

sands have a very intimate knowledge of all the intricacies connected with the subject, and various are the schemes brought forward from time to time by these wise people. The favorite fad just now appears to be the gravitation scheme from Lake Simcoe. All you have to do is to bore a hole down hill to Toronto, Simcoe water will fill the hole, and everything will be lovely.

We have no objections to raise against the general features of this scheme, but there are some simple facts in connection with this question which may be worth consideration. We have a lake called Ontario, which is quite as large and quite as close to Toronto as Simcoe, and contains wonderfully pure water. The analyses by Dr. Ellis, as mentioned in Dr. Oldright's admirable paper of this issue, show that Ontario water contains less organic matter than Simcoe. We have a system of water works which at present is not perfect. Shall we spend a few hundred thousand in perfecting this system, or shall we throw an unknown number of millions down the long hole?

Meeting of Medical Societies.

TORONTO MEDICAL SOCIETY.

February 19.

The President, Dr. Spencer, in the chair.

Dr. Holford Walker presented a specimen of

A VERMIFORM APPENDIX REMOVED BY OPERATION.

The appendix, three inches in length, was removed from a lady who had suffered from four or five recurrent attacks of perityphlitis. When she came to the hospital a hardness could be felt in the right inguinal region. At the operation for removal, the appendix was found adherent to the adjacent bowel, and a small pus sac existed close to it. The greater part of the appendix was cut off, and the remainder was tucked in and sutures inserted. The patient made a good recovery, and is in good health.

Dr. McPhedran stated that operative interference in appendicitis in the quiescent stage was no longer advocated by authorities, provided that inflammatory effects pass off entirely, leaving no thickening, etc. He cited a case of recurrent typhlitis which was not operated upon, and on

patient's death (from some other cause) the appendix was found perfectly normal. An objection to the operation is that the appendix cannot always be found easily, and its anatomical relations vary considerably.

Dr. J. F. W. Ross referred to a discussion he had recently heard at Albany on the question of operative interference. Deaths have occurred because of perforating appendicitis where operation would have saved life; the physician is too apt to hold his hand. Indications for the operation are when the patient is suffering from general peritonitis (appendicitis being suspected as the cause), and is doing badly; after twelve hours a surgeon should be called in to operate.

Dr. Machell, Dr. Peters, Dr. Greig, and Dr. Spencer, discussed the cases further, and Dr. Walker stated in his reply that, in his own experience, he remembers patients who have died and in whom he believes now an operation would have saved life.

Dr. Walker also presented a specimen of a

CYST OF THE OMENTUM.

The patient from whom the specimen was procured had a tumor in the groin simulating a femoral hernia; there was impulse on coughing. At the operation a piece of omentum was found in the crural canal, and what appeared to be a piece of bowel, but which subsequently was found to be an omental cyst. The whole was removed, and recovery was uninterrupted.

Dr. Gordon presented a specimen of an

ABDOMINAL CYST IN A NEW-BORN CHILD.

The following history was narrated: A woman, apparently in normal labor, vertex presentation, was attended by Dr. Bentley; as delivery was protracted the forceps was applied, and the head pulled away from the trunk with but slight traction. The arms were in a similar manner severed from the trunk, traction being made upon them. Dr. Gordon, who saw the case at this stage, introduced his hand into the vagina and uterus, and in doing so penetrated the wall of a cyst, from which poured about twelve quarts of fluid, clear in color. The rest of the child was then easily delivered. There was found to be a large cyst distending the abdomen of the child, extending up to the umbilicus and the diaphragm, and involving the uterus and bladder. There was apparently no urethra present.