

sion goes. The child did badly—very badly, and one is not surprised that it is so. It is surely legitimate surgery to open an abscess when the patient is suffering acutely, and having let out the pus it is surely imperative for us to remove the cause of the suppurative if possible; if the cause lie in a diseased bone of an articulation, by all means remove it.

Dr. Dupuis said: "I have been practising all methods of cure for thirty years, the last eighteen years in the Kingston Hospital, and I see and hear nothing new to-day. I prefer a Thomas' splint for fixation of parts; traction on the limb by adhesive straps above the knee; elevation of the foot of the bed rather than perineal bands; constitutional treatment and operation for the removal of dead bone when this is present. This includes the whole treatment, both past and present."

Dr. B. E. McKenzie, of Toronto, replied as follows: "I would call attention to the figures given by Dr. Bingham, showing that about thirty-five per cent. operated on, and recently reported by Dr. Poole, have proved fatal, whereas Howard Marsh claims that by the expectant plan of treatment there is a mortality of less than ten per cent. One of the cases shown here to-day, is a girl who was referred to me by Dr. A. H. Wright, the case having gone on to supuration, and having discharged pus for some months. Treatment was carried out by means of the American traction splint, for a little more than one year. Nearly two years have now passed since the removal of the splint, and now there is no lameness or shortening, and the limb is but very little smaller than the other. Such a result cannot be obtained after operation. The most successful case is yet a maimed case after operation, and in nearly all of them there is much shortening and lameness. Dr. Primrose admitted that half the cases required the use of a stick to aid them in walking after operation and recovery. The statement made that Dr. Bingham's case was allowed to be up too soon, was based upon his remark, that the boy was 'trotting around the ward' in three weeks after excision. Since Dr. Bingham explains that he was protected by the use of a Thomas' hip splint, the objection to his being up in that short time is withdrawn."

"It is admitted by some of Parker's followers that up to the present time operative treatment has not given as good results as conservative treatment. I hold that when a joint is known to contain pus this should be removed and the wound treated antiseptically; extreme devotion to non-operative methods is as far from correct measures of treatment as are the methods of those who operate early in every case. Had this plan been adopted in the case above referred to, the girl could not have made the perfect recovery which she has done. When due attention is given to the number of re-

lapses that occur after operation, it will be seen that the gain in point of time saved is not so great as would appear. I would cite two cases operated on within the last fifteen months. One had the wound heal up without the appearance of any pus and was discharged from the hospital in good condition, but returned a short time ago having an abscess. The other, though having no sinus at the time of admission, was doing badly since the operation."

During the section a similar announcement was made regarding the Committee on Nominations as was made in the Medical Section. The section adjourned at twelve o'clock noon.

At 12.30 the Association assembled at Webb's Restaurant, 66 Yonge St., where they partook of a luncheon tendered them by the members of the profession residents of the City of Toronto.

At three o'clock p.m., the Association resumed in general session. The report of the Committee on Ethics was read by Dr. G. R. McDonagh, Toronto, as follows:—"Your Committee on Ethics beg leave to report as follows: Your Committee have been notified by the General Secretary that a large number of the members of this Association have been violating Article 3 of Section 1 of Article 2 of the Code of Ethics of this Association, by advertising their specialties in the public newspapers and journals. Your Committee do not feel like deciding this question, and respectfully refer the matter to the Association for their consideration and decision. We would respectfully ask the Association to define more clearly what they consider unprofessional advertising."

This was seconded by Dr. Moorhouse, London, who said that the Association must allow its members some liberty in the matter of advertising, or else the line must be drawn tightly for everyone. So far as he could see, there was nothing objectionable in a card in any paper containing only the address, name, and office hours. In case of a physician practising a specialty purely and simply, he should also be allowed a plain card mentioning his specialty, but it was not for a general practitioner to insert a card drawing attention to some specialty over and above his general work. The practitioners should also be allowed to advertise in medical journals, as these could not be termed public journals. Dr. Johnson, Toronto, wished to prevent a discussion and save the time of the Association. Dr. Mullin, of Hamilton, rose to a point of order and drew the attention of the chair to the fact that there was no motion before the Association. Dr. A. J. Johnson, of Toronto, moved that the rules of the Association with regard to the advertising of specialties be adhered to; seconded by Dr. Burnham, Toronto. Dr. Mullin, of Hamilton, moved an amendment, that the report be referred back to the Committee to make a recommendation respect-