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MEDICAL PRACTICE IN CANTON, CHINA.

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It is true that half the world knows not how the other half lives; to know how they die could hardly be expected. But the day is long past when the living and dying of our antipodal neighbors was a matter of indifference to us; for, even from a purely selfish standpoint, the overflow of bubonic plague and yet worse moral disorders from their lands into ours reminds us that we all belong to one race, and have many common interests. To medical men the following notes on hygienic and medical conditions in one great city of China may prove interesting.

HYGIENIC PRACTICES AND COMMON DISEASES OF CANTON.

Canton stands at the apex of a wide delta. Originally the whole region was an archipelago, but by the silting up of soil carried down by the West River it has been built up into a rich farm-land, cut up by a maze of waterways. On account of certain superstitions the people will not live on the hills, but have built their cities and villages upon the damp alluvial ground just at the level of average high tides. Streets and house-floors are reached daily by the tides; and completely submerged by every unusual rise of the river.

In the meantime the dry, breezy hills are occupied by the graves of the dead. Often buried in shallow graves, no matter what the cause of death may have been, these departed ancestors easily find their way back to the villages beneath—"gone, but still with us," and in soluble form. While the dead Chinese thus live on the hills, the living die in the lowlands beneath.

Houses are almost invariably single-storied, with floors of porous tiles laid directly on the earth. Walls and ceilings are never plastered, the inner walls always showing the uncovered bricks, while the roof-tiles appear overhead. Windows are not made in the outer walls from fear of robbers; but if had, open into an inner court. Chimneys are unknown; the smoke, like all other inmates of the house, struggling to find a way for itself out of its difficulties. In brief, a Chinese house is damp, dark, dirty, unventilated, smoke-filled, and abounding in mosquitoes.

The streets average about eight feet in width from wall to wall. They are paved with transverse slabs of granite, which extend the full width of the street, covering over the sewers which run directly beneath. This sewer system of Canton is a vast, unsealed, foul bog, extending beneath the streets throughout the whole city, and in all parts on the same dead level. Were it not for the twice daily irrigation by the tides, life over such concentrated filth would be impossible. Another saving factor is found in the method of disposal of excreta. To a people expert in farming this enormous mass of fertilizer is too precious to be donated to the drains of Canton—however much they might be willing to sacrifice for love of their provincial city. Coal and precious metals remain in the earth about them unsought, but this store of nitrogen-giving treasure draws men and women on daily pilgrimages from places many miles away. They troop into the city with huge wooden buckets, visit each house and the many public stalls, and return with the booty to their farms.[1] If the same buckets which are to go out thus laden have in the morning brought in the cities supply of fresh vegetables, no unkindly criticism is ever heard of the method.

Unfortunately the fields of growing vegetables are daily sprinkled with diluted excrement close up to the time when they are to be cut and carried to market. As a result dysentery and animal parasites are very prevalent. An intelligent Chinese medical student once asked me with surprise, "Doesn't everyone have worms?" They were in his opinion as much a part of our normal anatomy as hair and teeth.

The water supply of Canton is taken from the river directly, or from shallow, ground-water wells. With 200,000 people constantly living on the river, and the washings from grave-hills, city sewers, and fertilized farm land emptying into it, this water has a taste peculiar to itself. But 4000 years of experience have taught the survivors that boiling is necessary, so that a Cantonese is almost never seen drinking unboiled water. Almost universally it is taken as tea. Until this year all the water for the city was carried to the consumers in wooden buckets; in case of fires, water was carried or pumped from the nearest canal, or sewer (if the tide happened to be high).[2] But a more modern system has just been introduced by the energetic Viceroy, and pipes are laid throughout the city carrying water from a part of the river just above Canton for domestic use.

The food of all Cantonese is boiled rice with a portion of meat or fish. Two meals are taken, one at 10 A.M. the other

[1] So highly prized is this final product of human metabolism that some ferry-boats in rural districts provide the necessary conveniences, and will accept fare for crossing the river in this form instead of coin.

[2] Within the last few years pipes were laid by private companies from pumping stations along the river into the city for extinguishing fires. In case of a fire breaking out, the property owner would rush to the river, dicker with the company for terms, and at length have the pumps started to supply his particular region with water.

