

Presidential Address

Nova Scotia Medical Society, 1931

DOCTOR DAN MURRAY, Tatamagouche.*

Mr. Chairman, Your Worship, Ladies and Gentlemen:

I wish in the first place to express to this Society my grateful appreciation of the high honor conferred upon me in electing me President. For the last quarter of a century, my lot has been cast, like that of the great majority of medical men, in general practice, where the opportunities for keeping abreast of the times have not been all that might be desired; consequently, I value the honour even more.

You will pardon me, I trust, if on this occasion I depart from the usual train of formalities followed in Presidential addresses, and discuss, in a blunt and imperfect manner, a few of the problems that confront the profession. My point of view is of course that of the general country practitioner; so my remarks will perhaps make up with a certain representative significance, whatever they may lack in up-to-date, scholarly authority.

At such time as this in our history, when kings retain their crowns, or governments preserve their existence, only here and there, where Providence seems to be granting a few days of grace; when the misbehaviour of the stock market is taking the cake from the wealthy and the bread from the poor; when, in fact, it seems that all the forces of civilization are being weighed in the balance;—at such a time as this, I say, is it not reasonable to expect that the practice of medicine should also be, as I think it is, in the questioning state of flux that precedes great changes of method and direction? Is there not a tide in the affairs of medicine, and is it now to be taken at the flood?

No matter how we may choose among the various measures of progress in the world—the intellectual one offered by the growth and spread of Education, the material one offered by the widespread application to life of mechanical appliance, the moral one offered by the elevation of the standard of Ethics between different nations as well as between different individuals—there is no one measure of progress than can compare with the decrease of disease and suffering in man, woman and child.

Those of us who have been engaged in the practice of medicine for twenty years or more are becoming increasingly conscious of the radical changes that are taking place in the industrial, economic and professional systems under which we live and work. It seems that almost every phase of the accepted order is under attack. There is abroad a spirit of skepticism and unrest. The laity are impatient with our method of practice, and critical of the cost of medical service. Let us not attempt to deny that this is in some ways a desirable symptom. Let us observe, for instance, in the many significant utterances that appear from time to time in books, magazines and the daily press, an indication that the general public has a keener appreciation of the right of every citizen to good health and skilled medical care.

*Delivered at the 78th Annual Meeting of the Medical Society of Nova Scotia, at Truro, July 8th, 1931.

The knowledge of biological processes has advanced, and is advancing, more rapidly than it can be assimilated. Knowledge of vitamins and endocrines should, in the belief of the laity, immediately be translated into good health. Immunity vaccines and allergy are terms with which they appear to be familiar, and on which they pin their faith and build their hopes; the trouble is, when these hopes fail, as must often happen, the Doctor is blamed. Fashions in treatment, often because of clever commercial propaganda that offers laity and doctors alike a wholly unjustifiable hope, follow each other in rapid succession without sufficient actual basis.

No one is capable of assimilating the whole of the available medical knowledge, and the modern doctor is therefore compelled to limit his activities to a comparatively narrow field. Even when he does this, he often faces conditions which tax his resources, and to which he can apply only with great difficulty the conclusions that scientific investigators have established. Universal recognition of the fact that it is possible for one man to grasp only a small part of the large field of medicine, has created the specialist. As a result, the general practitioner is being crowded to the wall, general practice diminishing as specialism increases; and now the patient must in his search for advice pass from doctor to doctor, at a constantly mounting cost to his probably not-too-well-filled pocket-book, although at an improvement in the efficiency of the service received. This drain upon the individual patient's resources has inclined the public to ask for a collective organization whereby the expense of treatment will be shifted from the individual to the community.

The economic basis upon which medical practice has hitherto been conducted has been unsatisfactory, both to the profession and to the public; and many agencies have been brought into play in an effort to solve the difficulties. In England, the panel system is utilized; in France, voluntary and involuntary insurance have been tired out. In B. C., a Royal Commission has been appointed, whose membership of five, includes two physicians. This Commission is to submit a report to the Legislature. In Alberta the tendency of the times exhibits itself in the form of a travelling clinic established by the Government and approved by the medical profession. In Saskatchewan union hospitals are being formed, under the control of adjoining municipalities; these hospitals are supported by taxation and provide service at a very low rate, physicians being employed on a salary basis.

In conservative Eastern Canada, the influences at work have not yet materially affected us, but may we not expect that in the near future the seeds that have sprouted in the West will spread through to us? If we are to be masters of our own destiny we must effect a reformation from within the profession, rather than have it imposed upon us from without, I should like to suggest, regarding such a reformation, that its nature will be such that in the resulting situation, the patient will be left free to choose his own doctor, and also that the doctor will not have the freedom and flexibility of his individuality hampered and curtailed by administrative departments and the political influences they sometimes involve.

As I see it, the present situation leaves two general paths for improvement open to us. First, we may effect an inward improvement of the efficiency of our services by raising the standard of our profession, which in turn may be done through more post-graduate lectures and more meetings of local societies—and incidentally a better attendance at both of these—as well as through an effort to stop the exodus of practitioners from the country to the larger

centres; this last in order that we may assure the remoter districts of easily accessible service. Or, as the alternative path of improvement, we may evolve a plan of state health insurance, either voluntary or involuntary, such as will meet the needs of the community.

I have confidence enough in the leaders of our profession in this province to believe that they are capable of evolving a plan that will not only be suitable for this province, but that may eventually prove worthy of adoption by other provinces as well. I would therefore suggest that this Society name a Commission from the leaders of the profession—a Commission that shall systematically study from every angle the problem that confronts us, and formulate a scheme to solve it.

It seems important at this time that I make a few remarks on the subject of the official organ of our Society, the BULLETIN. This publication began, in 1921, as a mere circular letter issued by the General or Associate Secretary to inform each member of business transacted or proposed by the Society; since that time, however, it has grown into a monthly of some sixty or seventy pages, containing a wealth of interesting and important articles and news items, and coming within twelve dollars per month of paying its own way by advertising. Incidentally, a little effort put forth by almost any member of the Society, in securing more advertising, would make the BULLETIN self-supporting. I need not harp on either the indispensability or the excellence of the BULLETIN in its present form, since these must be obvious to all of us who receive it; what I do wish to remark is that while our official organ has a staff comprising the cream of the literary element of our profession in this province, these are all very busy men, so that of late years a tendency has become increasingly noticeable for most of the articles to be signed "S.L.W."

It would appear that for the past few years the expenses of our Society have been slightly in excess of our annual income. I need not go into detail now, since the Treasurer's report will show conditions exactly as they exist. Obviously, if we keep on doing as we have always done, we shall soon find ourselves in debt. An appeal has been made to the Canadian Medical Association for a cash subsidy; but the latest report of the Inter-provincial Relations Committee would indicate that the majority were of the opinion that everything possible was already being done. How to increase our income is one of the most pressing problems that now confront us. At present, our only sources of revenue are the advertising carried in the BULLETIN and the Annual Fee for members of the Society. The suggestion I am about to make may appear radical, yet I think it is practical; what I would suggest is that, since hardly three hundred out of a possible four hundred are paying our present Annual Fee of ten dollars, we establish a new Annual Fee, of a professional business nature, to be required of every physician engaged in actual practice in the province. This would, of course, automatically make every physician a member of the Society. I bring this matter in the hope that everyone interested will give it his serious consideration, and that some definite improvement will result in the not too distant future.

What is to be said of the cloud of locusts that swarms over our land—the ever-growing army of irregular practitioners—Chiropractors, Osteopaths, faith healers, and the like? Why do these mountebanks continue to flourish, defying as they do the laws of the country? At all our meetings complaints are heard and discussions take place, yet the irregular still seems to go on

unmolested, none daring to make him afraid. Those of us who have borne the heat and burden of the day, and have our sensibilities benumbed by the knocks of adversity and the rampages of age, peaceful as we are in our contemplation of the past, and with our visions of an Old Age Pension looming large on the horizon of our dreams,—we are not so much disturbed by his encroachments. But consider the lot of the younger man, fresh from a long college grind, whose mind is overflowing with all the most recent scientific knowledge, and whose back is prematurely bent with a load of accumulated debts. This man, his ambition lighted with an honest desire to gain the confidence of his new clientele, and his hands furnished with all the remedies that science has discovered to stop the ravages of disease, suddenly finds to his great consternation and dismay that his prey has flown—flown to the welcoming clutches of the modern witch-doctor, medicine man and magician.

Suppose an appeal is made to the Medical Board, which body has lawful authority to prosecute the culprit and bring him to justice, provided sufficient evidence to procure a conviction can be produced. The Medical Board, wise in the results of past experience, calmly consider the case, weigh the evidence—which is usually found wanting—and rightly refrain from taking immediate action. I say rightly, because how often prosecution of these creatures creates in the mind of the public the idea of persecution! The feeling arises among the laity that “this fellow must have a good thing or the doctors would not be so anxious to get clear of him.” Clad in a cloak of spurious martyrdom, the culprit arises to new heights of glory, and finds that the burden of his just punishment is well worth its weight in advertising.

Let us have courage to face the conclusion that these irregular practitioners, though they may possess little or no scientific knowledge, many of them having had no special training, can nevertheless, undeniably supply something that we lack. Suppose it be objected that the real lack is not ours but that of the public, who have been placed in a crafty world with a deficiency of intelligence; are we then justified in crying dunce when educated people, generally worthy of our esteem, appear to believe that the secrets of medical treatment can be hidden from the wise and prudent and revealed unto babes? For we find at least as many of the educated as of the ignorant flocking to the fakers to have vertebrae adjusted or a nerve released from its prison. Will we not be fairer in our judgment of human nature if we admit that at least a part of the fault must lie with ourselves?

In our zeal to treat disease according to the latest scientific discoveries, are we not too apt to forget that we are dealing, not only with a very complex machine, but also with something the complexity of which is beyond that of any machine—the human personality?

At the present time, the doctor is coming to regard himself, at least in so far as his professional capacity is concerned, as a scientific materialist, to whom any system of values other than the naturalistic and so-called “realistic” seems to be made up of sentimental hokum, flimsy idealism, or wilful sham. I do not wish to deny that this is to some extent a desirable state of affairs, since the resultant clarity and simplicity of our common scientific atmosphere is very beneficial to the progress of pure, objective dehumanized science. Where human values intrude on scientific ground, a certain amount of confusion is sure to arise. But it is just for this reason that when the doctor finds himself confronted with a human patient, rather than with white mice or a guinea pig, he finds that the abstract principles of the laboratory are

somehow inadequate in themselves, and that they are received with a better grace if their bareness is disguised under a sugar-coating of emotional sympathy and understanding. It is true that a large section of the general public has an even stronger belief in the powers of silence than we have, but it must be remembered that their belief is largely indiscriminating, so that if the preposterously optimistic claims of the pseudo-scientific quack are made more appealing to them than our own well-founded but less sensational ones, they quite naturally turn where the grass looks greener. Now it is not my present purpose to defend quackery, nor to say that we should make a concerted effort to fool the people; I simply wish to pass on the slightly sardonic reflection that a human being is a rather more wilful patient than a white mouse or a guinea pig, and that if we can appropriate, without incriminating ourselves, some of the quack's more legitimate methods of humoring his patients, we may have a very effective catalyser for the application of our genuine scientific knowledge.

It was not very long ago that the man who appealed to a physician when he was not actually ill was considered something of a freak. Our parents scarcely dreamed of the doctor as other than merely a healer of ills and a corrector of physical deformities. But we doctors of the present are now coming to be regarded—and to a less extent are coming to regard ourselves—as persons specially trained to keep people well rather than merely to *make* them well. Incidentally, it is said that many centuries ago the wealthy Chinese Mandarins would hire a doctor to keep them well, who if he failed lost his fee, his job and sometimes even his head; so even the hard and fast conservatives among us can find a satisfying ancient precedent for the practice of preventive medicine. The propaganda for periodic health examination brings to the doctor's office an increasing number of people who consider themselves in reasonably good health, but who wish to be sure of preserving their happy state. They ask their family physician to reassure their faith in their physical fitness, or if he cannot do that, to map out the path that will lead them to bodily and mental integrity, and thus insure for them a longer life.

Pasteur's epoch-making discoveries produced a demand for antisepsis and asepsis that became the outstanding feature of the field of medicine for a generation or two. As a result of this, one type of preventive medicine gained enough momentum to carry it forward, with ever-increasing vigour, as well as with a progressive widening of its field of usefulness, right through to our time, and probably forward from our time into an even more triumphant future. The quarantine, personal hygiene, and community sanitation together with prophylactic inoculations and vaccinations, have made the terrible pestilences that scouraged the world a couple of centuries ago little more than a tale that has been told. This type of preventive medicine has within the past half-century increased the average life of the individual by ten years.

Our knowledge of how to prevent disease has increased enormously since the early days of asepsis and antisepsis. Considering the truth of this, ought we not to be ashamed of having done so little about discovering the most economical and efficient manner of utilizing the knowledge? We have hospitals springing up in every town of this province; we have a provincial San., and other T.B. hospitals are about to appear. These are all very well in their way, but are unfortunately concerned primarily with the cure, rather

than the prevention of disease. In our zeal for curing disease, are we not forgetting that our organization for preventing it is inadequate to supply the requirements, whether educational or technical, especially of the rural districts? It is true that we have the Dalhousie Health Clinic and the Provincial Department of Health, both located in the City of Halifax, as well as baby and other clinics in various towns, all of which are doing good work, as are also our travelling diagnosticians. But in the light of present day knowledge of prevention, are not these facilities pitifully meagre, compared with our widely distributed facilities for cure?

Let me suggest that the time is now ripe to begin the establishment of Municipal Health Units, similar to those recently formed in the Province of Quebec and in some counties of the United States. These Units would be financed conjointly by the Federal, Provincial and Municipal Governments. Our Federal Government has already expressed by resolution its willingness to support its share of the expenditure. Reports from Units already functioning indicate that the cost does not exceed fourteen thousand dollars a year for each municipality. Would it not be advisable for our Society to impress upon the Legislature and the Municipalities the necessity of making at least a beginning along this line, even although one Unit might be required to serve two or more municipalities? If the expense be thus shared between three sources of revenue, the burden will not appear excessive. And the Public Health Department of the Rockefeller Foundation may happily see fit to offer some assistance, as in the case of Quebec, until such time as our own sources feel able to bear unaided the total cost.

The complaint has been made that we are over-hospitalized. I am not competent to pass an opinion on the subject, but I think I may justly remark that of late many hospitals have sprung up within short distance of each other and are proving a difficult financial burden. That illustrious body, the Senate, have recently decreed that hospitals shall no longer resort to the questionable practice of promoting gambling as a method of swelling their coffers, which means that revenue at one entrance has been quite shut out. This, however, is beside the mark, what I wish particularly to observe regarding the subject of hospitals, is that if an amount of effort commensurate with that spent on the building of hospitals had been put forth in the establishment of Public Health Centres, our system of Public Health would now be immeasurably more efficient.

While I am on the subject of Preventive Medicine, it does not seem proper that I should omit a reference to the subject of Tuberculosis; how it is caused, how it is spread, how it can be prevented and how, in suitable cases, it may be cured. Voluntary effort has played, and still plays a large part in anti-T.B. work. Thus, the N.S. Tuberculosis Commission was formed, which Commission, some popular and professional opinion to the contrary notwithstanding, has done and is still doing, good work in educating the public and interesting the profession, as well as in raising funds for needy cases. This work, let me repeat, is mostly voluntary. A movement is now afoot to establish a number of new institutions in the province for the care of unfortunates, but even supposing we were blessed with twice or three times as many institutions as we now have, the problem would still be far from being solved. We should still have a vast army of more or less indigent sufferers in advanced stages of the disease, spreading the infection in all directions. We are faced with the serious problem of how to care for this army.

