# Minutes of the Executive of The Medical Society of Nova Scotia, 1952

THE Annual Meeting of the Executive of The Medical Society of Nova Scotia was held at Lakeside Inn, Yarmouth, N. S., September 3, 1952, at 9.45.m.

There were present Doctor L. M. Morton, President: Doctors J. W. Reid, M. G. Tompkins, H. G. Grant, R. O. Jones, A. E. Murray, L. C. Steeves, S. Marcus, J. J. Carroll, H. F. McKay, H. E. Kelley, D. F. Macdonald, A. L. Sutherland, J. R. Macneil and H. J. Devereux.

The President called the meeting to order.

It was moved by Doctor R. O. Jones and seconded by Doctor J. J. Carroll that the minutes of last year's meeting, as published in the Nova Scotia Medical Bulletin in August, 1952, to be taken as read. Carried.

The Treasurer then presented his report including that of the Cogswell

Library.

#### FINANCIAL STATEMENT

The Medical Society of Nova Scotia Year Ending December 31, 1951

#### RECEIPTS

Cash on hand January 1, 1951	\$ 7,586.87
Members Annual Subscription to Medical Society	8,716.00
Receipts from Advertising, Medical Bulletin	6,635.26
Receipts from Annual Convention	2,468.00
Sale of Car Emblems	46.00
Interest on Savings Account	7.13
Amount received for Group Insurance	8,330.11
	\$ 33,789.37
EXPENDITURES	
Cost of Publishing Medical Bulletin	4,672.70
Members' Fees to Canadian Medical Association	4,314.00
Salaries	3,712.00
Travelling Expenses	1,516.17
Sundry Expenditures	1,157.15
Cost of Annual Convention	2,646.50
Bank Charges, Collection Costs and Exchange on Cheques	82.66
Group Insurance costs and refunds.	8,273.91
Cash on hand	
Current Account\$ 5,981.85	
Savings Account	
and the second of the second o	\$ 7,414.28
	\$33,789.37
MEMO OF ASSETS	
Cash on Hand	\$ 7,414.28
Amount advanced as loan from Current Account to Maritime Medical Care.	\$ 2,000.00
	\$ 9,414.28

#### STATEMENT OF LOSS AND GAIN

Annual Subscription after deducting amount paid to Canadian Me	dical Associ-		
ation		\$	4,402.00
Proceeds from Medical Bulletin after paying for publication			1.962.56
Sale of Car Emblems			46.00
Bank Interest on Savings Account			7.13
		8	6,417.69
Less:		•	0,11,100
Salaries	\$ 3,712.00		
Travelling Expenses	1,516.17		
Sundry Expenses, Supplies, etc	1,157.15		
Net Loss on Annual Convention	178.50		
Bank charges, cost of collections and exchange on cheques.	82.66		
		\$	6,646.48
Net loss on year's operation		\$	228.79
COGSWELL LIBRARY FUND			
Nova Scotia Branch, Canadian Medical As Year Ending December 31, 1951	sociation		
Balance on hand January 1, 1951		\$	18.55
Income for year			155.07
		-	
		\$	173.62
Less:			
Dalhousie University	\$ 150.00 5.12		
		\$	155.12
Balance on hand December 31, 1951		\$	18.50

Doctor R. O. Jones moved the adoption of this report which was seconded by Doctor D. F. Macdonald. Carried.

The following resolution was read by Doctor Samuel Marcus.

Resolution adopted at the annual meeting of the Lunenburg-Queens Medical Society on April 7th, 1952.

WHEREAS, A number of financial institutions—such as the banks—and commercial firms have contributory retirement plans, tax exempt, for the benefit of their employees, and

WHEREAS, A large number of the younger members of the medical profession, not having had the opportunity to accumulate for retirement during pre-war periods of low taxation, would in all likelihood be very grateful for a society-sponsored group retirement plan if it were tax-exempt, and

WHEREAS, The contribution to public welfare by this group of younger medical practitioners is out of all proportion to the monetary reward which they receive.

Therefore, be it **Resolved** that The Medical Society of Nova Scotia take up the matter of a tax-exempt group retirement plan with the Income Tax Division of the Department of National Revenue in an attempt to get a

favourable ruling, and

Be it further **Resolved**, that in the event of a favourable ruling by the Income Tax Department, this Society seriously and actively undertake the establishment of such a tax-exempt group retirement plan.

Doctor Marcus moved the adoption of this resolution which was seconded by Doctor J. W. Reid. It was moved by Doctor J. W. Reid and seconded by Doctor J. J. Carroll that the President nominate a committee to seriously consider this matter and report back suggestions to the Executive. Passed. The resolution to be presented to the general meeting.

A second resolution passed by the Lunenburg-Queens Medical Society was also read by Doctor Marcus.

It was also passed unanimously that this society approved, for putting on the agenda of the Nova Scotia Medical Society, a government exemption of monies spent for post-graduate studies.

Doctor Marcus moved the adoption of this resolution which was seconded by Doctor D. F. Macdonald.

Doctor J. W. Reid did not think there would be much use in pressing for tax exemption unless very definite limits were put on it. It was moved and seconded that the resolution be left on the table. Passed.

The following letter was next read by Doctor A. L. Sutherland.

172 South Bentinck Street, Sydney, Nova Scotia, August 24, 1952.

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

At the last meeting of the Cape Breton County Medical Society held in Sydney, considerable discussion took place concerning payment of medical accounts by the Children's Aid Society.

This matter has been under deliberation over the past year, and at one of our meetings the local representative was in attendance.

A motion was made that the fees had been set on the basis of a schedule of standardized fees laid down by the Nova Scotia Medical Society and a proration will be made of accounts when submitted.

This resolution is being forwarded to the Secretary of the Nova Scotia Medical Society to be dealt with at the Executive meeting in September.

The representatives of the Society attending the Executive meeting will elaborate on this matter and will furnish full details.

Yours very truly, (Sgd.) H. R. Corbett, Secretary

It was moved by Doctor H. F. McKay that this matter be referred to the Medical Economics Committee, which was seconded by Doctor R. O. Jones. Passed.

The following letters re a full-time secretary were read respectively by Doctors H. E. Kelley and Doctor H. G. Grant.

Berwick, N. S., May 10, 1952.

Dr. L. Morton, President, Nova Scotia Medical Society, Yarmouth, N. S.

Dear Sir:

At a recent meeting of the Valley Medical Society a motion was passed that I should write you to find out if you have any valid reasons for wanting a full-time secretary for the Nova Scotia Medical Society.

I was also instructed—as part of the motion—that unless there is some such reason that the Valley Medical Society is against such an appointment.

Thanking you for your reply,

Yours sincerely,

(Sgd.) R. A. Moreash, Sec'y. Valley Medical Society.

172 South Bentinck Street, Sydney, N. S., 3 April, 1952.

Dr. H. G. Grant, Secretary, Nova Scotia Medical Society, Dalhousie Public Health Building, Halifax, N. S.

Dear Doctor Grant:

Re: Appointment Full-Time Secretary

This matter was discussed on two previous occasions and, as you have already been informed our Society went on record as *not* approving the appointment of a full-time medical secretary.

We will not have another regular meeting of our group for several weeks, however in conversation concerning this matter, with several of our members, there is no reason to believe that any change in the general policy as indicated above, has taken place within the past few months.

Yours very sincerely, (Sgd.) Herbert R. Corbett, Secretary, Cape Breton County Medicai Society.

Doctor H. F. McKay stated that Pictou County Medical Society were practically unanimous against a full-time secretary for the Nova Scotia Branch alone, but were in favour of a full-time secretary for the Maritime Provinces, if feasible. Doctor S. Marcus stated that the Lunenburg-Queens Medical Society were in favour in principle, but were adopting a wait and see attitude, and for the time being were on the fence.

The Secretary stated that at the annual meeting of the Canadian Medical Association at Banff Doctor MacMillan of Charlottetown had called a meeting of the Secretaries of the Maritime Provinces, and they had been asked to go back to their Branch meetings and see if next year instead of four annual meetings they have one combined meeting. He then read the following letter.

East Riverside, N. B. August 15th, 1952.

Dear Doctor Grant:

Re: Conjoint Annual Meeting of Atlantic Provinces Medical Societies.

You will probably know that, at the Canadian Medical Association Meeting in Banff there was some informal discussion reholding a conjoint annual meeting for the four Atlantic Provinces, either in 1953 or 1954. The C. M. A. Annual Meeting in those years is in Winnipeg and Vancouver respectively. It is also desirable to promote closer relations between the Atlantic Provinces. Those members who discussed this in Banff agreed to sound out their respective divisions on the idea. It has now been found out that the places that could accommodate a meeting of this nature properly would be in Halifax, St. Andrews and perhaps Digby.

At a meeting of our Executive Committee on July 7th, 1952, the following Resolution

was passed:

"That we approve of the idea of having a conjoint Annual Meeting for the Atlantic Province Divisions, and that Dr. George Skinner and Dr. F. L. Whitehead represent us at any joint meeting that may be called to consider this matter with the other

provinces."

Perhaps you would be good enough to have this matter brought forward at your Annual Meeting and let me know, in due course, whether your division would wish to have a meeting to discuss details. If such a meeting is to be held next year, the hotel reservations will have to be made very soon.

Very best regards,

Yours sincerely, (Sgd.) F. L. Whitehead, Secretary, The New Brunswick Medical Society.

Doctor J. W. Reid thought that the Society would lose their local flavour

altogether, and suggested that the matter be tabled.

Doctor A. L. Sutherland stated that the Cape Breton Medical Society representatives had been instructed to vote against it. Doctor H. F. McKay stated that the Pictou County Medical Society had not had a full meeting, but the feeling was that the Nova Scotia Branch has much more to offer than the group suggested, and it was felt that a joint meeting might be used as part of a bargaining agent.

Doctor H. G. Grant: "I would like to point out that next year is our one hundredth anniversary and I think the Nova Scotia Branch would like to cele-

brate that by themselves."

Doctor M. G. Tompkins: "We should know ourselves what we want to do."

Doctor S. Marcus stated that the Lunenburg-Queens Medical Society had discussed the matter at their last meeting, and they were doubtful of the value of such a meeting, but were in favour of one trial meeting, either at Halifax or Digby.

It was moved by Doctor J. W. Reid and seconded by Doctor J. J. Carroll that the Society defer consideration of a joint meeting for another year, but that in the interval the possibility of holding a joint meeting be explored by the Secretary. Passed.

Doctor J. W. Reid wondered if there would be any way of getting from the Branch Societies their reasons for not having a full-time Secretary. He thought the Society should explore the possibility of a full-time Maritime Secretary, not necessarily a medical secretary.

The Secretary stated that the next item on the agenda was in connection with the request which had come to the Society last year that two representatives be appointed to the governing board of the Maritime Hospital Service Association, and which has not been finalized.

Doctor J. W. Reid: "Our refusal to send representatives to that group is a

petty thing. The only reason for not sending them is that we feel they are our competitors. Their particular scheme of coverage is not identical with ours."

Doctor H. F. McKay: "This came up at our Pictou County Medical Society meeting, and they were practically unanimous that we should not have representatives on the board."

Doctor A. L. Sutherland stated that the Cape Breton Medical Society had not talked it over.

Doctor H. G. Grant stated that The Medical Society of Nova Scotia had refused in the beginning to approve Blue Cross Medical Care Plans because they were not complete, and because their directorate was a lay directorate.

Doctor H. E. Kelley: "This was never brought up at our Valley Medical Society. Blue Cross has a pretty wide coverage in the Provinces. I think we should at least consider it well."

It was moved by Doctor D. F. Macdonald and seconded by Doctor S. Marcus that the Executive appoint two representatives to the governing board of Maritime Hospital Service Association. It was decided that this should come before the general meeting.

The following letter was next read by Doctor H. G. Grant.

135 St. Clair Avenue West, Toronto 5, Ontario, December 21, 1951.

#### To Secretaries of Divisions

Dear Doctor:

#### Re: Membership for Doctors in Military Service.

On the suggestion of Dr. Halpenny, Secretary of the Quebec Division, the Executive Committee, at its last meeting took action as outlined in the under-mentioned Minute:

"That the Canadian Medical Association continue the policy of granting Canadian Medical Officers serving with the Armed Forces outside of Canada, free membership in the Association until one year after their return to Canada."

We have requested the Medical Chiefs of the three Armed Services to provide us with the names of Officers who qualify under this Minute. As the names come to us, we shall send them on to the appropriate Divisional Secretaries in case the Division should desire to take action with respect to Divisional membership.

> Yours sincerely, (Sgd.) T. C. Routley, General Secretary.

It was moved by Doctor H. F. McKay and seconded by Doctor J. J. Carroll that this be endorsed by this Society. Passed.

The next item ws the following letter read by the Secretary:

135 St. Clair Avenue, West, Toronto 5, Ontario, February 19, 1952.

#### To the Secretaries of the Divisions

Dr. H. G. Grant, Dalhousie Public Health Centre, Halifax, N. S.

