

question of destroying Provincial autonomy. In fact there is nothing to prevent the maintenance of the local organization whilst, at the same time, allowing it to delegate its powers to some of its members, who would be charged to form a general commission for the whole Dominion. You all know the old saying: "Where there is a will there is a way." Let us understand one another, and it will be easy to make the competent authority understand us. Gentlemen, when we shall have obtained for the whole of British North America a central bureau of admission to study, a board of medical examination for the conferring of a uniform license to practice medicine, then, I say, we shall have come upon an era of progress in the annals of Canadian medicine. Our diploma of practice shall be recognized throughout the whole of the British Empire and will meet with the respect of the scientific world, and the Canadian Medical Association will have deserved well of the country. And your humble President will be happy to find that he had helped, ever so little, in the solution of that great national question: Unity of rights and the freedom of practice of our profession."

A treatise on "The Treatment of Pauper Inebriates," by A. M. Rosebrugh (Toronto), was read by title, and the following committee named to study and report upon the matter, Drs. J. G. Adami, Thorburn and Muir.

Dr. G. STERLING RYERSON, of Toronto, then read a paper on "Monocular Diplopia," a subject which, he said, deserved more attention, being only very inadequately referred to in the text-books. It is much more common, he thought, than was suspected. The overlapping of images was present in monocular astigmatism. He recognized three classes of cases: (1) those dependent upon diseases of the refractive media, such as astigmatisms, facets on the cornea, opacities in the humors, punctures or dislocations of the lens; (2) those with traumatism about the zonule of Zinn, or disease of the ciliary body and iris; partial persistence of pupillary membrane is not often a cause; (3) disorders of the central nervous system. Dr. Ryerson recorded two cases. In the first, which he regarded as hysterical in character, there was diplopia of the right side, associated with right facial neuralgia, tinnitus aurium, augmentation and reduplication of the sounds heard. There was also hyperopic astigmatism. A course of potassium bromide and valerian relieved but did not cure. The second case was one of injury to the left side of the head, the patient remaining unconscious for several days. There was diplopia of the right eye and blurring of the discs. There was probably some protrusion of the posterior portion of the eye forward.