

digestive ferments of the pancreas. Stockton had reported two cases in which there was marked disseminated fat necrosis, where the affection of the pancreas was slight. This observer thought the condition of the pancreas was secondary to the fat necrosis. Osler says that such cases usually occur in alcoholics, and that there is no necessary relationship between the two conditions. One case he had reported had been operated on for intestinal obstruction. The patient afterward recovered. The youngest patient in whom this condition had been found was one under the care of Dr. McPhedran, a boy aged nine months, who had died from the disease. The patient had had symptoms of intussusception, and had been operated on for its relief. Post-mortem, the pancreatic disease had been noted. Constipation was usually a marked symptom.

Dr. Peters, who had operated on the case last referred to, said he was under the impression diarrhoea was one of the prominent symptoms. The child had suffered intense pain. There was no tumor.

TUBERCULAR KIDNEY.

Dr. F. Strange reported the history of a case. The patient was a woman aged thirty, with a good family history. She had always been in good health, except that for the past three or four years she had suffered from muscular rheumatism to some extent. The only symptom she had was a constant and distressing desire to urinate. The urine showed the presence of a few pus cells and a corresponding amount of albumen. She failed rapidly. After some weeks an enlargement was noticed in the right renal region. On consultation it was decided to remove the kidney. It was removed in the ordinary way by the lumbar incision. The patient died a few hours after the operation from shock.

Dr. Primrose gave the post-mortem report.

The kidney was very friable. The tubercles could be plainly seen on the surface. On section of the kidney one could see in the cortex and along the line of the tubules the tubercular process going on. The ureter was markedly fibrotic.

Dr. Bingham said that he had found the presence of blood in the urine a common symptom in these cases.

Dr. Garratt reported a case in which mental excitement would produce hæmorrhages from the kidney. Dr. Anderson had discovered the bacilli in the urine. Dr. Loomis, who had seen the case in 1892, had made a diagnosis of sub-acute Bright's disease.

Dr. Peters said that the thickened ureter reminded one of the thickened vas in tubercular disease of the testis. Dr. Beck had