was unable to find out the character of, whether it had the characters of petechiæ or was a simple rash, resembling sudamina. I incline to the former opinion, because of the impoverished condition of the blood at this late stage of the disease. There were no other evidences, besides the parotitis, of any local inflammation; and I am not of the opinion that it was due to embolism. There were no symptoms of any cardiac trouble at any time, except the slight accentuation of the second sound, which could be explained on other grounds. At least, no such symptoms presented themselves during the period of my attendance. It is a matter of great regret to me that I was not in attendance during the entire illness, as in that case the notes would be very much more satisfactory.

CHRONIC PYÆMIA, FOLLOWING URETHRAL DILATATION.

By T. W. MILLS, M.A., M.D., Resident Physician, Hamilton City Hospital.

G. D., et. 52; a blacksmith, stoutly made, was admitted to hospital November 21, 1879, for alcoholism. In a few days he regained his general health; but special attention was directed to a most unusual condition of the genito-urinary organs. patient admitted that he had been a hard drinker for years, but was very chary as to any confessions of having been the subject of venereal disease. On being closely questioned, he stated that for several years he "had trouble with his water;" but that never till of late had he suffered from positive retention. year ago almost he had his penis frozen, and the organ had sloughed off near the root—not more than an inch remaining; while the under surface of this stump was puckered and drawn downwards, so that the opening of the urethra actually appeared at the junction of the penis with the scrotum below; the opening was difficult to find, and would admit only a very small catheter. Once the opening was passed, the urethral canal was comparatively natural till the usual site of stricture was reached, when the greatest difficulty was experienced in passing any