

The
Medical Society of
Nova Scotia



BULLETIN

Vol. 2

Number 3



JULY
1923

Printed by
THE ROSS PRINT LIMITED
HALIFAX

The Medical Society
of Nova Scotia

70th Annual Meeting

Vol. 2 BULLETIN No. 3

JULY, 1923

MEDICAL SUPPLY OR "LOCUM TENENS"

There is one way in which the Provincial Organization can be used to assist individual practitioners, which has not yet been emphasized. The practice in England has been that when a physician took a Post Graduate course or an extended vacation, he arranged with some other physician to take over his work as "locum tenens." This is seldom done in this Province, the work being generally divided up between friendly practitioners, or left to the care of an Assistant.

Any one who visits every county in the Province is aware that there are large districts where one Doctor covers from forty to seventy miles. Only at times when there is little sickness can such a territory be satisfactorily served by one physician.

Each year a number of young men finish their medical training and begin to look around for suitable fields of practice. Too many of them desire to at once begin work in some of the larger centres where they have all laboratory, hospital and consulting facilities. The natural result is that these young men do not receive the benefit of being compelled to furnish the community with medical attendance depending entirely upon their own resources.

In the interests of the recent graduate and the over-worked practitioner, are there not districts where the younger men for a consideration can act as assistants, or as temporary supplies for that practitioner. Will the Profession in Nova Scotia use the Associate-Secretary and the Bulletin as a means of acquainting the Provincial Organization with their needs along this line.

This memo is suggested by a recent letter received from Dr. J. Ellery Pollard, who has recently come from England to Hantsport, is registered and enrolled as a member of the Medical Society of Nova Scotia. He writes that "having just arrived from England and having nothing to do, I should be glad to act as 'locum tenens' for any Doctor taking a holiday or for any other purpose, if not for too long a period. Incidentally, I might say I do no surgery. Should you hear of anything likely to suit, I shall be glad if you will keep me in mind."

In conversation recently, a general practitioner stated that he could employ for two or three years, a recent graduate, paying him a small salary, but defraying all incidental expenses. As a matter of fact this would mean the establishment of this recent graduate in that community, provided he made good.

Please write the Associate-Secretary if you have any ideas along this line.

MEDICAL HEALTH OFFICERS' ASSOCIATION, NINTH ANNUAL MEETING, WINDSOR, JULY 3rd, 1923.

That the health records of Nova Scotia indicated by the vital statistics of the Province for the year 1922 were the best in the history of the Province was one of the striking facts brought out at the Ninth Annual meeting of the Association of Medical Health Officers of Nova Scotia held here to-day.

The general death rate of the Province was 12.5, while the infantile mortality rate for the first time was below the 100 mark, being 97.3. The number of deaths from tuberculosis was 691, the lowest previously recorded figures was 725.

The need of greater expenditure for public health purposes was emphasized by both Dr. Hattie, ex-Public Health Officer for Nova Scotia, and Dr. J. W. S. McCullough, Chief Health Officer for Ontario, whose message, owing to his unavoidable absence, was given through a specially prepared paper read by Dr. Bissett of Windsor. Dr. McCullough contended that the annual expenditure of seventy-five cents per capita of the population was necessary for adequate Public Health work.

The Association was in session morning, afternoon and evening. The evening session was a public meeting attended by many of the townspeople, when Dr. McCullough's address was read, and Dr. Black of Windsor delivered a most intensely interesting review of the history of Preventive Medicine.

Strongly appreciate comment was made regarding Dr. McCullough's paper, and his splendid work in Ontario was held up as a striking instance of the success which would attend genuine endeavor.

There was a full attendance at the convention. Dr. C. W. Bliss, Health Officer, Amherst, President of the Association was in the chair. The morning session was largely taken up with routine business and the discussion of a change in procedure in the collection of morbidity statistics, which would make these statistics more accurate.

The Medical Health Officers present were:

Dr. Bliss, Amherst; Dr. Hattie, Halifax; Dr. G. E. DeWitt, Wolfville; Dr. J. J. Cameron, Antigonish; Dr. J. K. McLeod, Sydney; Dr. Hamilton, Mahone; Dr. McGarry, Canso; Dr. Penny, New Germany; Dr. McLean, Truro; Dr. Shankle, Hantsport; Dr. Bishop, Kentville, Dr. Bissett, Windsor; Dr. Havey, Stewiacke; Dr. Sullivan, Glace Bay; Dr. P. S. Campbell, Halifax; Dr. A. C. Jost, Halifax; Dr. H. A. Chisholm, Halifax; Dr. Armstrong, Bridgetown; Dr. J. A. Duncan, Windsor, formerly of St. John's Nfld.

At the afternoon session a resolution of condolence to the family of Dr. A. J. Deveau, Meteghan, was read and unanimously passed.

Dr. W. H. Hattie, who has for nine years filled the office of Secretary-Treasurer of the Association, to whom, in fact, the credit for the formation of the Association is due, was at his request relieved from his duties of office and made an honorary member of the Asso-

ciation. The Association was heartily in accord in their expression of their opinion of the value of Dr. Hattie's services to the Province during his tenure of the office in the Department of Public Health.

The officers for the ensuing year were elected as follows:

President—Dr. C. S. Marshall, Bridgewater.

1st Vice-President—Dr. D. McDonald, North Sydney.

2nd Vice-President—Dr. E. D. McLean, Truro.

Council—Dr. E. E. Bissett, Windsor; Dr. M. G. Tompkins, Dominion; Dr. F. E. Rice, Sandy Cove; Secretary, Dr. A. C. Jost, Halifax.

Dr. C. W. Bliss, M.H.O., Amherst, delivered the presidential address, and then followed three very interesting and instructive papers. One by Dr. H. A. Chisholm, Inspector of Health, Halifax, who dealt with the Immunization of Diphtheria.

Dr. F. W. Woodbury, Halifax, read a paper on "Special Schick Testing Done at the School for the Blind, Halifax."

Dr. P. S. Campbell, D.M.H.O., Port Hood, C.B., referred to the excessive mortality among the Indians of Nova Scotia, with special reference to Tuberculosis.

Dr. J. W. S. McCullough, Chief Officer of Health of Ontario, prepared a paper which was read by the local Health Officer, Dr. E. E. Bissett. In his address Dr. McCullough stressed the importance of the Medical Health Officer as a part of the Public Health machinery.

"In the conduct of Public Health affairs, you, the Medical Health Officers have the guidance and direction of public opinion. The success and advancement of Preventive Medicine are in your hands."

Successful Public Health administration depends, in Dr. McCullough's opinion, on two main factors:

(1)—The wise expenditure of sufficient money.

(2)—The education, administrative ability, and personality of the Health Officer and his staff.

In connection with the first, an expenditure of seventy-one cents per capita is necessary for adequate Public Health work. Unless a municipality is able and willing to spend a reasonable sum in its health work, the efforts of a Health Officer, be he ever so competent, will not have the results desired.

In connection with the second point raised, Dr. McCullough emphasized the importance of placing competent, full-timed men on duty.

The ordinary medical man attending to Public Health work as part time duty is often financially better off without the questionable distinction of such an office and, consequently, the Municipality suffers.

However, the best educator of all is the Public Health Nurse. One with a liberal nursing education and with, in addition, a special training in Public Health. The Public Health Nurse reaches the home and heart of the mother as no one else, not even the physician can do, as she is trusted and her means of prevention is readily ac-

cepted. There should be a Public Health Nurse under the general supervision of the Local Health Department in every place of two thousand people.

The successful Public Health Nurse must not undertake treatment, except in First Aid or emergency of any kind. Her business is in prevention only or in emergency nursing. No organization of any kind, other than the local authority, with perhaps the supervision and assistance of the Central Health Department, should have any control of the Public Health Nurse. Dual control is like serving of God and Mammon—it cannot endure.

Dr. McCullough strongly favored what he called “combined areas,” which areas should consist of several or more Counties, and towns, under one full time medical officer. This medical officer should have a sufficient number of Public Health Nurses to cover the area, and a sanitary inspector who knows his job, and a stenographer. Such an organization should be subsidized by the Government. This is the type of organization to which we look forward to in Ontario.”

Dr. McCullough in closing his very excellent paper, said: “Advancement in public activities in one part of Canada assists your closest neighbor, New Brunswick, and paves the way for a Ministry of Health with all its attended advantages in Canada, and for similar advances in certain of the Western Provinces. We may, I venture to predict, soon expect progress of the same nature all over Canada.”

Dr. Black's Address was an intensely interesting and very instructive review of the progress of preventive medicine, and methods of saving life. The first modern organization for the prevention of disease on this continent of which any one had knowledge through an authorized record, was the formation of the Massachusetts State Board of Health in 1863. This association was urged to take action because of the awful toll of typhoid fever in the towns bordering the rivers of the state. In 1880 Bacillus Typhosis was first discovered and isolated by Eberth, and five years later by Gaffky. Among the first to make a national fight against typhoid fever were the Japanese who in their war with Russia made a world record. This record for the prevention of typhoid was a brilliant contrast to that of the American Army in the Spanish-American war, when more soldiers died of Enteric Fever at the camp at Miami, Florida, than were killed in the war.

In years when somilation and hygiene were unknow vast epidemics of disease carried off multitudes of the people; for instance in the fourteenth century the plague carried off twenty five millions in Europe.

In Canada Boards of Health had done splendid work Dr. Black said; “Typhoid was much less; human life had been lengthened; and the appalling death rate among children had been reduced and sickness and disease had been lessened.”

The first resolution for the formation of a Federal Board of Health was introduced in parliament in 1907 and again in 1908. Knowledge and education among the people, Dr. Black contended,

would do much. There must be greater knowledge of the benefit of pure air and plenty of light in the homes.

The everlasting gratitude of the profession and the world at large was due to Pasteur, Eberth, Graffky, Lister, Koch and our own Banting of Toronto.

* * * * *

MEDICAL SOCIETY OF NOVA SCOTIA

EXECUTIVE MEETING, TUESDAY, 7.30 P.M., JULY 3rd, 1923
WINDSOR, N. S.

President, Dr. Ross Millar in the chair.

Members present, Drs. Millar, Corston, P. A. McGarry, Walker, J. G. D. Campbell, A. MacIntosh, Reh fuss, J. J. Cameron.

The Minutes of the last Executive Meeting as appearing in Bulletin, Vol. 1., No. 5, were accepted as printed and approved.

It was on motion resolved that the following members of the Profession, having been in practice for over fifty years, be recommended to the Society for election as Honorary Members:—

Daniel McIntosh, M. D., Harvard University, 1871, L.R.C.P.,
Edinburg 1873, Pugwash.

Henry Bently Webster, M. D., Coll. P. and S., N. Y. 1872,
Kentville.

George Erastus DeWitt, M. D., Harvard University 1872,
Wolfville.

Albert Mitchell Perrin, M. D., University N. Y. 1873, Yarmouth.

William Sommerville Woodworth, M. D., Harvard University
1873, Kentville.

It was resolved that the Associate-Secretary make an effort to organize the Doctors in Queens and Shelburne Counties, to be affiliated with other counties if deemed wise.

Resolved that the Executive request the Cape Breton Society to ask the Doctors in Victoria County to unite with their Society.

On motion an application for affiliation of the Eastern Counties Medical Society with the Provincial Society was approved.

A Committee on Obituaries was appointed by the Chair, to consist of the Associate-Secretary and the Secretaries of each Branch Society. The fourteen obituaries as published in the Bulletins during the past year, were on resolution ordered to be considered as the official Obituary report.

