

symptoms after the cessation of the cause. These cases also determine, as far as they go, that the amount of lead sufficient to produce these symptoms is eliminated from the system in the course of two or three weeks. It is a pity that the urine in these cases was not examined, so as to ascertain the exact period at which it ceased to appear, and so have given a little more definite criterion of the time it takes to eliminate lead from the system. I scarcely see what steps can be taken legally to prevent a recurrence of these accidents; but it will be well to diffuse the knowledge that lead used for water storage, especially in a country where good soft water is common, is liable to be dangerous. And that it is customary to use lead in the glaze of common earthenware, and that such a practice is fraught with danger to the public.

DR. KENNEDY, PRESIDENT, IN THE CHAIR.

April 13th, 1883.

Dr. Trenholme exhibited the ovaries or fallopian tubes removed from a patient three weeks ago.

This is the first time Tait's operation has been made in Canada.

The right ovary was cystic, and weighed about 1 lb.; the other ovary and both tubes were normal.

The patient, aged 33, had been a sufferer for the last 14 years from pelvic derangement, and general prostration of health had followed, so that of late years she was incapacitated for any usefulness in life.

The uterus was retroverted and could not be maintained in its natural position. It is too soon to express an opinion as to the results of the operation, but so far every thing looks favorable for a perfect cure. The menses have not appeared though four weeks have passed.

The abdominal incision was completely united by 3rd day, and all the sutures removed on the 6th day. She was sitting up on 10th day, down stairs to her dinner at end of the 3rd week.

Dr. Osler showed the following specimens:—

*Aneurism of aorta*, rupture into pericardium.—The specimen was taken from a gentleman about 70 years old who had never, so far as is known, suffered from any symptoms of heart disease, and had not consulted a medical man. Death took place suddenly while at stool. The sac, as large as the closed fist, was connected with the arch, and projected above and anteriorly, eroding the first piece of the sternum. It was lined with thick laminae

of fibrin. Below it was attached to the pericardium, and a small rent had occurred 4 by 2 mm., through which the blood had escaped into the pericardium. The valves of the heart were a little atheromatous and the muscles very fatty.

*Double Hernia*.—From a man aged 80, an inmate of the House of Refuge, who had died of cerebral softening. There was double inguinal hernia; both the sacs very large. The left one contained the whole of a very long and lax sigmoid flexure, which was full of hard scybalous masses; the right sac contained the cæcum and appendix, the first three or four inches of the colon and the last twelve inches of the ilium.

*Puerperal convulsions, ventricular hæmorrhage*.—Dr. Osler showed the specimen taken from a primipara in 9th month, æt. 40, who was admitted to the Lying-in Hospital on 23rd of March. Seemed pretty well, but at times acted strangely; had been intemperate, never complained of swelled feet. Thursday, April 5th, she seemed as well as usual, and ate heavy meals. A little after 11 p.m. she vomited, but after 2 a.m. laughed and talked with the other patients. At 3.30 a.m. she was found sitting up in bed with the chamber-pot between her knees. Soon after she had a convulsive seizure, became profoundly comatose, and died at about 5 a.m. The urine was drawn off and found loaded with albumen, and contained numerous casts. At the autopsy the condition of the brain as here seen was found. An extensive hæmorrhage had taken place into the ventricles, and the clots form perfect casts of the lateral, 3rd and 4th; the tin the left lateral is the largest, and the blood has come from the corpus striatum of this side, the intraventricular portion of which is swollen and infiltrated with clot. In the uterus there was a mature foetus. The kidneys were enlarged, congested, and the tubules of cortex swollen; epithelium cloudy and granular.

*Fibroid Heart and Atrophic Kidneys*.—The specimens were taken from a man aged about 80, who died of softening of the brain (thrombotic) in the House of Refuge under Dr. Burland's care. The left ventricle presents, as seen in the specimen, a large area of fibroid degeneration occupying the usual position at the apex and lower part of the septum. The valves were all thickened, but the atheromatous changes in the aorta were slight. The kidneys show advanced senile atrophy, cortices much reduced, pelvic fat greatly increased, arteries very prominent.