

was found, the rest of the lung being close to the thoracic wall without any adhesions. No more lotions were injected. Wound healed in seventeen days. Calcium sulphide was given till suppuration stopped, and then cod-liver oil and tonics were administered. The patient gained forty pounds in two months. Made a good recovery. Tingling and numbness in left arm disappeared in three days. That in the right arm persisted, and was followed by atrophy of the muscles, supplied by the ulnar nerve. Loss of sensation and muscular power has not been complete. Massage and the galvanic current were given with no good effect. The Doctor then reviewed the interesting points of the case, and asked for an explanation of the nervous phenomena.

Dr. W. J. WILSON said he thought these cases were more frequent since the advent of la grippe. He reported the history of a case.

Dr. HUNTER reported the history of two cases—two brothers in one family. The first boy was aged 18. There was threatened tubercular trouble present. Pleurisy developed. The chest was aspirated at once, but rapidly refilled and the fluid became purulent. A tube was introduced, but the drainage being insufficient, a portion of the rib was removed. The lung had become very much compressed, but it gradually regained its expansion and the boy recovered. The brother, who was similarly affected at the same time, was sent to the hospital and operated upon, and died.

Dr. OAKLEY reported the history of a case of pleurisy occurring in a hearty man where empyema followed. No operation was allowed. The patient suffered a great deal of distress until the abscess burst into the bronchus, when the patient vomited an immense quantity of stinking pus. A good recovery followed.

Dr. WILSON suggested that the nervous phenomena in the case reported might possibly have been reflex in character.

Dr. GORDON gave it as a possible explanation, that the lower trunk of the brachial plexus had been affected by the irritating action of the oxygen through the pleura; or it might have been reflex from the cord; or simply a coincidence.

Diphtheritis Laryngitis.—Dr. HUNTER said that he had a case of diphtheritic laryngitis in which he was using calomel fumigation. The father had suggested to him the use of antitoxin. As he had heard little about its use of late in the city, he asked for opinions of members.

Dr. PETERS said the reports from Toronto had been different from the reports from any other part of the world. Unfortunately he had not been present at the meeting of the society in which antitoxin