospital with his naso-pharynx completely blocked by contractions, the result of ulceration a year before. An opening was made through the soft palate and he once more breathed by his nose.

Opium poisoning cases came quite frequently to the hospital. Zinc sulphate was the emetic usually employed, and it was followed by copious drinks of potassium permanganate solution, and the patient kept awake until she got rid of most of the poison. We say "she" because, these cases were so often women who in desperation or desiring revenge sought to commit suicide by taking "golden pills" or eating the crude opium.

One day we removed a piece of metal weighing three ounces from the floor of the orbit of a soldier. It proved to be a piece of the breach of a rifle made in a Chinese arsenal. It had blown up, killing two and wounding several. It looked to us like cast iron. As soon as he had recovered from the operation the patient brought in his friend from whose forearm we removed two other bits of the same gun.

Some of the diseases not often seen in this country, but quite common in China are Malaria, Typhus, Dysentery (both amoebic and bacillary) and Kala Azar.

One of the forms of treatment, the benefit of which seems to be in doubt in the minds of many practitioners in this country, is the use of mixed bacterins for severe bronchitis or broncho-pneumonia. After using it on a goodly number of Chinese children and some adults, as well as some foreign children, we are convinced of its benefit. Sometimes we combine it with steam inhalations. It works, as shown in the following note: "Kala-Azar case is developing broncho-pneumonia" (a very common event in the course of the former disease) "gave the above mentioned treatment" and next day the record is that the child was some better, and after a week it was much better.

Our own small son aged three came in one night with rapid breathing and a temperature of 104.4 in the armpit. There were loud rales in the chest. After the above-mentioned treatment that night his temperature next morning was 101 and by noon had gone down to 99. Time and again small infants were brought to the clinic with a most severe bronchitis and given only the vaccine. Next day their parents would bring them in saying that they were completely cured, but they had brought them back only because the "Great Officer" had asked them to do so.

And speaking of poison cases,—one day a man came in who had eaten *face powder*. We treated it as a case of arsenic poisoning, and he recovered.

It was very common to have an accident case in from the city, where the bleeding had been stopped by a liberal sprinkling of tooth powder. It seems to be a good haemostatic, to judge by the results we saw. In other cases they had used feathers, or flour. One cause of the great infant mortality in China is the bad habit of the midwives of using earth from the floor or yard to stop haemorrhage from the umbilical cord. Very often the child dies of tetanus. A routine test of all patients in a ward was made at the Peking Union Medical College Hospital some years ago, and as nearly as we can remember their figures they concluded that about 60% of the Chinese have the tetanus organism in their intestines. Presumably they have a high degree of immunity or their death rate from this disease would be even greater than it is.

There are other things as interesting or more so than those mentioned, but from what has been said the reader should be able to get some idea of the intensely interesting professional life that a medical missionary lives.

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All One Body We

IN these days when everything seems moving towards centralization and when the almost frantic cry: "Organize!" is bawled throughout the land by throats who often don't know why and for what they are shouting; and when the country to the south of us are organizing their heads off; the more individualistic of us may be inclined to jibe and back a bit. At the same time circumstances which make it necessary for us down here to send representatives to a central governmental organization at Ottawa, seem likewise to make it necessary for us to be represented in a medical organization such as the Canadian Medical Association. And it would seem quite as important that there be a body to direct our medical policy as a nation as our political policy. It is for that reason that I think we, in the Maritime Provinces, should take an active interest in the Canadian Medical Association.

We are a small nation as population goes. To an alarming extent at present our views and ideals are being moulded by the much larger nation to our south. The journals we read, the books we read, the clothes we wear, the automobiles we ride, the very food we eat—from its corn-flaked Kelloggian breakfast flavor to its baked bean evening flavour,—are largely American. We have been tending largely to take our medical flavour from the south, as the activities of such bodies as the American College of Surgeons and the Rockefeller Foundation in our midst have proved. I don't want to be accused of a narrow

national bias, *au contraire* I believe that these two bodies have done and should not be prevented from doing enormous good to us. At the same time they are—being human—fallible bodies, and all is not gold that glitters. It behooves us therefore to develop an individuality of our own—a Canadian one—in order not only to pick and choose carefully from what is being offered from outside, but, better still, in order to work out a salvation of our own that may even be of benefit someday to those who now offer us salvation. We can develop a Canadian individuality in medical lines only by a united Canadian effort, the promise of which the Canadian Medical Association holds out.

There is another point of special interest to us in these Provinces. Whether we like it or not the Canadian Medical Association, like Confederation, is an established fact. Like most of our other organizations its active or governing body is in Upper Canada. The tendency is and will be for it to take its bent from the place where its governing body is. And then some day may come the time when we will be crying also for Maritime Medical Rights. It is now that we should take steps to avoid that sort of disaster, and the way to avoid it is by making our weight felt at once on the body as a whole, an opportunity to do which the coming meeting at Charlottetown admirably holds out to us.

We are inclined to be a little diffident about ourselves down here. In spite of the fact that yearly we export an enormous crop of brains we seem to forget that these went partly because they could not stay to compete with the brains left behind. We are inclined to think that because Montreal and Toronto are bigger that they are better, and we will listen with dumb wonder and awe to views expressed at our medical meetings by medical men from those cities, that we would tear limb from limb if expressed by one of our local group. This same tendency also displays itself in our perfect willingness to allow the Canadian Medical Association to be run by Central Canada, on the assumption that they can do it better than we can.

