

Thursday of last week, a boy eight years old, suffering from caries of the lower dorsal vertebrae with psoas abscess, was prepared for operation. He had been in the hospital one month prior to this, during which time he appeared in good health; there was no fever, and with the exception of this spinal condition his organs were all sound. (Dr. Bell then read the report of the anæsthetist.)

Commenting on the report, the speaker remarked that it was impossible to say whether the pulse or respiration were the first to cease, as almost at the same moment that Dr. Shaw discovered the stoppage of the pulse, Dr. Davidson observed the respirations to cease with a long drawn sigh. Inversion, artificial respiration, cold to the face, with hot cloths over the cardiac region were all resorted to, and it seemed minutes to the observers before any return of respiration or cardiac movements manifested themselves. He thought that this case demonstrated the fact that the heart does stop suddenly in chloroform poisoning,—in some cases, at least,—and that death is not always due to respiratory failure brought on by the administration of an excess of the drug. Had respiratory failure been the initial event here, the heart, as in all cases of death from suspended respiration, such as drowning, hanging, choking, etc., would have gone on beating for some minutes, instead of stopping instantaneously as here. The converse, however, is not true; that is, respiration does not continue after an arrest of the heart's action; and considering these facts, it seems clear that in this case the effect of the chloroform was exercised on the heart primarily and solely, the stoppage of respiration being secondary to it. Moreover, the quantity of chloroform administered was too insignificant to be capable of affecting the respiratory centres, as in less than half a minute before the accident the boy cried out "take it off my face," and only a few drops were given afterwards. An interesting feature in the case is that it contradicts the contention of the Hydrabad commission, that the heart never stops first, but that death from chloroform is always the result of respiratory failure from not giving the drug properly.

Dr. SHEPHERD thought there must be two classes of cases in chloroform poisoning. He had a case last winter where he was operating for lupus of the face, in which chloroform was used, and in which the respirations stopped while the heart went on beating.

Dr. GORDON CAMPBELL believed that the preponderance of clinical evidence is in favor of the heart stopping first. He then wished to know if the boy was much alarmed. Dr. Bell replied in the negative, saying that he was exceptionally free from fear.

Dr. WESLEY MILLS said that most of the upholders of chloroform as an anæsthetic were

simply blinded by their prejudices, and were incapable of seeing or believing any facts, no matter how well substantiated, detrimental to the reputation of this drug. He instanced the fact that Surgeon Major Laurie had quoted the report of the chloroform commission as being entirely in favor of his pet belief, while, in fact, it contradicted it. And such is the attitude of a majority of the defenders of chloroform who belong to what is known as the "Syme school," and to any experience establishing untoward effects their reply is simply "You do not give it properly; if you had done so, the accident would not have happened."

Dr. GORDON CAMPBELL agreed with Dr. Mills in his strictures on the men of the "Syme school." He said they were accustomed to state that ether was only used by second-rate surgeons, and that it only affected incomplete anæsthesia.

*The late Dr. Fenwick.*—The following resolution was moved by Dr. SHEPHERD and seconded by Dr. MILLS:

Resolved—That this Society has learned with the most profound sorrow and regret of the death of Dr. George Edgeworth Fenwick, one of its foundation members and a past president. For many years a most active and valued member, beside taking a prominent part in the discussions, he contributed numerous important papers to the proceedings and exhibited numbers of very valuable pathological specimens.

He was widely and favorably known, both in Canada and abroad, as a most accomplished, original and daring surgeon, who helped to advance surgical science in various directions, but especially in the surgery of the joints.

In Canadian medical literature he always upheld the best interests of the profession by protesting against abuses and advocating reform.

His kindly, genial manner and goodness of heart endeared him to all his brethren, and especially made him the friend of the young practitioner.

Resolved—That our deepest sympathy be conveyed to his sorrowing family in this their time of mourning.

#### *Annual Meeting.*

The twenty-fourth annual meeting was held on Friday, October 5th, 1894, Dr. JAMES BELL, President, in the chair.

The members present were: Drs. Wm. Gardner, G. P. Girdwood, A. Proudfoot, James Perrigo, J. B. McConnell, J. Chalmers Cameron, F. Buller, T. Wesley Mills, D. F. Gurd, J. A. Macdonald, G. T. Ross, Thomas D. Reed, James Stewart, J. Alex. Hutchison, F. R. England, H. S. Birkett, A. W. Gardner, E. H. P. Blackader, H. A. Lafleur, J. H. B. Allan, D. De-Cow, J. H. Bell, J. A. Springle, G. Gordon