pital, atomizers were made to pour out carbolic acid vapour from early morning till eleven o'clock, when the operations were begun; and they continued their work around the wound, not into it, till the work was complete.

A strong impression as to the little value of the antiseptic in recent wound was made on my mind on the occasion of my last visit to Europe. Syme and Simpson, Edinburgh's greatest teachers, were living at the time. The latter invited me to be present when he removed a breast. Before the operation was begun, he said to me: "Come every day, and see how this case gets on —I promise you there will not be one drop of pus"! I am free to admit I thought the promise a bold one. I visited the case till union was complete; and, as had been promised, was formed "not one drop of pus." At about the same time I saw Mr. Syme perform the operation on the foot which bears his name. It is needless to say it was well done, and with antiseptic precautions. But before the integument was sutured, it was perforated at the most dependent part, and a piece of lint soaked in carbolic acid and linseed oil was put through it. I ventured to ask Mr. Syme what that was for: "to permit the escape of pus," was the reply. "Then you expect pus, Mr. Syme?" "Certainly," was the answer. This promise also was fulfilled, and pus did form. Their two modes of operating impressed me strongly, but not in the same manner. Simpson's method, as on the occasion referred to, has influenced my practice ever since; and the adoption of his method, with such modifications as I have mentioned in my paper, has given results with which I have reason to be satisfied. To gather statistics generally would be endless; to quote opinions, useless. But I shall take statistics furnished by a distinguished surgeon near home, and I believe them to be thoroughly reliable. The time occupied in the healing process in those cases, if that process was one of second intention, was short indeed; and I gathered it was second intention from the circumstance that the drainage tube had been used. I am open to correction, however, on this point. Another claim put forward in the statistics referred to was the less frequent occurrence of erysipelas in hospital now than formerly, before the use of antiseptics. I venture to suggest that the comparative freedom from erysipelas now is due to the greater attention to cleanliness. And I am led to that conclusion from the fact that in the Hotel-Dieu hospital, where ventilation is not what could be desired, but where cleanliness of and around the patient obtains to a degree which almost ceases to be a virtue, and where, in surgical cases, absolute cleanliness, in and around the wound, is sought for, erysipelas is of extremely rare occurrence. Indeed, I cannot recall but a couple of instances in my wards in nineteen years' attendance.

Dr. Bell said in the cases referred to union had occurred by first intention in every single case. He was not aware whether the fact was expressly stated in the article in question or not, but could assure Dr. Hingston that such was the case. These cases, moreover, were all major amputations, and drainage tubes were inserted at the angles of the wound; but all along the face of the wound primary union occurred with wonderful rapidity.

## ECTOPIA RENALIS.

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Movable, Migratory, Loose or Floating Kidney, are all terms which may be appropriately applied to the species of organic lesion which forms the subject of this short paper.

I apprehend that this *ectopia* is of much more frequent occurrence than is generally suspected or known, and my object in bringing it before this Association is not intended to add anything new to our Clinical Pathological Literature, but to draw the attention of my professional brethren to the fact of its obscurity and probable frequency.

Although I have been in an active practice for upwards of fifty years, I have had only one ascertained case of this luxation, but I am justified by several writers in assuming both its obscurity and its frequency.

Ebstein * says, many cases of long contin-

*Ziemssen's Cyclopædia of Medicine, Vol. 15, page 764.