

## **History of medicine in the province of Quebec / by Maude E. Abbott.**

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# HISTORY OF MEDICINE

IN THE

PROVINCE OF QUEBEC

MAUDE E. ABBOTT

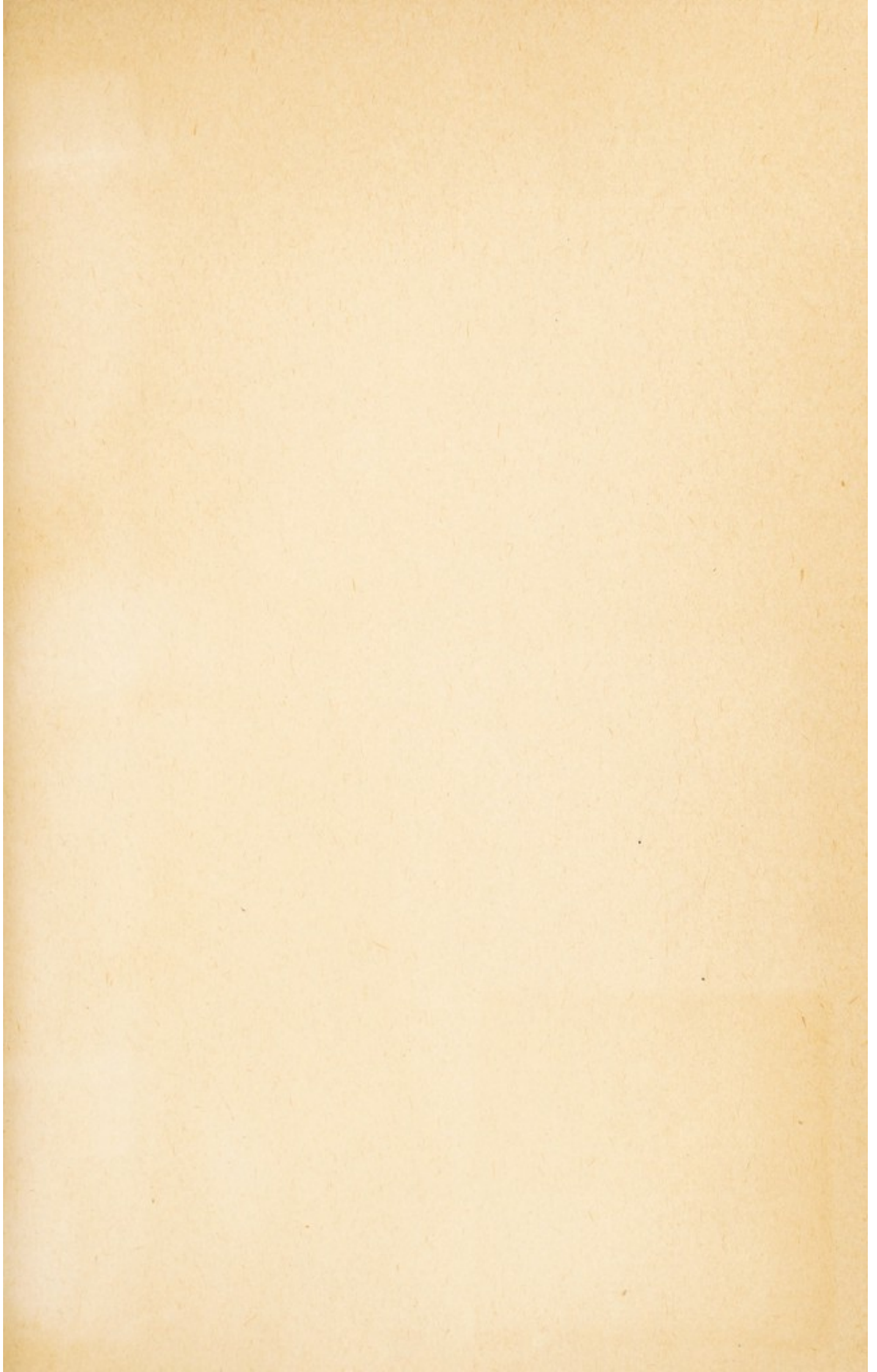
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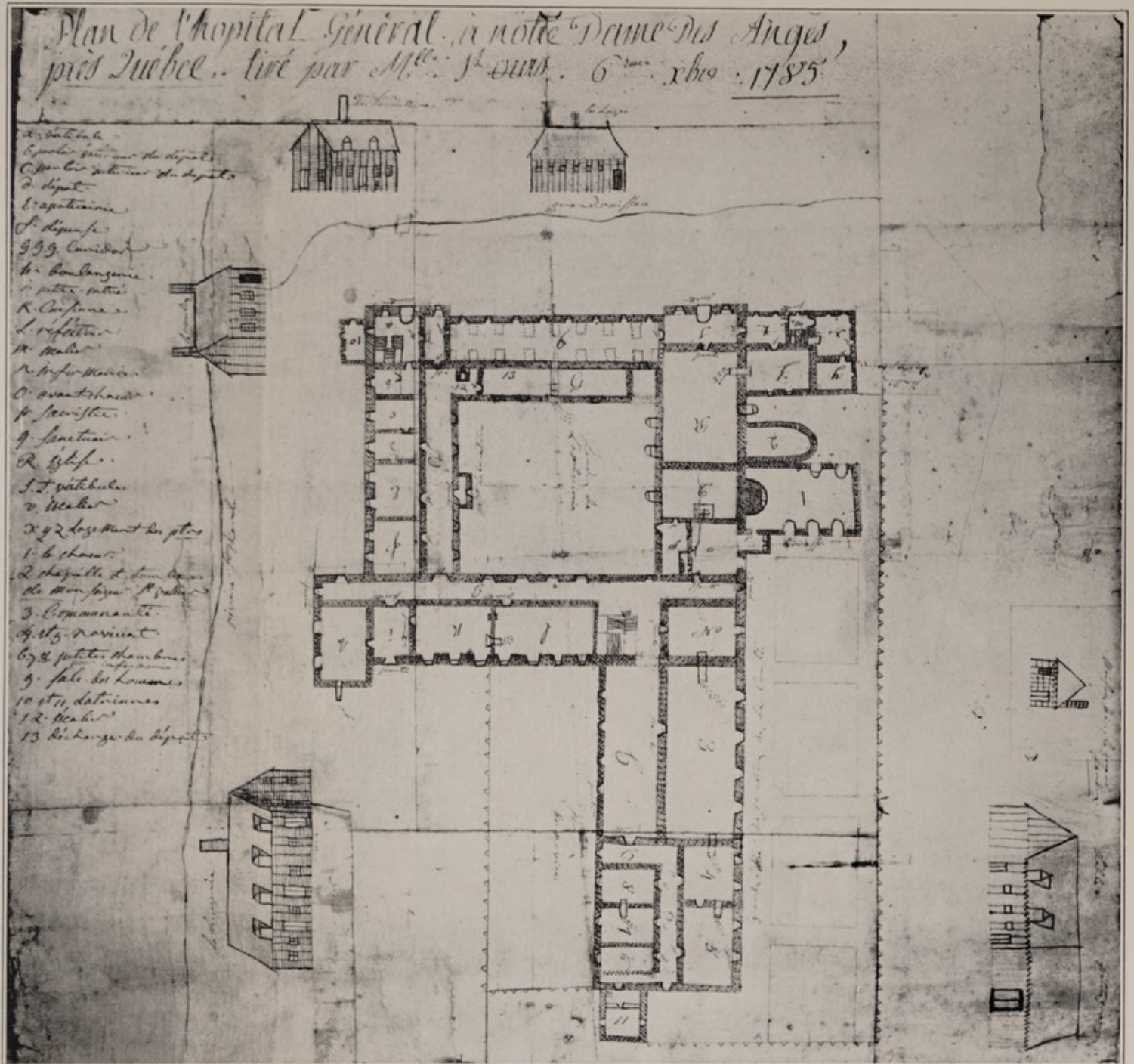
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Frontispiece: PLAN OF THE GENERAL HOSPITAL OF QUEBEC

made by Mlle. St. Ours, December 6th, 1785, and recently discovered in its Archives by Professor Traquair and Mr. G. E. Neilson of McGill University. **Historical Note:** This plan, which was made nearly one hundred years after the Hospital was founded by Mgr. de St. Vallier in 1692, shows the growth of this institution during the XVIIIth century. The buildings have since been extended, but nothing has been demolished and very little has been changed in the parts shown in it, since this plan was made. The main body of the chapel (R) and the refectory (L) are the oldest parts, having been built by the Recollets between 1660 and 1680. The panelling and furnishings of the refectory are also of this period. The other two sides of the cloister garden, the dispensary (E) wing and the men's ward (9) as well as the chaplain's rooms (X, Y, Z), all date from 1710 to 1712. The dispensary wing (b, c, d, e, f) replaced an older building erected by Frontenac, also for the use of the Recollets in 1677. The staircase (U) and the wing containing the Community room (3) were added in 1737. It is to be noted that the figures and letters on the plan are mostly inserted upside down in relation to the inscription along the top.

HISTORY OF MEDICINE  
IN THE  
PROVINCE OF QUEBEC

By

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*etc.*



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## INTRODUCTION

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The following outline of the history of Medicine in this Province was written for the publication known as "*The Storied Province of Quebec*" and was originally divided into two Parts, of which the first, covering the period from the discovery of Canada in 1534-35 to the year 1800 A.D., was undertaken by the late Dr. Georges Ahern, whose intimate knowledge of the subject in the years of the French régime was based upon the researches of his eminent father, the late Dr. M. J. Ahern, and himself, published in the form of biographical data, alphabetically arranged, upon the early practitioners in this Province, in 1923.<sup>(1)</sup>

The second Part, from 1800 A.D. to date, on the other hand, was entrusted to the writer on the ground of a personal research made in the Dominion Archives and elsewhere, on behalf of the Montreal General Hospital and McGill University, into Medical Education in this Province from the establishment of the First Licensing Board in 1788 to the middle of the last century and which was published, in so far as the information so obtained pertained to McGill, in 1902,<sup>(2)</sup> and again with additions, in 1921.<sup>(3)</sup> The untimely death of Dr. Ahern in the year 1927, prevented the consummation of his labours by the publication by him of a history of Medicine in this Province during the period of the French régime. Through the courtesy of the Publishers the responsibility of presenting this earlier part of the story also has been placed upon the writer who, in accepting it, feels it at once a privilege and a trust to transmit here the valuable information upon this interesting pioneer period, gleaned from the data collected both by the late Drs. Ahern, and also by Mr. E. Z. Massicotte<sup>(4)</sup> in the Archives of Montreal. Further assistance has been obtained from Dr. J. J. Heagerty's<sup>(5)</sup> History of Medicine in Canada, in which the story of the epidemics that devastated this country from the time of its first settlement to the middle of the nineteenth century is graphically told, as well as from the valuable accounts by Dr. H. S. Birkett<sup>(6)</sup> and Miss M. R. Charlton,<sup>(20)</sup> and the brilliant Prize-Essay recently published by Dr. Arthur Vallée on the life and times of Michel Sarrazin.<sup>(7)</sup>

The writer's thanks are expressed to the late Dr. Douglas Brymner and to Dr. A. G. Doughty, Dominion Archivists, Mr. E. Z. Massicotte, Archivist of the District of Montreal, and Dr. W. W. Francis, Librarian of the Osler Library of McGill University, for access to the material under their charge, and to Mr. W. D. Lighthall, LL.D., Dr. J. H. Jacobs and Mr. G. E. Neilson for information kindly given. Acknowledgment is also made to Miss Edna Graham for her valuable collaboration in the preparation of this volume and to Dr. Francis for many helpful suggestions in the correction of the proof.

M. E. A.



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# HISTORY OF MEDICINE IN THE PROVINCE OF QUEBEC

## **Era of Primitive Medicine; Indian Medicine in Eastern Canada.—**

Among the primitive races of the earth there is probably not one of greater ethnological interest than the North American Indian, who roamed the forests of this part of Canada in the early days of its first French settlement. In his nomadic life, his tribal instincts and organization, his barbaric customs and demonic folklore, his endurance of hardship and extraordinary emotional restraint, his fidelity to racial traditions and latent intellectual power, he presented a consistent and faithful picture of the man of the Stone Age, with the virtues and vices of his kind, surviving into a period within our ken, and emerging out of the remote historic past into full contact and collision with the well-worn European civilization of seventeenth century France. For authorities agree that, whatever his origin may primarily have been, no trace is to be found, in this part of the Western world, of a displaced native population of higher cultural grade. Just as in the contemporary travellers' and missionaries' accounts we find him portrayed, so he had lived down through the ages since his migration to this continent, out of contact or commingling with less rude civilizations, and retaining all those customs and habits that characterized mankind before he had learned the art of copper-smelting, or the graphic use of words.

In their life of exposure to wind and weather, famine, and ferocious warfare, and under the very rudimentary hygiene of their communal existence, the native Canadian population ran the gamut of human ills. As in all savage nations their efforts to combat disease and death were not confined to the use of natural remedies, in which they had considerable skill, but constituted an integral part of their religious practice, being inextricably interwoven with their ideas of the supernatural, and with rites and ceremonies that varied from the simplest forms of nature-worship to juggling in its most grotesque forms. It is in their exercise of the art of medicine, or magic as they understood it, that we get the clearest revelation of their higher qualities, as well as of the cloud of superstition under which these lay debased. For this reason a short account of the medical customs that prevailed among the tribes that once inhabited this Province will be of interest here.

What, it must be asked in the first place, were these tribes that peopled the Lower St. Lawrence and the Ottawa valleys at the time of the first French Settlement, and what are our sources of information about them? It will be remembered that at the time of Jacques Cartier's visits in 1535 and '41, he found flourishing villages both at Stadacona (Quebec) and Hochelaga (Montreal) and scattered dwellings all along the intervening banks of the St. Lawrence, and that these had completely vanished sixty-eight years later at the time of Champlain's arrival at Quebec, the inhabitants having been exterminated or driven out by a relentless foe. From their vocabulary, however, published by Cartier himself<sup>(8)</sup> in 1545, and from the traditional accounts that have come down to us, it is clear

that the Hochelagans, at least, were an offshoot of the great Huron-Iroquois family, which had migrated at some time before the advent of the Jesuit Fathers, to the Georgian Bay district and the Northern shores of Lake Huron. These were the people among whom the Fathers laboured with unparalleled devotion, and with such singular success; and the *Jesuit Relations*<sup>(9)</sup> remain the most valuable contemporary record we possess, being the faithful descriptive narrative to their Superior by conscientious eye-witnesses, of the medical practices both of these Hurons and of their Iroquois foes, as well as of that polyglot Algonquin race, whose many tribes populated the regions about the Saguenay and the North bank of the St. Lawrence as well as the country now occupied by Manitoba, Minnesota, Wisconsin and Michigan. In the discussion of medical customs among these tribes, however, we must always remember to divide the Algonquins from the Huron-Iroquois, since such practices differed widely in these two groups of Indians.

In the Indian conception, disease might be produced by natural causes, in which case it should yield immediately to "natural remedies" (potions, plasters, sweat baths, etc.). Or it was of supernatural origin, caused either (a) by some hidden desire\* of the patient's soul which must be divined, with the help of dreams and riddles, and be satisfied before he could recover; or (b) it was believed to be due to a spell or charm placed upon his body, or a portion of this, by a sorcerer acting from without, which must be exorcised and removed, either by emesis or by blowing upon or incising and sucking the painful part, and pretending to extract a small stone, twig, bit of hair or other object that had usually been concealed in the Juggler's mouth. In all such treatments the help of the Medicine-man or woman was required, and when the patient was important, the services of several such personages were usually employed. Among the Hurons, complicated orgies, in which the entire community often took part, were instituted in the form of "eat-all feasts", sacrifices to the Sun or Thunder god of tobacco or dogs, special songs with drum or rattle and facial and bodily contortions, "false-face" bear and other animal dances, or gambling-contests by solemn games of "dish" (*Le Jeune's Relation*, 1629, xvii, p. 49) "straw" or "crosse", in which whole villages might be ranged against each other, all on behalf of the sick man. A favourite and relatively simple mode of treatment for ejection of evil spirits was to make the patient walk barefoot through the fires in the centre of the "long-house" cabins, supported on either side by two savages, or to carry his body, previously well oiled, over these.

The following explanation of their curious doctrine of innate desires and of the uses of dreams in the interpretation of these, is given in the *Jesuit Relations* for 1648-49 and 1653 (vols. xxvii and xxxix, p. 17, Goldthwaite edition). Father Bressani writes:

"Besides the free, or at least voluntary desires that we usually have, the Hurons thought that our souls had other desires, in a manner hidden, born in the depth of the soul and projected into some object proportioned to itself. These the philosophers term *desideria innata*, to distinguish them from the desires of which we have knowledge, *desideria elicitata*. The soul is thought to reveal its occult desires by means of dreams, which are, as it were, its voice, and if these dreams are fulfilled it remains content; otherwise, it is vexed, and not only no longer seeks good and happiness through the body, but, revolting against this, causes it various infirmities and often death. They therefore diligently observed dreams, in order not to irritate the soul by ignoring its desires; and they often obeyed it at the cost of blood,—causing their very limbs to be cut off if the dream so commended, and preparing solemn feasts for it. They offered sacrifices too, to their dream as to a divinity, and this by the advice of their diviners. They imagined that some people were more enlightened than others and capable of seeing into the depths of the soul where lay concealed its natural and most

secret desires. These were commonly their Physicians or Charlatans, who when called to see a person, commonly used no other remedy except that of driving out the occult desire of the soul which was tormenting the patient's body. They said they had this vision from an Oki, a powerful genie dwelling in them, which had appeared to them in the form of an Eagle or Raven, etc., and they discovered the desires of the sick man by looking into a basin of water, or by acting as though in a fury, or by hiding in a secret place where they saw the images of these. All persons then applied themselves to procuring the things desired by him, sparing neither time nor expense, to obtain what it would have been accounted sacrilege to refuse."

In sharp contrast to the village orgies that so offended the sensibilities of the devoted Jesuit Missionaries in their Huron-Iroquois charge, are the evidences, scattered through the early contemporary records, of "*Medicine Societies*" which demanded of their members a definite self-dedication, and a preparation and initiative that placed them above the ordinary Juggler on the higher spiritual plane of the Priest or Shahman, as the true Medicine-Man of the tribe. Such Societies are known to have existed among almost all the Algonquin tribes, and there is some evidence of them among the Hurons also (see *The Relations*, xxx, p. 33), but in the latter case we have little exact information for recent investigations are lacking, and details of the Medicine ceremonial of such secret organizations were naturally hidden from the first observers, especially the Fathers, who preached the Faith in heroic opposition to what their missionary fervour characterized as the abhorrent deviltry of the pagan rituals. On the other hand, later studies such as that made by W. J. Hoffman <sup>(10)</sup> under the U.S. Bureau of Ethnology, on the pictographic records and traditions of the Ojibways and Menomini, Algonquin tribes that had migrated Westward and now occupy the U.S. Reservations in Minnesota and Wisconsin, have unearthed a mass of interesting facts regarding the ceremonial usages of these people, who were akin to, if not identical with the Algonquin Indians that inhabited this part of Canada in an earlier age. <sup>(11)</sup>

Among these tribes there appear to have been two sorts of so-called Medicine-men; those who practised their art or magic without any preparation or authorization, merely by virtue of some occult faculty they were thought to possess, or from ambition or avarice; these were rightly called charlatans and were the "Sorcerers" or "Jugglers", and also with them may be included the "Herbalists" a class who made it their business to study the uses and preparation of plant remedies and disposed of this knowledge for payment in kind. The true Medicine-men and women on the other hand, (for both sexes were admitted to this office), worked, at least among the Ojibways, under the definite organization of the Grand Medicine Society of the tribe, and only performed their ritual at seasonal times, being actually the priests of the people, whose function it was to mediate between them and the Great Spirit and to officiate at the installation of chiefs and other momentous issues, as well as in the combatting of disease.

Their sacred calling was protected from the invasion of unworthy aspirants by exacting from these a prolonged stage of preparation, during which, in return for the payment of large "presents", the candidate underwent a strenuous preliminary training (usually extending over years) from a member of the local priesthood, who instructed him in plant and forest lore and the preparation of botanical medicines, the tradition of the origin of the race and of the conferring upon mankind of the grace of medicine by means of a solemn ceremonial revealed in past ages by the Great Rabbit through their sacred animal the Otter, as also the symbolic meaning of the Shahman's paraphernalia of office and the chanting of Mide songs. The ritual of initiation itself to the four successive degrees of the Midewiwin was a complicated performance involving the preliminary purification of the neophyte for several successive days in a small specially erected sweathouse outside the medicine lodge where he passed hours in solitary meditation, and his subsequent admission to a large Midewigiwam, newly constructed for the occasion, where in the presence of the assembled Mide, the sacred *migis-*



*shell*\* was supposedly shot into his body by four officiating priests, after which he presented to the gathering his gifts, and emerged a Shahman. (Figs. 1 and 2).

From the above outline it is evident that the cult of these Grand Medicine Societies was a natural religion, woven out of the physical needs of primeval man and the proximity of the animal world to his daily life. That it carried within its ritual the tradition of Indian genesis and cosmogony (Hoffman) constituted it a powerful and impressive force, and explains too the bitter antagonism of these Medicine-men to the early exponents of Christianity, which contributed so largely to the cruel fate of so many heroic Jesuit missionaries.

*Natural Remedies:* Further, in spite of shams and superstitions and barbaric usages of all sorts, it must be recognized that there was a considerable amount of *rational medicine* practiced by the Indians in their use of natural remedies in the form of potions, plasters, sweat-baths, dietetic measures, etc. It is true that even in this connection the magic element was seldom lost sight of, in the sense that the efficacy of a remedy was usually supposed to lie in the fact that it made the body an unpleasant habitation for the demon causing the illness and thus induced his departure. Nevertheless, the Indians understood well, in a general way, the physical effects of emetics, purgatives, diuretics, the making of broths to replace other food in fevers, the specific uses of certain medicinal plants and trees, especially of their roots and bark, and they practised a rude, but sometimes quite efficient surgery (see *Relations* 1663-5, xlix, p. 121).

Their sweat-bath too was a highly rational procedure, although its effect was frequently nullified, at least in cases of serious illness, by the practice in many tribes of taking a cold plunge immediately thereafter in a near-by lake or river. Its uses were both therapeutic, to make medicines operate more actively or to reduce fever, etc., and also ceremonial; in the latter case a number of persons might take part, crowding together naked into the small enclosure of the "sweat-house". This was usually a small bark hut covered in with skins to exclude air, erected either within or without the log-house. Stones heated to redness in the fire were placed on the ground within it and the person or persons to be sweated entered naked, usually tossing his arms and singing, and seated himself on fir-branches arranged to provide a seat. Cold water was then handed in to him which he threw from time to time on the hot stones (thus producing steam), also drinking some. "This causes him to break into a profuse perspiration", (*Saguenay Relations*, 1620-36, lxviii, 6.73).

The Huron-Iroquois had also considerable special knowledge in the use of natural remedies. Their descendants today in the reservation of Caughnawaga, near Montreal, seek certain roots in the woods every Spring, accompanied by small gifts to the spirits of each root. They have also several healers who use a system of faith-cure as well as dieting and medicaments which deserve attention, according to reports by local medical men.<sup>(12) (13)</sup>

**Scurvy among the First French Settlers (1535-1608).**—To this land of densely crowded primeval forest, great rivers and inclement winters, peopled only by a savage race dominated by a strange necromancy, yet wise with their native knowledge of the woods, came, in the year of grace 1535, Jacques Cartier with his three good ships. Manned these must have been with at least one trusty surgeon, for all French sailing-vessels were so provided, and an apothecary named *François Guitault* had accompanied Cartier on his first voyage to the Gulf the previous year. No mention is made however, either by Cartier himself or in any other contemporary account of this voyage of any such functionary, nor does it appear that there was anyone among his little company competent to deal with the deadly scurvy that broke out among his half-famished crews during the cold and privation of the winter of 1535-36, which they passed on the bank of the St. Charles just below Quebec. Out of the 110 men in his party twenty-five died and all but three were disabled before any way could be found to stop the

\* A small white shell shaped like the cowrie.

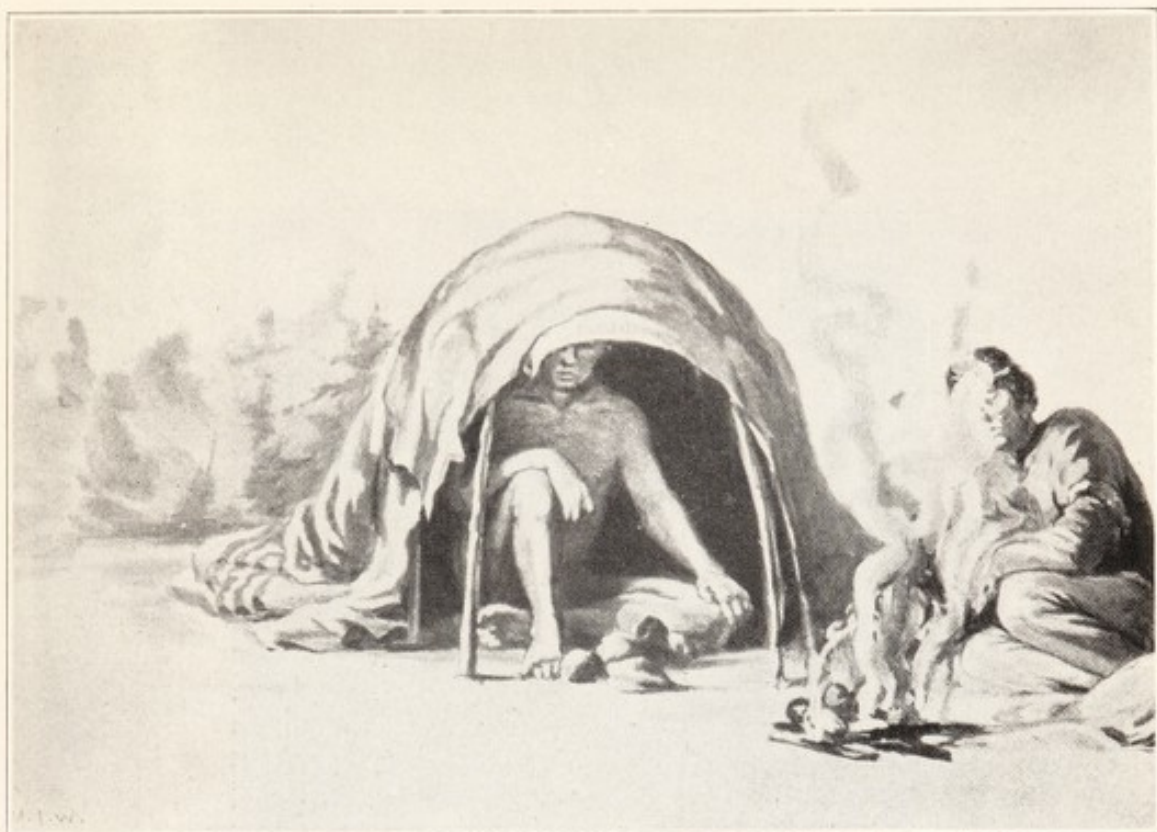


FIG. 1. SWEAT-LODGE USED IN INDIAN MEDICINE

for purification of the candidate before initiation into the Midewiwin of the Ojibways.

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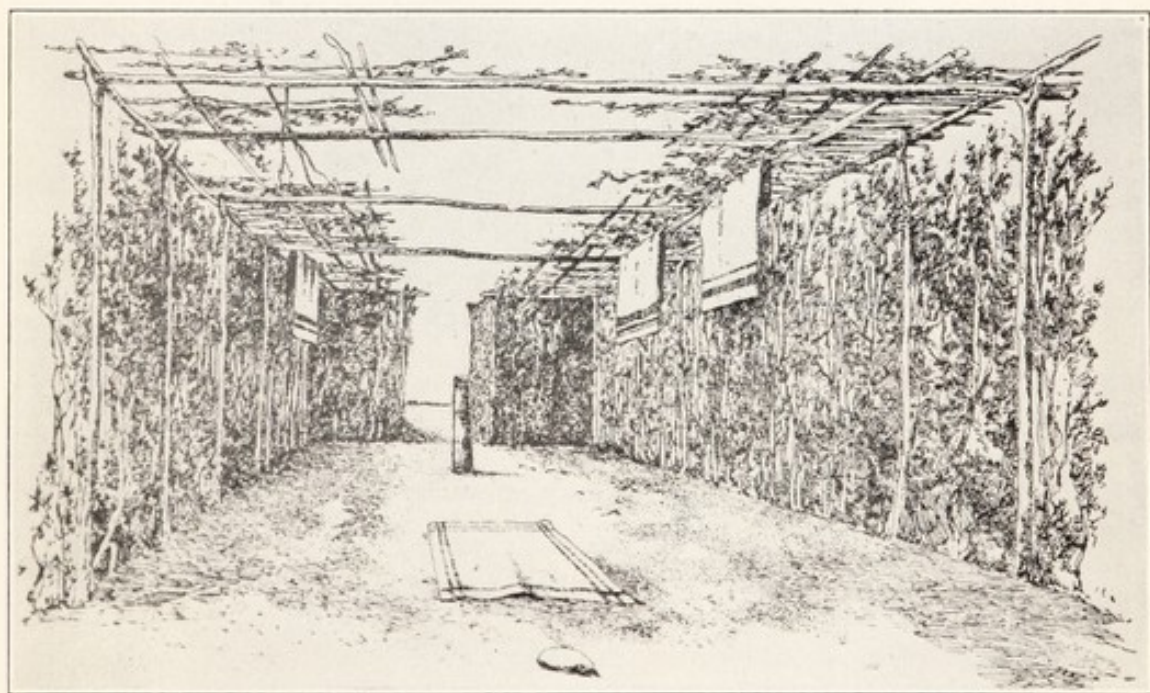


FIG. 2. INTERIOR OF MIDEWIGAN

in which the ceremony of initiation of the future Shaman is performed. Note the sacred Mide-post, the blanket spread for gifts from the candidate, and the sacred stone.

(Republished by permission of the U.S. Bureau of Ethnology, 7th Annual Report, 1885-86, p. 188.)



FIG. 3. JEAN GUIOU MAKING THE OATH by "*Foi et hommage*"  
his hat, sword and spurs cast aside before the chief portal of the manor-house  
of Beauport, in acknowledgment of his fief of Du Buisson, under the lordship  
of Samuel Giffard.  
(From a drawing by Orson Lowell, published by permission in the "*Old Régime  
in Canada*," being Part IV. of "*France and England in North America*,"  
by Francis Parkman. Boston, Little, Brown and Company, 1922.)

progress of the disease, the cause of which, lying as it did in the diet deficiencies, was not in the least understood. Had it not been for the discovery by Cartier himself that the Indians possessed a sovereign remedy in the administration of copious draughts of the infusion of the hemlock spruce, the little colony would probably have succumbed and been entirely wiped out. His description<sup>(6)</sup> of the disease as it appeared among his starving followers, of the autopsy that was done by a half-skilled member of the party upon one Phillippe Rougemont, a sailor dead from it, in a vain attempt to ascertain and remove its cause, and of the wonderful cure of all the survivors by the administration of the "Anneda" as the Indians called their "tree of life", deserves a place among the classics of the History of Medicine.

Cartier returned to France in 1542 without encountering Roberval and his sorry band of colonists, and the latter had evidently no knowledge of this native mode of treatment of scurvy by the local Indians, for during the winter of 1542-43, which his party passed at Cap Rouge near Quebec, fifty out of his 200 emigrants died of the disease. Neither was this remedy available to the French in Acadia when, some sixty years later, the first party, numbering 79 persons, under de Monts and Champlain passed the severe winter of 1604-05 on Ile-St.-Croix in the Bay of Fundy. Lescarbot<sup>(15)</sup> who came out the following year to Port Royal and became the historian of New France in Acadia writes that "the Savages here knew nothing of the Aneda" and that the doctors of physic in France who were consulted about his illness found it "very new and unknown, so that our apothecary\* was not charged with any order for the cure thereof . . . and this notwithstanding it seemeth that Hippocrates hath had knowledge of it."

The disease known as Scurvy was of course familiar to the ancients as well as to these mediaeval explorers, for throughout the ages it had broken out wherever a prolonged state of siege or a too lengthy voyage, or lack of adequate provision for the barren winters of the North, had deprived a beleaguered garrison or a stranded party of adventurers of the vitamine-containing fresh food and vegetables so necessary for the maintenance of bodily health. This etiology was however not grasped in the first years of French colonization. Again, as in Cartier's time, attempts were made to find the cause of the dreaded scourge by post-mortem examination of those who had succumbed. In Acadia, during the terrible winter of 1604-05 at Ile St. Croix, this duty had been carried out by Louis Hébert, surgeon-apothecary of the company, in spite of whose care "and the remedies he had lavished on them", 35 of the company had died; and at Port Royal in 1605-06 the Sieur Guillaume de Champs of Honfleur, "*notre chirurgien, homme expert en son art*" made similar investigations, as did also during the following year another surgeon, Maitre Estienne; but without adding anything to the current understanding of the problem.

Under the better living conditions, however, at Port Royal in the second winter of the colony there the disease had abated somewhat, and in 1606-07, thanks to the large supplies of food and wine received from home and the wise institution by Champlain of "*l'ordre du bon Temps*" which secured for all a daily abundance of fresh and well-cooked viands, only seven died of it. Nevertheless, in spite of their possession of the precious tree which grew so freely in the vicinity of Quebec, and of Champlain's large experience, death took a heavy toll during that first hard winter of 1608-09, for he lost, through sickness, fifteen of the 27 men he had retained here to plant his little colony. Whether scurvy or dysentery was at fault, is not clear from the accounts, but probably both diseases had a part under conditions that were entirely beyond his power to control. We are told that the hardest task of all was to keep up good cheer. But—"None the less was Quebec a reality and France had taken the step that was to make that region the enduring heritage of her Sons." (Wrong,<sup>(16)</sup>).

\* Louis Hébert.

**French Medicine in the Seventeenth Century.**—The wonderful seventeenth century dawned upon a slumbering Western continent, astir internally with savage and forest life, but all unconscious of the older civilizations that were sweeping to its shores, and, for outsiders, still enwrapped in the profound mystery of the unknown. A contemporary writer<sup>(17)</sup> has drawn an interesting distinction between the first and second halves of this great century in Europe, in pointing out that the time from A.D. 1600 to 1650 was an era there of individual experiment and observation and discovery, and of the unveiling thereby of those elemental laws that form the basis of our modern scientific thought and enquiry; while its later decades were rather a period of correlation and organization, when men came together in groups for the discussion and application of these newly-discovered principles for the mutual diffusion of knowledge in that remarkable development of the time, the birth of the great scientific societies.

In a humbler sphere and in a more restricted sense, a parallel may be drawn, and a similar contrast shown, in these two periods in the evolution of the country that became New France. As is usually the case, its foundations were laid in the early years of this century by the concentrated effort of a few individuals. Champlain, the great explorer and wise colonizer, stood as it were "upon a peak in Darien", and pre-visionsed the immense possibilities for town and village life of this land of rolling forests and fertile maize-fields; and behind him there followed, in the active pursuit of their calling as medical practitioners, two men, who, realizing in their own persons the vital principle of colonization, wrested success from the soil, and with their families and dependents grew and multiplied upon it, becoming, the one the first Colonist, and the other the first Seigneur of New France. Had it not been for the tenacity of purpose and agricultural intelligence of Louis Hébert, surgeon-apothecary of Paris, and the sagacious forethought and public-spirited citizenship of Robert Giffard, a physician of Normandy, in making good their habitation and succession here, the little colony at Quebec could hardly have withstood the storms and difficulties that beset it, and the advance of civilization in this locality might have been for many decades deferred.

Turning to the latter half of the 17th century, we are struck by the relatively large number of barber-surgeons, apothecaries, qualified physicians, midwives, and charlatans to boot, who poured across the Atlantic to these shores at this time, when the French at last embarked, under the prudent administration of Colbert and the paternal government of Louis XIV, on a real colonization policy, that, notwithstanding its limitations and inevitable autocracy, bore immediate and abundant fruit. New France became a Royal colony in 1663, and the tide of immigration set in two years later and lasted in full flood for some seven years (1665-1672), with the result that the population, which in 1648 had numbered only 241 persons, had increased in 1698 to over 15,000 souls (Burpee,<sup>(19)</sup>). Medical practitioners appeared in the country in a corresponding ratio. Ahern mentions no less than 84 persons practicing medicine here in the last half of the 17th century, of whom 36 were at Quebec, 22 in Montreal or the vicinity, 8 at Three Rivers, 2 at Sorel, 1 (Dusablon) at Gaspé Basin, and the others at Batiscan, Château Richer, Ile d'Orléans, etc.; and to these M. Massicotte adds 12 others (not included by Dr. Ahern) located in the District of Montreal, making a total of 96, which is a relatively high proportion. It is to be realized however that only a few of these were of actual professional importance, and a number were undoubtedly self-educated and self-styled, for qualifications to practice were not defined to any clear legal restrictions, and charlatanry abounded. Towering above the rank and file of all is the figure of Michel Sarrazin, Doctor of Medicine of the University of Rheims, who arrived in Canada in 1685, and whose election in 1699, when a physician in active practice in New France, to the newly formed *Académie des Sciences* of Paris, coinciding as it did with the election of Sir Isaac Newton to that body in the same year, links this country with that great late-seventeenth century movement for the diffusion of international knowledge above mentioned. The story is best told by relating, in chronological order, the biographical data about the more important of these men.

**Pioneer Physicians to the time of Michel Sarrazin (1608-1685).**—Antedating the advent of Hébert in this part of New France were: *Jehan de Brouet*, who sailed up the St. Lawrence to Tadousac in A.D. 1600 as surgeon of Chauvin's fleet; one *Bonnerme*, who, in 1608, accompanied Champlain to Quebec and thus became its first surgeon, but who died the following year from either scurvy or dysentery, after having cleared himself of a false accusation implicating him in the plot against Champlain's life; a surgeon of Rouen named *Boyer*, who was with Champlain in his battle with the Iroquois in 1610, when he dressed a wound in the latter's neck inflicted by a stone-pointed arrow, and who was still in Canada in 1613; and the Récollet friar *Pacifique Duplessis* who was probably the first medical practitioner to arrive of real value to the colony. He hailed from Vendôme in Beauce, and had been an apothecary before he made his profession; he sailed from Honfleur with three other Récollet friars and Pontgravé on April 24th, 1615, reaching Quebec on June 2nd following. Here he resumed his medical activities and did a very useful work in the vicinity of Trois Rivières where he died in the autumn of 1619. Eighty years later in 1698 his remains were exhumed and buried with those of Hébert in the crypt of Notre Dames des Anges.

*Louis Hébert* arrived in Quebec in 1617, and died in 1627. He was born at Paris, the son of an apothecary in the service of Queen Catherine de' Medici. He had shared Champlain's earlier sojourns in Acadia both in 1604-05 at Ile St. Croix and in 1606-07 at Port Royal, and had interested himself vastly there in botanizing and gardening. Lescarbot<sup>(15)</sup> wrote of him then, "Our apothecary, a man who, besides his experience in his art, takes great pleasure in working the ground, sowed corn and . . . transplanted vines . . . from Malebarre to Port Royal . . . where there were none." After the cancelling of de Monts' monopoly Hébert returned to France, but during the years from 1610 to 1613 he was again at Port Royal, this time accompanied by his wife, who was thus the first woman to set foot on Canadian sod. Here he won the affection and confidence of the kindly disposed natives, and became an important factor in the protection and development of the colony, of which he acted as Governor during the absence of de Biencourt in 1613. On its destruction in that year by Argall he returned to Paris and again opened his apothecary's shop on the banks of the Seine.

With this record, it is not surprising that Champlain, returning to France in 1616 to secure help for his tottering colony at Quebec, should have sought out his old friend of Acadia days: "and one may say," wrote P. Leclercq, "that the most advantageous thing he succeeded in doing was in persuading the Sieur Hébert to go to Canada with all his family." We can imagine too, that his appeal did not fall on unready ears, for the Canadian woods must have called loudly to her one-time settler. Secure in the promise of a salaried post, which Champlain had secured for him with a new fur company, Hébert sold all his possessions, and proceeded, with his little family, to Honfleur, only to find the Company in question refusing to keep its agreement and offering him instead other, and much less advantageous, terms. Preferring to reject such an offer, Hébert decided to go out independently of it, and accordingly sailed from this port, March 16th, 1617, on a vessel commanded by a Captain Morel and having on board besides himself, his wife, two daughters and a small son, two Récollet Fathers. At this time, he was 40 years of age.

After a long and stormy passage the party arrived at Quebec towards the end of July, and Hébert immediately took possession of ten *arpents of land* (situated on the site of the present Cathedral and Seminary) granted to him before his arrival. With characteristic energy he began at once preparing this ground for seeding, and also proceeded to erect thereon a house and mill, which appear to have been the first built in the upper town. Next year, 1618, his eldest daughter, Anne, was united in wedlock with Etienne Jonquest of Normandy. This was the first marriage consecrated in Canada, but unfortunately both parties died a year later, without surviving issue. The marriage of his second daughter, Guillemette, to Guillaume Couillard took place in 1621 at the *Habitation* "in the presence of Champlain and all the French" and proved to be a happy union whose descendants

have multiplied so widely, that most of the older French-Canadian families are said to claim relationship with their first colonist, through this channel. His only son died in 1629, and his name has not been transmitted to posterity.

On February 4th, 1623, Hébert received letters of concession from the Duc de Montmorency of the land which had been granted him in the Upper Town (termed the Seigneurie de Matelôt). On the death of the Viceroy he applied to his successor, the Duc de Ventadour, for ratification of this grant on the ground of his many services to the colony, and this was immediately given, in February, 1626, in a deed which is interesting as being the first actual application of *seigniorial tenure in New France*. (D. Heneker,<sup>(18)</sup>).

Owing to the persistent opposition of the fur-trading companies to agriculture and to the private disposal of produce, Hébert and his family, and their descendants the Couillards, met with many and great obstacles in addition to the physical difficulties of those pioneer times. Industry, courage and integrity, however conquered, and they reaped huge harvests and had the respect and affection of the entire community, and their homes were long a centre of hospitality and of refuge from the common dangers. Shortly after his death, which occurred from a fall on the ice, his wife, Marie Rollet, remarried, and she with Guillemette Couillard were among those who remained on at Quebec during the English occupancy (1629-32) and who were there to receive Champlain on his return as Governor in 1633, the Thanksgiving Mass being celebrated at her house.

The second practitioner to settle at Quebec was *Adrien Duchesne*, a Huguenot from Dieppe. He arrived in 1618, and he also with his wife was among fourteen French persons who remained at Quebec during the four years of the English occupation. He is spoken of as "the surgeon of the Habitation" (Lejeune). He was the uncle of the famous Charles LeMoyne de Longueuil.

*Robert Giffard*, who has the honour of having been awarded the first seigniorial grant in New France, and who was the first physician of the Hôtel Dieu of Quebec, was born at Marlay in 1587. He first came to Quebec in 1627 as surgeon to a trading vessel of the Hundred Associates and spent the summer hunting in the woods at Beauport, where he erected a log cabin for future use. In January, 1634, he was awarded, for his services in New France, the Seignior of Beauport with full rights of *foi et hommage*. This was the first time that a title of nobility was conferred upon a Canadian settler, and nobly did Giffard fulfil his obligations, for he immediately took the important step of arranging to bring out, with his wife and five children, a number of artisans and labourers from Perché in Normandy. By deeds passed between them at Mortagne on March 14th, 1634, he pledged himself to distribute to them portions of his land at Beauport on easy conditions of personal service, which they in turn agreed to render him under the usual conditions of seigniorial tenure. Giffard arrived at Quebec with his family and this band of colonists on June 4, 1634, and two years after his arrival his manor-house at Beauport was completed. It was a spacious mansion, built of stone, and was used by Montcalm as his headquarters in 1759. It was burnt down in 1879 and under its foundation was found a leaden plate bearing the date July 25th, 1634, and the name of "*Giffard, Seigneur de ce lieu*".<sup>(38)</sup>

A picturesque glimpse of the old feudal law in action in the New World is gained in connection with some litigation entered upon by Jean Guiou, one of Giffard's two principal tenants, in the settlement of which Guiou was required by the Governor to make the formal act of homage for his fief du Buisson, to the Seigneur of Beauport or his representative. Accordingly, on July 30th, 1646, he presented himself at the principal entrance of the manor house and there, on bended knee, with hat, spurs, and sword cast off, made his oath of fealty to Boullé, Giffard's farmer. (See Fig. 3.)