With reference to Chiropractors and Irregulars, it was resolved that no action be taken.

It was resolved that the publication of the Bulletin should be continued and that local Secretaries should be requested to furnish material for the same.

On motion the Executive approved of a uniform Schedule of Fees and requested the President to name a committee to report at the next Annual Meeting. This Committee was subsequently named and appears in the list of Officers and Committees.

The resolutions from the Eastern Counties, Valley, Colchester, Hants and Cumberland Counties relative to the creation of a Ministry of Public Health met with the approval of the Executive and on motion were referred to the general meeting.

It was moved, seconded and passed that the Resolution re Public Health Nursing Service from the Halifax and Valley Societies be referred back to these local Societies for re-consideration, and that a copy of Dr. McEachern's latest report be forwarded to them.

It was resolved that the Cancer film be placed in the care of the Secretary-Treasurer to be loaned for exhibition purposes, as may be considered desirable.

The report of the Workmens' Compensation Board was read and ordered referred to the general meeting.

With reference to the work of the Publicity Committee, it was resolved that the Committee be continued, with a request to increase their activities.

With reference to a recommendation of the Organization Committee for a Clinical meeting to be held during the winter, it was resolved to recommend that the matter be laid on the table for the present.

A communication from the Medical Health Officers' Association relative to fees for reporting Vital Statistics was by direction of the President ordered to be brought up before the general meeting.

The President reported that on the request of the General Secretary of the Canadian Medical Association, he had appointed Dr. J. G. MacDougall, a member of the Educational Committee of the C.M.A. This action was approved by the Executive.

The President brought up the matter of the Standardization of Hospitals, and on motion the Executive approved of the principle.

The Meeting adjourned at 12.15.

WINDSOR, N. S., WEDNESDAY, JULY 4th.

Business Session called to order at 9.00 a. m., the President, Dr. Ross Millar in the Chair.

Minutes of the last Annual Meeting as reported in the Bulletin were read by the Associate-Secretary and were approved as read.

On motion of the Associate-Secretary the Minutes of the Executive Meeting held Tuesday evening were accepted as the order of business for this session and were dealt with section by section as follows:—

On motion of Dr. W. B. Moore, seconded by Dr. Hattie the nominations for Honorary Membership as reported were approved.

The recommendations of the Executive for the organization of the Doctors in Queens, Shelburne and Victoria Counties, were approved.

On motion Dr. W. F. McKinnon was elected as a member of the Provincial Executive.

The recommendation of the Executive regarding Obituaries was, on motion of Dr. Cameron, seconded by Dr. Moore adopted, and the Associate-Secretary is required to notify the Secretary of each Branch Society of his election to this committee, and that he is to furnish particulars relative to the deaths of members of the profession in their counties.

It was moved by Dr. DeWitt and seconded by Dr. Sullivan, that the recommendation of the Executive to the effect that the Resolutions from the Halifax and Valley Societies, relative to Public Health Nursing be referred back to those Societies, be and is, herewith approved.

The recommendation of the Executive regarding the Cancer film was also approved by the Society.

The report of the Workmen's Compensation Board passed to the General Committee by the Executive was read as follows:—

“Halifax, N. S., 3rd July, 1923.

“The Workmen's Compensation Board Committee beg to report as follows:

“The duties imposed on your Committee during the year were not numerous. Its principal work arose in behalf of a well-warranted grievance of the Amherst profession.

“Doctors in the Amherst Hospital attending accident cases, referred there from the collieries, received no compensation because their claim did not come technically under the Act, on account of a pre-existing arrangement between the miners and the colliery doctors which covered all medical and surgical services and Hospital fees, both what they were able and unable to do. This was settled by a new agreement which compensates under the Act the services of the Amherst doctors.

“The other was the non-application of the Nova Scotia Act in the matter of compensation for medical services among railway employees. Mr. Paton took the stand that only a change in the Federal Legislation affecting the railway employees would warrant the Board in paying medical compensation. The doctors were advised to ask their Federal representative to have the necessary changes made.

“Apart from what may be described as the official work of your Committee, there were numerous occasions during the year when the Chairman of your Committee discussed with individual members of the Board—and particularly with Dr. Morrison—matters of a controversial, and often of an irritating nature, with a view to the prevention of “incidents,” and the promotion of a better and more sympathetic understanding between the profession and the Compensation Board.

“Your Committee is convinced that a more chastened and broadening spirit is working its way into the judgments of the Board, due doubtless, to the persistent efforts of the Board's Medical Director

to accentuate the importance of the medical interpretation of evidence in many cases coming up for consideration. Dr. Morrison holds strong views on this matter, and his influence on the Board is quite evident to your Committee, and I am sure, is appreciated by the profession in the whole Province.

“There is one other observation your Committee desires to make. There has been no meeting with the Compensation Board in which its President did not remind it that the function of the Board is to administer the law, not to create laws, or amendments thereto. The logical and practical thing to do, then, is to go direct to the Legislature with our requests for amendments to the Act. With a well organized profession such as we now have, we should receive proper consideration. From the standpoint of strengthening our influence with the Compensation Board itself, the policy of seeking the fountain source for redress is also sound. The influence our profession may thus be able to exert on the legislature, I feel sure will be reflected in our dealings with the Board.

“This is the course we recommend in the plea set forth in Dr. Farish’s letter, which will be read before the Society.

“Whether a special legislative committee should be appointed, is a matter which the Society can best decide.

Respectfully submitted,

(Signed) GEORGE H. MURPHY,

Chairman.”

Moved by Dr. Cameron, seconded by Dr. M. E. McGarry, that any grievances against the Workmen’s Compensation Board should first be submitted to the local County Society and the Secretary will then forward them to Dr. Murphy for any proposed amendments or suggestions. Any legislative action desired should be by the instance of this Committee.

Recommendations of the Executive relative to Publicity Committee and the separate Clinical meeting were approved.

On motion of Dr. Corston, seconded by Dr. DeWitt, the Nominating Committee was instructed to name members for the Editorial Board of the Canadian Medical Association Journal.

It was moved by Dr. M. E. McGarry, seconded by Dr. Thomas and passed, that, “as Chiropractors and other Irregulars are gradually disappearing from this Province, no action be taken by the Society at the present time.”

The continuance of the Bulletin was ordered and suggestions made that full particulars regarding the admission of patients into local hospitals should be published from time to time.

With reference to the recommendations of the Executive on resolution favoring the creation of a Ministry of Public Health, it was moved by Dr. Hattie and seconded by Dr. A.W. Miller and passed:—

“That this Society memorialise the Government of Nova Scotia asking that a more liberal appropriation be made for the prosecution of Public Health work in the Province, and that various present

activities of the Department of Public Health, as well as the collection of Vital Statistics be under the administration of a single member of the Government to be known as the Minister of Health and Public Welfare."

It was moved, seconded and passed that a Committee consisting of the Associate-Secretary and Dr. J. G. B. Lynch of Sydney be appointed to consult with Dr. W. F. Read, and a nominee of the Public Health Department regarding payment of fees for making morbidity returns. This action had reference to the resolution and memorandum from the Medical Health Officers' Association. This resolution and memo were as follows:—

"Windsor, July 3rd, 1923.

"The Executive of the Medical Society of Nova Scotia.

"The attached memorandum from the Dominion Council of Health was presented to the Association of Medical Health Officers of Nova Scotia to-day. Considering the importance of the questions therein involved it was decided to submit it to the Medical Society of Nova Scotia for an expression of opinion by the members of that Society.

"It is therefore respectfully requested that the Executive give this matter early consideration and lay it before the Society at its present meeting with a request that it be considered in detail by the various Branches of the Society before the end of October, as the next meeting of the Dominion Council takes place in November.

"This Association appointed as members of a Committee, Dr. W. F. Read of Digby, and one member of the Provincial Health Department and request that the Medical Society appoint two of its members as members of this Committee to collect and prepare the reports of the various Branches of the Society for presentation to the Dominion Council of Health at its next meeting in October.

(Signed) W. H. HATTIE,

*Secty. Association of Medical Health
Officers of Nova Scotia."*

"Report on Improvement of Morbidity Statistics"

"It is recommended that physicians be encouraged to improve the reporting of communicable diseases and to that end the Council should urge:

- (a) That Provincial Government be requested to provide legislation whereby a small fee be paid for each report.
- (b) Recognizing the value of the education of prospective medical men in the value and importance of morbidity statistics, it is recommended that the several Medical Colleges in Canada be requested to provide (in cases where heretofore such has not been done) particular instructions in reference to the importance of morbidity reports.

- (c) That the Federal Department of Health be requested to supply the Provincial Health Departments with the necessary blank forms for the use of physicians in reporting communicable diseases and that a Committee be appointed consisting of:—Dr. McCullough, Dr. Lessard, Dr. Bell, Dr. Seymour, Dr. Jost, with power to add to that number, to consider the form and report at next meeting.

“All of which is respectfully submitted.

(Signed) JOHN W. McCULLOUGH,

Chairman.”

The President announced the Nominating Committee as follows: Dr. W. H. Hattie, Chairman; Drs. Armstrong, Bell, Sullivan and Rehfuß.

The President referred to the matter of the Standardization of Hospitals and spoke of the work being done by Dr. MacEachern, who was present at the meeting.

It was moved by Dr. Corston, seconded by Dr. J. K. McLeod and passed “That the American College of Surgeons be communicated with and appreciation and thanks be forwarded to them.”

A special Committee consisting of Drs. Murphy, Rehfuß, Tompkins, McKeough and Keddy were appointed to consider with the Associate-Secretary, certain phases of organization work.

On motion the meeting adjourned.

AFTERNOON SESSION, JULY 4th, 2.00 P. M.

The first speaker was Dr. David Cheever of the Peter Bent Brigham Hospital, Boston, who gave the Address in Surgery, title, “Factors in Surgical Progress,” which will be published in the Bulletin. Some factors in the History of Surgery were emphasized by Dr. J. G. McDougall in opening the discussion and what can be gained by a study of the Old Masters. Dr. G. H. Murphy intimated that the paper was an inspiration for further efforts along Surgical development. The chief indication for our guidance to-day is to develop Diagnosis.

Dr. John Stewart dealt with the Cancer Problem indicating the work of the American Cancer League—and the Campaign in this Province—the paper being discussed by Drs. H. K. McDonald and Rehfuß.

Dr. A. R. Campbell, Yarmouth, dealt with “Spinal Surgery,” reporting cases. Dr. Hogan dealt chiefly with G.S.W. cases of the Spine, and Dr. Weatherbee considered the importance of early diagnosis.

Dr. MacGeldert presented his paper on Anaesthesia, “The Alleviation of Pain in Childbirth.” Paper was discussed by Dr. O. B. Keddy who complimented this former Windsor citizen on his excellent paper.

Dr. Mack presented his paper illustrated by Lantern Slides, "Some present-day methods of investigation in certain kidney and bladder conditions." Discussion was opened by Dr. Hogan pointing out the assistance furnished by the Urologist and the Radiologist, showing the value of team work. Dr. Keddy pointed out the difficulty of the general country practitioner in dealing with these cases without this special assistance, Dr. W. H. Eagar further illustrated this work by special slides.

Dr. W. H. Eagar's paper was "A Plea for the Advancement of the Standardization of X-Ray Work in Nova Scotia." He advised the equipment of the smaller hospitals to be of a simple and practical nature. Discussion opened by Dr. Murphy referring to the value of the X-Ray in diagnosis. Dr. M. C. Smith, Lynn, referred especially to the early diagnosis of Cancer and the value of the X-Ray in the matter of early diagnosis.

