

depressions and for the detection of bullets or other foreign substances carried within the cranium. Division of the sensory root of the Gasserian ganglion has been found successful in the relief of tic douloureux. This operation may rival the removal of the ganglion.

When the source of irritation which produces the fit in "essential epilepsy" is clearly defined, surgical treatment may be found useful when carried out according to the nature of the disturbance. The present mass of evidence in literature is rather against operations in this disease.

The distressing aspects caused by facial palsy and facial contractions have found relief in anastomosis of the spinal accessory or hypoglossal to the facial nerve—a procedure recommended five years ago. It is based on well known physiological laws of repair, and supported by carefully conducted experiments. New plastic operations devised in the last few years for the early, and even late closure of cleft palate, give results vastly superior to the older methods. The earlier congenital defects of the palate and lips are repaired the better will be the speech. All defects should be closed before the child begins to talk. The temporary closure of the carotid arteries is a distinct advance in preventing hemorrhage while operating on the head and neck. It is founded on clinical experience and sustained by experimental researches. Many have died from loss of blood, and from shock of even poisoning, caused by a prolonged anæsthesia in trying to check the hæmorrhage in such operations as the removal of the parotid gland, tongue, superior maxilla and post-nasal growths, when a simple temporary clamping of one or both carotids would have saved them and prevented that indescribable grief and anguish of relatives, sometimes worse than death itself. Not to ardently seek to know and utilize all we can of practical advances in surgery is nothing short of "man's inhumanity to man."

In regard to the thyroid gland, let me say that its behaviour in health and indisease is still an enigma. The disease affecting it and mysteriously disturbing the entire economy of the sufferer, some parts more prominently than others, that puzzles us most, is exophthalmic goiter. The problem of its pathogenesis is unsolved. How then can a rational surgical treatment be prescribed. If we wait for some theory to explain all its phenomena history will surely repeat itself. In our desperation from the almost invariable uselessness of internal medication, thyroidectomy and sympathectomy have been resorted to by surgeons and with considerable success. The present statistics giving 76 per cent. of cures, when the organ is removed, and 63.8 per cent. after bilateral extirpation of the cervical sympathetic nerves. I am apprehensive that these