The generous donor was the well-known physician and anthropologist, Dr. Egerton Y. Davis. The doctor, by birth, it appears, a Canadian, revisited his native country during the session of the British Association in Montreal in August last. He has forwarded this picture to the profession of Montreal as a mark of the high esteem in which he holds its members, as well as of his grateful appreciation of the kindly reception accorded to him.

CATCHING COLD.—Prof. Austin Flint objects to the expression "catching cold," and all it implies; and yet we cannot but think that many diseases are produced by exposure to cold, and in such cases the *modus operandi* is not hard to explain. It will be hard to put aside the popular idea that we do *catch* cold, unless we adopt the view that the cold *catches* us.

THE "ANNALS OF SURGERY."—It was a matter for deep regret when publication of the "Annals of Anatomy and Surgery" was suspended. We are pleased to know that a sort of successor is to appear under the joint editorship of Dr. L. S. Pilcher, of Brooklyn, and Mr. C. B. Keetley, of London. It will be a monthly journal, the first issue being dated January, 1885. From the names of the editors with their collaborators, and the character of their former publications, we will expect something of unusual merit.

THE IMPROVED AMERICAN POCKET BATTERY. ---We have used this battery now for some weeks and can confidently recommend it. The construction of the instrument is simple. It can be conveniently carried, and can easily be kept clean and in good order. It is sufficiently powerful for all cases for whom the Faradic current is useful. Lyman & Co., Montreal and Toronto, are the sole Canadian agents.

Mrs. O'Reilly, relict of the late Dr. Gerald O'Reilly, of Hamilton, died suddenly, December 19th. Among her surviving sons are Dr. Chas. O'Reilly, Superintendent of the Toronto General Hospital; Dr. Gerald O'Reilly, of Fergus; and Dr. Edward O'Reilly, Surgeon of the steamer *Peruvian*.

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Hospital Notes.

TORONTO GENERAL HOSPITAL

PELVIC ABSCESS WITH TUBERCULAR PERITONITIS.

Under the care of DR. McFARLANE.

(Report kindly furnished by Dr. H. Bascom, of the Resident Staff.)

Patient, A. B., age 19 years. Entered General Hospital, Toronto, October 24th, 1884.

Family history: Father living and enjoying good health. Mother had her elbow joint excised, and subsequently the arm amputated, in a London, Eng., hospital. Three or four years previous to her death (which took place at the age of 32) she had an abscess in the region of the hip, which was opened and a constant discharge continued till her demise. She had a similar abscess in the left thigh. During the two years preceding her death she was bedridden.

Other members of the family are younger than patient, and apparently healthy.

Occupation, general housework for a farmer's family.

Previous history: Since February last, had felt unable to go about her duties. At that date she experienced an acute pain in right lumbar region which, however, was of short duration and did not recur. Absence of pain was a marked feature of the case. On several occasions she expectorated mucous tinged with blood. Did not menstruate since May 18th Her weight diminished twenty pounds last. since last winter. Two months ago she noticed a hard lump in left iliac region, painless and, as far as she could judge, undergoing no increase in size.

Condition at the time of admission to the Hospital. — Pulse, 120; temperature, 984; bowels, costive; a little cough in the morning with expectoration of mucus; a hardness could be felt in the left iliac region which extended upwards about three inches and inwards about three inches beyond the median line. Upon examination per vaginam, the cervix could be felt surrounded by a hard ring. A distinct swelling could be made out between the uterus and rectum, and was thought to fluctuate. The aspirator was used, and a small quantity of pus was drawn into the bottle. Owing to the con-