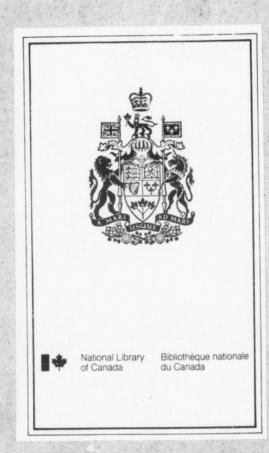
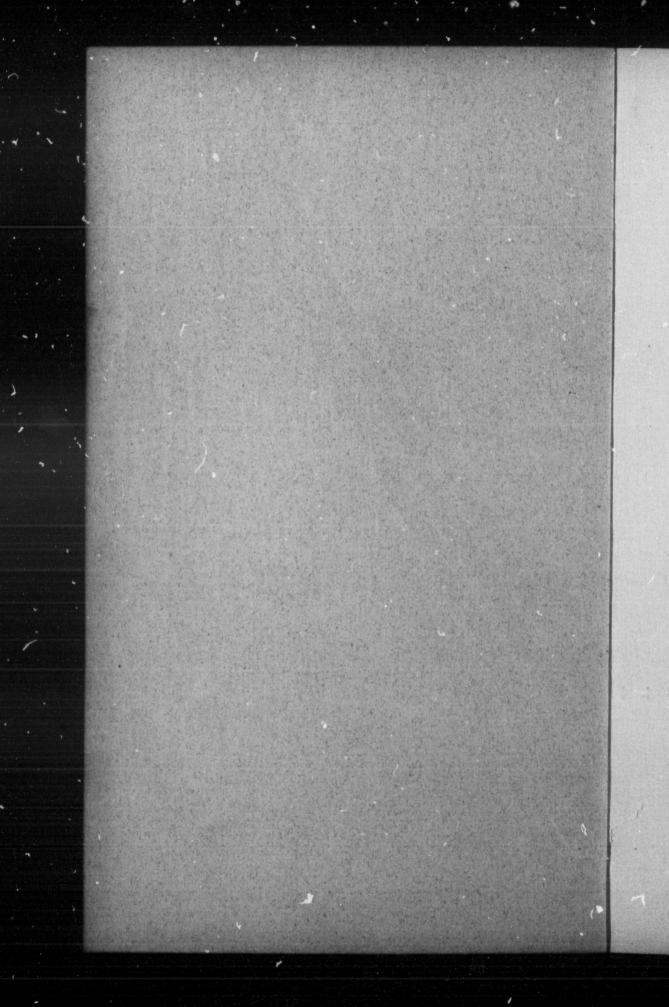
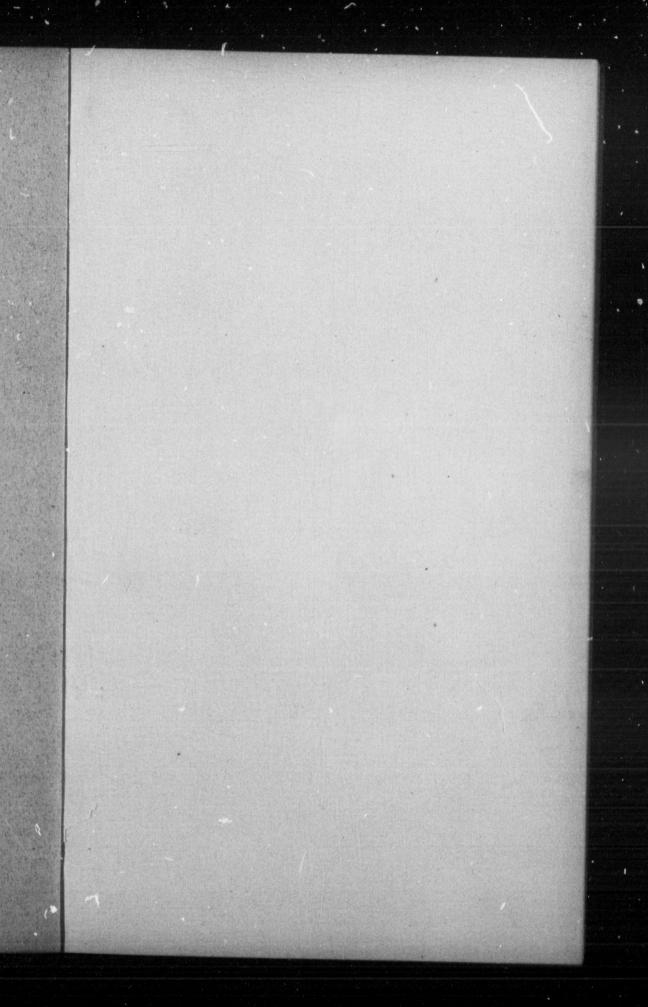
SIXTH ANNUAL REPORT ROYAL VICTORIA HOSPITAL 1899.





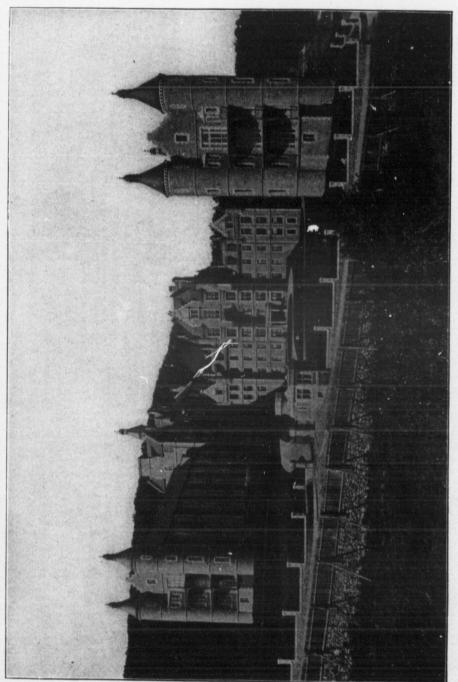
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ROYAL VICTORIA HOSPITAL.

THE

Royal Victoria Hospital,

MONTREAL.

SIXTH ANNUAL REPORT,

For the Year ending

31st DECEMBER, 1899.

Montreal :

MORTON, PHILLIPS & Co., PRINTERS,

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FOUNDERS AND PATRONS.

THE RIGHT HON. LORD MOUNT STEPHEN.
THE RIGHT HON. LORD STRATHCONA AND MOUNT ROYAL.

GOVERNORS.

Electibe:

R. B. ANGUS.

E. S. CLOUSTON.

THOS. DAVIDSON.

THE HON. GEORGE A. DRUMMOND.

A. T. PATERSON.

R. G. REID.

JAMES ROSS.

Ex-officio.

OFFICERS.

Disitor.

HIS EXCELLENCY THE RIGHT HONORABLE THE EARL OF MINTO, K.C.M.G., LL.D., P.C.,

GOVERNOR GENERAL OF CANADA, ETC.

President.

R. B. ANGUS.

Honse Committee.

R. B. ANGUS, Chairman.

E. S. CLOUSTON. HON. G. A. DRUMMOND.

A. T. PATERSON.

JAMES ROSS.

Honorary Anditors.

I. G. OGDEN.

G. A. FARMER.

MEDICAL BOARD.

R. CRAIK, M.D., LL.D., Chairman.

T. G. RODDICK, M.D., LL.D., M.P. JAMES STEWART, M.D.

J. G. ADAMI, M.A., M.D. F. BULLER, M.D.

W. F. HAMILTON, M.D.

A. E. GARROW, M.D.

JAMES BELL, M.D. W. GARDNER, M.D.

C. F. MARTIN, B.A., M.D. H. S. BIRKETT, M.D.

W. G. M. BYERS, M.D.

Consulting Staff.

R. CRAIK, M.D., LL.D., Physician. T. G. RODDICK, M.D., LL.D., M.P., Surgeon.

Physician. JAMES STEWART, M.D.

Surgeon. JAMES BELL, M.D.

Ophthalmologist and Otologist. F. BULLER, M.D.

Gynæcologist. W. GARDNER, M.D.

Laryngologist. H. S. BIRKETT, M.D.

Pathologist. J. G. ADAMI, M.D.

Assistant Physicians.

W. F. HAMILTON, M.D.

C. F. MARTIN, M.D.

Assistant Surgeon. A. E. GARROW, M.D.

Assistant Ophthalmologist. W. G. M. BYERS, M.D.

Bentist.E. B. IBBOTSON, D.D.S., L.D.S.

Clinical Assistant in Medicine. W. S. MORROW, M.D. Clinical Assistant in Acurology.
A. SHIRRES, M.D.

Clinical Assistant in Ophthalmology. H. P. HARVEY, B.A., M.D.

Clinical Assistant in Gynacology. A. E. ROBERTSON, M.D.

Assistant in Pathology.
A. G. NICHOLLS, M.A., M.D.

Assistant in Bacteriology. H. B. YATES, B.A., M.D.

Director of Clinical Taboratory.
A. A. BRUERE, M.D.

Medical Registrar. W. G. REILEY, M.D.

HOUSE OFFICERS.

Secretary and Superintendent.
J. J. ROBSON.

Assistant Secretary and Superintendent. W. R. BATES.

> Admitting Officer. H. B. CUSHING, B.A., M.D.

B. W. D. GILLIES, M D. T. TURNBULL, M.D. E. F. MURPHY, M.D.

House Surgeons.

C. B. KEENAN, M.D.

C. H. BROWN, B.A., M.D.

J. R. O'BRIEN, M.D.

F. J. TOOKE, B.A., M.D.

Honse Gynæcologist. H. STOCKWELL, M.D.

Anasthetist. W. H. SUTHERLAND, M.D.

Eady Superintendent of Aurses.
MISS ANNIE MURRAY.

Apothecarp.
W. W. WOOTTON.

Mousekeeper.
MISS AGNES MURRAY.

Clerk. H. E. WEBSTER.

Superintendent's Report.

To the Governors of the

Royal Victoria Hospital:

GENTLEMEN.

I have the honor to submit herewith the Sixth Annual Report of the Royal Victoria Hospital, for the year 1899.

During the year 2,537 patients have been admitted to the Hospital. Of these 1,491 were Protestants, 988 Roman Catholics, 36 Jews and 22 of other faiths; 1,545 were free patients, 656 public ward patients paying fifty cents per day, and 336 private patients. 2,036 were residents of Montreal, and 501 were sent from the country districts for treatment. The increase in the number of patients over that of the previous year has been 258.

On the 1st January, 1899, there were 133 patients remaining from 1898, and during the year 2,513 have been discharged, of whom 1,366 were well, 691 improved, 157 unimproved, 189 not treated, 110 died and 157 remained on the 31st December.

Of the 110 deaths 31 took place within 48 hours of admission.

The death rate for the year has been 4.40 per cent., or, if those dying within 48 hours after admission be deducted, 3.14 per cent.

The total number of patients days was 60,961, as against 58,303 in the previous year.

The highest number of patients in the Hospital on any one day was 200, on the 27th February, and the lowest 134, on the 1st January; the highest monthly average was 183, in February, and the lowest 143, in August, the daily average for the year being 167, as against 160 for the previous year.

The average number of days in Hospital per patient was 24.2, as against 25.7 in the previous year — the Medical Department being 24.07, the Surgical 21.7, the Gynæcological 25.04, the Ophthalmological 23.4, and the Laryngological 10.2 per patient.

In the Out-Patient Department there were 16,721 consultations, as against 14,681 during the previous year. The increase having been caused by the opening of the new Laryngological Department.

The Medical Consultations were 6,228; Surgical, 5,218; Eye and Ear, 2,685; Nose and Throat, 1,527; and Diseases of Women, 1,063.

The ordinary income for the year was \$113,892.71, while the ordinary expenditure amounted to \$94,851.64, the balance of \$19,041.07 being applied towards the cost of the new Out-Patient Department and the Power House and Laundry Building.

A donation of two thousand dollars has been received from Misses E. Scott, J. H. Scott, K. G. Scott and Mrs. H. L. Morse towards the endowment of a bed

in memory of their father, the late Gilbert Scott, and their brother, the late James Phillip Scott.

The total cost per day per patient has been \$1.55; the cost per day of maintaining each person in the Hospital—staff, servants and patients—being 87 cents, and the daily cost of the provisions for each person, 23½ cents.

Dr. Webster resigned his position of Assistant-Gynæcologist in this Hospital to accept that of Professor of Obstetrics and Gynæcology in the University of Chicago, and Gynæcologist of the Presbyterian Hospital of that city.

Changes in the resident Medical staff have been caused by the expiration of the term of service of Drs. W. O. Rose, H. D. McH. Robertson, E. W. Archibald, J. J. Roy, Harvey Smith, and J. Barclay, and the appointment of Drs. T. Turnbull, E. F. Murphy, J. R. O'Brien, H. Stockwell, F. J. Tooke, and W. H. Sutherland.

During the past year all the wards of the Hospital have been thoroughly renovated and re-painted.

The new Out-Patient Department, which was completed in September last, has added in every way to the convenience and satisfaction of the patients and attending staff.

The present heating arrangements of the Hospital having been found expensive and inconvenient, by reason

of their detached character, it has been decided to remove the furnaces and machinery from the basement of the Hospital and to concentrate them in a separate building, thereby effecting a considerable saving in the expenditure for fuel. It is also intended to place the laundry under the same roof, and to convert the present laundry into an isolation pavillion. The erection of this new building was commenced in December, and it is anticipated that the changes will be completed during the present year.

The thanks of the Governors have been conveyed to the ladies and gentlemen mentioned in the accompanying list of donations for the assistance, monies and presents received from them during the year,

I append herewith statements showing in detail the work which has been accomplished in the various departments since my last report.

Respectfully submitted,

JOHN J. ROBSON,

Secretary and Superintendent.

16th January, 1900.

Special Gifts

RECEIVED DURING THE YEAR,

BOOKS, MAGAZINES, ETC.

Books, Magazines and Illustrated Papers from Angus, Mr. D. Forbes.

		India	ringus, mi. D. Fordes.
	II .	"	Angus, Mr. R. B.
	"	11	Bark, Mr. G. H.
	II .	"	Bennett, Mr.
	"	"	Browne, Mrs. G. A.
	"	"	Brown, Mr. W. T.
	II .	"	Clark, Mr. M.
	"	"	Clouston, Mr. E. S.
	II .		Day, Mr. G. B.
	"	**	Denne, Mrs.
	"	"	Drummond, Mrs.
	"	"	Dominion Commercial Travellers Ass.
	"	"	Douglas, Mr. J. A.
	n .	"	Eaton, Mr. E. E.
	"	"	Garrow, Dr. A. E.
	"	"	Grose, Mr.
	II .	"	Hays, Mr. C. M.
	II .	"	Heneker, Mr. R. T.
	B.	"	Hooper, Mr. G. R.
	II .	"	Johnston, Mr. J.
	II .	п	Leith, Miss
	"	"	MacMaster, Mr. D.
	"	"	Meredith, Mr. F. E.
	"	"	Morrice, Mrs.
	"	11	Montreal Temple Club
	"	11	McAgg, Mrs.
	"	11	McGill Medical Society
	"	"	McMurray, Mrs. S. A.
1	"	"	McIntyre, Mrs. D.
1	"	11	Osgood, Mrs.
-	1	"	Picken, Mr. E.
1	1	11	Roddick, Dr.
1	1		Rolland, Mr.
1	1		Russell, Miss
1	1	11	Salvation Army
		**	

Books, Magazines and Illustrated Papers from Sims, Mrs.

"	"	Smith, Miss
"		Sternberg, Miss
"	"	Thomas, Mr. H. W.
"	"	Watson, Mrs.
"	11	Wilson, Mr.
"	11	Young Men's Christian Association
"	"	Young Women's Christian Asso'cn.

NEWSPAPERS.

6 copies Montreal Daily Witness,	from	the	publishers
I copy Montreal Gazette,	"		"
I copy Montreal Herald,	"		,,
Oddfellows' Gazette,	"		"
6 copies Home and Youth	"		"
I copy Ottawa Citizen,	"		"

MEDICAL JOURNALS.

Canada Lancet,	from t	he publ	lishers.	Toro	nto
Canadian Practitioner,	"		"	"	
La Clinique,	"		11	Mont	real
Canada Medical Record,	"		**	"	
Montreal Medical Journal,	"		"	"	
L'Union Medicale,	"		"	"	
Pediatrics,	"		"	New	York
Therapeutic Gazette,	"			Detro	

Toys.

Toys	from	Adami,	Mrs.	T.	G.
LUyo	HOIH	Auaiiii,	MII S.	1.	\mathbf{u}

"	Angus, Misses
"	Bell, Dr. and Mrs. James
"	Eadie, Miss
	Lyman, W. E.
"	Paterson, Mrs. R. McD
"	Wanklyn F. L.
11	Whitehead, Master
,,	Wood, Mrs.
11	Yates, Dr. and Mrs.

FLOWERS.

Flowers	from	Bennet	t, Mr. J	
		Church	of Asce	ension
		Flower	Mission	, Montreal
		"	"	Buckingham

SPECIAL GIFTS.

FLOWERS, -Con.

Flowers from Grace Church Sunday School

- MacMaster, Mr. D.
- Meredith, Mr. F. E.
- Murray, Mr. J. S.
- Young, Miss H.
- Reid, Mrs. C.
- Deil M. D.
- Reid, Mr. R. G.
- Richmond W. C. T. U.
 Strathcona, Lord
- St. Luke's Sunday School, Waterloo
- Sunday School, Terrebonne
- Thompson, Miss
- Wood, Mrs.

FRUIT

Fruit, from St. Andrew's Church.

Apples " Penniston Bros.

PLANTS.

Plants from Meredith Mr. F. E.

" Turnbull, Miss

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MISCELLANEOUS

Chair	MISCELLANEOUS
Clothing	Adami, Mrs.
Clothing	Angus, Mr. R. B.
	Angus, Mrs.
Canary and Cage	Angus, Miss
Candies	Bell, Dr. and Mrs.
Plano for the Nurses	
Clothing	···· Clouston, Mr. E. S.
Christmas Trees	Donohue, Mr. P.
Linen	Hospital Sewing Club
Turkeys, Hams and Bacon	Harper, Mr. Ias
Candy	· · · · · · · · · · · · · · · · · Joslin, Mr. F.
Coffee	Liffiton, Messrs. C. A. & Co.
Biscuits	Lang Manufacturing Company
Clothing	MacDougall, Mrs. J. M.
Heather from Scotland	MacMaster, Mr. Donald
Clothing	
Candies	Ogilvy, Mr. Jas. A.
Pass for Nurses	Park Incline Company
Christmas Trees	Penniston Bros.
Clothing	Reid, R. G.
Cards	Renouf, Mr. E. M.
Punch for three years	Renoul, Mr. E. M.
Subscription to "Queen" for Nurs	ses
Fans	Smart, Mr. R.
Scrap Books	Smart, Mr. R.

Lady Superintendent's Report.

To the Governors

Royal Victoria Hospital:

GENTLEMEN.

I beg to submit the following report of the Nursing Department of the Royal Victoria Hospital for the year 1899.

The staff consists of one Assistant Superintendent, one Night Superintendent, ten Head Nurses (graduates), and forty-seven Pupils, making a total of fifty-nine, an increase of five over the previous year.

Over five hundred applications for admission to the Training School have been received during the year. Of forty-two Probationers admitted, thirty-two were accepted as pupils.

Nine pupils left before the completion of their course.

A course of fifty-four lectures were delivered by the members of the Medical Staff, and twelve classes a week were held during the session by the Lady Superintendent and her Assistants. Examinations took place periodically.

On the whole, the health of the nurses has been good.

List of Graduates of the Royal Victoria Hospital:

		3.51	D 14'11
Miss	M. Feeney	Miss	B. Miller
"	L. Lewis	11	E. Jones
**	Pomeroy	**	A. Bouchier
"	Walters	11	H. Sutherland
"	Chandler	"	H. Gilmour
**	Kimber	11	R. Jones
**	Clement	"	L. Mackenzie
"	Russell	"	J. Sariol
"	Higginbotham	11	H. Le Visconte
"	Dawes	11	E. Shaw
"	Taylor	11	M. Hannah
"	Grant	11	E. Freeland
	A. Parks	11	H. Smith
11	Wills	"	A. Hall
"	A. Campbell	11	A. Perry
"	Owen	Mrs.	A. Stanley
11	Hamilton	Miss	G. Mills
"	Goodhue	"	M. Lindsay
"	Boulton	11	L. Johnston
**	Cooper	11	A. Magor
"	Amsberry	"	A. Sims
"	Hastings	"	A. Byfield
"	Robins	"	A. Stephen
"	R. Cross	11	B. Maitland
"	F. Henderson	Mrs.	
"	R Marshall		F. Anton

During April the following class of twenty-four passed their final examinations, making a total of seventy-six graduates since the opening of the school:

Miss.	J. Sexton	Miss	Shannon
"	Harold	"	McGreevy
11	Richardson	"	Shattuck
"	Adams	"	Pollard
"	Burns	"	Whitmarsh
	Ross	"	Wheeler
"	Elliott	**	Spier
**	Moe	,,	Lamont
"	Masson	11	Sherwood
"	McClees	11	McMillan
"	Moore	"	Hardisty
- 11	Erskine	"	Anderson

Respectfully submitted,

ANNIE MURRAY,

Lady Superintendent.

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Carl Carl Carl Casl Che Ciga Civi Cler Cler

Com

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OCCUPATIONS OF PATIENTS.

Accountants	5	G . C . :	
Actors	I	Confectioners	4
Agents	20	Constables	5
Apprentices,	6	Contractor	I
Artists	2	Cooks	29
Axe Temperer	I	Cooper	I
	•	Couplers	3
Baby Girls	39	Cutters	4
" Boys	43		
Baggagemen	2	Dentists	2
Bailiffs	3	Dressmakers	17
Bakers	4	Drivers	15
Barbers	7	Drug Clerks	3
Bar Tendera	11		3
Boatmen	2	Electricians	2
Bookbinders	3	Elevator Boys	3
Bookkeepere	17	Engineers	4
Bottle Dealers	3	Exporter.	14
Brakemen	11		I
Brewers	I	Factory Girls	-0
Bricklayers	9	Farmers	28
Brokers	3	Farm Laborers	14
Butlers	2	Firemen	87
	-	Fisherman	12
Cabinet Makers	2	Fitters	I 2
Carpenters	29	Footmen	
Carriago Molsons	3	Foremen	3
Carters	19	Fruit Vendors	9
Cashier	I	Fur Dresser.	4
Checkers	3		I
Cigar Makers	6	Game Keeper	
Civil Engineer	ı	Game KeeperGardeners	I
	8	Glove Maker	6
Clories	8	Governesses	1
Coachman	8	Grocers	4
Collectors		GrocersGuardians	3
Commissis	3 2	Guards	2
Compositor	I	Guards	3
Conductore		Hostlers	
	4	Trosuers	5

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Hotel Keepers	7	Painters	19
Housemaids	II	Peddlers	31
Housewives	604	Physicians	9
		Plasterer	I
		Plumbers	11
Inspectors	8	Policemen	4
Icemen	2	Porters	8
		Postmen	3
		Printers	2
Janitor	1	Professors	2
Jewellers	3	Publisher	I
	3		1
Laborers	387		
Laundresses	2	Quarrymen	3
Laundrymen	2		3
Leather Polisher	J		
Lumbermen	6		
zamoumen	0	Registrar	I
		Riveter	/I
Machinists		Roofers	2
Managers	21		
Manicurists	3		
Manufacturers	2		
Masons	II	Sail Maker	I
Mattress Maker	9	Sailors	3
Mechanics	I	Salesmen	5
	2	Sawyers	2
Merchants	9	Scavengers	2
Millings	4		02
Milliners	3		97
Miners	4		11
Motor Men	2	Servants 19) I
Moulder	I	Sheriff	I
		Shippers	2
N D		Shirtmaker	I
News Boys	3	Shoomalage	5
Nurses	17	Crimmons	3
Nurse Maids	9	Stoomfittons	4
		Ctomoonanh	3
		C+-1	2
Office Boys	14	Ctonosuttono	9
Operators	7	Ctoromon	I
Optician	ı	Ctudente	I
Orderlies	5	Surgeone	3
			3

/I

Switchmen	7	Typewriter	1
Tailoress	I	Undertaker	1
Tailors	14		
Teachers	24	Valets	5
Tie Maker	I		3
Tobacconist	1	Waiters	7
Traders	7	Waitresses	9
Trunk Maker	,	Washerwomen	-
	1		39
Turners	2	Weavers	4

BIRTHPLACES OF PATIENTS.

Canada	1597	Austria	1
England	440	Norway	3
United States	146	Belgium	
Ireland	134	Poland	3
Scotland	85	Jamaica	3
Germany	20	South Africa	3
Russia		Channel Islands	2
Newfoundland	14	New Zealand	2
China	13		2
Syria	12	East Indies	2
Italy	12	Roumania	2
Sweden	9	Holland	I
Sweden	8	Finland	I
France	7		
West Indies	7		
Greece	5	2	,537

THE ROYAL

Statement of Income and Expenditure

INCOME.