Meeting adjourned.

PUBLIC MEETING, OPERA HOUSE, WEDNESDAY, JULY 6
AT 8 P. M.

President, Dr. Ross Millar, in the Chair.

Mayor J. P. Smith extended a very cordial welcome to the Society, as follows:—

"Mr. Chairman and Gentlemen:—

I am pleased to be able to be present here this evening and it gives me great pleasure to extend to the Members of the Nova Scotia Medical Association a hearty and cordial welcome to Windsor and to hand you the key to our Town during your only too short sojourn here, trusting you will find time to explore it fully, for which I feel you will be well repaid. Being an educational centre, we have many points of Historic interest of which we are justly proud. I consider it Sirs, a great honor to have had your Society select Windsor as its place of meeting. The noble work of your Profession easily puts you in the front ranks of all distinguished callings and I feel the great strides of scientific research now taking place will very shortly result in Prevention instead of Cure as your slogan, to the great benefit of mankind.

I trust you will greatly enjoy your visit and that you will carry away with you pleasant and lasting impressions and will come again."

Dr. John Stewart replied on behalf of the Society in a felicitous manner, recalling his own recollections of early visits to this historic town.

Dr. Ross Millar gave an interesting Presidential Address pointing out especially, concrete results obtained by some of the pioneers in Preventive Medicine. His remarks were prompted by the Anniversary celebration this year of Dr. Jenner's discovery as to the prevention of Small Pox.

Dr. Walker read the following letter from Dr. MacCullough regretting his inability to be present:—

“Dear Dr. Walker:—

“I am in difficulties in respect to my visit to Nova Scotia. As you will have seen by the Press the former Government here was defeated a few days ago and a new administration is underway.

“It is generally understood that the new Government purposes to establish a Ministry of Health, and yesterday, the gentleman who is probably the Minister-elect called on me on the telephone and said he should come to see me shortly regarding re-organization matters. In addition, my first assistant died a week or so ago and no successor has as yet been appointed. Under the circumstances I feel it would hardly do for me to be absent next week. I assure you I regret that circumstances force me to this conclusion. The best I can do is to forward you the addresses I proposed to read. The one for the Health Officers, Dr. Jost would perhaps undertake to read for me. I leave the other two to your disposition.

“I should be greatly obliged if you will give the members of the Medical Society my sincere regrets that, for the reasons given, I am unable to have the pleasure of meeting them this year.

With kind regards.”

Dr. K. A. MacKenzie gave a short talk on “Insulin” in order that the public generally might have a definite idea of the value of this treatment in the care of cases of Diabetes.

The President made announcements with reference to programme for Thursday, upon which the meeting adjourned.

EXECUTIVE MEETING, THURSDAY, JULY 5th, 1923, 9 A. M.

Meeting called to order by the President.

The Secretary-Treasurer submitted his report which, with the Auditor's report, was referred to the general meeting.

Dr. L. W. Johnstone brought up the matter of programme for the next Annual Meeting. It was resolved that the Executive recommend for future meetings a programme of four papers,—Medicine, Surgery, Obstetrics and one general subject. It was further recommended that a special Committee be appointed to arrange the next Annual programme.

The Executive approved of the idea of a Summer School as outlined by Dr. Hattie to be referred to the general meeting.

Dr. Eagar presented the following resolution, which was referred to the general meeting for approval:—“WHEREAS owing to the dangers attendant on the use of the X-Ray for diagnostic and treatment purposes; RESOLVED that this Society appoint a Committee to consider the most desirable means of controlling the use of the X-Ray and the qualifications of technicians and to report at the next Annual Meeting.

General Meeting called to order 9.45 a. m.

President in the Chair.

The recommendations of the Executive were dealt with as follows:

I.—Moved by Dr. Reh fuss, seconded by Dr. Johnstone and passed unanimously, that the programme for the next Annual Meeting be limited to four papers,—Medicine, Surgery, Obstetrics, and one general subject.

II.—Moved by Dr. McKeough, seconded by Dr. Keddy and passed, that the Associate-Secretary communicate with the Secretaries of the affiliated Societies asking the County Society to submit names of their members who will undertake to be present at the meeting and discuss such special papers, which they may prefer, and that after these men have finished their comments of the paper, general discussion will follow.

III.—Moved by Dr. Keddy, seconded by Dr. Cameron, that the Committee appointed to look after the papers for next year will include two members for Cape Breton Society and one from the Eastern Counties Society.

IV.—On motion of Dr. Nicholls, seconded by Dr. McGarry, the meeting expressed its approval of the plans submitted for a Summer School of Medicine in Halifax.

V.—On motion the resolution of Dr. Eagar, as presented to the Executive was adopted.

VI.—The report of the Secretary-Treasurer together with the Auditor's Report is as follows:—

On motion these reports were adopted.

REPORT OF SECRETARY-TREASURER

EXPENDITURES

Commerce Printing Co., Sydney	\$ 28.50
Stenographers, Sydney Meeting	30.00
Canadian Medical Association Fees	180.02
Salary Associate-Secretary	1200.00
Expenses of Associate-Secretary	287.26
The Ross Print, Halifax	624.28
Eastern Film Corporation	85.00
Dr. John Stewart (Customs dues on film)	5.10
Dr. D. Fraser Harris	14.00
Expenses October Meeting of Executive	51.05
Eastern Canada Savings & Loan Co.	5.00
Expenses Secretary-Treasurer, (Sydney Meeting, stamps exchange, etc.	36.61
Government Tax on overdraft04
TOTAL	\$2546.86

O.K.—C. S. Morton,

A. E. MacKintosh.

July 4th, 1923.

RECEIPTS

Balance July 5th, 1922, Royal Bank	\$1790.85
Fees received at Sydney Meeting	376.68
Refund from C. M. A.	79.17
Balance from Secretary Organization Fund	1473.27
Membership fees 1923 collected by Assoc.-Secty.	1898.92
Membership fee cheques for Deposit from Assoc. Secty. .	80.00
Interest on Savings Deposit Royal Bank	16.02
TOTAL	\$5714.91
Total Receipts	\$5714.91
Total Expenditures.....	2546.86
Balance	\$3168.05

O.K.—Dr. C. S. Morton,
 DR. A. E. MacKintosh. July 4th, 1923.

Three outstanding cheques	\$ 689.64
Bank Balance	3857.69
Balance July 3rd, 1923	\$3168.05

J. G. D. CAMPBELL,
Secty.-Treas.

COGSWELL LIBRARY FUND

RECEIPTS

Balance, July 5th, 1922	\$ 180.07
Bank Interest14
Deposited July 3rd, 1923, (less .25 charge)	174.75
Total	\$ 354.96

EXPENDITURE

August 22nd, 1922, to Dalhousie College	\$175.00
Total	\$175.00

Balance on deposit in Bank of Commerce, July 3rd, 1923 \$179.96

O.K.—C. S. Morton, J. G. D. CAMPBELL,
 A. E. MacKintosh. *Secretary-Treasurer,*
 July 4th, 1923. *Medical Society, N. S.*

AUDITOR'S REPORT

To the Members of Nova Scotia Medical Society:—

This is to certify that we have this 4-7-23 examined the books, vouchers, etc. of the Secretary-Treasurer, Dr. J. G. D. Campbell, and have found the same correct. We find that there is a balance to the credit of the Society of \$3168.05 deposited in the Bank.

(Signed) C. S. MORTON,
A. E. MACKINTOSH.

Windsor, N. S. 4-7-23.

* * * * *

The Nominating Committee submitted the following report which was on motion adopted:—

PLACE OF MEETING, AMHERST, N. S.

President Dr. O. B. Keddy, Windsor, N. S.
1st Vice-President Dr. W. N. Reh fuss, Bridgewater
2nd Vice-President Dr. J. J. Roy, Sydney, N. S.
Secretary-Treasurer Dr. J. G. D. Campbell, Halifax, N. S.
Associate-Secretary Dr. S. L. Walker, Halifax, N. S.

Cape Breton Branch:

Dr. M. G. Tompkins, Dominion
Dr. D. W. Archibald, Sydney Mines
Dr. John MacDonald, Sydney

Pictou County Branch:

Dr. John Bell., New Glasgow
Dr. S. G. MacKenzie, Westville

Lunenburg-Queens Branch:

Dr. G. MacLellan, Lunenburg
Dr. W. N. Reh fuss, Bridgewater

Eastern Counties Branch:

Dr. W. F. MacKinnon, Antigonish

Halifax County Branch

Dr. M. G. Burris
Dr. K. A. McKenzie
Dr. G. H. Murphy
Dr. C. S. Morton
Dr. J. R. Corston

Valley Branch:

Dr. G. J. McNally, Berwick
Dr. L. R. Morse, Lawrencetown
Dr. W. F. Read, Digby

Yarmouth Medical Society

Dr. A. J. Fuller, Yarmouth

Colchester-Hants Medical Society:

Dr. E. E. Bissett, Windsor
Dr. F. F. Eaton, Truro

Cumberland Medical Society:

Dr. J. A. Munro, Amherst
Dr. D. Mackintosh, Pugwash

Committee on the Cogswell Library

Dr. A. G. Nicholls, Halifax, (Chairman)
Dr. J. R. Corston, Halifax, N. S.
Dr. John Stewart, Halifax, N. S.
Dr. P. Weatherbee, Halifax, N. S.
Dr. C. S. Morton, Halifax, N. S.

Committee on Public Health

Dr. M. E. Armstrong, Bridgetown, N. S.,
(Chairman)
Dr. Edgar Douglas, Halifax, N. S.
Dr. J. K. McLeod, Sydney, N. S.
Dr. Clarence Miller, New Glasgow, N. S.
Dr. L. P. Churchill, Shelburne, N. S.

Committee of Arrangement

The Medical men of the Cumberland
County Branch of the Medical Society
of Nova Scotia.

Executive C. M. A

Dr. H. K. MacDonald, Halifax N. S.
Dr. John Bell, New Glasgow, N. S.

Council, C. M. A.

The President, Ex Officio.
 Dr. G. H. Murphy, Halifax, N. S.
 Dr. W. J. Egan, Sydney, N. S.
 Dr. A. S. Simpson, Bridgewater, N. S.

Committee on Uniform Schedule of Fees

Dr. W. N. Rehfuss
 Dr. Ross Millar
 Dr. M. G. Burris
 Dr. O. B. Keddy
 Dr. S. L. Walker

Elections to Provincial Medical Board

Dr. J. G. McDougall, Halifax, N. S.
 Dr. W. B. Moore, Kentville, N. S.
 Dr. C. S. Marshall, Bridgewater, N. S.
 Dr. G. W. T. Farrish, Yarmouth, N. S.
 Dr. J. J. Roy, Sydney, N. S.
 Dr. John Bell, New Glasgow, N. S.

The President named the following Committees:—

Programme Committee:
 Dr. O. B. Keddy
 Dr. S. L. Walker
 Dr. W. F. MacKinnon
 Dr. J. G. B. Lynch
 Dr. L. W. Johnstone

Elections to Editorial Board, C. M. A. Journal

Dr. W. H. Hattie
 Dr. G. H. Murphy
 Dr. J. G. McDougall
 Dr. Kenneth MacKenzie
 Dr. A. G. Nicholls
 Dr. E. V. Hogan

Committee on X-Ray Resolution:
 Dr. W. H. Eagar
 Dr. S. R. Johnston
 Dr. A. E. Blackett

Committee on Obituaries:
 The Associate-Secretary and the Secretaries of affiliated Branches.

