Being considerably agitated he then introduced the hook of his silne watch chain, with the hope of being able to catch the pin; and after good deal of painful manipulation, he at last succeeded, but on attempting to withdraw the chain, he found that it had become firmly fixed in the passage and resisted all his attempts to remove it.

The hook was rather more than an inch in length, the point being sharp and turned outwards as the points of such hooks usually are. This of course acting as a kind of barb and being caught in the folds of the lining membrane, any force used in attempting to extract it, only served to bury it more deeply and render its removal still more difficult Finding that all his attempts at removing it only resulted in causing excruciating pain, and copious hemorrheye, he at last decided on coming to Montreal.

On examination, the hook was found completely within the orifice together with about half an inch of the chain. The organ was very much swollen, and on stretching open the meatus, lacerations of some extent could be distinguished. The hemorrhage continued and must have been copious, for his clothes were completely soaked through. The pain was intense and the least traction augmented it materially.

On considering as to the best means for removing the hook; three methods occurred to me, viz:

1st. To introduce a grooved director into the canal in such a way as to cause the point of the hook to enter the groove and then to slip it along by gentle traction on the chain till completely extracted.

2nd. By retracting the glans gradually until the eye and a portion of the hook could be uncovered and seized by a pair of strong dressing forceps; then to open the hook forcibly and extract it gradually by causing the margin of the meatus to glide back over the greater curve thus produced.

3rd. To cut into the urethra, making an opening large enough to extract the hook and to detach it from the chain.

The state of engorgement and the extreme sensibility of the parts rendered the introduction of a director extremely difficult, and the hook had so completely disappeared in the canal, that the point could not be found, so, after a single unsuccessful attempt, I abandoned this method, and proceeded to adopt the second.

It is unnecessary for me to detail the various steps of the procedure; suffice it to say, that after I managed to secure the upper portion of the hook by means of the dressing forceps, I easily succeeded in opening it out gradually, at the same time retracting the margin of the opening until the whole hook was withdrawn, the point coming out last.