carried a hod on his shoulder, and the condition was simply the result of added strain on one foot in walking up and down a ladder.

J. M. ELDER, M.D.—I would like to ask Dr. Turner if he attributed the improvement in the first case to the giving of the vaccine? On looking at the skiagram one sees definite bony tissue, as well as the inflammatory tissue. Does Dr. Turner think there may be absorption of the new bone thrown out as well as of the inflammatory tissue—absorption due to this vaccine treatment

W. G. TURNER, M.D. As to the absorption of the actual bone salts, I do not know. The X-ray picture was taken when he first came into the clinic, and at that time we were acting on the assumption that it was an osteo-arthritis. I have not had an X-ray taken since the treatment, it might be interesting though I doubt if any alteration in the picture could be expected. The change has been decidedly due to the infiltration of the cartilage, giving the typical picture of a gonorrhœal joint; and the improvement is due to the fact that the adhesions have been pretty well absorbed.

PATHOLOGICAL SPECIMENS.

L. J. RHEA, M.D.1. *Tuberculosis of the Intestines.*—Male, age 30 years. Autopsy Findings: Tuberculous cavities of the lungs: Generalized miliary tuberculosis: Tuberculosis of the intestines.

The specimen is intestine. On the mucous surface there are numerous discrete and confluent, ulcerated areas. They show great variation in size. As a rule they are ragged and their edges are undermined. The larger ones are seen to run in the direction of the circumference of the intestine. Small grayish tubercules are seen in the base of some of the ulcers.

2. *Pure Culture of the Bacillus of Tetanus.*—The patient from whom this culture was obtained fell 15 feet and inflicted a deep puncture wound in his axillary region. For two weeks he was well. Then convulsions appeared and his jaws became locked.

The culture was obtained from a small bit of foreign material found at the bottom of the puncture wound.

1.5 cm. below the surface of the medium there is a growth 3.5 cm. long composed of numerous radiating filaments.

3. *Retraction Diverticulum of the Œsophagus.*—Male 3 years old. Acutely ill five weeks. Temperature 100° 103°. There was rigidity of the neck and retraction of the head. Kernig's sign present.

Autopsy Findings: Generalized miliary tuberculosis: Tuberculous meningitis: Tuberculous lymph nodes: Tuberculosis of the myocardium and retraction diverticulum of the œsophagus.