

*Dr. Henry Greggs Farish

J. C. WICKWIRE, M.D.

Liverpool, N. S.

HENRY GREGGS FARISH, father of the first doctor in the Farish family, was born in Whiteheaven, Cumberland County, England, in the year 1748. He came to America in 1775, settling in Brooklyn, New York, where he was Commissary-General. He married an American girl and it was there in Brooklyn, in 1781, that the first doctor of this illustrious family saw the light of day.

The Farish family moved to Shelburne, Nova Scotia, in 1784, settling in what was then called the Land of Canaan. Unable through illness and trouble to remain there, they returned to America and made their home in Norfolk, Virginia. Here their son, Henry Greggs, Jr. studied medicine, obtaining instruction from an old friend of the family, Dr. Perry, who lived with them.

Young Henry, after this period of apprenticeship, set sail for England, and through an influential friend, secured appointments as Surgeon Assistant on *H.M.S. Asia* and *H.M.S. Cleopatra* during the Anglo-French war. When peace was declared in 1802, young Farish was out of a job; but after many discouraging months, he received an invitation from Dr. Joseph Norman Bond of Yarmouth, Nova Scotia, to enter the medical profession as his partner. This came through the friendship of Dr. Bond and the old preceptor, Dr. Perry.

So, in 1803, the first Dr. Farish established himself in Yarmouth where he practised for fifty-four years. The records say that he was also Postmaster, Registrar of Deeds and Custom's officer. He married Dr. Bond's daughter and from the union of these two great families three sons were born to the medical profession, James, Joseph and Henry. It is interesting to note that their father instructed them in medicine. In the early hours, by candle-light, he taught them from his own knowledge and the few medical books then available. All three afterwards were graduates of the University of Pennsylvania and later of the London Hospital. Two of the boys returned to Yarmouth to practise with their father and Henry Greggs, the 3rd, settled in Liverpool.

Dr. Henry Greggs Farish began his practice in Liverpool in the year 1850, half a century after the death of the historical character, Simeon Perkins. From his own notes on the town, the population was then about 1800. He and one other physician, Dr. Forbes, administered to approximately 8000 souls, which, I presume, was roughly the population of the county at that time. In the town and nearby villages of Milton and Brooklyn and along the shores of Port Mouton and Port Medway, the roads were quite passable for horse and gig, but much of the remaining territory was travelled on horseback, with medicines and surgical instruments slung in a dust-covered saddle-bag.

He was a well built man, about six feet tall, erect and heavier than his son, Dr. George, of Yarmouth, whom we all know and admire. He wore the

*Presidential address delivered at annual meeting, White Point Beach, N. S., July 5, 1944.

hell on earth; but, under its calming influence in later years, it became a bed of roses." The use of chloroform in obstetrics is first mentioned in his records in the year 1863. His professors taught that forceps were only to be used when the expectant mother was in or approaching extremis; but Dr. Farish discovered through his own experience that these "Iron hands," used wisely and well, saved many a mother's life.

In 1857 he married Francis J. Cutler, daughter of the Hon. R. M. Cutler of Guysboro. They had four children, three boys and one girl. Two of the sons are very prominent doctors, having done extensive post-graduate work in Europe and the United States. One is our own Dr. George, who is a gold medallist in Surgery from Jefferson College, Philadelphia. He practised in Liverpool, with his father for a short time and then moved to Yarmouth where he carried on his profession for fifty-three years, thus making an unbroken line of doctors in the Farish family, practising in Yarmouth, for one hundred and forty years. He retired from active work two years ago. Dr. James, the youngest son, now seventy-five, is also retired in Vancouver after fifty years of very distinguished work in that city. He in turn has two sons who have followed the family tradition both in names and profession. They are Dr. Henry Greggs Farish, graduate of the University of Pennsylvania and at present Surgeon Lieutenant at the Naval Hospital, Halifax, and here this evening, and Dr. James R. Farish, graduate of McGill and a Captain in the R.C.A.M.C. stationed at Vernon, B. C.

The third son of the Liverpool Farish is Frank who has been in business in Seattle for a great many years; and the daughter, Mrs. C. V. MacIntosh lived in the old home in Liverpool until fifteen years ago, when she moved to Montreal. She is at present visiting her brother in Yarmouth.

During the years that Dr. Farish lived in our town, he was always in Trinity church on Sunday mornings, unless an emergency called him elsewhere. He was a very religious man and nurtured the same faith in his children. The boys sang in the choir and his daughter played the pipe organ. There is a beautiful window in the old church in memory of him, who was one of their finest and most beloved members. He was particularly interested in the care of the cemeteries and he wrote, "The cemetery is God's acre, the resting place of some of the best citizens of Liverpool, men and women who were noble people, who strove in their own sphere to make this town respected and honored, and in their private lives were irreproachable. They have gone before but their works do follow them."

There is a cute story told of Dr. Farish and the cemeteries. A stranger, making a tour of Liverpool, noticed on the gate of the old burying-ground, this sign "The keys to this cemetery may be found at the office of Dr. Farish." On further inspection of the town he discovered a similar inscription on the gate of the Trinity Church cemetery. This proved too much for the stranger, who, encountering a townsman, told him of the circumstances and said, "This is the most honest doctor of whom I have ever heard." The doctor, on hearing the story and sensing its humorous significance, had the signs removed.

There are many stories told about the doctor. This is one which may give you an insight into his knowledge of psychiatry. I shall quote it as it was told me by one of the family. "A man, after drinking from a brook (not a bottle) became obsessed with the idea that he had swallowed a frog and after several visits nothing could convince him that there was nothing there. It

was having a serious effect on his mind and physical condition. The doctor then conceived the following plan. He procured a small frog which he put in his pocket. On arrival he gave the patient an emetic and while the result was taking place, he slipped the hopping frog into the basin. Such optical evidence procured the desired cure immediately." And this one, "A woman who had an adopted son, for whom her affection was not very deep, had a severe case of hysteria. The boy was a clip and always looking for revenge, and when the doctor's treatment of wetting a towel and slapping her face with it was seen by the boy, he cried, 'Please doctor, won't you let me do that?'"

In 1907 he wrote his *Reminiscences of the Town of Liverpool*, which covers in intimate detail, its geography, with reference to every dwelling and its occupants. This records a period from approximately 1835-1865. He also drew a map of the town indicating the relative locality of each building. These very valuable documents are the property of the Queens County Historical Society, and may be seen there.

Dr. Henry Greggs Farish died June 14, 1914, twelve years after his retirement. He is buried in the little graveyard surrounding Trinity Church. The name of Farish is one to be revered in Canada and especially in Queens and Yarmouth counties of Nova Scotia and in Vancouver. Every doctor in this distinguished family, beginning with the first Dr. Henry Greggs Farish, who settled in Yarmouth one hundred and forty years ago, has contributed much to his profession and to the civic life of the community in which he lived. It is well that we, from time to time, should study the lives and personalities of such as these.

Thoughts—Strayed or Otherwise, at Our Annual Meeting

GEORGE H. MURPHY, M.D.

THE EDITOR has asked me to write something on our Meeting at Liverpool. He sagely suggests that as I was getting to be something of an old timer; and, as a pretty constant attendant at our annual meetings through the years, I might have grabbed an inspiration and a few real thoughts during the happenings at White Point Beach. If so, would I please put them down on paper for the next BULLETIN; not to bother much about form or substance; as the weather was very hot, chances were that no one would read them anyway, but their "filling in" properties would find "a local habitation and a name" in the JOURNAL of our medical society. "To be blunt," he said, "I must fill space, and you are the man for the job." With my qualifications for the task so well and earnestly defined, and being under obligations for favors received, there could be only one answer, even if I should break my back in the effort, or worse than that, make somebody mad.

First Observations and Reflections, Natural Beauty of Beach, Etc.

A chorus of approval is still coming from all who were present. The trinity, which make or break the best laid plans for our annual function, were working in perfect harmony—the weather, the place and the program. To these assets, I should like to add the President, my house surgeon of another decade, at the Victoria General; the able, popular and beloved John Wickwire. His personality, and that of his charming wife, were easily sensed in the various techniques of the social and intellectual, and of course the musical, elements of the meeting.

With the weather on its best behavior, one could not conceive of a better place of meeting than White Point Beach. Our small party got there when Wednesday's activities were getting into their stride. The cabins dotting the hillsides were bursting with guests, who were beginning to filter out on the lawns, throwing out their chests and gathering in doubly distilled ozone, bearing the fragrance of the zepher-laden pines and spruces, mixed with the tempering tang of the sea. And all free. The long, purloining fingers of greedy finance could find no increment here. Income tax forebodings dissolved in the gentle breezes, and were borne out to sea for the duration—of the convention. Ottawa's concern about inflation, while putting measured pressure on the stomach, had not yet touched the ancient privilege of inflating the lungs.

It was good, on that Wednesday morning, to look out on the wide expanse of sandy beach bordering a mile of coast line, and watch the rhythmic swell of the sea sending its long, downy-fringed rollers over the white shore. A strong wind, we were told, rolls huge breakers up, that dash on the grassy slopes and even sprinkle their salty spray in the face of a mild-mannered little fresh water lake, which lies cuddled between the hills and bordered about in summer's deepest green. A substantial, though not very wide bar, separates the lake from its mighty and turbulent cousin; but, like the little wagon wheel of our school book days, it maintains its identity and character, and keeps well to the front in the activities of this pleasant summer resort. It was a popular

rendézyous on Wednesday for all who preferred the easy loll in the soft warm lap of the lake to the heroic joy of defying the powers of foaming breakers and cold water. Some of the bathers, after an unequal contest on the sea beach, could be seen crossing the bar to be cuddled back to relaxed comfort in the warm embrace of the lake. Philosophy needn't bother his head to tell us how necessary are both conditions for a strong and intelligent civilization.

Reminiscences—Geology—Personalities

I roamed about the grounds. I saw J. G. standing at ease on a grassy knoll, his cane hooked over his flexed forearm; his pipe, companion of his joys and sorrows, had gone into action for the day, and the smooth, curling rhythm of tobacco smoke indicated that John was in a thinking and observing mood. I approached, and mumbled something about the weather. He agreed; and we were soon on the usual topics of the convention. He looked a bit tired. A very strenuous professional life and those tricky little "effacing fingers" old Father Time trains upon us, even while we sleep, were leaving their traces. I recalled the circumstances of our first meeting, now so far back, that without written warrant I must refrain from being more explicit. It was a meeting of the Nova Scotia Medical Society, and some of us were beginning to feel our surgical spurs, and were anxious to pass on for our confrere's benefit, and quite incidentally of course for our own satisfaction, the big things we were doing. J. G. floored every hope of precedence the rest of us might entertain by a brilliant report of three operations he had recently performed and presented to the meeting the living proof of his thesis in the person of the three patients. The operations, of a very major character, were performed for the first time in Nova Scotia, and at a time, too, when hospital facilities and specialized nursing were only getting on their way.

Many times has old Fundy's tide filled its big crater, and shoved its elbows up its river mouths, since that meeting of our society. Two world-shaking wars have intervened; the old order in organized medicine has changed in Canada, giving place to a newer system, shaped into a durable and progressive structure, for Province and Dominion, in the skilful hands and discerning mind of T. C. Routley. Individuals beget our country's great institutions; and having endowed them with the labor and spirit of a life-time, send them on to ever progressive and perpetual existence, while they, themselves, turn to face physical decay, and the end of the road.

But no morbid thoughts had any place in the group of doctors that were fast gathering about the grassy knoll where Dr. J. G., having reacted to the magic of White Point, found his vigor and speech in an old time hobby, and was dilating on the geological characters of the environment. His audience kept growing. H. K. came up from one of the more exclusive cabins to join the circle, having successfully camouflaged any tell-tale embarrassment of breathing the steep grade and his long strides might entail. His appearance bespoke a good night's rest, and a breakfast to match. I thought the years were patting him softly on the back. Or perhaps, he was just ignoring them, defying the tyranny of the calendar, and decoying old Anno Domini into setting down his marks backwards. He didn't seem interested in geology, and kept glancing furtively at his wrist watch. Surgical problems have no time or season, and very likely his mind was wrought. He left, saying he had an important phone call, and crossing the quadrangle, was seen later in the midst

of a group of ladies who were enjoying a temporary emancipation from telephones, and such like, and had evidently convinced H. K. to do likewise.

J. R. C., a noble survivor of the Class of '02, now moved into the circle, to pick up any geological data he might have missed at previous demonstrations. Later, he was heard to remark that years of general practice taught him plenty about stones; but boulders and strata and the glacial period were Greek to him. Bigger and better stones gave him less trouble than those pebbly, pesky things Frank Mack coaxed, or dragged down, from the upper reaches of the ureters, to the outer world. To know how water can burst from the seemingly solid rock was interesting, and J. G. knew his stuff; but, for himself, his interests lay in keeping the channels open, so that the vitally important waters collected from the great renal springs might, like Old Man River, just keep rolling along.

Jimmy Reid came across the lawn, where he and Fergie were having a chat, with a twinkle in his eye and a satisfied expression no drooping hat brim could obscure; such as we are wont to observe, when he has stymied John MacIntosh in a game of wits. John's close acquaintances know how rare is such an incident. He was followed by Fergie himself, who bore the bloom of the morning drive from Halifax on his face. The last inch of his third cigar was keeping up the illusion of a smoke, and rolled conveniently between his lips to make room for the torrent of his words. For Fergie was in good humor, having caught the magic of the environment and the friendly spirit of bonhomie and comradeship, which gatherings of the clansmen of medicine are wont to induce. Dr. F. R. is getting to be one of the seniors in general practice in Halifax. A powerful physique, abounding personality, good practical judgment and a prodigious capacity for hard work have made him one of the busiest of men. He has had his full share of ups and downs, but he has taken them in his stride, as he would his fortunes in a horse race, wrestling match, or even an election, in all which activities he retains an intelligent interest. He is good company, therefore, and is seldom absent from our meetings.

And so they meandered up, from the east and west and middle of our province; some lingering for J. G.'s geological demonstrations, others forming little clinical clumps where weird, strange experiences in practice were recounted with color and detail, and even a fair measure of reality. Here is the report of a native procedure for the cure of 3rd degree prolapse of the uterus, told by one of our doctors, who practised many years in the far East: The displaced organ is anointed with a highly inflammable substance; then set on fire, and the burning uterus quickly restored to its place in the pelvis. A sort of application of the old adage, of striking when the iron is hot. I commend this fiery case report to Dr. Atlee; not to urge the adoption of the method, but that myself, or someone else, might catch him in the mood and hear his comments.

Dean Grant intervened at this juncture to remind us that Dr. McPhedran and Dr. Routley were going on in a few minutes, and that we better betake ourselves to the assembly room.

Doctors' Wives—Annual Dinner—Lobsters, Etc.

The lawns and park chairs were then left to the exclusive enjoyment of the doctors' wives, a good sprinkling of delighted children, and other lady friends. "The telephone"—"the night call"—"the doctors' rest"—floated at times beyond their conversation circles. One might guess that our lady

friends were discussing that traditional killer of the doctor's sleep—the one that never calls him except around 1, 2, or 3 a.m. I overheard, as I passed an animated group:—"At last, I took down the phone, and was telling her that my poor, tired out husband was in the operating room, doing an emergency, when his wretchedly inopportune snore tore into the night. The fresh thing snapped back: "When did your husband start doing emergencies in your bedroom?" I knew, then, that our wives were considering the various techniques by which they sought to give their ravelled and weary lords a salvaged portion of that "balm of hurt minds," the glorious, old William talked so much about.

I think I should pause in those rambling observations for a matter of honor and recognition; often spoken before, but for all that, always overdue. And so my old bonnet is off, and in behalf of the men of medicine, I make deep obeisance to the doctors' wives, offering a sprig of laurel for honor to each and all alike; to the elders for having borne the burden and the heats; to the younger, for those they will be called to bear. For the doctor's wife lives in the service he renders, and breathes into it her full share of what Oliver Wendell Holmes called the soul of Medicine. I should call hers an essential part except for the few bachelors in our calling, who, giving Hymen a measely deal, have still managed to scrape through to a moderate success. No good clinician, however, rests his diagnosis on the exceptional data.

