

No bone seems to be exempt, but the hands and feet are seldom affected. The tibia suffers perhaps, more frequently than any other bone.

A marked characteristic of these post-typhoid bone lesions is their chronicity. Pain is often complained of during convalescence but it may be several months before suppuration is evident.

This condition requires radical treatment. Simple incision and drainage is followed by prolonged suppuration. Free incision, thorough scraping and irrigation with antiseptic solutions give good and satisfactory results.

Dr. F. J. SHEPHERD recalled a similar case which had been under the care of the late Dr. George Ross and himself fifteen years ago. It was then called a periostitis and treated by incision but the bone had not come away until last year.

Removal of a Fibroma of the Mesentery with resection of nearly Eight Feet of Small Intestine.

Dr. F. J. SHEPHERD exhibited the patient from whom the tumour shown at the last meeting had been removed. With regard to the question of interference with nutrition raised at the time, he stated that the man had gained a pound a day.

Specimens Illustrating Necrosis of Serous Membranes.

Dr. WYATT JOHNSTON exhibited the specimens. (Will be published later).

Ruptured Tubal Pregnancy.

Dr. A. LAPHORN SMITH exhibited the specimens and gave the following account of the case:

The patient had been married six years and had had no children. An attack of pelvic peritonitis occurred shortly after marriage resulting in more or less pain ever since, for which he had been consulted. Examination showed the uterus to be retroverted and fixed, and both tubes, especially the right, to be enlarged. After a course of local treatment she missed a period and he, suspecting tubal pregnancy, thought it important she should know what was going to happen and her husband was told that if she should fall in a faint he would know that the tube had ruptured, and to send for the doctor at once. Another attack of pelvic peritonitis supervened and while preparing her mind for the operation, one night he was sent for in a hurry and found her collapsed. After removal to hospital, laparotomy was performed, and on opening the abdomen two quarts of black clotted blood were removed. There was free hæmorrhage which was quickly controlled by ligature of the ovarian arteries. The foetus was found free