

## Society Proceedings.

### OTTAWA MEDICO-CHIRURGICAL SOCIETY.

*Fifth Meeting, December 3rd, 1903.*

DR. H. B. SMALL, PRESIDENT, IN THE CHAIR.

DR. WEBSTER presented a case report with specimens of cancer of the uterus. This was a case in which a timely diagnosis had been made, but operation was refused until the condition instead of involving only the cervix had extended throughout the whole organ.

DR. DEWAR showed a specimen of tubal pregnancy and Dr. PREVOST exhibited a large enterolith, together with portions of the ileum, cæcum and the appendix.

DR. ECHLIN showed the post mortem specimens from a case of carcinoma of the stomach with very extensive metastases in the liver, lungs and kidney.

A case report of Hernia of the Appendix and a small portion of the cæcum complicated by obstruction and sloughing of the parts involved was read by Dr. Dewar.

The paper of the evening, entitled "Tumours of the Right Iliac Fossa," was read by Dr. L. C. Prevost.

*Sixth Meeting, December 17th, 1903.*

A committee was appointed to make further investigation in regard to the proposed alterations in the Municipal Act, at present in Committee of the Legislature of Ontario, by which physicians are assessed. The committee was instructed to draft and secure signatures to a petition in protest against the proposal.

DR. A. S. McELROY exhibited a large Enterolith from a fatal case of general peritonitis, and Dr. M. O. KLOTZ showed a renal calculus from a case in which the symptoms were precipitated by a kick in the groin.

In discussion of Dr. McElroy's case, Dr. Webster gave the reports of two cases of General Peritonitis arising from the appendix. They were admitted to the Protestant General Hospital during the same week. The one ended fatally soon after admission, the other was operated upon; the latter patient was discharged 38 days after admission, with all sinuses closed. Drainage by tubes was used in both loins and on either side of the abdomen with thorough flushing with saline.

A discussion on Tuberculous peritonitis was opened by Dr. W. I. Bradley. He took up the etiology and pathology of the conditions and said, Tuberculosis was essentially a local disease, and often spread but slowly by direct extension; but if the bacilli gained access to the lymphatics or blood vessels, it might be rapidly and widely disseminated—even generalized. In the first case there was a decided tendency