relief of a large collection of pus in the abdomen in a person with a sp. gr. of 1006, whose urine was full of casts, a woman who had suffered from puerperal convulsions on two occasions. The four physicians and surgeons who were interested in the case, after a careful consideration of all the conditions present, decided that spinal analgesia, in this case, would be accompanied by less danger than general anæsthesia. The needle was passed between the 3rd, and 4th lumbar vertebræ, the cerebrospinal fluid flowed out freely, without a tinge of blood, and the stovaine was inserted. It was a complete failure and a general anæsthetic was resorted to in the end, ether being used. A condition of paraplegia followed which persisted long enough to cause a good deal of anxiety, but it is, fortunately, now passing rapidly away.

In the British Medical Journal for November 13, there is an interesting article of Jennesco's on spinal analysesia. Jennesco reports that in his 1015 cases he has never known any failure, and has never had to resort to ether to finish the operation.

In the ensuing number of the same journal there is a report of a man who was present at Jennesco's clinic at Woolwich, and the reporter states that Jennesco was successful in one case, partially successful in the next case, and, in the third case the spinal analgesia was a complete failure.

Now while I do not think that it can be said that spinal analgesia is as safe as general anæsthesia by any means, and certainly not as safe as local anæsthesia, yet there are certain conditions in which spinal analgesia may possess comparative safety. That is, it may under special circumstances be less dangerous than general anæsthesia. I assume that in these cases local anæsthesia is out of the question. Such cases, for instance, as a condition of fæcal vomiting. There is always a danger of aspiration pneumonia in such cases, and a pneumonia due to aspiration of intestinal contents is always dangerous. Again, in cases of marked renal insufficiency with a low sp.gr. of the urine, and a correspondingly high sp.gr. of the blood the administration of a general anæsthetic is highly dangerous.

Wesley Mills, M.D.—I hope in a few weeks to lay before the Society some considerations based on my experience of last year, especially on the subject of anæsthesia and pain and I hope the surgeons will come to hear what I have to say. If I were a surgeon I should make it one of my great ambitions in life to lessen the amount of pain that is now inflicted, I venture to say by every surgeon. One of the great advantages of going through such a variety of experience is to help him understand many things which were incomprehensible before. I think it is probable that if Professor Jonessco had had even a quarter of the painful experience I had last year, he would never have inflicted such torture