

**Illustrations of the salts of the urine, urinary deposits and calculi : including the structure of the kidney in health and disease, microscopical and chemical apparatus, entozoa, &c.; / by Lionel S. Beale.**

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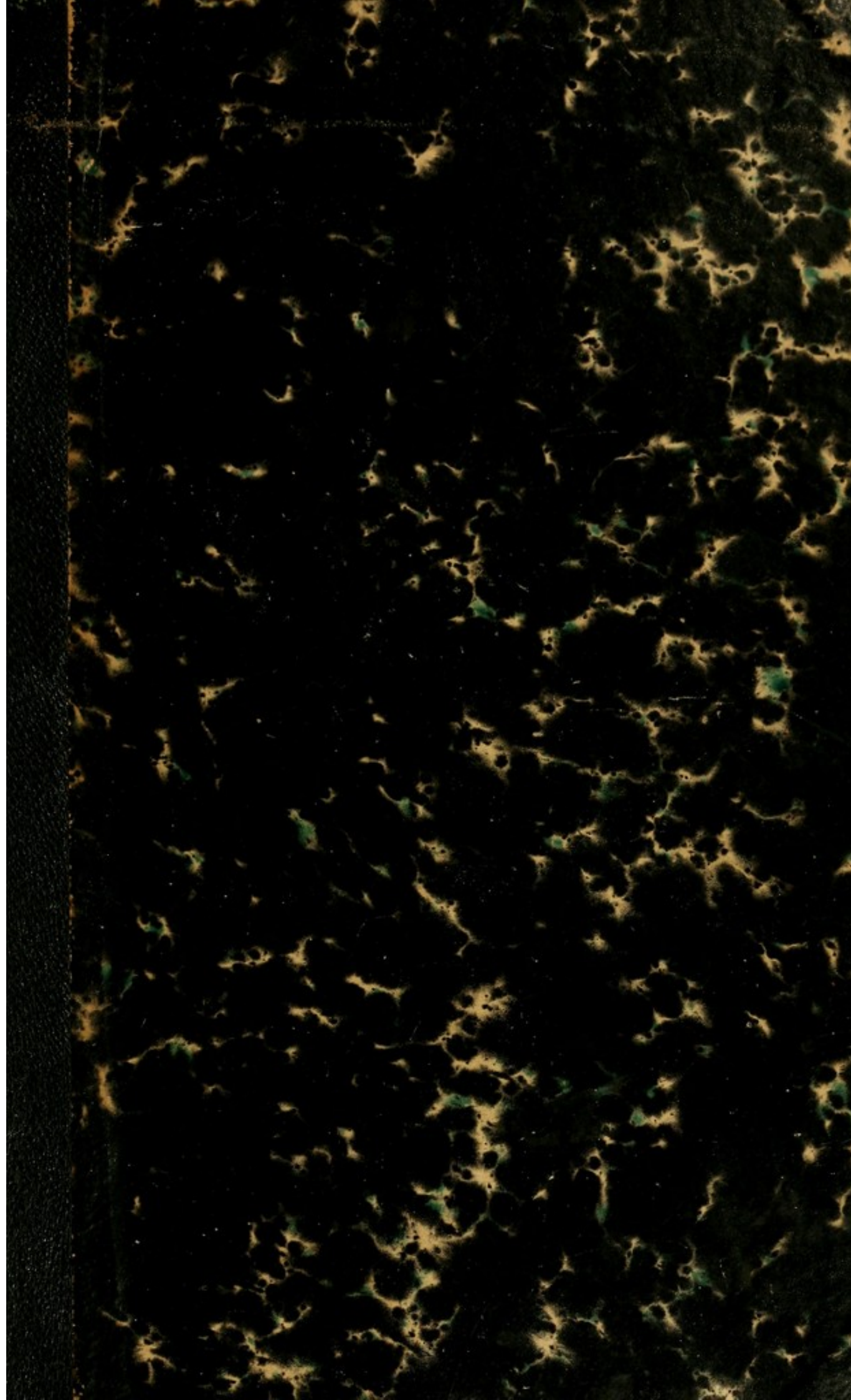
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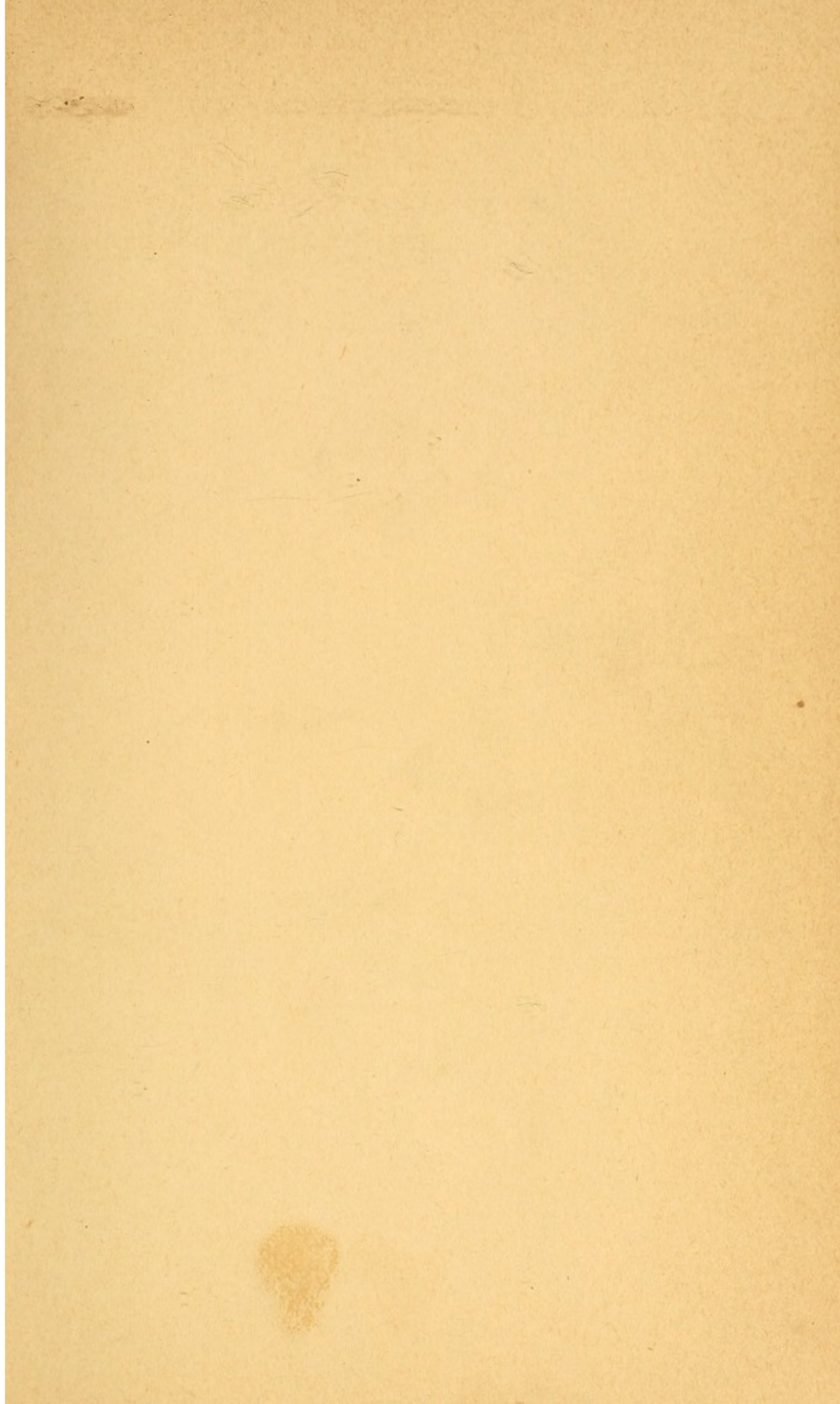


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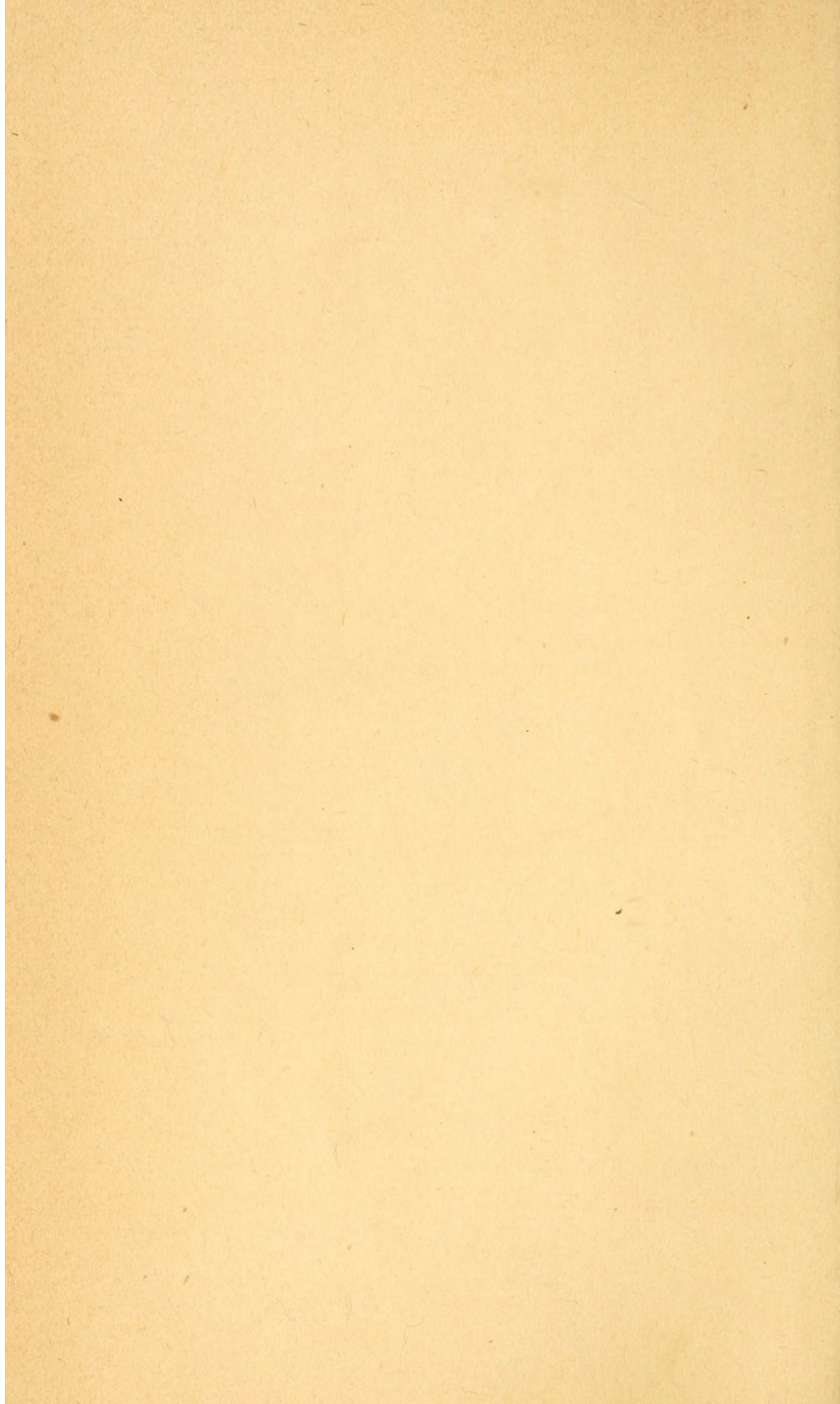














ILLUSTRATIONS  
OF THE  
SALTS OF THE URINE,  
URINARY DEPOSITS AND CALCULI,

INCLUDING

THE STRUCTURE OF THE KIDNEY IN HEALTH AND  
DISEASE; MICROSCOPICAL AND CHEMICAL  
APPARATUS, ENTOZOA, &c.

SEVENTY PLATES,

CONTAINING UPWARDS OF 400 SEPARATE FIGURES, CAREFULLY COPIED FROM  
THE OBJECTS THEMSELVES,

\* 7746.2

BY  
LIONEL S. BEALE, M.B., F.R.S.,

FELLOW OF THE ROYAL COLLEGE OF PHYSICIANS; PHYSICIAN TO KING'S COLLEGE HOSPITAL; PROFESSOR OF  
PHYSIOLOGY AND OF GENERAL AND MORBID ANATOMY IN, AND HONORARY  
FELLOW OF, KING'S COLLEGE, LONDON.

SECOND EDITION,

WITH TWICE THE NUMBER OF PLATES.

LONDON:  
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## PREFACE.

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THE number of Plates has been increased from thirty-five to seventy, and there are two hundred and forty-five more figures than in the first edition. Many of the old drawings have been re-engraved, and nearly one hundred new ones have been introduced.

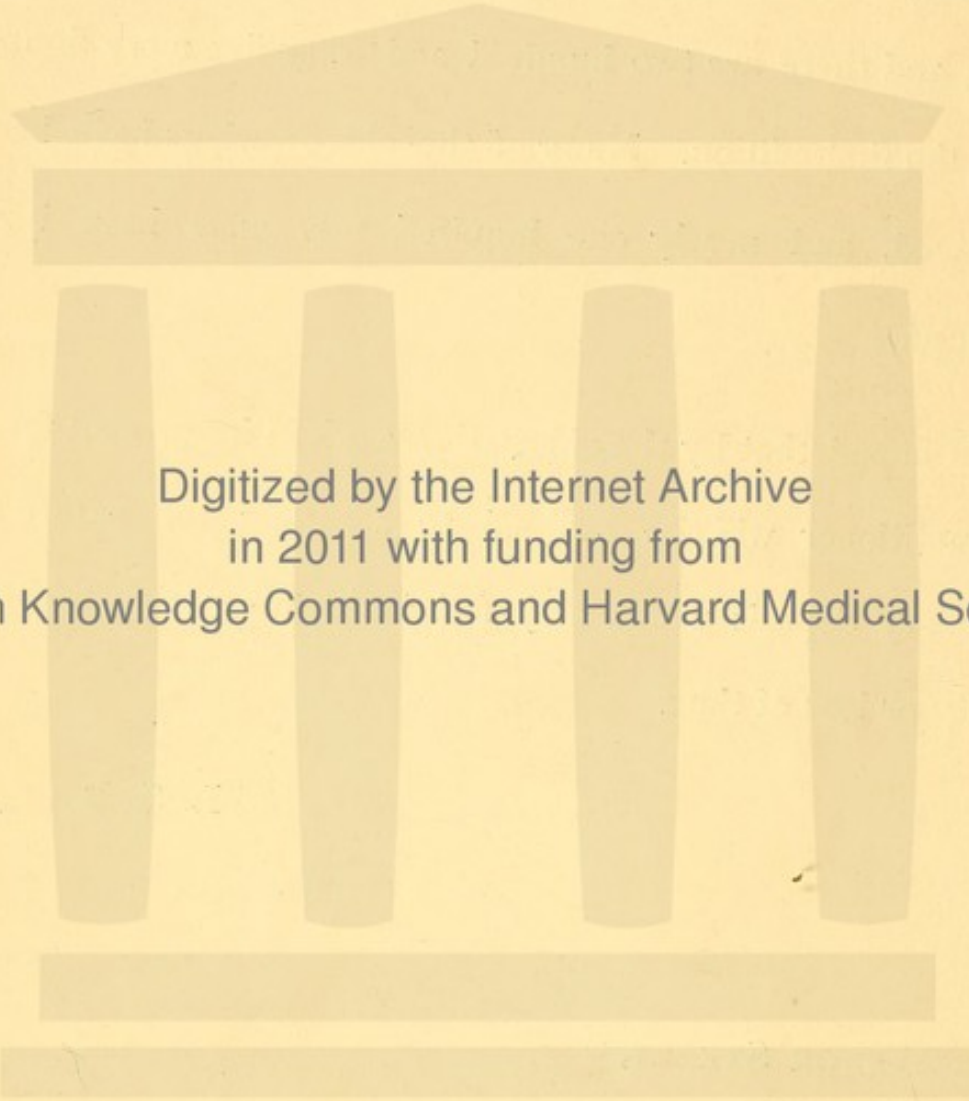
It is hoped that by the aid of the Work in its present form, the Practitioner will be enabled to ascertain the nature of any urinary deposit which may fall under his notice, without difficulty or loss of time.

L. S. B.

61, GROSVENOR STREET,

*October, 1868.*





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## EXPLANATION OF THE PLATES.

## STRUCTURE OF THE KIDNEY.

- Plate I. Fig. 1. Diagram showing the general anatomy of the human kidney as seen upon section. About two thirds the natural size. The scale at the side is divided into eight spaces representing half inches, p. 2. Fig. 2. Thin section of a portion of the human kidney. Fig. 3. Arrangement of the secreting structure and vessels of the kidney of man, magnified about 50 diameters, p. 4.
- Plate II. Fig. 4. Part of the cortex with the commencement of the medullary portion of the human kidney, magnified 15 diameters. Fig. 5. Uriniferous tube with dilated extremity which embraces the vessels of the Malpighian tuft. Fig. 6. Small artery with tuft and capillary network, p. 6.
- Plate III. Fig. 7. Convoluted portion of uriniferous tube with epithelium from the cortical portion of the kidney. Fig. 8. Straight portion of uriniferous tube from the base of a pyramid. Fig. 9. Epithelium from the pelvis of the kidney in part tessellated and in part columnar. Fig. 10. Epithelium scraped from the surface of a pyramid. Fig. 11. Epithelium from the ureter, entirely columnar. Fig. 12. Columnar epithelium from the urethra, p. 6.
- Plate IV. Fig. 13. Vasa recta in the pyramidal portion and Malpighian bodies in the cortical portion of the kidney. Fig. 14. Capillary vessels from Malpighian tuft of human kidney showing the nuclei connected with their walls. Fig. 15. Thin section of healthy human kidney slightly washed in water. Fig. 15A. Uriniferous tube bent upon itself, at *a*, in the pyramid of the kidney. The looped tube of Henle. Fig. 16. Epithelium from a uriniferous tube. Human kidney. *a* treated with acetic acid. Fig. 17. Epithelium from the pelvis of human kidney. Fig. 17A. Young and growing Malpighian body of a child's kidney. The muscular fibre cells are seen on the artery quite close to the Malpighian body, p. 12. Fig. 18. Epithelium from the ureter.
- Plate V. Fig. 19. Part of the convoluted portion of a uriniferous tube from the newt's kidney, showing capillary vessels and nerve fibres and the thickened basement membrane continuous in structure with the connective tissue. Fig. 19A. Malpighian body and tube of the newt's kidney. Fig. 20. Ganglia. Hilus of kidney. Young pig. Fig. 21. Ganglion from the pelvis of the kidney of a boy three years of age showing small arteries and capillaries, nerve cells, and bundles of nerve fibres. Fig. 22. Delicate nerve fibres entering into the formation of the bundles connected with the ganglia of the kidney, showing their arrangement and their nuclei. Fig. 23. *a*. Section of cortical portion of healthy kidney (human) washed and examined in water. The capillaries were not injected and having collapsed and shrunk exhibit the fibrous appearance which is considered to depend upon the matrix. *b*. Section of



another part in which the vessels were injected. The nuclei on their coats are seen, but no 'fibrous matrix,' p. 16.

Plate VI. Fig. 24. Section of the cortical portion of a human kidney the vessels of which have been injected with the Prussian blue solution, *a*, membrane of the tubes. The *a* to the right of the figure shows the position of a Malpighian body; *b*, a portion of a capillary loop of a Malpighian body; *c*, venous capillaries lying between the uriniferous tubes. In many places the double-shaded line indicates the basement membrane of the tubes; *d*, position of the uriniferous tube. Fig. 25. Transverse section at the base of a pyramid. Fig. 26. A similar section a short distance lower down, showing uriniferous tubes cut across. The small tubes join the larger ones at a point lower than that at which the section is made. Fig. 27. Section nearer the apex of the pyramid. Fig. 28. Apex of a pyramid showing the manner in which the uriniferous tubes open into the pelvis of the kidney, p. 16.

Plate VII. Fig. 29. Uriniferous tubes, some of which are choked with a deposit consisting of albuminous matter and blood. Fig. 30. Transverse section of the tubes of the kidney of a snake occupied by large crystals of uric acid. Fig. 31. Crystals of leucine in the substance of kidney. Human subject. Fig. 32. Crystals of leucine more highly magnified. Fig. 33. A small portion of the small ganglion represented in fig. 21, plate V, but magnified 700 diameters, showing ganglion cells and their connection with the nerve fibres. Fig. 34. Tubes of human kidney with earthy phosphates precipitated amongst the cells. Fig. 35. *a*, portion of uriniferous tube; *b*, capillary vessel; *c*, nerve fibres. Kidney of a child, age three years, p. 16.

Plate VIII. Fig. 36. Part of the thin portion of the kidney of the female newt. *a*, portion of straight tube continuous with ureter; *b*, collection of fatty matter, perhaps a wasted Malpighian body; *c, c*, remarkable diverticula connected with tubes just below the Malpighian body. The capillaries are also represented. Fig. 37. Malpighian body and portion of uriniferous tube with remarkable diverticulum. Female newt. At *a*, a bud projects from the diverticular tube as if a branch were growing from it. Fig. 38. Tube *a*, containing spermatozoa from which some Malpighian bodies and uriniferous tubes of the male newt are developed. An old ganglion which has undergone degeneration, and new ganglion cells are also seen at *b*. Fig. 39. Distribution of nerves and ganglia over thin part of the kidney of the male newt. *a*, vas deferens: the uriniferous tubes opening into it; *b*, artery; *c*, vein. The numerous ganglia and nerve fibres are seen ramifying over the vessels and tubes. Fig. 40. Diverticulum from tube. Male newt's kidney. Fig. 41. Tube containing spermatozoa, showing connection with uriniferous tubes and Malpighian bodies. One of the latter is double. Male newt, p. 32.

Plate IX. Fig. 42. Tube of kidney of female newt, part of which has undergone wasting. The healthy portion of the tube is seen to the right of the figure. Nerve fibres are also shown in some places. Fig. 43. *a*, portion of a capillary vessel of the kidney distended with altered white blood corpuscles; *b*, round flattened cells from inner surface of capsule of the Malpighian body; *c*,



nucleus of the capillary wall. Acute suppurative nephritis. Fig. 44. Portion of a cast magnified 700 diameters with cells in the central part resembling white blood corpuscles which have probably multiplied while they were entangled in the coagulable material of the cast. Fig. 45. Casts containing cells like pus and blood corpuscles. Acute suppurative nephritis; three days before death. Fig. 46. Small casts formed in the convoluted portion of the uriniferous tubes, which have become embedded in transparent material during their passage down the straight portion, p. 48.

Plate X. Fig. 47. Portion of a cast with distinct cells, showing nuclei and granular contents. Fig. 48. Bodies found between the capillaries of the Malpighian body and the walls of the capsule. Case of acute suppurative nephritis. Fig. 49. A portion of one of the capillary loops of a Malpighian body distended with modified white blood corpuscles. Fig. 50. Separate cells found in the urine. Case of acute suppurative nephritis. Fig. 51. Malpighian bodies, showing different degrees of wasting. Fig. 52. Tubes of the kidney degenerated and wasted. Fig. 53\*. Dumb-bell crystals of oxalate of lime impacted in the tubes of a kidney, forming minute calculi. Fig. 53. Multiplication of masses of germinal matter about tubes prior to wasting. Fig. 54. Portion of a tube from the cortex of the kidney of a healthy cat, containing much oil. Fig. 55. Malpighian body and portions of uriniferous tubes with capillary vessels containing much oil. From a kidney of a diabetic, p. 48.

Plate XI. Fig. 56. *a*, wasting tube with oil globules in the interior; *b*, a tube containing a transparent waxy cast, with germinal matter resulting from altered epithelium. Fatty and contracting kidney. Fig. 57. Thin section of the cortex of a fatty and contracting kidney, showing the remains of tubes and vessels in what is generally considered as the 'matrix.' *a*, the remains of a tube appearing as a connective tissue corpuscle; *b*, small artery with thickened walls. Fig. 58. Section of cortex of fatty and contracting kidney. Fig. 59. Epithelium of tube much altered. Walls of tube much thickened.  $\times 700$ . Fatty and contracting kidney. Fig. 60. Loops of vessels of the Malpighian tuft distended with granular matter and containing oil globules. Fig. 61. Capillaries Malpighian body. Fatty and contracting kidney. Bacteria are seen in the interior of the vessel, the walls of which are very much thickened. Fig. 62. Portion of very transparent matrix showing the remains of uriniferous tubes. Fatty and contracting kidney. Fig. 63. Portion of altered tube with a bud growing from it. Fatty and contracting kidney. Fig. 63\*. Section of uriniferous tubes in various stages of wasting and degeneration. Fatty and contracting kidney. In some of the tubes there is much oil, p. 64.

Plate XII. Fig. 64. Section of cortex of kidney undergoing contraction and fatty degeneration. At *a*, the process of wasting is complete; at *b*, a portion of the matrix showing varying size of the tubes. Under the low magnifying power of 40 the wasted tubes and vessels cannot be seen in the specimen. At *c*, much fatty matter with crystals, probably of cholesterine. Fig. 65. Section of an amyloid kidney showing altered tubes, with increased number



of altered epithelial cells. A Malpighian body with amyloid matter deposited in the capillary walls is seen in the centre, and portions of thickened arteries in different parts of the specimen. Fig. 66. Capillary vessels with nerves of capillaries. Skin of frog. Fig. 67. Small capillary with nerve fibres *a*. Healthy human kidney. Fig. 68. Wasting capillaries from a fatty and contracting kidney. Circulation through these vessels must have ceased sometime before the patient's death. Fig. 69. Altered Malpighian body. Fatty and contracted kidney. Capillaries obstructed. Tube of artery containing altered blood and angular particles of blood colouring matter, p. 70.

Plate XIII. Fig. 70. Arteries from a fatty and contracting kidney, showing complete degeneration of muscular fibre cells and the deposition of glistening albuminous material. The walls of the artery have probably long lost all contractile power and are converted into rigid inelastic tubes, the inner surface of which is uneven, with great irregularity in calibre. Fig. 71. A healthy artery from the kidney of a child three years old, showing muscular fibre cells and longitudinal nuclei of muscular and elastic fibres within. Fig. 72. Artery from the peritoneum of a frog which had been kept for some time without food, showing wasting of muscular fibre cells and great diminution in calibre. In its present wasted and contracted state the external areolar coat is many times the diameter of the vessel. Fig. 73. A transverse section of a small artery from the same kidney as fig. 70. Fig. 74. Artery from the same kidney as figs. 70 and 73, showing great irregularity of calibre and degenerated muscular coat. Oil globules and débris are seen in the interior, p. 74.

Plate XIV. Fig. 75. Full-size representation of section of the right kidney, showing the enormous development of cysts throughout its substance. The presence of these growths is evidently due to intra-uterine disease of the foetus. From a drawing by Dr. Jardine Murray, p. 80.

#### CHEMICAL AND MICROSCOPICAL APPARATUS.

Plate I. Fig. 1. Conical glass for allowing deposits from fluids to subside. Fig. 2. Test-tubes, rack and drainer. Fig. 3. Wire triangle for supporting platinum capsules or foil. Fig. 4. Another wire triangle. Fig. 5. Wash-bottle for washing precipitates. Fig. 6. Represents the mode of folding the paper used for filtering purposes. Fig. 7. Pipettes. Fig. 7\*. Pipette forming stopper. Fig. 8. Small retort stand. Fig. 9. Simple form of water-bath. Fig. 10. Ring used as an adapter for fitting various-sized basins to the simple water-bath. Fig. 11. Spirit-lamp, p. 92.

Plate II. Fig. 12. Retort stand, funnel, and beaker arranged for filtering. Fig. 13. Glasses of convenient form both for obtaining the specific gravity of fluids and also for collecting the deposits from fluids. Fig. 14. Urinometers for ascertaining the specific gravity of fluids. Fig. 15. Bottle for finding the specific gravity of fluids by weight. Fig. 16. Bottle with capillary orifice. Fig. 17. Animalcule cage, also used for examining urinary deposits, &c., under the microscope. Fig. 18. Simple glass cell for examining



urinary deposits. Fig. 19. Box containing bottles with capillary orifices, spirit-lamp, urinometer and glass, and other appliances and apparatus necessary for minute testing, p. 94.

Plate III. Fig. 20. Pocket or clinical microscope, half the real size. *a*, tube with eye-piece; *b*, tube carrying object-glass; *c*, tube in which the last slides with stage; *e*, clamp for fixing preparation. Fig. 21. Clinical microscope with stand and lamp as arranged for class purposes. Fig. 22. The stage, side view of the clinical microscope showing position of the spring. Fig. 23. Sectional view of cell for examining urinary deposits. Fig. 24. Neutral tint glass reflector. Fig. 25. Scale divided into 1,000ths of an inch and magnified 215 diameters, for measuring the size of objects in the microscope. Fig. 26. Manner of drawing objects from the microscope with the aid of the neutral tint glass reflector, p. 96.

Plate IV. Fig. 27. Burette holding 50 cubic centimetres and graduated to half cc., mounted in its stand and arranged as in making analyses. Fig. 28. Filter used in volumetric analyses for filtering off clear solution from precipitate. Fig. 29. Double burette stand graduated to dcm., with flasks and pipettes used in volumetric analyses. Fig. 30. Pipette. Fig. 31. Another form of pipette. Fig. 32. Arrangement for collecting deposit from a very small quantity of fluid. Fig. 33. Apparatus arranged by Dr. Handfield Jones for estimating the proportion of urea in urine, p. 104.

#### ILLUSTRATIONS OF THE SALTS OF THE URINE.

Plate I. Fig. 1. Crystalline residue of healthy urine obtained by concentrating the liquid over a water-bath: *a*, spherical masses consisting of aggregations of crystals of urate of soda. Many of these are seen deposited upon a film consisting of phosphate of lime and ammoniaco-magnesian phosphate; *b*, cubical crystals of chloride of sodium; *c*, octahedral crystals of chloride of sodium which crystallised in this form in the presence of urea; *d*, large crystals of common phosphate of soda; *e*, sulphates; *f*, urates. Fig. 2. Crystals of inorganic salts of healthy urine, obtained by incinerating the dry residue, decarbonising it and extracting it with water. The solution being concentrated to the proper degree readily crystallises: *a*, crystals of common salt obtained by evaporating the solution nearly to dryness; *b*, crystals of common salt in a concentrated solution; *c*, crosslets of common salt obtained by evaporating the solution very rapidly; *d*, crystals of phosphate of soda; *e*, crystals of sulphates, p. 130.

Plate IA. Fig. 3. Chloride of ammonium. Fig. 4. Crystals of uric acid. Fig. 5. Oxalate of urea, obtained by adding oxalic acid to urine. Fig. 6. Crystals of indigo: *a* and *b* obtained by sublimation; *c*, small crystals in fluid. Fig. 7. Nitrate of urea: *a*, crystals obtained from urine; *b*, crystals of pure nitrate of urea. Fig. 8. Crystals of uroglauine from urine: *a*, small masses of a blue colour; *b*, composed of small spherical particles; *c*, crystals of uroglauine of a deep purple or violet colour. Fig. 9. Urea obtained from urine. Fig. 10. Crystals of hippuric acid, p. 130.

Plate II. Fig. 1. Urea obtained from urine crystallised in its own mother liquor. Fig. 2. The same as fig. 1, examined in the dry way. Fig. 3. Small crystals of urea formed in a concentrated



- solution of natural urea. Fig. 4. Similar crystals of urea of larger size. Fig. 5. Artificial urea crystallised, examined in the dry state, p. 132.
- Plate III. Fig. 1. Crystals of nitrate of urea formed by adding excess of nitric acid to concentrated urine. Fig. 2. Nitrate of urea, formed by adding a quantity of nitric acid not sufficient to combine with the whole of the urea present. Fig. 3. Nitrate of urea obtained by adding a moderate quantity of nitric acid to slightly concentrated urine in a test-tube, and allowing it to crystallise slowly. Fig. 4. Nitrate of urea, obtained by adding a marked excess of nitric acid. Fig. 5. Nitrate of urea formed by adding only two drops of nitric acid to highly concentrated urine. Fig. 6. Crystals of pure nitrate of urea obtained by dissolving some of the nitrate in water and evaporating so that crystals may form, p. 134.
- Plate IV. Fig. 1. Crystals of oxalate of urea obtained by re-crystallising nearly pure oxalate of urea from an aqueous solution: *a*, dendritic masses in which the form of the crystal is not very distinct; *b*, masses of well-formed crystals; *c*, perfect crystals of oxalate of urea. Fig. 2. Crystals of oxalate of urea obtained by evaporating healthy urine to dryness and extracting the residue with alcohol. The alcoholic solution being then evaporated to dryness and water added until the residue had a syrupy consistence. To this oxalic acid crystals were added in sufficient quantity to form an oxalate with the urea present; *d* represents the general character of the crystals of oxalate usually formed in this manner; *e*, more perfect crystals, p. 136.
- Plate V. Fig. 1. Urate of magnesia crystallised in tufts. Fig. 2. Urate of magnesia showing the separate forms of the crystals. Fig. 3. Urate of lime, crystallised in tufts composed of long acicular crystals. Fig. 4. Uric acid, precipitated by adding hydrochloric acid to urate of potash. Fig. 5. Uric acid deposited from urine, p. 138.
- Plate VI. Fig. 1. Alloxan, crystallised from an aqueous solution obtained from uric acid. Fig. 2. Alloxantin prepared from uric acid. Fig. 3. Parabanic acid obtained from uric acid. Fig. 4. Crystals of creatine. Fig. 5. Crystals of inosite. Fig. 6. Lactate of copper, p. 140.
- Plate VII. Fig. 1. Compound of chloride of zinc and creatinine as it is obtained from urine. Fig. 2. Compound of chloride of zinc, and creatinine after re-crystallisation in water. Fig. 3. Crystals of creatine obtained from the chloride of zinc compound, crystallised from an aqueous solution. Fig. 4. Crystals of creatinine obtained from the chloride of zinc compound, p. 142.
- Plate VIII. Fig. 1. Alloxanic acid. Fig. 2. Oxaluric acid. Fig. 3. Oxalurate of ammonia. Fig. 4. Oxalurate of lime. Fig. 5. Uramile. Fig. 6. Oxalurate of magnesia, p. 144.
- Plate IX. Fig. 1. Hippuric acid. Fig. 2. Hippurate of lime. Fig. 3. Allantoin. Fig. 4. Murexid. Fig. 5. Thionuric acid. Fig. 6. Thionurate of ammonia, p. 146.
- Plate X. Fig. 1. Crystals of chloride of sodium examined in their own mother liquor. Fig. 2. Phosphate of lime in a crystalline form. Fig. 3. Phosphate of lime, granular. Fig. 4. Crystals of triple phosphate in the form of triangular prisms, p. 160.
- Plate XI. Fig. 1. Fructification of penicillium glaucum. Fig. 2. The



sugar fungus from diabetic urine. Fig. 3. Fructification of yeast fungus. Fig. 4. Human kidney, showing greatly dilated pelvis and calyces, shrunken pyramids and diminished cortical portion. Fig. 5. Modification of Mitscherlich's saccharimeter for determining the proportion of sugar in fluids. Fig. 6. Flask adapted for the estimation of carbonic acid gas, used in determining the proportion of sugar in fluids by the fermentation test, p. 252.

Plate XII. Fig. 1. Mode of crystallisation of diabetic sugar. Fig. 2. Separate crystals of diabetic sugar. Fig. 3. Crystals of leucine from urine. Fig. 4. Crystals of leucine from urine. Fig. 5. Crystals of tyrosine. Fig. 6. Cystine from urine, p. 280.

#### ILLUSTRATIONS OF URINARY DEPOSITS—EXTRANEOUS MATTERS.

Plate I. Fig. 1. Portions of hairs from a blanket. Fig. 2. Fragments of human hair. In some the central canal occupied with the soft cells of the medulla is represented. Fig. 3. Fragments of cat's hair. Some near the apex and others close to the root of the hair. Fig. 4. Fibres of silk: *a*, white silk; *b*, black silk. Fig. 5. Scales of moth, p. 249.

Plate II. Fig. 6. Cotton fibres. A small fibre in the upper part of the figure is seen to be twisted round a larger one. Fig. 7. Portions of flax fibres. Fig. 8. Portions of feathers. The knotted pieces represented are obtained from the lower part of the shaft of the feather. Fig. 9. Fibres of deal wood swept from the floor. Fig. 10. Elements of dust swept from a shelf, p. 296.

Plate III. Fig. 11. Potato starch. Its appearance in water. Fig. 12. Wheat starch in water. Fig. 13. Rice starch in water. Fig. 14. Testa of wheat. External and inner coverings of the wheat grain. Fig. 15. Bread crumbs in water. The starch granules are swollen and softened, but still preserve their form. Fig. 16. Cells of tissue of potato in which the starch is contained. A few of the cells are filled with starch granules, p. 298.

Plate IV. Fig. 17. A portion of tea-leaf. Fragments of spiral vessels are seen projecting from several parts of the margin. Fig. 18. Air bubbles. Appearance in water. Fig. 19. Oil globules. Milk. Fig. 20. Oil globules, some free and some contained in cells. Fig. 21. Globules, consisting of phosphate of lime; from urine. Fig. 22. Extraneous substances frequently met with in urine. Fig. 23. Epithelium and fungi from the mouth. Fig. 24. Portions of partially digested muscle. From vomit, p. 300.

Plate V. Fig. 25. Urate of soda, obtained by concentrating healthy urine. Fig. 26. Molecular fatty matter of chylous urine. Fig. 27. Urate. Ordinary granular deposit usually termed urate of ammonia. Fig. 28. Crystals of cholesterine obtained from the fatty matter in casts separated from the urine of a case of fatty degeneration of kidneys. Fig. 29. Pus and blood corpuscles with crystals of triple phosphate, from the urine of a man suffering from fungus growths connected with the mucous membrane of the bladder. Fig. 30. Oil globules of milk, p. 312.

Plate VI. Fig. 31. Mucus and mucus corpuscles. Urine. In the upper part of the figure to the right several cells of bladder epithelium are represented. Fig. 32. *Penicillium glaucum*



developed in acid urine : *a*, within twelve hours after the urine was passed ; *b*, one day after ; *c*, two days after ; *d*, four days after ; *e*, five days after ; *f*, after standing six days. Fig. 33. Algæ and vibriones from urine three days after it was passed. Fig. 34. Vegetable organisms met with in urine : *a*, different forms of fungi ; *b*, vibriones. Fig. 35. Bacteria undergoing germination. Fig. 36. Bacteria germs in old epithelial cells of the mouth. Fig. 37. Bacteria. Fig. 38. Bacteria. Fig. 39. Penicillium glaucum found in diabetic urine four days after it was passed. Fig. 40. Penicillium glaucum from acid urine. Fig. 41. Penicillium glaucum. Fig. 42. Penicillium glaucum from acid urine. Fig. 43. The sugar fungus from diabetic urine. Fig. 44. Yeast added to diabetic urine and allowed to stand in a warm place forty-eight hours, showing growth of the torula, p. 324.

Plate VII. Fig. 45. Fructification of yeast fungus. Fig. 46. Fungi formed in acid urine. Several spermatozoa are seen amongst the fungous filaments. Fig. 47. Fructification of penicillium glaucum. Fig. 48. Penicillium glaucum. The oval spores growing into thalli. Developed in urine about fifty hours after it was passed. Fig. 49. Fungi formed in acid urine. Fig. 50. Sporules of fungi resembling blood corpuscles. Fig. 51. Curious fungi formed in the urine of a young man who passed much oxalate of lime. Fig. 52. Penicillium glaucum. Fig. 53. Sarcinæ ventriculi, ordinary size from vomit. Fig. 54. Sarcinæ from vomit, p. 326.

Plate VIII. Fig. 55. Epithelium from the convoluted portion of the uriniferous tube : *a*, treated with acetic acid. Fig. 56. Epithelium from the kidney. Human. Fig. 57. Epithelium from the ureter. Fig. 58. Epithelium from the urethra. Fig. 59. Bladder epithelium : *a*, from the general surface ; *b*, from the fundus ; *c*, scales from the bladder. Fig. 60. Vaginal epithelium from urine. Fig. 61. Epithelium from the bladder, showing the hollows in some of the large cells into which the subjacent columnar cells fit. Fig. 62. Epithelium from the vagina. Fig. 63. Young epithelial cell from the bladder undergoing division. Fig. 64. Formation of pus from germinal matter of epithelial cells, p. 328.

Plate IX. Fig. 65. Membranous substance passed with a blood clot during the menstrual period, probably from the vagina. From a preparation of Dr. Tilt's. Fig. 66. Fragment of uterine cast passed by a lady age 25. Fig. 67. Another fragment of uterine cast composed entirely of epithelium. Fig. 68. Cast of the womb and vagina, the mucous covering belonging to the former cavity being inverted, p. 328.

Plate X. Fig. 69. Casts of the seminal tubes. Spermatozoa embedded in them, from an old man upwards of 80 years of age. Fig. 70. Spermatozoa and cells of vaginal epithelium removed from the vagina of a little girl a few hours after a rape had been committed. Fig. 71. Spermatozoa from urine. Fig. 72. Spermatozoa with urate deposited upon them. Fig. 73. Long narrow threads of viscid mucus associated with the presence of spermatozoa in casts of the seminal tubules. From the urine of a case of slight irritability of the neck of the bladder. Fig. 74. Filaments of a vegetable nature, resembling spermatozoa. Fig. 75. Body and upper part of the tail of spermatozoon magnified upwards of 3,000 diameters : *a*,



spermatozoon containing much germinal matter ; *b*, the same seen edgeways ; *c*, spermatozoon containing comparatively little germinal matter ; *d*, spermatozoon, crushed, showing separate spherical particles of germinal matter, p. 330.

Plate XI. Fig. 76. Spermatozoa and crystals of phosphate of urine from the seminal fluid. Fig. 77. Waxy casts : *a*, of large size ; *b*, small waxy casts. Fig. 78. Casts containing oil globules and free fat cells from a case of fatty degeneration of the kidney. Fig. 78A. Small granular casts from the urine of a patient suffering from chronic nephritis. Fig. 79. Large casts, some containing many cells, others consisting of a perfect transparent wax-like material. Fig. 80. Epithelial casts : *a*, casts containing cells of epithelium ; *b*, casts containing granular matter ; from urine of acute dropsy, p. 340.

Plate XII. Fig. 81. Mucus cast from the straight portion of the uriniferous tubes, showing the manner in which the large renal tubes divide and subdivide as they pass towards the base of the pyramids. Fig. 82. Mucus casts with dark brown urate deposited upon their surface and in their substance. Fig. 83. Waxy casts of large and small diameter. Fig. 84. Portion of a mucus cast which has been formed around a smaller or serpentine one. Fig. 85. Casts containing blood corpuscles, from a case of acute nephritis, p. 342.

Plate XIII. Fig. 86. Epithelial and granular casts from the urine of a woman suffering from acute nephritis with dropsy : *a*, epithelial casts ; *b*, casts containing brown granular matter and blood corpuscles ; *c*, granular casts of a brown colour, many of them containing a few oil globules ; *d*, squamous epithelium from the vagina ; *e*, epithelium from the bladder ; *f*, cells containing oil globules ; *g*, portion of a cast containing oil globules ; *h*, circular granular cells ; *i*, fibre of flax ; *k*, blanket hair. Fig. 87. Casts from a case of chronic nephritis : *a*, dark granular casts ; *b*, casts containing small granular cells and white blood corpuscles ; *c*, waxy casts ; *d*, large cast flattened by pressure, containing white blood corpuscles ; *e*, portion of a cast containing a large cell filled with oil globules ; *f*, pus corpuscles ; *g*, collections of small oil globules ; *h*, large cell containing smaller cells ; *i*, portions of cotton fibre ; *k*, piece of very thin human hair ; *l*, fragment of flax, p. 346.

Plate XIV. Fig. 88. Casts. Acute inflammation of the kidney, from the urine of a man, age 45 : *a*, perfectly transparent wax-like casts ; *b*, a very long wax-like cast ; *c*, casts filled with cells resembling pus corpuscles, but somewhat larger ; *d*, the same cells free ; *e*, portion of feather ; *f*, piece of cotton fibre ; *g*, portion of human hair ; *h*, flax fibre, p. 348.

Plate XV. Fig. 89. Casts chronic nephritis : *a*, casts of large diameter containing granular matter scattered round them unequally ; *b*, a very long clear and perfectly transparent cast containing minute oil globules here and there ; *c*, dark granular casts ; *d*, large masses of granular matter many of them appearing like granular cells ; most of these are derived from the mucous membrane covering the glans ; *e*, cells of renal epithelium ; *f*, masses of squamous epithelium ; *g*, free oil globules ; *h*, portion of cotton fibre ; *i*, portion of feather, p. 350.

Plate XVI. Fig. 90. Casts containing oil, from the urine of a case of



fatty degeneration of the kidney of long standing. Fig. 91. Cholesterine obtained from the fatty matter in casts separated from the urine of a case of fatty degeneration of the kidney, p. 350.

Plate XVII. Fig. 92. Casts of the uriniferous tubes, from a case of acute nephritis. Fig. 93. Portion of a cast. Acute nephritis. Fig. 94. Portion of a cast with distinct cells, perhaps altered white blood corpuscles. Fig. 95. Shrivelled and wasted uriniferous tubes. Fig. 96. Dumb-bell crystals in casts, proving that these curious crystals are formed in the uriniferous tubes. From the urine of a case of cholera, p. 350.

Plate XVIII. Fig. 97. Ordinary granular deposit usually termed urate or lithate of ammonia but consisting of urate of soda with small quantities of urates of ammonia, lime, and magnesia. Fig. 98. Urate of soda prepared artificially. Fig. 99. Urate of soda and films of triple phosphate, formed on the surface of concentrated urine. Fig. 100. Urate of ammonia prepared artificially. Fig. 101. Spherules of urate of soda with crystals of uric acid. From a case of long-continued remittent fever. Fig. 102. Urate of ammonia prepared artificially. Fig. 103. Urate of ammonia prepared artificially, p. 352.

Plate XIX. Fig. 104. Urate of soda in spherical masses from various parts of the circumference of which minute acicular crystals of uric acid project. Fig. 105. Urate of soda in a globular form, commonly found in the urine of children. Fig. 106. Crystals of ammoniaco-magnesian phosphate with mucus and mucous corpuscles. Fig. 107. Prismatic crystals of triple phosphate showing their form. Fig. 108. Triple or ammoniaco-magnesian phosphate from acid urine. Fig. 109. Urate of soda prepared artificially. Fig. 110. Rare form of urate of soda, from the urine of a patient suffering from peritonitis, p. 354.

Plate XX. Fig. 111. Beautiful crystals of triple or ammoniaco-magnesian phosphate and spherules of urate of soda. Fig. 112. Crystals of triple phosphate in the form of triangular prisms with obliquely truncated extremities as they frequently occur in urine, p. 356.

Plate XXI. Fig. 113. Crystals of triple phosphate formed by the addition of ammonia to urine. Fig. 114. Crystals of phosphate of lime occasionally met with in urine. Fig. 115. Drawing of a urinary deposit consisting of crystals of phosphate of lime and numerous octahedra of oxalate of lime, with mucus. Fig. 116. Phosphate of lime in the form of dumb-bells, from the mucus of the gall bladder. Fig. 117. Unusual form of triple phosphate. From the urine of a patient suffering from indigestion in the very hot weather. Fig. 118. Large dumb-bells of phosphate of lime, p. 358.

Plate XXII. Fig. 119. Phosphate of lime crystallised in the form of fan-like plates. Fig. 120. Two forms of phosphate of lime mounted in Canada balsam. Fig. 121. Crystals of triple phosphate and phosphate of lime. Fig. 122. Phosphate of lime from urine. Fig. 123. Phosphate and oxalate of lime from the urine of a young man enjoying good health, but taking little exercise. Fig. 124. Deposit from the urine of a man suffering from gouty kidney, consisting of a peculiar form of phosphate of lime with granular and oil casts, p. 360.



- Plate XXIII. Fig. 125. Pus corpuscles exhibiting very active movements. From the bladder of a case of chronic inflammation, showing alteration in form due to vital (?) movements. Fig. 126. Pus corpuscles from urine. Fig. 127. Pus corpuscles which have been acted upon by acetic acid. Fig. 128. Pus corpuscles under the action of acetic acid: *a*, action commencing; *b*, complete. Fig. 129. Pus corpuscles showing protuberances. Fig. 130. Formation of pus from germinal matter of epithelium. Fig. 131. Growth and multiplication of pus corpuscles. Fig. 132. Multiplication of pus corpuscles, p. 364.
- Plate XXIV. Fig. 133. Groups of crystals of uric acid, often termed "Cayenne pepper" grains, with octahedra of oxalate of lime. Fig. 134. Masses of small uric acid crystals. Fig. 135. Beautiful aggregations of uric acid, p. 384.
- Plate XXV. Fig. 136. Large fiddle-shaped plates of uric acid. Fig. 137. Uric acid from urine. Fig. 138. Curious forms of uric acid from urine. Fig. 139. Large halbert-shaped crystals of uric acid: *a*, "Cayenne pepper" grain. Fig. 140. Minute crystals of uric acid, p. 384.
- Plate XXVI. Fig. 141. Curious lamellar crystals of uric acid perfectly colourless. Fig. 142. Lozenge-shaped crystals of uric acid precipitated by the addition of acid to urine. Fig. 143. Crystal of uric acid from urine. Fig. 144. Diamond shaped crystals of uric acid, obtained by adding acid to urine. Fig. 145. Common forms of uric acid crystals. Fig. 146. Rhomboidal and cubical forms of uric acid from urine. Fig. 147. Large crystals of uric acid deposited in urine after standing, p. 384.
- Plate XXVII. Fig. 148. Rhomboidal crystals of uric acid. Fig. 149. Curious forms of uric acid deposited in the urine of a case of fatty degeneration of the kidneys. Fig. 150. Large very transparent glomeruli of uric acid from urine. Fig. 151. Round, oval, and spear-headed masses of uric acid deposited from urine. Fig. 152. Hexagonal crystals of uric acid, a form which occurs in urine very rarely, p. 384.
- Plate XXVIII. Fig. 153. Perfectly colourless crystals of uric acid resembling cystine. From the urine of an epileptic patient. Fig. 154. Small crystals of uric acid of a rhomboidal form, many of them resembling sections of small cylinders. Fig. 155. *a*, large spherules of urate of soda; *b*, film composed partly of urate of soda and partly of uric acid; *c*, uric acid. From the urine of a case of long-continued bilious and remittent fever. Fig. 156. The spherules of urate of soda (Fig. 155) more highly magnified. Fig. 157. Dumb-bell-like crystals of uric acid, obtained by adding hydrochloric acid to urine. Fig. 158. Crystals of uric acid, partly disintegrated. From a specimen which had been preserved for many years in naphtha and creosote fluid, p. 384.
- Plate XXIX. Fig. 159. Curious crystals of uric acid, from urine. Fig. 160. Uric acid crystallised round a hair; also octahedra of oxalate of lime, and penicillium glaucum. From urine of a patient suffering from chronic bronchitis and emphysema. Fig. 161. Very large and symmetrical crystals of uric acid from urine. The form and peculiar markings well shown. Fig. 162. Forms of uric acid produced by rapid crystallisation after the addition of nitric or hydro-



chloric acid to urine. Fig. 163. Small crystals of uric acid massed together so as to form a plate, p. 384.

Plate XXX. Fig. 164. Quadrilateral pyramidal crystals of uric acid, precipitated from urine by nitric acid. Fig. 165. Uric acid, from the urine of a case of fatty degeneration of the kidneys. Fig. 166. Less common forms of uric acid crystals: *a*, Cayenne pepper-like grains; *b*, six-sided crystals; *c*, mass with small uric acid crystals projecting from it; *d*, small pyramidal crystals of uric acid very uncommon; *e*, peculiar forms of uric acid. Fig. 167. Irregularly shaped crystalline plates consisting of uric acid, from urine. Fig. 168. Two forms of uric acid, p. 384.

Plate XXXI. Fig. 169. Dumb-bell and octahedral crystals of oxalate of lime. One very large octahedron is shown at the right hand side of the figure. Fig. 170. Octahedral crystals of oxalate of lime. Fig. 171. Curious prismatic crystal of oxalate of lime. Fig. 172. *a, b, c, d, e*, to illustrate the appearance of the same octahedron of oxalate of lime viewed in different positions; *f, g, h*, the same crystal shown sideways; *i*, the appearance of an octahedron when mounted as a dry object; *k*, unusual form of compound crystal of oxalate of lime. Fig. 173. Dumb-bell crystals and allied forms of oxalate of lime. Circular and oval. Fig. 174. Dumb-bell crystals and allied forms of oxalate of lime. Crystals approximating to the perfect dumb-bell. Fig. 175. Perfect dumb-bell crystals of oxalate of lime which have been subjected to the prolonged action of weak acetic acid, p. 384.

Plate XXXII. Fig. 176. Modified forms of oxalate of lime. From the urine of a man who was poisoned by oxalic acid. Fig. 177. Some of the crystals in fig. 176 more highly magnified. Fig. 178. Beautiful feathery crystals of phosphates of lime and magnesia with collections of octahedra of oxalate of lime the angles of which are rounded. Fig. 179. Small globules and octahedron of oxalate of lime. Fig. 179\*. Beautiful crystals of triple phosphate exhibiting peculiar markings resulting from partial solution. Fig. 180. Crystals of triple phosphate the prismatic portion of which is defective, and casts containing oil, p. 384.

Plate XXXIII. Fig. 181. Modified form of triple phosphate or phosphate of lime and triple phosphate. Fig. 181\*. Octahedra and dumb-bells of oxalate of lime and curious forms of fungi found in the urine of a young man passing much oxalate of lime. Fig. 182. Collections of dumb-bells firmly adherent to each other. Fig. 183. Minute crystals of oxalate of lime with sporules of fungi resembling blood corpuscles. Fig. 184. Dumb-bells subjected to the prolonged action of acetic acid showing the crystalline material nearly dissolved away. Fig. 185. Perfect dumb-bell crystals from the urine of a child suffering from jaundice. Fig. 186. Dumb-bell crystals of oxalate of lime aggregated together, forming a minute calculus. Fig. 187. Spherical, oval, and dumb-bell crystals, p. 384.

Plate XXXIV. Fig. 188. Crystals of cystine from the urine of an insane patient. Fig. 189. Crystals of cystine. Fig. 190. Clusters of crystals of cystine formed by evaporating a solution of the crystals represented in fig. 188 in ammonia. Fig. 191. Very small six-sided crystals of cystine formed by gently evaporating a solution of the crystals represented in fig. 188 in ammonia. Fig. 192.



Irregularly formed crystals of cystine. Fig. 193. Crystals of carbonate of lime seen by reflected light. Fig. 194. Blood corpuscles: *a, b, c*, taken from the living body; *d, e, f*, from the urine; *d*, corpuscles smaller than natural; at *e* their circumference is serrated and ragged, and also at *f*. Fig. 195. Large cells filled with granular matter in the urine of a case of chronic bronchitis. Fig. 196. Crystals of carbonate of lime in Canada balsam, appearance with transmitted light. Fig. 197. Tubercle corpuscles from a tubercle in the lung. Fig. 198. Cells found in the urine of a case of renal dropsy. Fig. 199. Cells found in the urine of a child, age 14, suffering from hæmorrhage. Fatty degeneration, 7 months. Fig. 200. Altered blood, menstrual fluid, p. 383.

Plate XXXV. Fig. 201. Rhomboidal and feathery crystals of hæmatoidin, from a softened clot. Human. Fig. 202. Feathery crystals of hæmatoidin found in the urine a fortnight after slight rupture (?) of one kidney. Human subject. Fig. 203. Cancer cells from the urine in a very bad case of cancer of the uterus. Fig. 204. Cancer cells from a case of cancer of the bladder. Found in the urine. Fig. 205. Cells from the urine of a case of acute rheumatism: *a*, in the natural state; *b*, treated with acetic acid; *c*, resembling pus; *d*, the same treated with acetic acid. The small circular bodies are blood corpuscles. Fig. 206. Blood in the form of irregularly shaped clots from the vagina, p. 394.

#### ENTOZOA.

Plate I. Fig. 1. Layers of which the wall of an hydatid cyst is composed. Fig. 2. Echinococci from hydatid liver of ox. Fig. 3. Echinococci. Fig. 4. Free hooklets of echinococci. Fig. 5. Hooklet of echinococcus. Fig. 6. *Tenia echinococcus*. Fig. 7. *Dipyloma crenata* half the real size. Fig. 8. Ova of *bilharzia hæmatobia* found in urinary deposit. Fig. 9. An ovum of *bilharzia hæmatobia* highly magnified. Fig. 10. Ova of *bilharzia hæmatobia*. Fig. 11. *Bilharzia hæmatobia*, after Bilharz, p. 402.

#### URINARY CALCULI.

Plate I. Fig. 1. Large uric acid calculus consisting of concentric layers of uric acid deposited upon a smaller calculus composed of oxalate of lime. Fig. 2. Beautiful example of oxalate of lime calculus, the surface of which is of a pale brown colour, and the tubercles small and delicate. Fig. 3. Mulberry calculus which was of a rich plum colour. Fig. 4. Small prostatic calculi. Fig. 5. Large mulberry calculus two-thirds the real size. Fig. 6. Phosphatic calculus. Fig. 7. Blood calculus from the infundibula of the kidney. Fig. 8. One large and two small blood calculi from the pelvis of the kidney. Fig. 9. Phosphatic calculus, the nucleus composed of a small uric acid calculus. Fig. 10. Small calculi from the kidney. The nuclei composed of soft granular material, probably disintegrated epithelium. Fig. 11. Very small calculi from the follicles of the prostate gland, p. 416.

Plate II. Fig. 12. Small compound oxalate of lime calculus found in the urine of a young man who was passing numerous dumb-bells of



oxalate of lime and crystals of uric acid. Fig. 13. Compound oxalate of lime calculus from the same case as that shown in fig. 12. Fig. 14. Urinary deposit consisting of crystals of triple phosphate, and smooth and irregularly shaped oxalate of lime calculi passed in immense numbers from a gentleman suffering from symptoms of renal calculus. Fig. 15. The same calculi as shown in fig. 14 after being treated with acetic acid. The nuclei and concentric layers of each individual calculus have been rendered beautifully distinct, p. 420.

Plate III. Fig. 1. A calculus which had undergone spontaneous fracture in the bladder. Figs. 2 and 3. Portion of a calculus which had separated before removal. Fig. 4. Another calculus which had undergone spontaneous fracture, p. 434.



Fig. 1.

