

sent and was diagnostic. Since reading this he had observed it in many cases. Dr. Fuller had seen a case with him.

Dr. FULLER thought the cause of it was friction of the frænum on the teeth during spasms.

Dr. ROSS narrated an interesting case of diphtheria which occurred in his practice. The lady had been confined three months ago, and nine days after confinement complained of pain in vulva with a disagreeable discharge, and great swelling of the parts. On examination he found diphtheria. The case was very severe, there was great constitutional depression following it, and paralysis in one leg preceded by numbness in both legs and both hands, and albuminuria. There had been no diphtheria in the house or neighbourhood.

Dr. Fuller related some circumstances connected with a case which Dr. Ross had reported a few weeks ago to the Society, the case of a man on whom he had operated for fistula in ano and had sent to hospital because the wound became diphtheritic. Dr. Ross had said that he did not think it was diphtheritic. The man after being operated on went to the house of a neighbour where there was a child dead from diphtheria. The wound became diphtheritic, and a child of the patient's contracted pharyngeal diphtheria and died.

Dr. Ross said that he had said that he did not think it was diphtheritic, but had changed his opinion since.

Dr. Fuller also stated that he had used the same director which he had used in this case shortly afterwards in another surgical case, and in two or three days the wound became diphtheritic. Another case was that of a wounded foot in a child which became diphtheritic after its mother returned from laying out the body of a friend's child that had died of diphtheria.

Dr. FENWICK had seen external diphtheria frequently. Several times after tracheotomy for laryngeal diphtheria the wound took on the same action. He had had a case of pharyngeal diphtheria in a woman in which on the fifth or sixth day of the attack the vulva and urethra became diphtheritic. She had a retention of urine, and he had to remove the membrane in order to introduce a catheter.

J. D. CLINE, B.A., M.D.,

*Secretary.*

*To the Editor of the Canada Medical Record.*

MANCHESTER, August 10th, 1877.

DEAR MR. EDITOR,—The fifty-fifth session of the British Medical Association was brought to a close this afternoon. This is admitted on all hands

to have been one of the largest and most successful meetings yet held by the Association. The number of members who registered was upwards of a thousand, and of non-members something over one hundred. The arrangements made by the Manchester men for the accommodation of their visitors were as near perfection as can well be imagined. There were two reception rooms provided, one at the Concert Hall in the heart of the city, and one at Owen's College, about a mile away, where also the sectional meetings were held. In these rooms clerks attended regularly to answer inquiries, and assist in referring applicants to the proper authority. Reading and writing rooms were also provided for the use of members, and supplied with the daily papers, guide books, and writing materials. Post, telegraph, and cab offices were attached to the reception rooms, and arrangements were made for the care of parcels, letters, &c. A spacious refreshment room was erected behind the main building of Owen's College, where luncheon was supplied daily from one to three, at a fixed charge of half a crown. In the various lecture rooms of the Medical School were exhibited pathological preparations, physiological apparatus, microscopes, surgical instruments, new drugs, new articles of diet, photographs, drawings, charts, and a host of appliances having a greater or less professional bearing.

The first day (Tuesday) of the meeting was taken up with the addresses of the outgoing president and the President-Elect, and the Annual Report of the Council. The last President, Dr. De Bartholomé, of Sheffield, makes an excellent chairman, and seems to have had the universal esteem of the Association. He has the happy faculty, also, of keeping his audience in good humour at the same time that he commands their respect. He is a short man, inclined to be corpulent, with a large head, a dark piercing eye, and determined look, a man that the great Napoleon would have chosen to command. His successor, Dr. Eason Wilkinson, of Manchester, is his very counterpart, a jolly, easy-going, corpulent old Englishman, one who would rather run than fight any day. He appears, however, to be highly respected by the profession generally, and as a physician holds first rank in his own city. His address, which, no doubt, will be published in the journal of the Association, had reference almost entirely to local matters, and would have little interest for the majority of his hearers. I believe it is an understood thing that the President shall encroach as little as possible in his address on the work delegated to the Orators and several Sectional