

the patient died three days later. No post mortem examination.

Case 3. This case also occurred in confinement. Immediately after confinement symptoms indicative of peritonitis manifested themselves, starting with pain in the right iliac fossa. Typhoid fever had not as yet been suspected, but next day after delivery a few rose-colored spots were found scattered over the chest and abdomen, and on close inquiry the usual symptoms of a mild typhoid were found to have been present for about three weeks before labor came on. The patient had taken it for granted that these symptoms, diarrhoea, headache, pains in the limbs, etc., were dependent upon her pregnant condition. Result, recovery.

Dr. P. Macdonald, Wingham, then read notes of

A CASE OF OBSTINATE SCIATICA

of several years duration, which resisted all methods of treatment until stretching of the nerve was resorted to. Dr. Macdonald first put his patient on potassium bromide, with external applications of aconite and belladonna. This gave only temporary relief. He next tried heroic doses of quinine, but with unsatisfactory results; then blisters were applied along the course of the nerve and gelsemium given internally, but no benefit accrued from this treatment. The patient then forsook "regular" ways and came under the influence of a "laying on of hands" woman. Her cure lasted for three days. After experiencing all the itinerant quacks who visited the neighborhood, he again came under Dr. Macdonald's care. Dr. Macdonald now proposed stretching the nerve, to which the patient assented. This was done on June 15, 1880; eight days after the operation he was able to leave his bed and sit in a chair without pain or inconvenience; six weeks later he could walk well. The improvement continued steadily, with exception of a short relapse after a very great amount of exercise, until he was completely cured. Nine years have now elapsed since the operation and there has been no return of the trouble, the patient being able to continue his avocation as a farmer without any inconvenience.

SURGICAL SECTION.

Dr. J. E. White, Toronto, read a paper on
RECENT MODES OF TREATING FRACTURES
ABOVE THE WRIST JOINT,

which has already been published in this journal (see May 1st).

In the discussion which followed, Dr. Weigel, Rochester, said that he found it exceedingly difficult to apply Moore's splint well, and that it often caused great pain by constriction. In those cases in which there is great contusion of the parts, Moore's splint is not applicable, and he could see that the cuff-splint might conduce to the comfort of the patient in such cases.

Dr. McNaughton, Erin, doubts the existence of dislocation of the ulna in these cases. He thinks the cuff-splint makes pressure at the wrong part, viz., over the seat of the injury. He showed a very useful form of moulded splint which he had invented.

Dr. Groves, Fergus, thinks it of much greater importance to properly reduce the fracture and its accompanying dislocation, than to worry over the mechanism of keeping it reduced. If the parts are once brought into correct apposition almost any splint will retain them.

Dr. E. E. King, Toronto, then gave a demonstration of

THE USES OF THE CYSTOSCOPE.

He reviewed the development of this instrument from the imperfect instrument of Bozzini, through many changes and improvements, to Leiter's instrument, which was shown. This is in the form of a calculus sound No. 21 French, in the beak of which is an electric light, and a telescopic arrangement of glasses, with the object of enlarging the field of vision. The use of cocaine as an anæsthetic is advised, and it may be necessary in some cases to divide the meatus. The bladder should be full of transparent fluid—preferably the urine if it be clear. The point of the instrument should not be permitted to touch the bladder wall, on account of the danger of scorching from the heat. The bladder should be examined systematically, the greatest attention being paid to the trigonal region. The ureters can be easily examined, and the source of pus or blood determined. A stone lodged in a pouch, which cannot be touched with a sound, can be easily seen by the aid of the cystoscope. This instrument is also of great use in diagnosing the position and nature of tumors, foreign bodies, phosphatic deposits, and the signs of calculi.