Dividends from Investments\$91	,748	1
Deivote Day Patients' Rees	,107	2
Public # # 0	,859	3
Out Door Department	231	2,
Students' Fees 1	,360	0
Sundries	215	1
Donations—		
R. B. Angus\$250 00		
Dominion Transport Co		
S. Carsley		
Jas. Wilson		
Chs. Cassils		
T. B. Holland		
\$	373	31
\$173,	892	71
From Mrs. H. L. Morse, Misses E. Scott, J. H. Scott, and K. G. Scott towards the endowment of a bed in memory of their father, the late Gilbert Scott, and their brother, the late James Phillip Scott	000	oc

\$115,892 71

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We have examined the books of the Royal Victoria Hospital, and find that the above is a true statement of the income and expenditure of the said Hospital for the year ending 31st Dec., 1899.

(Signed),

I. G. OGDEN, G. A. FARMER, \ \ \} Honorary Auditors.

for the Year ending 31st December, 1899.

EXPENDITURE.			
Provisions— Meat\$ Bread and Flour			
Milk Butter and Cheese	2,229 5 3,800 8 2,262 7	2	
Eggs. Fish and Poultry.	1,272 10	9	
Groceries. Vegetables and Fruit. Ice.	3,081 65	7	
SURGERY AND DISPENSARY-	680 57	\$25,51	r 86
Drugs\$ Dressings and Bandages	2,104 47	7	
Instruments and Appliances. Wines and Spirits. Soda Water	3,010 67 408 52		
Soda Water Ambulance Service and Funerals Pathological Department Supplies	294 00 641 50 270 30)	
Domestic-		10,725	83
Fuel and Light. \$ Hardware, Crockery, Brushes, etc Linens \$	11,542 86 1,844 72 2,632 54		
FurnitureLaundry Supplies	745 28 224 98		
Miscellaneous Expenses Water	1,650 14 1,171 28		0-
Wages— Nursing Department\$1	0.718 34	19,811	80
Steward's "	5,371 61 4,563 80		
Housekeeper's Engineer's Superintendent's Dispenser's	3,402 81 3,243 18 1,054 45		
Resident Medical Staff Pathologists	1,766 92 999 96		
ESTABLISHMENT CHARGES— Insurance\$	x 222 20	31,121	07
Pension to Della	1,239 30 1,141 75 3,536 97		
Miscellaneous-		5,918	10
Stationery and Printing \$ Telegrams and Postage. Doctors' and Nurses' Library	1,103 80 121 38 126 48		
Cabs and Cars	50 90 300 42		
	-	94,851	_
EXTRAORDINARY EXPENDITURE.		94,031	04
Applied towards the cost of the erection of Buildings for the Out-Patient Depa Power House and Laundry		19,041	07
ENDOWMENT FUND.			
Amount received from Mrs. Morse and the Misses Scott, transferred to this account	-		
	\$1	15,892	71

TABLE OF STATISTICS

FOR THE YEAR 1899.

Admitted during the year, 2,537—Males, 1,362; Females, 1,175.

DEPARTMENT	TOTAL	FEMALES	MALES
Medical	965	508	457
Surgical	1018	670	348
Gynæcological	253		253
Eye and Ear	241	150	91
Nose and Throat	60	34	26
		_	_
	2537	1362	1175

Discharged, Died and Remaining.

DEPARTMENT	In Hospital 1st Jan'y 1899	Well	Improved	Not Improved	Not Treated	Died	Remaini'g 31st Dec. 1899
Medical	59	395	367	84	46	67	65
Surgical	50	592	226	46	116	34	54
Gynæcological.	9	176	35	5	19	8	19
Eye and Ear	14	157	58	18	4		18
Nose & Throat.	I	46	5	4	4	1	I
			_	_			-
	133	1366	691	157	189	110	157

Cost per day per patient, \$1.55.

Total number of days in Hospital, 60,961.

Average number of days per patient, 24.2.

Medical. Surgical. Gynæcological.

25.04 24.07

Eye and Ear. 23.4

Nose and Throat.

Total number of deaths in Hospital, 110. Died within 48 hours of admission, 31.

DISEASES OF

Total 109-Anæmia,

tus vulv Aneurism,

interstit Aortic reg

regurgit stitial n Aortic ste and reg

Arterial so interstit Chlorosis

Leuchæm

Mitral reg

terstitia Mitral reg gurgitat tation.

Mitral ste

REPORT OF THE MEDICAL DEPARTMENT.

For the Year ending 31st December, 1899,

By W. G. REILLY, M.D., MEDICAL REGISTRAR.

	ital 1899	AD	MIT	red]	DISC	HAF)	ing ,1899	Days Hosp	
* DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec., 1899	Total	Daily Average
DISEASES OF THE BLOOD AND CIRCULA- TORY SYSTEM. Total 109—Males 44, Females 65.												
Anæmia, pernicious		5	2	3		3	I		I		165	33
tus vulvae		I	 I	 	::	I	::	::	 I 	:: :: ::	59 12 22	59 12 22
" " with chronic interstitial nephritis	::	I	I	::	::		.: '		::	· · ·	70 4	70 4
regurgitation, chronic inter- stitial nephritis.		1		I		I					22	22
Aortic stenosis, mitral stenosis and regurgitation Arterial sclerosis		1 2	I	· · I			· · ·		··.		1 5	I 2
" " with chronic interstitial nephritis	3	I 22 I		 22 I	17	5 I			::	3	8 623 6	8 24 6
" and mitral regurgitation " and psoriasis Leuchæmia, myelogenous " pseudo " splenic " spleno medullary. Mitral regurgitation		1 1 5 1 4	 I I 4 I 3	I I I	· · · · · · · · · · · · · · · · · · ·	1 4 3	 		 I I I	· · · · · · · · · · · · · · · · · · ·	53 19 25 32 349 16 64	53 19 25 32 70 16 16
" chronic in- terstitial nephritis		1	I			I					8	8
Mitral regurgitation, aortic regurgitation, tricuspid regurgitation	2	1 10 6	I I	9 6	::	10 8	::	::	 	::	32 168 429	32 17 53
Forward	5	70	22	48	18	40	3	I	7	6	2192	

oat.

	pital 1899	ADI	MIT	ΓED	1	DISC	HAR	GEL)	ing 1899	Days Hosp	
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec, 1899	Total	Daily
Forward	5	70	22	48	18	40	3	I	7	6	2192	
Diseases of the Blood and Circulatory System.—Con.							4					
Mitralstenosis and regurgitation, chronic peritonitis		I		I		I					49	49
tion, chronic interstitial ne- phritis		2	I	I					2		32	16
stitial nephritis		I		I		I					30	30
tion, aortic regurgitation Mitral stenosis and regurgita-	I	2	I	I	.:	I	I		I		179	60
tion, sub-acute rheumatism Mitral stenosis and aortic sten-		I	I			I					34	34
osis Mitral stenosis and regurgita-		I		1		I			• •		56	56
tion, aortic stenosis and re- gurgitation		I	1			I					24	24
naud's disease Mitral stenosis and regurgitations, tuberculosis, amyloid		I	I			I					27	27
disease	2	7	5	I 2	::	5	I I	::		2	14 246	14 27
chitis, chronic gastritis Myocarditis and chronic inter-		I		1					I		9	9
stitial nephritis		3	3				I		I	1	75	25
osis	1	1		I		I					11	11
nephritis, pulmonary œdema. Myocarditis and mitral regurgi-		2	2						2		9	5
Myocarditis, mitral and aortic		I	I							I	I	I
regurgitation	::	I	I	::	::	I	::	::	::		22 21	22 21
tion, chronic rheumatism	::	1 2	2	I	::	I	::				28 52	28 26
Forward	8	IOI	42	59	18	57	7	2	15	10	3111	-

DISEASES (
Total 130Abscess, a
Appendici
Carcinoma

Cholelithi Cirrhosis Colitis, m Constipati Diarrhœa

Dysentery Enteritis, Enteropto

Gastrectas

Gastric u

"
Gastritis,

Gastro en Hyper ga Hæmaten Hyperchl Jaundice, Peritoniti

Pancreati glycosu Stomach, Tœnia.. Tonsillitis

Ulcer, du Vomiting

	spital , 1899	ADM	TTI	ED	П		HAR	GED		ing ,1899	Days Hospi	
DISEASES	In Hospital 1st Jan., 189	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec., 1899	Total	Daily Average
Forward	8	101	42	59	18	57	7	2	15	ю	3111	
DISEASES OF THE DIGESTIVE SYSTEM. Total 130—Males 64, Females 66. Abscess, alveolar. Appendicitis. Carcinoma of bowel " of cesophagus. " of stomach Cholelithiasis. Cirrhosis of liver, atrophic. " " hypertrophic. Colitis, mucous. Constipation, chronic. Diarrhœa, acute. " chronic. Enteroic. Enteroics. " and nervous diarrhœa Gastrectasis. " and gastroptosis. " and gastroptosis. " and hysteria. " " with neurasthenia. Gastric ulcer. " " and hysteria. " " with neurasthenia. Gastrio chronic. Gastro enteritis, acute. Hyper gastric secretion. Hæmatemesis. Hyperchlorhydriz. Jaundice, catarrhal. Peritonitis, general. " pelvic. " tubercular Pancreatitis, with intermittent glycosuria. Stomach, motor insufficiency of Toenia. Tonsillitis, acute follicular. " " suppurative. Ulcer, duodenal. Vomiting, nervous " pernicious		1 4 4 1 9 6 3 2 1 2 2 2	1 4 1 1 8 4 1		1 3 3			I 4 I I	· · · · · · · · · · · · · · · · · · ·		10 20 9 12 154 85 166 31 16 49 11 3 3 4 41 41 20 23 3 16 3 5 5 86 7 2 29 6 6 6 6 7 9 6 6 6 6 7 9 6 6 6 7 9 6 6 7 9 6 7 9 6 8 9 6 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	10 5 2 12 17 14 55 16 16 25 16 3 3 4 11 11 11 11 11 11 11 11 11
Forward	12	227	105	122	78	95	20	13	18	15	5471	

: Average | P u

9 25

11 5

I

	ital 1899	AD	MIT	TED		DISC	CHA	RGE	D	ng 1899		ys in pital
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec., 1899	Total	Daily Average
Forward	8	227	105	122	78	95	20	13	18	15	5471	
DISEASES OF THE RESPIRATORY SYSTEM. Total 179—Males 96, Females 83.												
Abscess, pulmonary	I	1 4 1 1 13	1 4 1 8	 I 5	 2 I I4	3 1 	::	::		::	10 57 23 20 200	10 11 23 20 14
media	::	I			I	· · ·	::	::	·	::	10 23	10 23
sema	2	7	5	2		8			I		147	16
osis Bronchitis chronic, mitral re-		I	I			I					25	25
gurgitation, cirrhosis of liver. Cancer of lung. Empyema and appendicitis. Laryngitis, acute. Pleurisy and bronchitis. " acute " chronic. " with effusion. " " " chronic	 I 2 	1 2 1 1 1 11 17	 2 1 1 6 	I I 5 I 7	3 9	I I 2 I 3	3	· · · · · · · · · · · · · · · · · · ·	:::::::::::::::::::::::::::::::::::::::		5 62 1 57 30 165 7 352	5 20 1 19 30 15 7 21
bronchitis and emphysema Pleurisy, tubercular Pneumonia, broncho " broncho, acute al-	::	3 5	I 2 2	1 3	5	3	::	::	 	 	10 82 86	10 27 17
coholism, acute cellulitis Pneumonia, broncho, with		I	٠.	I	I						25	25.
chronic bronchitis	2	1 34	16	18	31	::	::	::	5	::	615	7
empyema		I		I	I						25	25
myocarditis Pneumonia, acute lobar, peri-		I		I					I		I	I
carditis, pleurisy Pneumonia, pleuro, with acute		I	I		1						62	62
bronchitis	2	1 34	1 1 16	18	::	21	2	2	1 1 7	4	4 1 1005	4 I 28
atrophic cirrhosis of liver		I		I			I				129	129
Forward	23	377	186	191	160	142	26	16	36	20	8717	

Diseases Sy

Tuberculos hypertro Tuberculos bronchit Tuberculos stenosis, Tuberculo jaundice Tuberculos carditis .

Tuberculo tral ster Tuberculo interstiti stenosis Tuberculo

interstiti nephriti Tuberculo cular la stitial no Tuberculo

Tuberculo glands. Tuberculo

DISEASES Of Total 256-Chorea, v. Concussio

" Diplegia,

Dementia

	1899	AD	MIT	red]		HAR	GEL)	ing ,1899	Days Hosp	
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec.,1899	Total	Daily Average
Forward	23	377	186	191	160	142	26	16	36	20	8717	
Diseases of the Respiratory System.—Con.												
Tuberculosis, pulmonary, with hypertrophic cirrhosis of liver. Tuberculosis, pulmonary, with		ı	I				I				30	30
bronchitis		2	I	I		2					105	53
stenosis, mitral regurgitation. Tuberculosis, with catarrhal		I	I			I					22	22
jaundice		I		I	.,	I					5	5
carditis		I	1			I				•	28	28
tral stenosis, chronic interstitial nephritis Tuberculosis, pulmonary, chr.		I	I			I					14	14
interstitial nephritis, mitral stenosis and regurgitation		ı		I						I	59	59
Tuberculosis, myocarditis, chr. interstitial nephritis		I	I						I		45	45
Tuberculosis, chronic interstitial nephritis, cardiac hypertrophy		I	I						I		46	46
Tuberculosis, pulmonary, tuber- cular laryngitis, chronic inter- stitial nephritis.		I	I						I		40	40
Tuberculosis of hip joint Tuberculosis of mesenteric		2	2					2			6	3
glands Tuberculosis of vertebrae	:	I	::	I	::	I	::	::		::	29	29
DISEASES OF THE NERVOUS SYSTEM. Total 256—Males 124, Females 132.												
Chorea		8	4	4	8						217	27
Chorea, with varicella Concussion of brain		I	I	::	I	::	::	::	::	::	3	40
Dementia senile syphilitic		1 2 1	::	I 2 I	:: ::		 I	I		:: ::	1 14 10	7 10
Diplegia, congenital spastic, with bronchitis		ı		ı		I					74	74
		1		I		I	-0			-	15	15
Forward	23	408	202	206	170	153	28,	20	39	21	9531	

Average | Pari

	ital 1899	ADI	MITI	red]	DISC	HAR	GEI)	ng 1899	Days Hosp	
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec.,1899	Total	Daily Average
Forward	23	408	202	206	170	153	28	20	39	21	9531	
Diseases of the Nervous System.—Con.												
Embolism, cerebral, with hemiplegia		ı		I					I		35	35
Embolism, cerebral, with hemiplegia, mitral stenosis		I		1		I					45	45
Epilepsy, major	2	5	2	3		5		2			194	28
" major and minor		I		I		.:	I				25	25
" major, minor, hystero		I		I		I					33	33
major, aortic regurgi- tation		I	I			I					44	44
" minor		I	I			I					30	30
Hæmorrhage, cerebral		2	I	I		I			I		II	6
Hæmorrhage, cerebral, with												-
hemiplegia and aphasia		I	I						I		5	5
Hæmorrhage, cerebral, with		2	2		١	2				1	73	37
hemiplegia											,,,	3,
physema		I	I						1		10	10
Hæmatomyelia	I	I	I			2					91	45
Hemiplegia	I	2		2		3					205	68
with aphasia		31	3	28	2	I 26	4			2	883	25
Hysteria chronic endocarditis.	4	I		I		I	-4		::		21	21
" chronic interstitial			1									
nephritis		I		I		I					II	II
" mitral stenosis		I		I		I					51	51
" mitral stenosis and		ı		I		I					9	9
regurgitation with muscular con-				1		1					9	9
traction		I	I				I				II	II
Hysterical hæmoptysis		I		I		I					20	20
" insomnia		2		2	I	I					71	36
" mania		I	1 .:	I		1 .:		I			3	3
Hystero-epilepsy		I	I	2	I	I	I				28	7
Lumbago		3 2	1	I					::	I	5	13
Melancholia		3	I	2		I	2				20	7
" with insomnia		I		I						I	12	12
" with stupor		2	I	I			1		I		35	18
Forward	31	481	221	260	174	206	38	25	44	25	11531	

Diseas S

Meningitis

Migraine.
Monopleg
Myalgia .
Myelitis .

" a
" f
" c
" I
Neuralgia

" Neurasthe

Neuritis,

Average | Pari

	ital r899	AD!	MITT	ED	I	DISC	HAR	GED		ing 1899	Days Hosp	in ital
DISEASES	In Hospital 1st Jan., 18	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec., 1899	Total	Daily Average
Forward	31	481	221	260	174	206	38	25	44	25	11531	
Diseases of the Nervous System.—Con.												
Meningitis, epidemic cerebro- spinal		2	I	ı	I					I	94	47
" chronic		I		1		I					6	6
" pneumococcus		I		I					I		I	I
" traumatic		I	I			I					21	21
" tuberculous, bron-												
cho pneumonia		I	I			.:		I			2	2
Migraine		I	I	.:		I				, I	8	8
Monoplegia, brachial Myalgia		1 2	2	I	2						50 18	50
Myelitis	::	I	I	:::		1::	1::	Ι.	::	::	2	2
" acute transverse	1 ::	I	I		1	1 ::	1		I		6	6
" chronic		2	1	2	1	I	I				37	18
" from compression		I	I			I					16	16
" cancer of prostate		I	I						I		31	31
" Pott's disease		2	2							2	89	45
Neuralgia, crural		I	I				I				23	23
" facial		2	I	I	2						26	13
" functional	I		1		1	I					15	15
" intercostal	.:	I	1 22		I	28		.:			901	12
Neurasthenia with cephalalgia	5	45	22	23 I		38	7	4		1::	81	27
with cephalalgia with enteroptosis	1::	3		I	1 ::	3	1 ::	::	1	::	45	45
with enteroptosis:		1	1			1					43	43
and hyperchlor-												1
hydria		I		I		I					55	55
" with gastroptosis.		I	1	I		I					46	46
" with glycosuria		I		I		I					IO	IO
" with hyperchlor-												1 -
hydria		I	I				I				5	5
with hypo chlor- hydria		2	I	I	l	2					71	36
with melancholia	·	I	I	1	::	1	I				16	16
with myocarditis		ī	I	1		I	1				42	42
" with chronic rheu-		-	1	1	'	1	1				-	1
matism	I		1			I					94	94
with mitral stenosis		I		I		I					3	3
Neuritis, bachial		I		I	I		1				23	23
" multiple (cause un-												0
lenoum)		2	2				1			2	162	81
known)		-										
peripheral, alcoholic.		2		2		4					109	27

	ital 1899	AD	MIT	TED			CHAI	RGEI)	ing 1899	Day Hosp	
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec., 1899	Total	Daily Average
Forward	40	566	266	300	182	266	49	31	47	31	13651	
Diseases of the Nervous												
System.—Con.												
Neuritis peripheral, post diphtheritic	 I	3 1 2	2 I I	I	 I	3 1 1		::			122 56 13	41 28 7
sema " mnsculo-spiral " nuclear " multiple nuclear " ulnar Paraplegia, ataxic " functional " Pott's Disease " spastic " spastic, Pott's dis-	::	I I I I I I I I I 2	 I I I I I	I I	 	I I 2				 I I I 	20 24 17 41 11 12 7 184 42	20 24 17 41 11 12 7 184 21
ease spastic, syphili-		2	I	I		I	I				106	53
tic. Poliomyelitis, anterior. Porencephaly. Rachialgia Sciatica. " with anzemia. Sclerosis, insular. Syphilis, cerebral. " cerebral, chronic inter-		1 4 1 7 1 3	3 1 1 5 	1 2 1	 I 5 I	1 3 2 2	I	 I 		::	49 92 6 7 172 19 84 15	49 23 6 7 25 19 28 15
stitial nephritis Tabes dorsalis Tic convulsive Thrombosis, cerebral, with	 I 	8	7 I	I I		1 4 1	4	: ::	::	 I	31 268 40	31 29 40
hemiplegia Thrombosis, with hemiparesis	1					1					11	11
and dysarthria Torticollis, spasmodic Tumor, cerebellar " cerebral " pontine	 I 	1 2 1 9 1	 I 5 I	1 1 4		i ::	I I 7	::	 I 2 I	 I	39 84 55 395 29	39 42 55 40 29
Forward	44	627	308	319	193	293	66	31	51	37	15702	

INFECTIOU Total 159-

Diphtheri Erysipelas Febricula Influenza Malaria Pyæmia, Septicæm

Typhoid. Varicella

Total 19

Aconite a ing....
Alcoholis

Lead pois Lead enc Morphinis Opium po Opium ar Lead pois interstin carditis Daily large Average

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	1899	AD	MIT	LED	1	DISC	CHAR	GEL)	ng 1899	Days Hosp	
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec., 1899	Total	Daily
Forward	44	627	308	319	193	293	66	31	51	37	15702	
INFECTIOUS AND FEBRILE DISEASES Total 159—Males 95, Females 64.												
Diphtheria. Erysipelas Febricula Influenza Malaria Pyæmia, with multiple abscesses Septicæmia, general puerperal, with pericarditis, pleurisy, and pneu-	I	2 9 15 18 3 1 2	1 4 9 11 2 1	1 5 6 7 1 2	2 9 15 19 3 1	 	 	::	· · · · · · · · · · · · · · · · · · ·	::	46 131 159 137 43 9 24 4	15 14 10 7 14 9 12 4
monia with chronic paren- chymatous neph-		I		1	I						81	81
ritis with pyo-pneumo-		I	I						I		24	24
thorax with diphtheritic vaginitis and en-		I		I					1		9	9
TyphoidVaricella	2	96 4	66	30 4	79	::	I		6	12	3435 48	5 35 12
POISONS Total 19—Males 13, Females 6.												
Aconite and belladonna poison- ingAlcoholism, acute	::	5	4	I	3	 I	·		::	.:	3 23	3 5
bronchitis		I	I		I						10	10
rium Lead poisoning, acute Lead encephalopathy Morphinism Opium poisoning Opium and chloral poisoning Lead poisoning, chronic, chronic interstitial nephritis, peri-		3 1 1	3 I I I . I	I 2 I	4 I I I	 I	 I I	·		::	96 25 25 28 3 34	24 25 25 9 3 34
carditis, with effusion		I	1						I		28	28
Forward	48	801	416	385	339	296	72	32	61	49	20132	

	ital 1899	AD	MIT	TED		DISC	CHAI	RGEI)	ing 1899	Day:	
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Dfed	Remaining 31st Dec.,1899	Total	Daily Average
Forward	48	801	416	385	339	296	72	32	61	49	20132	
GENITO-URINARY DISEASES. Total 47—Males 20, Females 27.												
Abortion Abscess pelvic Carcinoma of bladder Cystitis, chronic " acute " tuberculous,. Enuresis, nocturnal Metritis, acute Nephritis, acute parenchymatous " chronic "		I I I I I I 2 2	I	I I I I I I I I I I I I I I I I I I I	I	I I I I I 2	 	 I 			4 14 4 5 6 17 10 6 118 32	4 14 4 5 6 17 10 6 59 16
" subacute, with osteo- myelitis	3	I	5	1 5	.:	8	I	2	· · · I	1	4 405	4 31
arterio-sclerosis Nephritis, chronic interstitial, epilepsy major		2 I	I	I		I			I		37	18
Nephritis, chronic interstitial, chronic gastritis		ı	1			I					8	8
Nephritis, chronic interstitial, mitral regurgitation Nephritis, chronic interstitial,		2	1	I		I	1				89	45
mitral regurgitation, cystitis Nephritis, chronic interstitial,		I	I			I					16	16
mitral stenosis and chronic bronchitis		I		I					I	٠	26	26
phthisis		I	I							146	5	5
chitis and emphysem Nephritis, chronic interstitial.		I	I			1					10	10
Raynaud's disease		III	I I I	i	··· ··· ···			 I 	::	.:	31 13 14 5	31 13 14 5
tonitis		I		1		1					11	11
Forward	52	838	433	405	341	319	77	38	64	51	21042	

Genito-Uri

culosis . . Goitre, exo "mentia Goitre, exo sanity . . Goitre, exo ral regur Gout, acute

ral regur Gout, acute Marasmus Myxœdema Purpura H Rachitis . . Rheumatism carditis .