This is but another indication of that horrible inferiority complex under which we suffer down here, a complex that causes us to yawp aloud when any of our local talent shows signs of originality and power: "Can any good come out of Nazareth?" It is, among a hundred others, one of the factors that is driving our bright and original minds away. It seems to me that we might do something to lift this inferiority complex by overcoming our self-consciousness to the extent of putting up a stronger representation at the next meeting of the Association. After all we must have something medically to offer to the organization. The people who gave Chipman and Pirrose to Upper Canada must have something left to lay on the altar of Canadian Medicine. If they haven't then we will come to be merely an appendix tacked on at the end of a progressing nation—a useless sort of appendix. And every surgeon knows what happens to useless appendices.

As a matter of fact all this that I have so long-windedly written has, as is often the case, been much more pithily put in a well-known book by a very ancient king. Solomon said: "Wisdom hath builded a house: she hath hewn out her seven pillars. She crieth upon the highest places of the city, 'Whoso is simple let him turn in hither. . . If thou be wise, thou shalt be wise for thyself.' "

H. B. A.

A Presentation

Love looks not with the eyes,
But with the mind as well.—*Shakspeare.*

NO citizen of our country has been followed into his retirement by more evidences of gratitude and affection than Dr. John Stewart. The desire to do him honor has not been confined to the medical profession alone. His native Province is deeply conscious of his presence because it has been finding in any of the high ideals he planted along the route he has travelled. Always with a good word for whatever makes for the better care of the sick, it is not surprising that the Nursing Profession in this Province should seek to pay him a tribute of respect and good will. And so on Friday evening, January 20, a committee consisting of Miss G. MacKenzie, Miss Carson, Miss Graham and Miss Fenton, representing the Registered Nurses' Association called upon him, and presented him with a very beautifully illuminated address, conveying the good wishes of the Association upon the completion of fifty years in practice, and notifying him that in his honour a cot in the Children's Hospital should be endowed for one year.

Perhaps few of the many tributes paid Dr. Stewart touched him more than this whole-souled recognition of his life efforts as a doctor by the Registered Nurses' Association. Dr. Stewart, we are sure, feels highly honored at this kindly and thoughtful act of the Nurses, for none knows better than he the big place the Nursing Profession takes in the complex problem of doing what is best for the ill and the injured.

Branch Societies

Halifax County Branch.

THE Branch met at the Dalhousie Clinic on November 23rd to hear an address by Dr. Frank Mack on the "Importance of Symptoms in Urology." After referring to the disposition of many persons to delay consultation with a physician, Dr. Mack said that there are still many who seek medical relief at an early stage of their illness, and thorough use of modern diagnostic procedures gives the physician opportunity to greatly reduce the proportion of inoperable growths, extensive tuberculosis of the urinary tract and badly damaged kidneys resulting from stricture of ureters, etc. Such complaints as pain, more or less definitely referred to the urinary tract, discomfort or difficulty in emptying the bladder, frequency of micturition, and changes noticed by the patient in the appearance of the urine should have careful attention. One should not be content to explain symptoms by changes found in the bladder, and thus run the risk of overlooking conditions higher up. Cystitis is not to be regarded very often as a primary clinical entity. Frequency of micturition is often the earliest warning of urinary disease although it may be present in the absence of disease. The nature as well as the situation of pain should have careful consideration because of the assistance it gives in diagnosis. A complete history is also of great value. The urine should be carefully examined, and if there be pyuria or haematuria, a microscopic examination, always desirable, becomes imperative. The physical examination should be very thorough, and should include search for the explanation of the fever, chills, cachexias, etc., symptomatic of the toxæmias and sepsis referable to the urinary tract. None of the aids to diagnosis now available to us should be neglected. Dr. Mack illustrated his address by extracts from a number of case histories, and by a fine series of slides of X-ray findings.

In the discussion, Dr. K. A. MacKenzie contrasted present urological methods with those of twenty years ago. Dr. Burris spoke of the value of catheterization of the ureter in cases of calculus, citing illustrative cases. He asked for information as to the frequency of ureteral stone. Dr. Johnston asked Dr. Mack's opinion respecting the frequency with which the tubercle bacillus appears in the urine in persons suffering from tuberculosis limited to the lungs. He had seen it stated in a journal article that it was to be found in 85 per cent. of such cases. In reply, Dr. Mack would not venture to estimate the frequency of ureteral stone, but it is not very uncommon. In twelve out of a hundred successive autopsies the ureters had been

found abnormal—either strictured or dilated. He doubted the reliability of the statement relative to tubercle bacilli in the urine.

At the meeting of December 7th, Dr. Howard M. Jamieson, who has lately returned to Canada to join the department of pathology, in Dalhousie University, gave an interesting account of the British Panel System. This system, which came into effect on the first day of 1913, aims at the provision of a general practitioner medical service for all persons who are of the working class, and also to ensure that they will receive something in the way of a money-benefit during such time as they are incapacitated for work by reason of illness or accident.

The whole scheme is under the direction of the Minister of Health, and is administered in each county or county borough by an Insurance Committee, made up of representatives of the insured patients, the medical profession, and the approved insurance societies—which provide for the money benefit, and such other additional benefits, in the way of specialist service, convalescent homes, etc., as the society may be in a position to provide.

From the doctor's point of view, the main advantage is the assurance that the income will be certain though small, but there are many disadvantages, such as interference by political interests, "red tape," annoyance and unreasonable demands on their time by patients who, no longer having to pay according to the amount of work required, have come to look upon the doctors as their employees, rather than people to whom they are looking for help. This attitude is rather fostered by the approved societies, who are inclined to advertise widely as to what additional things they have been able to enforce upon the doctors for the "benefit of their members," though in reality the benefit is chiefly to themselves, by way of additional members gained for their society through these extra services.

At first the profession was bitterly opposed to the scheme, but concessions have been made which have improved matters. It is recognized to be at least a shade better than the old "club system," previously in vogue, and the type of private practice for which payment is seldom received without a great deal of trouble. While the medical profession would be very glad to have a better system, it is likely that the panel system will remain until something better is brought forward.

