

Society. Dr. Malloch introduced a case of multiple fracture, with nerve lesion. Patient, aged about 15, met with an accident on the 17th of August last by being drawn up between a belt and pulley. The left arm sustained a fracture of both radius and ulna; the pulse could be felt in the radial and ulnar arteries. Both bones of the right forearm were also fractured, and dislocated backwards at the elbow; no pulse could be felt at the wrist. The dislocation at the elbow was reduced, but on flexing the forearm, was produced again; a fracture of the coronoid process was suspected. An anterior and posterior pad was applied to the elbow after reduction, and secured by a figure-of-eight bandage, junk splints adjusted and the arms flexed and laid on pillows, the dressings were changed and readjusted as required. For some time passive motion was used. The left arm has made a complete recovery. The right arm has some loss of sensation in the distribution of the ulnar nerve, which is improving, and the elbow joint is gaining more power of motion. Pronation and supination are present to some extent.

Syme's amputation of the ankle joint. Patient was admitted to the Hospital Sept. 18th, under the care of Dr. A. Woolverton; age 53 years; occupation, blacksmith. Father dead, cause of death unknown. Mother was strong and healthy, lived to the age of 74 years. Had one brother who died at 40 years of age of kidney disease. One sister is alive and healthy so far as known. Had pleurisy in 1872 but completely recovered. Two years ago he had his left foot amputated, after being injured by a stone falling on it. Present trouble began last January with a pain in the heel, and some swelling. The foot improved about April, but got worse as the summer advanced. It was painted with tinct. iodi. and blistered, which relieved the pain but did not reduce the swelling. Had ague during the summer, during which the foot improved. Came into the hospital Sept. 18th, when he was unable to put his foot to the floor on account of the pain. Limb was put up in plaster which was removed about the 18th of Oct. It was again put up in plaster which gave him constant pain. On its removal the foot was found considerably swollen. It was then blistered and poulticed without relief. On the 22nd of Nov. fluctuation was evident just below the external malleolus. On the 25th a trocar was introduced, and considerable pus drawn off. Urine contained

nearly 50 % albumen, and also casts. Dr. McCargow exhibited specimens of bone taken from the case. Dr. Macdonald thought that by standing on one leg at his work, too much pressure was brought to bear on the ankle joint. It would be interesting to have the urine examined, to see whether or not any diminution in the quantity of the albumen has occurred. Dr. Ridley said the condition of the kidney may have followed the disease of the ankle joint. Dr. Ryall thought the kidney affection might have been merely a coincidence. Dr. Malloch thought the case was primarily one of kidney disease.

Dr. McCargow showed a specimen of tumor removed from a patient under Dr. Malloch's care at city hospital, admitted Nov. 27th, 1885. B. S. æt. 25. Father and mother alive and healthy. One aunt on the mother's side, and an uncle on the father's side had tumors. That of the uncle occurred on the neck. It was removed but is growing again. Patient has eight brothers and six sisters younger than himself, all strong and healthy. He never was sick until present trouble began three years ago, when he noticed a small lump on the outer side of the elbow. He continued to work, the tumor being painless and causing no trouble. It steadily increased in size for about eight months, when it reached the size of a hen's egg, and he had it removed. Six months after he noticed a tumor growing in the same place, which grew about nine or ten months, when he had it again removed. The second operation was performed in April, 1884. About Christmas he noticed the growth returning in the same place, since which time it has grown to about the size of the first. Present condition: on the outer side of the left elbow there is a large lobulated mass, part of which is ulcerated upon the surface; on the inner side of the arm is a smaller one not ulcerated. Nov. 28th the arm was amputated at the shoulder joint by flap operation, the outer flap being formed by the whole of the deltoid muscle. The glands in the axilla were swollen, and it is thought the disease will recur. Examination of the tumor with the microscope showed it to be encephaloid cancer.

Dr. Malloch also related a case which came under his notice in 1874. Patient was a man past 50. The tumor was situated between the hip and knee, and was the size of the head. Some thought it was a fatty tumor. The patient died in three or