Giffard was physician to the King and was also a member of the Sovereign Council from its formation in 1648. A man of devoted piety, he was in close contact with the Jesuit Fathers, and his name appears repeatedly in the *Relations* as delivering an Indian woman or baptizing a dying child, or again as exchanging friendly gifts or intercourse with the Fathers or, as Church warden, taking a

leading part in their Processional. As a physician he was active in the service of the poor; but, "like Hébert, he was first of all a colonist", and in 1636 his harvest was so abundant that it was computed that, at the same rate of growth, he could the following year support twenty people on his produce. He died at Quebec on April 14th, 1668.

One of the most tragic events of the early years of this century, which illustrates well the perils that surrounded these first settlers, was the death of *René Goupil*, a young surgeon born near Anjou in 1607, who had attached himself to the Jesuit mission at Quebec as a *donné* in 1639, and in this relation had spent several years of devoted service in the Hôtel Dieu at Sillery and Quebec. In the summer of 1642, he set out with Father Jogues and a band of friendly Indians on a missionary journey to the Huron country, where it is said he intended to practise his art. On August 22nd, at the west end of Lake St. Peter, they were captured by a hostile band of Iroquois and after six weeks of appalling tortures, which he bore with singular fortitude, Goupil was killed by a blow on the head from a tomahawk, dropping dead at the feet of Father Jogues, who survived to leave an account of the martyrdom of this beautiful youth.

A tragic fate also awaited *Gaspard Gouault*, a Jesuit Brother and an apothecary of Poitiers who came out in September, 1646, and was drowned with eight others on his way to the Huron mission a few weeks later; as also the surgeon *Plassez* who was taken by the Iroquois near Three Rivers in August, 1652, and carried by them into captivity. Other practitioners who came to Quebec at this early period were: *Nicolas Blondel* (1637); *Pierre Deursot* (1643); the detested charlatan *Dubok* (1645-46); *Noel Belanger* (1646); *Florent Bonnemer*, a Jesuit brother and pharmacist (1647); *Louis de Saint Maurice* (1649); *Claude Bouchard*, a native of Picardy (1649), who with another surgeon *Jos. Bassani* attended a habitant wounded by the Indians and received his fees in kind from the other habitants of the locality after the patient's death; and *François Menouil* (1652) who was physician to the King and also attended to the Ursulines and was a member of the Sovereign Council. At Three Rivers were *Nicolas Courson* (1636), *André Crosnier* (1642) and *Charles Chevalier* (1645); while at Montreal were *Louis Goudeau*, whose name is attached to the first notarial deed executed there in 1648 by Lambert Closse; and *Jean Pouppé* who assisted at the birth of the first children of European parentage in that city after its foundation in 1642.

Giffard was succeeded in charge of the Hôtel Dieu of Quebec by *Jean Madry* who arrived in 1671 with the qualification of a "Practising Physician of the Corporation of Barber-Surgeons". His story is of great interest in that he received a Royal Commission naming him Lieutenant in New France of the Chief Barber-Surgeon of the King, and authorizing the establishment by him "for the public good . . . of the mastership of a School of Barber-surgeons in this locality, so that in the town of Quebec and also in all places, towns, villages and settlements under obedience to the King, all those passing through or sojourning there may be well and safely treated, their wounds dressed and medicines supplied in every case of need or necessity". Further . . . "We command also all master barber-surgeons to obey the said Jean Madry as though he were ourselves, in all matters relating to the said statutes and ordinances."

This Commission was issued by "François de Barnoin, King's Councillor, barber and surgeon to His Majesty, guardian of the royal charters, privileges and ordinances made from ancient times upon the art and status of barber-surgeons for the entire kingdom of France and honorary and perpetual Provost of Surgeons of Paris", and it permits "the said Jean Madry, on account of his capacity and experience in the Art of Surgery as well as of the actual services which he daily renders to the subjects of His Majesty in New France", to exercise the office of Master Barber-surgeon in the town of Quebec, together with the other privileges above mentioned. It throws a very interesting side-light on the status of the barber-surgeon of that day, and upon the effort that was being made by the French court to control the practice of surgery and to protect the people of



New France and elsewhere from its irregular exercise. The curious custom then in vogue of combining the two offices of barber and surgeon in one person was probably due to the practically universal employment of *bleeding* as a panacea for almost every ill, and that the performance of this operation was thought to require no other knowledge than how to sharpen a knife and the proper location for the incision into one of the great veins. Many documents of the time bear evidence of this combination. Thus in the Archives of Montreal we read that on August 20, 1667, *Michel de Sirsée, Chirurgien et valet de Chambre de Mgr. le Gouverneur Perrôt*, bought of one Jean Raynaud, 40 arpents of ground for the payment of 1,125 livres and an agreement "for three years to shave and bleed the said vendor, his wife and children at his house at Pointe-aux-Temples; and *René Sauvageau*, Surgeon to the Company of M. de Boisbriant in Montreal, rented a house "for 25 livres a year, payable in wheat" and the agreement that both he and his partner Jean Rouxcel should "serve the lessor and his family with their art of surgery . . . and also shave the said lessor."

Madry does not seem to have made much use of his powers for creating a School, though he apparently trained Jean Demosny, but his official title is given him in a number of legal documents of the period, and he was an important man in the community and was elected one of its first two aldermen. He was drowned between Quebec and Three Rivers in 1669.

Contemporary with Madry at Quebec and active there before 1663 may be mentioned *Annet Goumin*, who attended the Garrison and was a botanist of repute; *François Fortin*, a physician of Côte de Beaupré and *Claude des Corbières* who with Madry appeared before the Sovereign Council as arbitrators in a claim made by Goumin for medical services, when it was decreed "that the said arbitrators give a written report upon the case contested between them so that it might be settled by the Sieur Giffard, physician in ordinary to the King; *Pierre Brebant* a "surgeon habitant" at Sillery; *Louis Delaunay*, Doctor of Medicine of Bordeaux; *Jean Bonnamour*, physician to the King and to the Ursuline convent (1671); *Jean Delaunay*; *Pierre Lavallée*, an ancestor of the present Dr. Arthur Vallée; and *René Cochon*, a surgeon and Justice of the Peace on the Island of Orleans. At Three Rivers also were *Louis Pinard* who married Madeline Hertel, aged 13, in 1558, and was for forty years the chief physician of this district, and the master-surgeon *Michel Gamelin*, the surgeon-apothecary *Jean Laplanche*, the Burgundian *Jacques Dugay*, *Passerieu dit Bonnefond*, and the notorious charlatan *Marguerite Dézy*, who was born here in 1663 and was excommunicated at Batiscan for scandalous living in 1694.

After Madry's death in 1669, the office of Deputy of the Chief Barber-Surgeon of the King was conferred upon *Jean Demosny*, who also succeeded Madry as Surgeon-Major of the Hôtel-Dieu du Précieux Sang. This Demosny was born in Normandy in 1643 and must have come out very young, for at his death in 1687 he is stated to have been on the Hospital staff thirty years; this fact makes it probable that he was trained by Madry. He himself had several apprentices. The contract of one of these, *Ignace Pellerin*, was drawn up on March 4th, 1675, when Pellerin was seventeen, by the notary Becquet in the presence of the Sieur de Bellefontaine and Martin, another apprentice, whose signatures are attached with those of Ignace himself and his parents. It binds him for the succeeding three years as apprentice to the Sieur Jean DeMosny, "Master-surgeon of this town and living here, and first lieutenant of the first barber and surgeon of the king", who on his side pledges himself "to demonstrate to and instruct the said Ignace Pellerin in the art and practice of surgery and of all things appertaining thereto, to supply him with food and drink, bed and hostel and to treat him humanly and gently as is fitting." In return his parents undertook to supply him with all his clothes and to pay to Sieur de Mosny 200 livres.

Demosny had several children, of whom the eldest *Jean Demosny fils* was also a physician, and two daughters became hospital nuns. That he had the usual difficulty in collecting fees is shown in several quaint records. Thus he seized in lieu of an unpaid account for medicines supplied to the Sieur de Mesne and his

family "two cows, the property of the said Sieur". The Court declared the seizure void, but ordered that the physician's account be paid in full.

Turning now to Montreal, the most important of his contemporaries here in the early years was *Etienne Bouchard*, a master-surgeon of Paris. He was born in 1622 and came out in 1653 under an engagement with the Company of Montreal to care for the medical needs of the colony for a period of five years, and he received an advance payment at this time of 147 livres. Two years later he entered into an engagement with 26 heads of families in Montreal "to treat and supply with medicines themselves, their wives and families, both born and to be born", in return for 100 sous for each person so treated. This quaint deed is published by M. Massicotte.<sup>(25)</sup> In another deed (*Basset*, No. 277), he engaged *Nicolas Colson* for one year as his *serviteur-chirurgien* for 150 livres and his keep and *François Caron* in the same capacity. Bouchard was surgeon to the *Hôtel Dieu* of Montreal from 1659 to 1670. He married in 1657 a wife aged 14, and they had nine children, but finally separated, and he died on July 20th, 1676, at the house of *Jean Martinet*.

*Louis Chartier* also came to Montreal in 1653, and was likewise engaged by the Company of Montreal and given an advance payment of 120 livres. He was a friend of *Dollard des Ormeaux* and helped to finance the latter's heroic expedition against the Iroquois in 1660, as *Dollard's* note to him for 30 livres shows. Chartier was himself drowned the same summer when defending the lower end of the island against these implacable foes. Thirty years later, on July 2nd, 1690, two other surgeons of this district met a similar fate in the same spot; these were *Antoine Chaudillon* and *Jean Jallot* both of *Pointe-aux-Trembles*. Of a band of twenty-five colonists who set out to stop the depredations of the Iroquois at *Bout de l'Isle*, fifteen, including *Jallot*, were killed, and *Chaudillon* was wounded. Their sacrifice, like that of *Dollard*, was not in vain, for the Indians were turned back.<sup>(4)</sup>

*Jean Gaillard* came to Montreal in 1661 and in the census of 1667 he is shown as 50 years old. He apparently succeeded *Etienne Bouchard* and the *Abbé Souart* as surgeon to the *Hôtel Dieu* of Montreal, for *Ahern* tells us he exercised this office from 1672 to 1680. Following him, the two surgeons *Jean Martinet de Fonblanche* and *Antoine Forestier* were officially made surgeons to this Hospital by a curious deed<sup>(24)</sup> dated July 13th, 1681, which reads that they were "to serve the said Hospital . . . and dress and treat the patients . . . in alternate quarters, turn about for three months each, and to visit diligently the patients at seven o'clock on the morning of each day and at other times when necessary, as requested, each receiving 75 livres a year for their services . . . the remedies being supplied by the Hospital (*Massicotte\**). These two took an important part in the medical affairs of the colony and practised both as surgeons and as medico-legal experts.

*Jean Martinet* was born in 1645 in France and married at Montreal in 1670 a daughter of the Honourable *Louis Prudhomme*, captain of the militia. He is said to have founded a school here in the sense that he instituted a system of apprenticeship, for on January 15th, 1674, he engaged the services of his brother-in-law, *Paul Prudhomme*, for three and a half years, undertaking to keep him during this period and to teach him his art of surgery, and "all that was concerned with or included in this profession"; again on December 16th, 1681, he engaged *François Tardif* for three years on the same terms, on September 20th, 1691, *Raphael Lecourt* for five years, and on November 19th, 1686, *Pierre Malidor*, son of a surgeon of *Tarare* in *Lyonnais*, "to instruct him in the art of surgery for four years".

This same *Malidor* must have gone to *Quebec* before the end of his apprenticeship, for some three and a half years later he was found guilty by the Sovereign Council there of having forged the signature of the Treasurer of the Marine and circulated eleven false notes of four livres each (nominally \$8.80 in all). For

\* Published in full, i.e. (25) pages 146; 149.

this always serious offence he was condemned on March 7th, 1760, "to be flogged on his shoulders, stripped naked, by the Executioner of High Justice, before the doors of the *Palais de Justice* and the Parish Church of Notre Dame and the other customary places, with six lashes at each place, also to restore the amount of the forged notes and pay a fine of 10 livres, and to be banished from the vicinity of Quebec and do forced labour for anyone wanting him at a distance of not less than sixty lieues, for a period of three years, the prisoner to be kept in gaol for that time except when wanted for such labour". This punishment, severe as it was, was slight as compared with that inflicted some fifty years later upon an unfortunate young practitioner also of Montreal, *Jean Lacoste*, who in 1744 had forged a five livres note (nominally \$1.00), and was condemned to death, a sentence that was commuted on appeal to the Sovereign Council to the appalling one of being conducted naked through the town of Ville-Marie, lashed at its four corners, branded on the face, and then despatched by the first ship sailing for France to serve there as a galley-slave for life. So terrible was the retribution meted out to the young offender in those rude days.

Martinet functioned rather extensively in Montreal in a medico-legal capacity and in this connection he appears in a number of criminal actions, the account of which sheds a vivid side-light on the crude social conditions of the time. Thus in February, 1671, he reports on the wounds of the wife and son of one Elie Beaujeu who had been beaten in the woods by André Demers and his children . . . On July 13th, 1684, he lodges a complaint against a woman for assault and battery on the person of François Tardif (his own apprentice). . . . On July 12th, 1688, he performs an autopsy on a young girl attacked and killed by the Indians. . . . On March 12th, 1691, he gives evidence on the wounds of Claude Carique and six months later is called upon to examine the latter's wife who is pretending to be ill as a result of marital ill usage. . . . Finally on April 13th, 1694, he reports on the condition of Etienne Debien who was suffering from wounds inflicted by two Boyers (father and son), and they were accordingly condemned to pay a fine of 30 livres and to supply the said Sieur Debien with "*pension alimentaire*" and medical treatment throughout his illness. By a curious deed<sup>(20)</sup> dated April 17th, 1681, the Récollets acquired from the Sieur Martinet, and from his wife, a small enclosure of about three arpents "with all the trees and plants in the said *clos* except those plants serving for medicines", for the sum of 4,000 *livres* the last payment of which was made in 1696. He lived on Hospital Street, and died in 1701, aged 59 years.

Martinet's colleague, *Antoine Forestier*, was born in France in 1646, and married in 1670 in Montreal, where he was practising as a surgeon, a wife aged 14 years, by whom he had eighteen children. He seems to have had an even greater medico-legal reputation than Martinet whom he survived for some sixteen years. In 1673 he investigated the case of a woman who had been wrongfully accused of having had the "whip and fleur de lys" (the latter being the mark left by a red hot iron so shaped and applied to the skin in punishment for certain offences), by one Roberte Gadbois, who was found guilty of calumny, and condemned to make public retraction at the door of Notre Dame and pay a fine of fifty livres. In 1711 he was instrumental in the passing of a city by-law to the effect that officers of the troops should not be treated free except in hospital. He died in 1717.

Other surgeons who are said to have held service at the Hôtel Dieu de Montreal from its foundation in 1644 to the end of the 17th century were: the Abbé *Gabriel Souart*, first Sulpician curé of Montreal, who had studied medicine in earlier life and received authority from the Sovereign Pontiff, after his arrival in 1657, to care for the sick when necessary; *Gamelin dit Lafontaine*, 1670-1673; *André Rapin de la Musette* who was born in Anjou in 1640 and arrived in Montreal about 1665 and whose name is on the Hospital tablet as being attached to it from 1679 to 1786—he lived at the corner of Notre Dame and St. Peter Streets but later retired to Lachine where he died in 1694; *Nicolas Gastrin* (Catrin in Ahern), from 1689 to 1696; *J. Bte. Leriche dit La Sonde*, son of an

apothecary of Provence and surgeon to the Company of M. des Bergères; *Thaumur de La Source*; and *J. Bte. Maublant, Sieur de Saint Amant*. The imposing marble tablet at the entrance of the Hospital has these and other names inscribed upon it, but many of the data there are manifestly incorrect, as pointed out by M. Massicotte.<sup>(22)</sup> This inaccuracy is explained by the fact that the Archives of this Hospital were largely destroyed in the three successive fires that took place in the early years of its history.

The following were also at Montreal in the last three decades of this century: *Jean Thevenet*, who came in 1660 as a surgeon, but was in 1667 and 1688 employed there as a servant in the employ of the Gentlemen of St. Sulpice; the master surgeon *Jean Bouvet de la Chambre*, who was married at Quebec in 1673, but nine years later came to Montreal and lived there from 1682 to 1693. *Claude Galoppe*, a surgeon of M. de Varennes, captain of the Carignan company, who arrived in 1666, and on March 5th, 1677, verified in court the death of one François Poisson "gélé sur une traisne"; *Guilleman, Sieur de Vollars*, son of a master surgeon of St. Menouil, and himself a surgeon at Chambly in 1668; *Antoine Barrois*, who married at Montreal on January 12th, 1672, the daughter of Jacques LeBer, father of the famous recluse; and *Marien Tailhandier dit La Beaume*, the son of a judge in Auvergne, who practised surgery at Boucherville from 1688 on and in 1699 added to these functions those of a notary, and was finally appointed the seigniorial judge of the locality.

Two other Montreal surgeons at this time had the honour of having taken part in the expeditions of the Cavalier de La Salle to the far West. *Jean Rouxcel des Rousselières*, (who was mentioned above as the partner at Montreal of the surgeon *René Sauvageau de Maisonneuve* under a contract dated 1668 by which they agreed to share for a period of five years all their possessions and instruments as well as "the products of their labour and industry"), accompanied the explorer and a party of twenty men to the Great Lakes in 1669, and was with him again in 1674; and *Jean Michel, Sieur de St. Michel*, a native of Guienne in Normandy, who was at Fort Frontenac in 1677 and 1680, was with La Salle in 1682, and in the spring of that year signed the deed for the possession of the mouths of the Mississippi by the French in the capacity of surgeon.

A leading surgeon at Quebec who succeeded Demosny, both at the Hôtel Dieu and in his duties as church warden at Notre Dame, was Dr. *Timothée Roussel*. He also came from Normandy and possessed of the somewhat litigious disposition commonly ascribed to natives of that region, and was involved in many petty legal proceedings. In spite, however, of his difficult temper, he was devoted to the sick poor, whom he served "with much care and charity throughout a long life". He was also physician to the Ursulines and built and occupied the house of the famous *Chien d'or\**, was married twice and had fifteen children. He died in December, 1700, in an epidemic of influenza that carried off many other old people and among them the surgeons *Nicolas Cadrin* of Ste. Famille and *Gervais Beaudoin, père*.

**Rise of the Early French Hospitals, (1639-1697).**—All five of these historic hospitals were founded in the heroic and adventurous years of the seventeenth century. The Hôtel Dieu of Quebec and that of Montreal had a romantic origin in its third and fourth decades; while the Hôtel Dieu of Three Rivers and the Hôpital Général of Quebec and that of Montreal arose together in its last ten years to meet the growing needs of the population and the furious epidemics that broke out with new contingents brought by the King's ships from France.

The Hôtel Dieu of Quebec was the direct outcome of religious zeal and missionary endeavour kindled by the teachings of St. Vincent de Paul and the *Jesuit Relations*. In 1635, Father Lejeune, with the acumen of his Order, wrote:

\* It is stated on good authority that there is a similar stone in the village of Pezenas near which Roussel was born. It seems probable therefore that he brought a copy of it from France and placed it over his house, which was later bought from his heirs by Phillibert. Note by Dr. Doughty.

"If we had a hospital here, it would do more for the conversion of the savages than all our journeys and sermons." As a result of this appeal, Mme. la Duchesse d'Aiguillon, a Lady of Charity of St. Vincent de Paul, determined to establish a hospital at Quebec and with her uncle, Cardinal Richelieu, gave 22,000 livres for this purpose and obtained also for it, in 1637, grants of land both within and without the town from the Company of 100 Associates. By the advice of St. Vincent de Paul she then proceeded to the Hôtel Dieu at Dieppe, which was controlled by the sisters of St. Augustine, the oldest Order of purely nursing nuns in existence, and asked for volunteers to go to Quebec. Three young nuns of ages between 22 and 29 years, were selected by ballot, and sailed in May 1639 under charge of the Jesuit Father Vincent, on the same ship that carried Mme. de Peltrie and three nuns of the Ursuline Order. Arriving on August 1st after a long and arduous voyage, they were received by the inhabitants with overwhelming joy, and were at first housed in a small dwelling in the upper town lent by the Company, around which tents and wigwams were hastily erected to receive the sick who poured in upon them immediately. All through that first winter of 1639-40 the deadly small pox raged, and it is said that over 180 patients were admitted under their care, in addition to 200 Hurons treated. The following spring construction of their hospital at Sillery was begun and this was occupied by them until 1644, when the Iroquois menace forced them back to Quebec. The yearly influx of troops and settlers brought typhus also in its train and not only overcrowded their quarters, but took tragic toll of the heroic nursing sisters, augmented now by new arrivals from France. In 1662 a more commodious building was erected, again with the help of the Duchesse d'Aiguillon, and the hospital was again rebuilt in 1695. In the years 1702 and 1703 smallpox again filled its wards and outbuildings to overflowing, and in 1710 came yellow fever, laying low 25 of the Sisters, of whom six died. In 1725 its buildings were destroyed by fire, but were rebuilt in 1757. Two years later in 1759, after the surrender, British troops occupied the wards and only a few patients were received. The English continued to occupy the Hospital, for which they paid rent, until 1784, when it was once more given over to the use of the public under the charge of the same devoted Sisterhood. (Fig. 4).

The story of the *Hôtel Dieu* of Montreal, or Ville-Marie as it was then called, and of *Jeanne Mance*, its Foundress, (Fig. 6), is no less one of religious enthusiasm and missionary intent. It is one however with that of the foundation of Montreal by Chomedey de Maisonneuve, and in this connection is dealt with elsewhere in this publication. Suffice it to say here that the first hospital building was opened to patients on October 8th, 1644, and stood on the corner of St. Paul and St. Sulpice Streets on land that is still the property of the Hospital nuns of St. Joseph. This was a building 60 x 24 feet with two wards for the sick, a kitchen and servants' apartments as well as a room for Mlle. Mance, who had sole charge of the sick and entire management of the establishment until her return from a visit to France in 1659, she brought with her three Hospital nuns of St. Joseph de la Flèche, to whom on their arrival she made solemn transfer of her beloved hospital, with Mère de Brésoles as its first superior, a transaction ratified a few weeks later by a formal deed of possession given to the nuns by M. de Maisonneuve, Mlle. Mance continued however to administer the affairs of the hospital until her death in 1673. Nor should it be forgotten in her honour that, on two occasions at least, she helped to save the little colony at Montreal from what appeared inevitable dissolution. This was in 1649, when she went to Paris and secured the reorganization of the tottering Société de Montréal; and in 1651, when she obtained 22,000 livres for M. de Maisonneuve to assist him in the transportation of 100 men brought out by him from France to hold the colony against the Iroquois. Indeed the terrible incursions of these relentless foes in their determined efforts to exterminate the settlement in these early years of its existence, and the indomitable resistance which the little hospital presented along with its male defenders, together with the bitter cold of the Canadian winters in their imperfectly constructed hospital, make the tale of Jeanne Mance and of these



FIG. 4. HOTEL-DIEU OF QUEBEC, IN 1816

The old walls date from 1696.  
By permission of the Sisters of the Hôtel Dieu du Précieux Sang, of Quebec.



FIG. 5. PART OF THE HOPITAL GENERAL DE QUEBEC,

believed to be the oldest building in Canada. The picture is taken from the monastery garden and shows the Community House (3 in the St. Ours Plan—see Frontispiece) erected in 1737, and the corner occupied by the nuns' choir (1 in plan) and the end of the old Récollet Chapel (R in Plan), erected about 1680.  
(From a photograph by Professor Traquair, Department of Architecture, McGill University.)

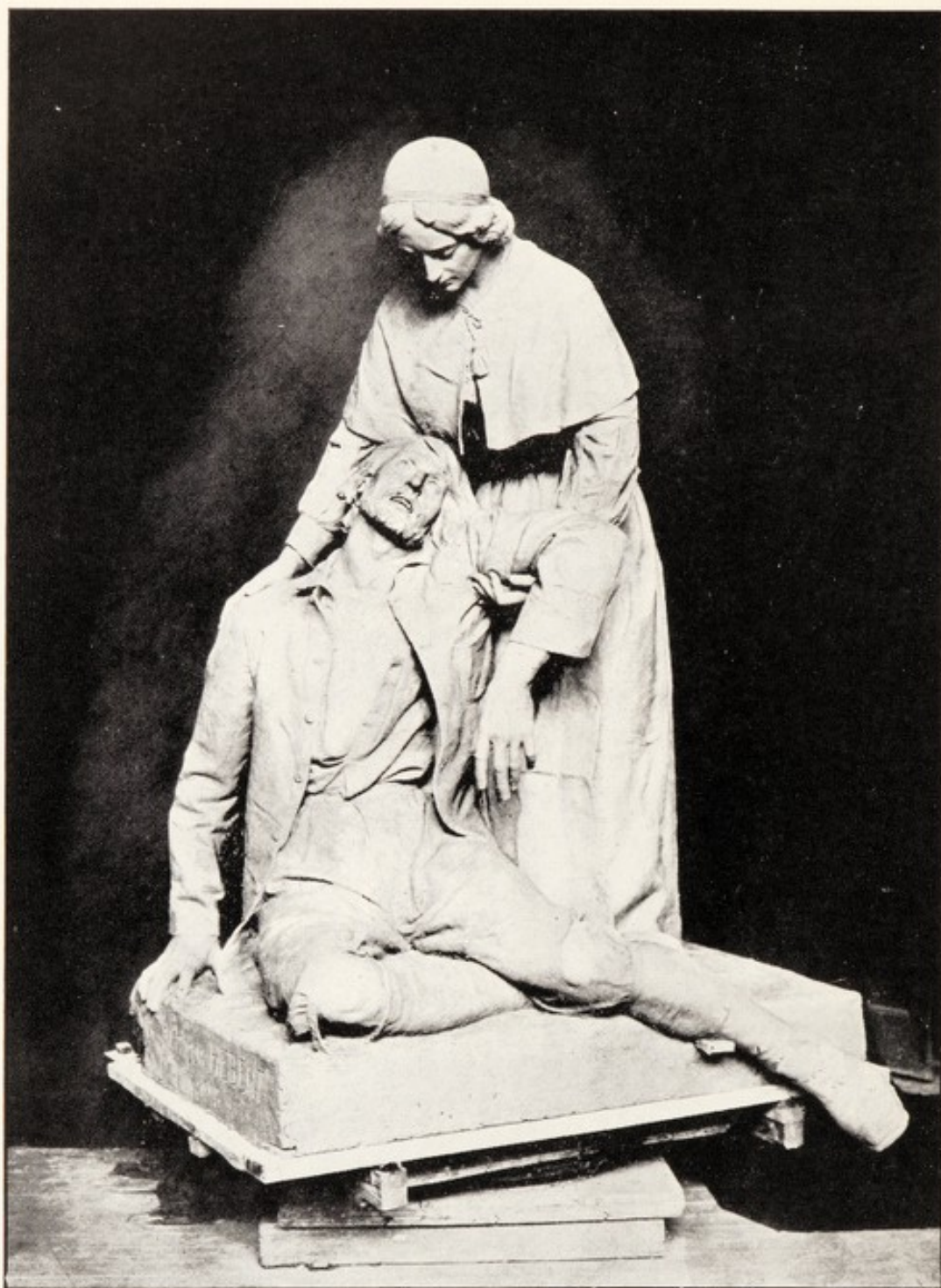


FIG. 6. STATUE OF JEANNE MANCE TENDING A WOUNDED SOLDIER.

By PHILIPPE HEBERT.

Photograph from the clay model in the artist's studio, from which the bronze statue now standing in the courtyard of the present Hotel Dieu of Montreal was cast in the year 1909.

first hospital nuns who took over her work, one of almost unprecedented womanly heroism, and of a dauntless courage and self-devotion in the face of perils and hardships that has not often found its parallel in history. After their day the hospital was burnt down three times, in 1695, 1721 and 1734. It was removed to its present site in 1861. (Fig. 6).

The *Hôpital Général de Québec*<sup>(26)</sup> was founded by Mgr. de St. Vallier in 1692, with four Augustinian nuns from the Hôtel-Dieu de Québec in charge. It had handsome buildings outside the town and did a noble work in the succeeding century in helping to combat the great epidemics. Thus in 1756 it admitted no less than 600 sick men and during the siege in 1759 there were over 1,000 sick or wounded French or English soldiers within its portals. It extended its work to include the care of the Insane in 1717.† (See Fig. 5 and Frontispiece).

The *Hôtel Dieu of Trois Rivières*, also founded by Mgr. de St. Vallier in 1697, was under the care of the Ursuline nuns of the city. It received Letters Patent from the King in 1702. It was burnt down in 1752 and 1806.

The dramatic story of the *Hôpital Général de Montréal* has been told by Mr. Massicotte in the form of excerpts bearing on the subject gleaned from the Archives of the District of Montreal.<sup>(27)</sup> It was founded as a House of Charity for male inmates in 1694, by a layman, François Charon de la Barre, the son of a prominent merchant of Quebec and himself engaged in commerce in Montreal as the representative of his father up to the age of 36. His story is not unlike that of St. Francis of Assisi, for he was a young man of good social position and large personal resources, who, on recovering from a serious illness in the year 1690, convinced of the vanity of the things of this world, devoted himself and all his possessions by a solemn vow to the service of the sick, needy, and infirm. In the four succeeding years, alone or almost alone, he went systematically about his undertaking, buying land and buildings and erecting such as were needed for his purpose, and finally organized a community of young laymen actuated by similar motives to his own. This latter received the sanction of Mgr. de St. Vallier on April 15th, 1694, under the name "*Frères Hospitaliers de St. Joseph*", and on June 1st, of the same year the hospital received its first inmate. For some reason this institution seems to have had its enemies from the beginning, but as long as Frère Charon, as he was popularly called, was alive, his disinterested probity and devotion kept his Foundation intact and its opponents in abeyance. After his death however, in the summer of 1719, it sank into obscurity, to be revived by Mme. d'Youville in 1747, under the name of the Grey Nunnery, with functions extended to include the care of foundlings and the insane.

**Michel Sarrazin and his Time, (1685-1735)\*; Pioneer physicians to the year 1760.**—The last decades of the seventeenth century witnessed the arrival in New France of a man of real genius, whose professional achievements rank him with the first of his contemporaries on this continent, and whose personal researches in the field of biology link these simple *médecins colons* (of whom he was one) with that brilliant progressive movement of inductive science that swept through Europe in these eventful years. Like his fellow practitioners of these pioneer days, Sarrazin took his part in the entire life of the colony, and he quickly became the foremost physician of his time, combatting, with no small measure of success, the dreadful epidemics that ravaged the country during the half century of his activity; while his prolific and accurate observations upon the animals and plants indigenous to Canada form a lasting record that sheds lustre upon what has been rightly called the dawn of Canadian medical science.

*Michel Sarrazin de l'Étang* (to use the title of his Canadian seigneurie) was born on September 5th, 1659, at Nuits-sous-Beaune in Burgundy, the son of Claude Sarrazin, bailiff of the estates of the Abbaye des Cîteaux, and of Madeleine de Bonnefon his wife. These names are met with some two centuries earlier in Upper Burgundy, the country of Buffon and Daubentou. He arrived at Quebec

\* Based on the study by Dr. Arthur Vallée.<sup>(7)</sup>

† For the history and architecture of this building see the valuable article by Prof. Traquair. (26a)



in the summer of 1685, at the age of 26, bearing the title of surgeon, on a ship carrying a marine detachment, and it is probable that his services were immediately called upon in the epidemic that broke out in the accompanying regiment and for other exigencies of the colony; for, in the following year, he was appointed by the *Conseil Supérieur*, Surgeon-major to the troops in Canada. This was ratified by royal mandate from Versailles five years later.

Of Sarrazin's actual professional activities during this early period of his life we know relatively little. His name occurs as surgeon attending several duels, and from his military appointment he was certainly active among the wounded during the siege of Quebec by Sir William Phipps in 1690. In 1693, also, he was appointed physician to the Hôtel-Dieu de Québec by the Sisters, who held him in high esteem, and he undoubtedly practised his art, not only among the troops but throughout the colony, where under arduous conditions of travel he is said to have given gratuitous surgical aid within a radius of sixty leagues. On one of his visits to Montreal in the year 1692, he fell seriously ill and made a notarial will dated at the Hôtel Dieu there, in which he bequeathed his surgical books to three local surgeons, the Sieurs St. Amand, La Source and La Sonde, who had evidently attended him. This bequest was revoked later in a second will made at his home at Quebec.

Two facts only are significant, at this period, of the profound interest in natural history and the scientific trend, which became so prominent a feature of Sarrazin's later life. These were, his intimate friendship with Franquelin, the hydrographer of the French Court, and the dissatisfaction which he felt at the inadequacy of his training as a barber-surgeon, which led him, after eight years practice in this country, to resign his military office and professional connections here and to return to France for the purpose of obtaining further medical training and a university degree. The surgeon *Pierre Baudeau*, "a man consummate in his profession, beloved and esteemed by everyone and who had served for a long time in the armies both by land and sea", was appointed by Frontenac in charge of the troops in his place, and replaced him also at the Hôtel-Dieu du Précieux Sang; in 1694 Sarrazin sailed for Europe, to return three years later with the desired academic qualification, the M.D. of the University of Rheims, from which some thirty years later his son also graduated. His preparatory studies were carried out at the Ecole de Médecine of Paris, where he attended lectures at the Amphithéâtre Riolan and received clinical instruction at the Hôtel-Dieu of that city. To understand the tremendous intellectual impetus which a University training in Paris at that time must have brought to this mature student, whose mind had been sharpened by hard-won experience, one must recall the immense changes that were taking place in medical thought at that time. The cognate sciences of physiology and pathology had been founded through the labours of Harvey and others, while the English clinician Sydenham, who died in 1689, had, by his power of observation and method of delineation of disease entities, brought these new found principles to a focus in the great science of clinical medicine. The Ecole de Médecine itself was full of eager disputation of the new ideas that were trembling in the air; and two great scientific Institutions allied to medicine and ministering to its advancement, both of which became to Sarrazin an avenue and source of inspiration for his future activities, were being actively fostered under the paternal government of Louis XIV. These were: the *Jardin Royal des Plantes*, at which de Tournefort, Professor of Botany there under the Faculty of Paris and known as the great precursor of Linnaeus, had created a museum of living plants collected by travellers in all parts of the world; and the *Académie Royale des Sciences*, founded by Colbert in 1666 and reorganized in 1699, in which were associated the best minds of the period, represented in their respective fields by such names as Tournefort, Réaumur, Roemer, Malebranche, Boerhaave, Peter the Great. These and such as these were opening the way for the new thought and advances of today, and they went about their work of preparation for the centuries to come with a precision of which we are far too often ignorant. Above all, they sought to widen the field of knowledge by the utilization of all

the sources of information accessible to them, both by sending forth their members to distant parts, and by entering into correspondence with carefully selected persons in foreign places, realizing that science has no country and that relations between research workers must be world wide in scope. Sarrazin was made such a corresponding member, selected by de Tournafort on March 4, 1699, at the same meeting at which Sir Isaac Newton was elected an "*associé étranger*."

Dr. Sarrazin's return to the colony after his three years' absence in Europe was probably hastened by urgent appeals from the people and from the Intendant for the return of this man who "having acquired consummate knowledge of surgery during six or seven years in this country has gone to France to complete his perfecting in the study of medicine" (extract from a letter to the ministry dated November 6, 1695, soliciting his recall at a salary of 600 livres). Even before his landing he was plunged into the vortex of professional responsibility and activity, for a serious epidemic of "haemorrhagic purpura" (i.e., typhus fever), so common under the cold and dampness and the complete lack of sanitation and inadequate food supply that prevailed on shipboard in those days, broke out on the vessel on which he sailed, and spread from it to the inhabitants of Quebec and to the Religieuses of the Hôtel Dieu, which was deluged with patients. Sarrazin threw himself into the necessities of the situation with complete devotion and with apparently extraordinary success, for practically all those affected on board were said to have recovered from a malady which, twelve years before, had carried off more than eight hundred victims. In the face of his already high reputation, the inevitable result was that he was besieged on all sides by individual patients and by requests for consultations from practitioners and curés, and in the year 1700 he was appointed by royal mandate, and on a salaried basis, *Médecin du roi* and Physician to all the Hospitals of New France, with a vast clientèle that stretched from Quebec and Three Rivers to Montreal, and *ex officio* chief medical attendant upon the Governor of the Colony, Monseigneur de Laval, and all other notables.

In the same year 1700 another epidemic, this time "la grippe", broke out, and was followed during the winter of 1702 by the terrible scourge of smallpox, which, starting from a house in which a passing Indian had died of the disease, spread like wildfire through the city, with such a multitude of fatalities that individual burial could not be carried out and fourteen to eighteen bodies were committed daily in a single grave, to the number of some two thousand. The same dread disease visited the city in 1703, and the "*Mal de Siam*" (yellow fever), which had appeared sporadically from time to time, assumed the proportions of an epidemic in 1709. Moreover, tuberculosis was apparently indigenous, as were those maladies dependent on the severe climatic conditions, rheumatism and lung diseases, and scurvy still attended the poverty of diet that often prevailed.

In the domain of general medicine and surgery Sarrazin was no less successful than in these more specific fields. The annals of the Hôtel Dieu of Quebec contain many records of wounds dressed and operations performed by him in this later period of his life. He cured M. de Callières, at least temporarily, of a dropsy, and his successful treatment of pleurisy by alternate diaphoresis and bleeding, is an excellent illustration of his therapeutic method. He used Glauber's salts in huge doses, and was officially employed by the ministry to investigate, with the apothecary of the Jesuits' College, the chemical composition of this salt. His botanical work again helped him greatly to enlarge his practical knowledge of local remedies, and he never fails to note in his description of every plant which he gathered and studied, its pharmaceutical properties and the native uses to which it was put. His remarkable catalogue of two hundred living Canadian plants, presented by him to the *Jardin des Plantes* in 1704, abounds in such annotations. Some are noted to have diuretic, emetic, or purgative properties, and of use in epilepsy or convulsions, for the cure of anasarca, etc., and others were employed to neutralize snake bite. Throughout however, he retains his

critical judgment, rejecting certain substances, after due experimentation, as of unproved efficacy.

Of his actual scientific contributions a few words must be said. In botany there stands first of all his great contribution to the *Jardin Royal* of living flora, which remained alive there ten years after their donation. It is said that he himself transplanted and watched over each of these plants as he studied them, and forwarded written instructions as to their care and directions to collect the seed and return it to him. Of his original descriptions of plants not previously known, the most important treats of the "Pitcher Plant", which was called by Tournefort after him the *Sarracena purpurea*. His description of it is given with the same luxury of detail that characterized his contributions on animal anatomy. A later botanical contribution of his that touches on a subject of national importance is that published in 1730 in the *Mémoires de l'Académie* on the "Sugar Maple." He describes four varieties in the country, notably "*Acer canadense sacchariferum fructu minori*". Competent authorities give him the credit, if not for the discovery, at least for the industrialization, of maple sugar, and a specimen of the tree was included in his large donation of plants to the *Jardin* in 1704. The "Blueberry" is another common Canadian fruit which Sarrazin made known in France.

An outcome of his insight into plant life, significant of his truly extraordinary sagacity and foresight in the application of natural laws to the civic welfare is revealed in the following circumstances. As a member of the *Conseil Supérieur* he had been asked to look into the question of harvesting and sowing grain, and Kalm<sup>(23)</sup> writes in his contemporary narrative: "Dr. Sarrazin had procured in Sweden a small quantity of winter wheat and barley. This was sown (by him) in autumn, passed the winter without damage, and produced fine wheat the following summer, with grains a little smaller than the wheat of Canada, but this winter grain gave a larger amount of fine flour than the summer wheat. *I have never been able to understand*" (wrote Kalm) "*why this experiment was not continued.*" In view of the modern transformation in the harvest acreage of Canada through the introduction of wheat adapted to a short summer, this practical application at that date of Sarrazin's scientific intelligence is truly astounding.

Sarrazin's first personal observations on the beaver appeared in the *Transactions of the Académie Royale* for 1704 (through de Tournefort) and reports a minute dissection of an animal weighing fifty pounds. From the functional standpoint his greatest interest centres upon the formation and minute structure of the generative organs; and here he made the curious discovery of a single cloaca, making the distinction of the sexes in the beaver difficult. His most masterly exposition, however, is given of the digestive tract and its linings, and he describes also the false ribs possessed by this animal. His masterpiece in zoology was presented in 1725 through Réaumur, and is entitled "An extract of Various Memoirs of Monsieur Sarrazin on the Muskrat." The description of the stomach and the changes that take place in it during digestion and on summer and winter diet is a classic, and in view of his limitation to a "loupe", or some elementary form of microscope, is a real *tour de force*. He described also the *carcajou*, the *vache marine*, *loup-marin*, and in great detail the porcupine, describing in the latter animal seven different kinds of skin and discussing at great length the question as to whether it throws its spines when attacked. He even attempted to dissect a skunk, but gave it up, "because it had a dreadful smell, capable of making a whole canton desert."

Sarrazin did not marry until his fiftieth year, but he made a fortunate union then with the young Marie-Anne Hazeur, a lady of good fortune and position. Through her he came into possession of extensive properties in Gaspé, the *fief de la Grande Vallée des Monts Notre Dame*, and the adjoining concession of *l'Anse de l'Etang* (from which he took the title by which he is known), and a part of the Seigniorship of Malbaie. The possession of these combined seigneurships in his own right and that of his wife created him a Grand Seigneur, as is shown by an act of "*foye et hommage*" dated at Quebec July 10, 1726. He himself, though appar-

ently of little or no means on his arrival in the country, had become at this time a large proprietor. The remuneration of a "*Médecin du roi*" was not high, but owing to repeated representations on his behalf by the Governors of the colony and other friends high in office at Quebec, his salary, which began in 1699 at 300 livres, was raised in 1702 to 600, in 1703 to 800, in 1717 to 1,600 livres, and later when his petition for an annuity of 400 livres for his son to study medicine in France was granted, it rose to the very considerable sum of 2,000 livres per annum. Desirous of obtaining for his growing family a worthy patrimony, he invested in what should have become extremely valuable land, namely, the fief of St. Jean, an area of six acres, running from the river St. Charles to the Grande Allée, as well as the fiefs St. François and Ste. Genevieve (with manor attached and many buildings) for the sum total of 7,400 francs by deed of sale dated October 22, 1709; and he also had a house on the rue St. Louis and another on the rue Parloir.

But misfortune overtook him in his last years. His house in the rue St. Louis was burnt, depriving him of a rental of 600 livres a year; there was a fall in the paper money of the time, and worst of all, the failure of slate quarries discovered on his Gaspé property, in the operation of which he had become heavily involved, reduced him and his family to actual poverty. He died of a malignant contagious fever brought from a ship and caught by him from patients in the Hôtel Dieu of Quebec on the 6th of September, 1734, in his seventy-fifth year. He was survived by his widow and five children, but his name died in the female succession of the next generation. His best epitaph has been inscribed by the *Religieuses* of the Hôtel Dieu of Quebec in their register at the time. It reads: "For more than forty-five years he exercised his art in this country with rare charity, perfect disinterestedness, extraordinary success, surprising address, and an unparalleled devotion for every class of patient, which rendered him able to perform with joy and grace all that lay in his power for the relief of the sick under his care."

