

*Present Illness.*—Sixteen years ago last August and September the patient had typhoid fever, was six weeks in bed. Never properly regained her strength after the attack. Thirteen years ago she began to have frequency of urination. She had no pain, but simply the desire to urinate frequently night and day. About seven years ago she took a sudden severe pain in the right side, she vomited and the pain was so severe that she had to go to bed. This attack lasted about two hours. For a time these attacks of pain came on about every four to six weeks. About three years ago the attacks got further apart, coming on about every eight or ten weeks and with them she had chills and fever. These attacks continued up to the time she came to consult me. A year before coming to me she consulted a surgeon in Detroit who said that her urinary trouble was due to a retro-displaced uterus and advised an operation. This she consented to and the surgeon performed an internal shortening of the round ligaments. This he followed by local treatments of the bladder from December to the following April. The operation and treatments were followed by practically no improvement. When she consulted me I made a cystoscopic examination of the bladder, but could find no local condition to account for her symptoms.

Urinalysis at this time was as follows:

Color.—Pale amber, cloudy.

Reaction.—Slightly acid.

Sp. gr.—1020.

Alb.—Slight trace.

Sug.—Negative.

Microscopical.—Many pus cells, much squamous epithelium and a few amorphous urates. Repeated examination of the urine showed practically the same condition. It was always found loaded with pus. In the meantime I put her on urotropine diuretics and washed out the bladder twice a week, although from the first I was convinced that the primary trouble was higher up, probably in the right kidney.

This treatment producing no amelioration in her symptoms, I referred her to Dr. B. R. Schenck of Detroit for ureteral catheterization. Dr. Schenck's report was as follows:—

“ Mrs. McG. came in the last of last week, and I have seen her on four different days. Cultures from the bladder urine show what is apparently the colon bacillus in pure culture. I have not yet traced it through all of the media, but feel sure that it will prove to be *B. coli communis*. The urine coming from the right kidney is heavily loaded with pus, and I think that the source of the trouble is in the pelvis of the kidney on that side. One day I thought that