My present purpose regarding this subject is simply to suggest the importance of home treatment, and to stress the point that some form of such treatment must be undertaken. Valuable suggestions are contained in the Liverpool experience, which is well presented by Glover in the *British Journal of Public Health* for April, 1931. Two alternative plans are set forth: (1) to carry out home treatment by the aid of a whole-time medical staff appointed for the purpose, or (2) to adopt a plan in which use is made of the services of general medical practitioners.

A subject that seems worth consideration at this time is that of the over-organization of our medical service in this province. The list of our separate organizations is certainly imposing: we have the Department of Health, Provincial Medical Board, Provincial Medical Society, Council of Mental Hygiene, Tuberculosis Commissions, Society for Crippled Children, Provincial Health Officers' Association, Advisory Committees, Branch Medical Societies, Hospital Staff Societies, Nurses' Associations, and what not. Since these organizations are working separately on tasks that frequently overlap, and consequently wasting a great deal of time and effort, is it not advisable that we should remember the old saying that in unity there is strength; and ought we not, wherever it seems feasible, to attempt a combination of many of those organizations whose ends are similar, and which can be conveniently operated under one head?

Since the last meeting of this Society a Ministry of Public Health has been created. Our first Minister of this department is a man of sound judgment, wide experience and deep vision; one who has the confidence and respect of all classes, both lay and professional. We must look to him for leadership in the great task that lies before us,—look to him as to the worthy Moses who shall lead us out from the bondage of disease into a land flowing with the milk and honey of universal health and happiness. His task is not an easy one, since there is not only a lack of funds but an ever greater lack—that of the guidance of tradition as the emergence of entirely new problems changes the view of the field of medicine; but we are confident that if any one man in our little corner of the world is capable of supporting the tremendous responsibilities of this new Minister, that man is the Honourable G. H. Murphy.

The thought I want to leave uppermost in the mind of every person here tonight, is that even the most willing and capable of leaders must have whole-hearted support and co-operation behind him, if he is to be expected to perform a task as comprehensive and involved as the one that now confronts us. We must all gird up our loins for battle against the monsters Disease and Ignorance; we must all take up the task, the public as well as the profession. Every possible agency for the furtherance of our cause must be enlisted; every opportunity must be seized. The Medical Profession must of course be the vanguard; each of us individually in our daily routine should be an enthusiastic teacher of public health. The medical practitioner it is who can bring the average citizen to think for himself on the subject of health, to ask questions regarding his own health problems, and to seek an understanding of them. This awakening of the average citizen cannot be accomplished through publications alone; the great responsibility rests with the personal teacher, and in most cases this means the family physician. It is not unduly idealizing the calling of medicine to say that all we physicians are health teachers and trainers; for this reason, I consider it highly practical to suggest that every practising physician shall deliver three or four times a year in the several communities

he serves, addresses on medical subjects of interest, value and importance. As for the schools, I understand that rudimentary medical instruction is now becoming an essential part of the Normal Training; but while the results of this improvement will no doubt be considerable, the work of the ordinary teacher ought to be supplemented with occasional lectures by really well-qualified authorities. Such facilities as moving-pictures and lantern slides should be put to practical and extensive use. Above all, let us remember that it is not enough merely to sit back and say "Let there be light;" the glorious light of medical knowledge will not spread its beneficial rays throughout our province until every practising physician and every prominent citizen has made himself an active and zealous missionary of the gospel of health, and has communicated that gospel to all within his reach who lack it.

Thus and only thus may we reach that state of perfection prophesied by Isaiah, when "there shall be no more thence an infant of days, nor an old man that hath not filled his days."

For those of us who assume an attitude of complacent inactivity, and brand as meddling or futile any attempt at improvements, there will be a possible spur in the words spoken before the students of Edinburgh University by a great Canadian whose memory is revered by all the world, Sir William Osler. Here is what Osler said:

"As for the dour dyspeptics in mind and morals who sit idly croaking like ravens,—let them come into the arena, let them wrestle for their flesh and blood against the principalities and powers represented by bad air and worse houses, by drink and disease, by needless pain, and by the loss annually to the state of thousands of valuable lives—let them fight for the day when a man's life shall be more precious than gold. Now, alas! the cheapness of life is every day's tragedy!

If in the memorable phrase of the Greek philosopher Prodicus: 'That which benefits human life is God,' we may see in this new gospel a link betwixt us and the crowning race of those who eye to eye shall look on knowledge, and in whose hand Nature shall be an open book, an approach to the glorious day of which Shelley sings so gloriously:

.....Happiness
 And Science dawn though late upon the earth;
 Peace cheers the mind, health renovates the frame;
 Disease and pleasure cease to mingle here,
 Reason and passion cease to combat there,
 Whilst mind unfettered o'er the earth extends
 Its all-subduing energies, and wields
 The sceptre of a vast dominion there."

The death occurred on July 23rd at Charlottetown, P. E. I. of Mrs. Emma Nash, widow of the late Hon. Frederick J. Nash, a lady who was actively identified with all organizations concerned with social welfare in her home city and province. Possessed of high intellectual gifts of a charming personality and disposition, her passing is mourned by all who knew her. The Medical Profession in Nova Scotia will extend sympathy to Dr. A. F. Miller of Kentville who mourns the passing of a much loved sister.

Proceedings of the 78th Annual Meeting

Truro, N. S., July 7th, 8th, 9th, 1931.

Truro, N. S., July 7th, 1931.

The Executive of the Medical Society of Nova Scotia met in the Scotia Hotel, this date, at 4.30 p. m., the President, Dr. Dan Murray in the chair. Members present were: Doctors Murray, Dunbar, McNeil, Walker, Morrison, Mader, McCurdy, Wardrope, McDonald (Dan), Creighton, Sutherland, Benvie.

The proposed programme was considered and, in view of the absence of Dr. Geo. D. Stewart, certain changes were made and the revised programme ordered to be presented at the opening of the regular session Wednesday morning for adoption. After the disposal of the minutes of the last Annual Meeting the Secretary was instructed to ask unanimous consent of the Society to deal with the portion of this Report of the Executive having to do with the President naming Committees as follows:—(a) Nominating Committee, (b) Auditors and Finance Committee, (c) Committee on Courtesies.

The Secretary then presented his Annual Report which was accepted as the agenda for the meeting of the Executive. This report was ordered printed in the August BULLETIN and was then considered section by section.

On motion it was resolved that the report of the Executive to the Society constitute the proceedings of this Executive and the same be considered by the Society, from time to time during the session as routine or unfinished business. (Members of the Society will find this report of the Secretary in the August BULLETIN pages 450 to 455).

REPORT OF EXECUTIVE COMMITTEE.

The Executive Committee then reported as follows:—

Your Executive Committee begs leave to submit for your consideration the following recommendations regarding the coming business of this session.

1. We recommend that this Society adopt the proposed programme for this meeting as outlined in the printed form distributed. We regret, however, that certain changes are necessary.

(a) On account of severe illness Dr. George Stewart of New York is unable to attend this meeting and two papers that were to be presented in the afternoon of Friday will be presented instead at the forenoon session on that day.

(b) That the order of business be suspended, that the President may name the following committees: Nominating Committee—Auditors and Finance Committee—Committee on Courtesies.

2. (a) Your Executive is glad to report that the present-day membership of this Society totals 289 for the current year, which, with 16 Honorary Members makes our total membership 305, the highest membership we have ever attained. We recommend that the Society express appreciation of this record.

(b) Your Executive had before them a recommendation that Dr. F. P. Smith of Mill Village, (Queens County), continuously a member of this Society and the Canadian Medical Association for the past 10 years, who has been over 50 years in practice and is now 82 years of age, and, as usual, is in attendance at this session this year, be elected to Honorary Membership in this Society from this date.

Your Executive has noted that an interested and distinguished visitor is now in attendance at this session in the person of Dr. Mina MacKenzie, a graduate of Dalhousie in 1904 and for over 25 years a Medical Missionary in India. After going to India in 1904, Dr. MacKenzie was engaged some five years in general practice in Cawnpur. In 1909 she opened and, for a number of years, conducted a 50 bed hospital at another station. In 1923 she opened a 75 bed hospital in Central India under the auspices of the United Church of Canada. She has been connected with several other hospitals where she has done a large amount of major and minor surgery, besides general internal medicine and administration. Also she has had a Lepers' Asylum under her care and direction. Her professional record is one of excellent service.

Your Executive takes pleasure in presenting these two for election as Honorary Members of this Society.

(c) With reference to membership in the Canadian Medical Association, that from Nova Scotia being about 145, the Executive recommends that consultation be had with Dr. Routley, General Secretary of the Canadian Medical Association as to how this Society can co-operate towards increasing C. M. A. membership in this Province.

3. The Executive is pleased to report to the Society that the BULLETIN has been carrying out its work in a most satisfactory manner and it is particularly pleasing to note that its revenue from advertising shows a deficit on cost of publication of only \$137.45 for the year just ended. In particular the Executive would impress upon the Society that, although the amount of reading material has been materially increased during the year, yet there has not been a corresponding increase in material furnished by members of the Society, other than its present business editor. The Executive desires that you should take action in this matter.

4. The Executive would bring to your attention the form advised for permanent membership in the Society to become effective when the usual yearly drafts are made in February, 1932. All members of the Executive present at the time this matter was considered, signed these forms and your favourable action in this matter is requested.

5. The Executive suggests that members of the Society who desire a bound volume for 1931 should advise the General Secretary to that effect at an early date. You are also advised that two or three volumes of the year 1930 are still available. The price is \$2.50. Your approval is requested.

6. We are advised that the General Secretary has been instructed to notify the Secretaries of all branch Societies that they are expected to furnish reports of all meetings of their local Society. In this connection, attention is also to be directed to the requirements of Secretaries as contained in article (7) section (4) of the constitution regarding certain annual returns.

7. The Executive recommends that the Medical Society of Nova Scotia heartily endorses the post-graduate lectures sponsored by the C. M. A. and that this Society expresses in a very definite manner its full appreciation of the services rendered in this division of C. M. A. work and that we pledge to that association our continued support of these lectures as they may be arranged in future, according to the following plan:—

Meetings with as many branches as possible the last week or ten days in May. Two lectures at the Annual Meeting of this Society in July. Two lecturers for three or four days at the Annual Dalhousie Refresher Course.

Later, a lecture tour of all branches in the Province the latter part of October. A special lecturer during the winter season before the Halifax and Cape Breton branches, possible in connection with a similar meeting or meetings in New Brunswick. The General Secretary is instructed to arrange any other special meetings, should opportunity offer at times not specified. May this suggestion receive your cordial support.

8. Your Executive suggests that the Society instruct the General Secretary to arrange for the next Annual Meeting of the Society on Tuesday and Wednesday of the second week in July, 1932. This date will enable the P. E. I. Provincial Society to hold its Annual Meeting on Friday of that week, and the New Brunswick Society to meet early in the following week,—in order that speakers furnished by the C. M. A. may attend the Annual Meetings of the three Societies in succession at less loss of time and expense. This recommendation has been passed to the Nominating Committee.

9. The Executive recommends that while branch societies may hold their regular meetings at the same time in which post-graduate lectures are delivered that they should not fail to carry out their own meetings for the purpose of developing their own local resources.

10. Your Executive recommends that the Nominating Committee name representatives of this Society to attend the Annual Meetings of the New Brunswick and the Prince Edward Island Societies. We have approved of the invitation extended by the President and Secretary for a representative from New Brunswick to attend our Annual Meeting and trust that Dr. H. E. Britton of Moncton will be in attendance.

11. Your Executive recommends that the Standing Committees nominated at each Annual Session and the newly elected Executive shall meet for organization purposes the last day of each Annual Session.

12. The following communication from the Halifax Branch Medical Society was considered by the Executive:

“At one of the regular meetings of the Halifax Medical Society during the winter, the following matters were introduced, and it was decided that they were matters for the Provincial organization. I was instructed to refer same to that body for its consideration and such action as it may see fit to take.

1. That nothing has been done to perpetuate the fact that Dr. Daniel Hay who practised in Port Royal, was the first Medical man to practice in Canada.

2. That a system of Health Insurance has been or is being established in several of our western provinces, and that the drift is in our direction. The decision was that we should approach the N. S. Medical Society to see what action on the part of the Profession in this

province might be advisable in the matter, so that we may be able to influence legislation in this connection when the time comes.

Will you kindly find a place in one of your business sessions for consideration of these matters?

Yours very truly,

W. H. GOSSE,
Secretary-Treasurer,
Halifax Medical Society."

Your Executive instructed the General Secretary to refer the first matter to the Committee on Historical Medicine for further consideration and to report to the Society, or the Executive, as soon as possible. The Secretary was further instructed to bring the second matter to the attention of the Committee on Legislation, with the request that the Society be advised of the progress of this movement. Further that the BULLETIN continue to publish notes and comments, as to the operation of this plan elsewhere, for the information of the members of this Society.

13. The following Resolution was moved by Dr. H. A. Creighton, seconded by Dr. W. H. Dunbar:

"In view of the fact that regular assistance by the Department of Health has been recently withdrawn in the case of indigent venereal patients; and as, in some sections of the Province, there has been some uncertainty as to visits of Tuberculosis Diagnostic Officials the Executive of the Medical Society of Nova Scotia requests the Department of Health to advise the Society what support the general practitioners may expect in regard to these diseases."

The Executive were made aware of certain facts in this connection, relative to available funds and recent additions to the staff diagnosticians, and the Secretary was instructed to ask the Department of Health to make use of the pages of the BULLETIN to give this information to the practitioners of this Province.

14. Your Executive also had before it the following communication from the Colchester-Hants Medical Society *re* The Workmen's Compensation Board:—

"That the Colchester-Hants Medical Society, request that the Workman's Compensation Committee, of the Nova Scotia Medical Society, take up with the board, the advisability, of the payment of Medical fees, for the total period of the injured man's disability, such as exists in other provinces; also favouring a \$10.00 fee for a general anaesthetic, and that a copy of the resolution be sent to the executive of the Nova Scotia Medical Society for their consideration.

H. V. KENT,
Secretary."

In addition to this Doctors Havey, Kent and others appeared before the Executive with the matter of unpaid bills, which had not been presented within a prescribed period of limitation. It was clearly brought out that adjustments in the several matters would require careful consideration and probably amendments to the W. C. B. Act would be required. The Secretary was instructed to bring this matter to the attention of the Committees on The Workmen's Compensation Board and on Legislation, asking them to give the matter full consideration and requesting them to take the necessary action.

15. In the matter of fees for attendance on sick mariners which was considered by the Executive at its meeting in September, 1930, the Secretary was ordered to carry out the instructions which had then been given him.

16. The Subject of Maternal Mortality coming before the Executive by representation from the C. M. A., in view of the prominence given the subject in the meeting of the Health Officers' Association and on our own programme, it was resolved that action be postponed until the first meeting of the new Executive.

17. The Executive has considered the following letter in reference to the recent formation of the Nova Scotia Society for Cripple Children:—

"To the Medical Society of Nova Scotia,
Gentlemen:—

The organization of the Nova Scotia Society for Cripple Children was largely inspired by an appreciation of the great service the medical profession has rendered humanity in the correction and preventing of crippling, particularly among children.

Our Society is fully conscious that every lay organization having to do with the physical betterment of the community, should be largely directed and advised by members of the medical profession in the area of its local activities, even if, as in the case of our organization it be a part of a large or International Society.

In order that you may be fully advised of the aims of our Society I am passing you, herewith, copies of our Constitution and Act of Incorporation.

With a desire for closest co-operation this communication is to ask you to nominate to our General Board of Management three members of your Society, to be representative of the Eastern, Central and Western Sections of the Province, so that *all* our activities may be along lines approved by medical science.

We would further request that your approval of our efforts should be communicated to your Branch Societies in Nova Scotia asking their hearty co-operation when Clinics are held under the auspices of our Society in the vicinity of such Branch Societies.

Your favourable consideration of this matter will be sincerely appreciated.

