

We welcome with great pleasure the appearance of the *Journal of the American Medical Association*. It is to contain thirty-two pages of reading matter weekly. The contents of the first number consist in Original Articles, Notes on Medical Progress, Editorials, Correspondence and Medical Societies. The *Journal* is somewhat similar in appearance to the *Philadelphia Medical News*. The promptitude of the editor is to be commended in thus fulfilling the promise made at the last meeting of the Association.

A GENERAL INDEX of the Transactions of the Association from the date of its organization to the present time, is in course of preparation. By sending *one dollar* to the Treasurer, Dr. Richard J. Dunglison, P.O. Box 2386, Philadelphia, a copy can be secured.

THOSE wishing to subscribe to the *Journal of the Association* can do so by forwarding their address and five dollars to the *Journal of the American Medical Association*, 65 Randolph street, Chicago, Illinois.

The American Ophthalmological and Otological Association met July 16, at the Hotel Kaaterskill.

Meetings of Medical Societies.

TORONTO MEDICAL SOCIETY.

Regular meeting, June 14, the President in the chair.

Dr. Cleland was proposed for membership.

Dr. Cameron showed a boy aged eighteen with the following history: He is the third child; was born at full time. One of his sisters has suffered from rheumatism. At five years he took scarlet fever; was much reduced, but no otorrhœa or anasarca; at six years had St. Vitus' dance, which lasted seven months. At this time he complained of his nose. At twelve years he went to

work on a farm, and kept well till three years ago, when he had zona for three weeks; after this, whenever he got wet, a rash came out on his arms and they would swell. About a year later the throat and nose got sore; difficulty in swallowing, and scabbing in nose, followed by discharge and offensive breath; kept getting worse till a year ago in April, when he went to the hospital, where he stayed for a month and improved under carbolic spray and internal medication; has been subject to otorrhœa from left ear, and when in hospital got erysipelas. His present symptoms were aggravated by catching cold. Besides the otorrhœa, he presents the somewhat rare condition of adhesion of the soft palate to the pharynx, with perforation. Dr. Cameron considers it a case of congenital syphilis, the adhesion being due to the breaking down of gummata.

Dr. Palmer, referring to the presence of tinnitus, remarked on the cause, viz.: rarefaction of the air in the naso-pharyngeal space. He prophesied complete deafness, unless a communication was established between the mouth and naso-pharynx.

Dr. Reeve remarked that an opening in the membrana tympani might accomplish the desired end; but he did not advise it.

Dr. Cameron thought that the perforations in the soft palate allowed sufficient communication; operations for that purpose had usually been unsuccessful. He suspected necrosis of the bones in the nasal cavities; if so, their removal would doubtless improve the condition.

Dr. Macdonald presented a heart containing only two cavities, viz., an auricle and a ventricle. History: K—æ. twelve, tall for her age; an inmate of the Orphans' Home; has always been cyanotic; heart's action laboured, with a presystolic murmur at the base, but heard to the left of the sternum at the second intercostal space; breathing regular; has had no pain; death caused by tuberculosis. The condition of the heart was only discovered *post mortem*.