

endowments in the Mother Country shows that these are the most permanent of all investments, outliving revolutions, changes of dynasty and even civil wars, and tending constantly to attract fresh means to themselves. May McGill University equal them in permanence, and at the same time be exempt from the defects which have sometimes marred their usefulness, and from the abuses which for a time have grown up around them. We may, I trust, hope that in our new and young society, and in the greater light of a cultivated and progressive age, this may, under God's blessing, be our happy destiny.

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## CLINICAL MEMORANDA.

### I.—FLOATING KIDNEY. II.—THE ANATOMICAL TUBERCLE.

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#### I.—*On Certain Symptoms of Floating Kidney.*

The condition in question may cause no other disturbance than a sense of weight or dragging in the abdomen, but there are cases in which more serious symptoms arise, partly the direct result of the dislocation and partly of the nature of what we term, in the absence of fuller knowledge, reflex phenomena. A remarkable instance has recently been under observation in the person of a physician, who gave the following history :

Aged 40, was of excellent family history, and had enjoyed good health, with the exception of dyspeptic attacks, until 1878, when he was obliged to give up practice owing to soreness on the right side and general weakness. He went abroad and gained 25 lbs. In 1879 he took a long voyage, and was seasick 46 out of 47 days at sea. He very nearly died of inanition, and at this time, when greatly emaciated, discovered "a moveable, smooth tumor (a lump), on sitting up and during inspiration, just below the margin of ribs on right side." He returned to practice in 1880, and until September 1887 kept at work, though never feeling comfortable in the abdomen, and at times suffering much with pain and flatulence. During this period he has had several attacks of intestinal and gastric trouble associ-