

receive appropriate treatment; when the bladder is badly infected a preliminary cystotomy is advised. A plea is made for the earlier detection and operative interference so as to anticipate the cause of the disease. "Prostatic hypertrophy is now curable by means of an operation which though serious, is not hazardous when undertaken in proper time and manner. Anatomically, and now surgically, the simple perineal is the direct and preferable route." Dr. Syms is reported as having operated upon twenty-four cases with only one death.

The Treatment of Congenital Phimosis.

J. F. WOODYATT, M.R.C.S., Eng. "The Treatment of Congenital Phimosis." *Lancet*, August 29th, 1903.

According to the writer congenital phimosis is caused by a constricting ring of mucous membrane just inside the prepuce, and the prepuce itself is never redundant and never causes phimosis. Accordingly the usual circumcision operation is condemned. The method advocated is to retract the prepuce as far as possible, then snip through the constricting ring of mucous membrane on both sides, and then convert the longitudinal incisions into transverse wounds by suturing after the manner employed in pyloroplasty.

The Operative Treatment of Tuberculous Glands of the Neck.

J. G. SHELTON, M.D. "The Operative Treatment of Tuberculous Glands of the Neck." *New York Medical Journal and Philadelphia Medical Journal*, September 5th, 1903.

The complete removal of not only the glands but the fat, infected fascia and every structure except the important vessels and nerves is the radical measure advocated. The presence of a few tuberculous glands in any of the triangles warrants complete dissection of the entire triangle. The article is based upon what appears to be an insufficient number of cases, and is chiefly taken up with a résumé of the surgical anatomy of the triangles.

The Cure of the more Difficult as well as the Simpler Inguinal Ruptures,

W. S. HALSTED, M.D. "The Cure of the More Difficult as well as the Simpler Inguinal Ruptures." *Bulletin of the Johns Hopkins Hospital*, August, 1903.

In this contribution Dr. Halsted gives a brief review of the evolution and perfecting of his operation. The steps of the operation are given and admirably illustrated by six drawings. The veins are excised, the vas deferens disturbed as little as possible, the sac tied off high up and fixed after Kocher's method. The cremaster is sutured to the internal