

hours, as compared with every half to two hours before the operation. The testicles atrophied considerably and became soft and flabby. Left the hospital in twelve days. He reported continued improvement for four weeks, when pain manifested itself again, and frequency of urination became more marked. In November, patient said he was able to have complete intercourse with ejaculation. Returned for treatment just three months after his first visit. Urine healthy; flowed at ten inches. The prostate was much smaller and appeared tender in the centre. Patient had to rise four or five times during the night. Delay in starting the stream was marked. Endoscopic examination showed the bladder to be in a healthy condition. The testicles were unequal in size, the left having developed to the size it was before operation. On incising, the vasi were found to be intact. A second operation was performed and improvement took place immediately and continued up to the present time, patient passing urine every seven or eight hours without any distress.

Case in Practice.—Dr. MEYERS presented a case in practice. The patient was a man aged sixty, whose health had been good up till eight years ago, when he was exposed to a draught through a window. This was followed by stiffness in the back. He also experienced some pain in the hip, especially when he would evert the foot. There followed marked diminution in the right thigh muscles, and accompanying weakness in the legs. He found a good deal of difficulty in climbing up stairs. The reflexes of the leg were still preserved, but not very active; had a good deal of difficulty in crossing the right over the left leg. In other respects the patient's health was good.

The Fellows then examined the patient.

Dr. MACFARLANE thought the symptoms resembled those of *morbus coxæ*, which he detailed in full.

Dr. GRAHAM thought the trouble was probably in the hip-joint.

Dr. MEYERS said that he had considered the question of hip disease but had thought it was more probable that the trouble was in the cord, in the anterior horn of the grey matter. He recalled a case like it he had seen before, which had been diagnosed as progressive muscular atrophy.

Notes in Three Cases of Pneumonia, by Dr. Graham.

Case 1. A young man aged twenty-eight; always strong and healthy. Had a lobar attack on the right side. Crisis took place on the ninth day. No special treatment. Digitalis given the first day after the crisis, at which time there was a drop in the number of white corpuscles from thirty to sixteen thousand in twenty-four hours. He pointed out that the prognosis in pneumonia could be fairly arrived at by counting the