

The Treatment of Gastro-Intestinal Catarrh in Infants was the title of a paper by H. D. Livingstone, of Rockwood.

Pneumococcus Infection, by Dr. C. B. Anderson.

Hyperchlorhydria, by Dr. H. J. Hamilton. The writer in this paper refers the name to that class of cases in which there is an increase of hydrochloric acid and ferments of the gastric juice, excluding organic lesions such as gastric ulcer, which are often accompanied by this increased acidity. Though observed a half century ago, Reichmann, in 1882, was the first to investigate the condition of our modern methods.

Clinically, three classes of cases are recognized, those in which the hydrochloric is increased only during digestion; those in which the increase occurs in attacks, and those which, in addition to being marked by an increase in hydrochloric, are accompanied by hypersecretion both during digestion and fasting, and by dilatation of the stomach.

Cases in which the proportion of hydrochloric is more than 2.5 parts per 1000, are considered pathological. The causation, symptoms and diagnosis of the three classes of cases were given in detail, and typical cases of the second and third varieties reported. Special attention is given to treatment. The points to be observed are:

1. Removal of all causes which stimulate gastric secretion.
2. Neutralization of the excess of hydrochloric by the administration of alkalies in sufficient doses during the process of digestion.
3. Adoption of a diet of an albuminoid character.
4. Treatment of the gastro-intestinal atony and resulting phenomena. The treatment of cases of dilatation by lavage, spraying the mucous membrane of the stomach with nitrate of silver, 1 or 2 parts per 1000, and electricity, were dealt with.

Intra-Laryngeal Mycosis.—Dr. Price-Brown, of Toronto, read a paper on a case of intra-laryngeal mycosis. This condition, usually found in the faucial region, is caused by a cryptogam, the *leptothrix mycosis*. There are usually no subjective symptoms, except in cases where the growth is considerable, when there may be some dysphagia and slight cough. Occasionally the larynx is involved. To eradicate the plant is somewhat difficult. Various astringent and caustic applications are recommended, but Dr. Brown finds the galvano-cautery gives the best results. The doctor reported a case. The patient was a young man aged nineteen, who suffered greatly from cough. There was a good deal of expectoration. Began to lose his voice. Appetite poor. Several white spots could be seen in the larynx surrounded by