Supplementing the preceding, the Minutes of this meeting refer to the following matters of business. A communication from the General Secretary regarding the Koch Cancer Foundation was on motion referred to the Cancer Committee of the Medical Society of Nova Scotia. Dr. W. D. Forrest reported for the special Committee to consider putting the Venereal Clinic on a part paid basis as follows:—"After carefully considering Dr. Jost's proposals we are of the opinion that people attending this Clinic should, when able, pay a moderate

(Continued on page 31)

Reminiscences

Dr. A. S. Kendall, Sydney, N. S.

(THE BULLETIN has made a name for itself in publishing from time to time articles or notes giving the reminiscences of many of our older practitioners. These have been given not wholly for their historic interest or scientific value, but the rather for the personal element and their anecdotal nature. That Cape Breton could furnish a feast of such contributions is evident to us all, but the BULLETIN has been unable to obtain much more than the excellent historical paper of Dr. M. D. Morrison now resident in Halifax. For a long time an effort has been made to secure a series of articles from one well qualified to write articles of great historical value and of interest. Especially in view of our approaching 75th Anniversary Meeting would a historical review of the Medical Society of Cape Breton be very welcome. Perhaps this can yet be obtained, but, in the meantime, we will anticipate further contributions from Dr. A. S. Kendall of Sydney by reprinting an article of the Doctor's from the *Glace Bay Gazette* in its Diamond Jubilee Number, edited by that well-known writer Mr. Stuart McCawley.—S. L. W.).

Operating in 1864

The Doctor writes:

"One of the most interesting of the early operations, was before my time; it occurred in 1864. I had it described to me by one of those who took part in it. A fisherman was suffering with a strangulated hernai; and the operation was performed in the kitchen of his home. The physician doped the patient with rum and laudemun. Brought in a barn door; had a number of holes bored through it, and roped the patient to the door. His instruments were, what we would designate to-day, as the jack-knife variety, he had a kettle of boiling water as his only antiseptic; no rubber gloves, and only members of the patient's family as helpers. The operation was a complete success, with a quick recovery and no taint of septic poisoning. The older breed were mighty tough and sound and clean-blooded and although in their personal habits they didn't enjoy the luxury of toilet soaps and baths; I think the Lord took a lot of interest in them."

One of His Early Cases.

"I vividly remember my first accouchment. The granny was somewhat the worse of gin; and the family broke all traditions of the village by sending for "the young doctor."

Granny was there with 'a square face of gin' mixing herself 'hot gins and sugar.' She was smoking a blackened clay pipe and as she spoke Gaelic, and I didn't, I cannot tell you what she was saying about

me. But if one could judge by her looks, the remarks were not complimentary. In preparing my work I cleaned out a potato pot and boiled my instruments, and after I had finished I cleaned out the pot again and boiled the instruments before packing them to go home. I heard granny thumping the table and roaring with laughter; and I couldn't resist asking one of the family what she was saying. The translation was "The young sawbones is cooking his hayforks!"

A Joke on Himself.

"Now I'll tell you a joke on myself. It was in February. The winter was a hard one. We had snow storm after snow storm; the glass stood below zero most of the time; and the roads were impassable. One evening I got a message over the phone just "Gabarus come." Then something happened to the wires and I couldn't get any more of the message. Gabarus meant a thirty miles trip in a blizzard. Being young and ambitious and feeling it was my duty I started. I made about three miles up to about nine o'clock, and had to return to town. No horse or man could go any further. I succeeded in getting a message through as far as Marion Bridge and told them to send out some of the young men to try and break the roads towards Sydney, and I would start again. With the help of the whole country side and a relay of horses every mile or two, I succeeded in reaching Gabarus in 26 hours. It was a cold, terrible nerve racking trip.

My patient was a well-to-do fisherman, and a miller, who in attempting to clear the snow from the mill-wheel, started spinning it around. The wheel, about fifteen feet in diameter caught his right arm and turned him around nobody knows how often, until the sheer weight of his body and the increasing speed of the wheel caused by the high winds threw him clear. One arm was lacerated and the other broken above the elbow. He was alone at the time but made his way, upwards of half a mile, to his home; and was without medical aid for 26 or more hours.

I fixed him up as well as I could, and was personally delighted to feel that I could save the arm. When I started to return home, the condition of the roads were worse than on the trip out. More storms, drifting blizzards, and intensely cold. I was storm-bound for two weeks. When I saw my patient again there was some cleaning necessary and I had many calls before he was thoroughly recovered.

The next spring I sent him a bill of \$80 which, I thought, was little enough under the circumstances, taking into consideration the first trip out. The bill was ignored. I sent it again and again, then threatened to sue. He sent me \$30, but I kept billing him for the balance.

A few years afterwards I was a candidate for Parliament and made a trip to Gabarus canvassing for votes. My patient had changed his politics and was voting against me. I upbraided him in the country

store, and he told the crowd about me threatening to sue him. Then he pulled off his coat and vest and had one of the boys 'skin his shirt' over his head. "Look here," said he pointing to the scar on his arm. "That's what he is suing me for. When I was in the Civil War a mule could bite a better job than that!"

The Late Dr. McKay.

"Doctor Wm. McKay was one of God's good men. He looked after a thousand coal miners, ran the Tory Party in his country, was leader of the Opposition in the Provincial Parliament, and in his latter days was a Senator. Short and fat, a wonderful doctor, full of life, a lover of a good story, a sincere friend. He gave his life to his neighbors and died poor. He drove through the country in an old-fashioned buggy, drawn by the fastest horse he could buy and bad roads, snow, blizzard or rain couldn't keep him home if anyone needed his service.

