

appeared; in the next decade, from 1879 to 1889, about three hundred, or an average of thirty papers a year; while in the third decade, from 1889 to 1899, about eight hundred papers, or an average of eighty a year, appeared.

The latest field in surgery, that of surgery of the ureter, is, as might be expected, inseparably connected with the surgery of the kidney, and of the uro-genital organs.

The surgery of the ureter is represented in the literature during the last decade by ninety papers, eighty-seven of which appeared between 1894 and 1899. Thus the surgery of the ureter is only about five years old in its recent development.

STAGES OF DEVELOPMENT OF SURGERY OF THE KIDNEY.

Period of Radicalism: Nephrectomy, or nephrotomy through diseased kidney tissue.—The first decade of kidney surgery might be termed the period of nephrectomy or radical surgery, during which the loss of one kidney was not considered so much as was the speedy cure of the patient. Nephrotomy and nephrectomy were performed, indiscriminately in suppurating kidneys with or without stone, nephrectomy in calculous kidneys without suppuration, and even for floating kidney with healthy secreting tissue, as done by Martin, of Berlin, in 1878.

Period of Conservatism: Operation through healthy kidney tissue (Morris). At the beginning of the second decade the first steps in the direction of conservatism were taken, and, instead of nephrectomy, less radical operations were made to remedy the disease without sacrifice of the "noble tissue of the kidney," as Tuffier calls it. In 1881 Hahn made nephropexy or nephrorrhaphy for floating kidney, thus saving the healthy organ which previously would have been removed. The most important step, however, and one whose consequences have been most far reaching, covering the entire field of kidney surgery, we owe to Henry Morris, of London, who, on February 11th, 1880, had the courage to operate through healthy kidney tissue, and remove an oxalate of lime stone from an undistended, healthy-looking kidney, by an incision through the renal parenchyma. No operator, prior to this time, had dared to encounter the hemorrhage which follows incision through healthy kidney substance. Thus stones had been removed only from suppurating and often distended kidneys, where the interstitial nephritis made the incision almost bloodless. From this important operation of Morris dates the possibility of the development of conservatism which is pressing forward, fighting its way toward the goal of renal surgery, which is the preservation for the patient of all kidney tissue available for secretion. Morris' operation has made it possible to save the kidney from the destructive influences of the stone, namely, suppuration and dilatation, which are finally bound