



RECTAL DILATORS DEVISED BY DR HOLMES FOR THIS CASE  
12 inches in length, terminations varying as follows in circumference, 1 $\frac{1}{2}$ , 2 $\frac{1}{4}$ , 2 $\frac{1}{2}$ , 3 $\frac{1}{4}$  inches.

to find the passage through the stricture. I advised her to consult some one else and she went to Detroit and was examined by Dr. McLean and Dr. McGraw. Receiving little encouragement she returned to me and for a time I was able to relieve her by the daily administration of sulphate of magnesia. Finally this failed and she began to vomit a good deal and became greatly emaciated. I now made a final effort to find the stricture, and, if possible, to relieve it. Placing her in the knee-elbow position I introduced a Kelly's proctoscope into the rectum and by means of a head mirror and a bright incandescent lamp was enabled to examine thoroughly the whole rectum up to the obstruction, and to gently pass through the stricture a very small hard rubber œsophageal bougie, which I here exhibit, size 15 Am. scale. This showed not only the size of the stricture but also the length of it, which was about an inch and a half, situated 7 inches above the anal orifice. Each day I repeated this operation, using a size larger each time until the largest one would pass easily. Having nothing better in my possession to proceed with, I next used the largest evacuating catheter belonging to my lithotrity case, and in the meantime had a set of hard rubber dilators made having such a curve as my experience had taught me would facilitate their introduction. By following up the treatment and by the avoidance of force I was successful finally in passing the largest size, which you will see is an inch in diameter. By this time her health had greatly improved and she felt quite well. I have since continued the treatment by passing once a month the three largest sizes in succession at the same visit, and I find I can do this