The programme of this ninety-first annual meeting of our N. S. Branch, both in personnel, and arrangement, was, at least, a good high average. It is clear that our profession is passing through a rapid evolution in the treatment of infections. After taking a prolonged comfort from the legacy of past masters, we are now more than ever on watch for the proven things of well organized research, and setting them on the heels of the causative agents of disease. So it may be, that the realization of Pasteur's famous prophecy is now in the making. Innovations and improvements in surgical and obstetrical techniques had, as usual, their place on the agenda. Full reports will appear elsewhere. It is not the purpose of this writer to discuss the program further. It is quite in order, however, to observe, in it all, the great improvements in the methods and technique of presenting subject matter, as compared with our meetings a couple of decades back. The days of the long, academic paper are gone; and he would be a real advocate of corporal punishment that would wish their return. The X-ray, the screen, and all our greatly advanced facilities for presenting data have brought about the change. The teaching lecture, or clinic, is the thing; with due thought for the advice given Polonius: "more matter and less art."

The excellent cuisine aside, the feature of Wednesday's luncheon was the memoirs of our good friend and veteran practitioner, Dr. J. W. Smith. And the doctor was there to tell about it himself, well in the flesh, and vigorous as ever. His story was that of pioneering practice in Liverpool and surrounding country in early years; when roads were mere trails, plenty bears in the woods, and His Majesty's Yankees in the clearings; doctors few and far between, no hospitals, no specialists; just the doctor, taking his problems in his stride, and doing his best. An interesting story, modestly told. The life of the pioneer doctor was one of self-sacrifice. Perhaps there were some compensations; the spirit of our ancient calling moved upon the waters of his mission, and left him with an abiding faith in the essential good of all things, and a comforting sense of happiness that is partly lost in the hurly-burly of our times.

There were other veterans we should have liked to see at the meeting; Dr. John J. Cameron, Antigonish; Dr. Farish, Yarmouth; Dr. Angus Morton, Halifax—to mention but a few. Ill health was reported the cause. I think all three were present at our last meeting in Liverpool, some twenty-six years ago; and that was the society's first meeting in Liverpool.

The annual dinner has long been the principal social function of our convention. Not one feather of its traditional standing did it moult on this occasion. In the big dining hall of the lodge, our two hundred guests sat to dinner Wednesday night. The night was warm, but the big windows of the lodge were opened wide, the cooling sea breezes fanned the guests, and the soft, rhythmic lap of the waves on the beach was as music to the ear. A full moon was flooding the beach and environment with mellow brightness; and as the evening advanced, came up from the sea to look through the lodge windows, and weave her spell about the guests.

It is useless to philosophize as to whether a banquet should be essentially a feast of reason, or mainly a well laden board with something for every palate. There is little help in the literature for describing this dinner. Sancho Panzo's skimmings of the pot, Charles Lamb's roast pig, Goldsmith's venison, Dr. Johnson's roast beef, all carry a sort of savory and literary aura, which sets the imagination on the wing. We shall have to find some technique of our own. For this was a lobster dinner. The huge crustaceans, arrayed in closed armour and boiled until their color matched the moon's, reached the tables, one to each plate, in a profusion of greens. Dead or alive, a lobster is ugly and taxes the resources of the culinary art. He is crafty enough to protect with his shell the priceless brain food of his innards; this supreme "nourisher in life's feast," which creates college presidents for Ontario, and elsewhere; and sharpens the penetrating mentality of the maritimer that he exhausts himself in a kind of ecstatic appraisal of his numerous wrongs, and loses the power of action.

There being no regulation in the Selective Services covering the splitting or cracking of lobster shells for a banquet, the guests, with true patriotism, took on the work themselves. And so there were splintering sounds from all tables, and quite audible discussions on techniques. "How do you get to the meat of this bird?" came from the next table. Then, a quiet feminine voice: "I don't know yet, dear, but there must be a secret opening somewhere." "A sort of sliding panel, I suppose, such as we knew in prohibition days," was his comment. A few, who were not hungry and with an urge for anatomical research, studied their specimens. A urologist manoeuvred his lobster into a sort of lithotomy position on his plate, then was silent and nonplussed. A distinguished chest specialist was reported percussing the probable thoracic region. There seemed to be points of interest for all. Our Ontario guests, accustomed to lobsters well peeled, or out of a can, had some trouble in breaking and entering. They were aided by the Minister of Health, who also gave them some pointed asides on the health properties of the lobster. Dr. Routley had no difficulty. He knew his lobsters and his Maritimes; had been here many times before, and the light of his torch had dissolved thicker and tougher shells than those on his plate.

The "feast of reason and flow of souls" found full expression in the President's interesting address, and that of the evening's guest speaker, Nova Scotia's distinguished writer and novelist, Mr. T. H. Raddall. Dr. Murray

toasted the ladies fittingly, and Mrs. Marcus responded in kind. The skirl of the bagpipes and dances by a group of kilted young maidens were greatly enjoyed. And then the musical event of the evening—a delightful vocal quartette, in which the President, Dr. D. K. Murray, and their wives participated.

Some business matters were then wound up, and the ninety-first banquet guests spread into the moonlight, the beaches and their cabins.

I think that's all.

G. H. M.

Early Medical Practice in Nova Scotia^{*}

THOMAS H. RANDALL

Liverpool, N. S.

THE first doctors in Nova Scotia were of course the medicine men of the Indians, who clothed a sound knowledge of roots and herbs in a great deal of mumbo-jumbo which impressed the savages very much. Confronted by a difficult or unusual case, the medicine man usually consulted his familiar devil by yelling into a hole in the ground. (Nowadays he consults a specialist and I'm not altogether sure it's an improvement!)

The first recorded white settlers, the Acadians, had no physicians amongst them. Undoubtedly they brought with them a knowledge of common home simples in use amongst the French peasantry, and on these they depended and flourished.

It is not until the English settlement of Halifax that we find any reference to qualified practitioners. In the advertisements in the London *Gazette* we find 200 acres in Nova Scotia offered to "reputed surgeons, whether they have been in His Majesty's service or not;" and in the list of settlers there are the names of 15 surgeons and 10 surgeons' mates. Undoubtedly most of these men had served His Majesty.

Their qualifications must have been dubious. Smollett has left us some very amusing descriptions of the examinations at Surgeons' Hall, whence the Navy drew its medical officers in the 18th century. There were earnest students in the great London hospitals and at some of the universities, notably Leyden and Edinburgh, but generally speaking medicine was simply a trade like any other.

A young man began by grinding pills for a practising physician and after seven years' apprenticeship he was considered qualified and went into practice for himself. Smollett describes his own ship's surgeon in 1740 as a drunken Welshman who came aboard with a lump of Cheshire cheese and three bunches of onions, which he proceeded to consume while a seaman died for lack of attention in the sick bay. He ended his repast by drinking off a coconut-shell full of brandy, remarking that brandy was the "best menstruum for cheese and onions;" and on being informed that the seaman had died, he declared cheerfully, "Well, we all owe Heaven a death. Go your ways, you ragamuffins, and take an example and a warning, and repent of your misdeeds!"

Undoubtedly there were exceptions, but there is plenty of evidence that His Majesty's surgeons were generally of this type, and it is no wonder that during the first year of the Halifax settlement nearly one thousand people died. In those days, and in such hands, death stalked every ship and garrison in the British domains.

After the conquest of Louisburg in 1758 there was a rush of British settlers into Nova Scotia, most of them fishermen and farmers from New England. These, too, were dependent on home simples for their ills. There were no doctors amongst them. The handful of preachers and schoolmasters often professed some knowledge of medicine as a side-line and these were the only

^{*}An address delivered at the annual meeting of The Medical Society of Nova Scotia, White Point Beach, N. S., July 5, 1944.

settled practitioners. There were, however, a number of quacks who wandered up and down the coast aboard the packet schooners, concealing a vast ignorance behind a profound vocabulary and the assumption of great knowledge.

They made a very sketchy living, for the settlements were poor, and a "doctor" was called in only when every local superstition and herbal remedy had been exhausted. We learn a good deal about these men and their practices in the diary of Simeon Perkins, who was a merchant and chief magistrate of Liverpool, N. S., from about 1766 to 1812. Here are some typical entries in Perkins' diary:

"Doctor Webster examined my leg and foot, says it is debilitated and needs circulation of the blood. Advises me to bathe it in strong pickle twice a day. After washing with pickle I bathed my leg in warm rum.

"My foot seems to recover a little by the use of Opopdeldoc. Washed my leg with soap suds. This evening used some hartshorn and sweet oil, and got some black mustard and horse radish steeped in cider which I take internally.

"I am using the British oil. This morning I washed it off with sweet oil and then rum. In the evening I got a blister plaster from Doctor Webster and my wife put it on my ankle.

"I change the plaster on my blister, after which Doctor Webster comes and orders me to wash the blister with sugar of lead.

"I wrenched my ankle. Bathed it with camphor and vinegar and applied evergreen.

"For a child sick with fever and believed to have worms. A number of live angle worms were laid on the child's belly. Doctor Woodbury, who was present, approved.

"A small boil on my right hand. I plaster it with egg salve.

"Hand no better. I poultice it with alum curd. No effect.

"Hand much swelled. Wash it with vinegar and wormwood.

"Poultice my hand with flax seed and Indian meal.

(Two months later) "Doctor Falt advised me to put my lame hand into the paunch of a cow or sheep soon after it is slaughtered. I do this, and again at evening. Doctor Falt took some of the contents out and warmed them. I put my hand in again and he gave me a vial of camphorated liquor.

"For my hand the white of an egg beat up in water. This was used with advantage for my daughter, Mary, when she had the small pox; one of her arms was lame and the sinews shrank.

"Daughter Betsy unwell, takes an emetic.

"Daughter Betsy unwell, pain in head. Doctor Webster applies a blister to the back of her neck.

"Daughter Betsy extremely exercised with pain in her head. Doctor administers ether to her head, and a poultice of mustard and horse radish to her feet.

"My ankle lame. Doctor Webster orders some Hyssop to be pounded, wet in rum and laid on at night. In the morning I am to wash it off with pickle.

"Disorder in my hip. I applied hot salt and ashes in a flannel bag but found no help. I applied a plaster of pitch taken from the bottom of a boat. Doctor Stickels thinks it may be sciatica and advises mustard whey; that is, one pint milk, 1 pint water, 1½ ounces mustard; boil until the curds separate from the whey, drink a tea-cup full at a time, especially at night."

Well, that was the sort of thing that passed for medical attention in a small Nova Scotia town at the end of the 18th century. I have not mentioned the universal practice of bleeding for every sort of ill because it is too well known. Many patients in those days were literally bled to death. George Washington was one of them.

The American Revolution produced many changes in Nova Scotia. One of them was the advent of a number of properly educated physicians who had been serving as surgeons in the Loyalist regiments. Our town of Liverpool enjoyed for a few years the services of Doctor Edward Smith, a brilliant man who came to Nova Scotia with the veterans of Tarleton's Legion, the most famous of all the Loyalist corps.

The presence of these men began to set a new standard in medical practice in the province. There was no permanent school of medicine in America until after the Revolution, when Doctor John Warren established one at Harvard University. All the physicians of repute in America up to this time had gone to Europe for their studies. Some had studied at Leyden under Boerhaave and his successors; others studied in the chief London hospitals; the best of them were graduates of Edinburgh, where the famous doctors Munro, father and son, had established firmly the reputation of that great school.

The most remarkable of the Loyalist doctors who came to Nova Scotia was John Jeffries of Boston, a graduate of Harvard who had studied in London at Guy's Hospital and had obtained a degree in medicine at the University of Aberdeen.

He was present at the battle of Bunker Hill and after the fighting he and Paul Revere had the melancholy task of identifying the body of a doctor on the rebel side, the famous Joseph Warren.

When the British evacuated Boston in 1776 Jeffries came to Halifax and received the appointment of Surgeon-General to the forces in Nova Scotia. He carried on an extensive private practice, like most military surgeons of that time. One of the things for which he was long remembered in Halifax was the first mass inoculation against smallpox, 1,500 soldiers of the garrison. Not one of the soldiers died, which was little less than a miracle in those days when the practice was to transfer the disease direct by a scab from an infected person, and the subsequent treatment of most doctors was to administer large numbers of mercurial pills and thereafter keep the patient swathed in blankets and quilts "to keep down the eruption." Some doctors indeed would not permit the linen of patients to be changed during the whole course of the disease, notwithstanding the filth which might accumulate.

At the close of the war Jeffries went to London where, under the patronage of the royal physicians, he soon established a rich practice. He was a man of wide scientific interests, amongst them aerial navigation, and in 1785 he sailed in a free balloon from Grosvenor Square, London, to the forest of Artois in France—the first man to cross the Channel by air. Eventually, when the rancors of war had subsided, Jeffries returned to his old home and practice in Boston, and there flourished until his death in 1819.

The influence of the Loyalist doctors with their superior education, experience and outlook produced a marked change in medical thought in Nova Scotia. There was still a dearth of competent physicians in the small coastal settlements, and the wandering quacks continued their ministrations, but amongst the people many of the old superstitions began to give place to progres-

sive ideas. Nostrums were still popular but there was a readiness to grasp at something real.

This new state of mind is perfectly illustrated in the record of a smallpox epidemic which occurred in Liverpool, then the second largest town in the province, at the turn of the eighteenth century. I have mentioned the barbarous method of inoculation practised up to this time—a method unchanged since Lady Mary Montagu introduced it into England from Turkey in 1718. Its results were so often fatal that inoculation was still looked upon by the bulk of the population with great distrust, and those who underwent the operation were forced to segregate themselves like lepers.

The effect of all this was that smallpox was never entirely absent from large communities, and the entire seaboard from Florida to Quebec was swept periodically by the disease.

Such an epidemic smote Nova Scotia in the winter of 1800-1801, and its effects in the town of Liverpool were recorded in the diary of Simeon Perkins.

Dec. 10, 1800. "The smallpox is broke out among us. The wife of Prince Harris, mulatto, and one of Willis' daughters are both thought to have it, and Enoch Godfrey at the Herring Cove, lately from Halifax, is broke out. The people are alarmed and wish to have them removed. Colonel Freeman, myself, with Mr. Thomas go to see John Roberts' house at the southern end of his fish lot, and conclude to have the black women removed there. Godfrey is said to be very bad and wishes not to be moved. Joseph Barss, Esq., goes to the Cove with Esquire Dexter to consult and do the needful."

The diseased folk were segregated, but the smallpox spread, and on the day after Christmas we find this entry:

Dec. 26, 1800. "Major Tupper is applying for liberty to inoculate his family at The Falls, in his own house, or at Potanoc. The people at the Falls are much opposed to it."

And next day we find this:

Dec. 27, 1800. "The people at The Falls remonstrate by a petition to the magistrates addressed to me, against the smallpox being introduced into their neighborhood. The magistrates meet and consult. They write to Mr. Tupper wishing him to desist and wait for the Kine Pox, and say they cannot consent to his inoculating in his own house."

Tupper persisted stoutly, and finally the neighbors persuaded him to move his family into a disused hut on the far side of the river and have the inoculations there. The hut was repaired and made ready by a crowd of Tupper's neighbors, glad enough to remove this menace from their midst. And this example set other people thinking, and on Dec. 30th we find a leading citizen of Liverpool, Colonel Freeman, and a number of other courageous souls preparing a pest-house for themselves outside the town on the west bank of the river. The town fathers assumed responsibility for the pest-house and placed it under care of the Overseers of the Poor, and soon we find this:

Jan. 26, 1801. "The new hospital back of Birch Point is ready and 39 persons, old and young, besides the nurses, are gone in and inoculated this day, which will make near 80 in all."

These examples impressed the whole town, including Simeon himself, and on the following day he writes:

Jan. 27, 1801. "Mr. John More and some others are proposing to be inoculated at Rob. Dolliver's house, and I hear another set at Mr. Chadsey's."

Mr. Alexander Stevenson (the schoolmaster) is proposing to commence the business. I consult with Mr. Kirk on the propriety of my wife being inoculated, on account of her being subject to the St. Anthony's Fire."

