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FURTHER OBSERVATIONS

ON THE USE OF THE

LANCETTED STILETTES,

IN THE CURE OF

PERMANENT STRICTURES OF THE URETHRA :

With additional Cases.

BY

RICHARD ANTHONY STAFFORD,

MEMBER OF THE ROYAL COLLEGE OF SURGEONS, AND LATELY HOUSE-
SURGEON TO ST. BARTHOLOMEW'S HOSPITAL.

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Dedication

OF THE

SECOND EDITION

TO

JEREMIAH CLAWSON GLOVES ESQ

M.D.

BRIEF OF THE ROYAL COLLEGE OF PHYSICIANS &c

MY DEAR SIR,

The great interest you have taken in the success of my work, and the approbation you have so kindly and so frequently expressed of the plan I have adopted for the relief of Permanent Strictures of the Urethra, as well as the private friendship with which you have honoured me, point you out as the most proper person to whom I should dedicate the Second Edition.

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tion of my Observations on that subject. Be assured I estimate properly your favourable opinion, and feel most highly gratified that the treatment which I have employed for ~~this formidable~~ disease has engaged the attention, and obtained the approval, of a man whose talents are undisputed, and the delicacy of whose state of health alone prevents him enjoying that high eminence in his profession to which he is so justly entitled. With sincere respect

and esteem, believe me to be,

My Dear Sir,
Your Faithful and

Obedient Servant,

R. A. STAFFORD.

12, SACKVILLE-STREET,

March 28th, 1829.

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PREFACE.

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In offering these Additional Cases, I think it right to call the attention of the profession to the safety and the superiority of the treatment, as well as to the completeness of the cure, effected by the use of the Lancetted Stilette. The novelty, and, as I am willing to confess, the boldness of this method of treating permanent Strictures, can only be justified by Cases in proof of these assertions. I am, therefore, most anxious that every case in which I have operated should be

clearly and simply submitted to my professional brethren.

With regard to the safety of the operation,—a subject on which I am aware there exists much prejudice and doubt, even among some of the most eminent and liberal surgeons, I can only say, that I have operated more than twenty times, without the slightest dangerous symptom occurring at the time, or afterwards;—that I have divided strictures in the urethra in almost every part of its course, at distances of one, three, four, five, and six inches from the orifice, at the point immediately behind the bulb, and throughout the whole membranous portion;—that some of these strictures have been half an inch, others an inch, and, in one case, two inches in length; that I operated at one time on four strictures in the same urethra, varying from one-fourth of an inch to above an

inch in extent, and that in no instance was there a symptom to occasion the slightest alarm. The small quantity of blood lost from the operation was surprising, only in one case amounting to a table-spoonful, and usually not exceeding a few drops, or a tea-spoonful. This fact is so extraordinary, that, unless there had been repeated proofs, it would hardly be credited. The inflammation which has occurred has never been very great; and, when it has taken place, I am much inclined to attribute it to the irritation excited by the catheter having been left in the bladder. I am the more confirmed in this opinion from the fact, that in the only case in which I omitted its introduction, no sensible inflammation followed.

The superiority of the division by the lancetted stilettes over the only plan of treatment which can be brought in com-

petition, with all that, by the caustic, is evident from the following circumstances: The pain is much less. This was admitted by every patient who had experienced both plans of treatment. In truth it is so little as, by their own confession, to be not worth mentioning. As a proof of this, all my patients stood during the operation, which did not usually occupy a longer time than a period varying from one to two minutes. The bleeding is not so great as what often attends the passage of a common bougie, consequently very much less than that after the application of caustic, in which the loss of half a pint, or a pint of blood, is no uncommon occurrence. The formation of a false passage, which, in the most experienced hands, will inevitably sometimes occur from the use of caustic bougies, has never resulted in any case where I have employed the instruments. The last, and perhaps principal proof of

superiority, however, of this plan of treatment, is the shortness of time occupied, and the rapidity of the cure. The length of time necessary for the common method, of course, varies indefinitely.—three months may be stated a short period; and it often extends to one or two years, with a great chance of the recurrence of the disease in a more aggravated form. On the contrary, the longest time which it has been found necessary to pass a bougie after dividing the stricture with the lancetted stilette, has never exceeded six weeks; and in those cases it was passed merely to satisfy myself and the patient of the non-existence of the disease. Usually a large-sized bougie has been introduced almost immediately after the operation; and the cases have not required attendance more than three weeks or a month. Where I have employed the instruments to A perusal of the cases will be a sufficient

proof that the cures were completed. I have since had an opportunity of examining the urethra after an interval of one or two years; and I have been able to pass a large sized catheter without difficulty, and the patients have made water in a perfectly natural manner. Lastly, in evidence of the completeness of the cure, I have a preparation of the urethra of a patient. His stricture, which was one of twenty-three years standing, and more than an inch in extent, was situated at the bulb, and in the membranous portion. The operation was completely successful, and he made water naturally. He lived nearly two years without any symptoms of stricture, and died, æt. 76*, from diseased lungs, and the infirmi-

