



# CMA's 45th meeting:

## The value of the west to medicine

By J. Robert Lampard, MD

**Edmonton AB, August 10-14, 1912**

"What is the value of the west to medicine? Does not the answer lie in the words energy and newness and opportunity?"

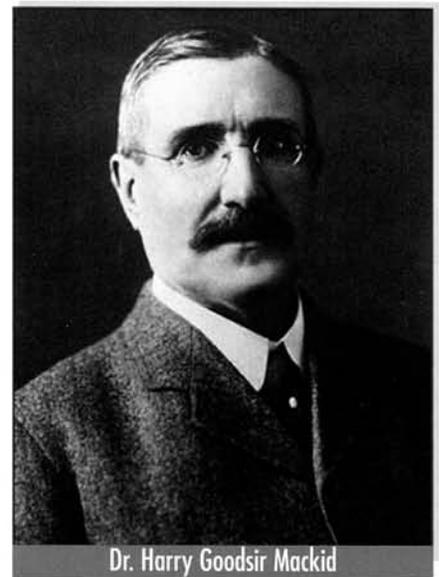
Calgarian Dr. Harry G. Mackid – the 45th president of the Canadian Medical Association (CMA) and the first from Alberta – posed that question in his CMA retirement address on August 10, 1912.

"What is the value of the west to medicine? Does not the answer lie in the words energy and newness and opportunity."

"I hail the meeting of this national association in Alberta as a great stimulus."

Dr. Mackid then challenged the AMA members at the meeting. "We have ... a clean slate. We can begin right ... Unhampered by conditions ... that are difficult to change. I hail the meeting of this national association in Alberta as a great stimulus."

His words were fateful. Dr. Mackid was anticipating the establishment of the University of Alberta (U of A) Faculty of Medicine, which occurred one year later, in 1913. Unfortunately, two years before in



Dr. Harry Goodsir Mackid

*NWT Medical Association president, 1893;  
first Alberta-based CMA president, 1911;  
presided over the CMA annual meeting in Edmonton, 1912.*

1910 he had been diagnosed as a diabetic.

Not until 1915 would Professor James B. Collip arrive at the U of A as the third full-time faculty member. Dr. Mackid's life fell five years short of Collip's isolation of the therapeutically effective insulin, while on a sabbatical in Toronto. Dr. Mackid died on his fiftieth birthday in 1916.

### To Calgary

The Mackids had come to Calgary in the fall of 1889, encouraged by Mrs. Mackid's brother-in-law, William Pearce. The Pearces were already in Calgary. Pearce had convinced Sir John A. Macdonald to establish the first national park in Banff.

### The 1889 Northwest Territories Medical Association

When Dr. Mackid arrived in Calgary, a few weeks after the first western CMA meeting in Banff, he joined five other physicians.

The Northwest Territories Medical Association (NWTMA) had been formed by fourteen physicians the day after the 1889 meeting.

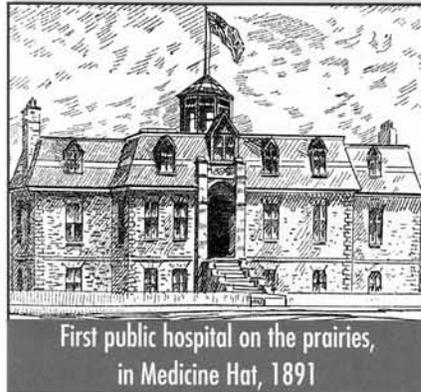
NWTMA charter members were Dr. George A. Kennedy, president, Dr. Robert G. Brett, vice-president, and Dr. O.C. Edwards, secretary. Dr. Brett became vice-president of the CMA board, succeeding Dr. Augustus Jukes. Dr. Mackid would become the 1893 president of the NWTMA.

### Eventful 1890

The year after the first CMA meeting in Alberta – 1890 – was an eventful year. The first public hospital on the prairies opened in Medicine Hat. Months later, its medical superintendent, Dr. Oliver, died of typhoid fever.

Chief Crowfoot died in April at Gleichen, attended by Dr. Henry George. Two years later, Drs. George and Mackid diagnosed a case of smallpox in Calgary. There

would be an epidemic with three deaths. Only by self-quarantining himself did Dr. George and the nursing nuns from the Holy Cross Hospital abort the spread of smallpox.



Glenbow Archives, NA-795-23.

### More typhoid trouble

No sooner had Dr. Mackid joined Dr. James D. Lafferty in practice, than Dr. Lafferty was elected the 1890 mayor of Calgary. In July, as mayor, he turned the sod for the Calgary and Edmonton Railway (C&E now CPR Railway).

Poor hygiene during rail construction invariably generated typhoid cases. In preparation, in November, Dr. Lafferty opened the Calgary "Cottage" Hospital, which was a converted house.

Dr. Mackid and Dr. Neville J. Lindsay were the medical staff. The first patient had typhoid, as did the first patient admitted to the Holy Cross when it opened in February 1891.