Rheumatisi carditis a monia . . Rheumatisi pleurisy . Rheumatisi chronic in

Rheumatism " arterio-so

C

	Hospital Jan., 1899	AD	MIT	TED		DISC	CHAI	RGE	D	ing ,	Day Hos	
DISEASES	Ist Jan.,	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec., '99	Total	Daily
Forward	52	838	433	405	341	319	77	38	64	51	21042	
Genito-Urinary Diseases—Con.												
Salpingitis " and endometritis Uræmia " with convulsions " with broncho-pneumonia and myocarditis		1 2 1	 I	I I 2 	i 	I I	::		 	· · · · · · · · · · · · · · · · · · ·	11 11 41 15	11 11 20 15
GENERAL DISEASES Total 119—Males 76, Females 43.												
Asthenia Debility senile Diabetes, mellitus. " " with tuber-	··· ··· I	3 2 4	2 2 3	2 I I		2 2 2	 I 3		::	I I	21 16 43 68	10 5 22 13
culosis	::	2	I	I	::	· · ·		::		·	6 33	3 16
mentiaGoitre, exophthalmic, with insanity		I		I		I	ı				6	6
Goitre, exophthalmic, with mitral regurgitation		I 2 2	2	I 2	2	I 2				.:	15 42 136	15 21 45
Myxœdema Purpura Hæmorrhagica Rachitis Rheumatism, acute		3 1 33	 I 27	3	 I	I		 I			16 69 14	16 23 14
carditis	3	33 I	1		32 I					4	985	28
carditis and acute lobar pneu- monia		ı	I		1						35	35
Rheumatism, subacute		3 6	3	3	3 4	3	::	:.	::	::	83 208	27 30
chronic interstitial nephrltis Rheumatism, chronic		5	2	3	::	5	::		::	::	47 98	47
arterio-sclerosis		I	I			I					48	48
Forward	58	922	483	439	386	345	83	39	67	60	23248	

MEDICAL DEPARTMENT.

	Hospital Jan., 1899 Jan., 1899 of to of									ing 1899	Days Hosp	
DISEASES	In Hospital 1st Jan., 189	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec ,1899	Total	Daily Average
Forward	58	922	483	439	386	345	83	39	67	60	23248	
Rheumatism, with chronic bronchitis	 I	1 8 1 22 1 1	1 7 1 12 1	10	6 I	1	· · · · · · · · · · · · · · · · · · ·	 I	::	··· 1	284 816 16	7 36 3 36 16 9
MISCELLANEOUS Total 9—Males 3, Females 6. Companions Clavicle, congenital absence of. Kidney, movable Malingerer Otitis media Pes planus Pharyngitis, acute		3 1 1 1 1 1 1 1 1 1	 I I I	3 1 1	· · · · · · · · · · · · · · · · · · ·	 		3 I I 			174 58 7 10 6 5	58 58 7 10 6 5
Total	59	965	508	457	395	367	84	46	67	65	24653	

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Remaining January 1st, 1899	
Discharged, cured	5
" improved 36	
" not improved 8	4
Not treated 4	6
Died	7
Remaining 6	
	- 1024
Average number of days in Hospital per patient 24.0	7

CAUSES OF DEATHS

Daily laries Average Average

IN THE MEDICAL DEPARTMENT.

Anæmia, pernicious I
Aneurism, thoracic
Arterio sclerosis
Bronchitis, chronic, and emphysema
Diabetes mellitus I
Diphtheria I
Embolism, cerebral, with hemiplegia
Endocarditis, mitral, aortic, and tricuspid regurgitation
mitral stenosis, and regurgitation. Chronic interstitial nephritis 2
" " " Aortic regurgitation I
Hæmorrhage, cerebral
" with hemiplegia and aphasia
" " chronic interstitial nephritis, myocarditis,
chronic bronchitis and emphysema
Leuchemia, myelogenous
" splenic
" pseudo
Liver, atrophic cirrhosis of
" hypertrophic cirrhosis of I
Melancholia, with stupor
Meningitis (pneumococcus)
Myelitis, acute transverse
" with cancer of prostate
Myocarditis
37 1 1.7 1 1 1 1
" " " arterio sclerosis
Peritonitis, general
Pleurisy with effusion, chronic bronchitis and emphysema
Plumbism chronic, chronic interstitial nephritis, pericarditis with effusion I
Pneumonia, acute lobar 5
" " with myocarditis
" broncho, chronic bronchitis 1
" pleuro, with acute bronchitis I
Pyopneumothorax
Formand

Fo	rward		· · • · · · · · ·				43
Rachitis							I
Septicæmia, chre	onic paren	chymato	us nephri	tis			I
" pyo	-pneumotl	norax					I
Tuberculosis, pu							
"					, myocarditi		
"	"	"	"	"	cardiac hy	pertrophy	І
"	"	"	"	"	tuberculou	s laryngitis.	I
Tumor, cerebella	ar						І
Typhoid fever							6
Uræmia, bronch							

THE ANNUAL REPORT ON TYPHOID FEVER,

By B. D. GILLIES, M.D., SENIOR RESIDENT PHYSICIAN.

During the year 1899, there were treated in the wards of this Hospital ninety-eight cases of typhoid fever, sixty-five males and thirty-three females. Of these cases eighty-six were treated to a conclusion; of the remaining twelve cases several were cured, the others are convalescent. They are not included in the present report.

The mortality was higher this year than any other since the Hospi tal opened, there being seven deaths, or 8.16 %. Death resulted in three cases from hæmorrhage, one case from hæmorrhage and perforation, one case from perforation, and in two cases from profound intoxi cation. On an average, the patients were admitted on the seventh day of the disease.

The following data are the points of interest:-

Age-

The average age of all the patients was twenty-three years, the youngest three and a half years, the oldest fifty-eight.

Arranged in decades, they are as follows:-

Under	IO ye	ears.			 												4	cases
Between																		
"	20	and	30	 		 	 										40	"
"	30	and	40.	 			 										16	"
"	40	and	50.	 	 					 							4	"
Over 50																		

Season-

The largest number of cases were admitted during the month of August, the smallest during December.

52.3 per cent. of the cases developed during July, August and September.

18.4 per cent. during October, November and December.

18.6 per cent. during April, May and June.

11.7 per cent. during January, February and March.

Duration of Cases-

The average number of days in the Hospital was 39.5.

The average duration of fever was 24.6 days.

The longest period of fever was 58 days.

The shortest period of fever was 8 days.

Infection-

In one case a definite proof of infection from milk was obtained.

Five cases were admitted from one family. Defective sewage was known to be present in the house.

In four other cases two or more members of the family were also ill with typhoid fever.

Symptoms-

ONSET AND COURSE:

In 95.4 per cent. of the cases the onset was gradual, the most frequent symptoms being: General malaise headache frontal or occipital, anorexia, pain in back and lower extremities, and chilliness. General malaise and frontal headache, with anorexia, were by far the most frequent.

In two cases pain in the abdomen was severe, localised and of sudden onset, simulating appendicitis.

Chills occurred at time of onset or during first week of the disease in 17.4 per cent, of the cases.

Diarrhaa was present at the onset in 20.9 per cent., and persisted throughout the course in 8 per cent. Enemata were given in all cases of constipation.

Epistaxis occurred at onset in 18.6 per cent.

Vomiting was present at onset in 34 per cent. of the cases. In one case it was persistent during the course of the disease, resisting treatment for some days.

Delirium was present at time of entry into hospital or during course of disease in 18.6 per cent. of the cases. In nearly every case it was of a low, muttering character.

ERUPTION:

An eruption was present in 72 per cent. of the cases. In one case it was petechial in character, while in the remaining cases it was of the nature of "rose spots."

The earliest appearance of the rash was on the 4th day of the disease.

The latest appearance of the rash was on the 40th day of the disease.

In one case the rash appeared only during the relapse.

The shortest duration of the rash was three days.

The longest duration of the rash was twenty-seven days.

The average duration of the rash was eleven days.

SPLEEN:

The spleen was palpable in 67.4 per cent. of the cases.

In one case it was palpable on the first day of the disease.

In another case it was not palpable till the fourth day of the relapse, on the twenty-fifth day of the disease.

On the average the spleen remained palpable for twelve days.

The spleen was palpable for only three days in one case, while in another it could be palpated for thirty-two days.

RELAPSE:

A definite relapse occurred in eleven cases, i.e., 12.7 per cent.

The longest duration of the relapse was twenty-nine days.

The shortest duration of the relapse was eight days.

The average duration of the relapse was eighteen days.

In three cases the relapse was more severe than the original attack.

In one case temperature had been normal for seventeen days when relapse set in, while in another temperature was normal for only twenty-four hours. One case was readmitted to the hospital for typhoid fever after having recovered from an attack four weeks previously.

FEVER:

The highest temperature recorded in any of the cases was 106 2/5°.

In one case the maximum temperature was 100 2/5°.

The average maximum temperature in all the cases was 103 2/5°.

The temperature reached 104° or over in 48.8 per cent. of the cases.

Complications-

DIGESTIVE SYSTEM:

Double parotitis developed in one case on the seventeenth day of the disease.

Cholecystitis developed in three cases.

Suppurative cholecystitis, with gangrenous ulceration of the gall-bladder and cholelithiasis, was present in one case.

Meteorism was marked in 25 per cent. of the cases.

Perforation of the bowel occurred in two cases, in one on the tenth day and in the other on the thirteenth day of the disease.

Intestinal hæmorrhage occurred in nine cases. In three cases it was the cause of death; in one case it preceded perforation; in the remaining cases recovery ensued.

CIRCULATORY SYSTEM:

Systotic murmurs developed during course of disease in five cases.

Femoral phlebitis occurred in two cases and brachial phlebitis in one case.

RESPIRATORY SYSTEM:

Acute bronchitis was present at onset in 14.9 per cent. of the cases.

Broncho-pneumonia developed in one case.

Pulmonary œdema was present in one case.

In two cases pleurisy with effusion developed.

Tuberculosis was present in one case.

OTHER SYSTEMS:

Periostitis developed during the attack in one case, and in the early stage of convalescence in a second case.

Abscesses developed during convalescence in one case.

Myositis of triceps and deltoid muscles developed on seventy-second day of th disease.

Suppurative otitis media was present in three cases.

Staphyloeocci were present in pus in one case.

Acute nephritis occurred in four cases. In all cases it developed during the active stage of the disease.

WIDAL TEST:

This test has been employed in all the cases, and in only four cases was the reaction negative throughout the course of the disease. Of these, three cases were regarded as abortive typhoid. The temperature remained elevated in the most prolonged case for ten days. No rose spots were present. The reaction appeared in one case as early as the fourth day of the disease. In one case it was not positive till the eighteenth day. It was present on the average on the eighth day. The reaction has been tried in six cases at date of discharge from the hospital, and in every case has been positive. This is receiving further investigation.

SYNOPSIS OF THE FATAL CASES.

CASE 1.-H. T. (Case No. 3645.) Male, Æt. 32, commercial traveller.

Admitted Jan. 10th, 1899, on the eighth day of the disease, complaining of headache, general malaise, anorexia and insomnia, which gradually and progressively increased in severity. No delirium.

On admission, he was a well-nourished man; mental state good; pulse 96; good volume and fair tension; abdomen somewhat distended; rose spots present; widal reaction positive.

SUBSEQUENT EVENTS:

On the ninth day the patient's condition was satisfactory except that the distension of the abdomen persisted. The following morning patient suddenly had a hæmorrhage from the bowel, not large in amount; condition fair. Through the day the hæmorrhage recurred, and towards evening patient became weaker; temperature became subnormal; pulse 100 to 120. Abdominal distension increased. On the eleventh day of the disease there was no recurrence of the hæmorrhage, but patient complained of severe pain in the epigastrium; distension persisted to the same degree as on previous day; pulse weaker, 88 to 112; temperature remained below 100° throughout the day. The patient's condition was much worse the following day; distension extreme; pulse rapid and weak, 120 to 150; face dusky; occasional sharp pain in the abdomen. The mental condition was good. Towards night patient had a slight intestinal hæmorrhage; patient became restless; extremities were cold; pulse imperceptible. Death ensued on the twelfth day of the disease.

Cause of death-Perforation with hæmorrhage.

CASE 11.- J. R. (Case No. 3547.) Female, Æ. 18, servant.

Admitted Jan. 10th, 1899, on the eighth day of the disease, complaining of headache, anorexia, insomnia and diarrhea. The patient had been delirious since the fourth day of the disease.

On admission the patient was delirious, but did not attempt to get out of bed. Pulse rapid and of low tension, 100 to 120; abdomen distended; rose spots present; Widal reaction positive; diarrhœa was present.

SUBSEQUENT EVENTS:

The patient's condition improved till the morning of the eleventh day of the disease, when she had an intestinal hæmorrhage. Temperature fell rapidly and became subnormal; pulse 88 to 120. The condition of patient improved slightly during the day. Vomiting of bile-stained mucus and curdled milk occurred several times in the next twelve hours. The hæmorrhage recurred on the morning of the twelfth day, but the general condition had improved. Another hæmorrhage occurred a few hours later, followed almost immediately by a chill, after which temperature rose to 104°; pulse 122. No jaundice. No pain in abdomen. The hæmorrhage again set in towards morning, and blood oozed from the rectum throughout the night. Pulse rate 160 On the thirteenth day the patient vomited bile-stained fluid on several occasions. The oozing from the rectum ceased this morning, but a few hours later the patient had a profuse hæmorrhage. Pulse imperceptible. Extremities and lips cyanosed. Patient died on the thirteenth day of the disease.

Cause of death-Intestinal hæmorrhage.

Autopsy showed presence of two ulcers in ileum, numerous ulcers in carcum, and a few in colon. The large intestine was filled with blood.

CASE III.-E. M. (Case No, 3833.) Male, Æt. 34, farmer.

Admitted March 20th, 1899, on the sixth day of the disease, complaining of frontal headache, malaise, anorexia, and diarrheea.

On admission he was a well-nourished man; rather dull and apathetic; tongue dry and brown; slight abdominal distension; no rose spots; Widal reaction negative. Temperature 104°. Pulse 100.

SUBSEQUENT EVENTS:

The following day rose spots appeared over the abdomen, but the Widal reaction was not positive till the eighth day. Diarrhoea slight, abdominal distension was not marked. On the tenth day of the disease patient had a slight intestinal hæmorrhage. Pulse and temperature were not affected. Condition was satisfactory till the thirteenth day of the disease at 5 p.m., when the patient began to complain of severe abdominal pain, situated chiefly in the right side of the abdomen. Half an hour later patient had a large, liquid stool, slightly blood-tinged. The abdominal pain was relieved and the distension to a large degree disappeared. Pulse at 6 p.m., 130; temperature had dropped from 102 4/5° to 100 4/5°. Three hours later, pulse 136;

temperature 103 2/5°. At I a.m. on the fourteenth day patient vomited. No tenderness of the abdomen present, no distension, and no rigidity. The vomiting persisted till morning. Patient began to hiccough about 3 a.m. Pulse 120 to 124; temperature 100° at 6 a.m. At 8 a.m. there was slight pain in the abdomen, which was somewhat distended. Resistance was felt on the left side of the abdomen, and slight rigidity over the lower part of the abdomen on the right side. Liver dulness 1½″ to 2″. No collapse. Mental state fair. At 8 a.m. temperature 99; pulse 104. Slight lividity of lips. Operation was decided upon and performed at 10 a.m.

Free turbid fluid was present in peritoneum, not localised. The visceral and parietal peritoneum were injected. Three inches from the cæcum a pin-hole perforation was found. No adhesions about the opening. The perforation was closed by three through and through sutures, and these with bowel were inverted and closed in with three rows of Lembert sutures. The abdomen was irrigated with saline solution and drainage provided for. Vomiting persisted after operation. Pulse became weak and rapid, 136 to 146. The patient died ten hours after operation. Cultures from peritoneal fluid showed the presence of bacillus coli and staphylococcus pyogenes aureus.

Cause of death-Perforation.

CASE IV.-J. D. (Case No. 4064.) Male, Æt. 24, laborer.

Admitted July 17th, 1899, on the first day of the disease, complaining of head-ache, loss of appetite, pains in back and legs.

On admission, a fairly nourished man; lips cyanosed; mental state dull and listless; abdomen somewhat distended; no tenderness; no rose spots; pulse irregular and somewhat accelerated, 88. A rough presystolic thrill palpable at apex, and on auscultation a very harsh presystolic murmur followed by a blowing systolic murmur were audible at apex.

SUBSEQUENT EVENTS:

The course of the disease was uneventful during the first two weeks. Widal reaction was positive on the ninth day and rose spots appeared on the tenth. No delirium. No distension of the abdomen. On the night of the fifteenth day of the disease the patient had a small intestinal hæmorrhage. Temperature fell rapidly and became subnormal; pulse remained of fair volume and tension and did not increase in frequency, 84. On the sixteenth day the patient's condition was fair. There was no recurrence of the hæmorrhage. Towards evening the patient became restless, and perspired freely. Temperature 102; pulse 100. At 3 a.m. on the seventeenth day patient had a profuse hæmorrhage. Pulse became weak and rapid, 132. Four hours later another severe hæmorrhage occurred. Patient became collapsed. Hæmorrhage recurred at intervals throughout the night, and on the eighteenth day patient's pulse was very weak, 100 to 126; respirations sighing; extremities cold; temperature subnormal. No hæmorrhage occurred throughout the day. On the nineteenth day hæmorrhage recurred on two occasions. The pulse became imperceptible, and patient died.

Cause of death-Intestinal hæmorrhage.

Autopsy showed extensive ulceration in the ileum and cæcum. Ileum and colon contained large amount of blood. Spleen and gall-bladder gave a pure culture of the typhoid bacillus.

CASE V .- J. B. S. (Case No. 4196.) Female, Æt. 31.

Admitted Aug. 7th, 1899, on the twelfth day of the disease, complaining of fever, diarrhoea, pain in the abdomen, and chills. Patient had left Liverpool on the first day of the disease, and arrived in Montreal on the twelfth day.

On admission, patient fairly nourished; dull and listless; no delivium; marked cyanosis of lips and tips of fingers; pulse 130; tongue dry and brown; rose spots absent; abdomen was distended and tender throughout; no rigidity: Widal reaction was positive.

SUBSEQUENT EVENTS:

During the four succeeding days after entry pulse was rapid and weak, 120 to 148. Temperature seldom reached 101°. Diarrhœa persisted and meteorism obstinate; mental condition poor. On the seventeenth and eighteenth days of the disease the temperature remained between 102° and 103°, resisting sponging; pulse 130 to 160. The patient had a severe chill on the evening of the eighteenth day; temperature 105 2/5°; pulse very weak; stools passed involuntarily; patient became semi-stuporose. Temperature reached 106 2/5° on the morning of the nineteenth day, but gradually declined throughout the day; pulse rapid and slightly irregular, 120 to 140. On the twentieth and twenty-first days of the disease the temperature ranged between 99° and 102°; pulse 120 to 140. Diarrhoea persisted and distension was marked; no jaundice; liver was not palpable. On the morning of the twenty-second day the patient had another severe rigor; temperature rose to 104 3/5°; pulse 144; four hours later temperature 105 2/5°; pulse 160. The patient became semi-stuporose, the temperature steadily de clined and in twelve hours became normal and remained so till time of death. which took place on the twenty-third day of the disease. The respirations had increased in frequency on the twenty-third day, and on examination a small area of dulness was found over base of right lung posteriorly. Blowing breathing was present over dull area.

Cause of death-Toxæmia.

CASE VI.-M. O'G. (Case No. 4488.) Female, Æt. 21, housemaid.

Admitted Nov. 27th, 1899, on the seventh day of the disease, complaining of headache, general malaise, pain in back, and feverishness.

On admission delirium was present; pulse 112; tongue moist, coated with a brownish fur; abdomen distended; rose spots present; Widal reaction not positive.

SUBSEQUENT EVENTS:

Delirium became more pronounced, and temperature ranged between 100° and 105° during eighth, ninth and tenth days; pulse somewhat irregular, rate 96 to 126; Widal positive on tenth day; abdominal distension present. On eleventh and twelfth days the temperature was more elevated; pulse more rapid, 110 to 136, and delirium almost constant. The following day the condition was more severe; the temperature reached 105 2/5°; the pulse was rapid and irregular, 120 to 140. Pulmonary cedema complicated the condition and patient died.

Cause of death-Toxæmia.

Autopsy showed swelling of Peyer's patches from three feet above ileocæcal valve.

Ulceration in no case had advanced to a marked degree. Spleen greatly swollen, soft and diffluent. Cultures from spleen and mesenteric glands showed typhoid bacillus.

CASE VII.-W.D. (Case No. 4550.) Male, Æt. 42, blacksmith.

Admitted Dec. 22nd, 1899. The day of the disease could not be definitely determined as patient was in a stuporose condition from the time of entry into the hospital.

On admission, mental condition poor; no delirium; tongue dry and brown; abdomen distended; rose spots present; Widal reaction was doubtful.

SUBSEQUENT EVENTS:

Patient remained in a dull stuporose condition till towards the evening of the day of admission, when he became somewhat restless and slept poorly during the night. Twenty-seven hours after entry patient had a profuse intestinal hæmorrhage. Temperature dropped rapidly and became subnormal; pulse rate increased to 140. The hæmorrhage recurred frequently during the day.

The extremities became cold; pulse towards evening became very thready. Throughout the night and the following day hæmorrhage persisted, and the patient died on the evening of the third day after admission, within thirty hours of the time of appearance of the hæmorrhage.

Cause of death-Intestinal hæmorrhage.

Autopsy showed extensive and advanced ulceration of Peyer's patches in the lower part of the ileum, also of the solitary follicles in the cæcum and ascending colon. The seat of the hæmorrhage was not recognized. A large amount of blood was present in the last four feet of the ileum. The spleen and mesenteric glands were swollen and pulpy.

Cholelithiasis with Cholecystitis Complicating Typhoid Fever.—Cholecystotomy.—Recovery.

C. H., Æt. 28, student.

Admitted October 11th, 1899, on the second day of the disease, complaining of general malaise, pain in back, and feverishness.

FAMILY HISTORY. - Negative.

- PAST HISTORY.—Patient had measles and whooping cough when a child; pneumonia when fifteen years of age. From two years of age till twelve he suffered from "weakness of back," preventing him from stooping to pick up objects. Past history otherwise negative.
- PRESENT ILLNESS.—One week ago patient began to feel ill. He suffered from pains all over his body, especially in the back of the head and neck. Three days later he began to feel feverish, and appetite became poor. There was no vomiting, but constipation obstinate. No chills nor chilliness. No delirium.
- On admission, temperature was 99.6°, pulse 84. The patient was a poorly nourished man; expression dull, and mental condition apathetic. Chest long and narrow, expansion equal. No adventitious sounds audible in the chest. The abdomen somewhat retracted; no rose spots; slight tenderness in umbilical region. Liver and spleen not palpable.
- On the eighth, ninth and tenth days of the disease patient's condition remained much the same as above noted. The temperature varied from 99.8° to 102.2°; pulse 64 to 96. There was some retention of urine during this time. Rose spots appeared on the tenth day. Constipation was relieved by enemata. On the twelfth day the Widal reaction became positive, and the following day the spleen was palpable. Temperature 99.2° to 102.2°; pulse 66 to 84. During the next three days the patient felt fairly comfortable. Temperature remained the same, and pulse not accelerated. No abdominal distension was present, no pain nor tenderness. On the seventeenth day of the disease, about 5.30 p.m., the patient began to complain of abdominal pain. This was at first situated in the middle line about two inches below the ensiform cartilage. Very soon, however, the pain was referred to the right hypochondrium in the nipple line, and had increased in severity. It persisted only for a short time, and two hours later the patient felt comfortable. The pulse and temperature remained unchanged. Locally there was slight tenderness, no mass and no rigidity. At 9 p.m. the patient was nauseated and vomited. The vomitus, about 3iv, consisted of curdled milk streaked with blood. At 9.40 p.m. a severe rigor set in lasting fifteen minutes; temperature rose from 100.4° to 104°; pulse 100. At 10.15 p.m., temperature 105°; pulse 100; respiration 24. The chill was followed by profuse perspiration. Locally the tenderness had increased, and slight rigidity could be detected in the upper part of the abdomen on the right side in the nipple line, beginning just below costal margin and extending downwards a distance of 3" by 2" in width. At 11.30 p.m., temperature 100 4/5°; pulse 90. No mass was palpable; rigidity well marked and percussion note slightly higher pitched over a small area extending 11/2" downwards from costal margin in mammary line. Half an hour later the patient had a second rigor; temperature rose to 104.4°; pulse 102. From this time till morning the pain diminished; pulse and temperature declined. On the eighteenth day patient's condition was somewhat improved; tenderness less marked, and rigidity only slight; no tumor palpable; no dulness over

point of greatest tenderness. Urine contains a trace of bile. The following day the conjunctiva and skin icteroid; pain absent; tenderness slight; urine deeply bile-stained. On the twentieth day the general condition improved; pulse 76 to 84; temperature 99.4° to 101.4°. Jaundice had deepened; no pain or tenderness. Two days later the jaundice was much the same. Slight tenderness was present about I" to the right of the umbilicus; no pain. On the next day, the twenty-third day of the disease, the tenderness was still present in the same region on deep palpation; jaundice persisted; bile was present in the urine; stools clay colored. The following day condition much the same; temperature 102.2°; pulse 88; tenderness less marked; jaundice less intense. On the twenty-sixth day the jaundice was much less marked, and tenderness had entirely disappeared from the abdomen. The temperature was somewhat more elevated this day than at any time since the seventeenth day-103.8°. On the night of the twenty-seventh day the patient had a profuse perspiration. On the twenty-ninth day the pain recurred in right hypochondrium; patient complained of chilly sensations, but did not experience a definite rigor, urine contained bile; jaundice was slightly less marked. The following day pain and tenderness were still present; temperature intermittent, 97.4° to 101.4°; pulse 72 to 90. Two days later the pain became very acute, and tenderness had increased; jaundice present; temperature 103.4°; pulse 104. The following day the patient vomited; tenderness was very pronounced. Examination of blood shewed presence of slight leucocytosis, 10.000 white corpuscles per c.m. Operation was decided upon, and was performed on the thirty-fifth day.

