

which was found to be just in front of the point where this vessel perforated the interosseous membrane. The vessel was reached by enlarging the wound, and separating the tibialis anticus muscle from the bone. The bones were then wired together and the leg dressed with dry iodoform dressings. The man did well, and good union resulted. The patient was exhibited to the Association.

Dr. Gardiner read a paper on *Burns and their Results*. He gave the results of his experience in treating a large number of burns. After describing the different varieties, he referred to the great importance of the nervous element. In treatment we should adopt both constitutional and local, and be careful to look after those in certain localities, as, for instance, in the larynx, where tracheotomy is often necessary.

Dr. Stewart then read a paper on *Actions and Uses of Naphthalin*, which we will publish in next issue.

Dr. Proudfoot had found the action of naphthalin more efficacious than iodoform in the treatment of ulcers. He also used it to restrain odour in gonorrhoea.

Dr. Shepherd had found in granulating wounds that iodoform acted, as it caused the granulations to become flabby. He frequently used balsam of Peru, or, more recently, naphthalin, in such cases; the balsam was, however, the best stimulant.

Dr. Roddick had used naphthalin in chronic ulcers with satisfaction. He combined it with boracic acid to facilitate dusting. When there is much discharge he used naphthalized jute as a dressing. Ordinary jute sprinkled with naphthalin answered very well.

Dr. Reeve then read a paper entitled *Remarks upon Fifty cases of Trephining of the Mastoid*. General remarks: acute suppurative inflammation of the tympanum of the greater import, because the mastoid antrum, and often the other air-cells, form, pathologically, an essential part of the middle ear (tympanum); the necessity for the operation would be much diminished were timely treatment of acute inflammation of the middle ear more generally followed: rest, local depletion, irrigation, anodynes, vapor bath, incision of bulging drum-head, or down to

bone on the process, and in meatus to relieve secondary periostitis, etc., etc., would very often arrest the disease; the persistence of pain in an otitis media, or its recurrence, after discharge has appeared is often significant of Mastoid implication: chronic suppurative otitis should never be neglected: the three principal pathological conditions for which the operation is indicated—unrelieved suppurative periostitis of antrum, etc., otitis with caries, and otitis with hyperostosis (condensing otitis, Buck), with their symptoms; the method of operating—some form of drill used not the trephine; protracted delay of it not advisable; statistics of the series incomplete, but eight deaths known—only one, however, fairly traceable to the operation (middle fossa penetrated), and several apparently due to general or concurrent disease; lateral sinus opened in one case, but patient recovered; the operation, a valuable and comparatively safe one.

TUESDAY MORNING—GENERAL MEETING.

Dr. Mullin read the report of the Committee on Ethics. After some remarks from Dr. Dupuis, and a reply from Dr. Mullin, it was resolved that the report be sent to the Publication Committee to be published.

Mr. Lawson Tait then delivered his Address on *Abdominal Surgery*, which we published in full, with discussion following, in our September number.

MEDICAL SECTION—AFTERNOON SESSION.

Dr. George Ross presented two specimens of Aneurism of the Aorta. In the one case the physical signs of tracheal plugging had been present: in the other they were not.

Dr. Worthington read a *Report of two Cases of Polyuria*, one of which was complicated with exophthalmic goitre. The greatest quantity of urine passed in twenty-four hours in this case was six and a half pints. Specific gravity 1.010, acid reaction. The enlargement of the thyroid gland was not what is usual in this disease, but the exophthalmos was well marked, as much difficulty was experienced in closing the eyelids. He was obliged to rise six or eight times in the night to urinate. No assignable cause could be found, though the history