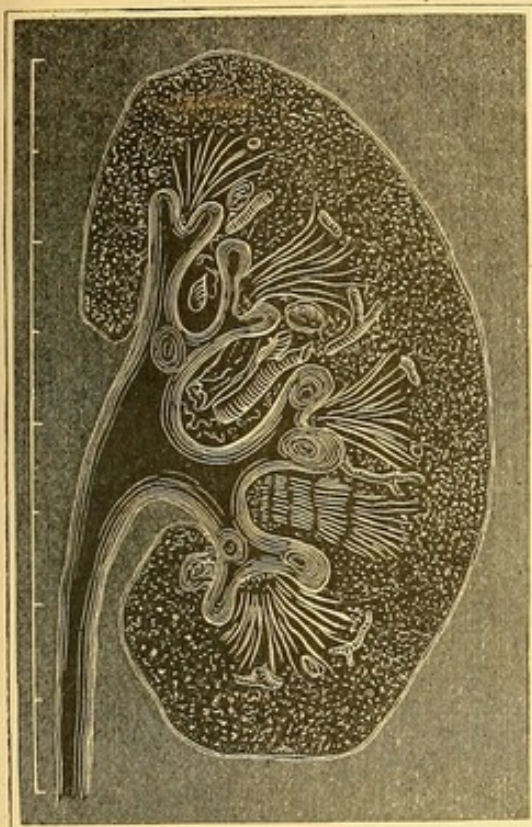
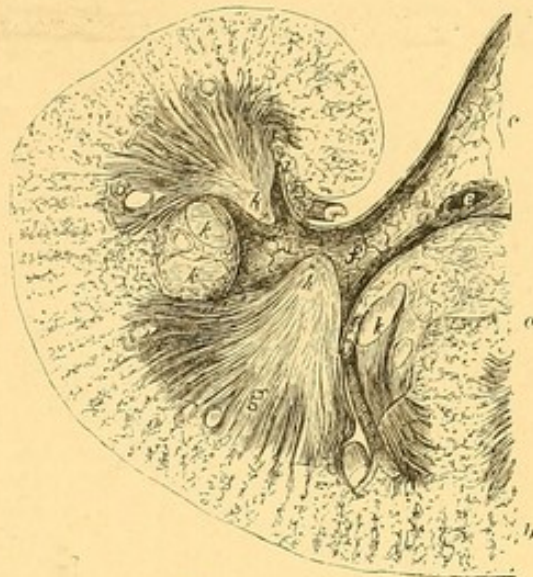


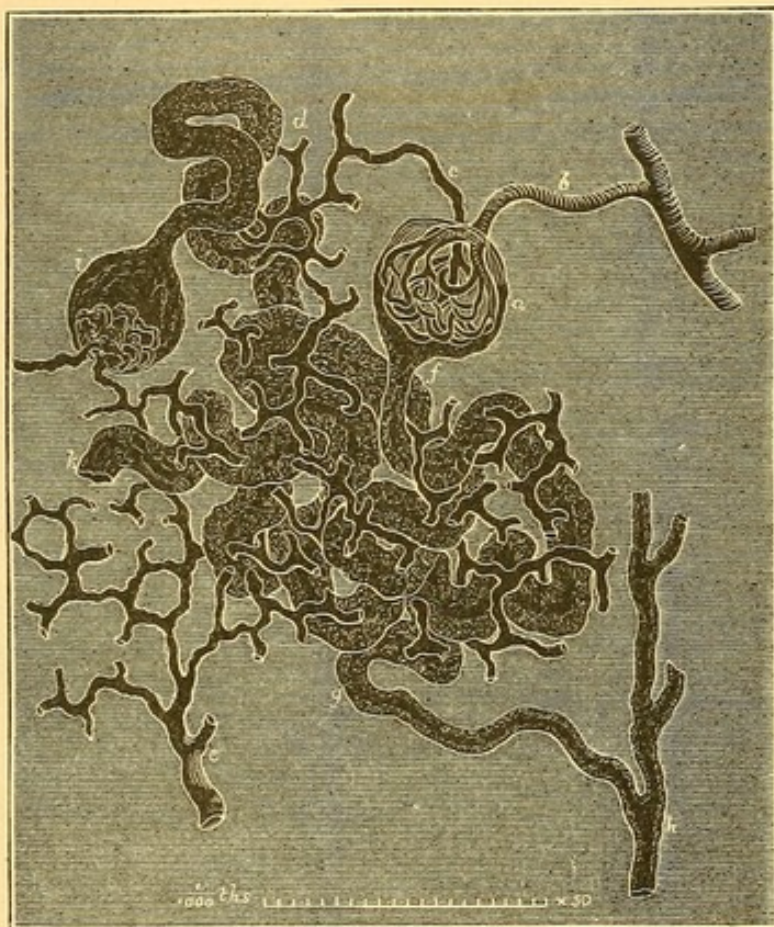
Diagram showing the general anatomy of the human kidney as seen upon section. About two-thirds the natural size. The scale at the side is divided into eight spaces representing half-inches. p. 2.

Fig. 2.



This section of a portion of the human kidney *a*, cortical; *b*, medullary portion; *c*, pelvis; *d*, infundibulum; *e*, opening of an infundibulum into pelvis; *f*, calyx; *g*, pyramid; *h*, mamilla or papilla; *i*, adipose tissue; *k*, large veins divided in making the section. Small arteries are also seen cut across in different parts of the section, some large branches being situated between the cortex and the medullary portion of the organ. p. 3.

Fig. 3.



The secreting portion of the human kidney, showing the uriniferous tube, *k*, commencing in a flask like dilatation, *a*, *i*, which embraces the capillary vessels of the Malpighian tuft; *b*, a branch of the artery, afferent vessel, which enters the Malpighian tuft; *c*, the vein or efferent vessel. x about 50. p. 3.



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## STRUCTURE OF THE KIDNEY.

### PLATE II.

Fig. 4. Part of the cortex, with the commencement of the medullary portion of the kidney, magnified 15 diameters. *a.* Branches of artery. *b.* Afferent vessels of tuft. *c.* Malpighian tufts. *d.* Efferent vessel of tufts. *e.* Network of capillaries, into which the blood, after having traversed the capillary loops of the tuft, is carried. *f.* Small radicles of renal vein, by which the blood is returned to the large trunks. *g.* Long and almost straight vessels (*vasa recta*), into which the efferent vessel of those tufts situated at the bases of the pyramids, divides. These straight vessels may be traced for some distance towards the apex of the cone. *h.* Veins in the same situation, which return the blood to the large venous trunk, *i.* *k.* Capillary network in the pyramids. *l.* Portion of the capillary network of the cortex, where the meshes are elongated, corresponding to the direct course which many of the uriniferous tubes take, at regular intervals, in the cortex. *m.* Network of other parts of the cortex, in which this arrangement is not observed, *n.* Malpighian bodies not injected. *o.* Convoluted portion of uriniferous tube. *p.* Tubes having a direct course towards the cones, situated at regular intervals through the cortex. At *l* would be situated another parcel, and at *q* a third. The arteries pass in the intervals between these, as represented. *q.* One of the tubes isolated. I have never been able to demonstrate the branches represented, in the human subject, but from their existence in some of the lower animals, it is probable that a similar arrangement may be found in the higher. The branches *r* must therefore be considered merely diagrammatic. *r.* Branches continuous with the convoluted portion. *s.* Wavy portion of uriniferous tube, at the commencement of the cones. *t.* Capsule of kidney. *u.* Uriniferous tube, with Malpighian tuft and capillary vessels complete. *v.* Capillary network, with fragments of uriniferous tubes, from which the epithelium has been washed out (the so-called *matrix* of the kidney).

Fig. 5. Uriniferous tube, with dilated extremity, which embraces the vessels of the Malpighian tuft. The epithelium is seen in the convoluted portion of the tube, but cannot be traced within the capsule in the human subject.

Fig. 6. Small artery, with tuft and capillary network, accurately copied from a specimen. The artery is seen to divide into three or four branches, and each of these gives off capillary loops, which divide and subdivide for some distance before they communicate with those of another division. The letters refer to the same parts as indicated in fig. 1. Every part of fig. 1, with the exception of *q*, *r*, has been copied from actual specimens, prepared from a number of kidneys. The separate drawings thus obtained have been grouped in their proper position, in order to complete the drawing. Fig. 5 is partly copied from nature. Fig. 6 is entirely traced from a preparation. The injection employed for making the specimens was the Prussian blue fluid.\*

\* "How to work with the Microscope."



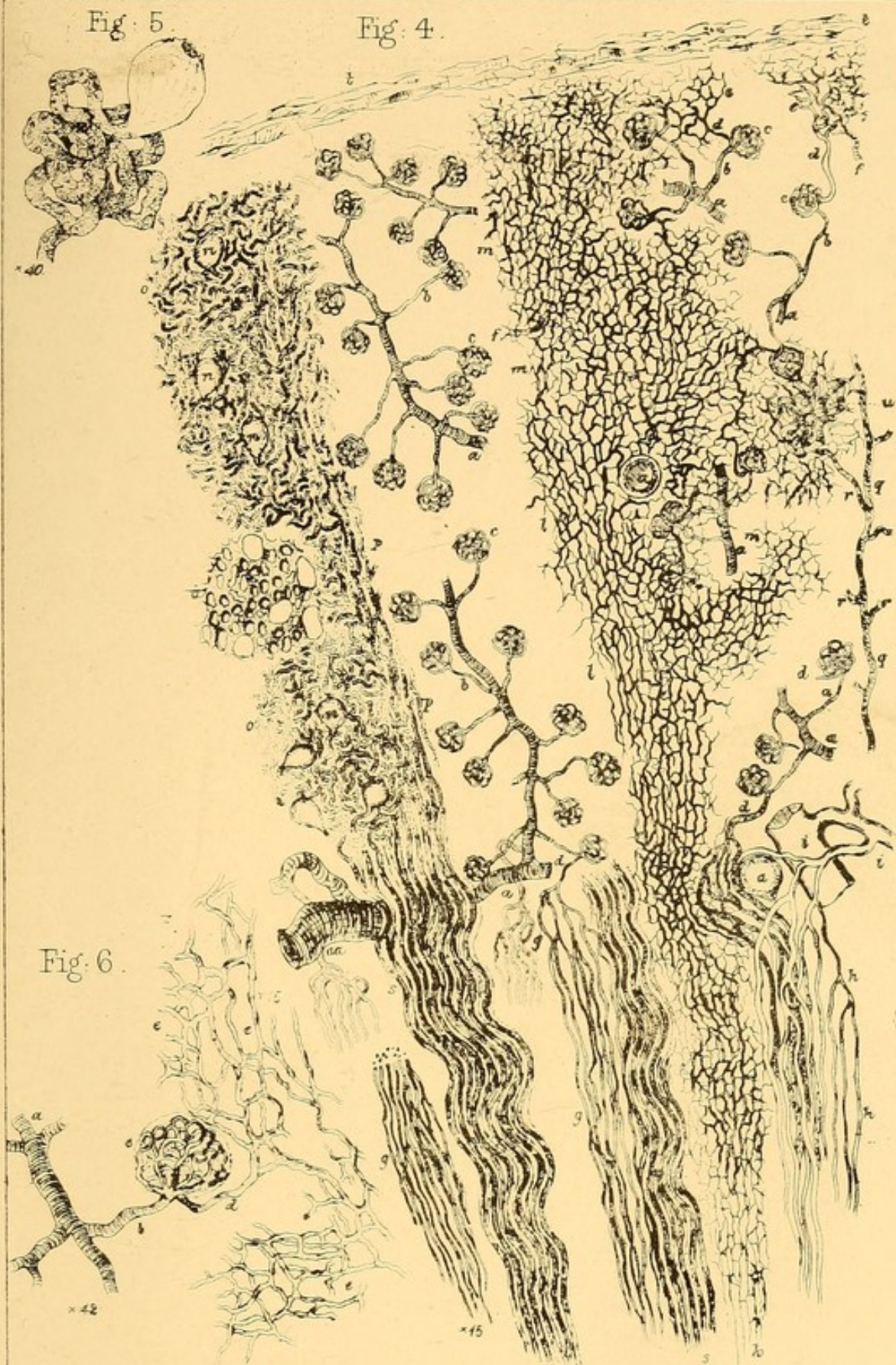




Fig. 5

Fig: 4.

Fig. 6.

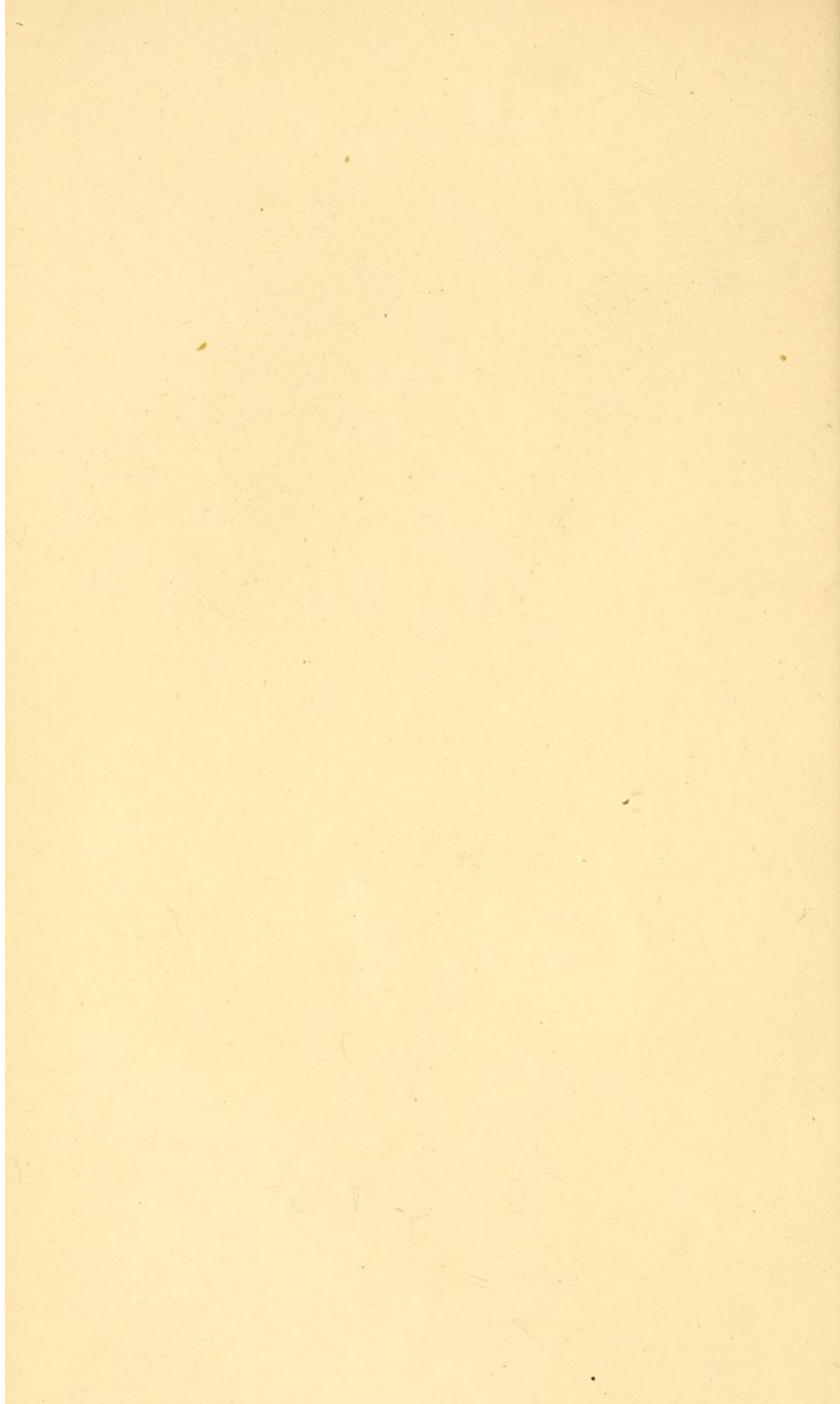


100 lbs : \_\_\_\_\_  $\times 42$   
100 lbs : \_\_\_\_\_  $\times 15$

100 mms x 15

L. S. B. 1858.







# STRUCTURE OF THE KIDNEY.

## PLATE III.

### EPITHELIUM OF URINIFEROUS TUBE, PELVIS OF THE KIDNEY, URETER, AND URETHRA.

Fig. 7. Convoluted portion of uriniferous tube with epithelium, from the cortical portion of the kidney. *a.* Basement membrane. *b.* Epithelium. *c.* Part of tube from which the epithelium has been squeezed out, leaving only the basement membrane. *d.* Capillary vessels containing transparent injection, showing their relation to the wall of the tube. *e.* Separate cells of epithelium magnified 403 diameters.

Fig. 8. Straight portion of uriniferous tube from the base of a pyramid. *a.* Basement membrane. *b.* Epithelium. *c.* A tube from which the epithelium has been removed. *d.* One of the large straight vessels found among the tubes in the pyramids. *e.* Capillaries also present in this part of the kidney. *f.* Separate epithelial cells magnified 403 diameters.

Fig. 9. Epithelium from the pelvis of the kidney, in part tessellated (*a*) and in part columnar.

Fig. 10. Epithelium scraped from the surface of a pyramid.

Fig. 11. Epithelium from the ureter, entirely columnar.

Fig. 12. Columnar epithelium from the urethra.

The specimens from which all these drawings were copied, were taken from the organs removed from the body of a man, aged 40, who died of pneumonia, otherwise healthy.

The vessels of part of the kidney were injected with Prussian blue fluid,\* in order that the relation of the capillaries to the uriniferous tubes might be distinctly made out. The character of the epithelium lining the convoluted portion of the uriniferous tube is represented at *e* (fig. 7). Generally, the cell does not exhibit a distinct outline as is usually represented, although, on the contrary, the outline of the nucleus is often sharp and well defined. The material around the nucleus usually appears granular, and I am not satisfied as to the existence of a distinct cell-membrane. The nuclei are very large, and may easily be mistaken for the entire cell. The epithelium in the straight part of the uriniferous tube in the medullary portion of the kidney is flatter, and its outline is more distinct. In the cortex, the epithelium takes part in *secretion*, but in the medullary portion of the organ it probably corresponds to the epithelium of the *ducts* of glands generally. Many vessels in this part of the kidney pursue a very straight course, and are of large size, their diameter being equal to, or even greater than, that of the tubes, *d* (fig. 8).

\* For the composition of this fluid, see "How to work with the Microscope."



ANNUAL REPORT

OF THE COMMISSIONER OF THE LAND OFFICE  
FOR THE YEAR 1887

AND  
OF THE  
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Fig. 7.

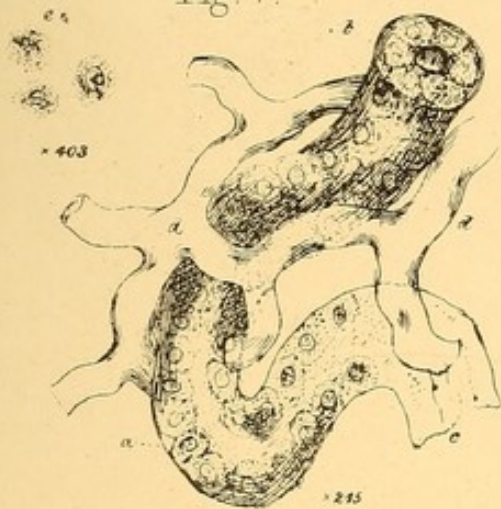


Fig. 8.

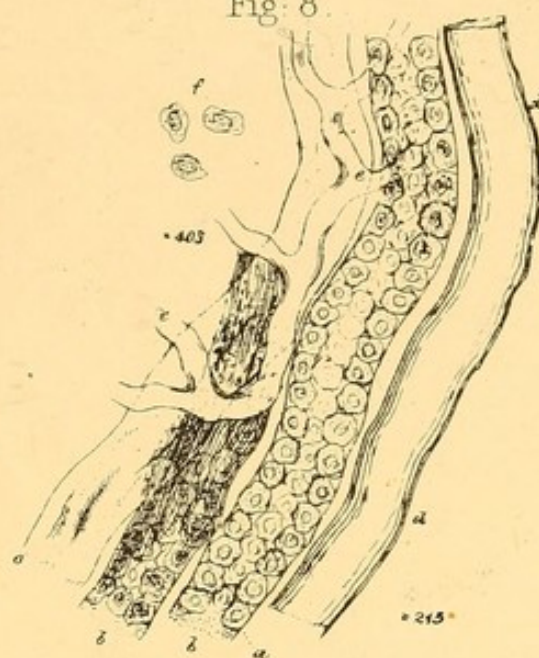


Fig. 9.

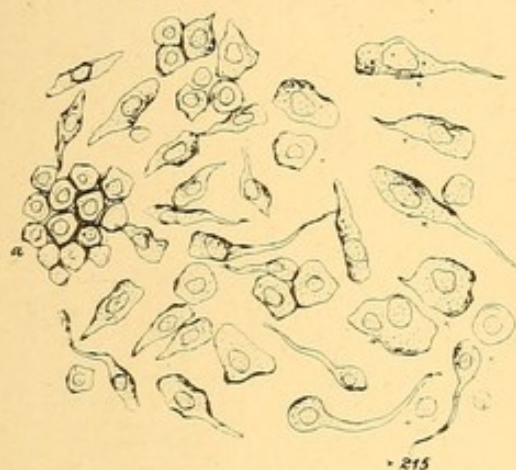


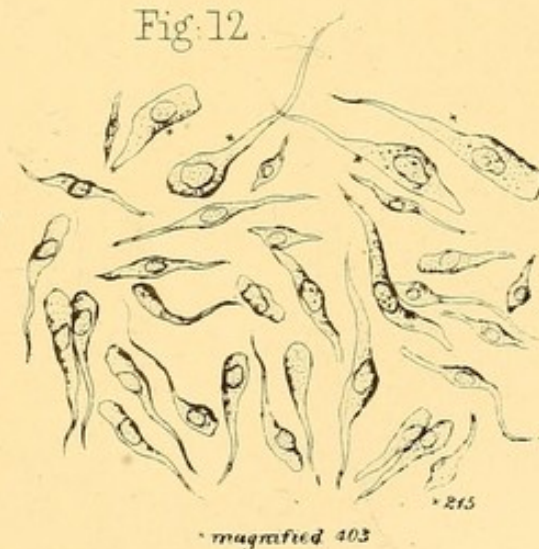
Fig. 10.



Fig. 11.

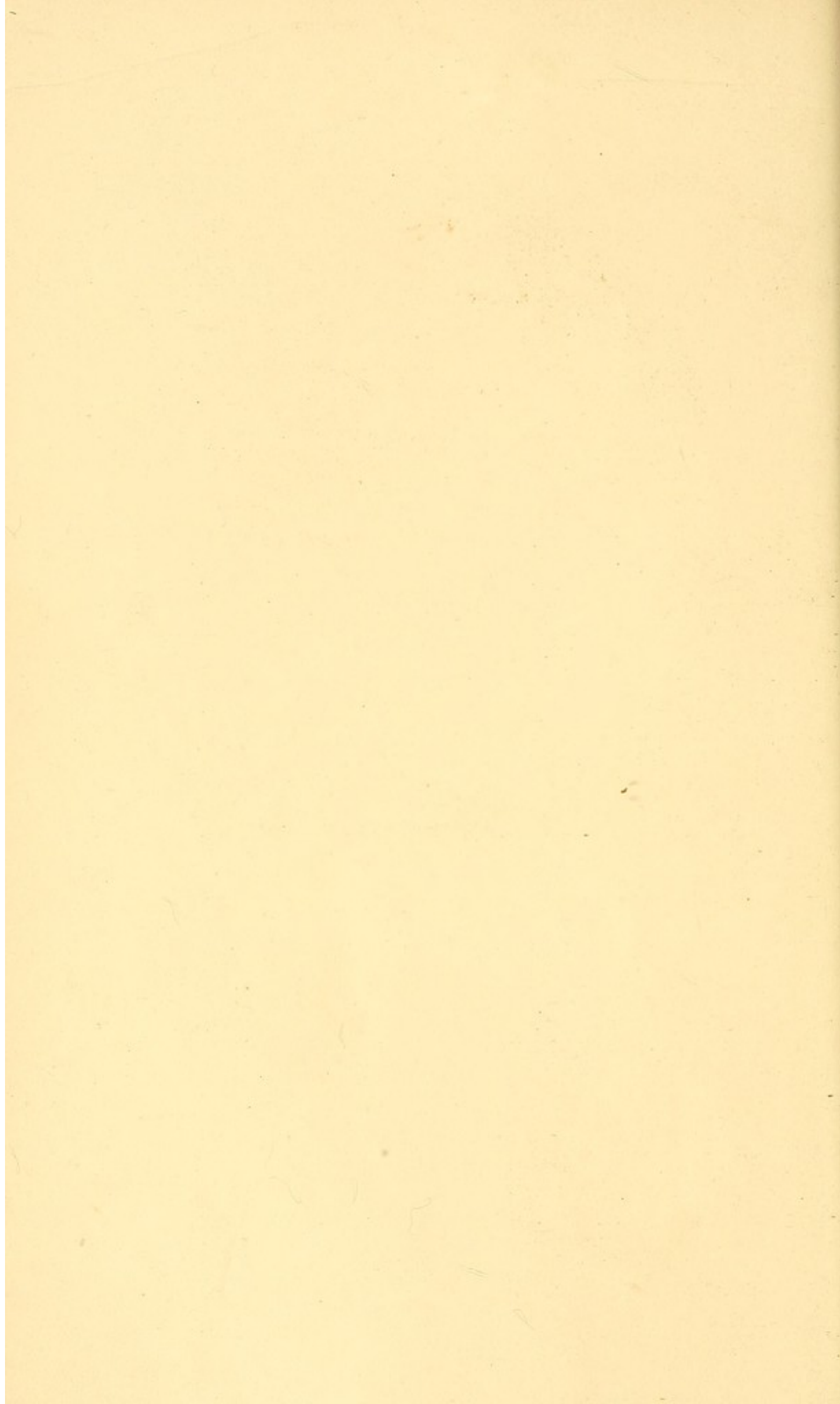


Fig. 12.



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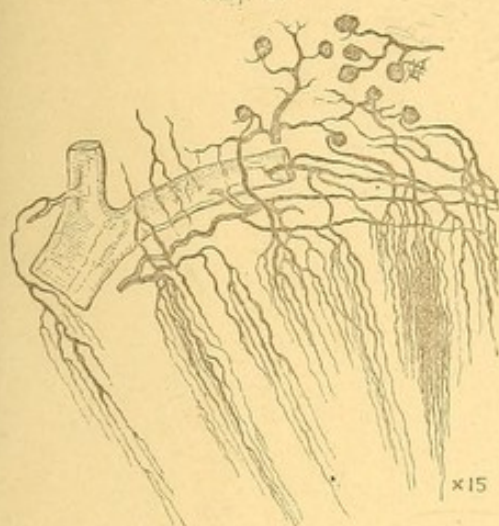






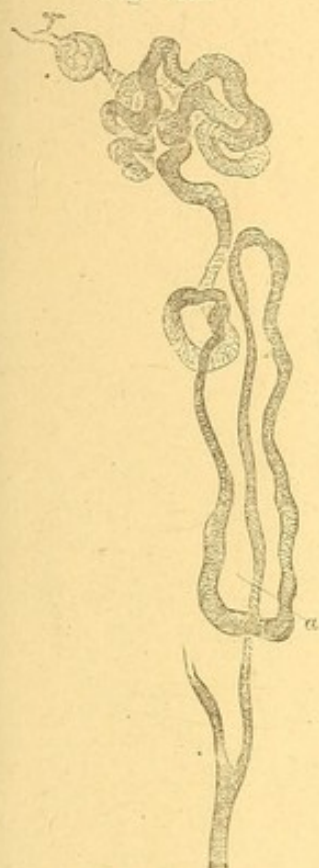
STRUCTURE OF THE KIDNEY.

Fig. 13.



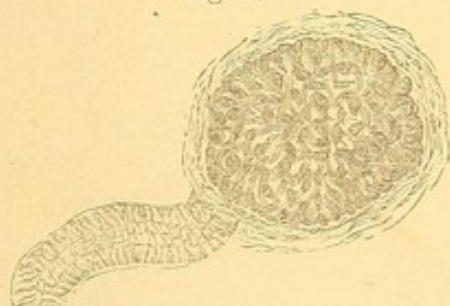
Vasa recta in the pyramidal portion, and Malpighian bodies in the cortical portion. At about the point of union between cortical and straight portions of kidney. p. 7

Fig. 15A.



Uriniferous tube bent upon itself at *a* in the pyramid of the kidney. The looped tube of Henle. p. 10.

Fig. 17A.



Young and growing Malpighian body of a child, age 2½ years. The muscular fibre cells are seen on the small artery quite close to the Malpighian body. x 215.

Fig. 16.



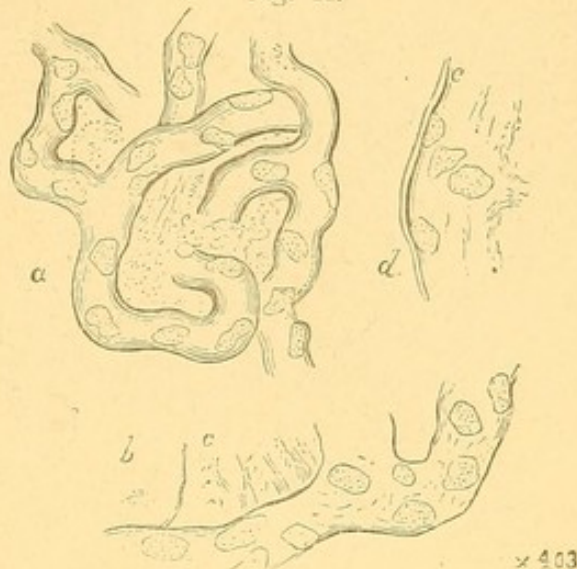
Epithelium from a uriniferous tube. Human kidney. *a*, treated with acetic acid. p. 13. x 215.

Fig. 17.



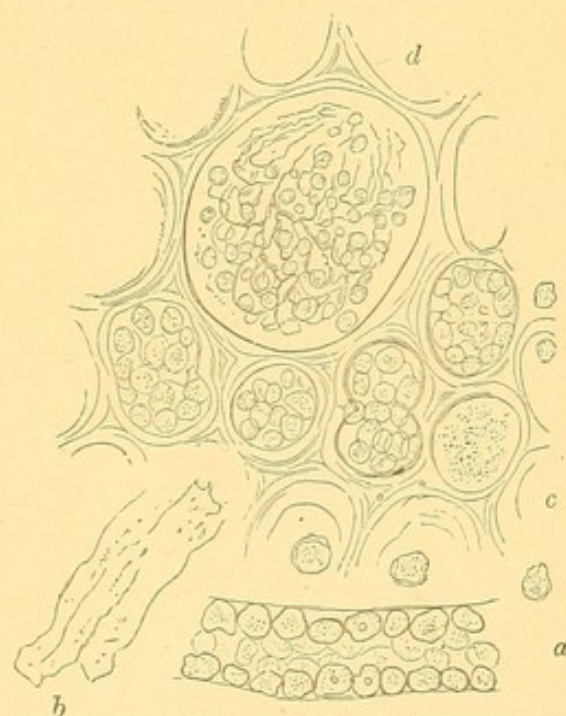
Epithelium from the pelvis of the healthy human kidney. p. 14. x 215.

Fig. 14.



Capillary vessels from Malpighian tuft of human kidney, showing the nuclei connected with their walls. *a*, a few coils separated from the rest of the tuft. *b*, part of a loop somewhat compressed, showing the nuclei a little flattened. *c*, tissue which connects the coils with each other, by which the globular form of the tuft is preserved even when it is removed. *d*, a small portion of a capillary compressed as much as possible, showing thickness of capillary wall at the point of reduplication. p. 8.

Fig. 15.



Thin section of healthy human kidney, slightly washed in water. *a*, convoluted portion of uriniferous tube. *b*, portion of a tube stripped of its epithelium. *c*, outline of tube and crumpled capillaries, having a fibrous appearance—the so-called matrix. *d*, very small Malpighian body: loops of vessels shrunk, showing cells in their walls. x 215. pp. 18, 20.

Fig. 18.



Epithelium from the ureter. p. 14. x 215.







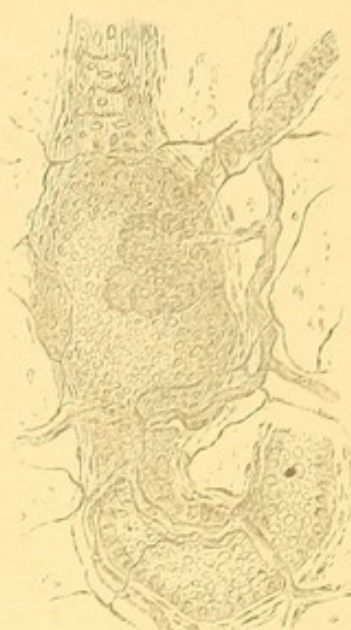
Fig. 19.



A part of the convoluted portion of a uriniferous tube from the newt's kidney, showing capillary vessels and nerve-fibres, and the thickened basement membrane continuous in structure with the connective tissue.

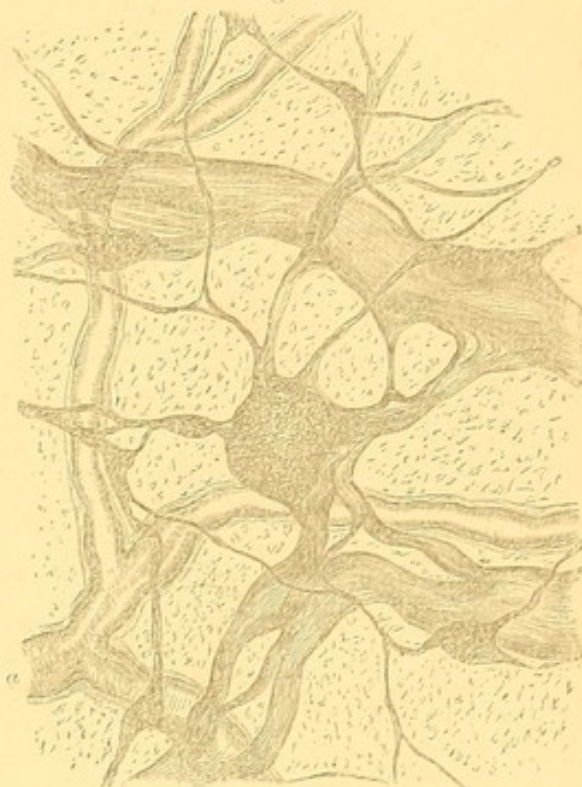
x 215, pp 18 19.

Fig. 19A.



albugin body and tube of the newt's kidney  
x 130, pp 18, 19

Fig. 20.



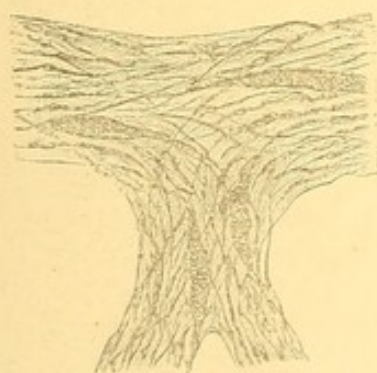
Ganglia. Hilus of kidney. Young pig. a, a small artery. x 20 p. 15.

Fig. 21.



Ganglion from the pelvis of the kidney of a boy 3 years of age, showing small arteries and capillaries, nerve cells and bundles of nerve fibres. x 215, p. 15.

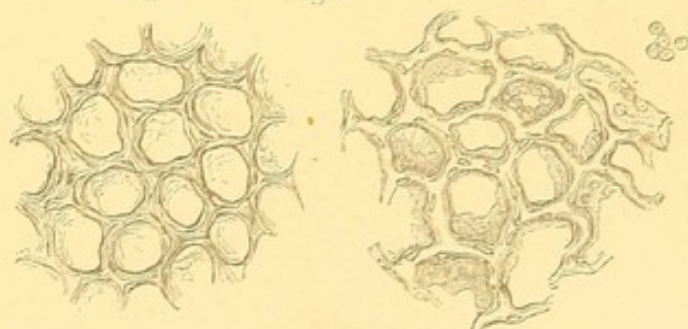
Fig. 22.



Delicate nerve fibres entering into the formation of the bundles connected with the ganglia of the kidney, showing their arrangement and their nuclei.

x 100, p. 15.

Fig. 23.



a, section of cortical portion of healthy kidney (human). Washed in water and examined in the same medium. The capillaries were not injected, and having collapsed and shrunk exhibit the fibrous appearance which is considered to depend upon the matrix. b, section of another part, in which the vessels were injected. The nuclei on their coats are seen, but no "fibrous matrix." x 100, p. 20







## STRUCTURE OF THE KIDNEY.

### PLATE VI.

Fig. 24. Section of the cortical portion of a human kidney, the vessels of which have been injected with the Prussian blue solution. *a*. Membrane of the tubes. The *a* to the right of the figure shows the position of a Malpighian body: *b* a portion of a capillary loop of a Malpighian body: *c* venous capillaries lying between the uriniferous tubes. In many places the double shaded line indicates the basement membrane of the tubes: *d* position of the uriniferous tubes.

Fig. 25. Transverse section at the base of a pyramid.

Fig. 26. A similar section a short distance lower down, showing sections of the uriniferous tubes. The small tubes join the larger ones at a point lower than that at which the section is made.

Fig. 27. Section nearer the apex of the pyramid.

Fig. 28. Apex of a pyramid showing the manner in which the uriniferous tubes open into the pelvis of the kidney.







Fig. 24



Fig. 25

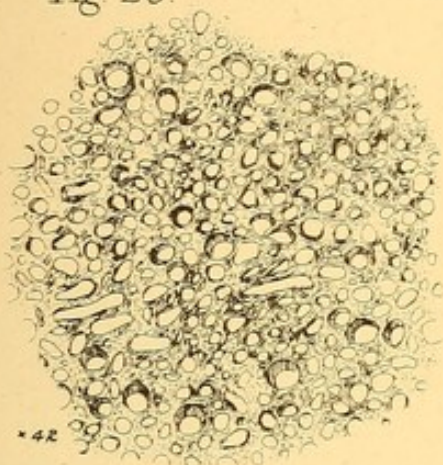


Fig. 26

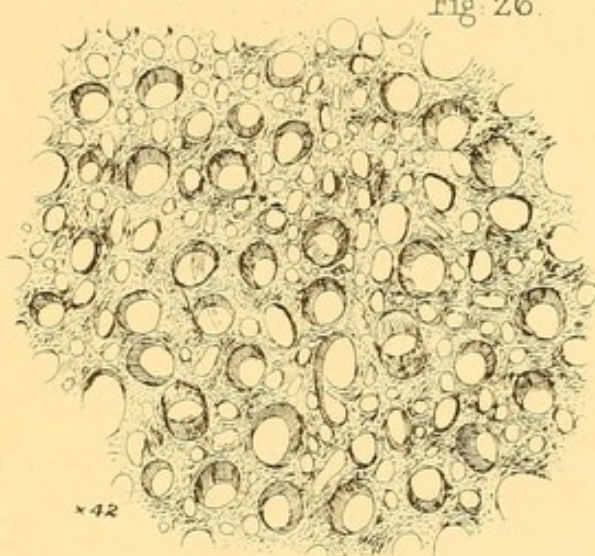


Fig. 27

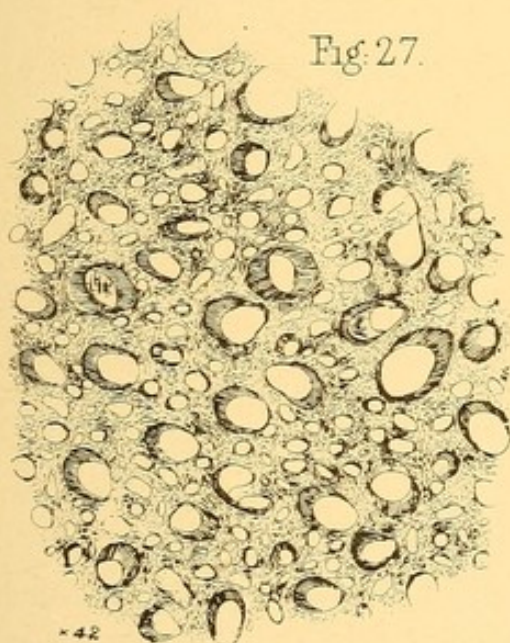
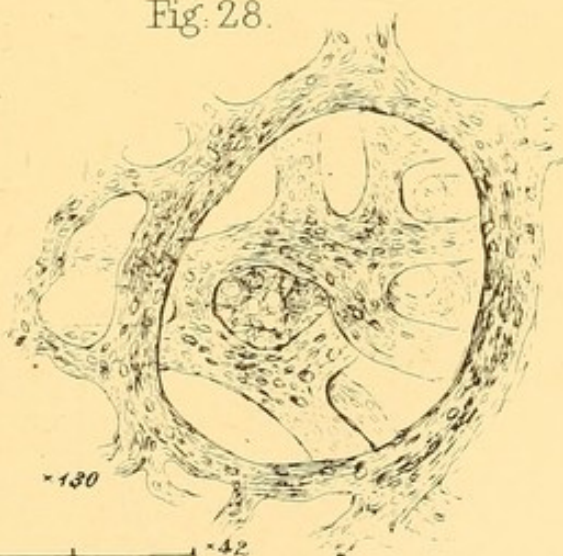


Fig. 28





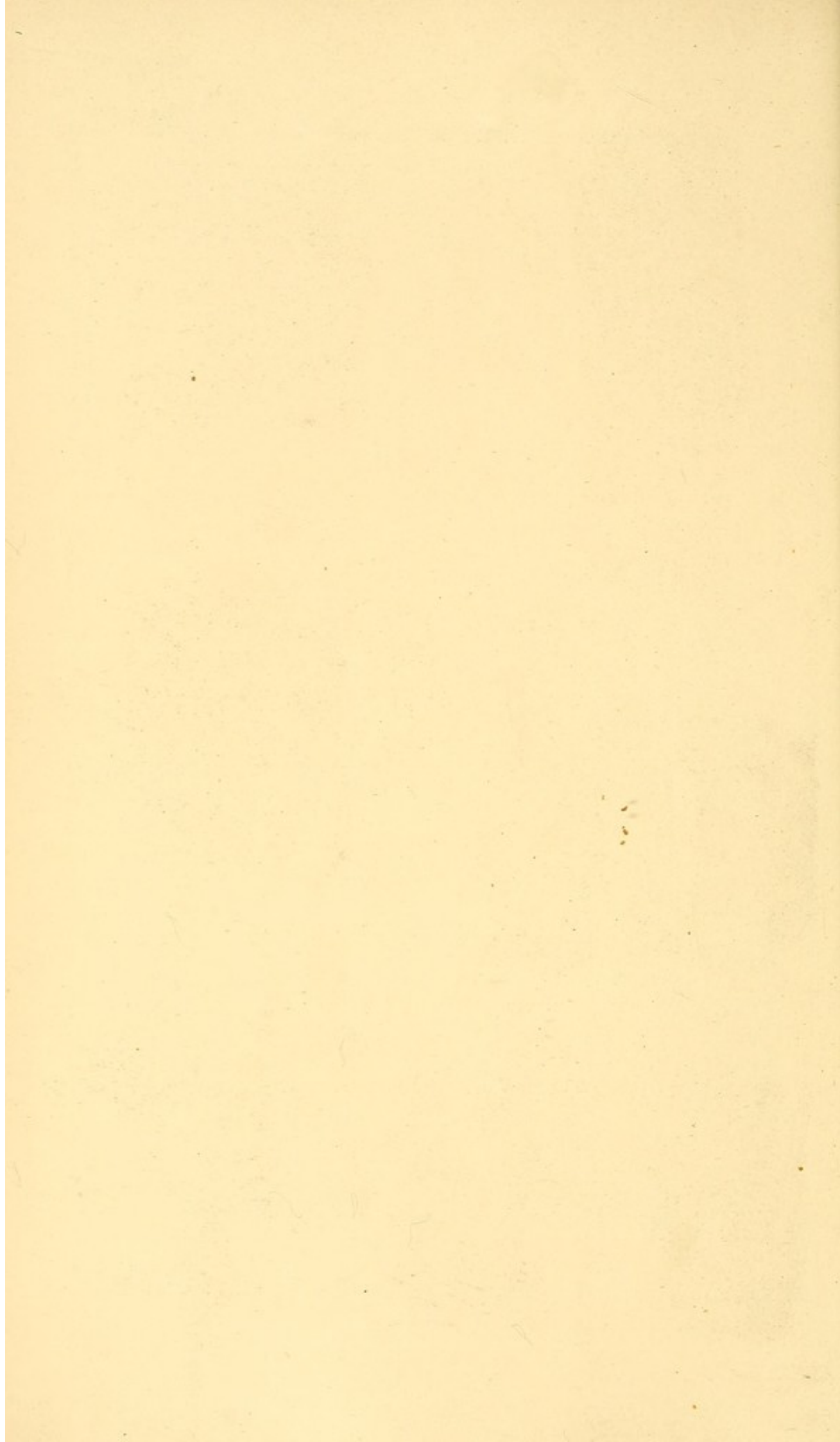


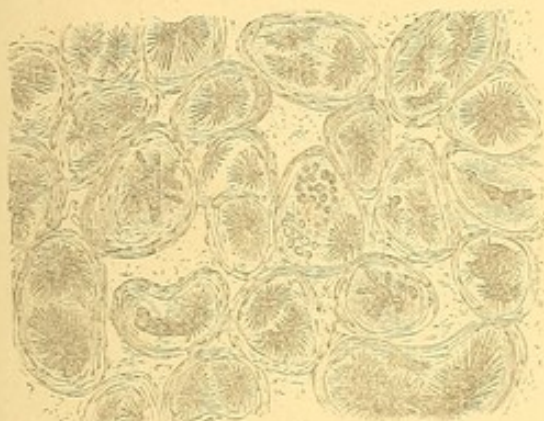


Fig. 29.



Uriniferous tubes, some of which are  
choked with a deposit consisting of  
albuminous matter and blood.  
x 29. p. 12.

Fig. 30.



Transverse section of the tubes of the kidney of a snake.  
occupied by large crystals of uric acid. x 29. p. 12.

Fig. 31.



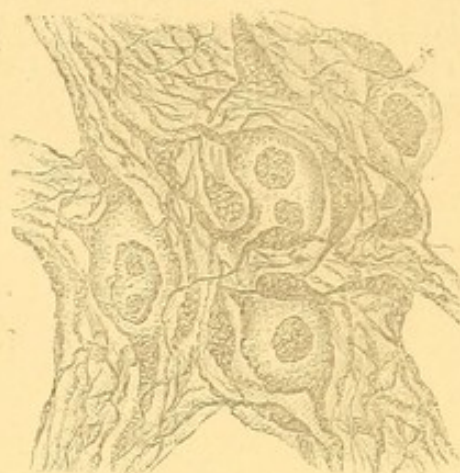
Crystals of leucine in the  
substance of kidney. Human  
subject. x 29. p. 12.

Fig. 32.



Crystals of leucine more highly  
magnified. From the same  
specimen. x 215. p. 12.

Fig. 33.



A small portion of the small ganglion represented  
in Fig. 21, Plate V., but magnified 100 diameters,  
showing ganglion cells and their connexion with  
the nerve fibres. p. 13.

Fig. 34.



Tubes of human kidney. With earthy phosphates  
precipitated amongst the cells. x 215. p. 12.

Fig. 35.



a. portion of uriniferous tube;  
b. capillary vessel; and c. nerve  
fibres. Kidney, child, age 3.  
x 700. p. 21.

[To follow PLATE VI.]



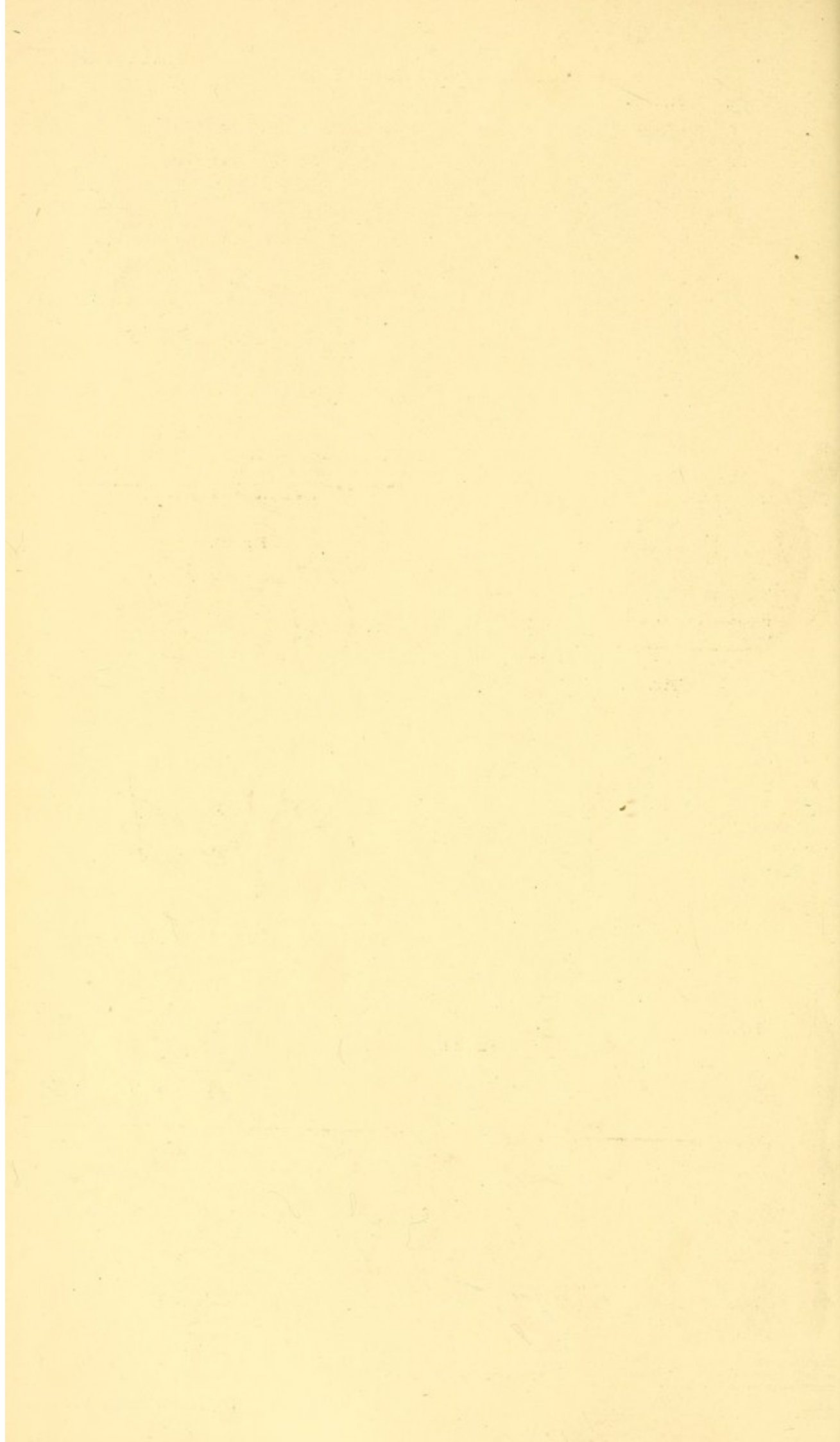
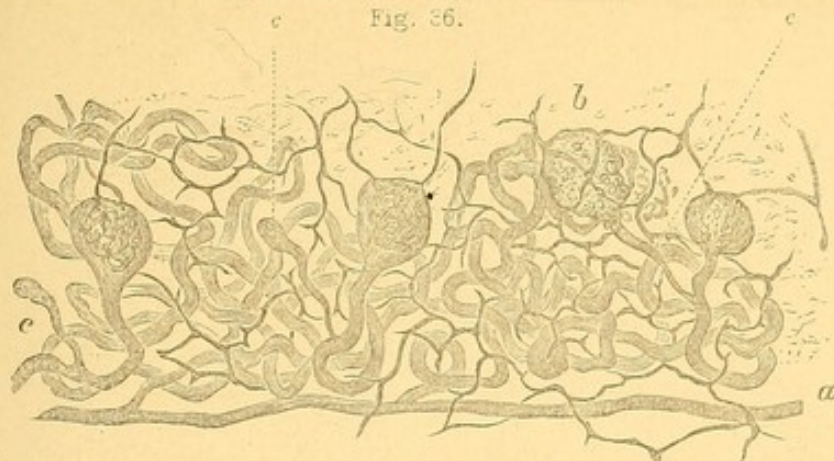


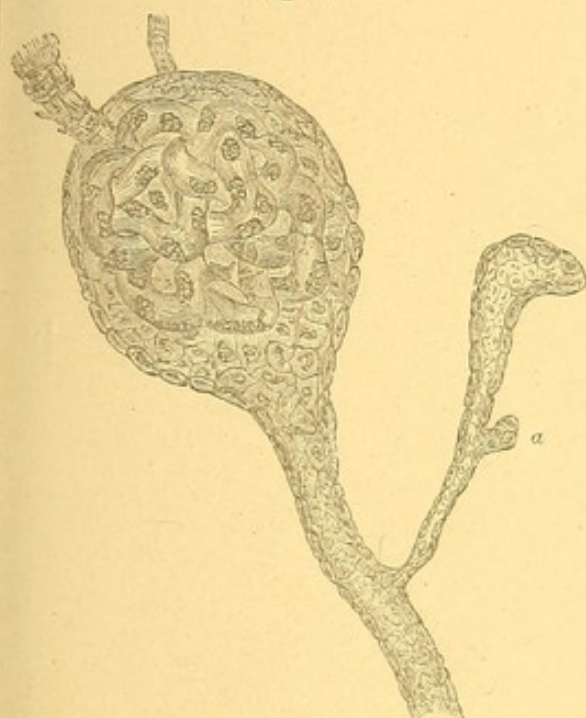


Fig. 36.



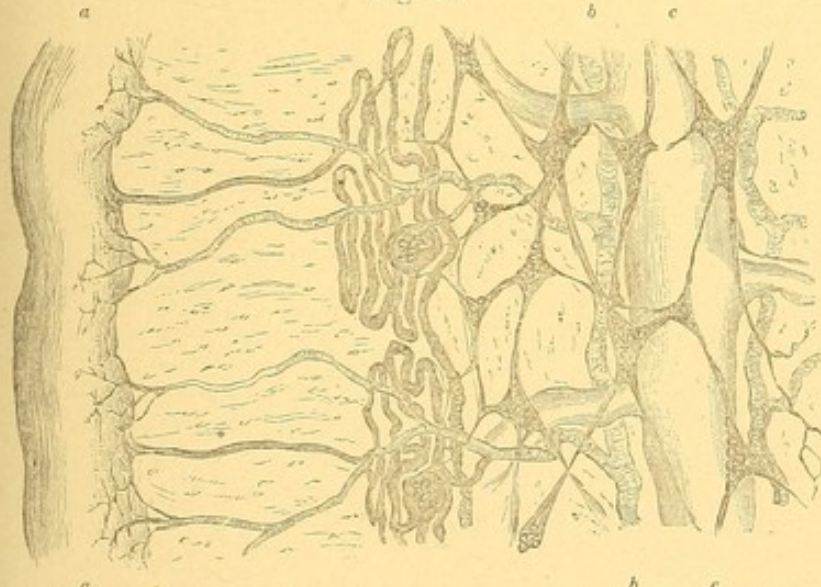
Part of the thin portion of the kidney. Female newt. *a*, portion of straight tube continuous with ureter. *b*, collection of fatty matter, perhaps a wasted Malpighian body. *cc*, remarkable diverticula connected with tubes just below the Malpighian body. The capillaries are also represented.  $\times 40$ . p. 28.

Fig. 37.



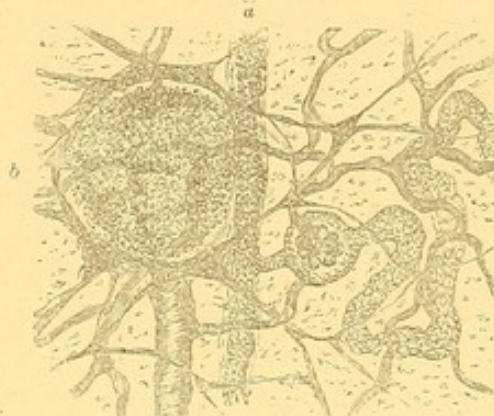
Malpighian body and portion of uriniferous tube, with remarkable diverticulum. Female newt. At *a*, a bud projects from the diverticular tube as if a branch were growing from it.  $\times 130$ . pp. 28, 29.

Fig. 39.



Distribution of nerves and ganglia over thin part of the kidney of male newt. *a*, vas deferens; the uriniferous tubes opening into it. *b*, artery. *c*, vein. The numerous ganglia and nerve fibres are seen ramifying over the vessels and tubes.  $\times 30$ .

Fig. 33.



Tube, *a*, containing spermatozoa, from which some Malpighian bodies and uriniferous tubes of the male newt are developed. An old ganglion which has undergone degeneration, and new ganglion cells, are also seen at *b*.  $\times 40$ . p. 29.

Fig. 40.



Diverticulum from tube. Kidney, male newt. p. 36.

Fig. 41.



Tube containing spermatozoa, showing connection with uriniferous tubes and Malpighian bodies. One of the latter is double. Male newt.  $\times 30$ .

[To face page 33.]



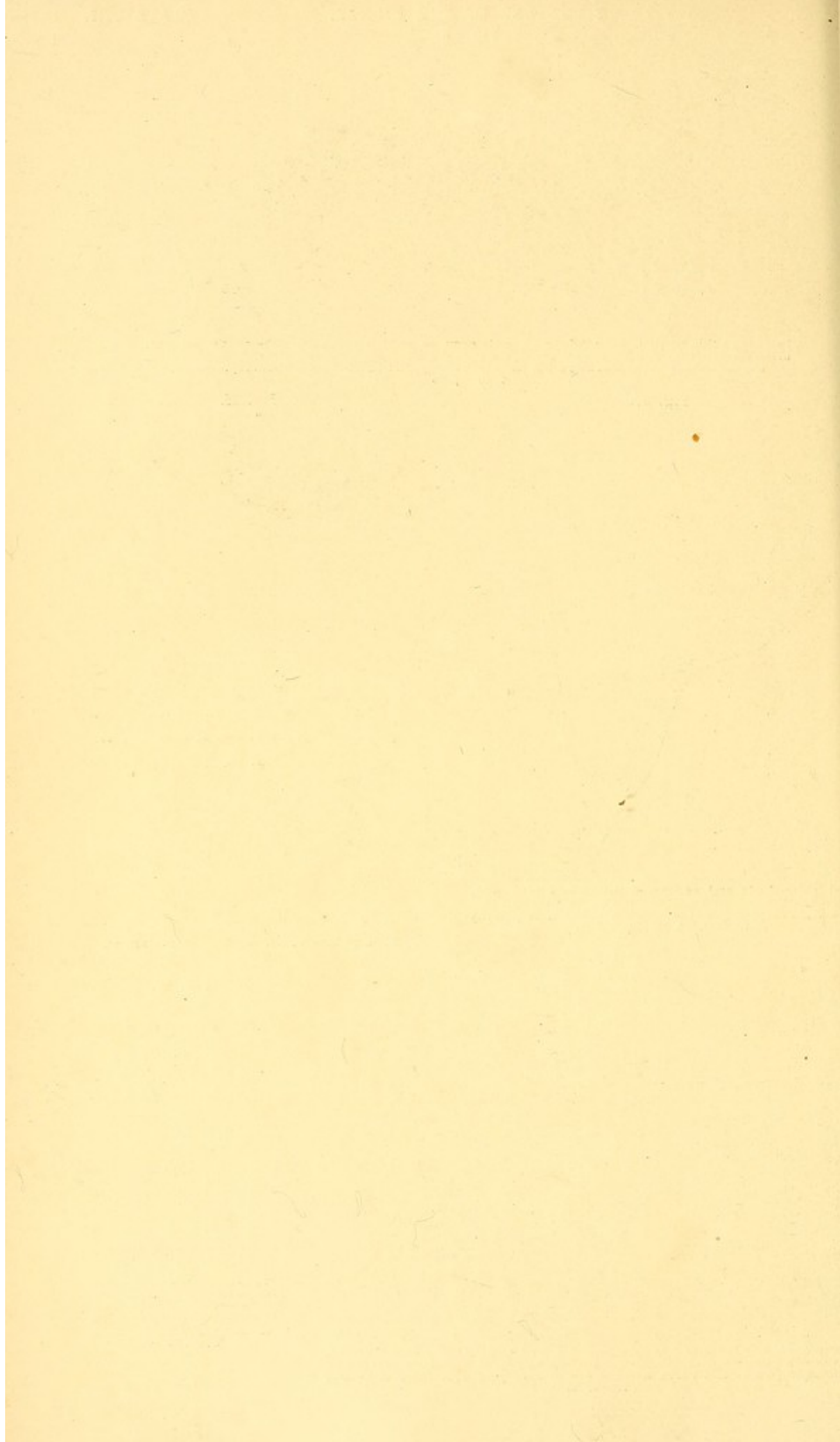
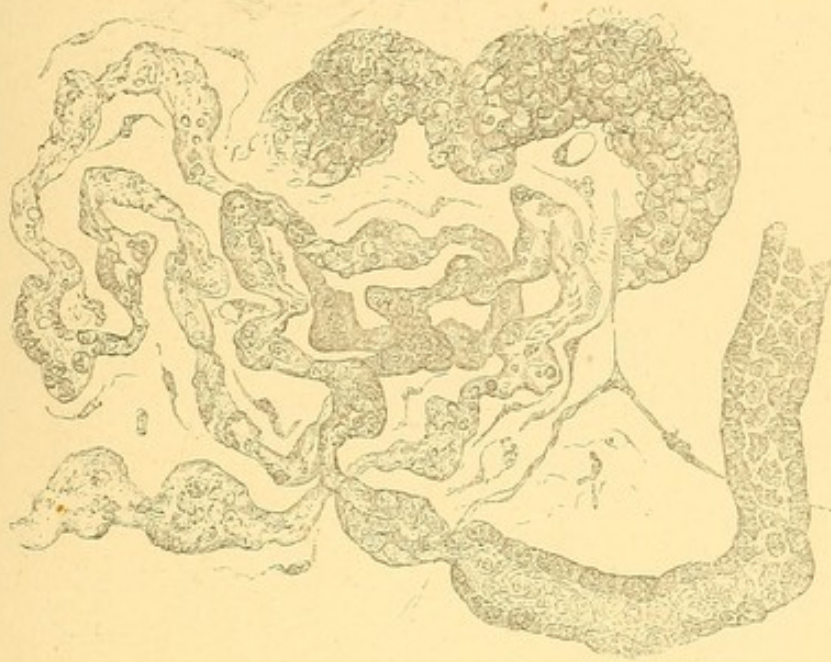


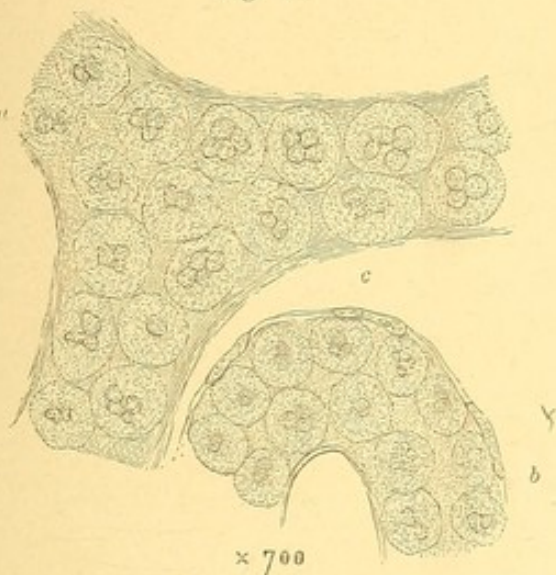


Fig. 42.