OPERATION. - A longitudinal incision was made parallel to the right rectus beginning at level of ninth costal cartilage and extending downwards 4". The liver was visible at the costal margin covered with inflammatory lymph. The gall-bladder was somewhat enlarged and firmly adherent to undersurface of liver. The adhesions were separated and the gall-bladder drawn into the wound. At the neck of the gall-bladder a stone was felt. On incision into the gall-bladder the inner surface of its base was found dark and gangrenous for about 11/2" in circumference, and on the roof and floor internally were seen two small areas about one c.m. in diameter, where the walls had nearly ulcerated through. Pus exuded from these gangrenous edges. The gall-bladder was now sutured circularly to the parietal peritoneum with silk sutures. One stone the size of an almond was removed and also two irregular smaller pieces found at the junction of the cystic duct with the gall-bladder. One additional silk suture was put into the lower edge of the gall-bladder as a support. Three pieces of iodoform gauze were packed around the gall-bladder and a rubber drain was inserted into the bladder itself. One and a half inches of the gall-bladder remained above the edge of the peritoneum. Silkworm gut sutures were introduced into the lower 31/2" of the wound. The patient left the operating room in good condition. The next day the patient felt comfortable, and also the day following. The wound discharged pure bile, the stools were of slightly brownish color, and no bile in the urine. On the fifth day after operation the wound was dressed; the three

pieces of iodoform gauze were removed. The gall-bladder looked healthy. No pus was present. The rubber drain was still left in, and dressing was the same as at time of operation. Two days later the wound was again dressed. Discharge of bile less free. Gall-bladder was healthy looking, and one piece of iodoform gauze was left in below it. One week later the sutures were removed and iodoform gauze left out. The patient's condition was improving steadily, there having been no elevation of temperature since the day preceding first dressing. Stools were of normal color, and bile absent from urine. The patient improved steadily; the amount of bile discharged from the incision diminished. One month and two days from the time of operation the fistula was closed, and patient made an uninterrupted recovery.

TABLE OF CASES OF TYPHOID FEVER

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Admitted into the Royal Victoria Hospital during the six years ending December 31st, 1899.

Year	Number of Cases	NUMBER OF DEATHS	PERCENTAGE OF MORTALITY
1894	84	3	3.5
1895	84	4	4.7
1896	72	o	0.0
1897	75	7	9.3
1898	93	4	4.3
1899	86	7	8.1
Totals	494	25	5.0

CAUSES OF DEATH IN 25 CASES

	1894	1895	1896	1897	1898	1899	Percentage Mortality
Perforation		3		2	1	2	1.6
Intoxication	1			2	2	2	1.4
Hæmorrhage	I			I	1	3	1.2
Septico-Pyæmia		1					.2
Suppurative Cholecystitis				1			.2
Broncho Bromine	V-3						.2
Abdominal Distension				ı			.2

REPORT ON THE CASES OF PNEUMONIA,

By B. D. GILLIES, M.D., SENIOR RESIDENT PHYSICIAN.

During the year 1899 there were treated in the medical wards of the Hospital 39 cases of pneumonia—17 males and 22 females. There were in all six deaths, or a mortality of 15.3 per cent. All of these cases were lobar in type. Comparing the mortality in lobar pneumonia during the past six years, it is noted that of 189 cases 35 resulted in death, or 18.4 per cent.

The following data are of interest:—

Etiology-

AGE.—The average age was 25 years, the oldest patient being 72 and the youngest 15 months.

In decades they are as follows:-

Under 10	year	S				 											11	cases.
Between	10 an	d 20	years		 			,									4	"
"	20 an	nd 30) //		 						 						10	"
"	30 an	d 40	"		 					 							5	"
"	40 an	d 50	"		 												4	"
"	50 an	d 60	"		 . ,												3	"
"	60 an	d 70	"	 					 				 	 			I	case.
Over 70	vears			 					 				 				I	"

Season-

The largest number of cases were admitted during the month of January, the smallest during the month of June.

Thirty-six per cent. of the cases developed during December, January and February.

Twenty-eight per cent. during March, April and May.

Ten per cent. during June, July and August.

Twenty-six per cent. during September, October and November.

Exposure-

In 33.3 per cent, there was a definite history of exposure to cold or wet immediately preceding the onset of the illness. In one case the attack followed three days after an operation for adenoids. Ether was the anæsthetic employed.

D

Predisposing Cause-

Twenty per cent. were suffering from disease of the upper respiratory passages immediately before the onset.

In five per cent. there was a history of a preceding attack of influenza. One case followed immediately after a drinking bout.

Six cases had suffered from previous attacks of pneumonia.

Onset-

CHILL.—In 33.3 per cent. this was the first symptom. The average duration was about half an hour. In 17.9 per cent. there were chilly sensations at the onset with no definite rigor.

Pain.—Was found present at the onset in 76.8 per cent. In 26 per cent. it was sufficiently severe to require special treatment. In almost all cases it was over or in close proximity to the pulmonary lesion. In two cases it was referred to the abdomen.

VOMITING-Occurred at an early period in the disease in 33.3 per cent.

COUGH—Was present in 76 per cent., being hard and painful in 90 per cent. of these.

Anorexia and malaise were present from the onset in all cases.

Feverishness was complained of in 70 per cent.

Delirium occurred at the onset in twelve per cent. of the cases.

In ten per cent. the onset was gradual, with malaise, anorexia and feverishness.

One case walked into the hospital on the fifth day of the disease.

Symptoms and Course-

The average duration of fever was eleven days. The shortest course was four days, ending by crisis. The longest uncomplicated case was seventeen days, when both lower lobes posteriorly were involved in one case, and in another the lower lobe posteriorly and the opposite apex were successively involved.

Part Involved.—The lower lobes were involved in 87 per cent., the upper lobes in 17.9 per cent. In six cases both upper and lower lobes were involved. In twenty-two cases the right lung was involved, in seven cases the left, and in ten cases both lungs.

Sputum.—In 35 per cent, the sputum was tenacious and blood-stained. In seventeen cases there was no sputum. Eleven of these were children under ten years of age. Result of bacteriological examination of the sputum noted in 40 per cent, of the cases revealed the presence of the diplococcus pneumoniæ in each case.

COUGH.—This was present in 87 per cent. The average date of onset was the second day. In 28 per cent. it was severe, requiring special treatment.

ALIMENTARY SYMPTOMS.—Anorexia was present in all cases. Constipation in 53.8 per cent. Vomiting during the course of the disease was noted in 17 per cent. Diarrhœa occurred in two cases.

Delirium was present in eight per cent. of the cases.

CRISIS—Occurred in 33.3 per cent. of all the cases. On the average it occurred on the eighth day. The date of the earliest crisis was the fourth day; the latest the tenth day. Pseudo crisis occurred in 7.8 per cent. of the cases. The termination was by lysis in 43.6 per cent.

Complications-

HERPES-Occurred in twelve cases; ten of these were labial and two were facial.

PLEURISY WITH EFFUSION—Was present in three cases; in one case aspiration was necessary. The remaining cases cleared up without special treatment.

EMPYÆMA—Occurred in one case, and was cured by operative interference.

Pericarditis with Effusion—Was present in one case combined with pleurisy with effusion.

MYOCARDITIS complicated the condition in one case.

ERYTHEMA NODOSUM-Occurred during the course of the disease in one case.

DELAYED RESOLUTION—Occurred in two cases.

REPORT ON ACUTE RHEUMATISM,

For the Year ending 31st December, 1899.

By. T. TURNBULL, M.D., RESIDENT PHYSICIAN.

During the year 1899 there were treated in the medical wards of the Hospital thirty-five cases of acute rheumatism, of whom twenty-nine were males and six females.

As regards season, the records show that the disease was more prevalent during April, May, June and July than any other four consecutive months, nineteen cases having been treated during that time. June heads the list with the largest number of cases, viz., seven. July and April come next with five and four respectively.

Average age of the patient 25 years.

Oldest patient, 47 years.

Youngest patient, 10 years.

Between	5 an	d 10	years of	age		. ,				 	 	 		No	patients.
"	10 an	d 15	"											3	"
"	15 an	d 20	"											-	"
"	20 an	d 25	"											10	"
"	25 an	d 30	"											5	
"	30 an	d 35	"											4	
"	35 an	d 40	"											3	"
"	40 an	d 45	"											2	"
Over	45		"											,	patient

A family history of rheumatism was present in seven cases.

In seven cases there had been one or more attacks of tonsillitis; in one case quinzy preceded the arthritis by a few days.

Preceding attacks had occurred in sixteen of the thirty-five cases. One case gave a history of eight definite attacks in eighteen years, while in five cases there had been at least two previous attacks and frequently recurring joint pains.

No history of chorea could be obtained in any of the cases.

In twenty-eight cases the onset was articular.

In four cases tonsillitis preceded the arthritis; in one case quinzy preceded the joint affection.

In two cases the onset was marked by pain in the chest; one developed pericarditis; the other pleurisy with effusion.

The joints affected in order of frequency were as follows:

Knees 28	cases.
Ankles 27	"
Shoulders 17	"
Hips 13	"
Elbows 10	"
Metacarpo-phalangeal 8	"
Metatarso-phalangeal 3	"
Interphalangeal of hands 7	
" of feet 2	"
Acromio-clavicular	case

In six cases there was pain in lower dorsal and upper lumbar region.

Endocarditis was present in 22 of the 35 cases, and may be classified as follows:

Mitral regurgitation alone		cases
" " with		
aortic stenosis and regurgitation	3	"
Pericarditis occurred in	2	"
Fleurisy with effusion occurred in	3	"
Dry pleurisy occurred in	I	case.

REPORT OF THE SURGICAL DEPARTMENT,

For the Year ending 31st December, 1899.

BY C. B. KEENAN, M.D., SENIOR RESIDENT SURGEON.

Loco

II. Teno Gang Bursi

Cont

Ostei Ostei

Oste

Neci

Cari

Daci

Arthri

	rsital 1899	AD	MIT	TED		DIS	CHA	RGE	0	ng 1899	Day Hos	s in pital
DISEASES	In Hospital Ist Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec., 1899	Total	Daily
GENERAL DISEASES.												
Enteroptosis		I	I	::	::	I	::	::	::		18	18
synovitis of wrist joints Hodgkins' disease Leukæmia Malaria. Pyæmia, chronic " septico with suppura-	::	1 2 1 3	I 2 I 2	 I	· · · · · · · · · · · · · · · · · · ·	 I		 2 I			9 5 14 133	1 9 2.2 14 44·3
tive cholecystitis. Toxæmia. Septicæmia. " scrofula Sepsis, gonorrhœal. Syphilis, primary. " secondary " tertiary.		1 1 1 1 4 5 17	I 4 2 II	 I I I 3	 I 7	 1 4 6 9	· · · · · · · · · · · · · · · · · · ·		 		6 10 4 33 3 30 122 448	6 10 4 33 7·5 17.4 28.0
LOCAL DISEASES												
RESPIRATORY SYSTEM— Empyæma	I	6	4	2	6				1		178	25.4
peritonitis	::	I	I I I	::	::		::	ï	 	::	2 I 2	2 I 2
LOCOMOTOR SYSTEM.												
I. MUSCLES— Torticollis	::	6 1 4	4 I 2	2	5	I I	 I I	2		::	126 7 23	2I 7 13.2
Forward	3	61	40	21	21	27	4	6	5	I	1177	

	ital 1899	ADM	ИІТТ	ED		DIS	CHAI	RGEI	0	ing 1899	Days Hosp	
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec., 1899	Total	Daily Average
Forward	3	61	40	21	21	27	4	6	5	1	1177	
Locomotor System Con.												
II. TENDONS, BURSÆ& FASCIA Teno-synovitis of finger Ganglion of wrist Bursitis, prepatellar " pretibial " of elbow Contracted palmar fascia	::	I I 2 I 2	 I 2 I I 2	I II	 I I I I	I 	::		::		8 1 20 5 11 6	8 1 10 5 11 3
Osteitis of tibia, sclerosing. Osteomyelitis of femur "tibia "ilium "radius "os calcis "phalanges. Osteo periostitis of femur ""radius ""radius ""nadius ""nadius """ribs """"ribs """"""""""""""""""""""""""""""""""	 I I	2 4 13 1 1 2 3 2 2 2 1 3 2	2 3 10 1 1 3 1 2 2 2 2 1 2 2 2 3 		1 2 5 1 · · · · · · · · · · · · · · · · · ·	I 2 6 6 I		·· · · · · · · · · · · · · · · · · · ·			32 164 407 58 16 11 25 37 36 19 35 4 40 667 8 28	16 41 33.9 58 16 5.5 8.3 12.3 18 19 17.5 3 18.6 4 40 41.7 8
" sternum, with bron- cho-pneumonia " humerus " tibia " tarsus Dactylitis, tubercular Chondritis		3 1 3	 3 1 3	 I 	 1 2 1 3	 I	 	::	::	::	13 28 109 2 74	36.3
JOINTS. Arthritis of knee, tubercular	2	10	6	4	6	3		I		I	718	65.2
" " with osteo myelitis o tibia	f	ı	ı			1					29	29
" " septic, with septicæmia	n	ı		1					ı		3	3
· Forward	-	147	102	45	67	59	9	9	6	5	3850	

25.4

2 I 2

2I 7 13.2

	pital 1899	AI	MIT	TED		DIS	CHA	RGE	D .	ng 1800	Day Hos	ys in spital
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec., 1800	Total	Daily Average
Forward	8	147	102	45	67	59	9	-	6	5	3850	
Joints.—Con.												
Arthritis of hip, tubercular sacro-iliac joint, tu-	I	11	4	7	4	5				3	898	81.6
bercular " shoulder, tubercular " wrist, tubercular elbow, " Synovitis of knee, traumatic " midtarsal articula-	 I 	1 1 2 6	I I I 5	I I	1 3	1 2 1 3		 I	:: :: :: ::	:: :: ::	7 41 29 32 84	7 41 14.5 16 14
Ankylosis of knee in faulty po-		I	I				. 1				1	I
sition, from septic arthritis Ankylosis of elbow, traumatic " shoulder, " " hip, pseudo " multiple joints, fol-		6 1 1 1	6 I 	 I	4	 I I		2 I I	::	:: :: ::	227 I 18 34	37.8 I 18 17
lowing sepsis	::	2 3	I 2	3	::	2 2	::	3	::	.:	63 90 35	31.2 45 11.6
DIGESTIVE SYSTEM.												
I. Œ80PHAGUS— Stricture of œsophagus " " from cancer of cardia	1	1		1		2					36	18
II. STOMACH— Gastric ulcer, perforated Gastritis, acute Gastralgia		3 3 1	 2 1	3 1	2 2	I	::				103	34.3
Hernia, inguinal		35 1 2 1 2 7	32 I 2 4	3 2 I	23 I I I 6	2	···	4 I		6	753 13 31 30 38 143	7 21.5 13 15.2 30 19 20.4
Intestinal obstruction from adhesions		2	2		I				I		24	12
Forward	12	208	172	76	118	84	12	22	9	15	49 6667	16.3

Perfor Fæcal Enteri Consti

IV. REG

ano Fistul Stricte fora gen Recta

V. PER Tuber

VI. Ap Acute on) Acute Chron

Apperabs
Apperatus
Apperatus
Apperatus

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Appe

	al 899	AD	итт	ED	I	DISC	HAR	GED	-	899	Days Hospi	
DISEASES	In Hospital 1st Ian., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec.,1899		Daily Average
Forward	12	248	172	76	118	84	12	22	9	15	6667	
Digestive System.—Con.												
Perforated ulcer, typhoidal Fæcal fistulaEnteritis, tubercular Constipation	::	3 1	I 	 2 I I	 I		 I		 I 	::	135 8 1	1 45 8 1
IV. RECTUM AND ANUS— Hæmorrhoids		23	16	7	19	2		2			180	14.7
ano Fistula in ano Stricture of rectum " " with per-	···	8	7	I I 	1 6 	 I	::	2		::	34 126 9	34 15.9 9
foration of intestines and general peritonitis Rectal hæmorrhage		I	·	I	::		::		I	.:	I	I
V. PERITONEUM— Tuberculosis of peritoneum		ı		I	I						32	32
with miliary tuberculosis		I		I					I		61	61
VI. APPENDICITIS— Acute, catarrhal (not operated on)	···	6 9 15 3 20	3 4 7 2 14	3 5 8 1 6	5 7 14 18	 I I 3				1 1 3	30 207 307 31 561	5 23 20.4 10.3 28.5
mesenteric lymph-adenitis and abscesses Appendicitis, chronic, with		1	I						I		37	30
abscess		I	1						I		I	I
retro-cæcal abscess Appendicitis, sub-acute acute, w i t h	::	5	I 2	3	3		::	::			30 102	30 20.4
Appendicitis, acute, perfor		1 25	14	I	I 24			::		::	21 713	2I 26.3
and abscess		2	2		I				3	I	45	22.5
and gen. perit	-	7	7		4				-		-	23
Forward	16	386	256	130	224	95	14	28	20	21	9502	

Daily la signal Average

81.6

31.2 45 11.6

18 51

34·3 6 7

21.5 13 15.2 30 19 20.4 12

	pital r899	AI	TIMO	TEL			CHA		D	ing 1899	Day Hos	ys in spital
DISEASES	In Hospital Ist Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec., 1899	Total	Daily
Forward	16	386	256	130	224	95	14	28	20	21	9502	
Digestive System.—Con.												
Appendicitis, acute, gangre-	2	6	4	2	7				ı		142	17.7
Appendicitis, acute, gangre- nous, and gen. perit		5	5	1	3				2		99	
VII. GALL-BLADDER AND PAS- SAGES—												,,,
Cholelithiasis with cholecys-		8	2	6	6	I			I		232	29
titis	::	I	. ·	ı	1::		::	::	::	I	44	44 16
ductObstruction to common bile		I		I	I						44	44
duct and pancreatic duct		I	I						I		4	4
VIII. LIVER— Cirrhosis of liver		2		2			1	I			37	18.5
LYMPH GLANDS.												
Adenitis, cervical tubercular " sub-maxillary " axillary, tubercular " inguinal, suppurative. " mesenteric, following puerperal septicæmia	· · · · · · · · · · · · · · · · · · ·	19 4 2 19	9 2 17	10 2 2 2 2	13 3 1 19	4 I I		2	::	::	241 46 32 296	12.6 11.2 16 15.2
NERVOUS SYSTEM.											126	126
I. FUNCTIONAL— Neurasthenia. " sexual. Hysteria. Neurosis.	I	3 1 2 2	3 1 	2 2	I	I I I	I I	I			63 8 18	15.7
II. ORGANIC— (a.) Peripheral— Neuralgia, trifacial " intercostal " spinal " mammary	::	1 2 1 1	2	I I	I I 	 I 	·· ··	::	::	::	16 22 34 15	16 11 34 15
Forward	20	469	303	166	281	109	19	33	25	22	11053	Brain,

Nera Scia Coc Par

(b.) Me
Cor
scal

I. Kida Renal "rosi Pyelit Renal "Mova Neph

Vesic Cysti "Pares Incor

PROSTA Prost Prost

IV. Pr

m

Daily Average Average

17.7

18.5

12.6 11.2 15.2

	tal 899	ADM	TTIN	ED	I	DISC	HAR	GED)	ng 1899	Days Hospi	
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec., 1899	Total	Daily Average
Forward	20	469	303	166	281	109	19	33	25	22	11053	
Nervous System.—Con.												
Sciatica		2 1	2		2	2	.:	::	::	:: ::	47 34 16	23.5 17
traumatic(b.) Cerebral—		I	I		I						10	10
Meningitis, basilar suppurative		1	I						I		17	17
Concussion of brain, with scalp wound		2	2						I	I	7	3.5
GENITO-URINARY SYSTEM.												
I. KIDNEY— Renal calculus " " with pyoneph-		13	11	2	8	2		2		I	273	21
rosis	 	2 2 2 6 6	2 2 2 1 4	 5 2	1 3 1	I I I 2 4	 I 	 I I	:: :: :: ::	 	33 18 14 22 135 142	33 9 7 11 19.2 2.3
II. BLADDER— Vesical calculus	I I	2 1 6 1 2	2 I 5 I 2	 I	3 2	 I 2 I I		2	 I		185 6 126 3 27	61.6 6 22.2 3 13.2
Incontinence of urine, from tabes dorsalis and stricture Retention of urine		I	I	::	· · ·	I	::	::	::	::	4I 3	4I 3
PROSTATE— Prostate, hypertrophy of Prostatitis, acute with abscess		6 1	I	::	· · · · · · · · · · · · · · · · · · ·	2 I		3		::	121 17 12	20. I 17 12
IV. PENIS— Phimosis, congenital acquired with pri	- I	11 "	5		56			::		1	42 43 6	7.1
mary syphilis		FAT		-	315	-	-	-	28	-11	12443	-
Forward	. 26	541	304	11//	13.2	1.32	1 23	42	1 -0	11 -1	1143	_

	pital 1899	Al	DMI	TTED		DIS	CHA	RGE	D	ng 1800		
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 1st Dec., 1800	Total	
Forward	26	541	364	177	315	132	-	42	28	27	12443	
Genito-Urinary System Con.												
Phimosis, with nævus of scrotum Edema of penis, following excision of bubo Chancroids		I	1		 I I		ı			 	7 9	7
V. URETHRA— Urethritis, anterior " posterior Stricture of urethra " " with rupture of urethra and extravasation of urine	::	I II I4	I II I4	.::	8	1 4 5	4	I I	· · · · · · · · · · · · · · · · · · ·	 I	9 122 192	9
VI. TESTICLE, EPIDIDYMIS, AND SPERMATIC CORD— Epididymo-orchitis " with varicocele Tuberculosis of testicle Varicocele " with varicose vein		19 1 4 10	19 I 4 10		3 1 2 9	15 I	.:	I	::::	3	180 54 65 136	9.4 54 16.2 13.6
of leg Hydrocele FEMALE DISEASES.	::	6	6	:::	5	::	::	ï	::		34 71	34
Salpingitis and endometritis Pyosalpingitis, rupture, with peritonitis Oöphoritis Pelvic peritonitis Endometritis. Fibroid of uterus " " with twin		I I I 2 I I		I I I 2 I I I	 I I	 		 	 I 		10 6 6 22 11 1	10 6 6 11 11 1
pregnancy Retroversion of uterus Hæmatoma of vulva Vaginitis Bartholinitis Urethral caruncle Mastitis, chronic Hypertrophy of mammæ Ulceration of "trau- matic		1 1 1 1 2 3 1		I I I I I I I I I I I I I I I I I I I	I I I I I I I I I I I I I I I I I I	 		···	::	 	34 10 20 20 9 26 51 36	34 10 20 20 9 13 27 36
Forward	26	533	437	196		160	28	51	30		13734	
								-	3-	34	-3/34	

CIRCL

Varicose ve Phlebitis o

Gangrene

Eczema, g

Psoriasis . . Tuberculos

"Ulcer of le

" "
" of a
" of b

Carbuncle Furuncle . Callosities Bunions . . Onychia Ingrowing

SUPPURAT

I. LYMPH Lympha

II. CELLI Celluliti

"

