

the President in the chair. There were present Drs. R. P. Howard, Hy. Howard, R. MacDonnell, Kennedy, Cameron, Gurd, Ross, Fenwick, Frenholme, Guerin, Browne, Simpson, Smith, R. W. Campbell, Osler and Edwards.

Dr. OSLER exhibited, 1st. Aneurismal dilatation of the arch of the aorta. The patient had been under Dr. Ross' care, and concerning this case Dr. Ross gave a short account of the clinical facts:

The patient was a strongly built man of 38 years, who had had both syphilis and rheumatism. The symptoms from which he had suffered were, severe neuralgia of the right side of the neck, the pain shooting up behind the ear and down to the shoulder, a gradually increasing hoarseness of voice, troublesome cough, and occasionally an attack of marked dyspnoea. He was treated in the General Hospital. An ovoid, very strongly pulsating, tumor was found rising above the right sterno-clavicular joint. He was seen by several members of the staff, and the unanimous opinion held was that it was situated in the innominate artery. Dr. Ross had shared the same opinion, but thought that, probably, the arch was also somewhat involved. One reason for thinking so was the strong pulsation communicated through the trachea on making upward traction thereon. It was interesting to find that such conditions might occasionally be observed in an aneurism springing wholly from the aorta itself.

The PRESIDENT remarked that the specimen exhibited by Dr. Osler for Dr. Finney, with the clinical facts noticed by Dr. Ross while the patient was under his observation suggest several interesting observations: 1st. This aneurism of the arch presented the physical signs of an innominate, rather than of an aortic, aneurism, and it would not have been possible to have avoided mistake owing to a pouch of the aneurismal sac projecting exactly up in the course and alongside of the innominate artery, and to an absence of distinctive signs of dilatation of the arch itself. 2d. A surgeon could not have been blamed had he ligated the arteria innomina or the carotid under the impression that the aneurism was innominate. 3rd. This is an additional instance to the many others which have occurred here within the past few years of the occurrence of thoracic aneurism in persons the subjects of syphilis. It can hardly be alleged

that the rheumatic fever which the patient had suffered was the cause of the disease, as in that case it would have to be contended that the rheumatism had skipped over the part it usually attacks, the valves, and had invaded the aortic walls, which it rarely, if ever, does. On the other hand has a special tendency to induce disease of the arterial walls. 4th. The absence of hypertrophy of the left ventricle in this muscular man suggests the idea that the aneurism probably ran a rapid course, and that sufficient time was not afforded for the development of marked hypertrophy. Lastly the co-existence of evidence of compression of the trachea by the tumor, with attacks of dyspnoea, and the support thus afforded Dr. Bristowe's views on that point.

The second specimen was one of congenital deficiency of the rectum, upon which Dr. Fenwick had operated. An incision was first made where the anus should have been, but the open bowel could not be reached in that way. An incision was then made in the groin, and the bowel opened and the edges stitched. The case, however, proved fatal on the following day.

Dr. RICHARD MACDONNELL exhibited to the Society an occipito-atloid ankylosis.

Dr. FENWICK then read a paper on the removal of a tumor in the vicinity of the thyroid gland, a portion of the right lobe being partly involved.

A vote of thanks to Dr. Fenwick was moved by Dr. F. W. Campbell, seconded by Dr. Hy. Howard.

Dr. CAMERON stated to the Society his wish to bring before the consideration of the members the subject of the communicability of typhoid fever by a portion of the milk supply of Montreal, expressing also the fact that Mr. McEachran would, if agreeable, give a paper on the Transmissibility of Tuberculosis from animals to man. It was decided that these subjects should be presented at the next meeting.

The meeting then adjourned.

O. C. EDWARDS, M.D.,
Secretary.

MARRIED.

On April 1st, by the Rev. Gavin Lang, Alexander H. Kollmyer, A.M., M.D., Professor of Materia Medica and Therapeutics in Bishop's University, to Margaret A. Gaynor, fifth daughter of William Gaynor of Beech Ridge.

DIED.

At Pittsburgh, Pa., U. S., on the 14th of March, Ernest Robert, infant son of Charles Black, M.D., aged six months.