* The name of this man was John Sych, whose case is related at page 143. On his coffin his age was marked 76; so that he must have been more than 74 when operated on.

ties of old age. On examination, the calibre of the canal was found natural throughout; there was no hardness round the part that had been formerly contracted, and the membrane lining it was continuous with the rest of the urethra. The only difference that could be perceived was a little redness and roughness, and the incisions made by the instrument could be traced, though not very distinctly.

It is almost unnecessary to make any remark on the cases themselves; but still some of them so strikingly point out the advantage of the lancetted stilettes that I cannot help slightly alluding to them. The first case, for example, is one where every known remedy had been employed, (excepting division externally), without the least benefit. It may be observed, that in only one week after the division of the stricture with the lancetted stilette; a No.

8 catheter could be passed, and that the patient has continued well ever since. The second case, also, is even more illustrative of the utility of these instruments than the first. Here the stricture had been impermeable to a bougie for eighteen years, and yet in ten days after its use a No. 13 catheter could be passed into the bladder with ease. The case of X. Y. Z. is well worthy of notice; for in this instance at least two inches of the stricture, immediately adjoining the prostate gland, was divided with the lancetted stilette without a guide. The only probable chance of relief otherwise would have been by cutting through it from the perineum, an operation uncertain as to success, as painful as that for the stone, and often attended with the most distressing consequences. Each individual case proves the benefit that was derived from these instruments, for there were none of them which were not of the worst

description; but the fourth, that of Facey, where there were four strictures, is still more remarkable. This man's urethra was so free from obstruction in five weeks that it would have been difficult to have told (although they were of an extremely indurated character, and some of considerable length) where the strictures had been situated. The strongest proof of the completeness of the cure in this case is, that he has passed through his urethra no less than six calculi, about the size of small peas; since the operation.

The importance of these facts, not only with regard to stricture of the urethra, but also with a reference to the treatment of stricture of the œsophagus and rectum, will, I trust, justify my anxiety to publish these cases; an anxiety which has led to many errors in composition in the former

part of this work, from the haste in which it was drawn up, but which I hope to correct in a future edition.

R. A. S.

ADDITIONAL CASES

12, SACKVILLE-STREET,

March 1829.

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it was thrown up, but which I hope to
correct in a future edition.

B. A. S.

ADDITIONAL CASES.

1852-53, 1853-54
1854-55

CASE I

F. J. Esq. applied to me at Brighton, on
8th August, 1828. The following letter
will give the history of the case in his own
words

My Dear Sir,

I am induced to think you will feel an
interest in receiving from myself a particu-
lar statement of the commencement and
progress of the disease from which I have
so long been a sufferer, and also of the treat-
ment I underwent while under the care of
some of the most eminent of the profession
previous to my becoming your patient

In the autumn of 1799, I first experienced

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My Dear Sir,

I am induced to think you will feel an interest in receiving from myself a particular statement of the commencement and progress of the disease from which I have so long been a sufferer, and also of the treatment I underwent while under the care of some of the most eminent of the profession previous to my becoming your patient.

In the autumn of 1799, I first experienced

a difficulty in passing my urine; and as I resided in the neighbourhood of Oxford, I applied to one of the senior, and most eminent surgeons of that city. After having carefully examined me, he pronounced my complaint to be a bad stricture, situated about three inches down the urethra, and of so decided a character as to require Sir Edward Home's method of treatment, & by the use of the caustic bougie. In consequence of this information, I took lodgings near to him, so that I might reap the benefit of his constant attention. On the first application of the caustic, a considerable effusion of blood followed the removal of the bougie, and this recurred at each time it was employed. The caustic was used at intervals for about a month, when my surgeon discharged me from his hands as cured. It was not until the year 1820 that I again experienced a return of the complaint to such a degree as to require