Among the fellow-practitioners of Dr. Sarrazin in the first part of the eighteenth century may be mentioned as of special interest: *Dr. Michel Berthier*, surgeon-major and *médecin du roi* at Quebec, who assisted Sarrazin on the staff of the Hôtel Dieu there and with him attended Mgr. de St. Vallier in his last illness, and who died in 1740 of a malignant fever contracted from patients in his care at the hospital, landed from the plague-stricken ship *Rubis*; *Jean Demosny, fils*, on the staff of the Hôtel-Dieu du Précieux Sang in 1710; *Gaspard Emery*, physician to the Hôpital Général de Québec from 1708 to 1717; *René Gaschet*, who had been educated as a notary and was also the surgeon-apprentice of Dr. Timothée Roussel but had not completed his training in this relation and was in 1696 declared by the Superior Council on the complaint of Gervais Beaudoin, *père*, not qualified to practise and was therefore required to pass an examination to see if he could exercise the practice of surgery, an ordeal which he apparently met successfully, for he was active later both at Quebec and Montreal and was appointed towards the end of his career "knowing of his capacity and integrity", a Seigniorial Judge; *Nicolas Herbecq*, a native of Flanders, and a conscientious practitioner of surgery at Batiscan in 1709; the celebrated *Dr. Jourdain Lajus*, who was in Quebec from 1697 until his death in 1742, was physician to the Hôpital Général and attended the fifth Bishop of Quebec, M. de la Lanaudière, in his fatal illness caught on the infected ship *Rubis*, and whose name is associated with a determined effort for the safe-guarding of the Profession against newcomers in the year 1712; *Pierre Duverger*, who was at Quebec from 1712 to 1718, and was forbidden by the Superior Council "to assume the position of a surgeon or to exercise the art of surgery . . . unless he had first, as a preliminary, been examined, at the request of the Sr. Lajus, Lieutenant of the Surgeons of this town, by Maître Sarrazin, the physician of the hospitals of this country, and obtained from him a certificate of this capacity; the *Sieur Alavoine*, for many years (1722-59), the only surgeon at Three Rivers; and the esteemed *Dr. Joseph Benoit*, surgeon-major and *médecin du roi* at Montreal and on the staff of the Hôtel Dieu there from 1715 to 1729 or longer, since de Beauharnois wrote

to the minister of the colonies in the latter year, "Dr. Benoit, who is the only physician at the Hospital of Montreal, in view of the considerable work to be done there, asks for an assistant and suggests his son at a salary of 200 livres." This request was refused, possibly because this son *Claude Benoist* who had been born in the country, had been educated only by local means. Finally there was the interesting character *Timothée Sylvain*, an Irishman from Cork whose wife (whom he is said to have maltreated), was the mother of *Mère d'Youville*, foundress of the Grey Nuns of Montreal. He too was obliged by Governor Beauharnois to pass an examination on his medical knowledge before the *Sieur Sarrazin*, and was thereafter given a medical certificate dated March 7th, 1724, on the order of the said *Sieur*, authorizing him to practise in Montreal, where he was physician to the *Hôtel Dieu* from 1725 to 1730, and became a *médecin du roi*, in 1741. Both this license to practise and also *Sylvain's* certificate of naturalization are reproduced in Volume I of Heagerty's *History of Medicine in Canada*.<sup>(5)</sup>

Many unqualified or incompletely qualified practitioners carried on their activities at this time without any such interference. Thus the *Soupirans* practised at Quebec through three generations in this century, without any other knowledge than that which had been handed down from father to son. In a class by themselves in this respect were the infirmarians or apothecaries of the Jesuits to whom was entrusted the distribution of the large store of medicaments housed by this Order, and who openly practised medicine and sometimes surgery, in some instances with great skill and unqualified success; this was the case with the elder of two apothecaries—*les Frères Boispineaus*, who was known as *Jean l'Ancien*, and whose ability was so great that he was sometimes consulted in difficult cases, both by *Sarrazin* himself, and by *Berthier*; he arrived at Quebec in 1713, was received into the Order in 1721, and died in 1744. In 1734 he met the ill-fated ship *Rubis* four days below Quebec in a small boat, and took off the Jesuit Father *Alneau*, already sick with the contagious disease raging on board, whom he brought in safety to the Hospital; later the Father wrote of him, "Brother Boispineau who, according to report, has saved so many lives, cared for me successfully and cured me." A similar reputation was earned by *Father Firault*, who served a long time with the Indians of Lorette. Indeed, in the eighteenth century, not only did these priestly apothecaries do valuable medical work, but in the outlying parishes the simple village curé frequently knew more than the self-taught and otherwise untrained country practitioner. This was the testimony some fifty years after *Sarrazin's* death of Dr. James Bowman who, in his investigation of the "sickness of Baie St. Paul", wrote: "In few parts of this Province can one find persons practising medicine or surgery who are more educated than the priests, and when the contrary exists, the latter could easily become more learned than their physicians." So general was the lack of medical knowledge in the so-called physicians scattered throughout the country-side in that era.

A small group of practitioners holding a limited qualification permitting them to exercise their art to the relief of lying-in women, were the *Midwives* who according to the practice of the time were sent out on a salaried basis. So came *Madame Bouchette* in 1722, a midwife trained in France, on an annual payment from the King of 400 livres, as also *Mlle Bèry*, who was at *Ste. Foye* in 1730, and of whom the President of the Bureau of Marine wrote in 1740: "The midwife *Mlle Bèry*, not being able to work any longer on account of her age will be replaced by another"; and, on May 19th, 1750, "The wages of the midwife will be increased from 400 to 600 livres." There is a curious deed in the Montreal Archives, published by Mr. *Massicotte*,<sup>(25)</sup> which reveals that the women of *Ville-Marie*, in solemn conclave assembled, on February 12th, 1713, elected a midwife *Catherine Guertin* for the community. As this author cogently remarked, this is the first instance of "votes for women" having been employed in this Province.

In addition to all the above who were exercising their medical activities more or less in good faith, were the actual charlatans of the day, whose name was

legion, and who preyed upon the credulity and necessities of the colonial population to an inordinate extent.<sup>(26)</sup> Among the most famous of these was one *Phlem*, who came out as a healer in the first part of the eighteenth century and acquired a miraculous reputation throughout the colony, and *François Paris, dit la Magdaleine*. Serious measures were taken by the surgeons of the colony at this time to protect their interests against newcomers as well as irregular practitioners, as revealed in a petition presented on their behalf by Dr. Jourdain Lajus, Lieutenant of the Surgeons of Quebec, on April 25th, 1712, praying the Sovereign Council to ordain that in future only four master-surgeons should be permitted to exercise the practice of surgery in Quebec, and that it should be "forbidden to all surgeons arriving on ships from Europe, or coming from elsewhere, to treat or prescribe for any person or to sell or distribute any remedies on penalty of a fine of 200 livres and confiscation of all their instruments and medicines."

**Pioneer physicians from 1735 to 1760. (Successors of Michel Sarrazin in the French Régime).**—The encouragement given in this era by the *Académie Royale des Sciences* to the study of the natural sciences in newly discovered countries, which had reaped such a rich harvest in the life-work of Dr. Michel Sarrazin, won recruits also in the next generation of Canadian practitioners. The surgeon *Hubert-Joseph de la Croix* (1703-1760), who lived at Montmagny and later at Quebec, had a reputation as a botanist and collected plants for the *Jardin du Roi* which were forwarded to France by the Intendant Hocquart along with similar material from other sources. Writing of such a convoy in 1730, the latter said: "The greater part of the plants have been collected by the Sieur Lacroix, surgeon of Quebec, to whom I have paid 17 francs to reimburse him for expenses incurred."

Of great renown in this and also in other fields was the brilliant *Jean François Gaultier*, a physician of Normandy, who was created *médecin du roi* for Quebec in 1741, while still in France, and who shares with Sarrazin a place of honour among the foremost of his medical contemporaries on this continent. He came out in 1742, and appears to have added to his medical activities some legal training by following assiduously certain law lectures being given at the time in Quebec, so that he was later made on this ground an Assessor of the Superior Council on whose Board he sat. Like Sarrazin he was a Corresponding member of the *Académie Royale des Sciences*, selected by M. Du Hamel on April 12, 1745, and like him he sent large contributions to the *Jardin du Roi* of objects of natural history, collections of various kinds of grain, etc., and his name was likewise given by the *Académie* to several botanical discoveries, notably the *Gaultheria procumbens* (winter-green). At the request of M. Du Hamel also, he kept a daily record of heat and cold, the variation of seasons, character of the harvests, directions of winds and other physical matters, as well as notes on the minerals, plants, insects, and animals, which he observed, and of everything else which he thought might be of interest to the *Académie*. An abstract of these "*Botanico-Meteorological Observations*" was read by M. Du Hamel before this Body and they are published in its *Transactions* for 1745, 1746, and 1747, and in 1753 an essay of his on the *sucre d'érable* was selected for publication from a number of others and appeared in the *Mem. Math. et Phys.* Tome II, p. 378. The Swedish traveller Kalm<sup>(23)</sup> gives an interesting account of his impressions of Gaultier's work on his arrival in New France on July 2, 1749. He wrote, "There exists here, in Canada, a great zeal for the advancement of Natural History, indeed I do not know of any other country where such good regulations with a view to the generalizing of observations exist, and all this is very largely due to the initiative and care of one man. The Governor of the Fort handed me a long memorandum sent him by the Marquis de Galissonnière, the Governor General, consisting of a list of all the trees and plants of North America considered worth collecting and cultivating. In this document one is asked to gather carefully also the seed and roots of every one of the plants so collected, and instructions are given as to how these may be preserved in order that valuable specimens may reach Paris in safety". A

similar request is made for minerals of interest, and a list given of stones found in various localities, and similarly in the case of animals. *This remarkable memorandum and the list it contains were prepared*, Kalm continued, by *Dr. Gaultier, médecin du roi at Quebec*, at the request of the Governor General, by whom also, it was annotated and corrected. It ended with a command from the latter to all Officers located in various parts to forward to headquarters the names of those common soldiers who showed most diligence in discovering and collecting plants and other curiosities of nature, in order that these might be given promotion. So keen was the enthusiasm for an exact knowledge of the special physical and biological features of this country, that animated the leaders of the old French régime!

Gaultier was appointed by the Governor to show Kalm the town of Quebec, and the latter describes him as "a man of great learning in physics and botany, and the physician of the Hôtel Dieu." He also went botanizing with Kalm outside the walls, and accompanied him on his subsequent journey as far as Baie St. Paul. Like all physicians of the time who had the respect of their community, Dr. Gaultier was much called upon to give evidence in criminal proceedings. He is described as a modest scientist who divided his time scrupulously between his various charges and was much beloved by his compatriots. He died in July 1756 at the age of 48, apparently a victim of the epidemic that had broken out on the ship *Léopard* (which brought out Montcalm), from which both hospitals at Quebec were crowded with the 300 sick landed, and to which several of the hospital nuns also succumbed.

Another surgeon who was active in these years just before the Conquest and who deserves mention is the Austrian *de Feltz*. Originally a barber-surgeon, he was appointed, shortly after his arrival in Canada in 1738, surgeon-major to the troops, first at Quebec, and some years later at Montreal on his arrival there in 1742. He appears to have done some delicate surgical operations in the latter place soon after he came and was highly thought of also as a physician. In 1741 he was appointed to the Hôtel Dieu of Quebec, replacing the deceased Dr. Michel Berthier, and then, in 1742 was placed in charge at the Hôtel Dieu of Montreal, succeeding Dr. Joseph Benoit, on the recommendation of the President of the Bureau of Marine, who wrote to Hocquart: "As there is need of a surgeon-major at Montreal and as you have recommended the *Sieur Benoist, Junior*, for this post, and he is still young, I prefer to appoint the *Sieur Fels* to it." M. de Beauharnois also wrote: "It is he whom the *hospitalières* of Montreal have chosen to take care of the sick patients at their hospital. They are pleased to have him in the place of the *Sieur Benoit*, deceased. His profession supplies him with enough to live on honestly, if the King wishes to engage some other surgeons to assist him, and in this way we believe great operations could be performed under a skilful surgeon; meantime, in order to give him greater facilities and freedom for study and work, M. de Beauharnois has released him from the service of the Troops, subject to your approval." De Feltz remained on the Staff of the Hôtel Dieu de Montreal until 1760, and was in residence here on Notre Dame Street, between St. Laurent and St. Gabriel Streets. He had the reputation of being very clever and assiduous in the care of the sick, but of having a comic and rather foolish manner which led to unpleasant comment and alienated a powerful friend of the hospital. He was naturalized in 1758 and died before 1776, for in this year his widow applied for half the pension he had drawn when alive.

The names of *André Arnoux* and *Philippe Badelart* carry us to the siege of Quebec and through it to the close of this highly romantic and interesting period of French rule in Canada. André Arnoux, a really great man, was surgeon-major of the vessels of the King at Rochefort in 1749, and on coming out to Canada in that year he was promoted in 1750 to the surgeon-majorship of all the troops in Canada and Director of all the French military hospitals here, and these offices he retained until his death in 1760. An upright and honorable man, skilled in his profession and respected by all, he was the intimate friend and companion of Montcalm from the time of the latter's arrival in 1756. It was

through his instrumentality that the house still carrying the name of Montcalm on the ramparts of Quebec was bought, and it was in Dr. Arnoux' own house on the rue St. Louis that the General of the French forces breathed his last on September 14th, 1759, in the presence of *Joseph Arnoux*, younger brother of the surgeon who was himself absent at the moment on professional duty with Bourlamarque at Isle aux Noix.

*Philippe Badelart* was born in Picardy and was received as physician and surgeon in France before coming to Canada in 1657, and served here as aide-major of the armies of the King until after the battle of the Plains of Abraham, when he accepted service under the British Government.

Another important person during the siege was *Antoine Briault*, who was married at Three Rivers in 1743. He was surgeon-major of the Marine, and of the Hôpital Général of Quebec during the years 1759-60, and is referred to frequently in the official correspondence.

**Medical Legislation under the French Régime.**—Already, as we have seen above, in the time of Jean Madry and his successor Jean Demosny, the French Government had laid down as the guiding principle of medical legislation in New France, that persons arriving in the country as medical practitioners must satisfy the Lieutenant of the First Surgeon of the King that they were possessed of adequate qualifications in medicine or surgery, or failing this, they must pass an examination before the King's Physician. On this basis, René Gaschet was required to present himself for examination before the Sieur Sarrazin as also was Pacifique Duplessis, and the alien Timothée Sylvain, whose certificate bearing Sarrazin's signature has come down to us. A rather curious order given in 1710 by Radout, the then Intendant, in response to an appeal from the resident surgeons for protection against newcomers, which was made law by royal proclamation on July 10th of that year, forbade "all foreign surgeons of any nation whatever, other than those already established in this country, to dress or treat the sick on any pretext whatever, on pain of a fine of 50 livres, to be handed over to the Sisters of the Congregation, and confiscation of their instruments and remedies to be given to the surgeons of the time; this for the first offense and heavier penalties for a recurrence." This restriction seems never to have been carried into effect, since the petition of Jourdain Lajus in 1712 (p. 29) repeats its terms and refers back to it with the request that these be carried into effect. The additional request made by him that the number of surgeons-major in the country be limited to four, is probably to be explained by the fact that Letters Patent were granted freely at this time in return for services rendered, a condition that may have given rise to added difficulties in the Profession here. This Lajus, a native of Béarn in France, had married in 1697 a daughter of Guillaume Roger, a Notary Royal and Bailiff of the Council, and it was possibly in virtue of this relationship that he was given by Letters Patent dated March 2, 1709 the Lieutenancy of the Surgeons of Quebec from "Georges Marèschal, First Surgeon and Chief of the Barbers and Surgeons of France." He was thus in his appointment the lineal descendant of Jean Madry, and the legitimate channel through whom such appeals should come. His petition together with the evidence of his Lieutenancy and a copy of Radout's earlier enactment were referred on April 25, 1712 to the *Procureur-Général* who decided that no change should be made in the existing regulations "*Jusqu'a qu'il ayt pleu à Sa Majesté de faire Scavoir Ses intentions a ce sujet.*" It is probable that the matter rested there, for we hear nothing further of any attempt to prevent qualified surgeons or those willing to present themselves for examination from practicing in the country.

In the year 1750, however, a Bill was passed by the Intendant Bigot which clearly formulates the position of the French Government in this matter, and constitutes, to quote Dr. Birkett's words,<sup>(6)</sup> the code for the control of medical practice under the French Régime. This Bill forbade any surgeon coming from France or any other country "other than those (practitioners) already established here" . . . "to doctor under any pretext whatever, the sick of this country



without having first passed an examination before the King's Doctor at Quebec, Montreal or Three Rivers, in the presence of the Lieutenant-General of the District or his delegate, and a record of this to be kept, which will indicate the ability of those who present themselves so that they may practise in safety." This "under penalty of a fine of 200 *livres* to be applied to the Government Hospitals where the breach shall have been committed, and the confiscation of the drugs and instruments seized and their distribution to the surgeons of the said Government." This legislation was further stated in the Proclamation to have been enacted on the ground of "Information received that many individuals coming from Europe and elsewhere have engaged in surgery without any permission; that these strangers treat the sick with little care and without giving them relief; distribute worthless remedies" . . . "leading to abuses prejudicial to the well-being of the subjects of the King." It was further ordered that "the Lieutenant-Generals of the three cities of the colony, the doctor and the surgeons of the King, and the representatives of the Intendant be notified to uphold these regulations each in their jurisdiction and that they should be posted everywhere, in all coasts, towns and settlements, in order that no person might ignore them."

This important enactment remained in force after the Conquest but unfortunately fell more or less into disuse, and grave irregularities again prevailed, which led to the passing of the Licensing Act of 1788.

#### **French Practitioners during the Early Years of British Rule (1760-1800).--**

The first half century after the signing of the Treaty of Paris in 1763 was an intensely dramatic transition period, during which a French colony of some 60,000 persons, newly freed from the domination of the most autocratic government in Europe, became merged with an English-speaking minority of some 300 souls to form the elements of a future nation pregnant with the instinct for self-government and imbued with a spirit of loyalty to the British flag, that carried it safely through the invasion of 1775 and the war of 1812 to the achievement in later years of a high degree of political autonomy. By a curious turn of the wheel the Revolution, which in 1776 cost England her Thirteen Colonies, had as its corollary the migration to the coasts and forests of this country of no less than 35,000 persons, who populated the banks of the St. Lawrence and the lower Ottawa as well as Ontario and the Maritime Provinces with a sturdy British stock of invincible loyalty, culled from among the best elements of the seceding United States. More important, however, than even this Loyalist influx for the stabilization of British rule in the Province of Quebec, was the fair-minded and far-seeing policy of the Home Government, which in these critical early years secured to its new French subjects here all their old religious privileges and rights of property under the free administration of British institutions and the complete absence of the oppressive trade monopolies of the French Régime. This it was that brought both seigneurs and clergy whole-heartedly to the support of the British Government at a time when petty local maladministration on the one hand, and the undermining influence of the French-European allies of the invading Americans on the other, combined to jeopardize the weak internal defences of the country; and this too was the feeling that found expression in the fine patriotism of such clergy as Bishop Plessis and in the decisive victory won by French-Canadian valour on the heroic field of Chateaugay. The vicissitudes of these fifty years, and especially the war of 1812, in which Frenchmen, Englishmen, Scotchmen, Irishmen and Americans in residence here united to support the British connection, did much to solidify the various racial elements of British North America in this formative stage, and to raise the national character above the purely material struggles of the pioneer colonial life to the higher plane of personal sacrifice and patriotic endeavour.<sup>(28)</sup>

In the domain of Medicine the complex conditions of the difficult years immediately after the conquest were abundantly reflected. The "code" regulating medical practice enacted by the French Government in 1750 naturally fell into

disuse, and no legislation took its place until the rapid increase of charlatany (always flourishing in the colony) and the growing number of unlicensed and ignorant self-trained practitioners in the outlying country districts became so glaringly apparent that the Government was induced, in 1788, to pass a Medical Act providing that no one should practise physic, surgery or midwifery in the Province without a licence from a Board appointed by the Governor in Chief, to be granted on the presentation of suitable degrees or diplomas, or after satisfactory examination.

The confusion that prevailed before the passing of this Act was to some extent mitigated by the presence throughout the country of a number of qualified practitioners, some of whom had come from France earlier in the century, while others were of British or continental extraction and attached to the troops of the conquering nation. By the Treaty of Paris in 1763, permission had been given to all Frenchmen to return to France with their effects if they so desired within eighteen months of its ratification. Very few seem to have done so; and those who were eligible were immediately given appointments under the British government and usually applied themselves with a will to the exigencies of the situation, enrolling in the Canadian Militia in 1775 and otherwise supporting the harassed Government in its difficulties. Conspicuous among these was the surgeon-major *Philippe Louis Badelart*, already mentioned. Born in 1730 and received as physician and surgeon in France, he came to Canada in the service of the French troops in 1757 and, after the Conquest he settled at Quebec where he won reputation as a well trained operator. He enrolled in the Canadian Militia in 1775 and the following year was commissioned Surgeon to the Quebec Garrison, and was sent by the Governor to Baie St. Paul with orders to investigate the sickness there, replacing *Dr. Menzies*, who was recalled on military duty to Quebec. Sir Frederick Haldimand retained Badelart on this investigation until 1782, the results of which were published in the *Quebec Gazette* for July 28, 1784, under the title "*Observations sur la maladie de la Baye, par Mons. Badlar, Chirurgien du Roi, données au public par ordre de Son Excellence le Gouverneur.*"\* In this report he hints that the disease was merely a form of syphilis and describes the specific action in it of the various forms of mercury used. In the following year, 1785, a small pamphlet giving detailed Instructions for the treatment of the malady and the dosage of the mercurial remedies prescribed, written by Badelart, was issued by the Government and circulated in all the parishes for popular use. It is apparently the first Canadian medical publication (Fig. 8).

Badelart founded a distinguished French Canadian family through his daughter Louise, who became the wife of Antoine Panet, first President of the Legislative Assembly of Lower Canada, and was the grandmother of Cardinal Taschereau. Of a somewhat difficult temper in early life, he seems later to have won universal respect and affection, for at his death on February 7th, 1802, he was followed to the gate St. Jean of the city and thence to his family burial place at Ancienne Lorette "in spite of the intense cold" by a great concourse of clergy and citizens of all classes, an obituary in the *Quebec Gazette* of February 11th describes him as "of a nature faithful, zealous, charitable, gay and frank . . . the declared enemy of hypocrisy." He bequeathed 1,200 livres to the Hôpital Général for the purpose of wintering, lodging, and feeding two poor people (*fondation Badelart*). His descendant Judge Larue of Quebec, who still lives on the family property at Lorette, possesses his portrait painted in oils by his friend the Canadian artist, Legaré. (See Fig. 7).

Another well qualified Frenchman of this transition period was *Jacques Dénéchaud*, who was born in 1728 at St. Savin in the diocese of Bordeaux and had studied medicine under a local physician there named Cavelier. He came out to Quebec in 1752, bearing an interesting document which testified that he had been examined on March 29th, 1741, before the Commissioners of the Lord High

\* Published in full by Ahern,<sup>(1)</sup> op. cit., page 28-31.

Admiral of France, who state that "the said dénéchaud" had sufficient knowledge, experience and capacity to embark as a surgeon on merchant-ships for long voyages, which certificate had been duly registered at the Royal seat of the French Admiralty at Brouages for a payment of 18 livres, 17 sols. and permission given him to embark as a *naval surgeon*, he "having duly sworn with upraised hand that he would acquit himself faithfully and conscientiously of his duties in this capacity and to execute all rules and ordinances of His Majesty in this connection." Dénéchaud married at Quebec in 1753 and had seven children, one of whom, Charles Denis, was the much-loved curé of the village of St. Joseph d'Eschambault over a period of 42 years. Another son, Claude Dénéchaud, represented the Upper Town of Quebec in the Legislative Assembly from 1808 to 1820, where he ranged himself on the side of the English and the Government in the political disputes that arose; and he was a prominent free-mason, succeeding the Duke of Kent as Provincial Grand Master from 1812 to 1822, and was District Grand Master of Quebec and Trois Rivières 1822 to 1836, and in the latter relation was present at the laying of the foundation stone of the Wolfe and Montcalm monument at Quebec in 1797. Marie Louise, a daughter of Dr. Dénéchaud, took the veil at the Hôtel-Dieu du précieux Sang in 1786, but, discovering that she had not the vocation, returned to her father's house six months later and lived with him until his death, "thereby assuring him a happy old age." Dr. Dénéchaud exercised his art both as a surgeon and apothecary at Quebec for many years and was attached in these capacities to the Hôtel Dieu of Quebec from 1769 until his death in 1810. He was the last Frenchman from old France in its service, and his portrait still hangs on its walls as one of its benefactors, in that he gave 500 livres for repairs to its chapel, and bequeathed to it all his instruments and drugs. Dr. Joseph Morrin describes Dénéchaud as "a man of genius, a charming conversationalist and possessed of qualities that will always make his memory dear".

Among other qualified practitioners from old France in the Province at this time may be mentioned; *Jean Dubergès*, a scholarly man born in 1722 and holding a degree in Medicine from the University of Montpellier. He practised for over 40 years, first, before 1764, at St. Pierre, then at St. Thomas de Montmagny, where he was in partnership from 1769 to 1771 with Pierre de Sales Laterrière, and finally at Quebec where he died in 1792. Laterrière describes him in his Memoirs as a "good and honorable character, mild and very obliging and above all a man of good education, having graduated from Montpellier; in city life he would have made progress, but he was an Epicurean philosopher, preferring happiness to ambition." *Elie Laparre* was married in Quebec in 1751 and practised there until 1792; in a certificate dated 1781 he is styled "*mêtre chirurgien de la ville et gouvernement de Quebec*", and when Laterrière came here in 1788 to be examined for his licence he stayed with "*laparre son bon ami*". He seems to have been a poor man of affairs for both his house at Quebec and a property at Baie St. Paul consisting of "two houses, barn, stable and a fine garden" were seized for debt. In 1775 he was enrolled in the Canadian Militia. *François Joseph Raimbaut*, a native of Provence, was married in 1748 and practised in Trois Rivières where he was physician to the Ursulines until his death in 1779. *Jean Baptiste Rieutord* was born in Gascony and served in the French army before he came to Canada as surgeon to the French fleet in 1759; captured in the St. Lawrence by the English, he was made to look after their sailors and soldiers during the siege, but was liberated after the surrender and settled at Baie St. Paul where he married in 1760. In 1764 he removed to Château Richer and practised there until 1782 when he went to Trois Rivières and remained there until his death in 1818, in full possession of his faculties, at the advanced age of 105. For many years he was physician to the Ursulines there and was apparently highly esteemed, for in 1792 when Laterrière sought an appointment at this Institution (apparently against the wish of the *Religieuses* of the hospital), Mgr. Hubert forbade it, writing: "As we have observed that the competition of several physicians is a cause of trouble and division, we forbid you to introduce any new



FIG. 7. PHILIPPE LOUIS BADELART (1728-1802)  
 Surgeon-major of the French Army and after the Conquest commissioned by the British Government to investigate the Bay St. Paul Disease, and author of the first treatise published on that subject. From the painting by Legaré. Republished by permission from the article by M. R. Charlton, *Annals Med. Hist.* 1923, v, p. 171. Paul B. Hoeber, New York.

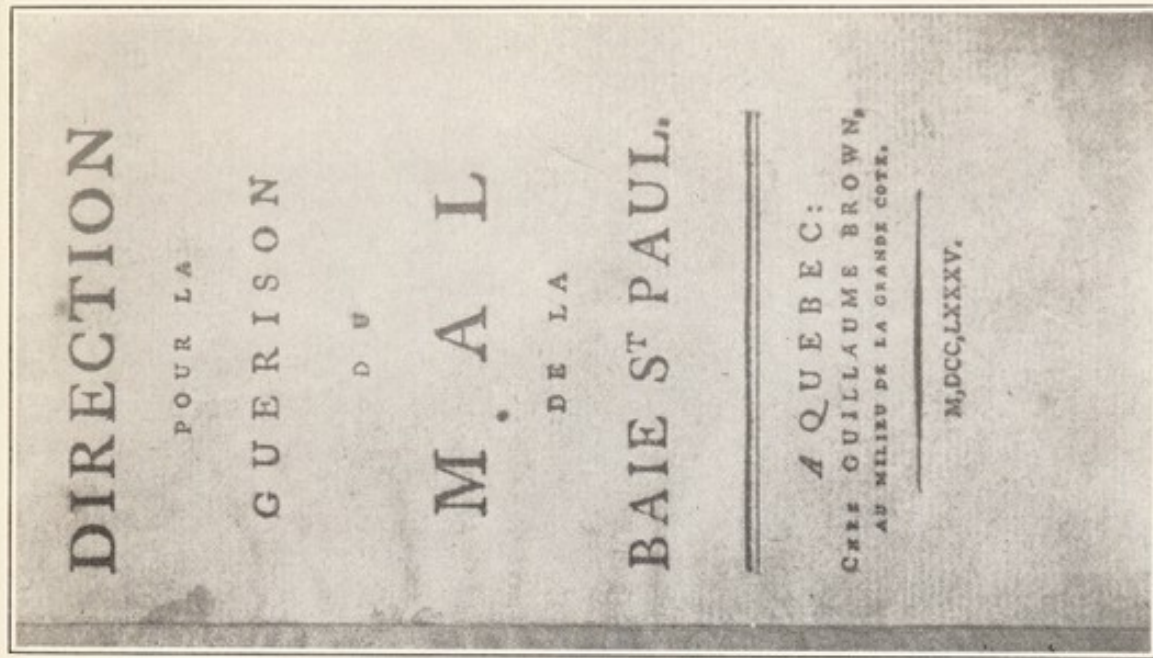


FIG. 8. TITLE PAGE OF THE FIRST KNOWN CANADIAN MEDICAL PUBLICATION

giving instructions for the treatment and cure of the Baie St. Paul disease. By Dr. Badelart. Distributed by order of the Government in all the parishes of Canada in 1785. From the copy in the Bibliothèque St. Sulpice of Montreal. By permission of Mr. Aegidius Fauteux.

We, whose names are herewith subscribed, examining Commissioners  
 appointed under an Act or Ordinance of His Excellency the Governor and Council of the  
 Province of Quebec, made and passed the thirtieth day of April in the Twenty eighth year  
 of His Majesty's Queen, entitled, "An Act or Ordinance to prevent persons practising  
 "Physic and Surgery within the Province of Quebec, and Midwifery in the Towns of  
 "Quebec and Montreal without licence" do certify to His Excellency The Right Honorable  
 Lord Dorchester that we have examined Henry Loedel of the parish of St. Mary, in  
 the District of Montreal, and find that he has been regularly bred to the profession of  
 Surgery, and we conceive that he may be licensed to practise in Surgery and Pharmacy  
 or as an Apothecary, and Man-Midwife.

J. Pender  
 J. Roberts

Chas. Blake  
 Geo. Selby  
 R. Syme

We do certify that we were present at the examination of the said Henry Loedel  
 Licensed Apothecary &  
 Man-Midwife  
 J. A. M. J. P. P.  
 H. Loedel & Co.

FIG. 9. PHOTOSTAT COPY OF THE CERTIFICATE ATTACHED TO THE LICENSE OF HENRY LOEDEL, SEN.,  
 granted in October 1788, showing the signatures of the members of the First Board of Examiners for the District of Montreal. From the State Records  
 of the Public Archives of Canada.

ones to the prejudice of the old one (*l'ancien*) (*Dr. Rieutord*), except in cases of a sudden or extraordinary nature in which there is not time to get instructions from us and a consultation is necessary". Some years later the Rev. Mother Superior asked Mgr. Plessis to associate Dr. Carter with Dr. Rieutord in the charge of the Hospital and this was again refused. In 1808 Dr. Rieutord subscribed 10 louis to the rebuilding of the hospital, which had been destroyed by fire the previous year.

At Terrebonne there was *Guillaume Labatte* a native of Gascony and a surgeon of the regiment of Béarn, who married there in 1757 and again in 1777. Also *Charles François Le Cerclé* of the diocese of St. Malo in Brittany, who advertised himself in the Quebec Gazette of May 18th, 1775, as "a surgeon well known in Ireland, England, and in the armies of Portugal, and recently in the cantons of Terrebonne" where he was "conveniently lodged for the treatment of every sort of disease as secretly and radically as one could hope for in Europe. . . . He will treat the people free, they paying only the cost of postage"; he died before 1790. *Le Breton dit Lalancette* born in 1714 in Brittany, was a surgeon established at Rivière Ouelle in 1750 where he also kept a store as well; he got his provincial license in 1788 and died in 1796. *Dominique Mondelet*, a surgeon and soldier of the Compagnie de Maron, born in Paris in 1735, practised as a physician at Chambly for many years. He also functioned unofficially as a notary until 1781, when Judges Fraser and Hertel de Rouville complained that his irregular notarial procedures had been the source of much annoyance and confusion. He died in 1813. He was the grandfather of Judge Mondelet. *Jean Baptiste Garon*, born at Martinique in 1721 and made a surgeon-major in 1757, was married at Quebec in 1747 and practised at Ste. Anne de la Pocatière until his death in 1781; *Jacques Franchère*, a native of Anjou who came to Canada on the King's ship "*La fleuve de St. Laurent*", was married at Quebec in 1748 and was physician to the Ursulines there from 1763 to 1766. *Antoine Isambert*, a native of France, was surgeon at Beauport from 1749 to 1775. *François Rouisse de St. Cyr* and *Louis Marceau* who came out as surgeons in Berry's Company, the one in 1754 and the other in 1757, were established respectively at Repentigny in 1767 and at Château-Richer in 1761. *Paul Duthu*, a "*maitre-chirurgien*" of Gascony, married in 1757 at Charlebourg and practised there and at Quebec until his death in 1776. *Pierre Peturon* of Normandy, who entered the French marine service in 1656, was taken prisoner at Louisburg in 1758 and settled at Quebec where he married in 1763. *Dr. Guillaume Dubarry* was a surgeon from Bigorre in the Pyrenees and married in 1764 at Quebec the daughter of Dr. Timothée Roussel. *François Lajus*, son of the celebrated Dr. Jourdain Lajus, who, though born at Quebec, received a good medical education that qualified him for his appointment to the first Board of Medical Examiners in 1788. He it was, who as a surgeon in the French army at the fall of Louisburg in June 1758, brought the first news of its capture across country on foot all the way to Quebec. He was still in practice in 1796.

Among the practitioners hailing from old France in Montreal at this time were: *Philippe Laboissière*, a native of Brittany, who was married at Montreal in 1757 and was at Pointe aux Trembles in 1761; *Louis Lafourcade*, of Gascony who came out in 1759; *Louis Landriaux*, a surgeon from Luçon in Poitou, who was living in Montreal in 1748 and for three years was surgeon-in-chief of the Hôpital Général; and *Daniel Debonne*, son of Dr. Claude Debonne, who had taken medical degrees in Europe and was physician to the Hôtel Dieu of Montreal from 1770 to 1780.

A medical man of much importance who came from France about 1759-60, as ship's surgeon, was *Jean Baptiste Jobert*. He evidently enjoyed the confidence of his colleagues, being appointed a member of the first Board of Examiners at Montreal, in 1788, in October of which year he signed the licence of *Henry Loedel Senior*, together with the other members of this board, *Xavier Bender*, *Charles Blake*, *Robert Sym*, and *Geo. Selby*, in the presence of J. Fraser and Hertel de Rouville. I.C.P., and Picotte de Belestre and J. E. de Longueil,

Clerk (Fig. 9); and also the licence of *Simon Fraser* of Terrebonne, dated September, 1792, which bears the signatures of *Charles Blake*, *Robert Jones* and *J. Bte. Jobert*, witnessed by Judge Fraser and Picotte Belestre. Jobert also took an active part in the efforts made by the profession to obtain the enactment of stringent measures by the Government for the eradication of the St. Paul's Bay Disease, which had continued to devastate the country. In 1782 a vigorous letter bearing his signature and those of Charles Blake, Robert Sym, and George Selby, was addressed to the Grand Jury of Montreal, calling their attention to the ravages of this disease, "it being general in every parish", and urging them to take immediate steps in accordance with directions to be supplied by a "Committee appointed of the most eminent of the Faculty." The Grand Jury thereupon warned His Majesty's Commissioners that "the ruin and destruction of the entire youth of the community" was threatened unless means were devised to eradicate it completely. As a result, in 1783, the Legislative Council memorialized the Governor pledging their support and begging him to obtain with the aid of the clergy complete lists with necessary details of all persons afflicted, in order that remedial and preventive treatment might be supplied in every case. At the request of Governor Haldimand, two very strong episcopal letters were accordingly sent out, in 1783 and 1785, by the Catholic Bishop of Quebec to every parish in the Province and a medical officer (Dr. James Bowman) was appointed to supervise the work of stamping out the contagion and incidentally to make a statistical report upon its incidence and the results of treatment in all parts of the country.

What, it may be asked, was this curious disease, popularly known as the *Maladie de la Baie* or *Malbaie Disease*, that figures so largely in the medical history of this part of Canada in the latter part of the eighteenth century, and that fills so many pages of the Dominion Archives? It was first brought to the attention of the Government in the year 1773 as an obscure contagion which had broken out in the remote parishes of Baie St. Paul and Eboulements from contact, tradition said, with some Scotch soldiers landed there, and which had spread like an epidemic through the country side from St. Paul's Bay up the St. Lawrence as far as the Cedar Rapids and Ile Jésus above Montreal and along the Ottawa to Michilimackinac. Opinions differed as to its nature, but the majority believed that it was really syphilis, propagated to an alarming extent by the domestic habits of the *habitant* population, who lived in crowded dwellings in which utensils and linen were used in common. Dr. Charles Blake wrote: "The Canadians make use of the same cups and drink from the same bucket; they frequently borrow each other's pipe to smook with; they chew the food for their infants and spit it in their mouths. All these circumstances keep up the essence of the disease, for any part deprived of the true skin absorbing the infectious virus gives the complaint. . . . Here, gentlemen, is the mystery of it. *It is nothing but a pox* and gives way to no other remedy but mercury." The disease ran through three stages and in the last or tertiary one was characterized by great destruction of tissue and disfigurement ending, if untreated, in death. Like all forms of venereal diseases, it yielded readily to treatment by mercurial drugs and inunctions and these were universally recognized as a specific cure, if administered sufficiently early and to the point of salivation. The Government was greatly concerned and supplied medicines and medical attendance gratis through the country parts.

The necessary drugs with printed regulations for their administration and other details for the care of the affected, were accordingly distributed, both by official channels and through the Curés of the various parishes, by whose agency they were placed in 1785 where the people might have ready access to them free of charge at any time. Both in this way and by the ignorant employment of the drug by unlicensed persons practising in the country districts, the evils of mercurial poisoning were frequently added to the sufferings from the disease itself, a fact which introduces an element of uncertainty into the statistics of its incidence, for the sloughs forming in the mouth as a result of the mercurial poisoning were not infrequently mistaken for venereal ulcers. Undoubtedly the alarm occasioned by these conditions and the fatalities that occurred at the hands of the

many irregular practitioners and quacks, into whose control a powerful remedy was thus thrust without proper restrictions, had the direct effect of bringing about the medical legislation that was enacted two years after Dr. Bowman's statistical Report of 1786 and shortly after the powerful denunciation made by Dr. Charles Blake to "The Honourable Committee of His Majesty's Council on Population", in which he relates, among other items, that, a Doctor's account for attending a man afflicted with the St. Paul's Bay Disease having been sent from the Court of Common Pleas to him to adjust, he found on enquiry that no less than *two ounces* of the pure mercury (*Mercuria dulcis*) had been administered at a single dose. "On my remonstrating, he (the practitioner) strenuously insisted that he had actually done this, and as a sanction for his giving it said that a Canadian constitution would bear as much again as an English one. I have no occasion to tell you the man died". . . . "I could give many other instances of murder being perpetrated by these impostors in the profession, but a more recent case which is now pending in the court of King's Bench is sufficient for the legislative body of the Province to interfere and put a stop to such atrocious abuses."<sup>(6)</sup>

**Contemporary Physicians of British or Foreign Origin.**—Among these we find several distinguished names, some of which have been mentioned in the preceding paragraphs. First in order of time and of political importance among these was the Scotchman *Dr. Adam Mabane*, whose career as a member of the governing body and a judge during the period of civil reconstruction that followed upon the military rule of 1760-1764, is of more than common interest. It reveals the conflicting elements at work at this critical time, and the petty jealousies and intrigues that impeded justice and made its impartial administration a difficult and even a dangerous thing. That he lived down his early reverses and emerged with unstained honour to be reinstated in the Government offices from which he had the misfortune to be deposed at the very outset of his career, is evidence of an integrity and strength of character and of a sound and impartial judgment in the discharge of his twofold duty to the Crown and to the people whose rights he had undertaken to safeguard, that could not but be appreciated by those highest in authority at a time when strong men of affairs of unimpeachable loyalty were so badly needed by the State. The story of his legal activities and difficulties has been recently told on the basis of documentary evidence in a valuable article by the Hon. Mr. Justice Surveyer and Mrs. F. C. Warren,<sup>(29)</sup> and there are also biographical sketches by the Abbé L. E. Bois<sup>(30)</sup> and Dr. Ahern.<sup>(1)</sup> From these sources we gather that Mabane was born at Edinburgh in 1734 and, after receiving a medical education there, came to Canada as Surgeon's Mate on the Hospital Staff of General Amherst in 1759, a few days before the fall of Quebec. Lord Elibank, father of General Sir James Murray, is said to have written his son on Mabane's behalf, and it was possibly as a result of this introduction that we find the latter settling at Quebec immediately after the Conquest and engaged in active medical practice there. In relation to his patients he is said to have been affable, kind and charitable, always ready to be of service, and he readily gained a large clientele; but after 1764, when he was made a Judge of the Bench he withdrew from private practice and took no emoluments except such as came to him from official sources. His hospital appointments, however, show that he remained active in his medical work in spite of the claims made upon him by his legal and public duties. From 1767 till his death he was physician to the Hôpital Général de Quebec and its *Réligieuses*, whom he generously supplied with ten or twelve cords of wood every year from his estate at Sillery and often with provisions as well. In 1762 he had been appointed with the "Sieur" *Field*, assistant-surgeon to the Military Hospital at Quebec and was surgeon to the Garrison from 1766 to 1783. In the Journal of the Troops of Brunswick, who were sent to the support of the British flag in 1776, it is stated: "The Lt. Colonel of the regiment ordered, on the demand of the English Physician Mabane, that none should drink the water from the well."



Mabane was a man of great erudition and broad culture, and it was probably on account of these attainments, as well as of his known personal integrity, that he was selected by General Murray in 1764 to be a member of his newly formed Council and a Judge of Common Pleas for the District of Quebec and Montreal. He is said to have accepted the latter office somewhat unwillingly, but immediately set about mastering the intricacies of French and English law and he seems thereafter to have performed his judicial duties with fairness and precision. Unfortunately he incurred the antagonism of Sir Guy Carleton at the very outset of the latter's administration in 1766. The friction seems to have arisen out of disturbances in Montreal in 1763 (when martial law still prevailed) regarding the private billeting of soldiers in the absence of proper barracks accommodation, the arrangements for which had been placed by Governor Murray in Judge Mabane's hands and appear to have been satisfactorily disposed of. Nevertheless, his presence at a meeting on January 2nd, 1766, at Montreal "for the preservation of the old customs" and his conduct in this connection seem to have given the new Governor great offence, so that later in the same year Carleton dismissed him both from the Bench and from the Council. That this treatment was highly unjust is clear, both from the protests it evoked and from later events, for Mabane was soon reinstated. In 1771 he was again holding Court as a Judge at Kamouraska, and in 1772 at Quebec, while on February 17, 1774, Carleton made him a Commissioner to hold a session of the Supreme Court at Quebec in the absence of Chief Justice Hey and in April 1775 he was formally re-instated by proclamation of the Governor and was also made a member of the First Legislative Council assembled in that year. During the American invasion he was entrusted with important missions in the raising and organizing of the Canadian Militia, and in 1778 Lord Haldimand, who became his firm friend, was appointed Governor with instructions to place Mabane on his Council.

In 1781, however, the enemies of Dr. Mabane made themselves felt again, for although it had been decided at this time to found a special hospital for the Quebec Garrison and he had been duly appointed, adverse criticisms forced Governor Haldimand to write him that this plan could not be carried out, that his appointment as Physician must therefore be revoked, and that medical aid would henceforth be supplied to the Garrison at Quebec from the General Hospital of Trois Rivières\*. Haldimand's letter on this subject to Lord George Germaine, dated October 23rd, 1781, shows the high regard in which the surgeon was held by him, and his reluctance to take this step. After stating that in obedience to His Majesty's commands he had discontinued the connection between the Hospital and the Garrison, he adds; "I feel more on this occasion than I would otherwise do, as it affects a man whose aid and assistance in support of the King's Government in his Civil capacity, has been of infinite use to me, and whose services have been uniformly devoted to the Crown, which may have procured to him many enemies."

