

rine foods. He recommends the substitution of nitrogeous for amylaceous and saccharine foods, and by this method, he maintains, good results are obtainable.

A paper on "*Infant Feeding*," by Dr. Brush of Mount Vernon, was followed by one on the use of "*Papayotin in Diphtheria*" by Dr. Jacobi of New York. The action of this agent in dissolving diphtheritic membrane was illustrated. Specimens of egg, meat and cheese digested by a solution of papayotin (1 to 250) were exhibited.

DR. A. L. LOOMIS of New York read a very able paper on *General Arterio-Capillary Fibrosis and its Relation to Cardiac and Renal Disease*. In a future number we will refer more particularly to the subject of this paper.

DR. HOPKINS presented a paper on "*Ulcerative Endocarditis*," in which he referred to the labors of Osler and Rosenstein. Several illustrative cases were narrated.

DR. WILLIS FORD of Utica then read a paper on the *Early Management of Cases of Mental Depression*. He considers that many cases of grave insanity might be prevented by early proper treatment. Cases of mental depression, where the emotions alone are affected and where there are no delusions, are improved by diversion and travel. In some cases of sudden onset of melancholia, treatment by sedatives has been effective.

MR. LAWSON TAIT forwarded a paper on "*Methods of Diagnosis*," which was read by Dr. Ward of Albany.

"Diseases of the Fallopian Tubes, with Reports of Cases and Characteristic Specimens," was the title of the next paper by Dr. W. G. Wylie of New York. Dr. Wylie thinks that four-fifths of the cases described as pelvic abscesses have their origin in inflammation of either the ovaries or tubes.

DR. J. A. S. GRANT-BEX, of Paris, communicated a paper on "*Cholera*." Dr. Grant looks upon this disease as caused by a living organism, the *habitat* of which is the Delta of the Ganges. All attempts on the part of this organism to form new *habitats* has failed; at least so far as Egypt, Europe and America are concerned, the organism has different stages of development, and it is not capable of inducing a choleraic attack except at a certain stage of its existence. Hence recent choleraic stools are not contagious, but stale ones are highly so.

*Second Day—Wednesday, Feb. 3.*

DR. SIMMONS presented a paper on *Acute Nephritis, especially as following Diphtheria*. Two general plans of treatment