7 7 9

9 11.1 13.6

9.4 16.2 13.6

	ital 1899	ADI	MITT	ED	1	DISC	HAR	GED)	ing 1899	Days Hosp	
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec.,1899	Total	Daily Average
Forward	26	633	437	196	356	160	28	51	30	34	13734	
CIRCULATORY SYSTEM.												
Varicose veins of leg		7 2 2	2 2 2	5	2 I I	4	ī	 	::		135 43 75	19.2 21.5 37.5
SKIN.												
Eczema, general. " of face. " of legs. " of vulva. " and seborrhœa of scalp Psoriasis Tuberculosis of skin of face. " of scalp. Ulcer of leg, varicose. " " traumatic. " " with erysipelas. " of arm. " of back. Carbuncle Furuncle Callosities of foot, painful. Bunions. Onychia Ingrowing toe nails	1	1 7 3 1 4 2 2 5 1 10 3 1 1 1 1 6 4 1 1 2 1 4	4 	1 3 3 1 4 1 2 1 8 8 · · · · · · · · · · · · · · · · ·	3 1 3 2 2 2 1 100 3 3 6 6 3 3 1 2 1 4	1 2 1 I I				I I I I I I I I I I I I I I I I I I I	5 146 40 37 105 80 74 4 4°2 88 14 1 1 63 36 46 40 1 42	5 18.3 3 13.3 37 21 40 12.8 4 40 12.8 4 1 1 1 9 9 23 20 1 10.5
SUPPURATING PROCESSES IN SOFT PARTS												
I. LYMPHANGITIS— Lymphangitis of arm		ı	1		ı						2	2
II. CELLULITIS— Cellulitis of arm	ı	8 1 4 1 1	8 1 4	 I	9 4 I	 I			 I	:: :: ::	156 2 80 3 5	17.; 2 16 3
Forward	34	718	483	235	418	179	31	54	31	39	15463	

	ital 1899	ADMITTED				DIS	СНА	ng 1899	Days in Hospital			
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec., 1899	Total	Daily
Forward	34	718	483	235	418	179	31	54	31	39	15463	
Suppurating Processes in Soft Parts.—Con.												
III. SINUS—												
Sinus of chest wall		I I 2 2 I	I I 2 I	2	I 2 2	I 1		 		 	7 38 23 14 19	7 38 11.5 7 9.5
IV. Abscess—												
Abscess of alveolus. " cervical " mammary " psoas. " sacral. " ischio-rectal. " peri-anal. " submental " lower jaw " chest wall. " thigh " leg. " groin. " gluteal region.	 	3 4 1 1 1 3 1 2 2 2 3	1 3 4 1 1 1 1 	5 3 I 2 I I I 	1 7 4 4 4 I I I I I 2 2 2 2 4	i i 		 I 			6 57 92 214 1 83 7 14 355 20 76 68 18 80	6 7.1 23 42.8 1 42.5 7 14 11.6 20 38 34 9
DEFORMITIES												
Cleft palate. Hare lip, double. Absence of bridge of nose. Talipes, varus. " equino-varus " valgus. Hallux valgus. Genu valgum. Spina bifida. Extrophy of bladder. Undescended testicle. Contracted scar tissue.	 	2 1 1 2 2 1 1 2 1 2 2 1 2 776	I I I I I I I I I I I I I I I I	2 I I I I I 262	 I 2 2 2 I 467	 I I 	31	2 	31	 I	69 13 45 21 210 33 13 160 42 17 29 69	49.5 13 45 51 70 16.5 13 80 21 17 14.5 34.2

I. FRACT

" " "

"

II. Disto

Daily Average Average

11.5 9.5

	6	1.5			1 ,	-		ann	. 1	1 81	Days	in
	ital 189	ADI	MIT	TED	1		HAR	ing ,18ç	Hosp	ital		
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec.,1899	Total	Daily Average
Forward	40	776	514	262	467	187	31	60	31	40	17056	
INJURIES												
I. FRACTURES—												
Fracture of pelvis	.:	I	I		1						30	30
of acetabulum	I	1 .:				I		2		I	39	39
of femur		7	4	3	3	I		1	• •	1 - 1	159	17
" of tibia		I	I	1	I	::	1::			1::	IO	10
" compound		ī	ī	1	1.	1			::	I	47	47
" of tibia, old, non-		*				١				1 1	4,	1"
union		I	I							I	64	64
" of fibula		3	I	2	3						40	13.3
" and inner												
condyle.		I	I		I					1	23	23
" of tibia and fibula	I	14	12	2	II	τ		I		2	342	23.7
" compound commin- uted of both bones												
of leg		I	I	.,	I						40	40
" compound commin- uted of both bones												
of both legs		ı	1		I						40	40
" of tibia and fiibula,		1	1								40	1
mal-union		I	I				١	I		1	2	2
" of metatarsal bones.		I	I		I						6	6
" of ribs		3	2	I	2		I				23	7.6
of clavicle		I	I		I						4	4
" of humerus		3	2	I	3						139	46.3
of humerus, skull	1 1		١.									124
and clavicle		I	I		1						34	34
of humerus, involving elbow joint		1	2	I	2	1					98	32.6
of int. condyle	1::	3	I	1	I	1	1::			::	1	I
" of radius	1 ::	7	3	4	5	2	1 ::		1		83	11.8
" " and ulna		2	2		I	I	1				23	II.
" of olecranon		I		I		I					3	3
" of base of skull		I	I			I					21	21
" of skull and nasal												
bones		I	I		I						9	9
pressed	:	2	2		I		I				185	92.5
II. DISLOCATIONS—												
Dislocation of hip, old	1	1	1					2			12	6
" of hip, spontane-		1	1					-				1
ous after scarlet												
fever		I	I							I	327	327
Forward	43	838	-	-	508	196	-			46	18977	-

	Hospital an., 1899	ADMITTED				DISC	CHAI	ng 1899	Days in Hospital			
DISEASES	In Hospital 1st Jan., 189	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec.,1899	Total	Daily Average
Forward	43	838	561	277	508	196	33	67	31	46	18977	
Injuries.—Con.												
Dislocation of humerus " of semilunar carti-		I	I		I						6	6
lage		2	2		2						61	30.2
Crush of both legs " foot " toe	::	I	I I		I	 I			:	 I	22 44 2	22 44 2
IV. CONTUSION— Contusion of scalp		I 4 I 2	1 3 1 1	 I I	3 1 1	 I					2 25 28 24	2 6.2 28 8
V. Sprain— Sprain of back		ı	I			I					24	24
VI. Wounds— Wound of forehead " scalp " throat, stab abdomen, gunshot. " groin " penis, from self- amputation " thigh, gunshot " knee " foot		1 3 1 1 1 1 1 2 2	3 I I I I I 2 2		I I I I I I I I I I I I I I I I I I I	2		 		··· ·· · · · · · · · · · · · · · · · ·	1 8 11 13 49 19 2 13 20	1 2.6 11 13 49 19 2 6.2
" hand, lacerated VII. BURN—		4	4		3	I					23	5.7
Burn of body	I 		. 1	::	. 1	I	::	::			216 20	216 20
VIII. RUPTURE—												
Rupture of kidney	::	1 2 1	1 2 1		2 I		::	::		::	23 89 27	23 44.2 27
Forward	45	875	594	281	534	206	33	68	31	48	19749	

I. BENT

Angio Nævu " Osteo Terat Lipor Cyst o " " Chelo

II. Und Tumo

"
III. MA
Epitheli

Carcino

	ital 1899	AD	MIT	TED		DISC	CHAI	RGEI)	ng 1899	Day Hosp	s in oital
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec., 1899	Total	Daily Average
Forward	45	875	594	281	534	206	33	68	31	48	19749	
TUMORS												
I. BENIGN— Adenoma cystic of breast " fibrous " " cystic of both kid-	::	1 4	::	I 4	I 4	::	::	::	::	::	5 34	5 8.5
neys Angioma of orbit Nævus of cheek "hand "scrotum Osteophyte of calcaneum Teratoma of sacral region Lipomatosis diffuse Cyst of neck "floor of mouth "thyroid gland "ovarian multilocular "sebaceous Cheloid of buttock		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	I I I I I I I I I I I I I I I I I I I	3 	1 3 1 1 2 1 1 1	 I		I I I I I I I I I I I I I I I I I I I		I	22 4 52 5 9 1 5 3 3 8 15 28 2	25 4 13 5 9 1 5 3 6 12.6 15 29 2
II. UNCLASSIFIED— Tumor of brain " eyebrow " orbit " submaxillary region " left hypochondriac	::	2 I I I	IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	 	 I 	 		 I I		 	123 3 10 6	61.5 3 10 6
region sub-hepatic of abdomen	::	I	I	 I	:: :: ::	I	::	 			12 149 9	12 149 9
III. MALIGNANT— Epithelioma of hip		4 8 4 2 3 I 3 I 2 I 16	4 8 3 I I I I I 3 I	 I I 2 	4 3 3 2 1 2 1		i	3 2 1 I	· · · · · · · · · · · · · · · · · · ·		166 88 219 29 41 14 34 4 158 26 2	41.2 11 54.7 29.2 13.6 14 11.3 4 158 13 2 18
Forward	46	952	-	317	578	213	35	88	33	51	21383	-

Daily Average Average

6.2 5.7

44·2

	pital 1899	AD	MIT	TED		DISC	CHA	RGEI	D	ing 1899	Day Hos	
DISEASES	In Hospital 1st Jan., 189	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec, 1899	Total	Daily Average
Forward	46	952	635	317	578	213	35	88	33	51	21383	
Tumors.—Con.												
Carcinoma of tongue " upper jaw " cesophagus " stomach " cæcum " ascending colon " transverse colon " splenic flexure. " sigmoid, with in-	 I I	3 2 3 1 1 1	3 1 3 1	I	I 2 I	 I	 I 2			:: :: :: :: ::	6 57 33 61 27 25 40 6	6 19 16.5 20.3 27 25 20 6
testinal obstruc- tion bowel, advanced rectum peritoneum liver gall-bladder and	::	1 1 9 1 2	1 8 	 I I I	2	5	 I I 2	 I I 	 	:: :: ::	1 2 439 16 46	1 2 48.8 16 23
gall-bladder and passages bladder bladder tonsil parotid face breast hand tibia peritoneum peritoneum testicle sacro iliac region.	I	1 1 3 2 1 1 1 1 1 2 1 1	I 2 2 I I I I I I I I	I	I I I I I I I I I I I I I I I I I I I	I I I I I I I I I I I I I I I I I I I	I I I I I I I I I I I I I I I I I I I	 		I	27 29 46 23 3 12 18 1 28 461	27 14.5 15.3 26.2 3 12 18 1 28 153.6
FOREIGN BODIES Foreign body in bronchus Chicken bone in cesophagus Needle in abdominal wall UNCLASSIFIED		I		I I 	 I I			ı 	::	 	 2 29	1/2 2 29
Malingerer Pediculosis of body Typhoid fever Otitis media. Companions, etc Total	50	1 3 1 15	 3 1 	 1 15 348	 I 	 I I 	46	1 2 14	34	 1	2 22 21 12 300 23187	2 22 7 12 20

Remaining 1st January, 1899	50	
Admitted		
		1068
Discharged, cured	592	
" improved	226	
" unimproved		
Not treated	116	
Died	34	
Remaining	54	
		1068
Average number of days in Hospital per patient	21.7	

Daily Pri

14.5 15.3 26.2 3 12 18 1 28 153.6

1/2 2 29

CAUSES OF DEATHS

IN

THE SURGICAL DEPARTMENT.

Case No						Total
3,270	Appendiciti	s, perforative, v	with localized	peritonitis	S	1
3,970	"	"	"	"		I
4,091	"	"	"	"		I
3,278	"	"	generalize	d periton	itis	I
3,485	"	"	"	"		I
3,526	"	"	"	"		I
3,817	"	"	"	"		I
3,835	"	"	"	"		I
3,922	"	"	"	"		1
3,562	"	"	"	"	with empyæma	I
3,378	"	recurrent, wit	th obstruction	of ileum	and generalized peritonitis	I
3,452	"	" "	toxæmia			I
3,931	Arthritis, se	ptic				I
3,265	Carcinoma o	of sigmoid with	generalized pe	eritonitis.		I
4,114	"					1
3,223	Cellulitis of	leg, with gangr	ene,			1
3,492	Cholelithias	is				I
4,170	Concussion	of the brain				I
3,361	Cystitis					I
3,632	Empyæma.					I
3,248	Epithelioma	of œsophagus.				1
4,159	"	tongue, with	aspiration pr	neumonia		I
3,256	Hernia, stra	ingulated femor	ral			I
3,993	"	" conge	enital			I
3,623	Meningitis,	suppurative bas	silar			I
4,062	Obstruction	of common bile	e duct by fibre	osis of th	e pancreas, with post-operative	
	hæmori	rhage				I
3,268	Pyæmia, wi	th generalized	tuberculosis			I
3,384	Pyæmia					1
3,549	Pyosalpingi	tis, double, with	h rupture and	generaliz	ed peritonitis	1
4,180	Stenosis of	sigmoid and rec	ctum, with rup	ture and	generalized peritonitis	I
3,721						I
3,562	Tuberculous	s osteomyelitis o	of sternum, wi	th bronch	no-pneumonia	1
3,583	Tuberculous	peritonitis				I
3,456	Typhoid uld	er, perforation				1
						-
	Total .					34

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Sequestre Cranioto

Excision "

Incision

Ignipund Elevatio Repair o Resectio Skin-gra Rhinopla

Excision " Incision

Curettin Sequestr "

Excision

SURGICAL OPERATIONS,

For the Year ending 31st December, 1899.

Total

34

HE	EAD AND NECK.	1	Recovered	
OPERATION.	CRANIUM. DISEASE.	Total	Seco	Died
Craniotomy	Necrosis of skull, syphilitic	2 I I	2 I	::
	FACE.			
Incision. Ignipuncture Elevation nasal bones. Repair of hare lip. Resection infra-orbital nerve Skin-grafting.	Epithelioma of lip " of cheek. " of nose. Lupus of cheek. Sarcoma of cheek. Cyst of cheek. Abscess of cheek. Cellulitis of chin. Nævus of cheek. Depressed fracture. Hare lip, single. Infra-orbital neuralgia. Ulcers of face. Absence of bridge of nose.	7 2 2 5 2 1 1 1 3 5 1 1 1 3	7 2 5 2 1 1 3 5 1 1 3 1	
	JAWS.			
" inferior " " temporo-maxillary articles in	Epithelioma	3 2 1 5 1 1 2 1	3 2 1 5 1 1 2 1	::
MOUTH, 1	PHARNYX AND ŒSOPHAGUS.			
" " partial	Epithelioma of	2 3 1 3	1 3 1 3	
	Forward	64	62	2

		-		-
		Total	Recovered	Died
	Forward	64	62	2
0	NECK.			
OPERATION.	DISEASE.			
Excision, glands	Tuberculosis of	14 1	14	
//	Cyst of neck	4	4 -	
"	Sarcoma of neck	I 2	1 2	
" glands	Carbuncle	4	4	::
"	Nævus	I	I	
Incision	. Abscess	3	3	
Tenotomy	Torticollis	4	4	::
Tracheotomy	. Epithelioma of pharnyx	I	I	
"	Sarcoma of tonsil	I	I	••
Total		114	112	2
ттррир	EXTREMITY.			
OPERATION.	AND SHOULDER. DISEASE.			
Excision, joint	Tubercular arthritis	1	I	
" axillary glands Incision	, adenitis	5	5 3	
	Dislocation, subcoracoid	I	I	
	ARM.			
	. Cellulitis	4	4	
Wiring humerus	Compound fracture	I	I	
Skin-grafting	Ulcer	I	I	::
bequestrotomy		-		
	ELBOW.			
Incision	Bursitis, suppurative	1	1	
1	FOREARM.			
Excision	Cyst	I	1	
Incision	Abscess	3	3	
	Cellulitis	3	3	
Sequestrotomy	. Necrosis of radius	1	I	
Resection of radius, with wiring	Mal-union of fractured radius	I	1	
Wiring fragments	Fracture of radius, compound	I	I	
Neurormaphy	Paralysis ulnar nerve, traumatic	1	1	
	Forward	145	143	2
		1	,	1

Excision "
Incision Section Sequest

Amputa Incision Curettin

Incision

Excision Incision Reduction Curetti

Excision

Ampu

Died

	Total	Recovered	Died
Forward	145	143	2
HAND.			
OPERATION. DISEASE.			
Excision. Needle in hand. " Sarcoma of hand " Nævus of hand ncision Cellulitis Section palmar fascia. Contracted palmar fascia. Sequestrotomy Necrosis of second metacarpal.	I 4	1 1 4 2	
FINGERS.			
Amputation of	2	2 I	:
Total	48		
LOWER EXTREMITY.			
BUTTOCK.			1
OPERATION. DISEASE.			
P	6	6 6	
OPERATION. DISEASE. Tubercular abscess	6	-	
OPERATION. DISEASE. Incision	3	-	
OPERATION. Incision. Tubercular abscess. Tumor. HIP. Excision. Tubercular arthritis. n abscess. playsess. Dislocation, spontaneous	3	3 3 2	
OPERATION. Incision. Tubercular abscess. Tumor. HIP. Excision. Tubercular arthritis. Incision, abscess. " abscess. Reduction. Dislocation, spontaneous Curetting. Sinus.	1	3 3 2 2 1 1 1	
OPERATION. Incision. Tubercular abscess. Tumor. HIP. Excision. Tubercular arthritis. " abscess. Reduction. Dislocation, spontaneous Curetting. GROIN. Excision lumph glands. Adenitis, suppurative	1	3 3 3 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
OPERATION. Incision. Tubercular abscess. Tumor HIP. Excision. Tubercular arthritis. " abscess. Reduction. Dislocation, spontaneous Curetting. GROIN. Excision, lymph glands. Adenitis, suppurative Incision. Abscess.	13	3 3 3 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

•	Total	Recovered	Died
Forward	199	197	2
THIGH.—Con.			
OPERATION. DISEASE.			
Amputation Osteomyelitis of femur	I	I	
"	I 2	I 2	
" Cellulitis		I	1 ::
" Osteo periostitis	4	4	
Sequestrotomy		4	
Osteotomy	I	I	
KNEE.			
Amputation at joint	1 5	5	1 ::
"	1	4	1:
Suturing semilunar cartilage Dislocated semilunar cartilage	3	3	
Incision	I	I	
Suturngwould of	I	I	
LEG.			
AmputationTuberculosis of tarsus	I	I	
" double		I	
Incision		4	
" Osteo periostitis	3	3	
Skin-graftingUlcer	5	5	
Curetting		1	
Circumcision of skin	3 4	3	1::
Excision, veins " "	I	I	
Resection, with wiring		2	
Curetting		2 2	
Trephining Osteitis.	I	I	
ExcisionThorn in leg	I	I	
FOOT.			
Amputation Crush of toes		2	
Excision, toe nails		1 6	
Sequestrotomy Necrosis of os calcis		4	
Tenotomy, tendo Achillis Talipes, equino varus	2	2	
Tarsectomy " varus		2	
Incision. (Phelps' operation) " "	2	2	
Forward	281	279	2

Excision tion. Skin-gra Correcti

Excision Incision Curettin

Excision axilla Excision axilla Excision axilla

Incisior.

Resection Thoracon Excision Incision

Died

		Total	Recovered	Died
	Forward	281	279	-:
FO	OTCon.			
Oppration	DISEASE.			
OPERATION. Excision, metarso phalangeal articulation	Bunions	3	3	
kin-grafting	. Ulcer	1	I	
		127	127	
BACK AND VE	RTEBRAL COLUMN.			
OPERATION.	DISEASE.			
Excision, coccyx	.CoccygodyniaSpina bifida	2	2	,
ncision	Abscess.	2 2	2 2	
Curetting	.Sinus	I	I	
Total		7	7	-
THORAX AN	D CHEST WALL			
I	BREAST.			
OPERATION.	DISEASE.			
Excision, complete, with dissection of axilla	}Carcinoma	12	12	
Excision, complete, with dissection of	Sarcoma	2	2	
axilla	Tumor, unclassified	2	2	
	. Fibro adenoma	4	4	
"	Chronic mastitis	2 I	2 I	
	Abscessl		3	
	CHEST.			1
ncision		7	,	
Resection of rib	Caries of ribEmpyæma, with persistent sinus	1 3	7 3	
Resection of rib	Caries of ribEmpyæma, with persistent sinus	1 3	7 3 3	
Resection of rib	Caries of ribEmpyæma, with persistent sinus	3 4 1	3 3 1	
Resection of rib	Caries of ribEmpyæma, with persistent sinus	3 4 1 1	3 3	
Resection of rib	Caries of rib Empyæma, with persistent sinus Fibroma Abscess. Perichondritis	3 4 1 1	3 3 1 1	

		Total	Recovered	Died
Forward	3	337	334	3
GENITO-URINARY.				
KIDNEYS.	4			
OPERATION. DISEASE.				
Nephrorrhaphy Movable kidney Nephrotomy Cystic-adenoma " Nephralgia " Pyemia Nephro-lithotomy Nephro-lithiasis Nephrotomy, exploratory Cholelithiasis Catheterizing ureters Nephralgia		3 1 2 1 6 1 2	3 1 2 1 6 1 2	
BLADDER AND URETHRA.				
Exploration of bladder		18 2 1 1 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1	18 2 1 1 1 2 2 1 1 1 3 1 1 1 2 1 4 2	· · · · · · · · · · · · · · · · · · ·
PENIS.				
Circumcision. Phimosis Amputation. Epithelioma. Excision. Papilloma Trimming stump. Self-amputated penis. Cauterizing. Phagedæna.		17 1 1 1 3	17 1 1 1 3	
SCROTUM, TESTES AND VULVA.				
Excision Varicocele		11	11	
Radical cure Hydrocele		4 2	4 2	
P1		156	452	1

Castrati Epididy Castrati Bringin Excision Scrapin Incision

Excisio Incision " Excisio Dilatati Repair

Suturin "Incision Remov Curetti

Radica

Explor

Died 3

2 4 2

7 ... 1 ... 1 ... 3 ...

		Total	Recove-ed	Died
	Forward	456	452	4
	OPERATION. DISEASE.			
1	Castration Epididymo-orchitis tubercular	4	4	
]	Epididymectomy. Epididymitis "	ī	I	
1	Principa down testicle " " "	I	I	
1	Excision Necrosis of scrotum	I	I	
1	Scraping Sinus of scrotum, tubercular,	I	1	
	IncisionBartholinitis	I	I	
	ANUS AND RECTUM.			
	Excision	19	19	
	Incision Fistula in ano	7	7	
	" Abscess, ischio rectal	2	2	
	Excision of rectum	3	3	
	Dilatation Stricture of rectum	2	2	
	Repair of torn mucous memb. of anus. Enteritis, tubercular.	I		
	Total	163	161	
	ABDOMEN.			
	ABDOMINAL WALL.			
	OPERATION. DISEASE.			
	Suturing Operation wound	7		
	" gall-bladderBiliary fistula	1	I	
	Inciden	1 4	4	
	Removal, pin Pin in abdominal wall	I	2	1:
	Curetting Sinus of wait	1	-	1
	HERNIA.			
	Radical cureInguinal	29	29	1.
			3	1.
	" " Femoral	1 3		
	" "	1 3 I	I	1.
	" " Femoral Ventral Umbilical	I	I	1 '
	" " Femoral " " Ventral " " Umbilical " " Femoral, strangulated	I	I	1 '
	" " Ventral " " Umbilical " " Femoral, strangulated " " Inguinal "	I	I	:
	" " Ventral " " Ventral " " " Umbilical " " Femoral, strangulated " " " Inguinal " " EXPLORATORY LAPAROTOMY.	1 1 4	3	1 '
	" " Ventral " " Umbilical " " Femoral, strangulated " " Inguinal " EXPLORATORY LAPAROTOMY. Exploration Carcinoma of colon	3 I I I I 4	3	1 '
	" " Ventral " Ventral " " Umbilical " " " Femoral, strangulated Inguinal " EXPLORATORY LAPAROTOMY. Exploration Carcinoma of colon " of liver	4	3	1 '
	## Femoral ## Wentral ## Umbilical ## Femoral, strangulated ## Inguinal ## EXPLORATORY LAPAROTOMY.	3 I I I I I I I I I I I I I I I I I I I	3	1 '
	" " Ventral " Ventral " " Umbilical " " " Semoral, strangulated " " " Inguinal " " EXPLORATORY LAPAROTOMY. Exploration Carcinoma of colon " of liver " " " " " " " " " " " " " " " " " " "	3 I I I I I I I I I I I I I I I I I I I	3	

			-
	Total	Recovered	Died
Forward	561	554	7
EXPLORATORY LAPAROTOMYCon.			
OPERATION. DISEASE.			
Exploration	I		I
(Adenitis, suppurative of mesenteric lymph			•
" glands			I
"	I	I	٠.
" Intestinal obstruction from pelvic adhesions		1	• •
with appendicectomySarcoma of peritoneum	I	1	
Peritonitis Cirrhosis of liver, with enteroptosis.		ı.	
"		I	
LAPAROTOMY.			
AppendicectomyAcute catarrhal Appendiciti	s 9	9	
"	9	9	
"Obliterating "	3	3	
"	I	I	
∫ Recurrent, with mesenteric	1		
" lymph adenitis and abscess "	I	I	I
"	I	.:	I
" retrocæcal "	I	I	
"	5	4	
" Acute, with empyama of appendix " " perforative "	25	24	1
" with abscess. "	2	2	
" " general peritonitis.	. 7	4	3
" " gangrenous	. 6	5	1
" with general peritonitis.		3	2
Colotomy, inguinalCarcinoma of rectum	. 8	8	
" " of sigmoid	. 2		2
Cholecystotomy and removal of gall stones	. 5	5	
Choledochotomy and removal of gall stones	. 2	2	
Cholecystotomy	. 1	I	
Cholecystenterostomy Obstruction to pancreatic and common bil	e I		,
Castro enterestomy with entergen]		1	1
terostomy	. 1	I	
Suturing stomachPerforated gastric ulcer		2	
Gastrostomy, with permanent fistulaCarcinoma of œsophagus		2	1
Suturing intestine	3	3	1
Perforation from typhoidal ulceration Ileo-colostomy	. 1	I.	
Forward	. 674	650	24
	1	1	1

Excision

Incision Laparote Incision Hystered Breaking

		Total	Recovered	Died
	Forward	674	650	24
LAPAROTOMY	Con.			
OPERATION.	DISEASE.			
Excision of cæcum, with ileo-colostomy. Carc		I	I	
" and tubeRupt	ian cystured pyosalpinx, with general peritonitis	I	I	
ncisionCyst	of abdomen		I	
aparotomy and drainagePeritoncision, retro-peritoneal abseessSupp	urating retro-peritoneal glands	2	I	
Tysterectomy Pregr	nancy, with fibroid	I	I	1:
Breaking adhesionsIntes	tinal obstruction	I	I	
	Total	683	657	2

SYNOPSIS.

