

"On Foreign Bodies in the Vermiform Appendix."

By Dr. James Bell, of Montreal. In this paper the writer expresses his opinion that appendicitis never depends on the presence of foreign bodies in the lumen of the appendix. There is little doubt, however, that when foreign bodies gain entrance accidentally into the appendix they aggravate an otherwise septic infection. Among the foreign bodies which he has found in the appendix are, in two cases pins, in two cases seeds, in one case wood fibre, in one case gall-stones, and in another case a fish bone.

Dr. Bell's paper was further discussed by Mr. Irving Cameron, of Toronto.

MEDICAL SECTION.**SECOND DAY—AFTERNOON.****Kernig's Sign. The Frequency of Occurrence, Causation and Clinical Significance.**

By R. D. Rudolf, Toronto. This paper contained the results of an investigation carried out in the different hospitals of Toronto. A large number of patients of all ages were examined, suffering from divers troubles, and the angles at the hip and knee accurately measured in over 200 of them. In 162; Kernig's sign was present in 97, that is, in over 60 per cent. It was always absent in perfectly healthy children. Dr. Rudolf considers that a more convenient plan is to extend the knee and then flex the hip as far as possible. Sometimes there is more than the usual degree of stretching of the ham string possible, and this extra flexion can by the writer's method be exactly measured when Kernig's sign could not show it. Of the 97 cases in which Kernig's sign was present, in 59 an angle of less than 165° at the knee could only be obtained, and of these in 10 cases the angle was 135° or less, showing a very marked degree of the sign. These 59 cases were of all kinds and only one of them was meningitis. Dr. Rudolf then went on to state that none of the theories of explanation of Kernig's sign were satisfactory as to its occurrence in meningitis.

Multiple Sarcoma. Report of a Case.

This case was reported by Drs. F. N. G. Starr and J. J. MacKenzie of Toronto. Dr. MacKenzie read the notes on the case. No autopsy could be made of the case. The patient was a female thirty-eight years of age, a seamstress. The personal or family history had no bearing on the case. For a number of years before 1901, the patient had a goitre, which, under treatment, almost disappeared in the winter of 1901. In April