

and unnecessary hardship to ask poverty-stricken persons to pay anything for medicines or surgical appliances.

4. That it is a bad policy to give city money to private institutions, to the detriment and loss of the public ones appointed for the care of the sick poor. We believe that the city institutions should be repaired, improved in sanitation and illumination, and should furnish larger and better accommodations. The city money should be used to give better food, warmth and clothing to the patients under treatment in the city hospitals.

5. It is all wrong to give public money to medical colleges; the profits go into the pockets of the faculty or into the institution. These incorporated colleges are close corporations and just as much money-making enterprises as a grocery store and a gas company.

6. It is an outrage that the public institutions should be obliged to maintain a patient on less than thirty cents a day, while the city gives over one dollar per day to private institutions for the same work.

7. The Board of Estimate and Apportionment stood a tie, two to two, and the chairman cast the deciding vote. Therefore, the Mayor is responsible for the fact that the municipal institutions will be a reproach to our city because the money that should have gone for their urgent necessities has been given away. As he himself stated in a certain case, it was given because he knew the man interested.

8. The tax-payers are willing that private persons should give their own money, but we do not believe they approve of any diversion of public money away from the public institutions, or of any gift of the same to close corporations.

9. Finally, we wish to state that in the large gathering that protested, there were representatives of tax-payers' associations, business men, etc. The doctors were there simply to give evidence against the farce behind the scenes, partially veiled by the mantle of a so called charity.

DOUGLAS H. STEWART, M.D.,
Cor. Sec., New York Medical League.

License in Germany.

DETROIT, MICH., Dec. 20, 1897.

To the Editor:—Dr. B. Becker's friendly corrections and suggestions concerning the licensing of physicians in Germany are to the point, but in some instances incorrect. While the subject is too unimportant to consume much of your space, once begun, I believe in finishing anything correctly.

An American graduate in medicine, in order to matriculate at a German university needs possess no further documents than his diploma and passport. Whether or not an A.B. or A.M. degree of this country would be considered an equivalent by the German authorities of a *testimonium maturitatis* I am not prepared to say. Any physician desiring to leave this country for the sake of engaging in the practice of medicine in Germany where, by the way, there is absolutely no demand for a foreign physician, can get the necessary particulars by addressing either Seine Magnificenz p. t. Decanus der medicinischen Fakultät der Universität (Berlin, etc.), or the Board of Examiners.

The study in the preparatory school, gymnasium, embraces a curriculum of fourteen semesters (seven years) only. A young man may enter the university at the age of 17 years. Dr. Becker is correct concerning the statements that such universities as Johns Hopkins, Harvard, etc., are not considered equivalent to a German university. Any United States medical college in good standing with the Association of American Medical colleges is "OK" as far as this goes in Germany.

If the government calls a physician, surgeon or scientist to a chair in a university, even if he be a graduate from a so-called irregular college in this country, he is immediately licensed to

practice medicine without any further ceremonies. Occasionally a great foreign physician (and there are plenty of them here) will get special privileges from the Minister (secretary) of Education. So, for instance, I am satisfied that such men as Senn, Osler and others, whose works are considered standard all over the civilized world, would have but little difficulty in getting a state license, without the prescribed examination. Germany honors even foreigners, if they deserve it.

In addition I beg to say that in Germany exists a law called *Gewerbefreiheit*, giving everybody the privilege of practicing medicine, forbidding him to call himself doctor or signing himself *practischer Arzt*. He can also not sign death certificates and there are a good many more privileges he does not enjoy.

An American physician could have a sign reading: "Dr. N. N., approbiert in Amerika."

The statement made by Dr. Becker, that the requirements are practically the same all over Europe is erroneous, for in Austria, for instance, an American diploma gives the holder but little if any standing, even when he wants to matriculate as a student. He would have to begin like a freshman.

In conclusion I beg to say that it would be a very good idea for the editorial management of the JOURNAL to publish a *résumé* of the laws governing the practice of medicine in all countries. There are many South American, African and Asiatic countries where American physicians would find a great field of work, but they are ignorant as to whether or not they are authorized to engage in the practice of medicine there.

