

that I cannot do more than touch upon its history, etiology, pathology, chemical history and diagnosis.

HISTORY.

The names of two of our great fellow-countrymen stand pre-eminent in the history of the treatment of cystitis, and to them alone will I refer in this brief *résumé*, as they are in danger of being passed over in the hurry which characterizes the progress of to-day. One of these is Willard Parker, of New York, who, in 1850, at the Bellevue Hospital, operated upon a case of chronic cystitis in the male, stating that, "The object in view was to open a channel by which the urine could drain off as fast as secreted, and thus afford rest to the bladder, the first essential indication in the treatment of inflammation." This case was reported in the *New York Medical Journal* for July, 1851.

The other name is that of T. A. Emmet, who, in 1858, operated for a vesical calculus, and by the advice of Marion Sims left an opening in the vesico-vaginal septum, in order to afford greater facility in the treatment designed to restore the organ to a healthy state. Subsequently to this, Emmet "made an artificial vesico-vaginal fistula, with a view of giving rest to the organ by the free escape of urine." (*Amer. Pract.*, for Feb., 1872.) Emmet records several cases of cystitis treated by this plan in his classical work on vesico-vaginal fistula, published in 1868, while Parker also presented at the New York State Medical Society, in 1867, a paper on "Cystitis and Rupture of the Bladder Treated by Cystotomy."

One of Emmet's most rebellious cases, a woman who had suffered for three years, was examined "endoscopically," after cystotomy and irrigations of the bladder, by Dr. Newman, June 1st, 1869, and the bladder found free from disease, whereupon Emmet closed the fistula, and with some further slight treatments, she fully recovered.

I mention these facts, because I am sure we are too prone to forget the skilful labors of our predecessors, upon which all that we are successful in doing to-day rests as a sure foundation. All honor to these noble painstaking pioneers in this most difficult corner of our field of labor.

ETIOLOGY.

Again, I turn with no little pleasure to our clear-sighted Emmet, who, writing in 1872, says: "Neglect during labor to keep the bladder empty, exposure to cold, violence, and the habit of long retaining the urine, are the chief exciting causes of the most serious forms of cystitis." In investigating this, as in other inflammatory affections, we have to consider two factors—the predisposing causes which prepare the ground for the cystitis to