measures, at the maximum dilatation, nine-tenths of an inch in diameter. The number of blades of the dilator has the effect of enabling it to exercise a circular dilatation perfectly regular in character, and this is strictly confined to the limits of dilatability of the neck of the bladder. The mode of reaching the bladder in this proceeding is the same as in Allerton's operation, except that a mechanical contrivance is substituted for the finger of the operator in dilating the neck of the bladder, a mode of proceeding which M. Dolbeau considers to be too sudden, and liable to the accident of false passage.

The specimen submitted to the Imperial Society by M. Dolbeau showed the parts taken from a patient 67 years of age, who had been operated on fifteen days before death. The bladder was found full of urine, its neck absolutely intact, and the mucous membrane healthy.

M. Dolbeau sums up his communication with the following proposition, deducted from the examination of the pathological specimen:—

1. That it is possible to open a direct passage from the anus to the bladder without damage either to the bulb, the rectum, the neck of the bladder, or the vessels of the region.

2. That it is possible to introduce into the bladder instruments destined to crush a stone and to extract the fragments, without rupturing the neck of the bladder, or without destroying the power of retention of urine.

It is to be regretted that M. Dolbeau's communication does not contain the details of the twenty-one successful cases, especially as regards the size of the stones removed and the ages of the patients.—*Dublin Quart. Journal of Med. Science*, August, 1870, from *Gazette des Hôpitaux*, No. 26, January, 1870.

54. *Fracture of Anterior Spinous Process of Ilium by Muscular Contraction.*—Drs. S. JOY and J. W. McWHINNIE report (*Canada Med. Journal*, Sept. 1870) a remarkable case of this in a very muscular youth, æt. 17, who in a foot-race, in turning, at a given point, felt something snap in his right hip, walked a few steps and fell. "On examination distinct motion and crepitus could be felt by pressure over the process, also by placing the thumb over the origin of the Sartorius and rotating the thigh. The fracture extended into the notch below, but there was no great tendency to displacement, save when the leg was abducted, thus placing the Sartorius upon the stretch, the process, doubtless, being partially kept in place by the fibres of the tensor vaginæ femoris arising from this process on the one hand, and Poupert's ligament on the other, when tension was taken off the Sartorius. The patient was placed in bed with the thigh flexed and the shoulders raised, a bandage being applied to aid in steadying the fracture. It may be as well to state that this position and adduction of the right leg was maintained by bands attached to the posts of the bed. In two weeks the patient made a good recovery without displacement.

55. *Skin-grafting.*—Mr. POLLOCK read particulars and exhibited to the Clinical Society of London (Nov. 11, 1870), several cases of skin-grafting and skin-transplantation. In relating the particulars of the first case in which the skin-grafting had been attempted in this country, he stated that in 1869 M. Reverdin originated in Paris this method of treating large ulcerated surfaces. In May, 1870, the author first heard of M. Reverdin's experiments, and at once decided to test the treatment. A girl, eight years of age, had been in St. George's Hospital for some three months and a half, with an extensive open burn of the right thigh, of more than two years' duration. The ulcerated surface extended from the buttock to the knee—broad above, and ending almost in a point below. Mr. Pollock at first transplanted two small pieces of skin about the size of millet seeds, taken from the lower part of the abdomen. Subsequently three, and again other pieces, were transplanted at various periods—in all, about fourteen pieces had been transplanted. The child was exhibited to the members of the Society, and it was seen that this extensive burn was nearly healed, in a period little over five months, without any perceptible contraction of the cicatricial tissue originated by the transplanted skin. The child had greatly improved in health as the progress of cicatrization had advanced. In this case two pieces of black skin had been on one occasion transplanted to the ulcerated surface,