

the isolation hospitals, observation wards for the reception of cases of doubtful diagnosis. Physicians have generally "taken kindly" to this practice of notification for the public good, and the least the public can do is to afford this protection where possible; and it could usually be made possible. Such provision obviously provides also for the public safety, and it is little short of criminal neglect when such wards not provided. The other remedy we will but merely name: it is better facilities for the study, and closer study, by students at the schools, and even by physicians at post-graduate schools, of clinical cases of infectious disease, in order that the greatest skill may be brought to bear on diagnosis. This is strongly urged by Dr. Russell.—*Canada Health Journal*, Sept. 1890.

Classification of Vesical Tumours. (By SIR HENRY THOMSON, F.R.C.S.)—The classification presented here is founded to a considerable extent on my own experience of the forty-one cases operated on and now reported, each tumour having been examined by a competent pathologist; but besides observing several other cases in consultation, as well as taking the supervision of some in which, for various reasons, no surgical procedure was admissible, I have made a study of numerous preparations in the London museums. From these sources chiefly the following varieties of vesical tumour are enumerated and classified, commencing with the most simple.

1. The *mucous polypus*—which is not to be confounded with prostatic outgrowths of similar form, these being inadmissible in any scheme comprising vesical tumors—resembles polypi of the nasal cavity, but is more compact and solid in structure. Hitherto this product has been found in young children only.

2. *Papilloma*. The papillomatous growths appear in two forms, the essential character being that the structure of the characteristic portion always resembles that of the natural papillæ occurring in certain parts of the digestive canal. The constituent element consists of a prominent fold of simple membrane, supported by connective tissue containing a large arterial twig as a central axis, while the outer surface of the membrane is closely covered