Mabane's reply to Haldimand showed that he believed the objection raised was based on his holding a civil appointment, and gives evidence of his professional probity. He wrote, "It is well known that ever since Governor Murray, in the year 1764, appointed me to a Civil Office, I have relinquished all private practice for gain. The salary annexed to the Office at that time was £150 per annum. So the acceptance of the Office which my friend and benefactor wished me to exercise can never be imputed to interested motives, as I can with truth declare that by relinquishing the private practice of my profession, which I thought incompatible with the office of Judge, I gave up four times more than the emoluments which I received from the Crown for that office. . . ."

The year 1783 was an ill fated one for Mabane. He felt compelled to resign as surgeon of the Garrison and Dr. Fisher was promptly appointed in his place and on August 16th, he and his legal colleagues at Montreal rendered judgment

\* The official correspondence on this interesting subject is published in full by Miss Charlton *Ann. Med. Hist.* 1923, v, p. 274-277.

against the Hon. John Cochrane and his associates to the amount of £45,000 for obligations incurred by them in connection with the fall of prices of their monopoly of rum, after the declaration of peace in this year. This judgment and a similar one given the following year, were finally annulled by a Commission (on which James McGill sat). The annullment Judge Mabane considered to be a gross miscarriage of justice, and the hostility aroused in the principals by his determined attitude in favour of the Crown found expression in a fierce attack upon the administration of justice in the Courts of Common Pleas made by Attorney-General Monk and Chief Justice Smith. Mabane appealed for an investigation, and the results showed him and the other Quebec Judges to be above reproach, although the system was acknowledged to be defective.

In his private life Mabane was quiet and studious, fond of retirement but a generous and most hospitable host to his chosen friends. Chief among these after Governor Haldimand was Major-General Riedesel who had come to Canada in command of the Brunswick troops in 1776, and whose correspondence with Haldimand and Mabane form an important source of contemporary information. In 1769 Mabane had bought a country property next to Spencerwood, and changed its name from "Samos" to "Woodfield". Here with the help of his sister, Miss Mabane, a familiar figure in the society of the period, he entertained royally, apparently often beyond his means, for after his death his possessions were not sufficient to pay his debts, and it was necessary to place this delightful home with all its appurtenances on sale.

In 1790 Mabane was appointed a Judge of the Court of Common Pleas for the new District of Trois Rivières, as well as for Quebec and Montreal; and in 1791 he was made a trustee to superintend the building and repairing of churches in these three districts. In September he was given a seat on the new Executive Council under the Constitutional Act of 1791, but on December 26th he was obliged to excuse himself for not attending a meeting, "on account of a most severe indisposition arising from an inflammation in my lungs". This illness was said to have been brought on by a cold caught in a blizzard on the Plains of Abraham where he had lost his way. He died a few days later, on January 5th, 1792. His sister, Isabella Mabane, who survived him for some years, became heir to a legacy of ten thousand livres left them by their friend Lord Haldimand and subsequently made her home with the former Receiver General, Hon. Henry Caldwell.

In the correspondence of General Riedesel, with Adam Mabane, in the McCord National Museum at McGill University, there are also several letters from *Dr. Hugh Alexander Kennedy*. The latter was Inspector General of the Infirmaries of Canada from November 1777 to December 1782, and wrote the German General on October 15th and 16th, 1782, regarding the state of the Brunswick troops who were lodged at the General Hospital there.

An interesting side-light is thrown upon Military Hospital conditions here during the years of the American Revolution by a correspondence in the Haldimand Papers<sup>(31)</sup> with *Dr. William Barr*, Purveyor to His Majesty's Hospitals in Canada at this time. Dr. Barr was a competent officer who evidently had the respect and confidence of this able Governor and his authority at the Hospital at Trois Rivières had apparently been disputed by Dr. H. A. Kennedy, and was also questioned by *Mr. Pennel Cole*, a young surgeon whose ideas on Hospital duty and precedence seem to have been somewhat hazy. On January 28th, 1779 Dr. Barr wrote the Governor that forty-nine men of Lt. Col. Barnes' Corps who had been frost-bitten were expected at the Hospital at Three Rivers and that he had advised Mr. Cole to proceed there, as they had no surgeon, only a mate. Mr. Cole was in doubt about taking orders from Dr. Barr until he had heard from Trois Rivières but had finally decided to go, and was setting out in two days. Dr. Barr adds that when he last left England he had been given to understand that he was to consider himself at the Head of the Hospital Department and that the orders would come through him, and that from his long service as surgeon to

the Hospitals in America, he thought he had reason to expect this.

In a reply dated February 8th, General Haldimand says that he has no instructions from his predecessor Sir Guy Carleton, so that if Dr. Barr has no papers himself showing his status in relation to Dr. Kennedy, the matter would be referred to the Secretary at War for decision, and adds:

In the meantime, however that matter may be, I should consider it as very extraordinary if any of the Hospital gentlemen should neglect to give their assistance to the utmost wherever there may be occasion for it when pointed out through any channel, and I am very glad to find that Mr. Cole's ready compliance with your very proper intimation to him of what his duty was in the case of the unfortunate German soldiers who suffered by the frost, has not subjected him to the reprimand which I should otherwise have undoubtedly thought he deserved.

On September 28th of the same year, Dr. Barr wrote Haldimand from Trois Rivières that the two small rooms in the House of the Récollets at Montreal, formerly used by Sir Guy Carleton for sick soldiers and accommodating 8 or 10 persons, were still available for this purpose if his Excellency would give an order to this effect. He added on behalf of the Hôtel Dieu at Trois Rivières:

The Supérieure of the Convent here has desired to have the Baking of the Bread for the sick in the Hospital here on the same terms as the last Baker furnished it, namely a pound of Bread for a pound of Flour. I wish to give the nuns the preference on condition that they always give the sick good bread.

General Haldimand replied promptly on September 30th, 1779:

I would by all means have you give the Baking to the Nuns as well because I wish to serve them, as because the hospital will be better provided—in every other respect that good offices can be rendered them, I should be glad they were attended to.

On April 13th, 1781, in forwarding to the Governor a Return of the Hospital Mates in Canada, Dr. Barr suggested that in view of the small number available for duty at that time Mr. Blake, Surgeon of the Garrison at Montreal, should be asked to do the little duty required for caring for the sick at the Hospital there himself, and that the Mate at present on duty at Montreal should be sent immediately to Detroit to relieve Mr. Menzies, surgeon of the 84th Regiment. This advice was approved, the Secretary to the Governor writing that no time would be lost in sending a Mate from the German troops to Trois Rivières and adding:

You did perfectly right in desiring Doctor Blake to take charge of the few sick at Montreal, the General has ordered me to write him on the subject by this Day's Post.

The name of *James Bowman*, M.D., who came to Quebec as an assistant Surgeon in the English army immediately after the Conquest, carries us back to the subject of the Baie St. Paul Disease, for he it was who succeeded Badelart in the investigation and treatment of this malady, by an official appointment made in 1785, apparently in direct response to the appeal presented by Drs. Blake, Selby, and others for immediate action by the Government towards the eradication of the infection. His instructions were very comprehensive, to the effect that he must: (1) visit every parish in the province to give his opinion on the nature of the disease and to distribute gratuitously the proper remedies for its cure; (2) keep an exact diary of his journal and a faithful list of the age, sex, condition, and period of disease on all persons visited and collect as well all information necessary for a complete history of the disease for subsequent publication; (3) use all means to get the favour and help of the clergy, and to obtain from the curé of each parish a certificate of all cases seen by him; (4) all expenditures made, both for travelling and remedies used, were to be reimbursed him, and in addition he was to receive 200 guineas for his services. Eighteen months later, on November 16th, 1786, Bowman submitted a certified statement to Lord Dorchester, showing that he had visited professionally during this period no less than 6,350 persons. His account, which included expenses and a charge of five shillings for each patient treated, amounted to \$12,500 (2,500 louis) at that period a very large sum. The Government protested it, offering him instead the 200 guineas promised for his professional services and 100 guineas for disbursements made.

Dr. Bowman died in 1787. At this time he held the appointment of super-

numerary assistant-surgeon to the Quebec Military hospital at a salary of seven and a half shillings a day. From the Spring of 1784 on also, he was physician to the Hôtel Dieu de Québec, at which time the sick soldiers who had occupied it since the Conquest, were evacuated by the Government, and the Hospital restored to its ancient privilege of caring for the sick poor. The winter of 1783-84 was a hard one, with work scanty and the smallpox prevailing, and Dr. Bowman and *Dr. Détailleur*, a surgeon of the artillery, came forward with an offer to staff the hospital gratuitously which was gratefully accepted. Dr. Détailleur died in 1785, but Dr. Bowman remained in office on this basis until his own demise two years later.

**Inoculation and Vaccination.**—Ever since the coasts of North America had become the home of the white man the dreadful scourge of smallpox had found in the virgin soil of this continent a fertile field wherein it wrought dire havoc, spreading like wildfire among the Indian tribes and decimating the French and the later British settlers wherever it broke out. The preventive measure of producing immunity in the individual by inducing a mild attack of the disease itself (*inoculation*), or by introducing the serum of the relatively innocuous cowpox (*vaccination*), found a ready hearing in a country where experience had taught the most untutored inhabitants that persons recovering from a first attack were not susceptible to reinfection, at least for a period of years, and that no other means existed of arresting this virulent contagion once it had appeared. Long before the discovery of vaccination by Jenner, direct inoculation by the transmission of a small amount of infective matter derived from a mild case of true smallpox was used, and this method came into popular use in England in 1727 and appears to have been brought into Canada about the year 1765. In the next thirty-five years it was employed here rather widely and with apparently good results in experienced hands, although there was always a good deal of fear of it on the ground that it was not free from danger to the inoculated individual and that it might spread the infection. The clergy were on the whole inclined in its favour, but the Government maintained a conservative attitude, Sir Frederick Haldimand's instructions in a letter written on November 2nd, 1783, being that he had no objection to it provided the people wanted it, but that he positively forbade its use among the Indians of the upper posts since the disease once introduced in ever so mild a form, might spread to remote parts with results fatal both to the native population and to the King's service among them. Nevertheless, by the last decade of the century the practice had spread through Canada and was recommended by such physicians high in authority as Drs. Oliva, Fisher and Blake. It was however promptly replaced by vaccination, when in 1798 the news of Jenner's successful experiments on producing artificial immunity by this means rang through the civilized world. Vaccination by cowpox reached Canada in the years 1801 or 1802 by Col. Landman, an officer of the artillery at Quebec (Heagerty<sup>(6)</sup>). The story of the eager adoption of this relatively harmless procedure by the Indians and especially by the Five Nations of the Iroquois is matter of history and was acknowledged by Sir Edward Jenner himself by the presentation in 1807 of an autographed copy of his book entitled "Address of the Royal Jennerian Society for the Extermination of the Small-pox with the Plan, Regulations and Instruction for Vaccine Inoculation. To which is added a list of the subscribers. Instituted in 1803." Direct inoculation against small-pox was finally abolished by law in 1853.

The first practitioner whose name has come down to us as having actually practised inoculation in this Province was *Mr. Latham*, a surgeon in the 8th Regiment of the King's Infantry, which was in Garrison at Quebec from June, 1768, to August, 1785. He evidently made a specialty of the practice as shown by his repeated and rather fulsome advertisements in the *Quebec Gazette*. The first appears in August, 1768, and it informs the public that before leaving England he had been associated in partnership with Mr. Sutton, whose great success in inoculating thousands by his special method was well known; that he (Mr.

Latham) had recently inoculated by this method four soldiers of his regiment who had subsequently been ill only six days with a mild form of the disease and that he had obtained from this source sufficient material for all those who wished to be inoculated, all poor persons unable to pay to be treated free of charge. Later he announces that at the present time he is the only associate in America of the great English Inoculator, but that on his departure he will leave a partner in Quebec to carry on the work through the Province. On May 4th, 1769 he states that he has inoculated (since August of the previous year) 303 cases, of whom 118 were done in the last four weeks. On June 1st again he informs Montrealers that he will be among them to introduce and practise inoculation shortly, and on July 15th he informs the habitants of that town that he has arrived from Quebec "and as his stay will be short he takes this mode of announcing that he proposes to inoculate by Mr. Sutton's method during his stay here. He is lodged with Dr. Jobert". Some time later he announces a cure for whooping-cough by bleeding and purgations.

Mr. Latham subsequently went to New York, doubtless to carry on his method there, but he returned to Quebec in September 1781, and again announces that "as the Smallpox is rife in this town" he is making his residence here and will be honoured by receiving orders from his friends for inoculations as well as other calls on his profession. A week later he announces that he is living with Mme. Soupiran, opposite the post-office. In the same year he took Dr. James Bowman into partnership but the latter died in 1787.

A more important man in the profession, who also practised inoculation shortly after its introduction at Quebec by Latham was Dr. *Frederick William Oliva*. He was of German origin, born in 1749, and probably came to Canada with the Brunswick troops as he bore the title of surgeon-major. He practised and lived at St. Thomas and married there Catherine Couillard, cousin-german of the Seigneur Couillard de St. Thomas. He removed with his family to Quebec in 1786 and was made a member of the first Board of Examiners in 1788. One of his daughters, Marie-Louise, married the Hon. Louis Panet, a member of the Legislative Assembly and Senate.

Dr. Oliva was an able physician whose methods were in advance of his time, for he understood the value of fresh air and natural remedies and treated his own child for typhus fever by plunging him in icy water and then wrapping him in blankets. Philippe de Gaspé in his *Memoirs* eulogizes him highly and relates: "I was inoculated by him for small-pox when I was five years old in the month of October and for this purpose I made a journey of a mile to him daily in a carriage." This same doctor said when smallpox was ravaging the country: "How happy are those unfortunates who fall ill in the country, close by a stream and under the shadow of the pine-trees; ninety per cent. of such will probably recover." Vaccine had not yet been discovered, and he took care to inoculate his patients as early as possible in the autumn or spring and ordered them to go out every day. Dr. Oliva died in 1820, and de Gaspé wrote that it was "an irreparable loss for the town of Quebec, where good physicians were scarce at this time."

*Jean Macaulay*, originally from Ireland, but a Doctor of Medicine of the University of Rheims, arrived at Quebec in 1775, and makes a lengthy announcement in the *Quebec Gazette* of that year, to the effect that he had regularly studied and practised in the principal towns of Europe, and was now living in the Upper Town in the house formerly occupied by Mr. Fitzgerald where he was prepared to hold consultations on all medical and surgical cases, that he had a large assortment of fresh medicines for sale at reasonable prices both retail and wholesale to other surgeons; that all sick persons might approach him whether able to pay or not; and that he would give free consultations and medicines at a low rate to those needing this help every day except Sunday between eleven and twelve noon. Finally that "he inoculates for smallpox in the most practical and approved European method and will treat all sorts of venereal complaints by a

more certain method than has ever been employed in this part of the world." In spite of his qualifications, this doctor seems to have had difficulty in collecting his accounts and he died early in 1780. His obituary says that he was studious and clever, an agreeable companion, a scholar and a gentleman, the friend of the poor and one who loved to help those in distress. (*Quebec Gazette* Jan. 13th).

(This Jean Macaulay is not to be confused with the distinguished *Dr. James Macaulay* of Toronto, the friend of General Simcoe and President of the First Medical Board of Upper Canada in 1815, who was domiciled at Quebec from 1805 to 1812 in his military capacity as Senior Medical Officer of the Hospitals of Canada and whose daughter married Dr. Peter Diehl in the next generation).

*Dr. Mervin Nooth* was among the most important of his colleagues and is described by Laterrière in his Memoirs as the chief physician of Quebec in his day. He was a Doctor of Medicine and a member of the Royal Society, and had been active as a surgeon at Halifax and New York before the American War. He came to Quebec with Lord Dorchester as a military Physician in 1786, and was given the appointment of Superintendent-General of the English and Foreign Hospitals in this province and Physician to the army of British North America. He was present at the examination which Laterrière had to pass to obtain his licence in 1789, and in 1790 he was a Director and member of the newly founded Quebec Agricultural Society. On the death of Dr. Bowman in 1787 he was appointed in his place to carry on the investigation into the Baie St. Paul Disease and he made an able report, which has unfortunately been lost. In later life he returned to England and died at Bath in 1828.

Dr. Nooth evidently looked favorably on inoculation, which seems to have gained in favour with the Government with the years; for in 1796 he wrote from Quebec to Mr. Keats, Surgeon of the Forces;

The troops are healthy, but the medical gentlemen at the upper posts are employed by the small-pox patients among the Indians. They were too much afraid of small-pox at first to allow of inoculation, but they are now coming in crowds to the posts for the operation.

*Dr. George Longmore* was in active practice at Quebec for over twenty years and was much respected in the community. He arrived from Bonaventure on the S.S. *Angelique* after thirteen days navigation with his wife Christina Laetitia Cox and their young family in June 1788. Less than a year later on April 16th, 1789, he was made physician to the Hôtel Dieu du Précieux Sang, coincidentally with Dr. John Gould. He and his wife baptized three children in the Anglican Cathedral at Quebec, Dr. John Mervin Nooth standing godfather for one and Dr. James Davidson for another son. Dr. Longmore held the post of Apothecary to the Troops, and had looked forward to becoming Surgeon in Chief, but this appointment was given in 1803 to Dr. James Macaulay as being the senior officer of the two, Longmore however being retained as Apothecary. In 1807 he was also Officer of Health to the Port of Quebec, and one of the Commissioners to give assistance to aliens and *enfants trouvés*, and he was still Health Officer to the Port in 1810. He was also a member of the Board of Medical Examiners in 1809.

*Dr. John Gould* was appointed physician to the Hôtel Dieu of Quebec, along with Dr. Longmore on April 16th, 1769, and he was still on its staff in 1789. His name is of great interest, for in the *Quebec Gazette* for 1790, his signature, followed by the title "Assistant-Surgeon to the Hospitals of His Majesty in this Town", stands at the foot of a petition addressed to Lord Dorchester, asking that a University be established.

Was this the same Gould whose widow was sent the following gruesome account by a self-taught physician, published in the *Kingston Gazette* for June 2nd, 1812?

The Estate of Mrs. John Gould, Dr.

To Dr. for medsin and attendants when he was choked with a large peas of Butter  
no of meat .....£3

*James Davidson, M.D.*, married at Montreal in 1779 the daughter of the late John Richardson, Commissary of the Garrison. On July 26th, 1787, he was appointed by Lord Dorchester, Surgeon of the town and banlieu of Quebec, and he was also surgeon of His Majesty's Regiment of Royal Highland Emigrants. In 1807 he was still surgeon for the third division of Militia for the town of Quebec. Dr. Davidson was also a member of the first Board of Examiners for the District of Quebec, appointed by Lord Dorchester on July 11th, 1788. He lived at Number 1, Place du Marché, Lower Town.

*Dr. Charles Blake* was one of a galaxy of eminent medical men who were active in Montreal in the latter part of the eighteenth century, and who took a prominent part at this time in the campaign against the Baie St. Paul Disease and in the agitation to obtain adequate legislation for the protection of the profession against the alarming increase of charlatans and irregular practitioners who menaced the well being of the Public, which finally resulted in the enactment of the Medical Act of 1788. Dr. Blake, who was a U.S. Loyalist, came to Quebec in 1776 as Surgeon of the 34th regiment and played an important part in the medical department of the army during the years of the American Revolution from 1776 to 1783, and his name is frequently mentioned in the public documents of the Haldimand Papers. He resigned from the 34th Regiment in 1778, and seems to have removed then to Montreal, for he was Surgeon to the Garrison there in 1781, and after his demobilization settled down to an active and apparently extremely lucrative practice in this town in partnership with Dr. Henry Loedel, a surgeon of the Hessian troops under General Riedesel, who had also settled at the close of the American War in Montreal. Both these physicians are mentioned in Neilson's Almanac for 1797 as members of the Board of Examiners for the District of Montreal in that year, and Dr. Blake's name is on until 1808, but is omitted later and he died before 1814, for in that year his widow married M. Panet at Quebec.

Several interesting deeds are on file at the Montreal Archives bearing Dr. Blake's signature which show him to have been a man of parts and substance and of much importance in the community. The partnership between him and Dr. Henry Loedel, Sr., was first entered upon by them on January 1st, 1784, on the basis of a two-thirds share to Dr. Blake and one-third to Loedel of all property, liabilities and profits; this was ratified ten years later in a deed dated May 16th, 1794, in which the parties recapitulate their agreement on a basis now of equal shares of all possessions, profits and losses, Dr. Blake's half-pay as a retired army-surgeon being of course exempt, but their real estate, including a "House near the Riverside now occupied by Mr. Charles Blake", "a House on Notre Dame Street", and "a Farm in the Quebec Suburb", being held jointly under the deed. Attached to this document is a long statement of accounts due the partners at that date (1794), which totals the very large sum (at that time) of £2681.55.11 and contains 433 items. Many of these are of great historical interest, both as evidencing the wide range of practice covered by these two Montreal physicians (which extended as far as Johnstown on one side to Michilimackinac on the other, and included any number of outlying places such as Kingston, Varennes, Oswegatsky, etc.), and the prominent class of patients they attended, as well as the quaint phraseology of the period, in which they designate by Christian name and calling, the humbler class of tradespeople in that small community and undemocratic age. Thus we read: "William Smith the Gardener", "Fynn, the King's Carpenter", "Simon the Cooper", "Abraham the Jew a Taylor", "Pickard the Butcher", "Mr. Chewatt a Surveyor", "Shiller the Bailiff", "John Jones a Shoemaker", "John Long a Publisher", etc. The largest single item on this list is a charge of £126.16.7 against the celebrated Sir John Johnson, and was probably for bills incurred for his retainers as well as for himself. Among other names of historic interest on it of persons then resident in Montreal in the year 1794 are "Mr. Alex. Henry", "Mr. Miles McDonnell" (Lord Selkirk's Captain in the Red River Settlement), "Captain Fortune", "Major Murray", "William

England" (who owned the lot at this time on which the Montreal General Hospital was built some thirty years later), "Thomas Busby", "Benjamin Holmes", "Benaiah Gibb", and many more. There are no less than 23 doctors in it (charges for drugs supplied); among these may be noted "Dr. Holmes of the 5th Regiment", and Drs. Serres, Stubinger, James Walker, Faries, Ebberts, R. Jones, James Wright of the 60th Regiment, and William Hunter.

Another very curious deed standing in Dr. Blake's name demonstrates the fact (sometimes denied) that the practice of holding negro-slaves as personal property and buying and selling these unfortunate individuals for cash value, was in vogue in Montreal as well as in the neighboring States in the late eighteenth century. This is a deed of sale dated April 1st, 1785, from one Elijah Cady to a William Ward of the State of Vermont for the sum of two hundred and fifty pounds, of "four certain Negros, (viz) one Negroman named toby aged twenty one years, one other named Joseph aged twenty years, one Negro wench named Sarah aged nineteen years and one Negro Boy about six months old," to be the property of the said William Ward and his assigns "for and during the natural life of the said negros". This deed duly signed and attested, bears two transfers by sale of three of these negros "Tobi Sarah and Child" the first for \$425.00 to a William Campbell and the second by sale from this William Campbell for \$300.00 to Dr. Charles Blake. That Dr. Blake had these three slaves in his possession for a number of years is shown by the endorsement of the deed thirteen years later as follows:

26th February 1798. Sale and Transfer of three Negroes named Toby, Sarah and Boye. Deposited this day in my notarial office to remain of record by Charles Blake Esq. of Montreal. Signed *J. G. Beek*, N.P.

A glimpse of Dr. Blake's personal character and kindness of heart in private life may be gathered from his relations with Dr. *Peter Diehl*, whose mother was the sister of the distinguished Dr. *Daniel Arnoldi*; and whose father John Justus Diehl was the personal friend of Drs. Blake and Loedel, and who, dying while his son was still very young, made these two surgeons his Executors. Probably as a result of their influence, the boy entered upon the study of medicine and became apprenticed to them at the age of fourteen for a period of seven years "until he had reached the age of twenty-one" under a deed signed by his mother Phoebe Arnoldi, Peter Diehl, Charles Blake and Henry Loedel. In it they undertake in the usual fashion to instruct him in all the Art and Mystery of their Profession and to supply him also with all the necessities of life in good and sufficient quantity. His period of apprenticeship over, young Diehl went to Edinburgh in 1807 and there studied medicine at the University and Royal Infirmary. On Sept. 7, 1808, Dr. Blake wrote him from Montreal a letter which has been published by Dr. Canniff<sup>(32)</sup> and is very informing, for it shows that he looked upon this young student with the affection of a father and moreover that he was able to advise him upon his studies abroad with a sagacity bred of familiarity with the best medical tradition of Edinburgh and London. It reads in part as follows:

Dear Peter. I have seen Mr. *Labrie*\* who has given me good accounts of the progress you are making in your profession, which gives me infinite satisfaction. He says the students have been at a loss for subjects. . . . If your Lectures have not begun, or if you think proper after your first Course is ended, it is my Wish you set off for London, and attend at e/y Dissections at St. Thomas's, or any other place you may think better. Anatomy is the Basis of Surgery, and if you are not Minute in it, you never will get on. Your Midwifery Lectures I suppose you are Competent to, and your Operations in Surgery I hope you have tried; if not, when you are in London be particular in it. I desired Mr. Gerrard to send an Order for you to receive £30. I ordered Mr. Gerrard since to give you £50 more. . . . I have that good opinion of your conduct and situation that you I'm sure will enter into no extravagance except such as must support your Education; this is at present necessary, if lost, it can never be regained; at the same time if a play or any novelty you would wish to see, don't deny yourself. I am very

\* Dr. Jacques Labrie who was himself taking lectures in Edinburgh in 1807.



much obliged to Mr. McKendley for his attention and kindness to you; and if you have Received the £50 pay off all your Debts; and never leave a place behind with one Shill'g Debtor. . . .

I am, Dear Peter,  
Your Sincere Friend,  
Chas. Blake.

P.S.—Mrs. Blake sends her best Wishes, and little Harriet says she sends you a kiss.

Peter Diehl amply justified the interest and confidence reposed in him by his guardian. He returned from Edinburgh and obtained his Provincial Licence to practice Surgery, Midwifery and Pharmacy on October 20th, 1809 (George Longmore and James Fisher signing it), and in 1811 his name is on the Board of Examiners for the District of Montreal. In 1818 his uncle, Dr. Daniel Arnoldi, took him into partnership and in 1828 he was appointed to the staff of the Montreal General Hospital, but soon after this he removed to Toronto, where he married the daughter of Dr. James Macaulay and had a distinguished career.

Contemporary with Dr. Blake in Montreal and of equal eminence in their profession were the distinguished army-surgeon *Mr. Robert Sym* and the accomplished physician *Dr. George Selby*, who shared with Blake the prosperous British-Canadian practice of the town, as did also *Dr. Robert Jones*. All three were members of the Board of Examiners for the District of Montreal, Mr. Sym until 1792, Dr. Jones until 1808, and Dr. Selby as late as 1814. All three also were actively concerned in the treatment of the Baie St. Paul disease. Mr. Sym held the appointment of physician to the Hôtel Dieu of Montreal and in this connection had the opportunity of observing many cases admitted there both of the disease itself and of mercurial poisoning from the effects of the improper use of this drug, which, he says in a letter quoted by Dr. Blake, was "given by the priests agreeable to the instructions of Mr. Bowman." In 1785 Dr. Selby was requested by the Lieut. Governor to treat any voyageurs passing through Montreal with the disease and he made an interesting report in that year showing that in all the cases seen by him, ulceration of the buccal parts and throat was the chief symptom; and in 1786 he accompanied Dr. Bowman on an official visit through the parishes of Pointe-aux-Trembles, Laprairie and St. Laurent and made a sworn statement before Sir John Johnson that the disease existed in these places and that many persons were infected. Dr. Jones in 1786 introduced some confusion in the current ideas of etiology by a pamphlet in which he claimed it was not due to syphilis. The name of J. Bte. Jobert is on the list of subscribers to this pamphlet.

The name of *James Fisher, M.D.* carries us back to Quebec and to that struggle for medical legislation in the Province, led by him and Dr. Charles Blake, that culminated in the passing of the first Medical Act. Dr. Fisher's petition antedated Dr. Blake's and moreover in it he outlined the steps that ought to be taken by the Government for relief along lines which, as the sequel shows, were actually followed in 1788; so that he may fairly be considered the real father of the Act. He it was who had been appointed in Judge Mabane's place when the latter was forced to resign his appointment as Surgeon of the Garrison in 1783, and it was the following year that he sent in his petition. In 1780 he was made a member of the first Board of Medical Examiners for the District of Quebec, and was also appointed in that year physician for the community of the Hôpital Général of Quebec, as also to take care of the Government patients in this hospital, which appointment he held until his departure for Scotland in 1816. He was also physician to the Ursulines from 1807 to 1816, succeeding there *Dr. Conrad Just* who had replaced *Dr. Chrétien* on the death of the latter in 1800. *François Fortier* and *François Blanchet* were apprentices of Dr. Fisher and the latter dedicated to him his article "*Récherches sur la Médecine*" which was published in New York in 1800.

**The Licensing Act of 1788.**—About the year 1783 a Committee had been appointed within the Legislative Council to encourage Agriculture and to consider means to increase the population of the Province of Quebec. It was to this

Committee that Mr. Fisher addressed, on December 19th, 1784, a long Memorandum\* on the uncontrolled state of Medical practice in the country with suggestions for reforms and maintaining that the action he suggested would do more towards increasing the population (by lowering the death-rate) than any other possible factor. He pointed out that the number of qualified physicians now practising in the country was very small, while that of the charlatans was immense, that the harm caused by the latter to the health of the people was incalculable; that there was no law to regulate the practice of medicine and that whoever chose to practise it had only to announce himself, since neither knowledge nor study nor examination was necessary. As a remedy he suggested among other measures the formation, at the towns of Quebec and Montreal, of Bureaus of Medical Examiners before whom candidates for the practice of Medicine should pass, and the successful candidates, or those possessing qualifications approved by the Board, should receive a certificate permitting them to exercise their profession in this country.

In 1786 Dr. Blake made an indignant appeal for the redress of these abuses to the same Committee as follows: "It cannot have escaped your notice the very great nuisance that prevails in this country and which has for a long time cried loudly for a remedy; it is the imposition the community at large suffers from inexperienced and illiterate men practising the art of physic and surgery. The destruction attending mankind in these parts by those wicked pretenders is shocking to humanity. All ranks of people join with one voice to beg that His Majesty's Council will so far interest themselves for the public good as to put a stop to these gross misdemeanours." This Body accordingly reported to Lord Dorchester in that year:

"On the subject of the population, the most efficacious method to preserve the life of His Majesty's subjects and of increasing the population is the systematic control of the practice of medicine, surgery and obstetrics in the whole province. The representations of Mr. James Fisher, Surgeon of the Garrison at Quebec, and those of Mr. Charles Blake, surgeon of Montreal, appear to deserve the attention of the Legislature, seeing that they at least expound the methods which will contribute to realize this result of such capital importance to the State and of an extreme interest to humanity."

As a result of these proceedings, at a meeting of the Quebec Legislative Council on March 3rd, 1787, a Bill was brought in by Mr. Finlay, seconded by Mr. Mabane, "to prevent persons from practising Medicine, Surgery or Midwifery without licence", and on April 30th of the following year this Bill, altered to read "*An Ordinance to prevent persons practising Physic and Surgery within the Province of Quebec and Midwifery in the towns of Quebec and Montreal*", was made Law as Medical Act 28, Geo. III, Chap. 8, 1788. This Act ordained that "from the first day of November next, no person should sell or distribute medicines for gain, or practice in any field without a licence, to be granted him by the Governor in Chief upon a certificate showing that the applicant had been examined in his knowledge of physic or his skill in surgery, midwifery or pharmacy by such persons as had been appointed by the Governor for this purpose; a copy of this certificate to be attached to the Licence and this to be enregistered with the Clerk of the Peace of the District in which the practitioner resides, on penalty of a fine of twenty pounds for the first, fifty for the second, and one hundred pounds with three months imprisonment for every subsequent offence." Persons holding a degree or Commission were exempted from examination, but must register a copy of this with their licence.

Boards of Medical Examiners were duly appointed at once, and the first licences were granted in September and October of that year 1788, among others in the District of Quebec, to *Jacques Dénéchaud*, *Elie Laparre*, the old practitioner *Pierre Duvert*, *Ignace Friedel*, *Pierre LeBreton* and *George Weis* in surgery and pharmacy with a restriction to call in a physician in serious cases, and to *Josiah Pomeroy* and *Liveright Puize* as apothecaries; and in the District

\* Reprinted in full by Ahern.

of Montreal to *Herman Melchior Eberts* (ancestor of Dr. E. M. Eberts, surgeon today of Montreal), *Henry Loedel*, *Robert Jones*, *John Rowand*, *George Stubbinger*, *Jean Ducondu*, *John Ferries* of Berthier and *John Conrad Just* in surgery and pharmacy, and *Andrew Blumkie* of Montreal as an apothecary with restriction to call a physician in serious cases; also to four midwives, *Catherine Partridge*, *Marie Lavictoire*, *Josephite Boisneuve*, and *Marie Major*.

In the following year, 1789, the first Licensing Board for the District of Quebec gave the right to practise to *Pierre de Sales La Terrière*, a picturesque figure of this period, whose colourful account of his chequered early career, published in his *Memoirs*,<sup>(34)</sup> reads like a Sherwood Forest romance, but must be taken with a grain of salt as it is not considered by competent authorities entirely reliable. According to it he arrived from France in 1766 at the age of nineteen bearing certificates from the College of St. Côme, which were afterwards alleged by him to have been lost. Engaged first in a shop in Montreal, then in medical practice with Dr. Dubergès at St. Thomas and in 1775 at the iron-works at St. Maurice, he fell in love here with the young Marie-Catherine Delzène, who soon after became the unwilling wife of the old Pélissier. Her elderly husband being convicted of revolutionary dealings was obliged to fly the country, leaving Laterrière in possession of the field, and the union of the lovers that followed lasted on in spite of Pélissier's efforts to disrupt it on his return, when the couple retired to the leafy glades of the Ile Beçancourt. Three children were the fruit of this relationship, a daughter, Dorothee, and two sons, who both became qualified physicians practising at Quebec in the next generation. Laterrière himself was accused of giving information to the Americans and says that he was imprisoned at Quebec for some time and then released by Haldimand and sent till the close of the war to Newfoundland, whither he took the little Dorothee dressed in boy's clothes. Returning after peace was declared in 1783 and wishing to practise at Beçancourt, he was required, under a regulation made by the Chamber of Assembly in 1784, to submit to an examination, but failed in this, his Memoirs say through unfairness of the Board. Nothing daunted, he repaired in September 1786, to Boston, and there fulfilled the conditions for obtaining a degree in medicine, writing for this occasion his "Dissertation on Puerpural Fever", 500 copies\* of which were printed and which is of great interest as being so far as we know the third medical publication by a Canadian, being preceded by the pamphlet on the Baie St. Paul Disease by Badelart in 1785 and that by Dr. Robert Jones in 1786. Armed with a letter of introduction from a Boston physician to Dr. Mervin Nooth, Laterrière presented himself for his licence at Quebec on August 19th, 1789. His degree from Cambridge was not accepted as ground for exemption. This time he passed the examination with flying colours and gives an amusing account of it in his Memoirs, and of the gratification of himself and his friends "because it was generally known that I had passed with honour to myself and to those who had graduated me." His certificate reads "Pierre de Sales La Terrière produced a bachelor's degree in physic from the University of Cambridge in Massachusetts Bay, very ample certificates of his great exertions in study and a recommendation from the Professors of the said University, also a recommendatory letter from Doctor Pain, late physician to the British Hospital at Halifax; upon examination we have found him deserving thereof and conceive that he may be licensed to practise physic, surgery and pharmacy." It bears the following signatures of members of the first Examining Board of the District of Quebec: *John Foote* (Pres.), *James Fisher*, *James Davidson*, *F. Lajust*.

After this achievement, Laterrière practised at Trois Rivières and later at Quebec, where after his return from a trip to England in 1808 he also had a store, kept with the help of his beloved daughter Dorothee, who had been separated from a brutal husband and now made her home with her father. The influence which he had in promoting friendly relations in the profession, and the value of his activities in these later years to the community may be gathered from the

\* One of these is in the possession of Dr. Leo Pariseau, of Montreal.

account which has come down to us of a dinner given in his honour at Malhiot's Hotel in Quebec on August 31st, 1826, before his final retirement to England to live. In addressing him as the Guest of the evening the Chairman, Dr. François Blanchet, said that this tribute had been paid to none before him and was well deserved by his talents and zeal and his "unremitting efforts in contributing to the present flourishing state of the Profession among us . . . which are too well-known to need any encomium."

Indeed this Dinner, which is reported very fully in the *Quebec Medical Journal* for 1826 (pages 256-261), gives a most illuminating glimpse of the unity and wholeheartedness that appears to have existed between the French and English members of the Profession at this time, at the very moment when political discontent was brewing and the troubles of 1837 were looming on the horizon. The following Toasts were drunk to the accompaniment of British, French and American National airs: To the Physicians and Surgeons of the city of Quebec and its vicinity, and to all that may contribute to improve and promote the cause of Medical Science in Canada—*Vole, mon cœur vole*; To the memory of John Hunter and the Medical Institutions of Great Britain—*National March*; To the memory of Xavier Bichât, and the Medical establishments of France—*French March*; To the memory of Benjamin Rush and the Medical School of the United States—*Yankee Doodle*; To all the Charitable Institutions in Canada—*Canadian March*; To the Countess of Dalhousie, and the Canadian Fair—*Lady Mary Ramsay's Reel*; To Mrs. P. de Sales Laterrière and her family—*Canadian Air*; The Board of Examiners, May it continue to be composed of men who will always have at heart the respectability of the Profession in this Country—*Canadian Country-dance*; To the Hôtel-Dieu of Quebec, an Asylum for the Indigent sick. May it also become the Asylum for Medical Science in Canada—*Canadian Air*; To the Emigrant Hospital—*St. Patrick's Day in the Morning*; and to The Quebec Medical Journal (just launched)—*A la claire fontaine*, proposed by the Guest and responded to by Dr. Xavier Tessier.

In this list we may literally find a resumé of the activities of the Canadian profession to this point and of the aspiration of those of its members then resident in the town of Quebec. It forms a fitting introduction to the next chapter in our story, namely the origin of the Montreal General Hospital and the birth in that city of Medical Education in Canada.

**Pioneer Physicians and Medical Activities in the early Nineteenth Century.**—Before entering upon the splendid piece of executive work at Montreal that first established an organized system of medical education in Canada and incidentally saved the bequest of James McGill to his University through its historic Medical Faculty, it will be well to gain an idea of the trend of events and especially of the personnel of the profession in the immediately preceding decades. Since the time of the conquest practically none of the qualified medical men practising in Canada had been of Canadian origin. With the birth of the century, however, and under the encouragement given to the better class of physicians by the enforcement of the Act of 1788, a new generation had arisen of Canadian (and in a number of cases American) born practitioners, who had received their preparatory instruction through apprenticeship to a local surgeon or physician of standing and had thereafter qualified for the Provincial license, either by passing an examination before one of its District Boards or by travelling abroad and obtaining a degree or diploma from a British or Continental University or from one of the newly organized licensing Societies or Medical Schools of the neighbouring United States. To these native-born practitioners were added a few highly-qualified British surgeons who had settled in the country after the war of 1812, and who played an important part in elevating professional standards and in formulating that demand for higher medical education which found repeated expression in the organization of private medical courses both at Quebec and Montreal prior to the establishment of the Montreal Medical Institution in 1823.

A survey of the "Licences to Practise Medicine" and the attached certificates filed in the Dominion Archives under the years 1792-1841, supplies interesting biographical data on many of these early licentiates and contributes considerably to our knowledge of conditions in these formative years. A few extracts must suffice.

In 1792 licences to practice as surgeon and apothecary were granted after examination to *Simon Fraser* of Terrebonne and to *Joseph Horne* in Quebec, as also in 1795 to *Jean-Bte. Ménard* and *Francis Rieutord* of Trois Rivières, the latter without examination on the basis of a doctor's degree obtained by him at Queen's College, New Brunswick, N.J. Also in the District of Montreal in the latter year to *Henry Monro*, who had "served a regular apprenticeship to Dr. George Selby of that city"; and to the famous *Daniel Arnoldi*, whose certificate is dated June 18th of that year, and bears the signatures Charles Blake, R. Sym and John Rowand, witnessed by James McGill. Arnoldi's influence upon the professional life of the next twenty years both as a member of the Board of Examiners for Montreal and otherwise was immense, and he became the first President of the College of Physicians of the Province on its organization in 1841 (Fig. 10). His address in 1819 in Montreal was 4 Place d'Armes. He died in 1849.

In 1798 *Thomas Hutton* of Quebec stated that he had had a regular University education in England and presented certificates from Surgeons' Hall in London, which were duly accepted in lieu of examination. So also in 1800 *John Adam Duff*, who had been assistant-surgeon in the Specht regiment and had practised for many years in the vicinity of the Baie du Febvre, enclosed a petition on his own behalf from the inhabitants of that parish, and was granted a license with exemption from examination on the ground of his military office and of the fact that, "being a native of the Roman Empire", he did not understand the language sufficiently to answer creditably.

In 1801 a licence to practice physic as well as surgery was granted after examination by the Quebec Board to *François Blanchet*, whose petition tells of his having "studied medicine and its collaterals under Dr. James Fisher of this city and of having with his and Dr. Nooth's advice, gone through a regular course of Medical and Philosophical Lectures delivered in Columbia College in the State of New York by Professors appointed for this purpose." Dr. Blanchet was born at St. Pierre de la Rivière du Sud and was the most eminent French-Canadian physician of his time. He has been described as the pioneer in Quebec of medical education (Foucher<sup>(35)</sup>). He gave private lectures on chemistry, which were largely attended, at the Emigrants' Hospital and in 1823 he, with Drs. *von Iffland* (Fig. 11), *John Whitelaw* and others, established the Quebec Dispensary and lectured there on surgery, medicine, anatomy and physiology. After two years however the Dispensary was closed for lack of funds and this embryo attempt at a medical school in Quebec died with it. Dr. Blanchet also took an active part in the organization of the Quebec Medical Society in 1826, and he is said to have assisted Dr. Xavier Tessier in the publication of the Quebec Medical Journal in 1826-27. He was surgeon of the Quebec militia, and was long a member of the Legislature, where he did much efficient work and was the father of the first Education Bill in Lower Canada. (Fig. 12).

In 1802 the memorial of Abner Rice "of the township of Shipton in the Province of Lower Canada, Gentleman", tells that he was "regularly educated in the Practice of Physic and Surgery" at Burlington, Vermont, and prays for examination in Montreal. This was accorded and a licence granted as apothecary and druggist. He had a romantic story, for he eloped, as a medical student, with the niece of Bishop Hobart of New York and she rode pillion behind him all the way from Boston to Montreal. They lived at Boucherville until after his wife's death, when he removed with his large family to St. Andrews, Que., where he died in 1843. He was an enthusiastic Mason. One of his daughters, Amelia de Boucherville Rice, married at St. Andrews in 1824 Pierre François Chrétien de Les Derniers of Como, Que. Through her he became the great-grandfather of the late Dr. Francis J. Shepherd, Professor of Anatomy at McGill. (Fig. 17).



*D Arnoldi*

FIG. 10. DR. DANIEL ARNOLDI

at the time of his Presidency of the first Medical Council of Lower Canada in 1841. Below is his signature from a certificate signed by him in 1822 as a member of the Board of Medical Examiners for the District of Montreal, just before his commission was revoked in favour of the Medical Officers of the Montreal General Hospital.



FIG. 11. ANTHONY VON IFFLAND, M.D.  
Prominent Quebec physician who organized medical courses at the Quebec Dispensary in 1823. Republished by permission from the article by M. R. Charlton. *Annals Med. Hist.*, 1924, vi, p. 317. Paul E. Hoeber, New York.



FIG. 12. FRANCOIS BLANCHET, M.D.  
Active in the organization of the Quebec Medical Society and publication of the Quebec Medical Journal. Republished by permission from the article by M. R. Charlton. *Annals Med. Hist.*, 1924, vi, p. 225. Paul E. Hoeber, New York.

