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HYPOSPADIAS FEIGNING HERMAPHRODITISM.

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THE person here described came to this country from England in July, 1877, and a few weeks after landing in Boston found his way, as an inmate, to the State Almshouse of Massachusetts at Tewksbury. He entered the institution in a woman's dress, and gave the name of Sarah Jane B. His age was thirty-two, height five feet four and a half inches, and weight one hundred and eighty and a half pounds. His employment was given as "weaver in a mill."

Suspicion was at once directed to the sex by the voice and general appearance. He also, almost immediately, requested that facilities for shaving the beard might be provided. He was perfectly willing that the genitals should be examined by the proper authorities.

The physical development was that of a man. The voice was evidently masculine, the beard abundant, and the breasts flat. The general appearance of the private parts was also masculine. It was readily noticed, however, that the testicles hung in separate bags, — two scrotums. These being drawn aside revealed the following features: A short penis, of which the prepuce was immediately continuous with the skin of the scrotum. The prepuce could never be

pulled forward so as to cover the glans and remain in that position. The anterior wall of the urethra was deficient, and hence the orifice of the urethra was at some distance (eight centimetres) from the end of the penis. Immediately below the orifice of the urethra (one centimetre), and four centimetres distant from the orifice of the rectum, was another opening, which is denominated a spurious vagina. This passage was large enough to admit a No. 12 catheter, and was six centimetres (two and a half inches) in length. When the catheter was introduced into

this passage it could be readily felt by a finger in the rectum. Water forcibly injected into this passage always returned the same way. The patient stated that no urine had ever passed through it, and no trouble

U indicates orifice of urethra.

V indicates orifice of spurious vagina.

had ever been experienced by its presence. No trace of any uterus could be detected. The testicles were large, one of them thirteen centimetres and the other fifteen centimetres in circumference. The anatomical construction appeared to be normal. All doubt with regard to the functional activity of the parts, however, as well as to the sex of the individual, was removed by the discovery of spermatozoa. He mentioned the fact that a secretion other than urine occasionally came away from the urethra, and on obtaining a specimen I found it to contain the male germs. A specimen of these was exhibited by Dr. George H. Pillsbury to the Lowell Medical Journal Society, and the spermatozoa were pronounced by all the members present to be normal.

The general health of this person has always been good. His father died within the past year, and the mother eight years ago, but both of them were healthy most of their lives. He has had three brothers and three sisters, all healthy, and having no deformity. He knows of no family relative who has been deformed in this way. He states that when six years old the external genitals were examined by the family physician, and that the parents were advised to dress the child in girl's clothes. Subsequently other examinations were made with a similar result, but it would appear that all were made before puberty. Before this age, the testicles not having descended and the glans penis being smaller, the resemblance of the external genital organs to those of the female may have been very marked.

This case has been carefully examined by the physicians and surgeons of the Massachusetts General Hospital and many others. A cast of the parts has been taken in plaster of Paris by Dr. M. G. Parker, of Lowell, and placed in the museum of the Harvard Medical School.

"Sarah" alleged that his malformation prevented him from earning a livelihood in this country, while he could get along very comfortably in his native village, where he was well known. He was accordingly sent to England by the Board of State Charities.

With regard to the personal character of this individual my means of information were very limited. I was led to believe, however, that lasciviousness existed to a very marked degree, so much so indeed as to

suggest the inquiry whether ungratified lust may not have produced a certain mental obliquity.

It will not be out of place in this connection to call attention to the fact that very similar cases to this are described in the exhaustive treatise on Hermaphroditism contributed by Professor Simpson to the Cyclopædia of Anatomy and Physiology, and I doubt not that it will be of interest to reproduce here his "classification of hermaphroditic malformations."

Hermaphroditism.	Spurious.	In the female.	{ From excessive development of the clitoris, etc. From prolapsus of the uterus.
		In the male.	{ From extroversion of the urinary bladder. From adhesion of the penis to the scrotum. From hypospadiac fissure of the urethra, etc.
		Lateral.	{ Testis on the right and ovary on the left side. Testis on the left and ovary on the right side.
	True.	Transverse.	{ External sexual organs female, internal male. External sexual organs male, internal female.
		Vertical or double.	{ Ovaries and an imperfect uterus, with male vesiculæ seminales and rudiments of vasa deferentia. Testicles, vasa deferentia, and vesiculæ seminales, with an imperfect female uterus and its appendages. Ovaries and testicles coexisting on one or both sides, etc.

Unquestionably, then, this is a case of "spurious hermaphroditism in the male, from hypospadiac fissure of the urethra," and I think that I am justified also in regarding the blind passage between the urethra and rectum as a rudimentary vagina, indicating an arrest of development of the male *external* genitals and a commencement of the formation of those of the female.

A CASE OF VAGINAL LITHOTOMY.¹

BY ALFRED HOSMER, M. D. HARY, WATERTOWN.

THERE is nothing in the nature of the disease of the patient whose case is herewith presented which entitles my communication to the attention of this society. For calculus of the urinary bladder is not an affection peculiar to women; on the contrary, according to the figures given by Dr. Alfred McClintock, in an article to which reference may be made hereafter, there is on the part of the male sex a liability to be affected with stone, the relative excess of which may be represented by the ratio of eighteen to one. But my paper may claim a consideration at this time for the simple reason that the treatment of the affection in question by the operation of vaginal lithotomy is applicable only to the female.

The specimen² which I now exhibit was removed from an octogenarian in August last, and may be described as follows: In shape it is a flattened ellipsoid; in color, dirty white or gray. Its surface is coarsely

¹ Read at the meeting of the Obstetrical Society of Boston, December 9, 1876.

² No. 4821 in the Warren Museum.