

sought for in vain. In other words, I believe that in most cases of stricture, as perfect and permanent a cure may be obtained in this way as by any other means of treatment, however heroic that may appear." Indeed there is so great a discrepancy in Mr. Syme's statements that it is hard to reconcile them; for in commenting on a passage in Sir B. Brodie's work, where he dwells on the necessity of occasional introductions of the bougie, where the treatment has been conducted on the principle of dilatation, he continues at p. 50 of his monograph on strictures:—"My own experience would not lead me to a statement quite so discouraging, and the difference may perhaps be attributed to the dilatation practised in Edinburgh being more ample than that which appears to be thought sufficient in London."

We cannot but admire the daring candour of Mr. Syme in his letter to the editor of the *Lancet* for May 18, 1850, where he challenges the profession to produce a case of stricture impermeable to his adroitness. I do not at all wish to detract from Mr. Syme's merits as a most accomplished surgeon, but we have evidence of men with whom Mr. Syme need not be ashamed to have his name associated, yet who have both foreseen and felt the impracticability in all cases of passing an instrument into the bladder, and have been foiled in their best efforts; indeed, the arrogant exhibition of feeling expressed by Mr. Syme in the following sentence can best be met by an extract from Mr. Liston's vast experience and judgment.—Mr. Syme continues to say—"The operation by external incision hitherto employed, has been resorted to as the refuge of awkwardness or failure in the introduction of instruments, there being no truly impermeable stricture; while the one now advocated can be accomplished only by steps requiring the nicest manipulation." Mr. Liston estimates the difficulties very differently, and thus expresses himself in *Elements of Surgery*, 2nd edition, p. 599:—"It is no easy matter to pass the instrument in many cases, and particularly when ineffectual attempts have been made previously. By gentle insinuation, and perseverance in moderate pressure, properly directed, the obstacle can always be overcome, and that without

the infliction of any injury to the parts. I may here observe that I have never yet been foiled in passing the catheter, though very many severe and difficult cases have fallen to my lot; in other words, I have never been obliged to abandon my attempts, and as a last resource mutilate and endanger a patient by making an unnatural aperture in his bladder; yet circumstances may soon occur to me in which the introduction of an instrument along the urethra shall be impossible: no man, it has been said, can always be wise or always fortunate, and he who pretends to invariable success must be either a knave or a fool."

I do not at all mean this extract to apply to Mr. Syme. As Professor Miller says, in commenting on this quotation, it only shows the modest opinion Mr. Liston held of his own resources and dexterity in comparison with the difficulties that might present themselves, and defeat his best efforts; and before his premature death, he was compelled to puncture the bladder through the rectum.

Mr. Syme, in the *Monthly Journal* for October, 1844, distinctly contradicts his assertion as above quoted, and gives a case where he operated, and where even "the guidance of a director was not available for this purpose." The experience of the first surgeons, then, prove the fact, that there may be such a thing as an impermeable stricture; it is proved in the works of Dupuytren, Brodie, Liston, Miller, and many others.

But looking most favourably upon Mr. Syme's contradictory statements, and admitting that "there is no truly impermeable stricture" in his hands, this renders the operation which he has so frequently performed the less excusable. The weight of authority is steadily against such procedure. Mr. Samuel Cooper says—"If the end of a small bougie, let it be ever so small, can be introduced through the stricture, the cure is then in our power," and the celebrated French surgeon, Desault, reprobates the treatment by incision. "The operation known under the name of *la boulonnière* (an operation which consists in an incision made into the urethra or the neck of the bladder,) although apparently better adapted to the nature of the disease, is generally