Dear Doctor Grant:

#### Re: Medico-Lay Organizations

Appended hereunder is a copy of the minute appearing in the records of the last meeting of the Executive Committee:

#### '101- Medical-Lay Organizations Endorsation Committee

At the last meeting of General Council, the following Resolution was passed:

"That General Council instruct the Executive Committee to appoint a special committee named 'The Endorsation Committee for Medico-Lay Organizations', whose duty it shall be to study all medico-lay organizations which make a national appeal for funds as to their validity and necessity and to make recommendations to the Executive Committee as to whether or not they should receive the endorsation of the Canadian Medical Association."

The Chairman previously named a sub-committee of three to study this matter,—Dr. Harold Orr, Convener, Dr. Walter Scriver and Dr. Norman Gosse. Dr. Orr reported that his committee had met and had also considered the subject by correspondence and would now recommend as follows:

It would seem desirable that there be established a screening body to check up on organizations, particularly medico-lay organizations, going to the public for money, but that this screening body should not be the Canadian Medical Association. Matters of this nature would appear to lie within the orbit of the Provincial authorities and therefore any action should be taken Provincially.

'102— After much discussion it was moved by Dr. Orr, seconded by Dr. Scriver that in the opinion of this Executive Committee, the Canadian Medical Association should (1) ascertain from our legal adviser the relative jurisdiction of the Dominion and the Provinces in this matter, and (2) in the event of jurisdiction lying within the Provinces, that we inform the Divisions of that fact and urge upon them the advisability of offering their co-operation to their respective Governments in such matter as they deem proper. Carried.

As instructed, this material was referred to the Association's solicitor for an expression of opinion.

Appended as Exhibit A in this letter is the solicitor's reply. It would appear that the summary clearly indicates that the weight of authority over medico-lay organizations lies with the provinces. It would therefore seem to be in order for each Provincial Division of the C.M.A. to take such action as it sees fit in respect to this matter.

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

## FLEMING, SMOKE, MULHOLLAND & BURGESS Barrister and Solicitors

Northern Ontario Building, 330 Bay Street, Toronto 1, Ontario. February 14th, 1952.

Dr. T. C. Routley, General Secretary, Canadian Medical Association, 135 St. Clair Avenue West, Toronto 5, Ontario.

Dear Dr. Routley:

#### Re: Screening of Medico-Lay Organizations

Although we have discussed the matters mentioned in your letter of December 11th, 1951, on the telephone with you since that time, we have delayed writing you on the questions in which your Executive Committee seems to be seeking guidance, until we could hear from the Attorneys-General of the various provinces to whom we wrote for information.

Regardless of the manner in which these organizations may be formed, they are all subject to the Criminal Code. The Criminal Code, for example, contains provisions in respect of fraud, so that if one of these organizations or the persons representing it committed fraud, they would be committing an offence against a Dominion statute, The jurisdiction in respect of criminal matters lies with the Dominion Parliament.

On the other hand, the jurisdiction in respect of property and civil rights, except within certain areas definitely marked off for Dominion jurisdiction, lies with the Legislature of the provinces. For example, laws requiring such organizations as these to obtain a license for soliciting funds, or to furnish particulars of their objects, copies of their constitutions, lists of their officers, particulars of who may solicit and in what manner subscriptions are to be granted, who is to have control of the money raised and how it is to be a applied, to be furnished to and approved of by some authority before a granting of a license, would proply be the subject of Provincial legislaion.

If the organization were to seek incorporation, it might do so under the Dominion Companies Act or the Companies Act of any province, or by special act of the Dominion Parliament or the Provincial Legislatures. If the objects of the fund were Dominion wide, incorporation should properly be sought from the Dominion. If the purposes are local, incorporation should be sought from the province. Dominion incorporation would not relieve the organization of the necessity of complying with Provincial legislation enacted by a Provincial Legislature in respect of property and civil rights. The organization might, therefore, be required to take out a license in any province in which it sought to operate or solicit funds if licensing legislation were there in force.

There is no Ontario legislation directly applicable to these funds, or more particularly to medico-lay appeals, although we understand from the Attorney-General's Department that it has been considered. A similar situation prevails in Prince Edward Island, Nova Scotia, Quebec, Saskatchewan and British Columbia.

Newfoundland and New Brunswick have not yet replied to our inquiry.

Alberta has a statute known as the Public Contributions Act which applies to every organization that solicits or obtains contributions from the public for health services, other than such as may be exempted under regulations enacted by the Lieutenant-Governor in Council. This legislation requires the organization to file certain information before commencing its canvass and to file a financial statement with the Government after the completion of its campaign, and empowers the Government to publish such information relating to the organization and its campaign as it may deem to be in the public interest. This Pro-

vincial legislation would not, of course, apply to an organization created outside of Alberta and making no solicitations in that province.

In Manitoba, there is a provision in the Hospital Aid Act to the effect that any organization holding tag days must obtain the approval of the municipal corporation in which the solicitation takes place.

In the case of any medico-lay organization which might seek incorporation either from the Dominion or a province, there is in practice a certain amount of screening done by the

Government Departments controlling the issue of charters.

The Assistant under Secretary of State for the Dominion has written us to say that it is the prevailing practice in his Department when dealing with such applications to refer the particulars to the Department of the Government interested, and if the authorities of such Department have any reasonable objection to the granting of the charter, the discretionary power invested in the Secretary or State under the Companies Act is exercised and the application is refused.

A similar policy to the above is followed by the Provincial Secretary's Department in Ontario. An application from such a medico-lay organization as those under consideration

would undoubtedly be referred to the Department of Health for a report.

There appears to be a similar practice in Quebec, Manitoba, Saskatchewan and Alberta. In British Columbia, the process of incorporation seems to be free of restrictions of the above character at the outset, but we are informed by the Attorney-General that the Lieutenant-Governor in Council is given practically unlimited discretion in revoking the incorporation of a society, but to date, the only ground on which the power has been exercised has been where the societies have been using their corporate powers for the purposes of evading the gaming sections of the Criminal Code.

Prince Edward Island seems to have no settled practice in such matters and Nova Scotia reports that it has not yet had an application from any such organization and no practice

has been established in respect of such things.

In addition to the restrictions above indicated, the Assistant Registrar of Joint Stock Companies for Alberta reports that the Department of Public Health in that province has been quite concerned about associations such as you mention and follows their activities after incorporation or registration.

From the above it is apparent that the weight of authority over-medico-lay organizations of the character which your Committee has in mind, and over the matters to which your letter refers, lies with the provinces, and that where Government assistance is sought, it could be most effectively obtained from the provincial authorities. Provincial medical associations could probably bring to bear effective influence on their local Governments, first of all, through the Departments controlling incorporation and secondly, by urging the enactment of Provincial legislation similar to that now in force in Alberta.

Yours truly,

#### FLEMING, SMOKE, MULHOLLAND & BURGESS,

Per: (Sgd.) A. L. Flemming.

Doctor J. W. Reid thought that the Society should come to some agreement about medical participation in these things.

Doctor H. G. Grant: "I do not think there is any doubt as to the value of these medico-lay organizations. Many of them have done a great good and we should give them our approval."

Doctor H. F. McKay thought that the Public Relations Committee should

handle it.

Doctor A. E. Murray: "Do any of these organizations ever publish a statement as to how the money comes and where it goes?"

Doctor J. W. Reid moved that a standing committee be appointed to act,

if requested, as a medical advisory board to lay organizations which are formed for the control and relief of specific disease states on matters of medical and scientific concern. The committee to be appointed by the Nominating Committee. This was seconded by Doctor R. O. Jones. Carried.

The following letter was read by the Secretary.

Halifax, N. S., 7 April, 1952.

Doctor L. M. Morton, President, Nova Scotia Medical Society, Yarmouth, N. S.

Dear Dr. Morton:

Re: Proposed Changes to Workmen's Compensation Act of Nova Scotia.

I read in the papers a few days ago that there were some changes being proposed in the present Workmen's Compensation Act which appeared to be harmless enough on reading the newspaper report but, nevertheless, I called Dr. A. B. Campbell and Dr. D. M. Grant of the Compensation Board to try and find out from them whether there was a "nigger in the wood-pile."

Both Dr. Grant and Dr. Campbell assured me that, as far as they could see, the legislation was of a progressive nature and in line with that already in force in various other provinces and that they could not see that it would be inimical to our profession as a whole.

However, some days later Dr. Herb Whitman of Westville, who is a member of my committee, called me up to say that some of his confreres were rather concerned at the possible implications of the impending legislation and asked me to check. Accordingly, I got in touch with Dr. Pat Grant, your secretary, and asked him to get in touch with Dr. Allan Morton, who, as you know, is the chairman of the committee on legislation for the Nova Scotia Medical Society. I also called Dr. Robertson, the Deputy Minister of Health, and asked if there was anything that he knew about this proposed legislation that might be adverse to our best interests. He told me that his department had not been consulted when this legislation was being put forth and that, in fact, his department was not interested.

I then discussed the matter again with Dr. A. B. Campbell of the Compensation Board and he said that he had not found out anything in the meantime which caused him to alter

his first opinion.

I then called my brother, Dr. C. P. Miller, president of the Cape Breton Medical Society, a group which I thought would be vitally interested in these proposed changes and Charlie told me that there was no commotion in his area but that he would take it up with representative members of his Society and if they were concerned about the proposed legislation that he would call me again by telephone. I have not had the subsequent call from him and I presume that there is no objection to this legislation on their part.

Dr. Allan Morton got in touch with me this morning and stated that he had discussed the matter fully with the Minister of Works who brought forward the proposed legislation and Dr. Morton was quite satisfied that there was nothing proposed that would be harmful to our Society as a whole. He stated that there were two aspects to the proposed amendment. (1) That the company, presumably the British Empire Steel and Coal Company, would be allowed to hire their own medical representative who would have the right to examine patients who are receiving compensation, but that these men would have no jurisdiction as far as the Workmen's Compensation Board was concerned other than that of any other medical practitioner. The other phase of the matter was that if a man was dissatisfied with his treatment by the Compensation Board after they had called in an outside consultant he had the right then to appeal to the Minister who would designate a qualified Medical Referee to pass an opinion.

According to Dr. Campbell this would merely be another medical opinion and would

not necessarily overrule the findings of the Board.

I then called Dr. Herb Whitman on the phone and told him what had gone on and he said that he and his group would be satisfied to accept any action that we would take, having considered the situation. Apparently, his people were in the dark as to the actual content of the proposed amendment.

However, I wanted to keep you informed as to what we have done here in case you wish

to take further action.

Yours sincerely, (Sgd.) B. F. Miller, M.D., Chairman Workmen's Compensation Board Committee.

Doctor J. W. Reid thought that the Society needed a lawyer more than they needed a full-time secretary.

The Secretary next read the following letter.

105 Hollis Street, Halifax, N. S. April 21, 1952.

Dr. H. G. Grant, c/o Dalhousie Public Health Clinic, Halifax, N. S.

Dear Dr. Grant:

I have been asked to write you in your capacity as Secretary of the Nova Scotia Medical Society.

As you possibly know, in recent months there has been a Nova Scotia Chapter of the, Multiple Sclerosis Society of Canada formed and the provisional executive has requested me, as Secretary of the local Chapter, to write you respecting the appointment of two physicians from your Society to comprise the medical advisory board of our Nova Scotia Chapter.

I might say that the National Organization has, as its medical advisors, Dr. Wilder G. Penfield, Dr. Roma Amyot, Dr. C. E. G. Gould, Dr. L. T. Kurland, Dr. Alvin T. Mathers

and Dr. J. Clifford Richardson.

Similar appointments are requested for the Nova Scotia Chapter. Would you be so kind as to bring this matter before your Executive and advise me at your earliest convenience of the appointees.

Thanking you, I am

Yours sincerely,
(Sgd.) Kenneth S. Smith,
Honorary Secretary, Nova Scotia Chapter,
Multiple Sclerosis Society.

It was moved by Doctor R. O. Jones that this letter be handed over to the new committee dealing with medico-lay organizations. This was seconded by Doctor D. F. Macdonald.

The question was asked as to what authority this committee would have, to which Doctor L. M. Morton replied they would decide whether this was a worthy object or not, and advise the Society to that effect. Doctor J. W. Reid stated that was contrary to the spirit of his resolution, and his motion was reread by the Secretary.

Doctor H. G. Grant stated he wished to make an apology to the Execu-

tive that he had not answered the letter from The Registered Nurses' Association of Nova Scotia of January 29th, 1952, and stated that he would write a letter of apology to them.

The Secretary read the following excerpt from a letter of Doctor A. E.

Blackett's dated August 3rd.

"Last night I was discussing with my successor on the Executive—Dr. Hugh McKay—the proposition re combined meetings of the N. B. and N. S. Societies. We agreed that while we would be very glad to see any of the N. B. brethren at our meetings, it would be a nice gesture if they would first assist Maritime Medical Care to be licensed in N. B. before we agreed to any union."

The Secretary advised that letters had been received from Doctors W. E. Gallie, Lewis Thomas and C. S. Morton thanking the Society for their honorry Also cards from Mrs. W. F. MacKinnon, Mrs. D. J. Hartigan. memberships. Mrs. E. DuVernet, Miss Ward (niece of the late Doctor Pratt) and Mrs. R. D.

Lindsay thanking the Society for wreaths sent.

