The Canadian Practitioner and Review.

	•	
Vol. XXIX.	TORONTO, JULY, 1904.	NO.
VOL. AAIA.	101(01110, 3021, 1904.	110.

7.

Original Communications.

LITHOTOMY versus LITHOLAPAXY.*

BY CHARLES B. SHUTTLEWORTH, M.D., C.M., L.R.C.P. (LOND.), F.R.C.S. (ENG.),

Surgeon Out-Patients' Department Toronto General, St. Michael's and Hospital for Sick Children. Toronto; Demonstrator Clinical Surgery and Anatomy, Toronto University Medical Faculty.

The subject of stone in the bladder, notwithstanding the fact that it has been so often discussed, is of great interest to the surgeon, who is always inclined to give a favorable reception to any suggestions which may help to throw any light on the subject.

There are certain parts of the globe where stone is very prevalent, such as the North-West of India, the delta of the Nile, East Anglia, and, on this continent, the Mississippi valley, while in other countries of the world stone is only occasionally met with, or, indeed, is almost unknown.

In a review of the literature of the subject of urinary calculus, I have taken advantage of the writings of those who have had wide experience and unrivalled opportunities in dealing with this affection. These include Freyer, Keegan, Keith and Baker, in India; Milton, in Egypt; Ferguson, Thompson, Harrison, Cadge and Burton, in England; Guyon, Dittel and Volkmann, in Europe; and Briggs, Cabot, Keyes and Bangs, in America.

No single operation meets the requirements of all cases of stone. We have several entirely different methods, each of which has certain advantages and also its own peculiar difficulties and dangers, which must be recognized and avoided. The best results will be attained by the surgeon who has a thorough practical knowledge of all methods of operating, and who will

2

^{*} Read before the Ontario Medical Association, June 14th, 1904.