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at 4 P.M., consisting of about a pint of boiled rice with an ounce or two of pork or dried fish. The meat is often merely steamed by being placed in a saucer upon the surface of the boiling rice beneath the pot-cover. Sometimes it is fried alone or with a green vegetable. Rich men increase the variety chiefly by adding other meats, soups, and sweetmeats. Laborers merely increase the quantity of rice and fish or pork. Melons, onions, and several kinds of tubers are used, but only in small quantities, rice being the staple, and with the very poor often the only food; eggs and milk are almost never used; sweet potatoes have been introduced and seem to be gaining in favor. A thrice-distilled rice-wine is usually taken with the meals.

Some of the personal habits of Cantonese have a marked relation with the spread of disease. Anyone with a boil or suppurating sore feels free to pick up whatever is most convenient to wipe away discharges. Handkerchiefs are carried only by the well-to-do, and used only *ex post facto* lest they might become soiled, fingers having been made before handkerchiefs. In case of all these unpleasant discharges the final appeal is usually to a convenient post, tree, banister, or piece of furniture. The result is that every abrasion or penetrating wound becomes badly infected. I opened a vicious felon for a girl in a large boarding school, and for nearly a year afterward felons and abscesses were epidemic among her fellow students. Phthisical patients are entirely unrestrained, and expectoration unlimited. Lepers handle the fruit in public fruit stalls, and wash their ulcers in the ponds used for cleansing and freshening vegetables.

In such surroundings pathogenic organisms of course grow admirably. The temperature is above 70° F. most of the year, only rarely dropping to 32°. During the summer months (March to October) the temperature varies from 85° to 95° in the shade, and the air is humid. Smallpox is endemic, flaring out every spring and spreading far and wide. If the reports of foreigners living in Canton 200 years ago are correct, the ravages of this scourge are now decreasing, probably on account of vaccination. But it is a common occurrence to meet Chinese on the street or in dispensaries with a full variolous eruption in the late suppurating stage.

The earliest notice of bubonic plague in Canton is in 1844; but it is possible that if Chinese historians had been more observant and accurate, the date of original incidence would be pushed far back into ancient times. Living on the ground, with rats running freely from house to house and lice of all kinds sheltered in their padded clothes, the Cantonese court epidemics of plague. A Hongkong official states that during the brief epidemic of 1894 over 30,000 people died within the city of Canton. The boat population is exempt. There are no health officers, no reports of cases or deaths, and no requirements as to burial and house disinfection. At all these things the Canton officials scoff. Not knowing how many of their own subjects are dying of the disease, they point scornfully at the minute regulations of Hongkong and the daily published death-rate, while in Canton no such troublesome regulations exist and "no death-rate appears." The only way I could estimate what actually was the Canton death-rate was by daily inquiries at the chief coffin shops. Often fever and pain are the only symptoms; in many cases glandular enlargement appears only at the last, and so the absence is of little significance as a means of diagnosis. When entering Seattle I noticed the U. S. health-officers lined up steerage passengers and merely inspected the inguinal glands. I know of no more rapid method for quarantine purposes than to take temperatures and reserve all those with fever for closer examination.

Beri-beri is said to have been described by Chinese historians about the beginning of the Christian era. It is also endemic in Canton, and is a troublesome disease to treat. Among the students of the Canton Christian College, who are under my care, in 1904 six cases occurred, although food, ventilation, and all other conditions that can be regulated, were nearly ideal. I have treated only one case in a foreigner. It is common to get a history of gastritis just before the attack; after which follow paralysis and cardiac insufficiency, with edema.

Diphtheria and typhoid fever are seen, but in my own experience were much milder than in America. Rheumatism and cardiac valvular lesions are common. Leprosy is so frequent that it is difficult to walk fifteen minutes on a busy street without seeing at least one case. A thousand lepers live in the Leper Village a mile east of Canton, and offer an excellent opportunity for the study of that disease. I visited them daily for a while with Dr. Razlag (of Austria), trying the effects of tonic and hygienic treatment on a dozen cases taken at random from the village and isolated. In all cases the ulcers healed up and the symptoms of septic intoxication improved greatly. Of the ones treated a few have continued observing the rules laid down, and the course of the disease has been markedly slower for the four subsequent years. Tuberculosis of lungs, glands, and bones is frightful in its ravages. Dysentery, with the various bacterial and animal parasitic affections of the intestine, abounds. Appendicitis is exceedingly rare; among 10,000 cases examined in my general dispensary, only one gave the distinctive symptoms, and he happened to be living on foreign diet; none required operation.