The following five members were then elected to Honorary membership in The Medical Society of Nova Scotia: Doctor F. E. Rice nominated by Doctor L. M. Morton; Doctor W. A. MacLeod nominated by Doctor H. F. McKay; Doctor C. B. Trites nominated by Doctor Samuel Marcus; Doctor A. Calder nominated by Doctor A. L. Sutherland, and Doctor O. B. Keddy nominated by Doctor J. J. Carroll. It was moved by Doctor R. O. Jones that these men be granted Honorary membership in the Society. This was seconded by Doctor J. W. Reid and passed.

It was moved at twelve o'clock noon that the meeting adjourn to recon-

vene at two-thirty p.m.

The reconvened meeting of the Execuive was called to order by the President at 2.30 p.m., September 3, 1952, at Lakeside Inn, Yarmouth, with all members present.

The Report of the Cancer Committee was read by Doctor H. G. Grant.

Secretary of Nova Scotia Branch,

Canadian Medical Association,

Halifax, Nova Scotia.

For the purpose of providing a survey of the cancer situation your committee has again investigated the data in more than five hundred cancer patients.

The largest groups consisted of lesions of the Face: 145, Breast: 72, Cer-

vix: 64, Lip: 45 and Mouth: 27.

In cancer of the face the interval between onset and the first consultation has decreased slightly but the interval is still high, approximately eighteen months.

Cancer of the Mouth. The duration of the lesion before consultation is two years. Average age is sixty-five years. The cause in most cases is obvious; rough and ulcerating teeth, badly fitting dentures and neglected areas of leucoplakia are frequent.

It is surprising to find many otherwise cleanly people who pay so little attention to their mouths. The absence of initial pain is the greatest cause for

this neglect.

Appropriate prophylactic measures would save a great deal of suffering. Cancer of the Breast. Thirty-three were classified as clinically early while thirty-nine were advanced. Owing to the now fairly prevalent habit of selfpalpation of the breast a marked improvement in the consultation time is shown. Twenty-two patients consulted their doctor within a week of the discovery of a tumour which was often very small and in most cases operation was

promptly performed.

While the patients in this group acted with creditable promptness operation in nine cases was delayed from six to twelve months. To quote from a previous report: "It appears essential that in every case of a tumour of the breast or other clinical changes such as an abnormal bloody discharge an immediate attempt should be made to make an accurate diagnosis. If doubt remains the lesion should be removed and submitted for pathological diagnosis."

It is difficult to find any reason for temporizing measures in such an insidious condition as Cancer of the Breast.

Clinical evidence is accumulating to show that there is a certain type of breast malignancy which metastasizes very early even before clinical evidence of the primary growth. The solution of this problem must rest in the realm of cancer research.

Comparison with reports made elsewhere in similar groups of patients would seem to indicate that Nova Scotia has more than its normal expectancy of Cancer of the Breast.

Cancer of the Lip. The interval before consultation has increased from twenty-one to twenty-four months.

The absence of pain is still the main factor that prevents earlier consultation and encourages the prolonged use of home remedies.

Cancer of the Cervix. A particular survey of Cancer of the Cervix was not made but in the majority of cases the interval between consultation and treatment was short, the shortest of all the groups.

Distribution of Patients. A question has been asked as to the relative proportion of malignant patients in Halifax City and County to the rest of the Province. Of one hundred and sixteen patients in the groups of Breast, Mouth and Lip twenty-three were from Halifax County. The remaining ninety-three from various parts of the province. This proportion of approximately four to one corresponds fairly well with the difference in population. No one section of the province appears to have more than its normal percentage of malignancy.

Treatment. The Annual Report of the American Cancer Society contains many interesting statements. It is said that in fifty years that the cancer deaths will be double the present rate. This will be attributable to the increasing proportion of the population over the age of forty and more exact methods of diagnosis.

Many new agents are being used but it is much too soon to attempt to assess their real value. The success of radiation therapy depends not only on the destruction of the tumour but also on the preservation of normal tissues. It must always be remembered that the difference in sensitivity between a malignant tumour and normal tissues may be very slight and until the difference in sensitivity can be increased, radiation of deeply settled tumours will have very definite limitations. Cancer surgery has made notable advances but the

extremely radical and multilating operations performed in large centres with an infinitesmal chance of cure are to be condemned.

We can be proud of the fact that the surgeons of this province are too humane to attempt such operations. It is of little use to remove a tumour if the patient is hopelessly disabled and dies as the result.

Cancer Statistics. Statistics regarding any aspect of malignancy are still very confusing. Clinics all over the world are striving with one another to show that their results are the best. The various methods used in the compilation of statistics make it very difficult to assess the comparative value of different forms of treatment. One clinic will publish a series of cases in which advanced lesions have been carefully eliminated while another bases its report on all cases regardless of the clinical stage, the only fair method but naturally giving less favourable results.

Cancer statistics would become much more reliable if we realized our limitations and were content to classify cases into two groups, early and ad-

vanced.

To attempt to divide clinically any type of cancer into three or four stages with various sub-divisions based on the very crude method of palpation would appear to be assuming an unwarranted knowledge of a microscopic growth.

The personal element in the estimation of clinical growth is very great. This has been proved many times by submitting the same case to several sur-

geons when frequently as many different opinions are obtained.

It has been stated by those with great experience that there is a fifty per

cent error in palpation of the axilla in breast cancer.

It would appear that all tumours which are large or have extended beyond the original site should be regarded as advanced and treated accordingly. The margin of error in the diagnosis of early cases should not exceed fifteen to twenty per cent while in the diagnosis of advanced cases the error would be very small.

The cancer situation in this province has on the whole shown some improvement. Patients in most groups are showing greater interest and a desire

to have early treatment.

Cancer education is obviously not reaching the groups of mouth, lip and skin lesions and greater efforts should be made to appeal to these patients, stressing the importance of cleanliness of the mouth and the unimportance of the absence of pain.

It is felt that the medical profession should pay a greater part in cancer

education.

The personal and intimate association between patient and doctor which is possible with our small population could be used with great effect in cancer propaganda. Interrogation of more than eight hundred patients on this point shows that information given by their own physician has greater influence than when obtained from any other source.

> (Sgd.) S. E. Johnson, N. G. B. McLetchie.

August 25, 1952.

There were may compliments on Doctor Johnston's report.

It was moved by Doctor H. F. McKay and seconded by Doctor A. E. Murray that it be accepted. Carried.

The Report of the Public Health Committee was next read by the Secretary.

H. G. Grant, M.D., Secretary, Canadian Medical Association, Nova Scotia Division, Halifax, Nova Scotia.

Dear Dr. Grant:

The following is the report of your committee on Public Health for the

past year.

The past year has been one of steady progress in the field of Public Health. The latest statistics available, those for the year ending March 31st, 1949, rereveal that, excluding some of the diseases common to the older age groups, mortality rates have continued to decline.

Heart Disease again occupied the position of the leading cause of death. In 1949, there were 1,550 fatalities. The "aging" of our population affords only a partial explanation. We, like the public in general, cannot help but be concerned about the number of deaths and severe incapacitations occurring among those in early adult life. Coronary artery disease is a problem of prime im-

portance and more extensive research would appear to be warranted.

Cancer, with 864 deaths in 1949, was again second place in the causes of death. Incomplete knowledge of the disease and, like heart disease, an aging population are among the most important factors in its prominence as a leading cause of death. Within recent months a concerted effort is being made to make treatment facilities more efficiently available to the people of this province. In no public health field in this province have we made greater strides than in tuberculosis control. Preliminary figures would indicate that our death rate is less than 20 in 100,000 population. This represents a truly remarkable achievement and it is due to the concerted efforts of the medical profession, official agencies, and the Nova Scotia Tuberculosis Association.

In addition to regular diagnostic clinics, more recently augmented by a Mobile Photo-roentgen Unit operating in rural areas, there was inaugurated last year a routine hospital admission X-ray programme. Presently there are photo-roentgen units taking 4 x 5 admission films in five of the hospitals in the Province. This year it is proposed that three more units will be installed. The X-ray machines are provided free by the Department of Public Health and the hospital is paid by the Department for each film taken. There is no charge to the patient. With some 13% of our population admitted to hospital each year, there is every reason to expect that this hospital admission X-ray programme will be most productive in case finding. Indeed, preliminary figures would so indicate.

In the Mental Health Field, progress continues to be made. At the Nova Scotia Hospital the diagnostic and treatment facilities have been increased, and all the university psychiatrists make regular visits as consultants. The Victoria General Hospital has a small in-patient and a larger out-patient psychiatric service. Field clinics are operated in Sydney and in Digby and an important research branch is sponsored in the latter area. Nova Scotia, along with the other two Maritime Provinces and Newfoundland, continues to support an extensive training programme in psychiatry and clinical psychology

at Dalhousie University, and in psychiatric social work at the Maritime School of Social Work in Halifax.

The Infectious diseases, with the notable exception of Poliomyelitis, do not give us the concern they did some years ago. However, we must bear in mind that we must not relax our immunization programme if we are to maintain our present happy position. That is a fact that is frequently not fully appreciated.

Poliomyelitis constituted a problem of the first magnitude last year. The epidemic began about the last week in June, reached its peak the week of August 26th and tapered off about the end of November. To say it gave us a

rough time would be a bit of an understatement.

There were fifteen cases under one year of age and the oldest patient was 63. The age group 5-9 closely followed by the 1-4 group, had the most cases. Halifax City had 155 cases and the County 93. Colchester, Digby and Kings County were rather badly hit. Queens County and Cape Breton as a whole got away lightly. In all there were 428 cases and 24 deaths during the calendar year. Curiously, Kings County, with only 26 cases, had as many deaths, six, as Halifax City and County together although the latter had 248 cases.

The new programme which aims to decentralize treatment facilities should

make for more efficient and timely handling of polio cases in the future.

In 1949, the material mortality rate was 1.1 per 1,000 living births. The infant mortality rate for the same period was 43.2. The excellent reduction in maternal and infant deaths is a tribute both to the medical profession and the medical school.

In the field of Dental Hygiene, a combined educational and treatment programme was carried on for children under 13 years of age in isolated rural areas during the summer and fall months, June-December, three mobile dental units each staffed with a dentist and a dental assistant carried on this programme and treated 2,550 children last year. At every clinic stop that it was possible to arrange, talks were given to school and adult groups on dental health. These talks stressed the importance of prevention of dental disease, selective diet, and careful oral hygiene. The stimulation of interest in dental health that is a natural result of the visit of one of these mobile dental units to a rural community is one of the most valuable features of this service.

During the period January to May, the staff from two of the mobile units carried on dental treatment for patients in the three provincial sanatoria. Six hundred and fifty patients benefited by this service last year. Aside from the beneficial effect on general health resulting from the removal of infected teeth, the comfort and peace of mind that follows the restoration of decayed teeth to useful function by fillings does much to improve the morale of the patients and helps to hasten their recovery.

The Post-graduate course in Clinical Preventive Medicine, held in January of this year in Halifax, was an outstanding success. The speakers, both from the Province and outside, handled their varied subjects in an able manner. In Antigonish on September 10th, 1951, the Provincial Association of the Medical Health Officers was officially terminated and the Atlantic Branch of the Canadian Public Health Association came into being. It is purposed that all those engaged in public health work shall have an organization where their

views may be expressed and in which they can more closely integrate their efforts with that of other public health workers.

Trusting that the above report is sufficiently detailed,

Respectfully submitted.

(Sgd.) G. Graham Simms, M.D., D.P.H.,

Chairman.

Doctor Grant moved the adoption of this report, which was seconded by Doctor R. O. Jones, who stated he wished to compliment the chairman.

Doctor H. F. McKay asked about the fluorination of water and thought it would be a good idea to ask the Public Health Committee to investigate this matter.

The report of the Medical Economics Committee was read by Doctor H. J. Devereux.

> Sydney, N. S., August 29th, 1952.

The Secretary,

Nova Scotia Medical Society.

Dear Sir:

Herewith we submit the report of the Economics Committee for the past year.

Your Committee had several meetings during the past year. The main business had to do with consultations with the Provincial Government, represented by the Minister of Health and his Deputy; Director of child welfare; and old age pensions people.

As of December 31st, 1951, our contract with the Provincial Health Department for medical services to recipients of old age pensions, was terminated.

The per capita allotment for beneficiaries of mothers' allowances and blind pensions was increased from 75c to 83c; the payment of mileage was discontinued.

As you know the pro-rated payments have increased from 40% to the present rate of 100% of bills rendered. Maritime Medical Care Incorporated

are administering the funds for these two groups.

In our discussion with the above named groups, our attention was directed to the gradually increasing costs of medical services for the care of orphans; and the urgency of payment demanded for same by some medical men. in some cases there appeared to be charges out of all propertions for this type of case, or at least a very definite lack of charity usually shown by our profession, when treating indigent patients.

The Cape Breton Medical Society reviewed this problem locally and had a select committee discuss it with the local administrator of the Children's Aid Society. This committee found the facts justified some remedial action,

which has since been put in force.

Attached is a balance sheet of the Welfare Account as submitted to us by Maritime Medical Care Incorporated showing a surplus of approximately \$9,000.00 for the first six months of the year.

Respectfully submitted,

(Sgd.) Harvey F. Sutherland, Chairman, Economics Committee N. S. Medical Society.