Other early licentiates admitted by examination were: In 1803 *John McLaughlin* of Terrebonne, who had served as apprentice for four years under Dr. James Fisher; this splendid Scotchman became later a chief factor of the Hudson's Bay Company in Oregon while this was still British territory, and did noble pioneer work there at a time when this was perforce a losing game. In 1804 *Ephraim Little* of Trois Rivières, a pupil for four years of two New England physicians; *Louis Amable Caseneuve*, who studied nine years under Dr. *Joseph Caseneuve* at Quebec; *John Horatio Ferris*, "regularly apprenticed in the art and mystery of physic" to *J. Johnson*, surgeon of Montreal; *William Barr* of Longueuil, apprenticed under the tuition of the President of the Medical Society of New York; and, in the District of Quebec, *Moses Nichols*, a member of the Medical Society of New Hampshire, as also *Henry Porter* who in 1805 held a diploma from the New York Medical Society, had taken the oath of allegiance to the King and had practised at Côteau du Lac for three years, "but had only latterly learned that it was necessary for persons legally authorized in the United States to be again qualified by the Medical Board in this Province". In the same year, licence as surgeon was granted to Dr. *George Carter*, a retired army-officer who succeeded Dr. Rieutord as physician to the Ursulines at Trois Rivières and long functioned as the competent physician of that locality; three of his sons were physicians. In 1806 *Samuel Holmes*, M.D., was licensed to practise physic in Quebec and *Benjamin Greene* in Montreal, where the latter was a member of the Examining Board from 1811 to 1814.

*Jacques Labrie* was the first French-Canadian doctor after the conquest to study abroad. He was apprenticed to Blanchet in Quebec, went in 1807 to Edinburgh whence he returned with a degree and received his Provincial licence in 1808. He settled in St. Eustache where he was active both professionally and along educational lines for over twenty years and wrote a History of Canada for use in schools which was so valuable as to have been bought by the Government but was unfortunately destroyed at St. Benoit in the rebellion of 1837. He died in 1831 and his daughter married in that year the gallant Dr. *Chenier* who fell in the battle of St. Eustache six years later.

The story of Peter Diehl who got his licence in 1809 has been told above. *Joseph René Kimber* and his friend *Wolfred Nelson*, whose names are so closely associated with the rebellion, were licensed in 1810 and 1811. Kimber was born in 1786 and practised at Trois Rivières, where he officiated on behalf of the Board of Health for the treatment of sick aliens for over twenty years, and had two sons both of whom became physicians and patriots. In 1837 Nelson, though an English-speaking Protestant, warmly espoused the national cause and led the insurgents at the battle of St. Denis, where the British forces had to retreat. For a time he suffered political banishment, but on his return was elected to the mayoralty of Montreal and also sat in the Lower Canadian Assembly. *François Fortier*, born in 1788, studied under Dr. Fisher at Quebec and, with Drs. *Jos. Painchaud* and Blanchet, was a surgeon in the war of 1812. After passing for his Provincial licence in 1813, he obtained the M.R.C.S. of London and practised at Rivière-Ouelle and Quebec. *Daniel Robertson*, another M.R.C.S., and possessed of a certificate in Midwifery from the Westminster Lying-in Hospital signed by Andrew Thynne, M.D. was also admitted to practise in 1813 in the District of Quebec.

The most important English-Canadian physician in Quebec at this period was *Thomas Fargues*, M.D. who obtained his licence in January 1814. His petition describes him as a Canadian and states that he had studied for some years in London and Edinburgh, and a copy of his degree from the latter University is attached. Although not resident in Montreal, his high professional standing earned him the appointment of Professor of Medicine at the University of McGill College in 1823, when it had become necessary for legal purposes to appoint a teaching-staff, and he retained this (purely nominal) position until his replacement by the officers of the Montreal Medical Institution in 1829. He was also a mem-



ber of the Board of Examiners for the District of Quebec from 1817 to 1834, and was President of the Vaccine Board at its organization in 1821, in which offices he was associated with Drs. *William Holmes*, *William Hackett*, *Joseph Painchaud* (who received his license in 1809), and *Joseph Morrin*. Dr. Fargues was also for many years physician to the Hôtel Dieu of Quebec.

A license was given about this time to *Jean Charles Chevalier de St. Felix*, *Marquis de Crémant*, etc. who had graduated in medicine at the University of Montpellier many years before, and had been surgeon to the Royal Corsican Regiment and Inspector of Military Hospitals at Boulogne. He had come to Canada before the conquest, and only discovered his legal position when suit was taken against him. His certificate is signed by Charles Blake, Henry Loedel, James McGill and I. Ogden, of Montreal. In 1814 licenses were also granted in that district to *Alex. Burnside*, *William Wood* and *Antoine Marshall*, as also to *John Bartlett* of Compton and *John Weston* of Hatley; in 1815 to *Benjamin Trask* and in 1816 in the district of Quebec to *William Hackett*, M.D. surgeon of the 19th Regiment of Foot who became the chief officer of Health in charge of quarantine for the port of Quebec.

In the Montreal list of this year, 1816, stands the revered name of *Andrew Fernando Holmes*, known as the founder of the first Medical School in Canada (1823), who later became the first Dean of the Medical Faculty of McGill University. At the time of which we write he was nineteen years of age, having been born in 1797 at Cadiz, in Spain, where his parents had been taken as prisoners of war from a British vessel captured on its way to Canada. Arriving in 1801, the boy was given a classical education at Dr. Skakel's School in Montreal and in 1811 was articled to Dr. Arnoldi. This apprenticeship stood him in good stead, for on his examination by the Board he was granted permission to practise "physic" as well as surgery. Proceeding immediately thereafter to Edinburgh, he obtained in 1818 his diploma from the Royal College of Surgeons there, and in 1819 the degree of M.D. from the University. Along with John Stephenson, his friend and later his life-long co-worker in the McGill Medical School, he studied also in London, Paris and Dublin. In 1818-19 too, he was made member and then Extraordinary Member of the Royal Physical Society and in 1820 a non-resident member of the Wernerian Society of Natural History of Edinburgh. Holmes began practice in Montreal about 1820 and during his first five years was in partnership with Dr. Arnoldi. He was an untiring worker both in his profession and in the kindred pursuits of botany and mineralogy, and brought back with him to Canada as the fruits of early labours in the field of natural history an extensive herbarium of the flora about Edinburgh as well as a collection that formed the nucleus of the large Holmes Collection of Minerals which may be seen today, labelled in the donor's own hand, in the Redpath Museum at McGill. Also, in the first two years after his return, he made a collection of some 500 plants representing the entire flora of the vicinity of Montreal, which is preserved in the Redpath Museum together with a printed catalogue of the "Canadian Plants in the Holmes Herbarium at the University of McGill College", prepared and published in the *Canadian Naturalist* for 1859 by Dr. *James Barnston* a brilliant early graduate of McGill. The full extent of Holmes' later professional educational and scientific activities cannot be discussed here. Suffice it to say that, as early as 1822, he and Stephenson were giving systematic courses of medical lectures at Montreal, the former in chemistry at Dr. Skakel's school and the latter in anatomy and physiology at the newly-established Montreal General Hospital; and Holmes was probably the first Canadian medical author after Sarrazin and Gaultier, whose writings have come down to us as being of actual scientific value. Scattered through the contemporary journals of the middle nineteenth century are many articles by him, written in a polished style and classic English and based on such an accurate and discriminating observation of facts as to make them of permanent value today. On the retirement of Wm. Robertson in 1842 Holmes was made Professor of Medicine in his place and from 1853

to 1856 he was President of the College of Physicians of Lower Canada. He died in harness in 1860 and his students at McGill erected a marble tablet in their College halls to his honour, while in 1864 the Faculty established the Holmes gold medal in memory of their late Dean, "than whom no man ever lived more conscientiously and few have died more beloved."<sup>(36)</sup> (Fig. 13a).

The life of *John Stephenson* (Fig. 13a) is so closely interwoven with that of his friend and colleague that it will be best to consider it briefly here, although he did not apply for his license until the autumn of 1821, after he had returned from his four years abroad with the degree of M.D. from Edinburgh and the Fellowship of the Royal College of Surgeons of London. He too was born in 1797, but in Montreal, and was thus a native Canadian. He was articled under William Robertson of that city who endorsed the deed of apprenticeship on July 15th, 1817, with the statement that he had served "with the utmost integrity and honour and neither spared pains for his own improvement or my interests". In this year Stephenson joined Holmes in Edinburgh where he took his M.D. in 1820, having passed his London examination in 1819. He carried on a very large practice as a surgeon in Montreal from 1821 until his death in 1842; and throughout his life he did yeoman work on behalf of medical education and the two institutions he loved so well, the Montreal General Hospital and the McGill Medical School. Throughout the early struggles for existence of the Montreal Medical Institution he acted as its Secretary and he formulated its Constitution and the various appeals made to the Government on behalf of it and the Medical Faculty, and to his untiring energy and personal influence is ascribed, on reliable authority, the recovery of the Founder's estate; so that, in the words of his contemporary the Hon. Peter McGill, he is literally to be described as "the man above all others to whom we owe McGill College".

In the year 1817 the certificate appears of another of the four founders of the McGill Medical School, namely Dr. *William Caldwell*, who had been a surgeon in the 13th regiment of Dragoons and was a veteran of the Peninsular war. He was born in Ayrshire in 1782 and held the degree of M.D. from the University of Edinburgh. In 1819 he moved from St. Andrews, Que., to Montreal, residing, as the first local Directory shows, at 17 St. Jacques Street. At this time he fought his famous duel with a Mr. O'Sullivan who opposed the petition presented by the "Inhabitants of Montreal" to the Government on February 19th, 1819, for a public hospital. Caldwell was physician to the Montreal General Hospital from its inception and he was the first lecturer on the Principles of Medicine at the McGill School, and was a member of the Board of Examiners from 1824. He was active in the discharge of these duties until his death at that Hospital from typhus fever in 1833. All we learn of him shows that he was a gallant Christian gentleman. He is described by his apprentice, Dr. A. H. David,<sup>(37)</sup> as being tall and of military bearing and stern appearance but with a very tender heart.

Licenses were also given in this year to the surgeons *William Fraser* and *William Pardy*, both having the M.R.C.S. of London, the latter living at Chambly; and to *A. H. Christie* M.A., a surgeon of the British Navy, who added to his professional duties those of Editor of the Montreal Herald. He addressed an appeal to the Government for a Protestant Hospital in Montreal in the year 1817, and was a member of the Medical Board of the first Montreal General Hospital established on Craig Street in 1819. He appears to have been the progenitor of the physicians of this name at Lachute in the next two generations, for in 1820 he petitioned the Legislature for a grant of 2,000 acres from the unconceded Crown Reserves on the East River in the rear of the Seignory of Argenteuil, as he was resigning his avocation (as Editor) on account of ill health and had a large family.

*Dr. Alexander Calvin* was born at Uxbridge, Mass., and served his apprenticeship there. Toward 1799 he came to Canada and practised at Trenholme's Mills and after 1810 at Nicolet. He obtained his provincial license in 1818, and married in 1832 the widow of Solomon Whitney of Kingsey. He died in 1853. He is one

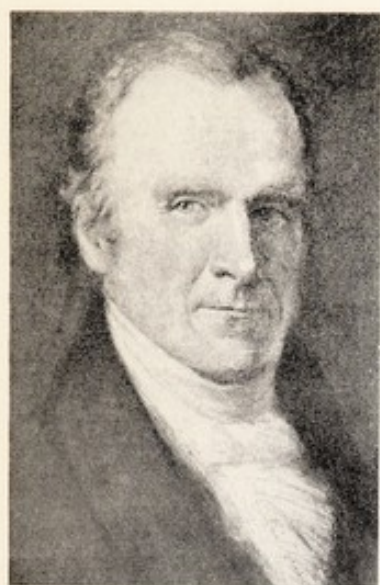
of a number of American physicians who migrated to the Eastern Townships in the early nineteenth century, among whom may be mentioned *Abraham Perkins Silver*, a native of Boston who graduated at Harvard in 1795, and in 1803 settled in the old township of Shipton, where he practised for over fifty years. Others in this part of the country were, Dr. *John Brown Chamberlin*, a native of Vermont, who got his license in 1807 and settled at Frelighsburg; *William Fowler*, a graduate of Edinburgh, and *Richard Norris Webber* of Harvard University, both leading practitioners in the Richmond district over many years; *Charles E. Cotton*, an M.D. of Jefferson College, Philadelphia, at Cowansville; *Dr. White*, an Edinburgh graduate practising at Dunham, and Drs. *Butler*, *Brigham*, *Stowe*, and others in Missiquoi, Shefford and Brome. Their story has been told by Dr. W. H. Drummond.<sup>(38)</sup> It belongs to the middle part of the century, as does that of the great statesman *Sir Etienne Paschal-Taché*. The latter was born in 1795 at St. Thomas de Montmagny and commenced his medical studies under Laterrière at Quebec, then took a degree in the United States and his provincial license in 1819. In his earlier life he was a great patriot and a close friend of Papineau, and was deputy for L'Islet in 1840. Later he embarked on a distinguished political career, becoming Minister of Public Works in 1848 and first Premier of Lower Canada in 1856. He was knighted in 1858 and made aide de camp to the Queen with the title of Colonel of the regular army in 1860; in 1864 he formed the Taché-MacDonald ministry and in 1865 presided at the conferences preparatory to the establishment of Confederation. He died that July just two years before the consummation of the Dominion in 1867. Another medical man who won distinction at the Bar in the middle 19th century was the Hon. Mr. Justice *Ruggles Church*, Q.C., who graduated in medicine from McGill at the head of his class in 1868, but subsequently qualified as a barrister and became Attorney General of Canada and Judge of the Queen's Bench. Twelve other members of the Church family graduated in medicine from McGill and practised in Quebec.

In 1820 we find the petition for a license of *F. Xavier Tessier*, who had studied under Dr. von Iffland of Quebec and had taken his degree at a New York college. His name will live with posterity as the able editor of the first medical journal published in Canada, *the Journal de Médecine de Québec*, published in the two languages, with a double title-page in French and English (*Quebec Medical Journal*). This interesting periodical, which is a highly creditable contribution to contemporary medical journalism, was issued quarterly and aimed at giving a retrospect of the more important recent medical literature as well as original communications from local sources and information on current topics,—ideals which it amply fulfilled. Unfortunately it was only kept up for the two years 1826 and 1827, owing to lack of financial support. In a modest yet far-seeing preface the editor refers to the new institutions\* "that have recently arisen among us, which lead us to hope that the time is not far distant when the medical student will find the means of acquiring in his native country the knowledge which will one day be the guardian of its health of his fellow citizens". Dr. Tessier did other public-spirited work in helping to found the Quebec Medical Society in 1826.

In 1822 the license was granted to another young Canadian, *J. B. C. Trestler*, who followed in the footsteps of Stephenson and Holmes, taking the degree of M.D. at Edinburgh, and also studying in London and Paris. He was born in Montreal and served his early apprenticeship in that city. In 1823, *Archibald Rae* an Edinburgh graduate who settled at St. Andrews before 1826 and was the grandfather of the late Mrs. Hugh Allan of Montreal, *Peter Osborne* and *Michael McCulloch*, the latter an M.R.C.S. of London and later Professor of Midwifery at McGill, were admitted to practise.

In 1828 licenses were granted to two distinguished Edinburgh graduates, *Pierre Beaubien* (Fig. 38), later Dean of the Laval in Montreal Medical School, and *William Robertson* (Fig. 13a), who was a member of the Montreal Board of Examiners from 1817 on, and complied with a regulation that was in his case a mere

\* Referring doubtless to the newly organized Montreal Medical Institution.



WILLIAM ROBERTSON  
1784-1844



JOHN STEPHENSON, M.D.  
(1797-1842)



ANDREW F. HOLMES, M.D., LL.D.  
1789-1860

FIG. 13. (a) PORTRAITS OF THREE OF THE FOUR FOUNDERS OF THE MONTREAL MEDICAL INSTITUTION from oil paintings in the possession of the McGill Medical Faculty. Reprinted from "An Historical Sketch of the Origin of McGill University" by M. E. Abbott, Gazette Printing Co., 1902. The portrait of Dr. William Caldwell (1782-1833), the fourth "Founder" of the McGill Medical School, has been omitted.

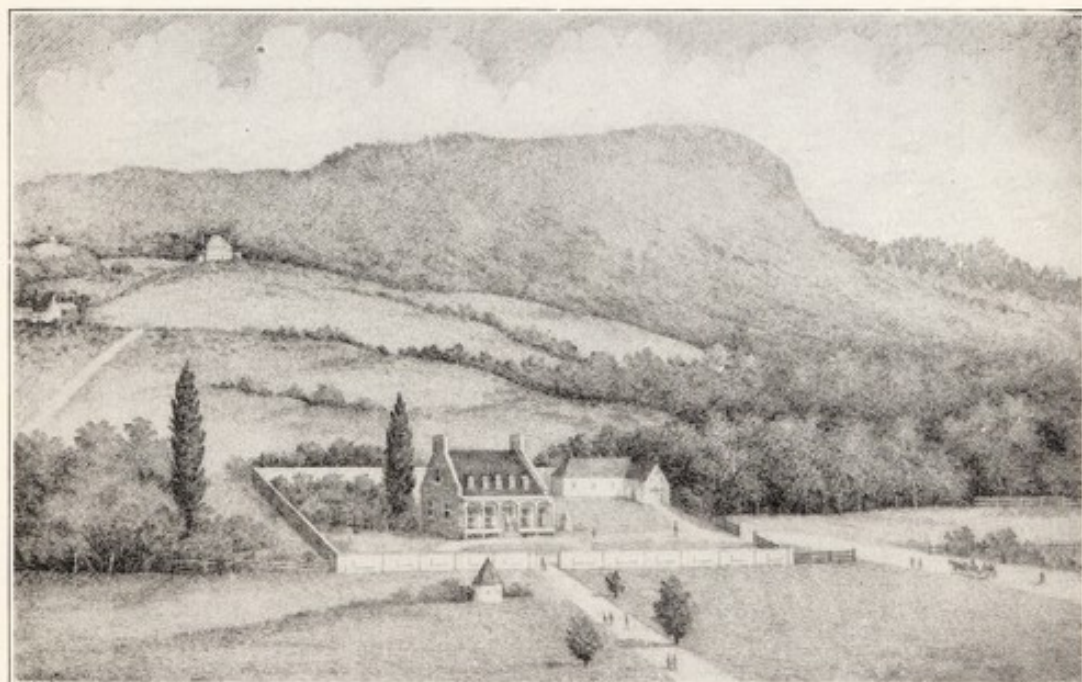


FIG. 13b. BURNSIDE HOUSE

at one time the country residence of the Hon. James McGill and the place where, on June 29, 1829, at the first meeting of the Governors of McGill University, the Montreal Medical Institution was "engrafted upon" that University as its Medical Faculty. It stood at the corner of the present Burnside Place and McGill College Avenue, Montreal.

From a water color sketch by W. B. Lambe, Esq., in 1842.

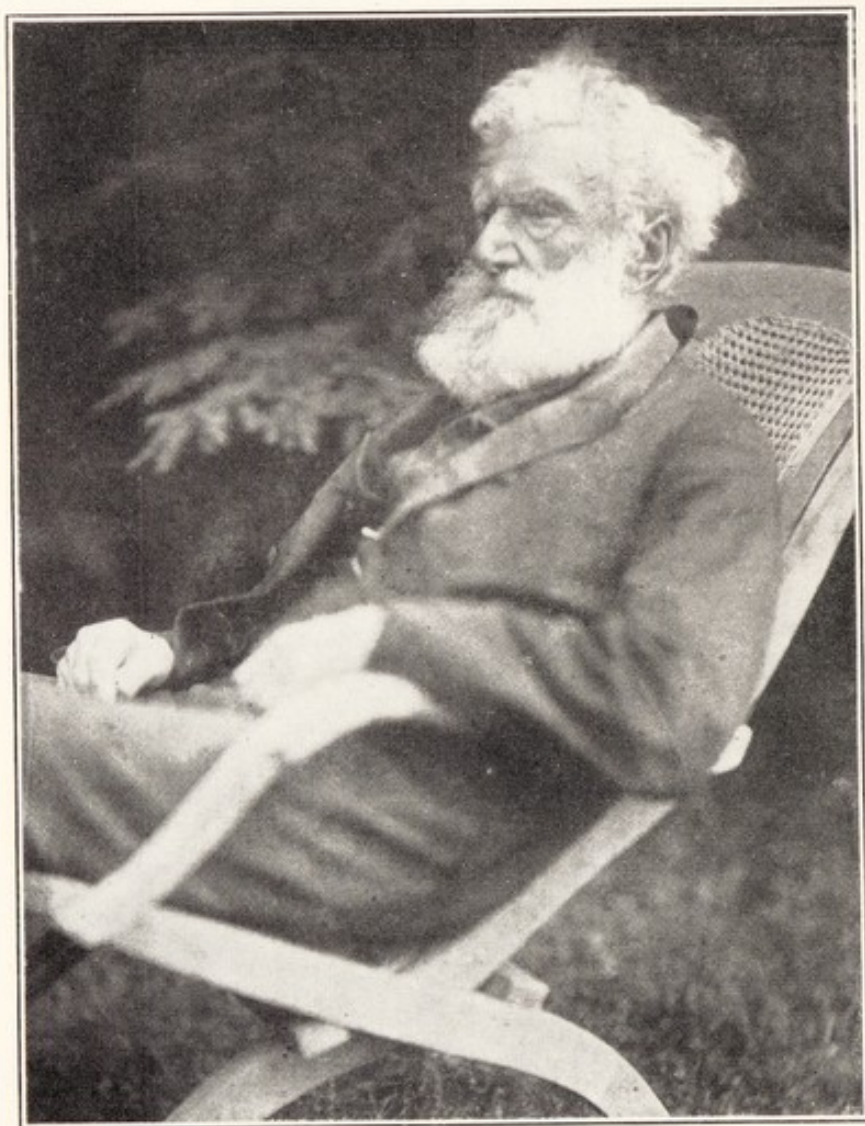


FIG. 14. JAMES DOUGLAS, M.D. (1800-1886).

Pioneer of medical education in Quebec City and Founder of Beauport Asylum.

formality. This eminent surgeon has been called<sup>(39)</sup> the Nestor of the famous quartette of physicians who formed the first medical staff of the Montreal General Hospital. He was born in Kindrochet in Perthshire in 1784 and came to Canada in 1808 in the service of the 49th regiment and was in action in the battle of Queenston Heights in the war of 1812. In 1815 he retired on half-pay and settled at Montreal where he took a leading part in the epoch-making developments in medical education of the next fifty years. In 1829 he was made the official head of the new Faculty of Medicine of the University of McGill College.

Dr. *James Douglas*, the "grand old man" of Quebec of his generation, was not only a distinguished surgeon and anatomist and active in medical education and public health in that city during the first half of the nineteenth century, but he was also a pioneer in the Province in the humane care of the insane, and founded in 1845 with the help of Drs. Fremont and Morrin, Beauport Asylum. His autobiography edited by his son the late Dr. James Douglas<sup>(40)</sup> of New York, although fragmentary, being written after the age of seventy, is an extremely valuable contribution to medical history, in that it yields an illuminating glimpse of contemporary conditions both at home and abroad and is also a charming character-sketch of his own rugged yet benign personality in the manifold vicissitudes of an extraordinarily diversified career. Born in 1800 in the vicinity of Aberdeen, of Scottish parents deeply imbued with the then new teachings of Wesleyanism, he served a five years' apprenticeship under Dr. Thos. Law in Penrith, Cumberland, and entered Edinburgh University in 1818. Here he came under the influence of the great surgeons Robert Liston and Syme and was the fellow student of Holmes and Stephenson. He obtained his M.R.C.S. there and also that of London early in 1820, and in the latter city studied at Guy's and St. Bartholomew's Hospitals under Abernethy and Sir Astley Cooper. Now followed some adventurous years. He had already in the summer of 1818 penetrated to the far north as surgeon on an Arctic whaler and now he fought the cholera at Dumdum near Calcutta and did service as a ship's surgeon off the Cape of Good Hope. In 1822, he gave up an appointment in the Bengal Presidency to take medical charge of the Poyais settlement in Honduras, a project that proved to be fraudulent, the unfortunate colonists dying like flies of fever and Douglas himself arriving at Boston in 1823 almost moribund. Circumstances early in 1824 brought him to Utica, N.Y., where he married, and in the autumn of that year was appointed lecturer in anatomy and surgery at the near-by Medical College of Auburn, N.Y., setting up a dissecting room for the use of his students in the attic of his own house. His services in this regard brought him an honorary M.D. from the "Berkshire Medical Institution" of Williams College, N.Y., in the following year, but was also the occasion of his abrupt removal to Quebec as the result of a body-snatching episode. He arrived there with his young wife on March 13th, 1826, in a horse driven sleigh by way of Montreal, where his old classmates Holmes and Stephenson encouraged him to believe that a good future awaited him in Canada. He accordingly took out his provincial license that summer and leased his "Mountain Hill" house, in the cellar of which he began lectures and demonstrations on anatomy. The following year (and for many years after) he continued his teaching in a small house given him for the purpose by Dr. Painchaud on condition that he and his son might have free admission. In 1828-29 he nearly died of typhus and was pulled through by *Dr. Hugh Bone*, an able Edinburgh graduate practising in Quebec. His surgical technique and tropical experience quickly brought him an immense practice and the latter was of great value to the city in the awful cholera epidemics of 1832, '34 and '49, and in the outbreaks of typhus that swept the city; he was accordingly appointed to the surgical and medical charge of the Marine and Emigrant Hospital on the reform of that institution in 1831, sharing the care of the fever patients with Dr. Painchaud, and for many years thereafter this hospital, which had been the scene of Dr. von Iffland's early medical courses, is said to have been a school of practical surgery unequalled on this continent. In the summer of 1846, after recovering from a severe blood-

infection, Dr. Douglas took into partnership *Dr. Racey*, a brilliant Edinburgh graduate, and together they leased two buildings at Beauport for use as a private hospital in anticipation of the outbreak of typhus which was likely to attend the large Irish immigration expected the next Spring. Here during the summer of 1847, no less than 146 typhus patients were treated along rational lines with scrupulous cleanliness, good nurses, ample ventilation, tepid baths, diluent drinks, etc., with only four deaths. The strain of his arduous professional duties and possibly the effect of his early adventures told upon an otherwise robust frame and in 1849, after having shared his practice rather unsuccessfully with *Dr. John Rowand*, Dr. Douglas retired from active practice. He spent much of his later life in foreign travel in Europe and Palestine, and died at the house of his son in New York at the age of 86. (Fig. 14).

In the same year, 1826, licenses were granted after examination in Montreal to *Oliver T. Bruneau*, who had studied under Barnabé Gosselin and whose petition is written in French, and to *Francis Badgley*, who had served a three years' apprenticeship to Dr. William Robertson; also in 1827 to *Francis T. Arnoldi*, the distinguished son of Dr. Daniel Arnoldi, and *E. B. O'Callaghan*, apothecary to the Montreal General Hospital, whose certificate reads that he had followed its practice and "had attended two full courses of lectures at the Montreal Medical Institution". Dr. Bruneau was Professor of Anatomy at McGill, succeeding John Stephenson, from 1842 until his death in 1856. Dr. Badgley established a rival school of medicine to McGill in Montreal in 1842 and in 1844 with Drs. MacDonnell and William Sutherland edited the first medical journal published in that city, the *Montreal Medical Gazette*. Dr. O'Callaghan was a brilliant young Irishman who took active part in the rebellion of 1837 and fell in the battle of St. Eustache.

**Origin of the Montreal General Hospital.**—The account given above of the licentiates and other pioneer physicians in the first three decades of the nineteenth century has carried us a little in advance of our subject. To get a coherent idea of the sequence of events in the important development that took place in Montreal in the later years of this period, we must retrace our steps a little, to the day of small things when the foundations were laid, through great difficulties and at the cost of much personal labour and sacrifice, of those two great institutions which have played such an important part in the making of modern medicine in this province and in Canada as a whole, the Montreal General Hospital and the Medical Faculty of McGill University.

Montreal in the year 1816 was a thriving little city of some 15,000 inhabitants. The only institutions for the care of the sick poor were those founded two centuries earlier under the French Régime, the brave old Hôtel Dieu for general cases, and the "Grey Nuns" (Hôpital Général of Frère Charon) where the mentally afflicted were received; and the only facilities for higher education were in the Seminary of the learned Sulpicians. But the city, fresh from the war of 1812, was alive with the stir and discipline of British military life, and the attempts to meet the growing needs of this new element in the population made themselves felt on all sides. Several causes contributed to the distress of the poorer classes of the population, which existed in the towns both of Quebec and Montreal at this time in spite of the general prosperity of the inhabitants. The tide of immigration, which had almost stopped during the years 1812-15, had set in after the cessation of the war with renewed vigour. Every succeeding summer, says a writer of the time<sup>(41)</sup> brought increased numbers of poor peasantry from England, Scotland and Ireland, who, arriving with empty pockets and bodies debilitated by the long voyage, were unable to find employment through the long and arduous winter, whose only resource was the scanty and precarious support supplied by promiscuous charity. In the year 1817, moreover, owing to the failure of the crops in the preceding summer, this depression became widespread, and so severe as to call for the help of the provincial Parliament. On January 20th, the Governor-in-Chief announced that he had been "obliged to make temporary

arrangements to secure the lower orders from the dreadful effects of famine" and on March 4th an Act for the Relief of the Poor by the loan of wheat and other grain was passed.

In the *Montreal Gazette* for January 27th, 1817, is an announcement calling the attention of the well-to-do public to the "Distress of the Lower Class of the People" which states that subscriptions are being taken "to alleviate those dreadful sufferings . . . for never were the cravings of indigence more acute nor immediate relief more required". It was to assist in the mitigation of such conditions that in 1816 a "Female Benevolent Society" was started in Montreal, to the energies of which the small beginnings of Montreal's first great civic charity, its English General Hospital, is to be directly traced. In the *Gazette* of February 24th appeared this now historic announcement, "Mrs. B. Gibb, as Directress of the Female Benevolent Society, begs leave in the name of that Institution to return its sincere thanks to the several gentlemen of the Faculty for the gratuitous advice and assistance which they have cheerfully and promptly afforded them when requested by any of its members. Many distressed objects have been relieved by their timely professional skill who have no other means of expressing their gratitude than by this public acknowledgment".

In the autumn of 1818, £1,200 was raised by philanthropic individuals and was used in establishing a soup kitchen placed under the superintendence of this Society, which soon however found itself crippled by the want of some adequate provision for the sick, and on its representation a small house of four rooms was rented for this purpose by the gentlemen constituting the Committee of the Soup Kitchen. By the exertions of Deputy Commissary-General Sir I. W. Clarke a quantity of condemned barrack bedding was obtained for the little hospital and the services of Dr. *T. P. Blackwood*, a retired army surgeon, Dr. *T. A. Christie* and others were secured. In the Third Annual Report of the Female Benevolent Society for February 17th, 1819, it is stated; "Thirty-seven invalids have been received at different periods during the last twelve months in the House of Charity rented in the Récollet suburb."

A petition "praying for the erecting and endowing of a Public Hospital in Montreal" had been presented to the House of Assembly by Mr. Molson on January 6th, 1819, but appears to have been laid on the table as a result of Mr. O'Sullivan's opposition, in spite of the facts it set forth, namely, that the Hôtel Dieu of that city only accommodated 30 patients and no longer admitted cases of fever, and that an establishment capable of containing 200 patients was desperately needed. This fact made the organized work that was already being carried on at the little "House of Recovery" of prime importance. "For", to quote from the same contemporary writer,<sup>(41)</sup> "from the expenses of this miniature establishment the sum required for the whole population of the city could be estimated; and, from the charitable response to the appeal made the previous autumn, the amount of financial assistance that might be obtained from a more extended campaign might be inferred". Accordingly, a somewhat larger house, accommodating 24 patients and three wards, was leased and equipped, the necessary appointments made—these including a medical staff of "four professional gentlemen" one of whom (John Stephenson) acted also as house-surgeon—and on May 1st, 1819, the sick from the "House of Recovery" were removed to it. *To this building, which was situated on Craig Street, the name of Montreal General Hospital was first given*, and here regulations were made for its conduct under this title and quarterly reports issued, until May 1st, 1822, when the present hospital building on Dorchester Street was thrown open and the inmates of the Craig Street house were transferred to it with all the staff and equipment. The cost of this new Hospital was £5,856, of which £2,167 was subscribed by the public-spirited citizens of Montreal on the spot, and the balance formed a debt which was entirely paid the following year by the Hon. John Richardson, who presented it to the Directors as "a splendid building appropriated for the relief of the distressed poor, on such a scale as the population required, free from all



encumbrance". At this time it consisted of only its present massive central block of three stories surmounted by a cupola; the East (Richardson) wing having been added in 1831, and the West (Reid) Wing in 1848. (Fig. 15a and b).

What this fine old charity meant to the then inhabitants of Montreal may be partly gauged from its early quarterly Reports, published in the *Quebec Medical Journal* of 1826. From these we see it was in very truth a "public" hospital in that, although it had been erected by funds subscribed chiefly from Protestant sources, it ministered equally to both elements of the population, the Catholics indeed sometimes predominating, as in the quarter ending October 25th, 1825, when of 201 indoor patients 66 were Protestants and 135 Roman Catholic, and 246 outdoor, of whom 88 were Protestant and 158 Catholics. Doubtless the Irish immigrants helped to swell the latter figure, but the French population were also largely represented.

**The Montreal Medical Institution and the Medical Faculty of McGill University.**—From the first, thanks to the insistence of its first Medical Board, Drs. Holmes, Stephenson, Robertson and Caldwell, with later Dr. Henry P. Loedel, it was clearly formulated that the hospital was to be used as the actual headquarters of a medical school and for the instruction of students, who were to be admitted, following the example of Edinburgh, freely to the wards for clinical teaching and study. That this was understood as far back as 1819, is evident from the words of Dr. *Charles Perrault* of Quebec, speaking in the House of Assembly in support of Molson's motion "for the establishment of a public hospital at Montreal". He said, "Independent of the good which must result from the establishment of a well-regulated Hospital to humanity at large, another no less important object is obtained by establishing in such an institution a school for teaching the healing art in all its branches."

Events moved rapidly in the hands of these four enthusiasts. Already on August 9th, 1822, three months after the opening of the new Hospital building, Dr. Stephenson advertises in the *Gazette* that he will begin lectures there on anatomy and physiology on October 1st, and in surgery on March 1st following and adds, "N.B. It is in contemplation to give during the 12 months, lectures on other branches of the Profession. For fuller particulars apply to Dr. Stephenson at the house adjoining the hospital". The organization of the Montreal Medical Institution itself followed promptly. The minutes of this important departure have fortunately been preserved at McGill, and were republished in full by the writer as an Appendix to an article on the origin of that School<sup>(2)</sup> and from them the following brief account is abstracted.

On October 20th, 1822, at a meeting of the medical officers of the Hospital held "to consider the expediency of establishing a medical school in this city," "Drs. Stephenson and Holmes were deputed to draw up the considerations that seemed to warrant such an endeavour at this Hospital". This document was accordingly, with an outline of the proposed curriculum, submitted to the same Board the following week (Oct. 27th) and approved. Its opening words are historic and may be quoted here, as also the interesting references in it to the Edinburgh School and to the important part which the new Institution was to play a few years later in the stabilization of the infant college of James McGill, in both of which the vision of its Founders is clearly manifested.

"The Medical Officers of the Montreal General Hospital, having seen the great difficulties which the student of medicine in this country has to encounter before he acquires a competent knowledge of his profession; knowing the great inconvenience resulting to many from the necessity at present existing of spending several years in a foreign country to complete a regular medical education, and being convinced of the advantage which would result from the establishment of a medical school in this country, and considering that the Montreal General Hospital affords the student a facility of acquiring a practical knowledge of Physic never before enjoyed in these Provinces, an advantage which will be greatly enhanced by the establishment of lectures on the different branches of the pro-

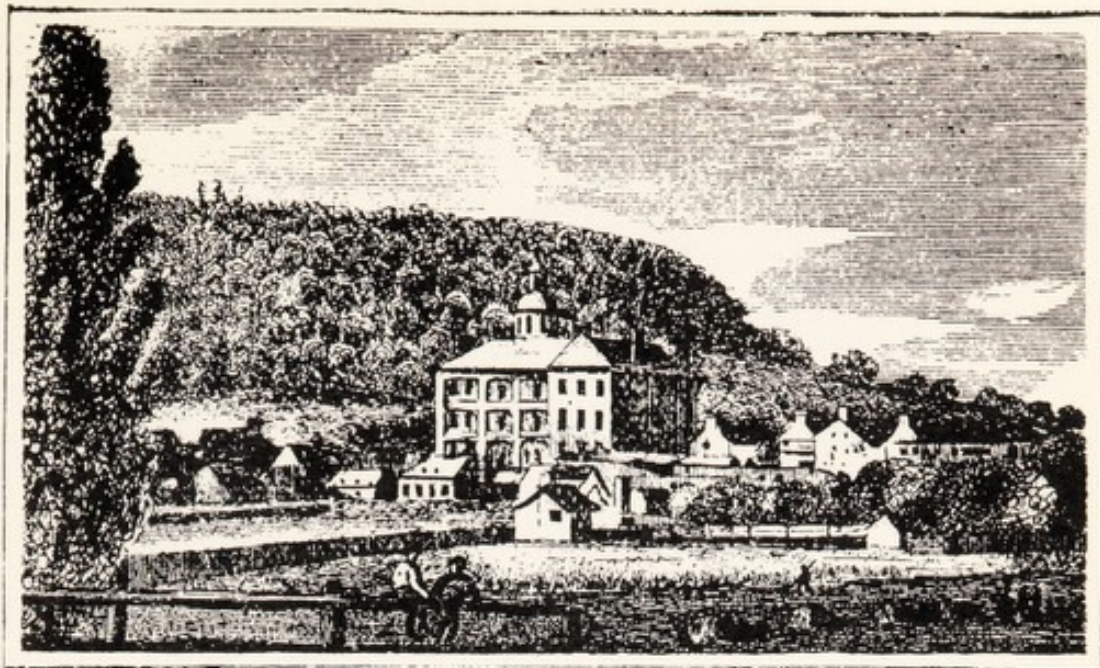


FIG. 15a. THE MONTREAL GENERAL HOSPITAL IN 1831,  
seen from the rear, showing the central building erected in 1822 and the Richardson wing, before  
other additions had been made. From *Hochelaga Depicta*. William Greig, Montreal. 1839.

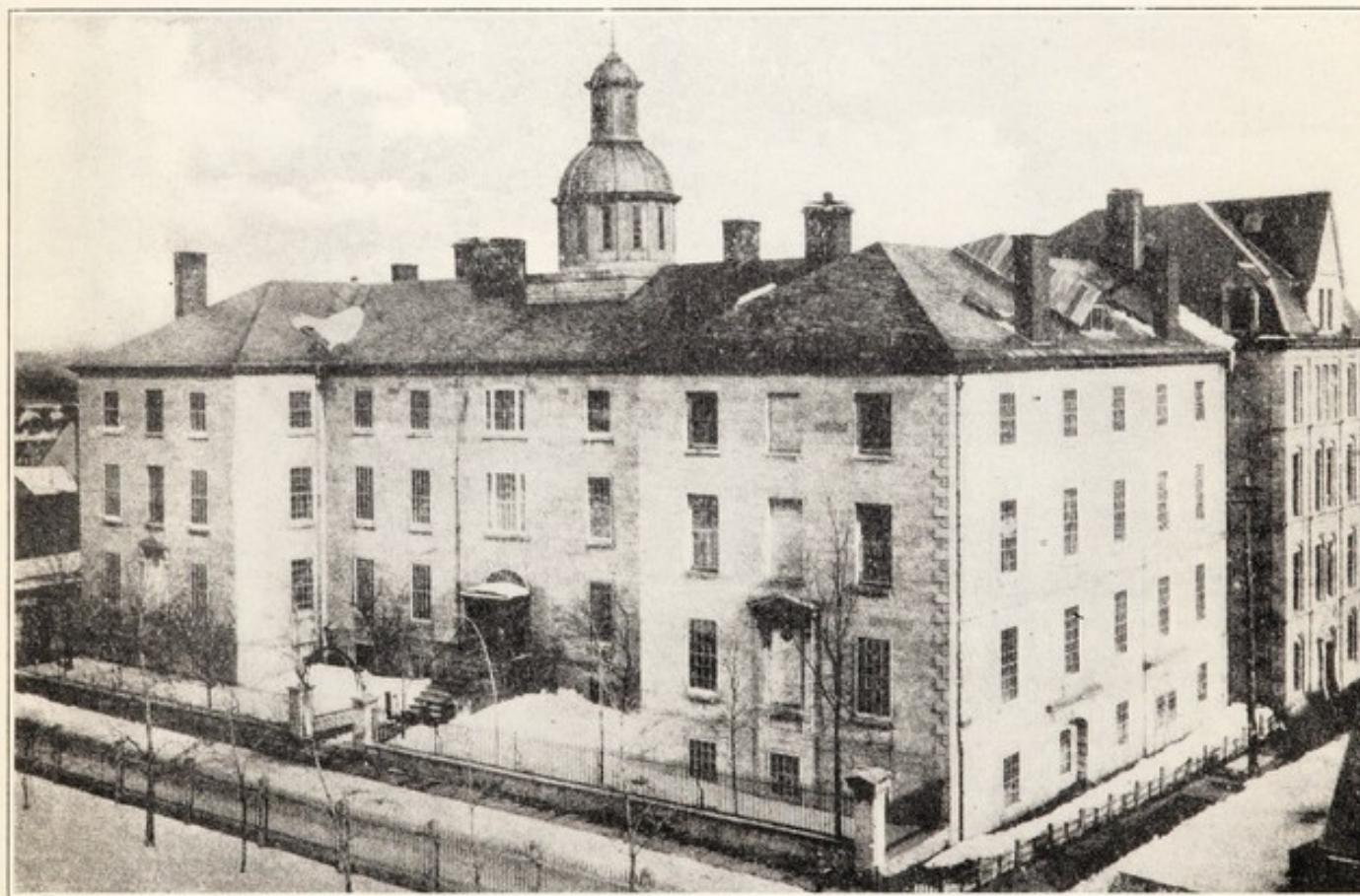


FIG. 15b. THE MONTREAL GENERAL HOSPITAL IN 1881  
as it was at the time of Osler's service there, showing the central block with its cupola and sloping roof, as erected in 1822, and  
the Richardson and Reid wings, erected in 1831 and 1848, on either side and the Thomas Morland wing behind.

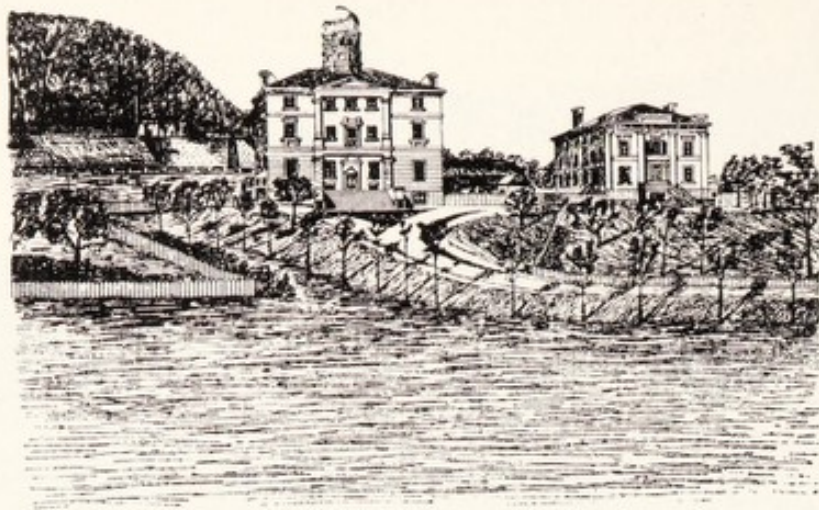


FIG. 16a. THE FIRST BUILDING OF MCGILL UNIVERSITY  
erected for its Faculty of Arts in 1843 and occupied by the Medical Faculty  
1845-1851. To the right is the residence of the Principal and Bursar at that  
time. These two buildings are still in existence.



FIG. 16b. THE FIRST BUILDING OF THE MCGILL MEDICAL FACULTY  
IN THE UNIVERSITY GROUNDS

erected in 1872 and destroyed, with its extensions, by fire in 1907.

fession, have met to consider of the possibility of founding such an institution in this city. . . .

