

and their angles are too obtuse. The point of this Mercier catheter follows the roof of the canal or strikes an obstacle upon its inclined surface, at an angle, which enables it to ride over it. This catheter answers well for all cases of general enlargement, but occasionally the canal is so deviated by irregular lateral growths, that it will not pass. For this condition several instruments have been invented, and I know of none better than a simple soft rubber catheter such as I now show you. It looks like a piece of ordinary rubber tubing, closed at one end, and with an eye. It should be oiled before being introduced. It will sometimes find its way, when all others fail. I now come to the practical part of my remarks, viz:

The treatment. Although the patient may not be susceptible of cure, much may be done to render his life comfortable. The catheter is the natural specific for an enlarged prostate. As I have spoken of the kinds of catheters, most suitable, I will now direct how they should be used. When the patient has passed all the urine he can pass voluntarily, he should be placed with his back against a wall, and the instrument well oiled, introduced into the urethra and pushed slowly down the canal. If the proper one has been selected it will pass readily into the bladder, when a very considerable amount of urine will flow from a bladder, which the patient thought he had emptied. If the patient is weak and you think it not wise to place him against a wall, place him on his back with hips a little elevated, and legs and thighs drawn up and slightly thrown open. So readily does one of these French catheters, enter the organ that in two or three sittings the patient will learn to introduce it himself. That accomplished, he has gained the victory of confidence in himself. If the amount of residual urine in the bladder is large all should not be drawn off at once. If while the urine is being drawn off, the patient complains of faintness the catheter must at once be withdrawn, and the patient placed on his back, with his head low. With a soft catheter, without a stylet, it is practically all but impossible for an old man to do himself any considerable injury, but with a silver instrument it is very easy. A little compound liquorice powder taken at night, will be found useful in regulating the bowels and he should take from x to xxx gr. of citrate of potash, three times a day. Merino in summer and flannel in winter should be worn next the skin. Woolen stockings should be constantly worn. The feet are the most distant from the centre of the source of body heat, the heart. The venous blood has great natural difficulty in getting out of them, yet they are the worst protected part of the body, especially in old men. Horseback exercise must be forbidden, as it tends to increase the congestion about the base of the bladder and this increases irritability. Exercise of other kinds will be

beneficial. An ordinary case does not require any change in diet. In introducing the catheter, as nearly as possible the normal periods of urination should be observed. If an instrument cannot find its way into the bladder then the aspirator should be used twice a day over the pubes—meanwhile continuing to make efforts to get in. If you still fail then it will become necessary to make a permanent opening above the pubis. To wash out a bladder when there is a congested mucous membrane, secreting large amounts of mucous, is a cardinal point of treatment. By this means the last drops of residual urine, with pus and stringy mucous, are diluted and drained away, and no ferment is left behind to decompose the healthy urine as it flows from the ureters. The congestion around the neck of the bladder is soothed, and this is a great point. The best method of washing out the organ is to use the ordinary flexible catheter. I have no faith in the double current catheter. Warm water should be used. It is soothing as well as cleansing, and a temperature of about 99 should be obtained. The best kind of syringe is a rubber bag, holding about four ounces, and provided with a metallic nozzle, and stop cock. Just as soon as the patient complains of a feeling of distension, allow the water to drain off through the catheter. The bladder may be washed out several times at one sitting—in fact till the water flows back perfectly clear. It may require to be repeated once or twice a day for ever after or in mild cases a tri-weekly washing may suffice. It may be necessary at times to use medicated fluids for injections. A good one is the acetate of lead 1-6 to 1-3 of a grain to the ounce of water, or one or two minims of dilute nitric acid to the ounce. For a continuous soothing injection from experience I can recommend the following combination of Dr. Thompson:

R Sodae Biborat., ʒi.
Glycerine.

Aqua aa ʒii.

Sig. one ʒss. to a ʒiv. injection. M.

Chlorate of potash, five to fifteen grains to the ounce is also serviceable. The French recommend silicate of soda, a one per cent. solution, to arrest the formation of pus. Nitrate of silver, in a very mild solution—say gr. iii. to ʒi has been recommended—but is now hardly ever used—though I must say I have seen benefit follow its employment. Upon a rare occasion, when great difficulty has been experienced in getting in a catheter—it may be necessary to allow it to remain in the bladder. When this is demanded—only a very soft one should be so employed—for they produce the least amount of irritation, and remain longest without becoming incrustated with urinary salts. In such cases the bladder should be washed out several times a day with warm water. If there are any signs of irritation, the instrument *must* be removed.