live in houses provided with adequate and proper sanitary appliances, where they would have room to breathe and lots of fresh air and sunlight, it would be impossible to get rid of tuberculosis. The people must be educated in elementary sanitary knowledge and the housing problem must be solved. Much had already been accomplished, and in St. Jehn, New Brunswick, the percentage of deaths from tuberculosis had fallen from 11.8 in 1900 to 6.7 in 1915. It was reported to the meeting that during the past year the municipal hospitals for the care of advanced cases of tuberculosis had been opened at Quebec and at St. John. The latter, with fifty-seven beds, were very soon filled. Sanatoriums in Prince Edward Island and in the county of Waterloo, Ontario, had been completed, and at Gravenhurst, Ontario, the Minnewaska Sanatorium had been enlarged to double its former capacity, and the Calydor Sanatorium, a private institution, under the direction of Dr. Parfitt, had been opened. In British Columbia a private sanatorium has been opened at Kamloops, and a pavilion has been added to the King Edward Sanatorium at Tranquille. Pavilions have also been added to the Muskoka Free Hospital and the Brantford Sanatorium, in the province of Ontario, and hospital tuberculosis clinics have been organized in Toronto. In 1908 there were only 250 beds reserved for patients suffering from tuberculosis in the whole of Canada: now there are 2,000.

Toronto. In 1908 there were only 250 beds reserved for patients suffering from tuberculosis in the whole of Canada; now there are 2,000.

The difficulty of Canada's problem of caring for the tuberculous is now increased by the addition of a considerable number of soldiers suffering from the disease. A few weeks ago it was reported that there were 397 military patients under treatment in the various sanatoriums in the Dominion, of whom nearly 60 per cent. had never been overseas. There are also a number of Canadian soldiers now undergoing treatment in England who will return to Canada as soon as proper hospital accommoda-tion is provided for them. The matter has been under the careful consideration of the Military Hospitals Commission, and on September 15th a meeting of experts was called at Montreal. The chair was taken by Dr. F. J. Shepherd of Montreal, and among those present were Lieutenant-Colonel A. Thompson, medical superintendent of the hospitals under the Commission, Dr. Baldwin of Saranac Lake, Drs. Parfitt and Elliot of Muskoka, and Dr. Byers of Ste. Agathe. It was advised that temporary arrangements should be made immediately with existing sanatoriums for the treatment of tuberculous soldiers during the coming winter, and that property sites should be bought in suitable localities and permanent buildings of the most modern type built thereon. The sanatorium at Frank, Alberta, which has accommodation for 120 patients, has been taken over by the Commission, and this with the sanatoriums at Kamloops, British Columbia, Ninette, Manitoba, and Calgary, will provide enough accommoda-tion for the present in the West. In Ontario the Hospital for the Insane at Whitby has been converted into a sanatorium. In Quebec, the Lake Edward Sanatorium and that at Ste. Agathe will be utilized by the Commission, and in the Maritime Provinces the sanatoriums at St. John, New Brunswick, Kentville, Nova Scotia, and Charlottetown, Prince Edward Island. It has been found that the soldier frequently becomes restive and nervous under treatment; he finds the rest and regulation under medical routine unnecessary and tiresome, and becomes despondent and sometimes even insubordinate. Medical officers in charge of such patients therefore are in favour of giving suitable occupation, graded according to the man's condition, and have requested the Military Hospitals Commission to provide workshops and instructors. In addition to manual work and academic training, telegraphy, stenography and typewriting, mechanical and industrial drawing, and auto-mobile driving might be taught, and the moving picture machines installed, which might be used both for instruction and recreation.

#### ALBERTA MEDICAL SOCIETY.

The eleventh annual meeting of the Alberta Medical Society took place at the University of Alberta, Edmonton South, on September 21st and 22nd, and in spite of the fact that a large number of the members are on overseas service, proved one of the most successful meetings ever held by it. Dr. T. H. Whitelaw, medical officer of health of Edmonton, stated that, to take a low estimate, one-

