

Dr. Primrose showed a photograph of a child presenting the same condition. He stated that in these cases the lymphatic spaces and vessels are found to be enlarged, and there is hypertrophy of the connective tissue; in this respect the condition of macro-glossia resembles elephantiasis in its pathology, and it is interesting to note that in Dr. Spencer's case the limbs exhibit some of the characteristics of elephantiasis.

Dr. Fere suggested ligation of the lingual artery as a means of diminishing the blood supply to the part.

Dr. Atherton showed a patient who had suffered a

#### COMPOUND COMMINUTED FRACTURE OF THE PATELLA.

He had received the injury by a kick from a horse, the knee being bent at the time. The patella was broken into four fragments; the upper portion of the bone remained intact, the lower portion was splintered into three pieces, and the fragments were separated three-fourths of an inch. By means of two silver wire sutures the pieces were brought together, the joint was washed thoroughly with 1-40 carbolic lotion. Drainage of the joint was secured by a tube passed to the surface through the posterior portion of the articulation, and a superficial drain was inserted in front. The latter was removed on the fourth day; the former was retained one week. The leg was retained at rest on a posterior Gooche splint and the leg elevated. The patient suffered no pain after the first two days. There was no pus formed at any time; the highest temperature was 100.3 F. on the morning after the accident; it gradually fell to normal. The dressings were changed four or five times during the first ten days, and then left undisturbed for ten days. One month after the accident he was allowed to sit on a chair; eight weeks after the accident a leather splint was applied and he went about on crutches. During the tenth week he was allowed to walk about the street on crutches. On October 25th (eleven weeks after the accident) the wire was removed in consequence of irritation; good bony union had taken place. On February 20th the patient was able to flex the joint to a right angle, and was going about attending to his business as usual.

#### Dr. Spencer showed a patient who had had a CYSTIC TUMOR DISCHARGING CONTENTS INTO THE ALIMENTARY CANAL.

Three years ago she had a tumor in the left hypochondriac region, causing displacement of the heart and dyspnoea. It enlarged during the menstrual periods. Before the tumor appeared she used to suffer from what she called "bilious attacks" and vomited mucous material on these occasions. She was in the General Hospital for a time and the tumor diminished somewhat under treatment. Last summer Dr. Spencer passed a hypodermic needle into the tumor with negative results. Two months ago, while hanging up clothes on a line, the tumor seemed to collapse suddenly; the same evening she said she passed "corruption" by the rectum and vomited a similar material. Since that time she has passed at intervals like material per rectum, but there has been no return of the tumor. Some of the vomited matter was exhibited; it was a mass of trembling, jelly like material, apparently mucoid in character.

Dr. McPhedran exhibited a patient suffering from

#### PRIMARY MUSCULAR ATROPHY.

The patient is thirty-two years of age; the trouble began seven years ago. His elder brother died at the age of twenty-six years (nine years ago) of the same disease. The wasting of the muscles, which is marked, began in the forearms and has extended gradually. It now involves most of the muscles of the body. There is typical "wrist-drop"; the supinator longus is entirely gone. There is little strength in the trapezius, biceps, coraco-brachialis, pectorals, latissimus dorsi, supra and infra spinatus, and all these muscles are markedly wasted. On the other hand, the levator anguli scapulae, rhomboids, and teres muscles, are all fairly good. The serratus magnus is atrophied, and the "winged scapula" is present. The muscles of the neck (except the trapezius) are not affected. The face muscles are involved, especially on the right side, as observed when he attempts to whistle; the eyes are widely open and he cannot close them firmly. The leg muscles are involved, especially on the right side; the superior groups are more affected than the