tation may be done by the immediate method, but one cannot do microscopical work with the naked eye. The management of the microscope is quickly and easily learnt, the staining and preparation of sections being merely a matter of technique. The expense is insignificant when compared with the immense advantages to be derived from its use.

MEETING OF THE AMERICAN ASSOCIA-TION OF OBSTETRICIANS AND GYNÆCOLOGISTS.

The American Association of Obstetricians and Gynæcologists will hold its seventh annual meeting, in the Council chambers of the College of Physicians and Surgeons, at Toronto, Ont., on Wednesday, Thursday and Friday, September 19th, 20th and 21st, 1894.

The following is the preliminary programme:

- 1. President's address, George H. Rohé, Catonsville, Md.
- 2. Personal Experience with Pus Tubes: When to Operate, How to Operate, and the Results of Operation, James F. W. Ross, Toronto, Ont.
- 3. Relation of Hysteria to Structural Changes in the Uterus and Adnexa, A. P. Clarke, Cambridge, Mass.
- 4. Demonstration of a Mechanism of Intussusception (rabbits), Robert T. Morris, New York.
 - 5. Nephrectomy, L. H. Dunning, Indianapolis.
- 6. Treatment of Distension of the Fallopian Tubes without Laparotomy and Removal, Frank A. Glasgow, St. Louis, Mo.
- 7. Hysteria in Pregnancy, W. P. Manton, Detroit, Mich.
- 8. Relations of Renal Insufficiency to Operations, Carlton C. Frederick, Buffalo.
- 9. (a) Importance of Recognizing Septic Puerperal Endometritis early, and its Treatment; (b) Demonstration of a Portable Operating Table for Gynæcological and Abdominal (Trendelenberg) Work, Edward J. Ill, Newark, N. J.
- 10. Suspension of Retroflexed Uterus by the Utero-ovarian Ligaments, with Report of Cases, Reuben Peterson, Grand Rapids, Mich.
- 11. The Element of Habit in Gynæcic Disease, Geo. F. Hulbert, St. Louis, Mo.
- 12. Some Results of Ether Anæsthesia in Abdominal Operations, I S. Stone, Washington, D. C.
- 13. Report in Abdominal Surgery, Presenting Cases, A. Vander Veer, Albany.
 - 14. Supplementary Paper on Abdominal Sec- | H. Laidley, St. Louis, Mo.

- tion in Intrapelvic Hæmorrhage, M. Rosenwasser, Cleveland, O.
- 15. Conservative Midwifery, J. M. Duff, Pittsburg, Pa.
- 16. The cause of the Thirst following Abdominal Section, Eugene Boise, Grand Rapids, Mich.
- 17. The Care of Pregnant Women, W. B. Dewees, Salina, Kansas.
- 18. The Present Status of the Surgical Treatment of Uterine Fibroids, Lewis S. McMurtry, Louisville, Ky.
- 19. Discussion.—Inflammatory Disease of the Uterus and Appendages, and of the Pelvic Peritoneum; (a) Introductory Remarks, Wm. Warren Potter Buffalo; (b) Historical Sketch, Edward J. Ill, Newark, N. J.; (c) Clinical History, Chas. A. L. Reed, Cincinnati, O.; (d) Causation and Pathology, Lewis S. McMurtry, Louisville, Ky.; (e) Diagnosis and Prognosis, James F. W. Ross, Toronto Con.; (f) Franctic M.
- Toronto, Can.; (f) Treatment, M. Rosenwasser, Cleveland, O.; A. Vender Veer, Albany, N. Y.; J. H. Carstens, Detroit, Mich.; A. H. Cordier, Kansas City, Mo.; (g) Results—(a) When Untreated; (b) Under Various Methods of Treatment, Joseph Price, Philadelphia, Pa.
- 20. Intercurrent Typhoid Fever in Pregnancy, Thomas E. McArdle, Washington, D. C.
- 21. Notes on a Case of Cholelithiasis, Frederick Blume, Alleghany, Pa.
- 22. Perineal Operations, Joseph Price, Philadelphia, Pa.
- 23. Remarks Bearing on the Surgical Treatment of Intussusception in Infants, based on Two Successful cases, Henry Howitt, Guelph, Ont.
- 24. The Limitations of Surgery in the Treatment of the Uterus and its Appendages, William H. Myers, Fort Wayne, Ind.
- 25. The Incision in Abdominal Surgery—Methods and Results, J. H. Carstens, Detroit, Mich.
- 26. Abdominal Section in Ectopic Gestation, where the Fœtus is Living and Viable, X. O. Werder, Pittsburg, Pa.
- 27. Restoration of Intestinal Continuity without Mechanical Devices, Wm. E. B. Davis, Birmingham, Ala.
- 28. Hysterectomy for Cancer of the Uterus, E. W. Cushing, Boston, Mass.
- 29. Chronic Progressive Atrophy of the Vulva (Kraurosis Vulvæ), its Pathology and Radical Treatment, Charles A. L. Reed, Cincinnati, O.
- 30. The Reason why Patients Recover from Tuberclosis of the Peritoneum after Operation, Robert T. Morris, New York.
- 31. Report of two cases of Injury of the Ureter following Operation for Cancer of the Uterus, L. H. Laidley, St. Louis, Mo.