Jan. 28, 1801. "I go with Mr. Newton, my wife, and his wife, to the house of Dolliver to see if it will answer for inoculating in. The house is rather too open, one room not clapboarded nor shingled, and the best room rather cold. I do not much approve of it. On our return I find a number of gentlemen assembled at my store. It seems to be their opinion that the smallpox will spread, and that in the present mode of inoculation it will be a long time getting through. They therefore request me to set up advertisements for a consultation to be held at the court house tomorrow at ten o'clock. I write advertisements accordingly and sign them as town clerk. Anna Allen is in the natural way, has got the disorder . . . something of the confluent kind. Those at the pest-houses over the river are doing well. Those at Birch Point are inoculated again this day, as Doctor Woodbury was a little fearful of the virtue of the matter he first used."

Jan. 29, 1801. "The consultation about the smallpox is held at the court-house. I am chosen chairman. Many people spoke on the subject, some for a general inoculation in people's houses, some against it. Finally it was put to a vote and carried against it. The Inoculation Law of the 16th year of George 3rd was read, and much was said on the subject, and finally it was put to a vote whether inoculation might be carried on under the direction of a committee of 18 nominated, and all agreed. They are to regulate the hospitals and anything necessary respecting the safety of the inhabitants. The committee met at Mr. Manning's (tavern) and appropriated several houses beside the present pest-houses. Doctor Woodbury appeared and requested liberty to inoculate some that were going into infected houses, at their own homes, and to allow them to remain 4 days to see if the infection has taken. It was also agreed by the committee that a white flag should be hung out at all infected places, and at such houses where the people were inoculated previous to their going to hospitals."

So two great steps had been taken; inoculation had been made compulsory, and those who so desired might undergo inoculation at their own homes, and on Feb. 1, 1801, we find one of the amateur physicians of the town, Mr. Kirk, sending a lad to Shelburne, fifty miles away, "for some medicine for inoculation, which he is out of." And then:

Feb. 4, 1801. "This morning my family, Mrs. Perkins, 6 children and boy, Isaac, 8 in all, begin a course of physic for inoculation. Mr. Kirk has undertaken to be their inoculating physician as a particular act of friendship, for which we are much indebted to him, as there is now such a number of pest-houses and there is so many people going under the operation that it would be difficult for Doctor Woodbury to attend them all. Mr. Alex Stevenson has also a number of people under his care, which he has inoculated this day at Mr. Chadsey's and Dolliver's."

Two days later the family take a second portion of preparatory physic—"rhubarb and calomel," and on Feb. 8th "Mr. Kirk calls and leaves a potion for all the children to be taken this evening, and another in the morning, which I suppose is salts." Finally the great day arrives:

Feb. 10, 1801. "My family are inoculated by Mr. John Kirk, all in the left hand between the thumb and forefinger, not in the loose skin but in the

hand, by making a small incision and laying an infected thread into it about $\frac{3}{8}$ of an inch in length. He then put on a small square rag, doubled, and over that a bandage to keep it in place."

It is an epoch, this, and we are not surprised to find Simeon recording three days later, "I make a path (through the snow) up to my Barbary Lot for my family to divert themselves in walking and riding." This, in an era which had always considered exercise and fresh air poisonous to the sick! The times are moving!

Feb. 19, 1801. "Most of my family complain of pains and some swelling under their arms and a nausea in their taste. They continue the prescribed regimen and drink plentiful of cold water also water with a teaspoonful of cream of tartar dissolved in a quart of water. They have some fever."

The entries continue. Simeon's family suffer a mild course of disease which does not prevent them from riding on the Moose Harbour Road, and on March 3rd we find:—"Mrs. MacDonald has lost another child by inoculation, which makes 7 dead by inoculation. My family are riding out and are comfortable."

However, in many cases there are inflammatory disorders following the inoculation, and the growing number of these, and the fact that a large proportion of the citizens are now inoculated, or recovering from the disease itself, convince the magistrates and doctors that it is time to give over.

On March 17th Simeon records that about 900 people in Liverpool and the adjacent settlements of Sandy Cove and Herring Cove have been inoculated. Picturéd that scene! The deep snow of an old-fashioned Nova Scotia winter, the white flags fluttering in the cold breeze over infected houses, the growing graveyard. The ill-heated "pest-houses," the ignorant but courageous "doctors," and always and everywhere the horror of a painful and loathsome death.

Yet men went about their affairs. Ships came and went, several of them privateers equipped by Liverpool merchants for the war against the French and Spanish in the West Indies. The foundation of more than one Liverpool fortune was being laid in commerce-raiding along the Spanish Main, and prizes with strange and lovely Spanish names made their way north and came into the harbor, anchoring close under that besieged town with its flutter of white flags. In Europe, Napoleon had become the dictator of France and had conquered half the continent, and England was fighting for her life. On March 30, 1801, on the very day when the British fleet discovered a way into Copenhagen and Nelson was preparing, you might say, to put the famous telescope to his blind eye—on that day Simeon Perkins was writing in his Nova Scotia diary:—"Capt. Zeb. Perkins is fitting the ship *Nymph*. Doctor Falt has inoculated a number of the privateersmen." The war had to go on, smallpox or no smallpox.

But the worst of the epidemic was past now, and we can place the end of it on May 13, 1801, when Doctor Woodbury, the chief physician of Liverpool during that terrible winter, departed for the Annapolis Valley by a trail through the woods. Simeon records it thus: "Doctor Woodbury (he spells it Woodberry) 'has put his baggage on board Capt. Hicks' (schooner) for Annapolis, and goes with his wife through the Nietaux road, his two sons having come through with three or four horses."

Now you are probably wondering why I have bored you with this detailed account of an epidemic in a small Nova Scotia town so very long ago. I have done so because it illustrates perfectly the change in medical thought and practice which was to gather such momentum as the 19th century progressed, and because this epidemic in Liverpool was a significant event in the history of Canadian medicine.

Let me repeat that entry in the diary for Saturday, Dec. 27, 1800:—"The people at the Falls remonstrate by a petition to the magistrates, against the smallpox being introduced into their neighborhood. The magistrates meet and consult. They write Mr. Tupper wishing him to desist *and wait for the Kine Pox.*"

A little more than two years before, the great Jenner had made known in England his discovery of vaccination, and Doctor George Pearson of St. George's Hospital had sent to a friend in New York a thread impregnated with "the matter of the vaccine virus." The discovery was received rather coldly by the medical profession at large. Even to the more scientific minds it must have seemed a typical piece of 18th century hocus-pocus—infesting a human being with virus from a sick cow!

But Doctor Benjamin Waterhouse, professor of medicine at Harvard University, did not hesitate to announce his full confidence in the facts which he had received direct from Jenner. In July, 1800, Waterhouse obtained vaccine from Jenner and applied it to four of his own children, the first persons in America to be *Vaccinated*. To prove his faith, Waterhouse exposed the four youngsters to smallpox in a Boston hospital, with successful results.

This example, and a succession of lectures and published treatises by Waterhouse in the autumn of 1800, convinced a large number of doctors in New England. Early in 1801 the Massachusetts Medical Society applied to England for a supply of vaccine matter, although quantities of it had been received in Boston and New York the previous autumn through Waterhouse and others.

But mark this—Simeon Perkins' diary provides unmistakable evidence that in December, 1800, weeks, perhaps months before the august Massachusetts society had interested itself officially, the inhabitants of this little Nova Scotia town had sent for a supply, probably from Boston. This is, so far as I can discover, the first recorded use of vaccine in Canada.

Perkins did not know the word vaccine. He lumps everything under the word inoculation, although here and there he mentions people "inoculated in the natural way," i.e. the old-fashioned way. He is busy with his mercantile affairs and matters of state, all of which he records in his diary carefully along with the smallpox. Inoculation by scab had been known and practised in Liverpool for at least 25 years previously, and it is clear that in his minute descriptions of the new process we have descriptions of vaccination as it was first practised in this country.

What a pity that he did not give some statistics! We should like to know how many were vaccinated, how many merely inoculated "in the natural way," and how many suffered the disease itself, and with what results respectively. We should like to know where they sent for the "Kine Pox," and at whose suggestion. He describes in some detail the secondary inflammations which Jenner was encountering at the same time, and which indeed have formed

the ground of a controversy over vaccination which has lasted and still flourishes in our own time.

And there is a suggestion that these secondary disorders finally caused the magistrates to "give over the inoculation" at a time when, fortunately, the worst was over. But we should like to know for certain.

Yet we must be grateful to Simeon Perkins that he sat himself down at the end of each of his laborious and worrisome days, and took his faithful inkpot and quill to record these matters for our eyes. For here is the first evidence of a forward trend in Canadian, as well as American medical thought, and we must admire the courage and faith of the people who believed in it enough to risk their lives and the lives of their loved ones on what was then a dubious experiment.

And we here are not a little proud that this affair, so significant in Canadian medical history, took place in our Nova Scotia town.

Address at the Annual Meeting of the Medical Society of Nova Scotia, White Point Beach, July 5, 1944

DR. HARRIS MCPHEDRAN

President, Canadian Medical Association

TO this the Ninety-First Annual Meeting of the Nova Scotia Division of the Canadian Medical Association, I bring greetings from the National Body. This is not my first visit to this Association's Annual Meeting, having attended one held at Bridgewater in 1925—a pleasant experience that from time to time wakens pleasant recollections, again revived by this meeting.

It is a great pleasure to be among you again, meet old friends and exchange greetings.

I shall talk briefly tonight for I am on a fact finding tour with Dr. Routley and when I am through with this tour I hope to turn in a report to our executive meeting and thence to you so that all members of the Association may be informed as to what is going on in the other Provinces.

Local problems aside, I presume there is nothing of so much concern to each and every one (or at least it should be so) as the demands from so many quarters for changes in our social conditions with the hope of improving the health and happiness of all. This problem is as old as time and is bound up with every upward and onward move of the human race. Like so many other things the demand has been given an impetus by war from which stems so much that is good in the midst of its horrors and sacrifices. *It is the duty of each of us to see things in their proper perspective swinging neither too much to the right or left.*

In this turmoil the medical profession with its great tradition of achievement, for the good of the human race, has now become involved. We along with nurses, dentists, hospitals, pharmacists, seem to have been chosen as a spearhead in this great crusade.

It is our duty, the duty of every member of our profession to examine for himself, without prejudice and with a cold judicial eye just what part we should play in this social upsurge, to control it or at least give it direction so far as it affects the medical profession.

Therefore let each ask himself:

- (1) Is this upheaval justified?
- (2) Should it progress by evolution or revolution?
- (3) How best can we act for the benefit of the public whom we serve?

In answer to Question 1

One only needs to look at the years gone by and especially the years of depression to realize that some social changes must be effected whereby there shall never again be extremes either of riches or poverty—a better society in

which there is opportunity for all but albeit a society in which individual enterprise and work will still have their just reward. "In the sweat of your face shalt thou eat" is still true and no better society will ever be, except through labour, (sometimes blood, as at present) sweat and tears.

(2) Should these changes come by evolution or revolution?

Is there still not enough common sense, decency and good judgment left in the majority of our people to help settle our particular problems by frank and full discussion, without bitterness, hate and appalling selfishness, the bed rock of revolutions and wars. I believe there is. To that end and in an attempt to get the opinion and viewpoint of others, the C.M.A. is this fall inviting representatives of all those groups now receiving medical services to sit down and talk with us so that their views may be had and a common basis or bridge head be established for conjoint action on this problem of health services. A similar procedure may I recommend to each of you for your own community so that we may tell our elected representatives in parliament or legislature what we think is best and how and when and where it can be done.

To the third question—"How best can we proceed for the benefit of the public whose servants (not slaves) we are?—I believe we can do our work most effectively.

- (1) by education of the members, undergraduate and graduate, in our our profession.
- (2) by helping in education of the public through various agencies as to its responsibilities and opportunities.

As I am now in a province which has sent forth so many of its sons to become heads of great institutions of learning it is fitting to speak on this subject of education briefly.

If our scheme of Health Services is to live up to our first principle and "secure the development and provision of the highest standards of health services" we must start with the students of to-day and tomorrow. They must have a good background—be of good character, and stable mind, sound physique and high academic standing in this their order of importance. It is my belief that greater care in selection of students must be exercised by our universities. The army has set a precedent that might be emulated in instituting a Pulhems profile, and a personnel selection board. This should be a step in the right direction for the elimination of the drunks, dopes, criminals and psychopathies from our ranks. Who will make the selection? Up to now University Faculties have assumed this responsibility. Is it time to consider a change? A questionnaire sent out to several general practitioners in Ontario by the Committee on Economics brought forth the startling information from these doctors who thought the O.M.A. and the College of Physicians and Surgeons should co-operate with University Faculties in this business of selection and also adjustment of curriculum. Some of you may say why? I should say, "Why not?" These bodies through their members are certainly in a position to know more about students coming from their respective areas than any medical Faculty particularly in the larger universities. If I read the signs of the times aright, these graduates are on the way, at least in provincial universities, to making their voices heard and to say where teachers and teaching is faulty and where good.

Moreover the curriculum will have to undergo change, if our students are to properly fulfil their duties as practitioners to their patients in all matters that pertain to the improvement of health. Knowledge of town planning, housing, heating and lighting, clothing, environmental conditions, at home and at work, as well as of sewage disposal, water and food supply and measures to be used to prevent disease will be essential if they are truly to fulfil their duties as medical advisers. Oxford has already established a chair of social and preventive medicine with this in mind. It has been said we have learned in so many instances the cause of disease but do not know or appreciate the cause behind the cause. In our second principle we state that improved social conditions must precede or accompany any plan of health insurance. Through a thorough understanding and knowledge of the living conditions, etc., of our patients we are in a preferred position if adequately trained, to lead the way in effecting improvements in social conditions. Education in social and preventive medicine, greater in degree and fuller in scope cannot be ignored by our teaching institutions. Not only should the students receive this training but also our graduates, if they are to co-operate with the other agencies in their community and give leadership in the development, slow though it be, of all that is good for the health of our people.

Another phase of education needs emphasizing namely education of the people as to their responsibility and opportunity individually and as members of society in promoting the welfare and happiness of all in a community. Improved health for an individual or a community can only come into being through co-operation of all concerned. In this the practising physician should and must give leadership with the assistance of nurses, dentists, hospitals, officers of health, municipal authorities and all organizations interested in the welfare of the community.

Herein lies a great opportunity for the medical man, be he teacher or practitioner.

What about post-graduate education! With doors closed, for the most part, for study in the United States and Great Britain, the challenge to provide post-graduate instruction must be accepted and made effective by our own Universities. To my mind this is all to the good. As in other matters pertaining to our national life, we have been too retiring and timid, have suffered from an inferiority complex about our abilities and capacities in the science of medicine. The war has shaken some of this nonsense out of us. May the process continue for there is such a thing as Canadian Medicine. Let us wake up and be proud of this. Let us bring it into full bloom for the Glory of Canadians and the benefit of mankind.

Editorial

IT was with a great deal of satisfaction we learned that the Refresher Course Committee of the Faculty of Medicine of Dalhousie University decided to offer a course this autumn. Dr. Judson V. Graham is again Chairman and we expect that the proceedings will rival the outstanding success he achieved last year. We understand that it has been arranged to have at this, the 20th course of its kind, eminent teachers from both our fellow Canadian Schools and those of our very good neighbour. The War-times Graduate Medical Meetings of the United States, an organization under the auspices of the American Medical Association, the American College of Physicians, and the American College of Surgeons, will send us four teachers. You will remember that last year they sent us Dr. H. J. Stander and Dr. Max Peet.

The Committee has invited outstanding teachers in Medicine, Psychiatry, Urology and Paediatrics. Dr. Charles B. Huggins, Professor of Surgery, University of Chicago will lecture on "Cancer of the Prostate" and "Sex Hormones in Clinical Practice," and will give clinics on "Diagnosis and Treatment of Prostatic Diseases" and "Recent Advances in Urological Treatment." Dr. N. E. McKinnon, Professor of Epidemiology and Biometrics in the School of Hygiene and Research Member in the Connaught Laboratories will present two papers dealing with preventive medicine. The Army, Navy and Air Force, will each present a paper in medicine and surgery and conduct clinics at their respective hospitals. The Faculty of Medicine with such able support as anticipated should make this course a crowning event.

These courses have been open to all qualified practitioners irrespective of residence or college of graduation. We hope that all who attend this one will respond to the request of the Committee and be sure to register, as this is the only way it has of making a record of the attendance. The BULLETIN will publish the completed programme in the September issue.

