

when caught in the middle, as though the structure within was condensed. The ureter is normal in size, appearance and structure, excepting just before it reaches the hilum, where it suddenly expands and its walls become thinner than normal. The hilum is bounded by three or four large cysts, which make it appear very deep, though regular in outline, as is clearly seen in the lithograph on the frontispape.

*Right Kidney.*—Weight, 4 lbs.  $\frac{1}{2}$  oz.; greatest length, 11 in.; greatest breadth,  $6\frac{1}{4}$  in.; greatest circumference, 24 in.; lesser circumference, 15 in. This kidney has all the characters above described, in a somewhat modified degree. The capsule here, also, covers the whole. The cysts are more numerous and smaller, as a rule, the largest not exceeding a small hen's egg in size. Only one of the dull yellow cyst walls can be seen, the rest being all remarkably transparent. The ureter is identical in every respect with the other just described. The hilum is well marked, but surrounded with innumerable small cysts.

The straw-coloured fluid in the transparent cysts, when boiled, is found to contain a very large percentage of albumen, becoming almost solid. Its reaction is feebly acid. It has no peculiar odour and remains clear after exposure for hours in an open vessel. There is nothing distinguishable in this fluid under the microscope. The dark-coloured cysts contain a thick substance resembling molasses in colour and consistence. Under the microscope this is found to consist of granular matter, broken down epithelium, and, here and there in the field, masses resembling in appearance small and disorganized malpighian tufts, which, however, no doubt, are quantities of granular matter arranged in that shape. The bladder was firmly contracted but healthy.

General cystic degeneration of the kidneys is a disease usually confined to adult life, and is not of common occurrence. I find, on looking into the subject, that in fifteen cases mentioned it had occurred principally about middle life; that it was of a chronic character, and that the clinical history of these cases has been but imperfectly studied; that both kidneys become affected, but not always in an equal degree, and that it usually terminates by the patient dying suddenly. On comparing the above statement of facts with the case which I have just now read, I think the analogy is fully borne out in many particulars. I have not made a section of the kidneys, but have here another fact illustrated, that their functions were properly performed; or, perhaps I should say that large quantities of urine had been secreted and voided daily, although not normal in character.