

then inserted two small spongetents. After waiting a short time and administering a full dose of ergot he had the satisfaction of seeing the fœtus and placenta discharged. The patient's pulse was then 130 and the temperature 105°F. At once gave quinine and prepared and used a sublimate solution (1 to 3000) to wash out the uterus and vagina. Gave quinine every three hours and repeated the uterine irrigation every six hours. In a short time the pulse had fallen to 105 per minute, and the temperature to 102°F. She slowly convalesced and made a good recovery. The questions arose (1) Could not the septic action have been prevented by the early use of sublimate or carbolic injections? (2) Could not the hemorrhage have been more completely controlled? The other two cases which Dr. W. related were also interesting. One of them occurred three weeks before labor was expected, and by the use of opium in full doses, and the application of turpentine stupes to the abdomen, the symptoms of a severe attack of puerperal peritonitis slowly abated, and the patient went on to full term. The other case was similar to the last one mentioned, with the exception that the attack was nearer to the time at which delivery was expected. The discussion following was mainly on the use of antiseptics in these cases.

Dr. Williams, Clinton, gave an account of a case at present under treatment which he had diagnosed as a mild case of typhoid. In the latter part of the disease, a slight swelling was noticed in the right iliac region where fluctuation was detected, and from which, on opening, a small quantity of healthy pus and blood discharged. There had evidently been no absorption of pus as the temperature was not increased. There was considerable induration at the site of the opening, which was still continuing to discharge. The question arose and was discussed as to the most probable cause of this interesting sequel to the disease.

Dr. Graham, Brussels, presented a case of progressive

#### MUSCULAR ATROPHY

in a man aged 55 years. The symptoms were well marked. The duration of the disease had been about two years. During that time the patient had been slowly failing in strength.

The muscular wasting was most noticeable about the shoulder and hip-joints. While the prognosis was regarded as unfavorable, massage and faradization were recommended.

The following resolution was moved by Dr. Taylor, Goderich, and seconded by Dr. Williams, Clinton, and unanimously adopted:—

"That whereas a scheme has been proposed having for its object the formation of a Faculty of Medicine under the direct control of Toronto University and in intimate relation to the General Hospital, the members of Huron Medical Association desire to place on record their appreciation of the plan proposed and their confidence that if the same is carried out the cause of medical education in Ontario will thereby be greatly perfected, and many of the well-founded objections to the present system removed; and that we assure the promoters of this scheme, that they will have our hearty co-operation and sympathy in their efforts to establish in close connection with our Provincial University a Medical School which shall afford the best known facilities for the study and investigation of Medical Science."

It was decided to have a Question Drawer at future meetings. Each member will have the privilege of depositing questions with the secretary before the meeting, the answers to be given by the Association during the session. This will likely prove an interesting feature of future meetings.

#### MEDICO-CHIRURGICAL SOCIETY OF MONTREAL.

STATED MEETING, JANUARY 28TH, 1887.

J. C. Cameron, M.D., President, in the Chair.

#### LARYNGEAL CYST.

Dr. Major exhibited a small fibrous cyst removed from the margin of the anterior commissure of the larynx. Before the operation the voice was harsh, rough and breaking from bass to treble during ordinary conversation. Since the removal of the cyst, however, the voice has been gradually improving, until of late it has become almost normal.

#### TUMOR OF THE OVARY AND FALLOPIAN TUBE.

Dr. Gardner exhibited a friable, irregular