Last year permission to use certain class rooms was only granted on condition that smoking be prohibited. Never was a blessing so disguised, and even the most inveterate smokers commented favourably. It is hoped that so pleasing an innovation will become an inviolate custom.

H. W. S.

Minutes of the Executive of the Medical Society of Nova Scotia, 1944.

THE annual meeting of the Executive of The Medical Society of Nova Scotia was held at White Point Beach Lodge, White Point Beach, Queens County, N. S., July 4, 1944, at 3.00 p.m.

Present: Dr. J. C. Wickwire, President, Doctors F. R. Davis, J. W. Reid, W. L. Muir, H. K. MacDonald, A. E. Blackett, D. F. McInnis, R. H. Stoddard, J. R. Corston, D. M. MacRae, A. L. Murphy, Eric W. Macdonald, W. C. O'Brien, F. J. Barton, P. S. Cochrane, D. M. Cochrane, F. J. Melanson, H. J. Pothier, J. P. McGrath, J. C. Murray, J. S. Murray, N. H. Gosse, H. G. Grant, Harris McPhedran, President Canadian Medical Association and T. C. Routley, General Secretary, Canadian Medical Association.

The President called the meeting to order.

It was moved by Dr. W. L. Muir and seconded by Dr. J. W. Reid that the minutes of last year's meeting as published in the MEDICAL BULLETIN of August, 1943, be accepted as read. Carried.

The first communication was a letter from the Cumberland Medical Society and the second from the New Brunswick Medical Society both dealing with 100% membership. These were read by the Secretary.

Amherst, N. S., April 26, 1944

Doctor H. G. Grant
Halifax, N. S.

Dear Doctor Grant:

At the annual meeting of the Cumberland Medical Society, a resolution was passed that, "this society go on record as being in favour of some arrangement, compulsory if necessary, to secure 100% membership in the Canadian Medical Association."

Feel that this resolution should be in your hands before the Executive meets this spring. Sincerely hope that some scheme can be evolved whereby 100% membership can be assured.

Sincere regards,

(Sgd.) R. E. Price

Saint John, N. B., May 10, 1944

Dr. H. G. Grant
Dalhousie University
Halifax, N. S.

Dear Dr. Grant:

It is true that New Brunswick now collects a composite fee for our own council and the C. M. A.

After ten years of education of our members and facing Health Insurance lately, we sent a circular to all our members advertising a notice of motion, "That beginning January 1, 1944, the registrar would collect a fee to cover the yearly registration for N. B. Council and the \$8.00 fee for the C. M. A." This motion was discussed at our last annual meeting at Moncton and passed and this year is in effect 100 per cent—no hold-outs. The total fee is \$20.00. Eight to C. M. A., eight to the N. B. Medical Society and four to the N. B. Medical Council.

As you know the annual fee for the N. B. Medical Council has covered dues to the Society as well as the Council for many years, so that our membership in the Society has been 100% of the registered doctors. The first and I believe, the only province to be so blessed.

There was some talk about the absolute legality of such action but it works and the procedure was simple and agreeable apparently to the whole profession. It is early to brag, but so far all is well.

Yours very sincerely,

(Sgd.) A. Stanley Kirkland, M.D.

Secretary

It was stated that the Pictou County Medical Society had passed a resolution that they were in favour of this motion.

Dr. H. K. MacDonald read some notes from Dr. H. L. Scammell, the Provincial Registrar, on this subject, and after some discussion it was moved by Dr. H. K. MacDonald and seconded by Dr. J. W. Reid that a committee be appointed to thoroughly investigate the feasibility of one hundred per cent membership and report to the next meeting of the executive in the fall, and if necessary the executive take steps to have the medical act changed. Passed.

The next communication was a letter from the Western Nova Scotia Medical Society which was read by the Secretary.

Yarmouth, N. S., June 1, 1944

H. G. Grant, M.D.

Secretary, Medical Society of Nova Scotia,

Dalhousie Public Health Clinic,

Halifax, N. S.

Dear Doctor Grant:

Sorry that you were unable to attend our recent meeting. It was very interesting and pleasant but rather poorly attended.

We discussed the schedule of fees and I am enclosing a copy with our suggestions pencil marked.

A resolution was passed to the effect that the results of induction and discharge diagnoses of service men be made available to the general practitioner so that we will be better able to care for those who will and have already returned to civilian life. Several instances were related where men have had long periods of investigation in and out of hospitals and were then discharged without being told the nature of their difficulty or reasons for discharge. All these studies may have to be repeated within a short time after their completion by the too busy civilian doctor, we think, unnecessarily. It was suggested that, if the actual diagnosis could not be placed on the discharge papers, a code could be used. The argument that the army doctors will look after the discharged men is too weak to counter.

Another resolution was passed favoring the establishment of a psychiatric unit in the new V. G. Hospital. Often we have patients who need the attention of an expert yet hesitate to attach the stigma of commitment to a mental institution.

The following officers were elected:

President—Dr. J. A. Donahoe, Shelburne.

Vice-Presidents—Drs. A. M. Wilson, Barrington.

S. W. Williamson, Yarmouth.

P. E. Belliveau, Meteghan.

Representatives to the N. S. Medical Society:

Dr. F. Melanson, Eel Brook.

Dr. W. C. O'Brien, Yarmouth.

Yours very truly,

(Sgd.) D. F. Macdonald

After some discussion during which Doctor Routley joined, it was moved by Doctor Reid and seconded by Doctor Pothier that The Medical Society write the military authorities to see if the discharge diagnoses can be made available to the general practitioner. Carried.

Regarding the second resolution Doctor Davis stated that the matter of a psychiatric unit in the new Victoria General Hospital had been given a great deal of consideration, and that they were in sympathy with the tone of the letter. The new hospital would have 400 or more beds and would provide medical teaching for the students of Dalhousie University. He said it would take the whole of the hospital if they provided beds necessary for the mentally ill in the Province, and that it would be inadequate to put aside 50 beds. He would rather see the mentally ill in the Province taken care of by segregating the advanced cases, and providing an active treatment hospital of sufficient size to take care of the situation. It was moved by Doctor Reid and seconded by Doctor McGrath that this matter be brought up for discussion before the general meeting. Carried.

The next communication read by the Secretary was a letter from the Canadian Medical Association.

Toronto, Ontario,
183 College Street,
June 5th, 1944.

Doctor H. G. Grant
Dalhousie Public Health Clinic,
Halifax, N. S.

Dear Doctor Grant:

Re Report of the Committee on Public Health, Page 26, Business Reports to General Council, Section 143—

Certification of Prostitutes

Following consideration of this matter by General Council, the following resolution was approved:

"That the Canadian Medical Association General Council go on record as recommending more efficient and widespread diagnosis and treatment throughout Canada of venereal diseases, aiming at their elimination. For this purpose, we recommend:

1. Blood tests on the entire population for the determination of the presence of syphilis.
2. Premarital blood tests throughout Canada.
3. Hospitalization or isolation until cured, of all cases of gonorrhoea, and a proper follow-up system by social service, public health officials and police departments as well as the medical profession."

It was duly moved, seconded and agreed that this whole matter be referred to the Divisions.

Yours sincerely,

(Sgd.) T. C. Routley,
General Secretary

After a short discussion it was moved by Doctor Eric Macdonald and seconded by Dr. J. W. Reid that this letter be referred to the Committee on Public Health. Carried.

The following communication was next read by the Secretary.

Toronto 2B, Ontario,
184 College Street,
June 5, 1944

Doctor H. G. Grant
Dalhousie Public Health Clinic
Halifax, N. S.

Dear Doctor Grant:

Enclosed you will please find a copy of the Business Reports as presented to General Council at the annual meeting.

Re Report of the Committee on Public Health, page 26, **Section 139, Housing.**

After consideration of this section of the report, General Council passed the following resolution:

"That in the opinion of this General Council it is extremely important for the Canadian Medical Association to take more interest in housing and that the Association request the Divisions to use every means in their power to co-operate with housing committees in their area."

May we be advised, please, of such action as your Division may take, or any suggestions you may have to offer.

Yours sincerely,

(Sgd.) T. C. Routley
General Secretary

It was moved by Doctor Gosse and seconded by Doctor Reid that this letter be brought before the general meeting. Carried.

The following letter was next read by the Secretary.

Toronto 2B, Ontario,
184 College Street,
June 5, 1944

Doctor H. G. Grant,
Dalhousie Public Health Clinic,
Halifax, N. S.

Dear Doctor Grant:

In order that the work of publishing the *Journal* may go along as smoothly as possible, it is necessary that our list of Divisional Representatives on the Editorial Board be kept strictly up to date. With this end in view, it is suggested that the appointments be given consideration at Divisional Annual Meetings.

Will you please see that this matter is placed on the agenda for your annual meeting, and later, either confirm the appointment or give us the name of the new appointee.

Your present representative is Dr. H. L. Scammell, Halifax.

Yours sincerely,

(Sgd.) T. C. Routley,
General Secretary

It was agreed that this matter should be dealt with by the Nominating Committee.

The following communication was next read by the Secretary.

Toronto 2B, Ontario,
184 College Street,
June 5, 1944

To: Secretaries of Divisions
Dear Doctor Grant:

Re Soldiers' Dependents Board of Trustees

Adverting to previous correspondence we have had on this subject, I am sending you herein two copies of "Schedule of Fees and General Conditions re Medical Services."

From such preliminary study as could be made of this document at the time of our annual meeting, the proposed tariff was subjected to considerable criticism. While we had no definite information from the Divisions, it would appear that they were not likely to accept it.

On Tuesday last, Doctors McPhedran, Archer and I had a chat with two members of the Board of Trustees in Ottawa. We pointed out to them that we were still waiting for a reply to the several suggestions which had been made by our Executive Committee and with which you are already familiar. (See our letter, November 5, 1943.)

In the discussion, the Board made this statement: "If your people do not like this tariff and want us to use their own provincial tariffs, what would they be prepared to accept as a percentage of their provincial tariff in full payment of services rendered to these dependents?"

It was interesting to know that the Board is handling about 15,000 medical accounts a year, and from 70% to 80% of all monies being expended by the Board are for hospital and medical accounts. Having in mind that this country may one day have health insurance and that democracy has a habit of accepting precedents, it is important that we do not allow any precedent to be established in medical economics which might work adversely for the profession.

At the same time, it is recognized that the profession is willing to take care of soldiers' dependents on the payment of reasonable and proper fees.

I do not need to dwell on the importance of this whole subject, and would suggest that, at your forthcoming annual meeting, or in any other way you see fit, you take steps to have the matter thoroughly canvassed so that this office may be advised of the definite views, opinions and suggestions of your Division.

Yours sincerely,

(Sgd.) T. C. Routley,
General Secretary

After a short discussion a committee of three with Doctor Eric W. Macdonald as chairman and Doctor J. R. Corston and Doctor H. K. MacDonald was appointed to report at the evening session of the executive.

The following communication was read by the Secretary.

Vancouver, B. C.
June 6, 1944

Dr. H. G. Grant,
Secretary, Medical Society of Nova Scotia,
Halifax, N. S.

Dear Doctor Grant:

The question of gasoline rationing throughout the Province of British Columbia has been a live one and has been discussed by my Council at almost every meeting for the past year or so.

It would appear that in certain provinces the medical men are having no difficulty whatsoever as far as gasoline is concerned. We have asked each and every man in the medical profession to be as conservative in his use of gasoline as he possibly can and we have felt that the men in the vast majority of cases are complying with this request. However, at times it is necessary for certain of our medical men to appeal to the Regional Oil Controller and some of them have received rebuffs which, in peace-time, would not be tolerated. It may be that the Oil Controller feels it is necessary.

We should like to know if you have any difficulty in dealing with your Regional Oil Controller. At the present time we have only a B category for urban doctors but a few

of the country men have received a C. Would you please let us know what the categories are in the main in your Province?

Yours sincerely,

(Sgd.) A. J. MacLachlan, M.D.,

Registrar,

College of Physicians and Surgeons of
British Columbia

The feeling of the executive was that there was very little difficulty in the province.

Dr. Murray stated that at the present time there was no regulation whereby the doctors could procure anti-freeze, and Doctor Routley advised that he had had some correspondence with the chemical controller, and there is not any anti-freeze to be procured.

The next communication to be read by the Secretary was as follows:

House of Commons, Canada
May 19, 1944

Dr. H. G. Grant,
Secretary, Nova Scotia Division,
Canadian Medical Association,
Morris Street,
Halifax, N. S.

Dear Dr. Grant:

At the meeting of the Special Committee on Social Security held on the 18th instant, the subject of the rehabilitation of doctors in the Armed Forces was discussed.

Section 16 of the draft Health Insurance Bill, dealing with the rehabilitation of members of the professions on military service, reads as follows:

"Notwithstanding anything in this Act, the regulations made under the provisions of sections eleven, twelve, thirteen, fourteen and fifteen thereof, shall be such as will secure the establishment or the re-establishment, as the case may be, in civilian professional life of the members of the several professions referred to in the said sections who may be discharged from His Majesty's Naval, Military or Air Forces (including Women's Divisions thereof), such establishment or re-establishment to be to the same extent and on the same footing, as nearly as may be, as those persons would be established or re-established had they been discharged from the Forces before the coming into operation of this Act."

You will note that this constitutes little more than a request that the overseas professional personnel be put upon the same basis as civilian professional personnel for the selection of physicians by insured persons. It does not make special provision for the absorption of physicians released from the Forces.

After some discussion on the above section, it was suggested that the Canadian Medical Procurement and Assignment Board consider the advisability of providing a plan of the provinces indicating those areas where the services of a doctor will be required after the war. The suggestion included a recommendation that overseas doctors be allocated to those areas and be given a retained fee provided under health insurance and have the privilege of collecting a fee for service for a period of time sufficient to enable them to be re-established. This would not preclude the provision of a salary in suitable areas. It was suggested that the plan be formulated in conjunction with the Provincial Medical Associations.

A copy of this letter is being forwarded to Mr. Walter Woods, Associate Deputy Minister of the Department of Pensions and National Health, as well as to the Secretaries of the Provincial Medical Associations for their consideration.

The Special Committee on Social Security would appreciate receiving your views in regard to the suggestion.

Yours very truly,

(Sgd.) J. P. Doyle,
Clerk of the Committee

Doctor Routley advised that it had been pointed out to the Social Security Committee that by the time the war is over Health Insurance may be effective in Canada.

After some discussion it was moved by Doctor P. S. Cochrane and seconded by Doctor Reid that the Executive give the Secretary authority to write to the Special Committee on Social Security that the Canadian Medical Procurement and Assignment Board should act in an advisory capacity to the doctors for information as to where they might settle.

The following letter was next read by the Secretary.

Report of Gerald Burns Memorial Fund Committee

While this Committee was formed by the Halifax Branch of the Nova Scotia Medical Society, so much of the money raised in support of the Fund came from the profession about the province that the Committee feel they should make a report to the Nova Scotia Medical Society. The report is made at this particular time because the funds raised are now running low, and the question of raising further funds or resting on our laurels begins to present itself.

Perhaps the Committee had better first state what has been done with the funds already raised. These amounted in total to \$2,624.91. Of the amount we have now expended all but \$308.67. Our disbursements primarily went towards providing such comforts as could be obtained for each individual member of the Nova Scotia Medical Society who was overseas. In the early days when the Battle of the Atlantic was at its worst and goods were scarce in England, we sent tinned meats, fish, sausages, etc., and cigarettes. When tinned food became scarce in this country—and that happily coincided with the winning of the Battle of the Atlantic and consequent increase in food supplies to Britain—we were forced to cut our purchases to cigarettes. We have continued up to this time to send monthly gifts of cigarettes.

In addition to this we have supplied three larger units that contained a fairly large proportion of provincial medical men in their personnel with subscriptions to certain magazines, medical and other, as well as the Book-of-the-Month. These units were 28th Field Ambulance, No. 9 General Hospital and No. 7 General Hospital. Since No. 28th Field Ambulance is now a non-Nova Scotian unit, we have stopped sending them the subscriptions, but continue those to the other two units.

Beyond this we have made two grants, one to the Medical Mess at Camp Borden of \$200.00, and one to No. 9 General Hospital of \$500.00. The reasons for these two large grants are as follows:

In the case of Camp Borden a large number of our younger graduates have been members of this mess while receiving their training, and it was suggested to us down here that we join with other medical groups in helping to subsidize this mess. In the case of No. 9 General Hospital, this unit was sent overseas and raised at very short notice. Its men and nurses were largely Nova Scotian, it had a Nova Scotian O.C. and Matron in charge of nurses. Its O.C. Medicine was a Nova Scotian. We felt that this unit deserved the amount we gave it.