One day at the Reserve Mines a Newfoundland laborer, who was working on 'the picking screen' picking stone and slate from the coal, slipped and fell in. His hand got caught in the machinery and he sustained very serious injuries. There was no hospital, no antiseptics, no nurses. Some of the fellow workers rushed the injured Newfoundlander to a shack boarding camp and Dr. William cleaned the wounds from coal dust, sewed and patched the head and had the patient comfortable. When he was nearly through another chap showed up with the dismembered ear, which he had found amongst the coal. Doctor William put the ear in some hot water, sewed it on where it should be and after a few days the chap was back at work again. About a year afterwards the Doctor called my attention to a husky young man who was coming out of the pit at Reserve; and asked me to look at his ear. To me it looked good and normal, but Dr. William said he wasn't very proud of the job. "Don't you see," said he "that it is a lot out of plumb!" That shack was so dark that it is a wonder I didn't sew it on upside down."

The President of the New Brunswick Medical Society, Dr. John B. McKenzie of Chatham, will address the members of the Society in the matter of attendance at Charlottetown in the next issue of the BULLETIN.

In enclosing copy for their latest advertisement, Charles E. Frosst & Co. ask us to give "Digestive Hypophosphites" our usual careful attention. The writer confesses to belong to the school that still sees much of good in many much maligned "Tonic" preparations. It is quite possible there is a pendulum of specific therapy that may sometimes swing too far. Its a way pendulums have!

It has been most gratifying to the BULLETIN to have practically all its advertisers renew their contracts for 1928. That came about because we gave them their money's worth. It also means that they received something that proved the profession were reading the advertisements. This is something we have always claimed and we trust that 1928 will be a good year for our advertisers on *this account*. We are utilizing these pages from cover to cover to be of service to the medical profession. Not a single advertisement is published that does not appeal directly to the Doctors or Hospitals. If they were not of value to you they would not be published if they gave an income sufficient to publish the issues for an entire year. A very large United States Advertising Agency furnishes us with one or two of our advertisements, for example Listers Diabetic Flour. This means they regard the BULLETIN as the official organ of the Profession in the Maritime Provinces. Say! Doctor! Do you realize just how good an official publication you have? Then do it some little favor, you know how.

Branch Societies.

(Continued from page 27)

fee. Dr. Jost assures us that no patient who is unable to pay will be refused treatment and that any funds received will be used for the greater development of the nursing services." The report was adopted. Dr. Murphy stated that the Committee on the Memorial Tablet to the Fathers of Dalhousie was not yet ready to report. The matter of a post graduate lecture by C. M. A. speakers was referred to the Executive for action.

A regular meeting of this Society was held at the Victoria General Hospital on January 4th, 1928 at 8.30 P. M., the President in the chair. 23 members of the Society were present. Dr. H. D. O'Briene was elected to membership. Dr. Philip McLarren and Dr. K. A. McKenzie presented a number of very interesting cases in a most acceptable manner. The discussion was very general and most profitable. Dr. Smith of Dalhousie presented pathological specimens and demonstrated the test for occult blood in the faeces. The vote of thanks to those presenting cases was heartily endorsed by all present.

OBITUARY

WILLIAM TOBIN, L.R.C.S. Ire. 1868, L.R.C.P. Ire. 1870, F.R.C.S. Ire. 1882, Halifax, N. S.

AFTER an acute illness of seven weeks, Colonel William Tobin of Halifax passed away at the Victoria General Hospital at an early hour in the morning of December 24th, 1927. Although his health had not been rugged for many years always during the summer months his was a familiar figure on the streets of Halifax. Of recent years his step has been noticeably slower, but he always carried himself erect and gracefully. For many years he and Mrs. Tobin had spent the inclement weather of the falls, winters and early springs of Nova Scotia in the South of Europe preferably, but failing health kept him in his old home this last fall. He was 80 years of age.

Dr. Tobin was the only son of the late Hon. John Tobin founder of the well-known firm of John Tobin & Company. Following a period attending English schools he took his medical degree in Dublin and regularly returned there for post graduate work, as well as in Paris. Early in his professional career he joined the military and served with the Royal Medical Corps of the Imperial Army in India for a considerable period. He accompanied the Halifax Battalion to the North West at the time of the Riel Rebellion. Indeed, in Halifax, he was oftener thought of as Colonel Tobin than as Doctor Tobin, especially as he soon dropped general practice, becoming one of the first Eye Specialists in the City. He was an accomplished linguist, an agreeable and scholarly companion, possessing a considerable range of knowledge gained by wide reading and extensive travel. He was a courteous, indeed a perfect gentleman, who's passing was mourned by all who knew him.

The Medical Society at its July, 1927 Annual Meeting, somewhat tardily, elected him to Honorary Membership. In acknowledging the recognition he wrote:—"Very many thanks for your kind and much too flattering letter in which you inform me I have been made an honorary member of the Medical Society of Nova Scotia, with which I was connected for many years. You may be assured that I highly appreciate the honor and if I should be spared so long and the state of my health permit, I shall gladly avail myself of the privilege of attending the Anniversary meeting next year.

Reciprocating the good wishes of the members of the Medical Society, believe me,

Yours very sincerely."

Dr. Tobin is survived only by his widow formerly Miss F. Shea, a niece of Sir Ambrose Shea of St. John's, Newfoundland, a former Governor of this Island Dominion. The Society conveyed to Mrs.

Tobin their sympathy by letter and a floral tribute, which was acknowledged in a most grateful and beautifully expressed letter. Mrs. Tobin is assured of the very sincere sympathy of all members of the Medical Society and especially of those who had the honor and privilege of the acquaintance and friendship of her late husband. As a further tribute of respect, members of the Society were present at the interment in Holy Cross Cemetery on December 26th, 1927.

