Clinical Department.

CALCULI OF THE KIDNEY, WITH HYDRO-NEPHROSIS.

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THE case which I wish to report is that of a woman upon whom I performed an autopsy February 15th. She was a patient at the New England Hospital for Women and Children, and I am indebted to the physicians of the hospital for the clinical history.

Mrs. C. P., age fifty-one, married, a German, was first seen by Dr. E. C. Keller in the spring of 1891, when she was suffering with an attack of severe abdominal pain, the symptoms being obscure. There was at this time a tumor on the right side, which disappeared with a great discharge of pus in the urine. She had no further trouble until her present illness.

She was admitted to the hospital January 31, 1893. On entrance, her appetite and digestion were poor; bowels irregular; insomnia; temperature 99°; pulse 112, weak and compressible; somewhat emaciated and

stools. Coffee-ground vomitus in afternoon. Died at 10.40 P. M.

The autopsy was made February 15th, thirty-six hours after death. Rigor mortis present. Lividity of dependent portions. Body well developed, but emaciated. Head and spine not opened. Spleen somewhat enlarged. On the under surface of the right lobe of the liver was an abscess extending about one and a half inches into its substance. The abscess cavity was filled with pus and shreddy masses. It was about the size of a small apple, and its walls were formed by the liver substance and the tissues between the kidney and liver, and was shut off from the general peritoneal cavity by adhesions. There was no peritonitis except in the region of the abscess. Bladder normal, and contained no calculi. Both ureters were somewhat dilated, the right one being blocked by a calculus the size of a thimble, about two inches from the pelvis of the kidney. The walls of both ureters were slightly thickened. Both kidneys were enlarged, lobular and fluctuating. The right was represented by a sac about the size of a new-born baby's head, the sac being filled with a sero-purulent fluid. Of kidney substance

cachectic; tongue red on tip and edges, dark pasty coating on dorsum. The amount of urine in twenty-four hours was 22 ounces, specific gravity 1.010, color pale, opaque, albumin in considerable quantity, pus corpuscles abundant.

February 1st. Physical examination showed a tumor in the right lumbar region, probably of the kidney; hemorrhoids; uterus larger than normal, with nodule in the right cul-de-sac.

February 2d. Consultation of attending surgeons. The mass outlined on the right side seemed to connect with the liver. It was sensitive, probably a pyo-nephrosis.

The patient has been losing *flesh* since November, 1892. Retains only milk. Throbbing headache and blurred vision. Occasionally abdominal pain, and tenderness on pressure, especially in the right lumbar region. Great thirst.

February 6th. Consultation with Dr. Arthur T. Cabot as to exploratory incision. The low specific gravity, absence of casts, and great thirst pointed to disease of both kidneys, and operation was contra-indicated.

February 13th. Patient became worse, weaker. Retains almost nothing. Less pus in urine. Watery

there was a piece about a quarter of an inch thick and one inch square in the upper part. There were four or five small calculi in this sac. The left kidney was about the same size as the right, and retained more of the kidney substance. The pelvis was much dilated, and almost entirely filled with a calculus (see cut) weighing fifty grammes and consisting of phosphates. There were numerous small calculi of the same composition, weighing altogether thirty grammes, in the numerous sacs of the kidney. All the other organs presented nothing abnormal.

The surprising thing about this case is the large amount of destruction of the kidney substance, with the short duration of the fatal illness. Of course, the first symptom was the sickness in the spring of 1891, nearly two years before death; but after a short period of illness she was apparently quite well until November, 1892, when the symptoms of her last sickness began. She was not sick enough, according to her story and that of her family, to wish a doctor until just before her entrance to the hospital, January 31st.

EXECUTION BY ELECTRICITY.—A bill for execution of death sentences by electricity has been introduced in the West Virginia Legislature.