How difficult it might be for a poor physician, who seeks his health in the South, to pass an examination in Spanish or French and pay a large fee when he intends to practice among American or European settlers only, is plain.

I thank Dr. Becker for the trouble he has taken; and "A Reader," the original inquirer, might do well to first write to the Board of Examiners, in the city he intends to settle, before crossing the ocean. Very truly yours,

GUSTAVUS M. BLECH, M.D.

Practical Prophylaxis.

CHICAGO, Dec. 26, 1897.

To the Editor:—As medical men who believe in prophylaxis, we are in duty bound to do all in our power to prevent disease and suffering. Most diseases are caused by improper food, bad air, lack of sunlight, exposure, bad occupation, worry, overwork, heavy work, irregularity, unsuitable climate, traumatism, or alcohol. These causes are mostly the results of poverty. We all know only too well the effects of poverty's surroundings upon moral, mental and physical health. When ten years of poverty will cause adults to deteriorate and often become criminals or commit suicide, is it any wonder that children should be warped mentally, morally and physically for life?

Poverty is without doubt the chief cause of degeneration, child labor, drunkenness, crime, anxiety, disease, insanity, suicide, dead-beats, charitable institutions, dispensaries, etc. If we would prevent the greater part of this, we must prevent poverty.

Poverty and destitution always begin at the exact point where men can not get a chance to use land and machinery; because the former is the source of all food and shelter, and the latter is the only civilized means of obtaining food and shelter from the source. We can easily imagine what would happen if the source of water and the means of reaching it were all controlled by private interests. You can actually see and feel the effects of having the source and means of getting food and shelter controlled by private interests.

Food and shelter are as necessary as water, therefore the same common sense which has given us public control of enough of the water-supply and highways to accommodate

those who have not private water, should also demand that enough available land and machinery be reserved under public control to accommodate those who have not free access to that under private control. Then no one could be denied an opportunity to produce food and shelter or their equivalent. Poverty and destitution would be practically impossible and consequently disappear.

Now, "available land and machinery reserved under public control" is simply necessary business or industry owned, operated and monopolized by the Government. For instance, the U. S. mail service. In other words, the Government should own, operate and monopolize enough lines of necessary industry, at fair wages, so that by reducing the hours of labor it can provide work for the unemployed. We estimate that public control of the railroads, express, telegraph, coal mines, car lines, telephone, light and water systems, at the eight hour day, would about take up the unemployed. This would put about two million idle men to work, thus incidentally give us two million more patients, do away with dispensaries, charitable institutions and dead-beats, remove the pressure which is crowding the medical profession as well as all trades, and also be the grandest prophylactic measure ever instituted. What could be more fitting than for the medical profession to take the lead in this reform?

We are trying to distribute as widely as possible, circulars fully describing this reform, and therefore we earnestly ask all members of the medical profession to please send stamped and addressed envelope for some of the circulars. It will help a most worthy undertaking and greatly oblige,

Yours for practical prophylaxis,

MAURICE F. DOTY, M.D.

An Acknowledgement.

NEW YORK, Dec. 25, 1897.

To the Editor:—Will you allow me to correct an omission and acknowledge my indebtedness to my friend Dr. F. S. Mandelbaum, for the photographs illustrating my article on "Van Arsdale's Triangular Splint for Fracture of the Shaft of the Femur," etc., in your issue of Dec. 18, 1897.

Yours fraternally, A. ERNEST GALLANT, M.D.

Per Os, not "Orem."

NEW YORK CITY, Dec. 25, 1897.

To the Editor:—Thanks to "F" (page 1284, column 2, lines 46 to 51, JOURNAL, Dec. 18, 1897), because I had rather be right than wrong; because Daniel Webster said that he "would not give a cent for a man who never made a mistake"; because Ambassador Phelps said, "a man who never made a mistake never made anything," and because our beloved, great and honored Dr. Lewis A. Sayre said that he was "thankful for any true criticism, no matter how sharp, keen or cutting."

Respectfully yours, EPHRAIM CUTTER, Sr., M.D.

SOCIETY NEWS.

