

itself. To those who feel inclined to try the remedy, we commend the advertisement concerning it to be found in the *Record*.

Dr. REDWOOD's Analytical Department,
17 Bloomsbury Square,
London, W. C., 18th Sept., 1878.

I have examined the Extract of Malt, manufactured by the Trommer Extract of Malt Company, and, judging from its physical character, and chemical reactions, I am of opinion that it fairly represents what its name indicates, that is, that it is a preparation of malt in which are contained the essential properties of that substance, with a slight addition of the aromatic bitter of the hop. It has the character of a soft extract, in the sense in which that term is used pharmaceutically; and it has evidently been prepared with great care and judgment, as it retains the property of acting on amylaceous bodies as diastase does, while the Extract itself bears long keeping without change. It also possesses the property of forming, with Cod Liver Oil, a permanent mixture or emulsion in which the taste of the oil is very effectually covered, and its administration thus greatly facilitated.

(Signed,) T. REDWOOD, Ph.D., F.C.S., &c.,
Professor of Chemistry and Pharmacy to the
Pharmaceutical Society of Great Britain.

MEDICO-CHIRURGICAL SOCIETY OF MONTREAL.

NOVEMBER 1ST, 1878.

The President, Dr. HENRY HOWARD, in the chair.

Under the head of "Pathological Specimens" the following were exhibited.

Dr. CAMERON, a case illustrating tubal gestation on the right side. This was a case of unusual interest, and the following remarks were made by Dr. Cameron: Mrs. B., æt. 40, had one child nine years ago, had menstruated regularly since then up to August the 15th. On Friday forenoon, October 25th, she was seized with sudden pain on running down stairs, felt faint, and could hardly get up to bed. On examination there was evidenced distention and considerable tenderness on pressure, especially over the epigastrium, slight sanguineous discharge from the vagina, temperature normal, pulse 100. After the administration of opiates she was much easier, and continued so during the next day; vomited some undigested matter during the day with much relief; discharge ceased in the evening; pain was felt chiefly when she moved about. On Sunday, at noon, felt very

comfortable, temperature normal, pulse 76. At 2 p.m. she got up, walked a few steps, and fell back faint and weak upon the bed, complained of being weak, and apparently went asleep; at 6 p.m. was found to be unconscious; at 8 p.m. Dr. Cameron found her lying blanched and insensible, with cold extremities, pinched features, and cold sweat, pulse reduced to a flicker and uncountable. Stimulants, heat and friction revived her. Was seen in consultation with Drs. Roddick and McCallum. Vaginal examination showed the os and cervix softened, canal of the cervix patulous, uterus enlarged in size, a small mass like a soft intra-uterine polypus protruded through the internal os. Internal hemorrhage, probably from extra-uterine gestation, was diagnosed. She rallied during the night, and the next morning, Monday the 28th, at 8 a.m. she rose up suddenly on her elbow and fell back unconscious. She died at 10 a.m., and a post-mortem examination was made at 5 p.m., in company with Drs. Osler and Roddick. Between 60 and 70 ozs. of blood, fluid and in loose clot, was found in the abdominal cavity. No peritonitis. Tubal pregnancy was found on the right side. The sac had thinned and ruptured, and the ovum enclosed in its membranes had partly protruded. Two corpora lutea were found, the one on the left side being the more recent. The uterus was enlarged, the decidua membrane in the cavity was well developed, a blood clot fastened to the lower end of the decidua protruded through the internal os and simulated a soft polypus.

Dr. CAMERON exhibited along with this specimen a very beautiful drawing of the case.

Dr. TRENHOLME remarked that the case was one of much interest, especially to himself, inasmuch as the continuation of menstruation after impregnation was in accordance with his own views, as given before the International Congress in 1876. Dr. Trenholme had found not infrequently one of the fallopian tubes was open in uterine conception thereby freely allowing the discharge of an ovum or any fluid without necessarily interfering with gestation. If this could be so in uterine pregnancy how much more might ovulation with regular menstruation take place in cases of tubular gestation, as illustrated by this specimen, where the history of the case and appearances of the corpora lutea on either side were strongly corroborative of the view that ovulation had occurred in the