#### PROVINCIAL WELFARE ACCOUNT SUMMARY, REVENUE AND EXPENDITURES January 1, 1952 — June 30, 1952

January February REVENUE: March April May June TOTAL. Allow-Mothers \$6,527.12 \$6,530.44 \$ 6,505.54 \$ 6,538.74 \$ 6,525.46 \$ 6,493.09 \$39,120.36 ance..... 609.22 609.22 605.07 Blind . . . . . . . . . . . . . . . . 615.03 610.05 606.73 3,655.32 TOTAL...... \$7,142.15 \$7,140.49 \$ 7,114.76 \$ 7,147.96 \$ 7,130.53 \$ 7,099.82 \$42,775.71 Less: Administration... \$ 499.95 500.36 499.83 498.03 499.14 496.99 2,994.30 Available Funds \$6,642.20 \$6,640.66 \$ 6,616.73 \$ 6,647.60 \$ 6,631.39 \$ 6,602.83 \$39,781.41 Balance forward from previous month ..... 767.31 2,465.13 4,078.49 6,091.20 7.681.10 9,539.74 767.31 \*Balance forward from 1951 Total Funds Available Period \$ 7,409.51 \$9,105.79 \$10,695.22 \$12,738.80 \$14,312.49 \$16,142.57 \$40,548.72 EXPENDITURES

Mileage..... 1.122.38 \$ 1.459.30 \$ 892.02 1,343.70 \$ 1,401.75 \$ 2,251.38 Medical Accounts 3,822.00 3,568.00 3,371.00 3,712.00 3,714.00 4,545.00 TOTAL..... 4,944.38 5,027.30 4,604.02 5,057.70 4,772.75 6,796.38 Total Funds Expended—Period \$ 31,202.53

Available Funds July 1, 1952....

2,465.13 4,078.49

6,091.20

7,681.10

9,539.74

9,346.19 \$ 9,346.19

Doctor H. F. McKay moved the adoption of this report which was seconded by Doctor J. F. Macneil and carried. It was stated that this report should be referred to the incoming Medical Economics Committee.

The report of the Cogswell Library Committee was read by Doctor H. G.

Grant.

Halifax, N. S., August 26, 1952.

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

#### Dear Dr. Grant:

Herewith the Annual Report of the Cogswell Library, as composed by Miss Allan of the Dalhousie Medical Library.

During the fiscal year July 1, 1951-June 30, 1952, the Medical Library purchased 74 books at a cost of \$591.80. The Cogswell Library Fund furnished \$200.00 of this amount.

Twelve titles were added to the MacDougall Library of the Provincial Medical Board (Cost—\$181.58).

The Library received as gifts 88 books and pamphlets.

The following Journals have been added to the subscription list—

Acta Anatomica
Acta Chirurgica Scandinavica
Acta Oto-laryngologica
Acta Radiologica
American Journal of Ophthalmology
Diseases of the Chest
G. P. (American Academy of General Practice)
Laryngoscope
Pharmacological Reviews
Psychiatric Bulletin

The Library continued its policy of lending books and journals to practitioners in the Maritimes. (125 books and journals were circulated to 26 borrowers).

During the term the Library made extensive use of the inter-Library loan facilities of Canadian and American medical libraries. In return we were able to fill requests for twelve Canadian libraries.

Respectfully submitted,

R. L. Aikens B. K. Coady

J. McD. Corston (Chairman)

It was moved by Doctor M. G. Tompkins that this report be adopted. This was seconded and carried.

The report of the Public Relations Committee was next read by the Secretary.

President of the Nova Scotia Medical Society, Dalhousie Public Health Clinic, Halifax, N. S.

#### Dear Sir:

As Chairman of the Public Relations Committee, I wish to report that during the year there were no matters referred to the committee from the Nova Scotia Society or from the Canadian Medical Association.

This last fact is curious, in as much as our committee is understood to be an honorary or corresponding member of the Public Relations Committee of this latter body. One finds it hard to understand the lack of information forthcoming from the Canadian body at a time when Public Relations between the Medical Association and the public is said to be so critical.

The one contentious item of business concerning public relations in Nova Scotia, namely that of the Old Age Pensions, passed out of the picture without a murmur from any party. The advance warning of the end of this scheme sent to all pensioners no doubt contributed to this happy ending.

It has been suggested that the Public Relations Committee should stir up their own activity for the year, and not depend on the problems being forwarded to them. This could probably be done if the committee were smaller and the members from one locality. This suggestion might be considered by the executive for their opinion and guidance to incoming Public Relation Committees.

Yours very truly, (Sgd.) C. H. Reardon.

The Secretary felt that the Public Relations Committee should have a budget so that they could use the press freely on our behalf.

It was moved by Doctor J. F. Macneil that this report be adopted. This

was seconded by Doctor D. F. Macdonald and carried.

The report of the Provincial Medical Board was read by Doctor M. G. Tompkins.

August 22, 1952

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

#### Gentlemen:

I beg to submit a report of the activities of the Provincial Medical Board for the past year on which the Society is represented by six members, all of whom attended the meetings. Two meetings were held, one on December 4, 1951, and the other on May 8, 1952. There were also two meetings of the Executive.

The Board contributed \$490.20 to defray the expenses of Dr. W. E. Gallie of Toronto, who gave the John Stewart Memorial Lecture at the annual Dalhousie refresher course. It has also continued its support to the Cogswell Library. The Medical Act was extended to permit qualified physicians not registered in Nova Scotia who were engaged in research projects in Nova Scotia approved of by the Department of Health, to examine patients for the purpose of such projects, provided that they neither asked or accepted a fee for such examination.

The Board authorized consolidation of the Medical Act in anticipation of the next session of the Legislature subject to its approval before being sub-

mitted to that body.

The representatives of the Board on the Medical Council of Canada reported steps proposed by that body for consideration to improve the experience of candidates for licensure. The Board, however, had not approved a suggestion made by the Association of Canadian Medical Colleges that a graduate of any of them be given the license of the Medical Council of Canada without examination.

The Board also refused courteously an offer of reciprocity with the State

of Michigan, U.S. A.

The Discipline Committee investigated one case of alleged professional neglect and felt that it was not serious enough to require more than a letter of admonition.

The fraudulent registration by an alleged Medical Officer of the Royal Canadian Navy who under this guise presented documents, the property of Dr. Joseph Cyr of Grand Falls, New Brunswick, was dealt with by erasure of his name from the Register on the advice of counsel. The Board has supported Dalhousie University in its continuance of the coincidental examinations with

the Medical Council of Canada. While the scheme has some disadvantages, especially to those who fail papers, the decided advantages preponderate.

The Board has under consideration applications for examinations to qualify a number of European physicians at present interning in Nova Scotia hospitals. The Board has taken steps to be sure of their professional acceptance before allowing them to sit these examinations.

Fifty-three graduates of Dalhousie were examined and found qualified

for the license when they paid the necessary fees.

Respectfully submitted, (Sgd.) H. D. O'Brien

It was moved by Doctor M. G. Tompkins and seconded by Doctor J. J. Carroll that this report be adopted. Carried.

The report of the Legislative Committee was read by Doctor A. R. Morton.

President and Members of the Executive, Canadian Medical Association, Nova Scotia Division.

#### Gentlemen:

The report of your Legislative Committee for the year is as follows:

The Committee has not had a formal meeting. I have contacted the other members of the Committee on a couple of occasions by letter and have

had telephone conversations with the other Halifax member.

Early in 1952 I received from the Secretary, Dr. H. G. Grant, a copy of a letter from Mr. Henry Muggah, Legislative Counsel of the Province, addressed to Dr. J. S. Robertson, Deputy Minister of Health, re certain proposed amendments to the Medical Act, and enclosing copies of two bills which they proposed to send to the Legislature at the session coming up in February, 1952. I went over these two proposed bills with Mr. Muggah and sent copies of them to members of my Committee. Copies of both bills are appended to this report. I felt that Mr. Muggah's letter to Dr. Robertson showed a number of places in the Medical Act where the actual meaning of certain words is not absolutely clear, and as different terms are used in different places, it further confuses the old Medical Act. In order to follow this, of course, one must have a copy of the Medical Act before them. This Act was last consolidated and presented in the Statutes of 1923. There have been a number of amendments since then and also additions made to this Act. Mr. Muggah explained to me that the present changes which he had contemplated making would consolidate this Act which is now almost thirty years old. Bringing all the changes in direct line would require very careful study. After looking this over members of my Committee felt that we should have legal assistance in order to check this completely and thoroughly before it went to the House. Under those circumstances Mr. Muggah was agreeable not to put any consolidation before the last Session of the House, and on further interviews with him the Bill which would allow for reciprocal treatment at the border of Nova Scotia and New Brunswick was also withheld but the Bill allowing for research workers to work in Nova Scotia if the project had been approved by the Minister of Health and as long as they were excluded from examining patients and treating them. did go before the House with my sanction. I trust that the Society will endorse this action.

During the early summer when Mr. Muggah spoke again about preparing the complete consolidation of the Act, I spoke to the President, Doctor L. M. Morton, and to the Secretary, Doctor H. G. Grant, of the Society, and both felt it was advisable, as did I, that we employ legal representation to be present and to work with Mr. Muggah in our interests and on our behalf during the consolidation of the Medical Act. Mr. Muggah had hoped that this would be done during the summer holiday period, but I was informed by him on August 20th, that he has not begun the work as yet. I did ask Mr. Frank Smith to act on behalf of The Medical Society of Nova Scotia and to keep me informed as to any changes which might be contemplated in the consolidation of the Act. Mr. Smith says that up to date he has had no word from Mr. Muggah in regards to this and therefore nothing has been done.

I would like to point out, however, that this is a most important undertaking and there are many things which would effect the Society very materially, and I feel that a very close supervision should be given to this consolidation in order that our interests may be completely protected. I feel that, under these circumstances, the Society should endorse the retaining of Mr. Smith as legal consultant in these matters, and that a very strong Committee should be appointed to work with Mr. Smith during the coming year and that this Annual Meeting of The Medical Society of Nova Scotia so pro-

ceed to protect our interests.

Respectfully submitted,

(Sgd.) Allan R. Morton, Chairman On behalf of the Committee which consists of Dr. D. M. MacRae and Dr. W. J. MacDonald, Truro.

1952

NO.

An Act to Amend Chapter 113 of the Revised Statutes, 1923, The Medical Act

BE IT ENACTED by the Governor and Assembly as follows:

1. Subsection (2) of Section 24 of Chapter 113 of the Revised Statutes,

1923, The Medical Act, is amended by adding thereto the following:

"nor shall any physician from outside the province engaged within the province on a research project that has been approved by the Minister of Public Health be excluded from examining patients included in that project so long as he neither charges nor accepts fees from any patient." Doctor Morton moved the adoption of this report which was seconded by Doctor D. F. Macdonald. Carried.

The report of the Editorial Board Committee was read by Doctor M. E.B.

Gosse.

# Report of the Editorial Committee of The Nova Scotia Medical Bulletin—1951-52.

Mr. President and Members of the Executive:

I have the honour to present the report of the Editorial Board for the past year. A number of the Bulletin has appeared for every month in that year but the material contained in the whole twelve numbers was just about what should have gone into six. It has come to our attention that complaints have been heard and comments made on how "there was nothing in the Bulletin last month." The painful truth is that a great deal of the time there has been nothing to put in, and this in spite of the fact that there have been more outside speakers in Nova Scotia and in Halifax in the past year than ever before.

The time is long over-due when serious consideration should be given to the question as to whether Nova Scotia wants to continue to have a medical journal of its own. If yes, then the doctors of Nova Scotia must be prepared to support it, not merely by kind words and honoraria for the editors, not just by weeping sentimental tears when mention is made of a journal with a different name and a broader field, but by contributing to it the life blood that it needs and must have if it is to survive.

When the present Editor-in Chief took over it was customary to publish three and sometimes four original scientific articles in a month, in addition to correspondence, reports of meetings, etc. The sources of this plentiful supply of scientific material were varied and it is recalled that many papers were forthcoming after the yearly medical society meetings and refresher courses. But there was still a satisfactory flow of papers from the ordinary doctors who wrote because they had a subject which interested them. The whole picture has now changed. Few speakers at either annual meetings or refresher courses have prepared papers but tend rather to prepare lantern slides and speak from a card with a few jotted headings. As for the doctor who writes a paper for the fun of it, he has almost ceased to exist. In the Bulletins which have come out since January 1952 we have had barely one paper a month on any scientific subject, and almost none on general basic questions.

Acknowledgment of these facts lays the editors open to the charge they are lacking in energy in their pursuit of contributions. This is far from being the case. Our diligent and importunate efforts are rewarded by a few promises, made in many cases only to be broken and we are put off from month to month by doctors who have read excellent papers at meetings but cannot find the time to put them in shape for publication. And so in order to publish a monthly journal we are obliged to fill the pages with matter which though often of interest and value is not enough to maintain our standards at a level where contributors or advertisers are satisfied.

Mention has been made of the presence of many outside speakers in the past year. This refers, of course, to those brought into the Atlantic Provinces under the Kellogg Post-Graduate Plan. A gross over-sight for which the editors are not in the least responsible resulted in failure to have a satisfactory working arrangement with this committee to the benefit of both parties. Thus we have not secured publication of a single paper originating from these post-graduate lectures. The lectures are recorded on a tape recorder but what becomes of the material afterwards is not revealed to us.