S. L. W.

At the advanced age of 82 years, Clarence Kennedy died at Pugwash, N. S. January 7, 1928. He was a native of Pictou County, but a resident of Port Philip, Cumberland Co., for some sixty years. He had many friends who held him in high esteem. Six brothers and sisters survive, among them being Dr. James Kennedy of West Medway, Mass. and Dr. Evan Kennedy of New Glasgow.

Dr. F. J. Desmond of Newcastle was in Moncton in December, attending the funeral of his brother-in-law, Mr. James A. Geary of that city.

The death occurred Nov. 29th, 1927 at the N. S. Sanatorium of Miss Mary A. McLean of Inverness, after an illness of about one year. Of two brothers coming home to attend the funeral one was Dr. Charles McLean of New Richmond, Quebec. Dr. McLean graduated from Dalhousie in 1922 and has continuously practised in his present field. He visited a few days with his father, Mr. John M. McLean of Inverness, before returning to his home in Quebec.

A few days before Christmas Mrs. Katherine MacLennan of Margaree Harbor passed away. Her death was unexpected although she had been in indifferent health for a year or more. The deceased was the widow of the late Dr. Angus MacLennan who represented Inverness in the Federal Parliament for many years and who died some 20 years ago. The *C. B. Medical Historian* could furnish us with many incidents of his political career of stirring interest, especially some connected with famous Tupper campaigns. Mrs. Walker, wife of Hon. J. A. Walker, Minister of Natural Resources in Nova Scotia is a daughter of the late doctor.

Locals and Personals

DR. D. J. Hartigan of New Waterford has now a good reason for not attending midnight Mass, as, on a recent occasion when he came out of Mount Carmel Church, he found his Hupmobile Coupe had been appropriated by joy riders. It was later located at a bridge near Lingan badly smashed and damaged to the extent of probably one thousand dollars. Arrests followed and it is understood that the damages have been made good. The press reporter naively states,—“It is rather a serious matter to steal the car of a medical man, as loss of life may result from his inability to reach a patient in time to *save him from eternity.*”

Born:—To Dr. W. A. Pullins and Mrs. Pullins, Petitcodiac, in December 1927, a daughter.

Small Pox, which is more or less epidemic in Quebec at all times, is just now a little source of bother to the New Brunswick Health Department. If these cases have drifted in we, in N. S., hope they will not drift through.

Dr. H. E. Britton of Moncton, sailed from Halifax, December 31st by the Steamer Pennland for London, having received a cable of the serious illness of his sister-in-law, Miss Marion Upham of Woodstock, now a student at the University of Edinburgh. He will remain for some time for post graduate study.

Dr. S. A. Fulton and Mrs. Fulton of Truro spent the Christmas and New Year holiday guests of Mrs. Fulton's sister in Montreal.

Dr. and Mrs. G. W. Somerville of Bristol, N. B. had as guests at Christmas their son, Dr. W. B. Somerville and his wife, of Mars Hill.

Dr. H. L. Abramson of Saint John, after giving evidence in Quebec in the famous Gallop case, accompanied by Mrs. Abramson, spent the Christmas holiday in New York. They returned to Saint John, December 29th.

Dr. and Mrs. Wm. Rockwell of River Hebert had their son, William of Montreal, home with them for the Christmas celebration.

Sir Wilfrid Grenfell of Labrador and Newfoundland spent some two weeks of the Christmas and New Year's season at Hamilton, Bermuda.

Dr. A. S. Chesley of Saint John spent the recent holiday season in New York.

Dr. A. J. and Mrs. Losier of Chatham had their son and daughter, students at St. Francis Xavier College, at home with them for the Christmas vacation.

In view of the differences of opinion in Halifax regarding the Duncan Report and a Harbor Commission, perhaps Dr. W. W. White, the efficient Mayor of Saint John, might address the Halifax Medical Society in order to give, at least one profession, a correct solution of this municipal problem. His attitude has been very generally approved by all interested in the same question in Saint John.

Doctors H. S. Bridges and D. C. Malcolm of Saint John have had the unique experience of visiting every Christmas since 1924 Quadruplets in a home on Queen Street in that city. They are doing well and are greatly admired.

Dr. A. Pierce Crocket and Mrs. Crocket of Fredericton left Dec. 26, 1927 for Los Angeles, where they will spend the winter.

Dr. and Mrs. J. J. Roy of Sydney spent Christmas with the Doctor's parents, Town Clerk and Mrs. Roy of New Glasgow.

Mrs. Miller, widow of the late Dr. V. L. Miller of Halifax, and her two sons, spent Christmas with her mother at their former home in New Glasgow.

Dr. S. C. Murray, Albert, N. B., spent Christmas at his former home in Moncton.

Dr. L. deC. MacIntosh of Hartland, N. B. is a great admirer of good horses and is offering for sale several very promising colts, their sires having marks as fine as 2.04½.

Dr. J. G. Wherett of Moncton, a member of the New Brunswick Tuberculosis Clinic, gave the address on December 19th, 1927 before the Rotary Club of Campbellton.

Dr. Georges L. Dumont of Campbellton returned home the latter part of December from two months post graduate surgical work in New York.

It is understood that Dr. V. L. Goodwill, Medical Superintendent of Falconwood Hospital, Charlottetown, is retiring from his position on December 31st. He had handed in his resignation last April,

but owing to difficulties arising in securing some one to succeed him, has carried on up to the present. Dr. Goodwill will be greatly missed by patients, staff, and the general public alike. It is his intention to set up private practice in Charlottetown, where he will devote himself principally to internal medicine, specializing in nervous diseases. His successor will be Dr. J. W. MacIntyre.

Dr. Mabel Hannington of Saint John spent the Christmas season with her sister, Mrs. F. Rouse of Port Hope, Ont.

