

manufacture and much more expensive in their finish, at less cost. However, I did not accuse Mr. Mills of the extortion. Permit me, however, to defend my Kingston druggist from any attempt at overcharge—he gave it to me for what it cost him, but says Mr. Mills told him the retail price was \$4, or \$3 per doz.

Yours truly,

MEDICUS.

Reports of Societies.

TORONTO MEDICAL SOCIETY.

October 5th, 1882.

The President, Dr. George Wright, in the chair. Dr. Spencer showed a woman with an eruption, probably syphilitic, chiefly on the face, neck, and forearms. Treatment had not been followed by much benefit. Dr. Cameron advised giving iodide of potassium in much larger doses than had been given.

Dr. A. H. Wright showed fractured os innominatum and spine.

The specimens were from a young girl, who had fallen from a window to the ground a distance of 15 feet. She probably fell on her feet and then backwards to the ground. On admission to the General Hospital shortly after the accident, she was paralyzed in the lower extremities and movement caused great pain. Examination discovered fracture of the ramus of the pubes, and it was thought of the crest of the ilium. There was a sanious discharge from the vagina; later it became purulent and offensive. Her bowels were not moved during 16 days subsequent to admission, though purgatives were fully given, but when once their action was re-established the evacuations became very frequent. She died 28 days after admission.

A *post mortem* examination was made a few hours after death. The left os innominatum was broken into seven pieces, a small piece was broken out of the bottom of the cotyloid cavity and fractures extended from that cavity across the iliac and ischiatic portions of the bone. The arches of the eleventh and twelfth dorsal vertebræ were broken off from the bodies. The spinal cord was much disintegrated.

Dr. Nevitt showed an exostosis removed from the ungual-phalanx of the great toe of a young girl.

Dr. Macdonald reported a case of epithelioma of the uterus and vagina in a woman, a farmer's wife, aged 60. Symptoms first showed themselves last April in a bloody vaginal discharge, lasting for a day or two, and recurring from time to time.

No pain or hydrorrhœa. He removed as much as possible from the growths, to mitigate symptoms and prolong life.

Dr. Nevitt said he had a similar case at present under his care. He was applying the fuming nitric acid, much to the relief of the patient. Both pain and hydrorrhœa were marked.

October 19th, 1882.

The President, Dr. George Wright in the chair. Dr. Holmes was elected a member of the Society.

Dr. Reeve exhibited a patient illustrating the treatment of Ectropion by transplantation of flap without pedicle, and gave an elaborate description of the various steps of the operation. The case was a marked example of cicatricial keloid resulting from a burn. The upper lid had been treated by transplantation two years ago with a satisfactory result. The operation on the present occasion was for the restoration of the lower lid. The extent of raw surface made was 25 x 15 mm., and flap 65 x 40 mm. was transplanted from the inner side of the arm. The operation was performed three weeks ago, and the flap had united perfectly. This was the fifth case operated on by Dr. Reeve, of which four were completely successful. In answer to Dr. Cameron, Dr. Reeve, said he had not tried treatment of keloid by friction with sand; that the mode of operating by transplantation without pedicle was that developed by Wolfe, of Glasgow; and that no keloid had formed on the arm as a result of the removal of the flap.

Dr. Zimmerman reported a case of malignant disease in a compositor. He had had pain, nausea, and vomiting, for the last six years; the pain was located chiefly in the umbilical region. He had contracted the opium habit from taking medicine freely for the pain and required very large quantities to give him relief. In April last he had symptoms of lead colic. In August he had intestinal hemorrhage which recurred on several occasions subsequently. There was the cachectic appearance but no bronzing of the skin. The stools gave no indication of stricture.

On *post mortem* examination a cancerous mass was found occupying the hollow of the sacrum involving the rectum and sigmoid flexure but not lessening their calibre to any considerable degree. The left supra-renal capsule was wholly involved in scirrhous growth; the right one was healthy.

Dr. Zimmerman said the disease was rare in the supra-renal capsules, especially in one alone, and it would be interesting to know if the capsule had been primarily diseased in this case. In reply to Dr. Cameron, he said the frequency of malignant disease of the pelvic tissues in young people might be due to great activity of the sympathetic.