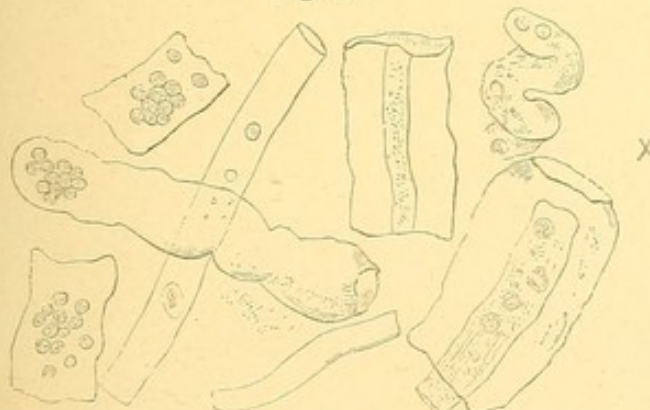
Tube of kidney of female newt, part of which has undergone degeneration and wasting. The healthy portion of the tube is seen to the right of the figure. Nerve fibres are also seen in some places.  $\times 215$ . p. 31.

Fig. 43.



a, portion of a capillary vessel of the kidney, distended with altered white blood corpuscles. b, round flattened cells from inner surface of capsule of the Malpighian body. c, nucleus of capillary wall. Acute suppurative nephritis. p. 45.

Fig. 45.



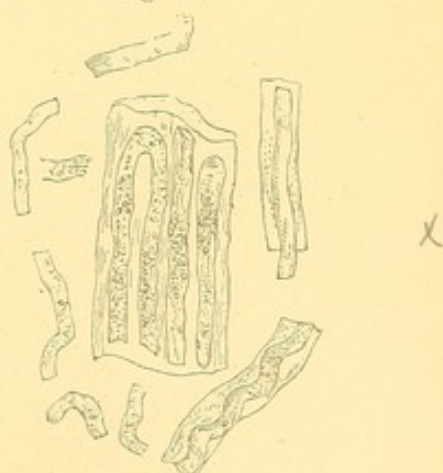
Casts containing cells like pus and blood corpuscles. Acute suppurative nephritis. Three days before death. p. 49.

Fig. 44.



Portion of a cast magnified 700 diameters, with cells in the central part resembling white blood corpuscles or pus corpuscles, which have probably multiplied while they were entangled in the coagulable material of the cast. p. 49.

Fig. 46.



Small casts formed in the convoluted portion of the uriniferous tubes, which have become embedded in transparent material during their passage down the straight portion.  $\times 50$ . p. 49.







Fig. 47.



portion of a cast, with distinct nuclei and granular contents. Acute nephritis.  $\times 700$ .

Fig. 48.



Bodies found between the capillaries of the Malpighian body and the walls of the capsule. Case of acute suppurative nephritis.  $\times 700$ .

Fig. 49.



A portion of one of the capillary loops of a Malpighian body, distended with modified white blood corpuscles.  $\times 700$ .

Fig. 50.



Separate cells found in the urine. Case of acute suppurative nephritis.  $\times 700$ .

Fig. 51.



Malpighian bodies, showing different degrees of wasting.  $\times 40$  p. 60.

Fig. 52.



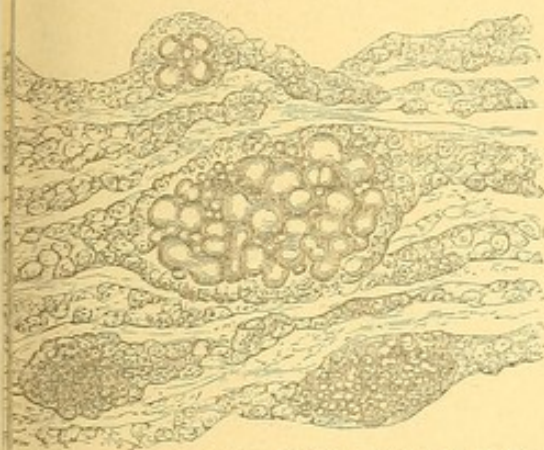
Tubes of the kidney degenerated and wasted.  $\times 215$  p. 94.

Fig. 53.



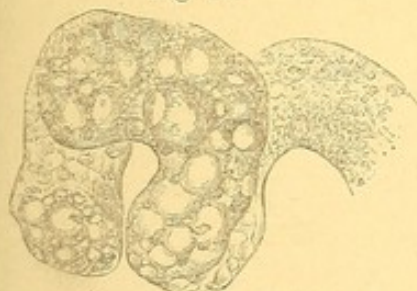
Multiplication of masses of germinal matter about tubes prior to wasting.  $\times 215$  p. 13.

Fig. 53\*.



Dumb-bell crystals of oxalate of lime, impacted in the spaces of a kidney, forming minute calculi.  $\times 215$  p. 12.

Fig. 54.



Portion of a tube from the cortex of the kidney of a healthy (?) cat, containing much oil.  $\times 215$  p. 98.

Fig. 55.



Malpighian body and portions of uriniferous tubes, with capillary vessels containing much oil. From a kidney of a diabetic.  $\times 215$  p. 60.

[To follow PLATE IX.]



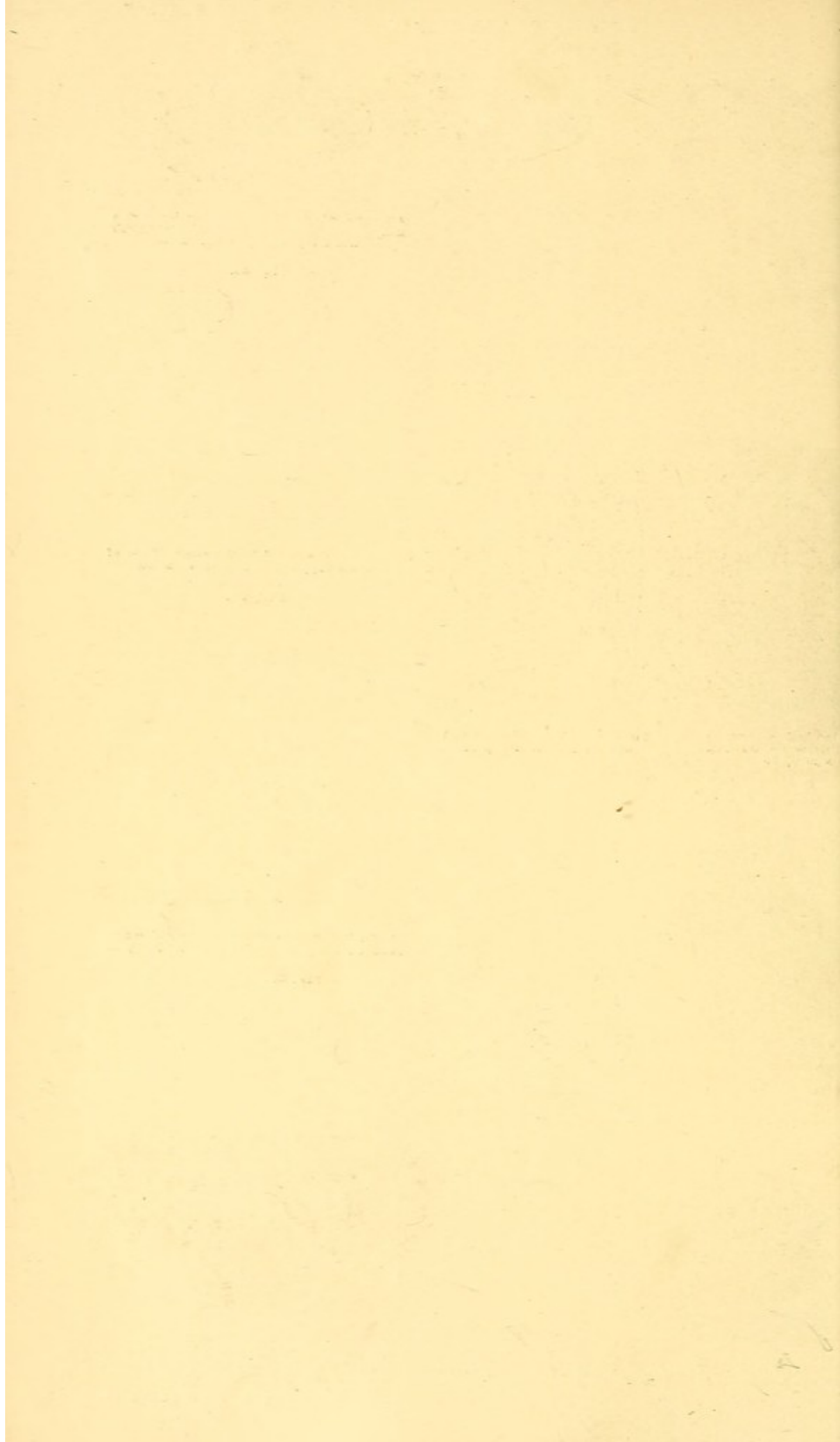


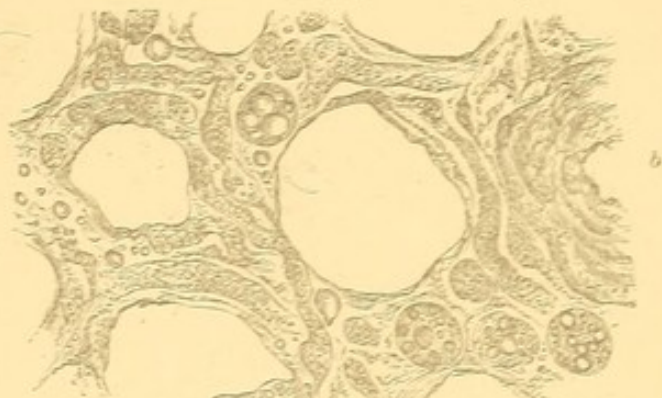


Fig. 56.



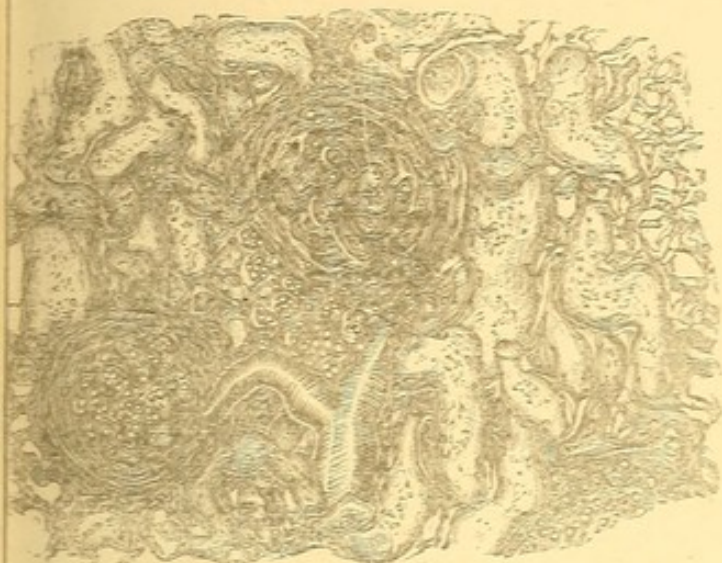
wasting tube, with oil globules in the interior.  
a tube containing transparent waxy cast, with  
terminal matter resulting from altered epithelium.  
Fatty and contracting kidney.  $\times 215$ .

Fig. 57.



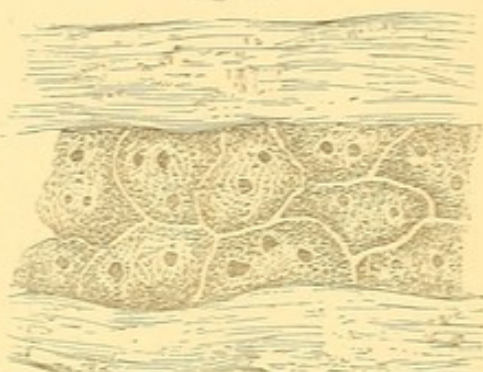
A thin section of the cortex of a fatty and contracting kidney,  
showing the remains of tubes and vessels in what is generally  
considered as the 'matrix'. a, the remains of a tube appearing as  
a connective tissue corpuscle. b, small artery with thickened walls.  
 $\times 215$ . pp. 53, 54.

Fig. 58.



Section of cortex of fatty and contracting kidney.  $\times 130$ . p. 54.

Fig. 59.



Epithelium of tube much altered. Walls of  
tube much thickened.  $\times 300$ . Fatty and con-  
tracting kidney. p. 55.

Fig. 61.



Capillaries, Malpighian body.  
Fatty and contracting kidney.  
Bacteria are seen in the inter-  
rior of the vessel, the walls  
of which are very much  
thickened.  $\times 300$ .

Fig. 60.



Loops of vessels of the Malpighian tuft, distended with  
granular matter, and containing oil globules.  
 $\times 115$ . p. 55.

Fig. 63.



Portion of altered tube,  
with a bud growing  
from it. Fatty and con-  
tracting kidney.  
 $\times 200$ . p. 56.

Fig. 62.



Portion of very transparent matrix, showing the remains  
of uriniferous tubes. Fatty and contracting kidney  
 $\times 300$ . p. 56.

Fig. 63\*.



Section of uriniferous tubes in various states of wasting  
and degeneration. Fatty and contracting kidney. In  
some of the tubes there is much oil.  $\times 215$ .

[To face page 54.]





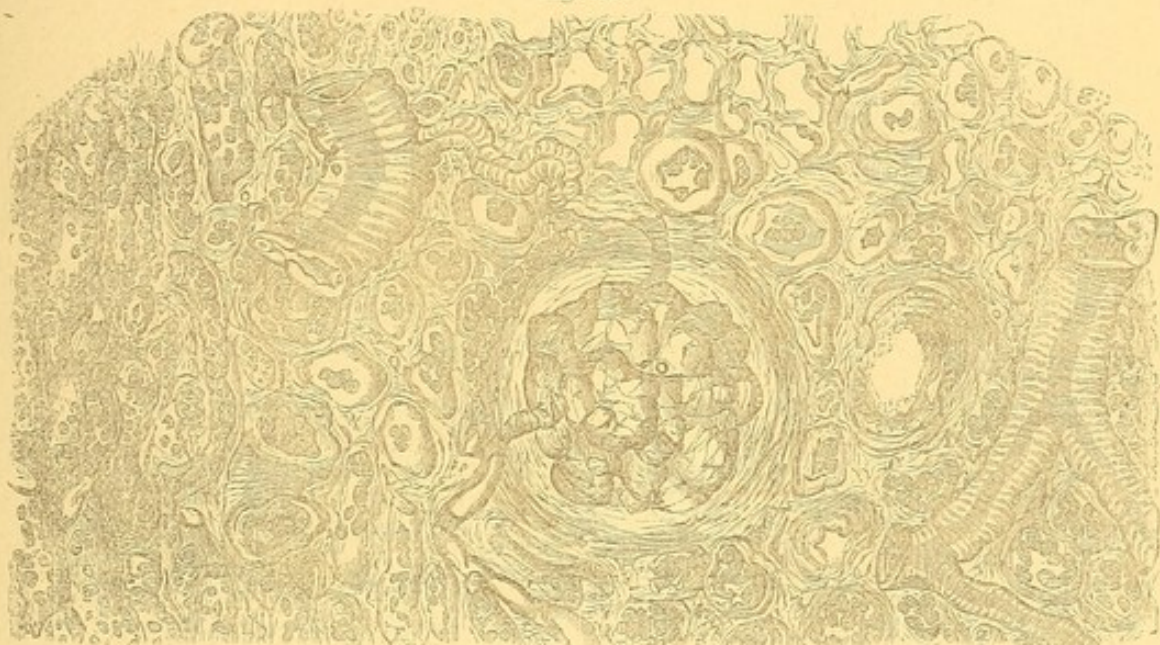


Fig. 64.



Section of cortex of a kidney undergoing contraction and fatty degeneration. At *a* the process of wasting is complete. At *b* a portion of the matrix, showing varying size of the tubes. Under the low magnifying power of 40 the wasted tubes and vessels cannot be seen in the specimen. See Figs. 57, 62, Plate XI. At *c* much fatty matter, with crystals, probably of cholesteroline. p. 64.

Fig. 65.



Section of an amyloid kidney, showing altered tubes with increased number of altered epithelial cells. A Malpighian body, with amyloid matter deposited in capillary walls, is seen in the centre, and portions of thickened arteries in different parts of the specimen. p. 71.  $\times 130$ .

Fig. 66.



Capillary vessels, with nerves of capillaries. Skin of Frog.  $\times 216$ .

Fig. 67.



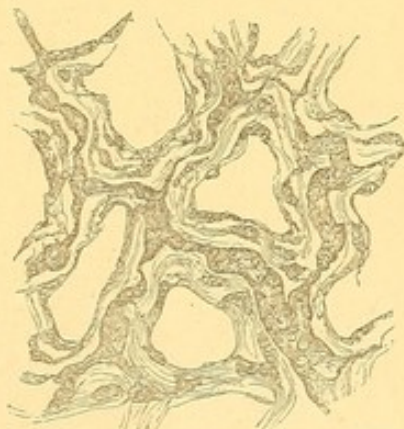
\* Small capillary, with nerve fibres. *a*. Healthy human kidney.  $\times 700$ .

Fig. 69.



Altered Malpighian body. Fatty and contracted kidney. Capillaries obstructed. Tube of artery, containing altered blood and angular particles of blood colouring matter.  $\times 40$ .

Fig. 68.



Wasting capillaries from a fatty and contracting kidney. Circulation through these vessels must have ceased some time before the patient's death.  $\times 216$ .



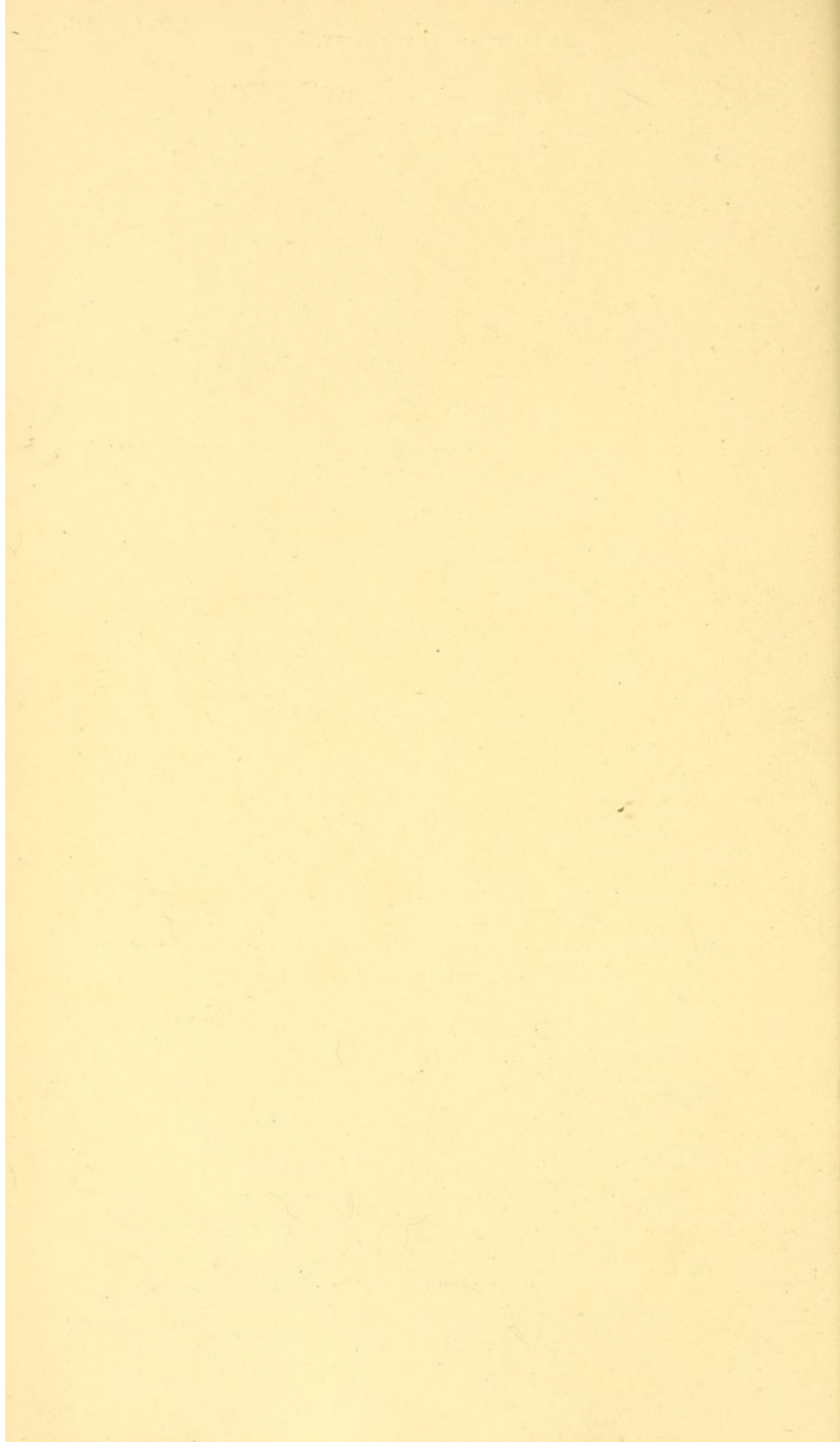
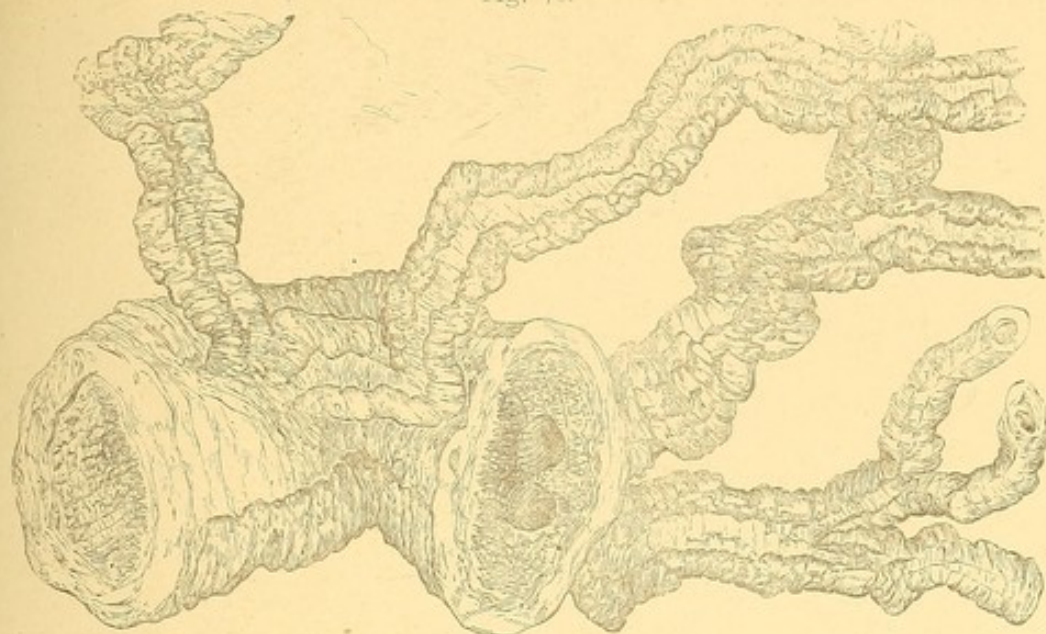


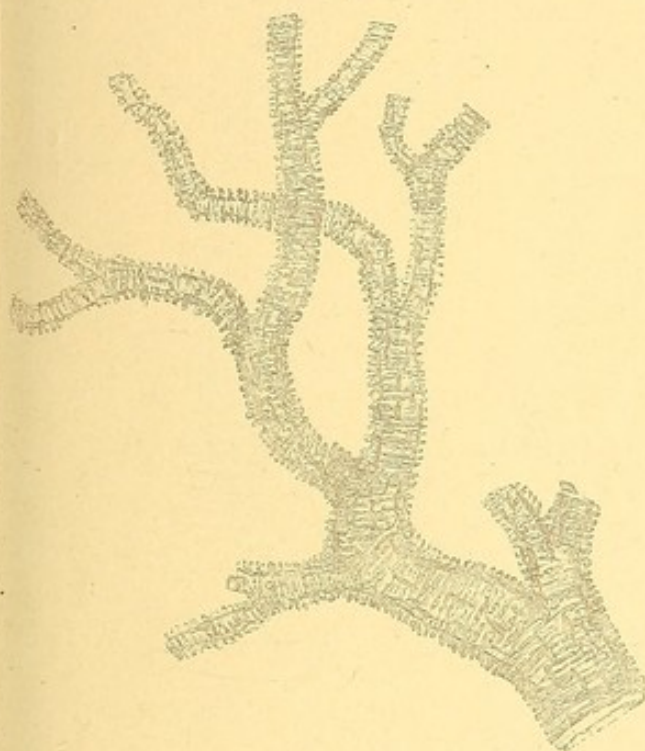


Fig. 70.



Arteries from a fatty and contracting kidney, showing complete degeneration of muscular fibre cells and the deposition of glistening albuminous material. The walls of the artery have probably long lost all contractile power, and are converted into rigid inelastic tubes, the inner surface of which is uneven, with great irregularity in calibre.  $\times 215$ . p. 72.

Fig. 71.



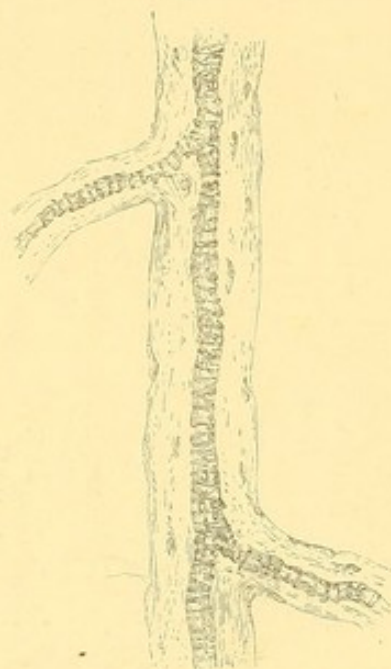
A healthy artery from the kidney of a child, 3 years old, showing muscular fibre cells and longitudinal nuclei of muscular and elastic fibres within.  $\times 215$ .

Fig. 73.



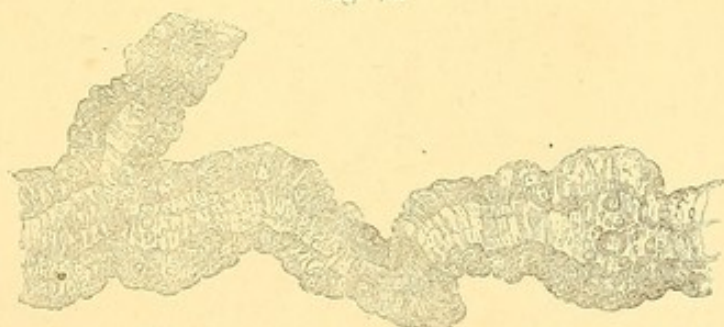
A transverse section of a small artery from the same kidney as Fig. 70.  $\times 215$ . p. 72.

Fig. 72.



Artery from the peritoneum of a frog which had been kept for some time without food, showing wasting of muscular fibre cells and great diminution in calibre. In its present wasted and contracted state the external areolar coat is many times the diameter of the vessel.  $\times 215$ . p. 73.

Fig. 74.

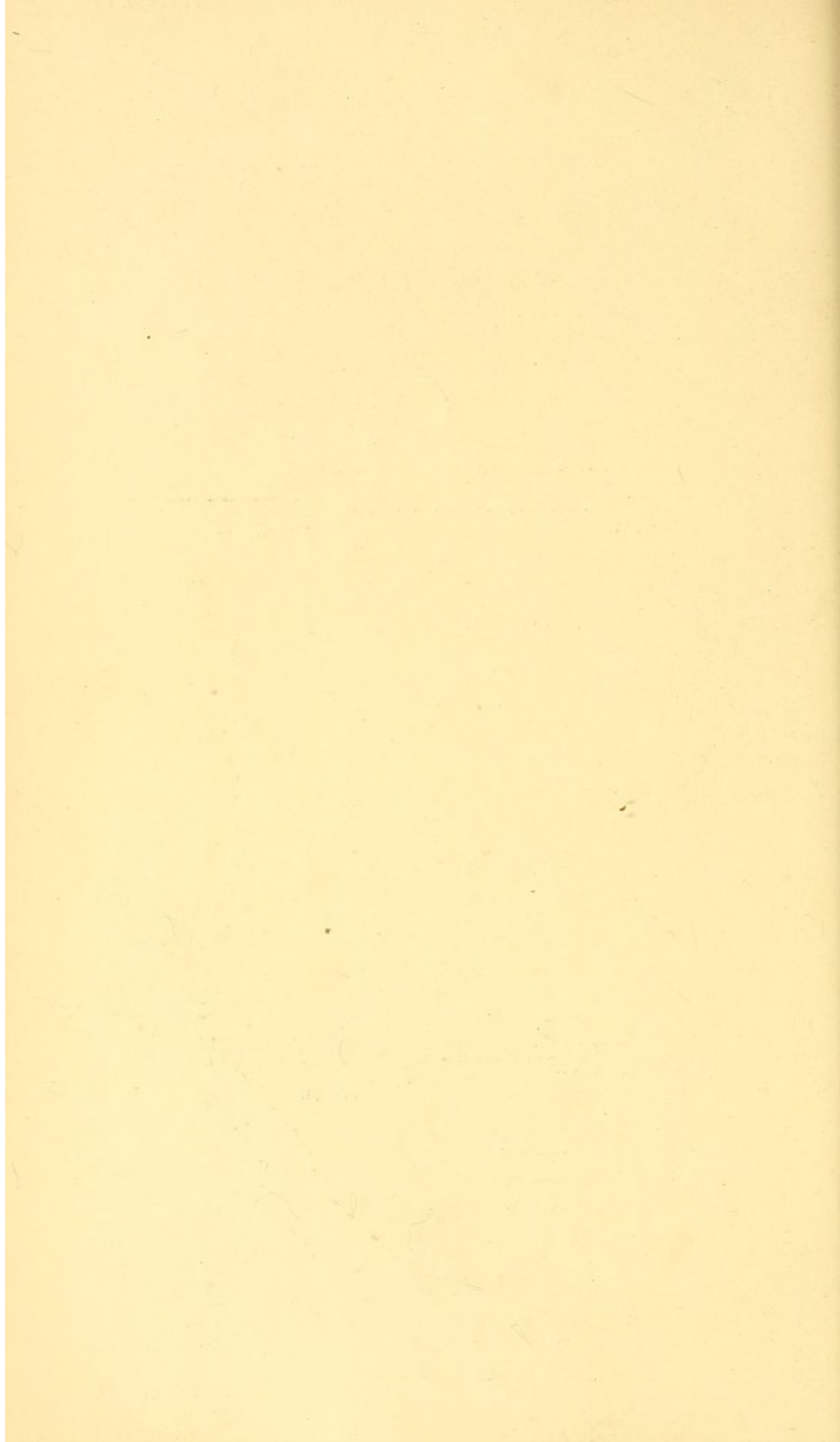


Artery from the same kidney as Figs. 70 and 73, showing great irregularity of calibre and degenerated muscular coat. Oil globules and debris are seen in the interior.  $\times 215$ . p. 72.

$\frac{1}{1000}$  of an inch  $\square$   $\times 215$ .

[To face page 74.]

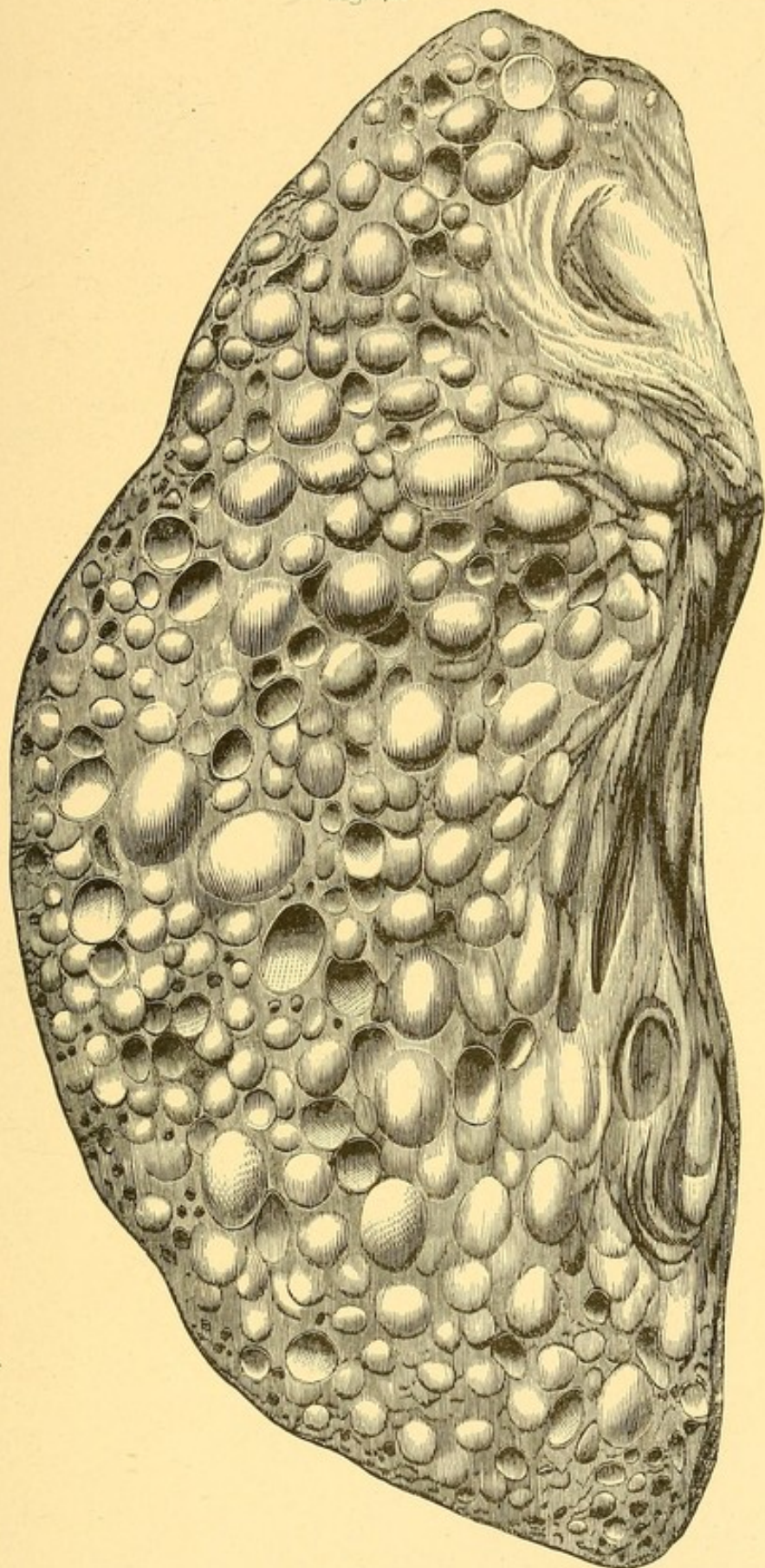






## DISEASES OF THE KIDNEY.

Fig. 75.



Full-size representation of section of the right kidney, showing the enormous development of cysts throughout its substance. The presence of these growths is evidently due to intra-uterine disease of the foetus. From a drawing by Dr. J. Jardine Murray. p. 79

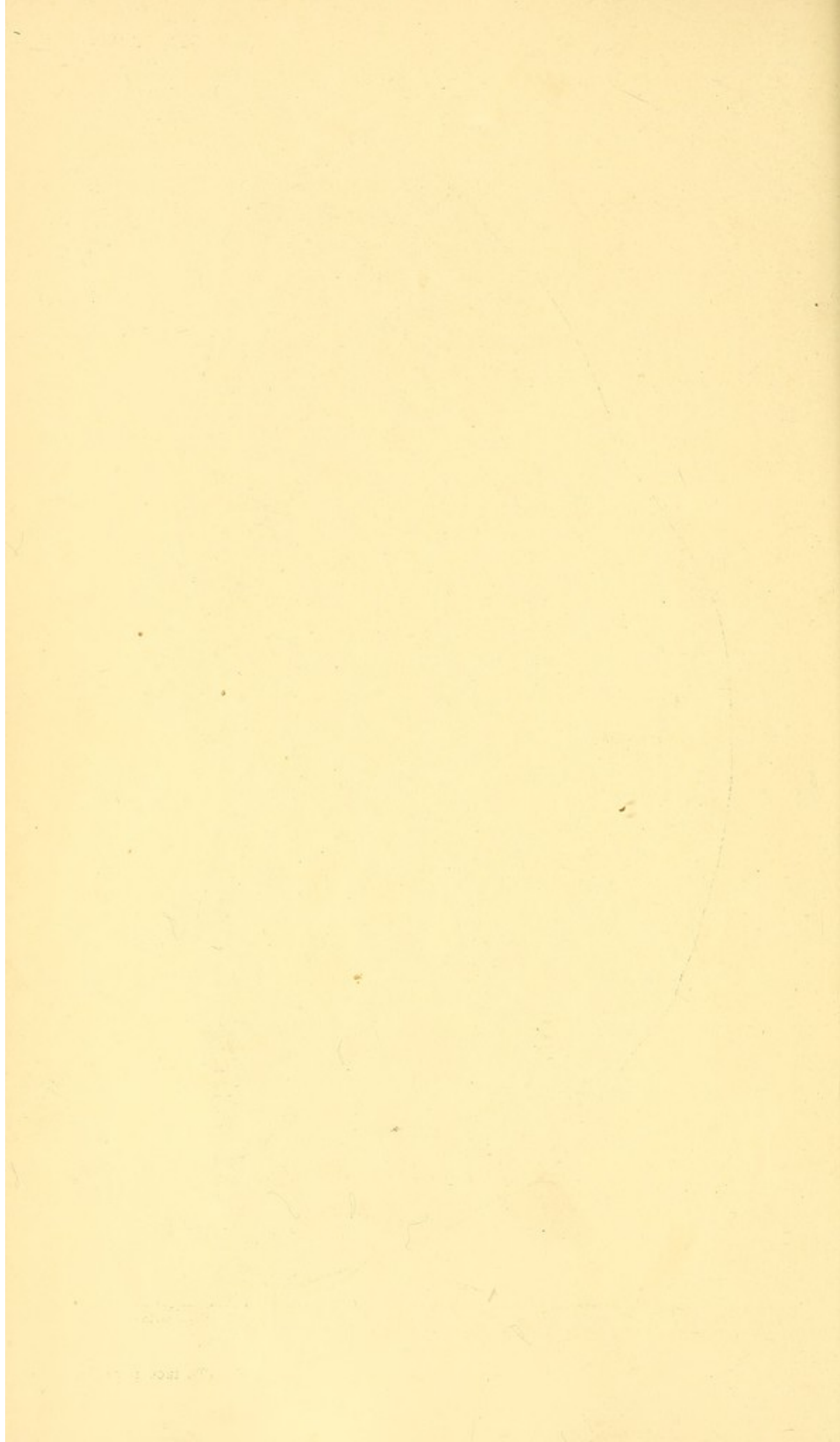
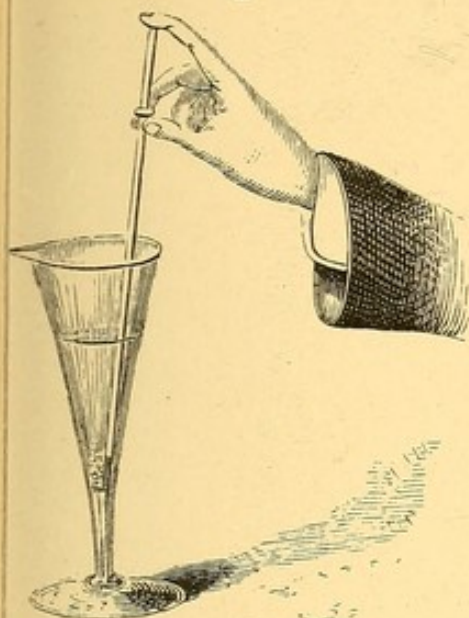


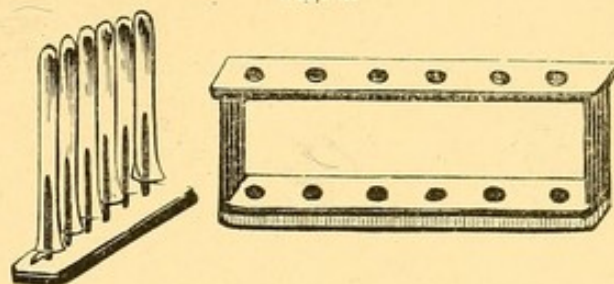


Fig. 1.



Conical glass for allowing deposits from fluids to subside. p. 92.

Fig. 2.



Test tubes, rack, and drainer. p. 92.

Fig. 3.

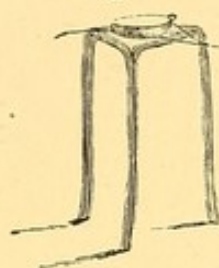
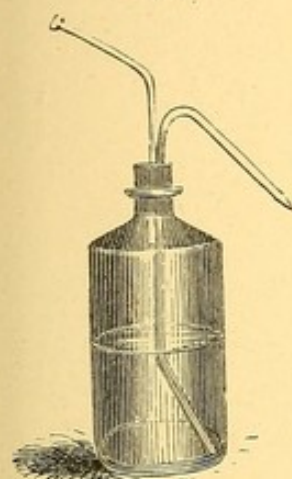


Fig. 4.



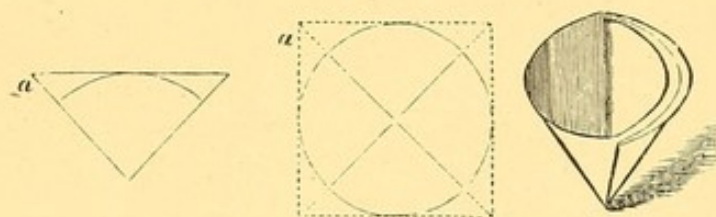
Wire triangles for supporting platinum capsules or foil while the organic matter is being burned off. p. 92.

Fig. 5.



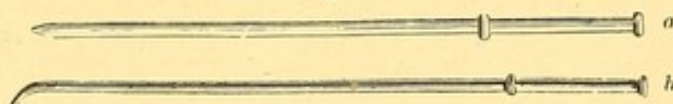
Wash bottle for washing precipitates, &c. p. 93.

Fig. 6.



Represents the mode of folding the paper used for filtering purposes p. 93.

Fig. 7.



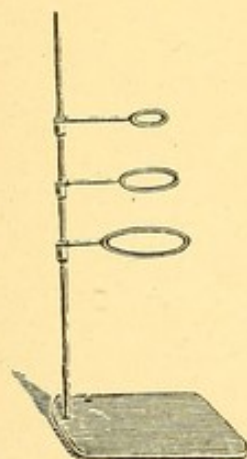
Pipettes. p. 93.

Fig. 7\*.



Pipette forming stopper. p. 93.

Fig. 8.



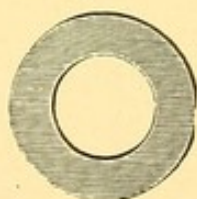
Small retort stand. p. 92.

Fig. 9.



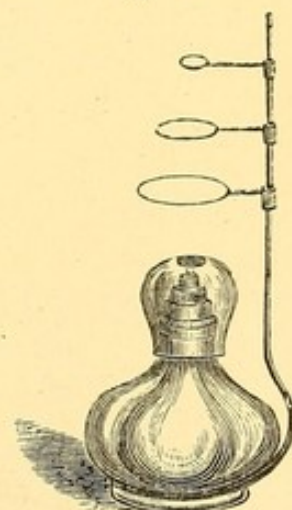
Simple form of water bath.

Fig. 10.

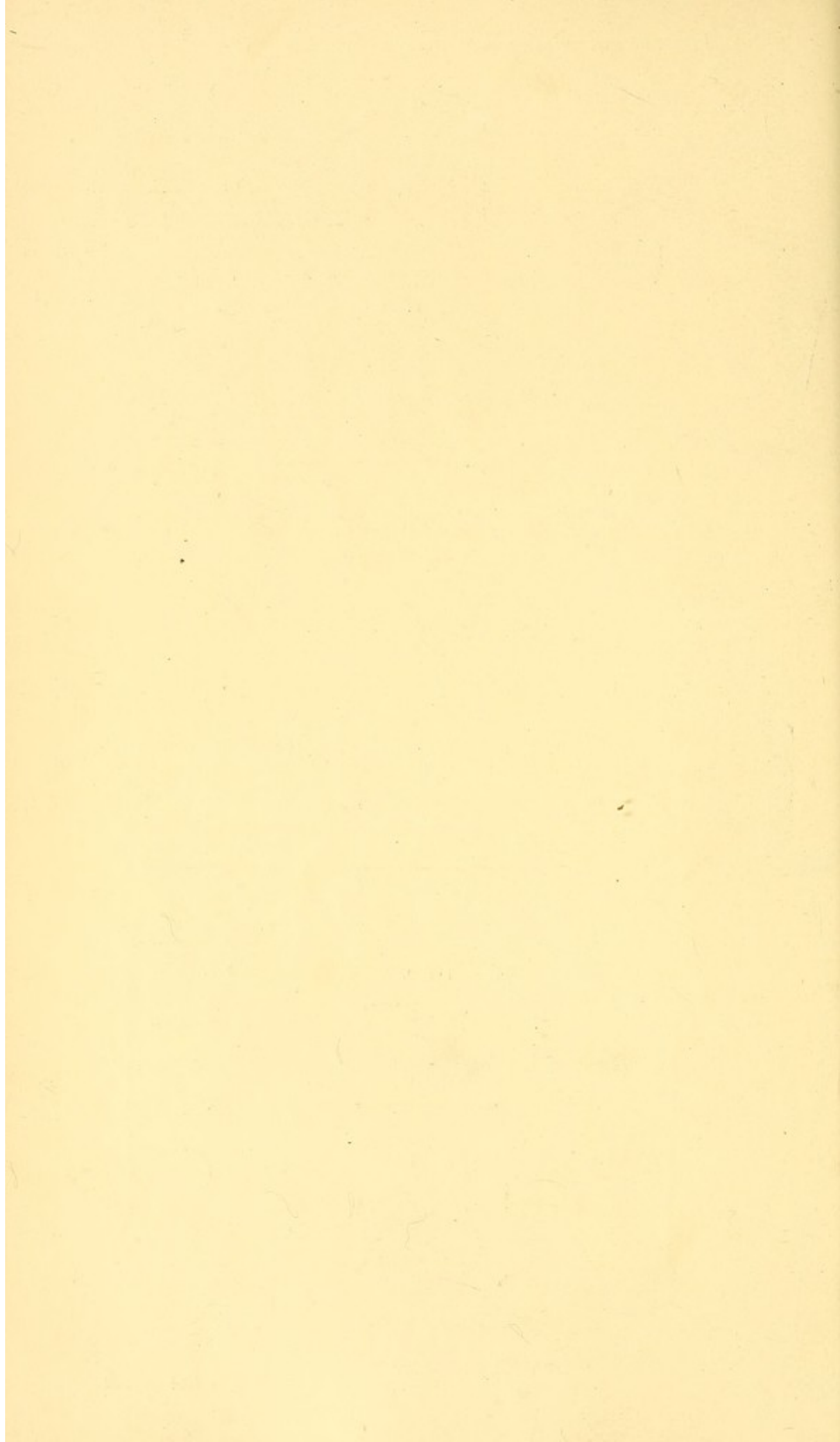


Ring used as an adapter for fitting various sized basins to the simple water bath. p. 92.

Fig. 11.



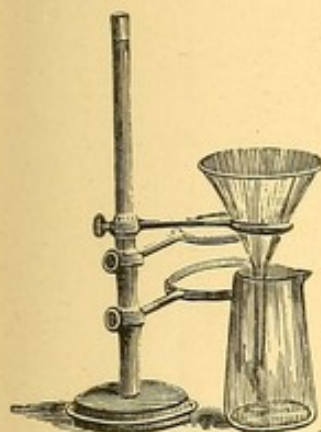
Spirit lamp p. 92.





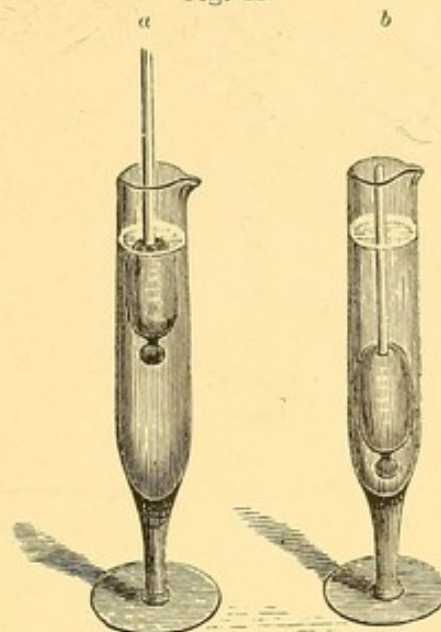
CHEMICAL AND MICROSCOPICAL APPARATUS.

Fig. 12.



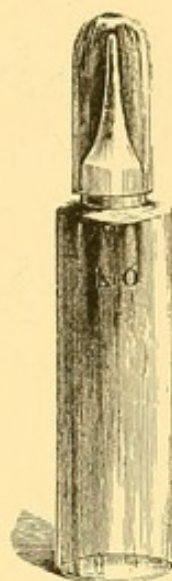
Retort stand, funnel, and beaker, arranged for filtering. p. 92.

Fig. 13.



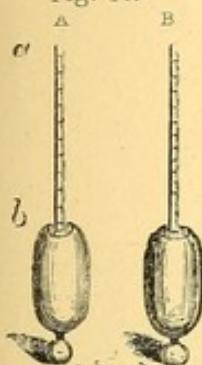
Glasses of convenient form, both for obtaining the specific gravity of fluids and also for collecting the deposits from fluids p. 92.

Fig. 16.



Bottle, with capillary orifice. p. 97.

Fig. 14.



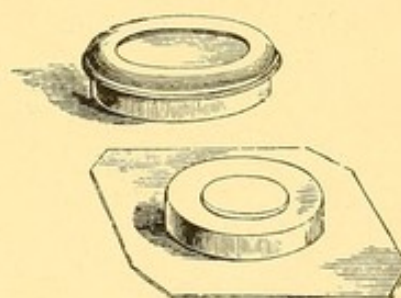
Urinometers for ascertaining the specific gravity of fluids p. 93.

Fig. 15.



Bottle for finding the specific gravity of fluids by weight p. 93.

Fig. 17.



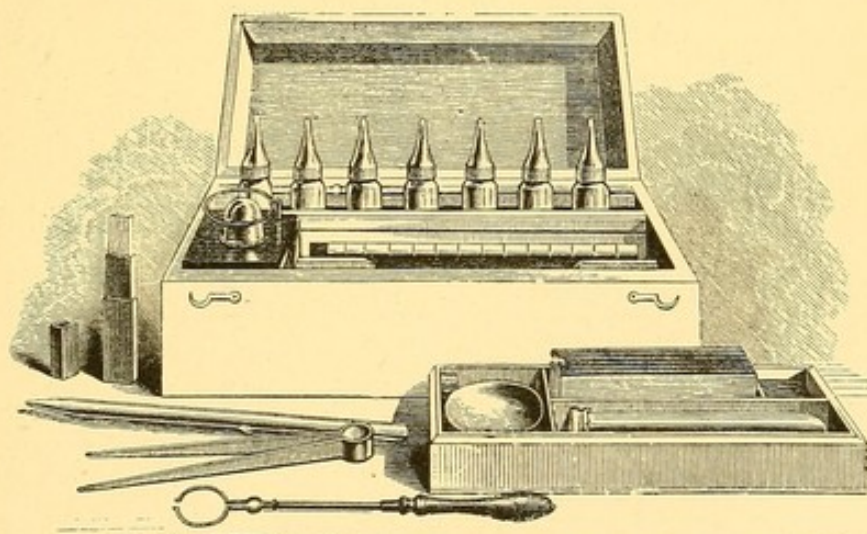
Animalcule cage, also used for examining urinary deposits, &c. under the microscope. p. 97.

Fig. 18.



Simple glass cell for examining of urinary deposits. p. 97.

Fig. 19.



Box containing bottles with capillary orifices, spirit lamp, urinometer and glass, and other appliances and apparatus necessary for minute testing. p. 97.

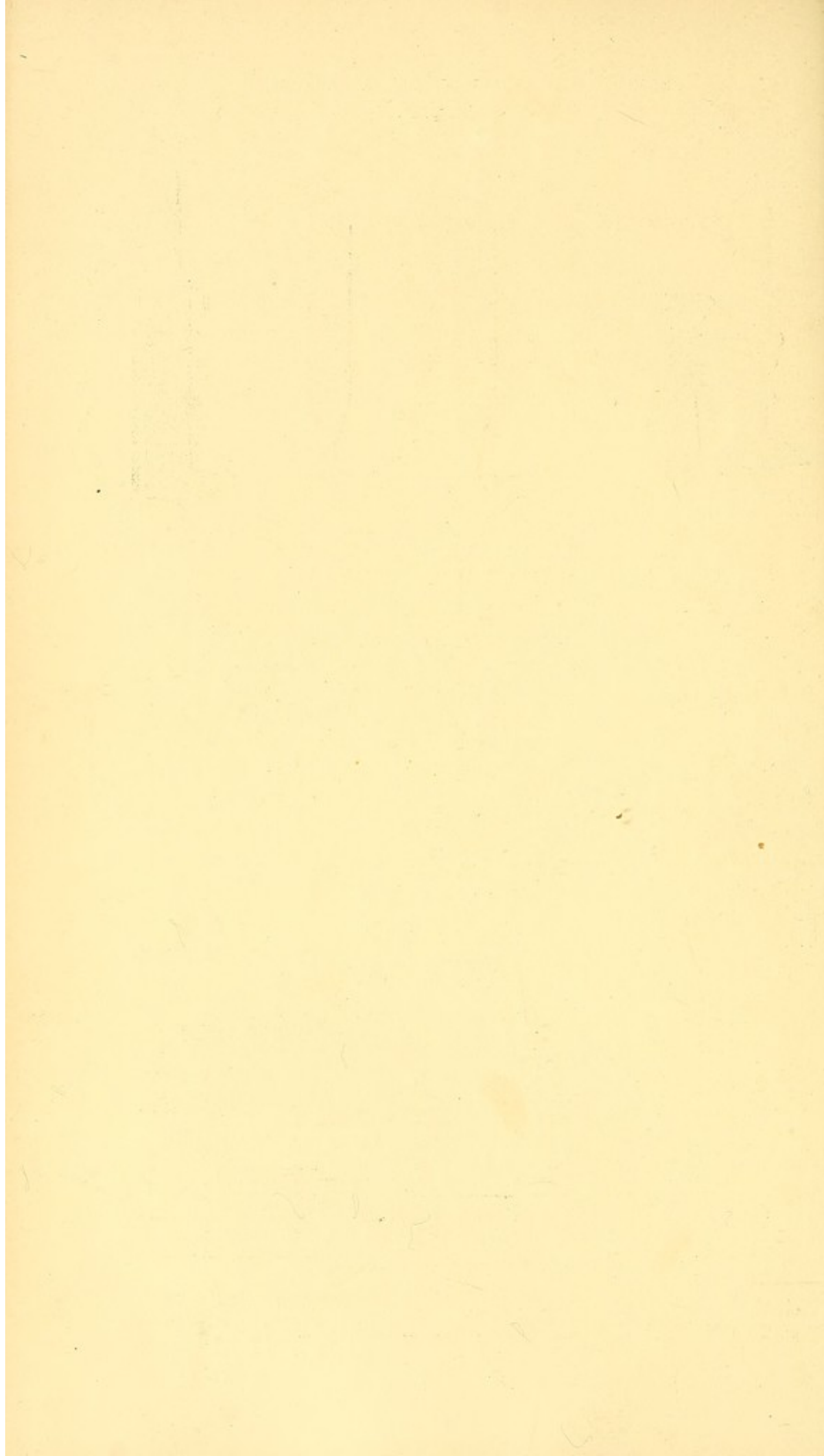
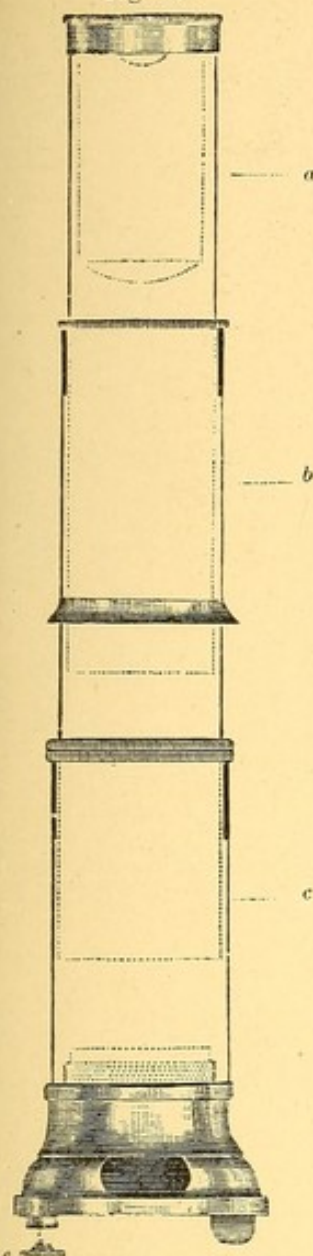


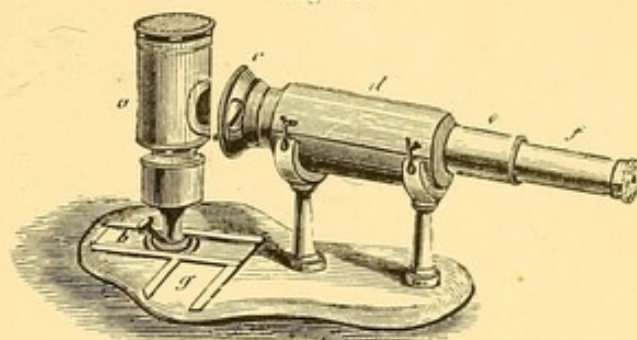


Fig. 20.



