

large-sized gum-elastic tube introduced through the wound and tied in. This was removed by the patient himself the morning after the operation, and to this I attributed the subsequent disturbance which delayed the recovery. Erysipelas attacked the wound on the fifth day, the edges of the incision presented a sloughy aspect, and the erysipelatous blush extended over the buttocks and up the back as high as the shoulders; septic sore throat followed. The entire fauces and hard and soft palate were covered with diphtheritic membrane. The muriate tincture of iron with quinine was prescribed in full doses, and he was supported with beef-juice, milk and champagne. At the same time the throat was sponged over with a solution of salicylic acid 3 i to 5 i glycerine every two hours. This treatment was persevered in, and about the fifteenth day after the operation the symptoms began to improve. The urine was highly ammoniacal, and as he was constantly wet, which added to his distress, a soft rubber catheter was introduced into the bladder so as to drain through the natural passage. This was kept up for several days. He was, however, somewhat difficult to manage, as he would himself remove the instrument, but always permitted it to be reintroduced. This was followed by marked improvement. The erysipelas subsided about the twenty-second day and the wound became more healthy in appearance. The catheter was retained at intervals up to the 30th ult. The patient is now making a slow recovery; the urine ceased coming through the wound on the 5th of December and the wound itself is all but closed.\*

The fourth specimen is mulberry calculus, removed from the bladder by the lateral operation on the 22nd of November, 1887. The patient is a healthy-looking lad of 18 years. I was informed by his mother that he had suffered from bladder irritation off and on since the age of five years. During the past twelve months he had observed that he experienced pain in riding over a rough road; there was a continued irritation, frequency of micturition, and pain at the point of penis. He had never passed blood. No examination for stone had ever been made until recently, when the gentleman whom he consulted had passed a sound and readily found the stone. He advised him to come to Montreal, and he was admitted to

the Montreal General Hospital on the 16th November, 1887. The day following an examination was made while the patient was under ether. A short beaked sound was passed and a stone struck; it appeared hard, had a clear ring, was evidently of good size, and was rough on the surface. Lithotomy was advised. As the examination had been attended with slight bleeding and increased bladder irritation, it was decided to defer the operation for a day or two. On Tuesday, 22nd of November, the operation of lateral lithotomy was performed. Some difficulty was experienced in delivering the stone. The patient progressed favorably. A sponge wrung out of a very weak solution of sulphuric acid was placed in his bed against the wound, on the seventh day from the date of operation he first experienced a desire to pass urine, but not over half an ounce was passed by the natural passage. This gradually increased in amount each day. On the thirteenth day the urine was passed in full stream and very little by the wound, on one the sixteenth day the urine ceased to come through the wound and two days subsequent the wound closed. The patient was allowed up, and he returned home on the 24th December, 1887. The weight of the stone was 411 grs.

*Cirrhosis of the liver.*—Dr. R. L. McDONNELL related a case of recovery in cirrhosis of the liver, where ascites had been present to a very great extent. The patient, a woman aged 35, married, but childless, was admitted to the Montreal General Hospital in August, 1885, with a large quantity of fluid in the abdomen. She had suffered during the past year from dyspeptic symptoms with morning vomiting. There was a history of spirit drinking. Prior to admission, was tapped to the extent of 200 ounces. There was tenderness over the hepatic region. The liver was small, measuring three inches in the right mammary line. She remained in hospital for ten months, being tapped at first every two or three days, but subsequently at longer intervals, the amount withdrawn being at first about 180 to 200 ounces, but at the time of leaving hospital but 16 to 20 ounces could be obtained. She was tapped sixty times during that year, and taking 150 ounces as an average, altogether 8,500 to 9,000 ounces were removed. The woman has gained health and strength, and is now apparently well and attending to her household duties. The liver is of the same size, the belly empty, and

\*He progressed slowly, but steadily, and early in January returned to his home in the country. Since then I have heard of his steady amendment.