presented on our programme, as they have been —clinically and pathologically—medicine and surgery, gynæcology and obstetrics, ophthalmology, otology and laryngology, and with such a wealth and variety of material presented, it seems strange that lack of discussion should be a feature of our meetings. I am sure that I voice the sentiments of the older members and of those who have been the main contributors in the past, when I say that we would gladly see the younger members take a more prominent part in the preparation and the discussion of papers. Let it not be thought for a moment that here some are teachers and some are students, rather let it be understood that all are students and all may be teachers; that here we meet on common ground for mutual benefit and for the advancement of our profession. We have abundant facilities, let us have active professional work in the Society from every member, young and old. This is all that is needed to make our Society a great power in the land In fact, it is already a great power, and we can look with pride upon the part which it has recently played in several great public reforms, notably the reform of the national quarantine system within the last two years. In making this statement I do not wish in any way to detract from those who were more directly responsible for the reforms mentioned, but simply to state the fact that this Society did not stand aloof, but took a firm and uncompromising position in support of the movement for reform.

The discussion of matters concerning the health of the public and the welfare of the profession I conceive to be an important function of this Society. Further, a more active interest among the members must rapidly develop a higher class of work—collective investigation, formal discussions on important subjects in the different departments of medicine, committee investigations and reports on material presented at the meetings, and finally, as an outcome of all this, better arrangements for the editing and publishing of a volume of the Society's transactions annually.

There is another matter which I wish to specially commend to the thoughtful consideration of every member of this Society. A year ago we celebrated the fiftieth anniversary of the founding of the Society; to-night we are transacting the business of the twenty-fourth annual meeting of its second renaissance. Is not the time ripe for the establishment of a permanent home for the Society? We are domiciled here in our present quarters for four years more; and although at this moment I know of no scheme on foot, or even suggested for the purpose, it does not seem to me that it need be looked upon as entirely utopian to hope that before our present lease has expired such a scheme should at least be well under way. Of course it means money, and I know too well that no large sum of money could be raised among the members of this Society; but this fact need not be fatal to the project. We see hospitals, schools, libraries and institutions of all kinds grow up around us, not only in Montreal, but elsewhere, from public and private benefactions, in many cases directly influenced by medical men. Why may we not hope, if the want is made known, that some public-spirited citizen will in the near future build such a monument to his memory? Such an institution will certainly be founded in Montreal sooner or later. Such institutions already exist and have long existed in all great medical centres, even in this, the new world. I have not inquired into the histories of the different institutions of this kind, but I was greatly impressed by the fact, noted during a recent visit to Philadelphia, that the Academy of Medicine of that city is now nearly two hundred years old. What we want is a permanent abode, not only for our meetings, but where we may establish a library and a museum for reference, and preserve pictures and mementoes of the great lights of the profession to stimulate us and those who come after us to greater efforts and better work. In conclusion, gentlemen, I beg to tender you all my sincerest thanks for the honor which you conferred upon me a year ago by electing me President of this Society, and for the confidence and support which you have since accorded me as its presiding officer.

ELEVENTH INTERNATIONAL MEDICAL CONGRESS.

TREATMENT OF BLENNORRHAGIC URETHRITIS IN THE FEMALE.—M. Jullien, of Paris, has employed ichthyol with success in this affection. He applies it by means of a metallic stem, the extremity of which is wrapped with cotton previously soaked in ichthyol. He passes and repasses the instrument into the urethra with a certain degree of force. He also uses ichthyol to kill the gonococcus in the vagina or uterus.

ALUMNOL IN THE TREATMENT OF BLENNORRHAGIA.—Professor Schwimmer, of Budapest, has found that alumnol is an astringent and antiseptic which does not combine with albumen, as, for instance, with nitrate of silver, thus enabling its effects to be exerted upon the deepest portions of the connective tissue. He has made numerous experiments, in cases of acute blennorrhagia in the male, with aqueous solutions of from ½ to 5 per cent., either as injections, urethral irrigations, or instillations with Guyon's or Ultzmann's sound. The results were good. In acute cases alumnol soon produced a certain irritation; in chronic cases it was better supported, but the duration of the treatment was no shorter than with other remedies. In blennorrhagia in the female the results were excellent in both acute and chronic cases,