

pallor, a weak and irregular pulse, and he gradually sank and died on the operating table just after the operation was completed. Very little blood was lost."

The above is of value in the present stage of the discussion on the comparative safety of anæsthetics. Had chloroform been used, it might have been accused of the result, and the superior safety of ether been appealed to. In this case it is probable that the result would have been the same with *any* anæsthetic.

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EXPLANATION.—It is but right to say that Dr. Austin of Sherbrooke has satisfactorily explained the circumstances connected with a case of fever to which we alluded in some remarks at the time of the second outbreak. Our information had been that the boy was delirious before the parents reached the school. This, the doctor tells us, is incorrect—that delirium did not occur till some time after, and, moreover, that intimation was conveyed to the friends as soon as reasonable certainty was felt as to the nature of the disease. We know how difficult it is always to receive thoroughly reliable information in matters of this kind, and it is therefore only justice to the physician of the school to make this explanation.

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—Dr. Imrie, House Surgeon, Montreal General Hospital, who has been suffering from a very dangerous attack of periostitis, affecting the bones of the left fore-arm, caused by a poisoned wound, is, we are happy to state, convalescing. It is confidently hoped that the usefulness of the hand will be only slightly, if at all impaired.

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### Obituary.

It is with feelings of sincere regret that we have to announce the death, from consumption, of Dr. R. F. Godfrey, which took place on the 24th February. He had been in weak health for some time, and had spent a considerable time in the highlands of Colorado, but without any great benefit. Dr. Godfrey was a graduate of Bishop's College, and also a member of the Royal College of Surgeons, England.