Yours, on behalf of the Society,

J. C. GASS, President.

JANET B. WOLFE, Secretary."

Your Executive has approved of this letter and have advised the Nominating Committee to include in their report the names of three members of this Society to the Board as requested.

18. **Moving Pictures.** The Executive considered the following communication from the Winthrop Chemical Company:

Medical Society of Nova Scotia,
Halifax, N. S.

Attention Dr. S. L. Walker, General-Secretary.

Dear Dr. Walker:—

We have recently completed a motion picture which demonstrates the technique of spinal anesthesia and the principles upon which this technique is based. The film shows in an interesting and instructive manner the accepted methods of administering the anesthetic, control of anesthesia to the various levels, and is interspersed with views of actual operations. The picture was prepared under the supervision of our medical department and is devoid of advertising material.

The film is available in the 16 mm. amateur size, only. The film will be loaned without any expense to you.

We are enclosing a request for booking. We would suggest that you give us three choices of dates. We shall endeavour, of course, to book the film for the first date chosen by you, but will notify you of shipping date so that you may be able to complete your arrangements for showing.

Very truly yours,

WINTHROP CHEMICAL CO., LTD.

It was considered by the Executive that this firm was likely to take advertising space in the BULLETIN and the use of this film in the meantime would be of advantage to members of the Society. The Secretary was therefore instructed to make necessary arrangements for the showing of the film at such dates as would be mutually satisfactory.

19. The Executive directs that the Reports of Standing Committees be presented to Society for consideration—and that, as far as possible, these reports be grouped together for publication in the BULLETIN. The Executive would be pleased if the September issue of the BULLETIN would largely contain the records of this Annual Meeting.

20. **Periodic Health Examinations.** The Executive expresses approval of the course pursued by the C. M. A. in this matter and instructs its Secretary to give continued prominence to the subject in the BULLETIN and impress upon its members the need of giving the best possible service in order to convince the public of its value from a health standpoint.

21. Your Executive is of the opinion, which has been expressed before, that the Canadian Medical Association can aid this particular Provincial Organization very materially by using the Bulletin to increase C. M. A. membership in Nova Scotia. A similar agreement to that with the Department of Public Health would answer this purpose. The Executive instructed the Secretary to bring the matter again to the attention of the C. M. A. and that it be further considered at the first meeting of the new Executive.

22. **Round Table Discussion.** The Executive recommended that the programme of the next Annual Meeting provides for a Round Table Discussion upon such subjects as members may submit to the Secretary not less than two months before date of said meeting.

23. The Executive Committee had before them correspondence with, and for, Dr. L. W. Johnstone, M.P. relative to his inability to prepare a report as Chairman of the Committee on Narcotics. This information was passed to the Nominating Committee.

24. For the Historical Committee Dr. Hattie reported thus:—

“The Chairman of the Committee on Historical Medicine reports that he has been strenuously inert. He recommends that the chairmanship of the Committee should hereafter go to one who retains pep.”

In view of the material in the Secretary's file on this subject the Executive ordered that this file be presented to the new Executive at its first meeting for their immediate action.

25. The Executive had before it a request for the issue by the Department of Highways of a special license plate for physicians. In view of the very courteous treatment accorded the doctors in Nova Scotia; in view of the additional work it would entail the Department; in view of the fact that the

C. M. A. issues a special plate for doctors and that serial number plates are only used in large cities, the Executive does not recommend any further action at present.

26 Royal College of Physicians and Surgeons of Canada.

The Executive has had before it announcements and correspondence regarding charter members of the Royal College of Physicians and Surgeons of Canada and qualifications thereto. There appears to be some misapprehension regarding this College in view of the general letters sent out to the Profession by Dr. Meakins of Montreal. The original letters brought forth a very general response from members of the profession who, according to Dr. Meakins, are entirely ineligible for such membership. The Executive has noted some rather spirited replies that have been sent to Dr. Meakins when the local doctor concerned responded to the original letter. The Executive declines to make any statement, pro or con, regarding the development of this institution in Canada until more definite information is available in the matter. It is recommended that the matter be further considered by the incoming Executive.

27. Your Executive would recommend that the main business of the Society at the next Annual Meeting be carried out on Tuesday and that the Gold Tournament and the Annual Banquet be held on Wednesday afternoon and evening respectively.

28. Your Executive had before it the following report from the Health Publicity Committee, which was referred to the new Executive for consideration.

HEALTH PUBLICITY COMMITTEE REPORT.

To the Medical Society of Nova Scotia:—

Your Committee on Health Publicity would submit the following, not a report of work done, but rather a report as to what should be done by this Society along health publicity lines.

1. This Committee should primarily concern itself with presenting to the public the most authoritative information about communicable diseases; to publish information with regard to cancer, tuberculosis, maternal mortality, individual and community hygiene; to speak with authority on such matters as vivisection, pasteurization, chlorination of water, use of vaccines, contamination of food and kindred topics.

2. That this Society endorse the action of the Canadian Medical Association in publishing short readable articles in the public press, but the opinion of the Committee is that this would be better were it sponsored by this Provincial Society, indicating the united energy of the Canadian and the Provincial Societies. Moreover they could thus deal with local questions from time to time as needed.

3. To properly carry out this procedure there must be a very cordial co-operation with the Department of Health from whom most of the required material must be obtained. This would apply, in particular, to methods the public would be advised to follow in regard to communicable diseases.

Nor would it be possible for this Society to furnish to the public the desired health reading matter without the aid of the Department.

4. Your Committee is of the opinion that the section of the BULLETIN occupied by the Department of Public Health should be the publicity medium to acquaint the profession with the desires and instructions of the Health Department. This Committee is aware that the profession need to be reminded of their responsibilities regarding the prevention of disease just as well as the public need continuous advice on healthy living. This would include particulars as to technique in collecting specimens, making tests, the use of toxoid, etc.; this to be repeated from time to time.

5. Your Committee would point out that the actual aim of a Health Publicity Committee must be the education of the people and the profession in all matters relating to public and individual health, possibly the responsibility of a Department of Health rather than the Provincial Medical Society. Should such a course be followed your Committee feels it would have the hearty co-operation of this Society.

6. Your Committee is of the opinion that such committees of the Society should meet together from time to time and not have the report, as is now often the case, prepared by the Chairman alone. We therefore recommend that the Society direct this Committee to meet for organization purposes immediately after it is named before or at once after, adjournment of the Society.

All of which is respectfully submitted on behalf of the Committee

S. L. WALKER.

R. M. BENVIE.

29. Your Executive has before it the Address of the retiring President of the Valley Medical Society considering only references to the Medical Society and the Provincial Medical Board. This matter was also referred to the new Executive.

30. **Locum Tenens.** As this matter is more or less related to the question of furnishing medical attention in scattered rural districts, the Executive orders it also referred to the new Executive.

31. The C. M. A. and affiliated Provincial Societies. The Executive considered this should be a matter for consideration with Dr. T. C. Routley at this Annual Session but regretted owing to time limitations it could not be arranged. The Executive, however, again affirms its opinion that a portion of each issue of the BULLETIN be utilized by the C. M. A. to present the N. S. Society numerous general matters that should be of interest to this Profession, having in mind an increase in C. M. A. membership in Nova Scotia.

Resolved that this be referred to the new Executive.

32. **A Provincial Health Nursing Service.** This reference, in the Report of the Secretary, came before the Executive and general approval was expressed. It was thought, however, in view of the very clearly stated attitude of the Department of Health to act in co-operation with the opinions of the members of the profession, that no definite pronouncement be made at the present time save only that it is the opinion of the Executive that such a

general service should be inaugurated at the earliest possible date. No recommendation is made to the Society.

33. The reference in the Secretary's Report to the Golf Tournament should be fully covered by the report of Doctors Farish and Sutherland which will appear in the reported proceedings of this session. Their full report should also be considered at the first meeting of the New Executive.

34. Your Executive is impelled to comment on the many matters which have been brought to their attention as being of concern to the Medical Society of Nova Scotia. It is recognized that this is due to the very efficient work of the Secretary which the Society should duly recognize.

Wednesday, July 8th, 1931.

The 78th Annual Meeting of the Medical Society of Nova Scotia was called to order in the Assembly Hall of the Colchester County Academy at 10 a. m., with the President, Dr. Dan Murray of Tatamagouche in the Chair.

Upon motion of Dr. A. S. Burns, seconded by Dr. O. B. Keddy, the minutes of the last Annual Meeting were accepted as printed in the BULLETIN Vol. IX., pages 475 to 500 and adopted. Unanimous consent having been given, the President made the following appointments:

Nominating Committee: Drs. J. C. Morrison, H. A. Creighton, W. H. Hattie, A. S. Burns, John Bell.

Auditors and Finance Committee: Drs. W. R. Dunbar, L. Thomas, M. J. Wardrope, McCurdy and Lebbetter.

Committee on Courtesies: Drs. G. W. T. Farish, R. H. Sutherland and E. V. Hogan.

On motion, the following changes were ordered in the programme: Dr. T. C. Routley to address the Society upon the conclusion of Dr. Hendry's Address this forenoon. That the entire afternoon and evening be devoted to the Golf Tournament and other forms of entertainment; that the papers of Doctors Mack and Burns (G. R.) and the special paper of Dr. Dan MacDonald be presented Thursday forenoon and that the Round Table Discussion and Routine Business be dealt with on Thursday afternoon.

The President then introduced Dr. Geo. S. Young, Professor of Medicine, University of Toronto, who presented a most scholarly and practical paper entitled, "Some Mental Aspects of Disease." This address will be published in the BULLETIN at an early date and further comments will be made on it at that time. Dr. M. A. B. Smith opened the discussion followed by Doctors Murphy, Keddy, White, H. H. McKay and others. This opening discussion struck a keynote for the Meeting, for all papers presented were fully discussed at both the Wednesday and Thursday Sessions. This is probably a criterion of the value of a paper to an audience,—the extent to which it inspires discussion.

Dr. W. B. Hendry presented the next paper on "Ante and Post-Natal care in obstetrics." This paper will be presented in full in an early issue of the BULLETIN. The discussion was especially good and was led by Doctors Atlee, McDonald, McNeil, MacLellan and others.

Dr. T. C. Routley, General Secretary of the Canadian Medical Association, then in twenty minutes, gave a most inspiring address on the work of the

Canadian Medical Association. He pictured the status of the Association just prior to and at the time of the Annual Meeting of that Association in Halifax in 1921 and showed how the action taken at that Meeting had put the Association on a sound financial basis. An indebtedness of over \$16,000.00 had been wiped out by bonds that were all redeemed with interest before they were due and a surplus is now to the credit of the Association greater than its former deficit. This was a result of organization and concerted effort from the Atlantic to the Pacific. It is seldom that a Provincial Meeting has had such an illuminating insight into what can be accomplished by the Medical Profession in Canada by concerted effort when they have for their object the best interests of the Great Canadian Dominion in which they serve.

It being after one o'clock, after announcements were made regarding the entertainment for the afternoon and evening, also Meetings of the Executive and other Committees, adjournment was made till Thursday at 9.30 A. M.

(In order that these Minutes may be as full and complete as possible, the Secretary herewith incorporates a report of the afternoon and evening doings and extends his thanks to those who furnished the necessary information. Regarding the report of Doctors Farish and Sutherland, this will be referred to the Executive at their first meeting. In the meantime, the Secretary will act in accordance with the wishes of the Committee. The Secretary would further advise the Medical Society of Nova Scotia that the Society is under material obligations to Doctors Farish and Sutherland for the successful carrying out of this particular function. It is not an easy matter for a Committee to bring about such results as were obtained this year and perhaps the appointment of a third member to the Committee for next year will be desirable.

Regarding the function that was held on the farm of Mr. F. W. Swindell, the Secretary has received no official report, although several of the members of the Society were known to have been in attendance. The menu of the banquet in the evening and the programme of speeches is also included in this portion of the Minutes of the Society, but due to very obvious conditions the Annual Banquet has many drawbacks, which were in evidence this year. It was however, distinctive among many previous such events, in view of the splendid Presidential Address that was given, the remarkably appropriate short, pithy responses, made to the toast proposed by Hon. Dr. G. H. Murphy, the inspiring music, and the large number of ladies present. Since the meeting the Secretary of the Medical Society of New Brunswick has regretted the inability of one of their members to be present on this occasion.)

The Nova Scotia Training School.

It is pleasing to record that on the afternoon of Wednesday, July 8th a very satisfactory visit was paid by a number of members to the Nova Scotia Training School and the following report has been handed to the Secretary:

"About eighteen members of the N. S. Medical Society visited the Nova Scotia Training School, on the occasion of the recent meeting in Truro.

They were received by Mr. MacKay, the superintendent, and Mrs. MacKay, and conducted through the institution. While in the dormitories, the visitors remarked on the nice appearance; and it was pointed out to them that

the pupils were taught to do much of the actual work of the house. A good deal of interest was shown in the laundry, which looks after the whole institution, the work being done by an Attendant who acts as supervisor, and four girls, who are pupils. The visitors were then taken through the Trade School where academic work is taught by two specially trained teachers; and to the vocational rooms, where the boys are taught trades, and the girls are taught cooking, sewing, etc.

In the assembly hall, Dr. Brison spoke for a few minutes to the medical men, telling them briefly, what the institution is trying to do for the feeble-minded. She said, we have in the Training School 118 pupils with ages from six to eighteen years. Most of these girls and boys have come from institutions or from homes where the parents could not give them the care and protection that as feeble-minded children they should have. A few are from good homes, where the parents felt that, they were not doing justice to the child by not giving him specialized training.

The aim of the School is to have happy well-trained children and to have every pupil wholly or partly self-supporting. Every boy, as far as his mental capacity will allow, will go through every phase of vocational work, including different kinds of work on the farm, and the girls will be taught all kinds of house and laundry work, and too, they all attend academic school. The pupils are encouraged to look forward to the time, when they will have graduated from the school, and can be trusted to go out and earn a living, and Dr. Brison said she hoped then to have a parole system, whereby the pupils could be supervised and if they were not doing well, outside, they could be returned to the institution.

A large group of boys and girls marched into the Assembly Hall and sang, 'O Canada.' Before they came in, it was explained that they were to be grouped according to their mentality, so that the visitors could observe the high-grade moron, the low-grade moron and the high-grade imbeciles. At the present time there are no low-grade imbeciles or idiots in the school, although there is a need for additional cottages for the low-grade mentally defective, and for others over eighteen years of age.

Before leaving, Mr. MacKay invited the visitors to go into the Domestic Science room, where they were served with tea and cake, by the four girls, who had made the cake for the occasion, under the supervision of Miss Madill, the Domestic Science teacher."

The Maritime Home for Girls.

"The Maritime Home for Girls was glad to have had the opportunity to entertain some of the members of the Medical Society of Nova Scotia when they were in Truro attending their Convention in July. They were received by Miss Strothard, Superintendent of the Home and Dr. M. Jean Whittier, Resident Physician. Some of the teachers were also present and showed the visitors through the Institution, pointing out things of interest—as the school, gymnasium, Hospital, work done by the girls in decorating in paints and stencils in the dining room—and numerous other things. Refreshments were prepared and served very daintily by some of the girls while another was in attendance at the door. Dr. Whittier's duties at the Home are mainly trying to get the girls in a good healthy condition and keeping them that way for many are in

an undernourished and run-down condition when being sent in—among such there is also always the inevitable venereal work requiring continued treatments; vaccinations, Shick and Dick tests, as required by the Public Health Board are also carried out—and the more or less serious illnesses treated which seem to occur in spite of continued care.”

REPORT OF GOLF TOURNAMENT.

To the members of the Medical Society of Nova Scotia:

The undersigned were appointed by the President and the Secretary of the Medical Society of Nova Scotia as a Committee to arrange for and carry out a golf tournament at the 78th Annual Session of the Medical Society of Nova Scotia, at Truro, July 8th, 1931.

