

Retrospect of Current Literature.

SURGERY.

UNDER THE CHARGE OF DRS. ARMSTRONG, BARLOW, ARCHIBALD, AND CAMPBELL.

DR. ERNST. "The Newer Treatment of Gonorrhoeal Epididymitis with Personal Experience of the Puncture Method." *Berliner Kl. Woch.*, 1909, No. 10 and 11.

Regarding the treatment and prophylaxis of epididymitis, there are at present two schools. The one holds that as the infection is caused largely through irritation of the colliculus seminalis and a consequent reversed peristalsis along the vas deferens, it therefore should desist from all active measures so soon as an epididymitis declares itself and should be especially careful of any interference with the posterior urethra. Neisser's school, on the other hand, considers that active treatment is always necessary. The author commits himself to neither view, but in severe cases of urethritis desists from all treatment and in milder advocates mild irrigation and prostatic massage. Once the epididymitis has developed he stops all treatment, puts the patient to bed, if possible, applies ice, to be followed by heat or applications of ichthyol.

The compression method, "strapping," he considers of only historical interest. Biers' treatment has not been satisfactory in his hands, but on the other hand, on the basis of 52 cases, he warmly recommends "puncture." This he performs with a small syringe and needle, puncturing the cauda of the epididymis 1 to 2 c.m., and aspirating a drop or two of blood-stained serum. Anæsthesia is not necessary. Within 24 hours the swelling has appreciably decreased (though in some cases a repetition was necessary). Fever and pain disappear with the swelling. He has never seen any bad effects, and considers that the puncture allows a slight tear in the capsule which by relieving tension enables a better circulation to affect improvement.

ARTHUR JORDAN, Moscow. "Statistics of Arthritic Gonorrhoea." Moscow, *St. Petersburger Med. Woch.*, No. 5, 1909. *Zentralbl. f. Urolog.*, Bd. III, Ht. VII.

Among the complications of gonorrhoeal urethritis "rheumatism" stands third, prostatitis and epididymitis being both more frequent, the latter occurring, according to the author, in 11.7 per cent. Fournier considers that arthritis occurs as a complication in but 1.6 per cent., and most statistics range from this to the 3.6 per cent. of Held. Bond, however, and the Copenhagen statistics for 1904 put its occurrence as