(*a*) "Electricity in Gynæcology." Report of Cases;

(*b*] "Porro's Operation." Report of Case, Dr. Holford Walker, Toronto.

"A Contribution to the Operative Treatment of Injuries to the Spinal Cord in the Cervical Region," Dr. James Bell, Montreal.

"Exhibition of Cases," Dr. B. E. McKenzie, Toronto.

A dinner will be given on the evening of the 11th, by the members of the profession in Toronto, and a yachting excursion, to occupy part of the afternoon of the 10th, is in contemplation.

N.B.—Members will please note that certificates entitling them to reduced travelling rates will not be issued this year, as heretofore, by the Secretary, but will be obtained from the agent at the starting point of the journey.

JAMES BELL, M.D., *Secretary.*

COCAINISM.—The number of cases of recorded cocainism is not very great, and yet there can be no doubt that the drug is being extensively consumed by the initiated, for other than legitimate purposes. Dr. Clouston writing on this subject, sums up the evils of its use as follows:—1. It is the acutest and most absolute destroyer of inhibition, and of the moral sense generally, that we yet know. 2. The morbid craving is very intense, and control is absent. 3. The dose requires to be increased faster than that of any other such drug to get the same effect. 4. The delirium and hallucinations of all the senses of single doses, become chronic in cocainism. 5. The immediate effects are more transient than any other such drug, but this does not apply to the craving set up. 6. The treatment of cocainism consists in outside control of the patient; in stopping the drug at once; in careful watching—I should not trust a patient under treatment as regards suicide for the first week; nursing; the use of every sort of food that will keep up the strength, and of the bromide of ammonium, brandy or wine, tea and coffee, and possibly a hypnotic like paraldehyd or sulphonal for two or three nights at least. 7. A patient suffering from cocainism can usually be certified as insane so far as the presence of delusion is concerned; but he gets over these so soon, and yet is so far from the real cure, that certification and sending to an asylum is not a satisfactory process altogether. We need cocainism included in any special legislation for dipsomania.

THE TREATMENT OF RINGWORM.—Hydronaphthol is brought forward by Dr. Dockrell, of London, as a specific in ringworm (*Lancet*, 1889, ii, 1110). He says that it has been proved by experiment to be more active than bichloride of mercury as a parasiticide, and, as it is at the same time non-poisonous and non-irritant, it is an ideal remedy for ringworm. He uses the hydronaphthol plaster of ten to twenty per cent. strength, as that serves at once to limit the spread of the disease and causes penetration of the remedy. His method is to shave the head, and wash it with a five-per-cent. hydronaphthol soap and very hot water; then dry the scalp and apply the ten-per-cent. plaster in narrow strips overlapping each other at the edges and going beyond the diseased area. Outside of all he applies a ten-per-cent. melted hydronaphthol jelly so as to shut out the oxygen. At the end of four days he removes the plaster and repeats the previous processes, using a twenty-per-cent. plaster for one week. Then he repeats the processes and applies a ten-per-cent. plaster for ten days, when the disease will be found cured. During the treatment he applies a five-per-cent. hydronaphthol ointment to the unaffected parts.

ABUSE OF HOSPITAL RELIEF.—A select committee of the House of Lords, of England, is at present endeavoring to devise a remedy for the abuse of hospital privileges and relief, made plainly evident by abundant testimony. The Medical Society, of Victoria, has unanimously adopted the following resolutions: "This Society is of opinion that (*a*) great imposition on the part of well-to-do people is practised at the public hospitals, which is contrary to the principle on which these institutions were founded, and on which they should be conducted. (*b*) All hospitals receiving Government aid annually should be devoted solely to the treatment of the destitute and poor. (*c*) Paying patients should not be admitted into hospitals receiving Government aid granted for the benefit of the destitute and poor. (*d*) A wage limit should be fixed for all hospital patients (*i.e.*, all those earning more than a certain amount should be excluded). That the circumstances of each applicant for admission should be investigated by an