Some Proposed Changes in the Canadian Militia Service.—Dr. W. Tobin, Halifax, presented a paper on this subject. It recommended that militia medical officers should receive some instruction in military surgery, ambulance drill and the routine of military medical administration generally, as would enable them to discharge satisfactorily their duties in the field and in military hospitals. It also advised the formation of bearer companies in localities where regiments were brigaded together, to receive aid in stretcher drill and first aid to the wounded.

Surgeon-Colonel O'Dwyer, principal medical officer of the Imperial forces in Canada, gave his experience of the departmental and the regimental systems, and approved of the formation of bearer companies.

On motion of Dr. J. H. Mathieson, seconded by Dr. Bethune, it was resolved to forward these recommendations to the Government.

Cerebral Tumor.—Dr. Webster, of Kingston, gave the history of a case of cerebral tumor in an insane woman, whose mental derangement was due to the presence of the neoplasm.

A Case of Nephrectomy was dealt with by Dr. Ahern, of Quebec.

Some Indications for Electrolysis in Angioma and Goitre.—By Dr. Dickson, Toronto.

Hernia of the Vermiform Appendix.—By Dr. R. W. Garratt, of Kingston.

After the usual votes of thanks the Association adjourned.

The members at the close of the session visited the Asylum and the Penitentiary, and were courteously received by the authorities of each.

The Latest Things in Surgical Fads.—Dr. G. Frank Lydston, of Chicago, in Chicago *Medical Recorder* for August, has an article in which he severely criticizes and condemns the operation of castration for hypertrophy of the prostate. The writer is decidedly of the opinion that the removal of the testes cannot be of much service in bringing about shrinkage of the prostate. But even though it did, the relief might be very slight, as the bladder has become diseased and there is still the inability to empty it fully. In those cases where fibro-adenomatous tumors exist about the neck of the bladder, we cannot expect much from castration. The cases where castration might be of some use would be those of young persons, or an incipient condition of hypertrophy. In such cases the condition can be treated by much less severe methods than the proposed operation. Dr. Lydston thinks that prostatomy and prostatectomy are much more rational methods.