

fibrin, this remain adherent by the interlacing hold of the mass of fibrin filaments, even after the fluid exudate is reabsorbed.

In reply to Dr. Shaw, what I said in regard to the gelatin was that mucilage, not gum arabic, was a vegetable gelatin. Dr. Gardner referred to the use of oil. This substance has been used by several experimenters in the past, with the result that it was found to be too irritating. Olive oil was used in animals; but as to its employment in the human I have no knowledge. These experiments were carried out with the view of preventing the re-adhesion of surface which had been already adherent, not to prevent adhesions which had not already formed; that is the gelatin is to be used at secondary operations only, and not to prevent adhesions which are only likely to form, say from a peritonitis. I admit that the value of the gelatin would be problematical if it were used at a first operation; and indeed, I stated very explicitly that, in the presence of active infection, it was entirely useless to employ the gelatin, or, as I believe, any other kind of preventive. Under such circumstances, any application would, I think, be more likely to hinder Nature in her struggle with the infection than to help her.

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The fifth regular meeting of the Society was held Friday evening, December 6th, 1907, Dr. Wesley Mills, President, in the Chair.

The following living cases were presented before the Society:

N. VINER, M.D.:—"Blue Baby," 17 years old.

G. E. ARMSTRONG, M.D.:—Pancreatic cyst.

A. E. GARROW, M.D.:—I would like to know if there was any history of trauma in this case.

J. M. ELDER, M.D.:—The explanation in regard to the jaundice in this case may be a correct one. Mayo Robson says that jaundice is a common symptom in the course of pancreatic cyst, and his explanation of it is that you get practically an obstructive jaundice from pressure upon the canal of Wirsung, where the two ducts join.

H. A. LAFLEUR, M.D.:—This man was under my observation for quite a while and was also seen by some of my colleagues. He seemed rather a young man to have a carcinoma of the stomach and the local conditions did not quite correspond to what one generally finds and particularly the fact that it had an elastic feel. Where we were led astray was in laying too much stress upon the stomach contents. It was really upon the half dozen examinations we made, always with the same results and in view of the rapid emaciation that we came to the conclusion by exclusion that it was probably a carcinoma of the stomach. I regret to say that having this opinion we did not make any examina-