entitled "Hysterectomy with and without a Pedicle, A Critical Review from Clinical Histories." Dr. Lapthorne Smith, Montreal, opened the discussion by referring to the mistake frequently made in ascribing the formation of adhesions to electricity. Dr. Smith cited a case which he considered proved that electricity was not the cause of adhesions. One drawback in the operation without a pedicle was that adhesions were likely to form, and adhesion of the bowels was a very serious matter.

Dr. Atherton, of Toronto, said: "I think we ought to vary our treatment to a certain extent. When the tumor is not overly large and has not probably on that account formed a good pedicle, in such cases total extirpation may be necessary. In large tumor with well formed pedicle the old method of operation by extra-peritoneal method is still the best. I think electricity is of value, but I am not a complete convert to the method. We must not discard any form of treatment too summarily."

marily."

Dr. Temple, of Toronto, considered the subject of hysterectomy of great importance. "There is a danger," said he, "of hysterectomy becoming fashionable, though probably it will not be so popular in the future. A considerable number of cases of fibroid of the uterus can be treated successfully short of hysterectomy. I have seen four cases of mania after hysterectomy. We should consider each case carefully and the removal of the appendages should first be tried. Cases very hæmorrhagic might call for hysterectomy. The intra-peritoneal pedicle is preferable to the extra-peritoneal."

Dr. Ross, in reply, said: "I do not think that one or two cases will prove the statement made concerning the non-injurious effects of electricity. I believe that certain cases of fibroids are best left absolutely alone—though perhaps a little

ergot may be administered."

Papers on "Post Nasal Adenoids" by Dr. J. H. Thorburn, Toronto, and on "Ocular Paralyses from Basal Lesions, with report of Cases," by Dr. D. J. Gibb Wishart, Toronto, were, on motion, taken as read.

The section then adjourned.

Owing to the hall of the Education Department being required for other purposes the evening session was held in the large hall of the School of Pharmacy, Gerrard St. The session opened at 8.15. The minutes of the sections and of the afternoon general session were read and confirmed.

As the election of officers was now in order, it was moved by Dr. McKinnon, of Guelph, seconded by Dr. McFarlane, Toronto, that the report of the Committee on Nominations be adopted, and that the gentlemen therein named be the officers and members of committees for the ensuing year.

Dr. Wishart, seconded by Dr. A. J. Johnson,

moved that the President elect be authorized to appoint four delegates to the meeting of the Canada Medical Association, to be held in Ottawa in September next. Carried.

Dr. Oldright, Toronto, exhibited a patient who had suffered from fracture of the body of the scapula, and made some remarks thereon. Dr. Harrison, of Selkirk, had seen a similar case many years ago where the injury had resulted from the striking of the back upon the dashboard of a carriage when being thrown out.

The Secretary presented his annual report, and moved its adoption, seconded by Dr. McFarlane.

Dr. Mitchell, of Enniskillen, opened the discussion in Therapeutics, taking up the therapeutics of constipation. He was followed by Dr. McKinnion, of Guelph.

Dr. Acheson, of Toronto, read a paper dealing with "New Remedies." Dr. Mullin, of Hamilton, was asked to speak upon "Old Remedies" but did not respond. Dr. L. Smith, of Montreal, made a few remarks, and the discussion was closed.

The report of the Committee on Legislation was read by Dr. Harrison of Selkirk, who moved its adoption, seconded by Dr. J. F. W. Ross, Toronto.

The report was as follows:

"Your Committee find that several Bills amending the Act, or affecting the profession, were brought before the House at its last session. One to repeal the clauses of the Medical Act giving the Council the power to tax the profession for its support; giving the Registrar the power to remove the names of defaulters from the Register a year after having been notified of such default; and to amend other clauses of said Act, so as to nearly double the territorial representatives, and to make the term of their office three instead of five years.

"Another Bill to amend Section 48 of the Medical Act, so that the application of plasters to draw out cancers' or to heal sores shall not be practising medicine or surgery in the meaning of the Act. And a third Bill to make it more difficult or impossible for the medical schools to obtain the unclaimed bodies of those dying in charitable institutions.

"These Bills so far have failed to become law, and your Committee cannot help feeling that they were unwise and uncalled for. Your Committee feel that it is unwise to repeal or amend the Medical Act until its working has been fairly tried. They feel it is not in the interest of the profession to appeal too often to the Legislature; and that so long as we are represented in the Council by members of our own choice, and whom we can remove when they cease to represent our views, it would be fitter to bring pressure to bear on them, than to call in the aid of the Legislature. That whatever may be the faults and defects of the Medical Act, it has conferred a great boon