professional attendance; and my former
 medical friend having retired from practice,
 I then placed myself under the care of Sir
 Everard Home, who discovered that the
 stricture was formed in the same place as
 before. My urethra was likewise in a very
 miserable state, and the stricture was attend-
 ed by severe spasms—so severe, that on one
 occasion about an inch of the bougie (which
 was afterwards fortunately forced out by
 the urine) was actually cut off, and left in
 the urethra. At this period the caustic was
 only applied a few times, as it caused great
 pain and irritation in the urethra, and very
 distressing rigors were brought on. On
 this account, Sir Everard, fearing that he
 might produce serious mischief from its
 employment, left it off, and merely passed
 a metallic bougie every third or fourth day.
 I remained under his care for two months,
 and although I was much relieved, I was
 by no means cured. From this time I oc-

occasionally passed bougies for myself until
 the year 1826, when I became so much
 worse that I could only void my urine drop
 by drop. The pain in the urethra was ex-
 cessive, and from the violent straining I
 was obliged to make use of, a considerable
 soreness of the lower part of the abdomen
 and loins was brought on. The disease
 now began seriously to affect my health,
 and I therefore was again compelled to
 have recourse to surgical aid. I accord-
 ingly applied to a gentleman of known
 eminence and experience for advice. His
 opinions corresponded exactly with the
 other surgeons, excepting that the stricture
 was much worse, and he found that it
 would only admit through it the very
 smallest bougie, and the introduction of
 that was always attended with great pain
 and difficulty. From the very gentle and
 judicious manner in which he passed the
 bougie I had great hopes that the disease

would have yielded to this remedy. The case, however, after some period of time had elapsed, continued as obstinate as ever. The caustic, therefore, was again used several times; but it failed in producing the desired effect, and at the same time it gave rise to symptoms threatening retention of urine, for which reason its farther application was abandoned. I now was driven to despair, and gave up all hopes of recovery, as every known remedy had been employed. I continued to get weaker; my appetite was gone; my water frequently flowed from me involuntarily; and my sleep was disturbed seven or eight, and even more times, every night, by a propensity which was attended by extreme pain, and an involuntary straining, so distressing that it exceeded any thing that I can possibly describe, to make water. In fact, I found my bodily powers gradually declining, and I began to despair that the disease

ing, and felt aware that under such a state of suffering I could not live very long. On seriously asking my professional attendant, (under whose care I had been for nearly two years), if I had any chance of being cured, he very candidly said, "he thought I should always be subject to the disease;" and he advised me to try the effect of sea air, and warm vapour baths, which he hoped would renovate my health, and enable me to resume the use of bougies.

Although I was convinced all the baths in the world could not restore me to health while I was afflicted with such a painful organic disease, yet I yielded to the earnest solicitation of my family, solely for their satisfaction. I joined my youngest son, who was at this time at Brighton, (July 1828). I had not been there, I believe, a fortnight, when I found myself getting alarmingly worse. At length I was attacked with re-

tion of urine, and on the 4th of August
I became your patient.

On seriously asking my profession atten-
tant (under whose care I had been for
nearly two years), if I had any chance of
N.B. This libellous was filled with complimentary
observations; unnecessary to be repeated. I thought I should
and he advised me to try the

I need not detail the history of my case
any farther. I think it right, however, to
mention that the pain of the operation of
dividing the stricture was so trifling that
I have many times suffered more from the
passage of the bougie; and when I speak
of it, as compared with the application of
caustic, it really is nothing. In conclu-
sion, I beg to add that I am sixty-one years
of age, and that I have been suffering from
this complaint twenty-nine years. I weigh-
ed nine days after the operation, nine stone
twelve pounds; and on the 17th of Novem-
ber following, ten stone eleven pounds and

a quarter, being an increase of thirteen pounds and a quarter. I am now perfectly recovered; my health is completely restored; nor should I be aware, from the stream of urine which I at present can make, that I ever had had any obstruction in the urethra.

I am, Dear Sir, Yours sincerely and gratefully,
 The use of a knitting-needle. I found the stricture three inches from the orifice. When I first saw Mr. J. he was labouring under retention of urine. His countenance was pale and emaciated, and his whole system obviously worn out by the long continuance of pain and disease. His hands were tremulous, and his bodily strength so weak that he could scarcely stand. His pulse was feeble and quick; he could eat nothing, and his spirits were low and exhausted. He had not made water for twelve hours; and had only passed it by drops, and involuntarily, for

