

was done; within three or four days he was able to pass urine. Recovery complete.

Dr. Grasett said he leaned to conservatism in the treatment of this condition. Thus far he had been able to treat these cases without resorting to the method advised by White. He thought surgeons were not sufficiently careful in regard to the cleanliness of urethral instruments. Where the catheter was kept clean its use could be maintained a long time. A patient, under observation, æt. 83, had used one twelve years—a man in active life. He had had most beneficial results from drainage also. Cases treated in this way were referred to.

Dr. E. E. King thought that the operation of orchidectomy would never become the operation of choice in enlarged prostate, but in those where great urgency was necessary. A case of this latter sort on which he had operated showed marked improvement within eighteen hours. A second case, in which he had done vasectomy, was not much benefited by the operation. A third case, in which orchidectomy was done, died of pneumonia subsequent to the operation. In six other cases results were so good that the speaker was very well satisfied with the operation.

Dr. G. A. Bingham concurred with the views expressed by the leader of the discussion as to the treatment of long-standing and obstinate cases of prostatic enlargement. In the earlier stages he had found the method of stripping the prostate and the vesicles of decided value. This relieved the glandular congestion and enlargement. The speaker cited cases in which he had noted distinct benefit from this course of treatment. Before resorting to removal of the testicles he would examine the bladder by suprapubic cystotomy. In this way drainage could be performed, the condition of the walls of the bladder ascertained, the diagnosis established, and, if necessary, remove a portion of the middle lobe.

Mr. Cameron closed the discussion.

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The regular meeting of the society was held in St. George's Hall, Wednesday evening, January 13th, 1897, President Dr. Allen Baines in the chair. Fellows present: Temple, J. A., Strange, Ryerson, Aikins, Pepler, Fotheringham, Anderson, Strathy, Baines, Brown, Graham, Spencer, King, McDonagh, Burns, Primrose, Grasett, Wright.

Dr. W. H. Pepler was appointed treasurer *pro tem.* in the absence of Dr. Walker, who has removed from the city.

Dr. A. Primrose read the history of a case of

#### LACERATED PERINEAL WOUND,

with death from sepsis.

The patient was a little girl aged twelve, admitted under his care