On a very small scale this had been attempted, on one or two previous occasions, but it is entirely due to the initiative and energy of the General Secretary, Dr. S. L. Walker, that the tournament became a permanent feature of the Meeting held this year. Undoubtedly, it will continue to be for a time an attractive feature of our Annual gatherings. We would, therefore, express in the first place our appreciation of the assistance rendered the Society by the Advertisers in the *MEDICAL BULLETIN*, who contributed funds practically sufficient to defray all the purchase cost of the valuable trophies that were presented for competition. Our first recommendation, therefore, is that the Secretary be instructed to notify those who contributed to this fund of our appreciation of their courtesy in so doing. We feel confident that the members of the profession will think the more kindly of the advertisers in the *BULLETIN* when they recall this generosity on their part.

From the Medical men in attendance at the Meeting some thirty-two entered the tournament and with the able assistance of Mr. Enos MacLeod, Halifax, himself an experienced golfer, your Committee was able to send this number off in foursomes to a “battle royal.”

The prizes which the *BULLETIN* Advertisers enabled the Secretary to obtain were as follows:—

(1) A large silver model of a golfer in full swing mounted on a suitable pedestal.—For the lowest Gross Score. This is, however, to be won three times before it becomes the permanent possession of the winner. However, with this went a replica in reduced size which such winner retains as his own personal property. The winner this year will bring the trophy to Kentville next year when, perhaps, another name may be inscribed as the winner for 1932.

2. The Committee had for the prize to be awarded to the Society member making the lowest Net Score the figure in bronze of a golfer in full action on a suitable base, also having a place for a fountain pen, a proper reminder of the winner's clerical duties, and it remains permanently on the desk of the winner.

3. As a prize to the runner-up of the lowest Gross Score, four specially constructed golf balls were offered.

4. To the runner-up in the Net Score, a similar prize of three golf balls were presented.

5. The consolation prize was similar to the latter.

Your Committee would report the winners as follows:—

1. Dr. John J. McDonald of New Glasgow.
2. Dr. G. W. T. Farish, Yarmouth, N. S.
3. Dr. Fraser McGreggor of New Glasgow.
4. Dr. Walter L. Muir of Halifax, N. S.
5. Dr. W. H. Robbins of New Glasgow.

The Committee is of the opinion that there is too much New Glasgow in this list of winners and that it will be necessary for those golfers from Sydney Halifax and other parts of Nova Scotia to practice hard before the next meet to capture some of these prizes.

As this tournament has been so eminently successful, and will undoubtedly attract a larger number next year, we would suggest that some Advertisers in the BULLETIN make themselves still more popular with the Medical Profession by putting a portion of their advertising allotment into prizes for next year, when the tournament will be held under the auspices of the Ken-Wo Club of Kentville and Wolfville. For the continuance of this Tournament we hope the President and Secretary of the Society will be able to arrange for this further competition next year at Kentville.

Your Committee would also suggest that our energetic Secretary arrange for some additional prizes for some novelty features, such as sealed hole longest drive, etc., and, perhaps, some of our members could be induced to subscribe to a fund to augment what has been obtained from advertisers.

Furthermore the Committee desires the Secretary to express to the Truro Golf Club our appreciation of their turning over to us their Course for a whole afternoon, as well to the Ladies for a wonderful tea, thus making our meet a success. We desire this to be an addition to any such expression of thanks that the Committee on Courtesies may extend.

Your Committee is pleased to note that Judge S. D. McLellan of Truro, had been called upon to award the several prizes in accordance with this report.

Respectfully submitted,

Signed G. W. T. FARISH,

R. H. SUTHERLAND.

Truro, N. S., July 8, 1931.

The death occurred July 30th at the Nova Scotia Sanatorium of Miss Myrtle F. Connors, R.N., aged 31 years. Miss Connors graduated from the Western Kings Memorial Hospital, Berwick in 1928. She became ill while engaged in professional work in the Province of Quebec. She was a native of Newport Landing, N. S. A number of graduate nurses acted as Pall-bearers at the funeral services which were conducted by the Rebekah Lodge, I. O. O. F. at Kentville.

The Medical Society of Nova Scotia
 78th Annual Meeting
 BANQUET,
 Scotia Hotel, Truro, N. S., July 8th, 1931.

TOAST LIST

THE KING

Address of Welcome—His Worship Mayor Thomas.

Presidential Address—Dr. Dan Murray.

TOAST

"Our Visitors and Sister Societies"—

Proposed by Hon. Geo. H. Murphy, Minister of Health.

RESPONSES

BY

Dr. G. S. Young of Toronto, Dr. W. B. Hendry of Toronto,

Dr. T. C. Routley of Toronto, Dr. H. E. Britton of Moncton, N. B.

Presentation of Golf Trophies

By Judge S. D. McLellan of Truro.

Dancing

Cards

MENU

Fruit Cocktail

Consomme in Cups

Iceberg Lettuce

Queen Olives

Sliced Tomatoes

Steamed Salmon

Parsley Butter

Creamed Potatoes

Peach Fritters, Cherry Sauce

Sirloin of Beef, Dish Gravy

Roast Young Turkey, Cranberry Jelly

Mashed Potatoes

Steamed Potatoes

French Peas

Wax Beans

Mustard Pickles

Sour Pickles

Beet and Egg Salad

Mayonnaise

Strawberry Shortcake

Whipped Cream

Fruit

Ice Cream

Assorted Cake

Coffee

Kraft Cheese

Roquefort Cheese

Thursday, July 9th, 1931.

The Meeting was called to order at 9.45 A. M., Dr. Dan Murray in the Chair:—consideration of the Report of the Executive being the order of business. The Society approved unanimously of the section referring to membership—Active 289, Honorary 16, Total 305—several voicing the idea that this high water mark was the direct result of the employment of a full time Secretary.

On motion the Society endorsed the nominations of the Executive to Honorary Membership in the Society of Dr. Freeman P. Smith, Mill Village, N. S. and Dr. Mina McKenzie, Dalhousie 1904, of India, the Secretary being instructed to advise these Doctors of their Election.

The hour for reception of papers being reached, further business was laid on the table till the afternoon session, papers being presented as follows in accordance with previous action of the Society:—

1. "Bacteriophage", Dr. R. A. H. McKeen, Provincial Pathological Laboratory, Halifax, N. S. The reception accorded Dr. McKeen and the references made by many, who took part in the discussion following, to him as the worthy son of a distinguished former member of this Society, expressed the appreciation of the Society of the value of the paper presented. It was ordered to be published in the BULLETIN. The discussion was very general.

2. "Caesarean Section, Case Report." Dr. Dan McNeil, Glace Bay. In his introduction Dr. Dan McNeil made special reference to the paper of Dr. McKeen, applicability of his subject to the paper of Dr. Hendry, and paid his respects to those who were interested in the subject of Birth Control. The Discussion, led by Dr. H. B. Atlee, was congratulatory, critical and practical and the paper is to be published in the BULLETIN at an early date.

3. "Frequent Urination." Dr. Frank Mack, Halifax. This was of particular interest to the general practitioner on account of the many occasions on which he is consulted for relief of a symptom common to many pathological conditions. Its publication in the BULLETIN will be made at an early date.

4. "Cardiac Conditions Simulating the Acute Abdomen" was the title of the paper presented by Dr. Gerald R. Burns of Halifax, broad and comprehensive in its presentation while concise and practical in its illustrative cases. Its publication in the BULLETIN was ordered.

5. "Birth Control." Dr. Dan McDonald, North Sydney. This paper was presented in order that its content might be available for consideration at the Round Table Discussion in the afternoon. As Dr. McDonald had moved the Resolution on this subject in the September 1930 Meeting of the Executive which gave rise to subsequent references to the subject in the BULLETIN, he wished to go on record in the matter and his paper was considered at the afternoon session and is to be published in the BULLETIN.

As it was now 1.30 P. M. for further consideration of the report of the Executive, the reception of other reports, routine and unfinished business, adjournment was made.

The Society was called to order at 2.45 P. M. and the following matters were considered:—

Particular attention was directed to the high character of the interesting papers presented at the morning session with the suggestions that future

meetings would be the better for further contributions from members with such practical clinical experience.

Doctors Atlee, Schwartz, Smith, Benvie and others discussed Dr. Dan McDonald's paper on Birth Control. No action was taken as regarded an expression of opinion, some of the members declining to be forced to express an opinion which might give rise to unpleasant complications as did hasty action on previous occasions. The course of the BULLETIN in giving information, publishing letters and articles was commended.

Dr. N. H. Gosse introduced the subject of Cancer Clinics and on motion it was resolved that the Society requests the Committee Advisory to the Department of Health to make representations to the Department along the lines suggested by the Special Committee last year for the care and treatment of Cancer.

The matter of Tuberculosis was left in abeyance, pending Dr. K. A. McKenzie's Report. The matter of Over-hospitalization in Nova Scotia was not mentioned.

The reference of the Executive to the present status of the BULLETIN was received with great satisfaction by the Society and the General Secretary was heartily congratulated by several speakers in this connection. The incoming Executive was instructed to take the necessary steps to provide further financial remuneration for services so efficiently performed. Recommendations for the use of a permanent membership order and for the disposal of bound volumes of the BULLETIN were endorsed. The matter of an Editorial Board being presented on motion the Chair appointed Dr. K. A. MacKenzie, Dr. J. C. Morrison and Dr. A. F. McGreggor, a special Committee to present nominations for an Editorial Board. In a short time this Committee presented the following names for this duty:—

Dr. N. H. Gosse, Halifax; Dr. J. K. McLeod, Sydney; Dr. H. B. Atlee, Halifax; Dr. S. J. McLellan, Halifax; Dr. R. M. Benvie, Stellarton. This report was adopted.

Upon motion the Society endorsed the finding of the Executive in the matter of Post-Graduate C. M. A. Lectures and the Secretary was instructed to advise the C. M. A. of its appreciation and any further requirements.

The Society endorsed the action of the Executive in referring a number of matters to appropriate Committees, including several communications and representations from several Branch Societies and other matters referred to the new Executive.

The following reports of Standing Committees were then presented and on motion were adopted.

REPORT OF THE WORKMEN'S COMPENSATION BOARD COMMITTEE

for the year 1930-1931.

To the President, Medical Society of Nova Scotia:

During the past year but one matter concerning the Workmen's Compensation Board has been referred to your committee.

This matter was referred by a member of the Society, and was in essence a complaint of insufficient compensation having been awarded a patient of this member.

Your committee, having considered the case, were of opinion that, since no irregularity in the relations between the Board and the Medical Profession was involved or complained of, the matter was outside of our jurisdiction. We consequently returned the correspondence through our General Secretary with the intimation that if the member did feel that there had been any such irregularity, we would be glad to again take the matter up.

Respectfully submitted,

J. R. CORSTON,
Chairman.

Halifax, N. S.,
June 23rd, 1931.

REPORT OF THE COGSWELL LIBRARY COMMITTEE for the year 1930-31.

To the President, Medical Society of Nova Scotia:—

Your Committee has acted as part of the joint committee which administers the Medical Library of Dalhousie University, in accordance with the arrangement made in 1916.

The Treasurer's Statement will show that the sum of \$170.00, the proceeds of the Cogswell Library Fund, was paid to Dalhousie University for Medical Library purposes.

The attached sheets show some of the more important transactions of the Medical Library during the past year, including the purchases of new journals and books, and the rental of medical educational films.

Medical Library, Dalhousie University, 1930-31.

The following new journals were added to our subscription list during 1930-31:

Clinical	{	Archives of Internal Medicine.
		Journal of Hygiene.
		Clinical Journal.
Technical	{	Journal of Technical Methods.
		Journal of Clinical Investigation.
		Quarterly Journal of Pharmacy and Allied Sciences.
		Anatomische Anzeiger.
		Anatomische Berichte.

with an approximate expenditure on journal subscriptions of \$1,500 for the year.

Back files were purchased during the session as follows:—

Anatomische Berichte, 18 volumes completing file.

Archiv für Experimentelle Pathologie und Pharmacologie, 54 volumes.

The Bibliographic Service cards published by the Wistar Institute were purchased.

They are of special interest to the Anatomy and Histology Departments.

Approximately \$400 were spent on the purchase of books, as follows:—

- 19— Medicine, including Oxford Medicine Monographs; Harvey Lecture 3 volumes; Clough: Diseases of the Blood; Price: Practice of Medicine
- 3—Pathology and Bacteriology, including System of Bacteriology, published by the Medical Research Council, London.
- 3—Biochemistry.
- 2—Physiology.
- 11— Surgery, including Recent Advances in Surgery, Caird and Cathcart: Surgical Handbook; Campbell: Orthopedic Surgery; Lockhart-Mummery: After Treatment of Operations. Gwathmey: Anaesthesia.
- 9—Pharmacology.

11—Anatomy.

1—Ophthalmology, May: Diseases of the Eye.

2—Paediatrics, Pearson: Recent Advances in Pediatrics; Garrod: Diseases of Children.

Three films were shown during the term at an approximate cost of \$25.00, as follows. Infections of the Hand. Face Presentation. Traumatic Surgery of the Extremities. 185 volumes were bound during the year at an approximate cost of \$200.

The library received during the year through the Medical Library Association Exchange 60 volumes of journals which have aided considerably in completing back files of current journals.

The following gifts were also received:—

84 Reprints. 56 Bound volumes. 16 volumes journal files.

Respectfully submitted,

J. R. CORSTON,

Chairman.

Halifax, N. S.,
June 23rd, 1931.

VICTORIAN ORDER OF NURSES, 1930.

Nova Scotia.

To the President and Executive
of the Nova Scotia Medical Society.

Gentlemen:—

As the hyphen between the above Order and our Provincial Society, I respectfully submit a brief report on the activities of the V. O. N. during the past year in this Province.

It is not necessary for me to enlarge on the wonderful work this national organization is performing from Coast to Coast. Its activities include all branches of nursing of whatever nature and it is prepared at all times to co-operate to the fullest extent with the Health Authorities and Medical Profession when requested so to do.

Such an Order—national in scope, is without question, the most efficient (economically and professionally) and satisfactory medium for such work.

The Order has never adopted an aggressive policy but waited until the individual or place approached it before going to interpret their work. It is, however, most anxious and willing to make greater effort to extend its work.

One of the great problems is, of course, financing—but any district once receiving such services as it extends is apt to make more strenuous efforts to retain those services.

At the request of the C. M. A. and under its auspices—Dr. Grant Fleming has gone most thoroughly into the activities of the V. O. N.—and has made very valuable recommendations regarding the extension of the Order and at this time when very extensive plans are being made for the carrying on of public health work in Nova Scotia it would not be amiss to consult with the V. O. N. regarding the scope of its work—and if advisable have the co-operation of this national organization.

One new district—Glace Bay—was opened during 1930. Immediately three nurses were sent in and the order and community were most fortunate in having Miss Ellen Seaman—a Maritime girl—volunteer to take charge of the work. This she did at some considerable sacrifice with regard to salary, but she was keen to get the work established and make it go.

At present there are plans for going into Liverpool.

The Order is doing a wonderful work in Halifax and the adaptability of the nurses—along with the hearty co-operation shown, commends them to the Profession.

I append some statistics indicating the extent and certain phases of the work done in Nova Scotia in 1930.

No. Centres.....	13	Child Welfare Visits.....	12,913
No. Nurses.....	37	Communicable Visits.....	1,679
Total Cases Attended.....	7,626	Instructive Visits (Other).....	2,625
Total Obstetrical Cases.....	1,891	Deaths, Maternal.....	1
Prenatal Visits.....	7,010	Deaths of Infants under 1 month	39
Obstetrical Visits.....	16,880	Meetings Addressed.....	67
Visits to Infants.....	14,833	Clinics Attended.....	2,603
		Total Fees Collected.....	\$26,790 .27

Maternal Deaths for Nova Scotia of Cases attended by Victorian Order Nurses under Medical Direction for 1930.

