Absence of the patellar reflex, Dr. Stewart remarked, is looked upon as one of the most important and earlier symptoms of the disease. A few cases have been recorded where it has not been absent, but up to the present time he had not read of any case where it was exaggerated. On theoretical grounds it had been suspected that preceding the stage of loss of patellar reflex in tabes, there is a period when it is exaggerated. Even were this supposition true, it would not aid us any in this case, for it is one of considerable standing, although still in the pre-ataxic stage.

The increased inflexes cannot be explained by disease of the lateral column, for there is an entire absence of any increased turicity, this symptom being next to the exaggerated reflexes the most trustworthy evidence of a sclerosing of the pyramidal strands.

Dr. Stewart concluded by stating that the honour of having made the diagnosis was Dr. Buller's, and it was owing to Dr. Buller's kindness that he was enabled to present him to the Society.

Dr. Hv. Howard said that the expectation of mental symptoms depended on whether the lesion begins, high or low in the cerebro-spinal system for in ascending lesion death takes place before any dementia occurs.

Hence the important point is to know what centres are affected, and whether these be above or below the reflex centres usually implicated in Tabes.

Here it is interesting that the cortical substance having been involved some years, there is yet no impairment of mental powers.

Dr. CAMPBELL said that owing to the better knowledge in general, and especially of opathalmoscopic signs, cases of this disease were now detected, which formerly escaped diagnosis; but he did not believe such cases occurred with greater frequency to-day. He spoke of a case (which had been seen in consultation) by Dr. Trenholme in which a woman evidenced exaggerated sexual desire; subsequently become insane.

In answer to Dr. Trenholme, Dr. Stewart said, death was often due to exhaustion from the pains,

Dr. H. HOWARD said that Pneumonia was sometimes a cause of death due to implication of pulmonary trophic centres and respiratory tract.

In answer to questions as to treatment, Dr. Stewart said that though there was little evidence of syphlis, he had put his patient on anti-syphilitic

treatment. Electricity is useful to control the pains.

The flatulence was thought part of the disease due to paresis of intestinal muscleis.

Some discussion as to use of ergot in Tabes followed and Sequin and Althans were quoted in support of its use. Dr. Stewart said that it was perhaps dangerous as Ergotism caused an apparently genuine Tabes.

In reply to questions as to Etiology, Dr. Stewart said symptoms (especially eye symptoms) no doubt preceded injury and beat referred to.

Dr. REED called attention to disturbances in function of urination as early symptoms in Tabes.

Dr. REED, spoke of 2nd attacks of measles in same patient, and spoke of two such recently observed by him.

Dr. CAMPBELL said, he had seen at least six such cases; and much more extraordinary, had seen scarlet fever recur within a few weeks of first attack. He also spoke of the severity of the complications in the present epedimic of Measles as Pneumonia, Pleurisy, etc.

Dr. Kennedy followed to same effect and cited a case where scarlet fever measles and whooping cough were interchanged among the children of one family. Dr. Kennedy also spoke of a case where he diagnosed measles 10 days before the development of rash owing to catarrnal symptoms and a prodominal rash

Dr. Campbell spoke of hooping-cough frequently following measles in this epidemic. He advised treatment with quinine with cures in every case within five or six weeks. He said the theory was that the spores deposited on faucas kept up irritation, and the quinine by causing profuse secretion led to these germs being washed away. This being theory, the practical point is that the treatment by quinine is very successful.

Dr. REED said that Henock found that "the measles usually followed hooping-cough; and that quinine had failed in his hands; he finding morphia most efficient."

Dr. Trenholme said that in his hands Drosera Rotundifolia (Parke D. Extr., and Euco'yptus had done good service in Hooping cough.

Stated Meeting April 17, 1885.

SECOND VICE-PRESIDENT, Dr. TRENHOLME in the chair.

TUBERCULAR LUNG WITH PLEURA FROM A CASE OF HYDROPNEUMO THORAX.