Belleville—Dr. H. James reports many cases of cholera infantum and less diarrhæa; with considerable dysentery; cases of diphtheria, more scarlet fever, and a good deal of whooping-cough, lung affections and malarial fevers, with high mortality from lung disease. All except lung diseases of a mild type.

BROCKVILLE—Dr. V. H. Moore reports many cases of diarrhœa—increasing, also of cholera infantum and dysentery—increasing, too; some diphtheria and typhoid—decreasing; whooping-cough, epidemic in July, decreasing; no measles nor scarlet fever; increase in lung affections. In consequence of cool weather intestinal diseases of children less than usual for August. "The town and surrounding country can be said to be in a very healthy condition." Mortality low.

BARRIE—Dr. McCarthy reports about the usual proportion of cholera infantum and diarrhea, and some dysentery; no diphtheria, nor typhoid, but some scarlet fever. Measles and whooping-cough, epidemic in June, decreased in July, had about disappeared. "Health of town and neighborhood remarkably good." Mortality low.

ST. CATHARINES—Dr. Greenwood reports that, unlike July, in August there was a great deal of sickness there, but only few deaths. No epidemic, but cases of cholera infantum, diarrhœa, dysentery, typhoid fever, a good deal of bronchitis, with considerable malarial fever and rheumatism. Most diseases on the increase.

TORONTO—There is no particular epidemic here, but about the usual number of cases of infantile summer diseases; a number of the principal practitioners report the month as unusually healthy on the whole. Now that the cholera scare is about over for the present, we hear less about cleaning up; still it appears the work of improvement in this regard in going on fairly.

THE CHOLERA.—Dr. John Roche, an English physician who has had remarkable experiences, says the Scientific American, gives as his conclusion that cholera is purely and simply a specific fever, only inferior in its ravages to yellow fever, and closely allied to it. Cholera has a period of incubation varying from two to fourteen days: prone to attack the enervated and those subject to depression from any cause. It is contagious, and liable to occur periodically about every ten years in some parts of India. It seems to have visited the British Isles about every sixteen years, and as that period has elapsed since the last outbreak, it is more than like y to occur this year. Those persons who indulge in no enervating habits, and take nothing internally which would arrest the secretions nor too drastically stimulate them, and partake of nothing which is highly fermentable, may safely feel that they are cholera-proof during an epidemic.

DEATH FROM A CARBUNCLE.—Dr. Frank L. Rea, of Chicago, died August 3, of malignant facial carbuncle. His death attracted a great of attention from medical men in the city. On Tuesday, July 31, he applied to a druggist to pull a hair from his moustache. The hair was pulled and examined by Dr. Rea, who said that the condition of the hair root showed the beginning of a carbuncle. He died in five days.