

aspiration — sticky and albuminous — the final drachm being bloody, probably from a prick of the needle's point.

After satisfying myself that all the contents were withdrawn, I applied camphor and chloral solution to allay the aching, dragging pain experienced. She expressed herself much relieved after the removal of the fluid, and I instructed her to come again if it re-appeared, and in the meanwhile to wear a compress—just as soon as the soreness subsides.

In looking up the literature upon hydrocele in woman, I find that Hennig, of Leipsic, read a paper on the subject before the Gynæcological Society of Germany, and he says he can only find 39 cases and that he had only seen two.

### Correspondence.

#### MALICIOUS PROSECUTIONS FOR MALPRACTICE.

To the Editor of THE CANADA LANCET.

SIR,—A law suit, interesting to the profession has just closed in which a patient sued a Dr. for malpractice. The jury contrary to the opinion of medical gentlemen who were acquainted with the facts of the case, returned a verdict in favor of the plaintiff.) The Dr. carried it to the higher courts and asked to have the verdict of the jury quashed or be given a new trial. The judges quashed the verdict, not even giving the plaintiff the benefit of a new trial. This case illustrates the unfair treatment our profession receives at the hands of a jury, and the annoyance and very heavy pecuniary loss we may be subjected to at the hands of our patients. Had this Dr. not been financially "solid," he would have been forced to accept the verdict of that jury and been at the expense of \$2,000 because some malicious or ignorant persons saw fit to prosecute him. I believe it is to the interest of the profession to make common cause against all law-suits for malpractice. I am informed that a jurymen once said, "He is a Doctor; they put it to us, we have him now let us put it to him." And every case of success against a Doctor for malpractice encourages other patients to sue their Doctor. Only the other week I was consulted by one who was going to sue his physician for damages; I advised him against it, when he argued

in reply: "So and so got damages against Dr. —, and so and so against Dr. —, why shouldn't I succeed also."

If the Editors of the LANCET and *Practitioner* would act as a committee who would receive subscriptions from every member of the profession whenever a trial for malpractice came up, and apply it as a common fund for the defence of such trials, we would then be able to get justice, and the success of malicious prosecutions would not then be heard of. This is a suggestion on my part, but I trust the profession will take some definite steps to establish a common defence fund for mutual protection.

Yours, etc.,

EDWIN G. KNILL.

### Reports of Societies.

#### HAMILTON MEDICAL AND SURGICAL SOCIETY.

The regular meeting was held Oct. 5th, Dr. Stark, President, in the chair.

Dr. McCargow exhibited a specimen of an enlarged heart. The heart and pericardium weighed 30 ozs. There had been from 5 to 6 ozs. of fluid in the pericardium. There was a large deposit of lymph and fibrin, and the surface of the pericardium was much roughened.

Dr. Malloch brought before the Society a patient aged 21 years, whose right knee he had excised on the 1st of May of this year, the man walked in without crutch or stick, having a thick-soled boot on the affected side. Dr. Malloch read the following notes of the case. The operation performed under strict antisepticism, was that of Dr. Fenwick of Montreal. Watson's splint was used with paraffine bandages. The knee was dressed only four times between the day of operation and the 10th of June, when the original splint was changed as the paraffine had become soft from the heat. Plaster bandages were then used, the soft parts were firmly healed, though of course union had not fully taken place. The patient was then allowed up on crutches and subsequently to put his weight on it. The pieces of bone removed showed unmistakably that there had been ulceration of the cartilages. The patient has never suffered in the least from the knee since the operation.