Moved by Dr. Rehfuss, seconded by Dr. Sullivan that the report of the Associate-Secretary be accepted as printed and distributed.

The Address in Medicine was then given by Dr. A. H. Gordon, of Montreal. Subject, "Some Aspects of Migraine." This was excellently received and it was requested that the same be published in the Bulletin. The discussion was carried on by Dr. K. A. McKenzie, especially thanking Dr. Gordon for his paper; by Dr. Moore who brought out the extent of this disabling condition, and further endorsed by Drs. Eagar, Bissett and Nicholls.

Dr. M. E. McGarry presented a paper entitled "Reflections to Inspire and Encourage the Doctor." The discussion was carried on by Doctors Jordan Smith, Hallet, and W. B. Moore. On resolution it was recommended that this paper be published in the Bulletin.

It was moved by Dr. S. L. Walker, seconded by Dr. W. B. Moore, that this Society express its regret that Dr. J. W. S. McCullough, Chief Health Officer, of Ontario, was compelled to drop his proposed visit to the Medical Society of Nova Scotia. His papers were presented to the Society by title, and the conclusions therein contained were recorded as being desirable material for publication in the Society Bulletin.

Dr. A. G. Nicholls of Dalhousie University then presented and demonstrated to the Society a number of cases of Pathological Brain conditions, due primarily to Cerebral Haemorrhage. Causes for these haemorrhages were indicated as due to Trauma, Infections, Heredity, Arterial Degeneration, Brain Tumor, and other general diseases. The discussion was carried out by Drs. Gordon, Lebbetter and Keddy.

Society then adjourned for luncheon prior to which a group picture was taken.

THURSDAY AFTERNOON, 2 P. M.

Meeting called to order the President in the Chair.

On motion it was resolved that the minutes of previous sessions be accepted as recorded and be duly printed in the Bulletin.

It was announced that a record enrollment of 107 had been made and that over 50% of the active practicing physicians of the Province were paid up members of the Provincial Society.

Dr. S. R. Johnston presented his paper on the "Diagnosis of Disease of the Intestinal Tract particularly from the Roentgenological Standpoint." (Dr. Johnston's paper discussed by Drs. D. J. McDonald, M. A. B. Smith, and W. H. Eagar.

Dr. G. B. Wiswell presented a paper entitled "Systemic Infections and their Relations to Nutrition in Infants." The discussion was by Dr. T. A. Lebbetter and Dr. S. J. McLennan.

"The Value of D'Espine's Sign" was the title of a thoughtful paper by Dr. Sieniewicz.

Dr. W. H. Hattie presented the paper of Dr. Lawlor on Mental Hygiene which was discussed by Dr. Hattie, Dr. Cameron and others.

It was moved by Dr. Walker, seconded by Dr. Thomas and passed that a special Committee be appointed to consider matter suggested by the paper and to report at the next Annual Meeting. The Chair named the following,—Doctors Hattie, Cameron, Lawlor, W. F. Read and Walker.

On motion of Dr. Hattie the Society expressed its appreciation of the visit of Doctors Cheever, Gordon and Geldert to the Society with hearty thanks for the papers presented. Also the Society expressed appreciation of courtesies extended by the local Doctors and the citizens of Windsor.

At 4.30 p. m. the meeting adjourned to meet at Amherst on the first Wednesday in July in 1924.

(Signed) J. G. D. CAMPBELL,

Secty.-Treas.

ANNUAL REPORT OF THE ASSOCIATE-SECRETARY, 1923

Halifax, N. S., June 30th, 1923.

To the Medical Society of Nova Scotia:—

Your Associate-Secretary would present herewith his second Annual Report having now filled this office since December, 1921.

Upon the conclusion of the last Annual Meeting at Sydney it was noted that seventy-eight doctors of the Province had registered attendance, and we started 1923 with about one hundred members. The paid up membership to date is, in the Nova Scotia and the Canadian Associations, one hundred and nine (109). Members paying Nova Scotia fee only, ninety-two (92), to this add eleven (11) honorary members, and the total membership list for the Nova Scotia Society amounts to two hundred and twelve (212), two hundred and one (201) of whom pay \$10.00 annually to the Provincial Society. The present Mailing List for the Quarterly Bulletin gives four hundred and fifty (450) names. We thus lack thirteen of having 50% of the practising physicians enrolled in the Provincial organization. This will of course be overcome at the Windsor meeting, so that we may conclude that 50% of the members in the Province are now members of the Provincial Society.

This percentage of paid up members compares very favorably with other Provinces, some of whom have been definitely organized for a considerable period of time. The coming year should see at least 75% of practising physicians members of the Provincial organization.

Even at this late date there would appear to be in the minds of many doctors, some confusion regarding qualifications for membership in the Local, Provincial and Canadian Associations. By action of the C.M.A. and the M.S. of N.S. the annual membership fee for both societies is \$20.00, and no one can hold membership in the Canadian Association without being in good standing in the Provincial. In view of the very definite movement towards making membership in the Canadian body of greater value to the doctor, it is fully expected that Canadian membership will increase 50%, which is practically the same increase we should expect in our Provincial Society.

The following Societies are affiliated with the Provincial Society and have nominated members for the Provincial Executive:—

The Cape Breton Medical Society, the Halifax Medical Society, the Valley Medical Society, the Coldhester-Hants Medical Society, the Lunenburg-Queens Medical Society, the Yarmouth County Medical Society, the Cumberland County Medical Society, the Pictou County Medical Society, and the Eastern Counties Medical Society, finally organized and officers elected June 5th, 1923, and now applying for affiliation.

The organization of the Eastern Counties Medical Society comprises Antigonish, Guysboro, Inverness and Richmond Counties, thus completing local organizations in the Province, save for the Counties of Shelburne and Victoria. It may be added that for some time the Queens-Lunenburg Society has not been attended by Queens County Doctors. It would appear desirable therefore that the Doctors of Queens and Shelburne should if possible, confer with each other looking towards organization, and that the Cape Breton Society should make overtures to the Doctors of Victoria county, in order that local society membership may be possible for all practising physicians.

To what extent can the Provincial Society aid the Branch Societies and how can Branch Societies aid the Provincial Organization? A number of points are readily noted. The Provincial Society from time to time can defray railway expenses of physicians or surgeons to deliver addresses or present papers before local societies. This has been done to a very considerable extent during the past year. It must be understood that Local Branches should assist other Branches and not call upon the Centres of Halifax and Sydney for every meeting. Local Branches will fail if they do not develop local speakers. There must be co-operation between Branches besides dependence upon the Provincial Association.

The new Constitution for Branch societies provides that the collection of annual fees for the C.M.A. and the M.S. of N.S. shall be by the Associate-Secretary of the Provincial Society, but it also provides that by an arrangement it may include the collection of fees for the local organizations. Possibly action might be taken along this line by the Society at this Annual Meeting. It is suggested that the \$10.00 Provincial fee include local membership fees and that the local society should receive a sum not exceeding \$1.00 per member from the Provincial organization. Whether or not this would be an improvement over the present methods is a matter for careful consideration.

As there were many matters of great importance to the profession to be considered at the Annual Meeting of the C.M.A. your Associate-Secretary attended that meeting and would present the following, as a very meagre report, of business transacted and professional programme presented.

CANADIAN MEDICAL ASSOCIATION MEETING

June 11th, 12th, 13th, and 14th.

Doctors present from Nova Scotia:—

DR. H. K. McDONALD
DR. ROSS MILLAR
DR. ALAN CUNNINGHAM
DR. J. S. BREAN
DR. J. J. ROY
DR. T. J. EGAN
DR. W. H. HATTIE
DR. J. W. T. PENNY
DR. J. A. SPONAGLE
DR. JOHN STEWART
DR. S. L. WALKER
DR. W. L. MUIR

DR. S. A. FULTON
DR. DANEIL MURRAY
DR. D. W. HOARE
DR. C. E. A. DeWITT
DR. FREEMAN O'NEIL
DR. W. N. COCHRAN
DR. J. A. DAVIES
DR. A. E. G. FORBES
DR. A. S. BURNS
DR. M. R. ELLIOTT
DR. W. H. EAGAR

Practically all routine business of the Association is considered and dealt with by the Council at the preliminary meeting on Monday, or at special meetings held during the session. Among some of the points dealt with was the report of the Legislative Committee. It was recommended that each Provincial Division should appoint a member of that Division, who would act on the Legislative Committee. In this Committee's report it was pointed out that whereas two years ago 60,000 patent medicines were registered, at the present time there are but 6,000. It was further considered in view of the supervision of educational courses, that one Dominion examination should be sufficient to enable one to register in any Province. A Resolution was passed, requesting that the Executive of the Canadian Medical Association arrange for a conference each year on medical education.

The Educational Committee presented a very interesting report, which emphasized particularly the value of clinical instruction. There seems to be a decided tendency on the part of the Council to insist upon clinical bedside instruction, with not so much importance being attached to laboratory work.

It was very clearly emphasized that the medical profession owed a very substantial obligation to the public in the matter of public education in the prevention of disease. At provincial meetings at least one full session should be devoted to topics concerning the instruction of the public on health matters. This Committee also endorsed the idea of an annual Medical Education Conference.

The Council recommended that the next Annual Meeting be held in Ottawa, and that Dr. Kidd, of Ottawa, be the President-elect. The matter of affiliation of the C.M.A. with the B.M.A. was left to the new Executive to make effective, if conditions were satisfactory.

A very pertinent question was asked as to what the physician gets for his \$10.00 fee in the C.M.A. While it was recognized that the subscription to the Journal, the Annual Meetings, and such personal

benefits as arise from meeting with fellow practitioners had a definite value, still it was pointed out that more practical service could be given. This was indicated along one particular line, that of insurance—life, sickness, accident, fire, as well as protection against law suits. The whole matter was referred to the new Executive, to see if amendments could not be made whereby the Canadian Association would pay the fees in the Canadian Protective Association of all its members. This, of course, would be a very great advantage and would demonstrate very fully the value of membership in the Canadian organization.

The regular programme of the Session began on Tuesday with papers by Dr. Thompson, of McGill, and Dr. Ferguson, of Moncton. The whole forenoon session was devoted to infections or injuries of the hand or fore arm; further papers given by Dr. Gunn, Dr. McTaggart and Dr. Wyatt, dealt in particular with the economic points that arise from these injuries in connection with Workmen's Compensation Boards. It was felt that there should be greater unanimity in the findings of these Boards regarding the extent of disabilities, so that percentages of disability in various provinces would be placed upon the same level.

At the luncheon routine business matters were considered by the Association. The Secretary reported that the financial affairs of the Association were in very much better shape than they had ever been before. Instead of a deficit there was a surplus of \$7,000.00 on the year's transactions. It was announced that \$2,000.00 of the Bonds that were issued two years ago would be cancelled at once. A report was made regarding uniform life insurance examination fee. The majority of insurance companies did not feel that they could accept the \$5.00 minimum fee. At the same time, it was very clearly brought out that in all sections of the Dominion where the physicians refused to examine for less than \$5.00 this fee was invariably paid by all companies.

With the admission of the Province of Quebec as affiliated with the Canadian Medical Association, the announcement was made that every province in the Dominion was now lined up in affiliation with the Dominion-wide organization.

Reference was made to exemptions that doctors should have in connection with the Income Tax. It is proposed that the expenses of attending medical meetings should come in the same category as expenses of the staff of any industrial concern attending a conference relating to their immediate business. Such expenses are regarded as legitimate firm business, and are subject to exemption. This will probably be put into effect this coming year.