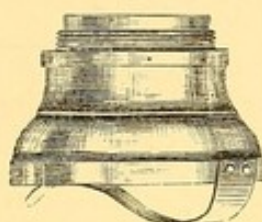
Pocket or clinical microscope, half the real size. *a*, tube with eye piece. *b*, tube carrying object glass. *c*, tube in which the last slides with stage. *e*, clamp for fixing preparation p. 95.

Fig. 21.



Clinical microscope with stand, and lamp, as arranged for class purposes p. 95.

Fig. 22.



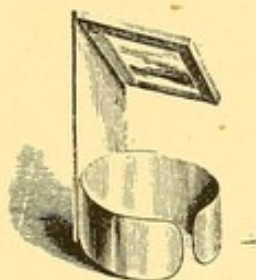
The stage, side view of the clinical microscope, showing position of the spring. p. 95.

Fig. 23.



Sectional view of cell for examining urinary deposits. p. 97.

Fig. 24.



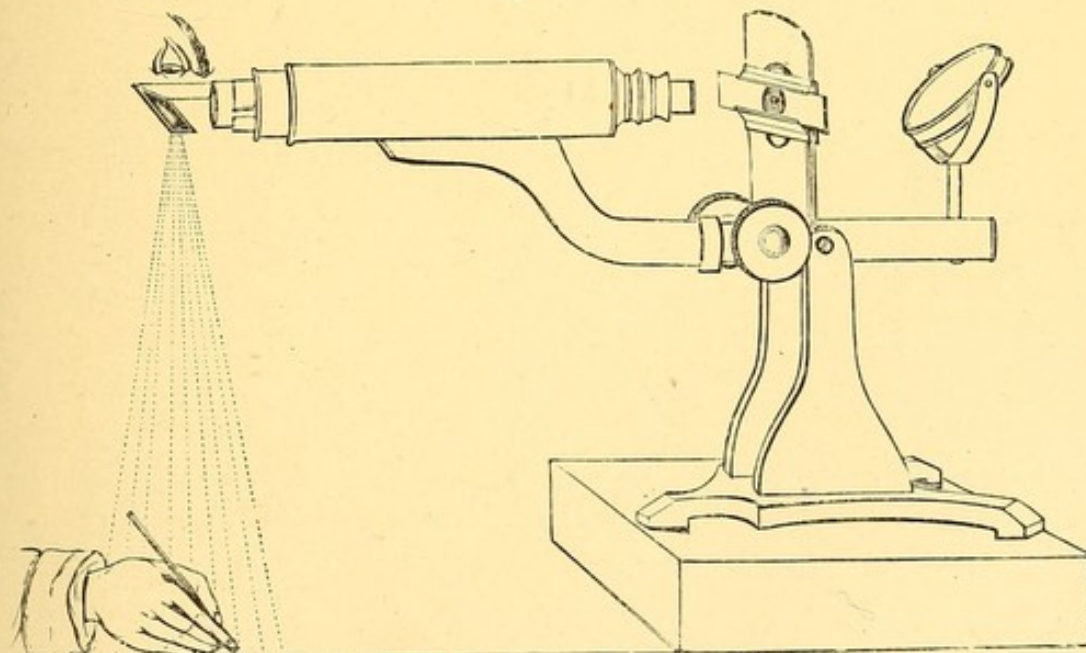
Neutral tint glass reflector. p. 97.

Fig. 25.



Scale divided into 1000ths of an inch and magnified 215 diameters. For measuring the size of objects in the microscope. p. 97.  $\times 215$ .

Fig. 26.



Manner of drawing objects from the microscope with the aid of the neutral-tint glass reflector. p. 97.

(To face page 96.)

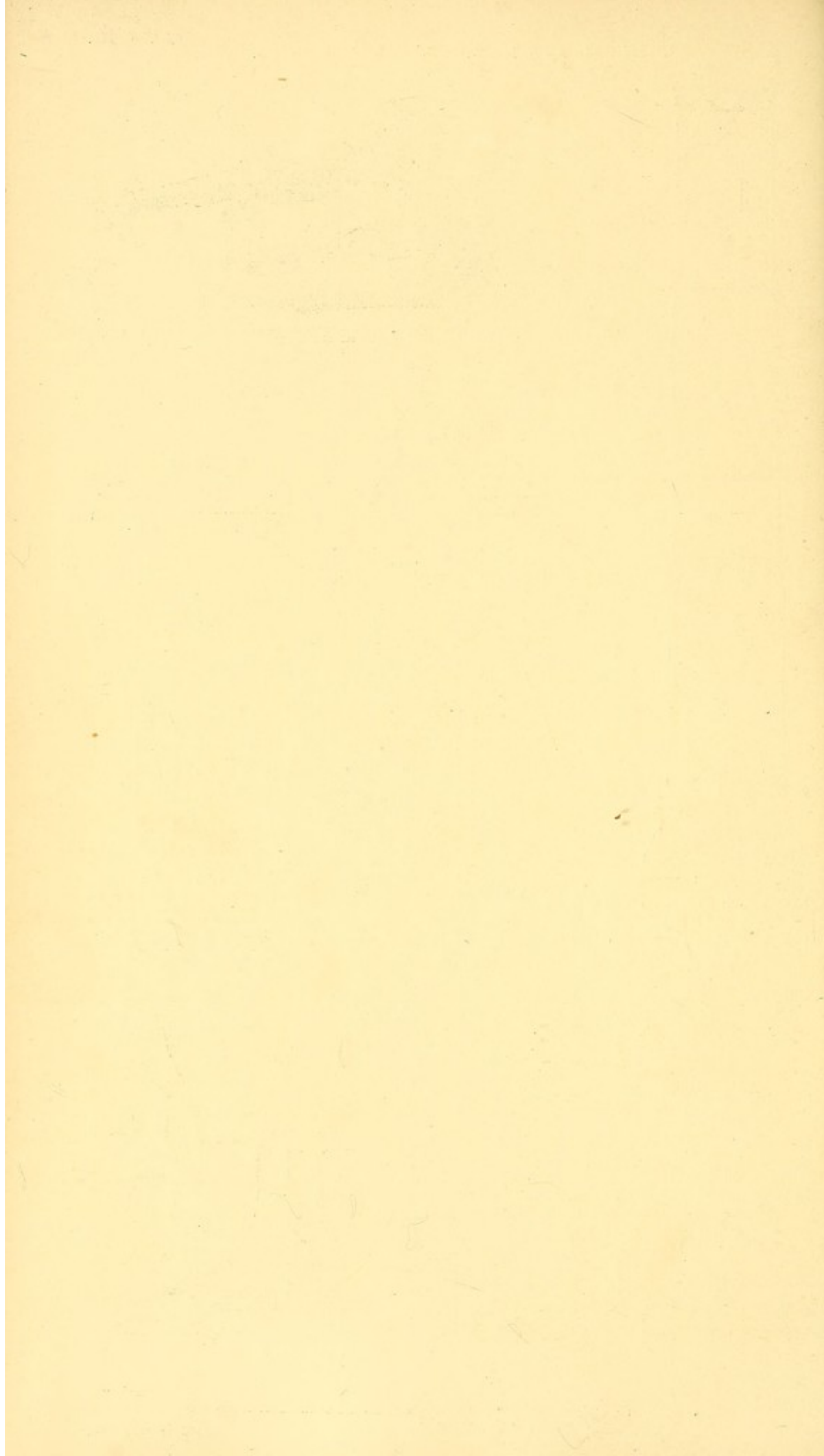
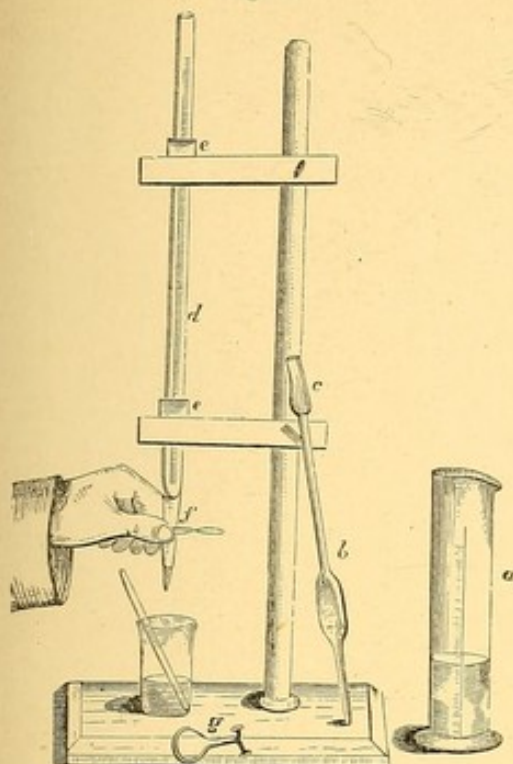


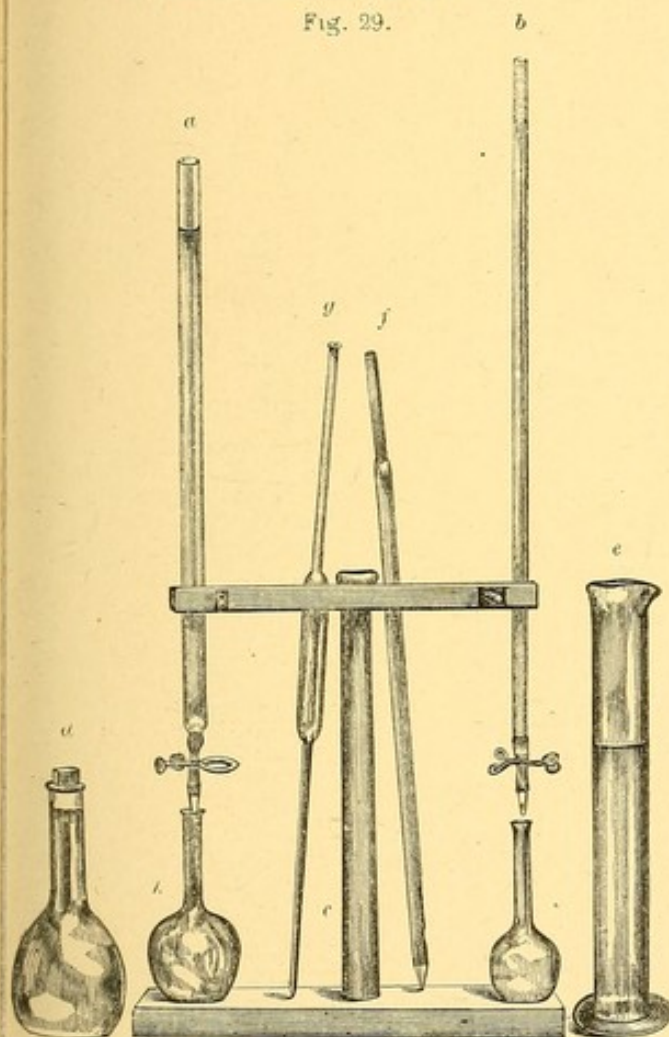


Fig. 27.



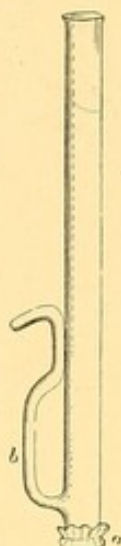
burettes, holding 50 cubic centimetres, and graduated to half c.c., mounted in its stand and arranged as in making analyses. *a*, glass jar capable of holding 500 c.c. *b*, pipette graduated to hold 20 c.c. *c*, india-rubber tube by which the contents of the pipette are caused to flow as required. *d* is the burette. *e*, small pieces of india-rubber for fixing the burette in its place. *f*, india-rubber tube connecting the extremity of the burette with the spout, and capable of being compressed by the spring, the form of which is represented at *g*. p. 102.

Fig. 29.



double burette stand fitted with burettes graduated to decm. *a*, 100-decm. burette. *b*, 30-decm. burette. *c*, double burette stand. *d*, a 1000-decm. flask stoppered. *e*, a 1000-decm. cylinder. *f*, a 50-decm. whole pipette. *g*, a 10-decm. graduated pipette. *h*, a 500-decm. flask. *i*, a 200-decm. flask. According to Mr. Sutton's directions. p. 104.

Fig. 28.



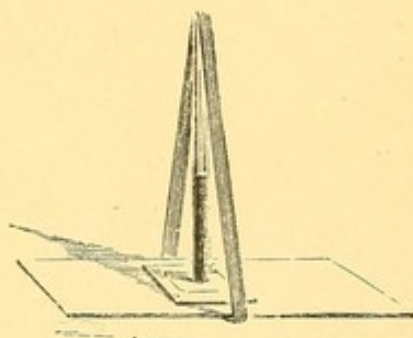
Filter useful in volumetric analyses for obtaining a small quantity of clear solution in order to see if all the substance is precipitated. Filtering paper is tied round the lower extremity. *a*, *b* is the spout through which the clear filtrate is poured. p. 102.

Figs. 30, 31.



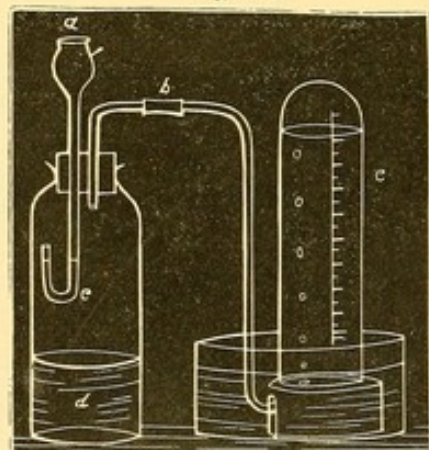
Pipettes of different forms, graduated. p. 102.

Fig. 32.

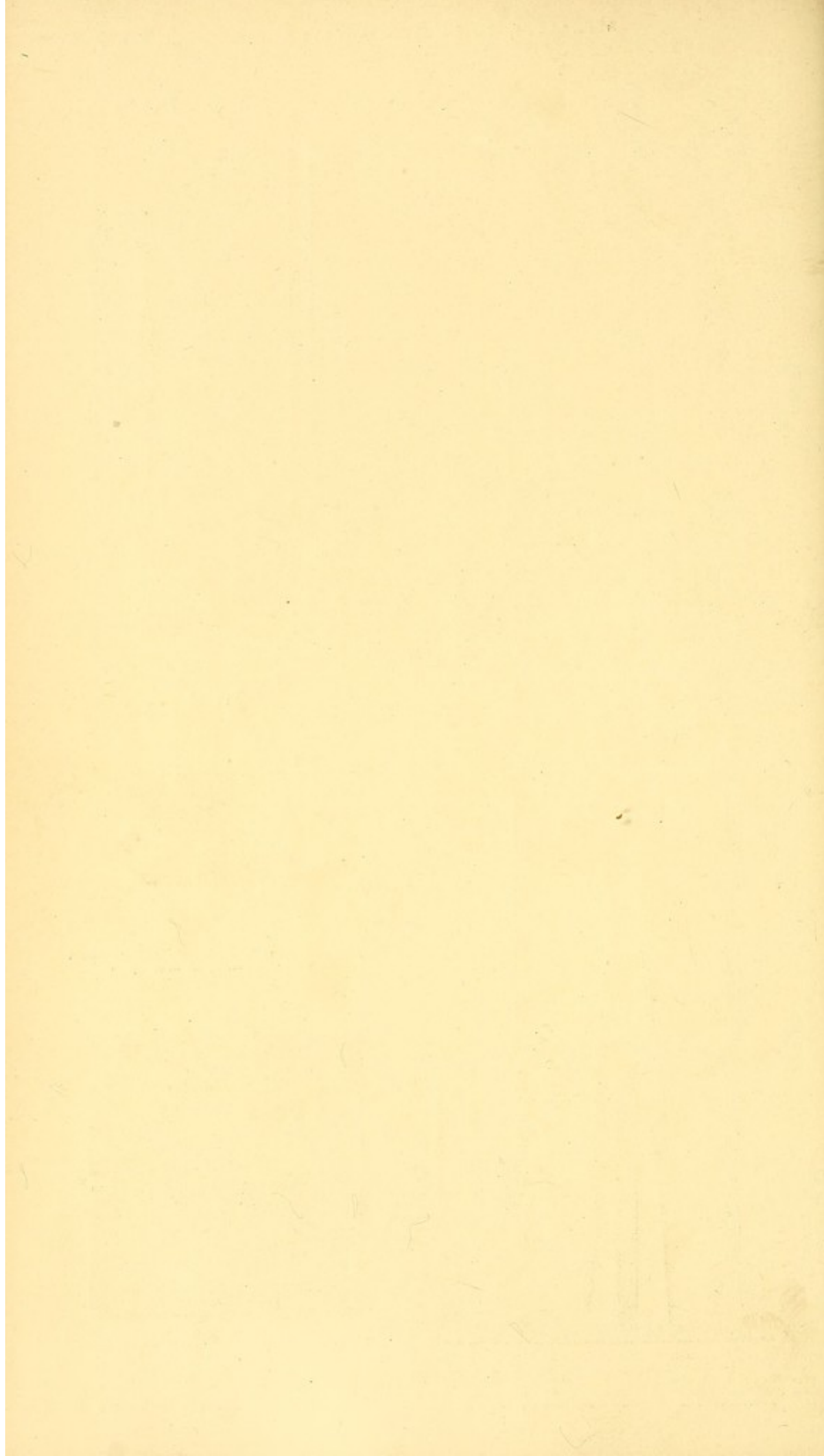


Arrangement for collecting the deposit from a very small quantity of fluid. p. 184.

Fig. 33.



Apparatus as arranged by Dr. Handfield Jones for estimating the proportion of urea in urine. p. 114.





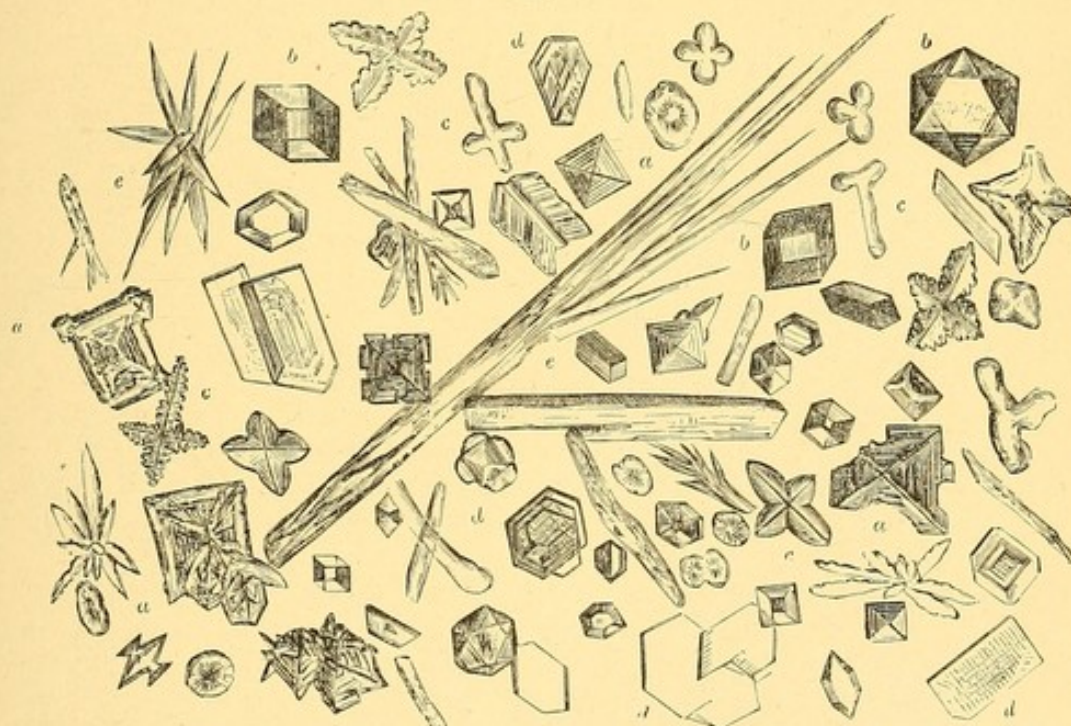
ILLUSTRATIONS OF URINE.

Fig. 1.

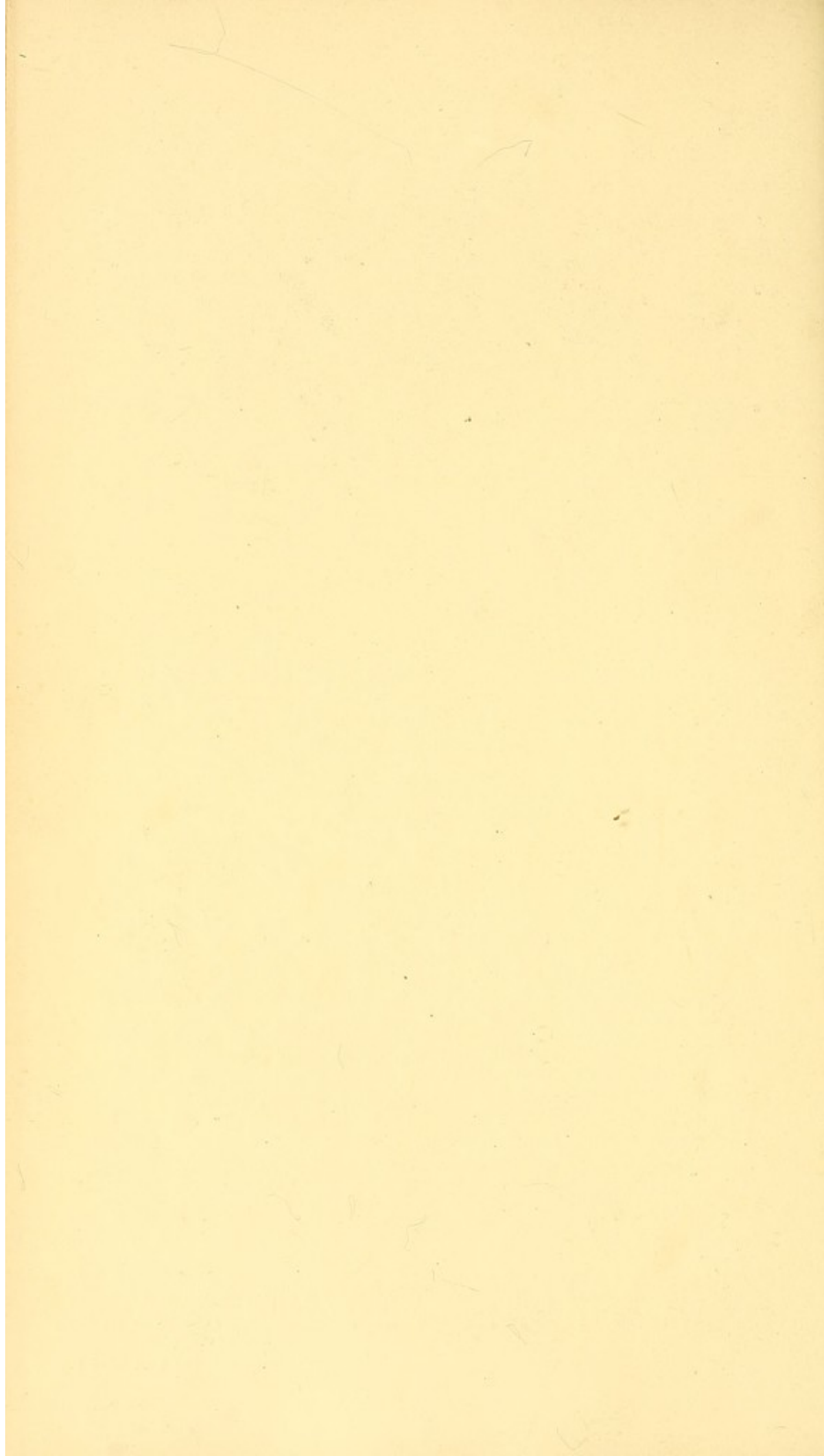


Crystalline residue of healthy urine, obtained by concentrating the liquid over a water bath. *a*, spherical masses consisting of aggregations of crystals of urate of soda. Many of these are seen deposited upon a film consisting of phosphate of lime and ammoniaco-magnesian phosphate. *b*, cubical crystals of chloride of sodium. *c*, octahedral crystals of chloride of sodium, which crystallizes in this form in the presence of urea. *d*, large crystals of common phosphate of soda. *e*, sulphates. *f*, urates.  $\times 40$ . p. 131.

Fig. 2.



Crystals of inorganic salts of healthy urine, obtained by incinerating the dry residue, decarbonizing it, and extracting it with water. The solution being concentrated to the proper degree, readily crystallizes. *a*, crystals of common salt, obtained by evaporating the solution nearly to dryness. *b*, crystals of common salt formed in a concentrated solution. *c*, crosslets of common salt obtained by evaporating the solution very rapidly to dryness. *d*, crystals of phosphate of soda. *e*, crystals of sulphates. p. 156.  $\times 130$ .





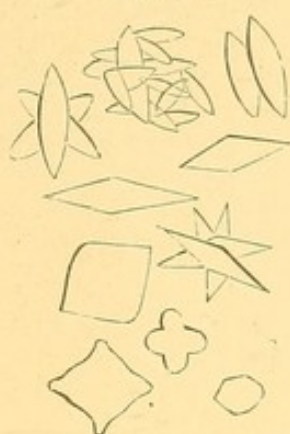
ILLUSTRATIONS OF URINE.

Fig. 3.



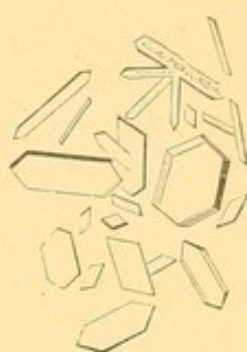
Chloride of ammonium.  
x 215. p. 130.

Fig. 4.



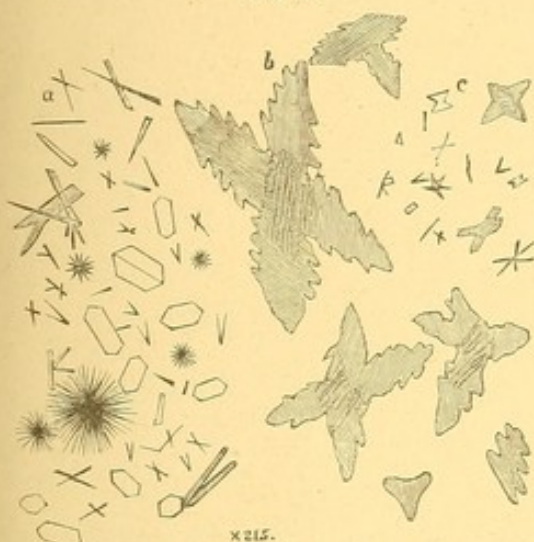
Crystals of uric acid. x 215. p. 130.

Fig. 5.



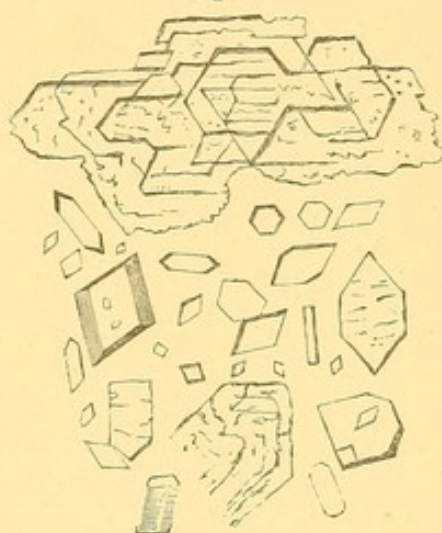
Oxalate of urea, obtained by adding  
oxalic acid to concentrated urine.  
x 215. p. 132.

Fig. 6.



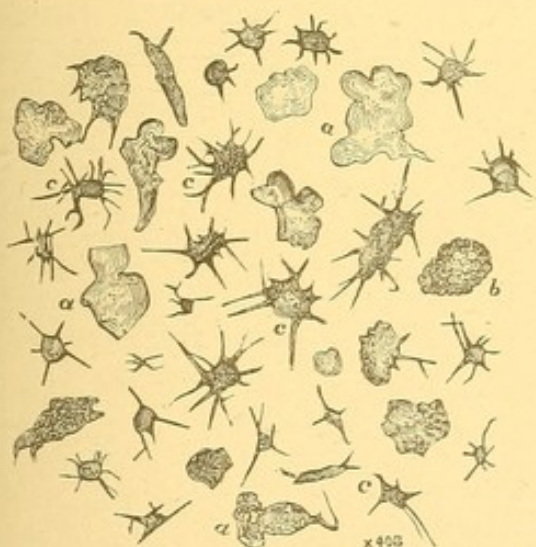
Crystals of indigo. *a* and *b*, obtained by sublimation.  
*c*, small crystals in fluid. p. 148.

Fig. 7.



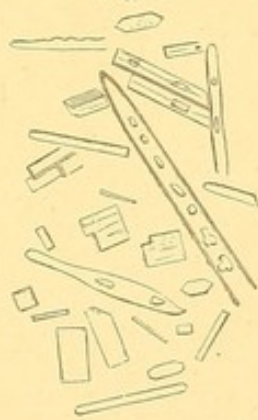
Nitrate of urea. *a*, crystals obtained from urine;  
*b*, crystals of pure nitrate of urea. x 215. p. 132.

Fig. 8.



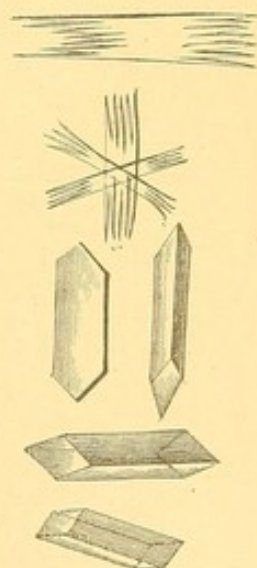
Crystals of uroglauine from the urine. *a*, small masses  
of a blue colour; *b*, composed of small spherical particles;  
*c*, crystals of uroglauine of a deep purple or violet colour.  
x 403. p. 148.

Fig. 9.

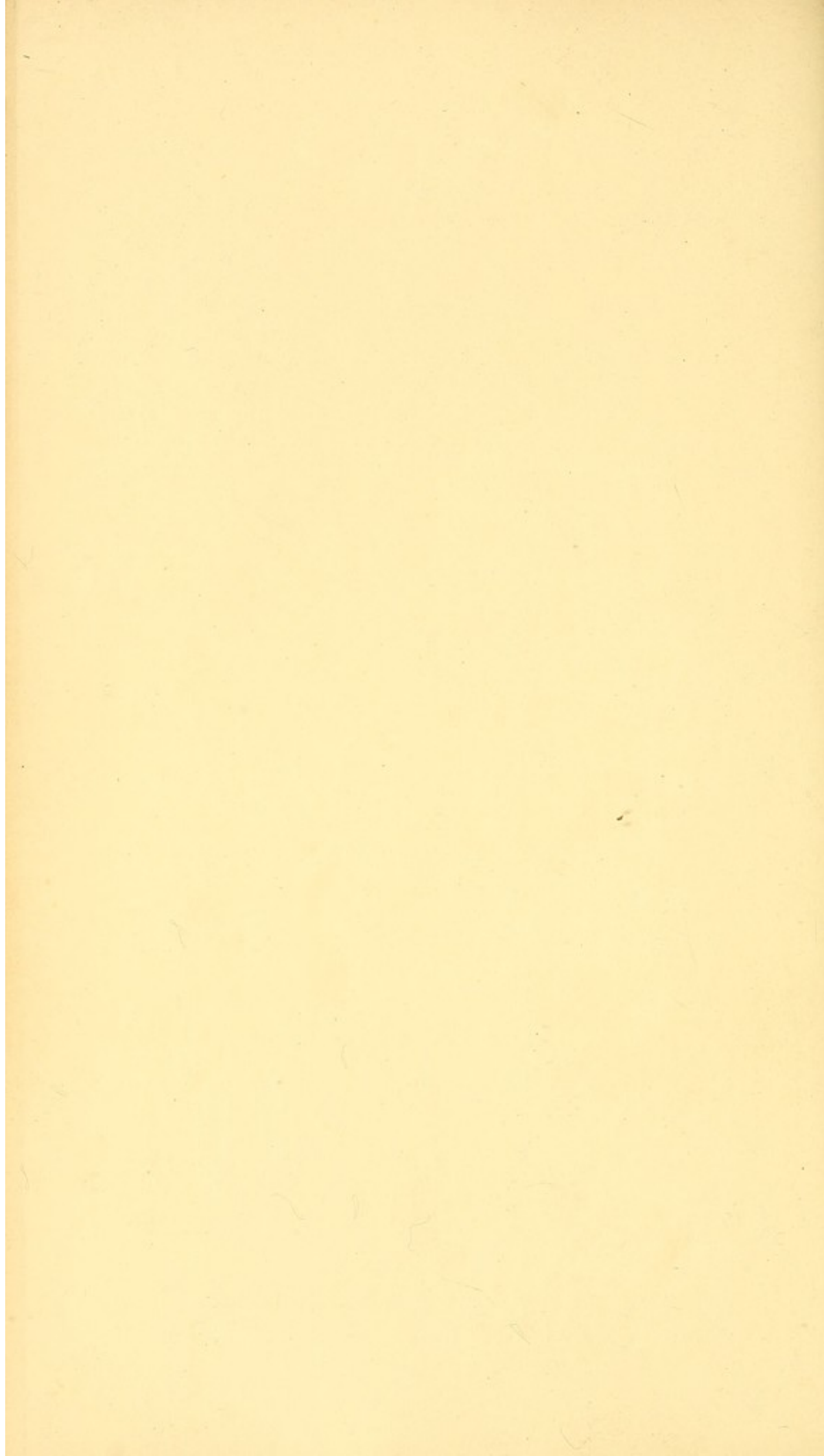


Urea obtained from urine.  
x 215. p. 133.

Fig. 10.



Crystals of hippuric acid.  
Robin and Verdel.  
p. 142.





## ILLUSTRATIONS OF URINE.

### PLATE II.

Urea,  $C_2H_4N_2O_2$ .

Fig. 1. Urea obtained from urine crystallized in its own mother liquor.

Fig. 2. The same examined in the dry way.

Fig. 3. Small crystals of urea formed in a concentrated solution of natural urea.

Fig. 4. Similar crystals of larger size.

Fig. 5. Artificial urea crystallized. Examined in the dry way.

### UREA.

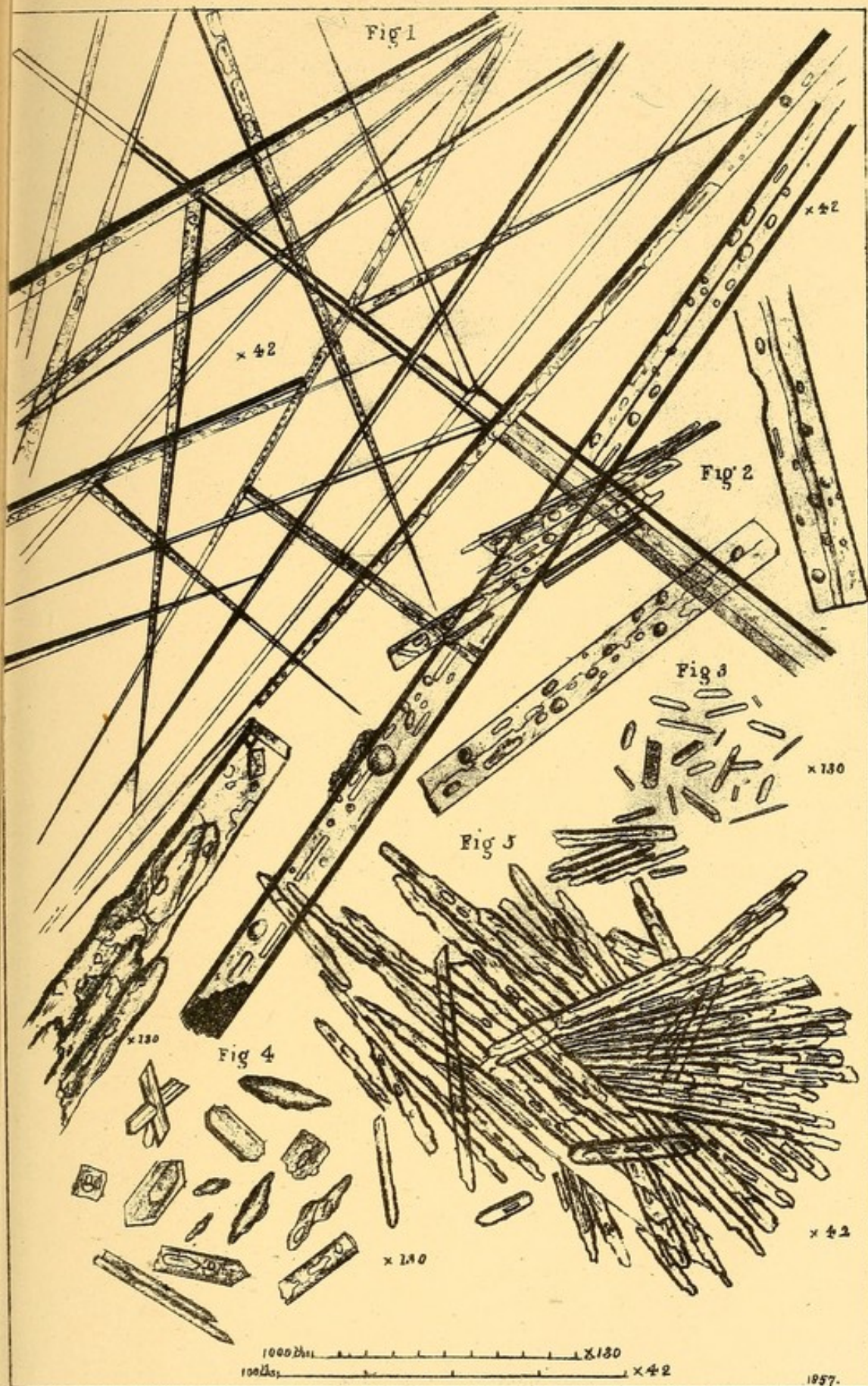
Pure urea may be easily obtained by the decomposition of the nitrate or oxalate of urea. The crystals represented in fig. 1 were made by decomposing pure oxalate of urea with common chalk. An oxalate of lime is formed, which is separated by filtration, and the urea remains in solution. From the nitrate, urea may be obtained by adding carbonate of baryta — nitrate of baryta and urea result; the latter may be separated by evaporation to dryness, and extraction with alcohol, which dissolves the urea and leaves the nitrate of baryta.

For the mode of preparing the nitrate and oxalate of urea, see page 132. Pure urea may also be obtained artificially by evaporating cyanate of ammonia to dryness.

[To face Page 132.]



# URINE-II



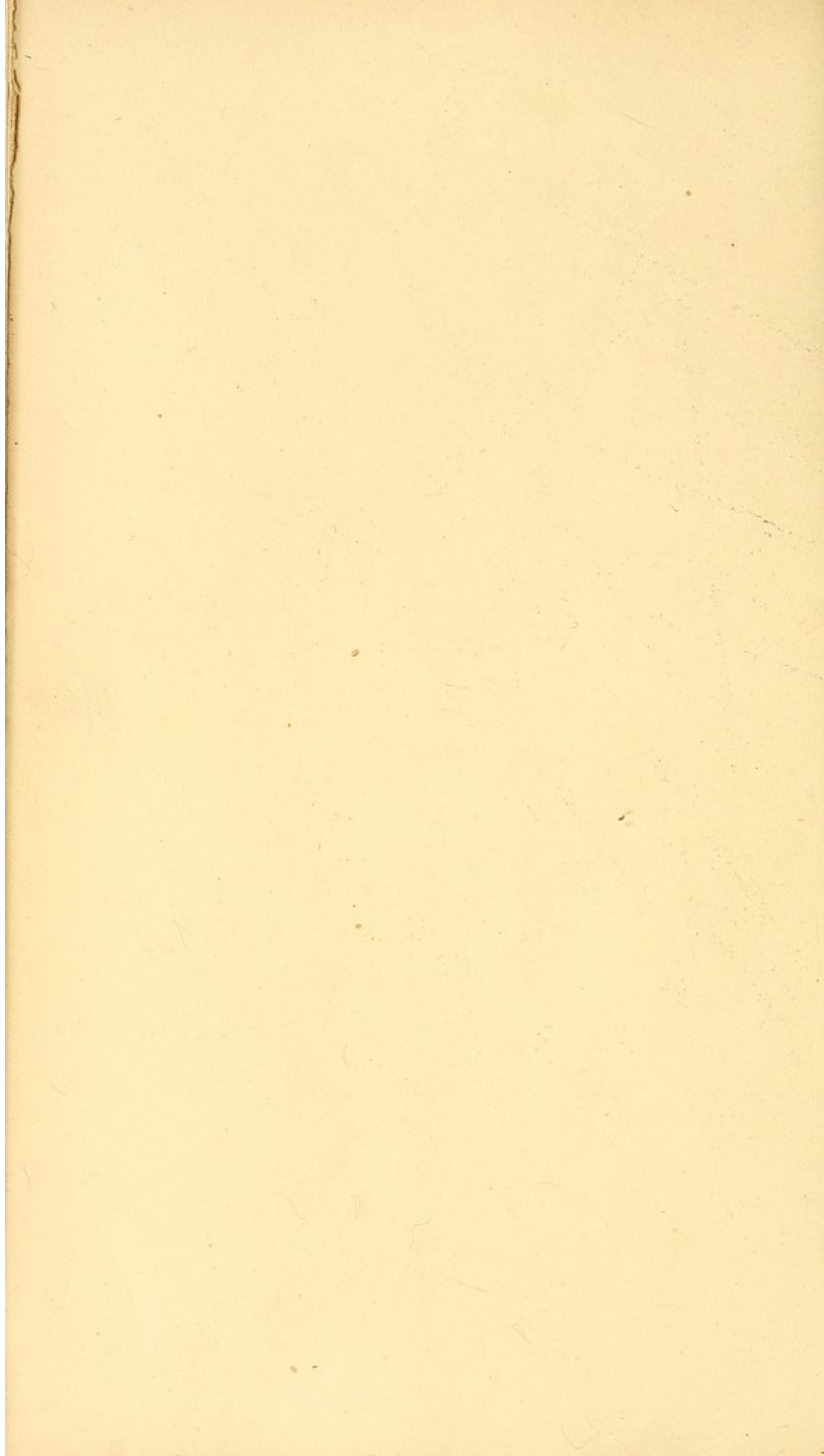
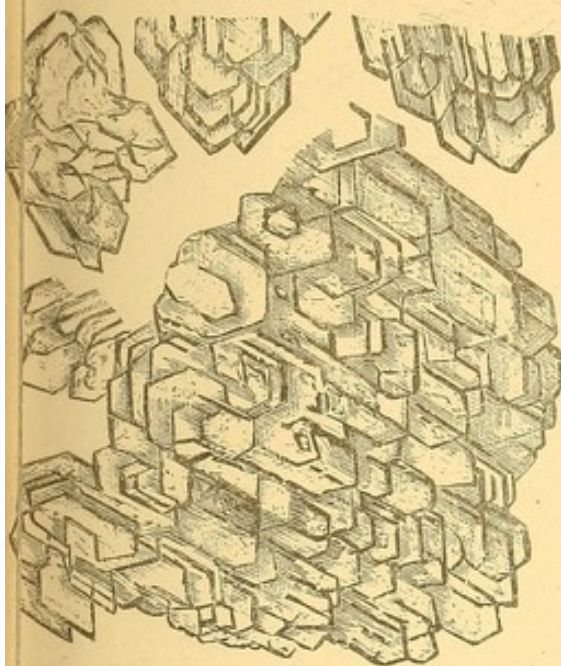


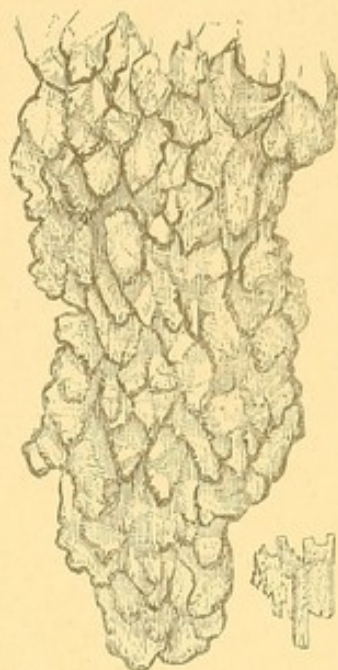


Fig. 1.



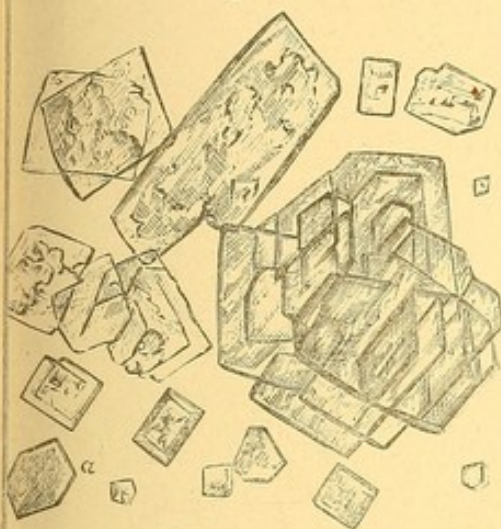
Crystals of nitrate of urea ( $C_2H_4N_2O_2 \cdot HO \cdot NO_2$ ) formed by adding excess of nitric acid to concentrated urine.  $\times 130$ . p. 132.

Fig. 2.



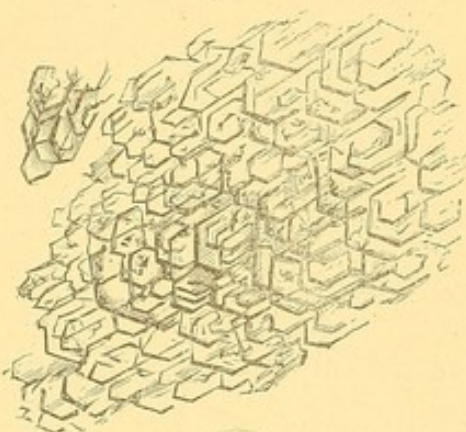
Nitrate of urea formed by adding a quantity of nitric acid not sufficient to combine with the whole of the urea present.  $\times 130$ . p. 132.

Fig. 3.



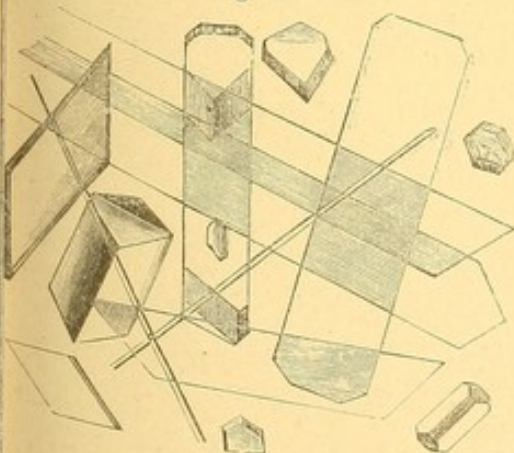
Nitrate of urea, obtained by adding a moderate quantity of nitric acid to slightly concentrated urine in a test tube, and allowing it to crystallize slowly.  $\times 130$ .

Fig. 4.



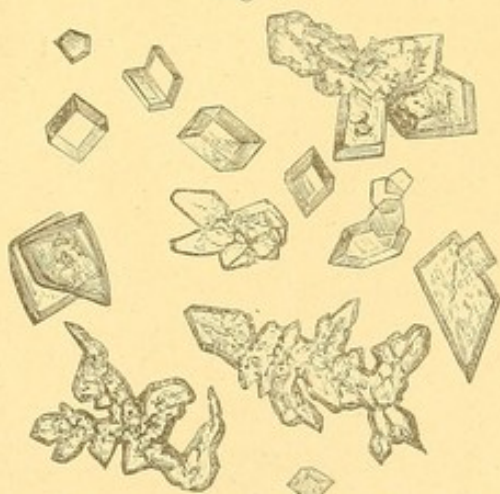
Nitrate of urea obtained by adding a marked excess of nitric acid.  $\times 130$ .

Fig. 6.

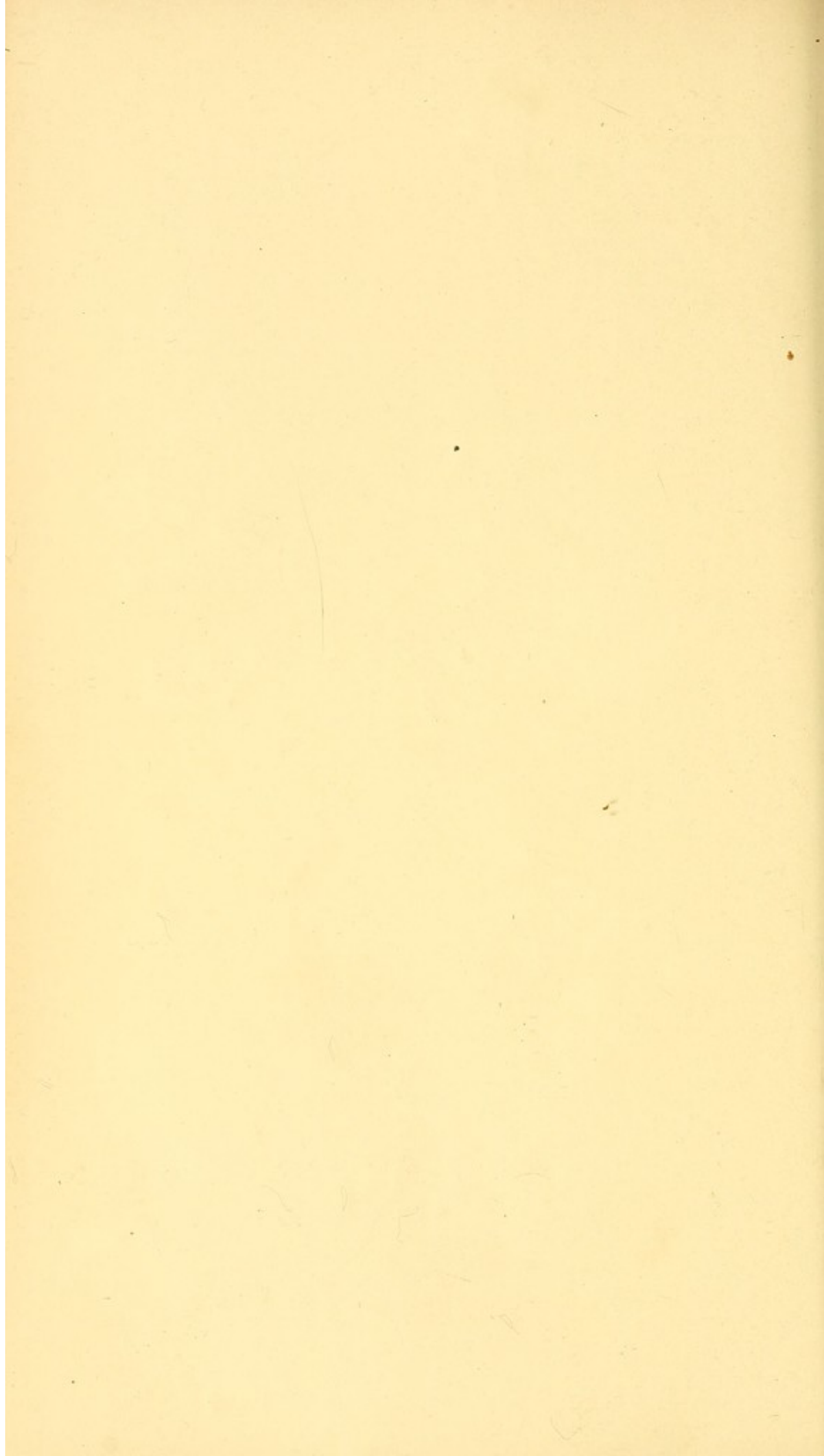


Crystals of pure nitrate of urea, obtained by dissolving some of the nitrate in water and evaporating, so that crystals may form.  $\times 130$ .

Fig. 5.



Nitrate of urea, formed by adding only two drops of nitric acid to highly concentrated urine.  $\times 130$ .





## ILLUSTRATIONS OF URINE.

### PLATE IV.

Oxalate of Urea,  $C_2H_4N_2O_2$ , HO,  $C_2O_3$ .

Fig. 1. Crystals of oxalate of urea, obtained by re-crystallizing nearly pure oxalate of urea from an aqueous solution. *a*. Dendritic masses, in which the form of the crystal is not very distinct. *b*. Masses of well formed crystals. *c*. Perfect crystals of oxalate of urea.

Fig. 2. Crystals of oxalate of urea obtained by evaporating healthy urine to dryness, and extracting the residue with alcohol; the alcoholic solution was then evaporated to dryness, and water added until the residue had a syrupy consistence; to this oxalic acid crystals were added in sufficient quantity to form an oxalate with the urea present. *d*. Represents the general character of the crystals of oxalate usually formed in this manner. *e*. More perfect crystals.

[To face Page 136.]



