

STRICTURE OF THE URETHRA.

By J. WILLIAM WHITE, M. D., Professor of Clinical Surgery in the University of Pennsylvania; Surgeon to the University and German Hospitals, Philadelphia.

Congenital stricture. Acquired stricture: Inflammatory stricture; Spasmodic stricture; Organic stricture; Traumatic stricture—Character of stricture, Location of stricture, Changes in the urethra; Symptoms of stricture—Results of stricture; Treatment of stricture: 1, Gradual dilatation—Catheterism; 2, Internal urethrotomy—Internal urethrotomy in children; 3, External urethrotomy—Combined internal and external urethrotomy. Perineal section: Retrograde catheterization, Drainage after external urethrotomy and perineal section, Excision, Excision with transplantation of mucous membrane, Electrolysis, Divulsion, Overdistention, Cauterization; Stricture of the female urethra.

DISEASES OF THE PROSTATE.

By W. T. BELFIELD, M. D., Professor of Bacteriology, Rush Medical College, Chicago, Ill.

Wounds of the prostate. Acute prostatitis. Chronic inflammation of the prostate and appendages, including chronic prostatitis, prostaticorrhea, prostatic abscess, and pelvic abscess; Tumors of the prostate. Hypertrophy of the prostate: Complications. Operative treatment of prostatic enlargement: Modes of operation; Prostatectomy. Hypertrophy of the prostatic sphincter. Papilloma of the prostate. Cancer of the prostate. Cysts of the prostate.

THE FUNCTIONAL DISORDERS OF MICTURITION.

By JOSEPH D. BRYANT, M. D., Professor of Anatomy and Clinical Surgery and Associate Professor of Orthopedic Surgery, Bellevue Hospital Medical College, Surgeon to Bellevue and St. Vincent's Hospitals in New York.

Physiology of urination. Abnormal urination: Retention of urine; Overflow of urine; Irrepressible micturition; Urgent micturition; Difficult micturition; Incontinence of urine; So-called false incontinence; Involuntary micturition. Painful micturition: Diagnostic significance of painful urination; Diagnostic significance of force, size, form, and direction of the stream.

DIAGNOSTIC SIGNIFICANCE OF PATHOLOGICAL MODIFICATIONS IN THE URINE (INCLUDING THE MOST PRACTICAL METHODS OF URINE ANALYSIS).

By EUGENE FULLER, M. D., New York.

General characteristics of the urine. Chemical constituents of the urine subdivided as follows: *a*, The normal chemical constituents; *b*, Those that are normal only when present in very small amounts, abnormal when abundant; *c*, Products of chemical decomposition of normal ingredients; *d*, The abnormal chemical constituents—Albumen, Quantitative estimation, Sugar, Fermentation test. Organized sediments—Casts, Pus, Blood. Miscellany—Bacilli.

URINARY FEVER.

By J. A. FORDYCE, M. D., Lecturer on Dermatology, New York Polyclinic; Surgeon to the City Hospital.

Acute urethral fever; Chronic urinary fever. Etiology. Pathogenesis. Treatment.