

SYMPTOMS AND TREATMENT OF CALCULOUS ANURIA.*

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Calculus anuria may claim your attention, not because of its frequency, nor because of the vague and irregular nature of its symptoms—for it is not frequent nor are its symptoms other than absolutely characteristic—but calculus anuria may claim the respect of every practising physician because it is a condition which, though grave and threatening rapidly fatal is yet, shows during the greater part of its progress no signs adequate to arouse alarm in the mind of the patient or of his doctor.

It is to all appearances a perfectly benign condition. The patient walks about almost entirely well and quite free from fear of any imminent danger, when suddenly the crash comes, the disease culminates in an explosion of intense uremia. Hence most practitioners fail to realize the gravity of the patient's condition until it is too late; although the one reason why they do not make the diagnosis sooner is because they do not attach sufficient importance to it. Therefore, in calling your attention to-night to the diagnosis and treatment of calculus anuria, I might be more explicit and say that I wish to impress upon you the necessity of a timely diagnosis in order that you may be able to institute successful treatment.

Calculus anuria, as the name indicates, is a condition in which the kidneys cease to secrete urine because of calculus obstruction. In order to understand the mechanism of this, you must recognize that the kidney ceases to secrete for one of two reasons. Either its duct is obstructed or it is intensely congested. You are doubtless more or less familiar with the condition of hydronephrosis and dilatation of the kidney on account of some obstruction to the outflow of urine through the ureter. Inasmuch as stone is a fairly frequent cause of hydronephrosis, we must distinguish between the obstruction by stone which causes dilatation of the kidney and the obstruction by stone which causes anuria. The distinction is this: If the stone obstructs the ureter suddenly and completely, the kidney does not dilate, the urine which it secretes into the pelvis finds no means of escape, presses back upon the secreting structure of the organ, and causes an intense congestion, which is followed by a cessation of function, and ultimately, if the

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