

Sanitary Association, made experiments on the air of public buildings. He estimated the carbonic acid by Pettenkofer's method. The examination shows the almost universal need of some system for extracting the foul air. Such a system being in use in the Assize Courts, the air at 3.30 p.m. on a crowded day showed only 6.6 parts per 1000. While in buildings as chambers, not being occupied, something is gained by tall ventilating shafts, yet, the really good results can only be got by a good mechanical system. Tobin's tubes and Boyle's valves are of use in schools if the numbers in a room are small. He points out that every system must provide for the fresh air being warmed.

At Buxton, a successful precipitation process is carried on by iron water. Water impregnated with iron, 3-4 grains per gallon as carbonate, with alumina sulphate and other crystalline sulphates as constituents, is taken from a disused coal-mine and conveyed to a tank where it is mixed with milk and lime. This is added to the sewage tank, and the purified sewage water is passed into a succession of filter beds and finally discharged into the river of higher purity than that of the river itself. The sludge is carried away at a remunerative rate for manure; and although it is carried on at a rate of 1 1/2 d. on the pound of ratable value, it is nevertheless the most satisfactory method of dealing with sewage yet introduced.

REPORTS OF SOCIETIES.

Toronto Medical Society.

STATED MEETINGS, Oct. 16th, 1888.

Dr. Machell in the chair.

Minutes of previous meeting were read and adopted.

Cases in Practice.—Dr. Carveth presented for examination a man brought before the Society last May, when he showed extensive ulceration of the nose, cheek, and throat; some discussion followed at the time as to whether it was a case of syphilis or rodent ulcer. Under specific treatment the man has progressed favorably.

Dr. Smith presented a young man aged 22 years. When nine years old he fell on the ice; striking his elbow; no pain was experienced till next day; abscess appeared and was opened, but did not heal. Others appeared for four years, but old ones did not heal kindly. At present has trouble with forearm. He goes to bed quite well, and is suddenly awakened by severe pains in arm, the elbow swells; this lasts a week and disappears; has had ten such attacks in two years. Two years ago a lump appeared on inner side of arm, then disappeared, and part around began to soften. He played base-ball all summer, when the arm did not trouble him, but since he has stopped the trouble has appeared again.

Dr. Bryce was inclined to think it due to a neuritis.

Dr. Atherton would try pot. iodid. for general or possible specific effect.

Dr. Britton then read a comprehensive paper on cystitis. Idiopathic acute cystitis frequently occurs as a complication, occasionally originates *de novo* in scrofulous and rickety girls; but, with these exceptions, it is usually of traumatic origin, either direct, as from instruments, calculi, or indirect, as overdistension and retention. The disease invades primarily either the mucous tunic or the peritoneal covering, usually the former, the inflammation being either catarrhal or croupous in character. On examination, the mucous membrane is discolored and softened, usually in patches; here and there may be erosions, or, if disease has run a severe course, ulcerations or even gangrenous spots. In acute form of disease the symptoms are malaise, chills, frequent desire to urinate, with scalding urine, pain in hypogastrium and sometimes tenesmus, high temperature and general symptoms of fever. After a few days the urine becomes ammoniacal, and deposits phosphates with mucous and pus corpuscles. If the case proceeds unfavorably, the patient lapses into a *quasi* typhoid state, manifested by hebetude, subsultus, vomiting, purging, and the disease invading the ureter, pelvis and secreting structure of the kidneys, ends fatally in coma.

The treatment in the acute form is from the early stages antiphlogistic. Absolute rest, both for patient and bladder, saline cathartics, opiate suppositories, hot fomentations, demulcent drinks and milk diet; alkalies to correct acidity, and in the latter stages benzoic acid to counteract alkalinity.