# URINE - IV.

Fig 1

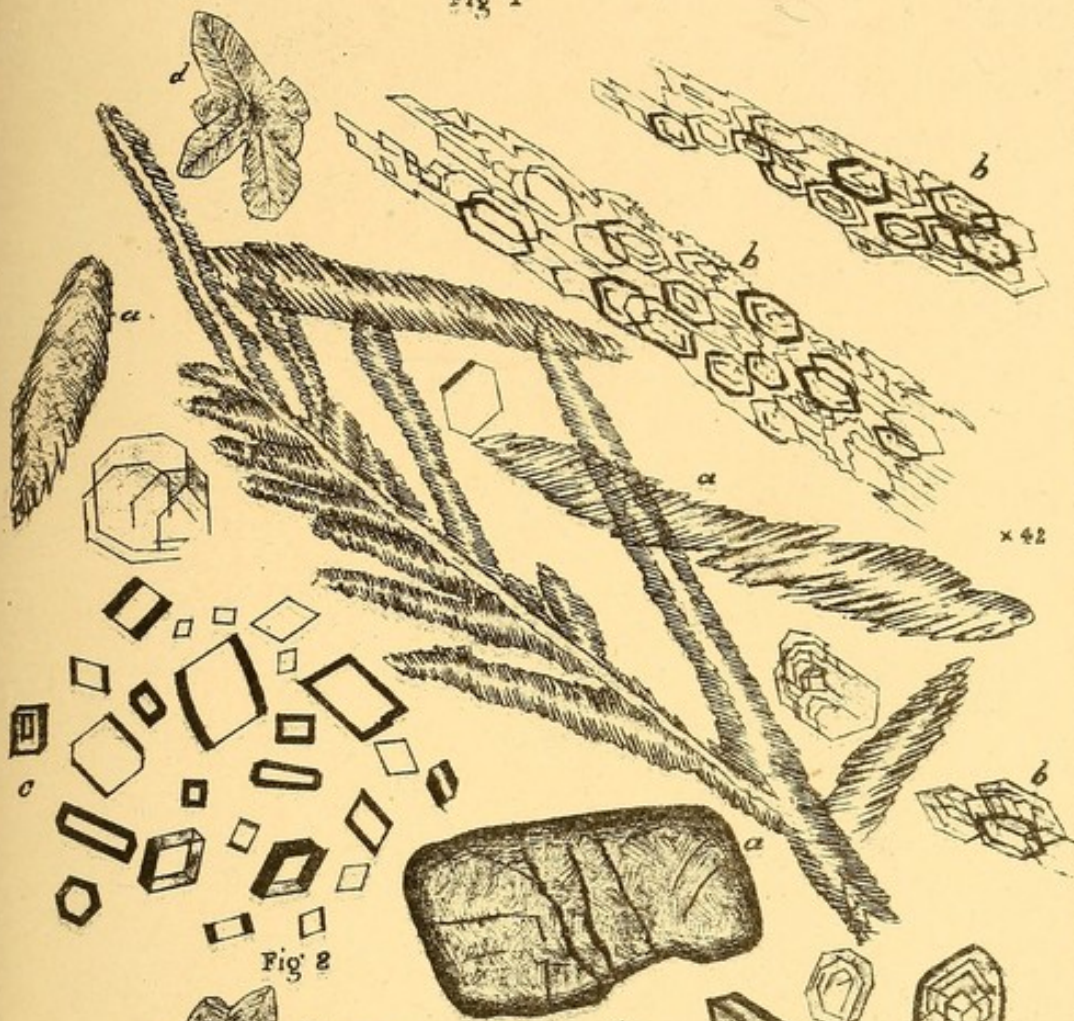
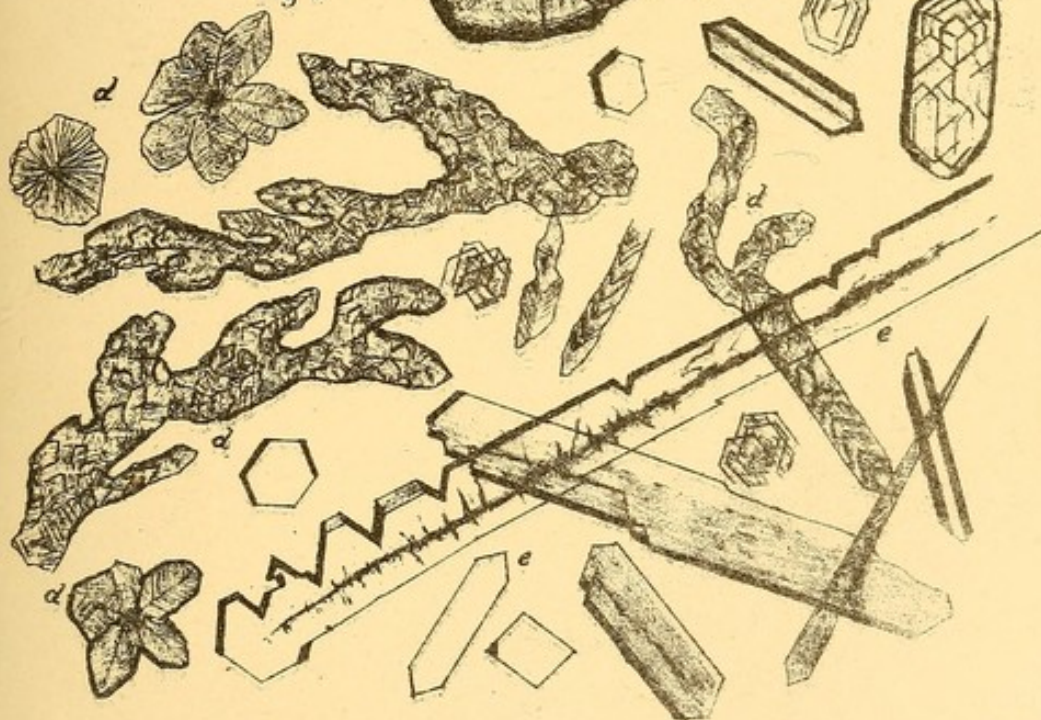


Fig 2



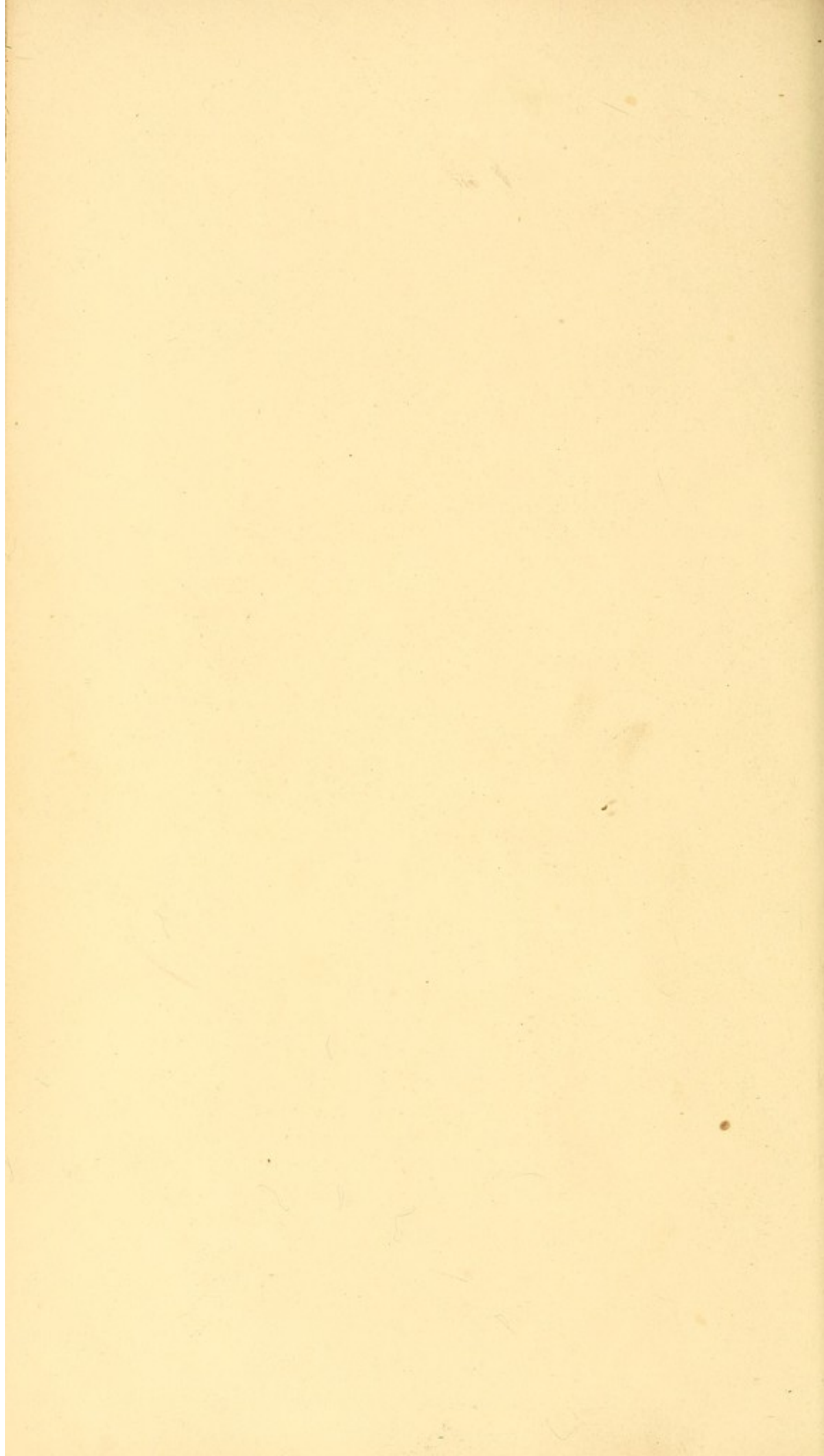
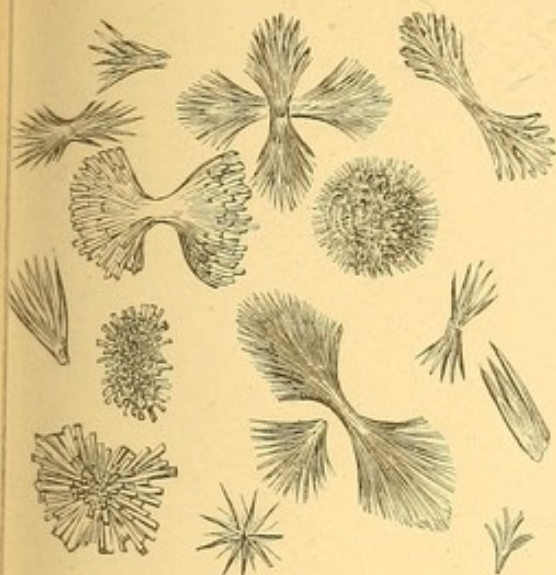


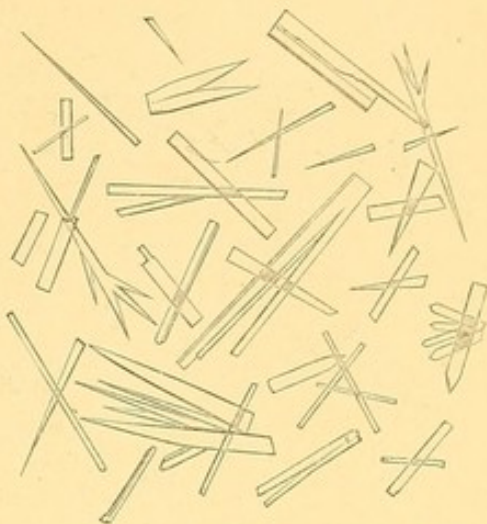


Fig. 1.



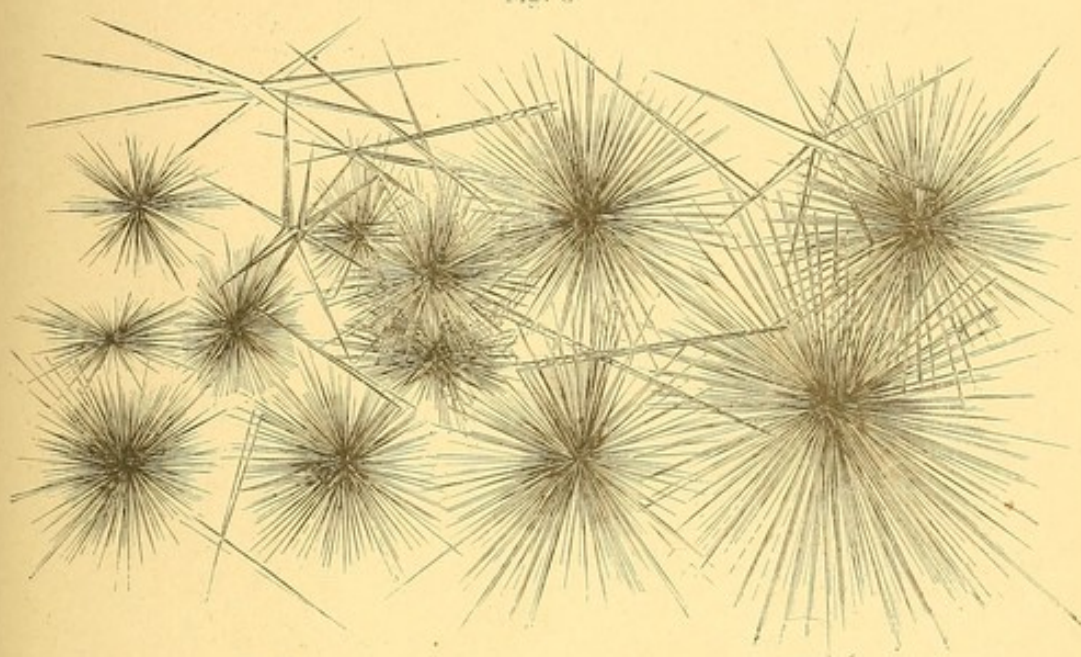
Urate of magnesia.  $MgO, C_{10}H_8N_4O_5 + 6 aq$  Crystallized  
in tufts.  $\times 130$

Fig. 2.



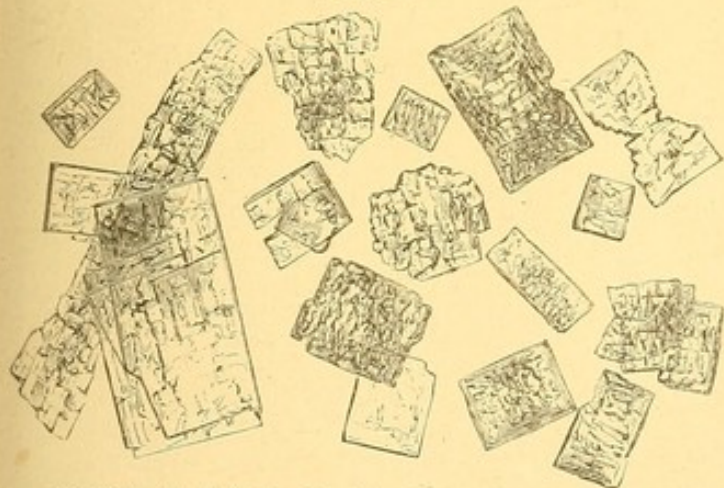
Urate of magnesia, showing the separate forms of  
the crystals.  $\times 215$

Fig. 3.



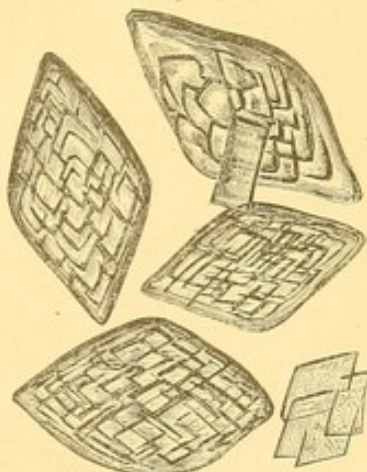
$\times 130$ .  $\times 215$ .  
Urate of lime.  $CaO, C_{10}H_8N_4O_5 + 2 aq$  Crystallized in tufts composed of long acicular crystals.

Fig. 4.



Uric acid.  $C_{10}H_4N_4O_6$  Precipitated by adding hydrochloric acid  
to urate of potash.  $\times 130$ .

Fig. 5.



Uric acid deposited from urine.  
 $\times 130$ .

$\frac{1}{1000}$  of an inch  $\boxed{\quad} \times 130$ .

" "  $\boxed{\quad} \times 215$ .

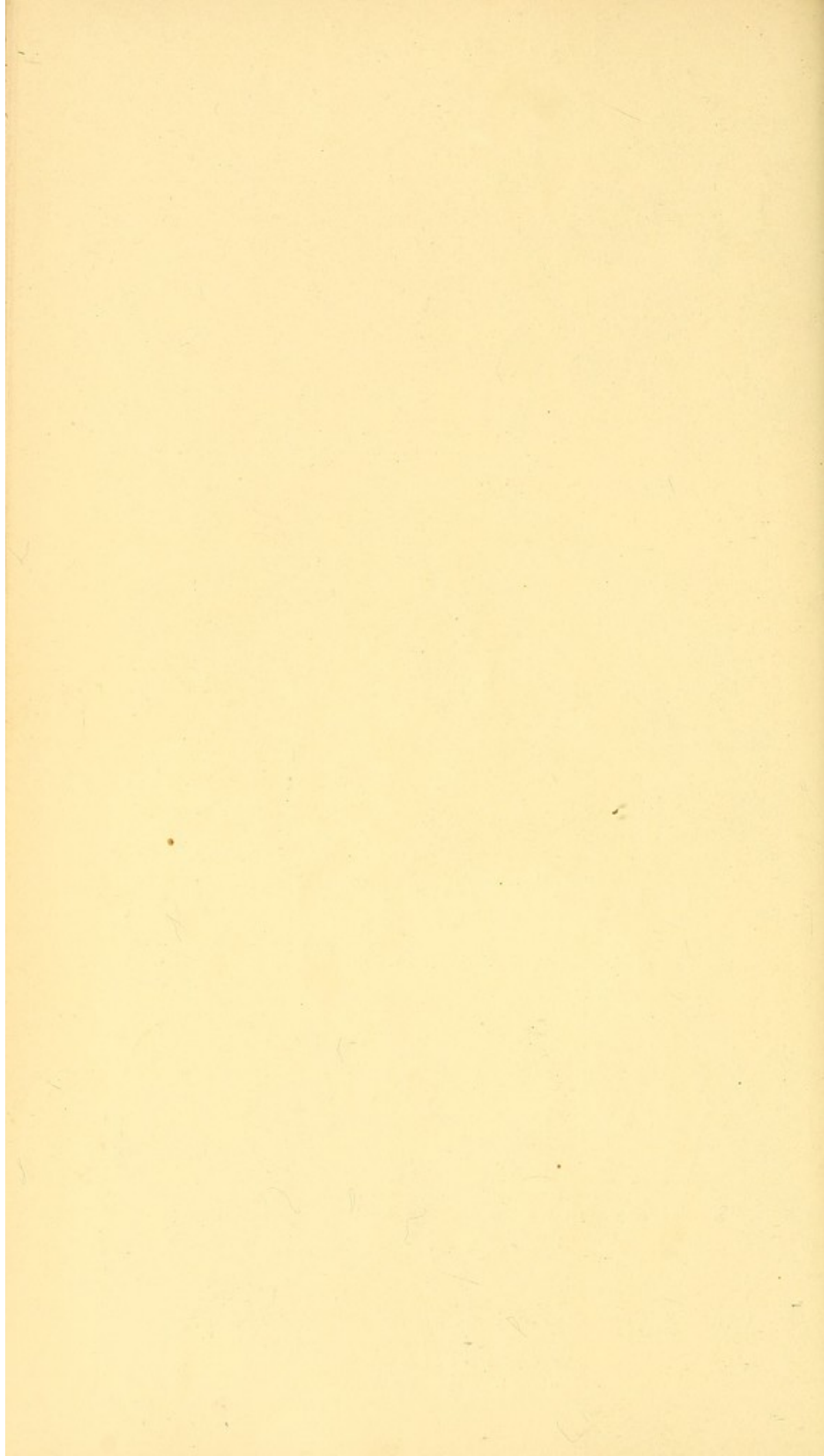




Fig. 1.

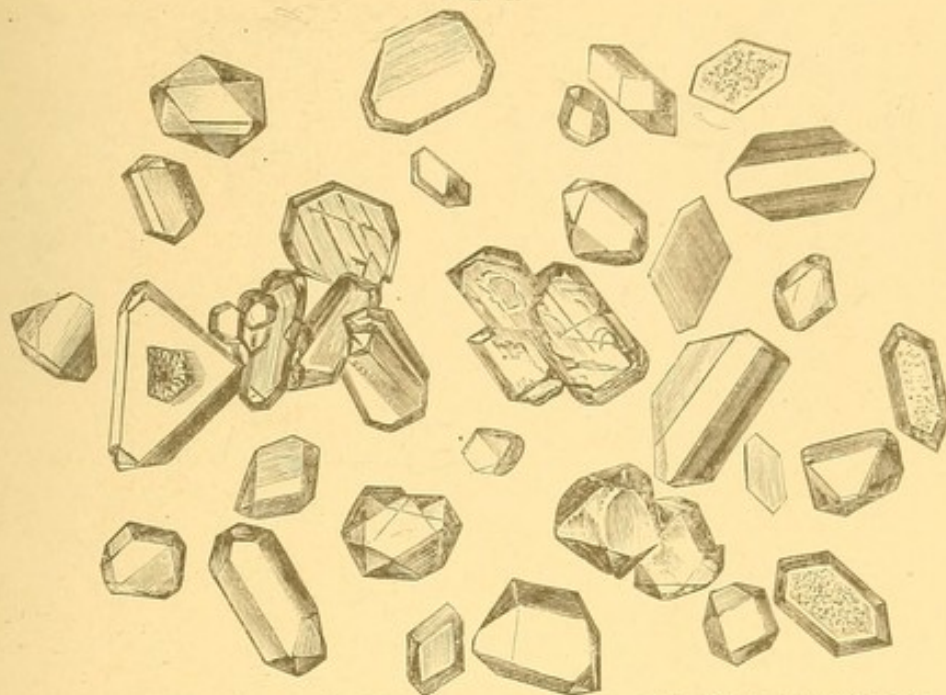
Alloxan.  $C_6H_2N_2O_8$ . Crystallized from an aqueous solution obtained from uric acid.  $\times 42$ .

Fig. 2.

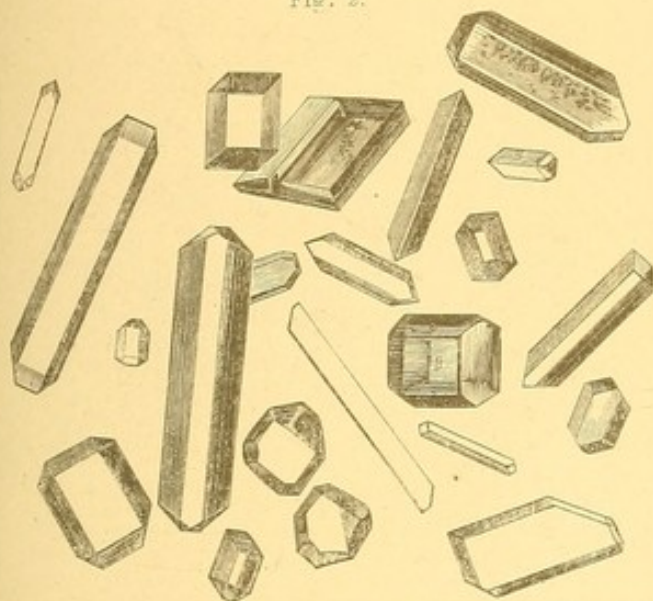
Alloxantin.  $C_{10}H_4N_4O_{11} + 6 \text{ aq.}$  Prepared from uric acid.  $\times 130$ .

Fig. 3.

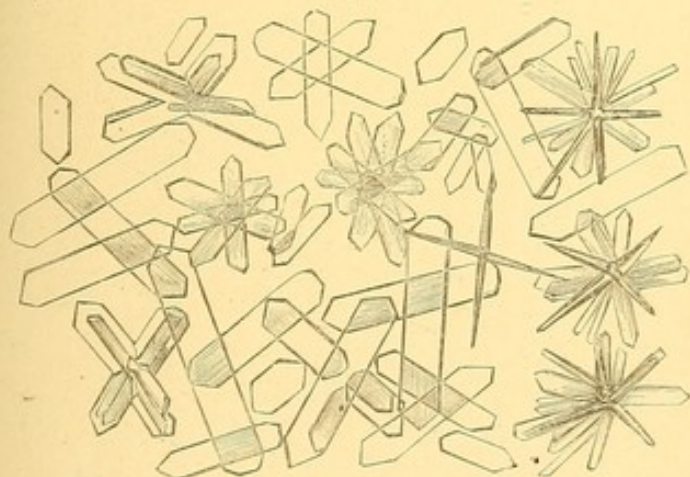
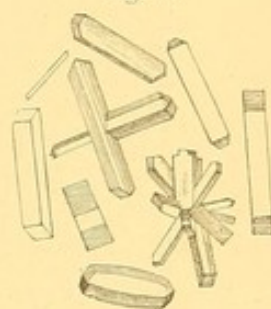
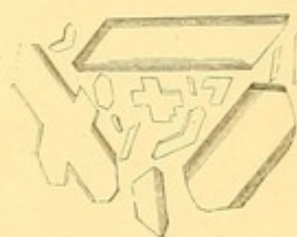
Parabanic acid.  $C_6H_2N_2O_6$ . Obtained from uric acid.  $\times 130$ .

Fig. 4.



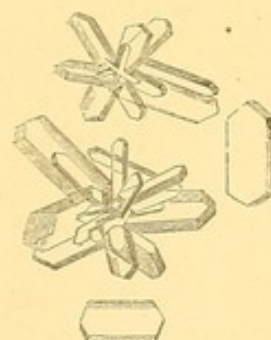
Crystals of creatine. p. 138.

Fig. 5.



Crystals of inosite. p. 280.

Fig. 6.



Lactate of copper. p. 153.

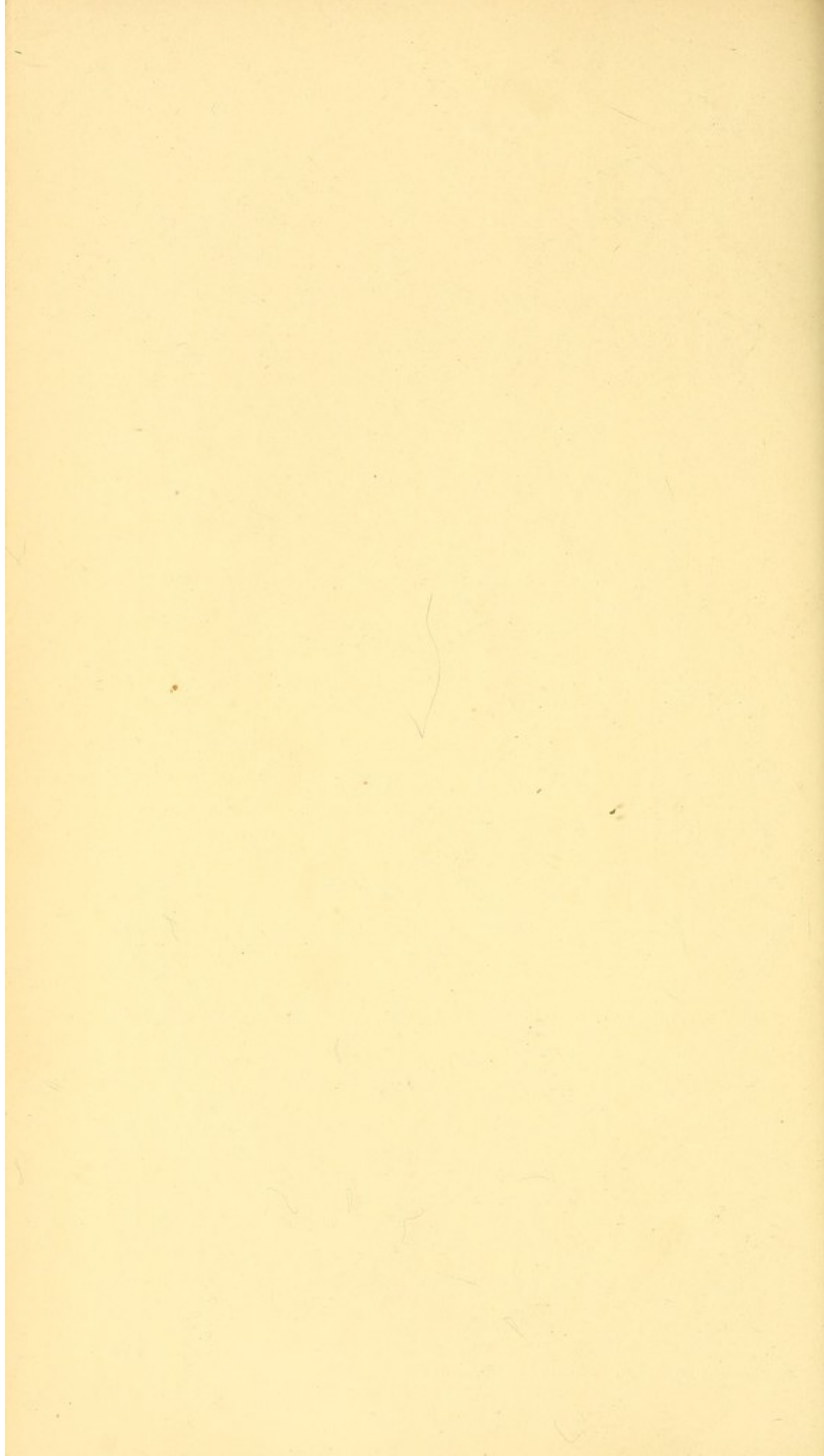
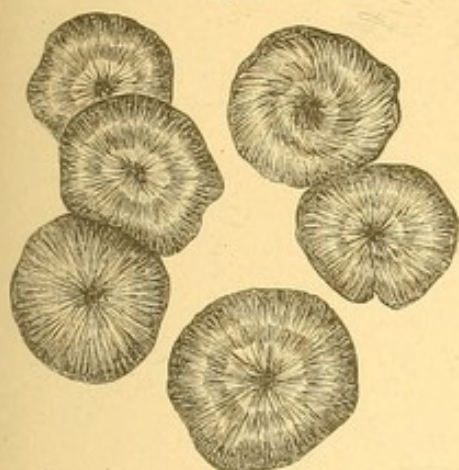


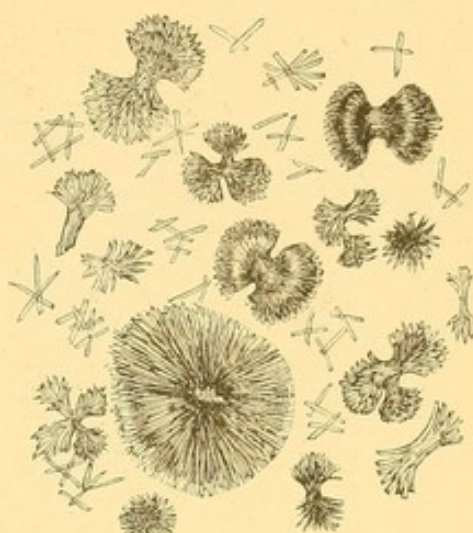


Fig. 1.



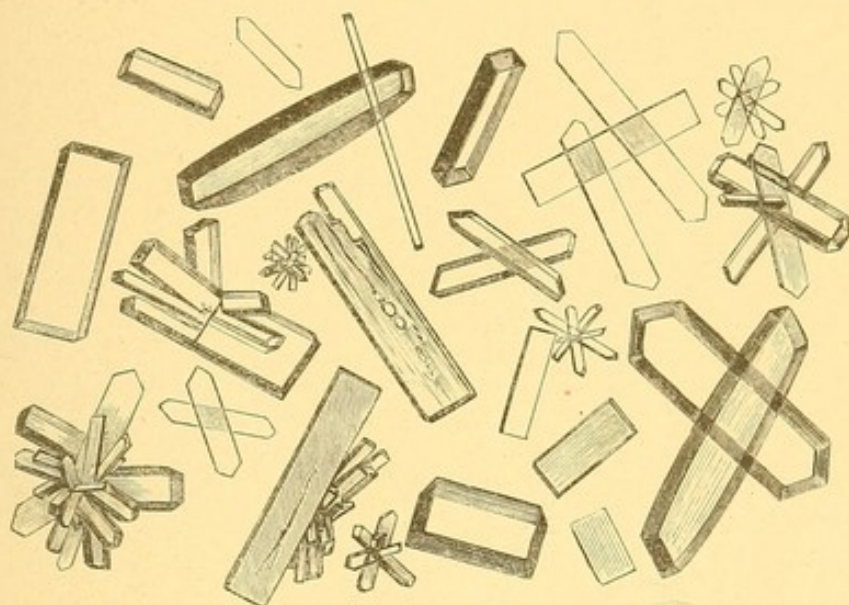
Compound of chloride of zinc and creatinine, as it is obtained from urine. ( $C_4H_7N_3O_2, Zn Cl$ )  $\times 29$ .

Fig. 2.



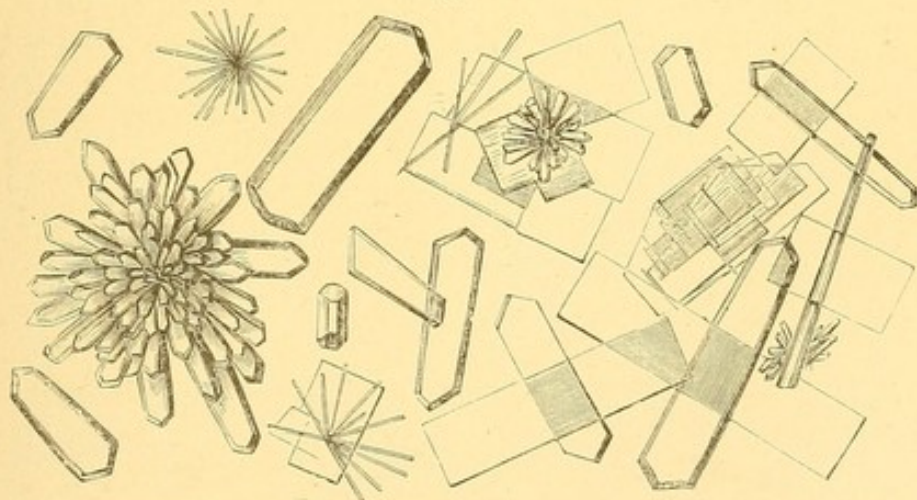
Compound of chloride of zinc and creatinine after re-crystallization in water.  $\times 215$  p. 137.

Fig. 3.




Crystals of creatine obtained from the chloride of zinc compound. Crystallized from an aqueous solution.  $\times 130$  p. 138.

Fig. 4.

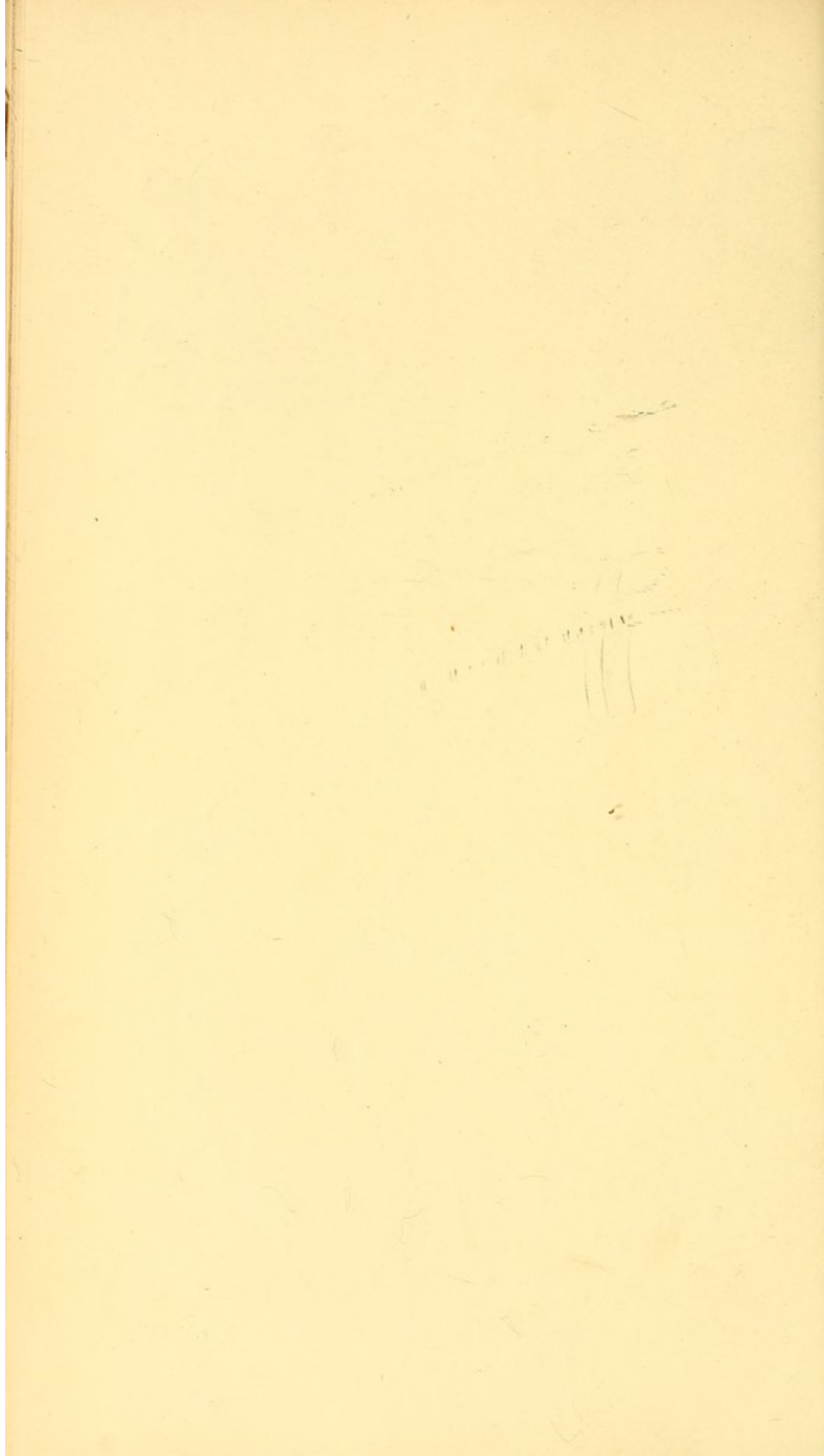


Crystals of creatinine obtained from the chloride of zinc compound.  $\times 130$  p. 137.

$\frac{1}{1000}$  of an inch.   $\times 130$ .

" "   $\times 215$ .

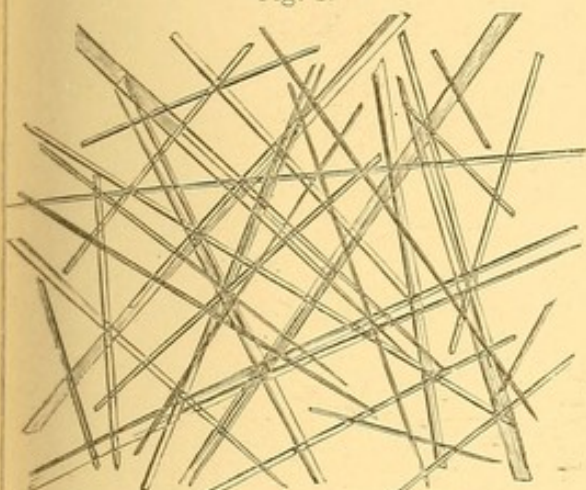
[To face page 142.]





ILLUSTRATIONS OF URINE.

Fig. 1.



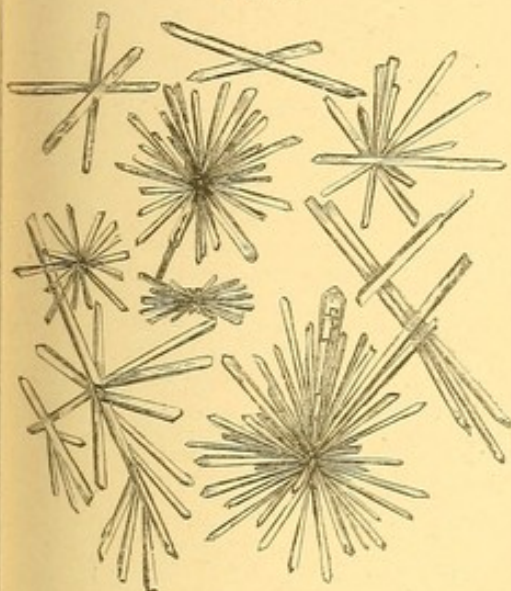
Alloxanic acid.  $C_8H_4N_2O_{10}$ .  $\times 130$ .

Fig. 2.



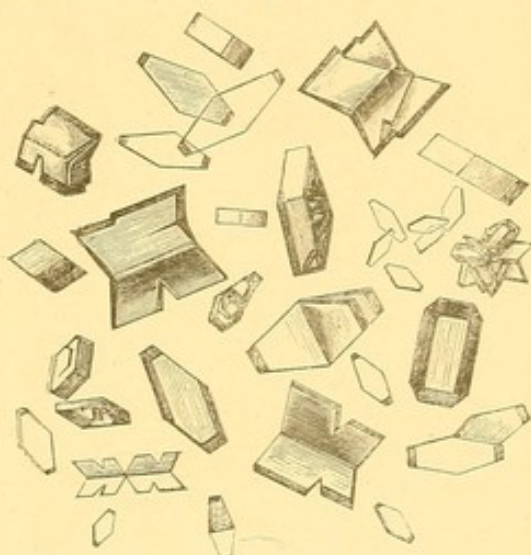
Oxaluric acid.  $C_6H_4N_2O_8$ .  $\times 215$ .

Fig. 3.



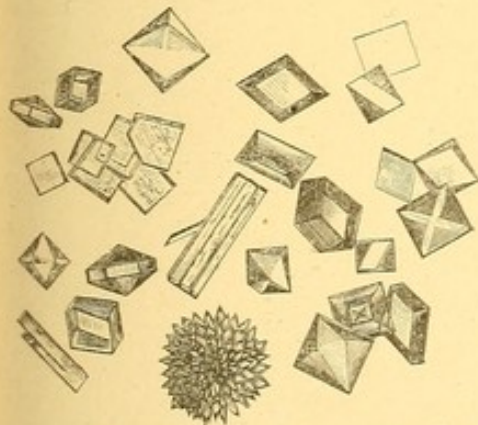
Oxalurate of ammonia.  $NH_3, C_6H_4N_2O_8$ .  $\times 42$ . p. 153.

Fig. 4.



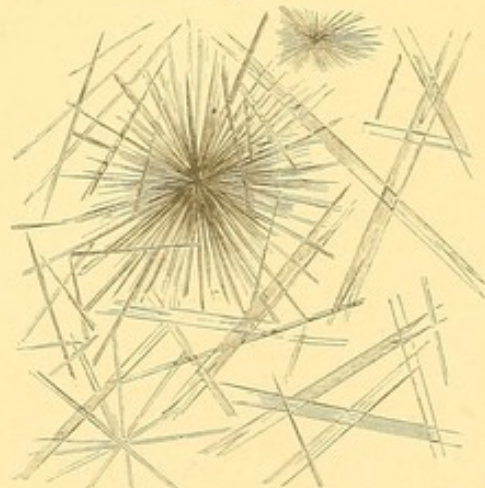
Oxalurate of lime.  $CaO, C_6H_4N_2O_8 + aq$ .  $\times 42$ .

Fig. 6

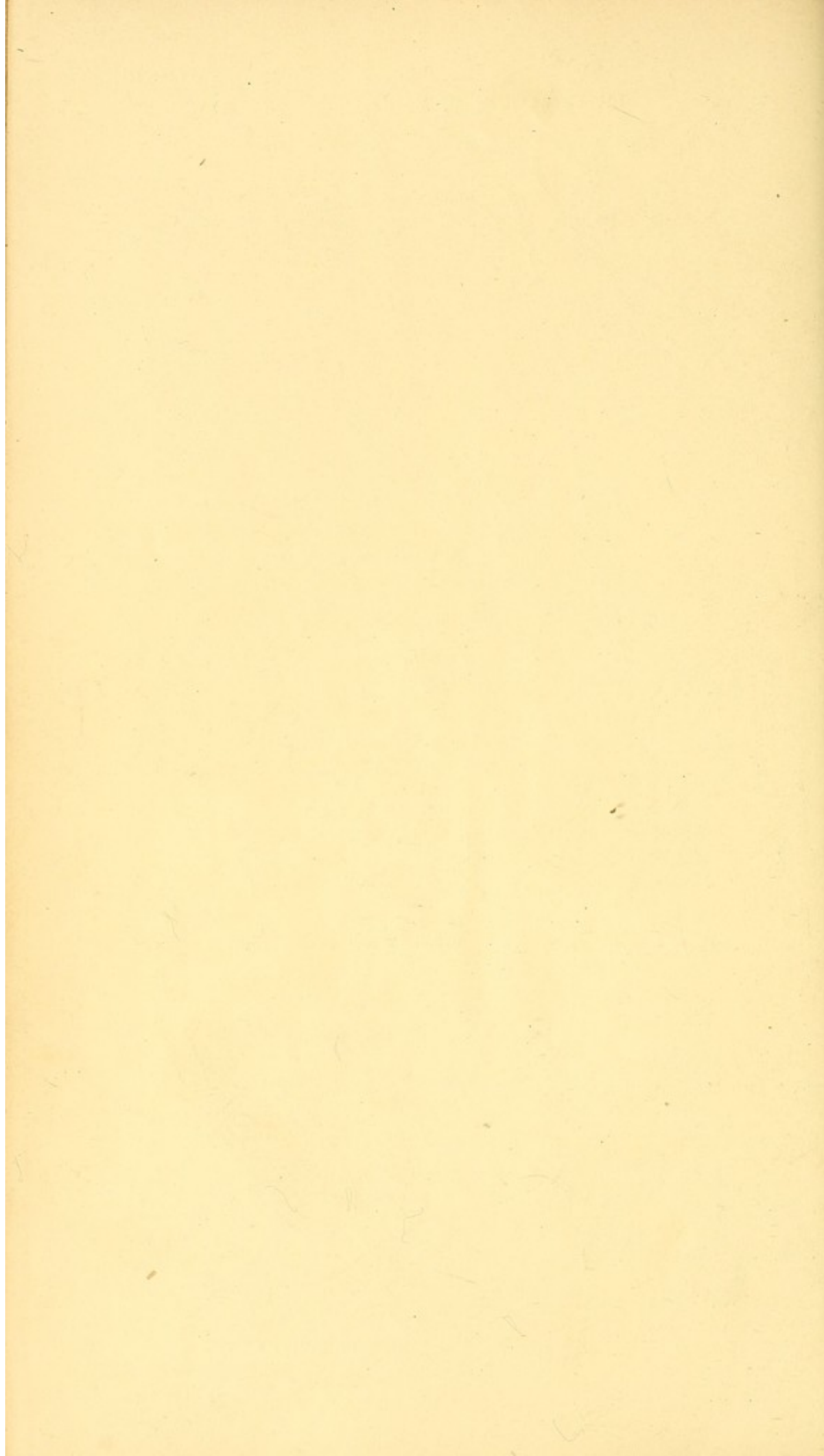


Oxalurate of magnesia.  $MgO, C_6H_4N_2O_8 + aq$ .  $\times 215$ .

Fig. 5.



Uramile.  $C_8H_5N_3O_6$ .  $\times 130$ .





## ILLUSTRATIONS OF URINE.

### PLATE IX.

Fig. 1. Alloxanic acid,  $C_8H_4N_2O_{10}$ .

Fig. 2. Oxaluric acid,  $C_6H_4N_2O_8$ .

Fig. 3. Oxalurate of ammonia,  $NH_3$ ,  $C_6H_4N_2O_8$ .

Fig. 4. Murexide,  $C_{16}H_8N_6O_{12}$ .

Fig. 5. Thionuric acid,  $C_8H_5N_3O_8 + 2SO_2$ .

Fig. 6. Thionurate of ammonia,  $2NH_3$ ,  $C_8H_5N_3O_8$ ,  $2SO_2 + 2 aq$ .

The alloxanic acid was prepared by adding baryta water to a solution of alloxan. The alloxanate of baryta so formed was decomposed by sulphuric acid, and the clear solution filtered from the precipitate of sulphate of baryta was evaporated and crystallized.

Oxaluric acid was obtained by treating a solution of oxalurate of ammonia with hydrochloric acid. The oxaluric acid was precipitated.

Oxalurate of ammonia was prepared by dissolving parabanic acid in ammonia. Upon heating the solution to the boiling point oxalurate of ammonia was formed, and crystals were obtained upon evaporation.

Murexid. Carbonate of ammonia was added to a warm solution of alloxan and alloxantin. The murexid separated in its characteristic dark red crystals as the solution cooled.

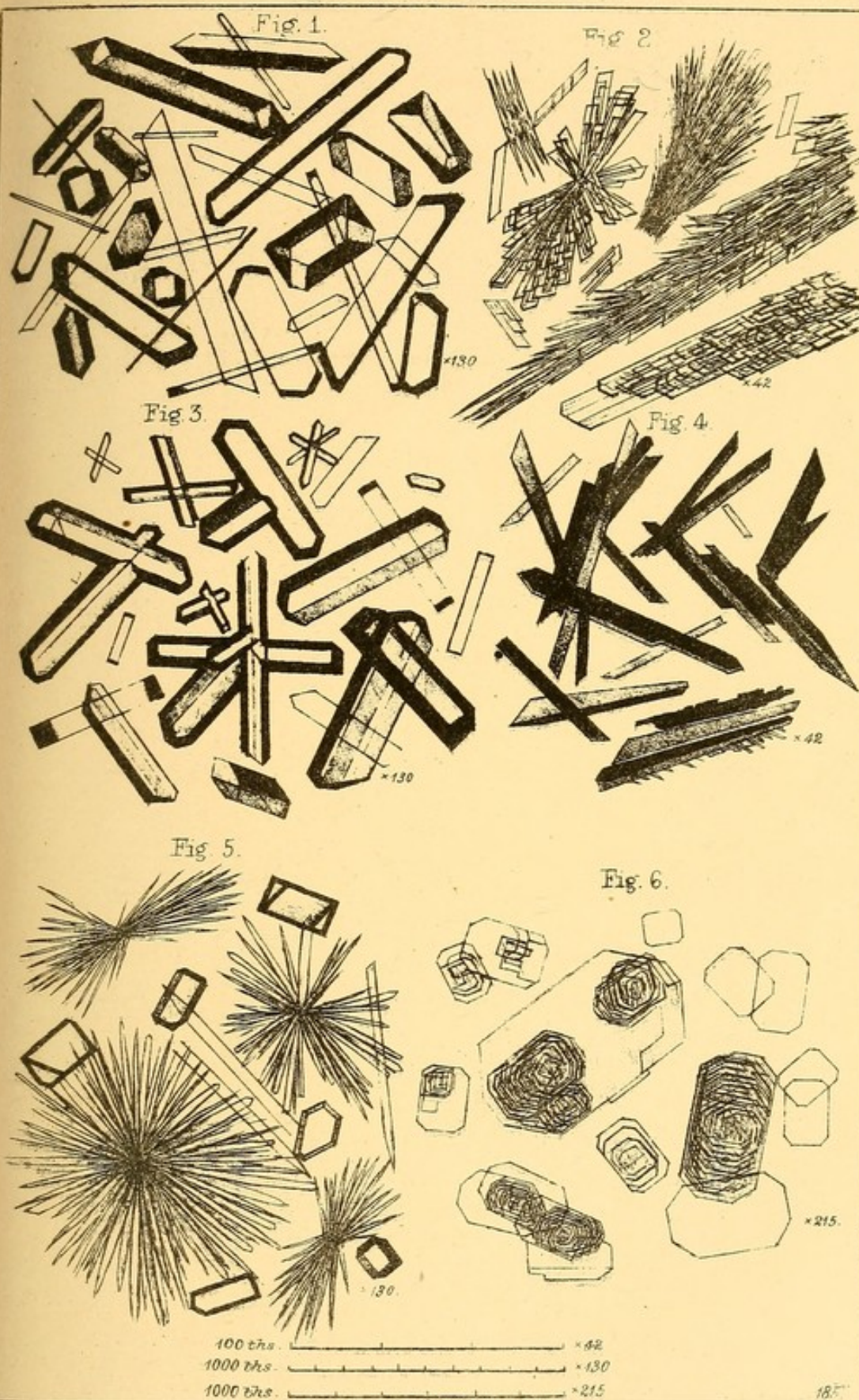
Thionuric acid. A solution of thionurate of ammonia in hot water, was precipitated by acetate of lead. The precipitate was suspended in water and decomposed by sulphuretted hydrogen. The sulphuret was separated by filtration, and the clear solution yielded crystals on evaporation.

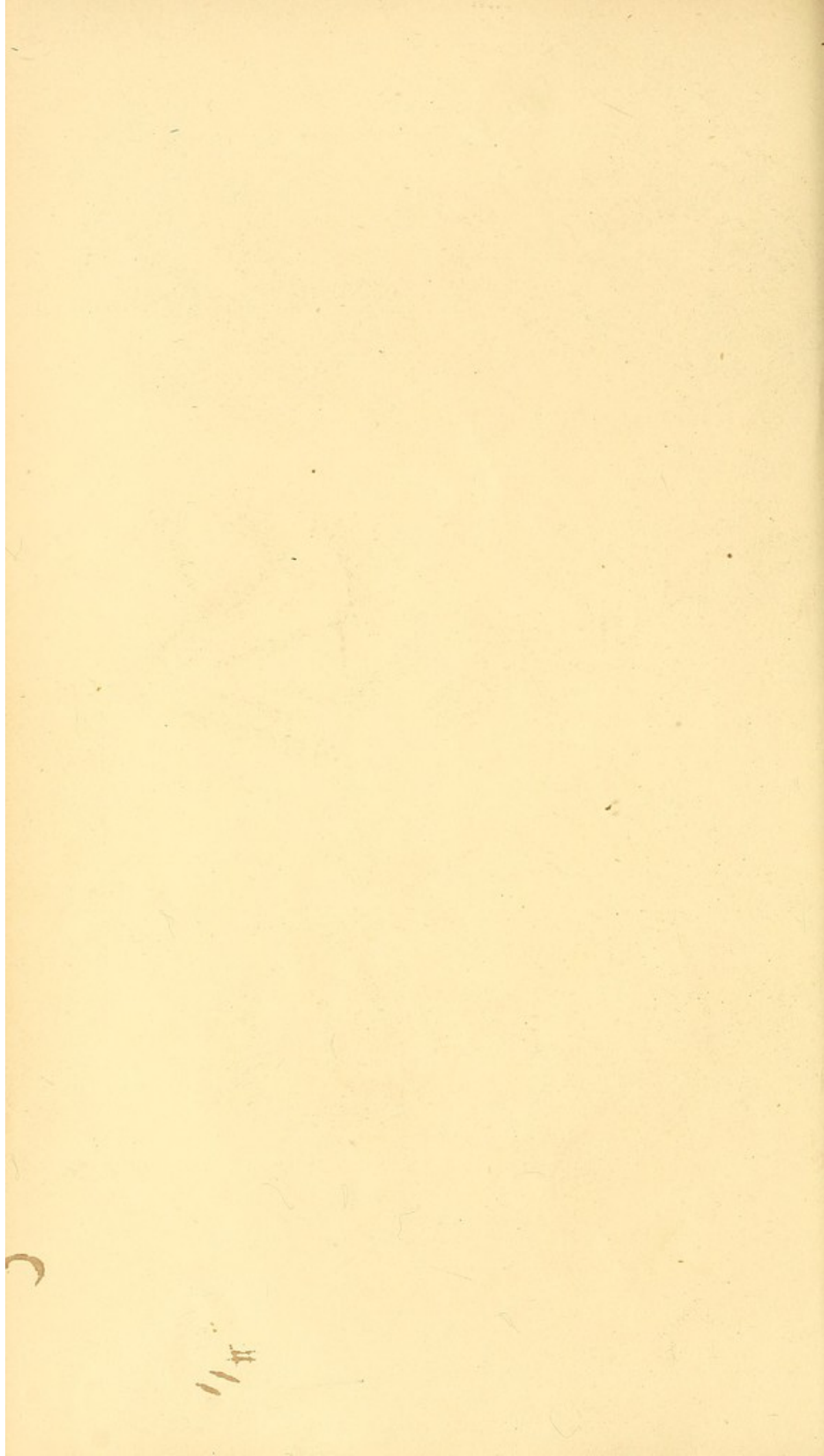
Thionurate of ammonia. A cold strong solution of alloxan was mixed with a solution of sulphurous acid in water until the smell of the latter ceased to disappear after agitation. The fluid was then super-saturated with carbonate of ammonia, and kept boiling for nearly half-an-hour. Upon cooling, the salt crystallized in considerable quantity.

[To face Page 146.]



# URINE. IX.

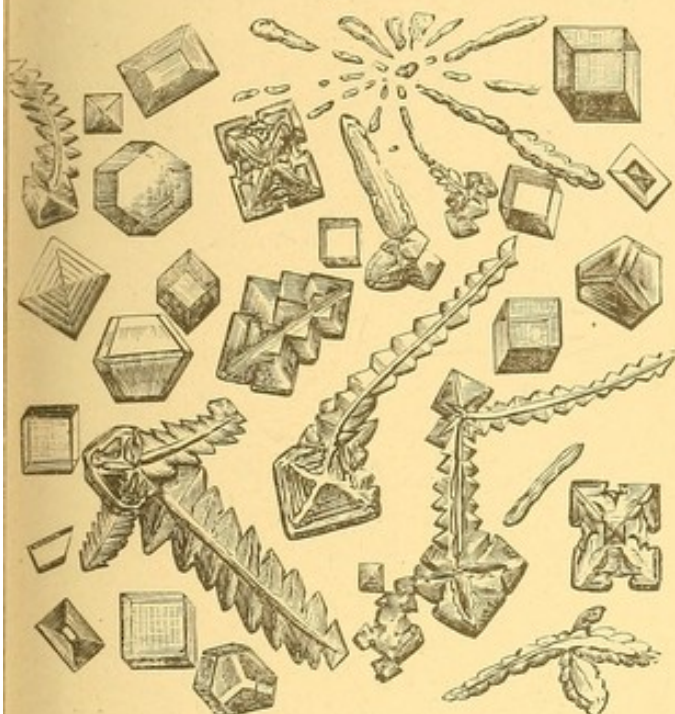






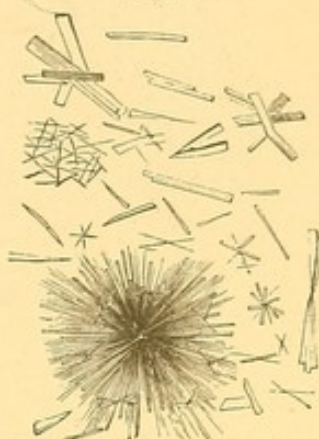
ILLUSTRATIONS OF URINE.

Fig. 1.



Crystals of chloride of sodium, examined in their own mother liquor.  $\times 215$ . p. 167.

Fig. 2.



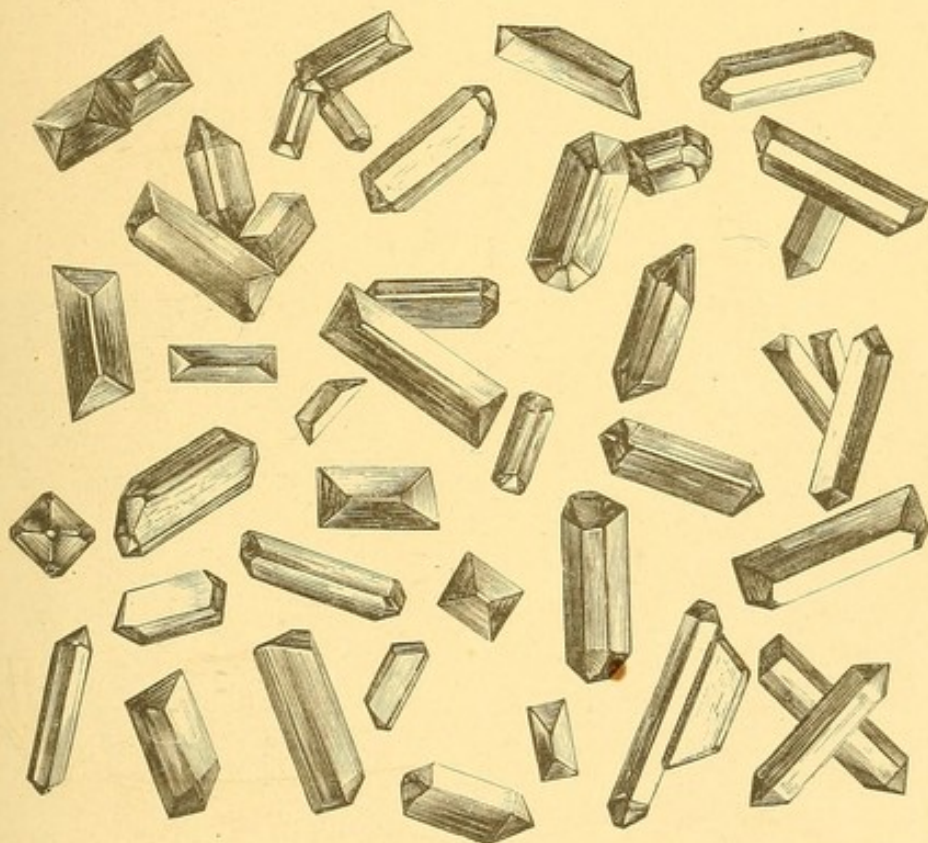
Phosphate of lime in a crystalline form.  $\times 215$ . p. 163.

Fig. 3.

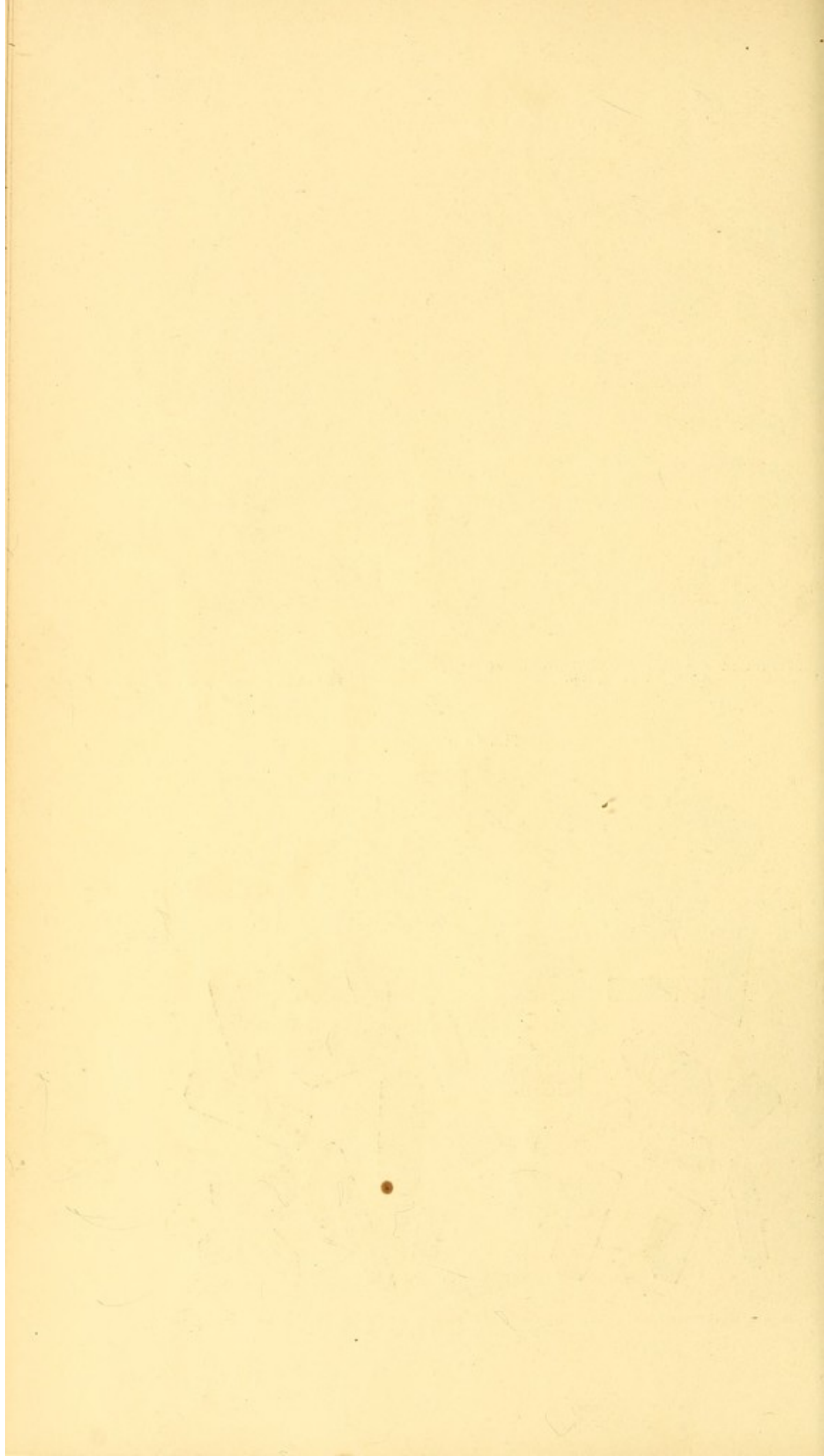


Phosphate of lime.  $\times 215$ . p. 163.

