opening the abscess. The pus was reached by a director, the opening enlarged, and a drainage-tube introduced. The commonest cause in adults is necrosis of the cervical vertebra. Death has resulted from opening these abscesses without providing support for the necrosed vertebra owing to pressure on the spinal cord. If the abscess point in the neck, it is always safer and easier to open at the side.

DR. SHEPHERD said the treatment and prognosis of these abscesses depend on whether they are localized or diffuse. According to his experience, most of these abscesses can be opened from the side of the neck.

Dr. Ross said a recent case of his illustrated the difficulty of diagnosis referred to by the reader of the paper. The child was able to swallow, but had a number of convulsions, and was evidently in considerable pain, but no cause could be made out. He examined the throat at his first visit, but was not able to do so thoroughly, and overlooked the abscess. After the abscess burst, the convulsions and other symptoms ceased. He could recall another case where there was a strumous family history, and where the child subsequently died from hydrocephalus.

Dr. Trenholme had opened these abscesses by incision behind the mastoid muscle.

Dr. Blackader, in reply, stated that as he always opens these abscess cavities high up to prevent entrance of fluids, he found it advantageous to use pressure to evacuate the pus. To prevent the serious accident of allowing pus to enter the trachea he usually operated with the patient prone on a table with the head over the side.

NEW YORK ACADEMY OF MEDICINE.

Stated Meeting, December 20th, 1888.

THE PRESIDENT, A. JACOBI, M.D., IN THE CHAIR.

DR. THOS. E. SATTERTHWAITE read a paper entitled, A New Study of Lobar Pneumonia, with Deductions from an Analysis of Fifty-six Fatal Cases. Epidemic pneumonia, he said, does not prevail to any great extent at the present time, yet a certain number of facts sustain the theory that the disease is occasion-