

but the whey and cream that was given was apparently well handled.

The abdomen was very much distended with gas. S.S. enema with turpentine succeeded only in part in removing this. The most of the distension seemed to be in the colon.

Palpation elicited very little information. There was a generalized tenderness, but the point of greatest tenderness seemed to be in the region of the spleen and the left kidney, as deep palpation here seemed to give more pain to the baby than elsewhere.

*Genito-urinary system.*—The child always screamed before passing his urine. There was a marked phimosis. Tenderness of the left kidney was noticed as stated above.

The urine was acid, marked reaction for albumin. The microscopic examination showed a little blood and a tremendous number of pus cells. Dr. McKee made an examination of the urine and reported that he got a pure culture of colon bacilli from it.

On the third day there was such a serious condition of affairs present that death seemed to be pending. Temperature was 105, pulse 160, child partially comatose, and with these conditions present I gave a few whiffs of ether and examined the abdomen. The right kidney was palpable and apparently normal. The left seemed to be enlarged to two or three times its normal size, and deep palpation under the light anesthesia gave evidence of pain.

With these facts at hand I advised the mother to allow me to operate.

Operation was carried out an hour later, with the assistance of Dr. Nicholson, at the Vancouver General Hospital, under light ether anesthesia. My incision, which was a posterior one, disclosed a kidney almost as large as in the adult. It was intensely congested, being almost black in color. I delivered the kidney, placed a large-sized chromic ligature about the pedicle, and cut the kidney away. The wound was closed up with a small drain left *in situ*. The whole time consumed in the operation was ten minutes.

In four hours after the operation the temperature was normal and remained so during convalescence, which was uninterrupted. In twenty-four hours there was neither pus nor blood in the urine, and there was a normal amount being secreted.

Two years after the operation I examined the child, and during that time he has remained healthy and has grown as an ordinary child would.

This case is interesting for two reasons: In the first place I can find no record of an operation having been done for a similar condition in a young child, and in the second I can find no record of