DR. PLAYTER read a paper on The Relation of the Medical Profession to the Public.

DR. GURD presented a patient in whom a remarkable murmur could be heard in the mouth and at a short distance from it, transmitted apparently up the trachea from the chest, in which, in the mitral region, a systolic murmur was heard.

SURGICAL SECTION.

This section met at 3.30 p.m., when Dr. Major of Montreal read an exhaustive paper on Buccal Breathing: its causes, etc.

DR. ELSBERG of New York made a few remarks, at the conclusion of the paper, confirmatory of the views held by Dr. Major.

A paper by Dr. Proudfoot of Montreal, on Paracentesis of the Membrani Tympani, followed.

At this stage of the proceedings, Dr. Reed exhibited an interesting case of *Inguinal Hernia*, distending the scrotum to the size of a large melon. The rupture occurred twelve years ago, and is now irreducible.

Dr. Sutherland presented a well-marked case of *Keloid*, showing patches on the chest, right gluteal region, and right shoulder.

Dr. Oldright of Toronto read a short paper entitled Myxo-Sarcoma, being a sequel to his paper read at last year's meeting.

Dr. Shepherd of Montreal then read a paper on An obscure case of Femoro-Popliteal Aneurism, in which amputation was performed. (The specimen was shown to the members present.)

The next paper read was by Dr. Gardner of Montreal, on Cases of Uterine Myoma, being a report of four cases operated

upon successfully.

In the discussion which followed, Dr. Strange, of Toronto, after complimenting Dr. Gardner, said that in his cases he never incised the cervix, but trusted to slow and gradual dilatation. Believes in the free irrigation of the uterus after operation in order to wash away the debris and keep the parts sweet and clean.

Dr. Heywood Smith, of London, Eng., thought such method of operating was not applicable in all cases, especially in nulliparous women, in whom the parts are of necessity small. He thought that any incision made in the cervix should be allowed

to heal before proceeding to operate.

On the third and last day of the meeting Dr. Buller, of Montreal, read an interesting and exhaustive paper on Jequirity in Granular Ophthalmia. An animated discussion followed on the modus operandi of this remarkable bean, in which Dr. Reeves of Toronto and Dr. Patterson of New Brunswick chiefly took part.