DR. GEO. Ross related a case of lead poisoning where the patient was a druggist and took a glass of soda-water from a soda fountain early every morning. The fountain was fed from a reservoir by a lead pipe, and the liquid remaining in contact with the lead over night took up sufficient of the metal to cause serious symptoms. He had had a number of cases of plumbism from the shot works of the city. He asked Dr. Ruttan if he could account for the common occurrence of lead poisoning among the men working in the British America Bank-Note Company.

Dr. McGannon said he had a number of cases of painters suffering from plumbism; one case traceable to drinking beer from bottles in which the shot used in cleaning had been left.

Dr. Reed had seen large doses of strychnia recommended

for the treatment of the chronic forms.

DR. TRENHOLME had seen marked symptoms of lead poisoning

follow the use of acetate of lead in vaginal douches.

DR. WM. GARDNER related a case similar to that given by Dr. Ross. Intense lead colic was caused by drinking from a soda fountain in the morning.

Dr. Mills said that the number and variety of the cases referred to were very instructive, and brought up some interest-He referred to a case of poisoning from shot ing questions. boiled in milk, where the symptoms were those of lead poisoning. The patient also suffered for some time from crops of boils one after another. He further remarked that the chemistry of the body could not be measured by that of the laboratory. conditions under which the chemical reactions occur within the system cannot be even approximately imitated outside the body, because they are quite unknown. He further suggested that perhaps the lead salt, rendered insoluble by the action of therapeutic agents, is picked out by the tissues from the circulation like grains of indigo are. He also raised the question as to whether the colic, anæmia, etc., of plumbism were due to the direct action of the lead or entirely to secondary changes. favored the latter view.

Dr. Hingston said that some years ago he followed a practice then highly recommended of treating phthisis by large doses of acetate of lead, a half to one drachm three times a day. He found, when accompanied with acetic acid to insure its solution, no toxic effects followed these large doses. He was inclined to the opinion that it was not lead that was toxic, but the particular salt. Observation had shown that the carbonate and chromate were both highly toxic, while the acetate was not so.