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Society Proceedings.

MEDICO-CHIRURGICAL SOCIETY OF MONTREAL.

Stated Meeting, May 25th, 1883.

R. A. KENNEDY, M.D., PRESIDENT, IN THE CHAIR.

The following resolution was passed:—

Resolved,—That this Society has heard with deep regret of the death of Dr. W. E. Scott, one of its oldest and most respected members,—a prominent member of the medical profession, a representative governor of the Province for many years, a well-known and successful teacher, as well as an energetic surgeon and practitioner, and feels sure that his loss will be widely felt and much deplored.

Resolved,—That this Society extends its deepest sympathy to Mrs. Scott and her family in their affliction, and that a copy of these resolutions be sent to Mrs. Scott and to the press.

DR. OSLER exhibited an *Aneurism of the Anterior Cerebral Artery*. There was meningeal hæmorrhage about longitudinal fissure, and at the base. On separating the median surfaces of the hemispheres, and clearing the blood away, a small nodular projection was seen on the right side just about the middle of the convolution of the corpus callosum. On further dissection this proved to be a small aneurismal sac, on a branch of the anterior cerebral. It was embedded in the sulcus between the gyrus fornicatus and precuneus, and the substance about it was lacerated.

The rupture was at the edge of the sac, and of considerable size. In the white matter, half an inch beyond the aneurism, there was a round, well defined spot of hæmorrhage, the size of a cherry. Dr. Bell said the above was removed from a boy six years of age, who had been brought to hospital in an unconscious condition; with feeble pulse, pale face, eyes and head turned to right and left hemiplegia,—he remained so till death, six hours later; no wound was found. Some time before he had been run over by a baker's cart, which left him halt in his left leg. Three weeks before his last accident he had fallen from a hay loft. Nothing followed this but drowsiness for a short time.

Uterine Fibroid Polypus.—DR. GARDNER showed this specimen which he had removed from the posterior surface of the uterine wall close to the inner os. Very slight hæmorrhage followed, which was easily stopped by tr. iodine. Dr. G. T. Ross, whose patient the woman was, gave the following particulars: Mrs L. had been married ten years, no children; had good health till two years ago, when she began to suffer from dysmenorrhœa. Had also more or less pain throughout pelvis, and radiating down right thigh. About six months ago menorrhagia set in, and more recently the flow became continuous, alternating occasionally with a watery discharge from uterus. She became markedly anæmic, and complained of uterine tenesmus. An examination revealed the above tumor projecting from the os.