

## Society Reports.

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### Toronto Medical Society.

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THE regular meeting of the Society was held on the 25th of March, in the Council building. President, Dr. Wilson, in the chair.

**Two thousand Gall-Stones.**—Dr. J. F. W. Ross presented a large number (probably two thousand) of gall-stones which he had removed on the date of the meeting from a clergyman. The calculi varied in size from a grain of sand up to a small bean. They were black in color and faceted. The patient had been prepared for operation before at Johns Hopkins, but as his colicky attack passed away upon the administration of olive oil and the phosphate of soda, operation was deferred. On the 21st ult., the patient had a sharp attack of colic—the two hundredth—and was anxious for operation. The attacks latterly had been accompanied by fever and jaundice. Dr. Ross described the technique of the operation. The stones were partly removed with a scoop and partly washed out. The gall-bladder was fastened into the wound and a drainage tube inserted. The case was progressing favorably at the time of reporting.

**Safety-pin in the Stomach.**—The second case reported by Dr. Ross was that of an hysterical girl who had swallowed a safety-pin two and a-half inches in length and opened. She thought she felt it stick in her œsophagus twice before reaching the stomach. The question among the medical men attending the case was, whether the girl was telling the truth or not. But as the pain seemed intense, and the retching was constant, and there was continuous spasm of the diaphragm, operation was done. The stomach was opened, and the pin was found sticking in the anterior wall. It was removed. A good recovery was anticipated.

Dr. Macdonald said that if the stream of water was directed well down into the bladder the gall-stones would be washed out, thus avoiding the necessity for using the scoop. He had used the scoop when he had inadvertently left his irrigating apparatus at home. With reference to the second case reported, he thought that the X-rays would be of great service in establishing a diagnosis.

Dr. Greig asked what prevented the small gall-stones from passing into the duodenum. He asked if, in the second case, it were not possible that the pin might have passed if left alone. Would it not