

and showed careful and thoughtful preparation. I think it is not too much to say that, if the papers alone represented the entire work of last Session, the Society would have added its quota to our knowledge of medicine and surgery.

Of the other material presented, in the form of case reports, living cases, anatomical and pathological specimens, there was so much that was of great interest that any attempt at enumeration would be tedious. Perhaps, however, I may be allowed to recall to your memory a few of the rarer conditions reported: a rather singular case of osteoma, where a tumour the size of a small walnut swung loosely in the mouth, attached by a pedicle to the base of the tongue, multiple and numerous echinococcic cysts of the omentum and peritoneum; hysterical swelling of the hand; automobile fracture.

Among the living cases exhibited were a series of four healed cases of rupture of the eye ball; a case of hereditary syphilis with enlargement of the liver, and a remittent fever simulating typhoid; ulceration of the cornea from the diplo-bacillus of Morax-Axenfeld; a series of tuberculous cases showing the result of treatment by subcutaneous injections of iodoform; splenectomy for large wandering spleen (so-called ague cake), with a most satisfactory result; lymphatic and myelogenous leukaemia; cholelithiasis with fat embolism; extirpation of a chronically inflamed lacrimal sac performed as a prophylactic measure against disease of the cornea. Among the pathological specimens were the following: red infarcts of the liver; obliterating inflammation of the hepatic veins; cerebellar tumours; papilloma of the bladder; sarcomatous glandular tumour of the kidney from a young child; also, a very interesting microscopical slide of the spirachæte pallida obtained from the primary or Hunterian sore.

In addition to the contributions of our own members, several distinguished visitors honoured us with addresses which added not a little to the interest and success of the Session's work.

Dr. John L. Todd, a comparatively recent graduate of McGill, and now of the Liverpool School of Tropical Medicine, gave a most enjoyable and instructive illustrated lecture. With the aid of numerous lantern views, he was enabled to present a very good idea of life and conditions on the Congo, as well as a vivid clinical picture of the more marked features of sleeping sickness in the various stages of this fatal disease.

Dr. Royal Whitman read a valuable paper on the weak or so-called flat foot, dealing with the subject in a thoroughly scientific manner. After considering at some length the foot as a mechanism governed by mechan-