two years. I first attempted to pass a bougie, but the irritation of the urethra was so excessive as to foil all my attempts; I therefore ordered twelve leeches to the perineum, fomentations, warm bath, and opiate injections. In two or three hours after their application and use, the urine flowed in drops; and, upon further trial, I was enabled to introduce a bougie about the size of a knitting-needle. I found the stricture three inches from the orifice: it appeared to extend half an inch, and it could be felt externally like a hard cord. The bougie was stopped by the violent spasm at the membranous part; I therefore withdrew it, and ordered him to repeat the fomentation and injections and to take an opening draught. The state of my patient—the extreme irritation of the urethra and of the bladder, which, from the discharge of purulent mucus, appeared to be highly inflamed; if not con-

the verge of liberation, the long continuance of the disease, and the inefficiency of the usual mode of treatment, determined me to propose dividing it. Having obtained the consent of my patient, I went to London for the instruments. On my return on the following day, I found him in much the same state. The day after (8th August) I operated with the double-lancessed stylet over the wire, in the manner described in the employment of this instrument. He stood up during the whole of the operation, which lasted about a minute and a half, and complained of little pain; and I was surprised to find only a few drops of blood followed the incisions. I divided the stricture throughout its length without withdrawing the instrument, but could only pass the catheter as far as the membranous portion. Here the spasm was so violent as to make me desist; I therefore left a No. 9 bougie in the ure-

-thra, through the divided stricture. I
 ordered leeches to be applied immediately,
 and fomentations. When I came in the
 evening I was much gratified to find that
 my patient, wishing to make water, had
 withdrawn the bougie, and voided his
 urine in a full stream, and with little
 pain. I again introduced the same bougie
 through the stricture, and left it there,
 ordering a continuance of the fomenta-
 tions, with an opiate draught in
 the morning of the 9th I found my
 patient had passed a comfortable night, not
 having been obliged to rise from his bed but
 once, and having retained the urine eight
 hours—a circumstance which had not hap-
 pened for two years. After making water
 he had himself been able to pass the
 bougie through the stricture. He now
 voided his urine in my presence, and in a
 full stream. I therefore left a No. 9 bougie

On the following morning he complained of pain from the presence of the bougie, and the urethra felt sore as the urine passed over it. Twelve leeches were applied, fomentations ordered, and the bougie withdrawn. In the evening he was feverish, and had a severe rigor during the night; but made water in a full stream, though with rather more pain. On examining the urine in the morning, there was about a desert spoonful of puriform sediment. I ordered him some antimonial draughts, which, in a few hours, threw him into a profuse perspiration, with great relief. In the evening his pulse was 85, and he seemed much better.

From this time no remarkable symptoms occurred, and the irritation of the urethra gradually subsided. On the day week that operation was performed the urethra appeared quite healed, and I

passed a catheter, No. 8, with ease into the bladder. This I repeated twice a week for a month, gradually enlarging the size of the catheter to the natural calibre of the urethra.

The rapidity with which this patient regained his physical powers was remarkable. His appetite improved, he slept well, he became strong, and he lost that tremulousness which marks an enfeebled body. He daily gained flesh, his animal spirits increased, and, instead of being one who was overtaken by a premature old age, he was, by far more active than men of his years usually are.

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CASE II.

Wm. CHATERS, ætat. fifty, an unhealthy, emaciated man, was admitted into St. Mary-le-bone Infirmary under the following circumstances. He states, that he has been the subject of a stricture in the urethra twenty-eight years, and that about eighteen years ago the canal at the part having become so much closed that the smallest-sized bougie could not be passed through it, the caustic was applied several times during the space of three months, without the least benefit; he was therefore discharged from the surgeon's hands as incurable; and ever since this period he has suffered the worst symptoms which occur from stricture. He has voided his urine *guttatim*, or it has passed away from him involuntarily. He has had frequent

attacks of retention of urine, and he has been constantly subject to rigors. Since the application of the caustic, many attempts have been made to introduce a bougie, but they have always been resisted.

Upon examination, it was discovered that an impermeable stricture was present, about six inches down the canal, and that the urethra itself, anterior to it, was in an extremely irritable state; leeches, therefore, were frequently applied to the perineum; fomentations used, and all the other means for reducing inflammation were employed. Occasionally the smallest-sized bougies were introduced as far as the contraction, but they could never be made to pass it. Under these circumstances I was requested, by my friend Mr. C. Phillips, the surgeon of the institution, to examine the patient with a view of operating.

Having obtained the patient's consent, on the 2d of November I divided three-fourths of an inch of the stricture with the single-lancetted stilette: the pain was trifling, and the bleeding only amounted to a few drops. This I considered sufficient at one operation; I therefore withdrew the instrument, and ordered leeches, &c. as in the former case; but the stricture not being divided throughout, I did not leave the bougie in the urethra.