Total number of operations, 683, divided as follows:-

Head and Neck	114
Upper Extremity	48
Lower Extremity	127
Genito-Urinary	163
Abdomen	180
Thorax and Chest Wall	44
Back and Vertebral Column	7
-	

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REPORT OF THE GYNÆCOLOGICAL DEPARTMENT.

For the Year ending 31st December, 1899.

BY H. P. STOCKWELL, M.D., RESIDENT GYNÆCOLOGIST.

	tal 899	ADN	ITI	ED	I	DISC	HAR	GED		ng 1899	Day: Hosp	s in oital
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec., 1899	Total	Daily Average
Abortion		6 2		6 2	6 2						90 153	15 76½
Abscess, ovarian, with oophoro-salpingitis		1 1 9	 	I I 9	1 1 8			 I		 I	65 6 56 209	65 6 56 23 2-9
Anteflexion of uterus, with anteversion	i 	I	:::::::::::::::::::::::::::::::::::::::	I I I I I I I I I I I I I I I I I	I I I I I I I I I I I I I I I I I I	 I I	 			 	30 4 45 44 37 20 212 6 20	30 4 45 44 37 20 42 2-5 6 10 6 ½
Cholelithiasis Companion (cæsarian section child) Condylomata of vagina Constipation, chronic Cyst, intraligamentous		1 1 1 1	I	2 I I I	I					···	1 10 46 26	I 10 46 26
Cyst, ovarian, with pelvic peritonitis Cyst, ovarian Cystic ovaries Cystitis Cystitis, tubercular Cystitis, with vaginitis Cystitis, with proctitis Dysmenorrhea Endometritis Endometritis, purulent Enteroptosis	I I I I I I I I I I I I I I I I I I I	26 7 2 1 1 3 10 1		26 7 2 1 1 3 10 1	1 1 25 6 · · · · · · · · · · · · · · · · · ·	 I 2 I I	 I 	··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··		 I 	5 18 767 185 73 8 45 52 193 28	5 18 29 ½ 23 ½ 36 ½ 8 45 17 ½ 19 3-11 28 6
Forward	4	91	I	90	72	9	3	4		. 6	2473	

Fibro-my gle and Fibro-my diabete Fibro-my ous... Fibroid of Fibrous p Fistula, in Fistula, r Hæmator Hydrosal Hyperem Laceratio Laceratio cystic o Laceratio periner Laceratio perine ovaries Lacerated plicatir Lacerated cystoce Lead poi Metritis. Metritis v Metritis v Metritis litus.. Metritis, Metrorrh

Neurasth Oophorit Oophorit Oophoro Oophoro Pelvic ce

Metrorrh rhagia

> pelvic " ·h " p

	ital 1899	ADM	TTI	ED	I	DISC	HAR	GED		ing 1899		ys in spital
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec., 1899	Total	Daily Average
Forward	4	91	I	90	72	9	3	4		6	2473	
Fibro-myoma of uterus, sin-				*							,	
gle and multiple Fibro-myoma of uterus, with	I	13	(13	8	I		I	3	I	296	22 10-13
diabetesFibro-myoma, intraligament-		I		I		I					17	17
ous		I		I	I					1	40	40
Fibroid of ovary		I		I						I	22	22
Fibrous polypus of cervix		I		I	I						12	12
Fibrous polypus of uterus		I		I	I						23	23
Fistula, intestino-vesical		I		I	I						35	35
Fistula, recto-vaginal Hæmatoma of vulva		I		I	I						11	11
Hydrosalpinx		I		I	I	• •					I	I
Hyperemesis gravidarum				I	I						6	5
Laceration of cervix	· ·	I		7	6			2		::	202	251/4
Laceration of cervix, with		7		1	ı						30	30
Laceration of cervix and		I									100	
perineum		8		8	7			1			216	27
ovaries Lacerated perineum, com-	1	2		2	3						51	17
plicating puerperium Lacerated perineum, with		1		I		I					II	11
cystocele		I		I	I						31	31
Lead poisoning		I		I	I						10	10
Metritis		4		4	3	I				1 .: 1	68	17
Metritis with vaginitis		2		2		I		1 .:		I	87	431/2
Metritis with neurasthenia Metritis with diabetes mel-	-	I		1				I			3	3
litus		I		I				I			4	4
Metritis, chronic cervical		I		I	I						85	17
Metrorrhagia and menor	-	5		5	5						8	8
rhagia		I		I	I		1	1 .:			0 1	I
Neurasthenia		I		I			1	I			82	271/3
Oophoritis, with vaginitis	1	3		3	3						10	10
Oʻophoro-salpingitis Oʻophoro-salpingitis, with		38	::	38	17	9	1	3	2	6	1165	301/2
pelvic peritonitis		I		I					I		5	5
Pelvic cellulitis		I		I		I	1				5	5
" hæmatocele " peritonitis	1::	I		I	1	1	1::	1::	1::	1::	39	19
	-	198	-		-	-	-	-	-	-		-

Average la ii

19 3-10

GYNÆCOLOGICAL DEPARTMENT.

	ital 1899	ADM	ITT	ED	I	DISC	HAR	GED)	ing 1899		ys in spital
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec.,1899	Total	Daily Average
Forward	7	198	I	197	139	25	4	15	6	15	5098	
Pelvic peritonitis, tubercular " " chronic plastic Prolapsed uterus " " and vagina.		2 I I 2		2 I I 2		I I	 	 	::	 I 	99 36 10	33 36 10 57
Prolapsed uterus and vagina, with granular cervix Pyosalpinx, single " double Pregnancy " with separated recti. Puerperal septicæmia Retroversion of uterus	::	1 3 1 3 15		1 3 1 1 3	I I 2 	 1 I	::	··· ··· ··· i	 I 	 I	34 36 103 11 2	34 36 34 34 11 2
acute metritis with		I		1		I					21	21
Retroversion of uterus, with chronic metritis Retroversion of uterus, with	I	ı		I	2						24	12
lacerated cervix		I		1	I						.20	20
lacerated perineum Retroversion of uterus, with		6		6	4	I		1			121	201
fibro myoma of uterus Retroversion of uterus, with		I		1	I						33	33
metritis and retroflexion. Retroflexion of uterus Retained secundines Sapræmia Sinus Subinvolution of uterus Vaginitis		1 1 1 2 1 7		I I I I 2 I 7	I I I I 	 I I 2		· · · · · · · · · · · · · · · · · · ·			23 32 20 4 12 4 134 8	23 32 20 4 6 4 22 8
Vagina, foreign body in Total		253	1	253	176	35	5	19	8	19	6561	

	Total	treated					 			 	 					262
Patient	s discharged,	cured						 	 	 					176	
"	"	improve	d				 		 	 					35	
"	"	not imp	roved				 	 							5	
"	died "	not treat	ted					 	 	 					19	
"	died					٠.	 	 		 			٠.		8	
"	remaining 1	December	31st,	180	99		 	 	 	 				٠.	19	

Alexand Amputa " " Append Cauteri Curetti

Append Cauteri Curetti "Colpor "Dilatat

Dilatat "Division Dudley Eneucl

Extirpe Hyster Incisio " Ignipu Inserti Intern Ligatu Lapar

Lapar

Oopho Repair "

. "

GYNÆCOLOGICAL OPERATIONS,

For the Year ending 31st December, 1899.

Oophorectomy 4 4 Repair of cervix, Emmet's 13 12 1 " of perineum, Emmet's 9 9 " " modified flap splitting 3 3 3 " unclassified 4 4	OPERATION	Total	Cured	Improved	Not Improved	Died
Amputation of cervix, circular. 3 3 """ Martin's 2 2 """ Schreeder's 5 4 1 """ unclassified 2 2 2 Appendicectomy. 5 5 - Cauterizing rectum 1 1 1 Curetting cervix for epithelioma 2 2 2 " uterine cavity. 79 72 5 2 " uterine cavity. 79 72 5 2 " uterine cavity. 79 72 5 2 " posterior 3 3 3 3 " posterior 3 3 3 3 " posterior 3 3 3 3 3 " posterior 3 1 1 1 1 1 1 1 1	Alexander's operation	I	I			
" Martin's 2 2 2 1	Amputation of cervix circular	3	3			
" N Schreder's 5 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	" Martin's		-			
	C-112-	5	4	I		
Appendicectomy. Cauterizing rectum Curetting cervix for epithelioma. " uterine cavity. Colporraphy, anterior. " posterior " posterior " urethra Dilatation of bladder. " urethra Division of vaginal cicatrices Dudley's operation for anteflexion " of intraligamentous fibroids. " cyst. Extirpation of cervix. Hysterectomy, supravaginal " vaginal. Incision of abscess. " of cervix. " of hæmatoma of vulva. Inserting pessary Internal shortening of round ligaments. Ligature of uterine arteries. Laparotomy, breaking up adhensions. " after hysterectomy, for obstruction " after hysterectomy, for obstruction " after hysterectomy, Emmet's. " of perineum, Emmet's. " of perineum, Emmet's. " of of separated recti. " of fistula in ano. " of of fistula in ano. " of of fistula in ano. " of of separated recti. " of of intraligamentous fibroids. " of separated recti. " of of fistula in ano. " of fistula in ano. " of of separated recti. " of of intraligamentous intractives. " of of separated recti. " of of intraligamentous intractives. " of of separated recti. " of of intraligamentous intractives. " of of separated recti. " of of intraligamentous intractives. " of of intraligamentous intractives. " of of cervix. " of of cervix. " of of cervix. " of of cervix. " of of separated recti. " of of intraligamentous intractives. " of of cervix. " of of cervix. " of of separated recti. " of of intraligamentous intractives. " of of intraligamentous intractives. " of intraligamentous intracti			2			
Cauterizing rectum Curetting cervix for epithelioma 2		5	5			
Curetting cervix for epithelioma. 2 2 2 2 2 2 2 2 2 2			-	I		
Materine cavity. 79 72 5 2 Colporraphy, anterior. 14 13 1 m posterior 3 3 Dilatation of bladder. 3 m urethra 1 1 m urethra 1 1 Division of vaginal cicatrices 2 2 Dudley's operation for anteflexion 3 2 1 Eneucleation of uterine fibroids 2 2 Eneucleation of cervix 1 1 m of intraligamentous fibroids 2 2 m vaginal 7 5 Extirpation of cervix 1 1 Hysterectomy, supravaginal 7 5 m vaginal 1 1 Incision of abscess 2 2 m of hæmatoma of vulva 1 1 Inginupructure of cystic ovaries 9 8 1 Inserting pessary 1 1 Internal shortening of round ligaments 8 8 Ligature of uterine arteries 1 1 Laparotomy, breaking up adhensions 1 1 Oophoro-salpingectomy, double 8 7 5 of perineum, temet's 9 9 9 Oophorectomy 1 Repair of cervix Emmet's 9 9 9 m of perineum, temmet's 9 9 9 m of separated recti 1 1 m of fistula in ano 3 3 3		2		2		
Colporraphy, anterior 14 13 I " posterior 3 3 Dilatation of bladder 3 3 " urethra I I I Division of vaginal cicatrices 2 2 2 </td <td>" uterine cavity</td> <td>79</td> <td>72</td> <td>5</td> <td>2</td> <td></td>	" uterine cavity	79	72	5	2	
Dilatation of bladder.	Colporraphy anterior		13	I		
Dilatation of bladder. 3 3 3 3 3 3 3 3 3 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </td <td>" posterior</td> <td>3</td> <td>3</td> <td></td> <td></td> <td></td>	" posterior	3	3			
	Dilatation of bladder			3		
Division of vaginal cicatrices 2 2 1 Dudley's operation for anteflexion 3 2 1 Eneucleation of uterine fibroids 2 2 2 " of intraligamentous fibroids 2 2 2 " of intraligamentous fibroids 2 2 2 " of intraligamentous fibroids 1 1 1 1 " of intraligamentous fibroids 2 2 2 2 Extirpation of cervix 1 <td></td> <td>I</td> <td>I</td> <td></td> <td></td> <td></td>		I	I			
Dudley's operation for anteflexion 3 2 I Eneucleation of uterine fibroids 2 2 2 " of intraligamentous fibroids 2 2 2 " of intraligamentous fibroids 2 2 2 " cyst I I I Extirpation of cervix I I Hysterectomy, supravaginal 7 5 2 " vaginal I I I	Division of vaginal cicatrices	2	2			
Eneucleation of uterine fibroids 2 3 3 3 4 4 3 3 4	Dudley's operation for anteflexion	3	2	I		
" of intraligamentous fibroids. 2 2 2 1 <t< td=""><td>Eneucleation of uterine fibroids</td><td>2</td><td>2</td><td></td><td></td><td></td></t<>	Eneucleation of uterine fibroids	2	2			
Extirpation of cervix.	" of intraligamentous fibroids		_			
Hysterectomy, supravaginal 7 5 2	" cyst		-			
Hysterectomy, supravaginal	Extirpation of cervix	-	_			
" vaginal. 1	Hysterectomy, supravaginal		-			2
Michael British of Secretary 1	" vaginal	1 -	7			
" of hæmatoma of vulva. 1 <td>Incision of abscess</td> <td></td> <td></td> <td></td> <td>1</td> <td></td>	Incision of abscess				1	
Ignipuncture of cystic ovaries. 9 8 1 Inserting pessary. 1 1 1 Internal shortening of round ligaments. 8 8 8 Ligature of uterine arteries. 1 1 1 Laparotomy, breaking up adhensions. 1 1 1 " after hysterectomy, for obstruction 1 1 1 Oophoro-salpingectomy, double. 8 7 1 " single 7 5 2 Oophorectomy. 4 4 4 Repair of cervix, Emmet's. 13 12 1 " of perineum, Emmet's. 9 9 " " modified flap splitting 3 3 3 " " unclassified 4 4 4 " of separated recti. 1 1 1 " of fistula in ano. 3 3	" of cervix					
Ignipuncture of cystic ovaries Inserting pessary. Internal shortening of round ligaments. Ligature of uterine arteries. Laparotomy, breaking up adhensions. " after hysterectomy, for obstruction. Oophoro-salpingectomy, double. " single Oophorectomy. Repair of cervix, Emmet's. " of perineum, Emmet's. " of perineum, Emmet's. " modified flap splitting " of separated recti. " of fistula in ano " a flat " of separated recti. " of fistula in ano " a flat	" of hæmatoma of vulva			1 .:		
Inserting pessary	Ignipuncture of cystic ovaries	1	-	1		
Ligature of uterine arteries 1	Inserting pessary		_		1	
Laparotomy, breaking up adhensions I	Internal shortening of round ligaments		-			
" after hysterectomy, for obstruction 1 1 Oophoro-salpingectomy, double. 8 7 1 Oophorectomy 7 5 2 Oophorectomy 4 4 Repair of cervix, Emmet's. 13 12 1 " of perineum, Emmet's. 9 9 " n modified flap splitting 3 3 3 " of separated recti. 1 1 " of fistula in ano 3 3	Ligature of uterine arteries		1	1	1	
Oophoro-salpingectomy, double. 8 7 1 0 single 7 5 2 0 ophorectomy. 4 4 4 Repair of cervix, Emmet's. 13 12 1 " of perineum, Emmet's. 9 9 " modified flap splitting 3 3 3 " nuclassified 4 4 4 " of separated recti. 1 1 1 " of fistula in ano. 3 3	Laparotomy, breaking up adhensions	1 1		1	1	1
Oophorectomy 7 5 2 Oophorectomy 4 4 Repair of cervix, Emmet's 13 12 1 " of perineum, Emmet's 9 9 " modified flap splitting 3 3 " unclassified 4 4 " of separated recti 1 1 " of fistula in ano 3 3	after hysterectomy, for obstruction		7		1	
Oophorectomy	Oophoro-salpingectomy, double			1	1	2
Repair of cervix, Emmet's. 13 12 1 " of perineum, Emmet's. 9 9 " modified flap splitting 3 3 " unclassified 4 4 " of separated recti. 1 1 " of fistula in ano 3 3	single				1	-
Repair of cervix, Enimet's. n of perineum, Emmet's. n modified flap splitting n modified flap splitting n unclassified n of separated recti. n of fistula in ano. 3 3 3 1 1 1 1 2 2 2 6 2 6 2 2 6	Deprive of according Framet's				1.	1.
m modified flap splitting 3 3 3 m unclassified 4 4 4 m of separated recti. 1 1 m of fistula in ano 3 3	Repair of cervix, Emmet's		1	1.	1	
" of separated recti	modified flan splitting			1	1	
" of separated recti	" " modified hap spiriting				1	
of fistula in ano.	of caparated recti					1
of fiscale in another section of the	of fetula in ano	1				
Forward	" Of fistura in ano	-	-	-	-	-
	Forward	. 220	196	16	2	6

s in pital

	Total	Cured	Improved	Not Improved	Died
Forward	220	196	16	2	6
Repair of fistula, recto-vaginal	I	I	.:	::	
Resection of ovaries " of fallopian tubes	3	20	4	3	
" of hæmorrhoids	2 I	2	1	::	::
Salpingectomy, single	I I 2	I	::	::	::
Tamponing uterusVentro-fixation of uterus	19	19	·		
Total	278	245	22	5	6

RI

Conjunct

Pterygius Tumor o

CO

Keratitis

Ulcer of Wound of Foreign Leukom Staphylo Hyphæn Burn of

Glaucon
Phthisis
Tumor,

Tumor, Sarcoma Foreign Contusi

REPORT OF EYE AND EAR DEPARTMENT,

For the Year ending 31st December, 1899.

By FRED. T. TOOKE, B.A., M.D., RESIDENT OPHTHALMOLOGIST.

	ital 1899	ADI	TTIN	ED	I	DISC	HAR	GED		ng 1899	Days Hospi	in ital
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not Treated	Died	Remaining 31st Dec., 1899	Total	Daily Average
CONJUNCTIVA												
Conjunctivitis, chronic granular. " phlyctenular " eczematous " gonorrhœal Pterygium Tumor of conjunctiva		15 2 1 2 1 1	IO I I I I I I I I I I I I I I I I I I	5 I 2 	5 2 1 2 1	6	 	2	::	 	391 50 4 17 8 7	26 25 4 8 8 7
CORNEA AND SCLEROTIC												
Keratitis, interstitial " phlyctenular " fascicular. Ulcer of cornea, (simple). Wound of cornea Foreign body in cornea Leukoma corneæ Staphyloma corneæ. Hyphæma Burn of cornea		7 2 1 14 3 1 4 1 1	7 2 1 7 3 1 2 	7 2 I	3 3 7 2 1 1	5 7 I 3	··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··			I I	114 28 54 383 65 39 68 14 55 25	16 9 54 27 21 39 17 14 55 25
GLOBE												
Glaucoma, secondary " chronic. Phthisis bulbi. Tumor, intraocular. Sarcoma of orbit. Foreign body in eyeball. Contusion of eyeball.		1 7 5 2 1 6 8	1 3 1 1 6 6	4 4 2 2	3 2 1 3 7	1 3 1 1	2 I I 2			··· ··· ··· ···	55 90 75 47 7 221 92	55 12 15 23 7 36 11
Forward	. 2	87	57	30	44	30	8	2		5	1909	\

	tal 1899	ADI	TIIM	ED	1	DISC	HAF	RGEI		ing 1899	Days Hosp	
DISEASES	In Hospital 1st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31stDec.,1899	Total	Daily
Forward	2	87	57	30	44	30	8	2		5	1909	
LENS												
Cataract, capsular " congenital " lamellar " nuclear " ophthalmia " traumatic " secondary " senile Lenticonus Lens, dislocation of	 I 	4 2 3 2 1 4 2 27 1 2	I 2 I I I I I I I I I I I I I I I I I I	3 2 I I II	3 1 4 1 1 2 1 26	I 2 I I	··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··	:: :: :: ::	:::::::::::::::::::::::::::::::::::::::	I 2 I	100 41 124 11 37 114 91 846 95 25	33 20 31 11 37 28 45 28 95 12
LIDS			,									
Epithelioma of lid	::	1 4 1 1 2 2	I I I 2 2	3	1 3 1 1	I	::			 I I	13 85 42 10 42 60	13 21 42 10 20 30
MUSCLES												
Strabismus, convergens divergens		4 2	2	2 2	4 2	::	::	::	::	::	57 50	14 25
OPTIC NERVE AND RETINA												
Atrophy of optic nerve Neuritis, retro-bulbar Nuclear paralysis Retina, detached Vitreous, hæmorrhage into " opacities Retinitis, albumenuria	2 I	4 3 5 2 1	4 3 5 1	 	I I 	3 1 2	2 I I 3 	::	::	i :: ::	84 88 9 145 21 86 41	21 29 9 20 21 43 41
REFRACTION AND ACCOMMODATION												
Myopia, high grade		2 I	2 I	::	2	I	::	::	::		78 16	39
Forward	11	171	113	58	101	47	17	3		14	4344	

DIS

Irido cyclitis .

LACHRYMA

Dacryocystitis, Carcinoma of Occlusion of la

Abscess, cervic meatus Adenoids Foreign body i Furunculosis . Impacted ceru Mastoiditis, ac Ostitis media, "

Sclerosing deal Suppurating po auditory mea

Patients Admitte

Total ti Patients "

Average

Days Hosp			al 899	AD	MIT	TED	[]	DISC	CHAR	RGEL)	8899	Days	
otai	Daily	DISEASES	In Hospital 1st Jan., 1899	al	les	Females	ed	Improv'd	Not Improv'd	Not Treated	p	Remaining 31st Dec., 1899	Hosp	Daily RAVerage
1	_ <		In	Total	Males	Fen	Cured	Imp	Imp	Tre	Died	R(31st	Total	DAV
909		Forward	. 11	171	113	58	101	47	17	3		14	4244	
		UYEA												
41	33	Irido cyclitis		9	3	6	4	4		I			174	19
124	31	Iritis		4 2	3	I 2	3	1			• •	I	117	29 11
37	37	" sclero kerato		I	1					::	::	1	23 36	36
91	28 45 28	LACHRYMAL APPARATUS												
95	95	Dacryocystitis, chronic		7	5	2	6	2					146	21
25	12	Carcinoma of lachrymal gland		I	I		I						18	18
		Occlusion of lachrymal duct		1	1		I						17	17
		EAR												
13	13	Abscess, cervical		I	I							I	9	9
85	2I 42	meatus		I		1	I						10	10
10	10	Adenoids		6		6	6						131	22
42 60	20	Foreign body in auditory meature Furunculosis	S	I	I	::	I				::		8 3	8
60	30	Impacted cerumen		ī	1	I	I		1.:	.:		1::	3	3
		Mastoiditis, acute	I	12	10	2	12	I					217	19
		Ostitis media, acute suppurative	I	12	5	7	13	i	1:				217	17
		" " chronic catarrhal. " " chronic suppura		4	2	2	2	1	I				157	39
57 50	25	tive		I		1	I		١				41	41
50	-3	" " and mastoiditis.		3	2	I	I	2					55	18
		Sclerosing deafness Suppurating polypus of externa		I	I		I						II	11
		auditory meatus		I	I							I	39	39
84 88	2I 29	Total		241	151	90	157	58	18	4		18	5937	-
9	9		1 1) .	1)	1 -) !	,		11 1		1
145	20													
21 86	43	Patients remaining Janua	ary Ist	, 189	9							I		
41	43	Admitted during 1899		• • • • •		• • • • • •				• • • • •		24	1	
		Total treated											255	
		Patients discharged, cur	ed									15	7	
		" " im	proved impre	oved.		• • • • •					• • • • •	5	8	
78	39	" " not	treate	ed									4	
16	16	" remaining Dece	ember	31st.	1899.							І	8	
	1												-	

OPERATIONS, EYE AND EAR DEPARTMENT,

For the Year ending 31st December, 1899.

