

ing advertising by members of the Association; seconded by Dr. Oldright.

Dr. G. R. McDonagh, Chairman of the Committee, said that the Committee had information before them to the effect that over 130 members of the Association were violating this section of the Code of Ethics, and that he thought it was a perfectly natural thing for the Committee to seek instruction how to proceed from the Association. It was neither from cowardice nor from any want of backbone, as had been insinuated by some of the previous speakers, that his Committee had reported in the above terms. The question being put, the amendment was carried by 25 to 18.

The President then read a letter from Dr. J. Workman, Toronto, first president of the Association, congratulating the Association upon its twelfth annual meeting, and regretting his inability to be present. This letter was very heartily received by the Association, and Dr. Oldright, of Toronto, seconded by Dr. Bowlby, of Berlin, moved that the Secretary be requested to convey to Dr. Workman the congratulations of this Association on his recently having celebrated the eighty-seventh anniversary of his birthday.—Carried.

A discussion in Hay Fever was opened by Dr. Welford, of Woodstock. Dr. R. Shawe Tyrell, of Toronto, then spoke on "A Predisposing Cause." Dr. G. R. McDonagh, of Toronto, followed, and the discussion was closed by Dr. Welford.

The report of the Committee on Nominations was read by Dr. G. A. Peters, of Toronto. It was as follows:—"The Committee on Nominations beg to report as follows: President, Dr. Hillary, Aurora; 1st Vice-President, Dr. L. Brock, Guelph; 2nd Vice-President, Dr. Preston, Newboro'; 3rd Vice-President, Dr. McKay, M.P.P., Ingersoll; 4th Vice-President, Dr. A. R. Harvey, Orillia. General Secretary, Dr. D. J. Gibb Wishart, Toronto; Assistant Secretary, Dr. I. Olmstead, Hamilton; Treasurer, Dr. Barrick, Toronto.

It was unanimously agreed that this Committee recommend that in future the General Secretary do not hold office for more than five years.

Added to the Committee on Credentials—Dr. A. J. Johnson, Toronto; Dr. Henry, Orangeville. To the Committee on Public Health—Dr. B. Spencer, Toronto; D. H. J. Hamilton, Woodhill; Dr. A. T. Rice, Woodstock. To the Committee on Legislation—Dr. Britton, Toronto; Dr. McMahon, M.P.P., Dundas. To the Committee on Publication—Dr. Charles Sheard, Toronto; Dr. A. H. Wright, Toronto. To the Committee on By-Laws—Dr. J. Bascom, Uxbridge; Dr. Hodge, London; Dr. Price-Brown, Toronto. To the Committee on Ethics—Dr. Williams, Ingersoll; Dr. R. A. Reeve, Toronto. Next place of meeting, Toronto. All of which is respectfully submitted.

Dr. Peters, seconded by Dr. Powell, Toronto, moved the reception of this report.—Carried.

The Association then divided into sections.

#### MEDICAL SECTION.

Dr. J. E. Graham, of Toronto, was called to the chair at 4 30 p.m.

Dr. W. J. Wilson, Richmond Hill, read a paper on "Diphtheria," in the discussion of which Dr. Harrison, of Selkirk, said: "We owe a debt of gratitude to Dr. Wilson for bringing forward the facts he has given us. It shows that the poison of diphtheria may be carried by a person who has been exposed to the disease without having had it himself. With regard to disinfection—I think it is not yet settled what will surely kill the germ of diphtheria. Prudden says he subjected linen or cotton cloth in a bell-glass for twenty-four hours and found some of the bacteria still living, and could culture in suitable media colonies of them from the tissue. With regard to the cause of diphtheria, an interesting question is: Whether a case of diphtheria must be caused by a bacterium developed in a previous case? Sporadic cases, where there has been no known communication with a previous case, goes against this view; and though in the older sections of the country there might have been—as is said—cases of the disease, perhaps years before, in the same house, the germs of which have lain latent, in the newer parts of the country where the history of every house is known, as in my own neighbourhood, this cannot have been the case. Yet I have known many cases where the house was new, the place recently cleared, the occupants entirely isolated, and yet there have been marked attacks of diphtheria. If the idea of Prudden that a single bacterium may cause in one case abscess, in another erysipelas, and in a third diphtheria is correct, it might throw a light on this question."

Dr. C. A. Hodgetts, Toronto, spoke of a case occurring in the Nipissing District—where, some two years after diphtheria had been in the family of a settler, an old rug had been used to staunch the flowing of blood in a cut foot. A diphtheria membrane developed and one or two deaths occurred in the family from laryngeal diphtheria.

Dr. Wilson replied briefly.

It was decided that Dr. C. K. Clarke's paper on "Lethargy," which should have been read at the morning session be now taken as read.

Dr. N. A. Powell, of Toronto, exhibited a case of Landry's paralysis, and read a paper thereon. The discussion was opened by Dr. Moyers, of Toronto, who said: "This case is very interesting from its comparison to multiple neuritis in which a purely motor form is quite possible, as is seen in those cases formerly described as anterior poliomyelitis of the adult, but which are now generally acknowledged to be an affection of the peripheral nerves, and it is only by the exhibition of cases such as this, and the study of its pathology that