

"magical" cures of coughs, gonorrhœa, rheumatism, or some other diseases the diagnoses of which are well known. A great many persons call every druggist "doctor" and calculate on doing their medical business with him, unless when they are so sick as to require the services of the physician at their own houses. Surely the law might be so enforced as to prevent this infringement on the rights of medical men, who pay dearly enough for their few privileges, by long years of study, examinations at college and before the Council, and by the weight of responsibility resting upon them, which in no way affects the standing or the income of the druggist that prescribes from behind the counter.

Yours, etc.,

THOS. R. DUPUIS.

Kingston, April 8, 1884.

### Reports of Societies.

#### TORONTO MEDICAL SOCIETY.

Feb. 28th, 1884.

The President in the chair.

Dr. J. F. Ross read a paper upon the "Wintering of Invalids When, Where, and how to Go." After alluding to various resorts in Italy, France, &c., he said that Southern California possessed most of the requisites of an ideal health resort. Santa Barbara, on the coast of California, presented most of the conditions sought for by the unfortunates. It was situated on a southern slope towards the sea—protected on the north and east from the cold and dry winds from the adjacent desert, with a satisfactory temperature and rain chart, and all the benefits of a refined and wealthy society, and was within easy reach of other resorts, as the Ojai Valley, Los Angeles, S. Gabriel Valley, etc.

Dr. Aikins wished to know what class of cases would be benefited by a residence in high altitudes.

Dr. Nevitt said that Dr. Theo. Williams, had found those cases benefited most by high altitude whose disease was limited, the subjects of hæmorrhage, but not those subject to pyrexia. The chest measurements were generally increased and the area of dulness diminished, emphysema was usually developed, possibly by the greater respiratory exertion induced by the rarefied air.

Dr. Ross presented the stomach of Mrs. D., with the following history:—Mrs. D., æt. 66. Father died suddenly, æt. 77; mother died of paralysis, æt. 86. Two of her sisters are dead, one æt. 7 and one at birth; one sister and four brothers alive and well. Married young; husband died seven months afterwards; had one miscarriage at five months; three years ago had typhoid fever. Until three years ago was apparently well. Twelve months ago was ill with so-called remittent fever. In July, 1883, had a severe chill, pain in bowels, diarrhœa and tympanites, vomiting, anorexia, emaciation; skin became yellowish in colour. Never noticed any abdominal lump until lately. The tongue is red; appetite poor; takes beef tea and oysters without pain or discomfort; no vomiting for several days; some diarrhœa present, passing mucous shreds. Pulse 116; right foot swollen; left foot never swelled; respiration 36; no cough. The *post mortem* disclosed a cancerous enlargement of the lower and posterior portion of the stomach adherent in part to the pancreas; the right kidney was cystic.

Dr. Cameron exhibited a placenta illustrating fatty degeneration, and giving rise to premature delivery. It was very small and presented here and there numerous patches, yellow in colour, hard and resistant to touch, and varying in size from a pea to an almond in the shell. There had been no history of syphilis. Microscopical examination showed fatty degeneration with inflammatory infiltration and organization in parts.

Dr. Macdonald exhibited a placenta. Mrs. A., æt. 22, primipara, menstruated last in September; morning sickness was very troublesome. In December choreic symptoms set in, affecting the right upper extremity especially; but extending to the right leg and foot. The chorea was treated with liq. arsenicalis and oxalate of cerium in two-grain doses with some relief. About four weeks ago the foetal movements ceased to be felt, and afterwards the chorea disappeared. After a very rough drive pains set in, and there was a show, and one week after, delivery took place. Six weeks before delivery she lessened in size. The placenta was small, hardened, and degenerated in spots. There was very little tissue left to carry on the foetal nutrition.

Dr. Cameron considered the spots to be hæmorrhagic.

Dr. Carson thought the oxalate of cerium in the