with increase in the age of the patient. The proportion of good results obtained by different surgeons was quoted. The nature of the beneficial results, apart from a true cure, and the risks and complications, relative results obtained by different methods were described. The bloodless method was most suitable in early life, under five years, and in unilateral cases. He considered the difference in prognosis in unilateral and bilateral cases, the limits of age at which the various methods were applicable, and gave hints as to the selection of the different methods. All cases should be submitted to radiography before pronouncing upon the nature of the result. Mr. Noble Smith showed skiagrams of four cases he had recently seen by Léon's method with excellent results. Mr. R. C. Dun thought the weight of the plaster a disadvantage in the bloodless method, and had utilized aluminium strips to make the plaster case lighter. Mr. Robert Jones was one method should be tried under. He had occasionally obtained good results in very young children by simple manipulation. The neck of the femur might be broken by Lorenz's method. Mr. Oponsah insisted on the importance of dividing the capsule to secure reduction. Mr. A. H. Tubby thought there was less risk and more certainty in the open operation. Dr. Darier (Paris) read a paper on Some New Dental Signs of Hereditary Syphilis. He regarded 'Hutchinson's teeth' as the most striking, but as frequent to be neglected. A deciduous tooth had noted in the first permanent molar teeth. These special alterations were to be distinguished from the dental changes due to scrofula, rickets, or mercury. Dr. George Carpenter did not regard 'Hutchinson's teeth' as evidence of hereditary syphilis. Drs. Ashby and Goody also discussed the paper. Dr. George Carpenter read a paper on Splenomegaly in Infants and Young Children, based on 343 cases of the cases during the first twelve months of life. Dr. Edmund Cautley made a few criticisms, to which Dr. Carpenter replied. Dr. T. D. Lister read a paper on the Utilization of Infants' Milk Dépôts. Several economical and practical objections were raised by Dr. Cautley to the establishment of milk dépôts, though he recognized the advantages on theoretical grounds.

Friday, July 31st.

Dr. Nathan Raw opened a Discussion on Tuberculosis in Children—its Relation to Bovine Tuberculosis. He regarded tuberculous in man as due to two kinds of infection—one due to infection via the lungs, the other due to food infection. As a result of numerous necropsies he maintained that the lungs were attacked by two distinct types of tuberculosis. He thought tuberculosis in children was commonly due to food infection, which gave rise to "tubes mesentericae," or "consumption of the bowels," and quoted various statistics bearing on this point. In his opinion the child's first tuberculous affection was due to milk. Tuberculosis in cows was extremely prevalent, and the mortality from tubercles mesentericae in the country was not diminishing in accordance with the general decline in the mortality of the tuberculosis in man, especially in early life, was susceptible to both kinds of infection. Possibly the two varieties were antagonistic. The President, Mr. Arbuthnot Lane, pointed out that in many instances local injury or disease predisposed to infection. He thought that glandular enlargement in children should not readily accepted as tuberculous. Douglas Reid contributed some facts and statistics connected with India, showing that tuberculous disease in children was very rare among the civil population. Dr. John Mackenzie had failed on accepting the theory of bovine infection and pointed out the innumerable sources of human infection, especially among the poor. He accepted experimental results with great caution. Many cases of tuberculous meningitis in cows disposed of by disease. He had evidence in favour of infection taking place through the bronchial glands. Drs. C. G. Higginson, W. Langford Symes, Edmund Cautley, George Carpenter, and Mr. W. MacAdam Eccles, also took part in the discussion and Dr. Raw replied. Dr. George Carpenter read a paper on A Case of Syphilitic Nephritis and Moniliasis. The results of inherited syphilis were very definite. The urine contained hyaline and granular casts and blood corpuscles. The condition was typical of acute catarrhal nephritis. Microscopical examination of the kidney after death showed the same condition, the blood vessels. There were no interstitial changes. He held that syphilis played a much more important part in the nephritic affections of children than was usually supposed. Mr. R. C. Dun read a paper on Adenoid Vegetations in Infancy.

A Correction.

In the summary of the proceedings in the Section of Children's Diseases of the annual meeting of the British Medical Association held last week at Cheltenham, in a paper on the treatment of children a paper by Mr. A. G. Lees was stated to have been read by Dr. David B. Lees urged that in the treatment of chorea the doses of sodium salicylate should be given. The range of dosage should be grs. x to x+1—should be given.

Section of Laryngology and Thursday, July 30th.

A Discussion on the Technique of Operations on the Temporal Bones, the Eustachian Tube, and the Sinus Ethmoidalis was introduced by Dr. McBride of Edinburgh and Dr. Arthur Hartmann of Berlin. Dr. Hartmann also showed a number of temporal bones to illustrate various points in the surgical anatomy of the region. The discussion was continued by Dr. Dumas Grant, who expressed the opinion that the operations for acute suppuration were far too seldom performed, and so cases were allowed to become chronic and eventually, perhaps, required the complete radical operation. He did not always operate in acute cases, as described by Ashby and Goody. In the radical operation he found Körner's flap frequently satisfactory. Dr. R. C. Elsworth showed sections of temporal bones displaying the "accessory antrum." He also demonstrated a case which skirted this cavity, and that the operations for acute suppuration often spread to the sphenoidal sinus in cases where the sinus groove was not eroded. Professor Gluck discussed the treatment of sphenoidal sinus thrombosis, and described two cases of which he had performed extensive operations. Dr. John Horn thought the vein described by Dr. Elsworth was a tributary to the petro-squamosal sinus described by Mr. Arthur Cheatle. Dr. Herbert Tilley said he had abandoned the use of gold leaf in the skin-grafting operation; he used pellets of sterilized wool to pack the grafts into position, and used one large graft for the main cavity, with smaller ones to fill in. The sole advantage of grafting was that it shortened the after-treatment. Excellent results could be obtained if the patient were carefully selected. He had observed more individual attention. Dr. Bronner thought prolonged packing only retarded the healing. He would like to know the final result in cases treated by skin-grafting; how were the after-results in the case treated by skin-grafting; how were the after-results in the case treated by excision? Were the cases treated by excision without sequestra and chronicity? After the duration of the operation might it be a case be treated as an acute case, and when did it fall into the chronic category and require to be treated as such? Dr. R. H. Woods thought that the chief use of grafting was to prevent stenosis of the meatus; Dr. Delesaux (Brussels) related the experience of himself and a colleague in dispensing with plugging. They plugged for one day only, and then filled the cavity with boric acid powder, renewed as necessary. This was a sight of the treatment with islands of epidermis which gradually spread. Dr. Bronner read a paper on the Local Use of Formalin in the Treatment of Nasal Polypi before and after Operation. On the same day the usual methods, this being used, had probably made much use in the same way as the galvano-cautery, which produced a sort of localized boiling of the parts, and was a most efficient antiseptic. Dr. A. Haydon read a paper on Illustrations of the Effects produced by the Singing Voice in a Suitable Men sale.

Friday, July 31st.

A discussion on the Upper Respiratory Tract as a Source of Systemic Infection was introduced by Dr. de Haviland Hall, Dr. Jobson Horne, and Dr. F. J. Pyonton. Dr. Goodale (Boston, Mass.) dealt particularly with the histological alterations in the lymphoid tissue of the upper respiratory tract, and the development of micro-organisms, and illustrated his remarks by sketches. Dr. Herbert Tilley discussed the effect upon the