On the following day he had felt but little inconvenience, excepting, as was customary with him after the introduction of a bougie, he was attacked by a slight rigor. He had made water in a small stream.

4th.—To-day a small-sized elastic gum catheter (No. 4) was introduced, with the view of keeping the divided part open; and it passed on through the stricture into

the bladder with the greatest facility. It was left in the urethra. *

5th.—The catheter remaining in the bladder had caused no unpleasant symptoms; and, as the urine escaped on one side of it, as well as through it, it was withdrawn, and replaced by another double its size. This, also, passed with great ease.

In ten days from the operation the urethra could admit through it, without the slightest difficulty, a No. 13 catheter; and at this present time (Feb. 27th, 1829,) there is not the slightest impediment whatever in the canal.

the course of **CASE III.**

Mr. C., a gentleman, *ætat.* twenty-three, (of a nervous temperament, applied to me with stricture, which he had laboured under for two years. For a twelvemonth of this time he had been under treatment by dilatation with the common bougies; and when the largest-sized could be passed he was considered by his medical attendant as cured. Six months afterwards he found the stream of urine gradually to diminish, until it was no larger in diameter than that of packthread. He then put himself under my care, and, upon examining him, I found the urethra so irritable that a bougie would not pass.

I ordered him to apply leeches, use fomentations, take anodynes, and intro-

duce opiate suppositories. Under this treatment the irritability of the urethra, in the course of a week or two diminished, so that I could pass the smallest-sized bougie into the bladder. The stricture (which was six inches from the orifice) was too tortuous to admit a metallic instrument: I was therefore unable to introduce the directing wire.

Under these circumstances, as I had promised to operate, and my patient was very anxious to have it done, I merely divided about half an inch of the stricture, with the single-lancetted stilette. No bougie was introduced. Leeches were applied once or twice. My own ill health compelled me to discontinue attendance for two months. When I was again able to see him, he stated that he was immediately so much relieved, and the stream of urine so much enlarged, that he had done

nothing. On my wishing to examine the state of his urethra, he was so afraid of producing irritation that I did not think it right to press it. The stream of urine was quite natural in size.

CASE IV.

THOMAS FACEY, ætat. forty-three, admitted into St. Mary-le-bone Infirmary November 6, 1828. The state of this man's urethra is as follows. He has a hardened contraction of the orifice, and another of about half an inch in length an inch further on. Four inches from the orifice there is a permanent stricture, and also at the bulb; the urethra is quite impermeable. He states, that he has been strictured for about twenty years; and that eight years ago he was admitted into the London Hospital, and other public Institutions, and that from each he was discharged incurable. Since this he has suffered the worst symptoms that this disease inflicts, without being able to get any relief; and, at present, he

is reduced to the greatest degree of emaciation and debility, making water only by drops, constantly and involuntarily. With
 On November 10th, he enlarged the orifice to its natural size, and divided the second stricture. A bougie was left in the urethra, to keep the parts from closing; and leeches were applied on the perineum, with a view to prevent inflammation. In a few days from this time the divided parts had healed; and I found that the smallest bougie would pass through the fourth stricture, which before had been impermeable. This was withdrawn; and I endeavoured to pass the catheter through which the urine is introduced; it was impracticable. For this reason, and from the exhausted state of the patient, who was hardly equal so soon to undergo another operation, no further attempt was made

until the 28th, when, with great difficulty, it was at length introduced into the bladder. With the assistance of my friend, Mr. Leech, I immediately operated, over the wire, with the double stilette, upon the third stricture, about half an inch in extent; and also divided the fourth stricture, at the bulb and membranous portion, more than an inch in length. Not so much as a table-spoonful of blood was lost, and the operation lasted about two minutes. I did not attempt to pass the instrument into the bladder, but left the small catheter, used for introducing the wire, in it. I ordered eight leeches to be applied to the perineum, with fomentations, and an opiate clyster. On the following day I found the patient had a rigor during the night, but no other unfavourable symptom. The urine had made its escape (not only through, but) on the sides of the ca-

theter. He had no pain : I therefore let it remain, merely ordering the continuance of fomentations.

The next day he was better, and going on favourably. On December 1st, the third day from the operation, finding him quite free from pain, I withdrew the small-sized, and introduced a No. 8 catheter, which was passed into the bladder with ease, and without pain. This was also allowed to remain for a few days, when the size was gradually increased to No. 11, which appeared to be the largest which his urethra would admit. In five weeks I considered him quite cured, as he made water naturally. I passed a steel sound without difficulty for a fortnight before he was discharged.

