

adult who had been re-vaccinated. The Dr. went on to say that the best results had followed in the management of an epidemic at Kingston some years ago, from the following treatment:—covering the face and neck with a mask, lined with a composition of carbolic acid, tallow, and lampblack, and the stimulating mode of treatment.

Dr. Grote advocated the application of undiluted carbolic acid to the pustules individually, it was painless and prevented pitting.

Dr. Mack reported the following case. A young lady was brought to him with a large fluctuating tumour a little to the left of left sacro-iliac junction, and at the upper part near the crest of the ilium, the integument was very thin, and the contents appeared to be fluid, and not much thicker than water.

The young lady's father was told that it probably was spina bifida, and that operative interference would be injudicious. He stated that the regular medical attendant from her birth had expressed an opinion that it was not spina bifida, and his readiness to "cut it out."

Dr. Mack told the father that the sac might be emptied by the use of a small trocar, and a more reliable decision could be aimed at.

The girl was brought by her parents to a boarding house, kept for the accommodation of invalids, and in the presence of Dr. Goodman and F. L. Mack, an exploring trocar was introduced into the tumour, and about 12 ounces of clear fluid, non-albuminous, was evacuated. The operation was followed by a remarkable hollow in the centre of the site of the tumour. No further operative interference was deemed advisable, the fluid was reproduced to the full extent in 24 hours, and in 48 hours it was again evacuated. Slight tetanic symptoms in the extremities were manifested from the first, and an uncontrollable restlessness. Spontaneous evacuation of the cyst took place on the third day, and very serious symptoms made their appearance—rapid tense pulse, intense headache, occasional spasmodic contractions of the lower limbs,—no sensorial disturbance. On the morning of the fifth day she expired—no *post-mortem*.

Had not an early spontaneous or accidental rupture of the cyst been inevitable, he should have regretted consenting to interfere, but, under the circumstances, the exploring trocar employed could not have hastened much the impending catastrophe, from rupture of the cyst. Dr. Sullivan had seen a case of large cysted spina-bifida in a volunteer, serving in the United States army, the ultimate result he could not report.