

not come away; he never could empty his bladder completely. These symptoms were more urgent in the daytime than at night; he very seldom had to get up at all at night, and never more than twice. At this time he sought advice from several doctors in Quebec, who tried to pass instruments, and usually after each attempt some bleeding took place. All failed from not having small enough instruments, as they told him. In the winter of '73 Dr. Lemieux passed a small bougie several times with difficulty and bleeding. This gave him some relief. The doctor told him to go to the hospital, where he could give more attention to him, but he did not go, and from that time up to the present, though his distress has increased steadily, he has had no attempts at passing an instrument made. He has lately noticed a slight gleety discharge from the meatus in the mornings before micturating.

*Present Condition.*—On attempting to micturate the urine comes away drop by drop. In order to hasten the process he presses the end of his penis to close the meatus and strains; when the urethra is distended, he presses from behind forwards, and forces out a small, straight stream. In this way he can relieve himself in from three to four minutes, but does not completely empty his bladder as some urine drops away afterwards. There is not much scalding or severe pain. After every attempt to urinate he has a slight rigor lasting for a few seconds. Micturition is more frequent in daytime than at night, he rarely if ever being disturbed at night. For three or four hours after drinking spirits or acids he has to micturate every ten or fifteen minutes, and the act is more painful. For the last two years the perineum and urethra are excessively itchy after micturition and he has often scratched the skin off in his distress.

As the stricture was permeable to no instruments in the hospital, Dr. Reddy determined to avail himself of the use of the instruments kindly placed at his disposal by Dr Wilkins, who assisted him at the operation.