

tion, the completeness with which the entire subject is handled in small space, and make no doubt that it gives a fair representation of the practice of the French schools. It will no doubt be much appreciated by the subscribers of the Library and the general medical public.

**Hand-book for the Dominion of Canada, prepared for the Meeting of the British Association for the Advancement of Science at Montreal, 1884.**  
By S. E. DAWSON, one of the Local Secretaries of the Association. Montreal: Dawson Bros.

We have been favored with a copy of this excellent guide to this country and hand-book of valuable information to visitors. It contains sketches of each of the provinces and their leading cities, all written in that pleasant style for which the author is so well-known. We advise all our Montreal friends to draw the attention of strangers to the existence of this excellent manual, which has been prepared for their express benefit. Even Canadians will be surprised, in its perusal, to find how many things they may themselves learn about their own country. It is accompanied by excellent maps of the entire Dominion, showing all the railway and steamboat routes.

### Society Proceedings.

#### MEDICO-CHIRURGICAL SOCIETY OF MONTREAL.

*Stated Meeting, May 9th, 1884.*

T. A. RODGER, M.D., PRESIDENT, IN THE CHAIR.

The following pathological specimens were exhibited:—

*Aneurism of the descending Aorta—Erosion of Vertebra—Pressure on Left Bronchus—Carnified Left Lung.* DR. GEO. ROSS exhibited the specimen and narrated the case.

The specimen consisted of a large aneurismal sac occupying the descending portion of the thoracic aorta. The posterior wall of the pouch had been absorbed, and laid bare the bodies of several dorsal vertebrae, which were also considerably eroded. The left bronchus had been compressed, and the corresponding

lung was airless and carnified. The aortic segments presented a sclerosed and contracted appearance, and were inefficient. The lining membrane of the aortic arch extensively atheromatous.

The history of the case began with an attack of acute left-sided pleurisy more than two years ago, for which he had been attended by Dr. Ross. Physical examination at that time showed only the usual signs of pleuritic inflammation, and of incompetency of aortic valves, with consecutive changes in the left side of the heart. Aneurism was not suspected. A year later he consulted Dr. Blackader, who referred him to Dr. Ross once more, he believing that further organic disease existed. After recovering from his pleurisy, the patient had continued to suffer from persistent pain in the left side of the chest, and shortness of breath had become aggravated. Physical signs were: dullness over whole left lung, and respiratory sounds distant and feeble over same area. Double basic cardiac murmur. Tracheal traction evident. Aortic aneurism diagnosticated. Subsequently there were developed well-marked neuralgia of 5th, 6th and 7th intercostal nerves, which could be traced out by exquisite superficial tenderness; also a remarkably strong, heaving pulsation at the xyphoid and neighboring parts, apparently lifting the heart itself against the chest. The addition of these signs allowed the aneurism to be placed with certainty in the descending part of the aorta. He died with symptoms of bronchitis and increasing asphyxia.

*Cast from Membranous Dysmenorrhœa.*—DR. GURD exhibited what he thought might be a cast from a case of membranous dysmenorrhœa. The specimen was quite fresh, having been ejected from the vagina that morning. The patient, æt. 25, has been married two years; no children. For past seven years has suffered greatly during menstruation, but says what she lost has always been fluid blood with the exception of one occasion, about a year ago, when, after "missing" three months, and while at the water-closet, felt as if some small mass had come away. During the night before expelling the above cast, patient had had agonising pains for several hours. She had not seen anything for two months. The cast was the shape of the interior