

was taken away, the body of the testicle was found to be sound; but the whole of the epididymis was engaged in the disease, thus destroying its proper functions; the vas deferens was also involved, and the morbid action extended upwards to the groin. This had produced general enlargement to double the natural size. The man made an excellent recovery, and has left the hospital.

In these cases of tuberculous disease of the testicle and the cord, no other treatment than complete removal will prove serviceable.

ENCEPHALOCELE, WITH CONGENITAL HERNIA; REMOVAL.

THE circumstances attending the growth and origin of encephaloid tumours of the testicle vary greatly. Sometimes they are traced to a blow, cause great pain during their progress, and proceed rapidly; at others, as in the following case, they arise insensibly, advance slowly, and painlessly mature.

This patient was admitted into St. Mary's Hospital, under the care of Mr. Coulson, on the 15th of July last. He was forty-three years of age, and was the subject of a globular scrotal tumour on the left side, of the size of a cocoa-nut, firm, smooth, and giving no sensation of fluctuation; the skin was non-adherent, moving loosely over the whole mass. He had first become aware of a little swelling at the upper part of the scrotum five years prior to his admission. This swelling gradually but painlessly increased. It was chiefly the weight of the tumour which incommoded him. On examination, the cord was felt to be apparently healthy, and the right scrotum seemed to be free from disease. Mr. Coulson introduced a grooved needle, and nothing exuded but the blood drawn from the vessels of the skin. Believing it to be a tumour requiring removal, although of doubtful character, an operation was decided on. Two incisions were made longitudinally, in such a way as to allow of the excision of a portion of the distended integument of the scrotum, at the same time that the tumour together with the testis were removed. A congenital hernia existed on the same side, and a portion of omentum had descended into the tunica vaginalis, which, during the operation, was readily reduced. The operation was easily performed, but a large number of bleeding vessels had to be secured. The tumour, when incised, appeared as a solid mass contained in a fibrous capsule. Its proper substance was soft, elastic, and glistening, and marked in brownish-pink and blood colours, and presenting in some parts the appearance of cerebral matter. The great mass of the disease was contained in distinct cysts of various sizes, and some of the larger cysts enclosed occasional smaller ones, and all contained solid matter. On pressure, yellowish serum mixed with blood escaped. Under the microscope, the contents of the cysts were found to consist principally of larger cells, containing nuclei with nucleoli. Most of the cells were large, but no poly-nucleated cells could be seen. No trace of the true gland-substance remained.

The patient progressed rapidly towards recovery, and at the end of a fortnight the wound had nearly healed.

RENAL CALCULUS, THE NUCLEUS OF A STONE IN THE BLADDER.

A YOUNG man was admitted into Guy's Hospital in the early part of August, under Mr. Hilton's care, with the history that he had suffered from pain in his left kidney for some time, which was followed by cystitis. He was treated for the latter without benefit, and was sent up to town. He was examined with a sound, and a stone readily detected. His bladder was so very irritable that he could not retain more than a teaspoonful of urine at a time; and although the stone was not very large, lithotomy was chosen in preference to crushing. That operation was performed by Mr. Hilton, on the 16th of August, who removed a phosphatic calculus the size of a walnut; it had crumbled away, was very soft, and situated high up in the bladder. The largest portion of the stone removed showed the nucleus to be a renal calculus, composed of lithic acid, which most probably had passed along the ureters into the bladder (six months before, as was estimated), and had thus given rise to the symptoms complained of, with the formation of the phosphatic calculus during that period of time.

The operation was followed by occasional attacks of hæmorrhage, and some days afterwards he died, when there was found extensive pyelitis, and diseased kidneys and bladder. Previous to the passage of the renal calculus, which had thus become the nucleus of stone in the bladder, he had enjoyed tolerable health.

VAGINITIS IN A GIRL AGED TEN YEARS.

INFLAMMATION of the vagina in a child or young girl is by no means of frequent occurrence in our hospitals. The discharge is not necessarily of a gonorrhœal character, but it may have arisen from neglect, exposure to cold, bad feeding, or want of cleanliness. In a girl ten years of age, at the present time in the Royal Free Hospital, under Mr. Weeden Cooke's care, it has been attributed especially to the latter cause, together with a want of the necessaries of life, in an eminently strumous constitution. Her aspect is delicate and scrofulous, the glands of the neck are enlarged, and she is the subject of worms. She was admitted on the 21st ultimo. The vaginal symptoms first appeared a month before that date. The discharge is yielding to the employment of a sulphate of zinc lotion. Her face is red, and there is sore-throat, as if she had scarlatina. She is being well fed, now that the acute character of the inflammation has subsided, and presents an appearance very different from what she had on her admission.

Reviews and Notices of Books.

Lectures on the Diseases of Infancy and Childhood. By CHARLES WEST, M.D., F.R.C.P., Physician-Accoucheur to, and Lecturer on Midwifery at, St. Bartholomew's Hospital, &c. &c. Fourth Edition, revised and enlarged. pp. 755. London: Longman and Co.

WHEN a medical work, not written in an *ad captandum* style, but in a coldly scientific spirit, upon a specialty like the "Diseases of Children," attains in this country to a fourth edition within a dozen years, we have pretty fair proof of the value of such work, and of its having been greatly wanted. All things considered, this book of Dr. West is by far the best treatise in our language upon such modifications of morbid action and disease as are witnessed when we have to deal with infancy and childhood. It is true that it confines itself to such disorders as come within the province of the *physician*, and even with respect to these it is unequal as regards minuteness of consideration, and some diseases it omits to notice altogether. But those who know anything of the present condition of *pædiatrics* will readily admit that it would be next to impossible to effect more, or effect it better, than the accoucheur of St. Bartholomew's has done, in a single volume. The substance of the larger portion of these Lectures was originally addressed to the pupils of the Middlesex Hospital in 1847, and appeared as a "Course" in the pages of the old green magazine of Paternoster-row—Peace to its ashes! The volume has been for more than a year out of print, but is now reissued in an enlarged and improved condition. It embodies the results of 900 observations, and 288 post-mortem examinations, made amongst nearly 30,000 children. The chapters to which attention may be more particularly directed in the new issue are those "On the Treatment of Children's Diseases;" "On Convulsions and Spasm of the Glottis;" "On Epilepsy and Chorea;" "On Paralysis;" "On Night Terrors, Disorders of the Mind, and Idiocy;" "Diphtheria;" and "Fevers." The lecture (xvi.) upon Disorders of the Mind in children is an admirable specimen of the value of the later information conveyed in the Lectures of Dr. Charles West.

Sketch of the Medical Topography, or Climate and Soils, of Bengal and the North-West Provinces. By JOHN M'CLELLAND, F.L.S., F.G.S., Surgeon, Bengal Service, &c. pp. 148. London: Churchill.

WE have already (THE LANCET, *ante*, page 295) drawn the attention of our readers to Mr. M'Clelland's small treatise. Suffice it, therefore, here to say, that upon what relates to the general geologic and climatorial characters of an important portion of our Indian possessions, and upon the history of cretinism as it prevails upon the plains of Bengal, no better source of information can be applied to than the work before us. With respect to the causes of cretinism, we may observe