"They are further encouraged to attempt the formation of a medical seminary when they reflect that the medical school of Edinburgh, the basis of which they would adopt for the present institution, now justly considered the first in Europe, is of comparatively recent formation, it being little more than one hundred years since the medical lectures were first delivered in that city,—and the early history of the Royal Infirmary of Edinburgh is not dissimilar to that of the Montreal General Hospital.

"In the event of the establishment of a classical and philosophical seminary in this city, the two institutions would be materially benefited."

On November 2nd, 1822, a copy of this Memorandum signed by all five members of the Medical Board of the Hospital was forwarded the Governor in Chief, Lord Dalhousie, by Dr. Robertson with a covering letter in which he suggested that in order to give the new Institution legal status, the Board of Medical Examiners for the District of Montreal should be reconstituted and made to consist of the Medical Officers of the Montreal General Hospital. In a later letter he pointed out that the only members of that Board still in the Province and active at this time were Drs. Daniel Arnoldi and Henry Loedel (whose coöperation had probably been secured as Arnoldi was the friend and preceptor of Holmes and Loedel the father of a member of the Hospital staff) and Robertson himself. Lord Dalhousie, whose enlightened attitude in educational matters was well known, in a letter dated Nov. 30th, 1822, expressed his complete approval of and sympathy with the movement and after some further correspondence agreed to the reconstitution of the Board of Examiners along the lines indicated. Accordingly, on Feb. 11th following he wrote Arnoldi and Loedel, explaining that the omission of their names from the new Commission he was about to issue was not to be attributed by them to any disapprobation of their services to the Board, but only to "considerations of a Public nature on new modelling the Board of Medical Examiners at Montreal so that it shall in future consist of persons holding diplomas or testimonials from Medical Institutions in Great Britain, of those who are at present Medical Officers of the Montreal General Hospital now about to be incorporated", and on Feb. 22nd he issued a Commission appointing "the said Wm. Robertson, William Caldwell, John Stephenson, A. F. Holmes and H. P. Loedel . . . any three or more of you" to be the sole Medical Examiners for this district.

This action of Dalhousie, while vital to the success of the young undertaking and undoubtedly a strong and sagacious policy on his part and dictated solely by motives of concern for the educational advancement of the Province at a time when standards were low and competition keen, was greatly resented by those members of the Profession who were rendered ineligible for such appointments by the requirement of a British qualification. In some quarters indeed this restriction became the ground for bitter opprobrium, which degenerated, in the radical "*Free Press*", into really scurrilous abuse both of Lord Dalhousie and the Medical Staff of the Hospital as well as of its public-spirited President, the Hon. John Richardson, whose consistent political stand on behalf of a protective tariff and union of the Provinces made him always unpopular with the extremists. High-handed and exclusive as this measure may have seemed at the time, it proved a singularly effective one, and to it must be ascribed in large measure the high standard and reputation attained by the McGill Medical School in the first fifty years of its existence; for holders of British diplomas were unquestionably the best qualified men in the country at this period, when there was little other immigration apart from that from the United States.

A delay of 18 months in the progress of the Medical Institution took place when, in the summer of 1826, at the instance of Lord Dalhousie, a form of proposed charter had been drawn up and submitted; objections were raised on the ground that the School was not associated with any "Seminary of Learning" and

that it had no endowment or foundation. After pleading in vain the similar beginnings of the Colleges of Surgeons of London, Edinburgh and Paris, the officers of the Institution memorialized the administration of Sir James Kempt and suggested, as a means of obviating their difficulties, "the appointment of the Members of the said Institution as Professors of the University to be established at Burnside, near that city, one of the Colleges of which is established by Royal Charter dated March 21st, 1821 and called the McGill College". This proposal came at the psychological moment also for the young University of James McGill; for, while the teaching staff of the latter existed as yet only on paper with a nominal appointment of five professors, it was now required to institute active educational work in order to meet the time limit of the Founder's bequest. Accordingly, after some preliminary correspondence between the two bodies interested, the memorable step was taken which gave the Medical Institution the necessary Charter and Foundation, and McGill an active and highly qualified Medical Faculty. This historic event took place at the first meeting of the Governors of "Burnside University of McGill College" held on June 29th, 1829 (Fig. 13b), when it was resolved by the Governors of the Corporation "that the members of the Montreal Medical Institution (Dr. Caldwell, Dr. Stephenson, Dr. Robertson, Dr. Holmes), be engrafted upon the College as its Medical Faculty, it being understood and agreed that, until the powers of the Charter would be altered, one of their number only should be University professor and the others lecturers; that they should immediately enter upon the duties of their offices. All of which arrangements were agreed to." (William Robertson being appointed the Professor, replacing Thos. Fargues.)

During the next twenty-five years, practically all the active work in McGill University was carried on by its Medical Faculty, which took a prominent part also, through its devoted Secretary, in the effort to terminate the protracted litigation with the heirs of the McGill estate. To this end on July 29th, 1833, the Governors passed a resolution "that the Medical Faculty be authorized to use all the means necessary to forward the suit now pending touching the ten thousand pounds bequeathed by the Honourable James McGill," and appointed Dr. John Stephenson University Registrar.

The Medical Faculty was also the active agent in obtaining the further legislation required for the conferring of the first University degrees. The first session in which the old Medical Institution functioned under its new guise as the Faculty of Medicine of McGill was that of 1829-30 and it opened with a good enrolment of students. On Oct. 29th, 1831, its members addressed a memorial to Lord Aylmer "respectfully suggesting the propriety of taking into your favorable consideration such measures as may give effect to the authority granted by Royal Charter to the Governors of the aforesaid College, of conferring Degrees and Diplomas on candidates applying after a regular course of academic studies and a successful examination before the Medical Faculty of said College", and pointing out "the difficult position of His Majesty's subjects studying Medicine in this Province in that they were forced, in order to obtain Medical Honours to go to Europe, an expense too great for many, or to the United States, where they are in danger of imbibing principles inimical to our Government and Institutions."

On November 7th following, the Solicitor-General advised that, under its Charter, the University must first receive the royal sanction of its statutes, before obtaining power to confer degrees. Two days later a copy of the "*Statutes Rules and Ordinances of the Medical Faculty of McGill University*", was presented at Quebec by Dr. Stephenson in person, and forwarded to London. The reply, received at Quebec on July 23rd, 1832, conveyed His Majesty's approbation of these Statutes and sanctioned the conferring of Professorships in the Faculty of Medicine on all four gentlemen recommended to him for this advancement. The first McGill degree was thus given in Medicine, and it was conferred upon *W. Logie* on May 24th, 1833.

The first lectures of this Faculty of McGill were given, as were those of its forerunner, the Montreal Medical Institution, at a small building on the upper side of Place d'Armes. About 1841 it removed to a house on St. George Street, and from 1845 to 1851, it inhabited the newly erected Arts building of the University (Fig. 16a). In 1851 ground was bought by it on Coté Street in the neighbourhood of the General Hospital and in the building erected there lectures were given from 1851 to 1872. In the latter year this Faculty for the first time occupied a home of its own on the University grounds, a square stone building, which stood in the position now occupied by the front part of the present Biological building, and was destroyed by fire in 1907. (Fig. 16b). Large extensions containing ample laboratory accommodation had been added to this building of 1872 in the years 1885 and 1901, but these also were badly damaged by the same fire in 1907. In 1910-11 the handsome Medical Building, designed to replace these and for the special accommodation of the administrative offices of the Faculty and its Library and Museum, was erected at a cost of \$450,000 donated by the first Lord Strathcona (Fig. 19). Ten years later, on the occasion of the centenary celebration of McGill, when that University became the recipient of \$4,000,000 from graduates and friends and \$1,000,000 from the Province of Quebec, the further sum of \$1,000,000 was granted by the Rockefeller Institution to the Medical Faculty. A special building housing the Laboratories of the Biological Sciences was accordingly erected by it in 1922, and a fine Pathological Institute in 1923.

**The Great Epidemics and the Development of Quarantine Regulations in Canada.**—The early history of the Montreal General Hospital, like that of its predecessors in the seventeenth and eighteenth centuries, the Hôtel Dieu and the French General Hospitals of Quebec and Montreal, is the lurid record of a gallant struggle with the awful epidemics of typhus and smallpox, that devastated and at times almost annihilated the inhabitants of Canada under both French and British rule. It was, as we have seen above, the inadequate provision for the pressing emergencies presented by the typhus epidemic among the Irish immigrants in 1817 that, more than any other single factor, called the English General Hospital into being, and on this altar two of its first medical staff as well as its first Matron laid down their lives, Henry P. Loedel dying of typhus "in the service of the Hospital" in 1825 and Dr. Caldwell in 1833. Just so, in an earlier generation, did the brilliant Jean François Gaultier and a score of devoted sisters yield up their lives in the combat of the same dread disease. To these fearful contagions, now only too familiar to the Canadians, was added, in the fourth and sixth decades of the nineteenth century the visitation of Asiatic cholera which took a yet higher death toll from the afflicted population and again taxed the resources of the new public Hospital of Montreal to the limit of endurance. It is in place therefore to digress here with a brief review, gleaned mostly from Dr. Heagerty's<sup>(6)</sup> splendid research on this subject, of the tragic facts involved and of the part which these played in the destinies of this country in the first three centuries of its existence.

As already mentioned, *smallpox*, introduced among the Indians between 1616 and 1620, had become practically endemic among this unfortunate people by 1635 (Lejeune<sup>(9)</sup>). Known as the "Indian plague", it never left them, but flared up in a succession of ghastly epidemics. The French settlers soon shared in the ravages of the disease, so that, in the epidemic of 1702-03, 3,000 deaths from smallpox alone occurred in the town of Quebec, representing about one-fourth of its inhabitants, and in 1755-57, known as the years of the great smallpox epidemic of Canada, there were 2,500 sick in the Quebec hospitals at one time, of whom one-fifth died. After the conquest the disease broke out in 1783 with fresh virulence, eleven hundred dying of it in that year in Quebec city. The introduction of vaccination in the first decade of the century was eagerly welcomed and a Vaccine Board was formed which was reorganized in 1821 under the leading physicians of Quebec with a grant of £1,500 for appointments, and

a brochure describing the technique was published and officially circulated. Small-pox was re-introduced from infected ships in 1830, 1833 and 1842, and in 1854 there was an outbreak at Quebec, which was traced by Dr. Marsden<sup>(42)</sup> of that city to the opening up of the *Cimetière des Picotés*, a piece of ground which had been in use for this purpose since 1702 and was broken up and used for building lots (forming the present Hamel Street) about this time. In the epidemic that ran its fateful course with intermissions in Montreal from 1872 to 1885 and with which the name of *William Osler*<sup>(53)</sup> is so closely associated, the virulent haemorrhagic form of the disease predominated. Great antagonism developed against compulsory vaccination among the French Canadian population at this time, which resulted in an enormous death rate among the unprotected population, and culminated in riots in 1885 when the disease reached its greatest height, the deaths in Montreal alone in that year from this source reaching the enormous figure of 3,164. After this catastrophe the anti-vaccination propaganda died a natural death and Quebec is now said to be freer from this disease than any other province (Heagerty).

Returning now to *ship fever* or *typhus* (as this disease was called after 1760), the source of the contagion was clearly enough from first to last the infected shipping and the horrible conditions that prevailed. Under the French régime the King's ships arrived overcrowded with soldiers to meet the ever-increasing military exigencies of the country. The first epidemic recorded was that in 1659 from the ship on which Jeanne Mance returned from France, and others from similar sources broke out in 1664, 1665, 1670 and 1685. In the latter year the historian of the Hôtel Dieu, Soeur Françoise Juchereau, wrote, "there were so many sick in this ship that soon wards, chapel, barns, chicken runs and hospital grounds with tents in every available corner were filled . . . we took them in half dead". In 1718 an epidemic again prevailed and in 1734, when the King's ship *Rubis* arrived, after a voyage of 80 days loaded with troops and with a rabble of ex-prisoners swarming with lice and covered with eruptions and ulcers of loathsome disease, the contagion spread so rapidly that "more than 20 men died at a time". Similar epidemics occurred again with increasing virulence as the number of soldiers sent across from France in inadequate quarters grew larger in the years 1740, '43, '46, 1750-59. In 1756, 6,000 troops arrived of whom 600 were removed immediately to hospital "and there died in great numbers", while 248 others were admitted from the King's ship *Leopard* "with a pestilential disease", thought to be plague. It was at this time that Dr. Gaultier succumbed. Then came the British occupancy and with it a new and still more fruitful cause for the breeding of typhus in the enormous immigration that set in from England and famine-stricken Ireland in the first decades of the nineteenth century, the latter arriving in the last stages of destitution. The early quarterly reports of the Montreal General Hospital show the high proportion of "fever" among the admissions, and, with the Emigrant Hospital in that city, this institution handled the epidemic as best it could. The year 1847 was known as that of the the great typhus epidemic. In it no less than 89,738 British immigrants embarked, of whom 5,923 died on the voyage, and 4,734 in quarantine or in hospitals at Quebec or Montreal, or at emergency stations further West, making a total of over 10,000 deaths while 30,265 were admitted to hospital for treatment, 11,000 at Montreal. These figures in one season show the appalling extent of the epidemic, and the inadequacy of the quarantine regulations in existence up to that time. A monument erected at Grosse Isle by Dr. Douglas and his fellows tell of 5,274 buried here in the year and four doctors, "Dr. Benson of Dublin", "Dr. Alex. Pinet of Varennes", "Dr. Alfred Mailhot of Verchères", and "Dr. John Jameson of Montreal", assistant medical officers of the hospital who all "died of typhus in the faithful discharge of their duty". At Montreal a huge boulder at Point St. Charles likewise commemorates the death of 6,000 immigrants from ship fever in this fateful year.

The menace both of *plague* and of *yellow fever* made themselves felt during the French régime, the latter through vessels hailing from the West Indies. In

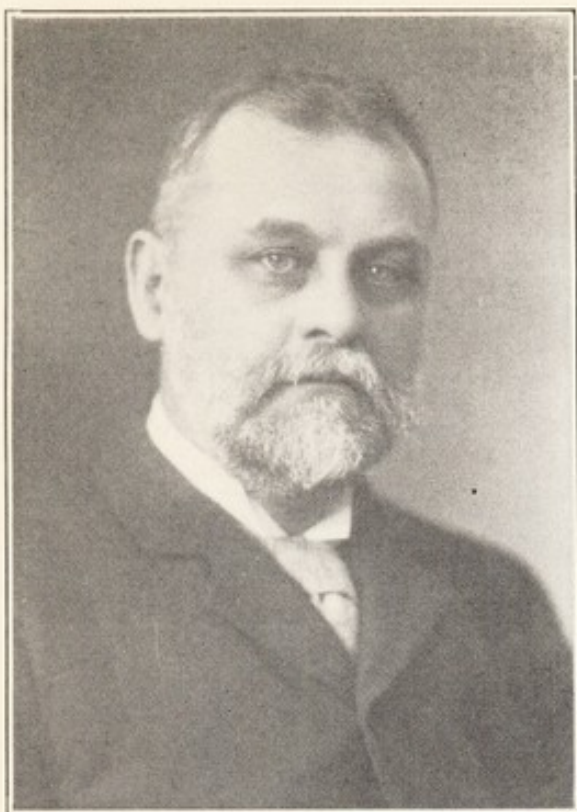


FIG. 17. FRANCIS J. SHEPHERD, M.D., F.R.C.S. Edin. and Lond. (Hon.) LL.D. (Hon.), late Professor of Anatomy and Dean of the Faculty of Medicine of McGill from 1908 to 1914, during which years the Strathcona Medical Building was erected and thrown open to students. (1851-1929)



FIG. 18. CHARLES F. MARTIN, M.D., LL.D., Queens (Hon.), Professor of Medicine and Dean of the Medical Faculty of McGill University from 1923 to date, under whose administration great advances in modern educational methods and in medical research have taken place.

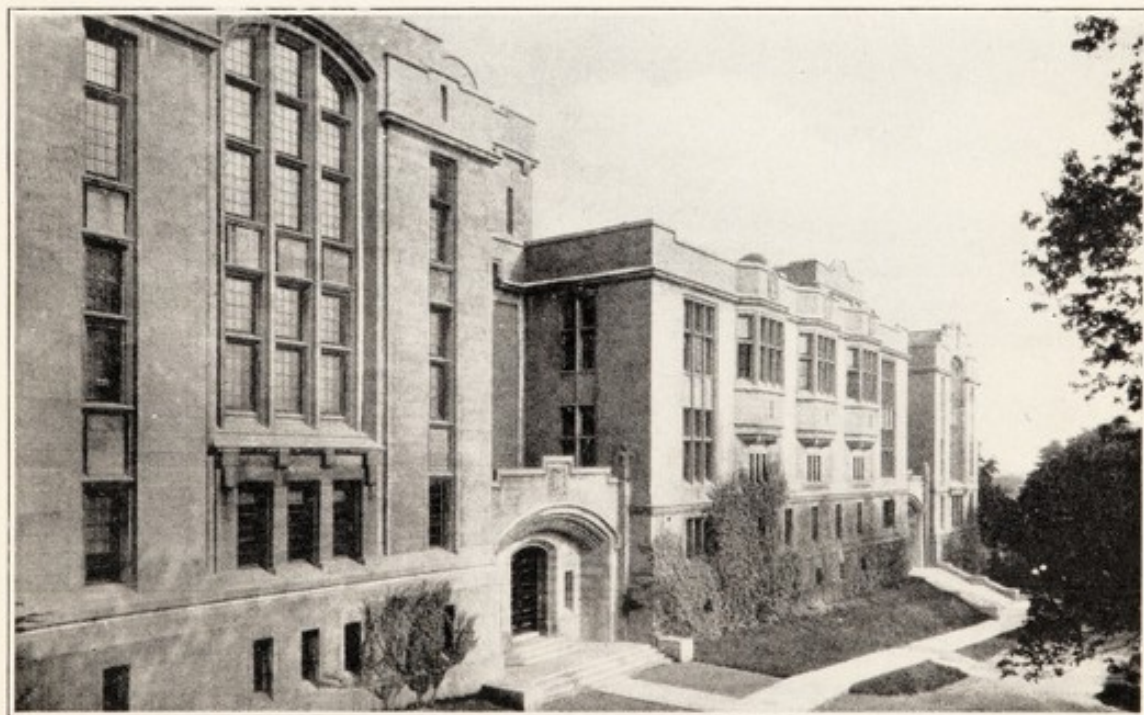


FIG. 19. THE STRATHCONA MEDICAL BUILDING OF MCGILL UNIVERSITY opened in 1911. Front elevation from Campus.



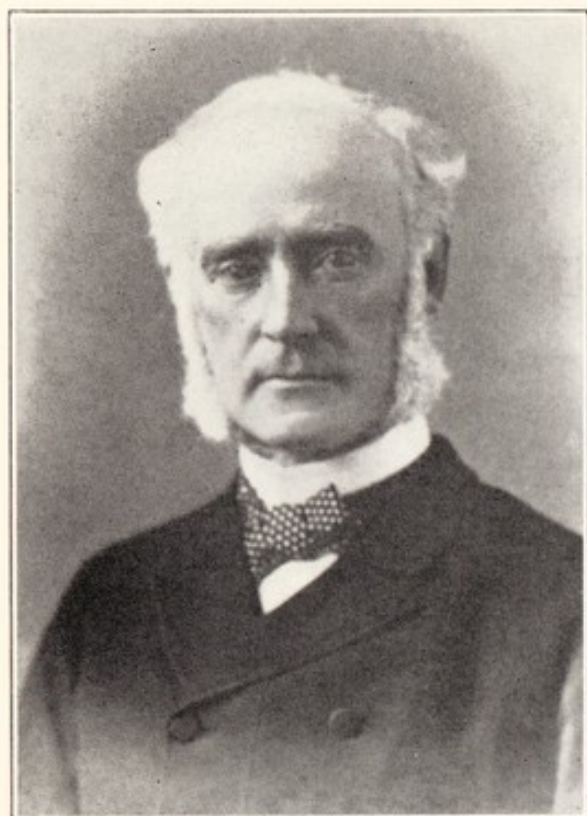


FIG. 20. SIR WILLIAM HALES HINGSTON, M.D.,  
L.R.C.S. Ed., D.C.L., F.R.C.S. Lond. (Hon.)  
Chief surgeon of the Hotel Dieu of Montreal, Professor  
of Surgery at Laval University and first Secretary of  
the Canadian Medical Association.  
(1829-1907)



FIG. 21. L. deL. HARWOOD, M.D., LL.D., Queens  
(Hon.)  
Present Dean of the Medical Faculty of the Université  
de Montréal, under whose regime the recent great ex-  
pansion of this Institution has taken place.

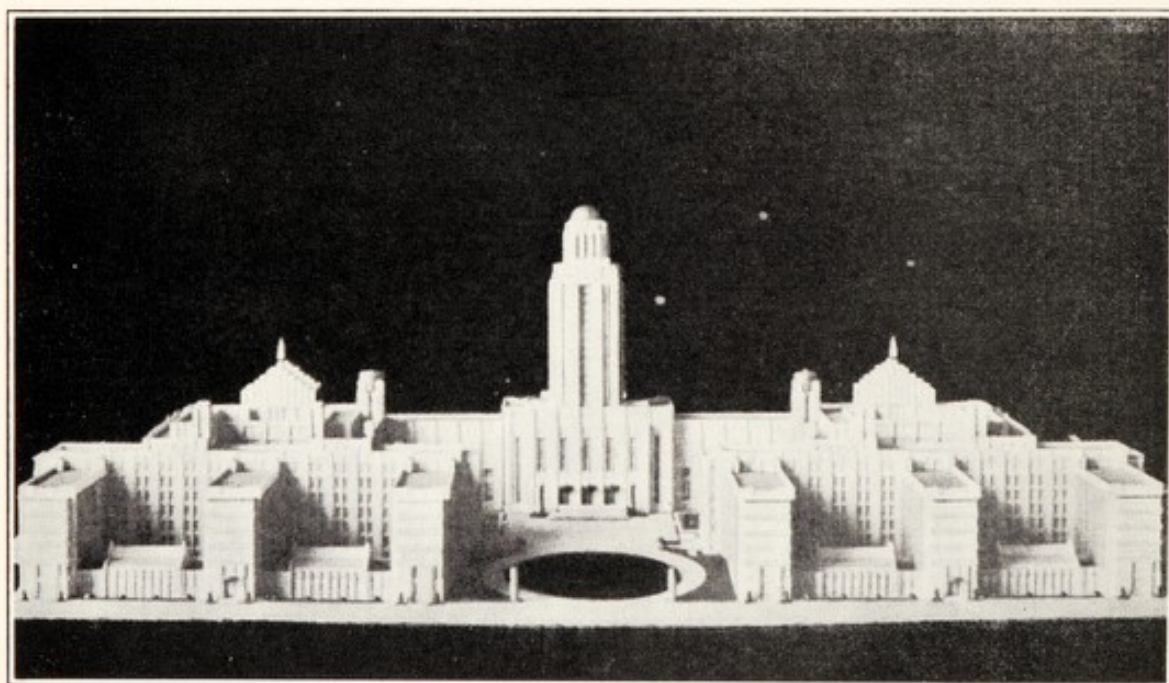


FIG. 22. MODEL OF NEW BUILDING OF THE UNIVERSITÉ DE MONTRÉAL  
now under construction on the western slope of Mount Royal

1721 *bubonic plague* was epidemic in Marseilles where it killed 50,000 persons. The fear of its introduction led de Vaudreuil and the Intendant Begon to introduce, on October 20th, 1722, the first quarantine regulation in Canada. Under it all vessels from Mediterranean ports were required to anchor off Isle aux Coudres and to make their presence known by signal musket shots and the yellow flag of distress, and to prevent all communication with the shore until their quarantine was lifted, on pain of corporal punishment. This regulation was revoked in 1724. In 1795 an Act was passed by the British Government obliging ships coming from infected places to perform quarantine "at such part of the river St. Lawrence or islands in the said river as were selected", and funds were provided for enforcing the conditions in this. In February, 1832, a further Act to establish Boards of Health in this Province and enforce an effectual system of Quarantine was drawn up with a view to preventing the introduction of *cholera*, which in 1831 was epidemic throughout Europe. In this Act for the first time the Quarantine Ground or Anchorage in the port of Quebec was stated to be "as near as may be" to the island of Grosse Isle, while the island itself as well as this area was placed under military authority and block-houses and sheds for the accommodation of the sick were to be erected upon it. The island of Grosse Isle was acquired by the province in 1836. This Act was of purely temporary character but its powers were prolonged until 1839. It did not however succeed in its object for cholera entered Canada through the ship *Voyageur*, which left Grosse Isle with a clean bill of health for Montreal on June 7th, 1832 and touched at Quebec en route. In a letter to the Governor-in-Chief, *Dr. Joseph Skey* relates its appearance at the Quebec Immigrant Hospital in the week of June 8th in which week 259 cases of cholera were admitted with 161 deaths (62 per cent.). Soon the other hospitals were filled also and tents erected on the Plains of Abraham. From the beginning to the end of the epidemic (June 8th to Sept. 1st, 1832) there were in Quebec 3,851 deaths. In Montreal, following the arrival of the same vessel with two cases of cholera now developed on board, there were 800 deaths in the first two weeks and more than 4,000 there and in the vicinity during the epidemic.

The year 1834 brought a new outbreak of cholera which entered at Quebec and extended throughout Canada involving this time also the town of Trois Rivières, which had been protected in 1832 by a *Cordon de Santé*, and epidemics occurred again in 1849, 1851, 1852 and 1854. Following the latter a fundamental investigation was made into the defects of the system that had permitted these invasions, and numerous amendments of the Act were made which resulted in the inauguration of a complete quarantine establishment at Grosse Isle consisting of a medical superintendent and assistants, nurses and attendants. In the further expansion of the work the most distinguished name is that of *Frederick Montizambert*, an M.D. and F.R.C.S. of Edinburgh, who was the first quarantine officer after Confederation and was the first health official of his day in Canada and internationally known as a leader in this field. He was a President of the American Public Health Association and in recognition of his services to Canada he was awarded the C.M.G.

**Establishment of the French Medical Schools, the Medical Faculty of Laval University and that of the Université de Montréal.**—In discussing the development of the two great French Canadian Medical Schools in this Province, that of *Laval University at Quebec* comes first under consideration, because, although this was incorporated as a College some two years later than that of Montreal, it grew out of an earlier movement for medical education of recognized importance. This took place at the Marine Hospital at Quebec, an institution which had been established in 1830 to meet the emergencies of the cholera and typhus epidemics of that day, and which was, from the first, an active teaching centre, owing to the large amount of expert surgical work done in it by its distinguished staff, James Douglas, Anthony von Iffland, Joseph Morrin, Jos. Painchaud and others. In 1835, their students petitioned that a Medical School should be

established at this Hospital, "vested with the usual powers of granting degrees in Medicine". Sir *John Doratt*, M.D., Inspector-General of Hospitals, to whom the matter was referred by the Legislature, suggested that the proposed school should be connected with the Hôtel-Dieu and Marine Hospitals, which could together supply a service of 300 beds, and that the course of study should cover a period of five years, the last two to be clinical. The year 1847 found the "Incorporated School of Medicine of the City of Quebec" in full operation and on May 15th, 1848, this was formally inaugurated by Dr. Joseph Morrin its first President. In his opening address he mentioned that from an average of 1200 ships arriving at Quebec, at least 1500 patients were admitted to the Marine Hospital which now contained 300 beds. Although now fully launched, the new Quebec Medical School was still unable to confer degrees, being, like the Montreal Medical Institution before it, as yet unattached to any "Seminary of Learning". Four years later however its teachers, Drs. *Chas. Fremont*, *Jean Blanchet*, *James Sewell*, *E. Z. Nault* and *J. E. Landry*, were invited to constitute themselves the Medical Faculty of Laval University. All five men and Dr. *Alfred Jackson* were made professors with Jean Blanchet as dean by Lord Elgin at the inauguration of the University in 1854. Dr. Jackson, who was born at St. Andrews, Que., in 1810, and was an Edinburgh graduate, received his licence in 1833 and later became Dean of the Laval Medical Faculty. He died in 1885.

The new Faculty of Medicine of Laval at Quebec now embarked on a policy of gradual expansion, adding a maternity service in 1863, the teaching of pathological anatomy in 1865, electro-therapeutics in 1904, a tuberculosis hospital (founded by Dr. Rousseau) in 1915. Today the students of this Quebec School are said to have access to eleven hospitals and dispensaries with a capacity of over 3,155 beds (Heagerty). In 1878 a branch or *succursale* of the Laval Medical School at Quebec was started in Montreal and a curious controversy with the Ecole de Médecine of that city followed, which ended peaceably however, in the merging of the two institutions under Laval University and the subsequent transfer of the School to the new Université de Montréal.

The early history of the *Medical Faculty of the Université de Montréal*, or rather of the earlier school of which this is the outcome, is so full of stormy vicissitudes and of perils overcome that it reads like a romance. It has been told by the late Dr. *L. D. Mignault*,<sup>(48)</sup> long a member of its staff and at the time of his death Secretary of the Faculty and Professor of Descriptive Anatomy in the present University. The "*Ecole de Médecine et Chirurgie de Montréal*" as the parent institution was called, originated in 1843, ostensibly to meet the needs of the French-Canadian student public, but undoubtedly also as a protest against what was then considered the monopoly of teaching privileges and of appointments at the Montreal General Hospital by those in authority at McGill. Its founders were *Francis T. Arnoldi*, son of Daniel Arnoldi and its first President, *Francis Badgley*, its first Secretary, *William Sutherland*, *Pierre Munro* and *William Macnider*. The last was a brilliant young Edinburgh graduate who founded the Montreal Lying-in Hospital in the same year but died of tuberculosis in 1846 at the age of 31, and whose name is replaced in the charter of the new School by that of *Horace Nelson* son of the noted Wolfred. In the following year, 1844, Badgley and Sutherland became the joint editors of the *Montreal Medical Gazette*, and the pages of this, the first English medical Journal in Canada, bristle with polemics in defence of the "Ecole de Médecine" and of its Act of Incorporation, which passed the Provincial Legislature on March 29th, 1845. Under this Act lectures at the School were to be delivered both in French and English, and authority was given for certificates to be awarded to its graduates, entitling them to a license to practise medicine. The latter privilege was, however, automatically cancelled two years later, in 1847, on the incorporation of the College of Physicians and Surgeons of the Province, which gave licenses only to those holding a University degree. In this emergency, an agreement was reached with the Medical Faculty of McGill under

which all lectures at the Ecole de Médecine were to be delivered in the French language only, and students who had completed their course there were to be admitted to the final year at McGill, which would entitle them to the degree of that University. At this time Drs. *Coderre*, *Peltier* and *Boyer* were added to its teaching staff. The above arrangement with McGill lasted until 1849-50, when disagreement arose among the management of the Montreal School of Medicine, in that the majority wished to appeal again to the Legislature for power to issue certificates giving its graduates the right to practise (and thus relieving them of the *annus medicus* at McGill). *Arnoldi*, *Badgley* and *Sutherland* disapproving of this measure, resigned from the School and received appointments at McGill, *Sutherland* as Professor of Chemistry, a post which he held until his death in 1867. They were replaced at the Montreal School by *Pierre Beaubien*, a graduate of the University of Paris and a member of a distinguished Canadian family, the grandfather of Senator *Beaubien* and himself a member of Parliament from 1841 to 1851, *Eugène Trudel*, for several years President of the School, *J. Leprohon* and *J. Bte. Trestler*, the last being replaced a few weeks later by *T. E. d'Orsonnens*, son of an officer in the Swiss-Meuron regiment, who, as President during the years of the Laval-Victoria controversy, received the historic cablegram from Rome that saved it from annihilation under the ban of the Church. The personnel of the teaching-staff was now entirely French-Canadian, although *Peltier* had an Edinburgh degree. A remarkable member of the group was Dr. *Coderre*, who had been "a patriot" in 1837 and had suffered imprisonment for his opinions. A man of very determined opinions and strongly opposed to progressive ideas, he later gained an unfortunate notoriety by setting his face against vaccination and promoting the anti-vaccination movement which had such disastrous results in Montreal.

It was not until 1850 that the petition of the School reached the Legislature, and it was withdrawn after it had attained its second reading. The cause of its failure may have lain in a counter petition, a copy of which is preserved in the archives of the School, signed by Andrew F. Holmes and 26 other practising physicians of Montreal who protested against the granting of power to give licenses to this or any future similar school, on the ground that this would be an infringement of the privileges of Universities, and that it would lower the standard of the profession by increasing the number of incompletely qualified schools. Still crippled, therefore, by its lack of power to confer a diploma, the Montreal School of Medicine applied for affiliation to Laval University, Quebec, in 1862 and again in 1864, but without success, and in 1866 also to the University of Ottawa with a like result. In the latter year however, through the private mediation of Mr. Thomas Bulmer (who graduated from the School the following year), it was invited to affiliate with Victoria University, Cobourg, Ont. This offer was promptly accepted and the Montreal School of Medicine and Surgery became in September of that year the Medical Faculty of Victoria University in Montreal.

New troubles were in store however, and these of the internal kind that are most of all distressing to the devoted worker. In 1877 Laval at Quebec, which had twice refused the School affiliation, came forward with a proposal to this end backed with the authority of the Church, which saw the wisdom of having a Catholic Medical School in Montreal. Negotiations accordingly took place in 1878, by which the members of the local School together with other appointees were made Professors of a Laval Faculty of Medicine in Montreal. All went well at first, but the course of events did not run smoothly, disagreements arose and the Rector of Laval, M. Hamel, ended by making this an independent branch, while the Montreal School of Medicine retained its autonomy, *Dr. Rottot*, a prominent member of its staff, leaving it however, and becoming Dean of the Laval Succursale. There were thus two French Medical Schools in Montreal, one connected with Laval and the other with Victoria. During the ensuing years a serious misunderstanding arose which threatened

imminent disaster for the Montreal School, for the latter suddenly found itself debarred by the Church from attendance at the Hotel Dieu (to the deep regret of the nuns), and its members and students excommunicated on the ground of disobedience to authority and association with a Protestant university. This painful situation was saved by the direct intervention of the Pope, before whom matters were laid by *Dr. Desjardins* in person, as representing the School. As a result of their interview a cablegram was received on August 24th, 1883, ordaining that the School be continued and that all bans were removed. Dr. (later Sir) *William Hingston* now replaced d'Orsonnens as President of the School, and in 1889 a new constitution was given from Rome to the *Succursale* of Laval in Montreal by which it was made entirely independent of Quebec, except that its degrees were granted by that University. A petition was presented at Quebec asking for amendment to the Act of Incorporation permitting the *Ecole de Médecine* to absorb the Laval branch and to give effect to the constitution granted by the Pope. After some delays a Bill under which the Montreal School retained its corporate existence with an enlarged professoriate including all the members of the Laval Branch, became law, and for the next thirty years an era of progress followed, during which laboratories and more adequate buildings were erected and the clinical facilities of the Hôtel Dieu, Notre Dame and Maternity and later of the St. Paul and St. Justine Hospitals were placed at their disposal. The final change came in 1919, when the French *Université de Montréal* was founded and the combined "*Succursale de Laval*" and Montreal School became its medical faculty. This step has marked a real epoch, for since then this Faculty has completely revised its course of study, imposed a pre-medical year, multiplied its laboratories while placing these in charge of men of distinction, and improved and enlarged its clinical teaching. The recent appointments of men of such international reputation as Professor Pierre Masson of Strasburg and others to this Faculty supplies suggestive evidence of the vision and forward policy of this great new institution. Nor is the *Université de Montréal* resting there. An extensive site has been acquired on the north western slope of Mount Royal, on which a new building is being erected by it with ample accommodation for all its faculties, including those of medicine and dentistry, and for a University hospital, at a minimum cost of \$3,000,000 (Fig. 22). The rest is for the future to unfold.

**Rival Medical Schools in Montreal.**—The early medical schools discussed above, namely, the Montreal Medical Institution becoming the Medical Faculty of McGill University, the Incorporated School of Medicine of Quebec becoming the Laval Medical Faculty, and the School of Medicine and Surgery of Montreal, which has come so happily into its own in the University of Montreal and which, although founded in a spirit of rivalry to McGill by English members of the profession had catered from the first to the French students and ultimately became entirely French—were all three educational movements which grew out of the intrinsic needs of the two nationalities in the Province, and all have reached fulfilment today, each functioning in its own sphere. The rapid growth of the English-speaking profession, however, and the consequent presence in the community of a number of well qualified younger men whose energies found no outlet on the (necessarily limited) teaching-staff of McGill, led to the establishment in the middle and later 19th century of several rival schools, which had a more or less ephemeral existence, but which played an important part in the medical politics of the day. Incidentally also, they served an important purpose, as also did the "*Ecole de Médecine*" in its first years, by acting as a training ground for some of the most brilliant physicians of their time, a number of whom did yeoman service in their later lives as leaders of the Medical Faculty of McGill, and, in at least one instance, of the Laval Faculty. The most important of these efforts were the *St. Lawrence School of Medicine* and the *Medical Faculty of the University of Bishop's College*.

The St. Lawrence School was founded in 1850 and was incorporated in 1851 with a charter which allowed its graduates to receive their license on examination by the College of Physicians and Surgeons of the Province without any other diploma. The initiative in its foundation seems to have been taken by *Robert L. MacDonnell* a distinguished medical graduate of Dublin University, and *George D. Gibb*, who is described by Drummond<sup>(38)</sup> as the illustrious founder of the School and in later life was knighted for his eminent professional services in London. Other important medical men on its teaching staff were *Thos. W. Jones*, *Francis T. Arnoldi*, *R. P. Howard*, *G. E. Fenwick* and *Henry Howard*. The School occupied a building on Lagauchetière Street near St. Urbain and this situation, in close proximity to the Montreal General Hospital, together with the fact that just at this time the Montreal School of Medicine stopped delivering its lectures in English under agreement with McGill, reacted favourably to the St. Lawrence School which opened with 17 students, at that date a goodly enrolment. The purchase by the McGill Medical Faculty at this critical moment of its Coté Street building (also only a stone's throw from the hospital), and the removal of its lectures and dissecting room from the distant Arts Building of the University to this more convenient location for the session 1851-52, constituted an efficacious counter-move; and the St. Lawrence School closed its doors in a couple of years after its establishment, apparently having held only one actual session, that of 1851-52.

The Bishop's College Medical School <sup>(44)</sup> was founded in 1871 by Drs. *Charles Smallwood*, *F. Wayland Campbell*, *William Hingston*, *A. H. David*, and *K. Trenholme*, all of whom were made Professors of the Lennoxville University. A couple of months later Smallwood retired from the Deanship and was replaced by Hingston, who in turn had to resign in order to retain his connection with the Hôtel-Dieu. He was succeeded by David and later by Campbell, who constituted himself to the end of his life a doughty champion of what he considered the rights of his struggling School. In 1890 it took what, for that time, was the advanced step of admitting women to the study of medicine and graduated a small number (ten in all) from 1893 on. After Dr. Campbell's death, activities ceased at Bishop's Medical School, and in 1905 it was amalgamated with the Faculty of Medicine of McGill under an arrangement by which its graduates received *ad eundem* degrees and some of its teaching-staff certain privileges.

**Medical Journalism and Societies.**—Here again, as in the early development of medical education in Canada, we must give the palm to the Province of Quebec, which undoubtedly blazed the trail in both these fields for Canada as a whole. The first medical journal published in this country was that bearing the title *Journal de Médecine de Québec*, published quarterly in Québec city in the years 1826 and 1827, under the able editorship of the young Xavier Tessier, with the help of an editorial committee from the Province, on which stand the familiar names of Joseph Painchaud, C. K. Perrault, Joseph Morrin, François Blanchet, Jos. Parent and P. M. Bardy of Québec; Stephenson, Caldwell and Robertson of Montreal; J. Bte. Meilleur of l'Assomption, and L. S. Talbot of Trois-Rivières. Without duplicating their contents, the English and French parts of the journal keep pace with each other in the excellence of their contents, and the whole is edited and compiled in a way that places it in the front rank of its contemporaries in the field of medical periodicals. In addition to an "*Analyse critique*" and "*Quarterly retrospect*" covering respectively the French and English current literature, the quarterly reports of the Montreal General, Hôtel Dieu, and Québec Emigrant Hospitals and the meteorological Tables for Québec and Montreal (compiled by Perrault), each number contains original articles and information on current topics of great interest to the medical historian. Most important of all perhaps is the account given on pages 106-114 of the organization of the *Québec Medical Society* at its first meeting on November 30th, 1826, at which Morrin was elected president, Perrault, vice-president and

Tessier, secretary. Both its constitution and by-laws, here published in full, and an editorial in the next number (April, 1927) upon the birth of the Society breathe a tone of amity and unity in the profession very different from the party spirit that unfortunately became rife later and that was already beginning to show its head in Montreal, according to a paragraph in an announcement of the medical lectures delivered by Caldwell, Robertson, Holmes and Stephenson in that city and of those in Quebec by Douglas, Blanchet and Whitelaw. (p. 117). Other features of interest are an "*Essai sur la nécessité d'établir à Québec, Capitale du Canada, un Hôpital Général*" as the most useful means of promoting medical science in Canada (page 92), an announcement of the "Berkshire Medical Institution" in Massachusetts where a degree could be obtained after a three years' course, and the remarkable report of the Dinner to Pierre Laterrière (p. 256).

Unfortunately this interesting Journal stopped two years after its inception for lack of financial support. Eighteen years later appeared the first entirely English medical journal in Canada. This was the *Montreal Medical Gazette* the first number of which appeared on April 1st, 1844, edited by Drs. Badgley and Sutherland, and which ran until May 1st, 1845. In an editorial in that number its sponsors explain that they originated the Journal at their private expense in order to demonstrate that among the 600 medical men practising in the Province support would be found for an up to date periodical. They claim that this had been amply proved, and that the only cause for stopping its publication was to give place to the *British American Journal of Medical and Physical Science*, the first number of which had appeared on April 1st, 1845, edited by Archibald Hall and Robert L. MacDonnell. In order to understand the situation that had arisen it must be remembered that Badgley and Sutherland were supporters of the new School of Medicine and Surgery of Montreal, while the editors of the *British American Journal* were members of the McGill Faculty who upheld the cause of the more conservative element with vigour and it must be said with dignity, both then and in ensuing years. The *Montreal Medical Gazette*, while attempting to maintain an impartial tone, sheds a vivid sidelight upon such burning questions of the time as the membership of the Board of Medical Examiners (still composed almost exclusively of McGill men), the incorporation of the Montreal School of Medicine and the opposition to this said to have been brought (ineffectually) to bear on the Legislature by representatives of McGill, the establishment of the University Lying-in Hospital, (staffed entirely by McGill Professors), apparently in rivalry to the Montreal Lying-in Hospital opened three years earlier by the young William Macnider, a member of the Montreal General Hospital staff, but also a teacher in the Montreal School of Medicine, etc. Without a knowledge of these events and of the hostility which certainly existed in certain quarters against what was claimed to be the chauvinism of the McGill School, it would be difficult or even impossible to obtain a faithful retrospect of the state of either party of the Profession in this trying period.

Other items of much historical value in this volume are a fine obituary account of William Robertson, who died on July 18th, 1844; the proceedings of the Medico-Chirurgical Society of Montreal from February, 1844, to February, 1845, fully reported by its faithful secretary, Dr. Badgley, to whom this Society owed its origin in the preceding year (1843); and, most interesting of all, a series of Resolutions drawn up and submitted by this same public-spirited member at its meeting of February 8th, 1845, recommending that the Montreal and Toronto Medico-Chirurgical, and the Quebec Medical Societies, together act as centres for the organization of a "General Medical Association of Canada" which should function under this name for the entire country and to which members of all existing and future Canadian medical societies should, *ipso facto*, belong. Letters from the Toronto and Bytown (Ottawa) Societies, expressing approval and promises of co-operation follow, as also several strong editorials, evidently from Badgley's able pen, in support of his proposal.

