

other hot bath, and if that fails I am sent for. I can easily recall the few cases, out of the large number admitted, in which I have been forced to employ the catheter to relieve pressing symptoms, and in no case since I entered the hospital, has it been necessary for me to puncture the bladder. Chloroform is of inestimable service in the management of such cases. Twice within six months I have been able to fulfil two objects—to relieve the bladder and cure the stricture—when compelled to use instruments in retention, and it was as bearing on that circumstance, that the foregoing remarks were made. Having failed in one case of very close organic stricture, with much laceration of the canal, to introduce a catheter, I passed, with little difficulty, Holt's dilator, which, from its shape and construction, is very well fitted to pass a tight contraction, and thus I was able to split up the stricture at the same time that I relieved the bladder. This I have subsequently repeated in a similar case, with equally good effects, and, as such a use of Holt highly commended itself to me as a ready and effectual way of "killing two birds with one stone," I thought it worth while to relate it. I may add that it were well if the profession without the walls of the hospital would exercise more caution, and use less force in dealing with cases of retention.

*Excision of the Tongue* was successfully performed on a man aged 57, who suffered from epithelial disease for six months before admission. I had to remove the whole of the tissues below the tongue down to the muscles. The cernaseur was used. The patient was sitting up the day after the operation.

*Hernia.*—It is worthy of record that two cases of strangulated femoral hernia in young males came in during the half year. One patient was aged 20, and the other 18 and neither could give any account of how they had ruptured themselves. Both were sent into the house after many hours' strangulation, and with very urgent symptoms. They were operated on immediately after admission. In one the sac was opened, and he died on the third day of peritonitis. In the other (the less favourable of the two) the sac was left untouched, and he recovered rapidly.

*Severe Compound Fracture of the Skull, with loss of bone.*—