N. B. March 4th, 1829.—About ten

days ago I passed a No. 10 steel sound with the greatest ease, and he continues to make water naturally. To my surprise the sound struck against a stone. On inquiry, I found he had never had any pain, or symptoms of that disease. To-day I saw him at the Infirmary, and he produced a stone about the size of a small pea, which he had passed without pain, and he informs me that he has voided no less than six of the same description since the operation.

ment, but I have since seen the patient, and find that a large sized catheter could be passed with ease into the bladder two or three months afterwards. I should not

CASE V.

I was requested to see a patient in St. Bartholomew's Hospital, about the middle of last summer, by Mr. Vincent. He had an impermeable stricture situated between five and six inches down the canal, and a fistulous passage connected with the urethra, in the perineum. I operated with the single lancetted stilette, and divided through the stricture, (which was of so hard a nature that it required several incisions before it could be permeated), until the instrument touched a probe held by Mr. V. in the fistulous passage. Immediately after the operation, a catheter could be introduced into the bladder.

On account of my own ill health I did not superintend the management of the

case; but I have since seen the patient, and find that a large sized catheter could be passed with ease into the bladder two or three months afterwards. I should not have reported this case, from the little evidence it affords, but in compliance with a rule I have made, not to select but to publish each of them individually.

an imperious and six inches down the canal, and a fistulous passage connected with the urethra, in the perineum. I operated with the single lancet divided and divided through the stricture, (which was of so hard a nature that it required several incisions before it could be perforated), until the instrument touched a probe held by Mr. V. in the fistulous passage. Immediately after the operation a catheter could be introduced into the bladder.

On account of my own ill health I did not attend the management of the

CASE VI.

JOHN EDWARDS, *æt.* 49, was admitted into the St. Marylebone Infirmary.— This man had suffered from stricture for some years, but seemed, not having had bougies passed, to have had but little surgical attendance. The prepuce was entirely adherent to the glans penis, and the orifice was so closed and hardened that it would not admit through it a larger instrument than a No. 2 catheter. There was an impermeable stricture also five inches down the canal. The hardened edges of the prepuce were circumcised, and the prepuce itself dissected from the glans, and thrown back, as in the operation for phimosis. A month elapsed before the parts healed sufficiently to do any thing more. The orifice was then enlarged to its na-

tural size, and kept open by the introduction of a bougie. In a week from this time, the urethra was again examined, and it was found that the stricture would admit through it the smallest catheter. This was accomplished, however, with considerable difficulty ; and as it was uncertain whether I might be able to pass it again, I introduced the wire, left it in the urethra, and operated at once with the double lancetted stilette. The stricture was easily divided ; and as there seemed a disposition to great irritation from the bougie never having been previously passed, I did not leave a catheter in the bladder. Leeches were immediately applied, fomentations used, and a purgative administered. On the next day he had voided his urine with the greatest freedom, but the urethra was so irritable that it would not allow of a catheter being passed through it into the bladder. I therefore

left it alone altogether, only using the remedies to allay inflammation. The urine still passed away in a large sized stream : at the end of three weeks I again tried to pass an instrument, and introduced a No. 12 steel sound into the bladder with the greatest facility. As he had no impediment, and passed his water naturally, I did not think it necessary to irritate his urethra by passing the bougie, and he was discharged cured.

still passed **CASE VII.** was passed the end of three weeks. I was tried to pass
FEB. 1829.—B. F. æt. 60; a general officer
 in his Majesty's service, who had served
 many years in India, consulted me under
 the following circumstances. He had
 two strictures of the urethra, one four
 inches from the orifice, and the other in
 the membranous portion. In addition to
 these, also, there was an enlarged and
 hardened prostate gland. The stricture,
 situated four inches down the canal, was
 of an extremely indurated structure, and
 could only admit through it a bougie,
 about the size of a crow-quill; and the
 other, that in the membranous portion,
 would allow a bougie of the same size to
 pass, but with more difficulty, on account
 of spasm. From these strictures he had
 been suffering for many years, and of late

they had greatly increased. Instead, also, of dilators relieving, they increased the malady; and from the frequent accession of inflammation, there was always a danger of retention of urine. About two years ago he was treated by having them dilated according to Dr. Arnott's method. Since this, however, the strictures have returned; and he has, therefore, had recourse to the application of caustic, which has been used more than an hundred times. This latter plan of treatment was as unsuccessful as the former, as the disease was rapidly gaining ground. He at length determined to have the strictures divided with the lancetted stylet.