Number of living births.....	1,790
Number of Deaths.....	1
Cause of Death, Eclampsia.....	1
No. of cases with 2 months or more prenatal supervision.....	0

Victorian Order of Nurses Maternal Mortality rate for Nova Scotia is .5.

Infant Death Rate for Nova Scotia (Infants under one month) of Cases cared for by Victorian Order Nurses for 1930.

Number of living births.....	1,790
Number of Deaths.....	39
Cause of Death—12 Premature, 4 Cause unknown, 4 Deformity, 2 Pneumonia, 2 Asphyxiation, 6 Hemorrhage, 2 Difficult Delivery, 1 Atelectasis, 3 Con- genital Heart, 1 Diphtheria, 1 Debility, 1 Enlarged Heart.	
No. of cases with 2 months or more prenatal nursing supervision.....	20

Victorian Order of Nurses Infant Death Rate for Nova Scotia is 21.8.

Still Birth rate is 3.3%.

Respectfully submitted,

CHAS. S. MORTON.

Halifax, N. S.,
4th July, 1931.

COMMITTEE ON LEGISLATION.

Halifax, N. S.,
June 24, 1931.

To the President and Members,
Medical Society of Nova Scotia.

Sirs:—

Your Committee on Legislation beg to report that several Bills of general interest to the profession were introduced and enacted at the last session of the Provincial Legislature. These include Bills to provide for the appointment of a Commission to be known as the Board of Commissioners of the Nova Scotia Hospital, to Amend the Anatomy Act, to Amend the Pharmacy Act, and to Amend and Consolidate the Law Relating to the Registered Nurses'

Association, to none of which was there reason for the profession to take any exception. Of very special interest to us was the Bill entitled an Act Relating to the Department of Public Health, which was duly enacted. Under the terms of this Act, the Minister of Health shall have charge of the administration of all affairs and matters relating to the public health, social welfare, vital statistics, hospitals, and charitable and public institutions. Provision is made for the appointment of a deputy minister, who, for the purposes of the chapter, shall be known also as the Inspector of Humane and Penal Institutions. The administration of a number of affairs previously dealt with by different departments of government is now centralized in the Ministry of Health. This enactment is in general accordance with the wishes of the profession as expressed at more than one meeting of the Society, and, we feel, will have the full endorsement of the Society.

Respectfully submitted,

J. G. MACDOUGALL,
W. H. HATTIE.

REPORT OF PROVINCIAL MEDICAL BOARD.

To the Medical Society of Nova Scotia.

During the year which ended October 31, 1930, 21 new names were added to the Medical Register, while 16 names were removed on account of death, and 42 names on account of presumed death. Since that date, 28 new names have been added, while 13 have been removed on account of death. Quite a number of the new registrants have no intention of practicing in Nova Scotia but have obtained registration with us in order to secure entry to the Medical Register of the United Kingdom. Approximately 460 of our registrants are resident in Nova Scotia, while approximately 445 reside outside the province.

The Board is called upon to deal with a number of matters, such as complaints with reference to registered practitioners, to which it would be unwise to give publicity. Much consideration is also given to the matter of irregulars. In this particular it may be said that evidence which, to the lay mind, may seem quite convincing may prove valueless in the courts. Of late years all evidence concerning irregulars which has been furnished the Board has been laid before our Solicitor for his opinion, and he has, in each case advised us that it was insufficient. Medical men are naturally loath to appear in court in such matters. Possibly the most effective evidence would be that of medical men.

This year 26 candidates wrote the final examinations of the Board, and 31 candidates wrote the pre-final examinations. We began, this year, the plan of allowing the examination being taken in two parts. One effect has been to increase temporarily our income from fees, and we expect to close the year without a deficit. Several years past expenditure has exceeded income, and our reserve was becoming depleted, but the financial outlook is now more encouraging. It is, of course, known that our income depends altogether upon fees exigible for examinations and licensure, and that an annual fee is not exacted of registrants—as is the usual practice elsewhere.

W. H. HATTIE,
Registrar.

Halifax, N. S.,
June 20, 1931.

**REPORT OF THE PROVINCIAL EDITORIAL BOARD, CANADIAN
MEDICAL ASSOCIATION JOURNAL.**

On behalf of the Board I beg to report that monthly news budgets, brief reports of meetings of Branch Societies (as made available to me), and obituary items have been supplied to the Journal. Only a few papers were procured for publication.

May I repeat the hope, which has been expressed in several consecutive reports, that Nova Scotia will become more adequately represented in the section of the Journal devoted to original articles?

Respectfully submitted,

W. H. HATTIE,
Chairman.

Halifax, N. S.,
June 12, 1931.

Upon the presentation by Dr. MacKenzie of his report on the Tuberculosis Commission, Dr. Joseph Hayes outlined certain phases of the work and Dr. G. H. Murphy made (later) a full statement as to the position of the Department of Health in relation to this work. On motion the following report was adopted:

THE NOVA SCOTIA TUBERCULOSIS COMMISSION.

Report of Dr. K. A. MacKenzie, Representative on the Nova Scotia Tuberculosis Commission.

To the Members of the Nova Scotia Medical Society.

Ladies and Gentlemen:—

As your representative on the Nova Scotia Tuberculosis Commission, I beg to submit the following report:

The five year demonstration, through the Nova Scotia Tuberculosis Commission, of the Canadian Tuberculosis Association, with the financial aid of the Canadian Life Insurance Officers' Association, has just terminated. My report therefore will consist of a general review of the undertakings and accomplishments of the Commission during that period.

At the beginning of the work of the Commission in 1926, there was only one travelling Clinician for the whole Province, Dr. P. S. Campbell, maintained by the Provincial Department of Health. In the Fall of 1926 the Commission put two travelling clinical nurses in the field, one for Eastern Nova Scotia, including Cape Breton, and one for Western Nova Scotia. In October, 1927, the Commission placed a third travelling clinical nurse in the field, for the Island of Cape Breton.

Early in 1927 the Commission engaged a second travelling Clinician, for the Western section of the Province, and in 1930 the Department of Health engaged Dr. C. M. Bayne as travelling Clinician for the Island of Cape Breton. This gave a separate clinician and nurse for each of the three Divisional Areas of the Province,—the Island of Cape Breton, Eastern Nova Scotia, and Western Nova Scotia.

In November, 1928, Dr. G. W. Smith resigned from the clinical service of Western Nova Scotia, and there was no one else available to fill his place. Dr. P. S. Campbell was again required to extend his territory. Last year

the experiment was tried of carrying on the clinical services of the Western section of the Province through the Nova Scotia Sanatorium, under the direction of the Superintendent, Dr. Miller. It was thought that this would serve the double purpose of supplying an adequate clinic for Western Nova Scotia, and at the same time train the staff of the Sanatorium in this useful and important field work and maintain a source of trained men in this line, to draw from when an emergency required.

On the conclusion of the five year demonstration, and the withdrawal from the Maritime Provinces of the Maritime Tuberculosis Educational Committee, the subsidiary of the Canadian Tuberculosis Association carrying on this work, there has been a general reorganization.

The newly formed Provincial Department of Health, under the administrative direction of Hon. Dr. Murphy, took over, on July 1st, the entire field clinical service, including the three travelling clinical nurses, and has appointed Dr. J. J. MacRitchie, Divisional Medical Officer for Western Nova Scotia.

This was really the main objective of the whole demonstration, viz.: that an adequate permanent travelling clinical medical and nursing service should be established for the Province. This lays a solid foundation for the development of a more adequate system of Tuberculosis Control.

Perhaps the greatest work of the Commission has been in arousing a widespread public interest in public health generally and in Tuberculosis control in particular. Public bodies never want to go beyond the desire or will of the people.

There are two fundamental needs for success in the medical aspect of Tuberculosis Control, and these are; adequate bed accommodation and provision for the care and treatment of the poor and all open cases. These two great needs have been and are still the missing links in the chain of Tuberculosis Control in this Province.

The Commission has bent its most strenuous efforts, with the Government, the Municipalities, and Incorporated Towns, to meet these two outstanding needs.

It is very gratifying indeed to feel that there has never been a time in the history of Nova Scotia, when these requirements were so near realization.

The Province is to be congratulated on having succeeded in getting an outstanding man with the mental equipment and wide experience of Dr. Murphy as its first Minister of Health. Already \$400,000.00 has been voted for Tuberculosis Control, and construction work has been commenced on another infirmary unit to the Nova Scotia Sanatorium, and further plans made for extending the tuberculosis bed accommodation of the Province at large.

Since the inauguration of the Commission the following Incorporated Towns and Municipalities have taken action in the matter of caring for their poor suffering from Tuberculosis.

Incorporated Towns,—Amherst, Annapolis Royal, Bridgetown, Bridgewater, Digby, Hantsport, Kentville, Liverpool, Lunenburg, Mahone Bay, Mulgrave, New Glasgow, Parrsboro, Pictou, Shelburne, Stellarton, Stewiacke, Truro, Wedgeport and Yarmouth. This makes twenty Incorporated Towns out of the 42, and the Commission is continuing its efforts with the rest of them.

Municipalities,—Annapolis, Cape Breton, Cumberland, Halifax, West Hants, Kings, Lunenburg, Chester, Pictou, Queens, Richmond, Shelburne and Yarmouth. This makes 12 out of the 24 Municipalities. As the annual

meetings of the Municipal Councils practically all take place during the same week in January of each year, it takes some time to get round to them all.

In connection with this five year period, the amount of money raised and spent through the Commission was as follows:

Subscribed by the Maritime Tuberculosis Educational Committee:

Nurses' salaries and expenses for five years at \$5,000.00 per year.....	\$25,000.00	
Services Clinician, Western Nova Scotia.....	5,000.00	
Educational equipment.....	450.00	
Contribution towards nurses' cars.....	200.00	
Dr. Sieniewicz, Halifax Clinic.....	600.00	
	<hr/>	\$ 31,250.00
Provincial Government, \$10,000.00 per year for 4 years....		\$ 40,000.00
Nova Scotia Tuberculosis Commission:		
Seal Sales for 5 years.....	48,721.00	
Subscriptions, of which W. H. Dennis raised over \$7,000.00.....	10,842.00	
	<hr/>	59,563.00
		<hr/>
		\$130,813.00

In the last five years there has been a very gratifying reduction in the death rate from Tuberculosis in Nova Scotia.

For the five year period ending December, 1925, there had been an average of 659 tuberculosis deaths, or an average of 124 per 100,000 population. For the next succeeding five year period ending December, 1930, there has been an average of 584 tuberculosis deaths or 106 per 100,000 population, or a drop of 18 per 100,000. In the Dominion of Canada the drop for the same period was only 3.6. This shows an improvement for Nova Scotia five times greater than the average for Canada in the same period. During the next five years a much larger reduction in the tuberculosis death rate in Nova Scotia can be confidently looked for.

Appended hereto is a table for a six year period, making each column the end of a five year period. This shows a clearer picture of what is actually taking place and eliminates the jerky fluctuations of yearly tables.

With the end of the five year demonstration period, \$15,000.00 has been withdrawn from the revenue of the Commission and, as has already been pointed out, a considerable part of the programme carried on by the Commission has been taken over by the Government.

Still it is generally agreed that there is a definite place for such a body, as it can undertake certain duties which cannot be carried on by the Government. The Minister of Health and the Deputy Minister have expressed a keen desire to see the Commission continue.

This, of course, is a matter of finance. The Canadian Life Insurance Officers' Association has offered \$1,500.00 to encourage the continuation of the work of the Commission, if a similar amount is contributed by the Government. This, with other funds available, will enable the Commission to continue.

With this in view the Commission has drawn up a programme of undertakings, which is also attached hereto. (To be published later.)

Respectfully submitted,

K. A. MACKENZIE.

Province of Nova Scotia
Tuberculosis Death Rate Per 100,000 Population
Average for 5 year Periods Ending Sept. 30th.

COUNTY	1923	1924	1925	1926	1927	1928
Annapolis.....	151	134	111	102	86	83
Antigonish.....	178	154	162	160	175	181
Cape Breton.....	131	120	118	115	111	116
Colchester.....	108	94	90	92	93	90
Cumberland.....	119	103	96	85	74	74
Digby.....	152	151	139	155	143	137
Guysboro.....	145	140	150	149	134	136
Halifax.....	175	161	138	137	139	134
Hants.....	120	85	103	92	100	95
Inverness.....	146	141	141	144	121	111
Kings.....	164	173	154	154	164	176
Lunenburg.....	123	118	112	111	107	90
Pictou.....	128	118	102	97	102	104
Queens.....	109	112	108	116	118	104
Richmond.....	191	199	200	208	195	176
Shelburne.....	189	177	179	149	154	142
Victoria.....	59	73	86	86	92	97
Yarmouth.....	189	169	162	140	139	142
Province.....	143	132	124	121	120	118

**Programme for the Continuation of the work of
The Nova Scotia Tuberculosis Commission.**

1. Finish the arrangements with the balance of the Towns and Municipalities re free treatment for those who cannot afford it.
2. Continue financial aid, as far as our means will allow, in the treatment of necessitous cases having no other resources.
3. Secure additional moving picture films and lantern slides and carry on illustrated educational health lectures, if desired by the Ministry of Health.
4. Co-operate with the Provincial Health Department in publicity and distribution of literature, taking advantage of free newspaper publicity contributed in connection with the annual seal sale. The Commissioner will prepare a short pointed article for the week-end issues of all the daily papers, as well as one per week for the weekly papers on Tuberculosis and Health subjects.
5. Continue a vigorous annual seal sale campaign.
6. Make more aggressive appeals for special subscriptions to the general work of tuberculosis control.
7. Extend the work among undernourished and underdeveloped children.
 - (a) Free milk where specially needed.
 - (b) Encouragement of Summer Camps.
 - (c) Support the work of the Clinicians and Nurses in poor homes.
8. Carry on tuberculosis exhibits at the annual Fall Exhibitions.
9. At the earliest possible moment, sponsor a campaign for a Children's Tuberculosis Infirmary and Preventorium.

OBITUARY REPORT

1930-1931.

All members standing the Secretary read the Obituary report, which the Executive ordered presented to the Society, as follows:—

To the Members of the Medical Society of Nova Scotia.

Your Executive would ask you to stand while the names of those who have departed this life since our last meeting are announced:

FREDERICK EUGENE GULLISON, M.D.,C.M., McGill University 1916, F.A.C.S. 1930, Yarmouth, N. S.

He was born at Yarmouth, December 7, 1890 and died at his home October 3rd, 1930, being in his 40th year. He received his preliminary education at Yarmouth and at Horton Collegiate Academy; graduated from McGill in 1916 and located in Yarmouth in 1917. He was continuously a member of the Yarmouth or Western N. S. Medical Society, the Medical Society of Nova Scotia and the Canadian Medical Association. Very shortly before his decease he was elected a Fellow of the American College of Surgeons, but was unable to be present when the Degree was conferred. He is survived by his widow, one son and one daughter.

* * * * *

ROBERT GORDON MCLELLAN, M.D.,C.M., Dalhousie 1909, Lunenburg, N. S.

Dr. R. G. McLellan was born at Pictou in 1882; he died at the Victoria General Hospital November 9th, 1930. From Pictou Academy he entered Dalhousie and graduated in Medicine in 1909. He at once located in Lunenburg in partnership with the late Dr. A. E. G. Forbes; and since 1927 with Dr. H. A. Creighton, this partnership being dissolved just prior to his decease. He was always in attendance at the local Medical Society and was always a member of the Medical Society of Nova Scotia and the C. M. A. He was buried in Pictou. He is survived by his widow and one son.

* * * * *

ROBINSON COX, M.D., C.M., Dalhousie 1875, Upper Stewiacke, N. S.

