

the sum of \$75 be granted to the Secretary as an annual honorarium.

A paper on the treatment of asthma, was then read by Dr. McKelcan, in the discussion of which many members took part. See page 203.

A paper by Dr. Ryerson, of Toronto, was taken as read in the unavoidable absence of the author.

Dr. Playter called the attention of the meeting to the circular he had just issued to the profession on the subject of phthisis.

Dr. Geikie gave notice that the by-law dealing with the reading of papers be made to provide that no member of the Association shall at any one Annual meeting read more than a single paper, or bring forward more than one subject for discussion.

Votes of thanks were then tendered to Dr. Workman, the retiring President, the various railroad companies, etc., and the meeting adjourned about nine o'clock, to meet in Toronto, on June 1st, 1882.

[We hope to publish the papers and discussions from time to time during the year, and direct attention to the three published in our last issue. Ed.]

NEWCASTLE AND TRENT MEDICAL ASSOCIATION.

The Medical Association of this district held its regular meeting at the St. Lawrence Hall, Campbellford, on 8th June. The President, Dr. Burritt, occupied the chair. After reading and adopting the minutes of last meeting, Dr. Byam, Campbellford, presented a patient with

HEMIPLEGIA.

An intemperate farmer, aged 35, who was otherwise well and had been in town the previous evening, four weeks ago, felt a numbness over left side, which deepened to complete one-sided palsy, during the day. No known injury although there may have been such. There was no impairment of consciousness at first nor since. He had aphasia for the first five days. The mouth was drawn. He protruded the tongue to the left side. The pupils were equal and not dilated. No ptosis. The left

arm-pit was for the first three days one degree hotter than the right, which was normal. He has dysphagia, which is rather on the increase. He complains that he cannot readily hawk mucus from the throat. There is no cough and no pain. The heart is normal. He has gradually improved under treatment until he can now almost walk alone. The leg has improved most. A discussion arose as to its origin especially whether embolic or apoplectic. The latter opinion prevailed.

SCIATICA.

Dr. Byam also presented a man aged 30, who had marked pain in the sciatic region for about eight years and who had been under his treatment for ten months. The treatment had been very various. Results so far were not the most encouraging. He is never free from pain although almost so at times. After a turn of improvement the old pain would return violently and suddenly. The motions of the hip joint are perfect but the pelvis of the side affected is tilted up so as to give the appearance that the limb of that side is shortened. There is a double curve in the spine which is not tender, and this curvature gives the trunk a distorted look when walking which is managed with difficulty. When almost free from pain he walks perfectly, and all deformity disappears to re-appear with recurrence of pain. His sister is similarly affected on the other side, but neither of these have much or any pain. Their common father is undoubtedly rheumatic. The actual cautery has been well applied over sciatic on two different occasions without relief. The pain is worse at night and is then in the region of the great trochanter. He requires an anodyne twice a day by the hypodermic method. Ether has also been injected. In the ensuing discussion suggestions were made of ammonia baths, nerve stretching, chloroform injections, alkalies and colchicum. Alkalies had been given a fair trial already.

FLOATING KIDNEY.

A case of the above was stated by Dr. Byam. The case is still living. The rational and physical signs taken together led to the diagnosis and no other was suggested.