

had broken off in the urethra and remained in the bladder. The fragments will be seen in the collection.

Again, I once was aware, in using a lithotrite in a male, that I had clutched something peculiar. On withdrawing the instrument, there was a black substance about an inch long between the blades. A surgeon present, who had been in charge of the case for years, immediately exclaimed, "Egad! this is the end of my gutta-percha catheter." A terrible revelation, for in the *interim* the patient had undergone prolonged treatment for chronic inflammation of the bladder, and had actually gone a voyage to Madeira in search of health.

I put as much faith as any man does in the chemical treatment, if I may so call it, of the diathesis of stone, but when once a stone has formed (and in most instances it is so without marked premonitory warning) the "fact" of stone is established, and there may be room for doubt whether chemical treatment does not then make matters worse, for, whatever the quality of urine, the chances are that a nucleus being present, deposition of stone will go on with increased rapidity, equivalent to the increase of size of the stone. That there may be exceptions to this rule, I admit, and there are two stones in my collection from one bladder, which are so smoothly polished by attrition that the formation of more stone had probably ceased for many months, if not years before they were removed.

I have referred, gentlemen, to the chemical treatment of stone in the bladder, chiefly for the purpose of ventilating a sort of heresy of my own—viz., that in our treatment of stone, and in our estimate of specimens of stone in our museum, the chemical composition has been improperly the feature most referred to as the one of the greatest importance. Stone in the bladder is essentially a surgical disease, it can be treated effectually only by the surgeon, and to him the size, or, I may call it, the circumference of the substance to be removed, possess the most engrossing interest, whether he looks to his own mechanical work or the safety of his patient, for I hold it as a maxim, particular in lithotomy, that the bigger the passage required for egress, the more difficult and the more dangerous is the operation. The *accoucheur* considers the size of the head, but does not trouble about its chemical qualities or composition. So should the surgeon the stone, both in regard to lithotomy and lithotripsy.—
The Doctor.