

Dr. MACFARLANE asked if there was any phimosis present.

Dr. GREIG replied that there was some adherence of the prepuce, but not enough to account for symptoms. The authorities stated that stone in children was easily recognized. There was one peculiar point, and that was, on the sound entering the bladder it always had a tendency to fall to the left side. He was not able to bring it to the right side at all. He did not know if that indicated any malformation of the bladder, but it suggested it. He had not tried oxalic acid. He had thought of trying creoline, but as he had never heard of its being used he did not like to initiate the treatment. In regard to Dr. Macdonald's plan, he thought there was danger of too much force being brought to bear on the walls of the bladder.

Dr. MACDONALD said that by raising or lowering the bag any degree of force could be obtained.

Dr. GREIG continuing said that he followed Skene's method of washing out the bladder. He stated that in this case he could not use a large catheter, so that irrigation was necessarily slow. He pointed out that the amount of residual urine amounted to about two ounces, which he withdrew with the catheter. He had asked the patient to pass his water while on the hands and knees so that the bladder would be more completely emptied. As the urine was alkaline he thought there was no kidney trouble, unless the acidity of the pyelitis was hidden by the alkalinity caused by the cystitis.

Dr. TROW then read the report of a case of a foreign body in the œsophagus. (See page 124.)

Dr. POWELL related the history of a case of which he heard, in which a fish-hook had been swallowed. A boy upon his return home from a fishing expedition found his grandmother asleep with her mouth open. The temptation being great he dropped his baited hook into the old lady's mouth. Awakening with a start and a swallow, down went the hook with the line attached. A young physician who had just settled in the place was hastily summoned. He asked the boy for another of his hooks, took a bullet from his pocket, made a hole through it so that it would fit over the hook. Then he threaded it on the line and with a catheter pushed it down, so that it slid over the hook in the stomach, which was then withdrawn without injury to the walls of the stomach or œsophagus. [We have not yet received a statutory declaration under the Canada Evidence Act of '93 bearing upon this case.—ED.]

Dr. BINGHAM presented a double-headed monster which he had recently delivered.