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Original Communications.

PYURIA.

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This communication presents in brief form the manner of treating gonorrhœa, acute and chronic, as taught by the Vienna school. The major part is a translation from a monogram written by Dr. Ultzman, entitled "Pyuria and its Treatment." I had the pleasure of attending Dr. Ultzman's clinique for three months, and saw very favourable results follow the treatment he advocates. When pus is present in the urine, either in large or small quantities, the condition receives the name pyuria. It is readily understood that with the term pyuria a diagnosis only in a general way is indicated. It is one of those expressions much used in the past, but with the development of medical diagnosis these general diagnoses are rarely made. For now a more accurate diagnosis can be made not only by the aid of more precise instrumental examination, but also by the help of microscopic and chemical investigation. Pyuria indicates that there is pus in the urine, a symptom not a disease.

The treatment of gonorrhœa differs according to the location of the disease and to the acuteness or chronicity of the same, and may be divided into (a) that for the spongy portion of the urethra (anterior to the musculus compressor urethræ) and (b) that for the prostatic portion (posterior to that muscle). Acute urethritis is usually

treated by means of injections, to this exception should be taken for experience has shown that in acute cases the treatment should not be local. Internal medication and the regulation of diet is of the utmost importance. On the other hand chronic suppuration should receive local treatment. Dr. Ultzman in his paper does not enter into the full details for the treatment of acute gonorrhœa, nor the uses of the endoscope, but considers the local and instrumental procedures, which he most approves in chronic gonorrhœa.

Treatment for spongy portion of Urethra.
Catarrhal Urethritis.—Urethral inflammation, the result of accident, or produced by chemical influence, requires for its treatment; attention to diet, cleanliness of parts is of the greatest importance, and weak injections of alum, zinc or permanganate of potash.

Gonorrhœal Urethritis runs under favourable conditions, its course in four or six weeks; during this time the inflammation extends backwards, and ceases when no complication occurs at the musculus compressor urethræ. The treatment aims at allowing the process to run its course without complication, and to prevent the inflammation from spreading beyond the border of the compressor urethræ. If it does, very soon the bladder and other parts become involved. Individual disposition, diseased, and also senile conditions of the urinary apparatus play a great role in this relation. Frequently, it is observed, that the gon-