

By contrasting the above results with those obtained by the patients who have refused the mercury treatment, but who have enjoyed every other advantage this hospital affords, viz.: rest, life in the open air, splendid climate, good and suitable food—in fact, all that the present condition of this hospital affords—the argument in favor of the administration of mercury is most clearly established.

Of all the patients who have passed through this hospital and have not taken mercury but 33 per cent. have improved, and in most of these the improvement has been more from the standpoint of general condition, as in but few cases has the pulmonary lesion been decreased in extent.

ACTION OF MERCURY.

We believe that mercury acts in two ways: first, as a tonic, increasing the vitality of the cellular elements of the various organs and tissues, and, second, in rendering the blood bactericidal, producing an antitoxin therein, which has a direct destructive action on the tubercle bacillus. This action of mercury is cumulative and lasting, and the immunity conferred by the early doses, plus the resistance to the disease developed by the increased cellular vitality, places the patient in such condition that as treatment is continued smaller doses of mercury are required to obtain the desired results.

If we continue to give the improving patient the same dose of mercury on which he was first placed and began to improve we shall sooner or later notice, first, a rise in temperature, and, second, a loss of weight. Should these signs be passed unnoticed, it is probable that more or less serious damage would result; possibly an active general cellular degeneration, including the cellular elements of the blood, would occur, resulting in more or less permanent damage to the patient, if not a rapid decline and death.

METHOD OF TREATMENT.

It is only by close observation of each individual patient that the original and succeeding dosage can be determined. The drug should never be pushed to the point of salivation.

Our experience with this method of treatment has shown us that the maximum dosage for the original series of injections can not be carried much beyond thirty injections without producing the conditions mentioned above, and that after a period of rest, on resuming the injections the dose carried through the second series of injections must be reduced.

Our routine, therefore, has been developed by experience as follows: One injection of hydrargyrum succinimidum gm. 0.013 (gr. 1/5) is given every other day until thirty injections have been given. Then injections are discontinued and potassium iodid gm. 0.2 (gr. iii) to gm. 0.648 (gr. x) is given, well diluted with water, one-half hour after meals for two weeks. Then potassium iodid is discontinued and no medication is given for one week. Injections are then resumed as follows: One injection every other day until thirty injections have been given, on alternating injection days giving hydrargyrum succinimidum gm. 0.013 (gr. 1/5) and gm. 0.006 (gr. 1/10) respectively. After the thirtieth injection the same course of potassium iodid is given as followed the first series of injections; then a week free from medication. The injections are then resumed again the succinimid gm. 0.006 (gr. 1/10) being given every other day until thirty injections have been given.

By the end of this third series experience will direct any necessary further treatment. The above recommendation for dosage is not to be considered absolute, but only a guide. Close observation of each individual patient must fix the dose of the first series of injections.

At times the initial injection will produce a slight febrile reaction, after which the temperature should fall to what it was prior to the injection. Experience has taught us that if this drop does not occur, or if the rise in temperature occurs after the second injection, the dose administered was too large and should be reduced at once.

In conclusion, I desire to thank the staff of the hospital for their aid and support; the commanding officer, Medical Inspector C. T. Hibbett, U. S. N., for his encouragement, and Surgeon W. H. Bucher, U. S. N., whose long experience in the administration of mercury by deep muscular injections in the treatment of syphilis has made his advice and suggestions most valuable.

Special Articles

A NATIONAL DEPARTMENT OF PUBLIC HEALTH.

A MESSAGE TO THE PEOPLE ON ITS CHARACTER, STATUS AND ECONOMIC VALUE.*

CHARLES A. L. REED, M.D.

CINCINNATI.

The active interest long taken by the New York Academy of Medicine in the effort to get a stronger, more comprehensive and more definitely organized national public health administration at Washington makes it singularly appropriate that the present status of the movement and the character of probable proposals looking to that end shall be discussed in this presence. And in taking up that subject at this time I may say that I am conscious of several sources of satisfaction.

In the first place, the agitation long conducted by the distinguished body that I have the honor to address, by the American Medical Association and by other bodies of the organized medical profession, is at least bearing tangible fruit in influential cooperation on the part of the laity.

About two years ago a national public health defense league was organized in this city. A little later a movement originating in the American Association for the Advancement of Science resulted in the organization of an influential body known as the Committee of One Hundred. These two movements have since joined forces and, together with the American Medical Association, are keeping the question before the public and before Congress.