Feb. 8th.—The operation was performed on the first stricture, which was about three-fourths of an inch in length. He suffered but little pain, and only a few drops of blood followed. The other stric-

ure was left without any thing being done
 for it. A No. 10 bougie was passed
 through the divided part; leeches applied,
 and fomentations used. On the following
 day, no medicine, excepting an aperient
 draught, was required. From the anxiety
 of the patient to keep the parts open, a
 bougie was left in the urethra for six days,
 and withdrawn when necessary. A steel
 sound (No. 10) could at this time be pass-
 ed, not only through the divided stricture,
 but also through that at the membranous
 portion, with the greatest ease. In less
 than a fortnight from the operation, both
 the strictures would allow of the introduc-
 tion of a steel sound, (No. 15), measuring
 an inch and one-sixteenth in circumference,
 to be introduced through them into the
 bladder; and this instrument could be
 passed backwards and forwards through
 the whole course of the urethra without the
 slightest obstruction or hardness being felt.

Since this time the patient has continued well, and the hardness and size of the prostate gland has considerably subsided.

This gentleman came from beyond Aberdeen, a distance of 530 miles, on purpose to have this operation performed. It gratifies me that he is able to return home so much relieved.

MARCH 12, 1829.

CASE VIII.

A MIDDLE aged man, a tailor by trade, who was in the habit of applying at St. Bartholomew's Hospital about every fortnight, on account of retention of urine, came under my care in the beginning of the year 1828, with stricture, and disease of the urethra throughout its whole course. It was permeable only to the smallest sized flexible instrument, which could follow its winding as far as four inches, but there stopped. Although this case appeared almost hopeless, yet, from the anxiety of the man to have every plan of treatment tried which offered a chance of relief, I operated with the single lancetted stilette, and succeeded in passing the instrument, by different divisions of the urethra, to the extent of four

inches. I left a bougie in the canal; ordered leeches and fomentations; and on the next morning an aperient draught.

On the following day I found that he had suffered so little as to be sitting on his board at work. He had withdrawn the bougie, and said that he passed his water more freely.

In a week I thought the urethra sufficiently healed to proceed with the treatment, but he declined submitting to any farther operation, not, as he stated, from his own fears, but from the interference and apprehension of his friends, at so novel a plan of treatment. Since that period I have heard that a silver catheter has been introduced into the bladder, which before could not be accomplished.

CASE IX.

X. Y. Z., a gentleman of spare habit, applied to me in December with an impermeable stricture, situated five inches and three quarters from the orifice. His urine flowed by drops, dribbling sometimes away from him involuntarily; and he was obliged to rise once or twice every hour during the night to void it. He had several times suffered from complete retention: but the history of the case will be best learned from his own words.

My dear Sir,

As I consider it to amount almost to a duty, both as regards yourself, as well as those who are labouring under the painful malady of stricture, to state the relief I have derived from your novel

treatment of it, I shall be excused for making a few remarks on the subject. I date the origin of my stricture to a neglected gonorrhœa, contracted almost nineteen years ago, when the first symptoms of any inflammation in the prostate gland appeared; which having subsided by the application of leeches and poultices of linseed, I soon began a course of bougies. As soon as partial relief was obtained from a use of the bougie, it was discarded, and at the end of a twelvemonth again resumed for a few weeks. About twelve years ago a second gonorrhœa was unfortunately contracted, and was equally disregarded as the other, or a continental tour, just commenced, must have been given up. The usual consequences ensued. On my return to England I sought some of the best advice in London; and from that time (the autumn of 1817) to the present, I have periodically undergone a

course of bougies with not less than ten different surgeons of eminence; some of whom only effected a passage of five or six inches with the bougie, whilst others intimated the existence of a false passage, and desisted. Whenever I caught the least cold, or indulged in anyiced wines, I was certain of having an irritation at the neck of the bladder; which at last began to alarm me so much, from three or four suppressions of urine that followed; that I felt delighted to hear of any probable means of an effectual cure. Such did your book, when I had perused it, hold out to me; I may safely say, then, that had I not applied to you, and first had ocular proof of the success attending your instrument at one of the London Hospitals, I feel confident my stricture, by means of the *common bougie*, would never have been overcome. The length of it appeared to be upwards of

two inches; which, from memorandums I have made, I find you actually cut through between the 18th December and the 5th of February; by means of a dozen incisions, which, though they twice occasioned considerable rigor a short time after the operation, & really produced but trifling pain in the actual puncture. On February 12th, a sound, No. 8, was passed into the bladder. I should add, that so immediately adjoining the prostatic gland was the situation of my stricture, that the utmost caution was necessary, and was invariably your guide, during the whole of your skilful, anxious, and very feeling treatment, which I shall not very readily forget.

