

dence) with performing an ovariectomy and "all being over" in *five* minutes.

Dr. Trenholme questioned the possibility of even emptying a fair sized ovarian cyst (say of 40 lbs.) in five or even eight minutes, let alone the completing the whole operation in five minutes. Such a statement he would receive with "a grain of salt." Dr. Hingston spoke of Keith's quiet deliberate mode of operating, and the marked success to which he had attained.

Montreal, Nov. 19, 1886.

The regular fortnightly meeting of the society was held November 17th, Dr. Cameron in the chair.

Dr. Major exhibited a patient with paralysis of the left vocal cord, the result of a tumor of the neck pressing upon the nerve. He also exhibited a case of incipient phthisis of the larynx—also a case where the local application of pure alcohol was benefitting a patient suffering from papillomatous growths of the larynx. Six years ago the Dr. had removed some growths but they had returned. All were now removed except one, and the patient was doing well.

Dr. Johnston exhibited a specimen of perforated cystic duct of the gall bladder. A gall stone was found impacted in the gall duct. Dr. R. P. Howard spoke of some of the clinical features of this case. While the patient died from general peritonitis, there was remarkable absence of pain throughout the four days illness—also there was no collapse—these features were unusual in cases of peritonitis from perforation.

Dr. Schmidt showed a specimen of cancer of the liver, stomach and pancreas in same person.

Dr. Geo. Ross exhibited a specimen of malignant disease of the œsophagus, where death resulted from the rupture of an abscess in the brain.

The secretary read a communication from Dr. J. W. Mills, giving some interesting information respecting embolism of the coronary arteries.

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### Selected Articles.

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#### DISEASE: A STUDY.

BY J. MILNER FOTHERGILL, M.D.

Ease—bodily ease—how little do we regard it in health. When in its place comes disease (*dis* ease) how vividly we realize the advantages of ease. Ease then is a treasure whose value we never properly estimate till we have lost it.

We know nothing of the perpetual restless activity of the intestines till colic reminds us. We never ponder over the complex mechanism of breathing until want of breath forces it upon our consciousness. We never realize all the advantage of motility in joints till that motility is interfered with by disease, or injury. We rarely consider the relations of the brain to the periphery till pain calls our attention thereto; or of the brain to motion until the motor power is impaired, or put in abeyance. Probably few ever think seriously of the sheer pleasure of thinking and being able to think, and what an exquisite delight a cultured brain is, until this power is waning or being lost. Who troubles about the elaborate arrangements for washing the waste *débris* of the body out of it by a water channel, until some obstacle or obstruction to the outflow is developed. The heart is a hollow muscle, emptying and filling with regular, even, rhythmic stroke, pumping the blood out of the great venous reservoirs into the arteries. We reckon little of it, and its doings until something has gone amiss, and we experience discomfort therefrom.

That suffering, much abused organ, the stomach, has to endure any burden the palate may impose upon it until it enters in its inarticulate protest—the pain of indigestion—which compels the reason to put the palate in bonds.

The liver receives even less consideration. It cannot get rid of offending, or embarrassing matters by ejecting them, as can the stomach and bowels; it can only put the appetite in abeyance, and so relieve itself from over-taxation. Its protest is a purely negative one, *i.e.*, the cessation of the pleasure of eating. When by physiological rest it has regained its lost power, the evidence of its restored capacity is the return of the appetite.

In disease we find something more than the loss of ease, the substitution of discomfort for a pleasant sense of existence. There is something more in disease than this. In its maladies the body manifests the impress of its inheritance; and at other times bears the stamp of its embryonic development—the record of its evolution. Looked at from this point of view disease has widespread and far-reaching relations. A few considerations of this aspect of the subject will not only light up some obscure morbid conditions, but will lend them an interest and an instructive power, which will enable us to grasp them with a wider hold and a tighter grip.

What do we see in relation to gout—a very common malady. Gout, whatever its Protean form, rests basally upon the presence of uric acid in the body; and what have we, the Bimana, to do with uric acid? The waste matters of the body are cast out by the kidneys, as Galen knew; but he also knew that the constituents of urine