From the publication of the *Montreal Medical Gazette* in 1844, an English medical journal, under varying titles and different editors but in direct sequence, was issued in Montreal until the year 1911, when the printing of the *Canadian Medical Association Journal* was removed to Toronto. The *British American Journal of Medical and Physical Science*, which immediately succeeded the *Gazette*, ran from April 1845 to 1852 (Vols. I. to VII.), under the editorship of Archibald Hall, assisted in 1845-47 by Robert L. MacDonnell. This was an extremely able journal, conducted on a high professional plane, with clean-cut sane editorials dealing effectually with the live issues of the moment from the side, it is true, of the British-Canadian party but without show of partisanship, and which throw much light on the evolution of medical legislation during these gloomy and eventful years. In the first volume (1845-46) we learn the fate of Badgley's far-seeing recommendations for a "General Association", which were unfortunately frustrated by the machinations of a faction representing the radical and French-Canadian elements, thus delaying the formation, so clearly foreshadowed in this movement, of the Canadian Medical Association for more than twenty years. Seldom indeed has a measure, plainly designed for the good of the community as a whole, met with failure through such illogical tactics as were successfully employed on this occasion by the clashing interests involved.

A conspicuous feature of the agitation against Dr. Badgley's motion was the absence throughout the proceedings of all reference to the profession in the Eastern Townships, who had not been approached by a letter signed by Dr. Daniel Arnoldi, as Doyen of the profession, calling a general "Convocation" to consider the formation, by Districts instead of by Societies, of a General Association. This omission was without doubt intentional, and is ascribed editorially in the *B.A.M. Journal* to the large proportion of English-speaking medical men in that part of the country. The support which its representatives would have given to the proposal which the "District" meeting was organized to defeat, is clearly shown, some two years later, in the minutes (published in the *B.A.M.J.*, vol. III., pages 340-341) of an interesting organization known as the *Frontier Medical Society*, which was formed at Clarenceville, Quebec, on September 28th, 1847, by twelve "licensed members of the profession" (among whom were Drs. May, Verity, Barber, Stuart, Livingston, Delisle, Dykeman and Laffin), and had as its objects "the suppression of unlicensed practise; the regulation of a tariff of fees; the suggestion of by-laws to the College of Physicians and Surgeons, C.S.; and the promotion of friendly intercourse between the members of the profession." It met twice yearly, and on February 9th, 1848, it passed a series of resolutions appointing a committee to draw up a petition to the Legislature remonstrating against a Bill "to regulate the study and practice of medicine" then being presented by Dr. J. Emery Coderre and others, and asking for such an election of Governors of the new College of Physicians of the Province as would give a just representation to the frontier and townships, "feeling residents in cities, and persons unacquainted with country practice, are not capable of framing such laws and by-laws as will be suitable for country practitioners."

The *British American Journal* seems to have had difficulty in collecting its subscriptions. For this and other reasons it stopped publication in 1852, and was replaced by the *Canada Medical Journal*, which was edited by R. L. MacDonnell and A. H. David, supporters at this time of the St. Lawrence School of Medicine, and only ran one year (1852-53). It was followed, in 1853-54, by what was again an organ of the McGill Faculty, the *Medical Chronicle or Montreal Monthly Record of Medicine and Surgery*, edited by William Wright and D. C. MacCallum, which remained in existence until 1859 (6 vols.). The *British American Journal* again appeared on the scene from 1860 to 1863 (3 vols.) edited by the veteran Archibald Hall, but was succeeded by the *Canada Medical Journal and Monthly Record of Medical and Surgical Sciences*, edited



by Geo. E. Fenwick and F. Wayland Campbell, which ran from 1864 to 1872 (8 vols.). The latter was the year of the foundation of Bishop's College Medical School, and in the following session, 1872-73, two English journals took origin in Montreal, which maintained a separate existence until the closure of the Bishop's School in 1904, when the *Canada Medical Record*, the organ of the latter, and edited by F. W. Campbell and his associates stopped. The other, larger, and one of the best medical periodicals of its time, was the *Canada Medical and Surgical Journal*, edited by members of the McGill School, Geo. E. Fenwick and later Geo. Ross, Thos. Roddick and James Stewart. It ran under this name from 1872 to 1888 (16 vols.) and contains during those years the prolific contributions of William Osler, then a member of the McGill professoriate (1874-1884). In 1888 it changed its name and, in a slightly enlarged form, but under the same editorial management, became the *Montreal Medical Journal* (Vols. I. to XXX.) until 1911, when it again changed its form and name and this time also its scope and became, by amalgamation with the *Maritime Medical News*, the *Canadian Medical Association Journal*, under a Board of Editors drawn from all parts of the country, and with its editorial offices still in Montreal, but its place of publication in Toronto. After a period of struggle during and after the long years of the war, this journal embarked, in the year 1921, under the guidance of its able editor-in-chief, Dr. A. D. Blackader, and a wise Committee, upon a career of expansion, which has brought it into the first rank today as a medical periodical of international importance and interest. (Fig. 35),

Turning now to the purely French publications which have appeared in this Province since the famous *Journal de Médecine de Québec* of 1826, we find the next attempt at a journal in 1847, when the *Lancette Canadienne* appeared (produced by Dr. Leprohon). It was discontinued however in six months. The important *Union Médicale du Canada* began in January 1872 with Dr. J. P. Rottot as Editor and his Associates, Drs. A. Dagenais and L. J. P. Desrosiers, and maintains its existence today as a monthly periodical of good reputation devoted to the interests of the French-Canadian profession and as the official organ of the Société Médicale de Montréal. From 1879 to 1883 the *Abeille Médicale* was also published in Montreal. The *Bulletin Médical de Québec* began in 1889, under the direction of the Medical Society of that city and has been made the mouthpiece also of the Society of French-speaking physicians of Canada and the United States. In 1901 the *Montréal (now Canada) Médical* appeared and in 1906 the *Journal de Médecine et de Chirurgie* (discontinued in 1916.)

That this province may indeed claim priority in the matter of medical journalism is evident from the fact that the first publication outside of it of this sort that had more than an ephemeral existence was the *Canada Lancet* published in Toronto in 1868 and the *Canadian Journal of Medical Science* in 1876. The *Maritime Medical News* did not appear until 1889, nor the *Ontario Medical Journal* until 1892.

The *Transactions of the Canada Medical Association*, Vol. I., is a book of 277 pages containing the Proceedings of the tenth annual meeting of this body, held at Toronto on September 12th and 13th, 1877, and published at Montreal under an editorial committee consisting of Drs. David E. Robillard, R. P. Howard, F. W. Campbell, and William Osler. This is an admirable compilation which was unfortunately not repeated in later years, but is replaced today by the official journal of the Association, above described. Its mention brings us to a brief reference to the progress of this "General" Canadian Society which now fulfils so amply the ideals pre-visionsed by Badgley and his colleagues in the far distant days of 1845. The *Canadian Medical Association* took its final form in 1867, at the time of the Confederation of the Provinces, and with its Journal it has come into its own, after many difficult years, since the reorganization of its Financial and Executive Boards at its annual meeting at Halifax in 1921. It now stands behind not only a solvent journal but has inaugurated

important departures in postgraduate medical education throughout the country (financed by the Sun Life Assurance Co.), has become a clearing house of information on medical legislation, has inaugurated a Medical Service bureau for the profession, and a department of Hospital Service, and functions on questions of medical ethics and allied problems. In 1924 it became affiliated with the British Medical Association and examinations for the Fellowship of the Royal College of Surgeons of England are now held in Canada under its auspices. More recently still it has established a Canadian College of Physicians and Surgeons organized to conduct examinations and give diplomas. It has also established triennial Orations to the memory of Lord Lister and Sir William Osler. On August 25th to 28th of last year, a joint meeting of this Association with that of the British Medical was held at Winnipeg and shortly thereafter the *Association des Médecins de la langue Française de l'Amérique du Nord* received these same British guests at their own annual meeting in Montreal. These proceedings must contribute greatly to enhance that spirit of unity and progress which it is its aim to foster in the profession today.

**Medical Licentiation since the act of 1788. College of Physicians and Surgeons of Quebec.**—The Act of 1788, which did such good service in its early days, soon showed itself inadequate to the growing needs of the country. It was repealed some thirty years later, as were other Acts thereafter, the lack of unanimity that existed between the English and French-Canadian parties in the Profession adding to the difficulties of obtaining suitable legislation. At the moment of that curious meeting of August 20th, 1846, when the delegates of the Medical Societies had been so summarily disposed of and the meeting adjourned without transacting the business for which it had been called, a Medical Bill was before the House which was considered unsatisfactory on several points and subsequently failed. To meet this situation the sponsors of the "District Meeting" held what they termed an "adjourned convention of the medical delegates of Montreal, Quebec and Three Rivers" on September 5th, 1846, with Dr. Morrin in the Chair and Drs. Painchaud, Fremont, Sewell, Kimber, Valois and Arnoldi present, to consider a project submitted by Dr. Wolfred Nelson for incorporating the Profession of Canada East (as this Province was then called) in a College of Physicians and Surgeons. This proposal, after undergoing "minute discussion, clause by clause," was adopted and thereafter communicated to the local profession in a circular letter calling a general meeting at Trois Rivières on October 14th following for the purpose of its ratification.

This entire proceeding was the subject of a powerful editorial in the *British American Journal* for October 1st, 1840, which states that, while it saw in the establishment of such an institution much to be desired, it condemned unequivocally certain clauses in the circular, especially one disqualifying all persons from membership in the new corporation whose licenses dated back less than 20 years. The project as there conveyed was described by the Journal as "an insult to the graduates of British Universities and to Fellows, Members and Licentiates of the British Colleges of Surgeons practising in this Province", and the "illiberal procedure" therein proposed, was contrasted with that of a Bill which the profession of Canada West were preparing to lay before the Legislature in that year, praying for the "incorporation of a College of Physicians and Surgeons of Upper Canada", under which "all practitioners already duly licensed according to the existing laws of this Province were free to become members should they be desirous of so doing." This protest on the part of the *B.A.M. Journal* seems to have had the desired effect. Only thirty-five members of the profession were present at the Trois Rivières meeting, and these were all from that town and Quebec, while from Montreal none but the five members of the "Incorporated School of Medicine" attended. Nevertheless, several of the offensive clauses were struck out of the proposed Act and other improvements were made subsequently, so that on August 10th, 1847, a "Bill for the Incorporation of the College of Physicians and Surgeons of Lower Canada" (from which as

Dr. Hall writes, "the objections previously taken in this Journal have been removed") and bearing the almost unanimous signatures of both the French and English members of the profession in the districts of Montreal, Quebec and Trois-Rivières, 141 names in all, passed the Legislature and became law. The appointment of Dr. Daniel Arnoldi, its first President, followed (Fig. 10), to the immense satisfaction of everyone and without a dissentient voice. Thus was the College of Physicians and Surgeons of Quebec born. That it emerged successfully in the form it did out of the atmosphere of petty intrigue and political strife that preceded it is a tribute to the magnanimity and broad-mindedness of the best minds among both the opposing parties, and especially, we believe, to the straightforward presentment of the facts involved and of the responsibilities of the profession toward the high standards which it had pledged itself to maintain, set forth in the *British American Journal* through its remarkable editor, Archibald Hall.

Peace was, however, not yet attained. An agitation against the Act, sponsored by some of the younger men, resulted in a Repeal Association, the active agent in which seems to have been the irrepressible Dr. Coderre. A long and discursive letter addressed by him in French to Dr. Hall appearing in the *B.A.M. Journal* for August, 1848, reveals him as the source of the trouble and is made the subject of a rather amusing editorial. "Dr. Coderre", it says, "is now the embodiment of '*Plusieurs Médecins*' whose occasional lucubrations last winter kept warm the ardour of his allies; he is the synthesis of the opposition to the College, a very Hydra, with three heads less than his prototype. . . . . in one thing we are certain our readers will concur with us—an expression of gratitude that the pent-up steam of so many young doctors has been so safely discharged. . . . . As Dr. Coderre has not burst, no generative agent for fresh steam now remains; and while we cannot but congratulate him on the safe delivery which he has experienced, the interminable length of his production, coupled with the fact just noticed, would point to this conclusion, that all that the Association has to say on the College question has now been said."

The By-laws of the Corporation, drawn up by the College at its May meeting, received the sanction of the Executive and became law on October 10th, 1848, and that grand old Journal writes: "Let the past be now forgotten, and let each member of the profession strive his utmost to enhance the general prosperity, by sustaining the Law in its operation. Where the Act is defective, let a united appeal to the Legislature be made for its amendment; but let there be no longer discord, where unanimity should alone prevail. . . . Let there be no longer discordant principles, when one object alone is sought to be attained; but let all strive, prompted by oneness of sentiment and feeling, to ensure for the incorporated profession that respect from the public which the provisions of the Act of Incorporation are intended to secure for it, and which it must and should command."

These lofty sentiments were undoubtedly shared by the best elements of the profession on both sides. Nevertheless the "Repeal Association" did not cease from troubling. In 1849 the Act of 1847 was replaced by an amended one and various changes have occurred since, but the licensing powers of the Province remain centred in its College of Physicians and Surgeons, which functions today under its "Revised Statutes", made law in 1909. Under these the Provincial Board consists of 21 members, of whom one is elected by the Universities of Laval, McGill and Montréal, respectively, and the remainder by the members of the College. The latter is also endowed under its statutes with powers to possess land, etc., for purposes of its administration, and of making regulations governing the practice of Medicine, appointing examiners and keeping a register.

*The Medical Council of Canada (Roddick Bill)*. The project of interprovincial registration, especially in the border provinces of Canada, came before the Canadian Medical Association in 1869, two years after its formation, but was defeated, and very little was done in this matter until the Association's meeting of 1898, when a committee that had been appointed to look into it

some years previously, reported rather fully and recommended that further efforts be made to ascertain the practicability of federal legislation leading to the establishment of a central qualification, and that Dr. Roddick be authorized to take the necessary steps to this end. The difficulties of such an undertaking were great, for, under the British North America Act, the subject of education had been placed strictly within the jurisdiction of the provincial legislatures, and any attempt to secure uniformity of education throughout the Dominion would have to be carried out on a plane that could not in any way be construed as an infringement of these. Roddick brought his astute intellectual powers to bear upon the problem and pointed out, in an able address delivered the following year, that the Dominion Parliament had power under the B.N.A. Act to create a corporation for the regulation of such objects relating to medical education and practice as were of general Dominion interest and beyond the provincial powers; that such a body might be instituted by the Federal Government and called the *Dominion Medical Council*, to be composed of medical practitioners from each province; and that its function would be to grant *Dominion registration* to all persons who complied with certain requirements for medical and surgical practice, which would give them rights in territories directly under the Dominion, or in the military service of this or of the Imperial Government. For the further step of *interprovincial* registration the consent of all the Medical Boards of the country would have to be obtained to the passage of a short Act in their own legislature, giving the right to any person registered under the Dominion Act to practise in any province, subject of course to the payment of whatever fee that province might impose. He suggested that such Dominion Council should consist of three members in each province, of whom one should be appointed by the Governor General, one by the Provincial Medical Board, and one should be the President *ex officio* of the latter Board. This made up a Council of 24 members. (Fig. 33).

This plan, promulgated by Sir Thomas Roddick, for a federated registration with central licensing bureau requiring qualifications as high or higher than any of the provinces, and under the control of the best medical men to be drawn from all parts of the Dominion in a method above the sphere of political pressure, met with the warm support of both the French and English leaders of the profession, such as Sir William Hingston, E. P. Lachapelle, Robert Craik and R. F. Ruttan, and it was carried through the House by Roddick himself, who sat in the Dominion Parliament at this time as one of the members for the city of Montreal. In 1902, a Bill providing for the establishment of the Dominion Council, known in brief as the *Canada Medical Act*, was promulgated; it was amended in 1906, and in 1911 it became law. The first annual meeting of the Council thus constituted took place in the following year, when Sir Thomas Roddick was elected its Honorary President and Dr. R. W. Powell, Secretary. Its first Annual Report and first Canada Medical Register were issued in July, 1914.

**First Use of Anaesthetics in Canada.**—As is known to all, the use of ether was introduced by Morton at the Massachusetts General Hospital in 1846, and of chloroform by Simpson at Edinburgh in 1847. The Profession in this Province were quick to avail themselves of these discoveries. In January, 1847, Horace Nelson\* of Montreal performed several experiments on dogs, demonstrating the animals' complete insensibility to pain during administration of ether anaesthesia and recovery of consciousness after it. A few weeks later he gave it successfully to a female patient during the extirpation of a large tumour by his father, Dr. Wolfred Nelson; and on March 20th, Dr. E. D. Worthington of Sherbrooke reports amputation of a leg under the influence of sulphuric ether administered by a very efficient emergency apparatus.

Chloroform was employed by Andrew F. Holmes with gratifying results in a difficulty midwifery case, which made a profound impression and is reported

\* *Brit. Amer. Journ.*, 1847-48, 3, pp. 10; 34.

by him as the first example of its employment in this province (*Brit. Am. Jour.*, 1847-48, III., 263). On February 10th following, E. D. Worthington reports its employment by him in three cases at Sherbrooke, and about the same time J. E. Martin used it at the Marine Hospital, Quebec, during amputation of the great toe.

**Dr. James Barry.**—In the middle of the nineteenth century, an army officer of small stature and rather feminine cast of features and physique (Fig. 23), was a familiar figure in military circles at Montreal and Quebec, as also in other parts of the Empire, at different periods of what was evidently a very varied career. The death of this individual occurred in London in July, 1865, and it was only after this had taken place that the women in attendance in the sickroom, on looking at the body discovered it to be that of a woman. This finding was immediately reported to the War Office, and an official autopsy was ordered, which confirmed the fact that Dr. Barry was actually of the female sex†. That she had successfully concealed the truth throughout her long life of seventy-one or, more probably, eighty years, is the more remarkable in view of the fact that she graduated from the University of Edinburgh in 1812, with thesis entitled "*De merocele*", and that she served forty-six years in the British Army, having been retired on half-pay in 1859, without her sex having become known. The sole exception to this appears to have been the Surgeon-General, Sir Thomas Longmore, who in later years related that when he was serving as a subaltern under Dr. Barry at Trinidad in 1844, he accidentally found out that she was a woman during an illness of hers, but was sworn to secrecy by her, and had, accordingly, never mentioned the fact to anyone during her lifetime. That a real mystery lay behind this masquerading, which is commented upon by Havelock Ellis as one of the most remarkable examples of sex impersonation on record, is evident from the details of her story which may be gleaned from contemporary articles in the *Medical Times and Gazette* (46), and from a valuable bibliographical note by Sir William Osler (47), appended, with correspondence, to his copy (now in the Osler Library at McGill) of the novel, "*A Modern Sphinx*", by Lieutenant-Colonel E. Rogers, published in 1881 and re-issued in 1895 (48), with an introduction which contains many authentic facts. From these and other sources, the following short account of what we know of this extraordinary life is compiled.

Dr. *James Miranda Stuart Barry*, as her name stands in a book of hers owned by the late Dr. Ahern, was born some time between the years 1790 and 1795 of parents who died shortly after her birth, leaving her to the care of persons whose identity is unknown, but who appear to have been of high rank from the manner in which her affairs were financed and the circumstances which attended her after-life. Reference to Hart's Army List shows that on July 5th, 1813 (a year after her graduation from Edinburgh), James Barry, M.D., entered the military service as hospital mate, and that she was promoted to Assistant Surgeon on December 7, 1815, the year of Waterloo. On November 2, 1827, she was made a staff-surgeon and stationed at the Cape of Good Hope, where she is said to have learned French and Latin with the children of the Duke of Somerset, the then Governor General. In 1832 she was stationed in Jamaica and then on the island of St. Helena. After this we find her at Antigua, where she nearly died, and later at Barbadoes and Trinidad. On May 16, 1851, she was made Deputy Inspector-General, and was stationed at Corfu. She was in the Crimea and was seen at Balaclava. On September 25, 1857, she was given the post of Inspector-General of the military hospitals of Canada, where she lived sometimes at Montreal and sometimes at Quebec. When in Montreal, she lived, Sir William Osler tells us, in a house at the corner of Durocher and Sherbrooke Streets, where she was attended professionally by

† Report says also that the body showed signs of her having borne a child, but this important point is not fully substantiated, and the official record of the autopsy though formerly in the War Office files, and seen by Col. Rogers and others, cannot now be found. It is certain, however, that it definitely established her sex.



Fig. 23. DR. JAMES MIRANDA STUART BARRY IN 1834  
From a portrait in the Netley Hospital.



FIG. 24. DR. BARRY'S GRAVE IN KENSAL GREEN CEMETERY, LONDON  
Reproduced from the *Lancet*, 1910, vol. 2, p. 1115.

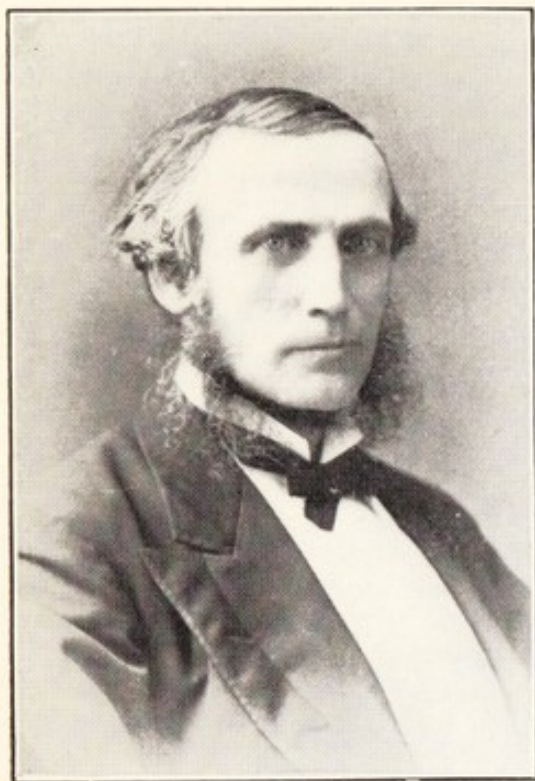


FIG. 25. Dr. R. P. HOWARD,  
Dean of the Medical Faculty of McGill University from  
1882 to 1889.



FIG. 26. OSLER IN 1871  
when a student at McGill University.

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FIG. 27. THE MCGILL MEDICAL FACULTY IN 1881

1. R. P. Howard; 2. Thomas G. Roddick; 3. Geo. Ross; 4. William Wright; 5. W. E. Scott; 6. William Osler; 7. Sir William Dawson  
(Principal); 8. F. J. Shepherd; 9. William Gardner; 10. G. W. Campbell (Dean); 11. G. P. Girdwood; 12. D. C. MacCallum;  
13. Frank Buller; 14. Robert Craik; 15. R. L. MacDonnell; 16. G. W. Fenwick.

Dr. G. W. Campbell, who knew her well but had no suspicion of her sex. Later she was made Inspector-General of all the British hospitals, the head of the entire army medical service! (Fig. 24).

The mystery which surrounded her was evidently connected with some influential person of unknown identity, under whose protection she undoubtedly was, for the not infrequent breaches of army discipline into which an impulsive and hot-tempered disposition led her were never permitted to interfere with her promotions in the army, which did not follow the regular intermediate stages, but were made more rapidly than would be customary under ordinary circumstances. On the other hand, the signal bravery which she is said to have manifested on a number of occasions, during her many years of army service, was never rewarded by the military decorations given to men for similar actions. It seems probable—and it was generally surmised at the time—that an early love-affair in which some exalted personage was implicated, had led to the concealment of her sex with the connivance of certain persons high in authority. Rumour then had it that it was possibly the Prince Regent who was involved!

Colonel Rogers' novel, above-mentioned, was written with the help of Miss Braddon, and portrays Dr. Barry as its hero under the name of Dr. Fitzjames. The contemporary accounts of her are apparently coloured by the shock of the discovery that a woman had been able successfully to play the rôle of an army officer and a surgeon at a period when the possibility of such an occurrence must have been contrary to the ideas and experience of the society of the time. She was evidently a well-trained physician, with considerable sagacity in her profession. She is described as very pretentious and sensitive to ridicule, resenting fiercely the slightest imputation of the kind or ignoring of the respect which was due to her rank, and she fought two duels on these grounds, one of which is said to have resulted fatally for her adversary. It is said she carried the longest sword and wore the biggest spurs she could find, that she was very fond of pets, and was usually attended by a negro servant and a small dog. She had a high and rather sharp voice, was barely five feet tall, very thin, and had no hair at all on her face—a very noticeable feature in a day when beards and side-whiskers were the mode. It is probable that some at least of her physical peculiarities were assumed in order to conceal her identity, and that the asperity which she showed to subordinates was a necessary part of the rôle she played. The few who knew her more intimately spoke of her as an agreeable companion.

The romance of her life was dramatized in a play entitled "Dr. James Barry", by Miss Olga Racster and Miss Jessica Grove, which was produced at St. James's Theatre on July 22, 1919. There are some letters to Sir William Osler from these playwrights in the correspondence mentioned above. His interest in Dr. Barry dated from his student days in Montreal, when the stories and the gossip current there in the seventies came to his attention.

**The Care of the Insane.**—The credit that attaches to the Province of Quebec as having led the van of progress in Canada in the fields of medical education, journalism and Societies, unfortunately does not apply to it in that of the humane treatment of the insane. The reforms instituted in Europe at the end of the eighteenth century by Pinel, Tuke, Connolly and others in the abolishing of mechanical restraint and seclusion and punitive measures, and the substitution for these of a rational and hygienic therapy in this most tragic of all human maladies, made a profound impression here as elsewhere, and these great principles were in fact introduced by Dr. Douglas<sup>(49)</sup> on the foundation by him of Beauport asylum at Quebec in 1845. But, with the retirement of this venerable pioneer in Asylum reform in this Province, and under the overcrowding and insufficient supplies and attendance that were the inevitable results of the "farming-out system", unfortunately adopted by the Government, an inadequate pecuniary basis, the same abuses were revived there and later at Longue Pointe, under conditions that indeed beggar description. A scathing indictment of the



"chamber of horrors"\* which he found in the attics and basements of these two large Asylums at Quebec and Longue Point was made by the celebrated alienist, Dr. Hack Tuke,<sup>(49)</sup> after a visit made by him in August, 1884, in the course of his inspection of the asylums of the United States and Canada. He drew a sharp contrast between these and the better conditions existing in the neighbouring Province of Ontario, where the same reforms, instituted in 1853, by Dr. Jos. Workman, were permanently established in institutions owned and controlled by the State. The publication of his Report was followed on Nov. 7th, 1884, by a series of Resolutions passed by the Montreal Medico-Chirurgical Society endorsing Dr. Tuke's sensational revelations as true and urging upon the Quebec Government the necessity of immediate investigation and reform.

Thus it was not till 1885 that steps for reform were taken. A medical Act was passed providing for the reorganization of these two great institutions along modern lines and on a better basis of Government control and inspection. About the same time, too, a movement, begun in 1875 by Mr. Alfred Perry of Montreal to establish a Protestant hospital for the insane of this denomination at the expense of the public, culminated in the foundation, in the year 1890, of the Verdun Protestant Hospital on strictly modern principles. In these days it is difficult to realise that barely forty years ago, practically no treatment was available in this Province for those unfortunates of the so-called "refractory" class of the mentally deranged. Under this title were included all resistive states, cases given to tearing of clothes, uncleanliness, etc., as well as the more serious homicidal and suicidal manias. Their incarceration, often combined with the use of restraint apparatus, in small cells devoid of light or ventilation, such as lined the garrets and cellars of the great buildings at Longue Pointe and Beauport, could bring little or no hope of cure. At best, such buildings were ill adapted for the accommodation of so huge an insane population as was thrust upon their communities, and the rate of Government support was entirely inadequate.

Such a state of affairs as is embodied in Dr. Tuke's description was scarcely one degree in advance of those awful conditions that existed both here and in Europe in the 17th and 18th centuries. At that period, even in the milder forms of insanity, the terrors of whip and chain were added to the horrors of solitary confinement in unlighted stone cells too small to admit of free movement, during long and hopeless years of growing imbecility. The tale of how this Province emerged from these darkest of mediæval shadows into the daylight of modern occupational and remedial therapy has been published by Prof. T. J. W. Burgess in 1917 in his splendid history<sup>(50)</sup> of this subject from which the following short account is largely drawn.

*Historical Note.*—In spite of the abuses that crept in and the shadow of the old ideas that rested so long on the care of the insane in this Province, it must be clearly understood that the early efforts in this difficult field were all primarily of a volunteer character and prompted by the purest charity and religious devotion, which strove to lessen the real or supposed dangers imposed by this malady upon the helpless patient and his family; and that the insufficient help and accommodation accorded to these unfortunate beings was made the subject of repeated complaints and appeals for improvement to the Government both by the public at large and by the religious communities who carried the burden of their charge. The first name associated with this philanthropic departure is that of the noble Mgr. de St. Vallier, second Bishop of Quebec, who in founding the Hôpital Général of that city in 1692, and the Hôtel Dieu of Trois-Rivières in 1697 (the latter from his own resources), made provision in both places for a few insane persons. Later, in 1714, he erected, near the Quebec Hospital a small wooden building for insane women and soon after the Quebec Government built a similar one near this for insane men. In 1720 the French King "on the representation of the Bishop of Quebec . . . that he has built a house for insane and weak-minded persons of both sexes", made an annual grant of 1,000 livres to this

\* His own words.

hospital on condition that it received also disabled soldiers in return for their half-pay. In Montreal, the Hôpital Général, founded by the Frères Charons in 1694, also had as one of its functions the care of insane persons, and at the transfer of this institution to the care of Mme. d'Youville and her community by the Sulpicians in 1753, the nuns were required to erect several wooden buildings within the courtyard of their hospital for the accommodation of such patients. In 1801 the Government replaced these by eight stone structures occupying the same place and these remained in use until 1831 when the Grey Nuns retired from this part of their work, their patients being transferred at this time to the Montreal jail. These structures at the Hôpital Général, converted later into a single building, are doubtless those referred to in the following description culled by the writer from the Journal of the House of Assembly for Feb. 24th, 1819 (p. 108). This minute is headed "Report on the Madhouse of Montreal and opinion of the Commissioners generally on such Institutions", and reads:

"The House is about 36 ft. long and 22 broad. It contains 8 cells, 7 ft. by 6.4 on each side of a passage 2 ft. 6 wide. It is exposed to the rising of water every winter and is damp until spring. Every grade of insanity must undergo the same hard fate: viz, solitary and instant confinement in one of the above described cells."

It was not until the very end of the 18th century that any systematized provision was made by the Government for the mentally afflicted. About this time an Act was passed providing an appropriation of £32 .10 per annum per head (about one and eight pence a week) for the maintenance of insane persons in Lower Canada, the care of whom was formally entrusted by the same Act to the three religious communities already engaged in this work in Quebec, Montreal and Trois-Rivières. This was the beginning of the "farming-out system" that has been justly condemned by psychiatrists. That these communities had no adequate means of properly caring for the insane persons under their charge in the early days of the contract system is evident from various special reports. The deplorable conditions existing, and the need of a large Provincial asylum were set forth in great detail by a committee of investigation appointed in 1824, who were asked also to report "whether one lunatic asylum for the whole province, adapted to the improved modern system of treatment of the insane, be not an establishment called for by every principle of humanity; and if so, what its erection would probably cost."

This Report (to which was attached another of the Quebec Hospital made by Dr. Wm. Hackett in 1816 and presented by him to Sir John Sherbrooke at that time) showed among other details that there were then in the three hospitals thirty-two cells for the lodgment of insane persons, of which eighteen were in the Quebec General Hospital 8 x 7½ feet large by 8 feet high (in addition to 6 "moral" cells 9 x 9 x 9 feet for less serious cases); eight at the Grey Nuns Hospital in Montreal 8 x 6 ft., 3 by 7 ft. 10 high; and at the Ursulines at Three Rivers, six cells 8 x 6 x 8 feet. "Each of these cells", says this report, "is intended for one inmate, who is solitarily confined there, day and night with few exceptions, and only removed to another cell when it is cleaned". . . . "Since 1800", it continues, "there have been confined in the cells of the three districts 207 insane persons, whereof 88 died, 93 have been discharged and 26 remained confined". . . . "In the year 1818 there was granted the sum of 2,500 Pounds currency for erecting additional cells and making repairs at the General Hospital of Quebec and 336 Pounds for other repairs. And in 1818 2,000 Pounds for the like purpose at Montreal.

*"The ladies of the Hôpital Général there and Dr. Selby Senior, the attending physician, to their honour declined to receive the 2,000 Pounds as it would increase what is bad and inadequate to the object."*

This Committee closed its Report with a series of strong Resolutions for the betterment of these evils, one of which reads: "That humanity loudly calls for a lunatic asylum for the whole province or for both provinces for the reception and treatment for cure of the insane upon the improved modern principles, as

also for the ultimate care and support of such as are incurable." Dr. Hackett's earlier report upon the Quebec Hospital stressing the same points was also published at this time. It is shocking to learn that in spite of these representations no action was taken by the Government for over 20 years after this exposure, when the great increase in numbers of insane persons made other provision an absolute necessity. Sir Chas. Metcalfe on his arrival in 1843 made an urgent plea for an improved system; a strenuous report from the grand jury pointing out the disgrace that attached to the Province in this regard brought matters to a head and in 1845 His Excellency entered into an agreement with Dr. James Douglas of Quebec, who undertook the care of the insane of the province for a period of three years on the understanding that proper buildings were erected for them at the end of that time. In the meantime they were to be housed in the old manor-house of Beauport and its stone out-buildings erected by the Sieur Giffard, and Dr. Douglas associated with himself in the undertaking Drs. Fremont and Joseph Morrin. Accommodation was provided for 120 and Lord Metcalfe undertook the removal of those confined at the time in the three "madhouses" of the Province. 81 patients were so transferred in three separate contingents in September and October of that year, 23 persons from the cells at the Quebec hospital, 51 from the Montreal jail, and 7 from the Ursulines at Trois-Rivières. The last named group was in the worst condition of all for several had been fastened to staples in the floor of their cells for years, and all arrived chained and handcuffed. The first report of the proprietors draws a pathetic picture of the arrival of these poor people and of the surprisingly quieting effect which the relative freedom and fresh air in the beautiful surroundings of Beauport after their many years of confinement had upon their disordered faculties. The management was fully abreast of the new ideas of the time and as soon as their muscular force was in a measure restored, those fit for it were allowed to work in fields or gardens. Under the vigilance and care exercised, only one instance of restraint and that of a mild character was found necessary during the first year. Three years later the same contract was renewed for seven years and a proper building at a somewhat different location and having a capacity of 275 beds was erected. It was of coarse limestone with a cupola on top and it was opened in April, 1850. Since then this building, which had three times been partly destroyed by fire, had been greatly enlarged by annexes and reconstruction for the increasing numbers of insane who were crowded upon it from all parts of the Province, always in excess of the accommodation and equipment, and the good beginning made by Dr. Douglas sank in the later decades of the century into comparative oblivion. In the words of the Inspectors, while it was thankfully admitted by all that the Beauport Asylum had been an immense boon to the country, there was also no doubt that the proprietary system on which it was based was an erroneous one. The dark conditions that had obtained in the Province were indeed vanished never to return, but neglect and overcrowding prevailed to an extent that brought the outspoken condemnation of Dr. Tuke and of a Royal Commission appointed in 1887. Shortly thereafter, in 1893, a new contract was made by the Government, with the Sisters of Providence at Quebec, who acquired the Asylum by purchase from the former proprietors and Dr. Vallée of Quebec, an alienist with modern views, was made its Medical Superintendent, and extensive reorganization took place both in improving the building and the care of the patients.

The *Quebec Provincial Asylum at St. Johns, Que.* This institution, which is no longer in existence, today is of interest chiefly because it was the only instance of purely state care having been attempted in this Province and because on its closure its inmates were transferred to the then newly established Longue Pointe asylum and helped to swell its already crowded wards. It was opened in 1861 as a result of a recommendation made by the Board of Asylums that another institution must be created to relieve the great overcrowding at Beauport, and it was intended to convert the barracks at St. Johns, Que., for this purpose. Owing to their military occupation however, in the Trent affair, an old courthouse was

substituted and this was utterly unsuited for the purpose, so that for motives of economy as well as humanity it was closed in 1875.

The *Verdun Protestant Hospital* is situated near Montreal. It has already been mentioned as having been organized from the first as an incorporated charitable institution supported by public money and under Government inspection and the control of its Corporation and of medical officers appointed by the latter. The Act for its establishment, which was passed in 1881, provided that all moneys raised by its corporation from whatever source must be expended upon the institution and its inmates, that the general management of its affairs should be vested in a board of Governors and a Committee of Management elected from its members, and that a full account of all its affairs, receipts and expenditures must be submitted to the Legislature each year. After considerable delays a property known as the Hadley farm, on the Lower Lachine Road, was purchased in May, 1887, as a site at a cost of \$18,000, and buildings were erected on this at a cost of over \$100,000. Dr. *Thomas J. W. Burgess*, assistant superintendent of Hamilton, Ont., asylum and a pupil and godson of Dr. Joseph Workman, was appointed Superintendent on May 1st, 1890, and on July 15th of the same year the first patient was admitted. Before the end of that year there were 139 admissions, 58 of whom were transferred from the Longue Pointe asylum as being of the Protestant faith, by arrangement with the Government. In 1894 a similar transfer was made from Beauport. The year 1907 was marked by the gift from Dr. James Douglas of New York of \$42,000 in memory of his father, for the purchase of 60 acres adjoining the hospital property on the east, and in 1911 the same benefactor contributed \$65,000 for the erection of an amusement hall, which bears on its wall a tablet inscribed to the memory of "James Douglas, M.D. who came to Canada in 1827. He was eminent as a Physician and Surgeon and was the Pioneer Alienist in the Province of Quebec". Again in 1915 Dr. James Douglas contributed \$75,000, also in memory of his father, for a nurses' home. Thus does that old work begun at Beauport live on in new halls.

At the present time this institution comprises five separate houses for occupancy by patients and has a capacity of some 700 patients. Since its opening it has served 7,640 patients according to its latest report. The latest improvement is the reconstruction of its Infirmary under the name of the Burgess Pavilion, in memory of its honoured first Superintendent. On the death of Dr. Burgess on January 18th, 1925, the charge of the Verdun Hospital was placed in the hands of Dr. *C. A. Porteous*, its present Superintendent.

*L'Hôpital de St. Jean de Dieu* at Longue Pointe, the other great French asylum of today, has an interesting history. It is the property of the *Sœurs de Charité de la Providence*, a community founded early in the 19th century by Mme. Gamelin with the condition that one of their charitable works should be the care of idiots and the insane. Accordingly in November, 1845, a small wooden house known as "La Maison Jaune", situated in the rear of the garden of the first establishment of the Sisters at the Corner of St. Hubert and St. Catherine Streets in Montreal, was opened for a few mental cases and in 1852 these were removed to a larger establishment fitted up in farm buildings owned by the Sisters at Longue Pointe under the charge of *Sœur Praxède* who later became the foundress of an Oregon branch of the order. This new undertaking was consecrated in October of that year under the name of St. Jean de Dieu, the Granada saint, and from small beginnings the present great institution took form. The reorganization which followed upon the criticism of Dr. Tuke and the Royal Commission of 1887 did not take effect here until 1897, when a new contract with the Government was drawn up and the Sisters began the erection of an entirely new establishment occupying the centre of a farm of 800 acres, constructed on the pavilion plan. This building, which was first occupied in 1901, has been improved by many recent additions and expansions which include a modern operating room (1911), a training-school for nurses, and a complete equipment for hydrotherapeutic and occupational therapy. This was developed under the super-

intendence of the late Dr. *George Villeneuve* and after his death in 1918 by the present Superintendent, Dr. *F. E. Devlin*. It has now accommodation for 3,250 patients.

Other smaller French hospitals for the insane in the Province are: the *Hospice Ste. Anne at Baie St. Paul*, founded by Father Fafard in 1889 under a Franciscan order of nuns in the midst of a farm of 250 acres, which contained, in 1917, 171 patients; the *Hospice St. Julien* at Megantic (for idiots); and the *St. Joseph Benedict Asylum*, situated on the banks of the St. Lawrence near Pointe aux Trembles. The latter is a small and efficiently managed private institution containing some 100 patients under the care of the Brothers of Charity, a Belgian order who have done active educational and hospital work in many parts of England, Canada and United States.

**The Canadian National Committee for Mental Hygiene.**—The foregoing account of the development and application of modern principles in the care of the Insane in this Province in the past fifty years would be incomplete without mention of this important movement, which took form in Canada some eleven years ago and has as its object the study of problems in mental hygiene with a view to their elucidation for the common good. The necessity of a broad humanitarian outlook in the solution of these problems and the enormous economic waste that the increase of mental disease imposes upon the State, places a grave responsibility upon the public and makes the organization of the strongest forces of society for its prevention, and for the proper treatment of those afflicted with this malady, a matter of the highest importance.

These ideas lie at the foundation of the *Mental Hygiene Movement* of the United States, which originated through the initiative of Mr. Clifford Beers<sup>(58)</sup> (himself a case of recovery from an acute psychosis and with personal experience of life in a large mental hospital), acting under the advice and with the co-operation of several leading American psychiatrists. The *Canadian National Committee* was founded as what may be termed an off-shoot of this movement in 1918 and was formally organized at Ottawa on April 26th of that year with Dr. *C. F. Martin*, Dean of the McGill Medical Faculty as President, Dr. *C. K. Clarke*, Dean of Medicine in the University of Toronto, as Medical Director, Dr. *C. M. Hincks*\* of Toronto as Associate Medical Director and Secretary, and a strong Executive Committee drawn from prominent citizens in all parts of Canada, the representative on it from the Province of Quebec being Dr. *A. H. Desloges* of Montreal. Its constitution states that its object is to assist those agencies already at work on the development of community measures for the care of the mentally handicapped, and says:

"It was established because of the belief that a group of professional and lay citizens could materially strengthen the hands of these agencies by impartially surveying the problems of mental abnormalities in Canada; by evaluating the effectiveness of the institutions actually in operation; by discovering the points at which efforts were being impeded by public apathy and indifference; by studying the medical, educational, social and legal results of mental abnormalities; by envisaging, in collaboration with the proper officials, federal, provincial, and local programmes for sound and stable progress in the scientific and humane treatment of the mentally afflicted; and by educating the public to such measures as might be feasible or requisite."

The field of action of this Committee is, of course, nation-wide and a considerable part of its activities have been directed to surveys of other provinces, to promoting government grants for the enlargement and improvement of existing mental hospitals throughout Canada, etc. It has, however, a very active section in this Province with headquarters in Montreal, under the Medical Directorship of Dr. *W. T. B. Mitchell*, and a research division and nursery school for the study

\* On the death of Dr. Clarke in 1924, Dr. Hincks has succeeded him as Medical Director.

of mental adjustments in the young (the latter supported during the last five years by a grant from the Laura Spelman Rockefeller Fund) have been established at McGill University as well as at Toronto, and Psychiatric Outdoor Clinics both at the Royal Victoria Hospital in Montreal and at the Toronto General Hospital. In the past year there has also been formed, under the direction of Dr. A. H. Desloges, Director of Mental Hospitals and Reform and Industrial Schools in this Province, the Quebec Section of the Canadian National Committee, which has to do with the promotion of Mental Hygiene activities among the French population and has made a Survey of the Catholic School population, with a view to providing for adequate school care and special class care for retarded school children. A Psychopathic Hospital for the treatment of acute cases with a good prospect of recovery, a departure urgently needed in this Province, is still in the lap of the future.

**Hospitals of Quebec Today.**—Three of the five historic French hospitals founded in the 17th century under the old régime survive today as such, modernized and enlarged to meet the requirements and standards of the present time. These are the Hôtels Dieu of Quebec and Montreal, and the Hôpital St. Joseph of Trois-Rivières replacing the old Hôtel Dieu there; the other two, namely the Hôpital Général of Quebec and that of Montreal are no longer in use for the sick poor, having been given up to other charitable purposes. Similarly, of the two important hospitals established in this province in the early years of British rule, that grand old charity known as the English Montreal General Hospital (founded in 1819) still holds its place in the advance guard of modern hospital progress; while the Marine Hospital of Quebec, which took such an important part in the surgical work and the medical education of that city in the first half of the 19th century, has gone out of existence entirely, having been converted into a reform school in 1890, and quite recently, under the name of Hospice St. Charles, destroyed by fire (1927). The early history of all these institutions has been traced above in this article. It remains to outline briefly the present status of the four that have survived as modern hospitals and that together share an honourable and venerated past.