Fig. 4.



Crystals of triple phosphate in the form of triangular prisms, with obliquely truncated extremities, as they frequently occur in urine.  $\times 45$ . p. 164.





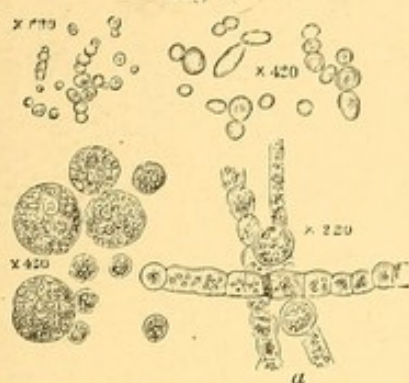
ILLUSTRATIONS OF URINE.

Fig. 1.



Fructification of *Penicillium glaucum*. p. 243.

Fig. 2.



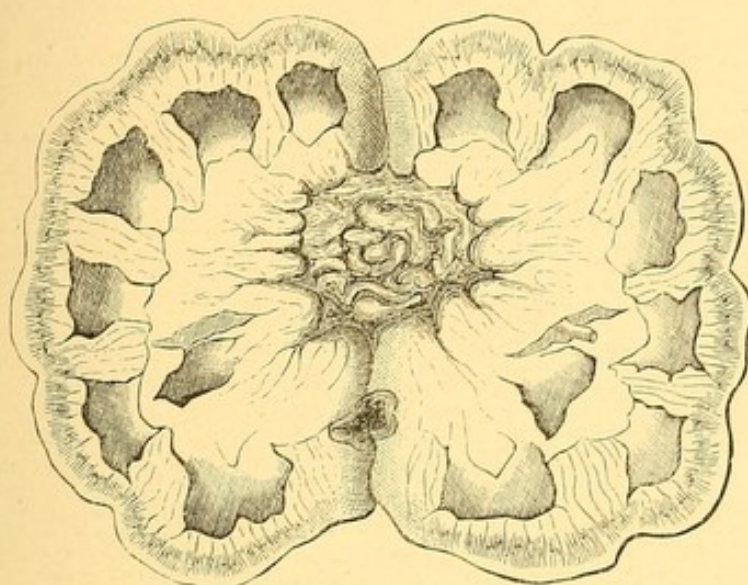
The sugar fungus from diabetic urine. p. 240

Fig. 3.



Fructification of yeast fungus. p. 243.

Fig. 4.



Human kidney, showing greatly dilated pelvis and calyces, shrunken pyramids, and diminished cortical portion. p. 180.

Fig. 5.

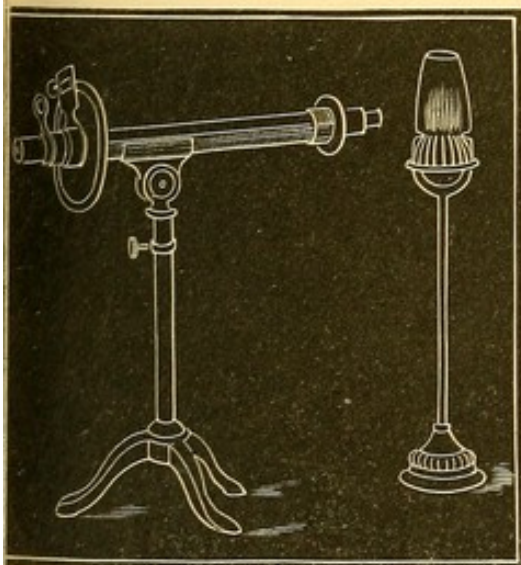
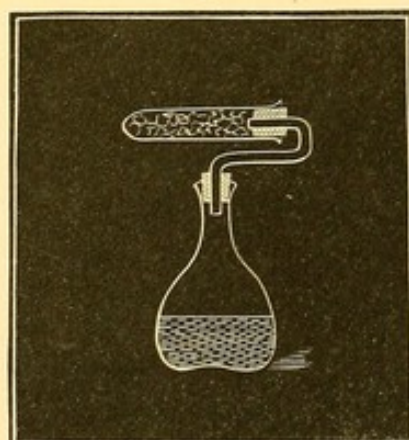


Illustration of Mitscherlich's polarising saccharimeter for determining the proportion of sugar in fluids. p. 252.

Fig. 6.



Flask adapted for the estimation of carbonic acid gas, used in determining the proportion of sugar in fluids by the fermentation test. p. 252.





Fig. 1.

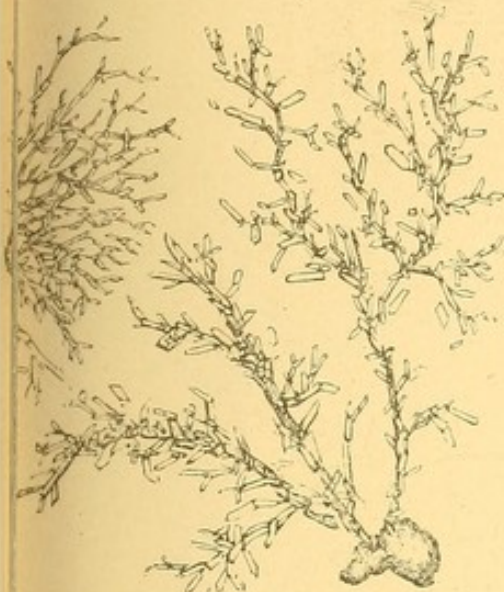
Crystals of diabetic sugar.  $\times 42$ . p. 242.

Fig. 2.

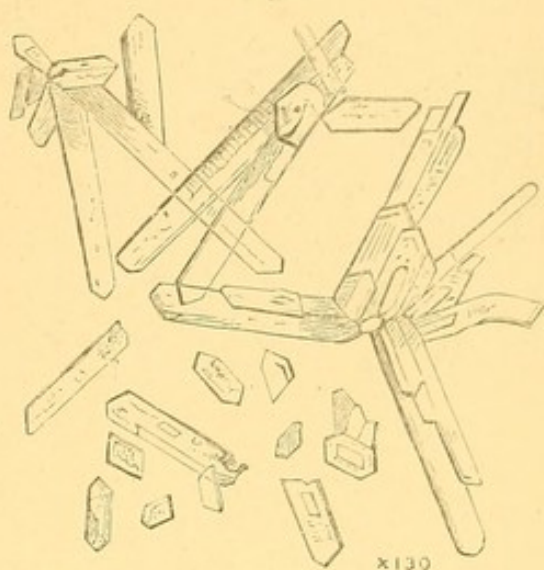
Separate crystals of diabetic sugar.  $\times 130$ . p. 242.

Fig. 3.

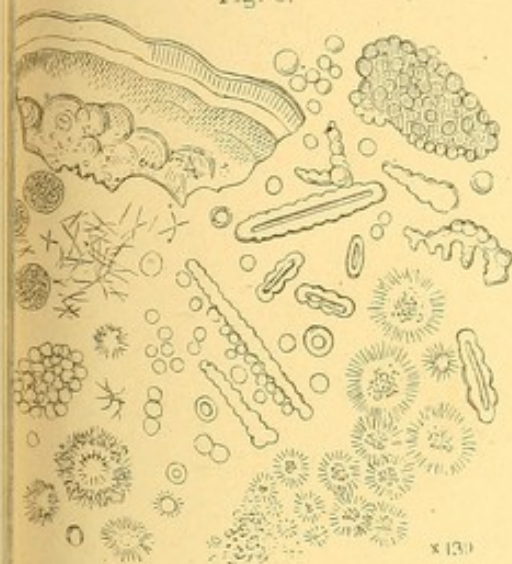
Crystals of leucine from urine.  $\times 130$ . p. 278.

Fig. 5.

Crystals of tyrosine  $\times 130$ . p. 279

Fig. 4.

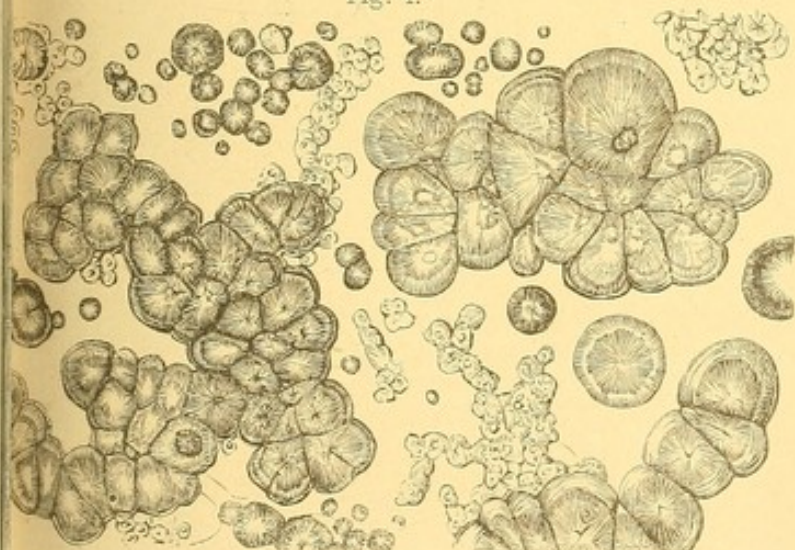
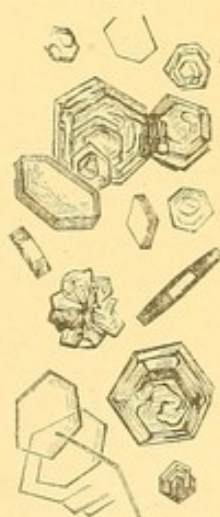
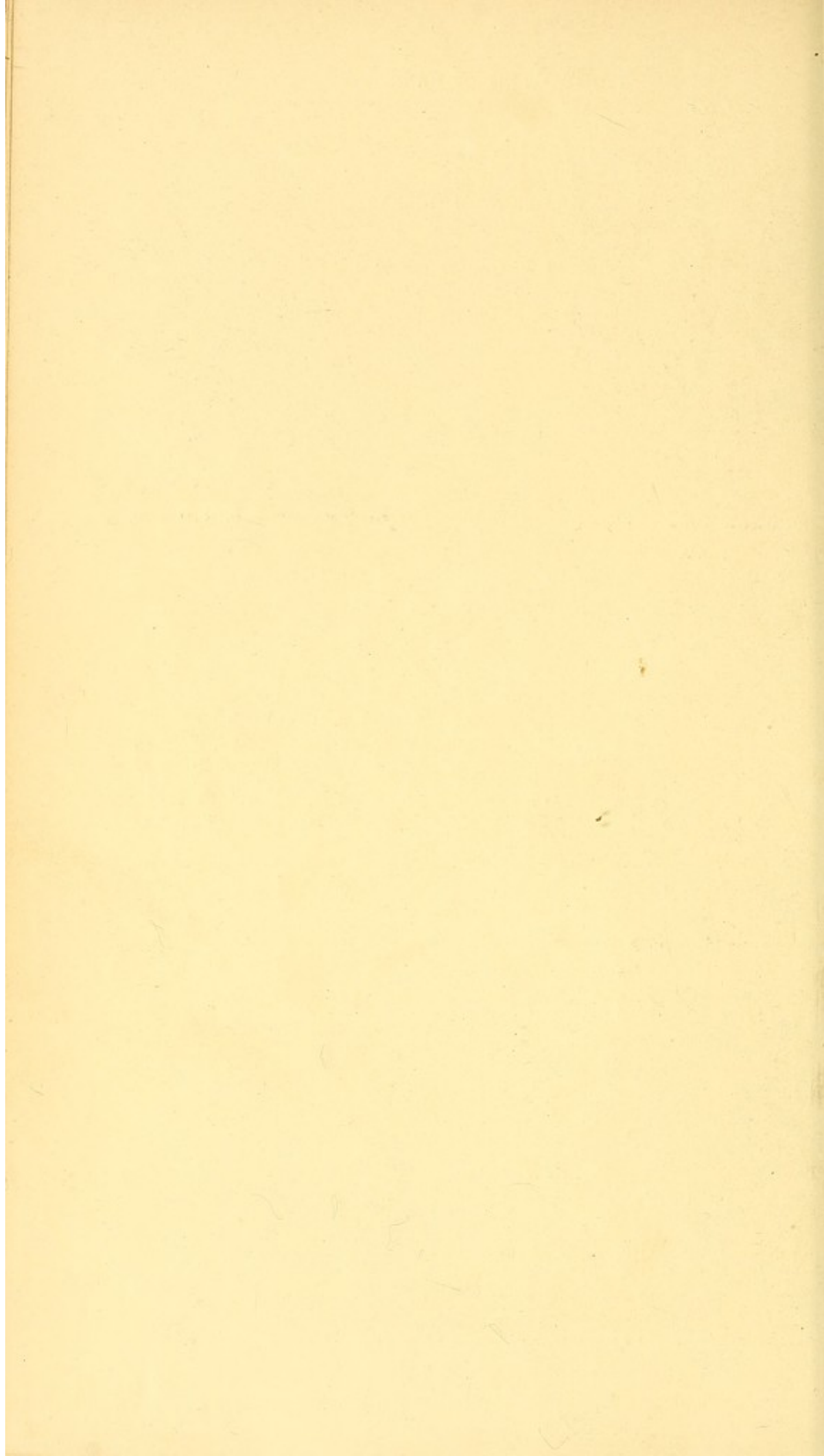
Crystals of leucine from urine of a case of leucocythemia  $\times 215$  p. 278

Fig. 6.

Cystine from urine.  
 $\times 215$  p. 280.

$\frac{1}{1000}$  of an inch  $\text{---}$   $\times 130$   
 " "  $\text{---}$   $\times 215$ .

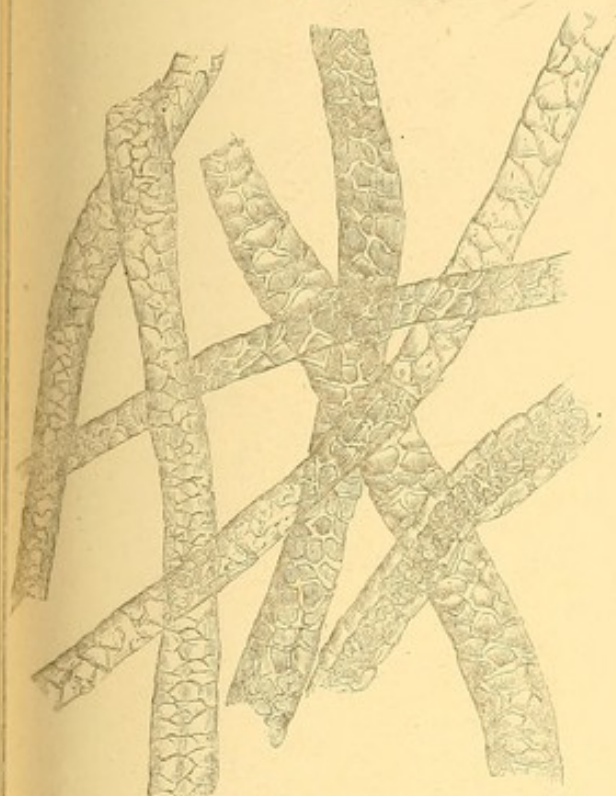
[To face page 230.]





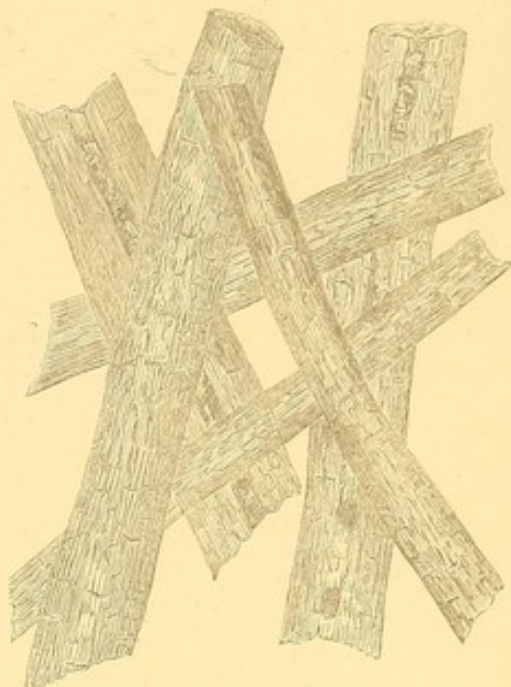
URINARY DEPOSITS.—EXTRANEEOUS MATTERS.

Fig. 1.



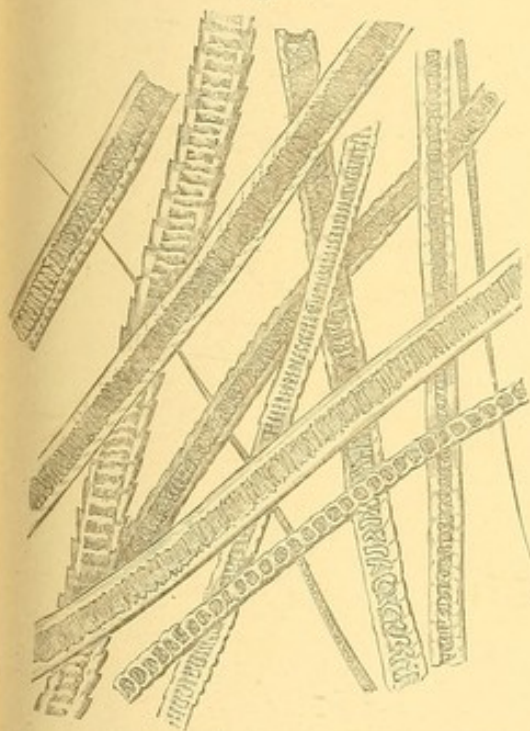
Portions of hairs from a blanket.  $\times 130$ . p. 291.

Fig. 2.



Fragments of human hair. In two the central canal occupied with the soft cells of the medulla is represented.  $\times 130$ . p. 291.

Fig. 3.



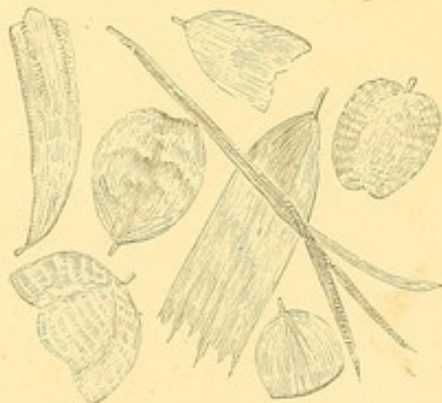
Fragments of cat's hair. Some of them near the apex, and others close to the root of the hair.  $\times 130$ . p. 291.

Fig. 4.



Fibres of silk. *a*, white silk; *b*, black silk.  $\times 215$ . p. 293.

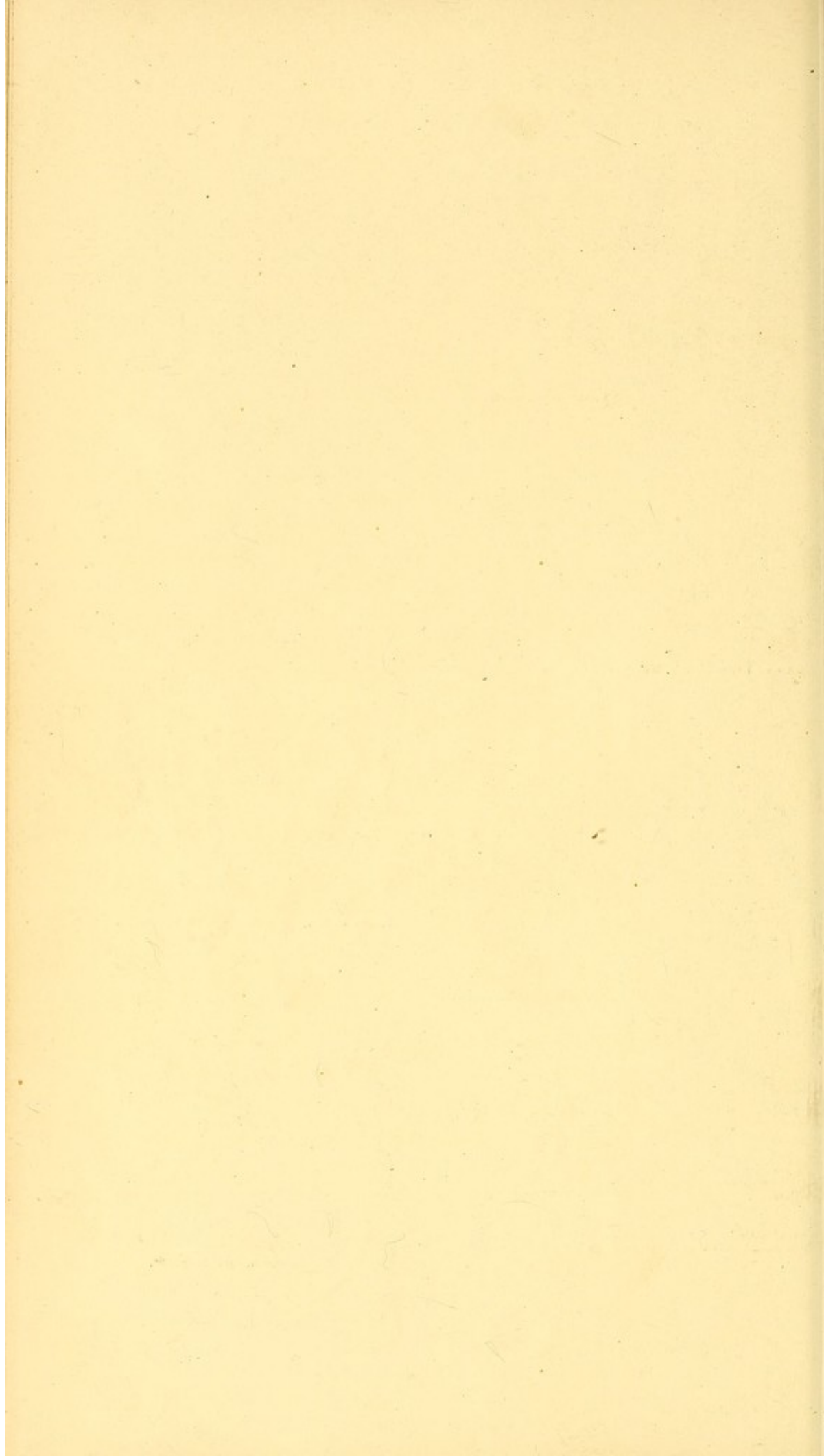
Fig. 5.



Scales of moth.  $\times 215$ . p. 293.

1/1000 of an inch  $\text{---}$   $\times 130$ .  
" "  $\text{---}$   $\times 215$ .

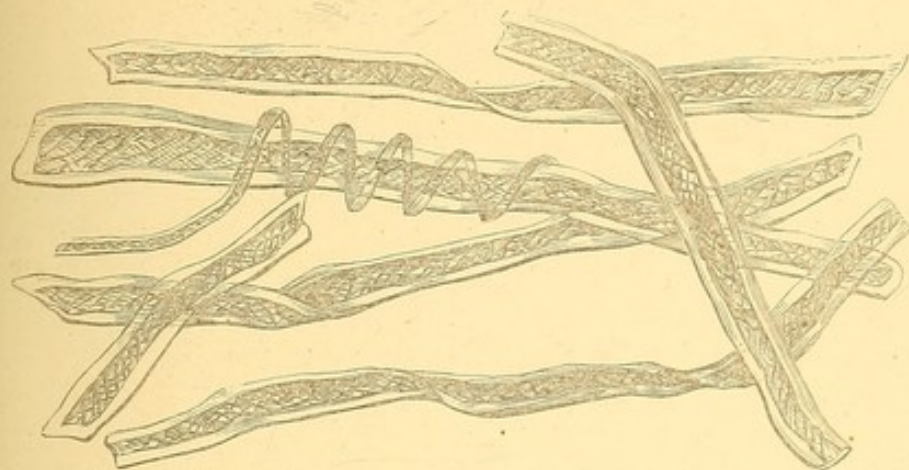
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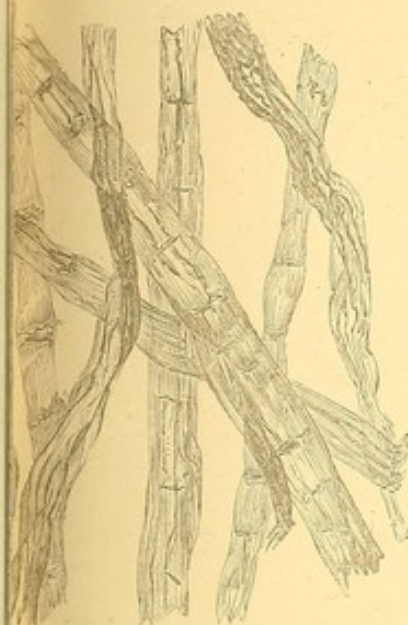
## URINARY DEPOSITS.—EXTRANEOUS MATTERS.

Fig. 6.



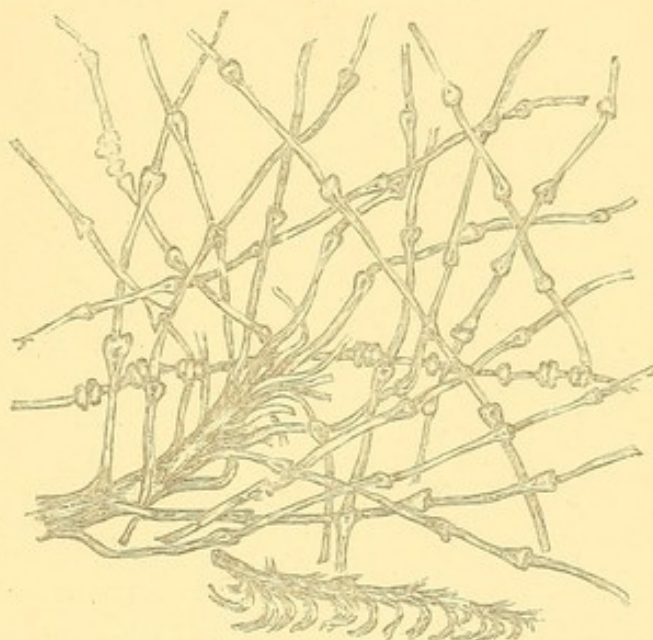
Cotton fibres. A very small fibre in the upper part of the figure is seen to be twisted round a larger one.  $\times 215$ . p. 294.

Fig. 7.



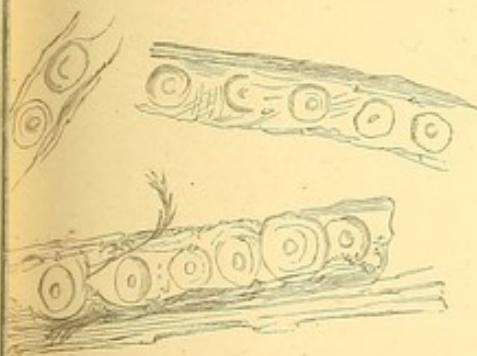
Portions of flax fibres.  $\times 215$ . p. 294.

Fig. 8.



Portions of feathers. The knotted pieces represented are obtained from the lower part of the shaft of the feather.  $\times 215$ . p. 294.

Fig. 9.




Fibres of deal wood swept from the floor.  $\times 215$ . p. 295.

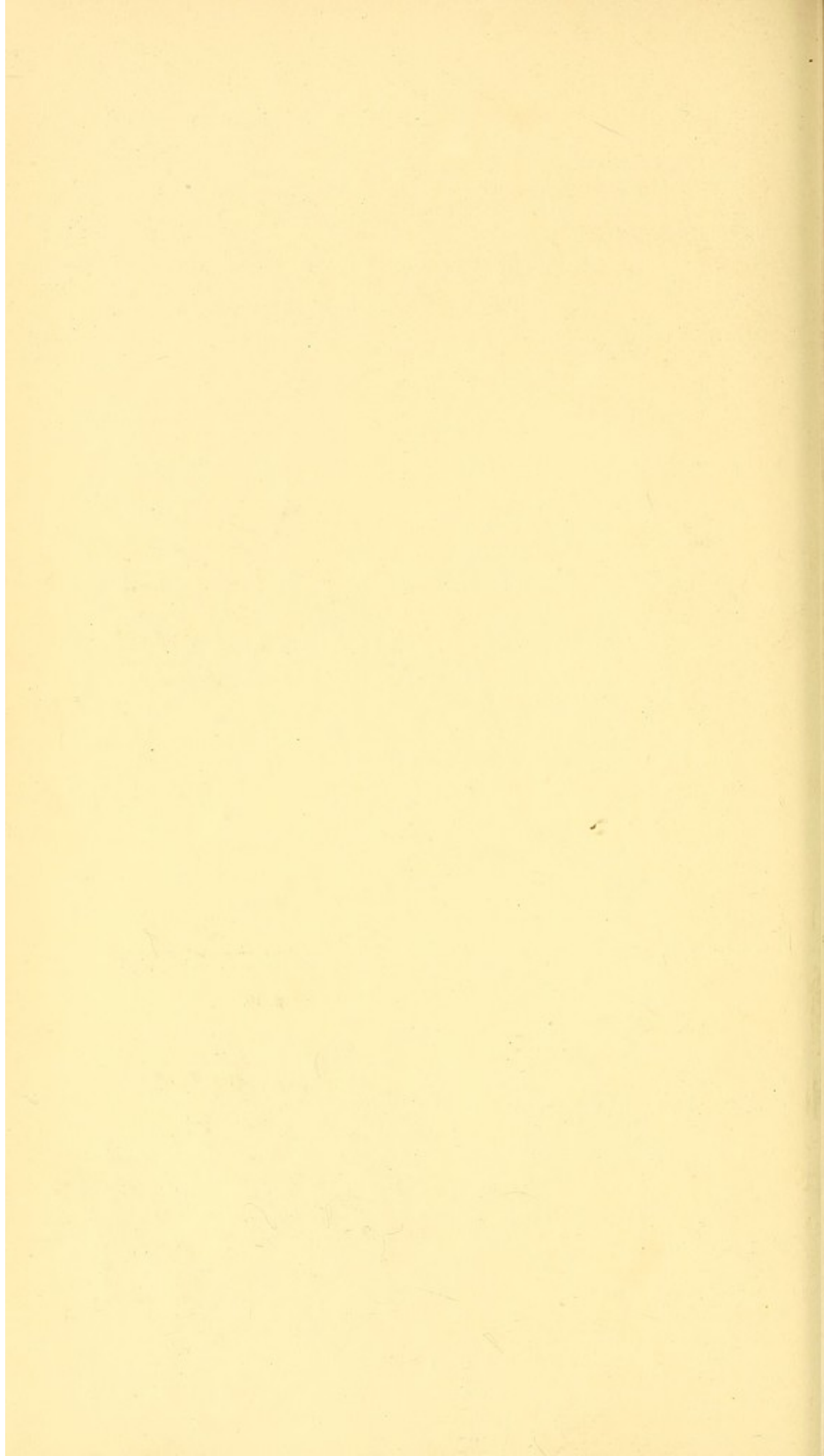
Fig. 10.



Elements of dust swept from a shelf.  $\times 215$ . p. 296.

$\frac{1}{1000}$  of an inch   $\times 215$ .

[To face page 296.]





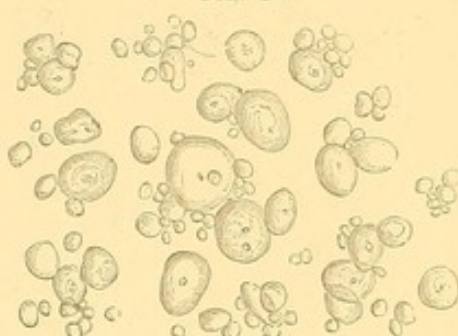
URINARY DEPOSITS.—EXTRANEEOUS MATTERS.

Fig. 11.



Potato starch. Its appearance in water.  
x 215 p. 295

Fig. 12.



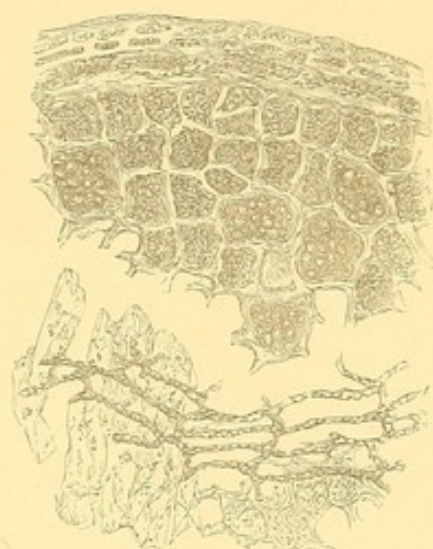
Wheat starch in water. x 215. p. 295.

Fig. 13.



Rice starch in water. x 215. p. 295.

Fig. 14.



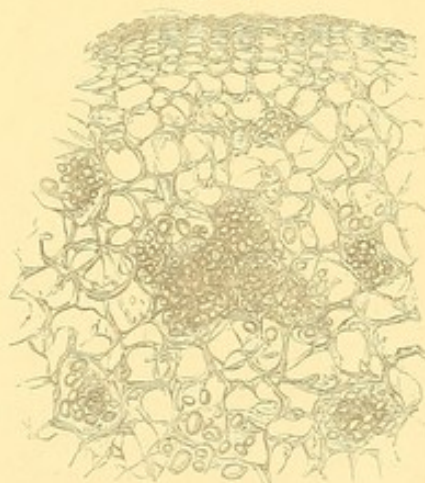
Testa and inner tunics of the wheat grain.  
x 130 p. 295.

Fig. 15.



Bread crumbs in water. The starch granules are swollen and softened, but still preserve their form.  
x 215. p. 295.

Fig. 16.



Cells of tissue of potato, in which the starch is contained. A few of the cells are filled with starch granules. x 50. p. 295.

1/16 of an inch [ ] x 130.  
" " [ ] x 215.

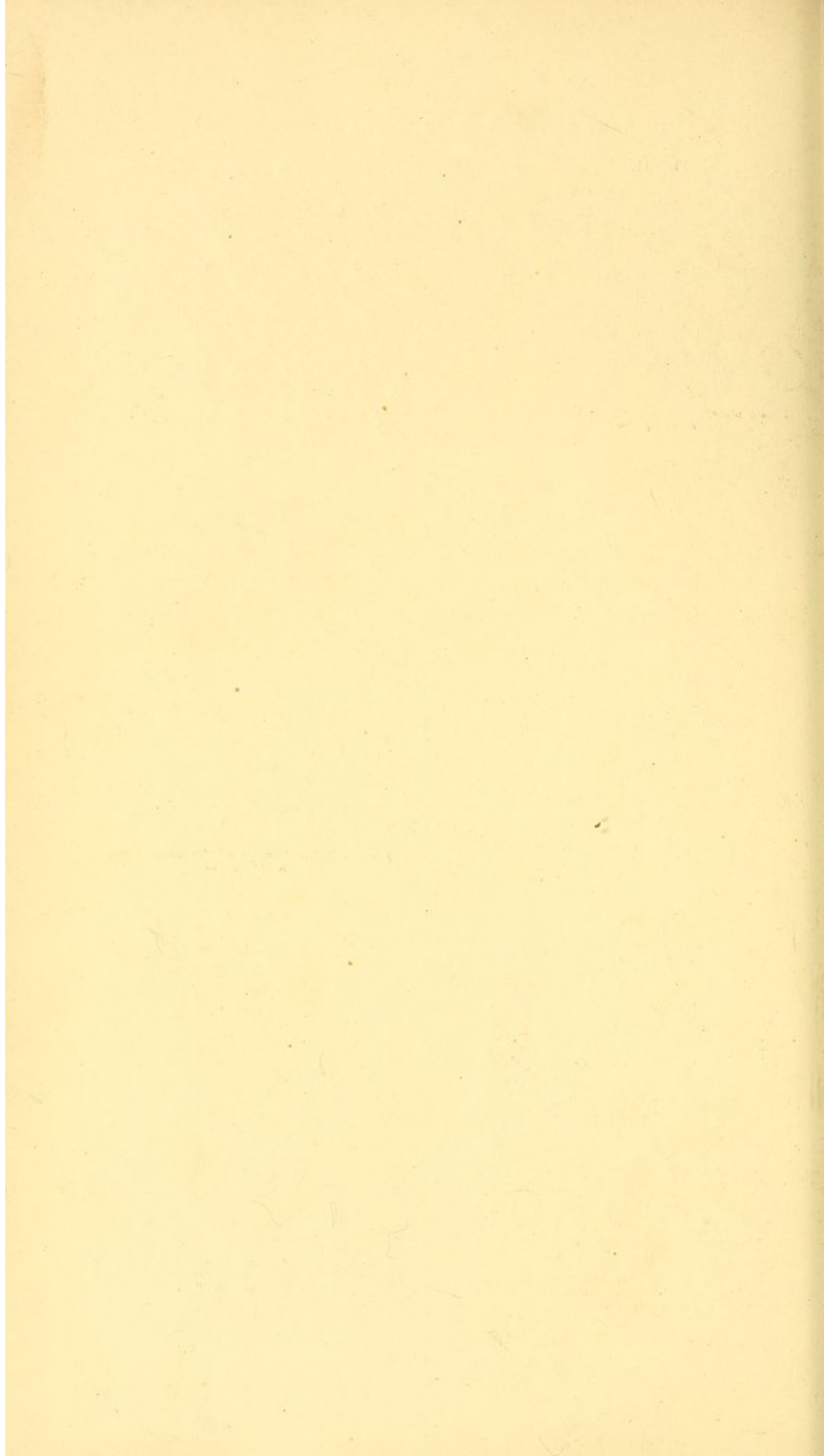




Fig. 17.



portion of tea-leaf. Fragments of spiral vessels seen projecting from several parts of the margin.  $\times 215$ . p. 296.

Fig. 18.



Air bubbles. Appearance in water.  $\times 215$ .

Fig. 20.



Oil globules. Some free and some contained in cells.  $\times 215$ .

Fig. 19.



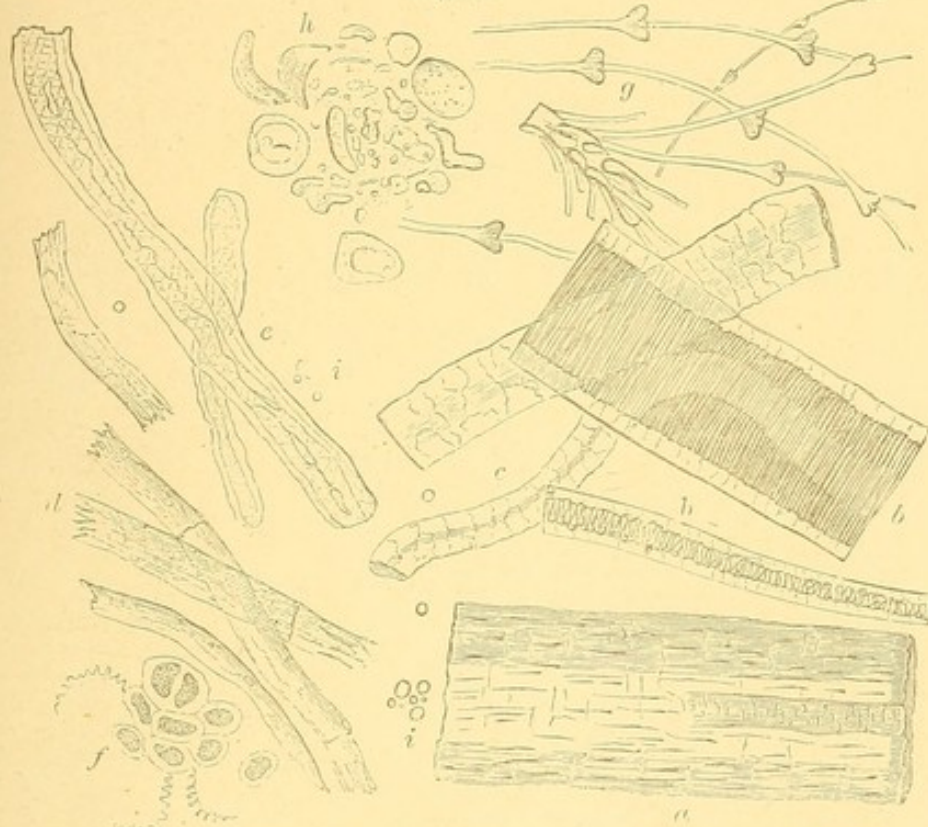
Oil globules. Milk.  $\times 215$ . p. 296.

Fig. 21.



Globules, consisting of phosphate of lime. Urine.  $\times 215$ .

Fig. 22.



A group of various extraneous substances frequently met with in urine.  $\times 215$ .

Fig. 23.



Epithelium and fungi from the mouth.  $\times 215$ . p. 297.

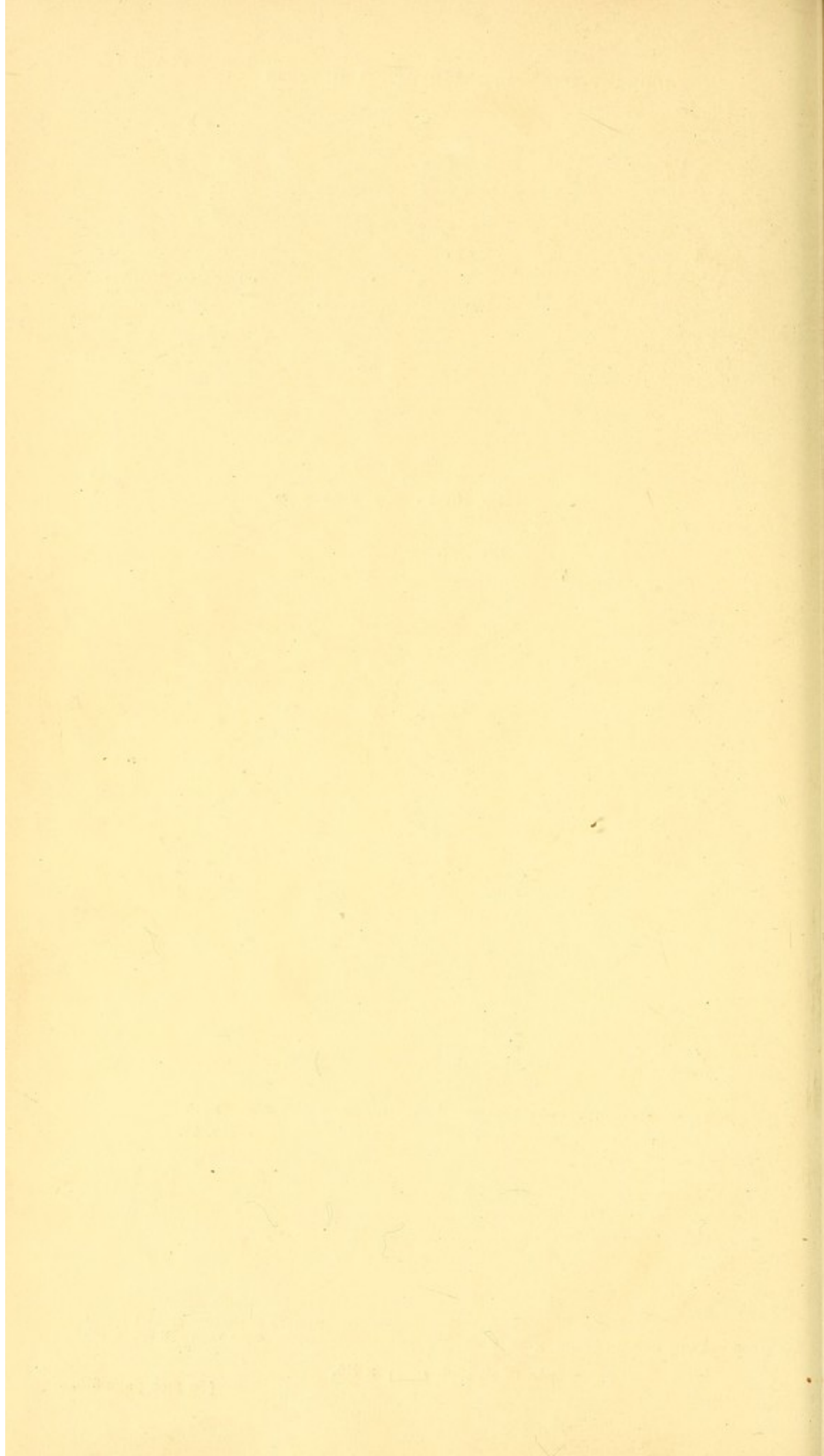
Fig. 24.



Portions of partially digested striped muscle. From vomit.  $\times 215$ . p. 297.

$\frac{1}{1000}$  of an inch.  $\times 215$ .

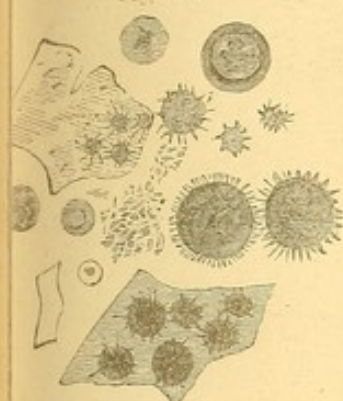
[To face page 300.]





URINARY DEPOSITS.

Fig. 25.



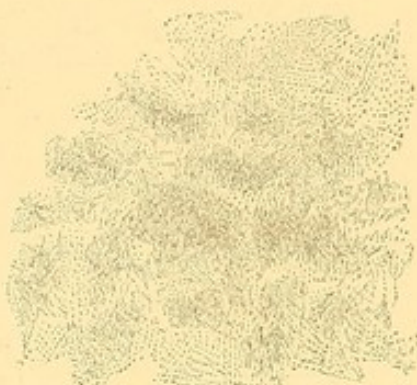
Urate of soda, obtained by concentrating healthy urine  
x 215. p. 297

Fig. 26.



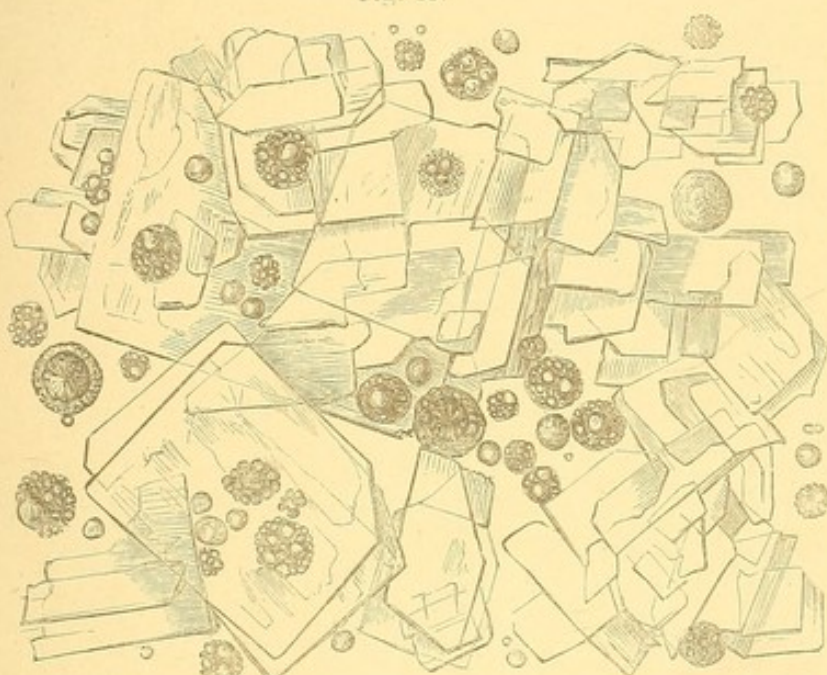
Molecular fatty matter of  
chylous urine. p. 299.

Fig. 27.



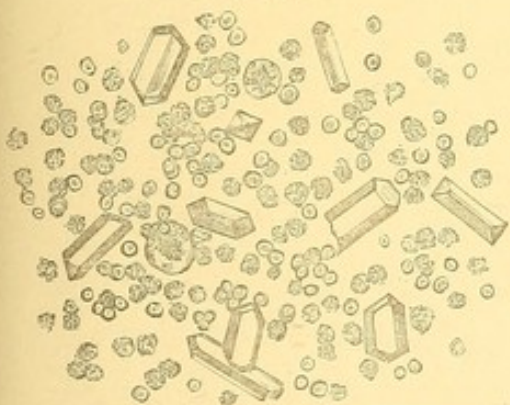
Urate. Ordinary granular deposit, usually  
termed urate of ammonia. p. 297.

Fig. 28.



Crystals of cholesterol, obtained from the fatty matter in casts separated from the urine  
of a case of fatty degeneration of kidneys. x 215. p. 311.

Fig. 29.



Pus and blood corpuscles, with crystals of triple phosphate, from the urine of a man suffering from fungus  
growths connected with the mucous membrane of the  
bladder. x 215. p. 318.

Fig. 30.



Oil globules of milk. x 215.

1/1000 of an inch [ ] x 215.

[See face page 312.]

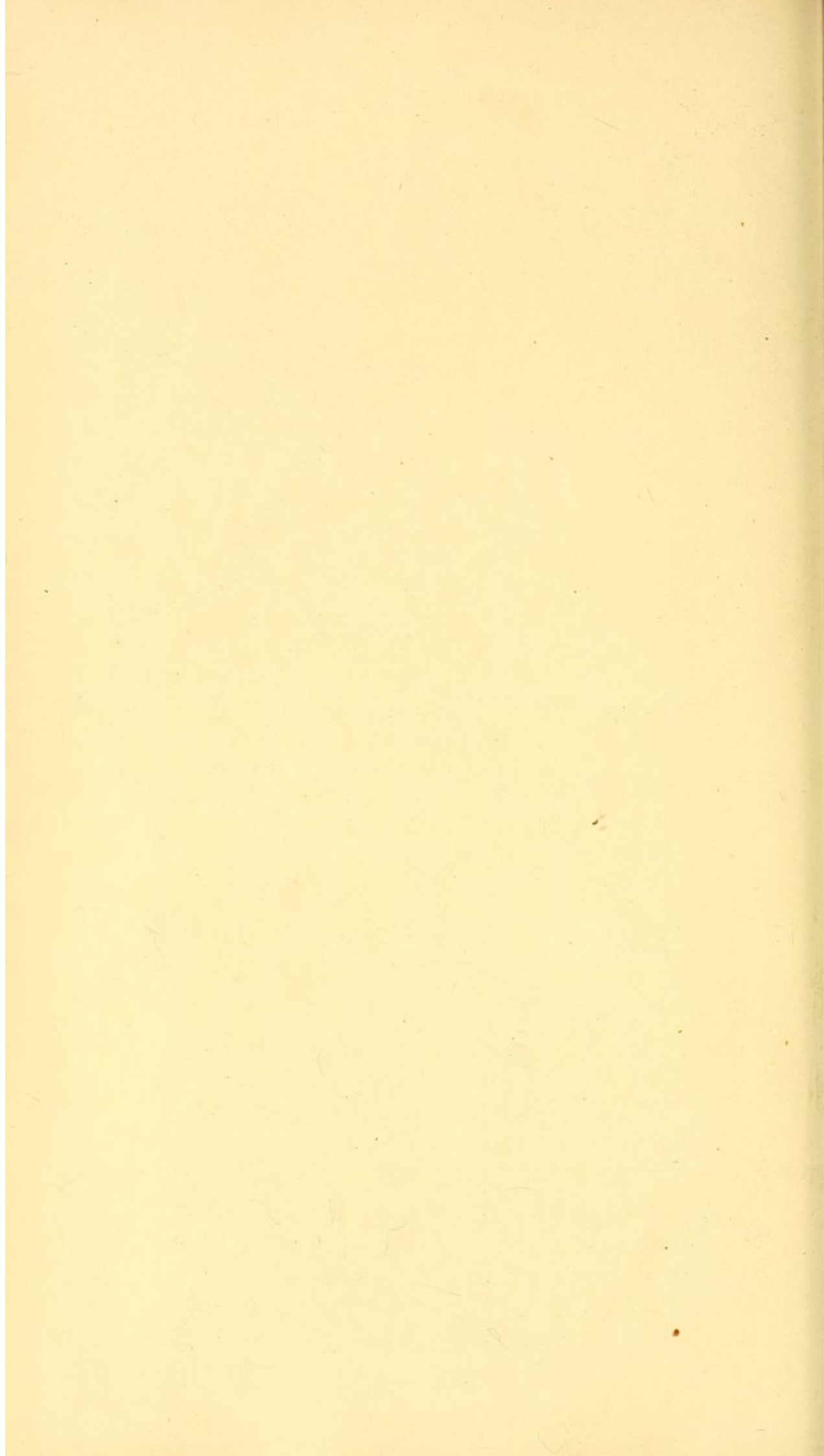




Fig. 31.



Mucus and mucus corpuscles in urine. In the upper part of the field to the right several cells of bladder epithelium are represented.  $\times 215$ . p. 318.

Fig. 35.



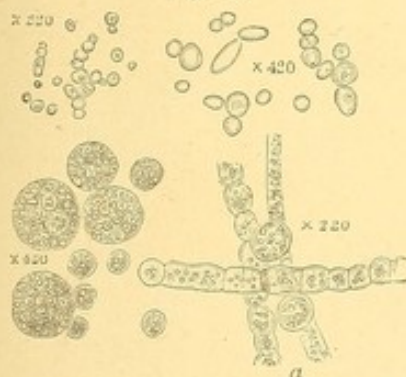
Bacteria undergoing germination.  $\times 1800$ .

Fig. 40.



*Penicillium glaucum*, from acid urine.  $\times 215$ .

Fig. 43.



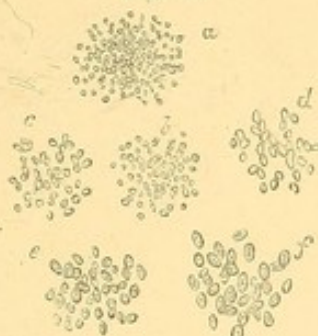
The sugar fungus from diabetic urine. p. 33.

1/16 of an inch  $\times 215$ .

" "  $\times 400$ .

" "  $\times 1800$ .

Fig. 32.



*Penicillium glaucum*, developed in acid urine. *a*, within twelve hours after the urine was passed; *b*, one day after; *c*, two days after; *d*, four days after; *e*, five days after; *f*, after standing six days. p. 322.

Fig. 33.



Bacteria germs in old epithelial cells of the mouth.  $\times 3000$ .

Fig. 37.



The same.  $\times 1800$ .

Fig. 38.



The same.  $\times 3000$ .

Fig. 41.



*Penicillium glaucum*  $\times 215$ .

Fig. 33.



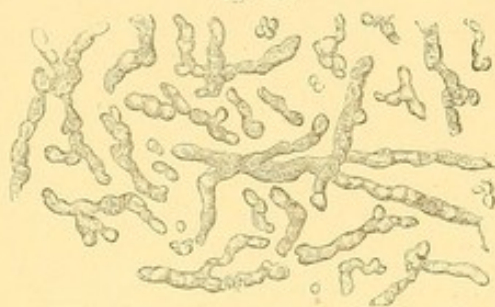
Algae and vibriones from urine three days after it was passed.  $\times 400$ .

Fig. 34.



Vegetable organisms met with in urine. *a*, different forms of fungi; *b*, vibriones.  $\times 215$ .

Fig. 39.



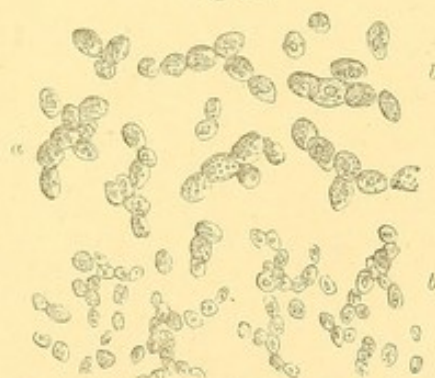
*Penicillium glaucum*, found in diabetic urine four days after it was passed.  $\times 215$ .

Fig. 42.



*Penicillium glaucum*, from acid urine.  $\times 215$ .

Fig. 44.



Yeast added to diabetic urine, and allowed to stand in a warm place forty-eight hours. Showing growth of the torula. p. 33.

*a*  $\times 215$ . *b*  $\times 400$ .

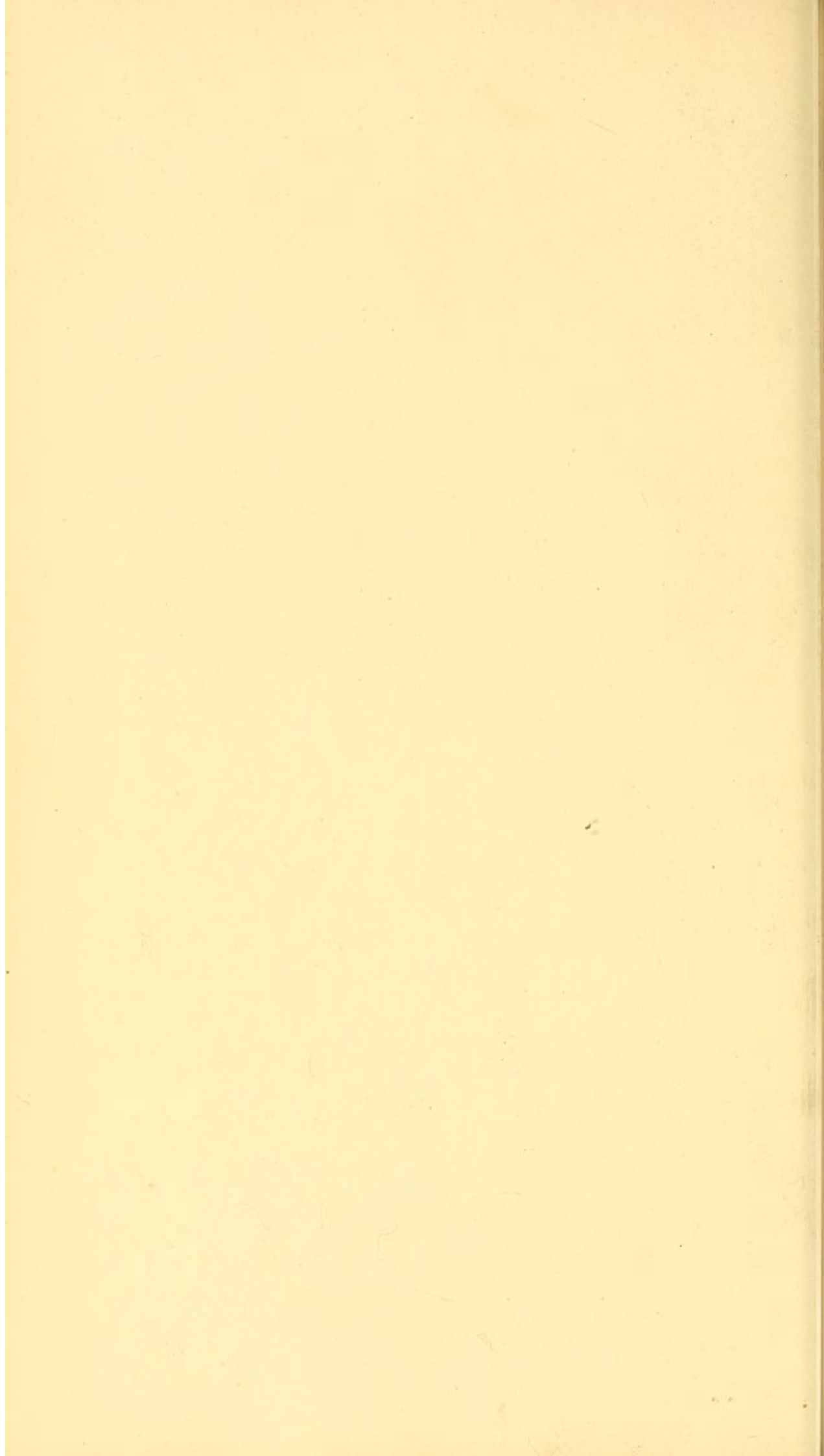




Fig. 45.