One bright spot deserving of mention in this otherwise gloomy report is the frequent appearance of articles on the medical history of Nova Scotia. These are of real merit and unique interest and here the name of Doctor Kenneth A. MacKenzie should be mentioned, although he is not alone in this field. These stories of bygone days should be brought to mind while there are still

those among us to relate them and more of them would be most welcome. A very suitable way of marking the approaching centenary of The Medical Society of Nova Scotia would be to collect in one volume all the historical

papers which have appeared in the Bulletin over the years.

It has been the custom of the Editorial committee in previous reports to offer recommendations. It would, however, appear that this is a waste of time, breath and ink, since reports or recommendations receive so little attention. For the past two years the editors have been urging that unedited minutes should not be published in the Bulletin, for reasons which appear to us too obvious and too numerous to mention again. Last year the Executive, far from giving this suggestion the consideration which it so clearly merited, brought in a resolution to the effect that the minutes should continue to be published in the Bulletin. The August Bulletin has thus consisted entirely of minutes and it is our fervent hope that the Society may now be constrained to seek another means of recording and circulating its proceedings. from a personal communication received this week "much of the discussion is banal or inaccurate and the publication exposes the family wash to the eyes of the neighbours." The editors very properly take no responsibility for any of this and feel they have a right to make this clear to their readers. No Editorial Committee can look for more than the opportunity to publish a decent. dignified and suitable journal, ministering to the needs and tastes of discerning readers. This seems to be a singularly difficult task in Nova Scotia todav.

Respectfully submitted,
(Sgd.) Margaret E. B. Gosse, Editor.

Doctor Gosse moved the adoption of this report which was seconded by

Doctor H. E. Kelley. Carried.

Doctor Gosse felt that the Editorial Board should consist of more than two members, at least three members, and that one should be a member of the Post-Graduate Committee.

The report of the Secretary was next read.

Report of the Secretary, the Nova Scotia Division of the Canadian Medical Association, September, 1951 to August, 31, 1952.

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

The Annual Meeting this year was held at Antigonish and due to the hard work of our President, Doctor J. J. Carroll, and his competent committees, was a huge success. The meetings were held at the University Residence of St. Francis Xavier University, and the displays were shown in the Gymnasium.

The scientific programme was excellent. The visitors this year were Doctor H. B. Church, President of the Canadian Medical Association, and Mrs. Church, Doctor Carleton B. Peirce, Professor of Radiology, McGill University, Doctor Glenn Sawyer of St. Thomas, Ontario, Doctor E. M. Worden, Lecturer in Paediatrics, McGill University, Doctor A. D. Kelly, Deputy General Secretary of the Canadian Medical Association, and Doctor H. M. Coleman, Surgeon, Toronto East General and Orthopaedic Hospital, Toronto.

Doctor Church spoke at the annual dinner, his topic being "General Practice in Rural Areas," and also Doctor Sawyer spoke to the same topic at one of the luncheons. At the second luncheon we were favoured with an excellent

address by Rev. J. P. Nicholson of St. Francis Xavier University.

The local contributors to the meeting were Mr. C. R. Ross, Industrial Hygiene Engineer, Department of Public Health, Doctor G. G. Simms, Chairman of the Health Committee, Provincial Civil Defence and Doctor M. M. Hoffman, Professor of Experimental Medicine, Dalhousie Medical School.

The social side of the meeting was also well provided for. There was an informal dance at the Community Hall at the Dingle, Tuesday evening, September 11th, and the usual annual dinner was held on Wednesday evening, September 12th. There were several functions for the ladies and the golf

tournament was held at the Antigonish Golf and Country Club.

The business sessions were taken up chiefly with the matter of medical economics and considerable time was devoted to the relationship between The Medical Society of Nova Scotia and Maritime Medical Care. A communication was received from the Maritime Hospital Association asking for two representatives to their executive, but no action was taken. Dean Grant gave a very brief description of the present post-graduate scheme of medical education of Dalhousie University. The Trans-Canada Medical Plan was endorsed by the Executive. The By-Laws were formally changed so that hereafter the representatives will consist of one from each of the Branch Societies, except that of Halifax and Cape Breton, these Societies each will have two representatives. Doctor John Wickwire gave a very comprehensive report on Maritime Medical Care taking up its growth, financial status, the medical taxing committee and the present efforts of that Company to secure a medical director. There was considerable discussion, most of it very critical. Doctor A. G. MacLeod, Doctor E. T. Granville and Doctor C. H. Reardon all spoke very critically of the fact that they had changed the office fees without consulting The Medical Society of Nova Scotia. Doctor H. F. Sutherland also spoke critically and suggested that hereafter the meeting of Maritime Medical Care be held after the annual meeting of the Executive of The Medical Society of Nova Scotia.

The Treasurer's Report was given showing The Medical Society of Nova Scotia to be still in a healthy financial condition, the surplus for the year 1951 being over \$1,700.00.

There were 38 new members admitted to our Society.

Also there was a resolution which is that hereafter the business of the meeting would be held in a different manner, the first day to be given over entirely to the meeting of the Executive and consequently the two business meetings following will be very brief. Also a resolution was passed that hereafter all members of the Executive and all members of Standing Committees be paid out of pocket expenses incident to their duties rather than as heretofore for mileage and per diem payment. The question of a full-time secretary was taken up and discussed by representatives of the several Branch Societies; this was again sent back to the Branch Societies asking that their resolutions be brought up at the next meeting of the Executive. The Secretary spoke of having sent out letters of welcome to all the recent graduates inviting them to

join the Society at a reduced rate. There were 33 letters sent and 14 took advantage of this offer. The appointments to the Provincial Medical Board consisted of Doctors H. D. O'Brien, A. E. Murray, S. G. MacKenzie, Jr., E. I. Glenister, M. R. Elliott and H. F. Sutherland. The report of the Medical Economics Committee was brought up in the second meeting and Doctor J. J. Carroll turned the latter part of the meeting over to the incoming President, Doctor L. M. Morton of Yarmouth.

The semi-annual meeting of the Executive of The Medical Society of Nova Scotia was held at the Dalhousie Public Health Clinic at Halifax, December 5, 1951, with Doctor L. M. Morton in the chair. Doctor A. E. Blackett, the representative of The Medical Society of Nova Scotia to the Executive of the Canadian Medical Association, presented a very comprehensive report of the meeting of that Executive dealing with The World Medical Association, The World Health Association, general practice, endorsation of medico-lay associations, income tax, nursing, medical service for dependents of members of the

armed forces, hospital standardization.

Doctor L. M. Morton asked the opinion of the Executive regarding the next annual meeting at Yarmouth. He also introduced the matter of Maritime Medical Care. Doctor M. G. Tompkins also spoke and so did Doctor A. E. Blackett giving us the most important features of Maritime Medical Care. Doctor P. R. Little of Truro spoke with regret of the action of the Halifax Medical Society in threatening legal action against Maritime Medical Care. A resolution of full support to Maritime Medical Care by The Medical Society of Nova Scotia was introduced by Doctor H. F. Sutherland in his report of the Medical Economics Committee, and this was seconded by Doctor M. G. Tompkins. There was considerable objection raised and particular reference was given to the changing of office fees by Maritime Medical Care without consulting The Medical Society of Nova Scotia. Doctor Morton then suggested that before further action the President of Maritime Medical Care, Doctor Norman H. Gosse, be requested to speak before the Executive. It was moved that the resolution be laid on the table until that was done. All Branch Societies then expressed themselves on the question of a full-time secretary, but again opinion was divided, so no action was taken. Doctor A. W. Titus then gave a very comprehensive report on the request coming from the Medical Students of Dalhousie for a loan fund. The Executive decided that for the time being no action be taken on this and that there should be The meeting reconvened in the evening at 8.00 p.m., at which time Doctor Norman H. Gosse gave a statement dealing with Maritime Medical Care and the relationship of that company to The Medical Society of Nova Scotia. He told us how the company originated, he pointed out that control really rested with The Medical Society of Nova Scotia through the House of Delegates. He denied the charge that Maritime Medical Care had changed the office fees without consulting The Medical Society of Nova Scotia. He spoke with regret of the very poor relationship between The Medical Society of Nova Scotia and Maritime Medical Care and he spoke of the matter of a part-time medical director and of the effort of Maritime Medical Care to secure one. After considerable discussion the resolution of the Medical Economics Committee asking for the full support of Maritime Medical Care and giving suggestions for improvement of relations was unanimously adopted.

In July, 1951, an agreement was entered into between the Nova Scotia Division of the Canadian Medical Association and the North American Life Assurance Company regarding group insurance. To date it appears that this agreement has been quite satisfactory to the members of our Society, for whereas 195 took advantage of this offer in the year 1951-52, when the time came for renewal 174 of the 195 renewed their insurance policies.

Your Secretary attended the annual meeting of the Canadian Medical Association which was held in July at Banff, Alberta, with a very large attendance. One of the important matters that came out of the meeting is that the Canadian Medical Association have increased their fee by \$10.00, and the question must be decided at our meeting as to whether we continue to collect

this increased fee for the Canadian Medical Association.

Membership of our Society continues to remain in a healthy condition. This year there are 490 members, of which 465 belong to the Division and also to the parent Association, one belongs to The Medical Society of Nova Scotia only, and 25 are honorary. Comparing this with last year it is interesting to note that the membership has increased by twelve.

The following members have passed away since August 31, 1951:

John Rankine, M. D., Dal. 1904, died at Halifax on September 28, 1951 at the age of sixty-nine.

Norman Darrell Harvey, M. D., Columbia 1888, died at New York on

October 14, 1951, at the age of eighty-six.

Nelson Pratt, M. D., Dal. 1900, died at Stewiacke on December 6, 1951, at the age of eighty-four.

William Busby Coulter, M. D., Dal. 1921, died at Halifax on November

14, 1951, at the age of sixty-five.

David James Hartigan, M. D., Dal. 1911, died at New Waterford on January 16, 1952, at the age of sixty-four.

Henry Allison Payzant, M. D., Dal. 1897, died at Dartmouth on February

8, 1952, at the age of seventy-nine.

Frederick William Green, M.D., McGill 1902, died at Glace Bay on January 24, 1952, at the age of seventy-five.

Anthony Ivan Mader, M. D., McGill 1891, died at Halifax on April 5,

1952, at the age of ninety.

William Francis MacKinnon, M. D., Dal. 1902, died to Antigonish on May 26, 1952, at the age of seventy-four.

Edward DuVernet, M. D., McGill 1893, died at Digby on May 14, 1952,

at the age of eighty-four.

Roy Dickson Lindsay, M. D., Dal. 1917, died at Windsor Junction on July 24, 1952, at the age of sixty-one.

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

The list of obituaries was read at the business session, when one minute's silence was observed in commemoration of departed members.

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

carried.

There were no reports from the Historical Committee, the Medical

Museum Committee or the Industrial Medicine Committee. The report of the Workmen's Compensation Board Committee was received after the meeting was over, so was not read, but is given below.

Halifax, N. S., 30th August, 1952.

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

# Re: Annual Report, Workmen's Compensation Board Committee The Medical Society of Nova Scotia

Dear Dr. Grant:

Herewith the Annual Report of your Workmen's Compensation Board Committee, of which I have the honour of being chairman.

The other members of my committee are Doctors H. B. Whitman, J. H. L.

Simpson and J. R. Macneil.

The only item of business which came before the committee was the pro-

posed changes in the Workmen's Compensation Act of Nova Scotia.

The first indication of these proposed changes came to us via newspaper reports in April 1952, and whilst they appeared harmless enough in these reports, we investigated the matter more fully.

The medical members of the Workmen's Compensation Board, Doctors A. B. Campbell and D. M. Grant, were interviewed, as well as Doctor Allan Morton, the Chairman of the Legislation Committee, the Deputy Minister of Health and the President of the Cape Breton Medical Society.

All agreed that there was nothing in these changes which would be inimical

to the best interests of our Society.

Accordingly a letter to this effect was sent to our President, Doctor L. M. Morton, who agreed that no further action need be taken by us.

Yours sincerely,
(Sgd.) B. F. Miller, Chairman,
Workmen's Compensation Board Committee,
The Medical Society of Nova Scotia.

The report of the Pharmaceutical Committee was read at the General Session.

The usual honoraria to the Treasurer and the Editorial Board and the

salary of the Secretary and the clerical secretary were approved.

Doctor J. R. Macneil moved that Doctor M. G. Tompkins be appointed the representative on the Executive of the Canadian Medical Association. This was seconded by Doctor J. J. Carroll and passed.

Doctor D. F. Macdonald nominated Doctor J. W. Reid as alternate to

Doctor Tompkins. This was seconded and passed.

It was moved by Doctor M. G. Tompkins that Doctor G. R. Forbes and Doctor Eric W. Macdonald be the representative and alternate respecively on the Nominating Committee of the Canadian Medical Association. This was seconded by Doctor J. J. Carroll and passed.

The following were elected members on the Council of the Canadian Medical Association: Doctors M. G. Tompkins, G. R. Forbes, S. Marcus, H. F. McKay, A. G. MacLeod, J. R. Macneil, H. J. Devereux and J. W. Reid and H. G. Grant, ex officio.