Typhoid would kill twenty-three Northwest Mounted Police (NWMP) members (1886-1900), plus many more from 1874-1885. Dr. John Kittson, the first NWMP surgeon, contracted it twice.

The disease became endemic at the NWMP headquarters (HQ) at Fort Walsh in the Cypress Hills. Sir John A. Macdonald closed the fort

and moved HQ to Regina when the railway arrived there in 1882.

### Some typhoid help

In 1904, the NWT Legislative Assembly agreed to build a laboratory in Regina, to do the decade old Widal tests for typhoid. The Executive Council of the now combined NWT Medical Association and Alberta College of Physicians and Surgeons, paid for the equipment.

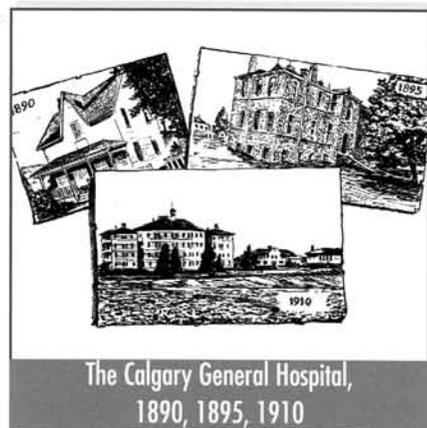
A second laboratory was quickly opened in Edmonton in 1907, after the 1905 prairie partitioning. Dr. D.G. Revell came to Edmonton as the 1907 director. He would become the first U of A faculty member in 1913; Dr. H.H. Moshier became the second.



NWT Medical Association vice-president, 1889;  
CMA Alberta Division president, 1906-07, 1914-15.

The typhoid problem was not over. In 1911, raw effluent spilled directly into the Bow River. It caused 300 cases of typhoid. The Mackids (H.G. and his son, Dr. L.S.) organized the inoculation of 20,000 Calgarians, to eradicate it by 1914.





Top row: Frame house, 1890; General Hospital, later Rundle Lodge, 12th Ave and 6th St SE, 1895. Centre: General Hospital, Centre Ave and 8th St NE., 1910. Glenbow Archives, NA-2912-1.

### Lafferty: Medical contractor, banker and registrar

Dr. Lafferty held the original CPR medical contract, which he turned over to Dr. Mackid, after the doctors had managed the CPR's C&E medical construction contract, from Fort Macleod to Edmonton.

Dr. Lafferty was a banker on the side, as was his wife who took over the bank and branches when he became mayor. She sold the network to the Bank of Montreal in 1893.

In 1911, members of the Lafferty family convinced their nephew, Eric Harvie, to come to Calgary. Later Harvie acquired the Leduc oil field royalties and used the proceeds to form the Glenbow and Devonian Foundations.

### The Mackids and the CPR

Dr. Mackid became widely known as the Father of Medicine by Rail. He selected the CPR doctors and travelled up and down the CPR railway lines from Regina to Calgary, and from the 49th parallel to Edmonton. He was the chief CPR surgeon 1890-1916. His son, Ludwig, followed him.

The Mackid medical contract was the second longest in CPR history. It ended when Ludwig retired in 1950. It was also a point of sensitivity among Calgary colleagues. They viewed it as a disagreeable form of contract practice.

The Calgary Medical Society tried to discontinue all medical contracts in 1906. The CPR vice-president stepped in and said he would decide who signed the contract.

### Stanley and others

In 1901, Dr. G.D. Stanley arrived in High River. Recovering from TB, he came to Alberta - then a "haven" for tuberculosis patients.

A year later Stanley was joined by "Eye Opener" Bob Edwards, who almost ran Dr. Stanley out of High River, because it had "too much Stanley." When Dr. Stanley received a U of A honorary doctorate, Dr. Scarlett said it was for all the care and treatment he gave Bob Edwards, usually gratis.

The McGill medical class of 1902 provided a major infusion of six doctors to Calgary and Alberta.



H.M. Tory, PhD  
Chairman of the 45th CMA annual meeting in Edmonton, 1912. Glenbow Archives, ND-3-4005a.

One of them was Dr. E.G. Mason, the only physician to command a Canadian Army battalion (the 50th) in WWI.

Although Dr. Mason was gassed and left his unit the previous November, his battalion captured the two highest peaks on Vimy Ridge (Hills 120, 145) in April 1917. The Vimy Memorial now stands on Hill 145.

Dr. G.R. Johnson was another physician from the class of 1902. He became the Alberta College of Physicians and Surgeons registrar 1922-46.

A third McGill physician, Dr. A.C. Rankin, became the director of the Provincial Laboratory (1914) and after WW I the first U of A dean of medicine (1920-45). They would be joined by another McGill man, U of A's first president, H.M. Tory, PhD, who arrived in Edmonton January 1, 1909.

### 1906 - no smooth sailing

When Alberta and Saskatchewan were formed September 1, 1905, medical registration became a problem. There was no reciprocity between the two new provinces.

