

complete recovery, but died of meningitis, one died of hydrocephalus, present at time of operation, and only one died of the operation.

The paper was discussed by Dr. Ross, of Huntsville, and the author of the paper.

Dr. F. Le M. Grasett then read a paper on "Tumors of the Bladder," which was discussed by Dr. Groves. It will appear our columns.

Dr. Groves, of Fergus, read a paper on "Hare Lip." He believed the principle laid down in the texts was wrong—remedying a malformation by defect by sacrificing tissue. The two defects to be overcome were, a notch on the lower border, and a thinness of the lip at the line of union. He then detailed his method of operation to overcome these. The same principle of operation he employs in the treatment of vesico-vaginal fistulæ.

Drs. Bingham, Peters and Powell discussed the paper.

Dr. Geo. McDonagh read a paper on the operation for cleft palate. It was very important that the edges should be pared freely, that the lateral incisions should be long, and that there should be a thorough loosening of the flaps, so that the edges might be brought together without any tension. He preferred chloroform to ether in these cases.

Dr. Holmes, of Chatham, read a paper on "Appendicitis." After citing the present consensus of opinion as to the advisability of operating on these cases, he gave statistics of his cases. Of 49, eight had died from rupture of the abscess into the peritoneal cavity; four from general septic peritonitis; sixteen had been operated on with one death four months after the operation, but not as a result of it. Twenty-one had recovered without operation, but five of these had still some tenderness at McBurney's point. The essayist then detailed the history of a most interesting case occurring in a pregnant woman, in which the abscess ruptured into the peritoneal cavity, with recovery.

Dr. Atherton said that if all cases were operated on there would be more recoveries. But inexperienced surgeons would be slow to operate, when so many recoveries followed without operation.

Dr. Howitt pointed out that typhlitic cases seldom required operation. He described the symptoms of appendicitis when operation was called for.

Dr. Jeffrey, of Lindsay, said that he had had many cases of this kind, and the majority recovered without surgical interference.

Dr. McKinnon thought operating boldly soon after rupture of the abscess, with free cleansing of the peritoneal cavity, would often save the patient. He gave the history of a case of this sort in which operation saved the patient's life.

Dr. J. J. Cassidy's paper on "Metallic Sutures in Fracture of the Patella" was read by title.

Dr. Mitchell, of Enniskillen, read a paper on "Traumatic Septicæmia," which will appear in these columns.

Dr. Bray, of Chatham, presented a paper on "Pneumonia." This will be published in the LANCET.

Dr. T. F. McMahon read a paper on "Calomel Fumigation in Laryngeal Diphtheria." He referred to the great mortality under old methods of treatment, even intubation and tracheotomy saving but 20 to 30 per cent. of cases. Antitoxin had not been yet given a sufficient trial. He proved that 70 per cent. of cases in an average epidemic had been cured by calomel fumigation, and he was sure that he had seen cases cured by the treatment, which would have proved fatal under other treatment.

The subject of "Diphtheria" and its treatment was discussed by Dr. Wilson, of Richmond Hill, Dr. Sheard, of Toronto, Dr. Holmes, of Chatham, and Dr. McPhedran, of Toronto.

Dr. H. A. Macallum, of London, Ont., read a paper on the "Physiological and Therapeutic Action of Iron," with a discussion of its newer pharmaceutical compounds.

"Laryngeal and Tracheal Tuberculosis, the Importance of their Early Recognition and Treatment," was the subject of a very interesting paper read by Dr. W. F. Chappel, of New York. The Doctor spoke at length on the necessity of, and the benefits gained by, an early treatment. He showed a water-colored sketch illustrating the condition, and also an instrument, devised by him, for the sub-mucous injection of the larynx and the trachea.

The paper was discussed by Drs. Ryerson, Palmer, Price-Brown and Wilson.

Dr. A. Primrose, of Toronto, gave a series of lime-light views of anatomical sections.

A paper on "Home and Foreign Climates in Consumption," by Dr. Plater, of Ottawa, was read by title.

Dr. Geo. Acheson, Galt, reported some peculiar cases in practice, the first double cephalhæmatoma, in a child with enlarged thyroid; recovery. The second, leucoma on the inner side of the jaw, caused by a badly fitting plate. The third, a retro-pharyngeal abscess, complicating capillary bronchitis; evacuation by incision and recovery. Fourth, the removal by dissection of an atheromatous cyst of the neck. The next, dacryocystitis with loss of sight in the eye affected. The last, membranous colitis, with recovery from use of copious injections of weak solutions of copper sulphate, and syr. hypophos. 30. internally.

Drs. Machell and Peters discussed the paper.

Mayor Kennedy was then introduced to the Association by the President. The Mayor delivered a short address.

Dr. MacFarlane then related the history of a