Dumb Dora, reading sign,—Entire balcony 35 cents—"Oh John! Let us go in so we will be all alone!"

Dr. F. R. Gow, formerly of Halifax, now a surgeon on a boat of the C. G. M. M. spent Christmas at home with his family at Greenwich Kings County, N. S.

She:—"Do you think there are divorces in Heaven?"

He:—"I don't think so. You can't get a divorce without a lawyer, you know."

A recent graduate at Edinburgh, M.B., Ch.B., is Dr. Ewart A. Ferguson, son of Mr. W. F. Ferguson of Moncton. He was a graduate of Arts at Mt. Allison. It is intimated he may remain in the Old Country.

Dr. H. G. McLeod of Middle Musquodoboit spent his Christmas holiday in Halifax, visiting former friends.

Himself the patient.—"When a man was found dying on the road beside his damaged motorcycle a message was sent to the home of Dr. Routledge asking for his assistance. The reply came that the doctor was away from home. It was the doctor himself who was the victim of the accident." (English Paper)

Dr. Fraser D. Mooney was recently appointed Acting Superintendent of the Buffalo General Hospital. He is a son of Mr. and Mrs. Daniel Mooney of Stellarton and his friends are pleased to learn of his success.

Dr. L. P. Churchill of Shelburne was a patient in November and December in the Victoria General Hospital. He was operated on for Appendicitis and made a good recovery. He resumed his full practice the first of the new year. The nursing services of Mrs. Churchill contributed much towards his recovery and convalescence.

Dr. T. W. and Mrs. Griffin of Woodstock spent the Christmas holiday in Philadelphia.

Mr. W. F. Donkin, for many years Town Clerk of Amherst, with Mrs. Donkin, is again spending the winter with his son, Dr. C. A. Donkin of Bridgewater.

Dr. and Mrs. D. M. Cochrane of River Hebert, spent a week in December visiting Mrs. John Cochrane of Halifax, the doctor's mother, and Dr. Perry Cochrane of Wolfville, his brother.

Among the passengers on board the C. P. R. S. S. Melita, sailing from Saint John to Liverpool, Dec. 22, 1927, were Dr. and Mrs. I. M. Lovitt of Yarmouth. They are en route to Cape Town to spend the winter touring South Africa.

Dr. J. Knox McLeod, M.H.O. Sydney, addressed the Rotary Club of that City on December 21st, his topic being the Promotion of Health.

Dr. Dan and Mrs. McDonald of North Sydney, left December 21st for Montreal. Thence, accompanied by their daughter Katherine, they journeyed to Newark, New Jersey, spending the Christmas season with their son Donald and his family. The Doctor visited the New York hospitals. The occupation of the ladies is obvious from the following announcement:—"Dr. D. McDonald and Mrs. McDonald of North Sydney announce the engagement of their only daughter Katherine, to Dr. G. H. Amyot, son of Dr. J. A. and Mrs. Amyot of Ottawa."

Extensive additions are about completed at the River Glade, N. B. Sanatorium, there being accommodation now for 175 patients. Our N. S. readers will recall that the Superintendent, Dr. R. J. Collins, was for a number of years on the staff of the N. S. Sanatorium, Kentville.

Dr. Samuel Marcus of New Germany has now purchased and is occupying the office and residence of the late Dr. F. L. T. Penny. Dr. Marcus went to New Germany to act as *locum tenens* for Dr. Penney when he was attacked by his fatal illness.

Gouthro—Vaughn. On January 10, 1928 in St. Joseph's Church, North Sydney, Dr. Alexander C. Gouthro of Little Bras d'Or was married to Miss Emma Vaughn R. N. of North Sydney. Their engagement had been previously announced by the brother of the bride, Mr. T. E. Vaughn of Halifax. The bride was given in marriage by her brother-in-law, Mr. T. H. Hartigan of North Sydney. She was attended by her sister, while the groom was supported by Dr. Kenneth Hayes of Sydney Mines. Doctors Gouthro and Hayes were Dalhousie classmates graduating in 1925. The bride was for a number of years

a very efficient and popular Nurse in North Sydney. The newly-weds will reside at Little Bras d'Or. Congratulations and best wishes are theirs from their many friends.

MacDonald—Campbell. The marriage took place Dec. 31st at Toledo, Ohio, of Dr. Harold MacDonald of Detroit, Mich. and Janet H. Campbell, daughter of Mr. A. J. Campbell and the late Mrs. Campbell of Inverness. The groom was formerly of Glendyre, Inverness Co., the bride taught school in Inverness and Shirley, Mass. She was a graduate of Dalhousie in 1924.

The medical profession in St. John's will be more or less concerned with the closing and dismantling of the Sudbury Hospital which has been largely used in treatment of Ex-Soldiers. We do not believe the country is yet willing to forget the services of the B. E. F. and will only approve of a move of this kind if the necessary care and treatment is fully continued elsewhere.

Dr. S. S. Slauenwhite of Rose Bay has in his possession a deed, dated 1761, describing the granting of a town lot from Francis Gildart to Henry Wagner. The chief interest to the doctor is that it was witnessed by his own great-great-grandfather, John Adam Heb. He is the ancestor of all the Heb's in this province, coming to this country in 1753 at the age of 14 years.

One of the most thoughtful and practical addresses given before a service club for some time was that given by Dr. Charles A. Morton of Halifax to the local Rotary Club on January 10th, 1928. His general subject was "Rotarian Standards in Business and Professional Life" and he very clearly pointed out that *service* was the essential eth-feature of the medical code.

Dr. Clyde S. Marshall of Halifax, Provincial Psychiatrist for Nova Scotia, delivered a most interesting lecture at the Dalhousie Health Centre, January 9th under the auspices of the Nova Scotia Society for Mental Hygiene. In dealing with the subject of mental hygiene in Nova Scotia generally he avoided being didactic by a citation of cases illustrating the importance of proper home and school training and environment. Some steps should at once be taken to have Dr. Marshall address the various Branch Medical Societies in this Province. Why not in the Maritime Provinces?