Resolutions Adopted at the Meeting of the Boston Medical Society, Dec. 18, 1897.—

WHEREAS, The unrestricted abuse of medical charity in the large hospitals and dispensaries of Boston is being seriously complained of by a large number of general practitioners; and

WHEREAS, The State has granted charters to these hospitals and dispensaries for the definite purpose of giving medical and surgical care and treatment to indigent persons within this city and Commonwealth; and

WHEREAS, The Boston Medical Society, individually and collectively, recognize, with every feeling of sympathy, the rights and just claims of some of our citizens to the benefits of public and private charity, and will not be found wanting in generosity in whatever may tend to foster the moral, social and physical well being of the sick, the poor, the destitute, the lowly, the worthy and the unfortunate; and

WHEREAS, Large numbers of persons of both sexes frequently, daily and repeatedly receive medical and surgical advice and treatment gratuitously for numerous cases of minor surgery and ordinary illness, who are believed to be financially competent to pay moderate fees; and

WHEREAS, The time, facilities and attention at the dispensaries being necessarily limited, that which is received by the well-to-do and the undeserving is, in that proportion, withheld from those who by chartered rules of those institutions are justly entitled to their benefits; and,

WHEREAS, The practitioners of medicine and surgery of any community who have duly graduated from accredited medical colleges and have incurred the expense of locating in such communities naturally and justly feel that their present and prospective rights and privileges are wrongly encroached upon by the abuses now in practice in connection with medical charities; therefore, be it

Resolved, That it is the opinion of this Society that some means can be found to check or modify this formidable evil; and

Resolved, That an urgent call be made upon all such members of the profession who are in sympathy with this movement and have at heart the best interests of the medical profession, to render such moral assistance and financial support in the adoption of such measures as will tend to eradicate and prevent these evils, abuses and practices; and

Resolved, That an open meeting be held at some future time and the profession at large be invited to be present; and

Resolved, That a copy of these resolutions be sent to the *Boston Medical and Surgical Journal*, the *JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION*, the *Medical Record*, the *New York Medical Journal* and the *Medical News* for publication.

M. GERSTEIN, M.D., Secretary.

BOOK NOTICES.

Manuale Hoepli Sieroterapia. DEL DOTTOR EMILIO REBUSCHINI. U. Hoepli, Milano, 1897. Pp. viii, 421. (Manual of Sero-therapy. By Dr. Emilio Rebuschini.)

This is another of the little Hoepli manuals, which must be very convenient to Italian students and physicians. Its bulk of 421 pages of closely printed text shows that it is more than a brief compendium; it is in fact a very fair compilation of the principal facts of serotherapy up to within the past year or two, apparently fairly and judiciously stated. The work takes up each disorder that has been thus treated or experimented with, from the earlier attempt of Pasteur, Behring and others, down to Sanarelli's latest claims as to the serotherapy of yellow fever. The literature appears to have been very carefully gone over, and American data are not overlooked, as was formerly often the case in European compilations of this nature. To any one who can read Italian this would be a very handy ready reference work.

Fiftieth Anniversary of the Hartford Medical Society, September 15, 1846. Proceedings of the celebration October 26, 1896, at Hartford, Conn.

This volume includes the introductory remarks by the president, M. Storrs, M.D. Historic addresses by Gurdon W. Russell, M.D., on the deceased members and those connected with the later years of the Society, by Horace S. Fuller, M.D. "Esprit de Corps" by Henry P. Stearns; The present and future of the Hartford Medical Society as suggested by a study of the fundamental enactments, by Melancthon Storrs, M.D.

The smooth and pleasant course of the Hartford Medical Society from the foundation in 1846 to the present time made it a pleasant task for the members to meet and celebrate the occasion. No one can peruse the work without feeling that they missed a very important event by not being present. This commemorative volume is of interest to every member of the medical profession, and the biographies contained in Dr. Fuller's address add something to American medical biographies.

Some of the speeches on the occasion of the anniversary dinner were of a high order of literary merit, and all were amusing and entertaining.

The Hartford Medical Society, judging from this volume, is composed of very pleasant people.