It was further recommended that an abatement of \$500.00 be made for each dependant child.

In view of the sad death of Dr. Scane, Dr. A. T. Bazin of Montreal, was named Honorary Treasurer. Dr. T. C. Routley, of Toronto, was appointed General Secretary.

The Council pledged itself to stand behind the various Provinces in their efforts to secure proper recognition from the several Workmen's Compensation Boards. In order to assist in provincial organization, Dr. Tees, Dr. Marlow and Dr. Routley were appointed a committee of three to visit all the provinces, meeting the various medical societies and presenting to them the aims and ideals of the Canadian Medical Association.

The membership term in the Council of five members having expired, re-elections, and new appointments were made. The re-elected and newly appointed members of the Council were Drs. K. A. McKenzie, McDougall, Munro, Galbraith, McEachren, Pinault and Brown.

The address at the luncheon was delivered by Dr. R. Boulet, President College of Physicians and Surgeons, Quebec. He spoke eloquently in French, describing the trip that the American College of Physicians and Surgeons had had recently to South America. I did succeed in understanding at one stage of his address that he was paying a very fine compliment to Dr. J. G. McDougall, for the manner in which he discharged his official duties as Acting President of the Congress.

The afternoon meeting was characterized by two splendid Addresses. The first was by Dr. Mayo, of Rochester, who considered "Septic factors in the Great Plagues", in particular cancerous conditions in the intestinal tract. Perhaps of even greater interest to the largest number was the Orthopaedic Clinic conducted by Sir Robert Jones, of Liverpool. All who were present appreciated very fully the splendid manner in which Sir Robert explained and illustrated various conditions of bones and joints. He first spoke of arthritic conditions. One-third of all deformities in England he considered to be due to tuberculosis of joints, and in this connection he emphasized the very great necessity of all communities endeavoring, as far as possible, to improve the milk supply, which is a very necessary factor in preventing these conditions. Pain is not always present. In tuberculosis of the spine, movements in all directions are affected. If range of movement increases by use, the patient is regarded as improving. Reference was made to sound vs. unsound ankylosis; excision in children was seldom, if ever, required. He emphasized particularly in these conditions the four essentials of treatment—rest, food, open air and sunshine, particularly the last two. He illustrated by patients, points relative to elbow, knee, hip and shoulder joint conditions and gave an illustration of routine examination. Dealing with fractures, he pointed out that the chief causes of poor union were inefficient fixation, faulty alignment and neglect of contour of the limb, and particularly the tendency towards posterior displacement in fractures near joints. He illustrated his points by reference to Colles' fracture. He mentioned that callous does not become hard bone as quickly as the practitioner has generally believed, at least six months often elapsed. With reference to delayed union, he intimated that perhaps the surgeon was a little impatient and expected it sooner than was

reasonable. If his fixation is correct, then wait. A point emphasized was that the surgeon should always have in mind the possible deformity that might result from bad union and should anticipate this in his treatment. He said not to do tendon transplantation unless there is a very reasonable prospect of success. As far as possible, efforts should be made to preserve knee and ankle action in fractures near these joints. He gave a very interesting talk on club foot and demonstrated correction of the same by the use of a special wrench. The patient was anaesthetized, the deformity was reduced, and necessary plaster bandages applied.

Tuesday evening's session took the form of a Reception in the Ball Room of the Mount Royal Hotel. Dr. Grondin, President of the Quebec Medical Association, reviewed the recent work of that Association. Reference was made to the grants by the Quebec Government to Laval graduates to take special work in Paris. Last year 15 students were given \$1200.00 per year for three years for this purpose.

Sir Arthur Currie presented the Official Welcome to the Association. He emphasized the real object of such Conventions to be not selfish, but primarily in the interest of the public. More perhaps than any other profession, the Doctors had high ideals, were leaders in all efforts to lessen human ills and to prevent the ravages of disease, and were more altruistic in all their relations to the public.

Reference is made elsewhere to the address of Dr. McEachren. A real treat was furnished by Dr. Kinnear-Wilson, London, who gave an interesting, pleasing, and kindly humorous description of "Queen Square Hospital and the Men Who Made It." Dancing followed and refreshments were served.

Wednesday forenoon was devoted to Clinics in several of the Hospitals. At the luncheon the new Executive was instructed to take steps to have a motor marker, a green cross, to distinguish cars of Doctors. Resolutions of appreciation, and requesting Federal recognition, of the work of Dr. Banting and his associates were passed.

Sir Robert Jones referred to the present cordial relations of the general surgeon and the orthopedic surgeon. To a very marked degree the recent War knit closely the friendship of the Doctors of England and Canada. Joint meetings of B.M.A. and C.M.A. would be very welcome, as we are one household and full of family pride. Later the Association endorsed a proposal to invite the B.M.A. to meet with the C.M.A. at Winnipeg in 1926 or 1927.

Industrial Medicine was the topic considered by Dr. Wyatt, with reference to model factory systems, prevention of accidents and disease, supervision of employees, early restoration of injured workmen, better co-operation with Compensation Boards, the necessity of periodic examinations, and the all round fair play brought about by industrial health work. More than ever before the Medical Profession must face large Social and Economic problems and aid in their solution.

Dr. K. A. McKenzie's paper was one of the best of the session and will be available for the profession at an early date.

Dr. Graham dealt with Pleural Affections as due generally to exposure or trauma and tuberculosis.

Dr. Banting, a boyish appearing man, generally looking over his glasses up in the air, was enthusiastically received. He summarized the recommendations of the Clinical Committee with reference to the general treatment and management of patients receiving Insulin.

Dr. Boyd of Winnipeg, reported the second epidemic in that city of Encephalitis Lethargica, noting its extraordinary variations.

At the Banquet in the evening, Sir Robert Jones was given a wonderful reception. He was much affected by its sincerity and in response to the song "Will Ye No Come Back Again," expressed the hope that the B.M.A. would soon meet in Canada, and the C.M.A. in England.

Following the usual luncheon on Thursday, a full report was given by the Protective Association, and this organization was most favorable to the proposal that membership in the C.M.A. would carry with it membership in their Association.

The entire afternoon session was devoted to "More Babies and Better Babies." This canvassed various phases of sterility in both male and female, pelvic diseases, endocrine disorders, the use and abuse of radiation, and venereal diseases. Especially there was emphasized by Dr. Little of the Montreal Maternity Hospital in reviewing 500 cases, the necessity of the proper management of labor. The session concluded with papers on the care of the New Born.

Concurrently with the general session business and scientific meetings of the Canadian Society of Anaesthetists and the Canadian Radiological Society were held. Also clinics with papers were held by the Laryngologists and by the Canadian Society for the Study of Diseases of Children. Dr. Walter Muir of Halifax was elected President of the Society of Anaesthetists. Taken in all, from the Clinical standpoint for the general practitioner, the meetings were most successful.

The report of Dr. McEachern regarding Inter-Provincial Relations being pertinent to the question of organization, and which is referred to in the above summary, was presented as follows:—

"The chairman of your Committee on Inter-Provincial relations constituted his Committee as follows:—

- Nova Scotia, DR. S. L. WALER, Halifax.
- New Brunswick, DR. W. F. ROBERTS, St. John.
- Prince Edward Island, DR. A. MacNEIL, Summerside.
- Quebec, DR. A. T. BAZIN, Montreal.
- Quebec, DR. SIMEON F. GRONDIN, Quebec.
- Ontario, DR. E. R. SECORD, Brantford.
- Manitoba, DR. D. A. STEWART, Ninette, (Secretary).
- Saskatchewan, DR. R. G. FERGUSON, Fort Qu'Appelle.
- Alberta, DR. J. S. MacEACHERN, Calgary.
- British Columbia, DR. M. T. MacEACHERN, Ottawa. (Chairman).

"A little only of the excellent material collected by correspondence can be summarized in a brief report.

"*Inter-Provincial*" relations are spoken of, as though there might be antagonisms between provinces. There are none such. "*Inter-Canadian*" would be a better term. The difficulty is not *bad* relations but *no* relations at all, to speak of.

Inter-Canadian relationships of all sorts are opposed by Geography. Canada is great length with little breadth, and split by several wedges. West is separated from East by a thousand miles of wilderness. Geographical wedges are apt to become wedges of misunderstanding as well. People so separated don't meet often enough to either attract or repel one another: they remain strangers and indifferent. Shoulder to shoulder is rather hard to manage with one shoulder in Alberta and another in New Brunswick.

Another prime obstacle in the way of ample and useful relation is that the work of the doctor, and perhaps his temperament also, tends to individualism. If he joins societies and attends meetings it is always in spite of difficulties, and so he expects a direct and immediate return for his sacrifice in what he may gather of medical science at the meeting. The more remote but broader advantages that come from co-operation and union make less appeal. What may be called medical policies or even politics, plans for the advancement and betterment of the profession as a whole, interest only a few.

Means of communication between medical men throughout Canada are found in the Journal and in the Annual Conventions. Most doctors, it is likely, look critically at their Journal, as at their favourite newspapers. If all suggestions were adopted the Journal would rapidly become both broader and narrower, deeper and shallower, thicker and thinner, more high-brow and more popular, cheaper and more costly. A better journal certainly, if that be possible, and if we can accomplish it, but in the meantime, and directly on the way to that better journal a better subscribed for, better read, better supported journal. The journal will certainly unite and enthuse the profession, if we diligently put these strong purposes into it: not otherwise.

About the Annual Convention as a gathering for the advancement and dissemination of Medical Science, not much need be said. It has almost always been respectable, often excellent, and sometimes eminent. It is a good market to which a man should bring the best he has in matter and in style, or not contribute at all. To merely put something over that will get by is not good enough. The highest standards should be insisted upon.

Even within the ranks of the Committee there was difference of opinion as to the best and most attractive kind of subject matter for such conferences. Most held strongly that separation at a convention into several groups along the lines of specialities in practice tends exactly in the wrong direction. It deepens the rut of each specialty and narrows outlooks that should be broadened instead. Most of us need broadening more than narrowing. General sessions need

“special points of view and special sessions need general points of view even more urgently. Some of us would not even advise division into the two primary groups, physicians and surgeons. Where does the general practitioner belong at a convention anyway?

But our inter-Canadian relations have less to do with the teaching function of our association than with its legislative and administrative functions. As a parliament the C.M.A. doesn't rank high and we, it's members, as legislators for the most part rank low. The meetings are sectional always especially when held in the farthest East or the farthest West; and the torch of legislative or administrative policy lighted, say, in Halifax one year can scarcely be carried alight to Vancouver the next. Even the Council scarcely carries a quorum from one meeting to the next. A medical convention does not need continuity from year to year: a medical parliament does. A small and more permanent executive—likely unwillingly—has to carry on.

The original democratic assembly was the town meeting in which everybody had a say and a vote. When towns got bigger delegation had to be tried, and so representative government. Our medical parliament for Canada is still at the town meeting stage. Anyone may attend, may speak, and may vote, and those who happen to be there and to have the impulse or the energy to raise a right hand legislate for us.

It is the opinion of this Committee that our parliament must be improved. At least a minimum of representatives must be arranged for each meeting from each principal part of Canada. This representation would be more valuable, of course, in the Council than in the general sessions.