Skin diseases are varied and interesting. The backs and chests of coolies are commonly ornamented with complex gyrations of ringworm. All the uninteresting skin diseases of Philadelphia are seen, with a multitude of rare conditions that would make this branch attractive to a specialist practising in Canton. Even a casual observer is surprised at the

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number of blind in South China. Most of them give histories of conjunctivitis followed by keratitis. Trachoma and neglected simple inflammations were the most frequent causes noted in my dispensaries. Syphilis and glaucoma destroy many eyes. Cataract operations are part of the routine work of general practitioners. Refractive errors, especially myopia, of all degrees are very common. Native workmen make the spectacles so generally used by Chinese. They are crude spherical lenses made of quartz and ground upon a rough stone, each lens usually measuring 4 to 6 cm. in transverse diameter.

Although the Cantonese are always considered unusually stolid, yet hysteria in even its major forms occurs frequently. I have not seen neurasthenia among them. Epilepsy made up a fair share of the nervous diseases in our dispensaries. Apoplexy is a frequent cause of death. Very little locomotor ataxia is encountered; I have never seen a case among the Chinese. Reports from Shanghai and Hankow doctors call attention to the infrequency of this degeneration, although there, as in Canton, syphilis is very frequent—as are physical hardship and exposure to extremes of weather.[1] Insanity is frequent, but the Cantonese attempt no treatment of it. The only asylum for the insane throughout China is in Canton, having been started ten years ago by Dr. John Kerr.

Surgical affections bring hosts of natives to foreign doctors, and it is for these cases (called by the Cantonese "external diseases") that Western physicians are chiefly famous in China. Hospital records in Canton show an immense number of lithotomies, cataract removals, entropion operations, removals of malignant and benign tumors, bone and joint operations, and traumatisms of all kinds. Abdominal operations are often done by foreign doctors; but owing to the entire lack of trained nurses, are extremely taxing on the operator.

THE CANTONESE DOCTOR OF THE OLD SCHOOL.

The old native doctor in Canton is not a romantic figure. He does not trot children on his knee and win the affection and respect of older patients by self-sacrifice and professional ability. The Confucian classification of citizens, arranged according to merit, was: scholars, farmers, laborers, and merchants; beggars, barbers, and doctors being impartially omitted.

No qualification for medical practice is demanded by the government or expected by the people. Usually one who has failed as a scholar or merchant will turn toward either medicine or begging according to his tastes. In this field, if his spectacles are large enough and his expression sufficiently equivocal, he may attain great fame—although very infrequently great fees. To be the son, or particularly grandson and son, of medical forebears is a great advantage. Not that heredity is supposed to equip him with greater mental aptitude, but because his stock of secret prescriptions will be larger, and he will thus have roots connecting him with the mysterious past. In China that which is mysterious is wise; and that which arises from the remote past is venerable.

The doctor's library is not large, but he may possess some ancient medical books dating from near the time of Confucius; for it appears that the study of medicine was once considered honorable, emperors having written works on healing; and that medical works were spared at the burning of libraries by a vandal monarch near the beginning of the Christian era. But these books deal only with magic, spirit-forces, and divination. Pathology, physiology, and even anatomy are *a priori* treatises, telling of hot and cold humors, and organs undiscoverable by dissection. The pulse at each wrist tells the examining finger of three separate organs on each side according as the finger pressure is light, medium, or heavy. Thus the "six organs" without further molestation give up their secrets, and the doctor attempts no more minute examination; nor does he even need to see the patient if the pulse be presented for palpation.

The reason assigned by the government for its carelessness as to medical qualifications is that "men will soon cease to employ a doctor if he prove too dangerous." The doctor need not confide his secrets as to births and deaths to any official, and contagious diseases are never quarantined. A sort of popular tradition exists in Canton that leprosy is imparted chiefly or only at night, and accordingly lepers are supposed to leave the city at sundown. But the rule is not enforced, and the independence and insolence of the leper community will appear from one of their common practices: When a wealthy citizen of Canton is about to give a marriage feast or have a funeral ceremony at his house, the head of the Leper Village goes to him and states the amount of money needed by the lepers to entertain them at home that night. If the money were refused, which I suppose never occurs, a body of these forlorn and filthy beggars would appear at the function—to speed the parting guests; and the affair would not be a success from the host's standpoint.

