

The lower portion of the bladder was completely shut off from this upper distended portion, by compression of the bladder walls between the uterus and bony pelvis. The part compressed included the trigone, except a small part near the left ureter, which opened into the distended portion; the right ureter opening into the compressed portion. The urethra was not compressed or distorted, thus the catheter when first passed went into the empty portion and then coiled on itself. When passed the second time the previous pelvic examination, by displacing the uterus, had opened a passage between the two portions, and the instrument passed into the bladder, but probably became choked by blood-clot after some urine had come off.

An unusual point was the condition of the cervix; it was not high up, but could not be felt on vaginal examination because of its condition, being so thinned out as to be unrecognisable, thus differing markedly from the condition usually depicted in retroversion, when it is shown as solid and projecting, and by its own pressure on the urethra or bladder, giving rise to retention. There was hydronephrosis of both kidneys, but more especially of the right, whose ureter opened into the compressed portion of the bladder, the patient undoubtedly dying of uræmia.

The most instructive point about this is that it teaches us that in retention of urine from retroversion of gravid uterus the obstruction is not always in the urethra, and that the repeated passage of a catheter without any result does not negative the possibility of an abdominal tumor in these cases being a distended bladder.  
—*Birm. Med. Rev.*

**PYRETICS.**—As a contrast to the numerous antipyretics recently introduced, another new substance deserves mention, viz.: tetrahydro-beta-naphthylamine, which has been found by Filehne to possess the property of raising the temperature of the body by several degrees. It is presumed that this compound, or others of the same nature that may be discovered hereafter, will be found of practical use in therapeutics.—*American Druggist.*

## THE Canadian Practitioner

A SEMI-MONTHLY REVIEW OF THE PROGRESS  
OF THE MEDICAL SCIENCES.

*Contributions of various descriptions are invited. We shall be glad to receive from our friends everywhere current medical news of general interest.*

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### THE CANADIAN MEDICAL ASSOCIATION.

The Canadian Medical Association was organized about twenty years ago, and the first meeting was, we believe, held in Quebec. Its history is, therefore, pretty well known to many of our active practitioners. It is exceedingly important, from a national standpoint, that it should prosper. Its prosperity can scarcely be considered to have been of a very progressive character. Some of its meetings have been remarkably successful in every respect, others have met with only a limited amount of success, in numbers at least. The reasons are, of course, well known; we have a large country which can scarcely be called full at the present time. It is a long distance from Halifax to Victoria, and meetings at either end of this immense tract are apt to be rather thinly attended; one of the meetings held at Halifax was an example. The meeting last year at Banff, on the other hand, was comparatively large, very instructive, and exceedingly enjoyable; and was probably the most thoroughly representative congress of Canadian Physicians that this country has even seen. It was really a great pleasure as well as a high privilege to meet at that time such a body of practitioners gathered from all parts of our great Dominion.

The largest assemblages have generally been found in Montreal and Toronto, with Hamilton, Ottawa, and London not far behind. We hope our esteemed president of the past year, Dr. Harry Wright, of Ottawa, will gather the clans of his mountains and valleys and appear at the