third of the medical men of the province of Alberta had already given up civil practice and had joined the military forces. Out of 118 medical practitioners in Edmonton, 42 were serving, and 45 out of 100 practitioners in Calgary. One of the brightest and most brilliant practitioners in the province, Captain Monkman of Vegreville, had made the supreme sacrifice. Dr. Whitelaw dwelt on the importance of providing for the care and treatment during illness or accident of residents of outlying districts remote from hospital centres. It was the duty of the medical men of the province to assist by their counsel and advice the movement for providing hospital facilities within a reasonable distance of every settler in the province. A Free Public Hospitals League had recently been started in Calgary and was actively engaged in a campaign with this object in view. Another matter of supremo importance to the future welfare of the province was the establishment of a provincial sanatorium for the treatment of the concluding in concluding his adverse. was the establishment of a provincial sanatorium for the treatment of tuberculosis. In concluding his address, Dr. Whitelaw spoke of the excellent beginning made by the Faculty of Medicine recently established at the University of Alberta. The enrolment of students had been much curtailed by the fact that almost 50 per cent. of the first, second, and third-year students had gone to the front with ambulance corps. An arrangement had been made with the Universities of McGill and Toronto whereby medical students of the University of Alberta could take the fourth and fifth years of their course at either of them. The question of Imperial reciprocity, which had been touched on by the president, was brought up by Dr. John Park of Edmonton, who was greatly in favour of the establishment of reciprocal relations between the province of Alberta and Great Britain. It was resolved that the provincial parliament be requested to take the necessary steps to bring about such reciprocity.

Approval was expressed of the efforts to extend the

Approval was expressed of the efforts to extend the hospital facilities in the country districts, and it was recommended that cottage hospitals should be established under the direction of local committees, and made as self supporting as possible. A special committee was appointed to investigate the physical and mental condition of the child and the causes of the present unfavourable conditions. It was decided that pamphlets containing information and statistics should be prepared for general distribution as a means of educating the people of the province in matters relating to public health, and that the Frovincial Medical Council should be requested to make a grant to assist in the publication of literature and the work of the committee.

#### A Physician's Fee.

A case recently came before the Superior Court of the Province of Quebec, in which a physician claimed the sum of \$2,495 for professional services rendered, stating that at the request of the defendant he had devoted practically all his professional time to him during his illness. The defendant expressed his willingness to pay \$750, but considered the amount claimed to be exorbitant. The defendant was ordered to pay the sum of \$975, with interest and costs. In summing up the case, his lordship said that when no express contract had been entered into between the physician and patient (and in the present case no such contract had been made), the amount which might be considered reasonable compensation for the services given was to be determined by the learning, skill, and professional standing of the physician and by the difficulty of the case.

## Sydney.

Subsidized Hospitals and Government Employees. A meeting of the members of the honorary medical staffs of hospitals receiving subsidies from the New South Wales Government was held at the British Medical Association building, Sydney, on August 10th, 1916. The chair was taken by Dr. Sinclair Gillies, the President of the New South Wales Branch of the British Medical Association, who said that the meeting had been called to consider the effect upon the medical profession of a circular issued on July 1st, 1916, from the office of the Director-General of Public Health to the secretaries of the committees of

hospitals in receipt of subsidy from the Government. The circular was as follows:

Treatment and Maintenance in Subsidized Hospitals of Government Employees Injured in the Execution of their Duty.

I am instructed to inform you that it has been brought under notice of the Director-General of Public Health that on several recent occasions members of the police force injured in the execution of their duty, and admitted to subsidized hospitals for treatment, have been charged sums of money in varying amount for what has been termed "maintenance whilst in hospital."

The Director-General has drawn the attention of the Minister to the subject, and approval has been given to the issue of

The Director-General has drawn the attention of the Minister to the subject, and approval has been given to the issue of notice to all hospitals subsidized from public funds that the following shall be regarded as one of the conditions under which subsidy is granted, in addition to those already in force and enumerated in circular instruction from the Chief Secretary's office, dated December, 1913:

"10. That any employee of the Government of New South Wales who may be injured in the execution of his duty shall, on application, be received and treated, and, if necessary, admitted for further treatment free of all charges for such treatment and maintenance, in any hospital in the State receiving subsidy from the Government."

Your Committee is requested to note that strict observance of this condition will be insisted upon in future.

This circular had been considered by the committee of certain hospitals, and the matter had been referred to the members of the honorary medical staff, and the meeting had been called in order that uniformity of action might

Dr. F. Antill Pockley moved:

1. That, while always ready to treat gratuitously all persons whose means are inadequate to pay for such attendance, we reaffirm the principle of refusing, except in cases of urgency, to be exploited by persons who are in a position to pay for our services, and we cannot differentiate between employees of the Government and others.

2. That the secretaries of the medical boards of the hospitals coverned be instructed to cover the above resolution to

concerned be instructed to convey the above resolution to

the managing boards.

Sir Herbert Maitland seconded the motion, and after full discussion it was carried unanimously.

VITAL STATISTICS.

