The right kidney is more often displaced than the left, according to Ruttner (1890) 7 times—to Greig Smith 4 times, and to Einhorn 20 times.

To the corset and tight waistband, by means of which the skirts are suspended, is assigned a very important place in the causation of this displacement. Sulzer considers that the relaxation of the abdominal walls after child-birth tends to induce the kidneys to leave their normal position, and Landau thinks one of the most frequent factors is the disappearance of fat and the consequent loosening of the peritoneum—as in rapid emaciation. Einhorn believes that there is an individually varying predisposition as regards the degree of fixation of the kidney or its possibility of being displaced. Greig Smith (Abd. Surgery, vol. II.) states that long flexible spines, with sloping lower ribs and flat slender waists, give the bodily conformation that most favors renal mobility.

Clinically we find two classes of patients in whom movable kidney is present. 1st. Young adults (females) with the bodily conformation suggested by Greig Smith, or the predisposition of Sulzer as predisposing and corsets, &c., or a traumatism as exciting causes.

and. Patients generally about the middle period of life with pendulous or relaxed abdominal parietes, as in women who have borne several children in rapid succession.

Remarks.—One can appreciate the importance of the corset as a causative factor by an examination of the anatomy of the region, especially the peritoneal attachment of the kidney. We see the kidney lying under the sloping surface of the liver, and Cunningham (Four. Anat. & Phys., 1895) draws attention to the transverse ridge across the ant. surface of the right kidney; hence any downward pressure of the liver would have more effect than if the surface were perfectly flat. Again, the right kidney is partly held in its place by the peritoneum that lies in front of its upper half, but this peritoneum is tucked up between the kidney and liver and passes on to the posterior margin of the latter, forming part of the coronary ligament, one of the chief supports of the liver, but any steady downward pressure of the latter organ would tend to drag down this ligament and so dissect it off the front of the kidney and thus weaken the main support of