

Nephrolithiasis.—The lecturer then showed slides of a few kidneys containing calculi, illustrating the changes brought about in these organs through them. His first picture was that of the kidney of a middle-aged woman, who entered the hospital complaining of dyspepsia and malaria. She said that she had suffered from dyspepsia for a number of years, but it was only within the last few years that she had had the attacks of malaria, which had lasted from a few hours to a few days, accompanied by chills, fever and sweating, and then subsiding. On examining her abdomen, a large mass was found on the right side, tender to the touch, which she said was an enlargement of her liver that she had had ever since the malaria began. It was evident, however, that it was not the liver, but an enlarged kidney below it. It was quite prominent in the front. She was kept under observation for a few days, and her urine changed considerably, sometimes containing a large amount of pus, and at other times comparatively little. The pus came from the right side. Her attacks of malaria were evidently those of renal retention in a perinephritic kidney. When the urine was clear the kidney was enlarged and the patient was septic, and vice versa. The urine coming from the right side was mostly pus, and contained but a small quantity of the normal solids, showing that it was a case of pyonephrosis in a practically destroyed kidney. The other kidney was functioning sufficiently well to carry on the necessary elimination in case that it proved advisable to remove the right organ. A loin incision over the enlarged kidney showed it to be about nine inches long, and of relative width. It was removed, and on opening it, the five stones seen were found, one of which was bifurcated and four inches long. This particular stone evidently originated in two of the kidney calices, and they had grown down into the pelvis, and there formed a common trunk, which trunk engaged in the pelvis opening and caused from time to time temporary unilateral anuria; but when sufficient pus and urine had collected in the kidney pelvis to dilate it, a stretching of the organ caused it to push the pelvic opening away from the part of the stone lodged in it, and the retained urine escaped again. The other stones were from $2\frac{1}{2}$ to $1\frac{1}{2}$ inches in width, and were more or less rounded. It was the variety of kidney which called for removal. The stone showing the particular formation plugging the ureter was then shown. Very recently he had removed a kidney eleven inches long, with two such bifurcated stones, one of which was so wedged into the ureter that no amount of dilatation was sufficient to discharge it.