1850, when I was called to see a child of four years of age, suffering from retention of urine. On attempting to introduce a catheter the instrument passed with a grating sensation over a foreign body which appeared to be impacted in the urethra, close to the bladder. As it was night, and having no assistance at hand, I deferred all operative measures until the following morning, when, in consultation with two other surgeons, I proceeded to remove the obstruction by an incision made in the raphe. The stone removed was over an inch in length and shaped somewhat like a bolt.

The next occasion I was called upon to relieve a little boy of 6 years who was suffering from impacted calculi, three in number, situated close to the meatus. Considerable force had to be employed in removing these calculi, but after some manipulation they all came away without employing the knife. This was in 1857.

No actual case of stone came under my observation throughout the next decade, though I had frequently seen cases of oxalura, and lithic acid passed in sand. At this period, being unconnected with a hospital, I had fewer opportunities than I have had since my appointment to the Montreal General Hospital.

In the early part of 1867 a little Irish boy, six years of age was brought to the hospital. He was described by his father as not being a free pisser for over two years. It was distressing to see this poor little boy when the paroxysm would come on. He would dance on tip toe, leaning forward, seize the penis in his hand and drag it forward at the same time. From the violence of the straining the rectum became prolapsed. In this case the lateral operation was adopted and the child speedily relieved of a calculus weighing Ziji, grs. xx., composed of phosphates, with a large central nucleus of lithic acid. This was in January, 1867. In March of that year a second case presented itself in a child of twoand-a-half years, when, by the same procedure, a stone weighing zj. Jij. was removed. This was an exceedingly dense and hard stone, composed entirely of lithic acid. There were in this case some peculiar features which demand a passing notice.

It has been questioned by surgeons whether calculous affections are ever hereditary. Cases are mentioned by some surgical writers which would almost lead to the belief in its having such an origin occasionally. In this particular case the father had suffered from frequent attacks of gravel, and he told me that his grandfather had died of the disease. I must state, however, that they were English people, and came from Norfolk, in which county