

Contraction of the canal necessarily attends the cicatrization of shot wounds of the urethra in a degree commensurate with the loss of substance, unless the narrowing is resisted by the presence or frequent passage of unyielding tubes. Even then the tendency to contract remains. It is different with traumatic stricture due to inflammation of the contiguous tissues, when the integrity of the canal has not been destroyed. The super-vention of stricture, after an interval of five years, in the first of the following cases, is remarkable:

CASE 1017.—Lieutenant H. C. P——, Co. H, 21st Pennsylvania Cavalry, was wounded at the engagement at Hatcher's Run, October 27, 1864, and sent to the Second Division Hospital, Cavalry Corps. Assistant Surgeon E. J. Marsh, U. S. A., recorded a "flesh wound of the left thigh." The patient was transferred to hospital at City Point, and furloughed November 7th. On December 5, 1864, he was registered with wounded volunteer officers at Washington. Acting Assistant Surgeon F. S. Barbarin notes the injury as "a gunshot flesh wound of the scrotum and left thigh;" and adds that this officer was "discharged February 8, 1865, readmitted March 4th, and discharged the service April 9, 1865."—S. O. 62, § 19, A. G. O. Dr. H. W. Sawtelle, of the Revenue Marine Service, states that in this case the sciatic nerve was injured, and that there was for a long time pain and sensitiveness in the course of this nerve. He adds that during the treatment an abscess formed in the scrotum, requiring evacuation by a trocar, and that after retirement from service this officer experienced no inconvenience from the injury until the spring of 1870, when scalding on micturition, and a diminution in the size of the stream of urine was observed. Catheterization thrice weekly was employed for nearly a twelve-month, with great benefit. In January, 1873, Dr. Sawtelle examined this pensioner, and detected "a slight stricture corresponding with the exit of the ball. A system of gradual dilatation by bougies was advised, and under this treatment steady improvement took place." Dr. W. P. Johnson and Examiner J. O. Stanton, of Washington, certified that the stricture was, in their opinions, of traumatic origin.

CASE 1018.—Corporal B. H. Wood, Co. B, 154th New York, aged 24 years, was wounded at Chancellorsville, May 3, 1863. He was sent from an Eleventh Corps hospital, on the transport Mary Washington, to Stanton Hospital, where Surgeon J. A. Lidell, U. S. V., reported a "gunshot wound resulting in urinary fistula." On June 20th, the patient was removed to Carver Hospital, where Surgeon O. A. Judson, U. S. V., recorded a "shot wound of the urethra." At DeCamp Hospital, November 21, 1864, Assistant Surgeon J. S. Billings, U. S. A., reported this man as "returned to duty." On April 29, 1865, this soldier was sent from a Twentieth Corps hospital, by the hospital Steamer S. R. Spaulding, to McDougall Hospital, New York, and Assistant Surgeon S. H. Orton, U. S. A., reported that he was discharged for traumatic stricture of the urethra, June 12, 1865, and pensioned. Examiner O. A. Tompkins, of Randolph, reported, May 1, 1872: "The ball entered at the right side of the root of the penis, passed backward and inward through the urethra, and emerged at the centre of the left natis three inches from the anus. There now remains permanent stricture of the urethra." An increase of pension was recommended.

CASE 1019.—Private J. Metzler, Co. A, 44th Illinois, aged 32 years, was wounded at Resaca, May 14, 1864, and was treated in hospitals at Chattanooga, Nashville, and Louisville; again in No. 8, Nashville, from October 27th; and transferred to Brown Hospital, November 30th, where a wound of the penis was first reported; thence to Jefferson Barracks, where Assistant Surgeon H. B. Tilton, U. S. A., noted a "stricture of urethra from gunshot wound." This soldier was transferred to the Veteran Reserve Corps, January 11, 1865; discharged October 17, 1865, and pensioned. Examiner S. Wagenseller, of Pekin, reported, April 30, 1867: "One wound in the wrist, ball entering the back part of the hand, passing through the wrist-joint, fracturing the bones; he has not full control of the motion of the joint. In the other wound, the ball struck the penis on the left side in front of the scrotum, passing out from the right gluteal muscles. He urinates with great difficulty, water dripping away slowly; disability one-half and permanent." This pensioner was paid to the date of his death, July 31, 1871.

CASE 1020.—Captain John M——, 79th New York Militia, aged 38 years, was wounded at Bull Run, July 21, 1861, and again August 30, 1862. On the last occasion he was taken prisoner and remained in the hands of the enemy for eight days. He was paroled and rejoined his regiment, and was promoted major November 17, 1862, and lieutenant-colonel February 17, 1863. He was mustered out at the expiration of his term of service, May 31, 1864, and pensioned. Surgeon J. E. MacDonald, U. S. V., formerly of the 79th New York, July 5, 1865, makes the following statement: "At the battle of Bull Run, July 21, 1861, Mr. M—— received a very serious wound from a musket ball, which perforated the apex of the left chest and lung and fractured the left scapula. He made a rapid recovery, however, from so severe a wound, and reported for duty in an extremely short time." * * "At the second battle of Bull Run, August 30, 1862, Mr. M—— received a wound from a minié ball, which passed through the right natis, the scrotum, and the urethra. On this occasion, the nature of the wound did not permit him to escape from the field, and he remained eight days in the hands of the enemy. Much to the surprise of many surgeons, myself among the number, he survived to be removed to Washington, and again to be of service to his regiment. I have carefully examined his condition recently, and find that he is still obliged to make frequent use of the catheter to relieve his bladder, and often suffers from both incontinence and retention of urine. It is my opinion that he will never cease to be subject to temporary difficulties of like nature." Examiner T. F. Smith reported, January 30, 1866: "A ball perforated the apex of the left lung, fracturing the left scapula, in consequence of which he has not full power of the left arm; disability from this, one-fourth. Another ball passed through the right natis, scrotum, and urethra. He is obliged to use a catheter continually in order to draw off the urine. Whenever he performs hard labor the wound breaks open. He is unable to walk but a short distance. Disability from this, three-fourths." The same examiner, September 17, 1873, reports: "Ball entered over middle third of the left clavicle and made exit over the inner border of the middle third of the left scapula; no disability. Ball entered to the left of the scrotum in the groin, cutting the urethra, and made its exit from the right natis. He is obliged to use a catheter to draw off the urine; locomotion considerably interfered with; disability total." This pensioner was paid December 4, 1873.