

localized areas of atheroma, the appearance, when fresh, being very suggestive of a neoplasm, and these were thought at first to be secondary cancerous masses. On examination, the large spot was found to be composed of closely set small colourless bodies, about one-third or one-fourth the size of red blood corpuscles, discoid, and with a uniform greyish stroma. They appeared to be identical with the individual elements of Schultze's *granule masses*, which are so common in the blood of certain persons. In Dr. Wood's case of aneurism, the grey filaments on the walls were made up of precisely the same elements. A few colourless corpuscles and some fibrin fibrils also existed, but they were in trifling amount compared with the small elements. Dr. Osler remarked that these were the little bodies recently described by Prof. Bizzozero of Turin as a new blood element, but they had, in reality, long been known, having been described by Schultze in 1861. They occur in the drawn blood in the form of granular clumps, but he (Dr. O.) had shown, in a communication to the Royal Society in 1874, that in the circulatory blood the individual elements of the masses were isolated, and in the form of small discoids. An engraving was passed round illustrating them, as seen in a subcutaneous vessel of the young rat, which was the most favourable animal for the study of these bodies. In the case under consideration, these elements had apparently collected on an extensive area of atheroma, and had either multiplied there or the mass had been formed by their gradual accretion.

In comparative pathology, Dr. Osler presented the following specimens:—

*Glanders.*—1. The split head of a horse showing the nasal fossæ and sinuses. Horse had been ill for several months, but still in pretty good condition, but suffering from a chronic mucopurulent discharge from the nostrils. The specimen showed numerous ulcers, many of which could be seen from the external orifices; glanders tubercles in the form of isolated neoplasms on the Schneiderian membrane. They were thickly set in the upper part of the septum, and some were as large as beans. 2. Diffuse infiltration of the mucosa, with a greyish material most evident in

frontal sinuses and antra, but existed over the turbinated bones. 3. Stellate cicatrices of healed ulcers : there were numerous nodules in the trachea and a few ulcers ; there were also some of the specific nodules of the disease in the lungs. Liver, spleen and kidneys healthy. The cervical lymph glands were much swollen and contained a few nodules, no cutaneous glanders. (farcy.)

Dr. Gurd asked with reference to its degree of communicability, and whether many cases in man had been met with here. The President believed that the liability to contagion in man was over-rated ; at least there were many cases of glanders in horses and yet instances of infection of grooms and others were very rare. He had seen only one case ; that of a groom who had taken charge of several glandered animals on board a river steamer. The stench from them was very great and he took the affection by inhalation of the poison.

*Verminous Aneurism.*—Portion of arteria colica artery from a horse showing a small aneurismal dilatation, the size of an almond, the walls thickened and covered with adherent thrombi among which were several specimens of the *strongylus armatus* or palisade worm. This parasite bores its way from the intestine, penetrates the artery and excites arteritis, with weakness of the walls, dilatation and thrombosis in the lining membrane. It is a common affection among horses and according to Bollinger is the most frequent cause of colic in these animals. He states that of horses which are afflicted with internal disease, 40 per cent. suffer from colic ; of any 100 diseased horses, 40 have perished from colic ; and among 100 colic patients, 87 recover and 13 die. No epizootic or sporadic affection in horses is so common and so fatal.

*Aneurism of Aorta. Perforation of Œsophagus.*—Dr. Wood narrated the case—a female, aged 55 years, ailing for some days with dyspeptic symptoms. One evening, on going to stool, she complained of feeling sick, did not vomit, but fell over suddenly and died in a few minutes. There had been no apprehension of serious trouble, and nothing special could be elicited on careful examination of chest and abdomen. The autopsy by Dr. Osler revealed a large coagulum in the stomach, forming a mould of