POLITICAL ACTION.

One of the practical results of their efforts was the adoption of a plank in the Ohio Republican platform of this year declaring in favor of "the organization of all existing national public health agencies into a single national public health department." The same declaration, in effect, was made later in the platform of both parties in various states, notably, I believe, in Connecticut. This was followed by declarations of similar purport in the national platforms of both the Republican

* A public address delivered under the auspices of the New York Academy of Medicine, New York, Oct. 29, 1908.

and Democratic parties. I am gratified to be able to assure you that the President has been giving careful attention to this general question and that he has now authorized the statement to be made that he will formulate definite proposals and transmit them with his endorsement to Congress at its next session.

A CAMPAIGN FOR THE GENERAL WELFARE.

It now devolves, not only on the people themselves, but on the nearly 140,000 physicians of this country, as the natural custodians of the public health, collectively and severally, to bring the most active influence to bear, not only in seconding this salutary move on the part of the President when once he shall take the step, but to anticipate that action by a prompt, active and persistent campaign in behalf of this fundamental measure for the public welfare.

The lines on which this campaign ought to be conducted vary in different localities, but there are certain general features that ought not to be ignored in any locality. These features are suggested, in part at least, by the failure to pass the various measures that have heretofore been submitted to Congress. Here let me digress far enough to say that these failures are to be construed only as valuable and, for that matter, successful educational efforts in the general evolution of the desired legislation. Nearly every law that to-day stands the test of the courts is able to do so because it has had to stand the test of more or less prolonged opposition in Congress.

Mr. Sherman framed not less than six antitrust measures, all of which were successively defeated, before he finally fashioned the great law that to-day bears his name and that for eighteen years has stood the test of every judicial tribunal in the land. But, able statesman that he was, he both learned from and taught by each successive effort and so, I trust, have we learned from and taught by the experience that has befallen us in this great effort to furnish something like adequate protection to the greatest natural resource of this country—the health, lives and productive energy of the people themselves.

SOME CAUSES OF FAILURE.

And now, prompted by this spirit, we can, I think, discover several of the causes of failure actually to pass the measures heretofore submitted to Congress. In the first place, our attempts at actual legislation were premature in the sense that they preceded the actual education of the people and the consequent development of public sentiment on the subject. In the next place, it is now apparent that previous proposals have been too radical and have too generally been framed in contravention of the fact that most legislation must be built on previous legislation and is, therefore, essentially evolutionary in character. And in the third place it is now very evident that the failure of the medical profession sooner to procure this legislation in behalf of the people is attributable in no small measure to the dearth of representatives of that profession in the legislative halls of the people. We may, with advantage, examine these several reasons somewhat in detail.

A POPULAR PROPAGANDA.

The dissemination by the medical profession of knowledge with respect to public health problems has not been as widespread or as effective as either our opportunities or the character of the subject would war-

rant. Much, indeed, has been done, and the present information of the people is almost entirely the result of the altruistic initiative of the physicians of this country. But too much of the work has been done in, and confined to, the medical societies and too much of the publicity has been done through and confined to the medical press.

This has too generally amounted to a mere carrying of coals from Newcastle to Newcastle and back again to Newcastle. What is demanded by the times is that proceedings such as these here this evening, and such as an international tuberculosis congress and such as the county medical society, whenever relating to general welfare subjects, shall be heralded through the popular prints until they carry their lesson to every home and fireside in the land. Carry the message to the people! This should be the motto of the campaign.

THE MESSAGE TO THE PEOPLE.

But what shall be the message? In the first place let us tell the people some things that have been done, that they may judge for themselves and, judging, hope for and help secure other things that can be done. In doing so it is not necessary to go so far back as Jenner and the discovery of vaccination and to tell them of the beneficent results of that first great achievement in preventive medicine. Nor is it essential that we should recount the great revelations of Pasteur that gave him that immortality which consists in a perpetual abiding-place in the grateful memory of man. Nor need we speak of Lister. These are oft-told tales that have come to tax the interest of the hearer. But we can tell them of some things of to-day. We can tell them of Finlay, and Reed, and Lazear, and Carroll, and how, from their martyrdom, it comes that the argosies of commerce can to-day sail the seas without flying the yellow flag of pestilence. Tell them this; tell them the humanity of it all.

