

3. A Case of Perforation of the Bowel in Typhoid: Operation: Recovery, Followed by Subphrenic Abscess: Operation: Recovery. Herbert A. Bruce.
4. The Value of General Reading to the Young Practitioner. H. S. Hutchison.
5. Recurrent Gastritis—Gastro-Enterostomy. Ernest Hall.
6. A Case of Otalgia. B. F. Butler.

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7. How to Live to Prolong Life. Sir James Grant.
8. Diagnostic and Therapeutic Uses of the Roentgen Rays. Jas. Third.
9. Infection and Contagion. E. B. Shurtleworth.
10. Multiple Uterine Fibroids Complicated by Fœtus. John M. MacDonald.
11. A Case of Jacksonian Epilepsy. Frank W. Hall.
12. Notes on Beri Beri. Colin A. Campbell.
13. Cardiac Complications of Gonorrhœa. H. B. Anderson.

1. PETERS relates the history of a man suffering from dilatation of the œsophagus, which was due to constriction of the œsophagus produced by the hypertrophied condition of the pillars of the diaphragm, with or without a degree of spasm in that muscle. Section of the œsophagus at the point of constriction showed that there was no malignant or cicatricial tissue whatever, and that the circular muscular fibres seemed to be mechanically accumulated but not hypertrophied. The pillars of the diaphragm were exceedingly strongly developed. The left crus, supplemented by that portion of the right which crosses between the œsophageal and aortic openings was particularly strongly developed, and was not less than five-eighths of an inch in thickness at a point opposite the œsophageal opening.

Peters also relates the history of a case in which he performed œsophagotomy for the removal of a small vulcanite plate bearing one tooth that had been swallowed. Its position was detected by means of an X-ray photograph, which showed the plate lying at a short distance above the sternal notch.

2. FOTHERINGHAM and BINGHAM relate the history of a case of Graves' disease cured by operation. The thyroid gland was enlarged bi-laterally, both lobes and especially the isthmus being involved. The whole mass was removed except a small apparently healthy lobule situated at the upper part of the right lobe. Two interesting features occurred in the progress of the case after operation. First, an accession of a severe attack of acute Graves' disease on the following day, when the pulse ran 140 to 170, and the temperature 103°. There