

become absorbed after the employment of appropriate remedies for a reasonable period. May I not add that Dr. Sherriff's cases, together with my own, justify the advice I have given elsewhere, "That in *scarlatinal* pleurisy, where the signs of effusion are marked and do not promptly disappear, it is well to make an exploratory puncture of the chest at a *much earlier* period than is even now customary in *ordinary* pleurisy following *exposure*." *

You will, no doubt, join me in the hope that Dr. Sherriff will embody, in another communication, his further experience of thoracentesis in empyema.

Yours,

R. P. HOWARD.

BEAVER HALL HILL, December, 20th, 1872.

Removal of a Large Calculus Partly Impacted in the Urethra of a Paraplegic Woman, by the Combined Operation of Cutting and Dilating the Passage. By JOHN McCURDY, M.D., C.M., of Chatham, N. B.

On the 6th May, 1872, I was called to see a married woman, aged 35, whom, I found, had been the subject of paraplegia for the past six years; or, since the birth of her last child. She was suffering from all the symptoms of this form of paralysis; such as loss of power and sensation in the lower extremities, incontinence of urine and fœces, &c. The most interesting physiological feature in the case, however, in connection with the nervous lesion, was the fact that she was again pregnant and within six weeks of her confinement. The reason of my visit, however, was to explain, if possible, certain anomalous symptoms referable to the bladder which had recently been noticed and had given her considerable uneasiness. There had been of late some difficulty in getting the bladder emptied, and the flow of urine would at times suddenly cease. I immediately proceeded to make a careful examination of the parts: first externally, and then internally, with an ordinary female catheter. With the latter instrument I readily discovered what appeared to be a calculus lodged in the urethral canal, near the point of entrance of the latter into the bladder. Having satisfied myself respecting the character of the foreign body, I thought it advisable to proceed to its removal without further delay. I gradually and with care dilated the urethra by means of flexible bougies, having nothing more scientific conveniently at hand. The canal being