The *Hôtel Dieu du Précieux Sang*, founded in 1639, has today a capacity of 200 beds and occupies a large building begun in 1890 and completed by more recent additions, that stands on a site adjacent to that occupied by the earlier hospital erected in 1816, which again replaced the still older building rebuilt in part in 1757 after the conflagration of 1755. That part of the present structure given up to the sick is of rectangular form, 700 feet long and three stories high. Its administration is still in the hands of the Hospital nuns of the Rule of St. Augustine, whose predecessors established it in the first adventurous days of the colony. They instituted, about the year 1907, with the help of the late Dr. M. J. Ahern and his colleagues, a Training School along modern lines, under which the Religious themselves qualify for the nurse's diploma, but have no lay nurses.

The *Hôtel Dieu of Montreal*, founded in 1644, is today a modern hospital of 300 beds and numbered 4,765 admissions in 1929. Its spacious wards and laboratories occupy the huge pile of buildings at the foot of the eastern slope of Mount Royal, to which location it was removed from the site of the old hospital at the corner of St. Paul and St. Sulpice Streets in 1861. A number of important additions have been made in order to modernize the building erected at that date. In 1904 a large wing was added, now given over to private wards and administration, and a well equipped X-Ray Department, which latter is one of the most important parts of the work of this hospital, and ably operated by Dr. Leo Pariseau, known also as a leading authority on Canadian medical history. In 1916 new kitchens and a hydrotherapy department were built, and in 1923 two additional floors for the Nurses Home which was opened in the following year; its Training School, inaugurated in 1901, underwent affiliation with the University of Montreal in 1920. In 1925 a large extension was made containing new operating rooms, a solarium for each floor and quarters for the Internes. The Hospital

Commission of the American College of Surgeons at its tour of inspection in 1920, after a careful examination of all parts of its equipment, rated this venerable hospital in Class A, as meeting all modern requirements. It is still administered by the Hospital Nuns of St. Joseph, who took over its management from Jeanne Mance, its foundress, in 1659. (Figs. 6 and 28).

The tradition of the *Hôtel Dieu de Trois-Rivières*, founded in 1697 and destroyed by fire in 1806, lives on today in the *Hôpital St. Joseph* of this town, which was erected in 1886, and placed under the charge of the *Soeurs de la Providence* by transfer from the Ursuline nuns who held jurisdiction over the original Institution. The St. Joseph Hospital has a capacity of 95 beds and supplies the town and surrounding districts with an active service. It also has a training-school for nurses, always important as tending to maintain standards, which was founded in 1907, and became affiliated with Laval University in 1923.

*Recent Developments in the Montreal General Hospital.*—The three early French hospitals above described carry the palm as the very first institutions established on this continent for the care of the sick poor and carrying on today on modern lines. The English Montreal General Hospital, which received its charter in 1821, nearly two centuries later, had still, however, to contend with pioneer conditions such as existed in early British-Canadian Montreal. From the first a popular and much-needed charity, it grew rapidly from its very small beginnings to a capacity, after the addition of the Richardson wing in 1831, of 100 beds, and in 1914, after the opening of its new building, this was increased to accommodation for 400 patients; and last year (1929) with the same number of beds it had 7,535 admissions and an outdoor service of 125,278. A valuable and entertaining little history written from his personal knowledge by the late Dr. *F. J. Shepherd*<sup>(52)</sup> so long a leading spirit in its councils and surgeon-in-chief in its wards, gives an epitome of the various steps in its advancement and from it the following outline is drawn.

The next addition, after the erection of the Richardson and Reid wings (see Fig. 15b) was that of a building for the care of infectious diseases accommodating 40 patients, put up in 1868 at the east side of the hospital ground behind the Richardson wing. This was used chiefly for the care of smallpox and it became famous from the fact that Dr. *Osler* who was put in charge in 1875, himself became a patient there with this disease, and on the basis of this experience wrote his "Initial Rashes of Smallpox".<sup>(53)</sup> For a number of years this remained an active (and not too well isolated) part of the hospital, 170 smallpox cases having been cared for there in 1878 with 45 deaths; at last, during the epidemic of 1885, the civic authorities opened their own Isolation hospital and in 1893 they took over this work financially and transferred the remaining patients; the building was finally pulled down to make room for the erection on its site in 1911-1913, of the eastern block of the new Hospital.

In 1874 the Thomas Morland wing for Sick Children was added behind the Reid wing (Fig. 15b). In this year also an important advance was made from the scientific side in the appointment of Dr. *William Osler*, then newly returned from his postgraduate studies in Berlin and Vienna, to be pathologist to the hospital, in which connection he inaugurated the first systematic autopsy service in Canada and performed here during the succeeding ten years of his stay in Montreal, no less than 750 carefully recorded autopsies and gained therefrom the rich experience embodied in his great *Practice of Medicine*.<sup>(54)</sup> In 1876 the first specialist was appointed to the Hospital, Dr. *Frank Buller* as Oculist and Aurist; in 1882 Dr. *Blackader* instituted the first Pediatric Clinic; in 1883 Dr. *Wm. Gardner* was elected Gynecologist and Dr. *George Major*, Laryngologist. In 1877, Listerism was introduced by *Thomas Roddick*, on his return from the service of the great surgeon at Edinburgh. In the year 1875 also, another important departure was made, in that Miss Florence Nightingale was induced, at the request of Mr. Peter Redpath and Dr. G. W. Campbell, President and Chairman of the Medical Board of the Hospital, to send out a Canadian graduate of the St. Thomas School

with four other graduates of the Nightingale School, for the purpose of establishing a Nurses' Training School at the Montreal General Hospital. Unfortunately this early attempt failed, from unavoidable internal complications, and Miss Machin returned with her nurses two years later to England. Not until 1890 did the Management find a Superintendent able and willing to introduce this much needed reform. In that year with the appointment of Miss *Nora Livingstone*, a gifted graduate of the New York Hospital, success was attained and a great Training School, the first in this Province, was established here, whose graduates have carried the name of the Montreal General Hospital with credit far and wide over this continent. In 1897 \$35,000 was contributed to build a Jubilee Nurses' Home, the foundation stone of which was laid by Lord Lister when attending a meeting of the British Medical Association in Montreal. Since its origin the School has granted 1,064 diplomas and has now 192 students (1929).

In 1882 two new surgical wings were erected, entitled the Greenshields and Campbell wings, in token of the \$100,000 donated for this purpose by the David Greenshields' estate and Sir George Stephen, the latter in memory of Dr. *G. W. Campbell*, a brilliant surgeon and long the devoted servant and head of the Medical Board of the Hospital. Soon after, a bequest made without conditions from the late Mr. George Hamilton brought another \$100,000, which was devoted to the construction of a fully equipped operating room. In 1894 the older parts of the hospital were remodelled and four new medical wards gained at a cost of \$70,000 collected from the public. In this year also, a pathological building was erected under the charge of the brilliant *Wyatt Johnston*, Osler's successor in this field, and this was rebuilt in 1909 on a larger scale with one floor left unfinished which in 1919 was completed to house the departments of Metabolism and Biochemistry, as well. An X-Ray department was established in 1898 and a Dental Clinic (since greatly expanded) in 1909. In 1910 gifts of \$150,000 from the Estate of Mr. James Crathern to the Endowment Fund of the Hospital, and \$200,000 raised under the name of the Charles Alexander Fund, for the construction of an Outdoor Department supplied needed funds. In 1911 the corner stone of the new building, which rises behind the original one, was laid, and the east and centre blocks of this were completed in 1913, supplying additional medical, children, and specialist wards, and flats for private and semi-private patients. In 1924 the amalgamation took place under the same management of the *Western General Hospital* of this city, which has a capacity of 85 beds and had 1,834 admissions in 1929, and which now bears the title the *Western Division of the Montreal General Hospital*. In November, 1926, a handsome new Nurses' Home was opened, occupying a separate building on the land opposite the Hospital at a cost of \$600,000, of which \$200,000 was supplied by the Province.

In the middle nineteenth century two important Maternity hospitals were established in Montreal, both of which survive today and minister respectively to the two great Universities of that city, to one of which each is affiliated. These are: *The Catholic Maternity Hospital*, an institution of a present capacity of 175 beds, recently amalgamated with the Hôpital Misericorde to form a general one. This institution has an interesting history for it is apparently the lineal descendant of the "Montreal Lying-in Hospital", founded by William Macnider in 1842, which supplied clinical teaching material for the old Ecole de Médecine, which is in turn the direct antecedent of the University of Montreal, to which the Catholic Maternity is today ancillary. The other, in those days, rival institution, originally known as the "University Lying-in Hospital" and established in 1843 at the expense of the members of the McGill Faculty, became in due course the *Montreal Maternity Hospital*, staffed by members of the McGill Faculty and providing clinical facilities for their students; in 1925 it was amalgamated with the Royal Victoria Hospital and is now housed in the splendid new pavilion of that institution under the name of the *Royal Victoria Montreal Maternity Hospital*.

Another institution established a little later than these in the last century and doing active work at the present time along modern lines is the *Jeffrey Hale*



*Hospital of Quebec.* This is a general hospital of 140 beds which serves the needs of the English-speaking population of that city. Its training school, established in 1901, numbers 178 graduates and has 35 pupil nurses now enrolled.

Next to these in the order of time of origin stands the *Notre Dame Hospital* of Montreal, a large and progressive French Canadian institution of a present capacity of 300 beds, founded in 1880 to meet the need of another large hospital in the east end of the city convenient to a populous district not adequately served at that time by the then overcrowded *Hôtel Dieu* and the English General Hospital; and also to supply the additional clinical teaching required for the Laval Medical School in Montreal. This hospital differs from the other French hospitals in the Province in that it did not emanate from the labour of love of a religious community but was, like the Montreal General Hospital, from its inception a public charity deriving its financial support from the people, with Governors drawn from among its subscribers; and its first annual report of 1881 emphasizes the point that it was "*open to all sick poor, without distinction of nationality or religion.*" The moving spirit in its organization and in obtaining the initial financial support necessary was Dr. *E. P. Lachapelle* (Fig. 29), a man of singular force of character, long the President of its Board of Management, to whose solid administrative powers and broad scientific standards was largely due the fact that the Notre Dame Hospital was from the first supplied with good laboratory and operating room services and was early equipped for the diagnosis and treatment of disease along modern lines. With him were associated the Abbé *V. Rousselot*, Curé of the Parish of Notre Dame, and *Mère Deschamps*, the Superior General of the Grey Nuns, in whose hands the internal management and nursing arrangements were from the first placed. Its first location was in the old Hotel Donegana on Notre Dame Street, which had in its first year a capacity of 80 beds and cared for 772 indoor and 1,609 outdoor patients. Twenty years later, in 1900, there were 2,023 indoor patients and 21,818 outdoor consultations, increased in 1928 to 5,573 admissions and 57,110 outdoor patients. The centre of the French population having shifted northward, a new site on Sherbrooke Street East, facing Parc Lafontaine, was donated by Sir Rodolphe Forget in 1900 and here, in 1904, the south wing of the present new building was erected, he again donating \$100,000 for this. In 1905, *St. Paul Hospital for Contagious Diseases*, a branch of Notre Dame, was erected at a cost of over \$200,000, and opened under the control of the Board of Health with nurses supplied by the Gray Nuns from the parent hospital. The financial pressure resulting led to a campaign for funds in 1909 under which \$208,000 was subscribed, and the new building continued in 1921 and was completed in 1924. Further extensions are now planned, following upon the successful campaign of April, 1930, when \$1,300,000 was raised to be applied to the enlargement of this great public hospital to a capacity of 560 beds, the remodelling of its outdoor and the erection of a new Nurses' Home. Its training-school, which opened in 1900 with three pupils, has now 303 graduates with 120 pupils enrolled at the present time (1929).

The *Montreal Foundling and Baby Hospital* is a popular charity in that city founded in 1891. It has now a capacity of 80 beds, and its training-school, founded in 1895, has graduated 390 nurses to date.

On January 2nd, 1894, the *Royal Victoria Hospital* of Montreal received its first patient. This was a red-letter day not only for this province, but for the hospital world at large; for an endowed institution, erected on a commanding and beautiful site, on a scale commensurate with the responsibilities and opportunities for the relief and prevention of disease that the scientific advances of the present time are continually unfolding, was on that day thrown open to the public. Its erection was made possible by the joint gift of \$1,000,000 from Lord Strathcona and Lord Mount Stephen, presented in commemoration of Queen Victoria's Jubilee year, and this was followed by further large donations from the same generous sources towards its revenue and endowment, and it was built on land given by the city on the slope of Mount Royal just behind the McGill Medical



FIG. 28. THE HOTEL DIEU DE ST. JOSEPH, MONTREAL.

The original building first occupied in 1861 is seen in the foreground. It is easily recognized by its pointed roofs and central dome. The following modern additions are also shown: (1) Administration, X-ray Department and Private Wards, erected in 1902 (perpendicular to original right wing, occupying right foreground); (2) New semi-private wards and operating rooms, 1927 (aligned with and back of foregoing); (3) Pathological laboratories, special dispensaries, 1902 (on extreme right); (4) Nurses' Home and Training School, 1923 (centre back, behind Chapel and dome). The main entrance of the Hospital is on the right of the Administration block facing the statue of Jeanne Mance (see Fig. 6), which cannot be seen in the picture owing to poor lighting from above.

(An aerial view taken by *Cie. Aérienne Franco-Canadienne.*)

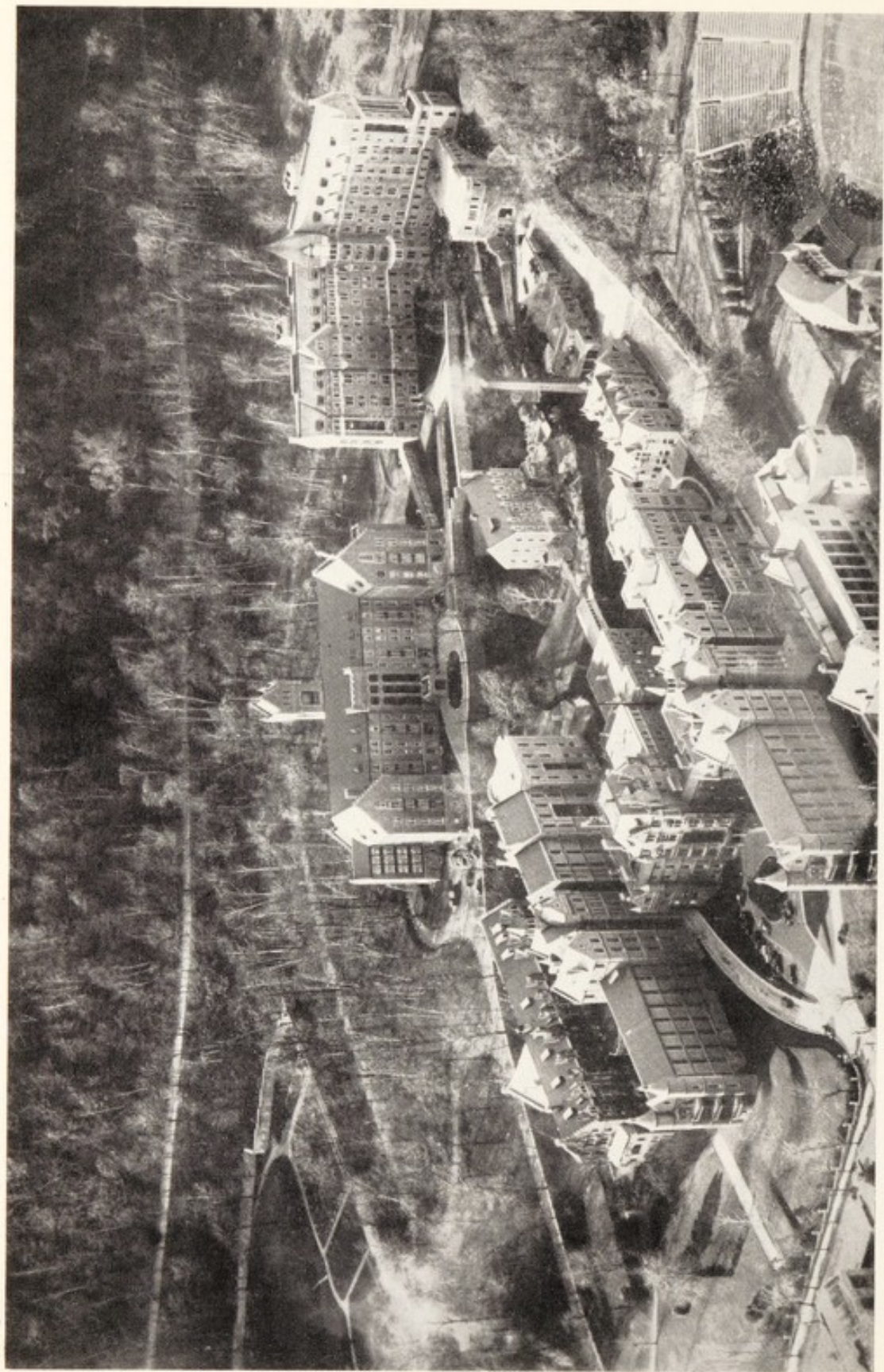


FIG. 29. ROYAL VICTORIA HOSPITAL.  
Showing Administration-block in centre with Public Wards on either side, Pathological Institute on right with Nurses' Home to the left in the foreground. The Ross Memorial Pavilion for private patients is seen on the left and the Women's Pavilion (Montreal Maternity Hospital) on the right, behind and above the other buildings.  
From an aerial view taken in 1930.

Buildings, its close proximity to these adding immensely to its value as a clinical teaching unit and as a centre for medical research. Constructed at first to accommodate 250 patients, it has been enlarged by repeated extensions so that it is now an immense hospital of 700 beds, which treated, by its last report, 14,307 indoor patients (of whom 1,925 were children) and gave 78,356 outdoor consultations in 1929. The most noteworthy additions have been its *Ross Memorial Pavilion*, being a complete private hospital of 120 beds built on the slope of Mount Royal behind the main hospital with funds supplied by J. K. L. Ross, Esq., in memory of his parents, and opened in September, 1916; its Nurses' Home erected about the same time, its fine Pathological Department housed in the new Pathological Institute of the University (1924); and the fine new *Woman's Pavilion* erected in 1926 to house the Montreal Maternity Hospital, which, as mentioned above, is now installed there. The School for Nurses, inaugurated in October, 1894, has granted 1,005 diplomas to date and has 240 pupil nurses enrolled at the present time. (Fig. 29).

A crowning achievement of the far-seeing policy that has guided this great hospital towards the full attainment of the high field of usefulness pre-vised by its Founders, has been the recent establishment of a Joint Committee between it and the other great English-speaking hospital of Montreal. This took place on February 15th, 1927, under an agreement which reads:

"In order to establish and maintain co-ordinated efforts, balanced progress and administrative correlation in the English hospitals of Montreal; to add to their facilities; to remove certain disadvantages which come from an entirely independent, disconnected administration in each; to improve the teaching advantages of their respective services; and, finally, to design and to shape a comprehensive plan for the development of a general hospital system for the future of the greater City of Montreal, there shall be constituted. . . . 'The Joint-Committee of the Royal Victoria Hospital and the Montreal General Hospital'."

Several important special hospitals were established in Montreal in the first decade of this century. The *Alexandra Hospital for Contagious Diseases*, founded in 1906 by public subscription, filled the same sorely-felt need in the English-speaking population as had been met a year previously in the case of the French-Canadian section by the St. Paul Hospital; it has 165 beds and works under a Medical Board drawn from the staffs of the Montreal General, Royal Victoria, and Children's Memorial Hospitals, and supplies these institutions with facilities for training their pupil-nurses in the care of infectious diseases and for clinical teaching of McGill students. The *Hôpital Sainte-Justine* was founded in 1907 by Mme. L. de G. Beaubien and a group of charitable ladies for the care of sick children under 14 years. It is a splendidly organized and well managed institution, which, as the first children's hospital in Montreal under French-Canadian auspices and greatly needed by the teeming population, makes a strong appeal to the public, by whose support it is financed. It began in a very humble way. "A ton of coal, a bed, a child and a nurse entered simultaneously an old house (on St. Denis Street)—the Saint Justine Hospital was founded", says a narrator;\* but rapid progress was made and it removed the following year to a better one on Delormier Street and thence to its present spacious building, which houses also its School for Crippled Children, both under the management of the *Filles de la Sagesse*, a religious order brought out from France in 1910 for the purpose. They have had from the first an excellent training school, which was affiliated with the University of Montreal in 1922. The *Children's Memorial Hospital*, organized by the late Dr. *Mackenzie Forbes* in 1902, with especial reference to orthopaedic work and with a School for Crippled Children attached, has done splendid pioneer work in this field. It was located at first in the old

\* Miss Edith B. Hurley, Professor of Public Health Nursing in the University of Montreal, in an unpublished address delivered before the International Congress of Nurses, July, 1929.

Pillons Stevenson house on Guy Street, but removed in 1908 to its present beautiful buildings and grounds on the western slope of Mount Royal on Cedar Avenue. It has, with its new wing just opened, 200 beds and is built on the pavilion system with especial reference to heliotherapy and its attending staff is drawn largely from the pediatric service of the two great English hospitals with which it is associated. Adjoining it and forming with it an imposing group of buildings is the fine *Shriners' Hospital for Crippled Children*, an institution of 50 beds erected in 1922 by this remarkable organization, under the financial support of which the skilled orthopaedic work of the hospital is carried on.

Very recently a smaller institution which, under the name of the Women's Hospital had done a large work in maternity and women's diseases in the south-western part of Montreal since its foundation in 1873, came into its own as the result of a campaign for funds held in 1926 for the support of its much needed activities, and has been converted into a large general hospital. This is the *Woman's General Hospital*, situated on Tupper Street, founded in 1927 with a capacity of 225 beds.

Other general hospitals recently erected in that city are the *Hôpital Jeanne d'Arc* founded in 1919 (200 beds) and the *Hôpital Saint Luc de Montréal*, on Saint Denis Street, founded in 1928 (100 beds). The latter, which started in 1913 as an eye, ear, nose and throat dispensary, developed later as an important industrial and dental clinic, and in 1926 entered upon a contract with the Federal Government for the care of sailors, which led to the establishment of the present hospital. It is an up-to-date institution rated in Class A, and contemplates immediate extension to 225 beds.

The June, 1929, number of *La Garde Malade*, which was issued in the form of a Souvenir to the International Congress of Nurses then meeting in Montreal, is given up to a valuable illustrated article on the Training-Schools of the Province of Quebec, compiled by Mlle. Rachel Tassé.<sup>(56)</sup> From it the following statement regarding institutions of importance outside of Montreal (all with Training-Schools) not mentioned above is abstracted.

*Hôpital St. Eusèbe de Joliette*, founded in 1855 (54 beds); *Hôpital St. Jean* at Richelieu, in 1866 (55 beds); *Sherbrooke Hospital*, 1888 (85 beds), Training School affiliated with Royal Victoria Hospital; *Hôpital St. Joseph* at Rivière-du-Loup, 1889 (78 beds); *Hôpital St. Charles* of St. Hyacinthe, in 1902 (100 beds); *Hôpital Général St. Vincent de Paul* of Sherbrooke, 1909 (300 beds), affiliated with University of Montreal; *Hôpital du Sacré-Coeur* at Hull, in 1911 (150 beds); *Hôpital Normand et Cross* at Three Rivers, in 1912 (60 beds); *Hôpital St. Joseph* at Lachine, in 1903 (50 beds); *Hôpital St. François d'Assise* at Quebec, in 1914 (83 beds); *Hôtel Dieu* of Sherbrooke in 1917 (50 beds); *Hôpital de l'Enfant Jésus* at Quebec in 1923 (123 beds); *Hôpital St. Sacrement* of Quebec, founded in 1927, with 300 beds under the internal management of the Sisters of Charity, and with a Training-School affiliated with Laval University.

From the "Directory of Hospitals in Canada"<sup>(56)</sup> we learn of the following hospitals in other towns in this Province: At Buckingham (40 beds); at Chicoutimi (60 beds); at Harrington, Grenfell Mission (16 beds); at La Tuque (70 beds); at Lauzon (80 beds); at Rimouski (70 beds); at Rouyn (250 beds); at St. Foy (Orthopaedic and Tuberculosis), (250 beds).

**History of the Montreal Morgue.**—This is, so far as we know, the only organized establishment for medico-legal enquiry into deaths due to violence or negligence in this Province. The following information regarding it has been kindly supplied to the writer by Mr. L. A. Barrière, its official photographer, who is preparing a remarkable illuminated pictorial history of this interesting institution based upon the original records filed there and on facts obtained from Mr. E. Z. Massicotte, the City Archivist.

Under the French régime, in the event of a death of suspicious character, the Judge of the Royal Tribunal or Seigneurie proceeded to an inquest assisted usually

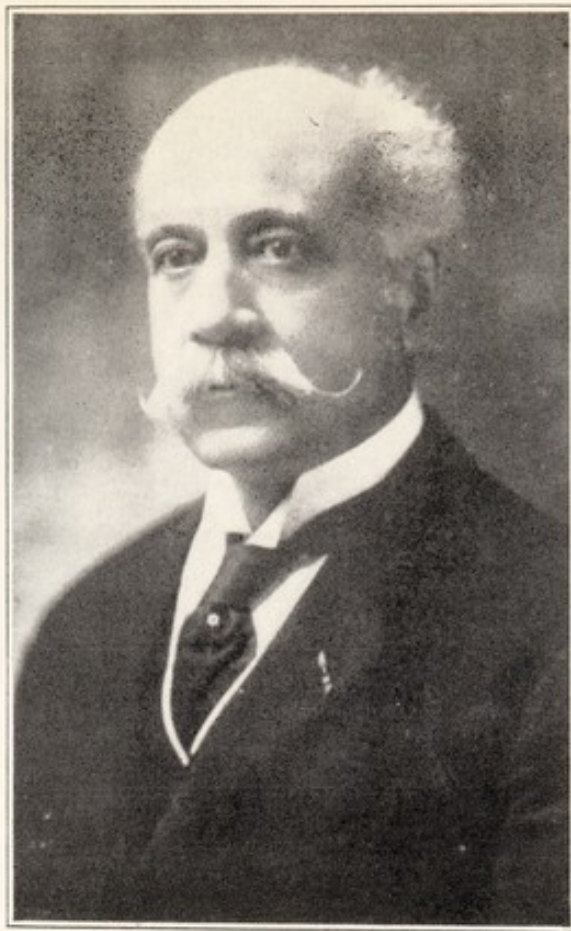


FIG. 30. PROF. E. P. LACHAPELLE  
Dean of the Faculty of Medicine of Laval at Montreal  
and first President of the Board of Health of the Province of Quebec.  
(1845-1918)



FIG. 31. DR. WYATT GALT JOHNSTON  
Earliest Medico-legal expert in Canada, and first Professor of Hygiene at McGill University.  
(1860-1902)



FIG. 32. J. GEORGE ADAMI, C.B.E., M.D., F.R.S., F.R.C.S., Hon. D.Sc., Hon. LL.D., late Strathcona Professor of Pathology at McGill and Vice-Chancellor of the University of Liverpool. (1862-1926)



FIG. 33. SIR THOMAS G. RODDICK, M.D., LL.D., F.R.C.S. (Hon.) Founder of Dominion Registration in Canada (Roddick Bill) and Dean of the McGill Medical Faculty from 1901 to 1908. (1846-1923)



FIG. 34. H. S. BIRKETT, C.B., M.D., LL.D. McGill (Hon.) Professor of Otolaryngology and Dean of the Medical Faculty of McGill University from 1914 to 1921. Organized No. 3 General Hospital (McGill) and Officer Commanding it during the years of the Great War. Assistant Director General C.A.M.C. 1918 to 1919, with rank of Brigadier-General.



FIG. 35. A. D. BLACKADER, M.A. M.D., LL.D. (Hon.)

Chairman of the Editorial Board and Editor-in-Chief of the *Canadian Medical Association Journal* from its successful reorganization in 1919 to the time of his resignation in 1929, when he became Editor Emeritus. (From the oil-painting by M. Alphonse Jongers).

by a military surgeon who performed the autopsy needed to substantiate the cause of death. The Commissions of these surgeons are in the city Archives but have not yet been assembled for the elucidation of this part of the work.

With the change to British rule in 1760 this task of making this enquiry was entrusted to an official called a Coroner. This officer was not necessarily a medical man, (as is usually the case in the country parts), nor even a lawyer, but was drawn from the educated class. The first Coroner thus appointed under British rule was *John Burke*, appointed in 1764, who filled the post until his death in 1800, except during a year's absence in England in 1791-1792, when his place was supplied by John G. Beebe. Burke was succeeded by *Jonathan A. Gray* (1800-1812) and the latter by *Jean Marie Mondelet* (father of the two Judge Mondelets who played such an important role in the troubles of 1837-38), from 1812 to 1847. *Joseph Jones*, appointed in 1838, held office from 1838 until his death in 1894, the following distinguished men having also been Coroners jointly during a part of this time as follows: *Melchior de Salaberry* from 1847 to 1848; *Charles Coursol* (who was also made Superintendent of Police Force from 1856-1866, Judge of the Session in 1869 and Mayor of Montreal 1871-72) from 1848 to 1878; *Joseph Geoffrion* from 1848 to 1879; and *Edmond McMahan*, who was appointed in 1893, a year before Mr. Jones' death, and held office until 1927, when he was succeeded by the present Coroner, Mr. *Lorenzo Prince*.

At the beginning of the English régime the autopsies, which should form an essential part of the inquest were done by military surgeons probably in the prisons. Later, during the terms of Coroners Mondelet, de Salaberry and Jones, they were done usually at the house of the deceased, or where the body was found, the jurors being chosen on the spot and the Coroner disposing of the case without any medical certificate. Unfortunately the Archives up to the year 1826 were destroyed in the fire at the Court House in 1844, so that it is now impossible to establish who were the practitioners who were called on to give opinions during that troubled time. From 1826 to 1879, however, there are a number of autopsy reports signed by regular physicians not officially appointed. Among these are the following interesting signatures:

In 1829, Daniel Arnoldi, Fernando Holmes, James Munro, John Stevenson; in 1836, Rodolphe Anger, Antoine Bouthillier, F. L. Davignon, Michael McCullough, John Stevenson; in 1839, J. A. Crawford, Wm. Macnider, Peter Munro; in 1840, A. Hall, A. T. Jackson, S. A. Sewell; in 1846, Francis T. Arnoldi, John Anderson, Edward Carter, J. B. Desrosiers, Alex. Long, Wolfred Nelson; in 1847, George Fenwick, House surgeon, Montreal General Hospital; 1848, Daniel Arnoldi, Montreal Gaol; in 1858, F. Perrault, Casimir Dufresne, R. C. Cark, Charles Pacault; in 1865, James McCoghil; in 1871, John Reddy, Jean Phil. Rottot, John Morley Drake, P. G. Brossard; in 1875, L. O. Longlin; in 1873, H. Trenholme, R. A. Kennedy, J. R. Smellwood; in 1879, Toussaint Brosseau and John Sheridan.

These signed reports do not extend in the files of the Morgue beyond 1879, but we know that shortly after that date a number of autopsies were done on Coroner's cases by *Dr. William Osler*, and in 1882 he published an extensive study entitled "On the brains of criminals. With the description of the brains of two murderers"<sup>(57)</sup>, one of whom was convicted and hanged at Rimouski and the other at Montreal in 1881, followed in 1883 by another article "Report on the Brains of Richards and O'Rourke"<sup>(57)</sup>, two other criminals also executed at Montreal in February, 1883.

The first regular appointment of a physician specially qualified to act as medical expert in autopsies made on Coroner's cases was made in 1895, of *Dr. Wyatt Johnston*, who was also the first bacteriologist in Canada and Professor of Hygiene at McGill at the time of his death in 1902. This occurred from blood-poisoning contracted at an autopsy. (Fig. 31).

The Montreal Morgue was fully organized and equipped as a laboratory in 1914, under the able Medical Directorship of *Dr. Wilfrid Derome*. It is said to



have been the first, and was for some years the only medico-legal laboratory on this continent and it is still the only one in Canada. In it the sciences of ballistic and writing expertise are also in daily application.

**Outstanding Names in the Later Nineteenth Century.**—Space does not permit of more than a brief mention of some among that galaxy of men who in the middle and later nineteenth century, laid the foundations of modern medicine in this Province, at a time when the new ideas in Pathology and Preventive Medicine were stirring in the air, and the gospel of clinical teaching by direct observation was being grasped by the Profession. Grouped around the great name of *William Osler*, (who graduated from McGill in 1872 (Fig. 26) and passed the first ten years (1874-1884) of his active professional life as a member of the Professoriate of that School) (Fig. 27), the men who were his forerunners, associates and immediate successors may rightfully claim a share in the undying honour that attaches to him as the greatest Master of Medicine this continent has produced. (Fig. 36). Like him, his predecessors, Robert L. MacDonnell, George D. Gibb, Archibald Hall, and the brilliant young James Barnston (cut off in the flower of his age but already Professor of Botany at McGill at 27), as well as McGill's great Principal, Sir William Dawson, were born naturalists all, and it was they and others of the same ilk who, in the sixties, laid the foundations of the *Natural History Society of Montreal*, an organization that found in Osler an ardent disciple and that served as a place of nurture for those early microscopic studies that gave to his pathological work an exact scientific basis. Later, in the early eighties, it was Dr. *R. P. Howard*, (Fig. 25), his beloved preceptor in the art and science of medicine and the Dean of his Faculty whose sympathetic understanding of Osler's nascent quality of greatness, helped him to his place on the crest of a great opportunity; while his comrades and associates in the field of clinical medicine, *George Ross*, *John Bell* and *R. L. MacDonnell*, as well as his fellow student and life-long friend, Dr. *Francis J. Shepherd* (Fig. 17), that brilliant surgeon whose teaching at a later day made the Chair of Anatomy at McGill famous on two continents—were among those whose genius and youthful professional ardour lent glow and zeal and colour to an environment that Osler himself looked back upon as perhaps his greatest inspiration. Nor were such influences confined to the immediate circle of his own University. With characteristic universality of thought and interests he shared too in the fermenting activities of the French-Canadian medicine of the day. In the splendid effort of Dr. *E. P. Lachapelle* (Fig. 30), who brought the whole weight of his fine intellectual powers to bear upon the problem of establishing a Public Health Service in this Province, and in the foundation of the Notre Dame Hospital as a modern teaching unit, Osler gave and received impetus. And it was in the years immediately succeeding his stay here (1885-1902) that the young *Wyatt Johnston*, (one of the greatest geniuses this Province has yet produced and Osler's successor as Pathologist to the Montreal General Hospital), embarked in close collaboration with his French-Canadian colleagues, upon his epoch-making work of organization and discovery in the new sciences of Bacteriology and Immunity, and inaugurated in this Province medico-legal and hygienic measures that are still bearing fruit. A little later but still within the radius of the "divine afflatus" of this same creative period, *J. George Adami* (Fig. 32) (1892-1914) and *Eugene Latreille* established, at McGill and Laval (University of Montreal) respectively, Departments of Pathology that hold their place in the sun today.

Dr. Harvey Cushing's great Biography of Sir William Osler<sup>(58)</sup> describes this "golden age" of medicine at Montreal in all its fulness, as also does the Sir William Osler Memorial Volume of the International Association of Medical Museums<sup>(59)</sup>. To these sources of information upon the making of scientific medicine on this continent the reader who may be interested is referred.

**Modern Progressive Movements.**—Probably the greatest contribution which the 20th century has made to the welfare of the race has been the

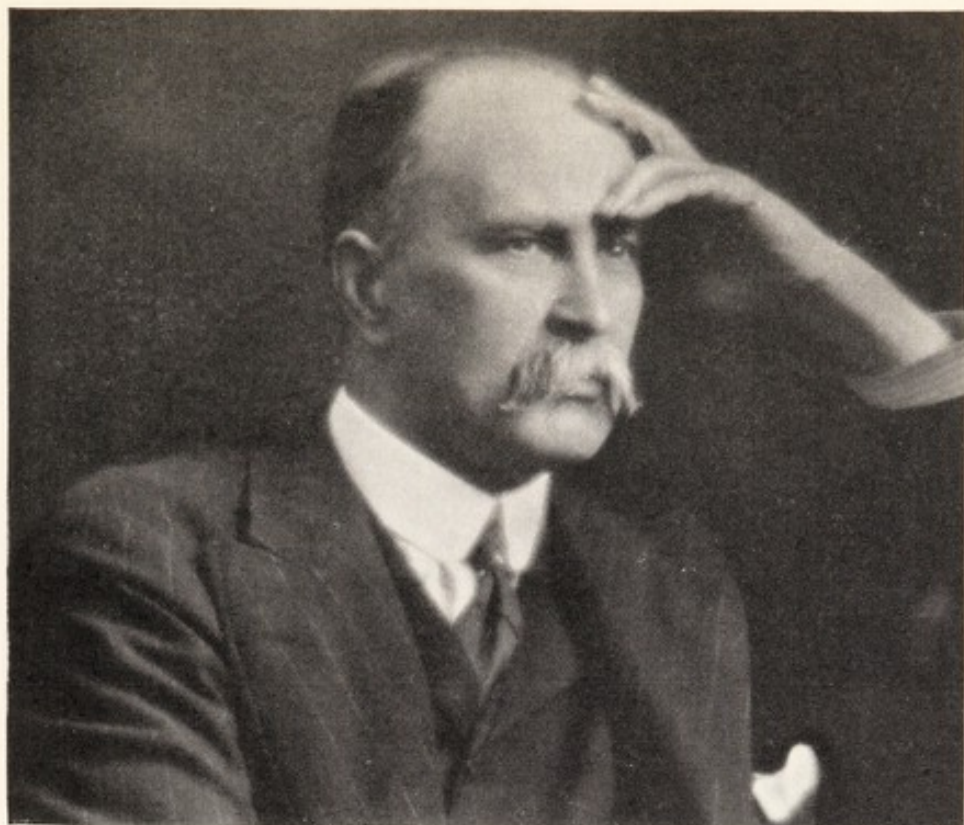


FIG. 36. SIR WILLIAM OSLER, BART., M.D., F.R.S., F.R.C.P., LL.D. (1849—1919)  
*(From a photograph taken by Wm. Notman & Sons, in 1909)*



FIG. 37. THE OSLER LIBRARY, MCGILL UNIVERSITY.

Containing the books on the History of Medicine and Science collected by the late Sir William Osler and bequeathed by him to McGill.  
View looking towards the alcove containing his own writings and his portrait, behind which are his ashes.



FIG. 38. PIERRE BEAUBIEN, M.D.  
(University of Paris).  
A Founder and Dean of the Ecole de  
Médecine et Chirurgie de Montreal, and  
physician to the Hotel Dieu. Introduced  
the use of the stethoscope in Canada  
from Paris.  
(1796-1881)



FIG. 39. JEAN PHILIPPE ROTTOT,  
M.D.  
Founder of the Montreal Branch of the  
Laval Medical Faculty and Dean of this  
School until 1907.  
(1827-1910)



FIG. 40. ARTHUR ROUSSEAU, M.D.  
Officier de la Legion d'Honneur, and  
Membre Correspondant de l'Académie de  
Médecine de Paris. Dean of the Faculty  
of Medicine of Laval University, Quebec,  
since 1921.



FIG. 41. ARTHUR VALLEE, M.D.,  
D.L.  
Chevalier de la Legion d'Honneur.  
Professor of Pathology and Secretary of  
the Medical Faculty of Laval University,  
Quebec, whose monograph "Michel  
Sarrazin, sa vie et ses temps" received  
the David Prize from the Quebec Pro-  
vincial Government and also a prize from  
the Académie Française.

growth of community measures on a large scale for the preservation and prevention of disease by means of large volunteer organizations of representative citizens, under whose aegis investigations into sanitary and social conditions are carried out, legislation is influenced and reforms recommended, welfare agencies administered and that form of instruction known as "Health Education" spread among all sections of the population. This is the ideal of the so-called "Public Health Movement" of the present day, and it is the platform of that important body known as the Canadian Public Health Association. One of its recent developments in this country has been described above in the "Canadian National Committee of Mental Hygiene" and this may well serve as an illustration of the extension of this movement at the present day into many highly specialized fields of usefulness. A brief outline of its development as a whole in this Province and of its scope at the present time as outlined in the recent Health Survey of Montreal will be in place here.

The first voluntary Health organization to be inaugurated in Canada seems to have been the *Citizens' Public Health Association*, created at a meeting called in July, 1875, at Montreal, then one of the most unhealthy cities on this continent, by Dr. (later Sir) *William Hingston*, at that time Mayor of Montreal. The first attempt to popularize Public Health measures in a particular field was probably the foundation of the *Canadian Association for the Prevention of Tuberculosis*, a Society established in 1900 at a meeting held at Ottawa of the Canadian Medical Association in that year. The Montreal Branch of this Association was established in 1903 under the Chairmanship of Dr. *J. G. Adami*<sup>(60)</sup> and it immediately embarked on an active campaign in that city which culminated in a great Tuberculosis Exhibition in 1908 and in the establishment in the immediately following years of the Royal Edward and Bruchesi Institutes. The civic activities thus aroused went on to the formation of a *Citizens' Improvement League* and to a programme of *Child Welfare* which staged a large Exhibition in 1912 in which both French and English population took an equal share and in which Adami was again a moving spirit, as also in a representative *Committee on Venereal Disease* formed just before the War for enquiry into the cause of the spread of this infection and possible methods of its prevention.

In very recent times the most important step taken in this Province for the promotion of the Public Health Movement by the organization of civic forces, was initiated by the formation, on March 24, 1924, of the *Montreal Anti-tuberculosis and General Health League*, generously financed by Lord Atholstan and which took form as an expression of a desire to improve health conditions in that place. Following upon the typhoid epidemic of 1927 with its large mortality, this Health League extended an invitation through its Chairman, Sir Arthur W. Currie, to a group of prominent business and professional men to form themselves into a *Montreal Health Survey Committee* for the purpose of sponsoring an investigation into health conditions there and to present to the proper authorities and to the public at large a report covering the present activities of the official and voluntary agencies at work there in the various fields of preventive medicine, with an appraisal, made with the assistance of Consultants drawn from the Committee on Administrative Practice of the American Public Health Association, and a series of recommendations drawn up with the help of a Technical Committee consisting of Drs. *J. A. Boudouin* and *Grant Fleming*, Professors of Public Health at the University of Montreal and McGill University and *R. St. J. MacDonald*, as well as the Deans of the Medical Faculties of these two Universities, the whole to form a programme for development during the next three years. This Survey, which was carried out in that year along the above lines, was published by the Metropolitan Insurance Co. in 1928, and has been pronounced by high authority the most thorough-going analysis ever undertaken in a Canadian community, and reflects an unusually effective co-operative effort between public and private agencies. In a volume of 147 pages<sup>(61)</sup> it discusses in turn the organization of the City Board of Health and its voluntary agencies, the machinery for

the collection of Vital Statistics, Communicable and Venereal Disease Control, Tuberculosis, Maternity and Antenatal and Pre-school Hygiene, School Health Service and Public Health Nursing, Sanitation, Housing, Laboratory Service and Food and Milk Control, Popular Health Instruction, Industrial and Mental Hygiene, Playgrounds and Summer Camps, Cancer Statistics and Control, and facilities for the care of Heart Disease. The appraisal of the local health activities in each of these different fields by the Consultant Board averaged a total of 62.4 of the present standard as established by 25 cities of this continent considered to have a well planned and properly directed public health programme with reasonably adequate financial support and community co-operation. The recommendations made are on a similarly practicable scale and an itemized budget sufficient to finance these is proposed. At the last meeting of the Montreal Anti-tuberculosis and General Health League, held on January 13, 1930, it was recommended that this Committee be permitted to cease its activities and that the Montreal Health Survey Committee shall continue its splendid work until its full programme is achieved.

An important departure made for the welfare of rural communities in this Province by the Quebec Provincial Bureau of Health was the establishment in 1925 of *County Health or Sanitary Units* in various districts, operated under the direction of Dr. A. Lessard, Director, Provincial Bureau of Health, in co-operation with the Rockefeller Foundation, which supplies one-third of the necessary funds during the first year on a descending ratio in the successive years, the Province supplying one-half and the county or counties making up the other part. This system consists in the establishment of a Department of Health in miniature in suitable localities with full time Medical Officer, public health nurse, a sanitary inspector and a clerk attached. The latest report, dated October 3, 1930, mentions 23 such county units established in different parts of the Province and claims that the decrease in mortality and improvement in general health conditions in the localities concerned amply justify the Government in this new and important undertaking.

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