But if that does not appeal to them, translate it into terms of dollars and cents and show them how "profitable" has been the "investment." Compute the commercial disaster contingent on a single visitation of yellow fever to our southern seaboard. And then tell them how the recent attempted invasion of this country by that dreadful disease was repelled and defeated through the efficiency of the service under Wyman. But, above all, tell them how the zone of pestilence at the Isthmus of Panama has been made the habitation of health that the waters of the two great oceans may be joined, all made possible by the great genius of Gorgas. Tell them that, right now, health and life are being made secure on our mainland and commerce itself, domestic and foreign, is being protected by a valiant guard stationed at our seaports—stationed, for instance, right here at New York—sifting out and thrusting back the disease that comes in the guise of the immigrant, and at San Francisco, where the triumphant battle against the bubonic plague has added new laurels to our country, and especially to our Public Health and Marine-Hospital Service. Tell them of our food and drug laws, and of our supervision of cattle intended for food supply. Tell them of the sanitary work that is being done right at their doors, work that makes their homes habitable. Then tell them that if these things are being done other things that ought to be done can be done.

THE GREAT WHITE PLAGUE.

What, then, are some of the things that are not done, but that ought to be and could be done with a properly constituted national health administration? The broad answer to this question is that preventable diseases could be still further prevented to the almost incalculable benefit of the people. And this, too, must be a part of the message to the people. Let us point to tuberculosis, in the campaign to combat which the scientists of the world have but recently been in congress at the capital of our country. This is a preventable disease, yet, as I pointed out at that congress, this disease, according to the statement of experts, kills 160,000 people and keeps in invalidism nearly 700,000 more people in this country every year.

This is a veritable warfare in which the American people, arrayed on one side, are to-day offering not so much as a passive resistance to an army of invasion—the army of the bacilli—already encamped in our midst, in our very homes, a host more numerous than all the men in all the armies and all the navies of all the countries of all the world in all the ages. And each individual in that host is capable, under favoring conditions, of destroying a human life. As a matter of fact, the human lives thus sacrificed each year in this country are equivalent to the enlisted men of both our army and navy. What if these two arms of our service were wiped out of existence in a single year by a foreign foe? Do you not suppose that every resource of our country would be taxed to repel the invader, to destroy the decimating minions of death? Or suppose that first Indianapolis, then Kansas City, then St. Paul were as suddenly wiped off the map. Would not the people's representatives in Congress vote, if necessary, the last dollar in the treasury to avert such a menace from still other cities?

POISONED WATER SUPPLY.

Now let us consider a condition to which I have been calling public attention for several years. I mean the prevalence of typhoid fever, due to the almost total lack of sanitary supervision over streams that are used in large part and that, in the immediate future, must be used in still larger part as sources of water supply. Many of these streams lie within the states and consequently come within the jurisdiction of the states. But others are distinctly interstate streams and as such fall within the jurisdiction of the United States government. As the protection of interstate streams from contamination will make it necessary similarly to control their tributaries, it may be necessary to expand the functions of the national government in this regard, from the control of interstate streams to the control of interstate watersheds.

This will be especially true in all instances in which the states fail to do their duty by protecting the streams within their borders from death-dealing contamination. But both intrastate streams and interstate streams are, with few exceptions, being rapidly converted into open sewers that disseminate disease. The exceptions are found chiefly in Massachusetts, New York and Pennsylvania. No other states of which I have knowledge have adequate laws on the subject, or, if they have such laws, they do not enforce them. In this regard they are no worse than the United States government, the Congress of which, in spite of executive recommendation, and in spite of the fact that it had a bill on this subject pending before it during the last session, failed absolutely

to take any action for the correction of one of the most flagrant evils now afflicting the people.

THE HORRORS OF TYPHOID.

How flagrant is this evil? The first result of stream contamination is the dissemination of typhoid fever. "A thousand miles of river and a thousand miles of typhoid" is the characterization that I have applied with justice to conditions in the Ohio watershed. Most victims of typhoid fever get the disease by drinking the excrement of some other typhoid patient. Then they, in turn, in the absence of sanitary regulations, feed their own excrement to a lot of people further down stream. These facts are very generally known, yet there is popular apathy on the subject. The thought is disgusting, but, disgusting as it is, it does not seem to have impressed itself on Congress.

