

MEDICAL PRACTITIONERS AND MEDICAL EDUCATION IN JAPAN.

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DR. S. NAGAYO, Director of the Sanitary Bureau of the Home Department, in an address before the Tokyo Medical Society, stated that European medicine was introduced into Japan 131 years ago by Dr. Rankwa Maeno, a Japanese.

With extraordinary diligence and patience, and in the face of great difficulties, he learned to understand Dutch, and made translations for the first time.

He and a few other illustrious doctors formed a society for studying Dutch. They translated in almost every branch of medicine, and thus encouraged the study of European medicine. This is the first period of the history of medicine in Japan.

About thirty years ago, Dr. J. Matsumoto, Medical Director-General of the Army, established a hospital in

Nagasaki, in connection with which medicine was taught. The instruction was given partly by Japanese physicians and partly by Dutch doctors employed by the government. It was necessarily imperfect, because, though the teachers followed systematically the course of study, the students could not attend regularly, and through want of elementary knowledge could not understand the greater part of the lectures.

After the Revolution of 1868, the distinction of classes was abolished so that all students were treated alike, the rules of the school were altered, students were examined strictly, and were obliged to remain throughout the session, a preparatory course was organized in mathematics, physics, chemistry, zoology and botany, and young students were entered pledged to continue study for a fixed term of years. This is the second period, which ended about twenty years ago.

Just after the Revolution, the Seiyô Igakusho (Foreign Medical School), was established in Tokyo, the military hospital was removed there from Yokohama and united with it. Japanese doctors were its directors; an English doctor and several German doctors subsequently aided as teachers. This was the beginning of the present Medical Department of the University of Tokyo, into which it has gradually grown. Japanese graduates were, after some ten years, substituted for nearly all the foreigners.

The progress of medical science has been aided by examination for license to practice medicine.

Just after the Revolution of 1868-9, it was found by examination that only twenty-one per cent. of the doctors practised the European system of medicine, the rest adhering to Chinese or Japanese methods.

In 1875, the Home Department gave notification in Tokyo, Kyoto and Osaka, that those wishing to practice must pass an examination on certain fixed subjects and obtain a license.

By the rules, directors of local hospitals gave questions on seven subjects, stated their opinion of the answers and sent them to the Sanitary Bureau of the Home Department for final examination before the licenses were granted.

Those who were already practising were allowed to continue without examination.

At the request of the local governors, who, by establishing hospitals and schools tried to secure a general distribution of trained physicians, these examinations were held in other places, and in 1878, they were held in all the provincial districts.

To avoid partiality, the questions were drawn up at the Sanitary Bureau of the Home Department and sent in sealed letters to the local governors, who appointed a committee from the directors of hospitals and graduates to open them and conduct the examinations.

In 1883, license and examination regulations were promulgated making provisions for examinations in the spring and fall of each year.

The Home Department appointed committees from graduates living in the different localities and sent inspectors to direct the examinations.

These regulations are now a part of the national law, and the members of the committees are appointed by the Cabinet.

The foregoing is an imperfect *résumé* of Dr. Nagayo's able and interesting address.

By the government reports of the 1st of January of the present year there are in Japan 40,321 practi-

tioners of medicine. Of these, 5,215 were licensed after passing the Home Department examinations; 1,287 were graduates of the medical department of the University of Tokyo; seventy are graduates of local government schools, new system, four years' course; 1,225 are graduates of local government schools, old system, course in some two, in others three years; 1,556 have been in good standing in the government service and were not required to pass the examination; fifteen were graduates of foreign schools; 30,877 were practitioners before the law was passed requiring qualifications by examination to practice, and seventy-six have local licenses and are not allowed to practice outside of a particular district, making a total of 40,321.

There are now in Japan six government medical schools, including the medical department of the University of Tokyo. They are as follows:

Chiba	9 professors	225 students
Miyagi	9 "	184 "
Okayama	16 "	346 "
Kanazawa	6 "	152 "
Nagasaki	9 "	342 "
Tokyo	30 "	238 "

In the latter are the only foreign professors—two Germans, teaching medicine and surgery.