Dr. Lafferty, responsible for the transition as the 1902-11 NWT/Alberta registrar, was sued by Dr. W.A. Lincoln. It was a test case to determine whether Dr. Lincoln had to re-register. Dr. Lincoln won the case in the Alberta court. Dr. Lafferty won it on an appeal to the Supreme Court.

The solution was to grandfather old registrants. Then came the problem of the NWT Medical Association assets. They totaled \$41,638. It took six years to divide them.

The new 1906 AMA went to work, post haste. It petitioned the govern-

ment for a provincial laboratory, a mental hospital, a Public Health Act and the power to register and deregister physicians, including those approved through the legislature by the Edmonton Bulletin editor and Minister of the Interior, Frank Oliver.

### Mackid and surgery

By 1907, Dr. Mackid had polarized his practice to surgery. When Sir Ernest Waterloo, the CPR's lawyer in London, arrived in Calgary with an acute abdomen, the call went out for Dr. Mackid.

Sir Ernest met him with the quip "no colonial will operate on me." Dr. Mackid pulled out his tape and proceeded to "measure him up." Asked why, he replied, "It's for the dimensions of the box in which you will be returning to England." Consent was given immediately." The appendix burst in the OR in Mackid's hands. Convalescence was in the Mackid home.

Dr. Mackid would become a charter member of the American College of Surgeons in 1913. The Mackid Lectures, initiated by the Calgary General Hospital, started in 1967.

### The Canada Medical Act of 1912

In 1906 neither the U of A nor the Faculty of Medicine existed to help examine physicians for registration. The new Alberta College proposed a regional solution: a Western Canadian Medical Federation to set one exam for the four western provinces and allow successful physicians to register in all four.

Alberta and Manitoba strongly supported the concept. In 1908, Dr. Kennedy became the "western Roddick" for pursuing the point. Along with Drs. Brett and Manitoba's Milroy and Patterson, they crisscrossed the prairies for support.

At the Winnipeg 1909 CMA meeting, the CMA appointed a sub-committee to meet with Dr. Roddick to discuss the stalled subject. After back-and-forth negotiations, a national registration system was accepted.

Eighteen medical associations, legislatures, the CMA, and the House of Commons passed the Canada Medical "Roddick" Act during or before 1912. It established the Dominion Medical Council, which still grants LMCCs that are accepted across Canada.



Dr. George Allan Kennedy

*NWT Medical Association president, 1889-91.  
"Moved that this meeting consider it advisable to form a provincial medical association to be known as the Alberta Medical Association," March 1906;  
nominated first honorary president.*

At the end of his retirement speech, Dr. Mackid entertained a motion to appoint Dr. Roddick the honorary president of the CMA for the rest of his life. A show of hands was accompanied by a chorus of cheers.

### The 45th CMA Meeting, 1912

During Dr. Mackid's year as president he oversaw the integration of the CMA and Canadian Medical Association journal (CMAJ) staff. The CMA membership increased

by 33% to 1,400 or about 25% of Canada's physicians.

For the 45th CMA annual meeting in Edmonton, U of A president H.M. Tory was selected as the chairman. Dr. E.A. Braithwaite was the social convener. Invited speakers included Dr. A.D. Blackader, who spoke on the value of simple diets over drugs. Many of his former Montreal students in the audience spontaneously sang "For He's a jolly Good Fellow" as he sat down.

The Chicago architect Marshall Sturm spoke about the Strathcona Hospital (1912) that he was designing. Lord Strathcona personally contributed \$25,000 to it.

Tory, the U of A president, donated the site to secure the future University of Alberta Hospital on university land. That did not stop costs from escalating 300% to \$300,000 before the eighty-three-bed facility was finished.

Oldtimers reflected on "how tough the early days were." Dr. Andrew Henderson had to build the chimney for his own house. Dr. J.D. McInnis borrowed money from a doctor 200 miles away to buy a horse in 1892.

"Eighteen medical associations, legislatures, the CMA and the House of Commons passed the Canada Medical Act on or before 1912."

Dr. Mackid's parting speech ended on a note of optimism.



► "... The west has a love of action,  
a love of newness. It is  
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it thinks right. ..."

"Forgive me ... coming from an old, enthusiastic westerner. The west has a love of action, a love of newness. It is unhampered by traditions ... it will do things that it thinks right to supply that leaven of originality which, after all, is the one thing needful.

"The west thinks boldly and acts boldly, by necessity first, then by conviction and ultimately by habit

"When you get in any man  
broadness of view combined with  
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in particular."

... She will yield a rich harvest of energetic and trained men, who will have in them that invaluable dash of western originality.

"When you get in any man broadness of view combined with en-

ergy and the progressive spirit, you get exactly those qualities which make for the advancement of medicine as a whole and the welfare of the patient in particular." The meeting closed with a photo of eighty-three physicians, followed by a rail excursion to Jasper on the Grand Trunk Pacific.

Time and events in Alberta's medical history would reinforce Dr. Mackid's optimism, particularly at the next two CMA meetings held in Calgary (1934) and in Jasper (1942).