

was due to the fact that the stomach contents were acid and unfavourable to the growth of bacilli, which were thus less virulent.

Dr. A. LAPHORN SMITH asked if in sewing up the perforation it was the custom to remove the raw edges. He agreed with Dr. Armstrong that if there was a large opening the contents would escape and the organ collapse.

Dr. D. F. GURD asked if the first patient had been anæmic.

Dr. J. G. ADAMI said he could not give the statistics, but it was extremely rare to find evidences of perforation having occurred, although old extensive ulcerations of the stomach were frequently met with.

Dr. BELL, in reply said, in regard to the question raised by Dr. Shepherd and Dr. Adami, that one such case was mentioned by Taylor in the *Medical Record* during 1888. Irrigation and drainage had been carried out, and at the autopsy two months later, an anterior healed perforation had been found.

In reply to Dr. Smith, he said paring the edges had been done in a few cases, but the majority of surgeons did not think it was necessary, as what was really aimed at was closing by a Lembert's suture. The first sutures were only put in to hold the parts together and prevent escape of the contents while the Lembert's sutures were being introduced.

In reply to Dr. Gurd, he stated that the girl showed no symptoms of anæmia.

Hæmorrhagic Cysts of the Thyroid.

Dr. E. W. ARCHIBALD read a paper on this subject. (See page 780 of the April number.)

Dr. F. J. SHEPHERD said that the investigations of Drs. Bradley and Archibald explained the sudden increase in large thyroids which caused dyspnœa and induced the patient to seek relief. Hæmorrhage seldom occurred in a healthy gland, the history was always that of a slow growth before the rapid increase.

It was rare to meet with a pure cyst; in many, a large mass of adenomatous material was found at the base and they differed from the colloid cysts which were easily enucleated.

He had recently operated on an enlarged thyroid in a case presenting all the symptoms of Graves' disease with the exception of exophthalmos. Two solid tumours were removed with complete relief of all the symptoms.

Dr. W. I. BRADLEY felt that Dr. Archibald's paper had elucidated some of the obscure points in his own work, so that nothing now was left in doubt.