

## The Defence Association.

*To the Editor of the CANADIAN MEDICAL REVIEW:*

DEAR SIR,—It is not my intention to say much about the Defence Association. It is able to take care of itself in the future, as it has shown itself able to do in the past.

One strong evidence of the fact that the actions of this Association have met with general endorsement is that nearly all the Defence men are being returned by acclamation.

The effort of the Defence Association to disqualify some bodies, from having representation in the Council, is certainly praiseworthy. There is no reason why the Toronto School of Medicine, Victoria University, or Queen's University should enjoy this privilege, when they are not now teaching bodies.

It is to be hoped that this Association will continue until all the abuses of the past are removed.

London, Nov. 21st.

OBSERVER.

## Selections.

### The Operative Treatment of Jacksonian Epilepsy.

BRAUN, of Göttingen, reviews a subject which some years since occupied much time in the proceedings of medical societies and much space in the periodicals, by the publication of a case of severe Jacksonian epilepsy, which was not merely relieved by operation, but which was cured and was still well seven years after the time of the report. As a result of the discussion as to the value of the operative treatment of the affection, the profession at large gathered the impression that the permanent cures were few, if any: that a minor operation, such as trephining, was as likely to be followed by marked betterment as a major one, such as excision of a portion of the cortex; that even when there were distinct lesions, such as cysts or cicatrices or depressed bony fragments, the ultimate prognosis was bad; that even of the ultimate history of the reported cure<sup>1</sup> cases procured few, if any, would be shown to have been permanently relieved of their epileptic attacks.

Braun's case was that of a man twenty-four years old, who suffered from a head injury of the right side in his twelfth year so severe as to produce immediate paresis of the left upper and lower extremity.