

Dr. Reeve held that sarcomata may be successfully removed. He would insist on the early removal of all doubtful growths. The notion held by some that the removal of a tumor causes secondary growths is entirely erroneous.

At the close of the discussion the chairman announced that next meeting would be devoted to cases in practice, pathological specimens, &c.

#### OTTAWA MEDICO-CHIRURGICAL SOCIETY.

The first meeting of the above-named society for the winter, was held on Friday evening, 26th Oct. The president, Dr. Robillard, City Health Officer, in the chair. After routine, Dr. H. S. Wright, read an excellent paper on London Hospitals, sketching his observations during a recent visit. Among other points he had remarked the universal custom of treating epilepsy with large doses of the bromides, and the indifference of most pathologists towards the *Bacillus Tuberculosis*. At Moorfields he was impressed with the careful manner in which the surgeons examined the eye for hardness before using atropine. They considered that glaucoma was often hastened by the indiscriminate use of this drug, due to its action on the ciliary muscle. In the discussion that followed Dr. Grant related a case of vomiting in early pregnancy relieved by a plaster of belladonna over the region of the stomach; many remedies had proved useless; no physiological effects had been noticed.

Dr. Prevost had seen small doses act powerfully, also large doses given with impunity. Remembered a case of strangulated hernia relieved in eight hours by a grain of the extract every hour.

Dr. H. S. Wright had seen an ordinary plaster produce alarming symptoms. In using the drug he never felt satisfied that it was of no service until the physiological effects had been produced.

The complications of enteric fever was selected for discussion at the next meeting, and Dr. Powell requested to prepare a paper on the subject.

The card of a local practitioner, with the following blank form on the back, was shown and caused much merriment:

To \_\_\_\_\_  
Address \_\_\_\_\_

Having derived *great benefit* from the medical treatment of Dr. \_\_\_\_\_ I recommend you to secure his services.

Signed \_\_\_\_\_

The growing custom of advertising as specialists in diseases of the various thoracic and abdominal organs was also discussed and disapproved.

## Selected Articles.

### EXSECTION OF THE HIP-JOINT.

Extracts from a Clinic by LEWIS A. SAYRE, M. D., New York.

GENTLEMEN: This man, M. M. D., æt. 37 years, was brought to my office a few hours ago by Dr. Barnes, of Binghamton, N. Y., who gave me the following history. Both parents and family are healthy. Patient was strong and robust until two years ago, and has been living on a farm; while ploughing, he has been in the habit of kicking the mud off the plough, and by this means the hip-joint has been injured, which has resulted in inflammation, and at the present time it has reached the stage of suppuration, with exfoliation of bone.

You will observe that the right limb is two inches shorter than the left, although the limb is perfectly straight owing to Dr. Barnes' careful method of applying extension. You will observe that there is one sinus in the groin, one below the crest of the ilium, one above the trochanter major, and another about three inches below; we have in all, four sinuses, and judging by appearances, they lead to dead bone; this you may know by their peculiar characteristic appearance, which is graphically described as representing the anus of a chicken. This dead bone is a source of irritation, and keeps up a constant discharge from the body, emptying itself by way of these sinuses. As time goes on, granulation commences around the borders of these orifices, and becoming exuberant, is recognized as proud flesh; in this case you will observe it presents this appearance. Whenever you find an opening of this description in such a case as is here before you, you may be certain that such an opening leads to dead bone; you may be positive upon this point. In probing these sinuses, a flexible probe should be used in order that it may follow the channel without injuring the tissues; never use any force while probing at the seat of disease. The question here is what to do in this case; nature herself is trying to exsect the hip-joint; if the patient does not succumb from the long process of suppuration, we often get remarkable results from nature's treatment; in fact, there are some gentlemen to-day who claim that this is better than surgical treatment; I must confess that I differ from that doctrine. Here now is dead bone, and there is no hope for that man to get well until that bone is removed; now in the slow process of nature to remove that dead bone, there is a long travelling of pus through various roads which it must make for its exit; at the same time more or less of that pus will be absorbed by the system, resulting in anæmia and exhaustion. The patient informs me that while the sinuses are open and