Dr. Robinson Cox was born at Upper Stewiacke on October 4th, 1841; he died at the same place January 6th, 1931, being in his 90th year. He was reared in a community where all the youth entered the teaching or other professions. After a course at the Normal School at Truro he taught school for several terms in various parts of the Province. He graduated from the Medical School of Dalhousie in 1875 and at once located in his home community, where he practiced continuously until his death; although he nominally retired in 1925 when he was tendered a community reception. On this occasion Dalhousie University sent him a letter of congratulation. That year

he was also honored by the Colchester-Hants Medical Society at a banquet and by a presentation. This year he was also elected to Honorary Membership in the Medical Society of Nova Scotia, an honor that he esteemed very highly.

He was one of 19 doctors in Colchester County to assist in organizing a County Society in 1883. Upon the union of this Society with the medical men of Hants he was elected the first President of the present Colchester-Hants Medical Society. He is survived by two sons, Mrs. Cox having predeceased him in June, 1927.

* * * * *

MELBOURNE EDWARD ARMSTRONG, M.D., University of New York, 1892, Bridgetown, N. S.

Dr. M. E. Armstrong was born at North Kingston, N. S. in 1867 and died in Amherst at the residence of his son January 1st, 1931. After the common and high schools he entered the University of New York and graduated in 1892. He located in Freeport but eight or nine years later he removed to Bridgewater where he practised until his last illness which lasted about a year. In July, 1930 he was elected to Honorary Membership in the Medical Society of Nova Scotia, at whose meetings he was always in attendance if possible. In October of that year he was honored by an address and a presentation from his many grateful patients in Bridgetown and vicinity. A very considerable portion of his time was devoted to community welfare along many lines. He was well known over the Province as an historian and archivist. He is survived by his wife, by one son and one daughter. He was buried at Bridgetown on January 4th, 1931, the Masonic service being conducted at the grave.

* * * * *

ALBERT MITCHELL PERRIN, M.D., University of New York, 1873, Yarmouth, N. S.

Dr. A. M. Perrin was born at River John, Pictou County, May 12th, 1849 and was thus at the time of his death, April 1st, 1931, almost eighty-two years of age. After completing the course at the Pictou Academy he went to Shelburne and began to study medicine under the direction of the late Dr. S. W. Barrs and, later, with Dr. Johnstone of Stellarton. Then he spent two years in Shelburne and two more on Cape Sable Island. Following a post-graduate course in New York in 1878 he located in Yarmouth and for over fifty years occupied the same comfortable home on Main Street. He was elected in 1923 to Honorary Membership in the Medical Society of Nova Scotia, an honor he greatly appreciated as he was invalided by paralysis and was compelled to retire from practice. All through the years of invalidism he was thus continually in touch with the work of the Medical Society and greatly appreciated the BULLETIN of the Society. Dr. Perrin is survived by Mrs. Perrin, one son and one daughter. He was buried with Masonic honors. Dr. C. A. Webster represented the Medical Society and other practitioners were pall bearers.

The Secretary is instructed to extend sympathy in case of death of members of the Society, or of members of their families, by direct message or by publicity in the BULLETIN; to send floral offerings in the cases of Honorary Members and Officers of the Society. As far as is possible the BULLETIN makes mention of the deaths of all members of the profession in this province.

Approved by the Executive at Truro, July 7, 1931 and passed to the Society for adoption.

Signed, S. L. WALKER, Secretary.

The Special Committee on the Presidential Address presented the following report which was adopted:

Your Committee beg leave to report that they have secured considerable newspaper publicity for the very excellent address delivered by the President. Your Committee recommends that the address be published in full in the BULLETIN and distributed in reprints to the Medical Profession in this Province

Signed: J. C. MORRISON.
 H. A. CREIGHTON.
 W. R. DUNBAR.

Dr. J. K. McLeod moved, seconded by Dr. Dan McDonald the following resolution:—

Resolved that the Medical Society of Nova Scotia approves of the establishment of a Ministry of Health with the Hon. Dr. G. H. Murphy as Minister:

Further Resolved that the Nova Scotia Medical Society approves of the policy projected by Dr. Murphy and is prepared to give said policy its full support.

The President called for a standing vote and it was carried unanimously. Dr. Murphy made suitable acknowledgement and further outlined the plans of the Department.

AUDITORS AND FINANCE COMMITTEE.

The following Report of the Auditors and Finance Committee was received and adopted:

Your Committee, owing to funds having been kept in a general account by the Treasurer and in a membership collection account and a Bulletin advertising account by the Secretary, found their duties difficult and would strongly advise that all monies be disbursed by the Treasurer. The balance cash on hand by bank statements is as follows:—

In current Treasurer's Account.....	\$ 642.14
In Membership account.....	1,033.45
In Bulletin Account.....	224.62
	<hr/>
Total cash on hand.....	\$1,900.21

The net gain for the year was thus \$119.81 as compared with a net loss the previous year of \$280.86. This satisfactory result is chiefly due to larger income from BULLETIN Advertisers. The several reports have been audited and found correct. The Treasurer's statement follows:

FINANCIAL STATEMENT
Nova Scotia Medical Society
Year 1930-1931.

RECEIPTS

July 1, 1930.

Balance Cash on hand, Savings Bank.....	\$ 802.46	
Current Acct.....	977.94	
		\$1,780.40
Fees collected during year.....		1,000.00
Receipts from Medical Bulletin (1st quarter).....		378.40
Interest Received on Savings Acct.....		24.24
		\$3,183.04

PROFIT AND LOSS STATEMENT

Fees per year.....	\$1,000.00	
Int. on Savings Bank.....	24.24	
Medical Bulletin.....	86.30	
		\$1,110.54
Less Costs.		
Salaries.....	\$1,200.00	
Travelling Expenses.....	92.10	
Sundry Expenses.....	596.70	
Rent of Office.....	360.00	
		2,248.80
Net Loss.....		\$1,138.26

DISBURSEMENTS

Deficit Medical Bulletin (6 months).....	\$ 292.10	
Salaries for Year.....	1,200.00	
Travelling Expenses.....	92.10	
Sundry Expenses.		
Postage, Stenographer, Tgms., Phones, Rent of Office, etc.....	360.00	
Cash on hand June 30, 1931.		
Savings Bank.....	\$ 626.70	
Current Acct.....	15.44	
		642.14
		\$3,183.04

The Cogswell Library Fund statement is as follows: It is noted however, that there is a further payment due Dalhousie from this Fund which will bring this balance to \$54.93.

COGSWELL LIBRARY FUND

July 7th, 1931.

ASSETS

June 30th, 1930. Balance Bank of Commerce	\$ 44.15
Interest	1.23
June 29th, 1931. Income from Bonds	350.00
Total	\$395.38

EXPENDITURES

July 2nd, 1931. Dalhousie University	\$170.00
July 3rd, 1931. Exchange on Coupons45
Total	\$170.45
July 7th, 1931. Balance on hand Bank of Commerce	\$224.93

J. G. D. CAMPBELL,

Treasurer Medical Society of N. S.

July 8, 1931.

Audited and found correct

W. R. DUNBAR,
D. S. McCURDY.

The Report of Nominating Committee was then presented and on motion adopted.

Your Nominating Committee begs to submit the following report:—

1. Time and Place of next meeting Kentville, July 5th and 6th, 1932.
2. President Dr. W. R. Dunbar, Truro, N. S.
3. First Vice-President Dr. Dan McNeil, Glace Bay.
4. Second Vice-President Dr. W. N. Cochran, Mahone.
5. Secretary Dr. S. L. Walker, Halifax, N. S.
6. Treasurer Dr. W. L. Muir, Halifax, N. S.
7. Members of the Executive:

Halifax Branch Society:—Dr. M. G. Burris, Dr. C. E. Kinley, Dr. A. M. Marshall, (others nominated not eligible).

Pictou County Branch:—Dr. A. F. McGregor, New Glasgow; Dr. M. R. Young, Pictou.

Cumberland County Branch:—Dr. A. E. Mackintosh, Amherst; Dr. M. J. Wardrope, Springhill.

Colchester-Hants Branch:—Dr. D. S. McCurdy, Truro; Dr. F. R. Shankel, Windsor.

Valley Medical Society:—Dr. M. R. Elliott, Wolfville; Dr. A. S. Burms, Kentville.

Western Nova Scotia:—Dr. L. M. Morton, Yarmouth; Dr. R. L. Blackadar, Port Maitland.

Lunenburg-Queens:—Dr. D. A. Campbell, Bridgewater; Dr. H. A. Creighton, Lunenburg.

Eastern Counties Society:—Dr. O. R. Stone, Sherbrooke; Dr. J. L. McIsaac, Antigonish.

Cape Breton Branch:—Dr. Nat McDonald, Sydney Mines; Dr. F. G. MacAskill, Glace Bay; Dr. E. J. Johnstone, Sydney.

8. Standing Committees.

Arrangements:—President, Secretary and Resident Branch members.

Cogswell Library:—Drs. Corston, Stewart, Gosse, Holland and Muir.

Public Health:—Drs. Byrne, Blackadar, McLeod, (J. K.) Rehfuss, Kent, McKinnon (W. F.).

Health Publicity:—Drs. Walker, Benvie, Byrne, Gosse, Johnston (S. R.), Hattie, Gerald Burns.

Advisory of Public Health:—Drs. Farish, Roy Burns (A. S.), Little, McKenzie (K. A.), McDonald (H. K.), Burns (G. R.), McIsaac.

Editorial Board C. M. A.:—Dr. Hattie and Secretaries of Branch Societies

Workmen's Compensation Board:—Drs. Corston, Acker (T. B.) and Burris.

Council of C. M. A.:—Drs. Hattie, McDonald (H. K.) Morrison (J. C.).
The President and Secretary Ex-Officio.

Narcotic Drugs:—Drs. Archibald (D. W.), Murphy and Lawlor.

Legislative:—Drs. Hattie and McDougall.

Tuberculosis Commission:—The President and Dr. K. A. McKenzie.

Advisory to Tuberculosis Commission:—Executive to make appointments.

General Board of Management of the N. S. Society for Cripple Children:—Dr. L. R. Morse, Lawrencetown, Dr. Dan Murray, Tatamagouche, Dr. J. C. Morrison, New Waterford.

Historical Medicine:—Drs. Scammell, Morrison (M. D.), Hattie, Walker, Murphy, McGarry, Kendall and McGregor.

Prov. Med. Board:—Drs. McDougall, Hogan, Roy, Benvie, Gilroy and Fuller.
These appointments continue for another year.

Representative to V. O. N.:—Dr. C. S. Morton, Halifax.

Representative to N. B. Society:—Dr. C. E. Kinley, Halifax.

Representative to P. E. I. Society:—Dr. C. W. Holland, Halifax.

Solicitor:—Mr. J. M. G. Stewart, Halifax.

Dr. Farish presented the **Report of Committee on Courtesies** which was adopted.

To the Medical Society of Nova Scotia:—

Your Committee on Courtesies begs to make the following report upon which the Secretary will take the necessary action:—

(1) That the thanks of the Nova Scotia Medical Society be tendered to the following:

- (a) The Town of Truro for its hospitable welcome tendered by His Worship Mayor G. Y. Thomas.
- (b) The local committee of Medical men for their assiduous efforts in making arrangements for the comfort of members and guests.
- (c) The Truro Golf Club for setting aside the Course and Club House for the Golf Tournament; also to the ladies of Truro for providing such an excellent tea.

- (d) To Mr. F. W. Swindell for the entertainment tendered to the guests at his farm.
 - (e) To Dr. E. P. Bryson for attention to visiting members at the Nova Scotia Training School.
 - (f) To Dr. M. G. Whittier for the entertainment of guests and members at the Maritime Home for Girls.
 - (g) To the Tennis Club for their offer of the use of their courts for our members.
 - (h) To the press for reports of the proceedings of the Session; and to any and all who have in any way helped to make the Convention the success it has been.
- (2) Your Committee received communications of regrets from a number who were unable to be present.

Dr. George D. Stewart of New York wired as follows:—

"It is no use I am still too lame to make the grade I cannot carry somebody around with me to help me put my coat on, while at the same time I am reading the paper. Please express my great regret. I was particularly anxious to be there this year with Murray, President."

Dr. Ross Millar, Ottawa, wired:

"Regret exceedingly my inability to attend Meeting owing to pressure of departmental business here. Kindest regards to members."

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

"Am very sorry I find myself unable to attend the Annual Meeting of the Medical Society. Best wishes for a good session. Will contribute a couple of short articles."

Mrs. Hugh Dickson, M.D., Truro, N. S. advised the Secretary thus:—

"Very sorry to be unable to attend your session. In particular I regretted being unable to take part in the programme in connection with the matter of Maternal Mortality. May I congratulate the Society on giving this subject unusual attention by the papers presented on the subject by Dr. Hendry of Toronto."

All of which is respectfully submitted,

Signed: G. W. T. FARISH.
R. H. SUTHERLAND.

The Society, upon motion, went on record as expressing sincere appreciation of the services rendered by the retiring Treasurer Dr. J. G. D. Campbell, who has served as Secretary-Treasurer, since 1919. This is a twelve year record of service that has been of great value to the Society.

The President, Dr. Dan Murray, then introduced to the Society the newly elected President, Dr. W. R. Dunbar of Truro and duly installed him in office. Both the new President and the retiring President made remarks suitable to the occasion.

On motion it was resolved that omitted or unfinished business be referred to the incoming Executive.

At 6 P. M. with barely a quorum in attendance, the President then declared this annual session closed.

S. L. WALKER,
Secretary.

REGISTRATION.

78th Annual Meeting, July, 1931, Truro, N. S.

