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RETROSPECT OF SURGERY.

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Operative Treatment of Enlarged Prostate.—The treatment of enlargement of the prostate is a problem which constantly presents itself to every surgeon, and so far its solution is not the most satisfactory. In a certain proportion of eases the judicious use of the catheter yields fairly good results, but in many of these cases a day comes when even the friendly catheter cannot be depended upon, and something else has to be tried. Cystitis or other accident may intervene, and to obtain relief operative measures are undertaken. The simplest operation is perineal section, and marked relief is often afforded, but very frequently this relief is only temporary. When the cause of the obstruction to the outflow of urine is hypertrophy of the prostate, no procedure which does not aim at removing this cause will prove of any permanent benefit. At the meeting of the British Medical Association held at Leeds in August last, Mr. McGill opened a discussion on "The Retention of Urine from Prostatic Enlargement" (British Medical Journal, Oct. 19, 1889). His paper was based on twenty-four operations of prostate etomy through a suprapubic incision, performed by various surgeons at the Leeds He submitted and discussed the following proposi-Infirmary. tions :-

(1) The prostatic enlargements which give rise to urinary

symptoms are intravesical and not rectal.

(2) The retention is caused by a valve-like action of the intravesical prostate, the urethral orifice being closed more or less completely by the contraction of the bladder and its contents.

(3) That in many cases self-catheterism is the only treatment

required.

(4) When the catheter treatment fails, or is unavailable, more radical measures are necessary. He states his belief that a large proportion of cases treated by catheter sooner or later