CONJUNCTIVA.		LENS AND CAPSULE.	
Crushing granulations	6 I 2 2 2 I	Cataract, congenital " lamellar " senile	3 4 27 5 9 11 1 1 3 3
Cauterizing ulcer. Paracentesis Peritomy Removal of foreign body from cornea Removal of hyphæma Sclerotomy Syndectomy Talooing cornea, GLOBE AND ORBIT.	11 3 1 2 1 3 1 1	LIDS. Cantholysis Excision of cyst " of ulcer " of epithelioma. " of xanthalasma palpebræ Plastic operation " " and iridectomy. Removal of lashes. Skin-grafting. Burow's operation	1 8 2 1 1 1 1 1 1 3 1 1
Excision of tumor of orbit	12 1 8 1	MUSCLES. Advancement of internal rectus " of external rectus Tenotomy, internal, and advancement of external rectus Tenotomy	2 4 5 20
Iridectomy Iridectomy and discission Iridectomy, preliminary LARCHYMAL APPARATUS. Slitting canalicus Probing nasal duct	26 2 1	EAR. Adenoids, removal of	15 2 1 1 11 2 3

REPOR

DIS

Empyæma of i

Empyæma of more. Epistaxis Rhinitis, strum Septi, deviation

NASO-P

Adenoids

" and tonsils....

ORO-P

Cellulitis, perit Pharyngitis, ac Tongue, epithe Tonsils, hyperi Tonsil, epithel

LAH

Larynx, carcin

" and or
noma of . . .

Laryngitis, tub
Oesophagus, ca

REPORT OF NOSE AND THROAT DEPARTMENT,

For the Year ending 31st December, 1899.

BY FRED. T. TOOKE, B.A., M.D., RESIDENT LARYNGOLOGIST.

	ital 1899	AD	MIT	TED		DISC	CHAI)	ing 1899	Day Hos	s in pital
DISEASES	In Hospital st Jan., 1899	Total	Males	Females	Cured	Improv'd	Not Improv'd	Not	Died	Remaining 31st Dec.,1899	Total	Daily Average
NOSE.												
Empyæma of frontal sinus		2	2		ı					1	18	18
antrum of Highmore Empyæma of antrum of High-		I	1			1					10	10
more. Epistaxis Rhinitis, strumosa Septi, deviatio	::	9 2 1 4	3 2	6 1 4	7 2 1 3	2	::		::		136 11 27 38	15 5 27 9
NASO-PHARYNX.												
Adenoids		11	6	5	11						53	5
tonsils		10	4	6	9			I			67	7
ORO-PHARYNX.												
Cellulitis, peritonsillar	::	3 1 8 1	3 1 4 1	 4	3 8	::	::	 I	::	::	18 3 42 50 57	6 3 42 6 57
LARYNX.												
Larynx, carcinoma of " and cesophagus, carci-		1	1						1		3	3
noma of	 I 	3	1 3 1	::	::	2	1 2 1	::	::	::	17 27 46	17 9 46
Total	1	60	34	26	46	5	4	4	1	1	623	

8

... 15 ... 2 mo-

11

... 3

Remaining	st January, 1899
Admitted of	ring 1899 60
	6
Discharged	cured
"	improved 5
"	unimproved 4
	4
Died	I
Remaining	I
	— 6
Average nu	nber of days in hospital per patient

OPERATIONS, NOSE AND THROAT DEPARTMENT,

For the Year ending 31st December, 1899.

NOSE.		Trephining and curetting frontal sinus	2
Asche's operation for deviated septum	2	NASO-PHARYNX.	
Cauterizing nose	12		
Excision of nasal spine	1	Excision of tonsils	7
Removal of foreign body from nose	2	" and removal of aden-	
Removal of nasal myxoma	IO	oids.	38
Rhinitis, hypertrophica (cauterized)	12	Remova. of adenoids	23
Separation of synechia of inferior turbi-			
nated and septum	I	LARYNX AND TRACHEA.	
Trephining and curetting antrum of High-			
more	9	Removal of pin from larynx	I
Trephining and curetting frontal sinus and		Removal of false tooth-plate from larynx.	I
antrum of Highmore	I	Tracheotomy	I

REPO

Abscess Blepharitis . . Blepharophim Blepharospasi Chalazion Concretion, m Cyst Ectropion ... Entropion ... Eczema Hordeolum ... Ptosis, conger Trichiasis Xanthelasma.

Lachrymal O Dachryo-cysti

LAC

Burn of conjur Pinguecula... Pterygium ...

Conjunctivitis

COR

Cicatrices, Ne Conical Corne Episcleritis... Foreign Body Inflamed Leuc Keratitis Keratitis, inte den phly

sup

vesi

REPORT OF OUT-PATIENTS' DEPARTMENT,

FOR DISEASES OF THE EYE AND EAR,

For the Year ending 31st December, 1899.

LIDS.		CORNEA AND SCLEROTIC.—Con.	
Abscess Blepharitis Blepharophimosis Blepharospasm. Chalazion. Concretion, meibomian Cyst.	2 19 1 3 7 1	Leucoma adhærens Staphyloma Corneæ. Ulcus serpens Corneæ. Wound of Cornea. UVEA.	1 1 3
Ectropion Entropion Eczema Hordeolum Ptosis, congenital Trichiasis Xanthelasma	1 2 3 4 1 2	Choroiditis. Choroido-retinitis. Cyclitis serous. Iritis Irido-cyclitis Sarcoma of choroid.	6 4 2 9 3 1
		OPTIC NERVE AND RETINA.	
LACHRYMAL APPARATUS. Lachrymal Obstruction	9 10 7 20 21	Amblyopia, congenital. Amaurosis, uræmic. Detachment of retina Optic atrophy " neuritis. Retinitis, albuminurica " pigmentosa " syphilitica Retrobulbar neuritis.	3 1 4 7 1 1 2 1 6
Burn of conjunctiva Pinguecula Pterygium	2 3 2 2	Aphakia (post-operative). Cataracta, secondaria. " senilis " traumatica.	5 3 13 6
CORNEA AND SCLEROTIC.		VITREOUS.	
Cicatrices, Nebulæ, etc. Conical Cornea. Episcleritis. Foreign Body in cornea.	12 1 2 5	Muscæ	I
Inflamed Leucoma. Keratitis, interstitialis. dendritica phlyctenularis * suppurativa traumatica n with lead deposit. vesiculosa.	3 1 18 15 3 1	Atrophia Bulbi Contusio Bulbi. Foreign Body in globe. Glaucoma, absolute. " chronic. " " (Buphthalmos). Tumor of Orbit.	4 6 3 3 2 1 1

OCULAR MUSCLES.	EAR.	
Strabismus, convergens 27 " divergens 3 Nystagmus 2 Exophoria 6 Esophoria 2 Herperphoria 2 Hyper-esophoria 1 REFRACTION AND ACCOMMODATION.	Abscess of ear. Chondritis. Cyst. Deaf-mutism. Eczema auditory canal. " auricle. Impacted Cerumen Labrynthine Deafness. Nerve Deafness.	14
Anisometropia 14 Hypermetropia 114 Hypermetropic Astigmatism 30 Compound hypermetropic Astigmatism 47 Myopia 28 Myopic Astigmatism 6 Compound myopic Astigmatism 18 Mixed Astigmatism 10	Obstructive Deafness Otitis media cat. acuta	2

Total number of conditions										
Deduct for two or more entries	796									
Actual number of patients	681									

REP

Epistaxis . Eczema of n Facial erysip Foreign bod Septal spur . Rhinitis, ac

" at " ch" di " hy " sti

Septum, dev

Rhinitis, hyp Rhino-phary

Rhino-phary

Abscess of li Foreign body

REPORT OF OUT-PATIENTS' DEPARTMENT,

FOR DISEASES OF THE NOSE AND THROAT.

For the Year ending 31st December, 1899.

NOSE.		ORO-PHARYNX.—Con.	
Epistaxis Eczema of nares. Facial erysipelas. Foreign body in nose. Septal spur Rhinitis, acuta " subacuta " atrophica. " chronica " diphtheritica " hypertrophica " strumosa. " vaso-motor. Septum, deviated. " ecchondrosis of. " necrosis of. " perforation of (non-specific). " synechia with middle turbinated	7 1 1 2 4 4 2 2 53 28 1 25 10 2 8 2 1 5	Gumma of tongue. Palate, papilloma of soft. "epithelioma of soft. Peritonsilitis Pharynx, specific ulcer of. Pharyngitis, atrophica. "chronica. "granulosa. "specifica "subacuta Post-diphtheritic paralysis of soft palate. Tonsils, enlarged "cyst of. Tonsilitis, acute, follicular "subacute Thyroid, hypertrophied (cystic) Uvula, elongated Uvulitis	1 1 1 8 3 9 2 2 1 2 8 1 1 1 8 1 1 1 1 1 1 1 1 1 1 1
of	I	LARYNX.	1
NASO-PHARYNX.		Aphonia, functional	2
Adenoids " and hypertrophied tonsils Epistaxis and adenoids. Empyæma of antrum of Highmore " ethmoid " frontal sinus Rhinitis, hypertrophic and adenoids Rhino-pharyngitis, atrophica " chronica " sicca Rhino-pharyng. laryngitis, atroph	39 37 1 5 1 1 21 15 2	Arytenoids, perichondritis of. Epiglottis, want of elevation of. Foreign body in larynx. " " in bronchus. Herpes laryngii. Laryngitis, acuta. " subacuta. " chronica. " tuberculosa Larynx, sarcoma of. Nuclear paralysis.	3 I 2 I I 2 6 2 20 I I 2
ORO-PHARYNX. Abscess of lip	I I I	Paralysis of vocal cords. Paresis of "" Pulmonary tuberculosis. Stammering. Trachæl ozœna.	4 I I I

REPORT OF THE PATHOLOGICAL DEPARTMENT.

For the Year ending December 31st, 1899.

COMPILED BY ALBERT G. NICHOLLS, M.A., M.D., ASSISTANT PATHOLOGIST.

During the year seventy-eight post-mortem examinations were made. In many of these the head was not touched, but otherwise in the vast majority of the cases a complete study was made.

Bacteriological examinations, conducted by Dr. H. B. Yates, were made in all cases in which the autopsy was held within fifteen hours of death.

Many of the cases were of considerable interest, and those of Diseases of the Nervous System have been very fully studied by Dr. D. A. Shirres, Clinical Assistant in Neurology.

- CASE I.—MALE. AGED 81. Left Lobar Pneumonia; left sero-fibrinous pleurisy; chronic ulceration of left leg; general marasmus; slight myo-degeneration of heart; acute bronchitis; acute gastritis and duodenitis; cloudy organs; myomatous hypertrophy of the prostate; generalised senile atrophy of organs; old omental adhesions; right old pleural adhesions; patent foramen ovale; milk spot on heart. Cultures from spleen, kidney, liver, bile, sterile; pericardium, sarcina alba.
- 2.—Female, 35. Perithelial Angiosarcoma of the Pituitary Body; pressure atrophy of the sphenoid; atrophy of the optic nerves; acute congestion of the organs; chronic interstitial nephritis; slight acute interstitial hepatitis; hypoplasia of genitalia; fragmentation of heart fibres. Cultures sterile.
- 3.—MALE, 57. Intestinal Obstruction (subsequent to operation for inguinal hernia); recent omental adhesions; pseudo-membranous inflammation of constricted bowel; bilateral broncho-pneumonia; slight acute parenchymatous nephritis; slight fibrosis of the heart; fatty degeneration of the liver; self-digestion of the pancreas; local old peritonitis; bilateral old pleural adhesions. Agar cultures from liver, bile and spleen, sterile. From kidney and pneumonic lung, B. coli.
- 4.—Male, 80. General Arteriosclerosis; hypertrophy of the right ventricle; slight hypertrophy of the left; atheroma of the aorta; bilateral emphysema and chronic bronchitis; sub-acute gastritis and enteritis; senile kidneys; brown atrophy of heart and liver; myomatous hypertrophy of the prostate;

self-digestion of the pancreas; reducible right inguinal hernia; bilateral old pleural adhesions; local healed peritonitis; patent foramen ovale. Agar cultures from pericardium, heart, liver, bile and urine, sterile; kidney and spleen gave B. coli.

- 5.—FEMALE, 21. Typhoid Fever; typhoid ulceration of ileum and ascending colon; intestinal hæmorrhage; acute parenchymatous degeneration of the kidneys; cloudy organs; acute bronchitis; acute splenic tumour. Urine gave pure growth of B. coli.
- 6.-INFANT, 2 days. Inanition.
- 7.—FEMALE, 40. Chronic Interstitial Nephritis; slight hypertrophy of the left ventricle; acute glossitis, pharyngitis and cervical cellulitis; slight acute duodenitis and catarrhal enteritis; acute bronchitis; hypostatic congestion of the lungs; slight acute interstitial hepatitis; cyst in liver; thrombosis of and phleboliths in vessels of broad ligaments; chronic metritis; accessory spleen. Cultures from organs, sterile; from cervical cellulitis and tongue, staphylococcus albus and aureus,
- 8.—Male, 76. Adenocarcinoma of Prostate; secondary in peritoneum, retroperitoneal tissues and lungs; acute cystitis; bilateral acute bronchitis; left hypostatic pneumonia; senile atrophy of organs; brown atrophy of heart; fatty degeneration of the liver; anthracotic tubercles in lungs; bilateral old pleural adhesions; old splenic adhesions; abnormal lobation of right lung; milk spot on heart. Agar cultures from the kidney gave proteus bacillus.
- 9.—Female, 4. Chronic Tuberculous Adenitis of Cervical and Mesenteric Glands; tuberculosis of intestines; operative incisions in neck; sinus over sternum; general septicæmia; dilatation of left ventricle; purulent bronchitis; chronic suppurative pelvic cellulitis; right old pleural adhesions: cloudy organs; patent foramen ovale.
- 10.—MALE, 20. Acute Perforative Appendicitis; acute septic peritonitis; free fæcal concretions; cloudy organs; acute congestion of kidneys and liver; obsolescent tuberculosis of right lung. Agar cultures from heart-blood, bile and liver, sterile; from kidney B. coli.
- Pernicious Ancemia; septicæmia; acute right serofibrinous pleurisy; fatty degeneration of heart, liver and kidneys; hydropericardium; dilatation of left ventricle; serofibrinous peritonitis; chronic cedema of lungs; congenital enlargement of ascending colon and part of the transverse colon; left old pleural adhesions; abnormal course of transverse colon. Agar cultures from peritoneal fluid gave streptococcus pyogenes; from bile B. coli; from kidney B. coli and streptococci; bladder and stomach, B. coli; from spleen and heart-blood, streptococci; from intestine B. coli and undetermined bacilli.

- 12.—Female, 37. Chronic Tuberculous Peritonitis. (Operation.) Fæcal fistula; acute enteritis; latent tuberculosis of the right lung; cloudy organs; fatty degeneration of liver; cystic endocervicitis; bilateral old pleural adhesions; operative ablation of left ovary and tube.
- 13.—Male, 7. Gliosarcoma of Pons; flattening of convolutions of brain.
 (Partial autopsy.)
- 14.—Male, 50. *Pyopneumothorax*; gangrene of right lung; right empyema; compression of the right lung; purulent bronchitis; chronic fibrosis of lung; acute serofibrinous pericarditis; early acute aortic endocarditis; slight dilatation of right ventricle; acute catarrhal enteritis; cloudy organs; slight fibrosis of the kidney; bilateral old pleural adhesions; abnormal course of transverse colon. Agar culture from spleen gave staph. pyog. albus.
- 15.—Female, 3½. Right Acute Lobar Pneumonia; right acute fibrinous pleurisy; compensatory emphysema of left lung; bilateral acute bronchitis; ulceration of epiglottis; acute pharyngitis; acute enteritis; cloudy organs; fatty degeneration of liver; latent caseous tuberculosis of the right lung; patent foramen ovale.
- 16.—Male, 30. Primary Contracted Kidney. (Lead.) Hypertrophy and dilatation of the left ventricle; acute serofibrinous pericarditis; bilateral serofibrinous pleurisy; cloudy organs; old splenic adhesions; cedema of lungs; double neuroretinitis and optic atrophy.
- 17.—Female, 18. Chronic Interstitial Nephritis; hypertrophy and dilatation of the left ventricle; bilateral acute broncho-pneumonia; sub-acute gastritis and enteritis; hyperplasia of the mesenteric glands; slight mitral stenosis; right old pleural adhesions. Agar cultures from kidney, spleen, liver, bile, and mesenteric glands, sterile; from peritoneal cavity staphylococcus pyog. albus; urine, B. coli.
- 18.—Female, 2½. Right Ulcerative Pulmonary Tuberculosis; right empyema; valvular communication with a bronchus; left tuberculous broncho-pneumonia; tuberculous ulceration of intestines; caseation of mesenteric glands; cloudy organs; congestion of liver and spleen.
- 19.—Male, 49. Acute Septic Peritonitis. (Operative ablation of appendix.) Intestinal obstruction; acute gangrenous ileitis; right early pneumonia; early chronic interstitial nephritis; cloudy organs; Meckel's diverticulum. Agar cultures from kidney, liver, and spleen, sterile.
- 20. Female, 69. Left Lobar Pneumonia; left fibrinous pleurisy; acute bronchitis; bilateral emphysema; atheroma of aorta, aortic valves, and larger vessels; chronic interstitial nephritis; congestion of liver and spleen; senile atresia of the vagina; cysts in broad ligament; atrophy of ovaries; senile atrophy of the brain. Agar cultures from liver, spleen, and bladder, sterile; from pericardium, staph. py. aureus; serum cultures from lung gave diplococcus lanceolatus.

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- 21.—Female, 25. Bilateral Chronic Ulcerative Pulmonary Tuberculosis; bilateral pleural adhesions; acute mitral and aortic endocarditis; tuberculosis of lymphatic glands; fatty degeneration of liver. Agar cultures from pericardium; spleen, kidney, lung, liver, bile, and urine, sterile.
- 22.—FEMALE, 64. Bilateral Chronic Bronchitis and Emphysema; arterial sclerosis; atheroma of aorta and aortic valves; early chronic interstitial nephritis; brown atrophy of heart; fatty liver; bilateral reducible hernia; local old peritonitis; multiple diverticula of jejunum; cyst of broad ligament; senile atrophy of uterus and ovaries; bilateral old pleural adhesions. Broth cultures from bile, spleen, and bladder, sterile.
- 23.—Female, 9. Acute Basal Leptomeningitis; bilateral acute bronchitis; cloudy swelling of organs; hyperplasia of solitary follicles of large intestine; self-digestion of the pancreas; hæmatomata on mitral valve; accessory suprarenal. Serum cultures from heart, liver, spleen, pericardium, and kidney, sterile; from base of brain B. coli and a diplococcus positive to Gram; from nasal secretion, staph. albus and aureus, and a diplococcus positive to Gram.
- 24.—Male, 55. Adenocarcinoma of Larynx. (Operation: tracheotomy); cancerous ulceration; bilateral partial atelectasis; bilateral acute bronchitis; secondary carcinoma of liver; bilateral old pleural adhesions. Agar cultures from spleen, liver, and bile, sterile; from kidney, staphylococcus albus and aureus.
- 25.—MALE, 35. Cor Bovinum; mitral stenosis and regurgitation; aortic regurgi tation; atheroma of aorta; general anasarca; multiple infarcts of lungs; ascites; passive congestion of organs; brown induration of lungs; left obsolescent pyonephrosis; compensatory hypertrophy of right kidney; ankylosis of elbow-joint; bilateral old pleural adhesions.
- 26.—Female, 59. Thrombosis of Cerebral Vessels; areas of softening in the left motor and temporal areas; hæmorrhage into left internal capsule; atheroma of cerebral vessels; old operation wound. (Partial autopsy.)
- 27.—Female, 30. Embolism of Left Middle Cerebral Artery; chronic mitral and aortic endocarditis; acute mitral endocarditis; acute ulcerative aortic endocarditis; multiple infarction of lungs, spleen, left kidney, and mesenteric vessels; multiple necroses in intestine; fibrosis of suprarenals; subinvolution of uterus; recent delivery; thrombosis of veins of the broad ligaments; cholelithiasis; abnormal course of right coronary artery; abnormal course of the transverse colon; milk spot on heart. Agar cultures from blood and bile, sterile; from vegetations of mitral valve, staphylococcus albus.
- 28.—Infant, 3 hours. Atelectasis; inanition; enlarged thymus.
- 29.—Female, 24. Acute Suppurative Perimetritis; bilateral acute salpingitis and öophoritis; abscess of uterus; acute septic peritonitis; operative ablation of appendix; acute ileitis; cloudy organs; old adhesive peritonitis; bilateral old pleural adhesions; patent foramen ovale. Agar cultures from peritoneum, streptococcus pyogenes; from the urine B. coli; from spleen sterile; lactose broth culture from bile, sterile.

- 30.—Female, 15½. Catalepsy (?reflex); old adhesions of dura to calvarium; accessory cervical ribs; slight acute colitis; acute congestion of organs; enlargement of mesenteric glands; accessory suprarenals; follicular cyst of ovary. Agar cultures from spleen, blood, and bile, sterile; from liver B. pyocyaneus.
- 31.—Male, 19. Acute Perforative Appendicitis (operation); acute septic peritonitis; enlargement of the mesenteric glands; cloudy organs; congestion of spleen, liver and heart; acute parenchymatous nephritis; acute interstitial hepatitis; post-mortem erosion of stomach; commencing decomposition; left old pleural adhesions.
- 32.—Female, 53. *Cholelithiasis* (operation); local adhesive peritonitis; empyema of gall-bladder; dilatation of bile passages; cloudy organs; sub-acute parenchymatous nephritis; parotitis; fatty degeneration of liver; obsolescent tuberculosis of right lung; nodose atheroma of the Circle of Willis; follicular cyst of right ovary; right old pleural adhesions; accessory spleen. Agar cultures from spleen, kidney, and bile gave B. coli.
- 33.—MALE, 23. Bilateral Chronic Ulcerative Pulmonary Tuberculosis; tuberculous ulceration of epiglottis, larynx, trachea, and small intestine; acute bronchitis; congestion of spleen; acute mixed nephritis; necrosis of liver parenchyma; cloudy organs; bilateral pleural adhesions; accessory spleen.
- 34.—Female, 25. Acute Suppurative Salpingitis and Oophoritis; acute septic peritonitis (operation); operative ablation of appendix; left pleural empyema; acute serofibrinous pericarditis; acute parenchymatous nephritis; congestion and cedema of lungs; cloudy organs; enlargement of mesenteric glands; colloid struma of thyroid; acute pharyngitis; acute vaginitis; latent tuberculosis of left lung; left old pleural adhesions; Liebermeister's grooves. Agar growths from pleural fluid gave bacillus pyocyaneus.
- 35.—MALE, 33. Bilateral Chronic Tuberculous Broncho-pneumonia; miliary tuberculosis of lungs and kidneys; caseous tuberculosis of liver and retrosternal glands; necrosis of sternum and ribs; sinus-formation; hæmorrhagic erosion of stomach; amyloid disease of liver and spleen; lime infarcts in kidney.
- 36.—Male, 38. Left Empyema; compression of left lung; acute perforative appendicitis; (operation for both conditions); local purulent peritonitis; acute serofibrinous pericarditis; parenchymatous degeneration of kidneys; cloudy organs; fatty infiltration of liver; bilateral pleural adhesions; Liebermeister's grooves.
- of aorta; cor bovinum; multiple infarcts of lungs; chronic cedema of lungs; chronic bronchitis; lest hypostatic pneumonia; bilateral sero-fibrinous pleurisy; arterio-sclerotic kidneys; passive congestion of organs; cyanotic induration of liver; dilatation of appendix; healed local peritonitis; cholelithiasis; fibrosis of gall-bladder. Agar cultures from kidney and liver gave staphylococcus py. albus; from bile B. coli.