It seems strange that the two or three thousand years of medical practice and writing in China can have failed so signally to add anything of importance to the world's knowledge of pathology and therapeutics, or even to the history of epidemics. The failure is due to the lack of observation and inductive reasoning that have always marked their thinking. The scholar sits at his desk and evolves descriptions of what he considers the body ought to be doing; what

[1] A writer in the Deutsche medizinische Wochenschrift, quoted in the Journal of the American Medical Association, February 1, 1908, mentions this frequency of syphilis with rarity of tabes in West Africa and tropical America.

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organs should be there and how situated; what drugs should influence the external spirits and internal humors so as to secure harmony and a consequent cure. Yet with all their butchering of beasts, carving of criminals, and acupuncture of patients, even the crudest idea of anatomy and physiology is lacking. Another contributory factor is that their bedrooms are usually dark, so that the face of a patient can often scarcely be seen. Moreover, as soon as serious sickness occurs, a crowd of relatives, neighbors, and servants push their way into the sick-room, and each, according to his light, does his part to relieve the sufferer by beating a gong, howling an incantation, or administering a remedy. Even a well-equipped physician would find it hard to study the case or do anything to cure it.

The *Pharmacopeia* of the old native doctor is largely a matter of his own fancy. The state does not care what or how much he may administer. Vile-tasting and filthy potions seem to be most sought after; doctor, patient, disease, and remedy all being filthy, the practice is a sort of *similia similibus curantur*, from whichever corner inspected.

Among the drugs used a number will be seen that are familiar to us. Almond and peach kernels are given for cough. Arsenic is well known, although I could not find out the indication for its use, except as a poison for rats and enemies. An infusion of cock-roaches is given to feverish children. Camphor, castor-bean, and cassia appear among their drugs. Opium is freely used for coughs, pain, insomnia, and as an aphrodisiac. They give mercury internally and externally, and sometimes for syphilis, although irregularly and for too brief periods. Ginger-root is always given to both mother and child for several days after labor; it is also sliced and heated, then applied as an epispastic to the temples to relieve headache. Aloes is cultivated; also a variety of laxative and astringent plants. No mention has ever been made to me of the employment of iron, lead, or copper salts. The most famous drug is ginseng; so highly is it regarded that foreign doctors suffer in reputation for not administering it. The roots come in hand-shaped pieces, which, after boiling, become translucent. The price paid for one small piece of a fine specimen rises to several hundreds of dollars, while ordinary specimens sell for $200 a pound. It is supposed to restore lost strength, and even prolong life after all other means have failed.

To these more legitimate drugs a long list of teeth, bones, flesh, hair, and excretions must be added; the supposition being that the chief quality of a man or animal is contained as a sort of alkaloid in certain parts of the body. Thus the gall of a bold robber is prized as a means of inducing fearlessness.

Drug shops are to be found all through the city. They usually supply the crude drugs, which are then compounded into infusions, powders, or pills by the family or the physician; although the shops may also prepare the medicines. Pills made of moist extracts are prevented from drying by being neatly sealed each within a small wax globe. An adhesive paste is made by these shops that exceeds in adhesive power anything I have seen. Unfortunately, it is most often used over a pointing abscess or boil, the pus of which it holds back indefinitely, forcing it into all neighboring parts.

The discovery that variola inoculated might be less severe than when taken by ordinary means was made by the Chinese about 200 A.D. A learned treatise on the methods of inoculation, the best time and favoring conditions, is still extant. The writer argues that smallpox is derived from the mother's womb because "it occurs but once, and the child is born but once." Therefore, it lurks in the bone marrow until it finds the best time to destroy the child. But it may be caught napping if inoculation be practised; for the poison enters the nose and "its influence is first communicated to the lungs; the lungs govern the hair and skin; the lungs transfer the poison to the heart; the heart governs the pulse, and transfers the poison to the spleen; the spleen governs the flesh, and transfers the poison to the liver; the liver governs the tendons, and transfers the poison to the kidneys; the kidneys govern the bones, the poison of the smallpox lies hidden originally in the marrow of the bones; but when it receives the impression from the inoculation, it manifests itself and breaks out externally."[1] Inoculation is accomplished by wiping out a pustule with a cotton pledget and inserting the pledget in the nose of the victim. Sometimes the child is forced to wear the infected undershirt of a smallpox patient until the disease breaks out.