It will be said that we have this already in the Council, and so we have, on paper. But attendances at Council is seldom if ever full or even representative. Payment of at least travelling expenses for distant council members—presumably by the group they represent—would emphasize their representative capacity, make the obligation of attendance greater, and equalize burdens. Members of council, however appointed, should serve for terms long enough to get a knowledge of the business and an interest in it. The Council should have at least a three days session and at the place of the annual convention, before the opening of the convention. That would give time for some real discussion of business beyond a mere march past of resolutions.

Inter-relations mean primarily impulses from centre to periphery and from periphery to centre. We have had so far no centre. A stronger, better attended, longer-sitting council would help to create such a centre. But we need a local habitation, a post office address and visibility. We need a staff and especially the extension of such services as Dr. Routley has given us in the past year or two.

Impulses would travel out from such a centre; visits of the Secretary to all provincial meetings and to some smaller ones also; communications of many kinds; data at hand with which to meet local difficulties; active, intelligent ready prompt service.

“And impulses from the periphery to the centre must not be left to hap hazard or entirely to voluntary sacrifice of time or voluntary interest. If our association business or deliberation or legislation is serious we must take it seriously; if, by-play merely, why not drop it altogether?”

The President of the Association is by no means always even interested in the general affairs of the association but usually in the scientific side of the conference. He may never before have belonged to the council and may never belong again. In any case at the time of the big meeting he cannot properly preside at the meetings of the Council. He has not time. The Chairman of the council does not need to be the President of the Association and usually should not be, but should be the member of the Council best fitted, most experienced and most interested.

As medical men meet in larger or smaller groups there should be ever kept before them the need of maintaining personal, group, provincial and dominion inter-relations. They should be brought to see the privilege or the advantage, or, failing these, even the duty of such relations. Matters of general policy and of business should be brought on not as each member reaches for his hat and rushes to catch his train, but should have a deliberate space at a principal session. Officers of all associations larger and smaller should be put into office carefully and kept in office longer than has been our custom.

As scientific men we cannot expect to get something out of our association except by putting something in, something of time, of effort, of thought, and indeed of money also.

It is the opinion of this Committee on inter-provincial relations that all our inter-relations between larger groups will be improved more by a better working of our organized machinery than by a large amount of “Hurrah Boys” and much handshaking, though these have their great value also.

M. T. MacEACHERN,
President.

D. A. STEWART,
Secretary.”

Since the meeting in Sydney, four copies of what I have called the “Bulletin” have been distributed. The September issue contained what has not been available to the greater portion of the profession since the “Maritime Medical News” ceased publication, viz; a fairly full report of the proceedings of the “69th” Annual Meeting. It is expected that the Report of this Annual Meeting will be in the hands of the profession by the First of August. The second “Bulletin” was issued in December, 1922, and contained the Minutes of the meeting of the Executive Committee. The third “Bulletin” in March was of a much more general character and its most practical feature was the statement regarding Federal Income Tax. It is hoped that numbers of physicians profited by the exemptions indicated in this article written by Dr. Routley. The “Bulletin” in May was issued solely

for the purpose of bringing to the attention of the profession the opportunity for Clinical instruction in the use of "Insulin," the list of paid up members for the C.M.A. and the M.S. of N.S., and the tentative programme of this Annual Meeting.

The matter of an official organ for the Medical Societies, or a Bulletin for the profession generally, should receive your careful consideration. It cannot be worth the money unless the Secretaries of affiliated Branches will materially assist in its preparation. With few exceptions, little material has been furnished the Associate-Secretary for publication. You want the "Bulletin" to advise you what is being done by the Society from time to time, and also as a friendly bond between the doctors from one end of the Province to the other. These Bulletins cost delivered in the Post Office practically \$125.00 per issue. To be worth this money it should be regarded as your Bulletin rather than that of the Associate-Secretary. If anyone is inclined to minimize the work necessary in the preparation of such a Bulletin, especially with little or no co-operation, he can easily have his wrong impressions rectified, by undertaking the issue of the next two Bulletins himself. Any material that the Associate-Secretary has would be gladly made available for such a volunteer editor. There can be no question whatever but that such a publication, at least quarterly, is absolutely necessary in the best interests of the profession in this Province, It is your business to see that it fills the bill.

There are matters relating to Finance, Workman's Compensation Boards, Irregular Practitioners, Insurance Fees, etc., which will doubtless be dealt with by their respective Committees. There is, however, one matter that will be brought very clearly before the Profession at this meeting, for which I ask your careful consideration. I refer to the attitude taken by the Doctors in this Province towards the general matter of Public Health. It has been brought to my attention forcibly since I have endeavoured to direct the activities of the Peace Time Programme of the Provincial Red Cross Society, that the rank and file of the profession are not taking such a stand as convinces the public generally that they are solidly behind the Public Health campaign in this Province to-day. There may be differences regarding administration or regarding personell, but there must be not one word of protest from any doctor against the present Public Health Programme as such. The present movement is destined to become the actual practical procedure of the very near future. If the medical profession does not endorse this procedure at this critical stage, it will be too late to "Right About" a few years from now. Refusal to assist to-day means your rejection as Public Health Leaders in the near future. Is this plain? If not, what more could be said to emphasize the necessity of every doctor in this Province getting behind and assisting in Public Health work by all means which are in his power.

I did not know when I undertook the work of Associate-Secretary that I would be so kindly received by the profession in every part of the Province. I must express publicly my sincere appreciation of

the kindly manner in which I have been received and the kind reception by the various affiliated Branches in the Province and by the Doctors individually. I am assured by outside physicians who have acquainted themselves with our conditions here that our organization compares favourably with that of any other Province and we are working along lines which will bring about the most practical results. Again I emphasize the necessity of co-operation and team play.

I do not feel it is necessary to emphasize at this time the altruistic idea of service before self, as one cannot attend a National or a Provincial meeting, or read any of our medical and public health publications, without realizing that this spirit now dominates the Profession more than ever before. It is our duty individually and collectively to convince the Governments and the Public of our earnest desire to be, above all things, a power in this Province towards the realization of the higher aims of the profession, working for the lessening of suffering and the increase in length of days and happiness of the people.

Respectfully submitted,

(Signed) S. L. WALKER,

Associate-Secretary.

* * * * *

DIRECTORY OF MEDICAL SOCIETIES

The attention of all affiliated Branches of the Medical Society of Nova Scotia is directed to the desirability of having a correct list of officers with other official information published in each issue of the Bulletin. If the information is incorrect or obsolete it is the fault of the Local Secretary or the Branch itself. Please advise promptly of any corrections that should be made.

If this Directory is correct it can be used for publication in the C.M.A. Journal, but if by neglect of the Branch the C.M.A. Journal Directory is obsolete, please put the responsibility where it belongs, and add the criticism at the same time,

* * * * *

The mailing list of the Bulletin is kept up-to-date as far as three or four fairly intelligent people can do it. If you do not receive your issue in a reasonable time please advise the Associate-Secretary. All names of those attending the last Annual Meeting who paid their fees when registering have been added to the list of paid up members published in the May Bulletin.

MEDICAL FELLOWSHIPS OF THE NATIONAL RESEARCH COUNCIL.

(Dr. W. H. Hattie, Halifax.)

These fellowships are supported by joint contributions of the Rockefeller Foundation and the General Education Board and are administered by a special Medical Fellowship Board of the National Research Council.

The fellowships are open to citizens of both sexes of the United States and Canada, who possess an M. D. or a Ph. D. Degree, or the equivalent of one of these degrees. They are intended for recent graduates and not for those already professionally established.

The basic stipends awarded are \$1,800 for unmarried fellows and \$2,300 for married fellows per annum. These stipends may be increased where there are other dependents or for other cogent reasons. Awards are made for one year, but fellowships may be renewed. Fellows are chosen at semi-annual meetings of the Medical Fellowship Board in April and September, and applications to receive consideration at these meetings must be filed on or before March 1st and August 1st, respectively. Appointments may date from any period subsequent to the Board meetings.

The fellowships are designed to recruit men and women as medical teachers and investigators. Fellows may choose any branch of medicine or public health for their ultimate career, but at present those candidates, (otherwise suitable) will be favored who plan to specialize in one of the preclinical sciences or to approach clinical medicine through temporary identification with one of the sciences.

The fellowships are not granted to any institution or university, but the choice of place to work, either in this country or abroad, is left to the fellow, subject to the approval of the Fellowship Board. The appointments are for full time and no other remunerative or routine work is permitted.

The particular individual, with whom a fellow wishes to work, should, ordinarily, have agreed to accept him, prior to the consideration of his application by the Board.

Opportunities, but not obligations, for a certain amount of teaching must be available. It is further required that the fellow be charged no fees or tuition by the institution where he chooses to work.

Further particulars concerning these fellowships may be obtained by addressing the

Chairman, Board of Medical Fellowships,
National Research Council,
1701 Massachusetts Avenue,
Washington, D. C.

PRESIDENTIAL ADDRESS, VALLEY MEDICAL SOCIETY

May 29th, 1923, Dr. W. F. Read, Digby.

Officers and Members of the Valley Medical Society and Visiting Doctors :

It is a great pleasure to see so many of the members of the Valley Medical Society at this the 16th Annual Meeting, and we welcome you, together with the visiting Doctors, and we hope your visit will be both a pleasure and profit.

From the program which will be presented for your edification and entertainment we hope you will be able to obtain much that will be of deep interest.

You will not expect me to try to add to your store of scientific knowledge, but will be content if I am brief, while I try to impress upon you the importance of our aims and ideals as a Medical Society.

This Society was founded by men who visualized the changes that would come in the viewpoint of things, material and spiritual; that we as medical men would benefit from the exchange of ideas and truths, founded on facts, as revealed to us from our own experience and knowledge, as well as that of our fellow members.

This idea and aim has been carried through our meetings, and we are very fortunate to have with us to-day visiting Doctors who at much inconvenience and effort have brought for our consideration and acceptance some of their knowledge of the various phases of medical and surgical problems. We hope they will receive compensation from the saying "It is more blessed to give than receive."

Individual effort to help the sick, to try to cure the ills of those who seek our help, to relieve the distress of our patients is and will be our great aim, but we should not lose sight of our duty in the broader field of Public Health.

John Ruskin said "The strength and power of a country depends upon the QUANTITY of good men and women in it," and Lloyd George, "the health of the people is the secret of National efficiency," so our effort must be on the side of the great movements seeking to effect this much desired result.

We are living in a time of great change and transition. All over the world there are forces working that are but dimly outlined, and nowhere is it more true than in the field of medicine.

It is not for me to enumerate to this body of educated and reading men what the force is, or how to interpret its meaning, but we should try to leave behind us some evidence that we were cognizant of its existence.

We should impress upon the people the importance of "Mens Sana in Corpore Sano." In fact we are derelict in our duty if we do not try to throw some light upon this dark way. We should pass on the larger meaning of life to those who will fill our places.

If we ask the causes of the changes that are coming, the answer must be, that the world in any generation is what the men of previous

generations have brought about as the conditions under which succeeding life must go on. The world of to-day is what the men of yesterday have made it.

In human nature itself we find the seeds of change. Individual human beings are not now, and never were, entirely content with the conditions of their lives. Desires to have and to accomplish, to eliminate the conditions that make for unhappiness and distress, and to perpetuate and enlarge the opportunities for individual and social welfare, have ever been strong human motives.