- 38.—MALE, 56. Acute Myelitis; paralytic distension of small intestines; acute diphtheritis of colon; local plastic peritonitis; recent adhesions of great omentum; cloudy organs; hæmorrhage into spleen; atheromatous ulcer of aortic valves; milk spot on heart; bilateral double pelves and ureters in kidneys, with accessory renal arteries. Agar cultures from spleen, pericardium, liver, and subdural space, sterile.
- 39.—Male, 67. Hæmorrhage into Right External Capsule; bilateral emphysema and chronic bronchitis; hypertrophy of right ventricle; atheromatous ulceration of aortic valve; atheroma of aorta; arterio-sclerosis; hydropericardium; congested organs; cholelithiasis; abnormal course of transverse colon; Liebermeister's grooves. Agar cultures from heart-blood, liver, and spleen, sterile.
- 40.—Female, 64. Intestinal Obstruction; (operation, hysterectomy for myoma); chronic bronchitis and emphysema; cor bovinum; right nephrolithiasis; bilateral pyelonephritis; early portal cirrhosis; retroperitoneal hæmatoma; left old pleural adhesions. Agar cultures from kidney gave B. coli.
- 41.—Female, 52. Uterine Fibroid (operation: hysterectomy); infection of wound; slight acute enteritis; slight acute parenchymatous nephritis; fatty infiltration of liver; congestion of spleen; early pelvic cellulitis; recent omental adhesions; local healed peritonitis; right old pleural adhesions. Agar cultures from spleen, sterile; from peritoneal cavity staphylococcus; from liver staph. p. albus.
- 42.—MALE, 46. Myomalacia Cordis; advanced atheroma of coronary vessels; acute hæmorrhagic pericarditis; dilatation of heart; atheroma of aorta; congested organs; varicose veins; left old pleural adhesions. Agar cultures from liver, spleen, and bile, sterile.
- 43.—Male, 12. (Partial autopsy.) Suppurative Otitis Media. (Operation: trephining mastoid cells.) Acute basal meningitis. Agar cultures from the base of the brain gave staph. p. albus.
- 44.—Female, 40. Acute Suppurative Salpingitis and Oophoritis. (Operation: removal of appendages.) Infection of wound; acute simple peritonitis; fæcal fistula; vaginal fistula; right pyelonephritis; bilateral ascending mixed nephritis; abscess of uterus; congestion of organs; self-digestion of pancreas; bilateral old pleural adhesions; patent foramen ovale.
- 45.—Male, i. Acute Gastroenteritis; rhachitis; enlargement of mesenteric glands; congestion of organs; patent foramen ovale. Agar cultures from spleen, liver, kidney, bladder, bile, mesenteric glands, sterile; from lumen of intestine, staph. p. albus.
- 46.—MALF, 60. Left Ulcerative Pulmonary Tuberculosis; right caseous pneumonia; left hæmorrhagic pleurisy; tuberculous enteritis; sub-acute gastritis; miliary tuberculosis of liver and spleen; slight acute parenchymatous nephritis; slight myodegeneration of heart; atheroma of acrta; bilateral old pleural adhesions. Agar cultures from spleen, bile, and urine, sterile; from liver, B. coli.

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- 47.—Male, 68. Myelogenous Leukæmia; raspberry-jelly appearance of bone marrow; slight enlargement of retroperitoneal glands; small spleen; right hypostatic pneumonia; infarct of lung; right serofibrinous pleurisy; acute bronchitis; dilatation of left ventricle; hyperplasia of Peyer's patches; slight acute parenchymatous nephritis; congestion of spleen; cyst in left testicle; left old pleural adhesions; local healed peritonitis; abnormal lobation of right lung; abnormal course of transverse colon; patent foramen ovale; Liebermeister's grooves in liver.
- 48.—Female, 32. Ghronic Tuberculous Peritonitis. (Operation.) Miliary tuberculosis of lungs, spleen, and kidneys; latent caseous tuberculosis of right lung; right acute broncho-pneumonia; left hæmorrhagic pleurisy; catarrhal obstructive jaundice; thrombosis of left middle meningeal artery; hypoplasia of aorta; patent foramen ovale. Agar cultures from spleen gave B. coli and a putrefactive bacillus.
- 49.—Male, 24. Typhoid Fever; typhoidal ulceration of small and large intestines; intestinal hæmorrhage; perforation of intestine with local adhesion of great omentum; hyperplasia of mesenteric and retroperitoneal glands; acute splenic tumour; cor bovinum; mitral regurgitation; acute tricuspid endocarditis; acute parenchymatous degeneration of kidneys; congested spleen; focal necroses in liver; strangulated appendix epiploica. Agar cultures from heart-blood, kidney, liver, and pericardial fluid, sterile; from bile and spleen B. typhi abdominalis.
- 50.—Male, —. Aneurysm of Ascending and Transverse Portions of the Arch of Aorta; rupture into esophagus; atheroma of aorta; hydropericardium; healed adhesive pericarditis; blood-stained fæces in rectum; bilateral bronchopneumonia; cloudy kidneys; embolic areas of inflammation in suprarenals; self-digestion of pancreas; slight hydrocele of tunicæ vaginales; old local peritonitis; patent foramen ovale; two accessory spleens; amyloid bodies in lungs. Agar cultures from heart-blood, liver, spleen, pericardial fluid, and gall-bladder, sterile.
- 51.—FEMALE, 20. (Partial autopsy.) Glio-8arcoma of Brain; tumour of right frontal lobe; congestion of dura mater; pressure upon pituitary body.
- 52.—MALE, 24. Glio-Sarcoma of Cerebellum; flattening of convolutions; pressure upon the left 6th, 7th, 9th, and 10th cranial nerves; active congestion of all organs. Agar cultures from heart-blood, liver, spleen, kidney, gall-bladder, and urine, sterile.
- 53.—Female, 33. General Arterio-Sclerosis; myodegeneration of heart; cor bovinum; chronic interstitial pneumonia; arterio-sclerotic kidneys; congestion of spleen; abscess of left lung; cedema of lungs; obsolescent adhesive pericarditis; abnormal course of transverse colon; accessory spleen; accessory suprarenal; patent foramen ovale; double right coronary.

- 54.—Male, 40. Right Acute Lobar Pneumonia; acute fibrinous pleurisy; compensatory emphysema of left lung; dilatation of right ventricle of heart; organs cloudy and congested. Cultures from kidney, liver, spleen, lungs, and urine, sterile.
- 55.—MALE, 40. Mitral Stenosis and Regurgitation; aortic stenosis and regurgitation; relative insufficiency of tricuspid valve; cor bovinum; acute serofibrinous pericarditis; right hydrothorax; right plastic pleurisy; ascites; simple plastic peritonitis; hæmorrhagic erosions of intestines; melæna; acute diphtheritis of ileum; nutmeg liver; slight cirrhosis of liver; arterio-sclerotic kidneys; left hypostatic pneumonia; fatty degeneration of heart; local cedema; accessory suprarenal; persistent thymus; patent foramen ovale. Cultures on agar from heart-bloood, pericardial fluid, kidney, and bile, sterile.

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- 56.—Female, 43. Left Suppurative Salpingitis and Oophoritis. (Operation.)
 Acute septic peritonitis; (old operative ablation of right appendages); bilateral pulmonary emphysema; infarct of left lung; multiple small fibroids of uterus; cloudy organs; slight chronic glomerulitis; abdominal hernia.
- 57.—Female, 74. Bilateral Acute Lobar Pneumonia; myodegeneration of heart; brown atrophy of heart and liver; atheroma of aorta; senile atrophy of organs; porencephaly; degeneration in pons, medulla, and cord; accessory thyroid; right old pleural adhesions; abnormal course of transverse colon. Cultures from liver and heart-blood, sterile.
- 58.—Female, 50. Bilateral Acute Broncho-Pneumonia; left plastic pleurisy; acute bronchitis; slight myodegeneration of heart; senile interstitial nephritis; congested spleen; enteroptosis; accessory thyroids; accessory suprarenal; right old pleural adhesions; abnormal lobation of left lung; senile atrophy of uterus and ovaries; varicosity of veins of left broad ligament; varicose veins of legs. Agar cultures from spleen, liver, left kidney, lung, heart-blood, and pericardial fluid, sterile.
- 59.—FEMALE, 8. Diabetes; bilateral chronic ulcerative pulmonary tuberculosis; tuberculous lymphadenitis; tuberculous enteritis; fatty liver; cloudy organs; bilateral old pleural adhesions; abnormal lobation of right lung; partial persistence of thyroglossal duct. Cultures from spleen, pericardial fluid, pancreas, sterile; from liver, staphylococci.
- 60.—MALE, 19. Acute Perforative Appendicitis. (Operation.) Acute septic peritonitis; retroperitoneal abscess; multiple small infarcts in lungs; cloudy organs; congenital absence of left kidney and ureter; patent foramen ovale; accessory spleen; bilateral old pleural adhesions; old amputation of fingers. Cultures from heart-blood, liver, bile, spleen, and kidney, sterile; from peritoneal cavity, staphylococcus aureus.

- 61.—Female, 45. *Chronic Tuberculous Enteritis;* inflammatory stenosis of ileum; caseation of mesenteric glands; acute purulent peritonitis; operative ablation of appendix; acute parenchymatous nephritis; latent tuberculosis of lungs; cloudy and congested organs; left old plural adhesions. Culture from omentum gave a bacillus allied to B. coli.
- 62.—Male, II. Lieno-Medullary Leukæmia; enlargement of spleen, liver, and lymphatic glands; infarction of spleen; dilatation of the heart; obsolescent tuberculosis of lungs and lymphatic glands; leukæmic infiltration of organs; eosinophilia.
- 63.—Male, 23. Bilateral Acute Lobar Pneumonia; bronchiectasis; acute bronchitis; right serofibrinous pleurisy; hyperplasia of mesenteric glands; fatty infiltration of liver; focal necroses in liver; acute splenic tumour; cloudy organs; self-digestion of pancreas; obsolescent adhesive pericarditis.
- 64.—Female, 64. Fibroma of Dura Mater; general arterio-sclerosis; atheroma of coronaries and aorta; bilateral emphysema of lungs; calcification of cartilages; chronic myodegeneration of heart; multiple aneurysms of splenic artery; arterio-sclerotic kidney; senile atrophy of organs; cholelithiasis; acute interstitial hepatitis; self-digestion of the pancreas; broncholith; accessory lobe to thyroid; anthracotic tubercles in lungs; bilateral old pleural adhesions; Liebermeister's grooves; obsolescent perisplenitis. Cultures from heart-blood and spleen, sterile; from the bile B. coli and staphylococci.
- 65.—Female, 18. Right Tuberculous Pyopneumothorax; bilateral chronic ulcerative pulmonary tuberculosis; slight pericardial effusion; acute colitis; congestion of liver; bilateral recent pleural adhesions; tuberculous laryngitis. Cultures from heart-blood, pericardial fluid, pleural fluid, bile, liver, spleen, and thyroid, sterile.
- 66.—Male, 53. *Obstructive Jaundice*. (Operation: cholecyst-duodenostomy.) Hæmorrhage; local recent adhesive peritonitis; hæmoperitoneum; melæna; hypertrophy and dilatation of bile-passages; bile-sand in gall-bladder; biliary cirrhosis; fibrosis of pancreas,
- 67.—Male, 56. Myodegeneration of Heart; cor bovinum; atheroma of coronary vessels and aortic valves; parietal thrombus in left ventricle; general arterio-sclerosis; arterio-sclerotic kidneys; right hydrothorax; compression of right lung; hydropericardium; infarction of kidneys and right lung; chronic bronchitis; passive congestion of stomach and intestines; anasarca; moderate portal cirrhosis of liver; parenchymatous degeneration of kidney; self-digestion of pancreas; lipoma on forehead; left old pleural adhesions; patent foramen ovale; accessory suprarenal. Cultures from heart-blood, myocardium, and spleen, sterile.

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- 68.—Female, 21. Typhoid Fever; typhoidal ulceration of intestines; hyperplasia of mesenteric glands; acute splenic tumour; right lobar pneumonia; acute bronchitis; fatty degeneration of heart; cloudy organs; cholelithiasis; focal necroses in liver; catarrhal endometritis; obsolescent tuberculosis of lungs; right old pleural adhesions; self-digestion of pancreas. Cultures from bile gave B. typhi; from lung, staphylococcus aureus; from liver, sterile.
- 69.—Male, 22. Chronic Septico-Pyæmia; abscesses in lungs, spleen, and abdominal cavity; septic thrombosis of splenic vein; suppurative arthritis and periostitis; acute gastro-enteritis; amyloid disease of kidneys, suprarenal, spleen, and liver; subacute parenchymatous nephritis; self-digestion of pancreas; bilateral old pleural adhesions; subacute perisplenitis; patent foramen ovale. Cultures from spleen, lung, and knee-joint, sterile.
- 70.—MALE, 61. Chronic Indurative Pneumonia; chronic bronchitis and emphysema; hypertrophy of right ventricle; atheroma of aorta; slight acute simple peritonitis; ascites; acute catarrhal enteritis; chronic perisplenitis; congested organs; pigmentation of liver; amyloid concretions of prostate; fibrosis of left epididymis; bilateral old pleural adhesions; patent foramen ovale; Liebermeister's grooves of liver. Cultures from heart-blood, pericardial fluid, spleen, and liver, sterile.
- 71.—MALE, 34. Right Chronic Ulcerative Pulmonary Tuberculosis; fibroid tuberculosis of left lung; hypertrophy of cardiac ventricles; ascites; caseation of mesenteric glands; congestion of organs; slight acute interstitial hepatitis; necroses in liver; sclerosis of smaller arterioles; obsolescent adhesive perisplenitis and perihepatitis; multiple diverticula of transverse colon; partial persistence of thymus gland; branchiogenic cyst of neck; bilateral old pleural adhesions. Cultures from pericardial and ascitic fluid, spleen, and bile, sterile; from liver, streptococci.
- 72.—Female, 37. Stricture of Rectum with Ulceration; gangrene of right lung; localised pyopneumothorax; acute bronchitis; recto-vaginal fistulæ; tubo-rectal fistula; left chronic salpingitis; chronic perimetritis; dilatation of pelvis and atrophy of the right kidney; calcification of mesenteric glands; fatty degeneration of heart and liver; accessory left renal artery; bilateral old pleural adhesions. Cultures from pericardial fluid, sterile; from pleural fluid, mixed growth containing staphylococcus albus.
- 73.—MALE, 45. Lymphosarcoma; bilateral hæmorrhagic pleural effusion; collapse of left lung, hæmorrhagic ascites; villous masses of new growth in great omentum and peritoneum; enormous enlargement of spleen; enlargement of liver; pseudo-chylous ascites; enlargement and fusion of mesenteric and retroperitoneal glands; lymphomatous nodules in organs; infarct of spleen; congenital stenosis of ileum; bilateral old pleural adhesions; umbilical hernia. Cultures from spleen, liver, heart-blood, and retroperitoneal glands, sterile; from pericardial and peritoneal fluid, staphylococcus aureus.

- 74.—MALE, 43. Bilateral Empyema; partial collapse of left lung; bilateral emphysema; chronic bronchitis and bronchiectasis; acute pericarditis; slight subacute parenchymatous nephritis; cloudy organs; varicose veins of leg; latent tuberculosis of right lung; accessory spleen; congenital abnormality in arrangement of the peritoneum; bilateral old pleural adhesions; concretions in prostate; patent foramen ovale; double right coronary artery. Agar cultures from heart-blood and pericardium, sterile.
- 75.—Male, 42. Typhoid Fever; typhoidal ulceration of the intestines; acute splenic tumour; hyperplasia of mesenteric glands; intestinal hæmorrhage; cloudy organs; calcification of mesenteric glands; self-digestion of pancreas.
- 76.—Male, 73. Epithelioma of Tongue. (Operation: removal of tongue.) Sloughy condition of floor of mouth; slight cedema of larynx; bilateral septic aspiration pneumonia; senile atrophy of organs; atheroma of aorta; varicose veins of cesophagus; obsolescent perisplenitis and perihepatitis; right old pleural adhesions; latent tuberculosis of left lung. Agar cultures from liver, spleen, and urine, sterile; from heart-blood, streptococci; from lung, staphylococcus aureus.
- 77.—MALE, 58. Adeno-Carcinoma of Stomach. (Operation.) Secondary growths in heart, lungs, peribronchial glands, liver, pancreas, suprarenals; mesenteric and retroperitoneal glands; subacute parenchymatous nephritis; melæna; dilatation of bile ducts; icterus; brown atrophy of heart; amyloid concretions in prostate; left old pleural adhesions; patent foramen ovale; traumatic ablation of terminal phalanges of right first and second fingers. Cultures from heart-blood, streptococcus pyogenes; from urine, sterile.
- 78.—Female, 43. Chronic Ulcerative Colitis; multiple strictures of rectum and sigmoid; intestinal perforation; acute purulent peritonitis; congestion and emphysema of lungs; slight chronic interstitial nephritis; fatty infiltration of liver; lateral flexion of uterus; intramural fibroid; fibroid ovaries. Cultures from spleen, sterile; from liver, B. coli; from peritoneal cavity, streptococci.

Of this number, cases 2, 7, 11, 13, 16, 26, 27, 30, 38, 47, 49, 50, 51, 52, 57, 62, 66, 72, 73, were of more than ordinary interest, either on account of some rare condition or complication, or from a clinical point of view.

In the 78 cases tuberculosis was found	24 times.
As the cause of death	9 "
As a complication	
Latent tuberculosis	7 times.
Obsolescent tuberculosis	6 "

The fatal cases were classified as follows:-

Chronic Ulcerative Pulmonary Tuberculosis	6	cases.
Tuberculous Broncho-pneumonia	1	case.
Tuberculosis of Serous Membranes	I	"
Tuberculous Adenitis	1	46

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84

Cholelithiasis was found six times—two males, four females.

The following anomalies or malformations were noted :-

Patent foramen ovale 19 times.
Abnormal course of right coronaryonce.
Hypoplasia of aorta "
Accessory renal arteriestwice.
Abnormal lobation of left lung 3 times.
" " right lung 5 "
Unusual course of transverse colon 7 "
Meskel's diverticulumtwice.
Inguinal herniaonce.
Liebermeister's grooves of liver 6 times.
Accessory spleens 7 "
Accessory thyroids twice.
Kidney, double pelvis and uretersonce.
Partial persistence of thyro-glossal ducttwice.
Branchiogenic cyst of neckonce.
Accessory cervical ribs

SURGICAL DEPARTMENT.

During the year 362 specimens were received for examination from the Surgical operating room. The most interesting are noted as follows:—

Adenitis and Periadenitis:-

16 cases in all.

Of these 11 were simple inflammatory.

5 were tuberculous.

The glands affected were :-

Cervical									 					 						 		4
Inguinal									 										 	 	 I	0
Axillary									 										 			2

84 APPENDICES were received, classified as follows:-

Acute catarrhal	20
Acute necrosing	22
Acute perforating	24
Sub-acute relapsing	I
Chronic relapsing	6
Chronic relapsing, with acute exacerbation	
Obliterative	

104 REPORT OF PATHOLOGICAL DEPARTMENT.

CULTURES were made in 67 of these cases, of which 14 proved sterile germs found were:—	e. Th
B. coli	
Bones and Cartilages, Etc.:	
Noteworthy specimens were:—	
Inflammatory. 2 Osteomyelitis. 6 Necrosis. 4 Sequestra. 8 Tuberculosis 6	
Calculi. 15 cases.	
Vesical 2 Renal 5 Hepatic 8	
Empyema:—	
Cultures were made in three cases.	
Diplococcus lanceolatus, found on Sterile	ce.
Tumours, Neoplasms and Cysts:	
79 were received. Classified according to regions, the following form noted:—	s wer
Nose and Face:	
Epithelioma 12 Melanotic sarcoma 1 Hæmangioma 1 Dermoid 1	
Fibroma	
LIPS:	
Epithelioma 5 MOUTH AND TONGUE:	
F-141-11	
Jaws:	
Epithelioma	

Fibroid.....

Papilloma....

UTERUS:

URETHRA:

105

PEN	18:
	Epithelioma I
Bon	
	Fibro-sarcoma
	Osteoma I
	Spina bifida 2

One case is specially noteworthy, that of diffuse hypertrophy of the breasts in a young girl, and was recorded by Dr. James Bell in the *Montreal Medical Journal* for October.

EYE AND EAR DEPARTMENT.

The following is an analysis of the material received from the Eye and Ear Department, examined by Dr. W. G. M. Byers, Assistant in Ophthalmology:

- 1. Atrophia Bulbi, following wound of cornea, iris and lens, one case.
- 2. Sarcoma of Choroid, two cases, both females.
- 3. Perforated Ulcer of Choroid, with secondary glaucoma, one case; followed by panophthalmitis, one case.
- 4. Chronic Retino-uveitis, wound of the cornea, iris and lens; sub-retinal hæmorrhage and secondary glaucoma from contraction of massive retinal exudate, one case. Wound of cornea, iris and lens, and ciliary staphyloma from secondary glaucoma, one case. Foreign body in vitreous chamber surrounded by bands of fibrous tissue. Traumatic cataract and equatorial staphyloma from secondary glaucoma, one case. (Injury occurred 25 years previously; no signs of sympathetic irritation ever appeared in the other eye.)
- 5. Choroidal Hamorrhage after perforation of the globe by a lead shot, one case. Following operation for glaucoma (iridectomy), one case.
- 6. Chronic Plastic Exudative Uveitis, with formation of bone in choroid and exudate, two cases.
- 7. Irido-cyclitis, from wound in the ciliary region with prolapse of iris, etc., one case. Following operation for cataract, one case (not originally patient in R. V. H.) With secondary absolute glaucoma, one case.
- 8. Glaucoma, secondary to dislocated lens, one case; also two cases papilloma of conjunctiva; two cases primary carcinoma of lachrymal glands; fibro-angioma of orbit, one case; capsular cataracts; two lenses, etc.

Lab

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The following communications, based upon work done in the Pathological Laboratory during the year, have appeared:—

PROF. J. G. ADAMI:

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Syphilis and the Liver. - Montreal Med. Journal, April.

On Latent Infection and Subinfection, and on the Etiology of Hæmochromatosis and Pernicious Anæmia.—Journal of Amer. Med. Ass., Dec. 16-23.

On the Etiology and Symptomatology of Goitre.—Practitioner, Jan., 1900.

Dr. A. G. NICHOLLS:

On the Etiology of Chronic Bright's Disease.—Can. Journal of Med. and Surg., December.

PROF. BIRKETT and DR. NICHOLLS:

A Case of Carcinoma of the Larynx. - Montreal Med. Journal, May.

PROF. ADAMI and DRS. ABBOTT and NICHOLSON:

On the Diplococcoid Form of the Colon Bacillus.—Journal of Experimental Medicine, Vol. IV., Nos. 3-4.

DR. W. O. ROSE:

Notes on a Fatal Case of Alcoholic Delirium.—Montreal Med. Journal January.

Dr. E. W. ARCHIBALD:

Report upon 89 cases of Appendicitis .- Montreal Med. Jour., Feb., 1900.

The following specimens were shewn at the Montreal Medico-Chirurgical Society during the year:—

Myodegeneratio Cordis, with Atheroma of Coronaries.

Mitral Stenosis and Aortic Regurgitation, with Adherent Pericardium.

Two specimens of Tuberculosis of Kidneys.

Strangulated Femoral Hernia.

Carcinoma of Larynx.

Multiple Diverticula of Intestine.

Carcinoma of Prostate.

Primary Contracted Kidney.

Thrombosis of Middle Cerebral Artery.

Rules.

RULES RESPECTING THE ADMISSION OF PATIENTS.

Patients residing in the City or Parish of Montreal, and especially those who are in indigent circumstances and wholly or partially unable to provide medical treatment for themselves, may be admitted to the benefits of the Hospital; such as are unable to pay for their maintenance as "free patients," and such as are able to pay as "pay patients," for such consideration as may be arranged with the Superintendent on their admission. Patients from other districts, when it is deemed advisable by the Chairman of the House Committee, may be admitted on similar terms, on the recommendation of a member of the Medical Board.

Patients suffering from severe accidents or serious illness shall be admitted to the Hospital at any hour of the day or night. Other patients shall be admitted at such hours as may from time to time be decided upon. They must apply in person at the Hospital, when they will be examined and passed for admission by the House Physician or Surgeon on duty; or, if unable to apply in person, they shall be visited at their homes by one of the House Physicians or Surgeons.

Any member of the Medical Board may send to the Hospital such patients from the city as he may see fit, with a written order for admission.

No patient shall be admitted to the Hospital whose case shall be considered incurable, or infectious, or who is insane, or whose case does not require the particular benefit of an indoor treatment.

No children under two years of age, except in cases requiring special treatment, shall be admitted into the Hospital. p.m., time,

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tives of equality to the and used will not care of person address by special sanctions.

RULES FOR VISITORS.

Visitors will be admitted to the wards on Sundays from 3 to 4.30 p.m., and Wednesdays and Fridays from 3 to 4 p.m., and at no other time, except by special permission of the Superintendent.

No more than two visitors will be admitted at once to see any patient.

Visitors must observe perfect order and propriety while in the Hospital; must confine their visits to their immediate friends; must not stop or loiter in the halls, corridors or offices, or on the stairways, and must leave the building promptly at the end of the visiting hours.

RULES RESPECTING RELIGIOUS MINISTRATIONS.

Clergymen, ministers of religion, and the authorized representatives of religious bodies, shall be admitted to the wards upon terms of equality for the purpose of visiting and extending religious ministrations to the sick inmates of their own creed or denomination, at such times and under such conditions as in the judgment of the Superintendent will not unduly interfere with the medical or surgical treatment and care of the patients; they are, however, to confine their conversation to persons of their own creed or denomination, and to refrain from addressing or distributing books or pamphlets to other patients, unless by special invitation of the same when conveyed through, or with the sanction of the Superintendent.

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Repor Opera Repor Rules

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