MARCH 13 1850

X. Y. Z.

I have only to add to this account, that I operated with the single-lancetted stilette, consequently without a director;—

that I used the instrument twelve times, and must have divided more than two inches;—that I was guided by feeling the point of the instrument with my finger *per anum*, and by my patient's feelings; who was so satisfied that I was in the canal, that he insisted on my continuing the division; particularly as no bleeding of any consequence, pain, or bad symptom, followed. A No. 10 catheter can now be passed, and he makes water freely, having lost all unpleasant symptoms, and being able to retain his urine in his bladder for eight or ten hours together.

MARCH 13, 1829.

N. Y. X.

I have only to add to the account that I operated with the instrument without a puncture.

however, he came to me with retention of urine, which could arise from nothing but **CASE X.**

MARCH 1829.—**M. S.**—This young man was sent by a medical friend, having two strictures, one permeable, situated three inches and a half from the orifice, and the other impermeable, about six. He made water by drops, and was frequently subject to attacks of retention of urine. I divided the first stricture through its whole extent, which was about half an inch, and then ordered the usual treatment. In about a week afterwards the first stricture was nearly well, and I was able to pass a wire partially through the other. As far as the wire went I divided, which was about one-third of an inch. Immediately after the operation he made water in a good-sized stream, and at once expressed relief. In three days afterwards,

however, he came to me with retention of urine, which could arise from nothing but spasm, as I passed a No. 3 catheter with ease. This I left in the bladder; but as the urine flowed plentifully on the side of it, I withdrew it. On the following day a much larger-sized catheter was passed; but as there was a great deal of spasm and irritation, I advised him to leave the urethra quiet for the present. He makes water in a natural-sized stream, which he has been unable to do for two or three years before. I then saw him about a week and then ordered the local treatment. In about a week afterwards the first catheter was nearly well, and I was able to pass a much larger-sized catheter through the urethra, which was about one-fourth of an inch in diameter. The operation he made with a good-sized stream, and at three days afterwards I passed a No. 3 catheter with ease.

CASE XI.

Mr. C., a barrister, ^{aged} thirty seven, consulted me in January last, under the following circumstances. He has been the subject of strictures in the urethra about eighteen years; and for the last three years of this time he has periodically undergone a course of bougies. Whenever he leaves off their use, however, (although he has introduced as large a size as No. 13) the contraction returns, and he is obliged to go through the same process as before. He is likewise constantly liable to a profuse discharge from the urethra; and at this present time (January) he has symptoms, without being able to account for them, resembling gónorrhœa. On this latter account, therefore, and on account of the contraction always returning, I recommended him to leave off the use of bougies altogether, to attend to the present state of the urethra, and to have the contraction

divided with the lancetted stilette, if it returned again. CASE XI

19 March 22d. — The discharge having completely ceased, from the employment of the usual remedies, I examined the state of the urethra, with the view of operating, if necessary. There were two strictures, one within three inches of the orifice, and the other immediately behind the bulb. The first stricture was so slight as hardly to be perceived, whilst that behind the bulb was contracted to so great a degree, that it was with the greatest difficulty I could pass the smallest-sized gum-elastic catheter through it. I at length succeeded, however, and operated over the wire. The operation itself did not occupy a minute, and only seven drops of blood, besides that which was on the instrument, followed the incision. The contraction extended about half an inch, and the pain was so trifling from the cutting, that the patient himself was astonished that he had

felt so little. A No. 12 gum-elastic catheter was passed into the bladder, and left there, and a fomentation was ordered. At ten in the same evening I saw him again, and he had not suffered the slightest pain from the presence of the catheter, feeling quite well. His pulse was slightly accelerated, being eighty-six, and the skin rather hot. He was ordered Pulv. Jacobi gr. v., and to continue fomenting.

March 23d.—Upon seeing him this morning, I found he had passed a comfortable night, and that he had felt no inconvenience from the catheter remaining in the urethra.—Pulse seventy-eight, and skin moist.—Ordered an aperient. The urine had passed on the side of the catheter. At the period of this sheet going to the press he was going on so favourably that I had little doubt of the case terminating quite successfully.

THE END.