

moval, the membrana tympani and auditory canal were red and thickened. Insufflation of boracic acid and oxide of zinc was used, and the boy improved for a time, but soon returned in the same condition as before; the ear was again cleaned out, and this time a strong solution of nitrate of silver was used. In two weeks the boy again returned, and was treated as on the first occasion. A week later, he came back again; this time the ear was fuller than ever, and the substance more tough and firm. Dr. Buller, now believing that the growth was fungoid in character, after cleaning out the ear, injected a quantity of rectified spirits, which he allowed to remain for five minutes, and then introduced a plug of cotton wool, after which the boy recovered completely. The specimen presented a number of small, black globular bodies embedded in epithelium, and is known as *Aspergillus nigricans*. It is of rather uncommon occurrence. Rectified spirit, in the treatment of such cases, is very effectual, and gives rise to little or no inconvenience. Dr. Buller then read a paper on "Optic Neuritis." (See page 641.)

Dr. Proudfoot stated that he had a case of optic neuritis, associated with suppression of the menses, in a female 30 years of age, whom he was treating with bichloride of mercury, with evident benefit. He thought a good deal might be said *pro* and *con* in regard to the various theories given in explanation of optic neuritis. He was inclined to favor the theory of oedema of the brain, but thought it strange that in hydrocephalus, papilitis is rare, possibly from expansion of the bones.

In reply to Dr. Fenwick, Dr. Buller said that mercury and iodide of potassium were not given because of supposed specific origin of the disease, but from their tendency to reduce inflammatory action.

Dr. Roddick asked if it was advisable to give mercury in later syphilitic conditions, and not rely more on iodide of potassium. In diseases of the rectum, much harm may be done by mercury, whereas the iodide is highly beneficial. Dr. Buller, in reply, said that mercury was bad in ulcerations, from its tendency to break down tissues, and that is just why oculists use it, to break down the new tissue and then promote its absorption by iodide of potassium.