It was moved by Doctor D. F. Macdonald that nominations cease.

The following members were approved as members to the House of Delegates of Maritime Medical Care Incorporated: Doctors A. L. Sutherland, A. E. Blackett, T. B. Murphy, G. C. Macdonald, H. A. Fraser, A. G. MacLeod, P. R. Little, D. M. Cochrane, J. R. MacLean, H. J. Devereux, H. A. Moreash, C. H. Reardon, D. F. Macdonald, J. C. Wickwire, N. H. Gosse and A. L. Murphy.

It was moved by Doctor H. E. Kelley and seconded that the following doctors be taken in as members of The Medical Society of Nova Scotia. Car-

ried.

Doctor W. J. Barton, Halifax Doctor W. I. Bent, Bridgewater Dr. R. W. M. Bethune, Montreal Dr. A. J. Campbell, Halifax Doctor J. S. Campbell, Melrose, Mass. Doctor S. E. Copp, Kentville Dr. D. L. Davison, Bass River Doctor R. C. Eaton, Dartmouth Doctor S. C. B. Fullerton, Halifax Doctor W. A. Gardiner, Glace Bay Dr. P. S. Gardner, D'Escousse Dr. Z. Gorecki Doctor W. Guzdziol, West Bay Road Doctor B. D. Karrel, New Waterford Doctor David Kernohan, Parrsboro Doctor H. D. Land, Sydney Doctor A. Laretei, Kentville Doctor A. M. Lawley, Weymouth Doctor E. D. MacArthur, Middle Musquodoboit

Doctor D. A. G. MacEachen, Elmsdale Doctor A. S. MacIntosh, Halifax Doctor J. H. MacLeod, Liverpool Dr. R. K. Merriam, Middleton Doctor J. E. H. Miller, Halifax Doctor W. R. Morrison, Amherst Doctor A. G. Nutlay, Halifax Doctor John Potter, Halifax Doctor D. I. Rice, Halifax Doctor J. H. L. Robbins, Lockeport Doctor J. E. Ross, Halifax Doctor W. M. Rov, Halifax Doctor Phyllis M. Sers, Goldboro Doctor L. A. Skinner, Glace Bay Doctor L. T. Stead, Halifax Doctor A. W. Taylor, Halifax Doctor C. Uhma, Glace Bay Doctor J. Urbaitis, River John Doctor W. N. Watt, Spryfield

It was moved by Doctor J. R. Macneil that the Secretary be empowered to sign cheques for the Society in the absence of the Treasurer. This was seconded by Doctor J. W. Reid. Carried.

Doctor A. L. Sutherland moved that Doctor A. G. MacLeod be the representative on the Executive of the Canadian Medical Association of General

Practice. This was seconded and carried.

After a short discussion it was moved by Doctor M. G. Tompkins that the Executive recommend to the General Meeting that we are in favour of collecting the annual fee for the Canadian Medical Association, as in the past, with the increased rate of \$10.00 to the Canadian Medical Association, making a total of \$30.00, \$20.00 to the Canadian Medical Association, and \$10.00 for The Medical Society of Nova Scotia. This was seconded by Doctor J. R. Macneil. Carried.

It was moved by Doctor M. G. Tompkins that the Executive adjourn at 5.05 p.m.

#### 99th ANNUAL MEETING OF THE MEDICAL SOCIETY OF NOVA SCOTIA

#### FIRST BUSINESS MEETING

THE first general session was held in the Boat-house at Lakeside Inn, Yar-

mouth, N. S., on Thursday, September 4, 1952, at 9.45 a.m.

The President, Doctor L. M. Morton, called the meeting to order. He welcomed the members to Yarmouth and hoped they would all have an enjoyable time. He had expected to have His Worship W. F. Allen, Mayor of Yarmouth, welcome the members, but unfortunately the Mayor and the Deputy Mayor were both away. Mr. Robbins, one of the members of Council, welcomed the members in a short address.

Doctor Morton asked the members to visit the advertising booths, and

sign the cards at each booth.

Doctor Morton told the general meeting about the very satisfactory meeting of the Executive which was held the previous day. At this meeting, which started in the morning and continued through the afternoon, the whole agenda was completed. It was not definitely stated at that meeting just what should be brought before the general meeting, but Doctor Morton decided he would give a résumé of everything important that had gone on and then ask for ap-

proval of the action of the Executive.

He told them of the Executive having approved of the Minutes of the 1951 Annual Meeting as published in August, 1952 Nova Scotia Medical Bulletin. He referred to the two resolutions from the Lunenburg-Queens Medical Society, the first one dealing with a tax exempt retirement plan, on which it was decided that the President should nominate a committee to seriously consider this matter and report back suggestions to the Executive; and the second, which was tabled, dealing with the Government exemption of monies spent for post-graduate studies. He referred to the resolution of the Cape Breton Medical Society concerning the payment of medical accounts by the Children's Aid Society which had been referred to us. He told of the discussion regarding a full-time secretary and that since the feeling amongst the Branch Societies was divided no further action had been taken. He referred to the suggestion sent in by Doctor F. L. Whitehead, Secretary of the New Brunswick Medical Society, for a combined meeting of the four Atlantic Province Medical Societies, and that as we planned to hold a centenary next year our Executive had recommended that we do not subscribe to this suggestion. At this point there was considerable discussion regarding the holding of a centenary, and Doctor J. W. Reid felt we should have a very special programme, and that funds should be received for this purpose. The Secretary said that he considered it a most important event and every care should be taken to see that the event was properly celebrated. Doctor C. L. Gosse spoke about the expenses in connection with the Canadian Medical Association Annual Meeting in Halifax in 1950, and estimated that our Society would need something in the vicinity of \$3,000.00. President L. M. Morton spoke about the importance of the time of the year, and suggested that it should be held in July, that the attendance would be larger. He also wanted to know whether the meeting wished the Society to settle this matter or whether we would refer it

to the incoming Executive. Doctor J. J. Carroll moved that the incoming President be empowered to appoint a committee to deal with this matter. This was seconded by Doctor N. H. Gosse and carried. Doctor N. H. Gosse felt that the Society should express themselves as to how much the assessment should be. Doctor J. J. Carroll moved that the total amount of money needed for our celebration be left to the committee appointed for that purpose, and that individual members of the Society be assessed accordingly. Doctor Morton stated that the matter of having a combined meeting with the other Provinces should be delayed for two or three years. Doctor N. H. Gosse brought up the question of the full-time secretary and asked how many Branches did not subscribe to the idea, and the President replied that Cape Breton, Pictou and the Lunenburg-Queens Medical Societies were against it, although no definite reasons were given to the Executive. Doctor H. F. McKay stated that the Pictou County Medical Society were against a full-time secretary for the Province of Nova Scotia alone, but they felt that the possibility of a full-time secretary for the four provinces should be investigated. The next item taken up was whether or not representatives should be appointed to the Maritime Hospital Service Association. Doctor H. F. McKay stated that the Executive had decided to appoint two representatives if that action were endorsed by the main body. Doctor N. H. Gosse moved that the action of the Executive be not subscribed to by this Executive, and that was seconded by Doctor J. R. Macneil. Doctor C. L. Gosse asked what objections there were to appointing two representatives. Doctor E. T. Granville was in favour of sending representatives to this body; Doctor J. W. Reid also felt that we should send representatives. Doctor N. H. Gosse's motion was put and lost. It was moved by Doctor C. C. Harries, seconded by Doctor E. T. Granville that the action of the Executive to appoint two representatives to Maritime Hospital Service Association be endorsed by the main body. This was passed. It was moved by Doctor H. J. Devereux that the Nominating Committee appoint these two representatives. This was seconded by Doctor E. T. Granville and passed. The next item taken up was the action of the Executive dealing with free membership to officers serving with the Armed Forces outside of Canada. This action was approved. The next item was Doctor J. W. Reid's resolution that a standing committee be appointed to act as a medical advisory board to lay organizations, the committee to be appointed by the Nominating Committee. Doctor Reid said that he proposed this resolution so as to set up medical boards for these lay boards. Doctor G. B. Wiswell referred to the organization under way of the Canadian Diabetes Association, and stated that if we were antagonistic to this group it would result in doing harm to sick people. He thought we should do everything we could to assist these lay organizations with the necessary co-operation. Doctor N. H. Gosse moved an amendment that that committee be empowered to study the relationship between lay medical bodies and this Association and to report back at the next meeting of the Executive. This was seconded by Doctor R. A. MacLellan and passed. The Secretary then read the letter from Mr. Kenneth S. Smith, Honorary Secretary of the Nova Scotia Chapter, Multiple Sclerosis Society, and this matter was referred to the new committee.

At the end of the first business session Doctor J. C. Wickwire, President of Maritime Medical Care, gave a very comprehensive report on the activities

of that company during the past year. On account of being behind in schedule the President asked Doctor Wickwire if he would continue this report at the

next meeting.

The President, Doctor L. M. Morton, then appointed his Nominating Committee as follows: Doctors A. R. Morton of Halifax, G. R. Forbes of Kentville, H. F. McKay of New Glasgow, D. F. Macdonald of Yarmouth and H. J. Devereux of Sydney.

The meeting adjourned at 11.30 a.m.

#### SECOND BUSINESS MEETING

The second business meeting of The Medical Society of Nova Scotia was called to order by the President, Doctor L. M. Morton at Yarmouth, on Friday, September 5, 1952, at 9.30 a.m., in the Boat-house at Lakeside Inn, with Doctor L. M. Morton in the chair.

Doctor J. C. Wickwire first spoke and referred to three resolutions which had been passed by the House of Delegates of Maritime Medical Care In-

corporated.

The first one was—"Moved by Doctor A. G. MacLeod seconded by Doctor J. R. MacLean that the House of Delegates recommend to The Medical Society of Nova Scotia that the Society set up a permanent Tariff Committee with wide powers to adjust present fees and to set new ones where applicable. Said committee to be representative of the Society as a whole." Doctor Wickwire moved the adoption of this resolution which was seconded by Doctor N. H. Gosse and passed. Doctor Gosse also added to that motion that this resolution be referred to the Executive for nomination of members, that there be representatives to that committee from the whole Province, and that the committee be made up of five members.

The second resolution was—"Moved by Doctor H. J. Devereux, seconded by Doctor D. F. Macdonald that the House of Delegates recommend to The Medical Society of Nova Scotia that inasmuch as there is a surplus accruing from the operation of the Provincial Welfare Plan that the medical coverage be enlarged to include additional services such as tonsils and adenoids, and other similar services." Doctor Wickwire moved the adoption of this resolu-

tion, which was seconded and passed.

The third resolution was—"Moved by Doctor A. G. MacLeod, seconded by Doctor J. R. MacLean, that the House of Delegates, upon behalf of the officers of the Corporation, obtain from The Medical Society of Nova Scotia authority to take whatever action is necessary to correct the abuses in reference to home and office care as outlined in the President's report."

There was considerable discussion about this last resolution but it was finally moved by Doctor N. H. Gosse and seconded by Doctor H. G. Grant

that this resolution be adopted. Carried.

Doctor T. C. Routley, the General Secretary of the Canadian Medical Association, was then introduced. He spoke about his bad fortune in not having attended our annual meetings for a number of years. Recently he had attended the International Labour Organization and he spoke about their intense interest in the matter of socialized medicine.

Doctor A. R. Morton then gave the report of the Nominating Committee as follows:

Place and time of 1953 meeting; Halifax, depending on hotel accommodation, believe October best month.

President—Doctor J. W. Reid, Halifax.

First Vice-President—Doctor M. G. Tompkins, Dominion.

Second Vice-President-Doctor H. F. McKay, New Glasgow.

Treasurer—Doctor R. O. Jones, Halifax.

Secretary-Doctor H. G. Grant, Halifax.

Legislative Committee—Doctors A. R. Morton and D. M. MacRae of Halifax, and Doctor H. F. Sutherland of Sydney.

Cancer Committee-Doctors N. G. B. McLetchie and S. R. Johnston of Halifax, and V. D. Schaffner of Kentville.

Public Health Committee-Doctor G. G. G. Simms and the Executive of the Atlantic Branch of the Canadian Public Health Association.

Historical Committee—Doctors H. B. Atlee and G. H. Murphy of Halifax. and Doctor R. M. Benvie of Stellarton.

Workmen's Compensation Board Committee—Doctor B. K. Coady of Halifax, Doctor J. C. Young of Sydney, Doctor J. B. MacDonald of Stellarton and Doctor J. H. L. Simpson of Springhill.

Editorial Board Committee—Doctors M. E. B. Gosse, J. R. Corston, C. B. Stewart, C. M. Harlow and E. F. Ross, all of Halifax.

Medical Museum Committee—Doctor A. L. Murphy of Halifax and Doctor J. A. Webster of Yarmouth.

Cogswell Library Committee—Doctors J. McD. Corston, J. H. Charman and A. W. Titus, all of Halifax.

Medical Economics Committee-Doctor H. A. Fraser of Bridgewater, Doctor H. A. Creighton of Lunenburg, Doctor C. B. Stewart of Halifax, Doctor D. M. MacRae of Halifax and Doctor H. F. McKay of . New Glasgow.

