

Howe—"Effects of Cocaine on the Eye" and "The Blindness of Pregnancy;" Atherton—"Intestinal Obstruction;" Thorburn—"Passive Motion in after-treatment of Fractures;" Oldright—"Pathological Specimens;" Adam H. Wright—"Treatment of Abortion;" Yeomans—"Comp. Fracture of the Patella;" McPhedran—"Lymphadenoma" (Hodgkin's Disease); Henderson—"Pulmonary Cavities;" Dupuis—"Multiple Abscess of Liver.

In addition to the numerous papers a "Question Drawer" is to be instituted, in which members may place any question coming within the sphere of the Association. This will be opened and the questions read by the Secretary each afternoon and evening session and submitted for discussion. We hear that quite a number of our *confrères* from Montreal, Buffalo, and Detroit are invited and will be present.

IODINE IN THE TREATMENT OF GOITRE.—The injection of iodine into the thyroid body for the cure of goitre seems to be very generally practiced by leading surgeons, with much greater success than the treatment by excision. The only danger in the former plan is that of sudden death, which, although it rarely occurs, is extremely serious. As compared with excision the danger is trifling, hence it is much more preferable, provided it is curative. The safest place to make the punctures is, on either side, between the jugular vein and the sterno-mastoid muscle. The injections should not be confined to one spot; and should be repeated about once a week for several months. The following mode of injecting is recommended by Dr. W. J. Tivy, in the *British Medical Journal*:

"Having drawn up from thirty to sixty minims of tincture of iodine into the syringe, before screwing on the needle, adjust the needle to the syringe, and force a few drops of the iodine in the syringe through the needle so as to effectually expel all air from the needle itself; and having well oiled it with carbolic oil (one in twenty), push the needle to the depth of about an inch well into the goitre, and, raising the syringe higher than the point of puncture, so as to avoid injecting air, should any remain in the syringe, slowly inject the iodine; when this has been done, rapidly withdraw the needle, pinching up the skin around it to prevent any escape of the iodine."

The iodine treatment by injecting goitrous hypertrophy is one that requires time, patience and perseverance to accomplish a cure; but it is much safer than extirpation, and it is evidently superior to treatment by the application of iodine externally and iodide of potassium internally.

HEART BEATS.—Dr. W. B. Richardson of London, says he was recently able to convey a considerable amount of conviction to an intelligent scholar by a simple experiment. The scholar was singing the praises of the "ruddy bumper," and saying he could not get through the day without it, when Dr. Richardson said to him: "'Will you be good enough to feel my pulse as I stand here?'" He did so. I said: 'Count it carefully; what does it say?' 'Your pulse says 74.' I then sat down in a chair and asked him to count it again. He did so, and said: 'Your pulse has gone down to 70.' I then lay down on the lounge, and said: 'Will you take it again?' He replied: 'Why, it is only 64; what an extraordinary thing!' I then said: 'When you lie down at night, that is the way nature gives your heart rest. You know nothing about it, but that beating organ is resting to that extent; and if you reckon it up it is a great deal of rest, because in lying down the heart is doing ten strokes less a minute. Multiply that by sixty, and it is 600; multiply it by eight hours, and within a fraction it is 5,000 strokes different; and as the heart is throwing six ounces of blood at every stroke, it makes a difference of 30,000 ounces of lifting during the night. When I lie down at night without any alcohol, that is the rest my heart gets. But when you take your wine or grog you do not allow that rest, for the influence of the alcohol is to increase the number of strokes, and instead of getting this rest you put on something like 15,000 extra strokes, and the result is you rise up very seedy and unfit for the next day's work till you have taken a little more of the 'ruddy bumper,' which you say is the soul of man below."

POTT'S DISEASE IN YOUNG CHILDREN.—As a substitute for the plaster-of-Paris jacket Dr. H. C. Wyman, of Detroit, has devised a method of treatment which presents many commendable features. It is substantially a moveable jacket, and its application is as follows: The child being placed in such position that the spine is extended to nearly the normal limit; a piece of canton flannel large