

and the diameter of the aperture through which it is to be extracted, what fatal laceration must be resorted to! If the calculi be numerous, how fatiguing the operation is for the surgeon, and, *à fortiori*, how excessively terrible for the poor patient! Lithotrixy regulates the periods of its application according to the wishes of the patient, and may be adjourned at pleasure. True it is, that its application is not exempt from pain; but how trifling is this pain compared with the cruel lacerations of the lithotome,—how infinitely trifling compared to the mortal anguish the unhappy sufferer must endure, under the destructive efforts of the blood-stained hands which belabour him! It would be superfluous to defend the lithotritic method against the reproaches which have been wrongfully addressed to it; a careful examination of the instruments, and the repeated application of them in my presence, have convinced me that it is exempt from all dangerous consequences; but it is not so in the cutting operation.” (Here Mr. Clever enters into the consideration of the dangers of lithotomy, which, as they would extend this paper to an inconvenient length, I think it unnecessary to reproduce.)

The point on which the foregoing case particularly bears, is the reproduction or recidive state of this disease. The objection is taken against lithotrixy on the ground of the probability that some fragments of the calculus may be left in the bladder after the operation, and that these may become the nuclei of other calculi. In this objection it is not considered how much more perfect a sounding or exploring instrument the lithotrite is, than the common curved sound. By means of the lithotrite, not only can a portion of calculus no bigger than a grain of wheat be discovered in the bladder, but it may be, by this instrument, crushed or extracted at the same time. Recidive calculus is not so unfrequent as it is generally supposed to be. Many patients have been twice cut for stone; but how much greater this number would have been, if lithotomy had not been so often fatal when performed on those who submitted to it for the second, third, and fourth time! Now, as lithotrixy shelters those who submit to it from the same chances of mortality, the reproduction of stone must necessarily be more frequent, because it may be resorted to in the majority of those cases in which the cutting operation would have caused death. Facts like these show how fallacious it would be to attribute to the new method the return of a disease, the cause of which is unknown, and which, in spite of all the speculations of physiologists, is so frequently reproduced with frightful promptitude, particularly when the concretion

consists of phosphate of lime or uric acid. It should be further observed, when the disease has not subsisted for a long time, and the bladder contains several small calculi, that these may be co-existent with others in the kidneys. Under such circumstances, the ureters through which the calculi in the bladder have descended, are enlarged. If an operation be now performed for their extraction, it will be little wonder that the disease shall reappear soon after, and that without nephritic pains, seeing that the previous dilatation of the ureters prepares the way for the descent of those still remaining in the kidneys. It is not my object, however, in arguing on the recidive state of calculus, to overlook the well-grounded hope which is entertained of our being at some time or other enabled to prevent the return of this disease, by modifying the secretion of urine.

I have the honour to be

Your obedient servant,

W. B. COSTELLO.

60, St. Martin's Lane, London,
April 26th, 1831.

JOHN LONG AND DR. RAMADGE.

To the Editor of THE LANCET.

SIR,—Every member of our profession, who has the least regard for his character on the score of honesty, propriety, or, I may add, common decency, will, I am sure, be deeply indignant at the course Dr. Ramadge has pursued in defence of John St. John Long. Permit me, however, to suggest that the wisest plan is to leave both these highly honourable and respectable persons to find their own level. The former has already been twice introduced to public notice at the bar of the Old Bailey, and I do not doubt that the issue of any observations you may make, in exposition of the conduct of the latter, will be of utility to him, by acquiring him that notoriety it is his object to obtain. From the medical profession, Dr. Ramadge's character will always receive the immense respect it merits; while the experience of an individual scarcely in the meridian of life, who states he has opened “more than a thousand bodies of consumptive persons alone,” cannot fail of having its due weight with the public.

I am, Sir,

Your obedient servant,

FRED. SALMON.

12, Old Broad-street,
April 30, 1831.