

though always vague, leave little doubt but that it owed its being most usually to a contracted section of the rectus muscle or to a laboring intestine distended with gas or feces.

It is strange that to Dr. Bright, the shrewd physician, there should not have appeared this common phenomenon, for he makes no mention of it in his very exhaustive and elaborate "Clinical Memoirs on Abdominal Tumors."

The majority of the cases upon which Bright based his memoirs fall between the years 1828 and 1839.

The first sound clinical description of movable kidney appears to have been given by Pierre Rayer, whose work (*Traité des Maladies des Reins*) was published in Paris in 1839.

It can scarcely be assumed that the movable kidney is to be ranked among the many inventions of the ever-active 19th century, or that it is one of the teeming products of the productive Victorian era.

The condition has been referred to by some modern writers as a stigma of degeneration, but such stigmata are not of abrupt appearance, and yet previous to the commencement of the last century no detailed mention of the movable kidney is, I believe, to be found.

Ebstein, who appears to have dipped into the history of the matter, states that "observations" on movable kidney were made by Mesua and Johannes Riolan, two writers who flourished in the 16th century, but he ascribes the real clinical appreciation of the condition to Pierre Rayer. Some account of the movable kidney as it is at present regarded may now be given.

*The Anatomy of Movable Kidney.*—The kidneys are deeply placed at the back of the abdominal cavity. If the body were transparent it would be seen that these organs are to a great extent covered in front of the cartilages of the seventh, eighth, ninth and tenth ribs, that the upper end of the left kidney reaches to the height of the ensiform cartilage, and the right nearly to that level. According to Quain the left kidney is  $1\frac{1}{2}$  inches, and the right 1 inch, above the position of the umbilicus, or the summit of the iliac crest. The organ on the left side is frequently altogether above the infracostal plane. The upper end of the kidney lies upon the diaphragm.

The organs are somewhat lower in women and in children than in the adult male. In childhood the kidneys are relatively larger than in the adult, and before the tenth year are surrounded by very little fat.

The kidneys lie in recesses on either side of the spinal column, and are invested by that extension of the subperitoneal tissue which is known as the perirenal fascia. The organs themselves are immediately surrounded by a considerable quantity of fat, in which, indeed, they are buried.