The question now arises: shall we solicit further funds to continue what we are doing? There is enough money left to carry on with the subscriptions to magazines and journals to the two large units mentioned above, but not to carry on with the monthly supply of cigarettes to each individual. In view of the fact that (1) the war may be over within

another year, (2) with the great military movement entailed in future manoeuvres parcels may be lost, (3) that our effort played its part at a time when our men overseas were suffering actual shortages and that this state of affairs has now ended, this Committee feels that it is perhaps not advisable to go after further funds at present to continue its work. It is quite willing, however, to carry out any wishes that the Nova Scotia Medical Society might otherwise express.

(Sgd.) H. B. Atlee,

Chairman, Gerald Burns Memorial Fund Committee

Doctor McPhedran stated that he was in Ottawa last Wednesday for the dinner they gave for the opening of the mess and he told Colonel Ward that he would be in Nova Scotia the next week and he would convey their thanks to The Medical Society of Nova Scotia for the part they took in that gift. It was decided that this letter should be read before the general meeting.

The Secretary advised that letters of appreciation had been received, one from Doctor Benvie for flowers sent from the Society when he was a patient at the Nova Scotia Sanatorium last July when the Society held its annual meeting at Kentville, and one from Mrs. A. K. Roy and family.

The Secretary advised that no names had been received for honorary membership in the Society.

Report of the Legislative Committee.

June 4, 1944

Mr. President and Members of the Executive,
Medical Society of Nova Scotia.

Gentlemen:

Your Committee beg to report that no business has come before the Committee during the year.

(Sgd.) K. A. MacKenzie,

Chairman

Report of the Editorial Board.

June 20, 1944

To the President, Executive and Members of
The Medical Society of Nova Scotia

You are all aware that the BULLETIN has been published from month to month and the editors hope the contents have met with your approval. We are ever ready to welcome suggestions.

We take this opportunity to express our appreciation of the work of the Secretary, Doctor Grant, and his faithful and able assistant, Mrs. Currie.

Respectfully submitted,

(Sgd.) H. W. Schwartz,

Editor-in-chief

It was decided that this report be brought up at the general meeting.

Report of the Public Health Committee

Report of the Committee on Public Health of The Medical Society of Nova Scotia for the year 1943 to 1944.

To the Executive and Members of the Nova Scotia Division of the Canadian Medical Association:

In presenting a report each year your Committee finds it difficult to avoid repetition. Events of particular interest in the realm of Public Health do not occur every month or even every year. There are always before us the "hardy annuals" which have to be regrappled with. Some of these have the habit of appearing in new forms and methods have to be adopted to meet these in their changed aspects. As knowledge accumulates, often through the "trial and error" method, we are furnished with new weapons for attacking the age old problems.

Of significant and outstanding importance during the past year or two is the increasing interest in the control of the venereal diseases. The conquest of these diseases has been for many years one of the chief objectives of all health departments. Just recently an intensified effort has been set afoot as a result of a national four day conference held in Ottawa in December, 1943. A program to ensure the success of this undertaking is being organized on a nation wide basis. When every person is made to realize that the venereal diseases are not the simple illnesses they sometimes appear to be, that they may and frequently do cause serious trouble perhaps years later and that in early medical treatment lies the only sure hope for avoidance of the unfortunate sequelae which so often occur in untreated or inadequately treated cases, much progress towards their eradication will ensue. Maximum results in this direction can be achieved only by a willing and hearty co-operation between the medical profession, civil officials, national defence authority and the medical officers of health.

In so far as the other communicable diseases are concerned, we think some progress has also been made. The latest completed statistics show a low general death rate, reduction in maternal and infant mortality and the losses from tuberculosis the least ever recorded. Last year we predicted a rise in tuberculosis incident to the war. This is not yet apparent although it is anticipated that from now onwards a goodly number of men will be returning from overseas afflicted with this disease. Diphtheria which has been all too prevalent of recent years is now showing a downward tendency. It is thought the special control methods introduced about a year ago in areas where this disease was continuing, have had the desired effect.

Diseases due to defective sanitation have not been a disturbing factor. There have not been any milk or water borne outbreaks of the typhoid group of diseases for many years. Our typhoid rate is low. When cases occurred special investigations as to their sources were carried out. These procedures have been the means of discovering certain carriers who have been instructed and as a consequence have given little or no trouble after having been found. The increased demand for fluid milk due to the large floating population has added greatly to the difficulties of maintaining a sanitary supply. Each succeeding year finds more of the municipal water supplies protected by chlorination.

In general the state of the public health may be described as encouraging and the downward tendency with respect of the preventable diseases continues. We thank the members of The Medical Society for their contribution in bring-

ing about this satisfactory state and we earnestly solicit their continued co-operation in the years that lie ahead.

Respectfully submitted,

P. S. Campbell, M.D., (Chairman)

A. R. Morton, M.D.

J. J. MacRitchie, M.D.

W. T. McKeough, M.D.

A. E. Blackett, M.D.

W. F. MacKinnon, M.D.

S. Marcus, M.D.

W. C. O'Brien, M.D.

The adoption of this report was moved and seconded and carried.

Report of the Historical Committee

June 6, 1944

Dr. H. G. Grant,
Secretary of The Medical Society of Nova Scotia,
Morris Street,
Halifax, N. S.

Dear Dr. Grant:

Herewith the report of the Historical Committee for the year 1943-1944. During the year no meetings were held and nothing was done.

I have repeatedly suggested that in order for this Committee to function the members composing it must all be in one town or at least so closely situated that they can meet frequently during the year. Much valuable material is being lost I am sure on this account.

I would respectfully ask that my name be not included on this Committee again unless the above recommendation is implemented.

Yours faithfully

(Sgd.) H. L. Scammell, M.D.

It was agreed that this report should be referred to the Nominating Committee.

Report of the Provincial Medical Board

June 30, 1944

Dr. H. G. Grant,
Secretary, Medical Society of Nova Scotia,
Morris Street,
Halifax, N. S.

Dear Dr. Grant:

I beg to report briefly on the activities of the Provincial Medical Board since your last meeting.

On August 29, 1943, a special meeting of the Executive was held to deal with the results of the examinations held just previous to that date.

The annual meeting was held on November 12, 1943. On that occasion the resignation of Dr. J. J. Cameron of Antigonish from the Board was regretfully received. Since that date his place has been filled by Dr. J. S. Brean of Mulgrave.

The prospect of post discharge medical education for members of the Armed Forces was reviewed in considerable detail and as a result the Registrar communicated with the Department of National Defence at Ottawa, indicating the Board's willingness to co-operate in any manner possible towards this end. As a result of later correspondence some suggestions were made to the Department. It is understood that considerable progress has been made in plans towards this end.

Dr. J. P. Robb and Dr. R. H. Gourley, Medical Officers in the Royal Canadian Navy, were granted temporary licenses at the request of the Halifax Medical Society and the Health Department of the City of Halifax. This was to enable them to assist the City Health Department in its activities.

The Optometrist Association was written to pointing out certain irregularities on the part of its members in connection with advertising. We believe that there has been considerable improvement in this regard, as a result.

Members of the Board have felt that the green cross insignia was being made use of by other than medical men to an extent that requires a more specific design which would be available to registered practitioners only. This suggestion is passed on to your Society.

The Board continues to support the MacDougall Library, incorporated with the Cogswell Library at Dalhousie.

A spring meeting of the Board was held on May 11, 1944. At this meeting routine business was carried out, examination returns were verified and licenses granted to the successful candidates.

Requests have been received by the Board for direct reciprocity with the Union of South Africa. At present reciprocity exists but through the medium of the General Medical Council of Great Britain. The Board has decided to continue the present status.

Besides this the Board has dealt with an unusually large amount of routine business during the year.

Respectfully submitted,

(Sgd.) H. L. Scammell,
Registrar

The adoption of this report was moved and seconded and carried.

Report of Medical Museum Committee

June 4, 1944

Mr. President and Members of the Executive,
Medical Society of Nova Scotia,
Gentlemen:

Your Committee beg to report that no additions to the Museum have been made during the year.

(Sgd.) K. A. MacKenzie
Chairman

The adoption of this report was moved and seconded and carried.

Report of the Cogswell Library Committee

Report for the year 1943-44.

The records of the Medical Library for the past two years show a steady increase in the attendance of readers. The hours have been generously extended, and the reading room is in use five nights a week during the summer months, in addition to the full daytime hours. The total of readers for the year is 15,220, a daily average of over 46. Out-of-town loans numbered 338 items; the total circulation was 3,954.

158 periodicals are received currently, including the following new titles:—

Experimental medicine and surgery.

Gastroenterology.

Journal of industrial hygiene and toxicology.

Journal of thoracic surgery.

Radiology.

The back files have been built up steadily, largely through gifts and through the Medical Library Association Exchange. The library is always glad to receive back numbers of journals in the specialties as well as the more familiar journals. Duplicates that we do not need are filed and saved to be shipped overseas after the war, to help to build up the stocks of libraries destroyed by enemy action. Gifts received during the year numbered 166 books, 53 volumes of journals, bound or unbound, and about 555 single numbers. Important among the new books presented to the library are: Downey's *Haematology*, 4 vols., Stitt's *Tropical Diseases*, 2 vols., and Bockus's *Gastroenterology*, of which the 3rd vol. is not yet issued.

The MacDougall Library has become a significant part of our clinical section; the 26 volumes added this year bring the total to 56 volumes.

Use of the library by men in the services has again increased. The cards show that 121 have borrowed material during the year. They appreciate the reference service and the convenience of the evening hours throughout the term.

Expenditures for the year were approximately as follows:

| | |
|---|------------|
| Subscriptions to current journals and back files..... | \$1,249.00 |
| New books purchased..... | 219.36 |
| Binding..... | 133.00 |
| Incidentals (including film rentals)..... | 90.00 |
| Salaries..... | 1,671.00 |

Respectfully submitted,

J. R. Corston,
Chairman

It was moved, seconded and carried that this report be adopted.

It was moved and seconded and carried at 5.30 p.m. that the meeting adjourn until eight o'clock in the evening.

The adjourned meeting of the Executive was called to order by the President at 8.15 p.m.

The Secretary advised that a letter had been received from Dr. K. A. MacKenzie asking what should be done about the Committee on Epidemics

Canadian Medical Association. It was moved by Doctor H. K. MacDonald and seconded by Dr. P. S. Cochrane that the appointment of this committee be referred to the Nominating Committee. Carried.

Doctor Eric Macdonald, chairman of the committee, appointed in the afternoon to deal with the letter from the Canadian Medical Association regarding Soldiers' Dependents brought in the following resolution: Re Soldier's Dependents.

Be it resolved that the Nova Scotia Division of the Canadian Medical Association approve of the following—

- (1) That the tariff of The Medical Society of Nova Scotia shall apply subject to 15% reduction;
- (2) That medical accounts be assessed by a committee appointed by The Medical Society of Nova Scotia;
- (2) That where accounts are reduced explanation be given to the doctor;
- (4) That cheques be sent direct to the doctor;
- (5) That the Canadian Medical Association nominate a doctor to the central board.

Doctor Eric Macdonald moved that this be brought up before the general business session, which was seconded by Doctor P. S. Cochrane and carried.

Report of the Committee on Economics

June 29, 1944

H. G. Grant, M.D.,
Secretary, Nova Scotia Medical Society,
Halifax, Nova Scotia,
Dear Doctor Grant:

The Committee on Economics has kept in touch with the trend and progress of Health Insurance in Canada during the past year.

We regret that many individual members of this Society appear indifferent to any Legislation that appears likely to be introduced. We would strongly urge all members to keep themselves informed on this question. Health Insurance as an enabling bill might be introduced in Parliament at any time.

Various organizations have placed before the Federal Government ideas which are objectionable. At present we must depend on the committee of seven of the Canadian Medical Association to safeguard our interests. As no definite announcement has been made by this body and until such time as they see fit to make a statement, your Committee does not feel it should offer any recommendations. Nevertheless we would call special attention to two important matters.

Your Committee feels that the preventive side of medicine is assuming too large a place in the plans proposed, and views with alarm the concern being displayed by the public health associations towards control of the whole scheme. Instead of any health insurance being placed in operation on a national or Provincial scale for both preventive and curative medicine, we believe that the preventive portion should be first introduced on a national scale. Until this part of any health insurance scheme proves workable only then should the curative side of medicine become part of the national scheme.

Having had experience for many years with remuneration for services on a per capita basis, we are strongly opposed to the proposal of the Association of Canadian Medical Colleges that the profession be remunerated on this basis rather than on a fee for services rendered.

At present the scheme appears to be pigeon-holed, but with a Federal election to take place within the next year, it may be taken up and enacted upon at any time.

Yours truly,

(Sgd.) E. W. Macdonald,
J. G. B. Lynch

Doctor Eric Macdonald moved the adoption of this report which was seconded. It was decided to bring this report up at the general meeting. Motion carried.

Report of the Committee on Industrial Medicine

During the past year, the eyes of the medical world have become more focused on the new branch of practice known as Industrial Medicine, and this has permeated even into Nova Scotia.

In Nova Scotia now, there are a number of men doing full time industrial practice, that is on salary from the employer. The number doing part time has increased quite materially. The steel, shipbuilding and paper industries, and some lumber operations have seen fit to employ part time men, and a few full time men.

During the year your chairman has had the opportunity of attending a meeting of the American Association of Industrial Physicians and Surgeons which was held in Chicago. I also had the honour of being elected a member of that organization. The meeting was an outstanding success and was an education to all who had the pleasure of attending.

At the annual meeting of the Canadian Medical Association in Toronto, I feel the Industrial Medicine section, with its own luncheon, was the outstanding sectional meeting of the convention. Top medical men, connected with Canadian and American industries, the Canadian Armed Forces and Provincial Health Departments, took an active part not only reading papers, but also in the discussion, which was most enlightening to those interested.

The great problem to be solved, not only in the distant future, but at present, is the rehabilitation of our brave men who joined up to do their bit for King and Country. Many of these are returning now, and more shall return later to the industries which they left. These men are definitely entitled to be put back on their own jobs, but if unfit, they should be properly re-allocated.

The disabilities that many of these men are suffering and shall suffer from are visible or can be found on physical examination, but there is also the mental, psychiatric angle which has to be studied for some considerable time before one can come to the proper conclusion.

As this examination has already been completed and reports compiled by the Armed Forces, we, your committee, think this private, confidential information should be obtainable by the medical men connected with industry so that they will be fair and just to these unfortunate workmen, and also be able to

see that they are properly placed. These returning men do not want sympathy, they do not want charity. What they want is justice and the industrial physician has to align himself on the side of justice and see that no harm comes to our heroes, and also, explain to industry their responsibility.

We, your committee, believe that it would be an admirable proposition if a meeting could be arranged between the Nova Scotia branch of the Canadian Manufacturers' Association and the committee of medical men who are going to have to deal with rehabilitation.

If this could be arranged by the Nova Scotia Medical Society at its meeting at White Point, the Nova Scotia Medical Society would be taking the lead, in Canada, in this endeavour.

The changes that shall come as a result of legislation, and the responsibilities of employers towards their employees, from health standards, are going to be of such magnitude that one will have to be on his toes to follow its course and we feel that an active committee of medical men should be formed to keep in touch with the progress of Industrial Medicine.

The above is a short discourse on the present situation, and we hope to keep you informed on any material changes.

The above is respectfully submitted by your committee.

(Sgd.) J. G. B. Lynch, Chairman.

It was moved by Doctor Eric Macdonald and seconded by Doctor MacRae that the new committee on Industrial Committee be given this report to act on it. Carried.

Doctor Muir stated that he could not give a written report on the Provisional Scale of Fees. At the meeting at Kentville last year there was not sufficient opportunity for the members as a whole to mull over the matter so we were asked to carry on, and this year we sent out copies of the scale of fees to each Branch Society asking for their comments and changes. The suggestions for changes are not very great and the matter will be brought up at the second general meeting.

Report of the Workmen's Compensation Board Committee

July 1, 1944

To the Members of the Nova Scotia Branch of the Canadian Medical Association.

