muscular power, and not in convulsive action; partial paralysis or contraction of the muscles, such as we find in cases of chronic meningitis. One of the earliest signs is a difficulty of sustaining the equilibrium of the body; the child is unable any longer to walk firmly or securely; even in infants this loss of muscular power is indicated by an inability to sustain the sitting posture, or to keep the head erect on the shoulders. As the head enlarges, the lower limbs gradually become weaker, until total paralysis ensues.

The symptoms which I have just related are those which usually accompany the third species of chronic hydrocephalus in its early stage. When, together with these signs, the head begins to enlarge, we can have little doubt of the existence of the disease; the symptoms now become more characteristic every day, but as they are well known to every medical man, I shall not dwell on them here; the powers of mind and body slowly decay, until life is reduced to a mere state of vegetation, or convulsions supervene, and put an end to the sufferings of the little patient. My object, in the present paper, being merely to direct attention to the early symptoms of chronic hydrocephalus, I have not touched on the pathology of this affection, or on the treatment which seems to afford the best chance of success. I shall, however, take another opportunity of contrasting the premonitory and first stages of chronic dropsy of the brain with those diseases from which we should endeavour to distinguish it; and these are hypertrophy of the brain, (with enlargement of the cranium,) cerebral tubercle, and chronic meningitis.

London, June, 1841.

CASE OF INCONTINENCE OF URINE

FROM

SLOUGHING OF THE URETHRA.

BY JONATHAN TOOGOOD, ESQ.

SENIOR SURGEON TO THE BRIDGEWATER INFIRMARY.

IN the sixth volume of the *Medico-Chirurgical Transactions*, a case of successful treatment of incontinence of urine, consequent on sloughing of the bladder from injury during labour, is related. Several such cases have fallen under my notice, but one only soon after the receipt of the injury, which was caused by the pressure of the vectis during delivery, the urethra having unfortunately been made the fulcrum. Happily for the poor woman, the mischief was discovered early. On introducing a catheter into the bladder, and passing my finger into the vagina, a large opening was detected communicating with the bladder, into which, however, the finger could not be passed. Her situation became miserable from the constant passage of the water, but she was otherwise in good health. Both her husband and herself being aware of what had happened, and conceiving the case irremediable, refused any attempt at cure; but after some trouble they were prevailed on to try the following plan.

A very large elastic catheter was introduced through the urethra, and supported by passing a piece of a sponge into the vagina of sufficient size to fill it; over this a napkin was folded, and the

catheter secured to it. A cork was put into the mouth of the instrument, and the water drawn off every two or three hours. She immediately derived comfort from this method of treatment. There was no difficulty in keeping the instrument in its proper situation whilst she remained in bed, and the urine was retained in the bladder. As the artificial opening healed, the size of the catheter was lessened, the pressure was kept up for three months, at the expiration of which she obtained the complete control of the bladder,

BrIDGEWATER, May, 1841.

PROVINCIAL

MEDICAL & SURGICAL JOURNAL.

SATURDAY, JUNE 12, 1841.

THE registration being now taken, and, as far as the information to be acquired from it is concerned, placed beyond the possibility of being impeded by a statement of the objections to which its plan is open, we must express our conviction that, in one point at least, the results sought to be obtained are likely to prove in the highest degree fallacious. We feel assured that very considerable allowance indeed must be made for errors and imperfections in the returns of the ages, and it is a question whether these may not prove so great with respect to one leading division of the population, as entirely to vitiate any deductions attempted to be derived therefrom. Many of the poorer classes who have attained the middle term of life, are altogether unable to give the information required; others, especially among the female portion of the population, will have attempted, from various motives, to evade a strict compliance with the requirements of the Act. In the middle and higher orders, the inquiry is in itself considered as an impertinence; among certain of the working classes it might act as a positive injury, while the partial discretion allowed by the explanatory notice on the registration papers, instead of circumscribing the limits of error, has tended to encourage further deviation from accuracy. We have heard it advanced, in reply to the objection which so many entertain to state their age, that it is unnecessary to be particular, that the notice does not require it, and that persons are therefore left at liberty to enter the ages of five, ten, or fifteen years below its actual amount. In making these remarks, we have not merely in view the disinclination which the greater number of females, and it may be added, not a few of the other sex, have to reveal their age, though we know not why this