What a far cry indeed, from the science and art of medicine of to-day and that of a hundred years ago. This progress has not come in any impersonal way, or directly through supernatural power; but by the restless striving individual men in each succeeding age. Men doubted the old ways of explanation, were not satisfied with being the slaves of unknown forces, and by incessant experimentation and mental power have gradually wrested from nature the secrets we now fortunately possess. The men of daring and mental strength in each generation have built their part of the structure; and the world of common and expert knowledge of to-day is just what these men of the yesterdays have made it for us. Little by little have the changes come, now by slow movement, now by gigantic strides; but ever by the efforts of men driven on by the restlessness of their heart's desires and their zeal for bettering the conditions of human life.

As a Society we should be more vigorous for the better enforcement of the Health Laws. Venereal disease is doing its deadly work, and very little is being done to combat it. While much has been done to arrest the incipient case of Tuberculosis, how much has been done to prevent the spread of the disease by the advanced case? The efforts of the Provincial Board of Health to have the schools visited by County Health Nurses has been rendered more or less futile by the attitude of a great many of us, while the Public try to save money at the spigot and waste at the bung.

Public Health work should be of as much importance, and be on a par with Agriculture, Mines, Roads, Schools, etc. May I suggest the passing of a Resolution calling for more efficient Public Health work and the necessity of a Minister of Health being added to our list of Government Heads at Halifax. It is agreed that the conservation of human life and health is a matter of utmost importance to the Nation, yet we find the community very slow to grasp the idea of the common or public health as distinguished from the individual. This is especially true in regard to child conservation. The discovery and correction of physical defects thru medical inspection of schools is a comparatively recent acquisition...

The greatest achievement of the present age is the triumph of science over disease. During the past thirty years, the civilized world has made more progress in eliminating disease and postponing death than it made in many decades before. This great gain was the direct result of many important scientific discoveries, which in turn arose from intensive study of the nature and cause of disease and the way to preserve health.

It was a transcendent day in human history when the conclusion was reached that an epidemic was evidence, not of the wrath and vengeance of God, but of the ignorance and neglect of man; when the scientist opened God's great Book of nature to read therefrom the laws of health and disease, and the life and death, and found wirtten therein in blazing letters:—

“To him that knoweth and obeyeth these laws shall be given health, long life, and a blessed prosperity: but to him that harkeneth not to these words shall come sorrow, and shorten days, and his race shall disappear from the face of the earth.”

* * * * *

WESTERN KINGS MEMORIAL HOSPITAL

Mrs. A. M. Thomas, Berwick

During the four years of the great world war, the boys of Western Kings County in large numbers responded to the call of King and Country, and valiantly played their part in the titanic struggle. Many of them escaped unscathed, or received wounds of which they recovered, and returned at the close of the war, and now fill important and worthy positions; discharging well the duties of citizenship. But some—68 in number—did not return. They sleep their last sleep in the battle-scarred field of Flanders. It was felt that these fallen heroes who made the supreme sacrifice for our civilization, should have some memorial erected in their native country that would perpetuate their memory. That was the least that those for whom they died could do for them. But what should be the form of that memorial? The question was discussed and considered for some time. At last the decision was reached that no form of memorial could more fittingly keep green the memory of our fallen sons than a hospital. A hospital stands for constant service, and a service of the most necessary and most human nature, because it is rendered to suffering humanity.

But it takes money and no small amount of it, to build, equip and maintain a hospital. Moreover, Western Kings is a rural section. It has no large towns, and no men of great wealth as wealth is reckoned to-day. The farmers and fruit-growers are prosperous. They make a good living, have comfortable homes, and in most cases, taking one year with another, do something better than make ends meet. But they have no money to give in thousands. Would enough of them back the enterprise with their modest contributions to insure its success?

There was just one way to find out; start the project and make a canvass. The canvass was made early in 1921, and it was found that the people generally were solidly behind the hospital scheme to the utmost of their ability. S. B. Chute of Berwick, the “Apple King,” started the canvass with a \$10,000.00 contribution, and his enthusiasm

and generosity were contagious. In a short time, pledges totalling well over \$30,000.00 were secured, and the hospital undertaking became an assured thing.

It was decided that the institution should be in Berwick, and that it should be known as the Western Kings Memorial Hospital. A suitable site, on an elevation bordering the beautiful Camp Meeting Grove was purchased, and in the Spring of 1921, a contract to erect the building was given to Messrs. Denton and Condon. They fulfilled the terms of their contract in a highly satisfactory manner, and on June 3rd, 1922, the Western Kings Memorial Hospital with fitting ceremonial was formally dedicated to the memory of our fallen heroes, and the service of humanity, and opened to received patients. Miss Neily, a Kings County girl was installed as Matron and given an efficient staff, and from the day of its opening to the present, the institution has been well patronized, and has rendered a splendid service to the community. It is never without patients and has more than once been filled to the extent of its capacity. On many occasions too, it has been the means of saving life, which well repays the sacrifice at which it was built.

The building was designed by architect L. R. Fairn of Aylesford, N. S., is of concrete with stucco finish, and presents a most attractive and imposing appearance. Its capacity is about fifteen beds. There are two general wards, one for men and the other for women, each containing four beds. The operating room is in the front of the building, and exceptionally well lighted. There is also an X-Ray room, but not yet equipped. The building is lighted by electricity, the current being supplied by the town of Berwick. Running water is supplied by an Artesian well system. The building cost \$32,000.00, equipment, furnishing, etc., \$5,000.00 making a total cost of \$37,000.00. The indebtedness on this is \$10,000.00, for which the contractors hold a mortgage on the building. To offset this indebtedness, there is due on pledges that were given to be redeemed by installment payments over a five year period, \$15,000.00, so that the institution is in a sound position financially.

The Hospital is under the direction of the Western Kings Memorial Association, and the business management is vested in an executive committee of five members, elected annually by the Association. The institution is financed by its earnings, \$500.00 per year from the county, thirty cents per day per patient from the Provincial Government, and voluntary contributions.

Just in connection with the financing of the institution, one should not overlook the splendid work done by the women of Western Kings. First of all, and most emphatically, they furnished the morale. Had it not been for that, it is very doubtful if the dream of a Memorial Hospital at Berwick would ever have crystalized into reality. But the morale wasn't all that the women provided. Since the Hospital scheme was begun, the women have raised over \$6,000.00 in good hard cash. That in a period of a little over two years, is a pretty good showing.

In view of the fact that the Hospital is a memorial to our fallen heroes, it was fitting that their names should occupy a conspicuous position on the walls of the institution, through which they being dead, still live and serve. To this end, Miss Annie Lovelace, a nurse in Boston, but a native of Kings County, collected from former Nova Scotians living in Boston and vicinity, the sum of \$350.00 to erect a memorial tablet, that should contain the names of all those from Western Kings who fell in the war. This is of marble and contains sixty-eight names. The work was done by Geo. A. Sanford and Son of Halifax, and is a masterpiece of skilled workmanship and artistic beauty.

Such, in brief, is the story of Western Kings Memorial Hospital. It was a big undertaking for a small community, but it is built and functioning, and its future is well assured. The financing of it by voluntary subscription, was no light matter and involved a good deal of sacrifice, but the sacrifice only enhances the value of the institution to those who made it. The people of Western Kings are solidly behind the institution, and by it make their contribution to the welfare of their fellow-men.

* * * * *

NEWS FROM DALHOUSIE UNIVERSITY MEDICAL SCHOOL

Many of the readers of the Bulletin will doubtless remember the interesting and instructive clinical week which was held in Halifax last September. The course was well put-on, well-chosen, and excellently well-attended. The function was so satisfactory from all points of view that it has been decided to repeat it this year. The date chosen is September 6th, a little earlier than before, owing to the fact that the medical school begins about the middle of the month. For this year at least the "week" will be conducted along the same, or similar, lines as before, and it is hoped and expected that the response on the side of the medical practitioners of the province will be as good as previously. Programmes are being prepared and will be sent out in due course to all registered practitioners. An opportunity will be afforded to the visitors to see the new Medical Sciences Laboratory, which is rapidly approaching completion, as well as the new out-patient dispensary and health centre, both in the immediate vicinity of the Victoria General Hospital.

Some discussion took place in regard to the desirability of lengthening the post-graduate study period in the future, but it was decided to keep things as they were for the present. However, a very important suggestion was made to the Medical Faculty, to the effect, that it might inaugurate a Summer School in Medicine to be held in Halifax in July and August, to last one month. While much of the teaching would, naturally, be carried on by the staff of Dalhousie University, it is not intended that the course would be exclusively a Dalhousie one. The idea is to invite outstanding men belonging to other universities to co-operate, so that in time the project would

become all-Canadian. Visiting medical men from England and the United States could also be invited. It is felt that there are numbers of medical teachers who visit the Maritime Provinces for their vacations, and that these, with others who might be induced to come, might be willing to combine a little work and a good deal of play amid pleasant scenes, and in a delightful summer climate. While at first, the scheme is concerned only with medical teaching, it is hoped that, if the venture were successful at the start, it might develop into a big summer school for all faculties. In the meantime, a strong committee has the matter in hand, to see if the idea is practicable. Any suggestions, or comments, would be welcomed by the Faculty of Medicine.

A. G. NICHOLLS.

* * * * *

YESTERDAY, TO-DAY AND TO-MORROW

Doctor Read in his paper published in this issue says "The world of to-day is what the men of yesterday have made it." If he spoke a great truth, or a partial truth, there is food for thought in the remark.

The men of yesterday are responsible for conditions as we find them to-day. The men of to-day, that is WE men, are responsible for the conditions with which the men of to-morrow will have to contend. The boys of to-day, our boys, will be the men whose activities to-morrow will be aided or hindered by the conditions for which we of to-day are responsible.

The question is a personal one for every man to answer, but especially should the question come home to every practitioner of Medicine, who by the very nature of his profession is so very greatly responsible for conditions to-day and in the future. To what extent are our efforts of to-day directed with special reference to to-morrow? After to-day has passed there is no opportunity of doing anything that shall be of benefit for to-morrow.

"I shall pass through this world but once; any good, therefore that I can do, or any kindness that I can show to any human being, let me do it now; let me not defer nor neglect it, for I shall not pass this way again."

* * * * *

It is hard for a woman to hold her husband's love when she can't even hold her tongue.

* * * * *

Life is made up of surprises. Have you ever notices that the things that don't seem possible happen so often?

PERSONAL

Dr. H. W. Schwartz of Halifax—specialist in Diseases of the Eye, Ear, Nose and Throat—who went away in September 1922 for further Post Graduate study in London and Vienna, resumed his practice in Halifax in April, 1923.

Dr. M. C. Smith formerly of Kings County, N. S., now of Lynn, Mass., was a visitor at the Windsor meeting.

The Windsor Meeting had the largest registered attendance in the history of the Medical Society.

The absence of Dr. J. W. S. McCullough from the meeting of the Medical Health Officers' Association, and the Medical Society of Nova Scotia, was very greatly regretted. The Associate-Secretary wrote Dr. Roberts of St. John, Minister of Public Health for New Brunswick, asking him to attend, but the Doctor replied that he was unable to come as the Provincial Government convened for business on Wednesday, July 4th. It is noted that Dr. McCullough was unable to attend on account of a meeting with the Minister of Health Elect for the Province of Ontario. Public Health business is carried on by these two Governments was responsible for their inability to attend. More than ever Public Health is becoming a responsible Department of Provincial Governments.

Congratulations are extended to Dr. D. W. N. Zwicker of Chester, who was married April 23rd, 1923, to Ina Bainbridge Darling, R. N., formerly of Glasgow, Scotland. The bride has been a resident of this Province for four years and for nearly two years was one of the V. O. N. nurses in Truro.

* * * * *

The Physician in Haste.

