

Local anesthesia, bladder opened above pubes, drained and treated for ten days, when prostate was removed through former opening under ether anesthesia. The report of Dr. Case (and patient reported as well), says, "No trouble voiding or retaining urine. Can work with comfort. Voids urine without difficulty twice during the night."

CASE 3: Mr. McG., 79th year.—Referred through courtesy of Dr. Burrows of Seaforth, who also assisted. Had bladder trouble for last five or six years. For last year and six months has had a very severe form of cystitis. The presence of small calculi in bladder caused great pain. Catheter used every few hours for last year and bladder washed. Morphine required several times daily. Heart and arteries very fair. Operation, Jan. 13th, 1915. Prostate, and small stones, some of which were imbedded in the gland, removed in one stage. Dr. Burrows' report: "Gaining well in strength and weight. Enjoys life comfortably. Good appetite. No discomfort voiding or retaining urine. Urinates every three or four hours during day and once or twice during the night."

CASE 4: A. F., 79th year—Referred by Dr. Anderson of Ailsa Craig, who also assisted. History and symptoms like those of last case. Shortly before operation had symptoms of prostatic abscess. Passed phosphatic sand constantly. Pain excessive, requiring morphine. Differed from last case in that he was a man of massive frame and deep pelvis. Operation in one stage, Feb. 18th. 1915. Much phosphatic debris and gland removed. Result: Wound nearly healed. Patient sits up most of the time, feels well and eats heartily. There is every reason for believing that the final result in this case will be equally as good as in the others.

My first prostatectomy was by the suprapubic route, and the next five by the perineal route and the vertical incision.

These cases all lived, and all but one had good functional results. The latter case relates to a man who occupied a public position for many years and was well known in this locality. The result in his case caused some prostatic sufferers to hesitate, or induced them to go elsewhere for relief. It is therefore but fair that the facts of this case with "impaired function" be stated.

#### CASE WITH IMPAIRED FUNCTION.

Mr. S., age about 60.—About ten years ago was operated on at a large hospital by a well known and competent surgeon. The operation, as I understand it, consisted in opening the bladder above the pubis and cauterizing a wedge-shaped portion of each