

followed in a short time in all the cases. In reporting the literature of the subject, he points out that this cerebral condition has been frequently found to follow oophorectomy, hysterectomy and other gynecological laparotomies. These phenomena go to prove the effect of the mental on the physical condition.

Dr. W. N. Barnhart, of East Toronto, follows in a report of a case of "INTestinal Tuberculosis," dwelling on the pathology of the case more particularly. He demonstrated, microscopically, the presence of the bacilli tuberculi in great numbers in the infiltrated margin of the ulcer.

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Dr. J. E. Graham, Toronto, opens with a paper on "PURULENT PLEURISIES." He pointed out that these varied, as to origin, as to nature of contents, and as to duration. Then there was a classification depending on the bacteria present—Netter's classification—those due to the presence of streptococci; those caused by the pneumococcus; those due to the staphylococcus, and those due to the tubercle bacillus. The clinical history of these different forms was exemplified by cases reported.

"CLIMATES FAVOURABLE FOR CONSUMPTIVES," by Dr. P. H. Bryce, Secretary to the Provincial Board of Health, comes next in this number. The points emphasized in this paper were: dryness of climate, which depends on dry soil; moderate temperature, and rarefaction of the air. Aiken, S.C., and portions of the eastern slopes of the Rockies were recommended. Equability of climate was important, where daily fluctuations were not great, although the seasonal fluctuations might be. He classified climates: Sedative, inland, dry and moderately stimulating, and highly stimulating.

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Paper I. is by Dr. G. A. Peters, Toronto. Subject: "THE INDICATIONS FOR OPERATION IN SPINAL LESIONS." Three classes of spinal cases may be operated on: (1) Those in which the symptoms come on suddenly, and are the result of violence to the column, causing fracture, dislocation or hæmorrhage; (2) those in which symptoms develop slowly, due to compression or irritation, caused by, say, callous, or the caseous products of Potts' disease, or by gumma; (3) those where symptoms come on slowly, caused by neoplasms, benign or malignant.

"COCAINE IN SURGERY," by Dr. L. M. Sweetnam, is the second article in this issue. The writer refers to the history of the drug; the dangers connected with its use, and antidotes; the way to keep it pure; the strength of solution to use; the method of administering it, and the cases in which it may be used. He also refers to its special use in the treatment of the eye, ear, nose and throat.

Dr. Wm. Oldright's paper on "Two OBSCURE CASES IN ABDOMINAL SURGERY," follows. Case I. was an encysted peritonitis of large size in the median line. The patient's uterus was diagnosed infantile, and it was thought the tumour might have been formed by retained menses. Patient made a good recovery.

Case II. was a laparotomy to find what was causing an acute pyæmia. No pus could be found, but a number of gallstones were, and removed. A post mortem disclosed three hepatic abscesses out of reach of the surgeon. An ulcerated condition of the cystic duct was surmised to have been the primary focus. Floating kidney was also present, a condition that was thought to be (ante mortem) present.

"A CONFUSED CASE OF ETHICS," is a subject dealt with by Dr. E. H. Stafford.