

of distinguishing between the dullness of the abscess and that produced by the tonic contraction of the fleshy abdominal and lumbar muscles, when the abscess is, and it often is, directed backwards. I find that even in healthy men, with well developed muscles, the percussion note is *dull* over the extreme right of the iliac region. This point should be borne in mind, as I am certain it has caused serious mistakes in treatment.

Having made the incision and opened the abscess, should we search for the appendix? Even my own limited experience has taught me not to do this. If the appendix is not adherent, and can be easily found, and is distended, inflamed, or perforated, it should be removed. I think all authorities now agree with this opinion and practice. Sloughs often come away after some days.

Should we close the wound? I think this a most important question, and has much to do with the ultimate result. In all the operations I have witnessed or taken part in, the rule has been to allow of room only for the drainage tube. Bryant and Jones recommend the lower half of the incision to remain open, and the whole to be stuffed with iodoform gauze, the latter to be removed on the third day usually, and again packed, and so on till granulation tissue fills it up. I should like very much to hear the opinions of those present relative to this. In the same connection we might include the material used for drainage. I have been in the habit of using a double perforated rubber tube, with one arm shorter than the other. This has the possible disadvantage of being rendered useless as a drain by compression in the event of much tympanic distension. For that reason many recommend a glass tube, but that may cause ulceration by pressure of the abscess wall, with consequent mischief. Others recommend strips of gauze, and this may be the best means, though I am unable to speak of it from experience.

HEMICRANIA: Pastilles:

R Phenacetin.....3 grams.
Caffeine and Sod., Salicyl....0.15 gram.
Quinine Hydrochlorate.....2 grams.
Morphine Hydrochlorate....0.05 gram.
Saccharine.....0.01 “

Divide into 10 pastilles.—One per dose.

—*Schlutius.*

CANADIAN MEDICAL ASSOCIATION.

TWENTY-FIFTH ANNUAL MEETING.

PARLIAMENT BUILDINGS,

OTTAWA, *Wednesday, Sept. 21st, 1892.*

The meeting was called to order at 10.30 a.m., by Dr. Roddick, the retiring president, who, after a few remarks requested Dr. Bray, of Chatham, the president-elect to take the chair.

The following nominating committee was then elected:—Drs. J. A. Mullin, J. E. Graham, J. W. Campbell, A. Rosseau, F. W. Strange, R. W. Powell, H. H. Chown, T. G. Roddick, A. Taylor, L. C. Prevost, V. E. Edwards, C. O'Reilly, I. H. Cameron, J. Christie, G. L. Milne, the President, and the Secretary.

The following notice of motion was then considered: “That no proposal for Honorary Membership shall be presented to the Association unless it shall have been previously submitted to a committee consisting of the president, secretary, and vice-presidents, who shall report to a meeting before the name is submitted for election.” This was moved by Dr. J. A. Mullin, of Hamilton, and seconded by Dr. J. E. White, of Toronto.—Carried. The president invited the past presidents to seats on the platform, and then welcomed the delegates from the Ontario and Rideau Associations.

It was then moved by Dr. Strange, seconded by Dr. Powell, that only delegates and visitors from places outside the Dominion should have the privilege of registration without a fee.—Carried.

The motion to engage a stenographer to report the proceedings of the Association in order to have an official record, was referred to a committee consisting of Drs. R. W. Powell, E. E. King, A. Rosseau, J. W. Campbell, W. H. B. Aikins and H. S. Birkett.

Dr. Mullin spoke feelingly of the sad illness of Dr. Geo. Ross, of Montreal, an ex-President of the Association, and moved, seconded by Dr. J. E. Graham, the following: “That this Association has heard with deep regret of the illness of Dr. Geo. Ross, and beg to tender our sincere sympathy in his affliction.”

It was suggested by Dr. Graham, that the subject of cholera be discussed at the afternoon session;