arms and buttocks, at the gluteo-femoral fold form, which was occasionally very chronic and about the knees.

Dr. Wright thought the case to be one of impetiginous eczema, but saw no reason for considering it contagious. He was a believer in the existence of impetigo contagiosum.

Dr. Ross had found difficulty in distinguishing between impetigo contagiosum and varicella in an epidemic.

Dr. Spencer had met with the same difficulty.

Dr. Cameron had had a case beginning as an urticaria, but which developed into varicella.

Dr. Graham presented a patient with Paget's disease of the nipple; a woman fifty-five years of age. The disease began about fourteen years ago with an eczematous appearance around the nipple, soon followed by ulceration and induration of The nipple had the neighbouring glands. ulcerated away in about a year. There was no history of syphilis; the disease has run a natural course. At present the breast has almost entirely disappeared, and there exists an ulcerated surface extending from the sternum to the axilla, measuring about eight inches in the vertical diameter. The surface discharges freely, and unless frequently dressed exhales a bad odour. The ulcerated surface is surrounded by an eczematous margin about two inches in breadth. This condition precedes the ulcera-The tion. The surface bleeds freely. glands in the neck are enlarged. There is cedema of the right hand and arm. Severe pain is complained of in the arm and hand, especially in the thumb, fore and middle fingers.

Dr. Cameron thought that Paget's disease was an eczematous condition of the nipple, followed by duct cancer and sometimes by true scirrhus, he thought the epitheliomatous form was rare.

Dr. Adam Wright thought there was considerable confusion about what is called "Paget's Disease;" and that many cases now received that designation which did not correspond with Pagets' original description of this form of cancer. Mr. Paget described an eczema followed by the *duct* cancer, with a portion of apparently healthy tissue existing between the two.

The patient presented had more probably, in his opinion, the scirrhus of the cuirusse to the constitution of Boards of Health and

in its character.

Dr. Carson related the case of a lady who had been under his care. She was of a family with a cancerous history. She suffered from an eczema of the nipple, which, on more than one occasion had been cured but had reappeared; he asked if she was doomed to look forward to epithelioma.

Dr. Graham presented a kidney from a young man who was being treated for gonorrhœa and orchitis. A short while after entering the Hospital delirium came on followed by coma and death. The heart was slightly fatty, the lungs and liver fairly healthy. The spleen was enlarged, weighing twenty ounces and unusual in consistency and colour. The right kidney weighed four ounces and contained numerous cavities filled with sero-purulent fluid. Mulberry calculi were in some of the cavities, which were situated in the cortical and pyramidal portions of the kidney. The capsule was The left kidney was hypertroadherent. phied and congested. The right testicle and tunica vaginalis and vas deferens acutely inflamed. In the brain there was a seropurulent fluid in the arachnoid.

Dr. J. F. W. Ross read the history of a (See page 161). case.

Dr. Cameron related the details of a case of cancer of the larynx, in which Dr. Ryerson performed tracheotomy for the relief of urgent symptoms. After the operation which had given considerable relief, there was sternal emphysema and regurgitation of fluids through the tube.

Dr. Ross had frequently seen fluids after operation regurgitate through the tube, it had occurred in a case in which he had lately operated. He thought it due partly to enlargement of the glottis and partly to dulling of sensation.

Dr. Palmer thought that when the diagnosis of cancer was made the line of treatment adopted became of interest. Of late years extirpation of the larynx was growing more common, within the past two years the number of recorded operations had risen from sixteen to eighty. As to tracheotomy whenever the function of respiration was interfered with the operation was advisable. Life being frequently prolonged and in some cases the activity of the disease suspended.

Dr. Oldright made some remarks relating