

whose obligations are often forgotten in selfishness or grasping cupidity. Truly, *Es giebt nichts Heiliges als die Wahrheit.*

THE ONTARIO MEDICAL LIBRARY ASSOCIATION.—The following books, reports, etc., have been received at the Library during the past month. Presented:—*Health Reports* complete, from the States of Maine, Ohio, Michigan, New York, and Illinois; and incomplete from California and Connecticut. *The Canada Medical and Surgical Journal*, Vols. 1–8, from Dr. Burritt, Toronto; *The New York Medical Journal*, Vols. 1–20, from Dr. James B. Hunter, New York; *Senn on Intestinal Surgery*, and *Jacobson on Surgical Operations*, from Dr. Osler, Philadelphia; *Heister's Surgery*, 1757, from Dr. McKay, Woodstock; *Index Catalogue of the Surgeon General's Library*, and *The Medical and Surgical History of the War of the Rebellion*, from the estate of the late Dr. Fulton; *Transactions of the Obstetrical Society of London*, England, Vols. 1–28, from Dr. James M. Ross; *The American Practitioner*, Vols. 6–10, from Dr. Burns, Toronto. Bought:—*Diseases of the Nervous System*, Gowers; *Mann's American System of Gynecology*; *Reynolds' System of Medicine*; *Holmes' System of Surgery*.

THE SCIATICA ATTITUDE.—Professor Charcot, of Paris, in a recent clinical lecture, the translation of which appeared last week in the *Journal of the American Medical Association*, pointed out the well marked attitude of a neurasthenic patient suffering from sciatica. Two years and a half ago Charcot noted for the first time this appearance, which is of some diagnostic value: "The trunk is inclined to the right; the vertebral column describes a curve with the convexity to the left; the right hand descends much lower than the left; the left lower extremity is semi-flexed; the buttock of this side presents a flattening, the gluteal fold being elevated; finally note that the heel of the left foot does not touch the ground. This attitude, so characteristic, has never been pointed out, and yet it is a feature of a very frequent disorder, for this patient is suffering with sciatica. This shows you how the most apparent points in clinical medicine may

remain for a long time unperceived. We carry with us, indeed, from our medical education a certain number of impressions from which it is extremely difficult to free ourselves. We have the habit of seeking only those things already described, and it requires long practice to acquire that independence of thought that enables one to see beyond his pre-conceived ideas. Often in this manner one finds traits so plain that it is difficult to explain how they have remained so long unrecognized, and usually they are at first received, even by progressive minds, only with scepticism. When I described for the first time the gross articular lesions of ataxics, those arthropathies that nevertheless must have always existed, it was objected, particularly in Germany and England, that they were only to be seen at the Salpêtrière. This scepticism has since disappeared, and to-day no one longer doubts the existence of these joint lesions. This special, characteristic attitude of a patient suffering with sciatica, I have known scarcely two years."

Meeting of Medical Societies

TORONTO MEDICAL SOCIETY.

STATED MEETING, FEB. 5TH.

DR. L. L. PALMER read an interesting and instructive paper upon

INTUBATION OF THE LARYNX (See page 85).

The discussion was opened by Dr. Price Brown, who gave notes of one case of tracheotomy and another of intubation which he had seen in the practice of Dr. Jennings, of Detroit. Both were successful. Dr. J. had performed both operations many times, with a percentage of recovery of 50 per cent. in tracheotomy and only 20 per cent. in intubation. In many cases where he had intubated, tracheotomy afterwards became necessary, and these were uniformly fatal. Dr. Jennings would only now perform intubation where he was not allowed to perform tracheotomy. In the case above referred to, the epiglottis attachment had been used, but when the time came for removal, this attachment was found buried in the epiglottis, from which it was removed with difficulty, and some hemorrhage.