## Society Meetings.

## ST. JOHN MEDICAL SOCIETY.

Dr. J. H. Scammell, President, in the chair.

Nov. 29th. 1899.—A paper on "Senility" was read by Dr. Stewart Skinner. Old age was considered from various aspects, its causes, its important features and modes of prolongation and treatment. The paper pointed out that the normal old man is not a patient, all the functions of the adult exist in him—only in a diminished degree—their activity is lessened and he must have impressed upon him that temperance, moderation in all things is the true secret of his health. (Published on page 41 of this issue.)

Pathological specimens.

Two vermiform appendices were shown by Dr. Murray MacLaren, one very long and completely gangrenous.

DEC. 6th.—Dr. Roberts read a paper entitled "Displacements of the Uterus with special Reference to Retroflexion." The paper which will appear in next issue of the News, deals with the pathology, prognosis and treatment. A general discussion followed.

DEC. 13th.—Dr. Mott read a paper on "The Abortive Treatment of Syphilis." The primary or incubation period is regarded by some as the interval between the infecting coitus and the appearance of the chancre, varying from two to four weeks. The virus during this time is claimed by some authorities to be localized to the initial lesion. the incubation period "a morbid focus is developed and at its periphery a cell-wall is formed which acts as a temporary barrier or blockade. In due time (that is while the virus is maturing) the cell-wall melts away or disappears, and then the virus is carried into the surrounding part by the lymphatics and blood-vessels and by contiguous tissue infection." If this mode of infection be cured, then it favors the view that syphilis can be aborted. This should be accomplished by careful excision of the chancre with a portion of the surrounding tissue. Hypodermic injections of germicidal solutions and the introduction of weak solutions of nitrate of silver into the tissue have also been practised with, in some instances, the non-appearance of secondary symptoms and the absence of hereditary taint, but in the majority of cases, secondaries supervene.