Fructification of yeast fungus.  
p. 323.

Fig. 46.

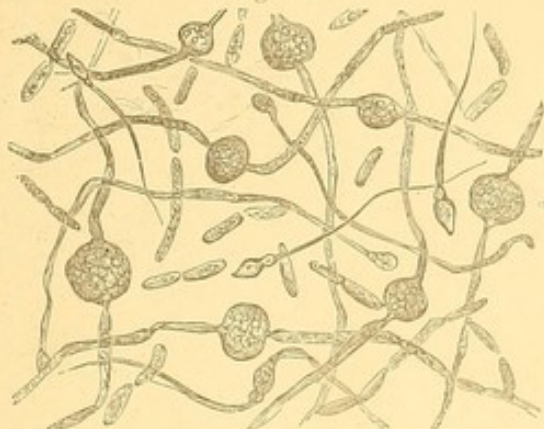
Fungi formed in acid urine. Several spermatozoa are  
seen amongst the fungous filaments. x 700.

Fig. 47.

Fructification of penicillium  
glaucum. p. 323.

Fig. 48.

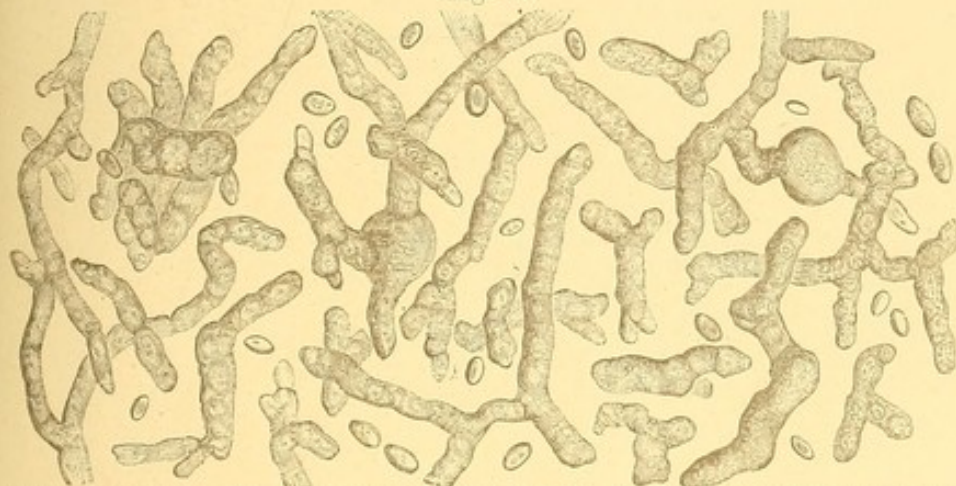
Penicillium glaucum. The oval spores growing into thalli. Developed in urine about fifty hours  
after it was passed x 403. p. 323.

Fig. 49.

Fungi formed in acid urine. From the  
same specimen as Fig. 46. x 215.

Fig. 50.

Sporules of fungi,  
resembling blood  
corpuscles.  
p. 231.

Fig. 51.

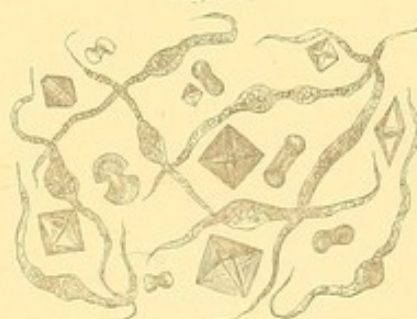
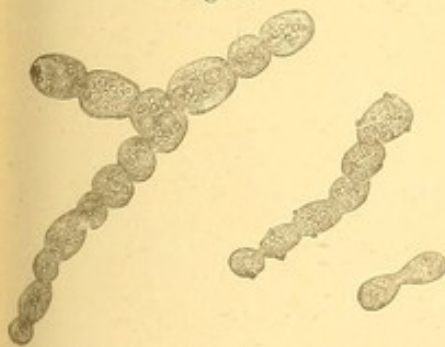
Curious fungi formed in the urine of a young  
man passing much oxalate of lime. x 215.

Fig. 52.



Penicillium glaucum, from vomit. x 700.

Fig. 53.

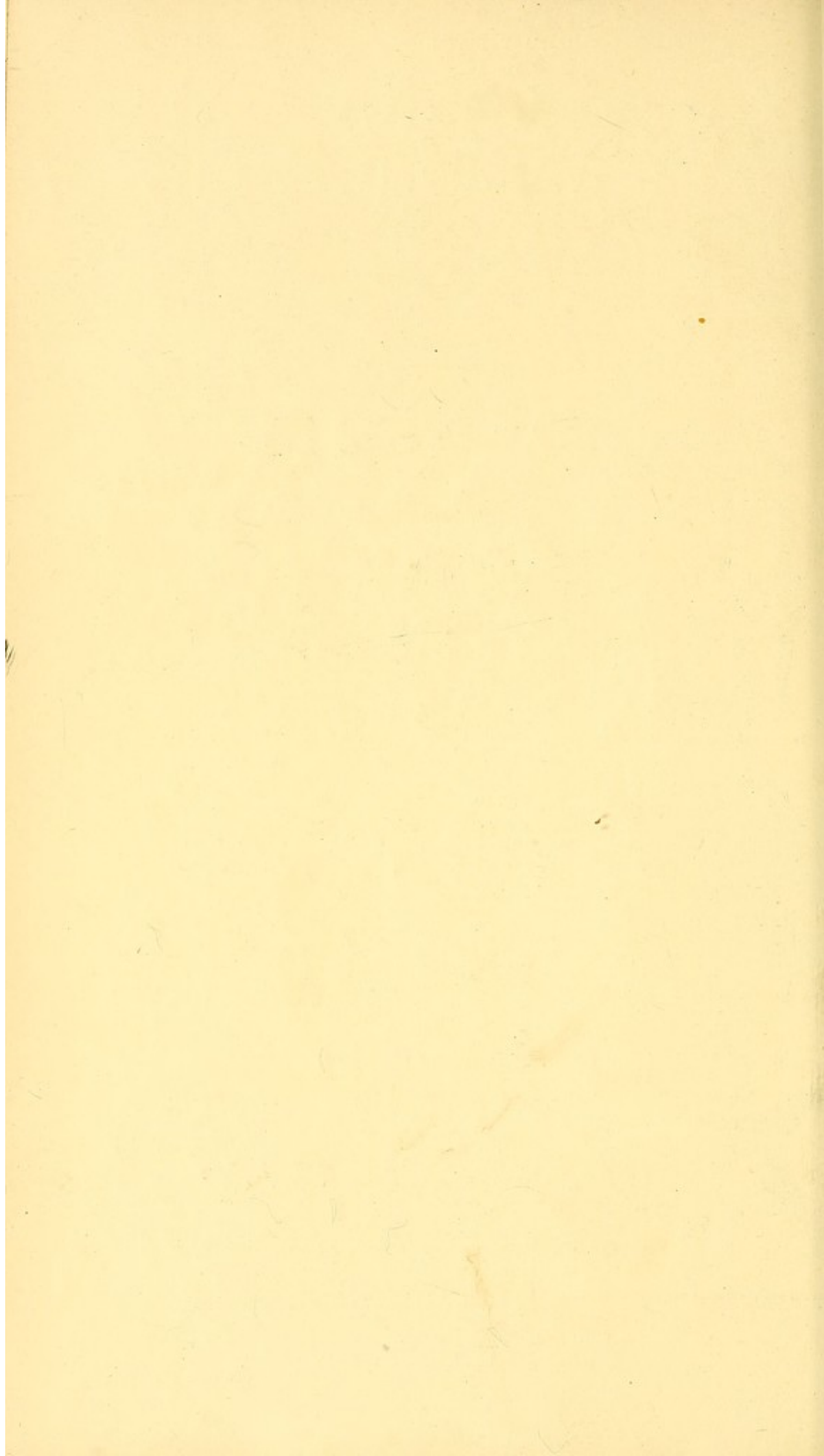
Sarcinae ventriculi, ordinary size, from  
vomit. a. sarcinae. b. starch granules  
partially dissolved and rendered trans-  
parent. c. minute oval fungi usually  
present in vomit containing sarcinae.  
d. vibrios. e. oil globules. f. starch  
globule from bread, cracked but not as  
yet softened. x 215.

Fig. 54.

Sarcinae, from vomit.  
'Archives,' vol II., p. 293  
p. 325.

$\frac{1}{16}$  of an inch x 215.

" " x 700.





URINARY DEPOSITS.—EPITHELIUM.

Fig. 55.



Epithelium from the convoluted portion of the uriniferous tube. *a*, treated with acetic acid.  $\times 215$ .

Fig. 56.



Epithelium from the pelvis of the human kidney.  $\times 215$ .

Fig. 57.



Epithelium from the ureter.  $\times 215$ .

Fig. 58.



Epithelium from the urethra.  $\times 215$ .

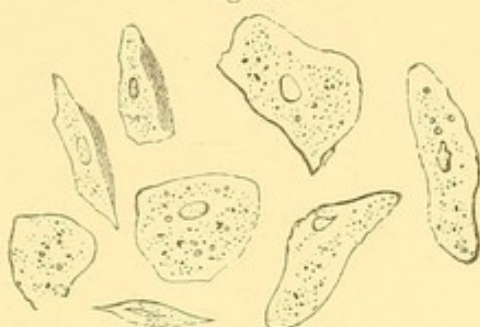
p 327.

Fig. 59.



Bladder epithelium. *a*, from the general surface. *b*, from the fundus. *c*, scaly epithelium from the bladder.  $\times 215$ . p. 327.

Fig. 60.



Vaginal epithelium from urine.  $\times 215$ . p. 328.

Fig. 61.



Epithelium from the bladder, showing the hollows in some of the large cells into which the subjacent columnar cells fit.  $\times 215$ .

Fig. 62.



Epithelium from the vagina. p. 328.

Fig. 63.



Young epithelial cell from the bladder, undergoing division.  $\times 700$ . p. 327.

Fig. 64.



Formation of pus from germinal matter of epithelial cells.  $\times 215$ . p. 328.

$\frac{1}{1000}$  of an inch  $\times 215$ .

" "  $\times 700$ .

[To face page 328.

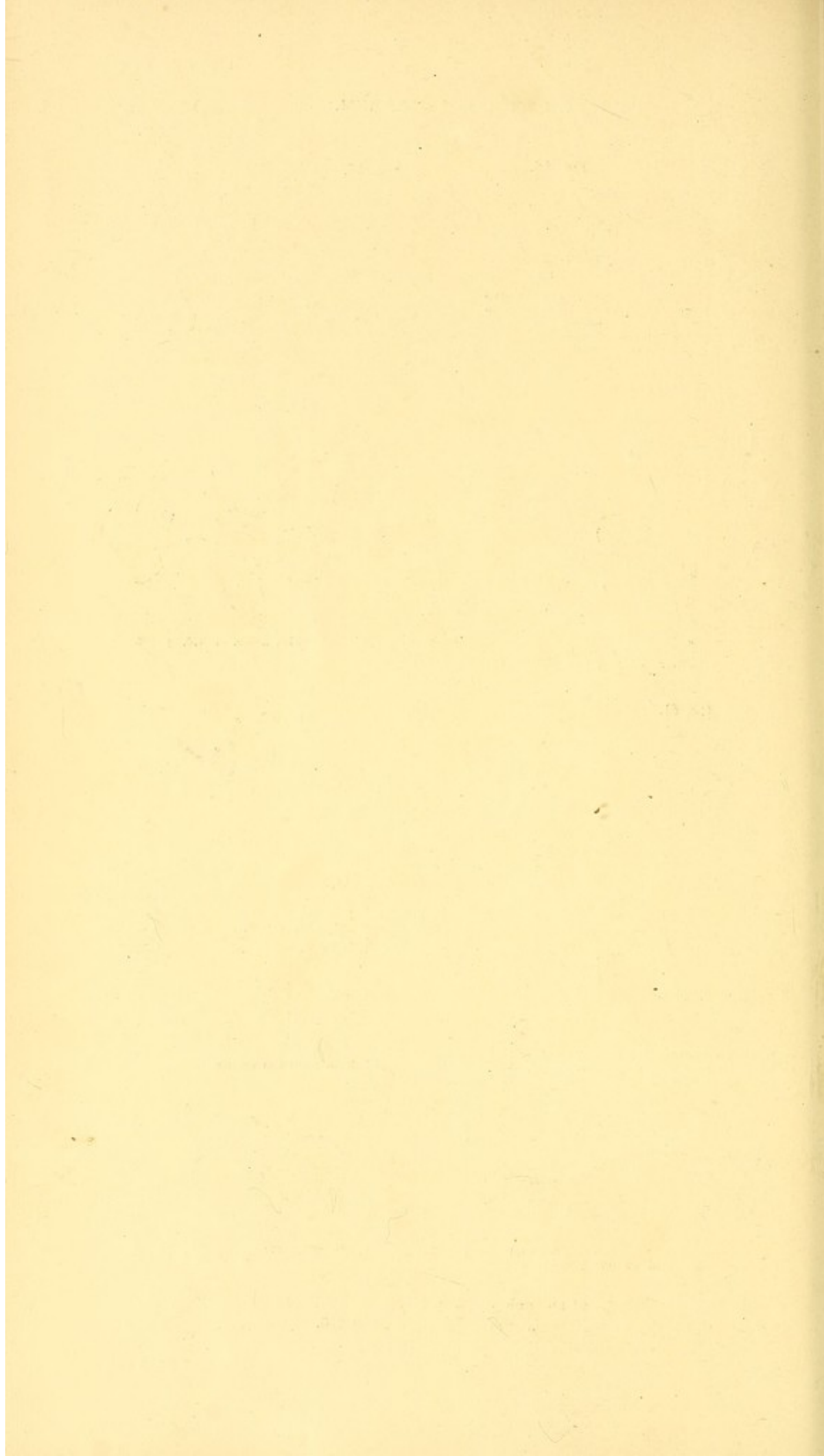
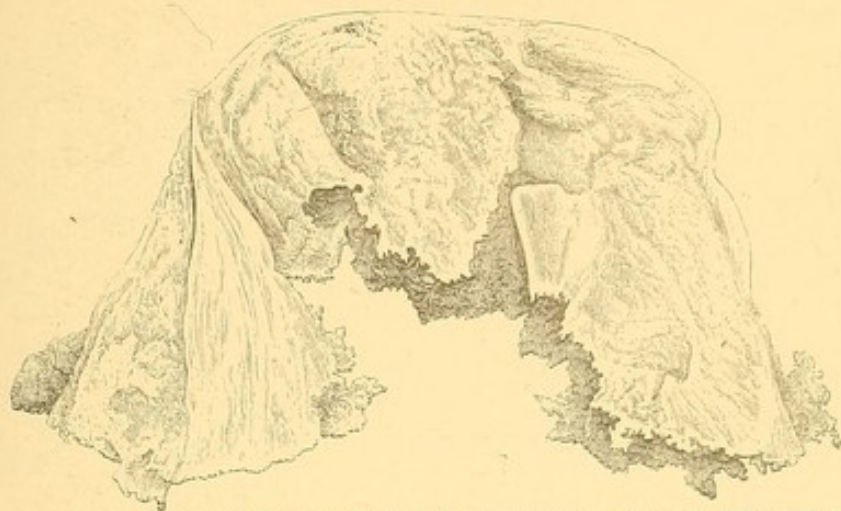




Fig. 65.

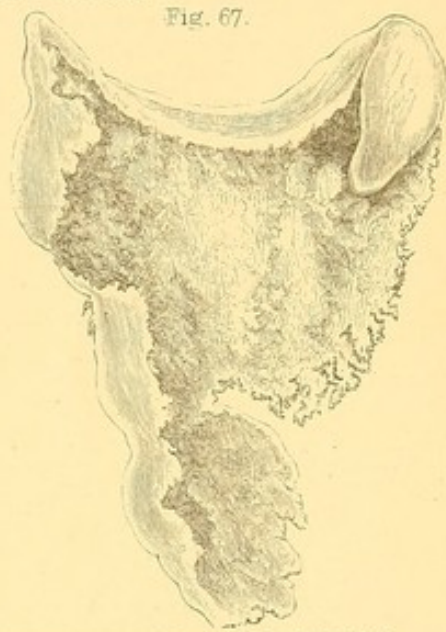


Membranous substance passed with a blood clot during the menstrual period, probably from the vagina. From a preparation of Dr. Tilt's.

Fig. 66.

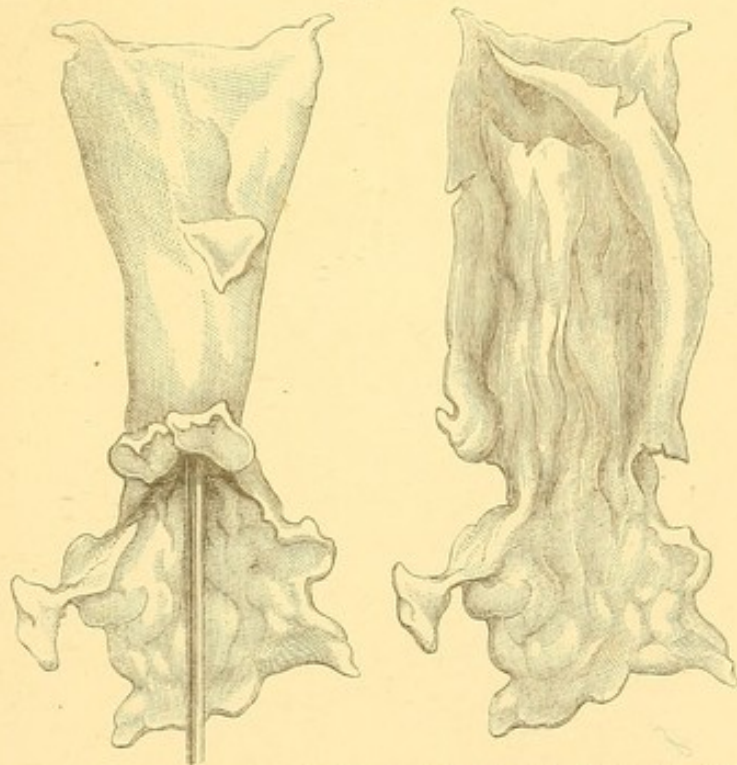


Fig. 67.



Two fragments of a uterine cast passed by a lady, age 25. These are composed entirely of epithelium.

Fig. 68.



Cast of the womb and vagina, the mucous covering, belonging to the former cavity being inverted. From a drawing by Dr. Vannotti, of Florence.

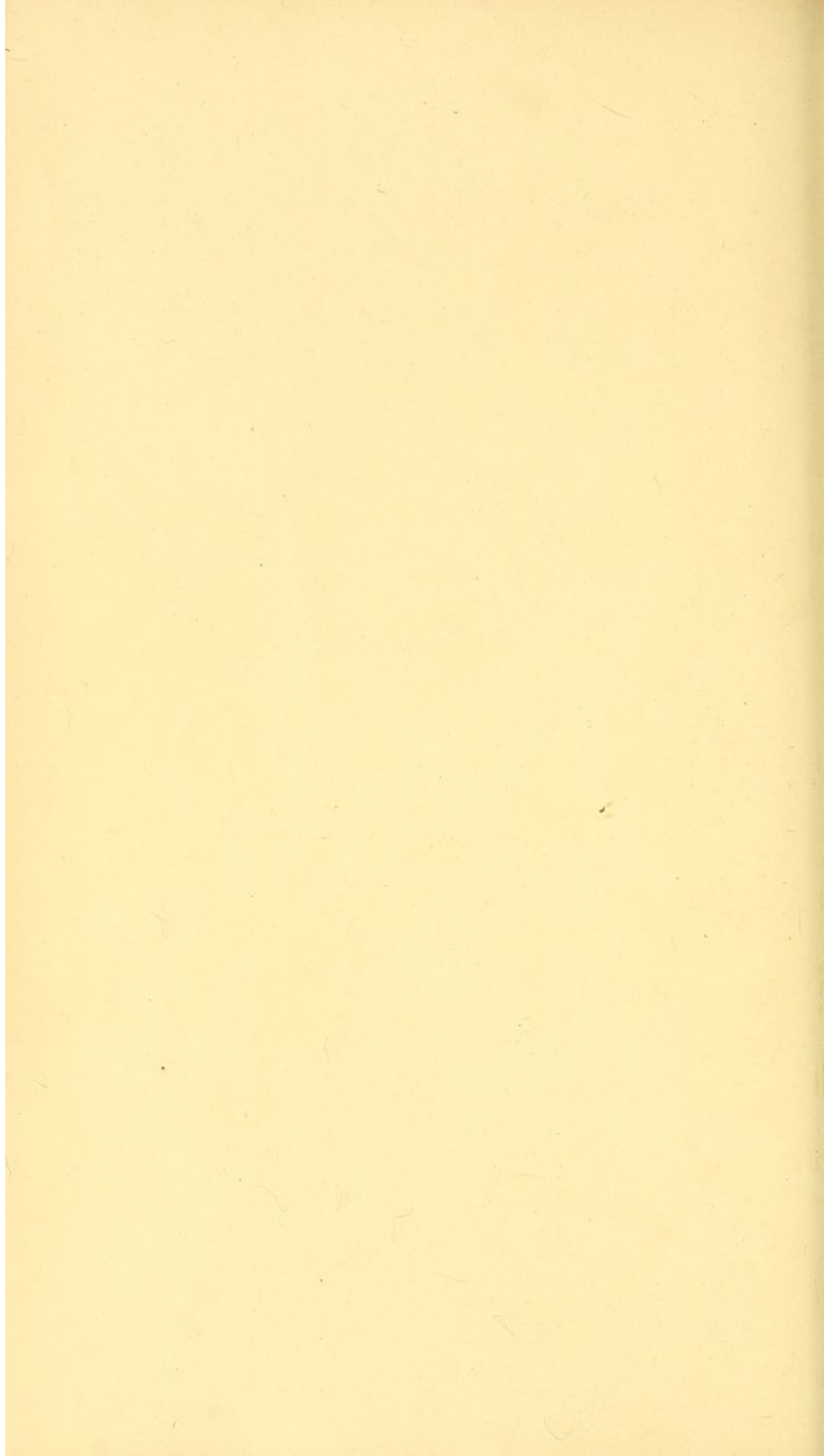




Fig. 69.



x 215

of the seminal tubes. Spermatozoa embedded in them from an old man upwards of 80 years of age. p. 331.

Fig. 70.



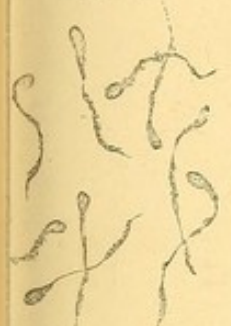
Spermatozoa and cells of vaginal epithelium, removed from the vagina of a little girl a few hours after a rape had been committed. x 215. p. 330.

Fig. 71.



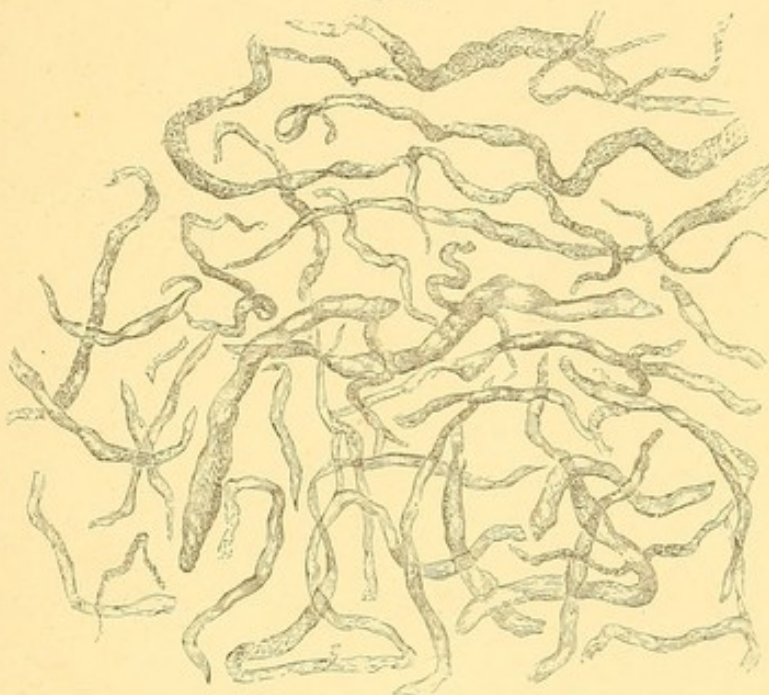
Spermatozoa from urine. x 215. p. 329.

Fig. 72.



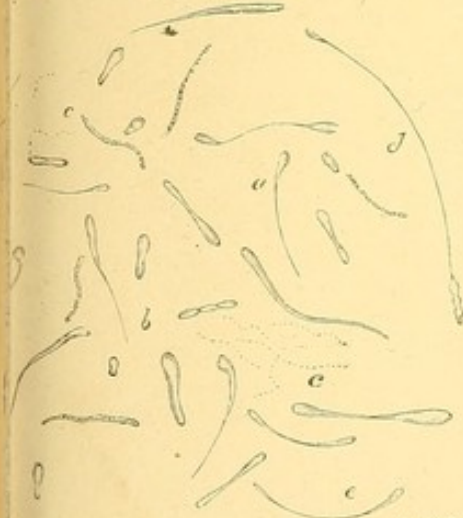
Spermatozoa with urate deposited upon them. x 700. p. 329.

Fig. 73.



Long narrow threads of viscid mucus, associated with the presence of spermatozoa in casts of the seminal tubules. From the urine of a case of slight irritability of the neck of the bladder. x 215. p. 331.

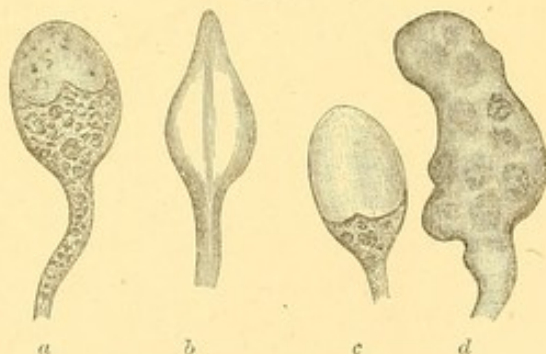
Fig. 74.



x 403

Filaments of a vegetable nature resembling spermatozoa. x 403. p. 331.

Fig. 75.



Body and upper part of the tail of spermatozoa magnified upwards of 3000 diameters. a, spermatozoon containing much living germinal matter. b, the same seen edgewise. c, spermatozoon containing comparatively little germinal matter. d, spermatozoon crushed, showing separate spherical particles of germinal matter. p. 329.

of an inch, x 215.

x 3000.

[To face page 330.]

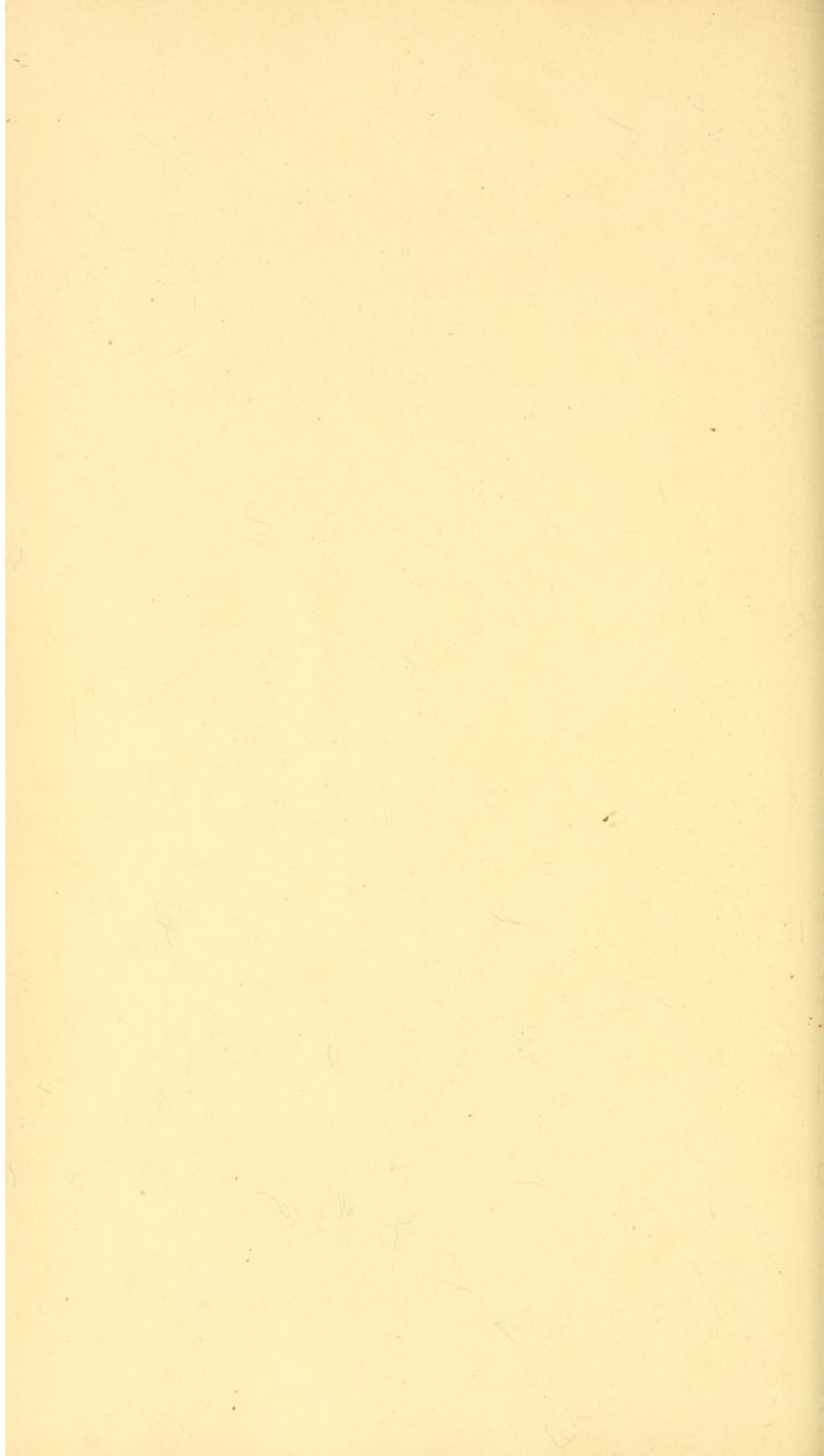
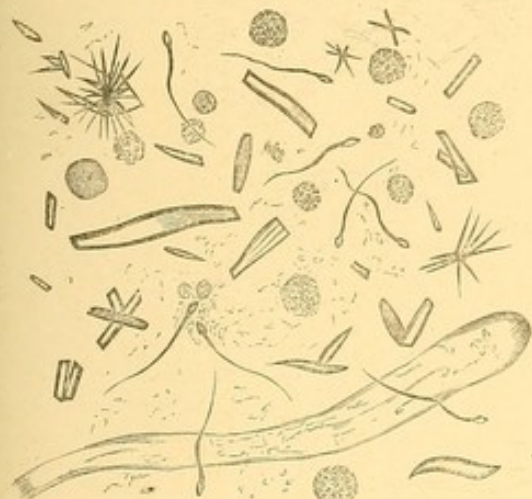




Fig. 76.



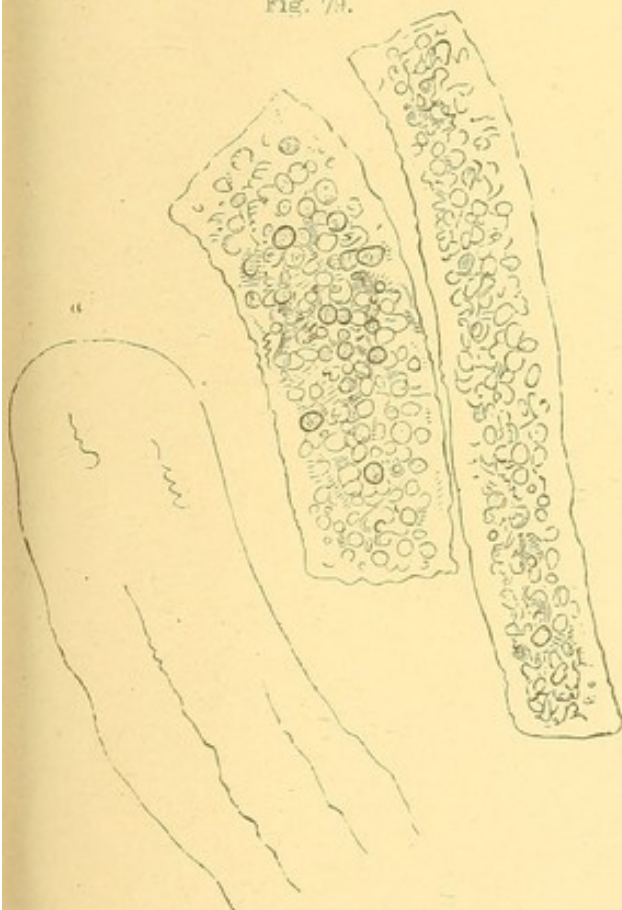
Spermatozoa and crystals of phosphate of lime, from the seminal fluid.  $\times 215$ . p. 329.

Fig. 78.



Casts containing oil globules, and free fat cells, from a case of fatty degeneration of the kidney.  $\times 215$ .

Fig. 79.



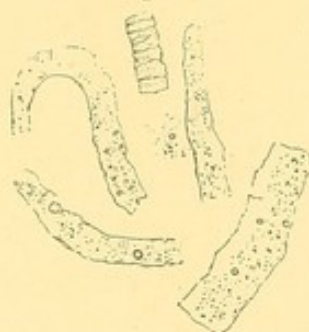
Large casts. Some containing many cells, others consisting of a perfectly transparent wax-like material.  $\times 215$ .

Fig. 77.



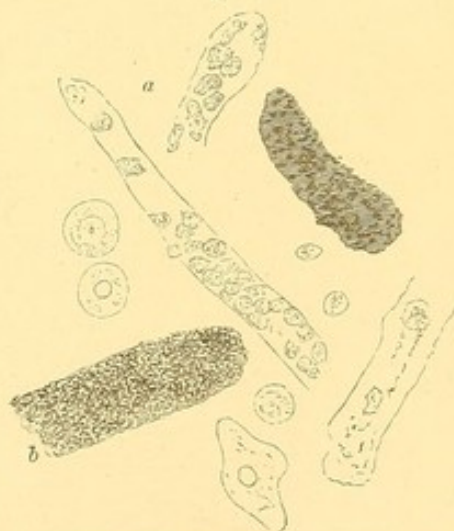
Waxy casts. *a*, of large size. *b*, small waxy casts.  $\times 215$ .

Fig. 78A.



Small granular casts, from the urine of a patient suffering from chronic nephritis.  $\times 215$ .

Fig. 80.



Epithelial casts. *a*, casts containing cells of epithelium. *b*, cast containing granular matter. From urine of acute dropsy.  $\times 215$ .

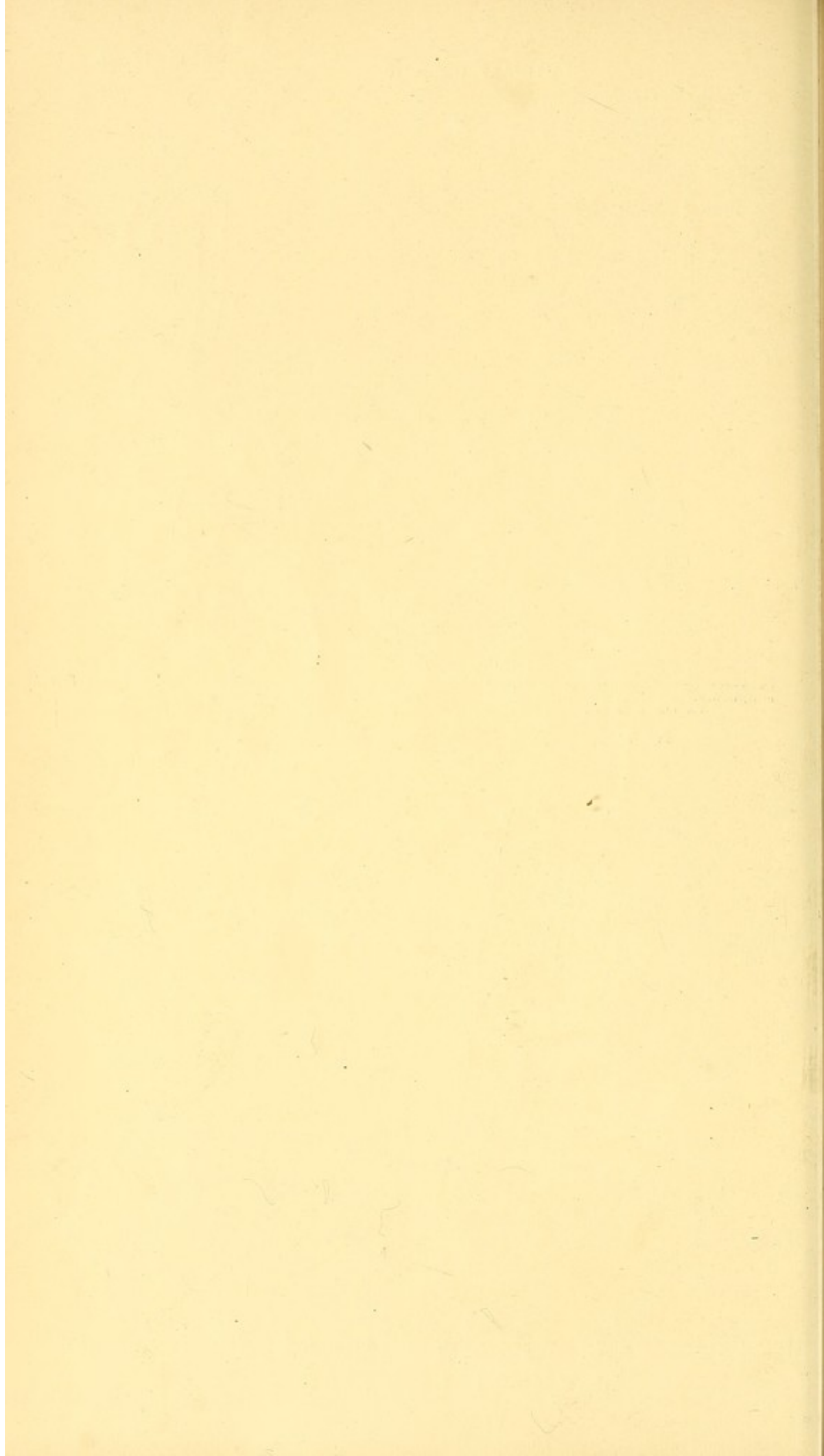
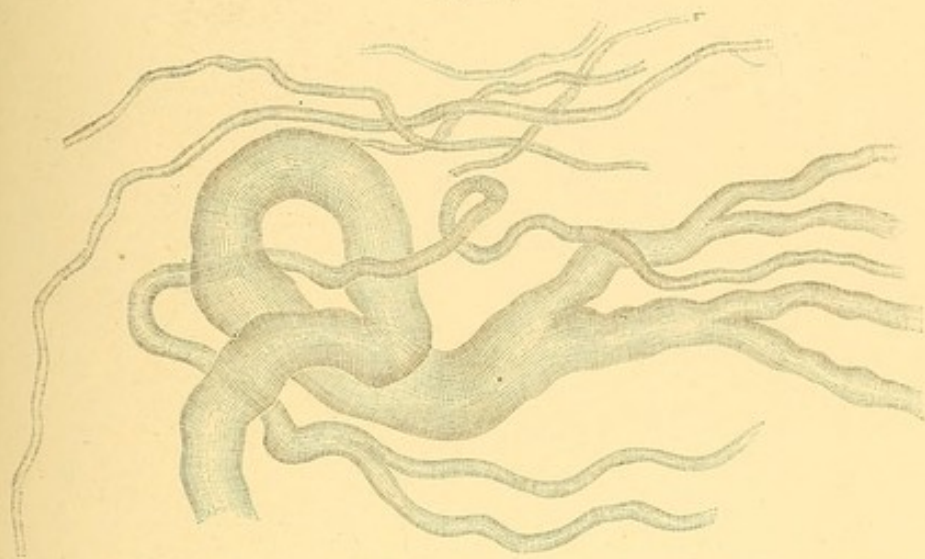


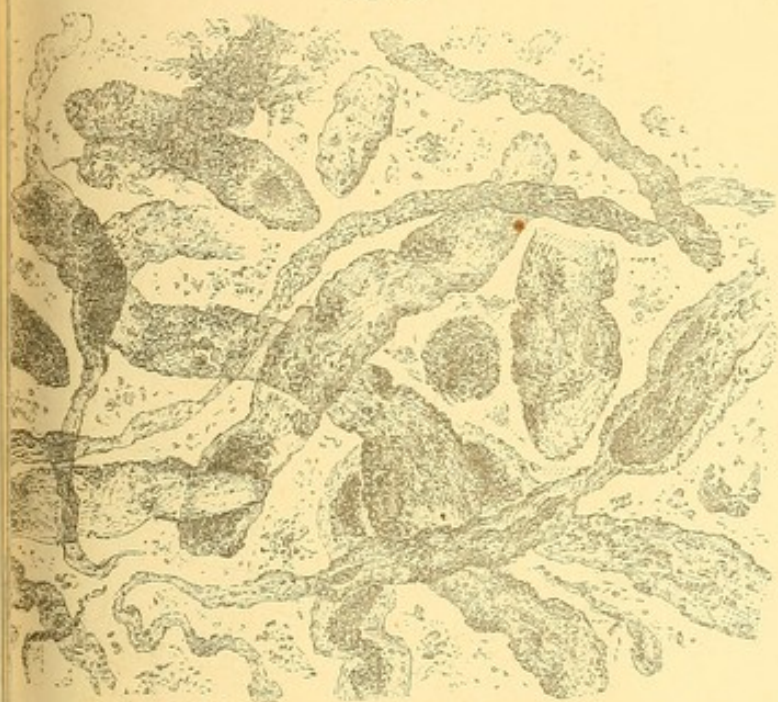


Fig. 81.



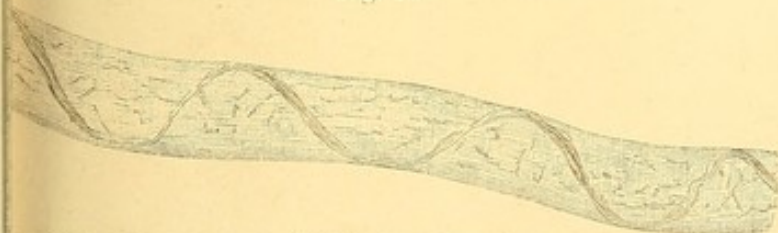
Mucus cast, from the straight portion of the uriniferous tubes, showing the manner in which the large renal tubes divide and subdivide as they pass towards the base of the pyramids.  $\times 50$ . p. 342.

Fig. 82.



Mucus casts, with dark brown urate deposited upon their surface and in their substance. They became quite clear and transparent when warmed.  $\times 215$ . p. 342.

Fig. 84.



Portion of a mucus cast, which has been formed around a smaller and serpentine one.  $\times 215$ . p. 342.

$\frac{1}{1000}$  of an inch   $\times 215$ .

Fig. 83.

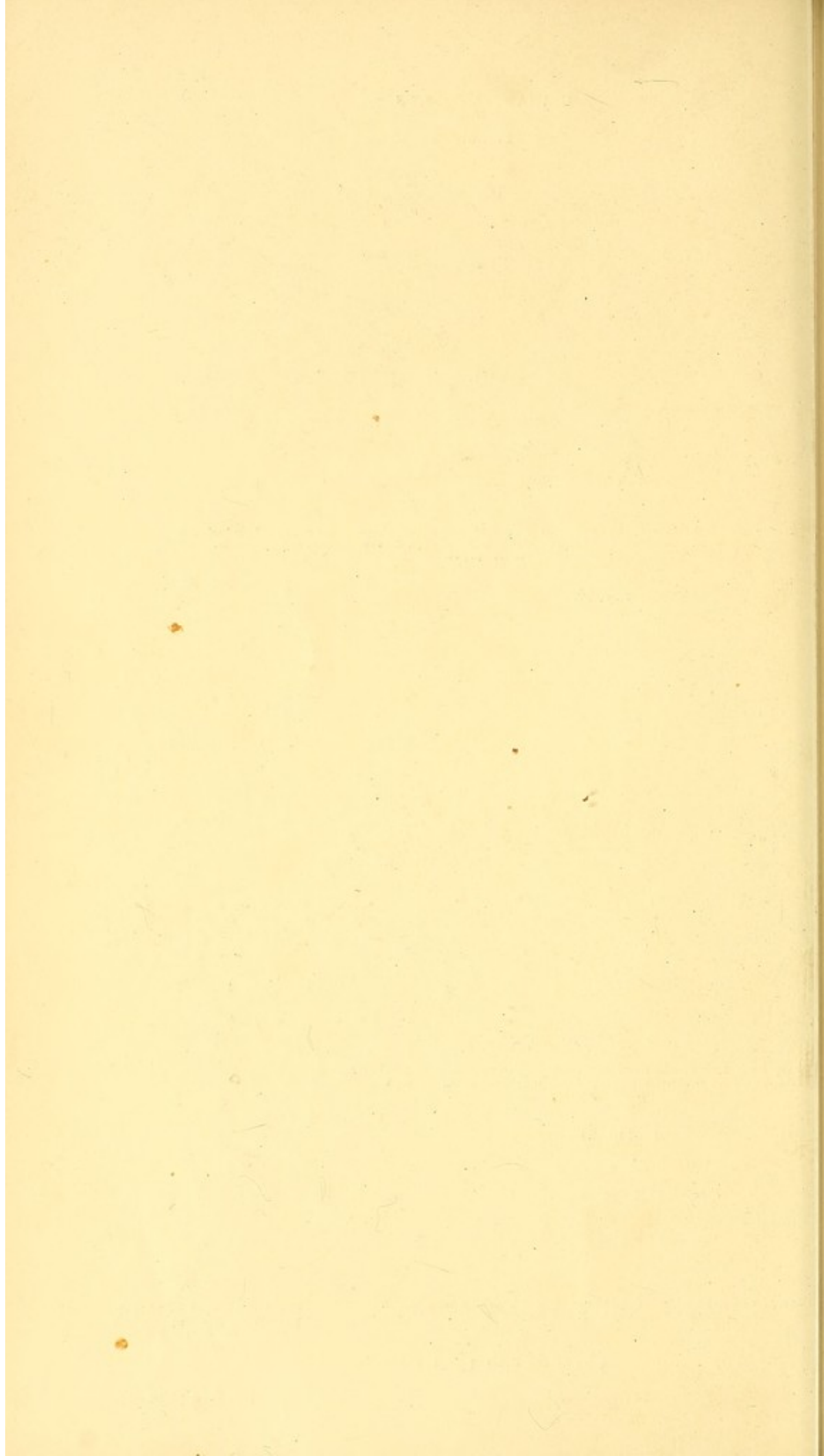


Waxy casts of large and small diameter. In the centre of the larger ones casts of small diameter are seen to be embedded.  $\times 50$ . p. 340.

Fig. 85.



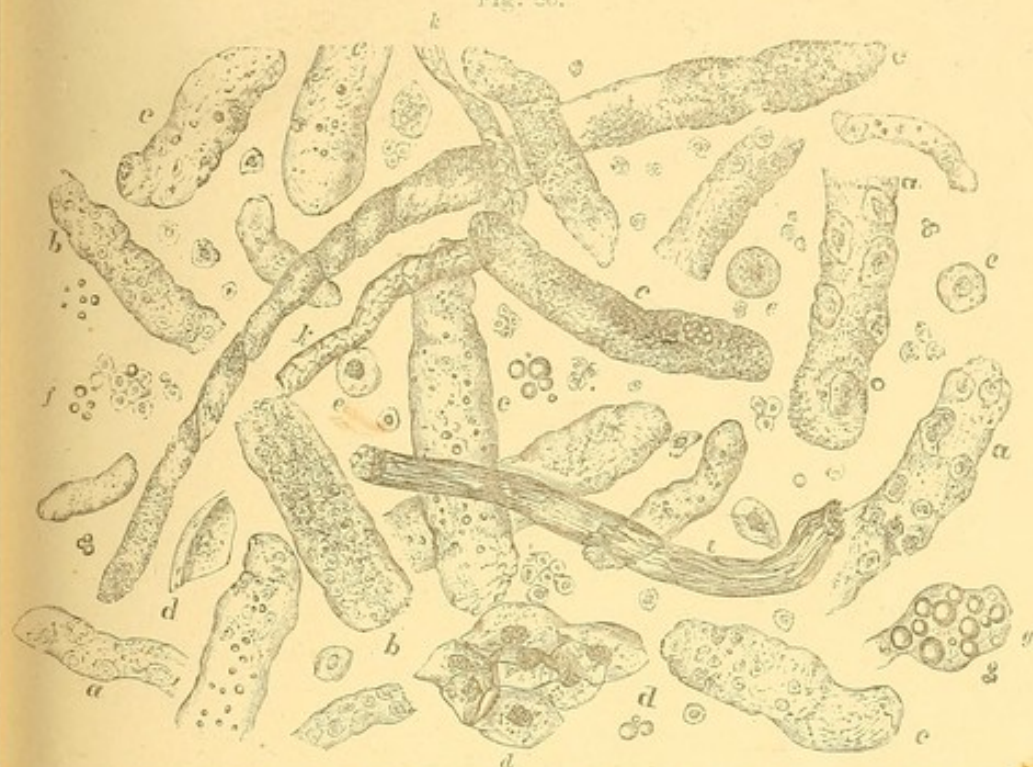
Casts containing blood corpuscles, from a case of acute nephritis.  $\times 215$ . p. 342.





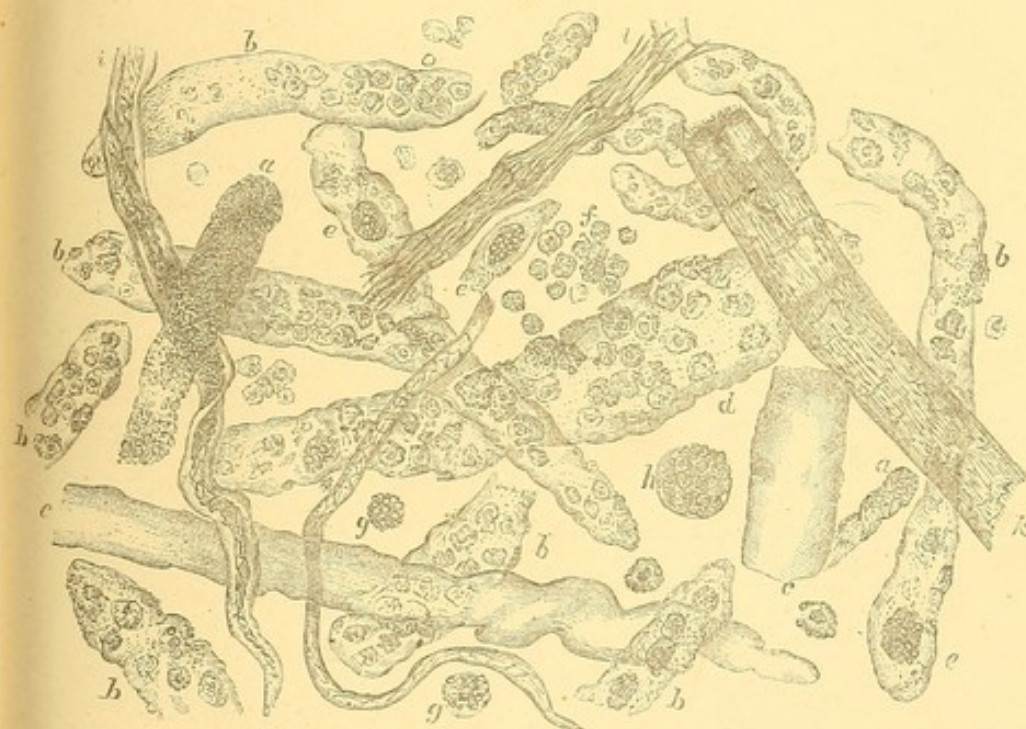
## URINARY DEPOSITS.

Fig. 56.



Epithelial and granular casts from the urine of a woman suffering from acute nephritis with dropsy, of a fortnight's duration. *a*, epithelial casts; the cells of renal epithelium are very distinct, and their nuclei well defined. *b*, casts containing brown granular matter and blood corpuscles. *c*, granular casts of a brown colour, many of them containing a few oil globules. *d*, squamous epithelium from the vagina. *e*, epithelium from the bladder. *f*, cells containing oil globules. *g*, portion of a cast containing oil globules. *h*, circular granular cells, probably altered renal epithelium. *i*, fibre of flax, of accidental presence. *k*, blanket hair.  $\times 215$ . p. 347.

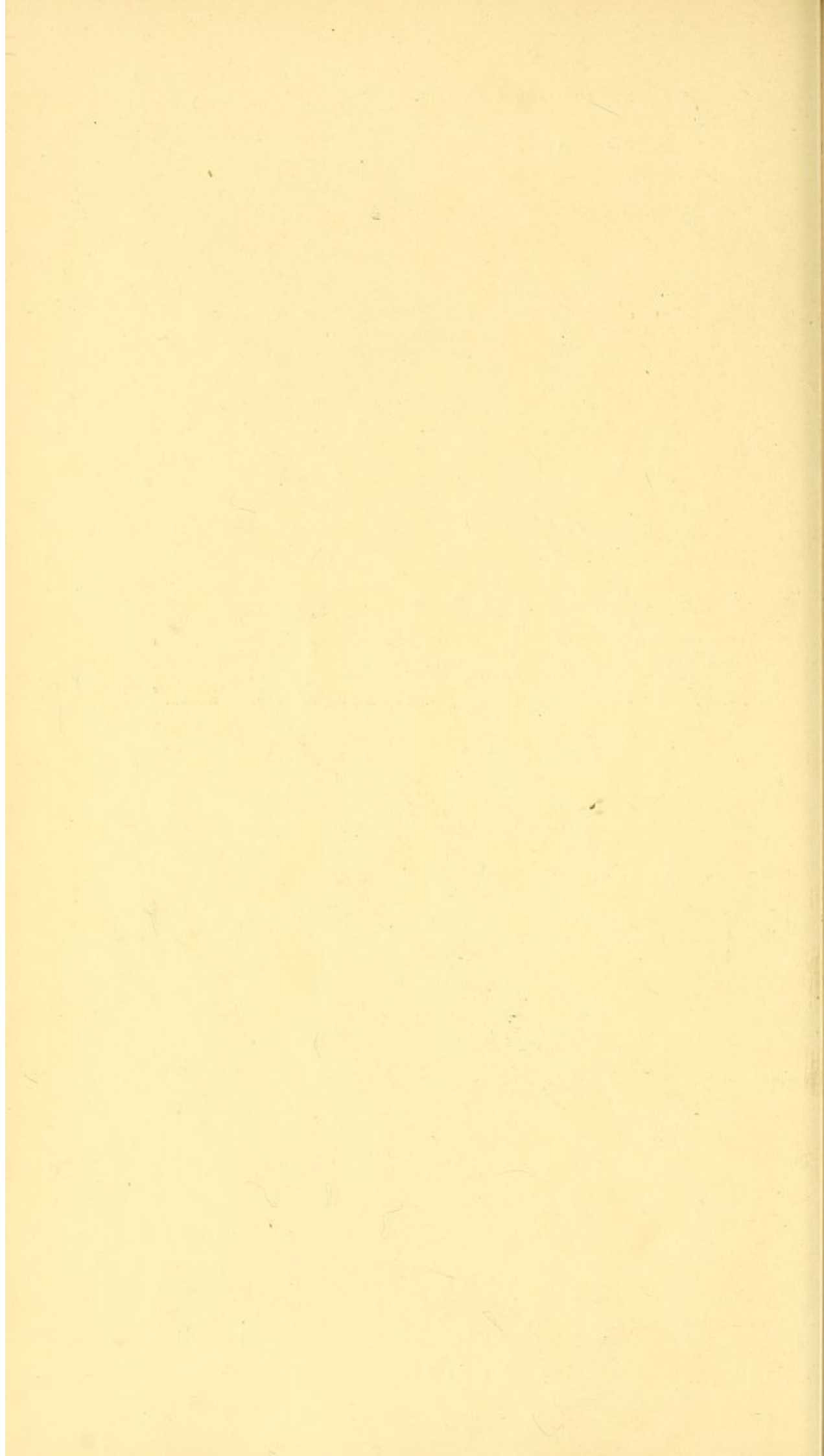
Fig. 57.



Casts from a case of chronic nephritis. *a*, dark granular casts. *b*, casts containing small granular cells and white blood corpuscles. *c*, waxy casts, consisting of a perfectly clear glistening material. *d*, large cast, flattened by pressure, containing white blood corpuscles. *e*, portion of a cast containing a large cell filled with oil globules. *f*, pus corpuscles, probably derived from the bladder. *g*, collections of small oil globules. *h*, large cell containing smaller cells in the interior. Of the nature of this I am ignorant, but I have observed such in several specimens of urine. *i*, portions of cotton fibre. *k*, piece of very thin human hair. *l*, fragment of flax.  $\times 215$ . p. 347.

$\frac{1}{1600}$  of an inch  $\times 215$ .

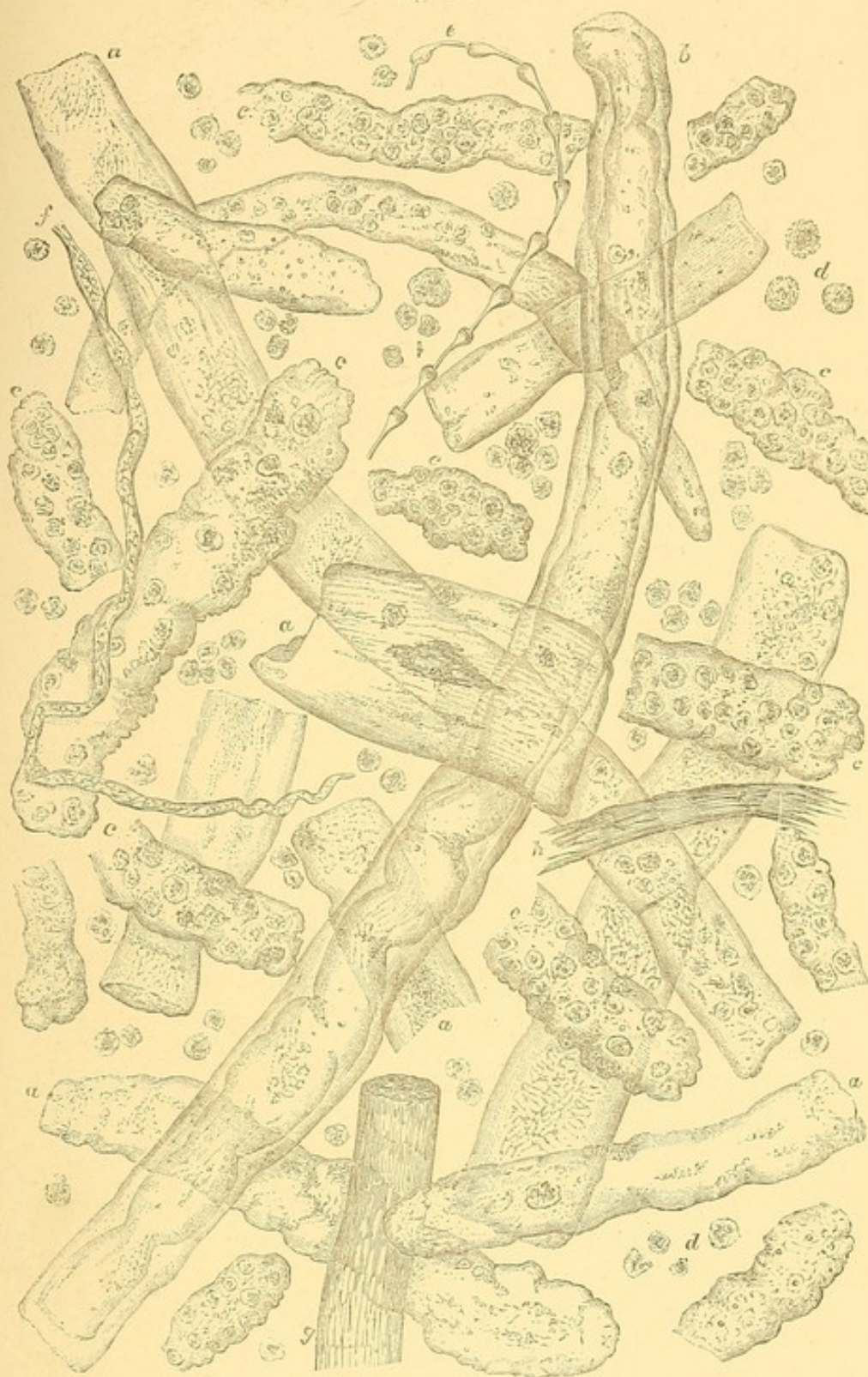
[To face page 346.]





