

operations performed on patients of all ages by experts in India, where stone is very common :

Operation.	Cases.	Cured.	Died.	Mortality.
Lateral Lithotomy	7,201	6,407	794	11.02
Suprapubic Lithotomy	147	86	61	42.17
Litholapaxy	10,073	9,665	399	3.96

Keegan, in *Lancet*, January 30th, 1897.

These figures show that in childhood the crushing operation is one of comparative safety, although there is little to choose between it and the time-honored lateral section. The *sectio alta* is at this age much more dangerous. After puberty the enlargement of the urethra and development of the prostate, with a consequent increase in vascularity, increases the dangers of cutting operations through the perineum. These changes, however, facilitate the crushing operation, and render the performance of litholapaxy comparatively easy and safe. In old age the mortality is decidedly in favor of litholapaxy, being very little higher than it was earlier in life, whereas the danger of all cutting operations is markedly increased at this age. This is due to a loss of vigor, the increased size of the prostate gland with its injurious effect on the bladder.

Size and Consistency of the Stone.—The limits as to size under litholapaxy are being from time to time extended as instruments become more perfected. Stones weighing as much as 6½ ounces, which could not at first have been attempted, have been removed successfully in this way. (Freyer, in *British Medical Journal*, 1894.)

The hardness of the stone does not now contraindicate litholapaxy, but where a very large or dense calculus is encountered which defies the powers of the lithotrite, the surgeon will have to resort to one of the cutting operations.

Completeness of Cure.—That there is a greater danger of leaving a fragment of stone in the bladder after crushing than after lithotomy is one of the chief objections urged, but this is due rather to a want of thoroughness on the part of the surgeon than to a lack of completeness in the operation, for with a variety of evacuating cannulæ, both straight and curved, in competent hands, the chance of recurrence from retained fragments is very small indeed. The danger of retention of fragments is, however, greatly increased by any obstruction to the flow of urine, such as enlarged prostate. The bladder is then