

main events characterising the history of the society during the past session, but this report, dealing as it does with the work of the society in a statistical manner, does not call attention to the individual contributions of members and does but refer in passing to what has been a very marked feature, namely, the part played by the society in connection with matters of public and professional interest.

It is impossible to enumerate all the communications brought before the society; nevertheless, much material of no small value has been presented, and in reviewing the session I cannot but bring to mind some of the leading communications. In so doing it must be recognised that this is, of necessity, largely a matter of personal appreciation, and that very possibly I may leave out sundry items which to the majority of the members are of more immediate interest than those here mentioned. As a pathologist, naturally I am inclined to attach more importance to the demonstration of more unusual cases of disease and to observations throwing additional light on causation and symptomatology.

Among the living cases brought forward may be mentioned as being of especial interest, Dr. Armstrong's demonstration of a case of Charcot's joint disease, a condition which appears to be curiously rare on this continent, as again Dr. W. F. Hamilton's remarkable case of congenital absence of the clavicles. Among the pathological material is Dr. Anderson's unusual case of cephalæmatoma with bony development, Dr. Wyatt Johnston's demonstration of a characteristic biological test for the presence of arsenic in tissues by means of growth of a special form of *Penicillium* (*P. brevicaulis*). Among the case reports, several are of more than usual interest—Dr. Birket's case of the presence for long years of a foreign body (thimble) in the nasal passages, Dr. Laphorn Smith's case of operative treatment for the relief of urinary incontinence in the female, a report by Drs. Finley and Wyatt Johnston on a case of double proptosis due to thrombosis of the cavernous sinuses, Dr. Lafleur's clear description of the value of lumbar puncture in cases of tuberculous meningitis with notes of a case in which the tubercle bacilli were found, a case by Dr. Stewart and Dr. Shirres of tumour in the pons, throwing light upon the localisation of the centres for the 4th nerve, Dr. Bazin's study of hemiplegia following scarlet fever, and the instructive series of cases of fracture of the base of the skull by Dr. Elder, together with Dr. Bell's case of huge Suboccipital teratoma.

Passing now to the papers, not a few of these were of more than ordinary interest, more especially I would mention that by Dr. Hamilton upon pneumothorax, in which he drew particular attention to the possibility of this condition occurring in the absence of communication between the pleural cavity and either the lungs or the abdominal