- Dr. S. L. Walker, Halifax, N. S.
 Dr. A. F. Miller, Kentville, N. S.
 Dr. T. R. Johnson, Great Village, N. S.
 Dr. Chas. J. W. Beckwith, Kentville.
 Dr. F. T. MacLeod, New Waterford.
 Dr. G. F. White, Bridgewater, N. S.
 Dr. J. J. MacRitchie, Halifax, N. S.
 Dr. J. W. Reid, Windsor, N. S.
 Dr. J. J. Cameron, Antigonish, N. S.
 Dr. R. A. MacLellan, Rawdon, N. S.
 Dr. John McLeod, Sydney, C. B.
 Dr. C. M. Bayne, Sydney, N. S.
 Dr. F. O'Neil, Sydney, N. S.
 Dr. A. S. Burns, Kentville, N. S.
 Dr. T. Ives Byrne, Dartmouth, N. S.
 Dr. B. S. Bishop, Kentville, N. S.
 Dr. P. S. Campbell, Port Hood, N. S.
 Dr. H. H. Banks, Barrington Pas., N. S.
 Dr. V. O. Mader, Halifax, N. S.
 Dr. H. A. Creighton, Lunenburg, N. S.
 Dr. F. D. Charman, Truro, N. S.
 Dr. W. N. Cochran, Mahone Bay, N. S.
 Dr. Gerald C. Bliss, Amherst, N. S.
 Dr. E. E. Bissett, Windsor, N. S.
 Dr. W. F. MacKinnon, Antigonish.
 Dr. D. McNeil, Glace Bay, N. S.
 Dr. J. C. Morrison, New Waterford.
 Dr. D. Murray, Tatamagouche, N. S.
 Dr. M. J. Wardrope, Springhill, N. S.
 Dr. M. Jean Whittier, Truro, N. S.
 Dr. G. H. Murphy, Halifax, N. S.
 Dr. M. A. B. Smith, Dartmouth, N. S.
 Dr. Joseph Hayes, Halifax, N. S.
 Dr. H. A. Minshull, Halifax, N. S.
 Dr. B. H. Calkin, Stellarton, N. S.
 Dr. George Campbell, Halifax, N. S.
 Dr. R. M. Gorssline, Halifax, N. S.
 Dr. A. E. Mackintosh, Amherst, N. S.
 Dr. F. L. Hill, Parrsboro, N. S.
 Dr. T. W. MacLean, Scotsburn, N. S.
 Dr. O. B. Keddy, Windsor, N. S.
 Dr. C. H. Morris, Windsor, N. S.
 Dr. F. R. Shankel, Windsor, N. S.
 Dr. J. W. Smith, Liverpool, N. S.
 Dr. W. G. Colwell, Halifax, N. S.
 Dr. G. R. Burns, Halifax, N. S.
 Dr. Angus McD. Morton, Halifax.
- Dr. Lewis Thomas, Halifax, N. S.
 Dr. R. H. Sutherland, Pictou, N. S.
 Dr. A. R. Cunningham, Halifax, N. S.
 Dr. George Young and Wife, Toronto.
 Dr. W. B. Hendry and Wife, Toronto.
 Dr. C. G. Campbell, Truro, N. S.
 Dr. A. E. Murray, Halifax, N. S.
 Dr. H. L. Scammell, Halifax, N. S.
 Dr. Daniel McDonald, N. Sydney, N. S.
 Dr. W. L. Muir, Halifax, N. S.
 Dr. T. C. Routley, Toronto, Ont.
 Dr. F. F. Eaton, Truro, N. S.
 Dr. H. F. McKay, New Glasgow, N. S.
 Dr. A. F. McGregor, New Glasgow.
 Dr. E. K. MacLellan, Halifax, N. S.
 Dr. E. Glenister, Dartmouth, N. S.
 Dr. W. Alan Curry, Halifax, N. S.
 Dr. W. Atlee, Halifax, N. S.
 Dr. D. L. MacKinnon, Truro, N. S.
 Dr. John Stewart, Halifax, N. S.
 Dr. W. H. Hattie, Halifax, N. S.
 Dr. M. G. Tompkins, Dominion, C. B.
 Dr. Hector H. MacKay, New Glasgow.
 Dr. T. M. Sieniewicz, Halifax, N. S.
 Dr. G. W. T. Farish, Yarmouth, N. S.
 Dr. T. A. Lebbeter, Yarmouth, N. S.
 Dr. John J. Roy, Sydney, N. S.
 Dr. C. K. Fuller, Yarmouth, N. S.
 Dr. L. Morton, Yarmouth, N. S.
 Dr. Mina MacKenzie, Neemuch,
 C. India.
 Dr. Sandy MacDonald, North Sydney.
 Dr. J. Ballem, New Glasgow, N. S.
 Dr. V. H. T. Parker, Stellarton, N. S.
 Dr. W. R. Dunbar, Truro, N. S.
 Dr. V. H. T. Parker, Stellarton, N. S.
 Dr. W. R. Dunbar, Truro, N. S.
 Dr. S. A. Fulton, Truro, N. S.
 Dr. F. P. Smith, Mill Village, N. S.
 Dr. J. G. MacDougall, Halifax, N. S.
 Dr. H. V. Kent, Truro, N. S.
 Dr. H. B. Havey, Stewiacke, N. S.
 Mr. F. R. Clayden, Moncton, N. B.
 Mr. N. M. Pettis, Saint John, N. B.
 Mr. R. R. Preston, Truro, N. S.
 Dr. D. S. McCurdy, Truro, N. S.
 Dr. C. E. Kinley, Halifax, N. S.

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|---------------------------------------|--|
| Dr. C. W. Holland, Halifax, N. S. | Dr. S. R. Johnston, Halifax, N. S. |
| Dr. L. F. Doiron, Little Brook, N. S. | Dr. G. A. Macintosh, Halifax, N. S. |
| Dr. T. E. Granville, Bedford, N. S. | Dr. John MacDonald, New Glasgow. |
| Dr. R. A. H. MacKeen, Halifax, N. S. | Dr. J. B. Reid, Truro, N. S. |
| Dr. H. W. Schwartz, Halifax, N. S. | Dr. J. Stewart, Upper Stewiacke, N. S. |
| Dr. D. F. McInnis, Shubenacadie. | Dr. E. P. Brison, Truro, N. S. |
| Dr. J. W. Reid, Jr., Halifax, N. S. | Mr. H. M. Clinger, Walkerville, Ont. |
| Dr. W. H. Robbins, New Glasgow. | Dr. T. B. Acker, Halifax, N. S. |
| Nova Scotia. | Dr. E. R. Corbett, Kentville, N. S. |
| Dr. K. MacKenzie, Halifax, N. S. | Dr. V. F. Connor, Maitland, N. S. |
| Dr. H. L. Simpson, Springhill, N. S. | Dr. N. H. Gosse, Halifax, N. S. |
| Dr. R. M. Benvie, Stellarton, N. S. | Dr. F. G. Mack, Halifax, N. S. |
| Dr. T. H. MacDonald, Sommerville, | Dr. Hugh McKinnon, Berwick, N. S. |
| Mass. | Dr. J. W. T. Patton, Truro, N. S. |

The Nova Scotia Sanatorium is now having installed a new Centralized Radio and Public Speaking System. It will be remembered that the funds for this purpose were raised by subscriptions managed by the *Halifax Herald and Mail* some months ago. The patients will naturally be much pleased with this installation.

MAINTAINING PRE-EMINENCE AS A URINARY ANTISEPTIC

A granular effervescent salt of Urosine, dissolving immediately with effervescence upon being dropped into water, and forming an agreeable carbonated beverage. Each heaping teaspoonful contains $7\frac{1}{2}$ grains of Urosine (Hexamine) in combination with Benzoic Acid.

Dispensed in eight ounce bottles holding four ounces of Granular Effervescent Urosine, with measuring cap which holds two heaping teaspoonfuls.

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MONTREAL

CANADA

The Nova Scotia Medical Bulletin

Official Organ of The Medical Society of Nova Scotia.

Published on the 5th of each month and mailed to all physicians and hospitals in Nova Scotia. Advertising forms close on the 15th of the preceding month. All Mss should be in the hands of the Business Editor on or before the 10th of the month. Subscription Price:—\$3.00 per year.

Business Editor	- - - - -	S. L. WALKER, B.A., M.D.
Editorial Board	- - - - -	N. H. GOSSE, M.D.; C.M., F.A.C.S.
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		R. M. BENVIE, M.D., M.C., F.R. & P. (Can.)
		S. J. MACLENNAN, B.A., M.D.
		H. B. ATLEE, M.D., C.M.

VOL. X

SEPTEMBER 1931

No. 9

The Annual Meeting

ANOTHER Annual Meeting has come and gone, and in its backwash we mull over certain emotions that it raised in our breasts. First of all, I think it can fairly be said that by visiting speakers and local talent the scientific side was extremely well done. Secondly, the interesting debates of the last afternoon must have given entertainment alike to those who took part in them and those who listened. Thirdly, there was an excellent attendance throughout the entire meeting. But to be completely satisfied with the entire proceedings would be to lay ourselves open to the charge of complacency, and surely no Nova Scotian should be complacent but a dead Nova Scotian. There are one or two ways in which I feel we might improve our annual meetings. I might as well get them off my chest while they are still fresh in mind.

There is the question of place. Far be it from me to impugn either the work of organizing or the task of entertaining that fell on the local men of Truro this year, but it seems to me that with our growing annual attendances it is no longer possible to hold these meetings to the best advantage in towns that do not have one hotel large enough to house comfortably the bulk of those attending, and give space enough for comfort at the annual dinner. Speaking for myself and those at my table I can say that this year's dinner was a most uncomfortable affair. Myself and my immediate comrades were not only jammed in so that we couldn't even move without creating a disturbance, but practically had to wait on ourselves and some went without one or more of the (what seemed like) twenty odd courses. If the annual dinner is to be what it should, and to achieve its ordained purpose, it must be held in a dining room large enough to sustain the diners in comfort, and sufficiently staffed that all may be properly served. In this connection it might be a good thing if future dinner committees limited the number of courses to not more than five, or at the outside, six. Furthermore, considering the time of year and the type of weather we usually have, we should be able to house ourselves in a hotel possessed of sufficient rooms with baths so that we might indulge in a moiety of home comfort. My own hotel room contained a bed whose mattress seemed to be largely made out of brickbats. Within a hundred yards of its open window trains passed all night through, and even with the hypnotic provided by kind friends previously, I found myself waking blasphemously ever and anon.

My suggestion therefore is, that hereafter only those towns be chosen for the annual meeting where a hotel of sufficient size to house us properly is available. There are such towns—Yarmouth, Digby, Chester, Pictou, Kentville, Sydney—to say nothing of Halifax—scattered at strategic parts all over the province. It seems to me they offer sufficient geographical choice, and would prevent surely the nightmare of this year's annual dinner.

Then there is the question of the arrangement of the programme. This year the pleasure came first and the business last. In other words we played golf on Wednesday and did business on Thursday afternoon. It seemed to me, and to many to whom I talked, that a reversal of this arrangement would serve to build up a better climax, with the annual dinner to come on the last night, following the golf tournament, as a grand and final winding up of procedures. We come to the annual meeting fresh from our stern and spartan routine and still have sufficient earnestness of purpose to throw into a first full day of business and scientific work. But by nightfall we are gathering in festive groups and greeting old comrades with much wassail. As a result of the strenuousness of these greetings (or is it the wassail?), we are prepared the next day for not more than a few hours of work; stand, indeed, very much in need of the golf and fresh air, and relaxation. Then with the annual dinner to finally break down the last of our Nova Scotian repressions, we become really gay and gladsome good fellows, falling on one another's necks with fullsome compliments, and in other ways mentally catheterized for another year in the shafts.

Perhaps I am wrong about all this. What do you think? Is it worth a trial? Write in and tell our genial secretary how it all struck you.

DR. MURPHY, MINISTER OF HEALTH, AND THE "BULLETIN".

All will regret that circumstances have conspired to remove Dr. Murphy from active connection with the editorial board of this journal. Our regrets however, are all for the *Bulletin*. Certainly they cannot be for Dr. Murphy who we believe is immeasurably happier in the new and greater sphere of service to his province to which he has been translated. Support for this belief is found in the enthusiasm with which, in his address to us at Truro, he recounted the achievements to date of his new department, and with which he outlined his plans for further Public Health activity.

While therefore regret is experienced that his facile pen may not be expected to serve the *Bulletin* as in the past, it must give place to a feeling of satisfaction that it is only because he has found opportunity to do greater honor to the profession in the position which he now commands.

Readers of the *Bulletin* will remember with gratitude the service which Dr. Murphy has rendered this journal and will find it very easy to share in the thanks and felicitations which we offer him on this occasion.

* * * * *

But the *Bulletin* must carry on. No one could mistake the disposition of members at Truro on this point. There was manifested however, a desire for its improvement, and it was probably hoped that that would follow when the Editorial Board was enlarged to include representatives from counties other than Halifax, in the persons of Doctors J. K. MacLeod of Sydney and R. M. Benvie of Stellarton.

Plans have already been discussed for the introduction of improvements from time to time within the scope of the original purpose of the *Bulletin*, but neither the value which will accrue from the addition of the two provincial

men, nor any increased enthusiasm on the part of the city men will avail to its satisfactory improvement if every branch Society does not feel that it is its journal, and take steps to assume some responsibility for its contents. The form in which that is assumed does not have to be that of some highly scientific contribution, but some of the smaller things which are interesting—case reports, short papers, professional news notes, obituaries, etc.—will find ready acceptance. It was never intended that the *Bulletin* should be made primarily another scientific journal, but rather the medium by which members would be kept in touch with matters affecting their organization, its individual members or the profession at large, as well, of course, as the medium through which members might air their views on matters with this connection. If that help which we should expect will be forthcoming from the branches to justify that original purpose, there will not be lacking effort to see that those who also come to it for practical scientific pabulum will not be "sent empty away."

N. H. G.



THE GENERAL SECRETARY.



THE PAST PRESIDENT.



A SERIOUS GROUP.



A DIFFERENT GROUP.

Name The Victims.

Department of the Public Health

PROVINCE OF NOVA SCOTIA

Minister of Health - - - HON. G. H. MURPHY, M. L. A., Halifax.

Deputy Minister of Health - - - DR. T. IVES BYRNE, Halifax.

SPECIAL DEPARTMENTS

Tuberculosis - - - - -	DR. P. S. CAMPBELL - - - Halifax
	DR. C. M. BAYNE - - - Sydney
	DR. J. J. MACRITCHIE, - - - Halifax
Pathologist - - - - -	DR. D. J. MACKENZIE - - - Halifax
Psychiatrist - - - - -	DR. ELIZA P. BRISON - - - Halifax
Supt. Nursing Service - - - - -	MISS M. E. MACKENZIE, R.N., Halifax

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1st Vice-Pres. - - - - -	DR. M. J. WARDROPE - - - - -	Springhill
2nd Vice-Pres. - - - - -	DR. A. E. BLACKETT - - - - -	New Glasgow

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DR. R. L. BLACKADAR - - - - -	Port Maitland

MEDICAL HEALTH OFFICERS FOR CITIES, TOWNS AND COUNTIES

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White, G. F., Bridgetown.

O'Neill, F., (Louisburg & C. B. Co.)
Murray, R. L., North Sydney.

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MacKinnon, W. F., Antigonish.

COLCHESTER COUNTY

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Havey, H. B., Stewiacke.
Johnson, T. R., Great Village (County).

CAPE BRETON COUNTY

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MacDonald, N., Sydney Mines.
McLean, J. A., Glace Bay.
McLeod, J. K., Sydney.

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Bliss, G. C. W., Amherst.
Drury, D., Maccan (County).
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Henderson, Chas. S., Parrsboro.
Rockwell, W., River Hebert, (M. H. O.
for Joggins).
Withrow, R. R., Springhill.

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 Weir, A. F., Freeport (County).
 Belliveau, P. E., Meteghan (Clare Mcpy).

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 McGarry, P. A., Canso.
 Stone, O. R., Sherbrooke (St. Mary's
 Mcpy.).

HALIFAX COUNTY

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 Payzant, H. A., Dartmouth.

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 MacLellan, R. A., Rawdon Gold Mines,
 (East Hants Mcpy.).
 Reid, J. W., Windsor, (West Hants
 Mcpy.).
 Shankel, F. R., Windsor, (Hantsport
 M. H. O.).

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 McNeil, A. J., Mabou (County).
 Ratchford, H. A., Inverness.

KINGS COUNTY

MacKinnon, H., Berwick.
 Bishop, B. S., Kentville.
 Burns, A. S., Kentville (County).
 DeWitt, C. E. A., Wolfville.

LUNENBURG COUNTY

Davis, F. R., Bridgewater (County).
 Donkin, C. A., Bridgewater.
 Morrison, L. N., Mahone Bay.
 Zinck, R. C., Lunenburg.
 Zwicker, D. W. N., Chester (Chester
 Mcpy.).

PICTOU COUNTY

Blackett, A. E., New Glasgow.
 Day, F. B., Thorburn (County).
 MacKenzie, S. G., Westville.
 Stramberg, C. W., Trenton.
 Sutherland, R. H., Pictou.
 Whitman, G. W., Stellarton.

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Ford, T. R., Liverpool (Town and Co.).
 Smith, F. P., Mill Village (Mcpy.).

RICHMOND COUNTY

LeBlanc, B. A., Arichat.

SHELburne COUNTY

Brown, G. W., Clark's Harbor.
 Churchill, L. P., Shelburne (County).
 Fuller, L. O., Shelburne.
 Banks, H. H., Barrington Passage (Mcpy.).

VICTORIA COUNTY

MacMillan, C. L., Baddeck.

YARMOUTH COUNTY

Blackadar, R. L., Port Maitland. (Yar.
 Co.).
 Lebbetter, T. A., Yarmouth.
 O'Brien, W. C., Wedgeport.
 LeBlanc, J. E., West Pubnico (Argyle
 Mcpy.).

INFORMATION.

