the disease has advanced a step farther in attacking the substance of the synovial membranes and cartilages. I am quite in accord with Dr. Lindsay (Belfast) both as to cause and treatment, believing that tonic treatment is the better plan, never having seen any benefit from the ordinary antirheumatic treatment, tonics such as iron, quinine, arsenic, cod liver oil, etc. I do not think that any microscopical germ has yet been discovered.

Dr. J. E. CRAHAM (Toronto) said: The diagnosis between gout and chronic rheumatic arthritis has given me the greatest difficulty. This, I suppose, was not referred to by Dr. Stewart, because the differentiation between chronic rheumatism and arthritis deformans is quite sufficiently extensive for one discussion. I agree with Dr Jacobi that we should have a clear idea of the pathology of the disease; the hyperplasia and destruction of cartilage, and the eburnation of the ends of bones are marked characteristics which differentiate this disease from those affections of joints which are usually placed under the head of chronic rheumatism. It is unfortunate that the term "rheumatism" should be given to a number of joint affections arising from causes altogether distinct from those of acute and subacute rheumatism. I have found arsenic one of the most valuable remedies in the treatment of this very obstinate disease.

Dr. Gibney (New York) expressed his inability to contribute to the differential diagnosis between arthritis deformans and rheumatism, or even to the etiology and pathology. He failed to hear Dr. Stewart's paper, but learning that this paper included a discussion of the treatment by superheated dry air, believed that he might contribute his experience which was in general terms satisfactory. He had found the hot-air treatment specially valuable immediately after surgical means, such as breaking up adhesions or improving the position of the limb. He called attention to the importance of protecting the joint in examination by absolute immobilization, and of affording a limited amount of protection on the subsidence of the exacerbation, especially in the management of the knee, the ankle, and the clbow. This he does by an appliance limiting the range of motion to that allowed by Nature herself. He found valuable assistance in arsenic and cod-liver oil.

Dr. Trsox (Philadelphia) thought the subject thoroughly covered by what had been said. Personally he inclined to the view that in a certain number of cases the true rheumatic condition, or that generally conceded to be it, had at least a predisposing, and possibly through its specific cause a direct causal relation to rheumatoid arthritis. However this may be, he considered that an infectious nature must