The beautiful pictures produced by this stain have not yet clearly established the anatomical basis as a true index to the physiological significance of the parts of the neuron. However, there can be no doubt that this method has established many facts, not the least being that contact and not continuity is the controlling idea of the cell structure of the brain and cord.

Stated Meeting, April 1st, 1898.

ROBERT CRAIK, M.D., PRESIDENT, IN THE CHAIR.

Drs. A. D. Aubry, E. R. Brown, and Gustave Lewis, of Montreal were elected ordinary members.

Cardiac Embolism.

Dr. WYATT JOHNSTON showed a specimen where degeneration of the heart muscle involving the half wall of the left ventricle due to embolism of the coronary artery was the cause of sudden death. The affected area of the myocardium showed subendocardial ecchymosis and was of a greyish, yellow colour. Microscopically, fibres showed granular and fatty degeneration, and the nuclei did not stain well. The source of the embolus proved to be a small thrombosis in the left auriclar appendix from which a portion had become detached and lodged in the left coronary artery bifurcation. Suspicions of poisoning had arisen in this case owing to the patient having suffered from vomiting, diarrhœa and weakness for several days before death. The presence of tænia in the ileum was perhaps the explanation of the gastro intestinal symptoms and the congestion and catarrh of the stomach and intestines which was found post-mortem. No analysis was ordered by the jury, as the actual cause of death could not have originated through poisoning.

A Case of Laryngectomy.

Dr. James Bell presented a patient from whom he had removed the larynx for epithelioma, and gave the following history: G. P., et. 65, was quite well until September, 1897, when he contracted a "cold," from which he soon recovered, but some soreness of the throat persisted in spite of sprays and other local treatment. In November his voice first became distinctly husky. In January his throat was examined, and a small warty projection removed and examined, and found to be epithelioma. A preliminary low tracheotomy was done on the 7th of February, and on the 16th of February the whole larynx, including the epiglottis and the cricord cortilage, was removed. A Hahn's tampon canula was employed during the operation, and