I spent a more stimulating hour. He was, I found later, Mr. Henry Morris, Consulting Surgeon to the Middlesex Hospital and President of the Royal College of Surgeons. In other words, Mr. Henry Morris, about whom I ought to have known, but did not, was, and is, in the very front rank of his profession. His eminence has since been recognized and rewarded by the King, and he is now Sir Henry Morris, Bart. I suppose even a republican may admit that, if titles are to be conferred, they are well conferred on men eminent in science.—Buffalo Med. Journal.

The Bladder in Tabetics

Rinaldo (Gaz. degli Osped., January 18th, 1910) draws attention to a condition of the bladder which may sometimes be seen in tabetics as an early symptom, and, indeed, may be the only symptom at first. This consists in a loss of sensibility, so that the desire to empty the bladder comes at longer and longer intervals, until finally a spurious incontinence arises, very much as is the case in retention of urine from enlargement of the prostate, the overflow of urine being all that the patient is cognizant of. When examined by the cystoscope the condition known as "columnated bladder" is to be observed. The appearance differs somewhat from that seen in prostatics, for in the tabetics the trigone and parts about the ureteral openings are free, whilst it is the lateral regions and the fundus of the bladder which display the marked trabecule constituting the abnormality in question. In the author's case there were no characteristic signs of tabes and no known history of syphilis; no eye symptoms, and the reflexes were normal, and there was no ataxia. There was some history of lightning pains in the thighs and calves and some complaint of altered sensation in the soles of the feet when walking There was a history of temporary diplopia and girdle pains. There was no prostatic enlargement and no stricture. Owing to the inability to empty the bladder suprapubic cystotomy had to be done eventually. In spite of any known history of syphilis a Wassermann reaction was obtained, and found to be positive. The man was 48 years old. Attempts were made to stimulate the sensibility of the bladder by electricity, douches, etc., but with only moderate success. These bladder troubles in tabetics may be due to spasm of the sphincter, to inability to relax the sphineter, or to paresis of the detrusor. In the author's case there was no spasm.—British Medical Journal.