It was moved by Dr. C. D. Murray and seconded by Dr. Trenaman that the annual dues of the Secretary and of the Treasurer be remitted by the Branch for the ensuing year.

It was arranged that the next meeting should be of a clinical nature, and be held at the Victoria General Hospital.

October 25th.—Meeting held at the Victoria General Hospital, the President, Dr. W. H. Hattie, in the chair.

The minutes of the annual meeting were read and adopted.

The programme for the year, as drafted by the Council, was read. The following contributions to the programme were promised:

"A discussion on Immunity," by Drs. L. M. Murray, Doyle, et al., for January 17th.

"A Therapeutical paper," by Dr. Goodwin, for January 3rd.

The clinical programme for the evening was as follows:

Case for diagnosis, shown by Dr. D. G. J. Campbell. Boy, aet. 11 years, admitted to hospital on August 9th, with complaint of pain in lower part of abdomen, swelling of face, and an obstinate ulcer on the shoulder. His urine has shown much blood and granular casts from the first. His facial expression suggests adenoids. There has been a variable amount of abdominal distension. The splenic dulness extends to within one finger's breadth of the umbilicus. Blood, 4,500,000 reds, 4,800 whites, the differential count pointing to splenic anæmia. The patient had been operated upon on August 24th by Dr. Armstrong, of Montreal, when considerable enlargement of the left kidney and great splenic enlargement were found. His condition has not changed since admission. He is now on iodide treatment, with mercurial inunctions.

Dr. Campbell asked for suggestions and questions regarding the case.

Dr. L. M. Murray said that he had found nothing pathological in the kidney except hypertrophy. He thought that the boy's appearance suggested hepatic cirrhosis, which would account for the splenic enlargement, the underlying cause being probably syphilis.

Dr. C. Dickie Murray noted the presence of Hutchinson's teeth, and thought that hereditary syphilis would account for all of the symptoms.

Dr. Chisholm also inclined to the diagnosis of congenital syphilis, with possibly a growth in the liver causing portal obstruction, the splenic enlargement being thus accounted for. The kidney condition