

rapidly invaded both lungs and caused her death in about a week. She was attended by Dr. R., an old army surgeon, and in conversation with him he assured me that the disease was so well marked as to leave no room for doubt regarding the diagnosis. Just before her death, her son, a young man about 30, who had been constantly in attendance, was taken ill, Dr. R. was again called, and pronounced the disease to be pneumonia, exactly similar to that from which his mother had died. A consultation being desired, a physician was brought from Portage la Prairie. He confirmed the diagnosis, but little could be done, and the young man died in a few days. During his illness he had been attended and nursed by his wife and a Mr. W., and after his death the latter attended to the removal and washing of soiled clothing, &c. A couple of days later he also was taken ill, and called Dr. B., of N., who pronounced the disease to be pneumonia. Dr. B. attended him for three or four days, and, having been called to another case, asked me to visit the patient. I found him in a state of coma; temperature 106°, respiration 50, inflammation involving nearly the whole of both lungs. The prognosis was of course death, and the patient succumbed the same evening. He had during his illness been nursed by his wife and Mrs. C., the widow of the young man who had died a few days before. On the second day after his death I was called to see Mrs. C., and found slight though decided signs of pulmonary trouble, which, however, disappeared in two or three days. The first two cases did not come under my personal observation, but from conversations with the medical men attending them I have no doubt as to the correctness of the diagnosis. I regret that I cannot give exact dates, but certain it is that the three were attacked and died in less than four weeks. There had been no sickness in either family for years before, nor do I know of any cases of pneumonia in the district for months before or after. Whether or not the last case would have developed pneumonia, I am unable to say.

If the spread of the disease in this way be accident, it is certainly a rare one; if it be due to contagion, in what way? To my mind, the subject is worth investigating, or if any of our older practitioners can explain it, I would like to have, through your columns or otherwise, the benefit of their research, as, though I may be exposing my own ignorance by admitting it, the matter has been a puzzle to me since the occurrence.

### MISCELLANEOUS.

**A DISCUSSION ON ELECTROLYSIS IN URETHRAL STRICTURE.**—At a recent meeting of the Medical Society of London Mr. Bruce Clarke reported fifty cases of urethral stricture and the results of their treatment by electrolysis. He claims that

the process is not in reality a destructive one. It consisted in modifying and softening the cicatrices by which the strictures were produced, a fact which could be witnessed by any one who would take the trouble thus to treat a stricture of the urethral orifice. Some of the cases could not, he thought, be explained merely on the theory of absorption. He mentioned one case, in which an ulcer was present, where electrolysis produced a rapid cure. He cited instances to show that just as it had been shown that a rectal stricture might begin by spasm of the muscular fibres, so urethral stricture could, and often did, begin in a similar fashion, an irritable ulcer being the starting-point. The caustic alkali, liberated by the negative pole of the battery, cured the ulcer, and thus relieved the muscular spasm, whilst if it failed to cure the ulcer it might, in rare cases, aggravate it, and so intensify the stricture. Some instances of this kind were related. Of the fifty cases, twenty-three were known to be well after periods varying from one and a half to three years, and in two cases no relapse had taken place after four years, whilst only nine were known to have required subsequent treatment.

Mr. Reginald Harrison said that his experience of treating stricture by means of electrolysis was not great, but what he did know of it was not in favor of the method. He had seen a number of cases which had been submitted to electrolysis in this country and in America, but none of them had increased his regard for this plan of dealing with stricture of the urethra. The amount of thickening that had taken place in these cases was very considerable, though whether this was incidental to the stricture or to the treatment employed he was not prepared to say. He had never met with a patient who expressed unbounded confidence in the treatment, and the results, so far as he had been enabled to observe them, were not of a nature to encourage him to extend its use. He much preferred gradual dilatation, and he had no reason to complain of want of success by this method.

Mr. Hurry Fenwick alluded to his own experience of stricture of the urethra, and said that in twenty cases in which he had