Nor does the fact that about 28,000 Americans die from this disease in a single year seem to have signified anything to the very Congress under whose authorization the statistics were gathered and promulgated. Yet if every man, woman and child in either Bloomington, Ill., or Lexington, Ky., or Fort Worth, Texas, had died of that disease in a single twelve months, the world would have stood for a moment in consternation—and then something would have been done. But the death roll is not the full measure of the calamity. Nearly 200,000 people were ill of typhoid, but recovered after an average invalidism of sixty days. This is equivalent to saying that every man, woman and child in Louisville, Ky., or Minneapolis, Minn., or Providence, R. I., was ill for two months.

SOME UNSOLVED PROBLEMS.

Now I have talked so far about some demonstrated certainties. We know, in these particulars, just what can be done and just how to do it. But there are in addition many unsolved problems of almost equal importance to the people. Over 60,000 people die annually from cancer, the actual cause of which science has so far failed to reveal. And the death rate from cancer is advancing by leaps and bounds. The prevention of pneumonia, from which 125,000 of our people die each year, is an unsolved problem. The cause and nature of rheumatism needs further elucidation. Science has not yet set a barrier against the prevalence of influenza, from which alone a million or so of people are made ill and are consequently deprived of their productive energy for more or less time each year, and from which cause alone something like 15,000 people die annually. Yet these are all obviously infections and, therefore, preventable diseases. The campaign against the carrier insects—against the flies and mosquitoes, for instance—both of which are responsible for the dissemination of disease—is already a demonstrated success on the Isthmus of Panama and simply awaits legal authorization and executive machinery to make it a success in the states.

There are dozens of other unsolved problems of equal scientific and economic importance. I have ceased talking about the humanity of it all. That argument does not reach the average man. I am simply insisting that, in the presence of all this demonstrated waste—actual and needless waste in dollars and cents—it is the obvious duty of the government to establish a department of public health with power and resources that will enable it to grapple with the great problems—the greatest of all really economic problems—to a few only of which I have alluded to-night.

SOME ASTONISHING FIGURES.

Now what does all this mean? I do not speak of the pain, the sorrow, the humanity or, rather, the inhumanity of it all. There are those who have feelings, are capable of sorrow and who realize the awful significance of the fact that preventable, emphatically preventable diseases, in the aggregate, kill an average of one person every two minutes. But I now appeal to the larger number who, I grieve to say, think only in terms of dollars and cents. So let us translate consumption and typhoid, malaria and pneumonia, cancer and plague into their equivalents, into the coin of the realm. But let us begin with a few primary postulates.

In the first place the most valuable natural resource of this country, fields, forests and mines, not excepted, is the productive energy of the people. In computing the worth of this resource a human life, rather than an acre, a lode or a tree, must be the basis of reckoning. What is it worth? Let us see.

A man's life is his capital. What he earns is the interest on his capital. Then suppose that a man works 300 days in a year at \$1.25 a day, and that this money thus earned, \$375 a year, represents 5 per cent. on his capital, which, on that basis, would amount to \$7,500. Then multiply this by 160,000 for tuberculosis, and 30,000 for typhoid, and so on through the list, which foots up at about a quarter of a million, then add it all together—and you will only have begun. You are to add to this the loss of productive energy of something like 700,000 people constantly ill for a whole year from tuberculosis and nearly half that number ill for sixty days from typhoid, and so on through the list, at \$1.25 a day for each one. Then, ignoring the fact that the lives of many are worth thousands and hundreds of thousands of dollars a year, exclude the non-producers—women, children and dependents—by dividing the result by two. Then, still to be on the safe side, divide the result again by two, and the remaining figure, if translated into the coin of the realm and placed in our national treasury, would not only pay for a properly equipped national department of public health, but would, in addition, pay the current expenses of the army and navy, duplicate our armament on the seas, fortify our coasts, deepen our internal waterways, and, in ten years, would pay for the Panama Canal and wipe out our national debt.

Put this in the message to the people.

EXISTING PUBLIC HEALTH AGENCIES.

Of course, such a consummation in all its completeness is entirely beyond hope of realization. The figures are presented only to reduce to approximate concrete terms the enormity of present conditions—conditions which we know could be largely bettered through proper governmental agencies. Let it not be assumed that we are to-day entirely without such agencies—agencies that have been and are to-day doing excellent work.

