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## EDITORIAL NOTES.

**DESTROYED CERTIFICATES**

The Board of Medical Examiners meets in San Francisco, August, 25th, and the JOURNAL is advised that action will be taken in the matter of the restoration of certificates to practice medicine in this State is issued prior to April 18th, 1906, and destroyed by the San Francisco fire of that date. We understand that the Secretary, Dr. Chas. L. Tisdale, 1879 Sutter street, San Francisco, will be authorized to issue duplicate certificates upon proper identification and the filing of an affidavit setting forth the manner of the loss of the certificate for which a duplicate is prayed. This action, we understand, was authorized by the special session of the legislature which met in June. All inquiries on this subject should be addressed to the Secretary at the above address, but it should be borne in mind that a very large volume of work must be done by the board, and patience should be exercised by those who apply for new certificates.

**FIRE RISKS**

It will well repay every physician in the country to study carefully the attitude of the various fire insurance companies toward the losers in the San Francisco disaster of last April. It appears from a careful investigation of the matter that very few members of our profession, in San Francisco, were insured for anything like the full value of their office property, and very many carried no insurance at all except upon their personal effects and homes. Probably $1,000 would be in excess of the average amount of insurance held by physicians on their office fixtures. How far would that sum go in rehabilitating your office, if everything in it was destroyed? Thus, even supposing that you were paid in full the amount of your insurance, your loss would seem to be not inconsiderable. We are all careless about some things. Thousands of insured in San Francisco did not know even the name of the company in which they held insurance, and to almost all the name itself was meaningless, so far as giving an indication of the stability or rectitude of the company, until the day of reckoning came. For this reason, we think, it will pay you well to study carefully the list of companies which we reprint elsewhere in this issue, and to see to it that you have insurance in some of the companies classed in the "dollar for dollar" list. Why should you pay premiums on full value when you may feel confident that, in the event of disaster, you will receive but fifty or seventy-five per cent. of the amount you are entitled to? Why not take the trouble to see that your insurance is placed with a company which has shown, by its treatment of your brothers in San Francisco, that it deals honestly with its policy holders? Just look up your insurance policy and then see if the name of your company is in the "dollar for dollar" list.

**UNGRATEFUL SAN FRANCISCO**

To one who loves his San Francisco, many things, just now, are rather trying. It hurts to see strictures on our city published here and there about the country, and the hurt is not lessened when they happen to be true. In a recent number of the *St. Louis Medical Review* appeared the following comment, which, in the main, is sadly true:

> "San Francisco appears to be making but a poor return, if we are rightly informed, for the practical sympathy that flowed towards it from all sides in the hour of its calamity. Immediately on the shock of the disaster, the members of the medical profession promptly threw their skill and labor into the common treasury of work for the public good. That was only what was to be expected of every man, each after his kind. But later, when the instant peril was over and the onward march was planning for the resuscitation of the community, the laborer and the scavenger and the clerk and all other toilers in the essential needs of life are being reimbursed for their labors, the members of the medical profession alone—most hard hit perhaps of any class—are refused any share in the general relief if our information is correct."

A specific example of gross injustice may be noted in the case of one physician who, like so many of his confreres, gave up his time to relief work immediately upon the coming of the disaster of April. He was hurrying upon some errand of mercy in one of the automobiles commandered by the Army, when the axle bent. A nearby blacksmith was called upon, and in an hour or two he

succeeded, with the aid of three helpers, in setting right the trouble. He refused to accept an order from the Army in payment, and demanded cash. The physician in question paid the sum demanded, $5.00, a modest charge—and is still out of pocket that $5.00. Not only did this doctor work days and weeks for nothing, but he had the pleasure of paying out some of his hard earned and not too plentiful money, for doing so. And very numerous instances of a like sort could be mentioned. Political grafters, helpers, scavengers, watchmen, etc., can be paid; a private institution can borrow $20,000, but the physician cannot even get back what he has paid out of his own pocket!

