Toronto Hospital Reports.

There are at present upwards of 220 patients in the Toronto General Hospital. The Andrew Mercer Eye and Ear Infirmary, which constitutes a wing of the Hospital, is now open for the reception of patients. Patients are admitted on payment of 40 cts. per day, or a guarantee from the Mayor or Reeve of the Municipality that the amount will be paid. A number of private wards are also at the disposal of those who desire them, at prices varying from $5 to $8 per week.

EPILEPSY.

J. V., æt. 20; of healthy parentage; strong and robust looking; had never received any injury, nor was the subject of any disease, hereditary or acquired; somewhat addicted to masturbation; was seized in August last with epileptic convulsions. At first they were not very frequent, but became more so in the course of a few weeks. The seizures were unilateral in character—left side, and were in some instances severe and prolonged; in others only of short duration. He was treated by several physicians, but without any benefit. The The seizures became more frequent, and at the time of his admission to the Toronto General Hospital, they occurred every fifteen or twenty minutes. There was at this time partial paralysis of the left arm and leg. He dragged the leg more or less in walking, and required the use of a cane. He was ordered a warm bath, and was put upon bromide of potassium and liquor arsenicalis. After a few days the fits began to diminish in frequency and force, and in a few weeks, disappeared altogether. He remained in the Hospital about ten weeks, and was discharged apparently cured. He went home, and began to go about as usual, but from exposure to cold, the fits returned as frequently as before, and he was obliged to return to the Hospital. His condition on re-admission, was more unpromising than on his first admission. The convulsions were frequent and severe; the paralysis of the leg and arm was more marked, and the sensibilities more blunted; memory somewhat impaired. He had also lost flesh, and looked anæmic. He was again put upon the same treatment as before, and is rapidly improving. The fits have ceased, and he is able to move about with the slight assistance of a cane. It is the intention to keep him under treatment and observation for a longer period, before he is allowed to leave the Hospital again.

FOREIGN BODY IN THE AIR-PASSAGES.

The following is a brief report of a case in private practice, under the care of Dr. Fulton :—

M. E., of the Township of Enniskillen, æt. two years, robust, healthy child, was playing, on the 24th of February, with a small glass bead, which she accidentally "swallowed." She was immediately seized with a choking spasm, which lasted some time, and returned in paroxysms every few minutes, with great difficulty of breathing. About 5 or six hours after the accident, she was seen by a medical man, and the usual means were adopted to remove the offending body, but without avail. As the symptoms at this time were not very urgent, the medical man advised the parents to leave her alone, in the hope that she might cough it up. For 5 or 6 days there was no great amount of irritation, and only occasional paroxysms of coughing; but the child could not be induced to swallow anything except a little milk or water, especially the latter. The parents became uneasy, and consulted a medical man in Oshawa, who immediately recommended them to bring the child to Toronto without delay, and have the bead removed. The parents did so, and, accordingly, on the 7th of March—11 days after the accident—Dr. Fulton performed tracheotomy. On introducing the hook in the trachea, before making the opening, the bead could be felt impinging upon its point every time the child coughed. On opening the trachea, it was readily seized and removed. The bead was about ½ an inch long, ¼ of an inch thick, oval in shape, with a hole running through its long diameter. There was very slight hemorrhage. The wound was at once closed by sutures, but on account of the dyspnœa which followed, the stitches had to be removed, and, to add to this difficulty, there was a good deal of congestion of the lungs. Stimulating cataplasms were applied to the chest, and an expectorant administered. The temperature of the room was ordered to be kept at about 70° F. 8th. Found the patient quite easy; a good deal of air escapes through the wound in the trachea, especially when the child coughs; also some frothy mucus. 9th. Wound suppurating; some difficulty in keeping