Of surgery the native doctor knows nothing. They do no cutting operations. In cases of hemorrhage they apply hot oil or a fine styptic snuff. I have never heard of their using elevation, direct pressure, or a tourniquet. For fractures their dressings are crude. I once saw a broken radius encased in a mass of sticky mud in which iron wires were embedded, the whole being encased in a large fresh leaf. A tonsillotomy case once came to me after her doctor had literally combed away both tonsils with a fork-like instrument. The gangrenous shreds hung down into her pharynx, and her whole throat was intensely inflamed.

Scarification and counterirritation are practised for every "cold" and slight pain by scraping with the edge of a coin or pinching the tissues between two coins. Acupuncture is the boldest feat accomplished by Chinese doctors. It dates from the sixth century B.C. An emperor caused a book to be written giving instruction in the art, and had bronze manikins made with holes at every part of the body-surface through which needles could be thrust; each hole being marked so as to show both direction and depth applicable to that region. The needles vary from a few inches to two feet long, and are

[1] Lew Lan, in the Golden Mirror of Medical Practice, Dyer Ball's translation.

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pointed in many different ways. Sometimes, while in the tissues, the free end will be heated. The indications for acupuncture are deep-seated pain, especially of joints.

I once saw a patient on whose eyelids an operation for entropion had been done by tightly compressing a line of the skin from angle to angle between two bamboo strips until sloughing and union of the divided edges had occurred.

Obstetrics is not regarded as part of a doctor's sphere. The methods of midwives are sometimes gruesome, and foreign doctors are never called to cases until the patients have gotten into bad condition. I have been told that one way by which uterine expulsive efforts are aided is to place a round timber over the woman's epigastrium with a woman on each end to supply pressure and roll it down to the pubes.

The doctor's fee varies from a few cents up to a dollar; ten cents probably being a good average. The sedan-chair bearers who carried him would get more than the doctor.

Without any standing as a citizen, held in no respect, with miserable compensation, and withal worthy of nothing better, the old native doctor is not likely to become the starting point for better medical practice in Canton. The new ideals are just now being introduced by educating native boys in schools modelled after American or Japanese patterns, and then giving them medical training independently of the old-time practitioners. Yet if any fraction of good exists in the ancient medical literature of China, it will be preserved; for it is reported that in the new government medical schools a portion of the course will be devoted to the study of the accumulated books of the past twenty-five centuries.

BEGINNINGS OF MODERN MEDICINE.

Throughout Canton and the surrounding province a few natives have studied a little "Western Medicine" by the help of missionary doctors, and in one or two instances in Hongkong hospitals or Western United States. About a dozen Americans and Europeans are practising in and near the city as missionaries or as physicians to the foreign community and Imperial customs. Three hospitals exist: the Canton ("Medical Missionary Society's") Hospital is the oldest, and has 300 beds; the French Hospital recently built is smaller and not yet well known; and the Woman's Hospital of the Presbyterian Mission. All of these are doing praiseworthy work, although much limited by scarcity of funds and physicians. There are no internes or "resident physicians," and no corps of nurses to help the overworked doctors-in-charge. Each of the mission hospitals has one efficient foreign nurse, who does her best to make use of untrained and untrainable coolies as assistants. But the beginnings of proper feeling as to nursing can be observed among Cantonese young women, under the influence of the example of Japanese and other foreign nurses, so that a wide field is now opening to American women to initiate proper training schools for native girls. In the Woman's Hospital such a training school is just being opened. The difficulties and limitations of hospital work in Canton appear to be so many and so vital as to hopelessly cripple the usefulness of such undermanned institutions. Nurses, "residents," superintendents, and office staff are absent; the physician in charge keeps books, preaches, builds and keeps in repair all houses, sees from 80 to 150 out-patients a day, besides all in-patients, puts up all but the simplest perscriptions, and operates on surgical cases. In leisure hours he teaches a few medical students and calls on pay-patients at their houses.

This kind of work kills the doctor and renders him unfit to save the patient. It should be altered at once by reducing the number of plants where union is practicable and concentrating a number of doctors to build a few well-equipped hospitals. The whole Chinese nation is aroused, and progress toward the best things in education and government is occurring with startling speed. The institution that does scattered, superficial work will soon be left stranded and without influence.

In medical affairs the hope of the country is in its own young men and women. In Canton a wonderful movement toward general and medical education is at its height. Public schools for men and women are already opened and trying to carry out a well-selected curriculum. Upward of 10,000 students in the province are pushing their way through these modern schools toward professional education. The Viceroy has opened a Medical school for army and navy doctors, taught by English-speaking native doctors who use English text-books.