But they are inadequate and, considered as a whole, scattered and unorganized and to that degree and in consequence of that fact are inefficient. The Public Health and Marine-Hospital Service is under the Treasury Department and, absurd as it may seem, the Secretary of the Treasury is the chief health officer of the United States. The Bureau of Vital Statistics is under the Department of Commerce and Labor. The Bureau of Chemistry, charged with the enforcement of the National Food and Drugs Act, and the Bureau of Animal Industry, charged with protecting the people against

diseased meats, are under the Department of Agriculture. The national eleemosynary institutions, all of them public health agencies, are in the so-called Department of the Interior. Of course, the health of the army and navy is looked after by services organized within those respective departments.

There is to-day no service whatever specially organized to fight the plague of tuberculosis. No governmental agency is entrusted with the sanitation of interstate streams and the consequent protection of the people from typhoid due to these media of communication. There are no national laboratories for the solution of the yet hidden mysteries of contagion and infection. Other specific activities, such, for instance, as a campaign against disease-carrying insects, are not provided for, while the scattered agencies that we do possess are given such an unfortunate status in our scheme of government as to compromise their educational value and practically to deprive them of moral force.

Put these facts, all of them, in the message to the people.

MORE MEDICAL MEN FOR CONGRESS.

These facts, together with an intelligent and sympathetic appreciation of the nature of a great national public health service, the importance of establishing it, and, after establishing it, of fostering and maintaining it on a basis of highest practical efficiency, comprise a part, but only a part, of the many reasons why the medical profession should be more largely represented in the halls of Congress. When it is recalled that in the Sixtieth Congress there are but four physicians in the house of representatives and one in the senate, and when it is remembered, by way of comparison, that there are forty physicians in the Senate and fifty-six in the Chamber of Deputies in France, it becomes apparent that, of the two republics, our country is not deriving the benefit it should derive from the medical profession in the way of legislation. This becomes all the more apparent when the fact is taken into consideration that the present Congress, like the preceding congresses, is largely made up in both branches of members of the legal profession.

I mention this fact in no sense of reproach to that learned and honorable profession whose genius has largely fashioned our institutions and given shape and form to our laws—a profession that ought always to be and doubtless always will be largely represented in our legislative bodies. But we have now fallen on times when social and economic questions are clamoring for solution, when ethical problems are to be solved. For the accomplishment of these tasks it is of highest importance that our legislative bodies should be strengthened by a membership embracing more farmers and laborers, more physicians and ministers and educators, more business men, all unhampèred with alliances, all fresh from the ranks of the people, all at liberty to serve the people. Then it will be that Congress will do the things that we pray for here to-night.

Put this in the message to the people.

THE POWER OF THE GOVERNMENT—A COUNCIL OF STATES.

The right of the national government, under the "welfare" and "interstate commerce" clauses of the constitution, to do many of these things is unquestioned. Yet there are many things that might better be done by the states. But the laws in the different states are gen-

erally inadequate and, whether inadequate or not, their complete lack of uniformity renders it impossible for the states to cooperate in the solution of a problem which, like the one under discussion, is coextensive with all the states.

Like laws for like conditions is the first requisite for the control for any national necessity by state legislation. And like laws by the states will probably not be enacted to any great extent until, under the initiative of the national government, the states shall send delegates to a representative body, a sort of council of states, which shall meet as a legislature or as Congress meets, in a session or sessions long enough to accomplish satisfactory results, and whose object shall be to formulate standard bills on various subjects and send them back to the legislatures for enactment. In this way, and in this way alone, can the states move with anything like satisfactory rapidity in meeting the crying demand for like laws for like conditions not only in regard to great sanitary problems such as I have been discussing, but in regard to many other problems that concern the economic and social welfare of all the people. This step should be taken without delay, for, even at the best, considerable time must elapse before results from this means can be realized.

But, aside from the special proposition that we are here discussing, some such step as I have outlined is imperatively demanded to conserve the states in their present integrity.

Put that in the message to the people.

THE PRESENT DUTY OF THE NATIONAL GOVERNMENT.

But what shall be done by the national government? I am not authorized to speak for the proposals which the President now has in contemplation. I do not feel that I am anticipating them in the least when I say that there ought to be but little absolutely new legislation undertaken as an initial step. The first thing that ought to be done is to assemble all existing public health agencies and coordinate them under a single head, leaving each agency to continue its activities under existing laws, supplementary laws to be enacted as they are afterward indicated. These agencies could be grouped into a single department and the title of the department so changed as to give titular recognition to the service without multiplying cabinet officers, to which latter action there seem to be sound executive objections.

