It was explained that St. John was tacitly promised the meeting next year in view of London getting it this year, on account of the movement westward to the World's Fair.

Dr. Praegar urged the claims for British Columbia for 1895. The St. John recommendation was

adopted.

The report, after a few amendments, resulted in the election of the following officers for the ensuing year: President, Dr. Harrison, Selkirk, Ont. General Secretary, Dr. F. H. G. Starr, Toronto. Treasurer, Dr. Small, Ottawa. Vice-President for Ontario, Dr. F. R. Eccles, London; Quebec, Dr. Stewart, Montreal; New Brunswick, Dr. Christie, St. John; Nova Scotia, Dr. Muir, Truro, N. S.; Manitoba, Dr. Spence, Brandon; North-West Territories, Dr. Mewburn, Lethbridge; Prince Edward Island, Dr. Taylor, Charlottetown; British Columbia, Dr. McKechnie, Nanaimo. Provincial Secretaries elected were: Ontario, Dr. I. Olmstead, Hamilton; Quebec, Dr. Anglin, Montreal; Nova Scotia, Dr. Keen, Cow Bay; New Brunswick, Dr. McLaren, St. John; Prince Edward Island, Dr. Johnston, Charlottetown; British Columbia, Dr. Walker, New Westminster; Manitoba, Dr. McDairmid, Winnipeg; North-West Territories, Dr. Calder, Medicine Hat.

It was moved and seconded that all the papers be read in the order received by the Secretary, and if the writer be not present at the time it should be read, that the paper be placed at the bottom of the list; and further, that it was desirable that an abstract of the paper be made and forwarded to the Secretary at least three weeks before the date of the Association. After a good

deal of discussion, this was carried.

## THE ASSOCIATION VISITS THE ASYLUM.

On invitation of Dr. Bucke, of London Insane Asylum, the members of the Association went out to that institution for luncheon, being conveyed out on a special C. P. R. train. They were taken first to inspect the sewage system. The sewage is used as a fertilizer on the farming land of the institution. The luncheon was thoroughly enjoyable. Numerous toasts were drank heartily, while the asylum orchestra, under Prof. Sippi, discoursed sweet music.

## THURSDAY, P. M.

The Association assembled in Victoria Hall at 3.30.

Dr. McPhedran addressed the Association on the subject, "The More Recent Methods of Diagnosis and Treatment of Diseases of the Stomach." He said that formerly it was taught that the stomach was the principal and only organ of digestion, but now it was known that the whole alimentary tract takes part in the digesting process. He said the function of the stomach was three-fold, viz.: 1, To receive food and to partly change starchy and albuminous food into absorbable bodies. 2, To prevent the fermentation of the food. 3, To discharge its contents partly into the blood, but chiefly into the dueodenum.

For the first three-quarters of an hour no free hydrochloric acid was, he said, present in the stomach, as it combined with the albuminates, if present; there was hypersecretion of it, which arrested the digestion of the starches. It reached its maximum in amount in four or five hours. The gastric juice retarded the action of, or destroyed more germs, specific and non-specific, than any of the other digestive ferments. The duration of normal digestion, he said, depended on the character and amount of the food, also on the age of the patient. The symptoms of stomach disorders were multiple and various until the last decade; our knowledge of gastric disorders depended on experiments and symptoms, accidents, etc. Now we owe much of our knowledge to the stomach tube. This, he said, should be soft. The patient not only readily became accustomed to it, but even often would request its use, An approximate knowledge of the stomach's contents would, in most cases, be all that was requisite for the physician in active practice. A test breakfast should be given consisting of a round of toast or a dry roll, with a cup of water or of weak tea or coffee, without sugar or milk. This should be withdrawn from the stomach after one hour's digestion. The acidity of a normal stomach, he said, should be due to lactic acid for the first thirty or forty minutes. after this time to free hydrochloric acids. These acids were discovered by Uffimann's and Clinberg's tests respectively, which the Doctor described. It had been taught that absence of hydrochloric acid indicated carcinoma. This was not so. It might be absent in other conditions and present even excessively, in this. However, it could be said, that its persistent absence formed strong evidence in favor of cancer. The tube was useful in discriminating between gastric catarrh and carimoma. The washing out would be followed by improvement in cases of the first, but not much in the

Its principal use, however, was in dyspepsia, in determining the solidity of the contents. On this our treatment could be based. The lavage stimulated the gastric gland secretion, and stimulated the muscular walls to renewed activity. Proper diet and general treatment would suffice to cure many cases. This treatment was particularly useful in alcoholics, also in infantile disturbances. Constipation was relieved by its use, also the gastric neurosis; reflex vomiting of pregnancy, the patient being fed through the tube. This subject was one of immense importance on account of the immense frequency of the disease of the