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**REMEMBER THE REASON**

In bygone years, when we were all sleeping the hypnotic sleep induced by the nostrum's detail man, and the truth was not known to us, there were a number of medical journals regarded with considerable esteem as being representative of the best in the medical profession. Little attention was paid to their advertising pages, for participation in graft through advertising had not been generally recognized. Some, if not most, of these journals were owned by gentlemen of acutely commercial minds, and they derived large revenues from their publications—or rather from the advertising pages of their publications. That the *Medical Record* once held a high place in the confidence of medical men, can not be doubted; that it has earned a great deal of money for its owner, is most probable. But an awakening came. The American Medical Association was roused and it began to look into the "Great American Fraud" as perpetrated upon the medical profession. It began to tell the real inwardness of some of the nostrums foisted upon medical men and advertised in medical journals previously regarded as respectable, and to call attention to the fact that journals which advertise such things and derive a good part of their revenue from them, are really participating in graft. This was annoying. The commercially minded owner has his view point fixed upon the dollars, not ethics, and he dislikes the idea of cutting off any of these readily paid, but possibly dirty dollars. The statements about fake medicines and rank nostrums published by the *Journal A. M. A.,* being true, could not well be denied. Nor could the logic of its fight for right (with the origination of which we may have had some small part) be upset; argument was useless. So what could the journal, desirious of holding on to all its revenues, nostrum-tainted or otherwise, do? Obviously, human nature being what it is, the proper thing to do was to get mad and attack the organization responsible for telling these objectionable truths and try to stir up trouble for it. This was only to be expected of a large number of journals, but truth to tell, it came as a surprise to see the *Medical Record* joining the ranks of the disgruntled "published-for-profit" journals and openly attacking the American Medical Association. There never was a time when the Association was more harmonious, when dissensions were fewer, when the rank and file of the membership was more solidly appreciative of the good work being done for the whole profession by its Association. Just bear in mind the real reason for the distorted attacks upon the Association, and when you read of dissensions and threatened rupture, just close one eye; they are all—well, let us say—fiction.

[N. B. In one number of the *Record* containing an editorial "roast" of the Association, appeared the following advertisements: Antikamnia, Gray's tonic, Scott's emulsion, antiphlogistine, resinol, ergoapiol (Smith), sal hepatica, Dios Chemical Co., seng, cactina, chionia, anasarcin (formerly advertised as a cure for dropsy) and our old friend "fig syrup"—which is innocent of the festive fig. But the editor of the *Record* is officially ignorant of the fact that it publishes advertising pages, so we will have to open the other eye, and excuse him.]

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**MERELY A SPECIALTY**

When will we fully grasp the fact that dentistry is really but a specialty in medicine; that it is just as much an integral part of medical science as orthopedics, and that it should carry with its special practice a thorough knowledge of medicine? All this is forcibly called to mind by a paper read before the Section on Stomatology, at the last meeting of the American Medical Association, by Dr. Eugene S. Talbot. "Rigg's disease," or "pyorrhea alveolaris," or as it has now come to be called, interstitial gingivitis, has made very many of us uncomfortable; we know but too well what are its local manifestations. Yet only within the past ten years has it occurred to any one that this very general and very painful affliction had a systemic rather than a purely local origin. Talbot has done a great deal of careful work on this subject for ten or twelve years past, and his contention that the irritation of the tissues surrounding the roots of the teeth is merely an expression of a deranged metabolism and an autointoxication, can hardly be upset. For some time we heard much of the "uric acid diathesis," etc., and it was well known that many cases of interstitial gingivitis could be relieved by administration of the salicylates; yet little profit was derived from this knowledge. Such men as Talbot and Carlton, persistently showing to their fellows in dentistry the close relationship between that specialty and medicine, will do much to educate us all to a proper realization of the fact that dentistry should be taught as a branch of medicine and not as a separate art. All nutritive processes begin in the mouth, and to consider any process of nutrition or metabolism without taking the mouth into consideration, would be absurd. It would seem to be almost equally absurd to consider the mouth and its contained teeth as being entirely separate from the rest of the system, and yet that is exactly what has been done and is being done and will be done, so long as the teaching of dentistry remains a separate industry.