Gentlemen:

It has been my pleasure to act as Chairman of the Workmen's Compensation Board Committee, which you know is appointed each year at the annual meeting.

As you know a *Physician's Handbook of Medical Aid* has been published by the Workmen's Compensation Board since our last meeting, which contains many suggestions and also a revision of the scale of fees. This *Handbook* has been sent to every practitioner in the Province, and its contents became effective December 1, 1943. I had the opportunity as Chairman of the Committee, to discuss with the Medical Officers of the Board the revised schedule, and the general trend so far as fees is concerned, little or no change has taken place. There have been some changes, however, and the trend is upward as far as the fee is concerned in most instances. The practice recently

adopted by the Board of supplying members of the profession with form 8 Surgeon's First Report and form 92, Surgeon's Account Form, has been a definite change from the old procedure, and although many members of the profession do not view the matter as favourable, personally I think, after discussing the matter with the Chairman and asking him for their reasons, that it will eventually be to the benefit of the doctor. In that connection I asked the Chairman if he would state the Board's position and views for the change, and I have a letter from Mr. Rowe, the Chairman, which is as follows.

Halifax, N. S., June 29, 1944

Dr. H. K. MacDonald,
37 South Park Street,
Halifax, N. S.

Dear Dr. MacDonald:

You spoke to me some time ago and asked me to comment on the practice recently adopted of supplying members of the medical profession with our Form 8, Surgeon's First Report, and Form 92, Doctor's Account Form.

I think it is quite safe to say that more often than not an accident to a workman is several days, sometimes several weeks, and not at all infrequently months old before the Board knows anything whatever about it. Workmen rarely report their accidents to the Board direct, but for the most part depend upon their employer to do so.

As soon as a report is received by the Board the workman is supplied with a form on which to make out his claim and this, as you know, under the old practice used to be accompanied by a Form 8, which he presented to the doctor. The result was that in a large number of cases the doctor was asked to make out a Surgeon's *First Report*, long after the time when he had first treated the workman and, indeed, in a good many instances, after the workman had fully recovered. Quite frequently by that time the doctor had forgotten a great deal concerning the case and especially, where records were not kept, was placed in the embarrassing position of being quite unable from his own knowledge to fill in the report. The result was that as a *medical report* many of these documents were next to valueless and related for the most part only what the workman could tell the doctor.

Removed as the Board is from them, it is difficult enough to deal properly with these cases in any event, but when reports such as these were constantly coming in, the task was well nigh impossible. It was, therefore, felt that the Board of this Province was long overdue in adopting the custom followed by other Provinces in Canada in supplying these forms to the doctors. It was further felt that by asking the doctor to make this report and see that it was forwarded to the Board, or given to the workman to send in to the Board, early in the game we were imposing no greater duty on him than to have the man make the same request at a later date when the form could be completed only after consulting records or a searching of memory.

Naturally, some confusion arose from the change at first. For example, some doctors sent in two or three Form 8's in succession on the same case. Some used Form 8 in place of our Form 10 (Surgeon's Progress Report), etc. Resulting confusion in this office and maybe requests for explanation or information soon led to dislike and perhaps hostility to the procedure.

We believe this confusion has very largely disappeared and we hope that the dislike or hostility with it. We feel that, if properly handled and with a minimum of thought, no doctor need be more troubled by the new system than he was by the old. The benefit to the workman in getting his claim more speedily dealt with is unquestionable.

As to Form 92 (Account Form), a good many doctors used to complain that workmen came to them alleging an injury received in employment which necessitated one or two treatments and that was the last they ever heard of them. The reason for this was because such cases were never reported by anybody to the Board and, hence, under the old practice,

the doctor was never invited to submit a bill by having the form sent to him. Under the present arrangement he can submit his bill after treatment. This is usually the first notice the Board receives of such cases and, on its receipt, inquiry is made as to the genuineness of the accident and as to the liability of the Board for medical expenses, and in case of liability, the doctor gets his money. Many accounts are being paid in this way that formerly would never have been rendered.

Another matter that I would like to mention is that of an amendment to the Workmen's Compensation Act made at the last Session of the Legislature in which the thirty day restriction on medical aid, under which the Board formerly carried on, was removed. We had hoped to have the *Physician's Handbook*, issued less than a year ago, revised to show the new regulations and in the hands of all doctors prior to this, but circumstances over which we had no control prevented us. We hope to have this shortly. In the meantime all medical men are being advised of the change by circular letter.

May I express through you our appreciation of the co-operation we have received from your profession.

Yours very truly,

(Sgd.) F. Rowe,
Chairman

Another matter I would like to draw your attention to is what Mr. Rowe says in the latter part of his letter, which means that the thirty day period for treatment of the injured workman has been eliminated by the Legislature, all of which is now submitted for your convenience.

Dr. H. K. MacDonald moved the adoption of this report which was seconded by Dr. P. S. Cochrane. Carried.

Report of the Representative on the Executive Committee of the Canadian Medical Association

July 1, 1944

To the Members of the Nova Scotia Branch of the Canadian Medical Association.

Gentlemen:

As your representative on the Executive Committee of the Canadian Medical Association re-appointed at the last meeting of the Society, I have to state that there were five meetings of the Executive, four in Ottawa, and the fifth at the recent annual meeting of the Association in Toronto. Your Executive was represented at all of these meetings, but on account of illness in December last I was unable to attend, and the alternate, Doctor Lynch of Sydney, at very short notice, did attend the meeting.

The meetings of the Executive are well attended by the representatives from the various provinces, and are exceedingly interesting, and many problems concerning the welfare of the Provinces from coast to coast are considered, and as a rule disposed of. Among the many suggestions under consideration which appeared on the agenda from time to time some were more interesting and made more appeal than others. For example, the proposed Bill re Health Insurance. As you know, this question of Health Insurance has been before the Association and the members of the profession for some time, and the thing which struck me most forcibly was the tremendous amount of work and time which have been devoted to this particular subject, and all with the one idea of getting and obtaining the very best for the profession. Doctor Routley,

our General Secretary, and our President, Doctor McPhedran, are with us to-day, and will have a great deal to say concerning this particular matter, and will be ready and pleased to answer any questions members may care to ask.

Another matter which impressed me very forcibly is the necessity for increased membership in the Canadian Medical Association. Right here may I state I am particularly envious of the record Saskatchewan and New Brunswick Branches have attained, namely 100% membership. That is, every physician in these Provinces is a member of their respective Branch of the Canadian Medical Association. Only last year New Brunswick made registration compulsory for every practising physician, and in conversation with the Executive representing that Province and others, I received the emphatic impression that it was well received by the profession and no hardships to anyone resulted. I know this is a matter that is very near and dear to our General Secretary. He can tell you more definitely the need of it and I know he will have something to say concerning the matter. I feel that some action should be taken here at this meeting in order to test out the desirability of such a move on the part of the Branch and when the time arrives for the introduction of new business I hope some action will be taken.

All of which is submitted for your consideration.

Respectfully submitted,

(Sgd.) H. K. MacDonald.

The financial report as published in the minutes of the general business session was next presented by the Treasurer, Doctor Muir, who moved the adoption of this report, which was seconded by Doctor P. S. Cochrane. Carried.

It was moved by Doctor H. K. MacDonald and seconded by Doctor J. P. McGrath that Mrs. M. G. Currie be paid a bonus of \$100.00, and the honorarium to the Treasurer and the Editorial Board, and the salary of the Secretary and the salary of the clerical secretary be authorized for the coming year. This was carried. It was moved by Doctor A. E. Blackett and seconded by Doctor D. M. MacRae that Mrs. Currie receive a bonus of \$200.00 instead of \$100.00. Carried.

Report of the Secretary

Report of the Secretary for the year 1943.

To the President, the Executive and Members of The Medical Society of Nova Scotia:

In spite of the depressing influence of the war the Society has been quite active during the year.

The annual meeting was held in July at the "Cornwallis Inn," Kentville, and in every way was one of the most successful meetings ever held. The scientific programme was varied and of excellent quality, and the Valley Medical Society excelled in kindness and hospitality. There were one hundred and forty-four doctors registered. Doctor D. Selater Lewis, President of the Canadian Medical Association, and Doctor T. C. Routley, the General Secretary, addressed the general session dealing chiefly with the "freezing" of doctors for the war period by the Canadian Medical Procurement and Assignment Board.

A special meeting of the Executive was held at the Dalhousie Public Health Clinic, Halifax, N. S., on Friday, September 10th, at the request of Colonel Arnold of the National Selective Services Department. The purpose of this meeting was to discuss and act on a request from the Department of Labor that the examination of draftees by private physicians be in great part done away with and that medical boards be established at convenient points throughout the province for this purpose. This request, which was promised, did not materialize and consequently the Executive could take no formal action. A friendly resolution was passed asking for a formal request and the President, Doctor Wickwire, was given authority by the Executive to appoint a small committee to deal with this matter at a later date.

On September 26th the President called together his committee to deal with the request of the Department of Labor. There were present Colonel W. C. Arnold, Lt.-Colonel Edgar W. Mingo, President J. C. Wickwire and Doctors P. S. Cochrane, W. G. Colwell, K. A. MacKenzie, M. G. Burris, J. V. Graham and H. G. Grant. After considerable discussion the committee appointed panels for Bridgewater, Liverpool, Digby, Kentville, Amherst, Springhill, Truro, Inverness and Yarmouth. The personnel named for the several centres will be found in the report of the meeting published in the *Bulletin* for October, 1943.

A meeting of the Executive was held at the Dalhousie Public Health Clinic, Halifax, N. S., on October 13th, to consider a request from the Canadian Medical Association regarding an extension of authority to the Canadian Medical Procurement and Assignment Board. The Canadian Medical Association had been asked in September by the Department of Labor whether they would approve of a change in the regulations of the National War Services Regulations which would include physicians. After discussion on the effect of such a change on the physicians of Nova Scotia the following resolution was passed unanimously: "That, if the moving and freezing of doctors as a war measure is necessary, the Executive of The Medical Society approve, providing the authority is vested in the Canadian Medical Procurement and Assignment Board." Those in attendance were President J. C. Wickwire and Doctors P. S. Cochrane, D. M. MacRae, J. P. McGrath, M. R. Elliott, J. R. Corston, Chairman of the Divisional Advisory Board, D. F. McInnis, W. G. Colwell, H. E. Kelley, A. Calder, J. G. B. Lynch, H. J. Pothier, K. P. Hayes, L. M. Morton and H. G. Grant.

Membership. The membership for 1943 totalled three hundred and twenty-five (325). Of these, two hundred and sixty-two were conjoint members of The Medical Society of Nova Scotia and the Canadian Medical Association; 2 of The Medical Society of Nova Scotia only, and sixty-one (61) were in the armed forces. The membership compares favourably with the past few years. There are, however, each year about one hundred and fifty physicians in active practice who do not join the Society. Each year the list is practically the same. This office has attempted in many ways to further increase the membership. We would welcome any suggestions to increase the membership.

(The members stood while the list of obituaries was being read.)

Obituary: The following passed away during the year 1943.

Robert James Macdonald, M.D., University of New York 1894, died at Saskatoon on January 10th, at the age of seventy-six.

John Frank Fraser, M.D., Bellevue Medical College 1892, died at New York on January 31st, at the age of seventy-six.

George William Smith, M.D., Dalhousie 1925, died at Salt Lake City, Utah, on March 22nd, at the age of forty-two.

John William Acheson Greig, M.D., Toronto 1930, died in England on April 6th, at the age of forty.

Ernest Eugene Bissett, M.D., Dalhousie 1897, died at Windsor on April 14th, at the age of seventy-two.

Donald Smith MacIntosh, M.D., died at Montreal on April 11th, at the age of fifty-six.

Alexander Kerr Roy, M.D., Dalhousie 1910, died at North Sydney on July 10th, at the age of sixty-one.

Joseph James Fraser Macaulay, M.D., McGill 1896, died at Boston on July 3rd, at the age of seventy-one.

Stephen Augustus Adlington, M.D., Baltimore 1896, died at Bedford on October 31st.

Leo John LeBlanc, M.D., Dalhousie 1921, died at Cheticamp on November 30th, at the age of fifty-five.

We have maintained close relations with the Canadian Medical Association by correspondence throughout the year.

In the late autumn it was my pleasure to accompany the President, Doctor J. C. Wickwire, on a visit to the Colchester-East Hants, the Cumberland, the Pictou and the Cape Breton Medical Societies.

I wish again to commend the untiring efficiency of the clerical secretary, Mrs. M. G. Currie.

Respectfully submitted.

(Sgd.) H. G. Grant, M.D.,
Secretary

Doctor Grant moved the adoption of this report which was seconded and carried.

Doctor Routley spoke on the matter of one hundred per cent membership and said that the whole question was so vital to the future of Canadian medicine that all Divisions could very well set aside a whole day to discuss it. He ventured to forecast that the next ten year period will be the most vital and perhaps the most critical that the medical profession has ever faced. We saw what happened in Saskatchewan with the C.C.F. sweeping the country.

Doctor Eric Macdonald said he could never see any reason for any man not belonging voluntarily to the Medical Society.

After some further discussion Doctor Gosse moved that the resolution of this afternoon be rescinded and that this Executive recommend to the main session to-morrow that this Society goes on record as being in favour of a compulsory one hundred per cent membership in the Canadian Medical Association and the Nova Scotia Division, and that the incoming executive

committee be empowered to take such necessary action as may be necessary to implement this action. This motion was seconded by Doctor J. S. Murray and carried.

It was decided to nominate the seven members of the Council of the Canadian Medical Association—plus the President and the Secretary, ex officio—from the floor. It was pointed out that the representative on the Executive of the Canadian Medical Association should be one of these seven members and another the representative on the Nominating Committee of the Canadian Medical Association, and an alternate to the representative on the Executive.

It was moved by Doctor MacRae and seconded by Doctor McGrath that Doctor H. K. MacDonald and Doctor Lynch be re-appointed representative and alternate respectively on the Executive of the Canadian Medical Association.

Doctor Grant nominated Doctor J. P. McGrath on the Council.

Doctor Gosse nominated Doctor A. E. Blackett.

Doctor H. K. MacDonald nominated Doctor Eric W. Macdonald.

Doctor McGrath nominated Doctor D. M. MacRae.

Doctor L. M. Morton nominated Doctor W. L. Muir.

As these nominations totalled seven, nominations ceased.

It was moved by Doctor McGrath that Doctor Lynch be the representative on the Nominating Committee of the Canadian Medical Association. This was seconded and carried.

It was moved by Doctor Blackett that the members of the Divisional Medical Advisory Committee be re-appointed, which was seconded by Doctor Muir. Carried.

Doctor Corston stated that there was nothing particular to report regarding the Divisional Medical Advisory Committee. The character of this Advisory Committee has changed somewhat in the past year and it is now a medical advisory committee to the Canadian Medical Procurement and Assignment Board with headquarters at Ottawa, and the committee is not completely a committee of this Society. The work has gone on during the year with frequent meetings. Two or three matters have come within our sphere of action, one to take medical men from the services and fill vacancies throughout the Provinces but this has not been done in this Province yet. The Provincial Division was to pay the salaries of these men who were to be sent to the vacant practices. Another matter which has come under their consideration was the recombining of the whole medical man power, recalling of men who have been deferred by health or other reason, with the idea of getting a few medical men who might be of some service in the armed forces. Through the year they have had several applications from doctors who wished to leave the Province for one purpose or another, and the leaving of the Province is impossible without the granting of an exit permit from the Department of Labor. We have the power to advise against the granting of that permit. There were not any such cases in Nova Scotia. The office facilities of the Department of Health have been at our disposal. This Society owes a debt to the Department of Health. Our local men have also served well and I would like to express a word of appreciation to them.

Doctor Routley said he would like to add a personal word of commendation to Doctor Corston and his committee for their work which had been done so unostentatiously and perfectly for a period of three years, the work had been very considerable.

It was moved by Doctor N. H. Gosse and seconded by Doctor D. M. MacRae that the following doctors be taken in as members of The Medical Society of Nova Scotia. Carried.

