

speaker had pointed out some years ago that the amount of urine secreted during ether anæsthesia became less and less in proportion to the time under ether, and the amount of solids contained, also, gradually fell.

Mucus in the throat obstructing the respiration could either be sponged out by means of a gauze sponge on one of the old fashioned sponge-holders, or the patient, in extreme cases, could be allowed to come partially out of the anæsthetic, and then touching the back of the pharynx with the sponge-holder would induce vomiting and empty the lungs to a certain extent as well as the upper parts of the air passages. With regard to the post-nasal disease in the reported case being a possible source of infection for the pneumonia, Dr. Campbell did not believe that lobar pneumonia was ever due to ether. Pneumonia following ether and due to it must necessarily be of the lobular form.

Stated Meeting, April 17th, 1899.

J. G. ADAMI, M.D., PRESIDENT IN THE CHAIR.

The Prevention and Cure of Tuberculosis.

Drs. DUNCAN McEACHRAN, H. A. LAFLEUR, A. D. BLACKADER, A. J. RICHER, W. H. JAMIESON, and H. McL. KINGHORN took part in the discussion, Dr. McEachran's paper being read by the PRESIDENT in the former's absence. The papers by Drs. McEachran, Lafleur, and Richer will be found in the present number of the JOURNAL. The others will be published later.