

epileptiform seizure, no rigors. There was no paryalsis, either local or general, no incontinence of urine or fæces, no vertigo, no disordered sensibility, no defective sight, no coma. The prominent symptoms were severe headache, delirium, vomiting, a slow defective articulation, slow pulse and slow intermittent respiration. The last two symptoms were evidently due to the pressure of the abscesses on the brain, and simply denoted compression, which might be from any cause.

Gull and Sutton, who collected 76 cases for their article in Reynolds' System of Medicine, do not mention a slow pulse or slow respiration as occurring in any of them.

The absence of paralysis is explained by the matter being confined to the central white matter of the brain.

The erysipelas would then be regarded as an intercurrent affection.

ONTARIO MEDICAL ASSOCIATION MEETING.

The Canadian Practitioner says:—This Association held its Fourth Annual Meeting in Hamilton on the 4th and 5th of June. Although in point or numbers it fell behind its predecessors, in the amount of work accomplished, and in the harmony of feeling which pervaded its deliberations, it was far ahead of any previous meeting. The character of the papers read was decidedly above the average, and were pretty well distributed over the various sections of the country.

The president's address was replete with wit, and if some of his allusions were caustic, the application was so gentle, and administered with such a friendly smile, as to lose its sting. To the president's promptitude, and excellent qualities as a presiding officer, was due in a large measure the celerity with which the business of the Association was transacted without any appearance of hurry or confusion. Even with all the expedition, a number of papers were perforce read by title, and the Reports of Committees—some which were most excellent and contained matters of high interest to the Profession—were taken as read, or referred to the next Session.

The new President of the Association is Dr. Worthington, of Clinton.

London has been chosen as the next place of meeting.

Society Proceedings.

MEDICO-CHIRURGICAL SOCIETY OF MONTREAL.

Stated Meeting, March 28th, 1884.

T. A. RODGER, M.D., IN THE CHAIR.

Fracture of the Femur.—The following is an abstract of a paper read by Dr. Jas. Bell on "Some Cases of Fracture of the Femur, treated by plaster-of-Paris splint." Three cases were reported, all occurring in children.

The first, a little boy 1½ years of age, with simple fracture in the middle third. The second, a boy four years of age, with fracture just below the trochanter from direct violence,—being run over by a heavily-laden cart.

The third case was that of a strong, healthy boy, aged 8 years, with fracture at the junction of the upper and middle thirds. In all these cases the treatment was the same. Ether was given, the limb extended, and the fragments brought into position, and held there until a plaster splint had been applied, extending from the toes and including the pelvis and loins. Coaptation splints of pasteboard were moulded to the leg and applied between the layers of plaster bandage.

In none of these cases has there been the slightest trouble of any kind, and in each case when the plaster was removed the union was found to be most satisfactory. In the first case there was no appreciable shortening. In the second about a quarter of an inch, and in the third a little over a quarter but less than half an inch. These cases were exhibited, as also an old man aged 62 years, who had a bad compound fracture of both tibia and fibula just above the ankle-joint. The fracture of the tibia had been oblique, and about three-quarters of an inch of the protruding fragment had to be removed with the saw before it could be reduced. The limb was then permanently fixed with plaster-of-Paris, leaving the wound exposed through the small opening in the bandage. The wound was dressed with Listerian precautions, and the patient was discharged at the end of eight weeks with a sound leg. He is now doing his regular work (six months after recovery), and has been for some time, without any inconvenience. The writer, in summing up, thought that in a great many cases