Dr. B. F. Graham, Halifax
 Dr. D. V. Graham, Halifax
 Dr. H. Devlin, Halifax
 Dr. G. Murray Smith, Liverpool
 Dr. G. E. Day, New Glasgow
 Dr. R. E. Pugh, North Sydney
 Dr. W. J. Lamond, Sydney Mines

Dr. J. J. Stanton, Canso
 Dr. R. M. Rowter, Bear River
 Dr. W. Leith, Halifax
 Dr. H. G. Quigley, Halifax
 Dr. W. A. MacQuarrie, Trenton
 Dr. Roberta Bond-Nichols, Halifax
 Dr. J. B. Reid, Jr., Halifax

The Secretary advised that a number of the Maritime representatives of the well known pharmaceutical firms had asked him on several occasions whether the Society would not sell space at our annual meetings as the Canadian Medical Association were in the habit of doing. Doctor Routley advised that the money received for advertising space at the annual meetings of the Canadian Medical Association paid for the expense of their meetings. It was moved by Doctor Eric Macdonald and seconded by Doctor Blackett that the Society at future meetings sell advertising space if local conditions allow it and that it be controlled by the Secretary. Carried.

It was agreed that it would be satisfactory if Doctor Muir and Doctor L. M. Morton brought in a report on the provisional scale of fees at the general session next day.

Meeting adjourned at eleven o'clock.

91st Annual Meeting of the Medical Society of Nova Scotia, 1944

FIRST BUSINESS MEETING

THE first general business meeting of the 91st annual meeting of The Medical Society of Nova Scotia was held at White Point Beach Lodge, White Point Beach, Queens County, N. S., on Wednesday, July 5, 1944, at 9.50 a.m.

In the absence of the President, Doctor J. C. Wickwire, and the first Vice-President, Doctor P. S. Cochrane, the meeting was called to order by the Doctor A. E. Blackett, second Vice-President.

Doctor Blackett stated the meeting would be started by requesting the Secretary to read the main points that had been brought up at the executive meeting the day before.

The Secretary: "The executive met yesterday, first at 2.30 p.m., and a second session in the evening at eight, and carried on until shortly after eleven. The first item was that the minutes of the last annual meeting which were published in the NOVA SCOTIA MEDICAL BULLETIN of August, 1943, be accepted as read. This was passed by the meeting.

The next item was a communication from the Cumberland Medical Society and also one from the New Brunswick Medical Society dealing with one hundred per cent membership."

Both letters, as published in the Executive minutes, were read by the Secretary, who advised that Doctor H. K. MacDonald had spoken on this subject and read some notes from Doctor Scammell, the Provincial Registrar, dealing with the same matter. The resolution which was passed by the executive yesterday has to be acted upon this morning, and Doctor Routley was asked to speak.

Doctor Routley addressed the meeting on the necessity of one hundred per cent attendance. He referred to the statement of the Committee on Social Security by Mr. Johnson in which he, Mr. Johnson, stated that the Canadian Medical Association only represented twenty-eight per cent of the doctors of Canada. Doctor Routley stated that he thought the next ten years would be the most critical in the history of Canadian medicine. He pointed out the statement of the C. C. F. that if a doctor received three thousand dollars a year, he was as well paid as a school teacher. He told of the tactics used by the late Honourable Lloyd George in dealing with the doctors in 1912, how he employed two thousand doctors as strike breakers.

Doctor Blackett: "Thank you very much, Doctor Routley. Before asking Doctor Wickwire to take the chair I would like to say that this topic occupied more time on the agenda than any other."

Doctor Wickwire took the chair and asked the Secretary to read the formal resolution which had been passed at the evening session of the executive regarding one hundred per cent membership, which was as follows: "that the resolution of this afternoon be rescinded and that this Executive recommend to the main session tomorrow that this Society goes on record as being in favour of a compulsory one hundred per cent membership in the Canadian

Medical Association and the Nova Scotia Division, and that the incoming executive committee be empowered to take such necessary action as may be necessary to implement this action."

Doctor H. K. MacDonald moved the adoption of this resolution which was seconded by Doctor J. S. Murray. Carried.

Doctor Hill and Doctor J. C. Murray both stated that the Cumberland Medical Society had unanimously agreed to support such a resolution and Doctor Moreash stated that the Valley Medical Society were also in favour of such a resolution.

At this point the President appointed Doctor K. A. MacKenzie, Doctor H. W. Schwartz and Doctor N. H. Gosse a Resolutions Committee.

The Mayor of Liverpool, Mr. Wright, then addressed the meeting and welcomed the members to Queens County.

Doctor McPhedran, the President of the Canadian Medical Association, then spoke briefly, and he was followed by Doctor Routley, the General Secretary of the Canadian Medical Association, who spoke on post-graduate education for returned medical officers. He said there are four thousand Canadian doctors to be established in civil life in this country after the war is over. Two thousand young men who come back will have had no previous location. He stated they had made a survey of Canada and have a card index in Ottawa of every doctor in Canada, giving his age, his specialty, number of doctors in the community, doctors who used to be in his community and the communities in which there are too few or no doctors. He also spoke on Health Insurance and stated that the present draft bill the eleventh, is the latest one of the Social Security Committee. There are no new changes in the Act, but the cost charges have been removed. Doctor Wickwire thanked Doctor Routley.

Doctor McPhedran advised the meeting that he had been in Ottawa last Wednesday at the opening of the officer's mess at Camp Borden which the Canadian Medical Association offered to furnish, and The Medical Society of Nova Scotia have given \$200.00. He told Colonel Ward that he would convey their thanks to The Medical Society of Nova Scotia for the part they took in that gift.

Meeting adjourned for the reading of the scientific papers.

At the annual dinner in the evening Doctor Wickwire presented the names of the Nominating Committee, Doctor J. P. McGrath, Doctor Eric W. Macdonald, Doctor J. R. Corston, Doctor A. E. Blackett and Doctor L. M. Morton, and announced that at the conclusion of the dinner the business session would be resumed.

The first business session was resumed at 10.25 p.m. and was called to order by the President, Doctor Wickwire.

The President stated that the first matter of business was the communication from the Western Nova Scotia Medical Society and read the resolution instructing the Secretary to write to the Army for copies of induction and release records.

He advised that the executive had not passed any resolution regarding the establishment of a psychiatric unit in the new V. G. Hospital.

The President called on the Honourable Doctor F. R. Davis for a few words. Doctor Davis more or less repeated the information he had given at

the executive meeting. He pointed out the needs of the Province and expressed the opinion that a small unit as suggested, namely one of twenty-five to thirty beds, would do little in solving the Provincial situation. He told of the Government plans which on account of war conditions could not at present be put into effect, and that was to remove many of the chronic incurable cases from the Nova Scotia Hospital, to set up travelling clinics in psychiatry, and to establish at Dartmouth a fairly large unit to deal with the cases requiring hospitalization.

Doctor Kenneth MacKenzie then spoke and pointed out the embarrassment of having psychiatric patients in a general medical ward.

Doctor D. M. Cochrane complimented Doctor Davis on his statement and emphasized the point that the country physicians would like to have a place where border line patients could be treated and where the patients would not have to be certified.

Doctor R. O. Jones told of the value of a psychiatric unit, not so much to relieve the provincial situation, but to take care of the psychiatric cases which develop within the hospital and which also are admitted to the hospital as medical or surgical cases.

Doctor Kenneth MacKenzie then asked the Honourable Doctor Davis if any facilities were to be provided in the hospital for psychiatric cases.

Doctor Davis replied that although there were no plans for a separate and distinct psychiatric unit he could assure the meeting that there would be proper facilities for taking care of psychiatric cases.

The next item discussed at the executive was a letter from the Canadian Medical Association concerning fees for soldiers' dependents and gave the resolution which had been passed by the executive for the approval of the general meeting. The five point resolution brought in by Doctor Eric Macdonald and his committee concerning this matter was then read, and it was moved by Doctor Martin and seconded by Doctor Reid that this resolution be accepted. Carried.

The next matter brought up at the executive meeting was the letter from Doctor Atlee as chairman of the Gerald Burns Memorial Fund, as published in the Executive minutes. It was moved by Doctor P. S. Cochrane and seconded by Doctor J. S. Murray that this matter be dropped for the time being. Carried.

The next item was the report of the Editorial Board, as published in the Executive minutes. Doctor Gosse stated that several men had been speaking to him within the last little while and wondered if the BULLETIN could not carry a little more than it has been carrying lately and if some further help could not be given to the overworked Bulletin Editorial Board. He would move that the Society send a note to the Nominating Committee to add two more names to the Editorial Committee and that one of them be Doctor H. L. Scammell. Doctor H. J. Martin did not think that the problem would be solved by adding more men to the committee, but a committee should be appointed to review the whole policy of the BULLETIN. He moved an amendment that a committee be set up to review the policy of the BULLETIN. Seconded by Doctor Gosse and carried.

The financial statement of the Society was next presented by the Treasurer, Dr. W. L. Muir.

FINANCIAL STATEMENT

The Medical Society of Nova Scotia

Year Ending December 31, 1943

RECEIPTS

| | |
|--|------------|
| Cash on hand, January 1, 1943..... | \$2,456.60 |
| Subscriptions..... | 3,785.15 |
| MEDICAL BULLETIN..... | 3,198.94 |
| Halifax Branch Medical Society of Nova Scotia..... | 238.39 |
| Interest on Savings Bank..... | 6.86 |
| | <hr/> |
| | \$9,685.94 |

EXPENDITURES

| | |
|-----------------------------------|------------|
| MEDICAL BULLETIN..... | \$1,989.99 |
| Canadian Medical Association..... | 2,086.00 |
| Sundry Expenses..... | 631.18 |
| Salaries..... | 1,900.00 |
| Cash on Hand, December 31, 1943: | |
| Current Account..... | \$1,702.32 |
| Savings Bank..... | 1,376.45 |
| | <hr/> |
| | 3,078.77 |
| | <hr/> |
| | \$9,685.94 |

PROFIT AND LOSS ACCOUNT

| | |
|---------------------------------------|------------|
| Subscriptions..... | \$1,699.15 |
| MEDICAL BULLETIN..... | 1,208.95 |
| Halifax Branch Medical Society..... | 238.39 |
| Interest..... | 6.86 |
| | <hr/> |
| | \$3,153.35 |
| Less: | |
| Sundry Expenses..... | \$ 631.18 |
| Salaries..... | 1,900.00 |
| | <hr/> |
| | 2,531.18 |
| | <hr/> |
| Net surplus on year's operations..... | \$ 622.17 |

COGSWELL LIBRARY FUND

The Medical Society of Nova Scotia

Year Ending December 31, 1943

RECEIPTS

| | |
|------------------------------------|-----------|
| Cash on Hand, January 1, 1943..... | \$ 93.18 |
| Income..... | 181.99 |
| | <hr/> |
| | \$ 275.17 |

DISBURSEMENTS

| | |
|--|-----------|
| Dalhousie University..... | \$ 180.00 |
| Balance Cash on Hand, December 31, 1943..... | 95.17 |
| | <hr/> |
| | \$ 275.17 |

Dr. Muir moved the adoption of this report which was seconded by Doctor Shankel. Motion carried.

It was moved by Doctor Martin and seconded by Doctor Jones that the honoria to the Treasurer and Editorial Board and the salaries of the Secretary and the clerical secretary and the bonus to the clerical secretary be passed. Carried.

The report of the Secretary as published in the Executive minutes was the next item and it was moved by Doctor D. M. Cochrane and seconded by Doctor P. S. Cochrane that this report be adopted. Motion carried.

It was moved by Doctor A. R. Morton and seconded by Doctor J. S. Murray that the following doctors be taken in as members of The Medical Society of Nova Scotia. Motion carried.

Dr. B. F. Graham, Halifax

Dr. D. V. Graham, Halifax

Dr. H. Devlin, Halifax

Dr. G. Murray Smith, Liverpool

Dr. G. E. Day, New Glasgow

Dr. R. E. Pugh, North Sydney

Dr. W. J. Lamond, Sydney Mines

Dr. J. J. Stanton, Canso

Dr. R. M. Rowter, Bear River

Dr. W. Leith, Halifax

Dr. H. G. Quigley, Halifax

Dr. W. A. MacQuarrie, Trenton

Dr. Roberta Bond-Nichols, Halifax

Dr. J. B. Reid, Jr., Halifax

The next item for discussion was the Provisional Schedule of Fees and it was moved by Doctor P. S. Cochrane and seconded by Doctor MacInnis that the Provisional Schedule of Fees be adopted as an average scale or working basis, that they should come up annually and be changed from time to time. Motion carried.

Meeting adjourned at 11.50 p.m.

SECOND BUSINESS MEETING

The second business meeting of The Medical Society of Nova Scotia was held on the morning of July 6, 1944, at White Point Beach, N. S., at 9.55 a.m.

In the absence of the President, Doctor Wickwire, the meeting was called to order by the first Vice-President, Doctor P. S. Cochrane.

The first item was the report of the Committee on Resolutions.

Dr. K. A. MacKenzie: "The Committee on resolutions beg to submit that the Society carry out the following suggestions, that suitable letters be sent to certain members who are not here on account of illness, Doctor J. J. Cameron of Antigonish, Doctor G. W. T. Farish of Yarmouth, Doctor G. A. MacIntosh of Halifax, Colonel T. A. Lebbetter of Ottawa and Doctor A. McD. Morton of Halifax. That a suitable letter be sent to all members overseas, that a letter of sympathy be sent to Doctor and Mrs. R. H. Sutherland of Pictou. The committee feel that the letter for overseas should be very carefully worded, and that it would be better for a committee to draft them along with the other letters. Another point requested was that if not already done that a roll of honour should be incorporated in the minutes, that a complete list of all our members overseas should be incorporated as a record, or rather than overseas, in the services. I move the adoption of this report." This was seconded by Doctor Gosse and carried. It was moved that the committee for drafting these letters should consist of Doctor Gosse and Doctor Scammell along with the Secretary.

Doctor J. R. Corston: "Mr. President, the last day or two we have been sitting around here and have little time for reflection and I have missed the face of my old friend and colleague, Doctor Ross Millar who used to attend our meetings, when in Nova Scotia, and in his official capacity since he has been in Ottawa. As you know, Doctor Millar passed away recently and was buried at his home in Yarmouth. As far as I know there are no living relatives, and something in memory of him should be put in our minutes. I would therefore move that a minute of this Society be recorded expressing the regret of this Society at the death of Doctor Millar and recording also a tribute to his memory and a life well spent in accordance with the highest ideals of our profession." This was seconded by Doctor Muir. Doctor Corston further stated that a little note should be incorporated in the minutes for the information of future generations. Doctor Gosse made the suggestion that Doctor Corston be requested to prepare the note in connection with the late Doctor Ross Millar for incorporation in the minutes. Carried.

Doctor J. R. Corston moved the following which was seconded by Doctor N. H. Gosse and passed unanimously.

Whereas there occurred at Ottawa, in the month of June, 1944, the death of Doctor James Ross Millar, a former prominent member of this Society when in practice at Amherst, Nova Scotia,

And Whereas, during his long tenure of office with the Department of Pensions and National Health, Doctor Millar rendered outstanding service to the public and the medical profession of Canada,

And Whereas, throughout the years, he maintained close contact with and high regard for his former colleagues in this Society, at whose annual meetings he has been a frequent and welcomed visitor,

Therefore, be it Resolved, that this Society do now place on record its sense of loss in the death of Doctor Millar, and its tribute to the memory of a life well spent in accordance with the highest ideals of our profession.

Doctor Harris McPhedran, President of the Canadian Medical Association, speaking to the resolution expressed the wish that he, representing the national body, be associated with it.

The next item was the report of the Nominating Committee as given below. Place of meeting in 1945; to be decided by the incoming executive.

President, Dr. P. S. Cochrane, Wolfville.

1st Vice-President, Dr. A. E. Blackett, New Glasgow.

2nd Vice-President, Dr. Eric W. Macdonald, Glace Bay.

Treasurer, Dr. W. L. Muir, Halifax.

Secretary, Dr. H. G. Grant, Halifax.

Legislative Committee, Dr. K. A. MacKenzie and Dr. N. H. Gosse, Halifax, with power to add.

Editorial Committee, Drs. H. W. Schwartz, H. L. Scammell and A. L. Murphy, Halifax.

Cancer Committee, Dr. S. R. Johnston and Dr. H. B. Atlee, Halifax and Dr. M. G. Tompkins, Dominion.

