

be some bleeding from the hæmorrhoidal arteries and veins, but this I imagine we will be able to check easily. I make my incision in the usual manner, in front of and to the left of the anus, through the perineal fistula left by the former operation; and now I find the groove in the staff with my left finger and, running the knife along it, divide the urethra and prostate, and open the bladder. The stone is large, and, as the edges of the bladder embarrass my proceeding, I am obliged to divide the parts still further. Now, as I have removed the stone in several pieces, we wash out the bladder with a syringe, in order to remove any blood-clots or calculous matter that may remain behind.

It is always well to have some experienced man to examine the case after the operation, lest you be assailed for malpractice. This man will be removed to the ward, where a bed, especially for this purpose, is prepared in the following manner:—Upon the mattress is spread a sheet in the usual way, and on this is placed a soft oilcloth, over which again is placed what is known as the draw-sheet, consisting of an ordinary sheet folded several times and placed under the buttocks. This helps to keep off the pressure as well as receive the discharges, and can be changed several times a day without disturbing the patient. The bowels should be locked up for three or four days by a full anodyne, and in this instance the patient will be given half a grain of morphia as soon as he has sufficiently recovered from the effects of the anæsthetic. His diet will be of the most concentrated character. The perineal wound will probably heal in a few days, and it may possibly be requisite and proper at some future time to attempt to close the old rectal fistula.

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Now, two weeks after the operation, the man is in good condition. The urine still passes from the wound of operation, which is contracting, and, of course, from the rectum, as the fistula was not closed by any attempt at plastic operation. He has less frequent desire to urinate, and says less urine passes from the rectum than formerly. His condition has been greatly improved by the removal of the stone.

BRAIN LESIONS AND FUNCTIONAL RESULTS.

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(Continued from page 40.)

Private Samuel D. Solomon was wounded at Bull Run, Aug. 27th, 1862, by a carbine ball, which struck at a point two inches behind the tip of the left ear. The missile entered the brain to the extent of two inches and was not extracted. When struck he fell to the ground, but retained his consciousness. Healthy sup-puration followed, and a fragment of bone was discharged from the wound. He suffered from headache, and also from acute darting pains across the base of the brain, from the right temple to the scar of the wound. No paralysis existed, and the functions of the body were generally well performed. He afterwards served in a Washington Hospital in the capacity of nurse, and was discharged the service in the subsequent year, with no record of mental unsoundness or functional disability.

Corporal Wood, wounded at the battle of Winchester by a conoidal ball, which fractured the occipital bone and entered the brain. This was Sept. 19th, 1864. He was examined by a Confederate Board, on March 24th, 1865, whose members recommended that he might be employed at some post where the duties were not laborious, showing his mental faculties could not have been impaired to an appreciable degree. No functional results were seen.

Private Sheridan was wounded at the siege of Vicksburg by a canister shot. The missile entered the left parietal bone, immediately posterior to the coronal and three inches from the sagittal suture, passed horizontally inward, a distance of two and a-half inches and lodged. The ball could not be extracted. He suffered but little inconvenience. The wound sup-purated freely, sometimes bled, and small frag-ments of bone escaped. Six months after, he was placed to work on the levee, and experi-enced no trouble, except on approach of a storm, when he had a dull pain and sensation of weight. In eight months after the wound was received he returned to duty.