Fleming on the Genito-Urinary Organs. — There are many and various reasons for writing a book — some good and some bad, and some indifferent. A young man may write one as an advertisement, another may, out of the fulness and newness of original work, give the profession something of extreme value. Many a busy teacher puts his lectures into shape for his pupils, or gives the profession some monograph on the subject which has taken up most of his time and thought; and again, in old age and well-won leisure the veteran fights his battles over again, and selects from the ripe experience of the past years of work cases and observations which he trusts may help his fellows.

The work before us is, we believe, one of the last variety and a most favorable specimen. Such works are nearly always clinical and historical, generally ill-arranged or not arranged at all, sometimes showing a little the garrulity and diffuseness of age; often showing here and there that Horace was right, and that the old man is 'laudator temporis acti se puero,' fortunate if he is not 'censor castigator que minorum.'

This work contains, or rather is made up of, a long series of most interesting cases, concisely told and well commented on. A long hospital experience well used has given Dr. Fleming most extensive and varied material, and he and his editor have done their work well, making the book not only instructive but entertaining.

The first chapter on the Pathology of the Urine in its relation to surgery is well arranged for the student, and his memory is aided by two most truthfully executed chromo-lithographic plates, containing twelve different specimens of urine glasses, with sediments, colour, &c., contrasted with each other, and also some excellent sections of calculi.

The second chapter on obstructions of the urethra from injury contains accounts of a large number of most curious cases, illustrated by good chromolithographs, though in some of them the colours are too strongly contrasted.

The salient points of Dr. Fleming's teaching that strike us are, first, his patience — he knows in what cases to wait, to hold his hand, not to pass the catheter, not to incise; and secondly, his belief in the internal use of tartar emetic and opium, and the external use of stupes of tobacco juice. Patience may be, and even by Dr. Fleming is, carried too far, but it is a valuable protest against the early and forcible catheterism so often counselled and practised in inflamed urethras. The tobacco stupes may be often useful, but the tartar emetic and opium may be pushed too far. The reason we find for
Dr. Fleming's love of these potent drugs is that he is afraid of chloroform. He does not seem to use it so often or so thoroughly (see Case 36) as we do.

There is much truth in the following sentences, and such teaching is sometimes required:—

"When the penis is in a state of congestion (in some cases almost bordering on priapism), the operation of catheterism is most objectionable. It should never be had recourse to except under the most urgent and pressing circumstances, every expedient having been previously adopted by the surgeon to dispense with its use. In some cases, especially in those of acute gonorrhoea in young subjects, where retention of urine occurs, venesection may be advisable; in others, local bleeding, followed by copious fomentations, medicated or otherwise, will be found most effective, and in all, the exhibition of tartar emetic and opium, combined with saline cathartic or diuretic medicines, in doses proportioned to the urgency of the symptoms, and repeated at intervals, will prove most useful adjuncts. I have found them most effectual even in cases of paroxysmal retention of urine identified with stricture." Pp. 111, 112.

There must be something in the cheerful ingenuity and self-confidence of the Irish character that impels them to use such extraordinary means of relieving themselves of symptoms or results of stricture, or we should not find such a number and variety of foreign bodies introduced into the urethra. A thorn-twig figured after its removal by Dr. Fleming is a good example of the national trait. He also records and figures various pieces of bougie and one whole one, which must have demanded in their possessors a faith in their own property analogous to that shown in the rotten reins and string-mended harness of the national vehicle. Surely the same easy-going faith is not found in Irish surgeons to the extent implied in the following caution:—

"I may here make the general observation upon the importance in all cases of catheterism of examining the condition of the stilet before introducing the instrument; the wire is very often allowed to become rusty and encrusted and the canal of the catheter to be partially blocked. The wire should not be passed in until it is quite clean and smooth, and this is best done (sic) by means of a little sandpaper and chamois (sic). This is a rule which also applies to all canulae, for I have seen some awkward surgery result from inattention to these details in tapping hydroceles and the bladder, the trochar being almost immovably fixed in its sheath." P. 188.

In the account of chronic prostatic diseases we fail to discover Dr. Fleming's views as to form, mode, and frequency of introduc-
tion of catheter, and general surgical management. Such cases are often very perplexing, and involve long and tedious treatment.

Hæmaturia is discussed as an important symptom, the result of very varying conditions. The cases given illustrate well some of the more frequent causes of it—_injury, disease of the liver, cancer of various kinds, and polypus._ Mr. Fleming does not seem to have met with that rare and interesting form of bladder disease called sometimes villous cancer.

Stricture is briefly described. As regards the position in which the patient should be when the catheter is being passed, Mr. Fleming has found that a very satisfactory plan is to introduce the instrument while the patient is sitting either on the edge of the bed or in an arm-chair. The patient's feet should be on the ground, and the body be thrown well back, allowing the perineum to be freely exposed (p. 234).

Suprapubic puncture seems to be a favourite resort of Mr. Fleming when the usual methods of relief have failed; we agree with him in preferring this method in many cases to the rectal puncture, especially now that in the aspirator we have a means of tapping above pubis both safe and successful.

Under the head of affections of the scrotum a somewhat rare malady is described—

"An affection of the scrotum and penis which I have observed in a particular class of men, viz., wine-bottlers. It is their habit, in pursuance of their occupation, to place the bottle between the thighs, and then to drive the cork home. I have seen several cases in which this practice has set up irritation at a point where the scrotum joins the penis in front, just as we know that soot causes epitheloma of the scrotum in sweeps. In the cases which have come before me the irritation was followed by abscesses, which in time burst, leaving an unhealthy, ragged, lupoid-looking ulcer." Pp. 265-6.

The account of the cases of stone in bladder, treated by lithotomy and lithotrity, is valuable, in that it is not a mere record of successes, but that the failures and errors in diagnosis are told as well with a frankness and honesty not by any means invariably seen. And amongst them is a record, illustrated by excellent chromolithographs, of a case which is probably unique—a fibro-calcareous tumour of the uterus, opening into the bladder by pressure and protruding into it. The symptoms were those of stone, and an attempt was made to relieve the patient of it, first by the urethra, and afterwards by the suprapubic operation—both, of course, unsuccessful.

The book is capitally got up, and the chromo-lithographs are most telling, though some are rather brilliant in their colouring. The editor has kept himself entirely out of sight, but has done his part of seeing the book through the press most carefully.