

## Clinical Department.

### A CASE OF CASTRATION FOR ENLARGED PROSTATE AND RETENTION OF URINE.

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WHEN an operation is still, in some degree at least, *sub judice*, one ought to report every case, so that our inference may be drawn from a large number of instances.

G. F. S., age sixty-four, American, married, entered the Massachusetts General Hospital April 4, 1895. He was a strongly built man, with a prominent, thick-walled abdomen; probably his abdominal muscles were developed from his occupation, which was that of a teamster. The bladder dulness reached to within an inch of the umbilicus and percussion was very painful. His shirt was stained with blood. Cocaine and oil were injected into the urethra; a soft-rubber catheter (No. 10, French scale) was passed without difficulty, and twenty ounces of brown, smoky urine were withdrawn. Six hours later in distress again. The soft catheter would not enter; an English-webbed one was used. There was some bleeding. The bladder seemed very weak and to have lost its contractile power. On April 6th constant drainage was begun, and was continued till the operation on April 9th.

His history before entrance is as follows: Always strong and well. For four years had got up four times each night, between two and five A. M.; from eight to two had slept well. On the 21st of March, two weeks before entrance, tried to pass water at nine A. M., and could not do it. Five hours later was catheterized; then went fifteen hours without passing water, and called on a doctor who tried to pass a stiff instrument, but failed to do so and caused much hemorrhage. Later in the day he was tapped suprapubically, and has had his water drawn from that day till his entrance into the hospital.

On examination he was found to have large hemorrhoids, and with the finger in the rectum the prostate was found to be quite large. The urine was of high color and slightly acid. Its specific gravity was 1.010. There was a trace of albumin, and the sediment was excessive (half an inch in the glass). Pus was found, both free and in clumps; also an occasional blood globule, with squamous and small round cells.

Both testicles were removed on April 9th. In the afternoon a soft catheter was passed with ease. On April 15th he passed urine voluntarily. On April 16th did not require the catheter at all in the daytime, but could not pass his water during the night. On the 17th he passed his water every two and a half hours during the day and once at night. The residual urine was found to be seven ounces. He has never required the catheter since this time. He went home on the 20th, sooner than I thought prudent, it being only ten days after the operation.

On January 28, 1896, I found Mr. S. at work in his office superintending his teams. He said he had had no trouble in urinating since he left the hospital, that he passed his urine about seven times during the day and three or four times at night. His urine looked healthy. He said that the operation had entirely cured his piles, from which he formerly suffered much, and that his health was excellent. Just before wanting to pass his water, what he calls "hot spells"

come over him. Are not these spells analogous to those that are so common in women after the ovaries have been removed, and which also occur sometimes at the menopause—the so-called "hot flashes"? An examination of the rectum revealed not a trace of piles, and the finger showed a small prostate.

I think this ought to be put among the cases favorable to the operation; and, incidentally, the cure of the hemorrhoids, from the relief to the circulation and to the straining, is another argument in favor of removing the testes for the cure of enlarged prostate.

### COEXISTENCE OF TWO ZYMOTIC DISEASES IN THE SAME PATIENT, ONE BEING LATENT WHILE THE OTHER IS PATENT.

#### COEXISTENCE OF VARIOLA AND VACCINIA.

BY SAMUEL L. ABBOT, M.D.,  
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A GOOD many cases have been reported of late in the medical journals, in which one zymotic disease is said to have run its course during the latent period of another in the same person. So far as I have seen, they have all been instances of the coexistence of scarlatina and measles. Of this I have had one case which differed, however, from those I have read, inasmuch as the eruption of measles appeared at such a stage of development of the latent scarlet fever, that it abruptly receded on the third day, giving place to a full eruption of the latter. During the stage of desquamation of this disease measles reappeared and completed its course. I have had under my observation, however, one instance of the coexistence of two zymotic diseases in the same person, which seems to me unique—at least I have seen no report of such a case—namely, the coexistence of variola and vaccinia in the same individual. The case occurred some years ago, before vaccine virus could be obtained from the heifer.

I was summoned one day to a young woman who was said to be a little indisposed, but on account of the appearance of a slight eruption it was thought expedient to call in a physician. I found her up and dressed, her symptoms not having been severe enough to keep her in bed at any time. All that I could see was a few, perhaps half-a-dozen, abortive pustules of varioloid. She did not feel at all sick. Its character was unmistakable, however. At the time there was a moderate epidemic of small-pox in the city, kept under control by general vaccination. The patient, of course, had been vaccinated in childhood, which accounts for the mildness of her attack. In the same room with her was a nursing infant, six months old, which had not been vaccinated, and which I vaccinated at once. The vesicles of vaccinia developed normally, and were of such a perfect type that on the eighth day I took virus from the arm and vaccinated two interesting little girls about five and seven years old who had never been vaccinated before, the only children of a poor widow.

The following day, on visiting the infant from whom I had taken the vaccine matter I was horrified to find a commencing eruption of small-pox. This developed rapidly, became very full and finally confluent—the pustules about the mature vaccine vesicles crowding upon them and entirely overwhelming them,