

together again without such a preventive means that I thought this method would be at least an aid to us. The stitches are not fastened and therefore the tissues spread just the same as if they were not there.

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The fifth regular meeting of the Society was held Friday evening, December 2nd, Dr. Macdonald, President, in the Chair.

DR. GILLIES exhibited a pathological specimen of congenital absence of one kidney. The patient was under the care of Dr. Molson, but died in a comatose condition after repeated convulsions. No history was obtained, except that the man was a sailor, who had been discharged on account of intemperate habits, which he had persisted in up to the time of admission to hospital. There was a slight trace of albumin found in the urine, but nothing else of a definite character just before death. The autopsy showed a right kidney 14 cm. from above downwards, 8 across and 5 from before backwards, indicating that compensatory hypertrophy had taken place. There was complete absence of the left renal artery and veins and complete absence of ureter, the suprarenal however was present. In the records of the autopsies at the Montreal General Hospital, out of 2,469 only 5 specimens show congenital absence of one kidney. In 1897 one was obtained with absence of the left, with persistence of the left ureter. There is a note in Ziemssen which states that there is always absence of the ureter when the kidney is absent; persistence of the ureter would mean that at some time in early life there was displacement of the kidney, so that the two fused. The case just mentioned was a man who died of chronic interstitial nephritis. In 1901 the Medico-Legal Department obtained a specimen of absence of the left kidney and ureter from a man who had hanged himself. In 1902 there was a case of nephritis with absence of the ureter, suprarenal and kidney, also of the left side. Since then I have had two cases of absence of one kidney, one a male with myocarditis showing absence of the right kidney, right renal artery and ureter, the other somewhat similar with persistence of the suprarenal. These anomalies are more frequently found in males than females; some give a percentage of 65 males and 35 females.

Another specimen is that of a horse-shoe kidney obtained from an infant. All the structures were normal, with the exception that the two kidneys were joined by kidney tissue in the lower part.

DR. SHEPHERD: I was much interested in this case, and I would like to report a case of single kidney which occurred in the dissecting room at the College a week or two ago. This is the first one out of 5,000 subjects which have passed through my hands that I have met with, and I think this percentage at the Montreal General Hospital is very