

I would here remark that Dr. Emmett speaks in his work on vesico vaginal fistula, of the frequent occurrence of calculi after the operation for fistula.

Dr. Bonney, in conclusion, says, June 12, 1871 : "I am happy to be able to add that the child has had no further trouble, and is, at this time, in the enjoyment of health."

REMARKS.

Stone in the female is comparatively of rare occurrence, its ratio to the male being one case in eighteen to one case in twenty-two, according to the different authors and as existing in different countries.

According to most authorities on the subject the operation may be performed in three ways. First, by lithectomy (through a dilated urethra); second, by lithotomy; third, by lithotrity. Each has its peculiar merits.

The first, lithectomy, is most available in females who have borne children, and especially those of lax fibre. Then the parts can readily yield to the necessary limits. This mode presents the advantage of overcoming the diseased state without recourse to a serious operation. It can only be used in connection with stones of comparatively small size, however. The operation with those of considerable size is liable to be followed by incontinence of urine, hence some other method is necessary.

The third method that I have named is lithotrity (with or without dilatation). Upon this some authors make the broad statement that it should be employed, with rare exceptions, in all cases above puberty.

All agree that in cases of stone of phosphate or uric character crushing can be used almost universally, and in the case of the oxalate of lime species, to the size of an inch in diameter. This operation presents the most favorable indications in the female, on account of the shortness, size, and dilatibility of the urethra. It is contra-indicated in organic diseases, or in case of severe irritation of the bladder.

The second method, lithotomy, may be performed on the female in a variety of ways, two of which, the most important, we will notice, the supra-pubic, or the "high," and the vaginal. The "high," or supra-pubic, does not differ in women materially from the same operation in men. This, with modifications, is the only one commonly noticed by surgical authorities, Erichsen being the only author until a late date that gives the vaginal operation a place among the standard modes of procedure.

In connection with the case in hand we have to speak particularly of the vaginal operation. Not until recent times, since the