said to contain a small particle of fecal matter. There was no pain nor tenesmus, nor tenderness of the abdomen. The child was playful all the afternoon, and now fast asleep; having had a powder of hydrargyrum cum creta and Dover's powder, of each a grain, and a linseed-meal poultice.

Dec. 14th. He had had a good night, and had passed two evacuations; the first fecal, but loose, with a patch of mucus tinged with blood; the second devoid of blood, and with abundant bile, but still relaxed. He was ordered to have a grain of extract of logwood, and five minims of ipecacuanha wine, with some syrup, in half an ounce of aniseed water, every four hours, and to repeat the powder.

8½ P.M. He was comfortably asleep; he had been full of play all day, and hungry. He had had one semisolid evacuation.

LARGE CALCULUS IMPACTED IN URETHRA: REMOVAL.

By T. MORLEY ROOKE, M.D., Cheltenham.

THE following case presents some features of interest. I was called one evening, two or three weeks since, by a gentleman, to see his stable lad, who, I was informed, was suffering from retention of urine. I found the patient, a small sized but healthy youth of 18 years of age, in considerable suffering, with his bladder distended up to the umbilicus; he had passed very little urine for thirty-six hours. The retention had been at first partly overcome by strong expulsive efforts and the aid of a warm bath, but more lately it had been complete; there was no history of gonorrhœa recent or old, nor of anything likely to cause stricture. On proceeding to explore the urethra with a catheter, the instrument immediately struck upon something hard and perfectly resisting; and on opening out the lips of the meatus, I could plainly see, about half an inch within the canal, what looked like an urinary calculus. I could also feel a hard rounded body, on pressing the glans, conveying the impression of something of the size of a small marble. I at first endeavoured by external manipulation to press the substance forward; but, this totally failing, I passed the blades of an ear-forceps with broad concave-flattened points on each side of the stone, and was enabled firmly to grasp it; but, although I used for more than half an hour every effort of force and cunning to extract it, so firmly was it wedged, that it would not move a hair's-breadth; indeed, the stone at length broke under my forceps. I finally saw no other plan than to slit up half an inch of the mouth of the urethra; this I accordingly did, and then, though still not without some difficulty, extracted the calculus. Of course, the bladder was immediately relieved. The wound of the urethra was nearly healed in five or six days, its urethral edge having adhered by the morning after the operation.

The stone was of an ovoid form; but, it having broken, I cannot give its exact dimensions; the main fragment, probably a little more than half, measures exactly half an inch in its transverse diameter, but the bossed character of its surface no doubt much aided its impaction. The weight of the same fragment is thirteen grains; I should estimate the whole as having been about twenty-two grains. According to my analysis, the composition is oxalate of lime with a little carbonate.

Looking to the age and the small make of the patient, I should think a similar case of a calculus of such dimensions being forced so far along the urethra must be extremely rare. I cannot myself find one on record.

Reviews and Notices.

EXCISION OF THE SCAPULA. By JAMES SYME, F.R.S.E., Surgeon in Ordinary to the Queen in Scotland, etc. Pp. 35. Edinburgh: 1864.

EVERY one has had personal experience of the truth of the old adage, "A great book is a great nuisance." We are glad, therefore, to be able to tell our readers that Mr. SYME's volume is small, and its value great. It contains the history of three cases of excision of the scapula; and the value of the history is shown in the fact that it establishes a new operation in surgery. These cases prove that the entire scapula, either with or without the arm, may be removed without much difficulty, and without dangerous loss of blood; that the wound will heal quickly and well; and that the arm, if preserved, may be strong and useful.

Mr. Syme first performed this formidable operation in 1856, the patient being an old woman seventy years old. The tumour appears to have been of a cerebriiform kind. In this case, the wound healed; and the patient died, not from any of the ordinary results of operations, but apparently from natural decay. She survived the operation two months and a half, and lived long enough to establish, in Mr. Syme's mind, the propriety and feasibility of the operation.

In the next case, in 1861, Mr. Syme removed the scapula in a man forty-three years of age. He had previously removed, in 1860, the diseased head of the humerus in this man; and, a year afterwards, observed a tumour over the shoulder, which gradually enlarged, and became eventually the subject of his second excision of the scapula. The tumour weighed between four and five pounds, and was of a suspicious nature. The man completely recovered, and was able to lift heavy weights with his arm; and, fifteen months after the operation, was in perfect health, and engaged as a letter-carrier.

In the third case, Mr. Syme in 1862 removed a fibro-cartilaginous growth of the head of the humerus, which did not affect the joint; and the patient rapidly recovered. Some months later, a fibro-cartilaginous cyst, of the size of a walnut, was removed from under the cicatrix. Shortly after this, a swelling commenced in the scapular region, which was rapidly developed, extended into the axilla, and overlapped the humerus. In this case, the arm could not be preserved. The tumour, which was removed with the scapula in May last, was of exactly the same character as the morbid growths previously excised. No fewer than nineteen ligatures were required to secure the blood-vessels in this case. The patient recovered completely; and, the last time Mr. Syme heard of him, he was out with the hounds.

An operation of this kind may be truly called a triumph in surgery. It manifestly is a means of prolonging existence, and of snatching man from the immediate prospect of a certain and very painful death. The profession has to thank Mr. Syme for having once again widened the domain of surgery. The details of his cases will, no doubt, be carefully studied by all surgeons.