Dr. Perley R. Little, Dalhousie 1926, of Belmont, N. S., began his duties at the N. S. Sanatorium January 3rd. Since graduating from Dalhousie in 1926, he has been resident physician in the hospital at Grand Falls, Nfld. Dr. Gerald Burns of the Sanatorium staff spent the New Year holiday at his home in Halifax.

Dr. Gordon Bruce of New York recently visited his brother, who is a pavilion patient at the Sanatorium, Kentville, before proceeding to his former home in Shelburne. After a short vacation he will proceed to England for post graduate work.

Mrs. Havey, wife of Dr. H. B. Havey of Stewiacke, was called to Saint John, early in January, on account of the serious illness of her mother, Mrs. Elizabeth Brown.

Dr. Bernard Francis of Sydney Mines is ship surgeon on the C. G. M. M., Canadian Fisher, plying between Halifax and Bermuda. He spent the Christmas holiday season with his family in Sydney Mines.

Dr. H. S. Birkett, C.B., LL.D., of Montreal was recently presented with a Gold Medal by the American Academy of Ophthalmology and Oto-Laryngology. This is the first time in 30 years this honor has been conferred on a medical man. Dr. Birkett was O. C. of No. 3 Canadian General Hospital that functioned so successfully for several years at Boulogne. Many men from the Maritime Provinces were at times attached to this Unit.

Dr. S. H. Keshen of Halifax spent his Christmas and New Year holiday in Toronto and Chicago. He enjoyed his trip very much returning to Halifax early in the new year.

At a recent meeting of Educational workers in Fredericton there was a Conference with Medical Health Officers, arranged by the Provincial Department of Health. There are so many matters upon which such co-operative action is desirable we believe that similar conferences should be held yearly in all provinces. We make this suggestion for Maritime Canada and Newfoundland.

A case of smallpox has appeared in Trenton, N. S. Doubtless the Provincial Health Department will make some announcement in the matter. Our business is to see to the complete immunization of every man, woman and child in these Maritime Provinces and Newfoundland.

Doctors D. J. Hartigan, F. T. McLeod and W. G. T. Poirier of New Waterford, N. S., have assisted very materially in First Aid Competitions recently held in that district.

Early in January Dr. J. S. Jenkins of Charlottetown spent a few days in Montreal largely on C. M. A. business.

Mrs. Sybil Calkin Smith, daughter of Dr. J. O. Calkin of Sackville, N. B., has recently graduated with honors from the Training School of the Peck Memorial Hospital, New York.

All will be glad to learn that Dr. J. L. McIsaac of Antigonish is greatly improved in health since he has been under the care of the Mayo Clinic. In all probability he is also paying a great deal of attention to the surgical work done at this great centre.

The N. S. Public Health Department notes that 15% of the births in Nova Scotia are not registered. The medical profession, after themselves complying with the Regulations, should do their share in creating public sentiment in favor of this necessary health service.

Dr. W. B. Coulter of St. Lawrence, Nfld. has for several years been both physician and magistrate for the community. He recently resigned the magistracy and when the demand comes for a new appointment, it appears that the local doctor is considered *par excellence* the proper person for the position. In Nova Scotia and, presumably, in N. B. and P. E. I. we have troubles enough without that. It would be interesting to learn from some of our Newfoundland readers how this double duty came to be assigned to the doctor and just how it works out.

Dr. C. B. Trites of Bridgewater left early in January for New York, Philadelphia and other cities to attend Eye, Ear, Nose and Throat Clinics for the next month or six weeks.

Dr. B. W. Robertson, Keswick Ridge, N. B., has been elected to the Board of Trustees of the Fredericton General Hospital. Many years ago there was a very considerable discussion about having medical men on the Hospital board of this Hospital. The compromise then effected has been enduring.

Rhodes Scholar. The latest award of the All-Canada Rhodes Scholarship has been made to J. Hugh MacLennan, son of Dr. S. J. MacLennan of 197 South Park St., Halifax. He is a graduate of the Halifax Academy and will this year graduate from Dalhousie with Honors in Classics. He is President of his Class and a member of the Student's Council. In athletics he excels in basket-ball and tennis and has been identified with all undergraduate activities. Dr. MacLennan, himself a classical scholar of note, has evidently imparted some of his love for the Classics to his talented son. The BULLETIN extends its best wishes to this young man and its congratulations to Dr. and Mrs. MacLennan upon his recognized success. This has been written before we read the comments of the Cape Breton press.

Ayerst

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CANADA

By permission of the Journal of the American Medical Association and with the approval of the author, a copy of Macomber's paper on the "Effect of a Diet Low in Calcium on Fertility, Pregnancy and Lactation in the Rat" will be forwarded to any Canadian physician on request.

Dr. W. R. Dunbar, Mayor of the Town of Truro, is very well pleased with the financial showing of the town for 1927, extensive improvements being made yet the year shows a surplus. When occasion requires, Dr. Dunbar performs also the duties of Stipendiary Magistrate. Under his rule the Town has continued to hold the Canadian record for collection of its taxes. Should not his idea of medical ethics suggest he tell other towns how it is done?

Dr. W. W. Patton, Dominion, spent part of the Christmas holiday with his father, Mr. Timothy Patton, an aged and respected citizen of Oxford, N. S.

We regretted to learn that owing to illness Mrs. Fraser, wife of Dr. A. F. Fraser of New Glasgow, was taken to hospital in Montreal early in January. We hope to soon note her return home fully restored to health.

Dr. W. P. McMillan of Charlottetown is the President of the local Rotary Club of the Island Capital.

