

brain symptoms, for the explanation of which the occurrence of capillary emboli had been suggested.

Dr. Cline read a paper on Phlegmasta "Alba Dolens." He reported briefly several cases, one occurring in typhoid fever, two in advanced states of cacchenia, tuberculous and cancerous, one in a state of considerable prostration after obstruction of the bowels, one in a case of large ovarian tumor, one in pyæmia, and one puerperal case, which latter occurred thirty-seven days after the birth of the child. He drew attention to the existence of a blood dyscrasia, as predisposing to the formation of a thrombus, and to retardation of the venous current from the low vitality and feeble hearts in some of the cases, as determining the thrombosis, and, in the case of the ovarian tumor, to the fact of blood stasis, without any cacchenia causing it. He alluded to the presence of an inflammation of the wall of the veins in all the cases, consequent on the thrombosis, and to the absence of any difference in essential characters between the puerperal case and the other cases, and, while referring to the generally held theory as to the pathology of the affection, that obstruction of the lymphatics was an essential element in a case of phlegmasia dolens, and necessary to explain the white elastic swelling of some cases, stated his impression that an extensive phlebitis alone would account for it.

Dr. Ross spoke of a case which had been recently reported in the *Lancet*, which perhaps threw some light on this subject. It was one of thrombosis of the veins of the penis, accompanied by a tense white elastic swelling, having the cellular tissue distended with a white semi-transparent œdema different from the ordinary red inflammatory œdema. The reporter of the case was convinced that there was obstruction of the lymphatics. It was the same thing probably which caused the peculiar character of the swelling in milk leg. There was certainly something in those cases having the white elastic swelling very different from mere thrombosis.

Dr. Trenholme remarked that there was yet much to be learnt of the pathology of this affection.

There were difficulties to the acceptance of the conclusions come to by Dr. Cline in his paper. One was, that the affection sometimes began in the popliteal (referring to Dr. Cline's

statement that milk leg was due to thrombosis of the femoral, extending from the uterine veins through the hypogastric). The left leg was more frequently affected than the right, accounted for by some by the fact that the position of the head of the fetus was more frequent with the occiput to the left. He agreed with Dr. Ross as to the probability that the lymphatics were involved.

Dr. Shepherd suggested that the fact of the rectum lying to the left of the pelvis might explain the greater frequency of phlegmasia in the left leg. He had seen a case in pneumonia.

Dr. Fuller suggested that if the affection began in the pelvis and extended downwards it would involve the lymphatics, which were so numerous here, and therefore the affection of the lymphatics occurred more frequently in puerperal cases of thrombosis. Doubted if it, the affection did really ever begin below, extending upwards. The obstruction in the pelvis would predispose to obstruction in the veins below.

Dr. Osler remarked that the generally received theory of the pathology of phlegmasia alba dolens was that the lymphatics had something to do with it. In fevers too, the weakened action of the heart and of the muscular movements was attributed to the formation of thrombi in the veins.

Dr. Fenwick thought that, without doubt, simple venous thrombosis and phlegmasia alba dolens were distinct affections. The character of the elastic swelling, with absence of pitting on pressure, was peculiar.

A vote of thanks to Dr. Cline was moved by Dr. Trenholme, and seconded by Dr. Ross.

Dr. Cline narrated two cases of swelled testicle, in which he used the treatment of puncture advocated by Henry Smith, of London. It gave immediate relief to pain in both cases, and they required no other treatment.

Dr. Reddy presented the Report on the Seal and Diploma of the Society.

It was moved by Dr. Kennedy, and seconded by Dr. Ross:—"That the arrangements as to the matter be left in the hands of the Committee." Carried.

The Meeting adjourned.

J. D. CLINE, B.A., M.D., *Secretary*.

DIED.

In Belleville, on the 3rd July, after two days illness, Edward G. Henderson, M.D., (McGill, 1874), M.R.C.S., Eng.-aged 24 years.