

a fluctuating tumor beneath Poupart's ligament. The moxa, rubefacients and other counter irritants were put on the loins, but without benefit. The abscess was afterwards opened, and he was discharged as cured about 12 months since.

Symptoms on admission—Pains at the neck of the bladder, and over the pubes; micturition very frequent; urine scalding, loaded with pus, and streaked with blood; sometimes very dark and offensive, with a very adhesive sediment. *Treatment*—Full diet with palliatives; urine being alkaline, bladder was injected with a solution of 1 drop of muriatic acid to the ounce of water, which gave temporary relief; subsequently he had a lancinating pain in the loins particularly on the left side; urine more bloody—continued thus for 12 or 13 weeks. Appetite very good the whole time. Various remedies were used, and about 8 weeks since, the mucous and bloody discharge disappeared, but he had acute pain in the right side and lower part of the abdomen with diarrhoea and great fever—for the latter he was sent to the physician's ward and treated in the usual way. Sept. 28th, more than 3 months since admission, felt pain and heat in perineum but did not complain of them till Oct. 1st, when on examination an abscess was found here and was at once incised, giving exit to a large quantity of thin pus with a strong urinous odour. Ordered poultices of linseed meal: milk diet and chop: $\frac{1}{2}$ xi wine: a pint of porter. Part of the wine came through the opening. Oct. 7th, bladder very irritable. Barley water as a drink. Micturition very frequent, with great scalding. Given Liq. Potas. and Tr. Hyoscyam. with much relief. 11th, swelling on left side of scrotum and within the cord; the latter very hard but not red nor hot, complains of a throbbing pain in it with slight fever, loss of appetite, &c., warm water dressing and a suspensory bandage.—12th, saline mixture with 5 gtt. tr. opii every 4th hour in lieu of liq. potas., this allayed the fever and caused sleep. 13th, seems easier and cheerful. 14th, scrotum fluctuates, perineal opening closed. 15th, second abscess burst and a lot of thick pus followed. Poultices to be applied. Pulse about 100. 18th, resumed liq. potas. with tr. hyos. and mucilage. Suffers greatly from lancinating pains through the lower part of the abdomen. Pulse very frequent but weak. 25th, complained of very acute pain at the neck of the bladder—to use every night a suppository of soap with 5 grs. pil. opii et saponis, which gave relief. 26th, cannot eat chop, strong broth substituted. 27th, bowels confined. Given 3ij castor oil, which did not operate until the dose was repeated. 28th, seems to suffer less, but is much weaker and he gradually sank and died Nov. 1st.

Autopsy. Nov. 2nd.—Peritonæum inflamed, recent lymph on its surface abdominal viscera healthy, abscess on the right side of the pelvis, which seemed to have burrowed into the peritonæum under the fascia, from an opening in the left side of the bladder. Prostrate gland entirely supplicated away; bladder very thick, internal surface ulcerated and gangrenous with sinuses passing through it. Ureters very much dilated, particularly the left, and contained cheesy matter; left kidney nodulated externally; suprarenal capsule thickened and indurated, and when cut into the kidney, contained similar cheesy matter. Pus in left testicle; right kidney and testis natural; chest not opened.

GENTLEMEN.—This case is introduced to you because of the obscurity of the symptoms and of its great importance. In retrospect there are many circumstances of great interest to which I wish to call your attention,