

Both lungs were infiltrated with tubercle, and around the bifurcation of the bronchi were large tuberculous masses, which creaked under the knife like scirrhus. The liver was extremely enlarged, and also infiltrated with tubercle. The spleen, pancreas, and kidneys were also tuberculous; the latter organs, however, less than those previously mentioned. The wishes of the parents prevented any examination of the head.

This case is of interest on account of the extent and diffusion of the tuberculous deposit, and the youth of the patient.

*April 12. Gangrene of Foot, following Typhoid Fever.*—Dr. THOS. H. ANDREWS exhibited the specimen and read the history of the case from which it was derived, as follows:—

Jno. Mullen, aged 23; labourer; a native of Ireland; a man of not very good habits, oftentimes drinking to excess, but always enjoying good health, with the exception of an attack of intermittent fever and one of primary syphilis several years ago, which to a slight extent undermined his constitution. On the 29th of last November he was seized with a chill, headache, pain in back and limbs, deficient appetite, great restlessness, &c. He continued at his work, however, for a day or two, but at last was obliged to take to his bed. He immediately called in a physician, who told him he had typhus fever, of which disease there were a number of cases in his neighbourhood. His symptoms gradually increased in severity, until at last he sank into a state of stupor, in which condition he remained for two weeks, after which he began to convalesce. He says that he felt himself so well that he got out of bed; but, upon arising, discovered that he was very weak, and that his limbs felt stiff. He remained out of bed for several hours, when he began to suffer intense pain in both feet, more especially in the right one, which was swollen. He immediately returned to bed, and called in his physician, who made an incision on the dorsal aspect of the foot, which gave exit to nothing but blood, and afforded no relief. The swelling continued, and at night the foot had assumed an intensely livid appearance, and before two days had passed became black. The gangrene extended very slowly up the leg, until about six weeks ago, when a line of demarcation formed, and ulceration separated the soft structures of the gangrenous from the healthy part.

He was admitted into the Pennsylvania Hospital, April 4, 1865, in a debilitated condition, the pulse being frequent, feeble, &c. Tonics and good nutritious diet were immediately ordered, the part being dressed with a solution of permanganate of potassa, to correct fœtor. Amputation was performed four days later, by the ordinary flap operation, there being at the time very little bleeding, and it being necessary to use only two ligatures.

On examination of the artery, we found its walls thin. Under the microscope it appeared healthy, except where the fibres of the external coat contained oil, there being no atheromatous or calcareous degeneration. The microscope revealed an advanced state of fatty degeneration of the muscles, their striæ being obscured or obliterated by yellow granules and small oil-globules, and their interstitial tissue replaced by fat.

*On the Pathology of Secondary or Metastatic Abscesses.*—Dr. JOHN ASHHURST, Jr., read the following paper:—

The subject of metastatic abscesses, and the pathological theories which have at various times been advanced in attempting to explain their occurrence, have more than once been discussed and commented upon at meetings