Pharmaceutical Committee-Doctor J. R. Macneil of Glace Bay and

Doctor J. C. Murray of Springhill.

Public Relations Committee—Doctor F. J. Barton of Dartmouth, Doctor L. C. Steeves of Halifax, Doctor P. R. Little of Truro, Doctor D. F. Macdonald of Yarmouth and Doctor J. A. MacCormick of Antigonish.

Divisional Representative, Editorial Board of Canadian Medical Association-Doctor C. M. Harlow of Halifax.

Doctor H. J. Martin of North Sydney and Doctor B. F. Miller of Industrial Medicine Committee—Doctor G. R. Douglas of New Glasgow, Doctor H. J. Martin of North Sydney and Doctor B. F. Miller of Halifax.

A new committee appointed to act, if requested, as a medical advisory board to lay organizations which are formed for the control and relief of specific disease states on matters of medical and scientific concern: Doctors H. D. O'Brien, W. D. Stevenson and R. M. MacDonald of Halifax, Doctor L. M. Morton of Yarmouth and Doctor G. R. Forbes of Kentville.

Representatives to Maritime Hospital Service Association-Doctor H. J. Devereux of Sydney and Doctor D. M. MacRae of Halifax.

Centenary Committee—Incoming President in conjunction with the Hali-

fax Medical Society. We feel that the incoming officers should meet with the Executive before leaving here to consider our Centenary meeting.

Doctor Morton moved the adoption of this report which was seconded by

Doctor J. E. LeBlanc. Carried.

Meeting adjourned at 10.15 a.m.

N.B.—Since this meeting the following changes have been made in certain of the Committees. Doctor H. B. Atlee did not accept the Chairmanship of the Historical Committee, and consequently the President, Doctor Reid, appointed Doctor G. H. Murphy; also Doctor K. A. MacKenzie has been added to this Committee.

Doctor J. H. L. Simpson did not accept membership on the Workmen's

Compensation Board Committee.

Doctor H. A. Fraser did not accept Chairmanship of the Medical Economics Committee and he has been replaced by Doctor H. F. McKay, and Doctor P. R. Little has been added to this Committee.

#### THIRD BUSINESS MEETING

The third business meeting of The Medical Society of Nova Scotia was held in the Boat-house at Lakeside Inn, Yarmouth, N. S., on Saturday, September 6, 1952, at 9.30 a.m.

The President, Doctor L. M. Morton, was in the chair.

The first item was the Treasurer's report (this is published in full in the minutes of the Executive). It showed a deficit for the year 1951 of about \$200.00. The report was accepted.

The second item of business was the list of the members of Council of the Canadian Medical Association adopted by the Executive (this list if published in full in the minutes of the Executive). The action of the Executive was ap-

proved.

The next item was the list of names which the Executive proposed to submit as our representatives to the House of Delegates of Maritime Medical Care Incorporated (this list is also published in the minutes of the Executive). The list was agreed to.

The President, Doctor Morton, stated that the Executive had nominated Doctor G. H. Murphy for senior membership in the Canadian Medical Associ-

ation. This recommendation was accepted.

The list of new members admitted to The Medical Society of Nova Scotia by the Executive was approved (this list is published in the minutes of the Executive).

Doctor Morton told the meeting that the Executive was in favour of collecting the extra \$10.00 for the Canadian Medical Association. He also said that the Newfoundland and Prince Medical Island Medical Societies had approved the same thing. He proposed that on the bills for the coming year we let the members know that \$10.00 will be for the Nova Scotia Division and \$20.00 for the Canadian Medical Association. This action was approved.

The Secretary then read the list of members who had passed away during the past year. This was followed by a minute of silence (the complete list

is published in the report of the Executive).

The report of the Editorial Board was discussed especially that part referring to the difficulty in securing material for the Bulletin. Doctor C. H.

Reardon spoke to this subject and his remarks were most critical. The Secretary referred to the late publication of the Minutes and suggested that if the Minutes of the present meeting were to be published they be published immediately. Doctor J. W. Reid said that it was a great convenience to have them in one issue, especially before the meeting began. He suggested that perhaps we should have reprints made and copies sent out before the next annual meeting.

It was moved that the Minutes be published in the Bulletin and this was

passed.

The following report of the Pharmaceutical Committee was read by the Secretary.

Rawdon Gold Mines, N. S., August 31st, 1952

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

#### Dear Doctor Grant:

As Chairman of the Pharmaceutical Committee of The Medical Society of Nova Scotia for the current year, I beg to report that, since no complaints or criticisms were received either from the members of the Medical Profession or the Pharmaceutical Association, no meeting of this Committee was assembled.

Your Chairman did, however, contact Mr. E. J. Dunsworth of Halifax, President of the Pharmaceutical Association of Nova Scotia, and was informed that the Committee of the Pharmaceutical Association (like our own Committee) had not met, and were not ready to submit any agenda for discussion until

subsequent to their annual meeting in June.

In August, I contacted Mr. D. E. MacKenzie, druggist of New Glasgow, present Chairman of the Liaison Committee of the Pharmaceutical Association and received in reply a very courteous letter, with a number of practical suggestions, which I append to this report for the consideration and action of my successor in office, and which may be regarded as part of this report.

(Sgd.) R. A. MacLellan, Chairman.

#### Fellow Pharmacists:

Acting on the request of the Nova Scotia Medical Society, your Society has appointed the undersigned as a Pharmacy-Medicine Liaison Committee. It is visualized that this committee will form a link between the two professions and thus provide the means for an exchange of ideas on all subjects of common interest.

In order to gather material for an initial meeting with members of the medical group, the committee asks your assistance in compiling a suitable agenda for joint discussions. There are many contentious matters tending to cause disharmony between Pharmacist and Physician and to illustrate we have a list attached with some of these noted. Will you give this matter some thought and mail us your contribution?

Many of to-day's problems of the above type have been classified as unsolvable, and this may be true—nevertheless we anticipate that honest and repeated efforts by both professions towards a solution will have positive results. Under guidance of the College, pharmacy-medicine meetings are being held at the student level and undoubtedly this will have its advantages later on. At the outset we stated that the Medical Society requested this move, so it behooves us to give the idea every support and effort to make it work.

Yours sincerely,

D. A. Ferguson,

C. M. Levy,

D. E. MacKenzie, Chairman.

Please add your comments in line with covering letter and mail to— D. E. MacKenzie, Box 480, New Glasgow, N. S.

#### Proposed Agenda

- 1. Inadequate screening by physician as to eligibility of D. V. A. patients.
- 2. Patients given too much price information by physician when prescribing—see Editorial C. Ph. A. Journal, July 1st, 1952.
- 3. Physician dispensing when pharmacy service available.
- 4. Prescription demand for increasing numbers of duplicated proprietaries.
- 5. Repeat authorization inadequately covered by physician on barbiturates, etc.
- 6. Your comments.....

Drug store preference by physicians for prescriptions. Not asking patients where they prefer to have prescription filled. Also, phoning orders, and not telling patients where to call.

This last clause was received from Mr. C. M. Levy, Proprietor Rexal

Drug Store at Digby.

It was moved by Doctor Grant, seconded and carried that this report be

adopted.

The action of the Executive that the usual honoraria to the Treasurer and the Editorial Board and salaries of the Secretary and clerical secretary be paid for coming year was agreed to.

It was then moved by Doctor J. W. Reid, seconded by Doctor W. A.

Hewat that the whole report of the Executive be approved.

The following letter was then read by the Secretary.

324 Spring Garden Road, Halifax, N. S. August 30th, 1952.

Dr. L. M. Morton, President, Medical Society of Nova Scotia, Yarmouth, N. S.

Dear Dr. Morton:

The Maritime Blue Cross Association offers to subscribers holding a hospital contract, a so-called emergency out-patient service. This service is given within twenty-four hours after an accident or injury. Included in this service the subscriber may have an X-ray examination up to the value of \$10.00, and although I can find nothing in their contract which so states, they demand that such X-rays be taken in an X-ray department of a hospital.

I am engaged in the private practice of Radiology in Halifax and a number of Blue Cross subscribers were referred to me for X-ray examination following injury. The Blue

Cross refused to gonour payment because the X-ray was not made in a hospital X-ray department. I now have no alternative but to advise persons holding a Blue Cross contract that they cannot have X-rays elsewhere than in a hospital.

It is my feeling that the Blue Cross is definitely discriminating against the private practice of Radiology, and are forcing patients into hospitals as out-patients for X-ray ex-

amination. They are also engaging as a corporation in the practice of medicine.

I call this to the attention of the Society and would ask that if possible a letter of protest be sent to the Maritime Blue Cross Association.

Yours truly,

(Sgd.) Wallace M. Roy, M.D., Radiologist.

It was then moved by Doctor J. W. Reid, seconded by Doctor E. T. Granville that a letter be sent to the Blue Cross in support of Doctor Roy's letter protesting the discrimination of radiologists in private practice. This was passed.

The next letter was one from the Community Chest and Council of Greater Vancouver dealing with the matter of narcotics, and it was agreed that this

be referred to the Pharmaceutical Committee.

President Morton then referred to the very excellent report of the Cancer

Committee under the chairmanship of Doctor S. R. Johnston.

At this time the President, Doctor Morton, expressed to the meeting the pleasure it had been to him to be President for the last year, and he turned the meeting over to the incoming President, Doctor J. W. Reid. Doctor Reid, in a few well chosen words, thanked the Society for the honour that had been conferred upon him.

The meeting adjourned at 10.05 a.m.

### Personal Interest Notes

Doctor Bernard Charles Sullivan, who for the past two and a half years has been the Acting Officer-in-Charge, Immigration Medical Sick Mariners and Quarantine at Halifax, was recently appointed Medical Officer-in-Charge.

Doctor J. R. Corston of Halifax was one of eleven Canadian doctors receiving senior membership in the Canadian Medical Association at the annual meeting in Banff in June.

Doctor and Mrs. W. H. Robbins of Wolfville, formerly of New Glasgow, were honoured on the occasion of their golden wedding anniversary at a celebration party at the Grand Pre Inn on September 10th.

Graduation exercises were held at the Victoria General Hospital on September 10th for 49 nurses. Doctor J. S. Robertson, Deputy Minister of Health, was chairman for the evening, and the diplomas were presented by Doctor C. M. Bethune, Superintendent.

The marriage took place at Amherst on September 27th of Charlotte Mabel, daughter of Mrs. John S. Lusby and the late Mr. Lusby, and Doctor Hugh Ellis Christie, son of Mrs. Warren A. Christie and the late Mr. Christie. Doctor Christie graduated from Dalhousie Medical School in 1939, and spent five years with the R.C.A.M.C. both in Canada and overseas. On his return he was on the staff of the Royal Victoria Hospital, Montreal, and received his diploma in Internal Medicine from McGill University. He is also a Fellow of the Royal Canadian College of Physicians and Surgeons (C.). He is now practising in Amherst.

The marriage took place at Yarmouth on June 9th of Mrs. Jean Beckwith of Bridgetown and Doctor F. R. Shankel of Windsor.

Doctor L. A. Rosere has been appointed Medical Health Officer for the Town of Dartmouth.

Doctor A. J. Campbell and Doctor J. F. Cantwell have opened offices for the practice of medicine in Halifax; the former at 254 Quinpool Road, and the latter at 500 Chebucto Road.

Doctors G. H. Murphy and J. R. Corston, classmates of the Dalhousie Medical School graduating class of 1902, were made honorary life members of the Halifax Medical Society in commemoration of their fifty years in active practice, at the annual dinner meeting held on April 30th.

Doctor Florence E. Murray, formerly of Halifax, now a medical missionary in Korea, was decorated early in April aboard the Danish Red Cross ship "Jutlandia" by a Commodore of the Danish Navy, acting on behalf of the King of Denmark, Gustav Adolph, for her outstanding service to humanity.

Doctor Carl R. Trask, who graduated from Dalhousie Medical School in 1938, has been appointed superintendent of the Saint John General Hospital, Saint John, N. B., the appointment to take affect January 1, 1953.

Dr. R. K. Merriam, who graduated from Dalhousie Medical School in May of this year, is now practising in Middleton.

The Bulletin extends congratulations to Rev. and Mrs. Frank Lawson (Doctor Jean Macdonald) of Halifax, on the birth of a son on February 27th; to Doctor and Mrs. R. B. Miller (Nellie Dickson, R.N.) of Pugwash, on the birth of a son, John David, on March 20th; to Dr. and Mrs. G. McK. Saunders (Emily Blackett) of Sackville, N. B., on the birth of a son, Bruce Richard, on April 11th; to Doctor and Mrs. R. M. MacDonald of Halifax, on the birth of a son on April 19th; to Doctor and Mrs. J. A. Muir of Truro on the birth of a son, Andrew Gordon, on April 29th; to Doctor and Mrs. D. S. MacKeigan of Dartmouth (Pat Flynn) on the birth of a daughter, Joan Elizabeth, on May 12th; to Doctor and Mrs. L. C. Steeves of Halifax on the birth of a son on May 7th; to Doctor and Mrs. D. R. S. Howell (Elizabeth Rising of Saint John) of Halifax on the birth of a son, Peter Rising, on May 24th; to Doctor and Mrs. J. W. MacIntosh, Junior, (Helen Shields) of Halifax, on the birth of a son, Robert Bruce, on June 30th; to Doctor and Mrs. C. D. Vair (Mary Hines) of Dartmouth on the birth of a son on July 21st; to Doctor and Mrs. J. R. Kerr of Annapolis Royal on the birth of a son, Patrick Chipman, on July 28th; to Doctor and Mrs. A. E. C. MacRae (Jean Nicholson) of Dartmouth, on the birth of a son, John Nicholson, on August 28th; to Doctor and Mrs. A. J. Campbell (Virginia Ernst) of Halifax on the birth of a son, Philip Alexander, on September 4th, and to Doctor and Mrs. A. L. Saunders (Marion Ricker) of Louisburg, on the birth of twin daughters, Laurie Michelle and Leslie Joanne.