Little Bobby's father was a doctor, and Bobby liked nothing better than to take his father's case in one hand, his overcoat in the other and go down the street for a block or two to some imaginary patient. One winter's day, when he started out he forgot to close the door.

"Bobby," called mother's voice sweetly, "please close the door." But Bobby was in a hurry and went on.

"Robert," came father's sterner voice, "close that door."

Bobby returned and closed the door. Some time later he came in quietly, put up the case and overcoat, and started up-stairs.

"Bobby," said mother, ingratiatingly, "how's your patient?"

"Dead," was the answer. "Gone dead while I was shutting that old door."—*Everybody's*.

OBITUARY

DR. A. J. DEVEAU

Meteghan, N. S.

The death occurred at Meteghan on Sunday, June 10th, 1923, of Alfred Joseph Deveau, M. D. C. M., Dalhousie University, 1912, L. M. S., P. M. B., 1912. A service at his home was followed by Requiem Mass at Stella Maris Church.

A despatch to the Halifax Chronicle refers to his death as follows:—

“The following members of the medical and dental profession from Yarmouth, Clare and Weymouth were present at the funeral: Drs. Emile LeBlanc, Pubnico; Emede Melanson, Eel Brook; Campbell, Lebbetter and Thomas Melanson, Yarmouth; Blackadar, Port Maitland; Belliveau, Meteghan, Thibault, Little Brook; Dr. Hogan, Cormiers and Pothier of Weymouth.

“The funeral was the largest ever witnessed in Clare, a testimonial of the high esteem and widespread popularity of the deceased. There were many floral offerings from admiring friends and relatives. Special floral gifts were a pillow from friends in Clare; cross from the members of Yarmouth Council Knights of Cloumbus and a crown from the doctors of Yarmouth, with whom the deceased man had a large acquaintance. A. F. Hache, organizer of the A. C. F. was the director of the funeral procession and the banner of the artizans was carried by Capt. Vincent Comeau.

“The chief mourners included the members of his family, Mr. Robicheaud, of Bouctouche, N. B., father of the doctor's widow and Thomas Deveau and Walter Deveau of Boston, cousins of the deceased, who arrived from Boston to attend the funeral. The late Dr. Deveau was a young man of splendid qualities of heart and mind and was especially successful in his medical practice, which was one of the largest of ocntry practises in the Province. A legion of friends throughout the Western part of the Province as well as amongst members of the medical profession throughout the entire Province will learn with regret of his passing.”

MRS. C. H. MORRIS

Members of the Profession in Nova Scotia will extend their sympathy to Dr. C. H. Morris of Middle Musquodoboit on the death of his wife on June 7th, 1923.

MRS. A. J. COWIE

On July 1st at 5½ Walnut St., Margaret Stewart, beloved wife of Dr. A. J. Cowie, died at the advanced age of eighty-three years. The Profession extend their sympathy to Dr. Cowie.

MEDICAL SOCIETY OF NOVA SCOTIA

OFFICERS FOR 1923-1924

PLACE OF MEETING, AMHERST, N. S.

President Dr. O. B. Keddy, Windsor, N. S.
1st Vice-President Dr. W. N. Reh fuss, Bridgewater
2nd Vice-President Dr. J. J. Roy, Sydney, N. S.
Secretary-Treasurer Dr. J. G. D. Campbell, Halifax, N. S.
Associate-Secretary Dr. S. L. Walker, Halifax, N. S.

Cape Breton Branch:

Dr. M. G. Tompkins, Dominion
Dr. D. W. Archibald, Sydney Mines
Dr. John MacDonald, Sydney

Pictou County Branch:

Dr. John Bell, New Glasgow
Dr. S. G. MacKenzie, Westville

Lunenburg-Queens Branch:

Dr. G. MacLellan, Lunenburg
Dr. W. N. Reh fuss, Bridgewater

Yarmouth Medical Society

Dr. A. J. Fuller, Yarmouth

Colchester-Hants Medical Society:

Dr. E. E. Bissett, Windsor
Dr. F. F. Eaton, Truro

Eastern Counties Branch:

Dr. W. F. MacKinnon, Antigonish

Halifax County Branch

Dr. M. G. Burris
Dr. K. A. McKenzie
Dr. G. H. Murphy
Dr. C. S. Morton
Dr. J. R. Corston

Valley Branch:

Dr. G. J. McNally, Berwick
Dr. L. R. Morse, Lawrencetown
Dr. W. F. Read, Digby

Cumberland Medical Society:

Dr. J. A. Munro, Amherst
Dr. D. Mackintosh, Pugwash

Committee on the Cogswell Library Elections to Editorial Board, C. M. A. Journal

Dr. A. G. Nicholls, Halifax, (Chairman)
Dr. J. R. Corston, Halifax, N. S.
Dr. John Stewart, Halifax, N. S.
Dr. P. Weatherbee, Halifax, N. S.
Dr. C. S. Morton, Halifax, N. S.

Dr. W. H. Hattie
Dr. G. H. Murphy
Dr. J. G. McDougall
Dr. Kenneth MacKenzie
Dr. A. G. Nicholls
Dr. E. V. Hogan

Committee of Arrangement

The Medical men of the Cumberland County Branch of the Medical Society of Nova Scotia.

Committee on Uniform Schedule of Fees

Committee on Public Health
Dr. M. E. Armstrong, Bridgetown, N. S., (Chairman)
Dr. Edgar Douglas, Halifax, N. S.
Dr. J. K. McLeod, Sydney, N. S.
Dr. Clarence Miller, New Glasgow, N. S.
Dr. L. P. Churchill, Shelburne, N. S.

Dr. W. N. Reh fuss
Dr. Ross Millar
Dr. M. G. Burris
Dr. O. B. Keddy
Dr. S. L. Walker

Executive C. M. A.

Dr. H. K. MacDonald, Halifax, N. S.
Dr. John Bell, New Glasgow, N. S.

The President named the following Committees:—

Council, C. M. A.

The President, Ex Officio.
Dr. G. H. Murphy, Halifax, N. S.
Dr. W. J. Egan, Sydney, N. S.
Dr. A. S. Simpson, Bridgewater, N. S.

Programme Committee:

Dr. O. B. Keddy
Dr. S. L. Walker
Dr. W. F. MacKinnon
Dr. J. G. B. Lynch
Dr. L. W. Johnstone

Elections to Provincial Medical Board

Dr. J. G. McDougall, Halifax, N. S.
Dr. W. B. Moore, Kentville, N. S.
Dr. C. S. Marshall, Bridgewater, N. S.
Dr. G. W. T. Farrish, Yarmouth, N. S.
Dr. J. J. Roy, Sydney, N. S.
Dr. John Bell, New Glasgow, N. S.

Committee on X-Ray Resolution:

Dr. W. H. Eagar
Dr. S. R. Johnston
Dr. A. E. Blackett

Committee on Obituaries:

The Associate-Secretary and the Secretaries of affiliated Branches.

AFFILIATED SOCIETIES

CAPE BRETON MEDICAL SOCIETY

President Dr. John MacDonald, Sydney, N. S.
Vice-President Dr. W. T. Keough, Sydney Mines, N. S.
Secretary-Treasurer Dr. J. G. Lynch, Sydney, N. S.

Representatives on Provincial Executive

Dr. J. G. Lynch, Sydney, N. S.
Dr. L. W. Johnston, Sydney Mines, C. B.
Dr. J. J. Roy, Sydney, C. B.

HALIFAX MEDICAL SOCIETY

President Dr. C. S. Morton
Vice-President Dr. E. V. Hogan
Secretary-Treasurer Dr. S. J. Turel

Members of the Local Executive

Dr. K. H. MacDonald
Dr. L. J. Churchill
Dr. S. R. Johnston
Dr. J. G. MacDougall
Dr. V. L. Miller

Representatives Provincial Executive

Dr. M. G. Burris
Dr. K. A. MacKenzie
Dr. G. H. Murphy
Dr. C. S. Morton
Dr. J. R. Corston

VALLEY MEDICAL SOCIETY

President Dr. A. S. Burns, Kentville
Vice-President Dr. L. W. Braine, Annapolis
Vice-President Dr. W. R. Dickie, Barton
Vice-President Dr. W. R. Elliott, Wolfville
Secretary-Treasurer Dr. C. E. A. DeWitt, Wolfville

Representatives on Executive Provincial Society

Dr. G. J. McNally, Berwick
Dr. L. R. Morse, Lawrencetown
Dr. W. F. Read, Digby

COLCHESTER-HANTS MEDICAL SOCIETY

Officers 1922-1923

President Dr. F. R. Shankel, Hantsport
Vice-President Dr. Dexter McCurdy, Truro
Secretary-Treasurer Dr. H. V. Kent, Truro

Executive

Dr. R. O. Shatford, Londonderry
Dr. F. F. Eaton, Truro
Dr. C. H. Morris, Windsor

LUNENBURG-QUEENS MEDICAL SOCIETY

Officers for 1922-1923

PresidentDr. Wm. Reh fuss, Bridgewater
Vice-PresidentDr. R. G. MacLellan, Lunenburg
Secretary-TreasurerDr. L. T. W. Penny, New Germany

Executive

The above Officers with:

Dr. Wm. Cochrane, Mahone Dr. D. W. N. Zwicker, Chester

Annual Meeting is held on the second Tuesday in June, of each year, and other Meetings on the second Tuesday of August and January, the time and place of the two latter Meetings, to be decided by the Executive.

YARMOUTH COUNTY MEDICAL SOCIETY

PresidentG. W. Farish, M. D.
Vice PresidentZ. Hawkins, M. D.
Secretary-TreasurerF. E. Gullison, M. D.

Executive

Town:—W. C. Harris, M. D.
County:—Dr. Morton

Member of Executive of the Provincial Society:—Dr. A. J. Fuller

EASTERN COUNTIES MEDICAL SOCIETY

Officers

Hon. PresidentDr. Geo. E. Buckley, Guysboro
PresidentDr. J. J. Cameron, Antigonish
Vice-PresidentDr. J. S. Brean, Mulgrave
Secretary-TreasurerDr. P. S. Campbell, Port Hood

Executive Committee

The Officers and—

Dr. J. A. Proudfoot, Inverness	Dr. M. E. McGarry, Margaree Forks
Dr. J. A. McDonald, St. Peter's	Dr. B. A. LeBlanc, Arichat
Dr. J. J. McRitchie, Goldboro	E. F. Moore, Hazel Hill
Dr. J. F. McIsaac, Antigonish	Dr. R. F. McDonald, Antigonish

Nominated to Executive of the Provincial Society: Dr. W. F. McKinnon, Antigonish.

CUMBERLAND COUNTY MEDICAL SOCIETY

Officers

PresidentDr. D. Mackintosh, Pugwash, N. S.
1st Vice-President.....Dr. Wm. Rockwell, River Hebert, N. S.
2nd Vice-PresidentDr. M. J. Wardrope, Springhill, N. S.
3rd Vice-PresidentDr. M. D. MacKenzie, Parrsboro, N. S.
Secretary-TreasurerDr. W. T. Purdy, n herst, N. S.

Members of Executive, Medical Society of Nova Scotia:

Dr. D. Mackintosh, Pugwash, N. S.
Dr. J. A. Munro, Amherst, N. S.

PICTOU COUNTY MEDICAL SOCIETY

Officers

PresidentDr. Evan Kennedy
Secretary-TreasurerDr. John Bell

Member on Executive of N. S. Medical Society, Dr. John Bell
Meetings:—First Tuesday in January, April, July, and October. Annual Meeting in July.