

reference to the proposed appointments by the Board of Health of a Committee of Physicians to visit at times and report upon the Civic Smallpox Hospital.

It was unanimously resolved:—

First.—That the Society has learned with much satisfaction of the completion of ample hospitals for the reception and satisfactory treatment of several hundreds of smallpox patients; that, judging from the reports of many medical gentlemen who have inspected the buildings, this Society is satisfied that the hospitals are eminently suited for the purpose intended, and will materially aid in giving the health authorities control over the present epidemic.

Secondly.—Whereas the members of the Society have learned of many incidents forcing upon them the conviction that the management of the Civic Hospital has been very far removed from what it should be to merit the confidence of the public, and they are aware that this feeling has prevented many physicians from advocating isolation of their patients by removal to the hospital, as well as caused many patients to refuse to leave their homes,—be it now resolved that, as it is of the utmost importance to secure public confidence in the entire management of the Mount Royal Hospitals, the Medico-Chirurgical Society respectfully urge upon the Board of Health the necessity for the appointment of a committee of well-known physicians whose duty it shall be to visit the hospitals at stated periods, examine into the management of all the departments, and report to the Board. Resolved, further, that it be a recommendation to the Board of Health that this committee consist of five members, to be composed of one from each of the medical schools and one, from the profession generally.

Thirdly.—Resolved, that the members of this Society, having learned that it is the intention of the Board of Health to appoint two resident physicians, one for each section of the Mount Royal hospitals, they hereby express their approval of such action, believing that it will be conducive to the best interests of the patients.

The Secretary was instructed to forward these resolutions to the Board of Health.

The meeting then adjourned.

Stated Meeting, November 6, 1885.

THE PRESIDENT, THOMAS G. RODDICK, M.D.,
IN THE CHAIR.

TUMORS OF THE OVARY.

Dr. WM. GARDNER presented two ovarian tumors which he had removed from the same individual; the right one had been removed by enucleation of the cyst, and the left by ligature of a very broad pedicle. Troublesome hemorrhage occurred, which was with difficulty arrested by ligature and the thermo-cautery. The patient did well.

Dr. TRENHOLME also presented a large ovarian tumor which he had that day removed, and which,

on the right side, contained a large solid mass, which he looked upon as malignant.

FATAL PULMONARY EMBOLISM ARISING FROM SIMPLE FEMORAL THROMBOSIS.

Dr. GEORGE ROSS exhibited the heart and lungs of a patient, under his care, who had died suddenly in the General Hospital. The pulmonary artery, on being laid open, showed its left branch plugged by a thick fibrinous clot, beginning an inch above the valves, the lower end lying loose in the main artery, and for some distance curled back upon itself. Still nearer the heart, and almost touching the valves, lay a second loose clot, about three-quarters of an inch long, having the same appearance as the first. The clotting extended far into the lung, and even some of the small bronchial branches were plugged. The right pulmonary artery and its divisions were quite similarly occupied by an extensive fibrinous deposit. The femoral vein was also shown, containing a clot several inches in length, and extending a long way down the internal saphenous vein.

The patient was a young woman who had presented the usual symptoms of a simple anæmia for some months, when she developed pain and swelling of the right leg. She was then admitted to the Montreal General Hospital, under Dr. Ross, when the existence of a femoral thrombosis was readily detected by the presence of a firm cord in the situation of the vessels. Her general condition was good, with the exception of a moderate degree of anæmia. One week after admission, after having passed a good night, she complained early in the morning of suddenly feeling faint; this soon passed off, and nothing more was thought of it. At 12.45 P.M. she became suddenly breathless and much distressed. Stimulants were administered, but in fifteen minutes she was dead. The occurrence of pulmonary embolism was immediately suspected, and at the postmortem the condition already described was found.

Dr. Ross remarked that, although very frequently meeting with femoral thrombosis, it was the first time he had ever observed this fatal accident following from it. It had been his misfortune a short time since to meet with a sudden death ten days after a natural confinement, and a perfectly natural puerperium. An autopsy in this case likewise showed the fatal result to have occurred from pulmonary embolism, as had been suggested. The present case was of interest from the syncopal attack in the early morning, which no doubt was