Public Health Committee, Dr. P. S. Campbell and Executive of the Nova Scotia Health Officers' Association.

Historical Committee, Drs. H. L. Scammell, H. W. Schwartz and M. D. Morrison, Halifax.

Workmen's Compensation Board—Dr. H. K. MacDonald, Halifax, Dr. V. H. T. Parker, Stellarton, Dr. J. H. L. Simpson, Springhill, Dr. Arthur L. Sutherland, Sydney, Dr. G. V. Burton, Yarmouth.

Medical Museum Committee, Drs. K. A. MacKenzie, D. J. Mackenzie and R. P. Smith, Halifax.

Cogswell Library Committee, Drs. G. H. Murphy, J. W. Merritt and C. W. Holland, Halifax.

Medical Economics Committee, Dr. Eric W. Macdonald, Glace Bay, Dr. J. G. B. Lynch, Sydney with power to add.

Narcotic Drug Committee, Dr. F. V. Woodbury and Dr. C. W. Holland, Halifax, and Dr. M. G. Burris, Dartmouth.

Industrial Medicine Committee, Dr. J. G. B. Lynch, Sydney, Dr. C. B. Crumney, Trenton and Dr. J. C. Wickwire, Liverpool.

Divisional representative on Editorial Board of C. M. A., Dr. H. L. Scammell, Halifax.

Dr. McGrath moved the adoption of this report which was seconded by Doctor J. R. Corston and carried.

The new President, Doctor P. S. Cochrane took the chair and the meeting adjourned to carry on with the scientific programme.

The following is believed to be a complete list of Nova Scotia physicians in the services. If any omissions are noted, we would ask that the correction be sent to this office.

Thomas Burns Acker, Halifax

Carl Raymond Adams, Springhill

Bruce Corbett Archibald, Glace Bay

Charles Harold LeMont Baker, Middle

Musquodoboit

John Henry Baldwin, Barrington Passage

Charles Miller Ballem, New Glasgow

Ralph William McKeen Ballem, Sydney

Allison Houston Barss, Rose Bay

Lynn Elwyn Bashow, Liverpool

John Fabian Bates, New Aberdeen

Robert William Legg, Halifax

Clarence Melville Bethune, Halifax

Gordon Wallace Bethune, Baddeck

Robert William MacAskill Bethune, New

Glasgow

Roderick Owen Bethune, Berwick

Stephen Borden Bird, Liverpool

Shirley Ebenezer Bishop, Kentville

Stanley Scott Bland, Halifax

Ronald Ellsworth Brannen, Barrington

Passage

John Howard Buntain, Kentville

*Gerald Ross Burns, Halifax

Robert Marsden Caldwell, Yarmouth

John George Duncan Campbell, Halifax

Douglas Charles Peter Cantelope, Lun-

enburg

John Herbert Charman, Halifax

Hugh Alexander Chisholm, Halifax

Malcolm James Chisholm, New Waterford

Hugh Ells Christie, Amherst

Lewis Piers Churchill, Shelburne

Basil Kenneth Coady, Halifax

Andrew Stuart Cowie, Wolfville

Adam Browne Crosby, Halifax

James Bruce Crowe, Annapolis Royal

Murray McCulloch Davis, Truro

Connell Edward Avery deWitt, Wolfville

Edward Dudley Dickie, Digby

Clarence Dobson Dixon, Yarmouth

George Darrell Donaldson, Mahone Bay

George Ritchie Douglas, New Glasgow

Francis Alfred Dunsworth, Halifax

Robert Burnell Eaton, Amherst

Henry Charles Schomberg Elliot, Halifax

*William Hazen Embree, Scotsburn

Azold Abe Epstein, New Waterford

James Robert Feindel, Bridgewater

Ewart Adair Fergusson, Weymouth

Peter Daniel Fergusson, Cleveland, Rich-

mond County

George Ronald Forbes, Kentville

John Albert Fownes, Baddeck

Hugh Artworth Fraser, Bridgewater

Kenneth Archibald Fraser, Whycomagh

Raymond Harvey Fraser, New Waterford

Karl Anthony Garten, Halifax

David Gaum, Sydney

Audley Atwood Giffin, Kentville

William Sidney Gilchrist, Pictou
 Samuel Joseph Glick, Halifax
 Howard Irving Goldberg, Halifax
 Clarence Lloyd Gosse, Halifax
 Donald Vye Graham, Halifax

*John William Acheson Greig, Bridgewater
 Carrol Burnell Greene, Canning
 Leo Green, Halifax

Donald MacDonald Grant, Noel
 Edward Richmond Harrigan, Sydney
 Harvey Douglas Hebb, Halifax

Hugh Malcolm Henderson, Halifax
 Leonard Gilbert Holland, Halifax
 Charles Onslow Homans, Hubbards

James Francis Hopkirk, Halifax
 Eric Boyd Howell, Pictou
 Joseph Kent Lyall Irwin, Port Morien

Morris Jacobson, Halifax
 Charles MacLean Jones, Halifax
 Cecil Edwin Kinley, Halifax

James Arnold Langille, Pugwash
 Thomas Alphonsus Lebbetter, Yarmouth
 Roy Dickson Lindsay, Port Hawkesbury

Frederick Creelman Macarthur, Stellarton
 John Allan MacCormick, East Bay

David Graham McCurdy, Glace Bay
 Allen Donald McDonald, New Waterford

Angus James MacDonald, New Germany
 Charles Joseph Macdonald, Halifax
 Donald Wilson MacDonald, Glace Bay

Francis Benedict Macdonald, Glace Bay
 Joseph Baxter MacDonald, Stellarton
 Joseph Augustine MacDougall, Sydney

James Douglas McFetridge, Middle Musquodoboit

Hector Ian MacGregor, Halifax
 Allan Simpson MacIntosh, Bedford
 David Lloyd MacIntosh, Bedford

Olding Carvell Macintosh, Antigonish
 Wilfred MacIsaac, Reserve
 Alexander Miller MacKay, New Glasgow

Hugh Fraser MacKay, New Glasgow
 Harold Ross McKean, Truro
 Donald Sellers MacKeigan, Halifax

Seymour Gordon MacKenzie, Truro
 Robert Gordon MacKenzie, Truro
 Clarence Gordon MacKinnon, Bridgewater

James Gillis MacLean, Glace Bay

*Robert William Maclellan, Halifax
 Frederick Harold MacLeod, Port Hawkesbury

Ian Murray MacLeod, Halifax
 Lloyd Allan MacLeod, Glace Bay
 Francis Neil Macneill, Glace Bay

Archibald Allan McVicar, Sydney
 Frank Gordon Mack, Halifax
 Victor Owen Mader, Halifax

Frank Frederick Phillips Malcolm, Halifax
 Bernard Francis Miller, New Waterford

John Stewart Miller, Halifax
 Fred Arthur Minshull, Halifax
 David Bryant Morris, Windsor

John Kemp Morrison, St. Peter's
 *Lewis Nelson Morrison, Mahone Bay
 Neil Alastair Morrison, New Waterford

Lewis Rupert Morse, Lawrencetown
 Walter Gerald Morson, Halifax
 James Alexander Muir, Port Hawkesbury

George Herman Murphy, Halifax
 Richard Joseph Francis Murphy, Halifax
 Gordon MacGregor Murray, Sydney

Irwin MacKay Murray, Stellarton
 William Arnold Murray, Hillsboro
 Gerald Borden Nichols, Aylesford

John Fraser Nicholson, Sydney
 James Arnold Noble, Halifax
 Edgar Paul Nonamaker, Mahone Bay

Harry Dow O'Brien, Halifax
 John Campbell O'Neill, River Hebert
 Irving Abraham Perlin, Sydney

Ralph Franklin Plumer, Glace Bay
 Donald William Ramsay, New Glasgow
 William Donald Rankin, Halifax

Harold Cecil Read, Elmsdale
 John Burris Reid, Truro
 Ronald Morrison Ritchie, Sydney

Ian Stewart Robb, Halifax
 Harold Robertson, Halifax
 Edwin Fraser Ross, Halifax

Henry Brown Ross, Halifax
 Alexander Kerr Roy, North Sydney
 Killeen Seaman, Liverpool

Arthur Gerald Shane, Yarmouth
 Samuel Jacob Shane, Yarmouth
 Edward David Sherman, Sydney

Sam Siegel, Sydney
 Thaddeus Marcus Sieniewicz, Halifax

Theodore Clare Chalmers Sodero, Gussyborough

Harold Maxim Spiro, New Glasgow

Carl Crealman Stoddard, Halifax

Samuel Clyde Strickland, New Glasgow

Donald Fraser Strickland, New Glasgow

Harvey Francis Sutherland, Glace Bay

James William Sutherland, Amherst

Robert Hiram Sutherland, Pictou

Gerald Pope Tanton, Port Dufferin

Harold Ernest Hudson Taylor, Halifax

Edward Lefferts Thorne, Halifax

Henry John Townsend, Louisbourg

Carl Raymond Trask, Sheet Harbour

Carl William Roderick Tupper, New Glasgow

Joseph Raymond VanHorne, Yarmouth

Francis Eugene Walsh, Springhill

John Alexander Webster, Yarmouth

Bentley Robertson Wilson, Halifax

Harry Edward Wilson, Ship Harbour

Gordon Abbott Winfield, Halifax

Rayfield George Alfred Wood, Lunenburg

John Francis Lydiard Woodbury, Halifax

John Clarendon Worrell, Halifax

John Alexander Fraser Young, Pictou

*Died on active service.

REGISTRATION

91st ANNUAL MEETING

THE MEDICAL SOCIETY OF NOVA SCOTIA

JULY 5th AND 6th, 1944

WHITE POINT BEACH LODGE, WHITE POINT BEACH, N. S.

- Captain S. B. Bird, R.C.A.M.C., Halifax
Dr. A. R. Jensen, Norwegian Medical Service
Dr. E. F. Lampell, Norwegian Public Health Service, Halifax
Dr. R. A. Moreash, Berwick
Dr. F. D. Charman, Truro
Dr. C. S. Marshall, Halifax
Dr. N. H. Gosse, Halifax
Dr. J. E. LeBlanc, West Pubnico
Dr. R. O. Jones, Halifax
Dr. W. C. O'Brien, Yarmouth
Dr. K. A. MacKenzie, Halifax
Dr. J. C. Morrison, Halifax
Dr. Dan Murray, Tatamagouche
Dr. H. W. Schwartz, Halifax
Dr. H. G. Grant, Halifax
Dr. M. J. Macaulay, Sydney
Lt.-Col. J. P. McInerney, R.C.A.M.C., Debert
Major B. A. MacLeod, R.C.A.M.C., Debert
Dr. P. R. Little, Truro
Dr. H. K. MacDonald, Halifax
Dr. J. W. Reid, Halifax
Dr. T. W. Kirkpatrick, Kentville
Dr. D. F. MacInnis, Shubenacadie
Dr. W. J. Dyer, Halifax
Dr. A. F. Miller, Kentville
Dr. D. S. McCurdy, Truro
Dr. R. H. Stoddard, Halifax
Dr. L. M. Morton, Yarmouth
Dr. B. S. Bishop, Kentville
Dr. J. P. McGrath, Kentville
Dr. J. A. Donahoe, Shelburne
Dr. A. L. MacMillan, Baddeck
Dr. S. T. Laufer, Halifax
Dr. Charles J. W. Beekwith, Sydney
Dr. Eric W. Macdonald, Glace Bay
Dr. D. M. MacRae, Halifax
Dr. W. J. Barton, Halifax
Dr. Wallace M. Roy, Halifax
Dr. H. R. Corbett, Glace Bay
Surg. Lt. Cmdr. C. C. Stoddard, R.C.N.V.R., Halifax
Dr. J. G. MacDougall, Halifax
Dr. R. M. Rowter, Bear River
Dr. D. M. Cochrane, River Hebert
Dr. T. R. Ford, Liverpool
Dr. Samuel Marcus, Bridgewater
Dr. J. W. Smith, Liverpool
Dr. T. C. Routley, Toronto
Dr. C. S. Henderson, Parrsboro
Dr. Grace Rice, Halifax
Dr. Florence J. Murray, Halifax
Dr. C. MacLeod, Halifax
Dr. C. A. Donkin, Bridgewater
Surg. Lt. Cmdr. D. H. Starkey, R.C.N.V.R., Halifax
Dr. W. Alan Curry, Halifax
Dr. Jessie A. McG. Macleod, Halifax
Surg. Cmdr. J. W. Macleod, R.C.N.V.R., Halifax
Dr. W. W. Bennett, Bridgewater
Dr. H. A. Giovannetti, Sydney
Dr. Edwin D. Levittan, Guysborough
Dr. H. J. Martin, Sydney Mines
Dr. J. J. MacRitchie, Halifax
Dr. E. A. Broughton, Toronto
Dr. N. A. Philpott, Montreal
Dr. F. J. Melanson, Ste. Anne du Ruisseau
Dr. M. D. Brennan, Dartmouth
Dr. Carmen H. Young, Dartmouth
Dr. H. S. Smith, Caledonia
Dr. B. W. Skinner, Mahone Bay
Dr. E. K. Woodroffe, Chester
Dr. F. J. Barton, New Waterford
Surg. Lt. H. G. Farish, R.C.N.V.R., Vancouver
Dr. F. R. Little, Halifax
Dr. W. K. House, Halifax
Dr. R. H. Sutherland, Pictou
Dr. Harris McPhedran, Toronto
Dr. P. S. Cochrane, Wolfville
Brigadier W. P. Warner, D.D.G.M.S.(P.), Ottawa
Surg. Lieut. Renshaw R.C.N.V.R., Toronto
Surg. Lt. Cmdr. Bingham, R.C.N.V.R., Winnipeg

- Lt.-Col. J. D. Kinsman, R.C.A.M.C.,
Ottawa
- Lt.-Col. W. Hawk, R.C.A.M.C., Ottawa
- Surg. Lt. Cmdr. D. S. Mitchell,
R.C.N.V.R., Halifax
- Dr. Margaret E. B. Gosse
- Dr. F. E. Rice, Sandy Cove
- Dr. W. L. Muir, Halifax
- Dr. J. R. Corston, Halifax
- Dr. D. K. Murray, Liverpool
- Dr. A. R. Morton, Halifax
- Dr. G. W. Turner, Windsor
- Dr. C. B. Crummev, Trenton
- Dr. H. J. Pothier, Weymouth
- Dr. J. S. Murray, River John
- Dr. S. W. Williamson, Yarmouth
- Dr. A. E. Blackett, New Glasgow
- Dr. A. L. Sutherland, Sydney
- Dr. E. L. Eagles, Windsor
- Dr. M. R. Macdonald, Sydney
- Dr. G. G. Simms, Pietou
- Dr. D. J. Mackenzie, Halifax
- Hon. F. R. Davis, Bridgewater
- Dr. G. H. Murphy, Halifax
- Dr. A. L. Murphy, Halifax
- Dr. F. L. Hill, Parrsboro
- Dr. V. D. Schaffner, Kentville
- Sq. Cmdr. W. C. MacKenzie, R.C.N.V.R.,
Sydney
- Lt.-Col. Harvey Sutherland, R.C.A.M.C.,
Sydney
- Dr. J. C. Murray, Springhill
- Dr. J. S. Robertson, Yarmouth
- Dr. D. W. N. Zwicker, Chester
- Dr. Harold Robertson, Halifax
- Dr. J. C. Wickwire, Liverpool
- Dr. V. H. T. Parker, Stellarton
- Dr. P. E. Belliveau, Meteghan
- Dr. F. R. Shankel, Windsor

Correspondence

26 July, 1944

Dr. H. G. Grant,
Secretary,
The Medical Society of Nova Scotia,
Halifax, Nova Scotia.

Dear Dr. Grant,

Your letter of July 22nd is acknowledged, which refers to the disclosure of medical information about discharged members of the Army.

If the written consent of the discharged soldier concerned is obtained, Medical information pertaining to him (or her) can be released provided that the release of such information is not considered by the Department to be prejudicial to the public interest.

This information may be obtained through the District Medical Officer of Military District No. 6. If requests for such information are to become at all frequent it may be necessary, due to a severe shortage of clerical staff and Medical Officers, to impose certain restrictions.

Yours truly,

G. B. Chisholm,
Major-General
Director General of Medical Services