

Dr. Sullivan asked if the other members agreed with him in doubting the occurrence of vaccine-syphilis. He had seen very grave symptoms produced from vaccination, accidentally with the "grease" from horses, and from a diseased condition existing in an active form in the animal from which the virus is obtained, but he did not believe that constitutional specific disease could be so propagated when in an inactive state.

He considered recourse to bovine vaccination, after the transmission of the virus, a limited number of times and when vaccination with good lymph or crust had failed, very advisable. Dr. Comfort was of the opinion that specific disease could be propagated from the use of vaccine virus.

Dr. Oillo reported a successful case of acute rheumatism treated with Actea.

PERI-UTERINE ABSCESS.

Dr. Mack remarked that he had found the Abscesses, usually called "pelvic" or "iliac," the most frequent in occurrence, the most important to diagnose, and the most necessary to be well understood of any purulent collections within the abdomen—a region where all suppurations are of peculiar significance. He spoke now of Abscesses which form in connection with the uterus and its appendages, both in the puerperal and non-puerperal states.

In the latter the collection seeks an outlet more usually *per vaginam* aut *rectum*, and should have as early relief by surgical means, as possible. In the former it may point if externally, below Poupart's Ligament, or higher up in the iliac region, or in front above the pubis, or into the perineal region.

Internally, it fortunately seldom happens to burst into the peritoneum, but seeks an exit as above stated—through the vagina, rectum, bladder, or colon. Of all modes of discharge he believed *per vaginam* to be the most favorable, and when the exploring trocar shows that it can be reached from the outlet, aspiration, or some contrivance of that nature should at once be made use of to suck it out. If it forms again the cavity should be carefully washed out (after previously enlarging the opening by dilating with a proper forceps, or sponge tent if necessary) with a weak solution of carbolic acid.