The course in all is four years. A preliminary examination on general education, including a knowledge of English, is required. The age at which one can practice medicine is not fixed. A diploma from any one of these entitles one to practice medicine without further examination. The session begins the 10th of September and ends the 11th of July. It is divided into three terms.

The course of study is as follows: *First year:* anatomy, dissecting, histology, physiology, general pathology and the history of medicine. *Second year:* anatomy, dissecting, materia-medica, pharmacy, morbid anatomy, pathology, diagnosis, surgery, bandaging, obstetrics and gynecology, ophthalmology, practice of medicine, history of medicine and medical and surgical clinics. *Third year:* surgical anatomy, practice of medicine, surgery, medical and surgical clinics in hospitals and on out-of-door patients, obstetrics with manikin, skin diseases and syphilography, obstetrics and gynecological clinics and hygiene. *Fourth year:* practice of medicine, medical clinic on out-of-door patients, operative surgery on cadaver, obstetrical and gynecological clinics, ophthalmology, use of ophthalmoscope, eye and ear clinic, nervous diseases, hygiene and medical jurisprudence. The examinations are written.

There are two general hospitals attached to the University of Tokyo; one with 321 beds, and the other with 129 beds. These have five divisions for general, surgical, ophthalmic and infectious diseases, and for obstetrics and gynecological cases. There is besides a hospital for patients affected with kakke, which contains 43 beds. It is opened in April, and closed in October. At each of these hospitals there is an out-of-door patient department.

There is a post-graduate course of one year, with an additional year if desired, for the study of special subjects in hospitals.

These schools are endowed, and the professors are paid by the government. The students pay a nominal fee of two, or two and a half yen per month.

Besides the government schools, there are twenty-three private medical schools at different places. Tokyo has three. For entrance to some of these a prelimi-

nary examination is required. The course in some is two, in others, three years.

A man in order to become qualified as a practitioner, either must graduate at one of the government schools, or must pass the examinations of the central board at Tokyo, or one of the local boards appointed by the government.

On the central committee at Tokyo, there are generally one or two members from the university, one each from the army and the navy, and one from the Home Department. To accommodate the large numbers that come up for qualification before this board, the examinations are sometimes held in an old temple in Shiba, a part of Tokyo. There have been between two and three thousand applicants at one time. At the first examination they are questioned on natural philosophy, chemistry and physiology; at the second, on surgery, practice of medicine, obstetrics, ophthalmology and diagnosis, and treatment of cases in the hospital. The examinations are written. The charge for the first is three yen; for the second, five yen. On passing them, a license is given to practice.

To become an army surgeon, six months are required at the Army School in Tokyo, after graduation.

The school for Navy Surgeons is attached to the Charity Hospital in Shiba, Tokyo. The course is four years, and there is a competitive examination on general education for entrance. Thirty or forty are admitted each year. The entrance examinations are advertised. The charity hospital is under the management of ladies of high rank, and is supported by voluntary contributions from all parts of the country. The director is a navy surgeon, as are most of the staff.

Six medical journals are published in Japan,—two weekly; one, every ten days; two, twice a month; and one, monthly. These keep their readers well-informed on the progress of medicine, by translations from foreign medical journals.

There are also in Tokyo three publications of the reports of societies, which are not for sale, but which are sent only to the members.

Obstetrics is generally practised by midwives, who have to pass an examination. It is falling more and more, however, into the hands of the regular practitioners, especially when the cases are difficult.

There is a training-school for women nurses in Tokyo, and another in Kyoto.

Tokyo has an extensive medical library, and a large exchange list of the newest journals.

Nearly every Japanese physician is his own druggist; there are very few general drug stores. As physicians, they are men of exceptionally acute powers of observation, and they describe accurately what they see. They take great pains in preparing the history of their cases. The surgeons are bold operators, even to rashness. They are very careful in carrying out modern scientific methods. Ovariectomy is frequently performed, with fair success. All the major operations are done, and abdominal surgery is quite as common as anywhere else in the world.