Doctor W. G. Morson, Dalhousie 1939, has been appointed Associate Director of the Merrell Medical Research Department of the William S. Merrell Company in Cincinnati, Ohio.

Two full-time mental health clinics went into operation in New Brunswick early in June. Doctor Phyllis D. Bursey of Moncton is in charge of the Moncton clinic, and Doctor Ora R. Smith is in charge of the Saint John Clinic. Both Doctor Bursey and Doctor Smith graduated from the Dalhousie Medical School in 1950.

Doctor Angus D. McLachlin, Professor of Surgery, University of Western Ontario, London, was the guest speaker at a meeting sponsored by the Dalhousie Post-Graduate Committee in co-operation with the Valley Medical Society held at the Dormitory of the Nova Scotia Sanatorium in Kentville late in September. Doctor R. A. Young, President of the Valley Medical Society, presided. Accompanying Doctor McLachlin to Kentville were Doctor W. Alan Curry, Professor of Surgery, Doctor E. F. Ross, Assistant Professor of Surgery, and Doctor Henry B. Ross, chairman, Post-Graduate Committee, Dalhousie University. Following the lecture on "Surgical Problems in the Diabetic," the visitors were served refreshments before returning to Halifax. The meeting was attended by physicians from Annapolis Royal to Windsor.

The annual meeting of the Nova Scotia Tuberculosis Association was held in Halifax on October 9th when the special speaker was Doctor C. B. Stewart. The president's report was given by Doctor C. E. A. deWitt of Wolfville.

Doctors J. C. Acker and B. F. Miller of Halifax attended a joint meeting of the Orthopaedic Association of the English-speaking worlds in Great Britain

from June 29th to July 4th. They also visited various orthopaedic hospitals throughout Great Britain.

Doctors G. H. Murphy and P. S. Campbell received Honorary Doctor of Law degrees at the Spring Convocation of St. Mary's University held in Halifax on May 12th, in recognition of their service in the field of health services in Nova Scotia.

Twenty student nurses of the Yarmouth Hospital received their diplomas and pins marking their graduation at a very colourful and impressive ceremony on October 3rd in Yarmouth. Doctor S. W. Williamson of Yarmouth addressed the graduating class, his theme being the progress of medical science since the days of Pasteur and Lister. The guest speaker, Doctor W. M. Roy of Halifax, gave an interesting talk on the evolution of X-ray, explaining its function in diagnosis and treatment of disease.

Doctor E. A. Brasset to write medical book. "A Philosophy of Life," a talk given in New York in September by Doctor E. A. Brasset, formerly of Antigonish, will be included in a book of one hundred similar talks to be brought out by Simon and Schuster this Fall under the title, "This I Believe." Doctor Brasset, who recently returned to Antigonish, is the author of "A Doctor's Pilgrimage."

An edition has been brought out in England by Harrop of London. The Sunday Empire News of London says: "Dr. Brasset may have sacrificed fame and fortune as a specialist, but he has written a book which I predict will be-

come one of the classics of medical autobiography."

Dr. Brasset is a member of the New England Authors Association and is the recipient of an honorary membership in the Mark Twain Society. During his absence from Antigonish, he was granted a medical license in New Hampshire and Rhode Island and he is a member of the American College of Cardiology.

A former Amherst man, now a leading doctor in Regina, has collaborated with a lady physiotherapist from the United States in the writing of a book which, it is believed, will do much to alleviate the pains of arthritis and rheumatism sufferers.

Just published, "Arthritis and Rheumatism—The Patient's Guide to Treatment" is the work of Doctor D. E. Rodger, a native of Amherst, and Miss Gwyneth Miller, who is now on the staff of a hospital in Baton Rouge, Louisiana. Doctor Rodger graduated from McGill in 1935, and was a senior interne doctor at the Montreal General Hospital for a long time. He was attached to the British Army Medical Corps during the last war, seeing service all over the world, and is now one of the senior members of the big medical clinic in Regina.

Paying tribute to one of the few remaining practising "country doctors" of Pictou County, some 3,000 people assembled at the Gyro Camp property at Sutherland's River Saturday afternoon, August 23rd, to honour Doctor W. A. MacLeod, of Hopewell, whose rural practice covers a radius of some one hundred miles and where in Summer or Winter, rain or shine, he has ministered to many thousands during his forty years of faithful service.

Some four thousand dollars was contributed to the gift fund, part of which was used for the purpose of a new car fully equipped with radio, winter tires and all accessories. The remainder was presented in the form of a substantial cheque, and a bouquet of flowers was presented to Mrs. MacLeod.

Highland music was provided by the Ceilidh Girls' Band, New Glasgow, and by Pipers Charles Brown and Harold Sutherland, Westville, the latter on a

holiday from Vermont, N. Y.

Doctor MacLeod was born at Lansdowne, Pictou County and graduated from Dalhousie Medical School in 1908. His first practice was at River Hebert where he was married to Maude Alice McClary. They settled in Hopewell in 1912 where during the intervening years he gave tireless service from the era of the "horse and buggy" days, and will now continue on his rounds at the wheel of his new car.

An outstanding event took place in the auditorium of the Tatamagouche Rural High School on Friday evening, August 22, when over 900 persons gathered to pay their respect to their village doctor, Doctor Daniel Murray, who for the past 46 years has served the people of that village and the surrounding areas. He will have served 50 years in the medical profession in May, 1953.

The evening programme was opened with a long song under the direction

of Roland Langille with Mrs. E. H. Langille presiding at the piano.

Doctor Charles L. Gass, formerly of Sackville, N. B., now living in Tata-

magouche, acted as chairman.

At 8.15 p.m. Pipe Major Alexander Baillie piped Doctor and Mrs. Murray who were escorted by Rev. and Mrs. G. E. Whidden to the front of the auditorium followed by 40 graduate nurses in white uniforms, all of whom have been associated with Doctor Dan during his many years of medical practice.

Following remarks by Doctor Gass, a duet was sung and then old time violin music, and an illuminated address presented by the Rev. G. E. Whidden retired United Church minister. Then followed a presentation of a purse of money from the people of North Colchester and adjoining areas in Cumberland County by Doctor A. M. Creighton.

Presentation of a second purse of money from a group of nine doctors who are natives and disciples of Doctor Dan was made by Doctor J. A. Langille of Amherst, one of the nine. A bouquet of yellow roses was presented to

Mrs. Murray.

Doctor Murray in reply said, "Well, I have had bombs and shells bursting around me during the First World War, but I was never so frightened in my life as I am to-night. During my term as teacher here the people of Tatamagouche showed me such good will and co-operation that it enticed me to settle here as a practicing physician!"

He then went on to tell about some of his experiences and hardships during his practice and on behalf of himself and Mrs. Murray thanked the people for the wonderful tribute on this his Golden Jubilee as a Doctor of Medicine.

Messages of congratulations from people who were former residents of Tatamagouche were received from Doctor William Dobson, Vancouver, B.C.; Doctor Allister and Fred MacLellan, New York; Mary E. MacDonald, Cambridge, Mass.; Mrs. Jeanette Vincent Miller, Truro; Curtis Bonnyman, Monc-

ton; Harry Patterson, Calgary; Doctor Henry Matheson, British Columbia; Murray Byers formerly of New Annan; Mrs. Jean Semple Sutherland formerly of Brule; Miss Mattie Harris, formerly of Tatamagouche Mountain; Doctor James Byers, Alberta; Doctor C. L. Gass, Doctor James Langille, Amherst, Doctor Carson Murray, Springhill, and Doctor A. M. Creighton.

Speakers from various districts from Cumberland and Colchester Coun-

ties paid tribute to Doctor Murray.

Two selections were rendered by the male quartette.

Doctor Harold Orr, the President of the Canadian Medical Association, left Canada recently by air to attend a meeting of the World Medical Association in Athens, Greece.

### Obituary

DOCTOR Edward DuVernet of Digby died on May 15th after a lengthy illness at the age of eighty-four. Doctor DuVernet was born in Gagetown, N. B. on January 3rd, 1868, and graduated from McGill in 1893, and went to Digby to practise. He continued his active practice until July, 1951, when he retired because of ill health.

Doctor DuVernet was one of the pioneers in the move to establish the Digby General Hospital some twenty-five years ago, and was the first President of the Board of Directors of the hospital. He continued his active interest in the welfare of the hospital throughout his lifetime and for the past several

years was Honorary President of the Board.

He was also active in the civic life of the town and served as Mayor of Digby from 1922 to 1925, and served on the Digby Board of Trade and in other civic and community organizations. He was a lifelong member of the Church of England and served as a warden and vestryman of Trinity Church for many years. An active member of the Masonic Order, he was a member of King Solomon Lodge A.F. and A.M. and several years ago was presented with a 50-year jewel by that Lodge.

He was active in promoting the work of game conservation and took a keen interest in the work of the Digby County Fish and Game Association.

A veteran of the horse and buggy days in medicine, Doctor DuVernet for many years carried on a wide practice in Digby County. He was one of the first in the country to own a motor car.

It was recorded that Doctor DuVernet diagnosed the first case of appendicitis every diagnosed as such in the area. His diagnosis, given in consultation, was not accepted at the time but a post mortem proved it to be correct.

Doctor DuVernet is survived by his widow, the former Mabel Peters of Gagetown, N. B., and by three sons, Doctor Edward DuVernet of Vancouver, Geoffrey and Fred, both of Ottawa.

Funeral services were held from Trinity Anglican Church, attended by officers and members of King Solomon Lodge A.F. and A.M. and a Masonic service was held at the graveside.

The death occurred at Windsor Junction, N. S. on July 26th, of Doctor Roy Dickson Lindsay at the age of sixty-two, son of the late Thomas Lindsay and Mrs. Mary Hilchie Lindsay, Doctor Lindsay was born at Cariboo,

Pictou County.

After graduation from Dalhousie Medical School in 1917, he joined the Canadian Army and served as a Captain with the R.C.A.M.C. Following the war he set up practice in New Germany, moving from there to St. Catherines, Ontario, where he practised until 1940. He served with the rank of Lieutenant-Colonel in the R.C.A.M.C. in World War II and in 1944 he joined the staff of Camp Hill Hospital as Pensions Medical Examiner.

He is survived by his wife, the former Gladys Keough, Windsor Junction; a son, Doctor Donald Lindsay, on the staff of the Nova Scotia Hospital, Dartmouth; a daughter, Bonnie, (Mrs. John Leighton), Niagara Falls; two brothers, Basil, Port Humberstone, Ontario, and Doctor Thomas B., River John; and a

sister, Laurell (Mrs. Hugh Chisholm), Port Colborne, Ontario.

Funeral service was held from Cruikshank's Funeral Home, Halifax, with interment at Brookside Cemetery, Bedford.

Doctor Fred Thompson Densmore died suddenly at his residence at Glace Bay on September 28th at the age of 62. He was stricken with a heart attack on returning from a sick call at five a.m. and died shortly afterward.

Doctor Densmore was born at Noel's Shore, Hants County, and graduated from Dalhousie Medical School in 1915. His first practice was at Maitland, Nova Scotia, where he remained until 1922 when he moved to Cape Breton, first practising in Dominion and moving to Glace Bay in 1940.

Doctor Densmore held a Fellowship in the American College of Surgeons. He is survived by his widow, several sons, also his mother and several brothers at Noel's Shore and a sister at Hazel Hill, Guysborough County.

Funeral services were held at Glace Bay, and interment at Noel's Shore.

The Bulletin extends sympathy to Doctor I. S. Robb of Halifax and Doctor D. S. Robb of Shelburne on the death of their Mother, Mrs. Bessie Cumming Robb, widow of Rev. Dr. Alex F. Robb, who died in Shelburne on April 13th: to Doctor H. A. Creighton of Lunenburg, on the death of his sister, Miss Lois Creighton, B.A., who died in Halifax following a lengthy illness on May 8th; to Doctor J. J. Carroll of Antigonish, on the death of his sister, Mrs. A. W. A. Robertson of Halifax on May 12th; to Doctor H. F. Sutherland of Sydney on the death of his five-year-old son, Jackie, following a fatal injury on August 6th; to Doctor H. K. MacDonald of Halifax on the death of his sister, Mrs. Alicia May Tanner, widow of Senator Charles E. Tanner, in Ottawa on August 17th; and to Doctor David Drury of Amherst on the death of his wife, Evelyn, after a lengthy period of illness, on September 10th.