That orientals can become good doctors may be judged by the progress of the Japanese. Chinese are slower at the start, but have the mental and moral qualities, perseverance, and common-sense that will carry them to the front ranks as scientists. They are starting out with energy, but with little knowledge as to methods; and so will make many serious mistakes and waste valuable time before gaining the best kind of medical education. Faith in their future assures me that nothing short of the best will satisfy them.

The most fortunate and direct solution of their problem, as regards medical education, would be for some institution or individual to establish a small but well-equipped hospital and school in Canton, and carry it on for a generation as a model for the Viceroy and other educationalists to follow. In this day of broad-minded missionary work such a show of international friendship seems hardly more utopian than offering a hand to help a stranger out of a bog would have seemed a century ago. A most promising beginning of such a model school has already been made by the alumni and friends of the University of Pennsylvania, which it would be appropriate to mention more particularly.

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THE UNIVERSITY MEDICAL SCHOOL IN CANTON.

The Canton Christian College, an American College located in Canton, has carried on academic work in English for eight years past, and has won the respect of Viceroy and people. Two years ago the University of Pennsylvania Christian Association started a movement to build a medical school affiliated with this college and carry it forward with, as nearly as possible, the same high scientific standards as those of the University itself.

Two well-attended dispensaries had already been carried on for several years by the Christian College physician; and a more important foundation for a great work had been laid in the student body, in that they had become possessed of a desire to study science thoroughly if they undertook it at all. The University Medical School secured this foundation with the good will of the college and respect of its Chinese patrons; and had, therefore, a propitious start.

To give solidity and permanence to the work a body of Trustees in America were appointed to secure and guard the endowment and raise the necessary annual budget for running expenses. Briefly, the plan is to maintain five doctors, a pharmacist, and the head of a nurses' training department as the staff; continue and enlarge the dispensary work, erect this year or next the first section of the hospital, and after another year build a lecture hall and dormitory.

Dr. J. C. McCracken has been on the ground for a year, is mastering the colloquial Cantonese for use with patients, and winning friends and supporters for the school among the Chinese. Dr. McCracken is well adapted to this work and will lead it to success if the funds required be forthcoming from its supporters at home. Carried on by Christian men, the moral influence exerted will be far reaching; and this factor is of great importance, since whatever may be said in favor of Confucian ethics, Canton practices are unquestionably bad. To place a body of native physicians of low moral grade in the community would be a disaster. Malpractice, quackery, and poisoning are tools which used skilfully will bring in enormous financial returns; and the people will use every inducement upon a doctor to gain such ends. On the other hand, a hundred efficient native doctors of strong moral fiber, especially if possessed also of genuine religious faith, would be of inestimable value to both rulers and people.

The opportunity presented by this work in Canton is vast. Patients already overcrowd the dispensary, so that Dr. McCracken cannot find time to treat all who come. Hospital clinical material is thus insured. Students are going through preparatory academic work, and will soon stand waiting for the doors of the medical school to open. The suffering myriads of the province lie longing for relief. The growing army and navy of China must be supplied with surgeons. Canton and hundreds of yet more unsanitary cities in the one province have their problems of water-supply, sewage-disposal, prevention of plague, variola, and a host of other contagions all to be solved. And medical schools that are now being opened in other cities of the province need teachers and modern methods, but know not how to distinguish true from false among the advisors with hungry pockets who flock around them.

Given a child with diphtheria at the first day, the doctor with a spare syringeful of antitoxin would not debate as to indications. The opportunity for a master-stroke in far-sighted benevolence is equally apparent in this work at Canton. A few thousand units of morally and scientifically correct educational ideals and methods injected into that fevered society now will within a generation produce such a peeling off of filthy habits and elimination of toxic thinking as would convince a Sadducee that resurrections are possible.. But the injection should be made in time. The full staff of doctors for this University Medical School ought to be assembled on the site before 1909 if they are to be ready for action when most needed.

This description has been of Canton as I have known it during seven years of life there in surgical and medical practice. To the observer of seven years hence the conditions just described will seem a century in the past, for the rate of change from medieval crudeness to modern alertness is amazing. The few foreign doctors are to be envied who are there and in close touch with the life of the people during this transition period. Their influence now controls the very fountain head of medical thought for a nation that is likely in the future to rival Germany in producing scientific investigators.

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