The doctors of Windsor, N. S., during the recent session of the Municipal Council of West Hants, combined with the Hospital Board to entertain the Council at Afternoon Tea at the Payzant Memorial Hospital. Doctors Keddy, Bissett, J. W. Reid Sr. and A. R. Reid spoke of various phases of the Hospital work, even to taking an X-Ray of the good right hand of one of the Councillors.

The letter of Doctors Wickwire and Kelley in the January BULLETIN were much enjoyed by many readers. A similar letter from the wireless officer on the Stanley describes some of the same scenes in the last issue of the Acadia Athenaeum.

Among the Acadia personals in the *Athenaeum* we note that Dr. F. S. Messenger of Middleton was a graduate in 1890 and his son Carl, a graduate of 1927, is a Freshman at the Medical School of Dalhousie.

Dr. S. H. McLeod, formerly practicing two or three years in Nova Scotia is now located at Coronation, Alberta.

The recently elected Mayor of Sussex, N. B. is Dr. L. R. Murray of that town.

Dr. John Stewart of Halifax has a short letter in the January number of the C. M. A. Journal deprecating the suggested passing of the General Practitioner. In defence of 75% of the physicians in Nova Scotia, who are and must continue in that category Dr. Stewart's letter might well be lengthened to that of an article, which would be greatly appreciated by the readers of the BULLETIN.

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An unusually small number of medical men appear to be seeking civic honors this year. At the present writing Dr. I. J. Yeo is planning to be Mayor of Charlottetown while the C. M. A. meets there next June. In Truro Dr. Dunbar seems reluctant to hand over the reins of office after a very successful year. Probably we will hear of others before the fatal date. By the way Dr. O. B. Keddy of Windsor seems to enjoy the full confidence of his fellow citizens.

Dr. L. P. Churchill of Shelburne spent a few days early in the New Year visiting his parents Mr. and Mrs. Enos Churchill of Dartmouth.

Dr. J. J. McRitchie and Mrs. McRitchie of Goldboro must have a very kindly feeling towards the people of that community for just before New Year's they gave practical demonstration of their appreciation of their community services. On December 28th, in the Odd Fellows Hall in Goldboro, in the presence of a large number of friends, Rev. W. J. Alexander read a suitable address and presented the Doctor with a fine buffalo coat and Mrs. MacRitchie with a purse suitably filled. The incident has a greater meaning than appears on the surface, undoubtedly they have given community rather than professional service alone.

Every member of the medical profession in Nova Scotia will regret to learn of the illness of Dr. W. H. Hattie of Halifax. At this writing he is confined to his home in Dartmouth with an acute rheumatic attack. That it will speedily respond to treatment and his recovery be complete is the sincere wish of every practitioner from the youngest to the oldest.

At the recent graduating exercises of the Springhill Cottage Hospital every local doctor was present to extend his congratulations to those who completed their course.

One of the most interesting addresses delivered before a medical society for some time was that given by Dr. Ross Millar of Amherst before the Halifax Society on January 18, 1928. He dealt most entertainingly with the subject of Japanese Hospitals and, at the home of the President later in the evening, with Japanese customs in general. The **Bulletin** has been promised the copy of this very informing paper.

Mrs. Braine, wife of Dr. L. B. Braine of Annapolis is spending some weeks with her daughter, Mrs. Clarke of Philadelphia. Mr. Clarke is a former resident of Tatamagouche.

Dr. J. J. McRitchie of Goldboro recently spent a few days in Halifax.

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Dr. G. C. W. Bliss of Amherst has entered the controversy in Nova Scotia about the killing of the cow moose. It is quite evident he does not approve of the recent permission to kill the female of the species. He has been identified with this sport for many years.

Dr. R. I. Gillis, Baddeck, spent a few days early in January in his former home in Sydney Mines.

Dr. F. A. Richard of Moncton was on January 13, 1928 reelected President of the N. B. Fox Breeders Association. Dr. B. W. Robertson of Keswick Ridge was elected to the Board of Directors.

Dr. W. T. Purdy of Amherst has been solicited to accept a nomination for the Mayoralty. He finishes a term as Councillor in February.

Dr. J. H. Secord of Sackville, N. B. has been re-elected one of the Town Councillors by acclamation.

Mrs. Park, wife of Dr. J. E. Park of Newcastle, was unfortunate in falling on the ice recently and sustaining a fractured wrist. We trust she will soon have no remaining disability.

The *Eastern Chronicle* makes very special mention in a recent number of the histrionic ability of Dr. V. H. T. Parker of Stellarton as evidenced in the operetta "The Belle of Barcelona." This was copied in full by the Bridgetown paper, the Doctor's home town, but, as it seems to suggest some comparisons with Dr. Whitman along the same line, we do not feel at liberty to reprint the reference.

The illness is noted of Ian Ross, son of Dr. Hugh R. and Mrs. Ross of New Glasgow. We trust he will make a complete recovery.

Locum Tenes.

Not a month passes but someone writes the Secretary asking if anyone is available to supply for a few weeks or months. Sometimes we are able to find some one at once. This is only good luck and not good management, as those looking for such opportunities seldom trouble till they have tried everything themselves. Why should not the prospective and recent graduate advise the Secretary confidentially of their prospects, plans, etc. Now there is a good opening in Newfoundland, two country districts in N. S. wanting a doctor and one or two doctors desirous of making a change.

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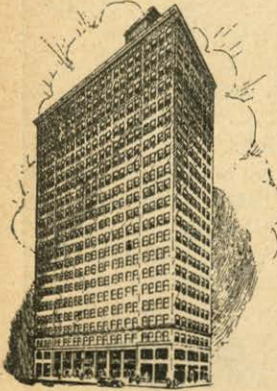
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