

at the membranous portion of the urethra. Median incision was made but upon applying the forceps it slipped into the bladder. The opening was enlarged and the stone extracted.

Dr. ATHERTON also presented a large urethral calculus which he had discovered accidentally upon operating on a patient for extravasation of urine resulting from an injury in the perineum, the history of which he had given at a previous meeting of the Society.

Dissecting Aortic Aneurism.—Dr. R. J. WILSON presented a specimen of dissecting aortic aneurism. The patient was forty-two years of age, of good habits and had a good family history. He was called early one morning, when he found the patient suffering great pain in the left groin and in the back, radiating from the region of the left kidney, extending into the left testicle and to the end of the penis. The testicle was retracted. He was treated for renal colic, morphia being given. The patient got up about six o'clock to urinate, but died before he got back to bed. The specimen showed that rupture had taken place at the commencement of the descending aorta. The coats were separated down to the point at which the vessel had been severed upon removal. There was no evidence of kidney disease. Some calcareous deposit was detected on the aorta. No evidence of any cause for renal colic was made out. The pain might have been produced by pressure on the lumbar plexus.

Spina Bifida.—Dr. OLDRIGHT presented a child five weeks old suffering from Spina Bifida. The tumor involves a portion of the sacral, all the lumbar and the lower two dorsal vertebræ. The members examined it by transmitted light, an electric lamp being used for that purpose. Although no portion of the cord could be seen, yet the doctor considered that a portion of the cord was involved because of its large size and its position, and the complete paralysis of the lower extremities. On tapping the lower part of the tumor, distinct twitchings of the legs occurred. As to treatment he had been using pressure. He asked the opinion of the Society as to the wisdom of further interference. The only other child had died, and the parents were much wrapped up in this one, and he felt somewhat loath in resorting to operation. Dr. Peters reported having operated upon a case unsuccessfully. He did not think the involvement of the cord was a contra-indication to operation. He thought he would favor operation on the case.

Dr. ATHERTON said that he would try the injection of Morton's fluid. If this were insufficient to effect a cure, he would state to the parents the possibilities and the probabilities in case of operation, and in case operation were not performed, and would advise operation.