

Reports of Societies.

COUNTY OF OXFORD MEDICAL ASSOCIATION.

This body held its third annual meeting at Woodstock, Ont., commencing at 1 p.m., on Thursday, January 8th. The following members were present :

Drs. Williams, McKay, Scott and Walker, of Ingersoll ; Turquand, MacKay, Swan and Hill, of Woodstock ; Brown, Beachville ; Burkhart, Thamesford ; Clement, Innerkip ; Sutherland, Norwich ; Balmer, Princeton ; Secord, Bright. Dr. R. M. Bucke, Superintendent of the London Asylum, was also present.

The retiring President, Dr. Williams, read "The Annual Address, which was well received. The doctor reviewed the history of the Association, and referred at some length to the advantages flowing from such Associations, whether viewed socially or professionally.

A paper on the use of "Hot Water in Restraining Post Partum and other Hemorrhages," was read by Dr. L. W. Swan ; and another on "Eclampsia," by Dr. H. M. MacKay, both valuable contributions, eliciting interesting and instructive discussion.

The following officers were elected for the ensuing year : President, Dr. L. H. Swan ; Vice President, Dr. A. McKay ; 2nd Vice-President, Dr. W. Clement ; Secretary-Treasurer, Dr. H. M. MacKay.

At this stage of the proceedings it was announced that Mr. Warner, of Toronto, had kindly invited the Association to inspect the organ that he had just finished putting up in its place in the new Episcopal church. After some routine business, the meeting adjourned to meet at Ingersoll on the second Thursday in April.

HAMILTON MEDICAL AND SURGICAL SOCIETY.

The annual meeting of the Hamilton Medical and Surgical Society was held on the 6th instant. There was a large attendance and considerable interest manifested. After routine business, the following were elected officers for 1880.

Dr. Malloch, President ; Dr. Locke, Vice-President ; Dr. Woolverton, Secretary-Treasurer, re-elected. A vote of thanks was tendered the Secretary and retiring officers.

Dr. Mills presented a full-time foetus, which at

birth made an effort to breathe, but "perished in the attempt." On examination, there was found a hernia of the diaphragm, permitting the greater bulk of the intestines to gravitate into the right chest cavity. A part of the liver was found almost separated by the constricting diaphragmatic band, also lying in the chest cavity. The other appearances were comparatively normal, except a condition of the hands, which were bent upon the wrist, similar to what is seen in club-foot.

Dr. Mullin then read a paper on "Malarial and Typhoid Fevers." He referred to the descriptions given by Flint and Aitkins, of simple continued fever, called also febricula, the temperature suddenly rising to 4°, 5°, or 7° above the normal, lasting 24 to 36 hours, and then generally falling rapidly, though in some cases the decline is more gradual, not attaining the normal for several days. He pointed out that malarious fevers corresponded with this in the sudden rise of the temperature, at the outset, and that the elevation was generally much higher on the 1st or 2nd day after the disease than is ever found at such an early stage in typhoid. He noticed the fact that sometimes in a case of intermittent fever, the intermission might not be well marked, and referred to a case falling under his observation, when for the first four days there was severe gastro-intestinal derangement, upon the control of which the intermittent form of the fever was apparent. The writer expressed his belief that remittent fever may have occurred in former times in this locality, when malarious influences were more potent, as it is now said to occur in some very malarious parts of the country ; but it is quite probable that cases of typhoid, running perhaps an irregular course, are often improperly designated bilious or remittent fever. He referred to the description given of remittent fever by various writers, who showed that this form of fever resulted from more intense malarial action and was consequently of more severe form than an intermittent, hence the forms of fever occurring in this locality, extending over a period of three weeks, and not attended with a high temperature, and but little influenced in their duration by quinine, could not be properly called remittent. He gave a brief account of several cases, some of which were isolated, others occurred in families, in which at the same time, cases of typhoid fever existed, attended with the usual complications.