at this clinic. Two years after this there was not one tubercular case treated in this way, Dr. Crile having stopped the procedure. Reference was made to curing duodenal ulcers and gastric ulcers by short circuiting. A similar claim was made by Sir Arbuthnot Lane. Dr. Bruce could not see that these ulcers could be cured in this way. He had operated on a case of duodenal ulcer where the patient had chronic appendicitis. In this case there was no kink and no obstruction. In this case the physician wished the lesser operation to be done first. Here removal of the appendix without operation on the duodenum cured the ulcer. This woman had no intestinal stasis. In this case no doubt the ulcer was about healed and since the operation the patient has been more careful in regard to diet. "We will most likely hear from this duodenal ulcer again."

Dr. Starr's report of two deaths and one where he had short circuited and removed gall stones recalled to mind the fact that Sir Arbuthnot Lane had operated on cases which presented symptoms of gall stones. He short circuited this case, but did not remove the gall stones. In this instance a gentleman from New York was asked what he would have done. He said that he would have removed the gall stones and not have done the short circuiting operation. There is one thing short circuiting will not cure and that is constipation, and yet this is one of the troubles for which operation is said to be of special value. In an endeavour to cure this condition of obstinate constipation Dr. Bruce had operated on three cases, short-circuiting in each instance. In each of these the constipation continued. Where an operation proves of so little value in the class of cases where it is claimed to effect so complete a cure, it can hardly cure such cases as goitre, neuralgia of the fifth nerve and tumors of the breast.

Dr. Walter McKeown, criticizing the short circuiting operation, said that Sir Arbuthnot Lane was an especially brilliant man but had extraordinary ideas. The operation of stitching floating kidneys is seldom done now. The operation of gastro-jejunostomy is not done nearly so frequently as formerly and the operation of short circuiting will take the same course. Dr. McKeown said that when he fell sick he would like to be treated by the best medical skill available as practised five years previously.

Dr. Graham Chambers said that one reason why this operation for intestinal stasis was in vogue at the present time was that it had originated in England, but this was not a good reason, as gastro-intestineal disease is not understood by the physicians and surgeons there, and they have wrong ideas of intestineal stasis. When Mr. Patterson was here, he told Dr. Chambers that Dr. Fenwick was the only man in London doing modern work in gastric disease. This was accounted for