

Reports of Societies

TORONTO MEDICAL SOCIETY.

The regular meeting was held on February 24th, 1898--the President, Dr. MacMahon, in the chair. The minutes of the last meeting were read and adopted.

Dr. McKeown presented photographs of a boy aged 16, whose arms, which were rudimentary conical stumps, he had amputated. At birth these upper extremities were only tubercles, but since then they each had grown to be several inches in length. Dr. McKeown had removed two and a half inches of bone from both stumps. It was also pointed out that the patient's right femur was not a long bone, but felt like a ball of bone. The left femur, too, was much shorter than normal. The boy had acquired wonderful use of his toes; in fact, he could do anything with them most boys could do with their hands. The presenter of the case then reviewed the bibliography of conical stumps. Before learning the history of the case he thought the absence of the arms might have been the result of intra-uterine amputation. That being excluded, he considered that maternal impressions might be considered as a causative agent.

Dr. Gilbert Gordon said he thoroughly believed that maternal impressions had to do with the production of deformities. He cited two cases.

Dr. MacMahon described a fatal case which he had had under observation for the past two years. The patient came to him suffering severe pains in the region of the gall-bladder. Two days after he became jaundiced. He recovered. Later he had other attacks, some followed by jaundice, others not. He did not remember finding a tumor. After a long siege, the patient grew very weak, and it

was thought he was going to die. He became delirious. Then he began to eat freely; the jaundice cleared up and he crawled back to health. But, two weeks ago he again became deeply jaundiced, gradually sank and died. Diagnosis of obstruction of the common duct had been made. The cause of the relief after the first attacks resulted, the speaker thought, from the gallstones having ulcerated through into the bowel. During the latter part of the illness the patient had chills, fever, sweats and other symptoms of suppurative cholangitis.

Dr. Dwyer spoke of some of the *post-mortem* findings and presented the specimens. Section of the liver showed the presence of suppurative cholangitis, especially in the middle lobe. The bile ducts were dilated—especially the hepatic and the common duct. The gall-bladder was very much thickened and contained some bile. On opening the common duct into the duodenum, there was a large ulcerated spot surrounding the mouth of the duct, but the opening of the duct was not enlarged. The ulcerated patch looked as though it might have been the receptacle for a calculus. On squeezing the cut surface of the liver quantities of pus would exude from the biliary canals.

Dr. Dwyer presented a carcinoma of the stomach he had obtained at a *post-mortem*, although death had resulted from pneumonia. It consisted of a thickened small ulcerated patch with thickened edges at the pylorus. It had given rise to no symptoms.

Dr. Dwyer presented, besides, a portion of the trachea showing tuberculous ulceration; and a larynx from a patient dying from tuberculosis and syphilis, showing a similar condition.

Dr. Harold Parsons thought the first case was one in which a gall-stone