other much vaunted specifics, its action seems so closely dependent upon idiosyncrasies that its effects cannot be clearly foretold. Yet it would be unfair not to give an obstinate case of headache the chance of the benefit it may produce. It fortunately belongs to that most invaluable class of drugs—those which can do no possible harm and very often do a great deal of good.

REVIEWS.

Practical Lithotomy and Lithotrity. BY SIR HENRY THOMPSON, F.R.C.S. Third Edition. London: J. & A. Churchill. 1880.

THAT the third edition of any surgical text book should be so slightly altered from the first edition, published nearly twenty years ago, as is the case with the work now before us, is surely a high compliment to the author's learning and completeness of statement, while it may also indicate that the subjects treated of have not made any marked advance in recent years. In this, the third edition of Sir H. Thompson's well known work, the descriptions of the various operations for the removal of stones from the male bladder remain unaltered, a few further practical hints only being added as the result of his increased experience. In the earlier chapters we have the same graphic and not too elaborate description of the anatomy of the parts concerned in lithotomy, and the same able *resumé* of the various cutting operations which appeared in former editions. The chapter on the causes of death after lithotomy has been enlarged and altered in arrangement. The following is the classification now adopted:—

“A. Causes of death originating in errors or mischance in the performance of the operation itself.

B. Causes which are very slightly, or not at all, under the control of the operator, and existing, for the most part, in defective conditions of the patient's constitution.”

The first group includes hæmorrhage, urinary infiltration, mechanical violence inflicted in the removal of the stone, and perforation of the bladder. The second includes organic disease of the urinary organs, exhaustion, peritonitis, septicæmia, and tetanus.

The statement of results from lateral lithotomy, given in

chapter vii, is the same as in the first edition, with the addition of the author's own experience to the end of 1876. In his own lithotomies, Sir H. Thompson does not seem to have been very fortunate. Out of 78 cases in *adult males* he has had 29 deaths. No doubt, many of these cases were of the worst possible kind, and such as were not in any way suitable for lithotrity, but which the great reputation of the operator brought from all parts of the country. Two of his cases, however, in which death resulted from perforation of the bladder, deserve the very careful attention of the supporters of the lateral operation, if, as he thinks, they were due not to the knife but to inordinate length of the staff, and that such accidents are not uncommon.

In his notice of the mortality returns from other operations we do not think sufficient justice has been done to Dr. Andrew Buchanan's method, so justly popular in Glasgow. The author has expressly omitted "the experience of the Glasgow Infirmary, numbering 152 cases, because a large proportion had been operated on by the method of Dr. Buchanan," and so were not suitable for tabulation among the results of lateral lithotomy, while he still retains the old statement that "Dr. Buchanan has reported upwards of 60 cases of his operation, performed by several surgeons, with as nearly as possible the same result as that exhibited by Mr. Allarton's table," that is, one death in eleven cases. It is time, we think, that Glasgow surgeons should publish their records in support of their favourite operation, as it is abundantly manifest that Dr. Buchanan's operation and its advantages are still practically unknown beyond the West of Scotland. In 1860, Dr. Buchanan predicted* that, in less than ten years, "counting from the day when the operation shall be first performed in the theatre of a London hospital, by a man who has carefully studied it and is duly qualified to perform it," it would be the dominant operation throughout England. We are still ten years at least from this consummation; and of Dr. Buchanan's operation the old proverb is still true, "Unkenned, unkissed." How long shall it remain so?

The latter portion of the book is devoted to a most minute description of the operation of lithotrity and the instruments to be used in its performance. The author gives short notes of 422 cases in which he has performed this operation, with a death-rate of about 1 in 13. He also describes Bigelow's new operation of litholapaxy, and speaks of it in terms of the highest praise. He thinks, however, that Bigelow's instruments

* *Medical Times*, April 14th, 1860.

are unnecessarily clumsy, and never uses any larger than No. 13 or 14 of our English scale. He has also devised a new aspirator for the operation, which is a modification of the original instrument invented by Clover. Short notes of 35 cases operated on by this method are given, and it is satisfactory to find that they have all been successful.

The work is thus in every respect very complete. The surgeon will find in it the fullest details of the best methods of operating, of the necessary care and treatment of his patient, both before and after the operation, of the complications which may occur and the result to be expected.

Anatomical Outlines for the Use of Students in the Dissecting Room and Surgical Class Room. By ARTHUR HENSMAN, with Original Drawings by ARTHUR E. FISHER. Part III, The Thorax and Abdomen. Part IV, The Head and Neck. London: Longmans, Green & Co. 1880.

THE first portion of this work has already been brought before the notice of the readers of the *Journal* (vol. x, page 374), and the parts now before us fully confirm the views then expressed as to the design of the author and the mode in which that has been carried out. In Part III Mr. Hensman has so far modified his plan as to introduce short descriptions of the position of the chief thoracic and abdominal organs in relation to the walls of those cavities; and as this is a department of anatomy which has until recent years been woefully neglected, we are glad to find a book to which the student may be referred for assistance and direction. The drawings throughout the work are clearly and boldly executed, and are for the most part models of accuracy; we must, however, take exception to the position of the uterus as shown in plate 86, and to the representation of the urachus in the same figure. Joseph has recently shown that in the normal position the uterus is in a state of anteversion and not of retroversion, as Mr. Hensman represents it, and although the greatly distended bladder in the plate under discussion would no doubt partly account for the displacement backwards, it would not cause the organ to be carried behind the axis of the inlet. Besides this, we fancy any gynaecologist would be astonished if he found a normal os uteri wider than the external opening of the vagina.

So few students of medicine are accustomed to wield either pencil or brush that we do not anticipate the author will be rewarded for his genius and industry by finding his work