

where the pike pole had struck. The skull was trephined at this spot and the patient had no more epileptic fits for eighteen years. These fits, however, have since returned.

DR. PROUDFOOT of Montreal then read a paper on *Excessive Hemorrhage after Cataract Operations*. Patient was a large, robust man, who was rather intemperate. The cataract was removed without iridectomy. Great hemorrhage followed, which was stopped by pressure; it recurred, and finally the eye had to be removed. The eye was examined and the hemorrhage was found to proceed from the central artery of the retina; a dilatation was found at its exit. Hope of Chicago and Foyer of Kansas City have reported similar cases.

DR. FENWICK of Montreal next read a paper on the *Removal of Retro-pharyngeal Tumors*. Dr. Fenwick gave a short account of the various operations performed for the removal of malignant and sarcomatous tumors in the region of the pharynx. Dr. Cheever of Boston was the first to advocate removal by external incision. Velpeau previously had removed them through the mouth, having first cast a ligature round the carotid artery. Butlin advocates the removal of sarcomatous tumors of the pharynx through the mouth, and says they usually shell out easily. In malignant disease, Czerny makes an incision from the angle of the mouth and thence to angle of jaw and down the neck to the hyoid bone, dividing the jaw in front of the masseter muscle. Langenbeck was the first to practise section of the lower jaw in these cases. Obolinski divides the jaw behind the masseter. Dr. Fenwick had on two occasions removed tumors from the retropharyngeal region, and by an incision commencing above and behind the ramus of the jaw and continuing round the angle of the jaw and for a greater or less distance along the body. The parts were carefully dissected, the vessels pulled outwards, and the tumor reached with the finger; if sarcomatous it could be easily shelled out. In one case, to give himself more room, he cut off the rather prominent angle of the jaw. His first case was operated upon in 1880. The patient was a young girl aged 18, who had a number of painful tumors in various parts of the body. One of these tumors was situated in the