

may always be got in beyond the contraction. It should be observed, however, that the case here put is quite different from that of a distended bladder requiring immediate relief. I have never maintained that in such circumstances the introduction of a catheter is always practicable."

The surgeon may be called upon to relieve a stricture which has gone a little beyond the distended bladder here spoken of; cases in which urinary infiltration, with resulting urinary fistulæ, has occurred, or in which, a step in advance, the urethra has become absolutely occluded. The first case of this kind which came under my observation was operated on by me in 1859. The history, from notes taken at the time, is as follows:—

W. D., æt. 44, consulted me in December, 1858, suffering from the results of an old stricture of some eleven years' standing. He was first seen by me as an in-patient in the Montreal General Hospital in the autumn of 1847, I being at the time resident medical officer at the Hospital. He was admitted under the care of the late Dr. Sutherland. He stated that some three months previously he had received an injury to the urethra, which was accompanied at the time with considerable hæmorrhage, and the pain experienced on making water was severe and burning. Several days before his admission to Hospital he had occasion to go to the Back River, some nine miles from Montreal. On the way he drank rather freely, and on returning to the city he was quite unable to make water. During several weeks prior to this indiscretion he had noticed some difficulty in passing water, the stream was small, he had to exert some force in emptying his bladder, and his clothes were always wet from dribbling. A day or two after his return from the country he came to the Hospital in great distress: the bladder was distended, the perineum and scrotum were swollen, red and erysipelatous in appearance, and urine, drop by drop, was coming from the urethra. An attempt was made to pass a catheter, but failed, and as a condition of infiltration was believed to exist, two free incisions were made in the perineum on either side of the urethra, which gave exit to urine, pus and broken-down tissue. A large poultice was applied, and a full opiate ordered.