

the earliest times, apportioning, as he proceeded, the credit for any improvements. Coming down to modern times, within the last decade, he spoke of the different operations of Bassini, Mitchell Banks, Kocher and Halsted, and concluded with a special reference to the operation for femoral hernia, and a word or two about umbilical hernia, which generally did not require operative measures for its cure.

### Vote of Thanks.

Moved by Dr. Shepherd (Montreal), and seconded by Dr. Peters (Toronto), that this Association extend its thanks to Dr. Coley for his admirable address. Carried unanimously.

### THIRD DAY—MORNING SESSION.

#### Anesthesia by Chloroform and Ether.

Dr. W. B. Jones (Rochester) contributed a very interesting paper on this subject. We should know the total solids excreted in the twenty-four hours. Heart-murmurs make no difference. The condition of the muscles and the arteries is more important, and whether filled with good blood. Any adhesions in the lungs should be ascertained. The hypodermic syringe, loaded with a solution, should always be at hand. The administrator should be thorough master of himself, and permit no interference on the part of the operator. He should pay particular attention to the work he is doing, and have no regard to the procedure of the operation, except to know the time necessary to be consumed therein. About eight drops per minute is the proper dose to keep up the anesthesia. He has seen four drops per minute maintain anesthesia for half an hour. He should be ever on the *qui vive* for emergencies.

#### Some Observations on the Treatment of Cancer.

Dr. A. R. Robinson (New York) spoke of the epitheliomata which could be better treated with a paste than with the knife, as, for instance, those situated around the nose and face and on the scalp—in parts where it was impossible to make a deep incision if the knife were used. The paste employed was an arsenious acid one, with equal parts of gum acacia, made of the consistency of butter. This paste should be applied, and left on from sixteen to eighteen hours before you could get the right effect. From this you will get a complete necrosis *en masse*, with a resulting inflammatory process, which, however, is limited and simple. Then you will get healing by the process of granulation.

Dr. Shepherd thinks that in the majority of cases the knife should be used, with the exceptions as stated by Dr. Robinson.