

Act recently passed by the Quebec Parliament, were held in this city, the latter end of April, when the following gentlemen passed the major examination and were registered as licentiates in Pharmacy:—Wallace Dawson, R. H. Bryson and J. A. Gordon; two others being unsuccessful, were recommended to continue their studies for another year. The following passed the minor examination and were registered certified clerks:—L. R. Barridon, T. W. Henderson, and Elzear Laviolette, seven others being referred back for further experience and study. The Board of Examiners met in Quebec in the second week in May for the convenience of candidates residing in that vicinity. The new Act under which these examinations have been held will be most stringently enforced from the 1st of May; and all druggists, clerks and apprentices who have not already complied with the law should at once send in their names to the Registrar, E. Muir, Esq., Place d'Armes. The "Poison Book," one of which every druggist is required to use for the registration of the sale of poisons, is now ready and can be obtained from the Registrar. The following gentlemen comprise the Board of Examiners: Nathan Mercer, Alex. Manson, W. E. Brunet, Henry R. Gray, J. D. L. Ambrosse, H. F. Jackson and Henry Lyman, *ex-officio* President. In the interest of the public it should be generally known that all physicians keeping drug stores are obliged equally with licensed druggists, to employ no one in their pharmacies as clerks or apprentices who are not duly registered under the Act.

MEDICO-CHIRURGICAL SOCIETY, MAY 7TH, 1875.

The regular meeting was held this evening, when Dr. Roddick read a paper on "Surgical Diseases of the Eye." He gave the history and treatment of three cases that had been under his care during the past five months in the Montreal General Hospital.

*Case 1.*—W. H., aet. 56 years, laborer, sustained an injury while blasting in the water works reservoir, on the side of the Mountain. When seen by him both eyes were closed from œdema and spasm. Removed from the outer angle of right eye a quantity of dirt, and two spiculæ of wood, each about the size of a match; eye-ball itself apparently not injured. From the left eye a good deal of dirt was removed, also a spicule of wood from the inner angle of the eye, much larger than those taken from the right eye.

After operation, used a solution of atropine, gave 1 gr. opium, and ordered continued application of iced water lotion.

The day after the operation there was a good deal of chemosis, for which he scarified the conjunctiva and gave a cathartic.

On the third day there was much pain, which was relieved by hypodermic injections of morphine. The cornea is also hazy; gave 1 gr. calomel, and 2 gr. opium every four hours, and changed the cold water lotion for hot poppy water fomentations.

*4th day.*—Eye much worse; pus in anterior chamber; there is pain in good eye, also flashes of light, &c. This condition of things was met by removal of the eye while under chloroform. After this operation patient did well, and was discharged cured, after being in hospital 6 weeks.

*Case 2.*—T. H., aet. 23, laborer, was injured at same time and place as case 1. Eyelids much swollen; removed gravel and spiculæ of wood, also a clot of blood and the comminuted debris of the anterior part of the globe of the eye; the external osseous boundary of the orbit was also found to be wanting. The treatment consisted in washing out the eye with a lotion of carbolyzed water. The wound healed well and made a good stump. Discharged with right eye intact.

*Case 3.*—W. T., aet. 65, was seen on 10th March last. Found double cataract, that of left eye of five years standing, the right of five months; general health good. On 12th March, dilated pupils with atropine, and after induction of anesthesia, began to operate by lower flap, but while making the incision through the cornea the man moved his head, and the operation had to be discontinued; waited for two days, and then operated as proposed before with success.

On third day the iris was found to protrude, and failed to recede under the use of silver nitrate and pressure, but soon got well by repeated puncture of the cornea with a needle.

In his remarks Dr. R. stated that were he treating case No. 1, he would insert a suture into the sclerotic wound, as he finds this procedure is highly commended by Dr. Lawson of London, and Dr. Williams of Boston—also, that Dr. L. recommends the immediate excision of the eye ball in cases where a foreign body has become lodged in the eye and cannot be removed: this course wards off danger of sympathetic inflammation, from the sound eye.