

taking to discuss this paper which required a specialist for its elucidation. He of course occasionally met with cases of aphasia associated with right sided paralysis of varying degrees of severity. He recalled one case of a clergyman, an energetic intellectual man with an abundant flow of words, who was suddenly affected with aphasia, and a slight right paralysis. His vocabulary was now limited to "yes" and "no." His efforts to read portions of the Psalms which he knew by heart were painful to witness. In the course of time he was able to resume his duties, though a slight defect in speech persisted for a long time.

Dr. Geikie, Toronto, only spoke to escape censure from Dr. Workman. He related a case of amnesic aphasia. He agreed with the doctor that the works of the older authors were not sufficiently read by the profession of to-day.

Dr. Mullin, Hamilton, related a case of a man in business, in apparently good health, who made in his books entries of a peculiar and incomprehensible character. Upon careful examination, and on being made to write certain test sentences, it was found that he was aphasic. Some words were wrong, and others partly finished. He slowly but eventually recovered.

Dr. Bray, Chatham, related a case of aphasia occurring in a puerperal woman who also had albuminuria. She recovered completely.

Dr. Clark, Toronto, dissented from the doctrine of cerebral localization. He considered that as yet it was unproven. He looked upon the cerebrum as a whole as the receptacle of psychic impressions.

#### AFTERNOON SESSION.

At 3 p.m., the President delivered his annual address, after thanking the association for the honour conferred upon him he proceeded to touch upon matters of interest to the profession. He pointed out the educational facilities enjoyed by the student of medicine of to-day, and contrasted it with the difficulties of former times. For this improvement he thought the different schools and the central licensing body deserved great credit, for they had gradually raised the standard of education. He then referred to the various unseemly advertisements which appeared in the secular and religious press which were a source of mischief to the weaker members of the com-

munity. In conclusion he referred to the benefits accruing from an accurate prognosis and urged the need of a closer study of the natural history of disease, and advised the cultivation of a cheerful countenance, for the patient and his friends studied closely the physician's expression and drew from it auguries of good or ill.

Dr. Tye, Chatham, then read a paper upon the Management of the Third Stage of Labour in which he took exception to the general application of Credé's method of expressing the placenta. He advocated gentle pressure and manipulation over the fundus of the uterus.

Dr. Macdonald, Hamilton, left placenta alone for some time, even for an hour, till it was completely detached.

Dr. Bray, Chatham, said that the first and only time he had practised Credé's method the result was unfortunate, and troublesome, there being relaxation and profuse hæmorrhage, and a protracted recovery.

Dr. Mullin, Hamilton, said that when the placenta was lying in or near the os it was safe to leave it to the natural action of the uterus for expulsion; but when it was situated on a higher level and was retained in the uterus there was danger of hæmorrhage, and physical interference was perhaps demanded. In any case the woman was not to be left until firm and continued contractions were induced. He invariably remained with his cases until this occurred, and then left them with the full assurance that they were safe.

Dr. Harrison, Selkirk, gave his cases a good dose of opium and brandy and left them easy and secure.

Dr. Bryce, Toronto, desired to know the rationale of the action of brandy and ergot, he thought their physiological actions antagonistic.

Dr. Richardson, Toronto, had been brought up in that school in which all meddlesome midwifery was considered bad. He never worried and irritated the uterus by premature and useless attempts to extract the placenta: he waited and when he found it lying in the vagina or partly in the vagina and partly in the os, by gentle traction on the cord, or by inserting one finger under the edge of the placenta, the air rushed in and the mass was expelled without trouble. In the course of a long midwifery practice he had never had the