ticed that the cord was thickened. It seemed very similar to one exhibited by him before this Society a year or so ago, in which there had merely been thickening of the gelatinous substance. He ligated the cord at two points, distant respectively about two and four inches from the body, and divided between them. dividing he turned out a dark substance, which in the dim light seemed to be a clot of blood. On examining the plane of section he found he had cut across a cavity, the wall of which had a mucous lining, and which at the time he thought was a cyst in the substance of the cord. On the following day he was informed that the infant had passed nothing from the bowels. A dose of thin oil was ordered. Early on the following morning a message came that there was still no passage, and that there was much uneasiness and vomiting. An enema and another dose of oil were ordered. It should have been mentioned that there had been an escape of a bloody fluid from the stump of the cord. Visiting the child during the morning, the doctor found the abdomen tympanitic, and noticed a few bubbles of gas escape from the centre of the cut surface of the stump. It now occurred to him that what had been divided had been a prolongation of the intestine into the cord. He cut the ligature and a quantity of flatus and meconium escaped.

He had kept the portion of ligated cord—the distil portion—on the first night on account of its peculiarity. He now showed it. The piece of intestine cut off, about the size of a twenty-five cent piece, was embedded in the centre of the cut surface, and it was found to be attached to the gelatinous substance by connective tissue. The doctor reported that the corresponding portion in the proximal end was similarly attached. He promised to report again as to the progress of the case. (See page 355).

URINARY CALCULUS.

Dr. Burns then showed a calculus weighing three and a half ounces which he had removed from a patient in the hospital by the suprapubic operation.

Its dimensions were as follows: smallest diameter, one and three-quarter inches; largest, two and three-quarter inches; smallest circum-

ference, five inches; largest, six and three-quarter inches.

The patient was a man of about 21 years, and had suffered from irritable bladder, hæmaturia, etc., for about two years. The pressure of the calculus had not been defined until a few months before admission to the hospital, to which place he was sent from the country for treatment.

When admitted the patient was greatly exhausted.

In reply to members of the Society, Dr. Burns said that he selected the supra-pubic operation because measurement of the stone led him to believe that it was too large for extraction by the lateral incision, and that although it could be seized in the jaws of the ithotrite it could not be crushed, as it was beyond the scale of the instrument.

In reply to the President, Dr. Burns stated, (1) that the case ended fatally less than eight hours after the operation; (2) that there was considerable hæmorrhage; (3) that there was no free portion of the bladder, uncovered by peritoneum, visible above the pubes; and (4) that in a similar case again occurring, he doubted the advisableness of interfering; but that if interference were urged few difficulties, possibly, might be encountered by incision into the bladder through the rectum. The calculus was phosphatic, and was broken up in the presence of the Society. It was very friable, and was found to contain a flattened nucleus of pitch about the size of a cent in circumference and a quarter of an inch thick-The nucleus was examined by Mr. Thomas Hayes, who reported that it had not the character of vulcanite or gutta percha, but answered to all the tests for some form of asphaltum or roofing-pitch.

Dr. Temple then presented a specimen of blighted ovum, and Dr. Nevitt a scirrhous cancer of the breast, removed by him at the House of Providence, after which the President showed a laryngoscopic mirror illuminated by electricity.

The meeting then adjourned to the next room and partook of the President's hospitality, Prof. Osler, of Montreal, being the guest of the evening.