The Provincial Public Health Laboratory provides free diagnostic services for the entire Province. Free examinations are made of blood, cerebrospinal fluid, cultures, smears for gonococci, sputum, urine, faeces, pleural fluids, pus, water, milk, brain tissues for rabies, as well as throat, ear and prostatic swabs. Physicians desiring this service should address their communications to, Dr. D. J. MacKenzie, Public Health Laboratory, Pathological Institute, Morris St., Halifax.

Physicians desiring serums and vaccines should address their communications to the Department of Public Health, Halifax, N. S.

MINUTES
ASSOCIATION OF MEDICAL HEALTH OFFICERS
OF NOVA SCOTIA

The seventeenth Annual Meeting of the Provincial Association of Health Officers convened in Truro at 10 o'clock A. M., Tuesday, July 7th, 1931.

The President, Dr. W. F. McKinnon, Antigonish, occupying the chair.

Those present were:

Hon. G. H. Murphy, M.D., Halifax, N. S.	Dr. F. D. Charman, Truro, N. S.
Dr. W. F. McKinnon, Antigonish, N. S.	Dr. C. M. Bayne, Sydney, N. S.
Dr. T. I. Byrne, Halifax, N. S.	Dr. E. E. Bissett, Windsor, N. S.
Dr. Bliss, Amherst, N. S.	Dr. G. F. White, Bridgetown, N. S.
Dr. McLeod, New Waterford, N. S.	Dr. H. H. Banks, Barrington Passage, N. S.
Dr. J. W. Reid, Windsor, N. S.	Dr. A. S. Burns, Kentville, N. S.
Dr. Dan Murray, Tatamagouche, N. S.	Dr. R. Sutherland, Pictou, N. S.
Dr. J. J. Cameron, Antigonish, N. S.	Dr. T. A. Lebbetter, Yarmouth, N. S.
Dr. J. K. McLeod, Sydney, N. S.	Dr. R. A. MacLellan, Rawdon Gold Mines, N. S.
Dr. A. E. Blackett, New Glasgow, N. S.	Dr. T. R. Johnson, Great Village, N. S.
Dr. A. F. Miller, Kentville, N. S.	Dr. J. J. MacRitchie, Halifax, N. S.
Dr. W. N. Cochrane, Mahone Bay, N. S.	Dr. S. L. Walker, Halifax, N. S.
Dr. C. W. Beckwith, Kentville, N. S.	Dr. Joseph Hayes, Halifax, N. S.
Dr. F. O'Neil, Sydney, N. S.	Dr. P. S. Campbell, Port Hood, N. S.
	Dr. H. V. Kent, Truro, N. S.

Minutes of the last meeting were read and adopted.

The following Committee reports were read and received:

Maternal Mortality—Dr. E. E. Bissett.

Advisory Committee to the Department of Public Health—Dr. J. K. McLeod.

Rural Sanitation—Dr. R. L. Blackadar.

All reports are attached herewith.

There was no correspondence.

The Hon. Dr. Murphy then addressed the meeting, giving a comprehensive outline of Health; referring particularly to the Tuberculosis and Cancer problems. The Minister's splendid address brought forth much favorable comment, the following participating: Dr. J. J. Cameron, Dr. E. E. Bissett, Dr. A. F. Miller, Dr. J. K. McLeod, Dr. G. F. White, Dr. J. W. Reid, Dr. C. W. Beckwith, Dr. G. C. W. Bliss.

Dr. Miller complimented the Hon. Dr. Murphy on the broad minded way in which he dealt with the tuberculosis problem, stating there was no argument against his views and that we should all stand back of the present policy.

The following resolution was moved by Dr. J. J. Cameron, seconded by Dr. E. E. Bissett and carried unanimously: "Resolved that this Association go on record as approving and supporting the policy projected by the Hon. Dr. Murphy."

The Nominating Committee was named by the chair.

Dr. A. E. Blackett.

Dr. A. S. Burns.

Dr. J. K. McLeod.

Dr. J. K. McLeod read a paper on "Venereal disease control from a public health and social aspect", which was well received by the meeting and passed on to the Secretary for publication in the BULLETIN.

Afternoon Session.

The Nominating Committee reported as follows:

<i>President</i>	Dr. T. R. Johnson, Great Village.
<i>1st Vice President</i>	Dr. Wardrope, Springhill.
<i>2nd Vice President</i>	Dr. A. E. Blackett, New Glasgow.
<i>Secretary</i>	Dr. T. I. Byrne, Halifax.

Council:

Dr. F. O'Neil, Sydney.
 Dr. R. L. Blackadar, Port Maitland.
 Dr. F. D. Charman, Truro.

Standing Committees to remain as constituted.

In connection with the Presidential Address, Dr. W. F. MacKinnon read a paper giving valuable suggestions with reference to the tuberculosis problem.

A paper entitled the "Conscientious Objector" was given by Dr. F. D. Charman of Truro.

In his absence from the meeting Dr. Blackadar's paper "The Medical Health Officer" was read by the Secretary. Discussions followed by Doctors W. F. McKinnon, J. K. McLeod, R. A. MacLellan, E. E. Bissett, J. J. Cameron, F. O'Neil and A. S. Burns.

Dr. Bissett moved, seconded by Dr. Johnson, that in the opinion of this meeting an M. H. O. is entitled to a consultation fee in all cases except indigent ones. An amendment was moved by Dr. O'Neil, seconded by Dr. Burns, that the matter be referred to the Advisory Committee. The motion was withdrawn and the amendment carried as a motion.

It was moved by Dr. Burns, seconded by Dr. O'Neil, that the recommendation of Dr. Charman re vaccination be referred to the Advisory Committee.

Dr. R. A. MacLellan stated when an M. H. O. is appointed by a Municipality to protect its health, that Municipality should pay for all such work, done in the interests of the Public Health. This has obtained in East Hants Municipality for fifteen years.

Dr. Dan Murray, President of the Nova Scotia Medical Society, was asked to read that portion of his Presidential Address referring to Public Health. So well received was this Address that a motion to have it published in the BULLETIN was unanimously passed.

On motion of Drs. J. K. McLeod and E. E. Bissett, a vote of thanks was tendered to the Chairman.

Evening Session.

This took the form of a Public Meeting. Addresses were given by the Hon. Dr. Murphy, Minister of Health, and Dr. W. B. Hendry, Professor of Obstetrics, Toronto University. The former speaking on the Public Health programme and the latter on Maternal Mortality.

Medical Visitors to New York

The New York Academy of Medicine desires to extend welcome to all members of the medical profession who may visit New York. It offers its facilities in the hope that they may be helpful in making the visitor's stay both pleasant and profitable.

Bureau of Clinical Information. The Committee on Medical Education maintains at the Academy a *Bureau of Clinical Information* where detailed information is available regarding opportunities for post-graduate medical study in Greater New York, and also in other cities of the United States, Canada and Europe. The Executive Secretary in charge of the Bureau is prepared to answer inquiries concerning special internships or residencies, post-graduate courses in medical schools and teaching hospitals, and opportunities to observe clinical practice in the teaching hospitals of the City. Information in regard to post-graduate medical work in England and on the Continent is being added to and kept up to date by publications and reports received from abroad through European correspondents, international agencies, fellowships and societies, and from interviews with American medical men who have recently returned from a period of foreign study.

The Committee has published a *Synopsis of Approved Opportunities Offered in New York City for Post-Graduate Medical Study in the Clinical Specialties*. Copies of the synopsis may be obtained on application to the Bureau.

The operations to be performed each day in the clinics of fifty-eight hospitals are published in a *Daily Surgical Bulletin* issued the previous evening. A *Monthly Bulletin of Non-Operative Clinics and Conferences* held in forty hospitals also is published. Copies of these bulletins may be obtained at the Bureau, and will be mailed to visiting doctors on request.

Physicians are invited to make the Bureau their headquarters while in the city.

A booklet, describing opportunities for post-graduate medical study in hospitals of Greater New York, has been prepared particularly for the use of visitors whose stay in the city is limited.

The New York Academy of Medicine

2 East 103 Street

NEW YORK CITY

DOES THIS INTEREST YOU?

Appointment of Medical Graduates of Canadian Universities to Commissions in the Royal Army Medical Corps.

1. There has been offered by the British War Office two Regular Commissions in the Royal Army Medical Corps to candidates from the Dominion of Canada.

2. Each candidate will require to be examined by a medical board as to his physical fitness.

3. It is essential that no candidate should be accepted who does not hold medical qualifications which are registrable in the United Kingdom, and it is desirable that a house appointment should have been held at one of the recognized civil hospitals in the Dominion. In brief, the type of candidate required is one who has good professional attainments, and is likely to make a good officer. •

4. First Class passage, to the United Kingdom, will be provided for accepted candidates.

5. Candidates when selected, should be asked to give an honourable undertaking in writing to remain in the Army for at least five years from date of appointment, but this undertaking will not preclude the Army Council from relieving an officer from his obligation should the circumstances justify his release.

6. Officers will not be eligible to draw pay until they join in the United Kingdom, when, provided they join within two months of embarkation, they will be able to draw from the Army Agents full pay from the date of embarkation. The approximate total, per annum, is £487. 0.0. for an unmarried officer. They will, at the same time, be able to draw from the Army Agents, outfit allowance (£50).

7. Prospective candidates should apply to District Medical Officer, M.D., No. 6, Military Hospital, Halifax, N. S.

R. M. GORSSLINE,

Lieut. Col. R.C.A.M.C., D.M.O., M.D. No. 6.

Halifax, N. S.,

August 3rd, 1931.

Appointment of Medical Graduates of Canadian Universities to Commissions in the Royal Air Force Medical Service.

1. There has been offered by the Air Ministry two to five Commissions in the Medical Branch of the Royal Air Force, to candidates from the Dominion, in the current financial year. To meet the accommodation available at the station where newly joined officers undergo their training, it will be convenient to accept two to arrive for a Course beginning on October 1st 1931, and two on January 18th, 1932.

2. It is essential that all candidates must hold medical qualifications which allow them to register under the Medical Act in the United Kingdom. In this connection it is pointed out that those registered in Alberta, Manitoba and Nova Scotia are eligible to be so registered. It is preferred, largely in their own interests, that newly joined officers should be unmarried.

3. In the case of a candidate who has held a post-graduate civil appointment, rendering him eligible for antedate of Commission as detailed in paragraph 6 of Air Ministry Pamphlet 25, it will save subsequent correspondence if a certificate from the hospital authorities concerned is attached to Air Ministry Form 1007. The certificate should state:—

- (a) Title of the appointment.
- (b) The dates of its tenure.
- (c) The number of beds in the hospital, or other information to indicate the value of the appointment.

4. First Class passages to the United Kingdom will be provided for accepted candidates, and return passage to the Dominion concerned on completion of a full term of service. Commission and the issue of R. A. F. pay and allowances will date from day of embarkation. The approximate total pay for an unmarried officer, per annum, is £530.0.0.

5. Candidates will have to undergo a physical examination and must be medically fit.

6. Further information is available from District Medical Officer, M.D., No. 6, Military Hospital, Cogswell St., Halifax, N. S.

R. M. GORSSLINE,
Lieut. Col., R.C.A.M.C., D.M.O., M.D., No. 6.

Halifax, N. S.,
August 4th, 1931.

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OBITUARY

**JAMES NEWMAN FULLER, M.D., Bellevue Hospital Medical College,
1868, Grand Pre, N. S.**

ON July 23rd, 1931, after only two days illness, Dr. J. N. Fuller of Grand Pre died at the advanced age of 85 years. At the age of 16 years he entered Horton Academy and matriculated to Acadia College two years later. He at once was apprenticed or articed to Dr. Oulton in Grand Pre to study medicine. Later he was associated with Dr. Shaw of Kentville. Readers of the BULLETIN will recall these pioneer practitioners of Kings County. In September, 1866, he entered Bellevue and received his degree in February, 1868. His only medical practice, apparently, was two years, or less, in Summerside, P. E. I., for he returned to his home in Horton, married and took up farming in 1870. He is survived by his wife, one son and three daughters all resident in Kings County. He, himself was the only surviving member of a family of four brothers and three sisters. He was married a second time in 1911 and for five years thereafter resided in Vancouver, since then in Kings County.

The death occurred August 6th, 1931 at the Halifax Infirmary of Jane Eleanor, wife of Prof. D. S. MacIntosh, of the Biology Department of Dalhousie. She was a lady greatly admired and respected by those who were fortunate enough to know her, and her circle of friends was very large. Dr. M. A. Curry, formerly of this city, now residing in Saint John, is a brother of deceased and spent several days in Halifax at the time of her passing. To him and Professor MacIntosh the BULLETIN extends sympathy.

The BULLETIN notes the passing in Winnipeg on August 1st of Dr. S. W. Prowse, a native of Charlottetown, P. E. I. aged 62 years. Dr. Prowse was a graduate of the University of Edinburgh in 1896, but very soon went to Winnipeg and became prominent in the medical and civic life of that city. He has always been identified with the Winnipeg and Manitoba Medical Societies and the Canadian Medical Association.

The BULLETIN of the Medical Society of the County of Kings, N. Y. devotes its July issue chiefly to the passing of John Osborn Polak, B.S., M.S., M.D., F.A.C.S. of Brooklyn, N. Y. at the comparatively early age of 61 years. To readers of the BULLETIN his name is familiar for his extensive medical writings and books, particularly in Obstetrics and Gynaecology. Dr. Polak was a man who accomplished an enormous amount of work between 6 A. M. and 12 midnight for ten months in the year. He passed away at the height of his career, and one cannot feel but that it was a light burned out too soon.

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CANADA

Personal Interest Notes

THERE are many matters of social and personal interest to the members of the Medical Society of Nova Scotia that might be published in the BULLETIN,—engagements, holidays, etc. But did it ever occur to you that the Secretary cannot be conversant with all such matters unless somebody advises him. Nor is it altogether fair to expect said Secretary to see all such items that appear in the daily or weekly press. Then why should he make a note in one case and not in another? Believe it or not, he has even been faulted on this account.

Anticipating future announcements the BULLETIN reprints this from a Halifax City Daily early in August:—

MacQuarrie-McDonald—Dr. and Mrs. H. K. McDonald, Halifax, announce the engagement of their youngest daughter, Bessie to John T. MacQuarrie, of Halifax, the marriage to take place on Saturday, August 29, at All Saints Cathedral.

Dr. J. K. McLeod of Sydney accompanied by Mrs. McLeod and their two sons, spent their August vacation in Nova Scotia's Switzerland, making their headquarters at Ingonish.

Dr. S. H. Peppard, Dalhousie 1923, of Clinton, New York, accompanied by Mrs. Peppard, recently visited in Nova Scotia at Mrs. Peppard's former home in Annapolis Royal. Dr. Peppard's former home was in Colchester County, Nova Scotia.

Dr. P. R. Little, Dalhousie 1926, of Grand Falls, Nfld., accompanied by Mrs. Little, spent a short vacation in Cumberland and Colchester Counties in July last.

Dr. George Cox of New Glasgow, Florida, and other places, with his family spent a month recently at Ingonish, C. B. He expresses strong hopes that the Minister of Highways will soon add to the tourist facilities, of this province a good highway through this Switzerland of Nova Scotia.

The young thing was packing her bathing suit in her bag preparatory to going to the beach. Her mother looked at it blushing. "Do you think you ought to wear that when you go in bathing?" she protested. "Why, mother of course. All the girls wear something."

Dr. A. S. Burns of Kentville, spent a considerable holiday during August in Halifax at the Victoria General Hospital. The compulsory holiday was due to an injury sustained when he was jammed between two automobiles. We trust his recovery has been complete.

The engagement is announced of Dr. W. A. Hewatt, Dalhousie 1928, of Lunenburg, to Miss Florence E. Baker, daughter of Mr. and Mrs. G. Prescott Baker of Yarmouth.

Born. At Grace Maternity Hospital, August 5th, 1931 to Dr. and Mrs. J. S. Munro of North Sydney, a son.

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