

tion to the magnitude of the operation—or, in other words, to the amount of injury done, due allowance being made of course for the patient's surroundings, &c. This rule does not hold good in operations about the urethra and bladder, where the most trifling operation may produce alarming or even fatal results; while severe operations, such as lithotomy and lithotrity, external urethrotomy and rupture of structure by divulsion, are seldom followed by bad symptoms and hardly ever by the group of symptoms constituting the disease called "*Urethral fever*." This disease seems to follow as a rule the simpler operations on the urethra, as the passage of a catheter or the gradual dilatation of a stricture, and though it may occur in any patient, those who have diseased kidneys are thought to be specially liable to it; while the use of anæsthetics seems to afford protection against it. It generally sets in a few hours after the operation, and it varies greatly in degree, the simplest consisting of a chill, or perhaps two, followed by slight fever and head-ache, which continues for twenty-four or thirty-six hours, and then leaves the patient as well as before. This slight form is no doubt constantly overlooked, as the patient is frequently quite well by the time of the surgeon's next visit.

Secondly. There may be a severe rigor, followed by high fever, great restlessness or delirium, and in a few hours by profuse perspiration. These chills with fever and sweating may be repeated at intervals of a few hours for several days, and the patient recover in a week or two without the supervision of other more alarming symptoms; or, there may follow a number of days of general febrile excitement, delirium and prostration, with scanty high-colored urine, perhaps containing albumen, diarrhoea, and frequently copious perspirations. There may be remissions from time to time. To this class both the cases which I have reported belong,—the second case having a series of chills with high fever, lasting over three or four days; the patient in the first case suffering from continued fever for weeks, with many of the symptoms enumerated above, and also some pus in his urine, which I believe to have originated in the bladder.