According to the Government statistician's report on the vital statistics for the year 1915 the marriage rate was 9.70 per 1,000 of population. This is the highest since the year 1857. The number of infants born during the year was:52,885, of whom 27,105 were ma'es and 25,780 were females. The birth-rate was 28.31 per 1,000 of population. During the period 1906 to 1909 the rate was below 28; it exceeded 28 in the two following years and reached a maximum of 29.9 in 1912. In 1913 it was 28.81, and in 1914 it was 28.93. The illegitimate birth rate was 1.44 per 1,000 of population, equivalent to 5.07 of the total births. The illegitimate birth-rate has tended to decrease during the past ten years. The death-rate was 10.50 per 1,000, which is slightly higher than the average for the previous period. The infantile death-rate was 68.1 per 1,000 births. There were 2,854 deaths from cardio-vascular diseases, 1,297 from tuberculosis, and 1,385 from cancer.

### Correspondence.

EPSOM COLLEGE.

SIR,-In consequence of the loss of many annual subscriptions as a result of the war, and in part due to the fact that so many medical men are engaged away from their homes on military duties, it becomes necessary to obtain fresh annual subscribers if the good work of the Royal Medical Foundation attached to Epsom College is to be maintained.

Your readers will see from the advertisement which appears on page 67 that a sum of £4,500 has to be collected each year in order to provide the same number of Pensions and Foundation Scholarships which hitherto have been given annually out of the Foundation Fund of the College.

To reduce the number of beneficiaries would be de-plotable from every point of view, more especially as the present excessively high war prices are greatly increasing the hardships endured by the very indigent persons who are candidates for the benefactions given by the College.

Much help might be rendered if those interested in the welfare of the College would urge their friends to become subscribers or donors, to whom in return certain voting privileges are afforded. Donors of ten guineas and collectors of twenty guineas are life governors, and subscribers of one guinea annually are governors during the continuance of their subscriptions. Such life governors and governors have ten votes each, which may be given for Foundation Scholars alone, or for Pensioners alone, or be divided between the two classes. Smaller contributions are gladly received.

In conclusion, I desire to make a very carnest, urgent appeal to the profession not to allow other new professional philanthropic movements, however excellent in themselves, to prejudice the claims and diminish the possibilities for doing good of Epsom College Foundation

Fund.—I am, etc.,

37, Soho Square, W., Dec. 1st.

HENRY MORRIS, Honorary Treasurer.

# MEDICAL CERTIFICATES FOR RECRUITS AND WAR WORKERS.

Suggested Printed Forms.

SIR,—With reference to Sir Donald MacAlister's grave warning in regard to the issue by practitioners of medical certificates for recruits and war workers, and the remarks thereon contained in the leading article in the issue of December 2nd, may I suggest that this question could be both readily and satisfactorily solved by the provision of printed certificate forms drawn up on somewhat similar lines to that of a medical examiner's report to an insurance company? Among the advantages of such forms may be mentioned the following:

(a) The certificate itself would be more complete and comprehensive.

(b) There would be one uniform standard of information for the use of tribunal examiners and officers, and managers of war departments.

(c) Greater care would be exercised in filling up a

formal certificate.

(d) The necessity of filling up a printed form would make the doctor more independent and less likely to be influenced by any special consideration for his patient.

(e) It would obviate any necessity of referring to the question of fitness or unfitness for any form of military service, which is a matter solely for adjudication by the medical boards and the tribunal medical Reference would only be made to medical officers.

The certificate forms, in addition to the usual spaces for name, age, etc., should contain spaces for the following headings:

(a) Are you the examince's ordinary medical adviser?
(b) What abnormal symptoms, if any, are present?
(c) What opportunities have you had of verifying these symptoms?

(d) Is the examinee suffering from any illness, disorder, or disease?

State the medical evidence.

(e) Is it necessary or advisable to obtain the opinion of a consultant or expert? (f) Special remarks.

The certificate should terminate with such words as:

I declare to the best of my knowledge and belief that the statements contained in this certificate are correct.

The certificate should commence with the statement:

No opinion is to be expressed as to the man's fitness or unfitness for any form of military service.

I would suggest that the certificate forms might be I would suggest that the certificate forms might be drawn up by the Central Medical War Committee and issued either free or at cost price to medical practitioners on application to the offices of the Committee at 429, Strand, W.C. The War Office might undertake the cost and issue of the forms.—I am, etc.,

London, W., Dec. 4th. R. MURRAY LESLIE, M.D.

SIR,-I would like to point out that the difficulty of many practitioners in the matter of certificates causes more worry and anxiety than any other part of their work nowadays.

Before long people will not be allowed to perform their