Thus, if it should be found to be wise to make the Bureau of Vital Statistics the nucleus for the aggregated service, the name of the department in which it is located could be changed to that of "Department of Commerce, Labor and Public Health." Or, if it shall be deemed expedient to select the Department of the Interior, the name of the department should be changed to that of "Department of Education and Public Health," which, unlike the present title, would mean and stand for something distinctive among our great national interests.

Be that as it may, I insist, in the name of the medical profession, in the name of science, in the name of humanity, that a great governmental agency to conserve, as this one proposes to conserve, more lives, more homes, more property, and more money, than any other single agency in the whole plan of government, shall be accorded a status fully befitting its dignity and its worth.

And let this be the message to the people.

THE EPILEPTIC INSTITUTE COMPANY.

ANOTHER¹ FRAUDULENT CONCERN AND ITS SUPPRESSION BY THE POSTOFFICE DEPARTMENT.

Among the pseudo-medical institutions that have been investigated and closed through fraud orders by the Postoffice Department was a Cincinnati concern known as the Epileptic Institute. The following is an abstract of the report on this concern by R. P. Goodwin, Assistant Attorney General to the Postmaster General. It is based on an investigation conducted by Inspector George W. Sorenson and others:

This business consists of a medical treatment by mail of the disease of epilepsy. One Otto Kalmus, a resident of Cincinnati, commenced the business in the spring of 1903, under the name of the Epileptic Institute, and so it continued until July, 1907, when he incorporated it under the name of the Epileptic Institute Company, he continuing as president and general manager and principal owner. As a private address for patients who, it was explained, might not care to have it known that they were corresponding with an epileptic institute, use has been made of the name of Dr. H. J. Luecke, a physician connected until recently with the institute. While not with the institute since last November, Mr. Pyle and Dr. Schoenling explained at the hearing that by agreement with Dr. Luecke his name has continued to be used, and that the institute still receives that mail addressed to him which is also directed to Box 99 in the Cincinnati postoffice.

Until lately, communication with epileptics was obtained through advertisements in newspapers, chiefly those circulating among Germans and other foreigners. One of these advertisements, taken from the Dec. 13, 1905, issue of the *Home and Farmers' Companion*, a German agricultural paper published at Milwaukee, Wis., was furnished the inspector by Mr. John Edel, father of a former patient of this concern, and when translated reads as follows:

A BOOK IN REGARD TO FITS SENT FREE.

The Epileptic Institute in Cincinnati will send perfectly free of all cost to every reader who writes for it a valuable German Doctor book, containing many pictures, treating of the causes and cure of fits. It sets forth how and in what manner this terrible disease can be cured with safety, lastingly and for one's whole life, through a treatment altogether new. It is worth its weight in gold. It costs nothing and is securely packed, and will be sent gratis and post free. Order at once. Address Epileptic Institute, Box 99, Cincinnati, Ohio.

HOW PATIENTS ARE SNARED.

More recently the practice has obtained of purchasing the names and addresses of epileptics from, as the inspector says, "Other concerns that have obtained all of the money possible from such unfortunates without effecting a cure," and then mailing circulars to such persons, urging them to take treatment from the institute. Names have been so purchased, the inspector reports Mr. Kalmus and Dr. Schoenling informed him, from one Dr. Town of Fond du Lac, Wis., and from the firm The Guild Company of New York, N. Y. Mr. Kalmus identified for the inspector the circulars so sent by him to such persons soliciting the addressees to become patients of his institute. Samples of these circulars are among the papers. They are filled with extravagant and highly colored representations with reference to the unprecedented success of the institute's treatment, which it denominates the "Schönka" treatment, as a cure for epilepsy; and among other things it is represented that this treatment is original with the institute, and by its means the institute can successfully treat the heretofore-considered incurable disease, epilepsy, and in many cases effect a cure; that the treatment is something not known to medical science and is different from anything used by the profession in such cases; that the physicians of the institute are skilled and experienced specialists, and include "one of the foremost examining

1. Previous articles in this series were: "The Reinhardt Case Concluded: The End of a Long Fight for the Protection of the Public Against Imposition," October 3, page 1144; and "Medical Institutes: How They Entrap the Unwary Young—the Hibbard Case as an Illustration," October 17, page 1330.