gathered from the mother the following history of the case: The child had been from its birth rather delicate, but no indication of serious indisposition appeared until after her third year, when she showed signs of difficult micturition, the result, as was supposed, of injury of the spine from a fall. But after a time the urinary trouble ceased; at least escaped the notice of the mother. During the last six or eight months, however, she had had an almost constant desire to evacuate the bladder, attended with suffering so terrible that she had often begged her mother to kill her. I learned from Dr. Bragdon that she had been seen and treated by several physicians, no two of whom had been able to agree as to the nature of the case. As the symptoms pointed to urethral or cystic trouble, and as a satisfactory examination could not be made without placing the patient under the influence of ether, this measure, after some delay, was effected. I passed a common-sized female catheter into the urethra. The freedom and ease with which the catheter passed the canal disposed at once of the idea of urethral obstruction, and passing the instrument into the bladder a stone was clearly detected." Such was the description as given by Dr. Bonney. The doctor then closed with a request for me to visit the case with a view to an operation.

At my visit to see this case I found it to be as described and diagnosticated by Dr. Bonney, and that an operation was the only procedure to be adopted to relieve the sufferer. The removal of stone in the female by urethra, especially in a child of this age. I did not regard as a safe and justifiable operation, by reason of the danger of inducing incontinence of urine, which was liable to remain permanent. I therefore determined to make the vesicovaginal section. This operation for stone in the adult female, whose vagina is of the natural size, I look upon as comparatively a simple one, but in this case exceedingly difficult, especially if I should attempt to close the opening into the bladder by sutures. The patient, however, being fully etherized, with the assistance of Drs. Bonney and Bragdon, of North Conway, and the child's father, I removed a stone the size of a pigeon's egg through the vagina and base of the bladder, and immediately closed the opening by six silver sutures.

I will describe the method in which the operation was performed. I first passed a small sound into the bladder to learn the size, as far as possible of the stone. I then commenced to gradually dilate the vagina, that I might be able to introduce one of Sims's small speculums, which, in a short time, I succeeded in doing. This brought the parts finely into view, and the instrument almost held itself by the tensely distended vagina. A grooved