

the microscope there appeared to be spermatozoa floating in it, and this further examination placed beyond question. Following up this clue I elicited that he had for several months experienced an almost constant desire for sexual intercourse, with a gradual diminution of power and an increase until they became of nightly (and frequently in the night) occurrence, of seminal emission whilst asleep. There was no priapism, and the testes appeared normal. He is a married man and the father of three living children. His wife states that for a long time he has been always wanting to, but quite incapable of discharging his marital duties. Now what was to be done in a case of this kind which appeared to be hopeless? I felt inclined to despair, but remembering a case which occurred to me at Salisbury, and which was reported in our number for April, 1876 (and which patient was by the way discharged perfectly cured), I determined to take the case in hand. He was ordered to be well purged twice a week with calomel and colocynth at bed time and sulphate of magnesia in the morning; galvanism was applied night and morning to the back and legs; he was held up every morning in a bath with his feet in warm water whilst the cold shower bath was administered for two or three minutes, afterwards increased to five, and eventually to fifteen minutes, and was given thrice daily five minims of tincture of nux vomica and five minims of the tincture of sesquichloride of iron in an oz. of water (this dose of each was after an interval doubled, then trebled and eventually quadrupled, and this larger quantity he took daily without any intermission for twelve months and upwards); all attempts at sexual intercourse were strictly forbidden, and he was ordered as good and as nourishing a diet with stout, wine, &c., &c., as their circumstances would permit. This plan of treatment had a most charming and satisfactory result; in a few weeks he was enabled to get out of bed, and holding by the bed hobble round it; he became able to walk with crutches, then with one and a stick, then with two sticks, and for some weeks before I left in February, 1879, he walked down to me many times, a distance (both ways) of nearly seven miles, without any assistance whatever, although he always carried a stick. The spermatozoa disappeared entirely from his urine, and he was allowed and enabled to perform his marital duties in moderation and with success. His mode of progression when he first began to walk was most peculiar, he would lift his leg up very high and describe nearly a circle before putting it down again

very, very slightly in advance of the place from which he took it; it was quite impossible for him to put his leg behind, and then from a straight line to in front of him; as he described it they would "go round the corner." His wife during the latter part of the time caught a severe attack of typhoid fever whilst out nursing and was laid up for weeks, this I believe had a great effect in retarding his recovery. When I left he was about resuming his ordinary occupation. He must have taken some quarts of iron and the nux vomica; the latter never once caused any specific effect although carefully watched for.

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Progress of Medical Science.

A CASE IN WHICH A BILIARY CALCULUS WAS REMOVED BY OPERATION FROM THE GALL-BLADDER AND A CURE RESULTED.

Mr. Bryant read notes of this case before the Clinical Society of London. The patient was a single woman, aged 53, who was admitted into Guy's Hospital under Mr. Bryant's care in July, 1878, with two discharging sinuses of three years standing, following an abscess, which had been previously forming for two. At first the sinus was laid open, and pus alone escaped; but, subsequently, as bile flowed in quantities from the wound, an exploratory operation was performed, and, at a depth of two inches, a biliary calculus, one inch long, turned out of the gall-bladder. Everything went on well after the operation; and, although bile continued to escape from the wound for about two weeks, the parts quite healed in about four months, and the patient left the hospital cured. The author brought the case before the Society as an encouragement to surgeons to apply their art in like or allied cases, for he was well prepared to support the suggestion of Dr. Thudicum, made twenty years ago, "that gall-stones might be removed from the gall-bladder through the abdominal walls;" and he pointed out that, under certain circumstances, the operation was justifiable when the sinuses by their presence were setting up inflammatory and suppurative changes about the gall-bladder, without any obstruction to the bileducts, as well as in that more serious class of cases in which the cystic or common bile-duct was obstructed, and dropsy of the gall-bladder, with jaundice, complicated the case, as shown by the cases of Dr. M. Sims and Mr. G. Brown—Mr. Hulke said there was no shadow of doubt as to the propriety of the treatment in Mr. Bryant's case. He simply rose to say that the whole question had been exhaustively treated in an early number of the *Mémoires de Chirurgie* of the year 1706. In a case there discussed, the stone was withdrawn by the forceps, and the author drew an analogy between