in accepting extravagant advertisements of this nature, but it is possible that the editorial columns of the yellow journals may be put at their disposal and the present law can not reach the charlatans there. The cable also brings us word that Schweninger has been deposed from his prominent position in academic circles which he owed entirely to his political influence. As THE JOURNAL has previously mentioned, he is a man of no scientific attainments, but was Bismarck's medical adviser, and has been in charge of the large hospital of Gross Lichterfeld near Berlin, drawing a fine salary. To one who has been watching the course of events it seems as if the recent invasion of Germany by Eddyism has been the last straw that overcame the inertia of the authorities in regard to charlatanism.

Correspondence.

An Acknowledgment of Priority.

CHICAGO, July 25, 1902.

To the Editor:—Since writing my article, describing an improved method of examining the female bladder, I have found that Dr. William Pryor of New York read a paper before the New York County Medical Association, Jan. 21, 1901, in which he advocated the posture which I have recommended as being most advantageous in the examination of the female bladder, and which I have obtained by a slight modification of the Boldt table. I was first convinced of the value of the posture on witnessing Dr. Kelly's demonstration of his method of examining the bladder in the genupectoral position, before the British Medical Association in Montreal, and I immediately afterward adopted the Boldt table to obtain the elevated lithotomy posture, in the Royal Victoria Hospital. I am glad to acknowledge Dr. Pryor's claim to priority in this matter. Working independently, we arrived at the same conclusions, and he published his paper first. Yours truly,

J. CLARENCE WEBSTER.

Harmony Between Dentist and Physician.

NEW YORK CITY, July 24, 1902.

To the Editor:—Much has been said from time to time regarding the ethics of the profession. Many articles have appeared in the medical journals on the same topic. Many minds, both lay and professional, have advanced theories relative to ethics, whereby the best interests of the community at large might be served, and the practice of medicine conducted along the most harmonious lines, with good will to all and malice toward none. The Code of Ethics of the American Medical Association has been more or less closely adhered to by both very eminent practitioners and others, with no dire calamity befalling the human family. Still, the American Medical Association is contemplating a revision of the code, which, I suppose, only marks more forcibly the march of progress. Yet, in spite of the moderate amount of harmony which prevails, queries are constantly given regarding ethical points, ideas are interchanged and discussions take place pro and con on the subject. The general practitioner complains of the specialist treading on his toes, and vice versa. The dentist even infringes upon the physician's province, and again vice versa.

Dr. Peck of Chicago recommends the study of physical diagnosis as a useful adjunct to the dental student's education. Dr. Dunlop of the same city disagrees with him, giving his reasons for so doing. Regarding Dr. Dunlop's letter (THE JOURNAL of July 19) I agree with him most heartily that there is hardly a case where the dentist is justified in using what slight medical knowledge he may have to advise his patient. That is more properly the province of the physician. Although the dentist may have received instruction along certain medical lines, i. e., medical diagnosis, not having the constant practice along these lines that the physician is assumed to have, he lacks the technique which is necessary to arrive at a satisfactory diagnosis or conclusion.

But, on the other hand, I do not wish to be represented as having a bigoted view of the matter. A dentist has certainly

as much right, and also ability, to advise his patients medically as the physician has to advise his patients dentally. Many physicians do this, often very erroneously, too, when it is their duty to tell the patient to seek the dentist. They will give advice during dentition which shows deplorable ignorance and which sometimes leads to permanent disfigurement of the patient. They will advise to have certain teeth extracted, when they should be filled and saved. They will advise extractions of a diseased tooth when contiguous oral conditions positively forbid it. I have in mind a case now, where a case of severe pericementitis with extensive inflammation over side of face and into middle ear, was diagnosed by several specialists (?) as a condition requiring immediate exploratory operation, in spite of the fact that the patient's dentist had diagnosed as pericementitis and was treating for the same, the patient escaping operation only by dentist standing his ground and actually forbidding it. Such instances are more or less frequent, and serve to illustrate the fact that physicians as well as dentists may step outside their province and exceed their authority.

There should be no breach between physicians and dentists, even on this account, but their aim should be to work together in perfect harmony. Let not one faction be pulling this way and another faction that way, but work together for the good of the greater number. I agree with Dr. Peck that a dentist's education should be broader, and let it remain for his own conscience to decide as to whether he is justly using his knowledge. Occasionally cases may present themselves to the dentist which, from the very nature of things, require some medical knowledge, and if he has it he should use it, and rightly, too. In many instances the patient's regular physician is not convenient, or patients may be too poor to pay a physician's fee, or in other cases still, they may have no regular physician. In such cases the dentist is justified in using his medical knowledge for the good of his patient. To conclude, it is reasonable to assume that if the spirit and not the letter of the Code of Ethics be at all times observed pleasant and cordial relations would prevail.

DAVID EDWARD HOAG, M.D.

State Boards of Registration.

The Right of a Board to Determine the "Good Standing" of a Medical College Sustained.—Millard F. Bailey, a graduate of the Medical Department of the University of Tennessee, 1894, made application to the Illinois State Board of Health for a certificate based on his diploma. As the board had determined the college not in "good standing" during the year named on account of its failure to comply with the requirements set forth in the Schedule of Minimum Requirements published by the State Board of Health, the application was declined. Dr. Bailey thereon sought to obtain relief from the courts, and as a result a peremptory writ of mandamus was ordered by the Superior Court of Cook County directing the State Board of Health to issue a license to Dr. Bailey. An appeal was taken by the board to the Appellate Court of the First District of Illinois, which body has just reversed the judgment of the Superior Court, which is termed by the Appellate Court clearly erroneous. In accordance with the opinion of the court, the State Board of Health is possessed of discretionary power to determine whether a medical college is in "good standing" and its action is not subject to review by mandamus proceedings. "Mandamus will not lie to compel the performance of acts or duties which necessarily call for the exercise of judgment and discretion by an officer or body at whose hands their performance is required, unless it is made clearly to appear that there has been abuse of discretion by the officer or body." The judgment of the Appellate Court is strictly in accordance with the views expressed by the Supreme Court in the case of the People vs. Dental Examiners, 110 Ill., 180, and Dental Examiners vs. People, 123 Ill., 227. In the former case the Supreme Court held that the action of the board was to be predicated on the existence of the requisite facts, and as no other tribunal is authorized to investigate these facts, it is necessary that the board must do so.