Society Reports.

The Toronto Medical Society.

THE regular meeting of the Society was held on March 31st.

Dr. Morley Currie was proposed as a member of the Society by Dr. A. A. Small, seconded by Dr. Peters.

Dr. Herbert Bruce presented a patient suffering from carcinoma of the rectum on whom he had done a colotomy. The patient was a man aged 27, and had been complaining for about a year and a half. He suffered considerable pain, and a great deal from constipation. The rectum became pretty well closed. Attempt was made to remove the growth, but owing to the involvement of the urethra, a complete removal could not be effected. Subsequently, however, a left ilio-colotomy was done. The symptoms have disappeared, and the patient is going about at his work, being able to do so with little or no inconvenience. Dr. Bruce showed an ingenious truss-like apparatus which covered the ostium. The technique of the operation was that recommended by Greig Smith. This operation often added a year or so to the patient's life.

Dr. McPhedran said it was rather unusual to see carcinoma in a patient so young. He recalled a similar condition in a young man under his care upon whom Dr. Cameron had done a colotomy. The patient was doing well. He asked if there was any regurgitation of food from the portion of bowel below the opening.

Dr. H. H. Oldright described the operation as done by Senn, who followed the method recommended and described by Dr. Bruce, viz., of bringing out a loop of intestine through the abdominal wall and holding it in position by means of a glass rod passed through the mesentery, and of opening the bowel three days later, an anæsthetic not being required. Dr. Oldright reported a successful operation done by Dr. King for the same condition.

Dr. Peters said the occurrence of cancer in the young was not very unusual. Cancer affected the rectum at an earlier age than it did any other part of the body.

Dr. Bruce said there had during the last few days been a discharge of some inspissated fæces from the opening, and in this connection he called attention to the advantage of a vertical slit in the intestine over the horizontal, in that it allowed for an easier introducton of antiseptic solutions to cleanse out the bowel below.