

like comforts of, our numerous health resorts; the establishment of a sufficient number of properly constructed and well-managed sanatoria—with all these we can look forward most hopefully for a very great reduction in the mortality from tuberculosis.

In conclusion, although the purport and limitations of this paper have only permitted of the briefest possible reference to some phases of this very important question, yet I think enough has been said to show that the trend of medical opinion is now to attach so much importance to the infectious character of tuberculosis, and so little to its hereditary tendency, that a medical director would be fully justified in accepting applicants from either of the two classes under consideration as ordinary life risks.

I would like to add that the time and need have fully come for the appointment of a medical commission, tribunal, or court, whatever it may be called, to whom a rejected applicant could appeal from the decision of a medical director.

FLOATING KIDNEY SIMULATING DISEASES OF THE GENITAL ORGANS IN WOMEN.

BY A. LAPTHORN SMITH, B.A., M.D., M.R.C.S.(ENG.),

Fellow of the American and British Gynecological Societies; Professor of Clinical Gynecology, Bishops University; Surgeon-in-Chief of the Samaritan Free Hospital for Women; Gynecologist to the Montreal Dispensary; Surgeon to the Western Hospital, Montreal; Consulting Gynecologist to the Montreal Women's Hospital.

By the division of labor and the increased attention which each branch of our art thereby receives, mistakes both in diagnosis and treatment are growing fewer year by year. As far as diseases of women are concerned the writer believes that 95 per cent. of those who submit to treatment are entirely cured; and even this small percentage of failures would be still further reduced if we could eliminate all errors of diagnosis. Floating kidney is one of those diseases which give rise to so many symptoms which we have been accustomed to attribute solely to the genital organs, that it is no wonder that its presence has often not been recognized, and that patients suffering from it after having undergone one or more gynecological operations have continued to suffer and complain as much as ever of those reflex disturbances which we thought depended entirely upon a laceration or displacement of the uterus or upon some disease of the ovaries or tubes. Most of the failures to cure women by gynecological treatment are due to defective diagnosis by the inexperienced or careless, the result being operations for one disease when there are other and more important ones present. Many women have been operated upon for lacerated cervix only, and been promised a cure which they did not obtain because they had besides endometritis, retroversion with fixation,