

As well as could be made out, an incision was made in the median line extending from the posterior margin of the scrotum to within half an inch of the anus, dissecting backwards, the urethra was opened in front of the membranous portion, and a catheter passed thence into the bladder. The urethra which was pervious was then slit up on a director carried forwards to the posterior margin of the obstruction. About an inch or more of the urethra from this point forwards was apparently obliterated, and was carefully divided to its entire extent on the point of a large sized sound carried down from the meatus, and the way being clear, a No. 10 catheter was passed into the bladder and secured there in the usual way.

There is no necessity for tracing from day to day the progress of this case. The subsequent treatment was tedious and prolonged. The poor fellow had an attack of erysipelas, extending over the buttocks and down the thighs, which protracted his recovery. As a portion of the canal had to be restored, it was thought proper to retain the catheter in the bladder longer than is customary after these operations. A gum catheter was, however, substituted for the metal instrument at the end of the third day; this was changed every second day. The bladder irritation was slight, nevertheless a small slough formed in front of the scrotum, opening the urethra at that point, which required subsequent operative measures. This result was attributed to the pressure of the instrument. It is necessary to mention this fact—not, however, as a warning to other operators, as in practice many surgeons content themselves in passing a catheter every third or fourth day. My own practice at present is to leave a catheter in for the first 24 or 48 hours, provided no bladder irritation results from its pressure. The case terminated in recovery; the man lived several years thereafter in comfort. A large-sized bougie had to be introduced occasionally, and which passed with ease. This was passed about twice a month.

A second case of almost complete obstruction of the urethra (the result of injury) came under my observation quite recently.

W. F., a powerfully-built man, aged 34, consulted me in October, 1879. When first seen, the bladder was enormously