THE PREVENTIVE TREATMENT OF CALCULOUS DISEASE AND THE USE OF SOLVENT REMEDIES

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The preventive treatment of calculous disease and the use of solvent remedies by Henry Thompson

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PREFACE.

I HAVE lately received so many communications in the form of inquiry and of suggestion, in relation to the two subjects named in the title, that I have decided on publishing the following Lectures, given at University College Hospital, as the simplest mode of furnishing a brief, but tolerably complete, reply in the present state of our knowledge.

35, WIMPOLE STREET, April, 1873.

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LECTURE I.

EARLY HISTORY OF CALCULOUS DISEASE, AND THE TREATMENT BEST ADAPTED FOR 173 PREVENTION.

GENTLEMEN,—We have recently studied together and discussed very fully the various operations which are practised for the removal of stone from the bladder, and you have had the opportunity of seeing them performed many times, not less than eleven cases having passed through my wards during the last few weeks, each one with a successful result.

But, satisfactory as this is, it suggests very strongly to my mind that there remains an

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important question for us to consider; as important, indeed, as any of the preceding subjects, and one which must naturally arise in all thinking minds. It is this: Is there not a period anterior to the stage of the malady already examined-a time at which we might prevent the formation of stone in the bladder, and so get rid of the necessity for removing it? Admirable as the results of operative means have been-perfect (one may almost say) as they have become, at all events so far as regards the crushing operation-great as is the triumph which surgery has achieved in removing stone from the bladder-I take it there are very few men who would desire, if they could help it, to exhibit that triumph in their own persons; and who would not be infinitely better pleased if we could succeed in preventing the formation of stone, instead of only achieving its removal, however satisfactorily the operation for that purpose might be performed. This, then, leads me to the consideration of an important question,-Can we do anything to prevent the formation of stone

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in the urinary passages? It is, in fact, the earliest stage of this malady that will be the subject of our lecture to-day.

I commence by saying that I think a great deal may be done. But at the outset of the inquiry we naturally ask, What is the kind of stone (for there are several kinds) the formation of which we may hope to do most in preventing? All calculi are either of local or of constitutional origin. By "local," I mean formed by disease in the bladder itself, and not depending upon any constitutional conditions; by "constitutional," I mean formed by some vicious action, some error of assimilation inherent in the system. Now, the large majority of stones are of constitutional, and not of local origin. When they are local, you. know that we cannot prevent their formation except by mechanical means. Calculous matter, the elements of which are produced in the bladder, may be washed out, or be broken. or dissolved and then washed out. But when stones are of constitutional origin-and we are going to refer entirely to these to-day-

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their elements are separated from the blood, and no mechanical mode of preventing their production can by any possibility be available.

Now, from observation, we know that nineteen out of twenty of such stones have uric acid for their basis, the remaining one in twenty being oxalate of lime;* and, less commonly still, there are phosphatic stones which are of constitutional origin also. Therefore, practically, to all intents and purposes, the problem before us is contained in the question :—How may we best prevent the formation of uric-acid calculus?

Let us examine the early history of a case of persisting uric-acid deposit. First of all, let me say, going back to the root of the matter, that it is generally more or less hereditary. As an illustration on the spot let me recall the man we have just seen with uric-acid calculus in the ward, of whom we learned that his

^{*} The deposite of oxalate of lime and of uric acid so often replace each other that the consideration of the latter becomes practically generally sufficient for our purpose.