## URINARY DEPOSITS.

Fig. 83.



Casts, acute inflammation of the kidney.

Casts from the urine of a man, aged 45, suffering from acute inflammation of the kidneys. There was very slight oedema of the legs. The patient died comatose three weeks after the first symptoms appeared. The urine contained so much albumen that it became perfectly solid upon the application of heat and after the addition of nitric acid.

*a*, perfectly transparent wax-like casts. The shading should be more faint than in the drawing. *b*, a very long wax-like cast, consisting of material deposited at two different periods; the original cast in the interior was probably forced a certain distance further down the uriniferous tube, when a new layer of the coagulable material was deposited around it. *c*, casts filled with cells closely resembling pus corpuscles, but somewhat larger. *d*, the same cells free in considerable number; the greater part of the deposit consisted of these cells. *e*, portion of leather. *f*, piece of cotton fibre. *g*, portion of human hair. *h*, flax fibre.  
x 215. pp. 341, 348.

1665 of an inch [ ] x 215.

[To face page 348.]

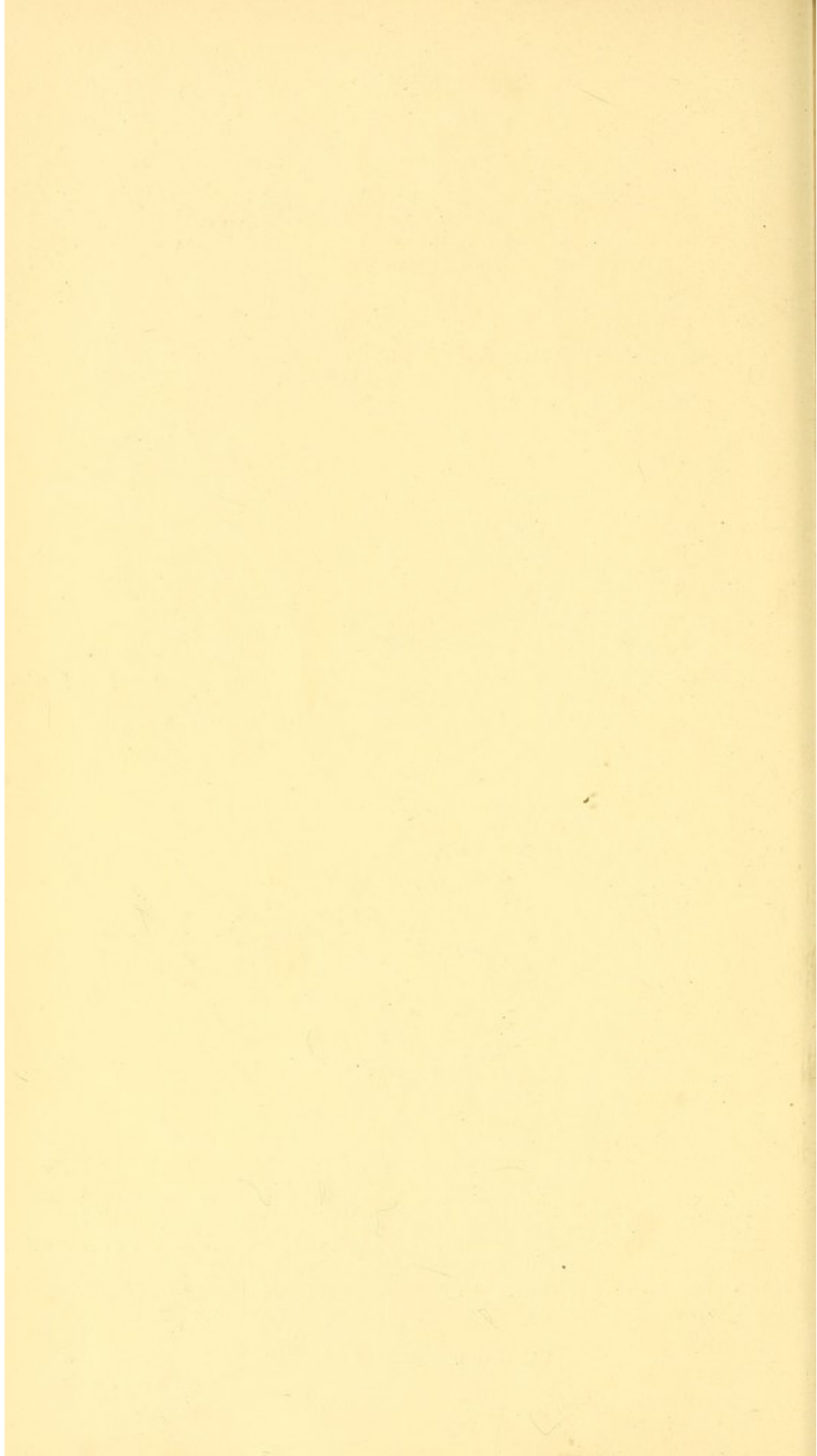




Fig. 89.

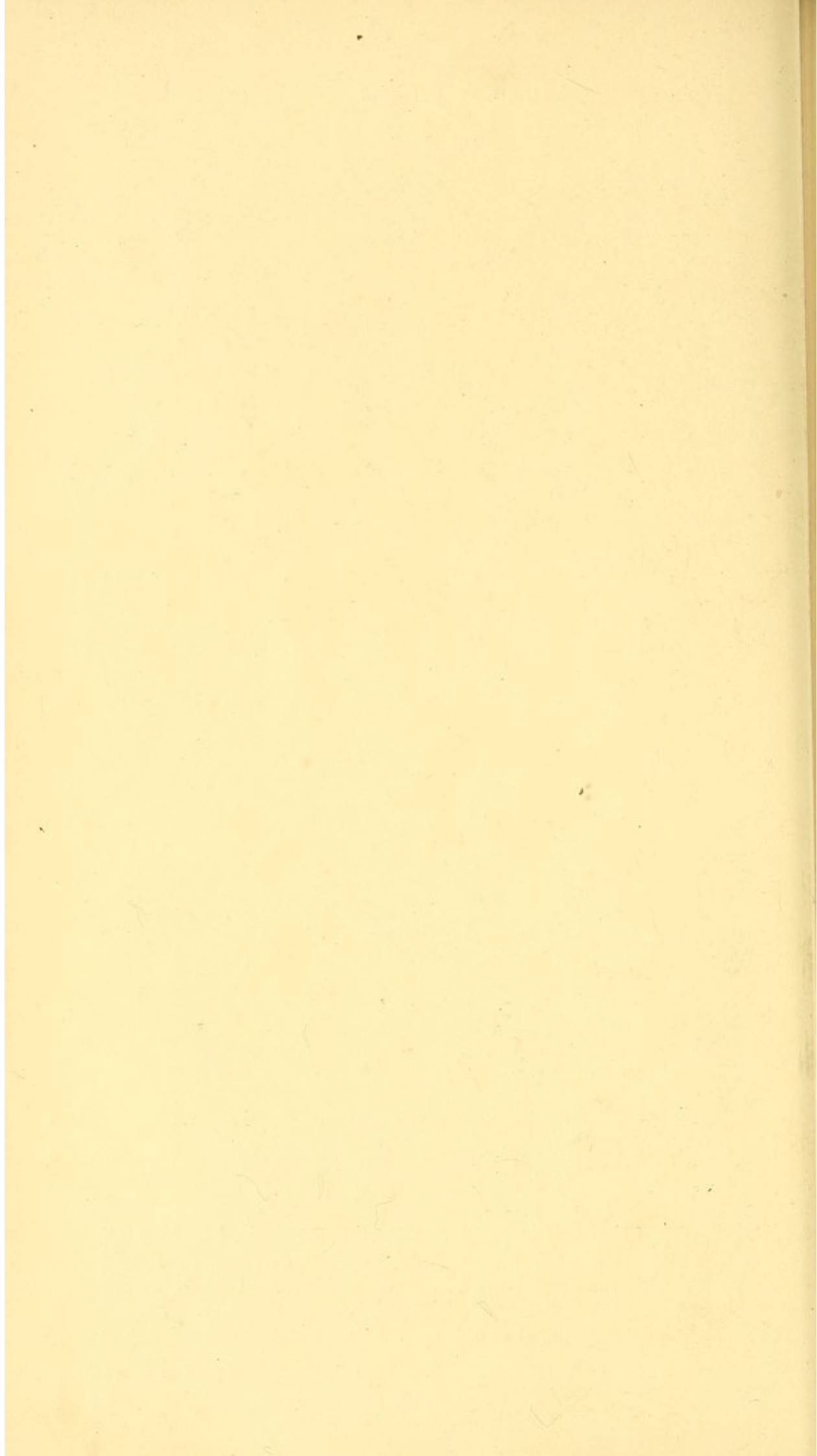


Casts. Chronic nephritis.

*a*, casts of large diameter, containing granular matter scattered through them unequally. *b*, a very long, clear and perfectly transparent cast, containing only a few minute oil globules here and there. *c*, dark granular casts, some of them containing a few oil globules. *d*, large masses of granular matter, many of them appearing like granular cells. Most of these are derived from the mucous membrane covering the glans. *e*, cells of renal epithelium, darker and more granular than usual. *f*, mass of squamous epithelium, probably from one of the follicles of the mucous membrane of the bladder. *g*, free oil globules. *h*, portions of cotton fibre. *i*, portion of feather.  $\times 215$ . - pp. 313, 319.

$\frac{1}{1000}$  of an inch  $\times 215$ .

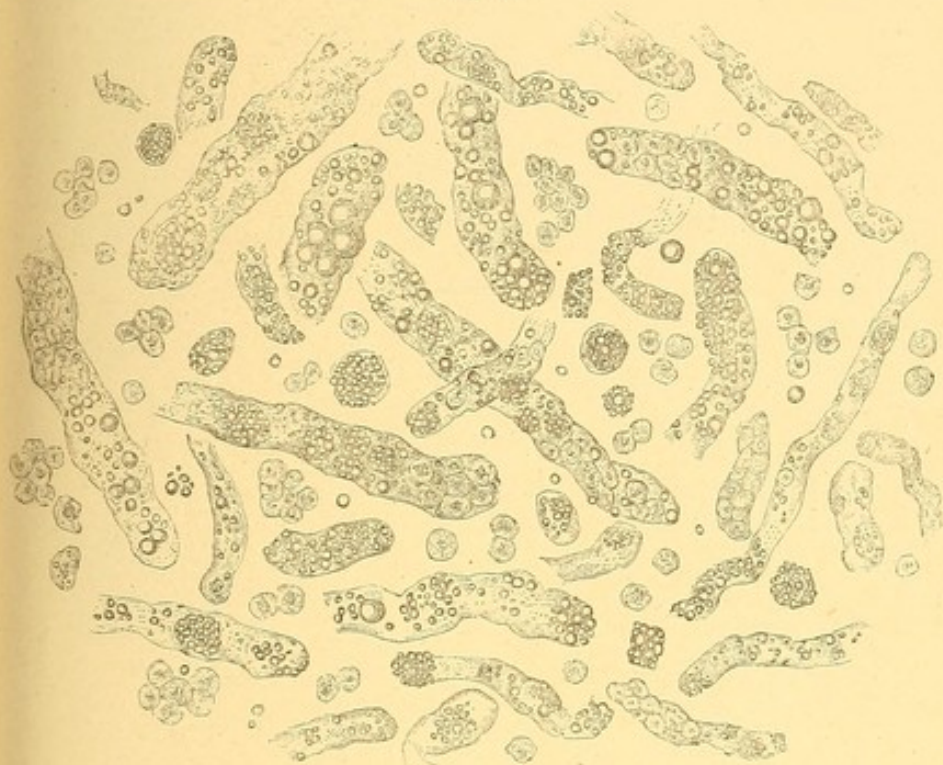
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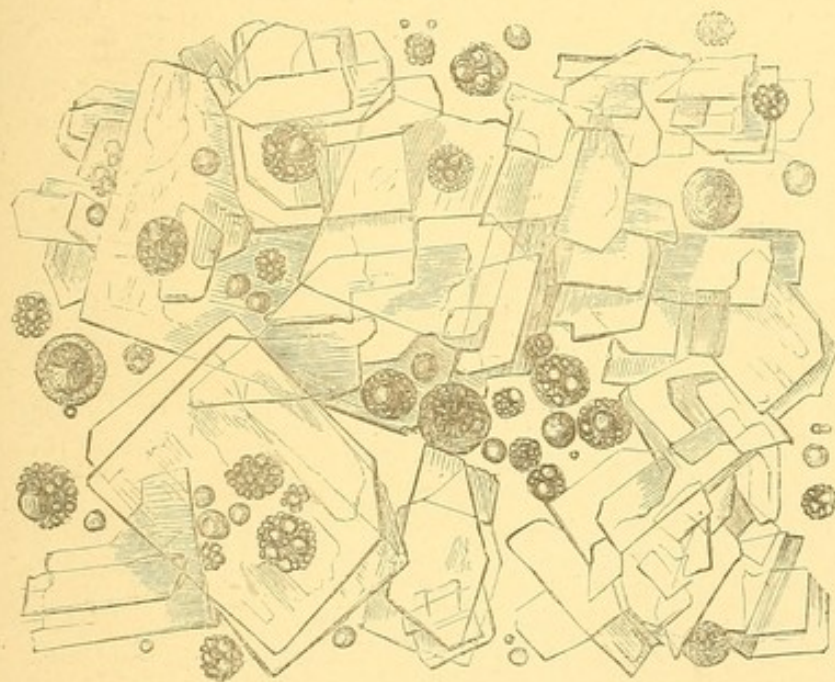
URINARY DEPOSITS.

Fig. 90.



Casts, containing oil from the urine of a case of fatty degeneration of the kidney of long standing. Many cells of epithelium contain no oil.  $\times 215$ .

Fig. 91.



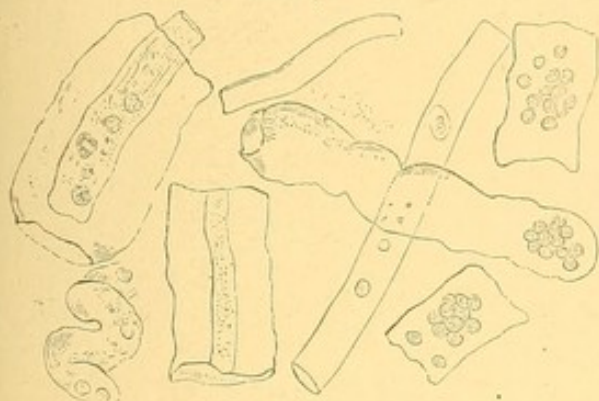
Cholesteroline obtained from the fatty matter in casts separated from the urine of a case of fatty degeneration of the kidneys. Globules composed of non-crystallizable fat only are seen scattered in various parts of the field.  $\times 215$ .

$\frac{1}{1000}$  of an inch  $\times 215$ .





Fig. 92.



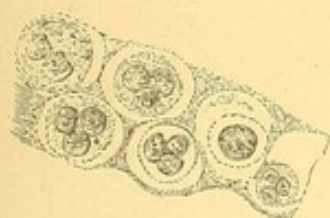
Casts of the uriniferous tubes, from a case of acute nephritis. x 215. pp. 345, 348.

Fig. 93.



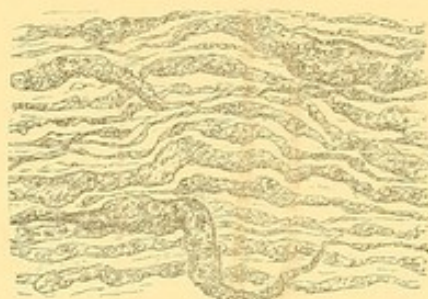
Portion of a cast, containing altered and growing white blood corpuscles. Acute nephritis. x 700.

Fig. 94.



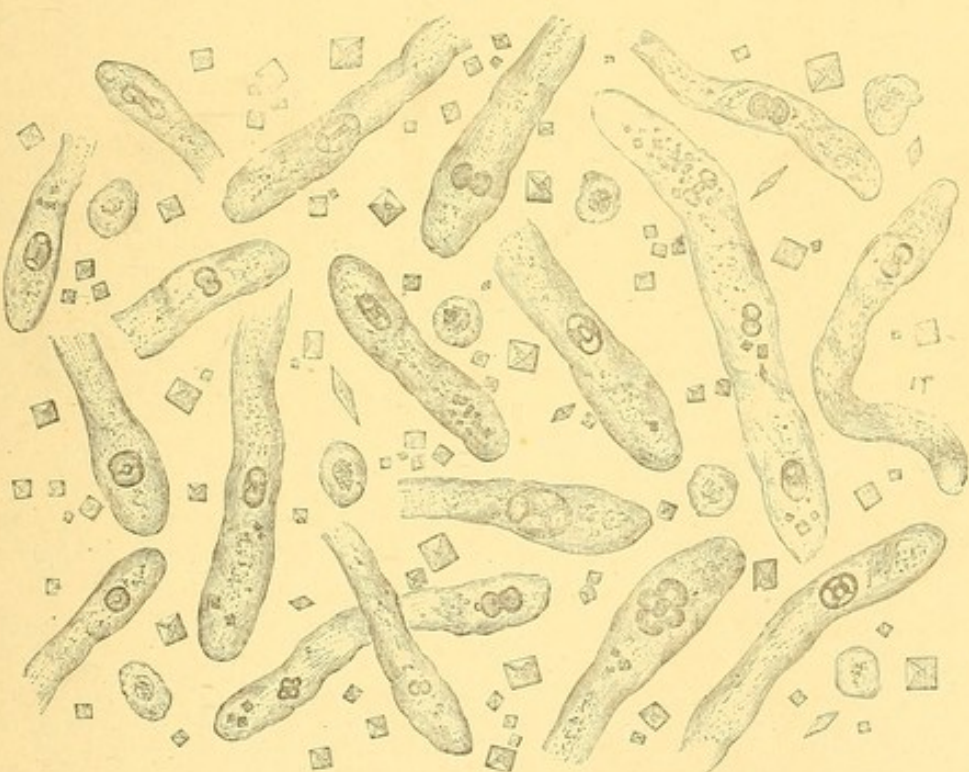
Portion of a cast with distinct cells, probably altered white blood corpuscles. x 700.

Fig. 95.



Shrivelled and wasted uriniferous tubes, from a kidney. No casts could be formed in these tubes. p. 341.

Fig. 96.



Dumb-bell crystals in casts, showing that these curious crystals are formed in the uriniferous tubes. From the urine of a case of cholera. The specimen containing these casts was the first portion passed after eighteen hours complete suppression. It contained a trace of albumen. Octahedra were present in the surrounding fluid. x 215.

p. 344.

$\frac{1}{1000}$  of an inch [ ] x 215.

[To follow PLATE XVI.]



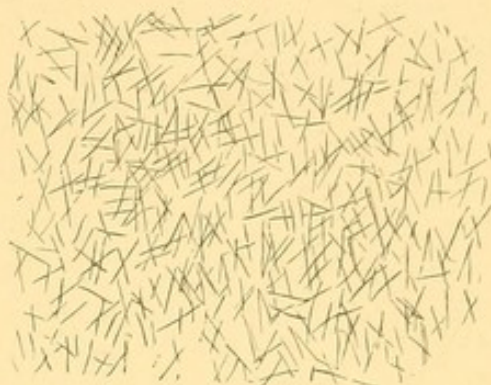


Fig. 97.



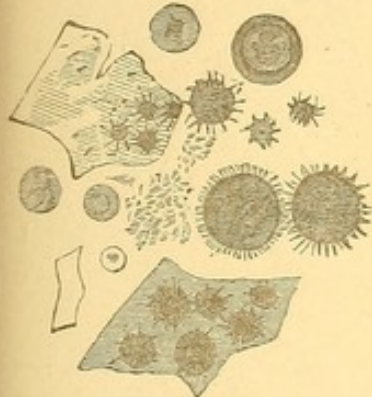
Ordinary granular deposit, usually termed urate or lithate of ammonia, but consisting of urate of soda with small quantities of urates of ammonia, lime, and magnesia.  $\times 215$ . p. 351.

Fig. 98.



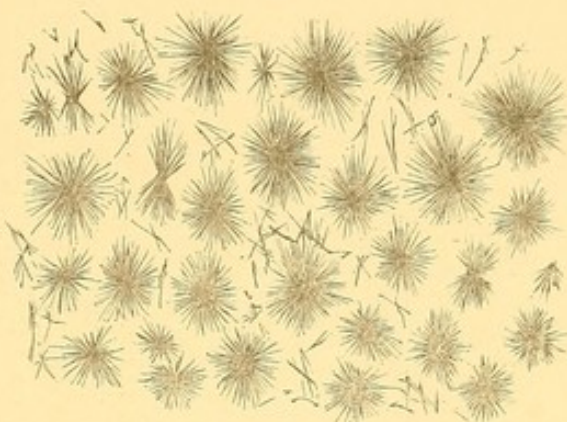
Urate of soda, prepared artificially.  $\times 215$ . p. 351.

Fig. 99.



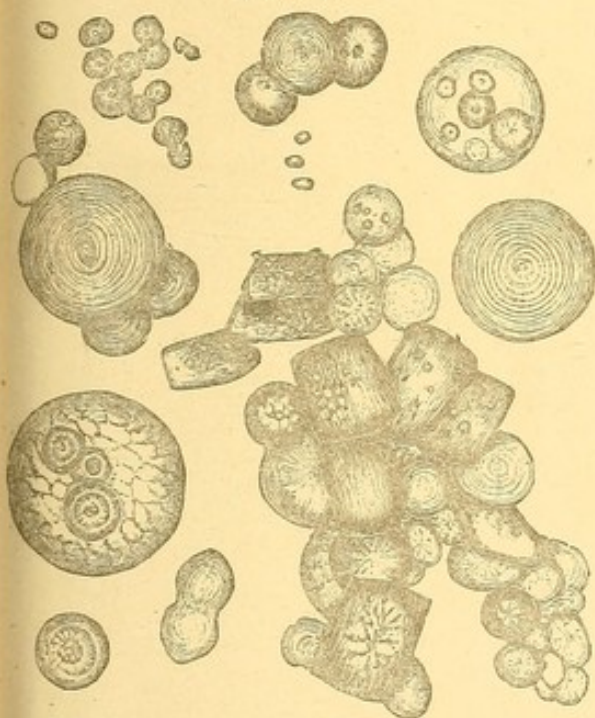
Urate of soda and films of triple phosphate, formed on the surface of concentrated urine. p. 351.

Fig. 100.



Urate of ammonia, prepared artificially.  $\times 215$ . p. 351.

Fig. 101.



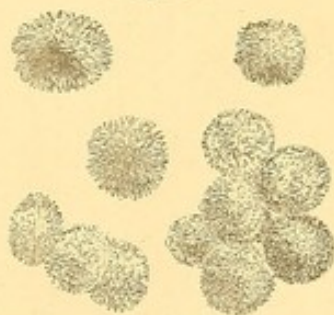
Spherules of urate of soda, with crystals of uric acid. From a case of long continued remittent fever. Sent by Dr. Kennion, of Harrogate.  $\times 215$ . p. 352.

Fig. 102.




Urate of ammonia, prepared artificially.  $\times 215$ . p. 351.

Fig. 103.



Urate of ammonia, prepared artificially.  $\times 215$ . p. 351.

$\frac{1}{1000}$  of an inch   $\times 215$ .

[To face page 352]

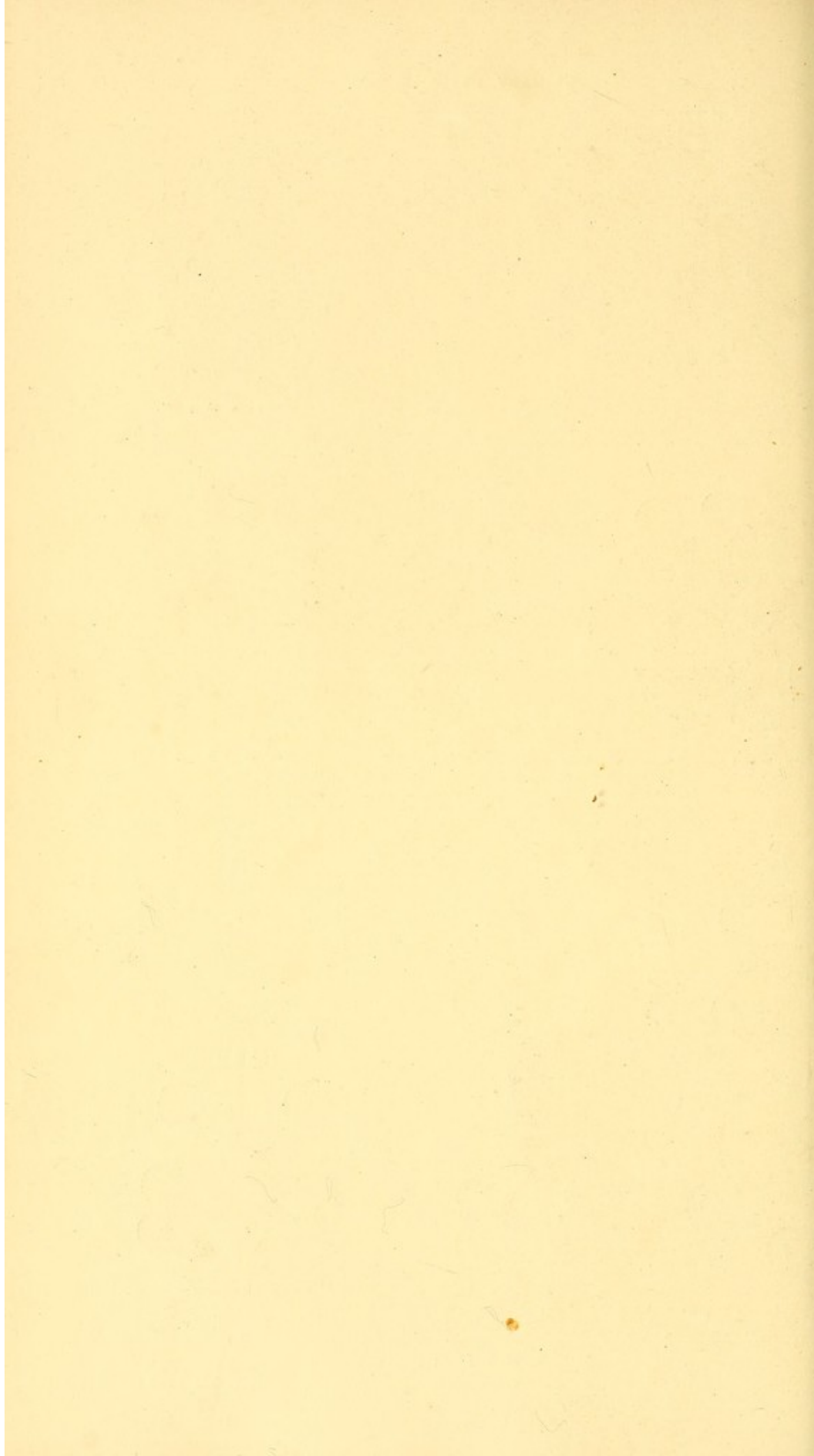
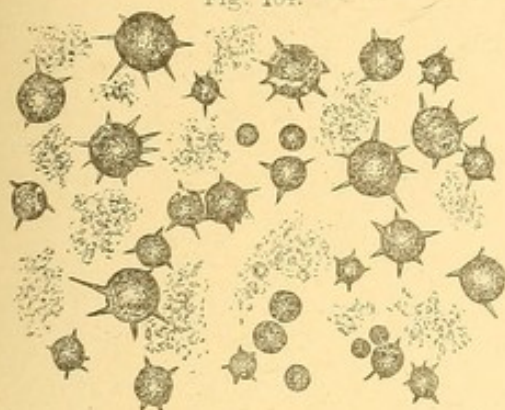


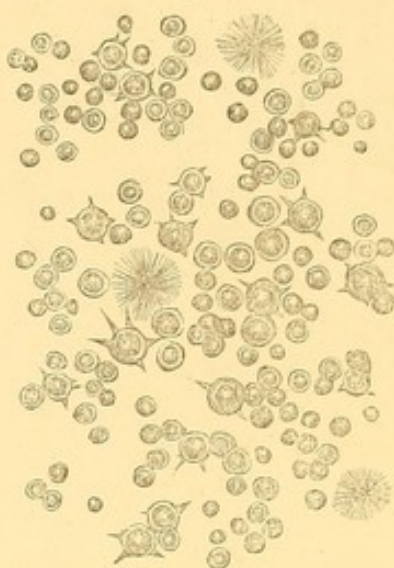


Fig. 104.



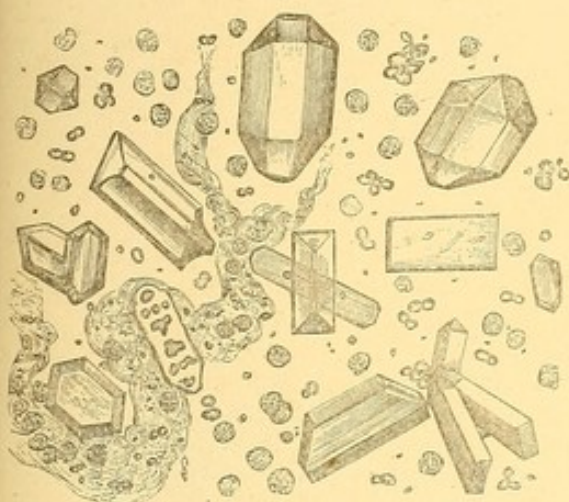
Urate of soda in spherical masses, from various parts of which minute acicular crystals of uric acid project.  $\times 215$ . p. 392.

Fig. 105.



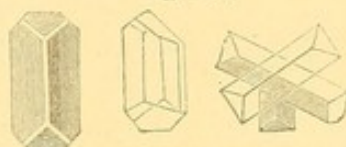
Urate of soda in a globular form, commonly found in the urine of children.  $\times 215$ . p. 392.

Fig. 106.



Crystals of ammoniaco-magnesian phosphate, with urates, mucus and pus corpuscles. From a case of catarrh of the bladder of a man aged 40. Three years' standing. p. 355.

Fig. 107.



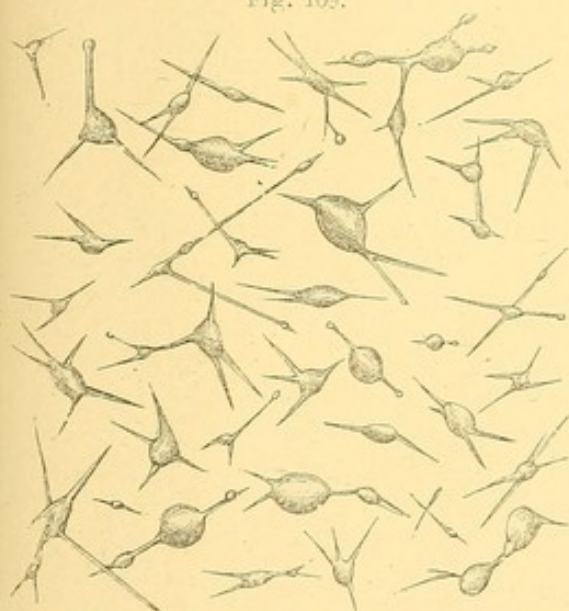
Prismatic crystals of triple phosphate, showing their form. p. 355.

Fig. 108.



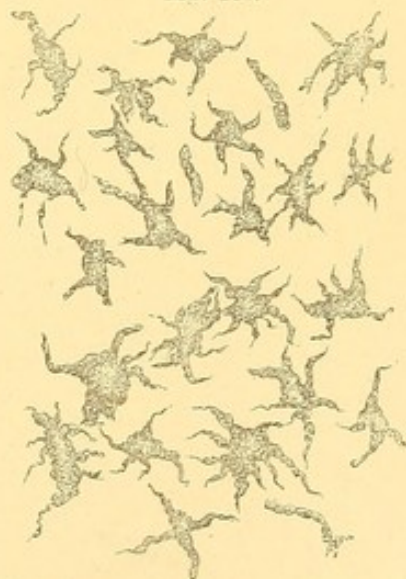
Triple or ammoniaco-magnesian phosphate, from acid urine.  $\times 215$ .

Fig. 109.



Urate of soda, prepared artificially.  $\times 215$ . p. 351.

Fig. 110.



Rare form of urate of soda, from urine of a patient suffering from peritonitis.  $\times 215$ . p. 351.

1/1000 of an inch  $\times 215$ .

[To face page 354.]

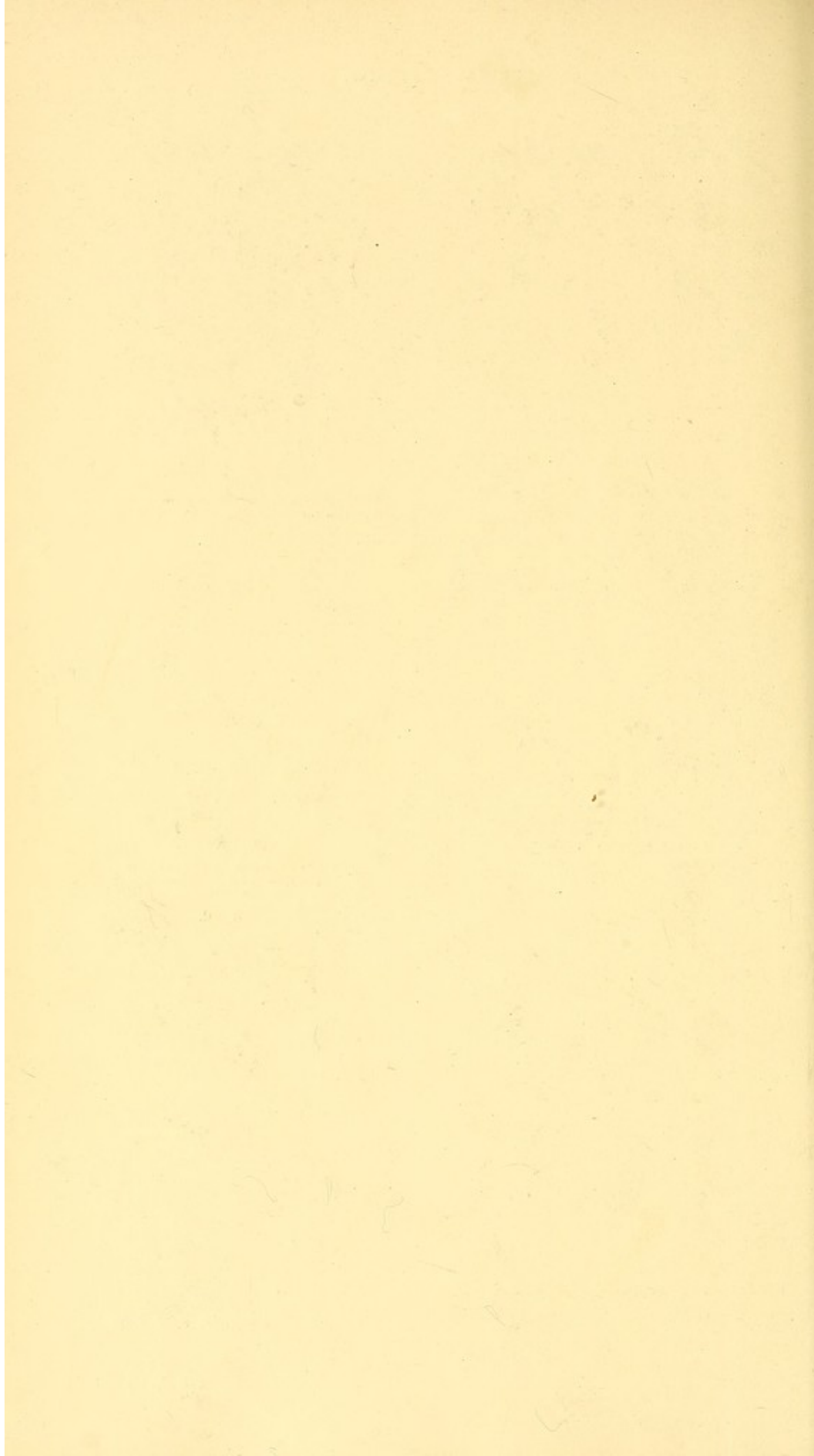
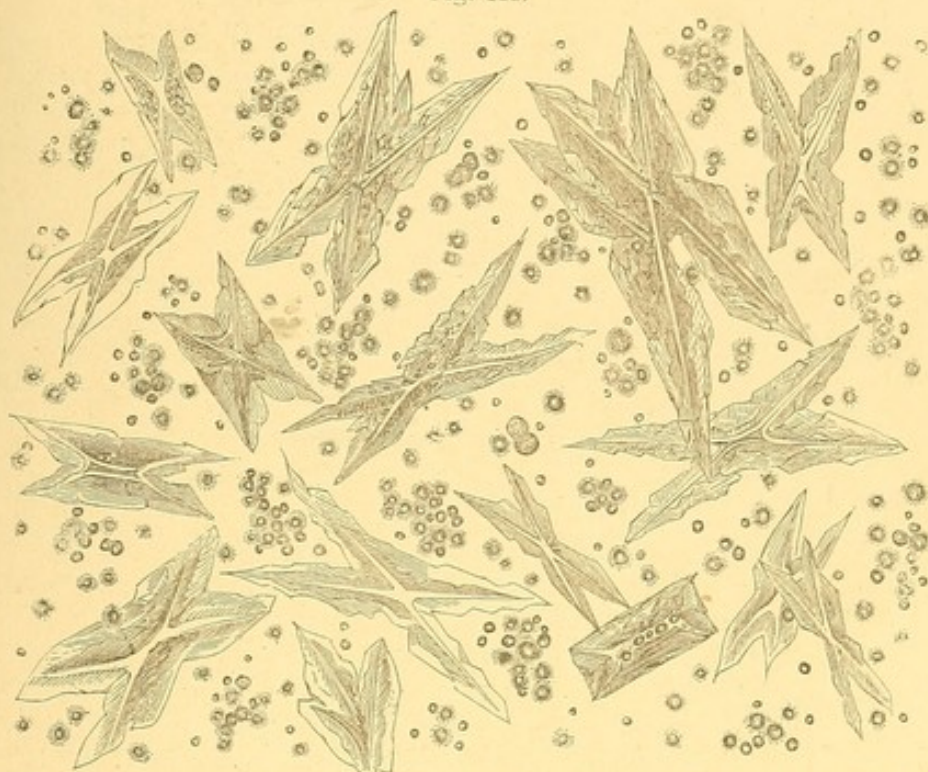


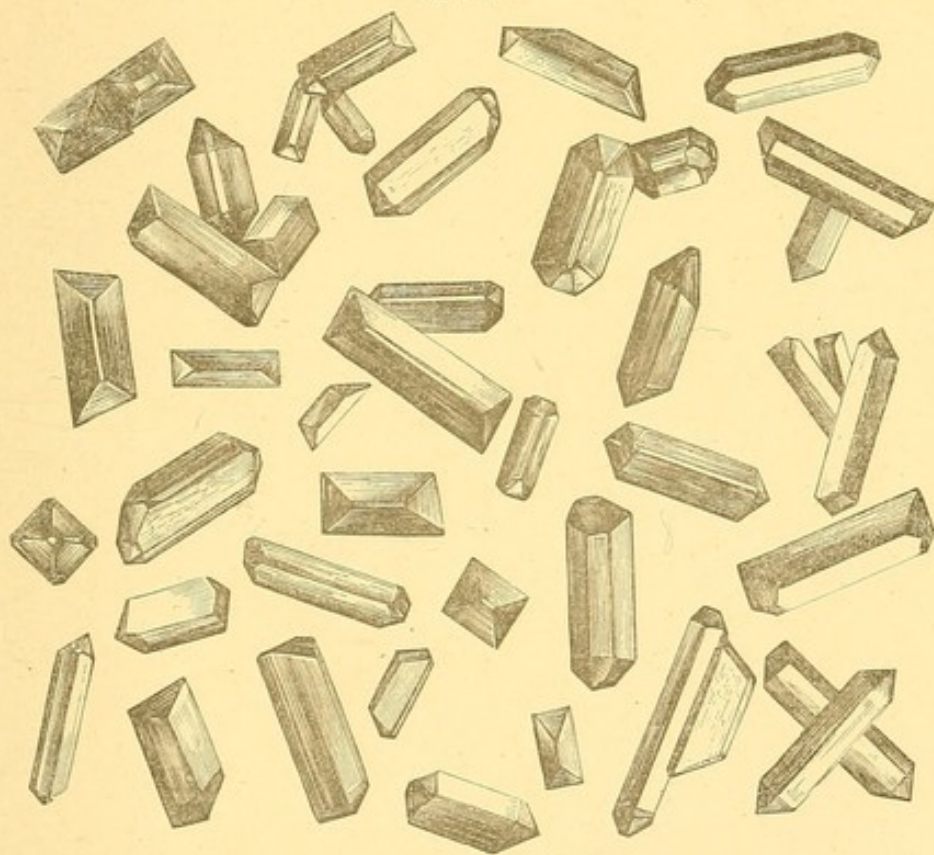


Fig. 111.



Beautiful crystals of triple or ammoniaco-magnesian phosphate, and spherules of urate of soda.  
 $\times 215$ . pp. 351, 353.

Fig. 112.



Crystals of triple phosphate.  $\text{MgONH}_4\text{O}, \text{PO}_5 + 12\text{aq}$ . In the form of triangular prisms, with obliquely truncated extremities, as they frequently occur in urine. In many cases the crystals are four-sided. Not unfrequently the shaft of the crystal is so short that the two triangular extremities are seen quite close together, and the crystal, without care, might be mistaken for an octahedron.  
 $\times 45$ . p. 355. See also Pl. XXXIII. Fig. 180.

$\frac{1}{100}$  of an inch  $\text{---}$   $\text{---}$   $\times 45$ .

$\frac{1}{1000}$  "  $\text{---}$   $\text{---}$   $\times 215$ .

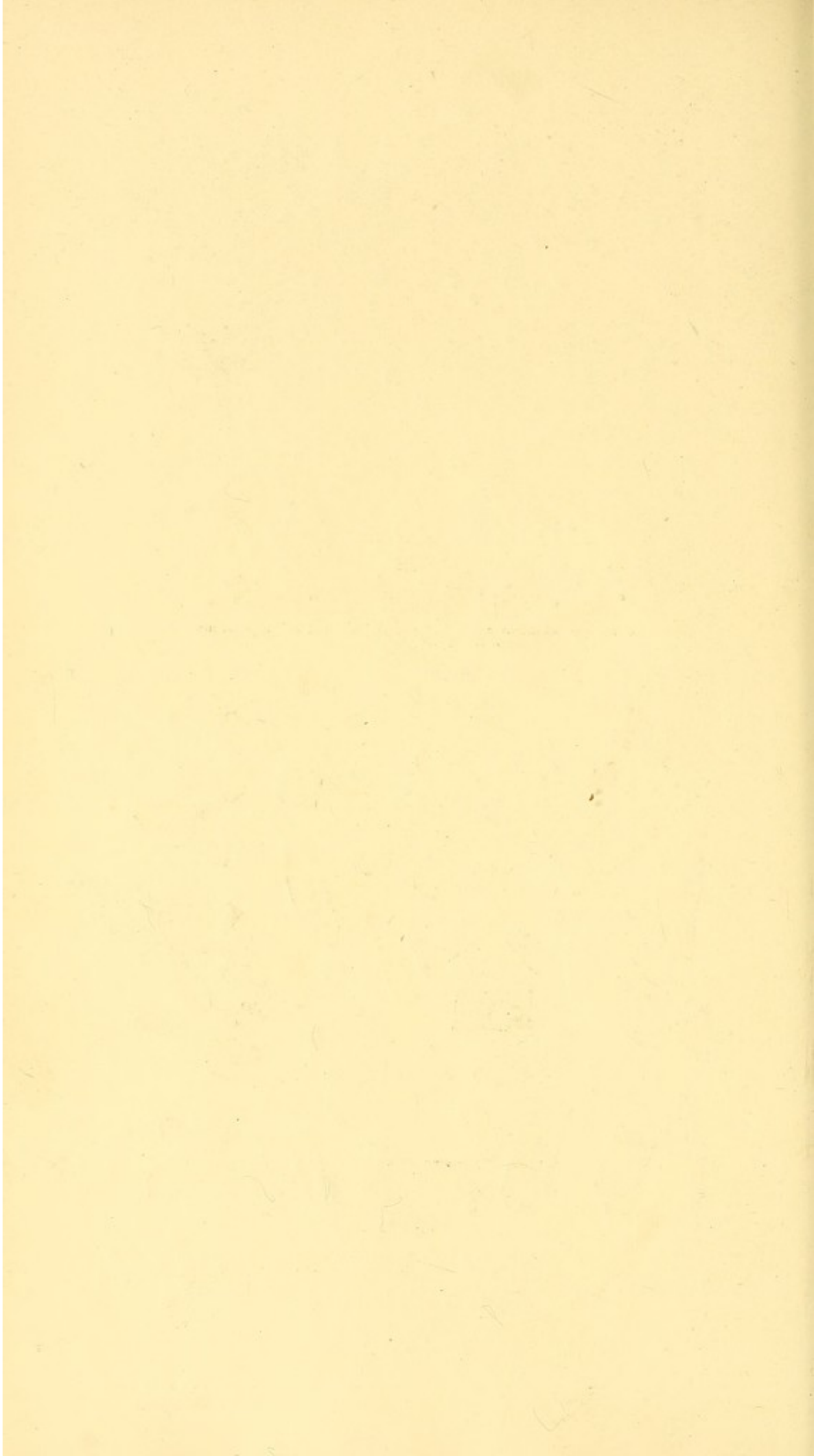
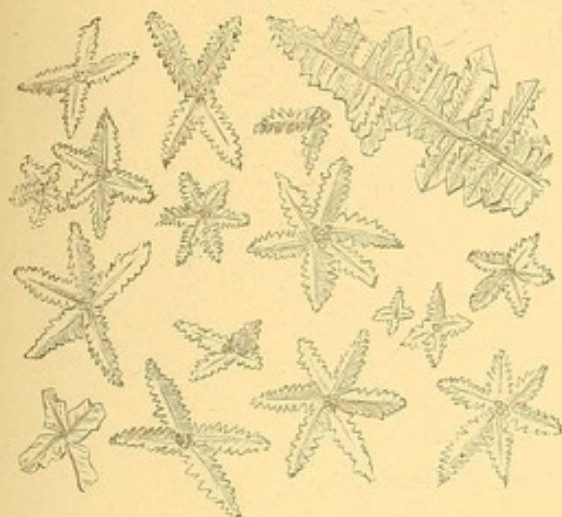


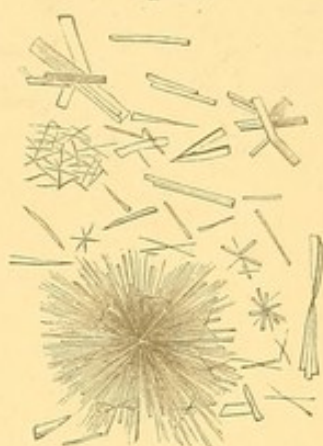


Fig. 113.



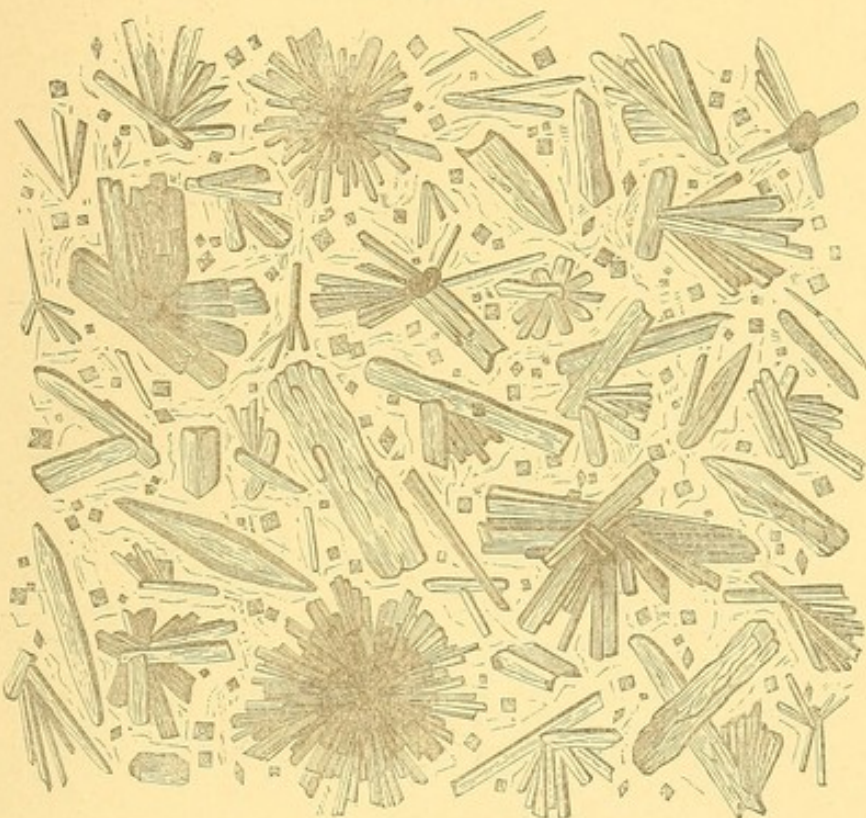
Crystals of triple phosphate formed by the addition of ammonia to urine. The crystals being rapidly developed are precipitated in this very beautiful star-like form. If, however, these remained for some time in the urine they would gradually assume the prismatic form. The more highly magnified drawing of one of the arms of a crystal in the upper part of the figure shows how this change in crystalline form takes place.  $\times 215$ . p. 355.

Fig. 114.



Crystals of phosphate of lime occasionally met with in urine.  $\times 215$ . p. 356.

Fig. 115.



Drawing of a urinary deposit, consisting of crystals of phosphate of lime and numerous octahedra of oxalate of lime, with a little mucus.  $\times 215$ . p. 357.

Fig. 116.



Phosphate of lime in the form of dumb-bells, from the mucus of the gall bladder.  $\times 215$ . p. 356.

Fig. 117.



Unusual form of triple phosphate. From the urine of a patient suffering from indigestion in the very hot weather.  $\times 215$ . p. 357.

Fig. 118.



Large dumb-bells of phosphate of lime.  $\times 215$ . p. 356.

Scale of an inch  $\times 215$ .

[To face page 358.]

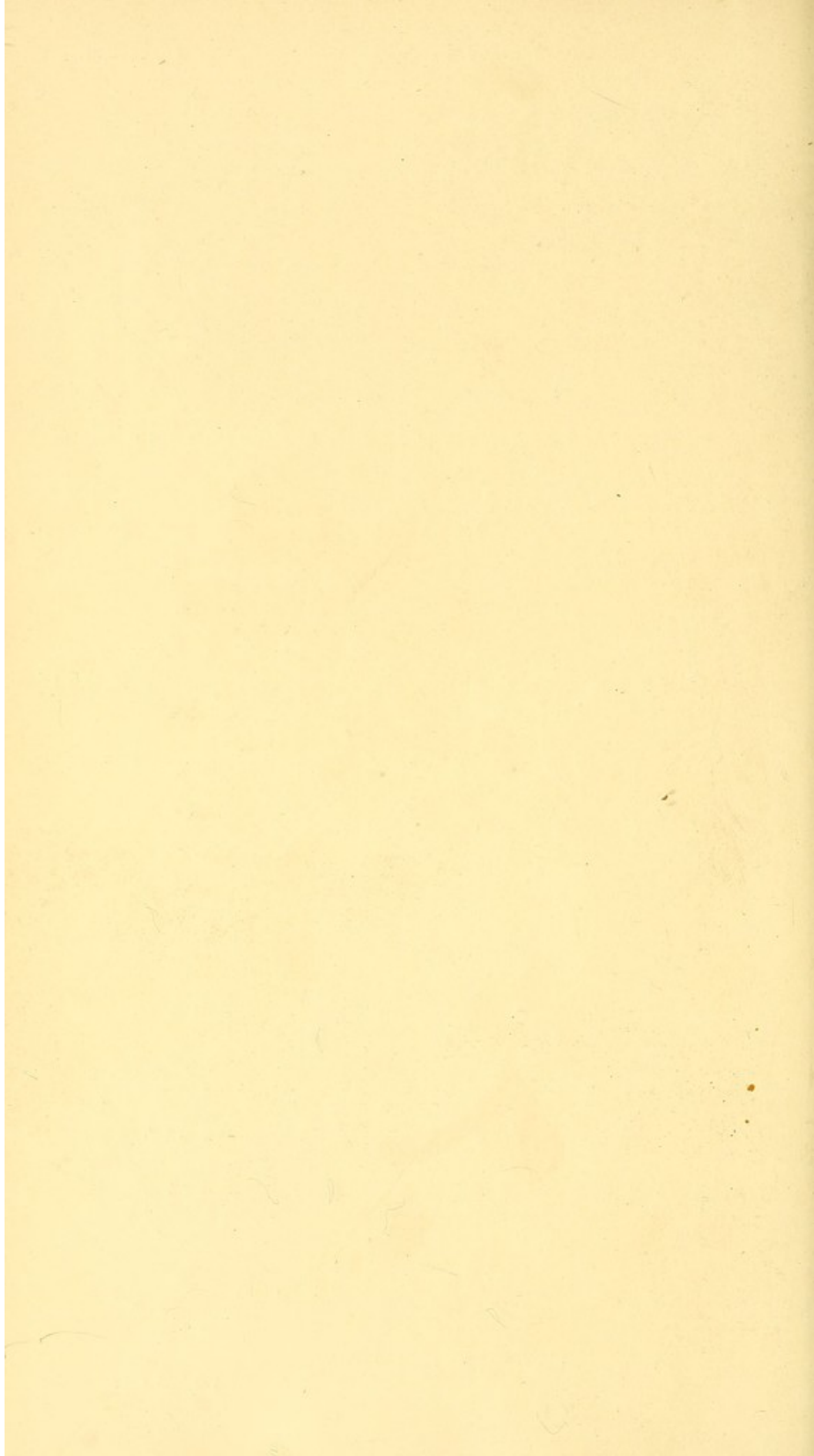
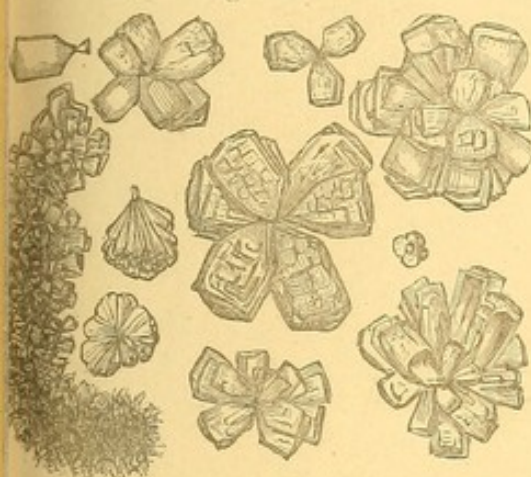




Fig. 119.



Phosphate of lime, crystallized in the form of fan-like plates.  $\times 215$ . p. 358.

Fig. 120.



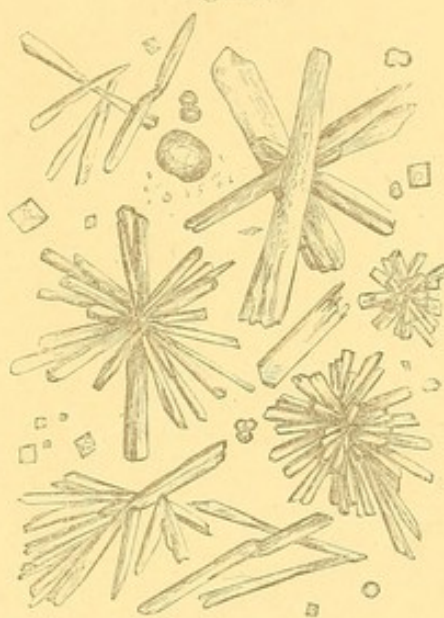
Two forms of phosphate of lime, mounted in Canada balsam.  $\times 215$ . p. 358.

Fig. 121.



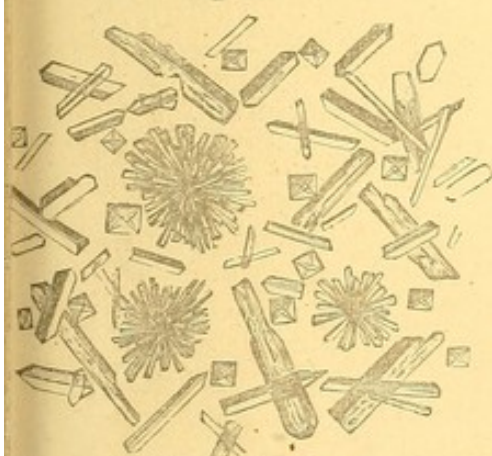
Crystals of triple phosphate and phosphate of lime.  $\times 130$ . p. 358.

Fig. 122.



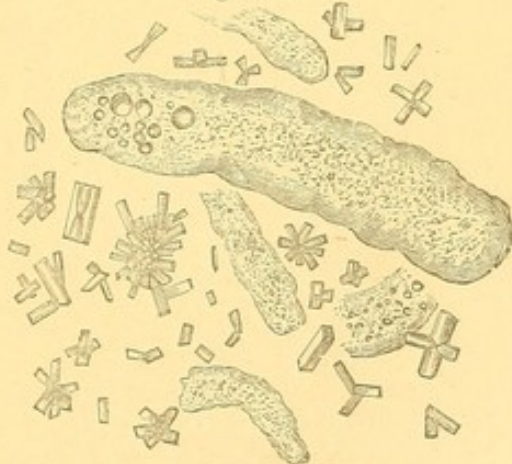
Phosphate of lime. From urine.  $\times 130$ . p. 358.

Fig. 123.



Phosphate and oxalate of lime, from the urine of a man enjoying good health, but taking little exercise.  $\times 215$ . p. 358.

Fig. 124.



Deposit from the urine of a man suffering from gouty kidney, consisting of a peculiar form of phosphate of lime, with granular casts and casts containing oil.  $\times 215$ . p. 358.

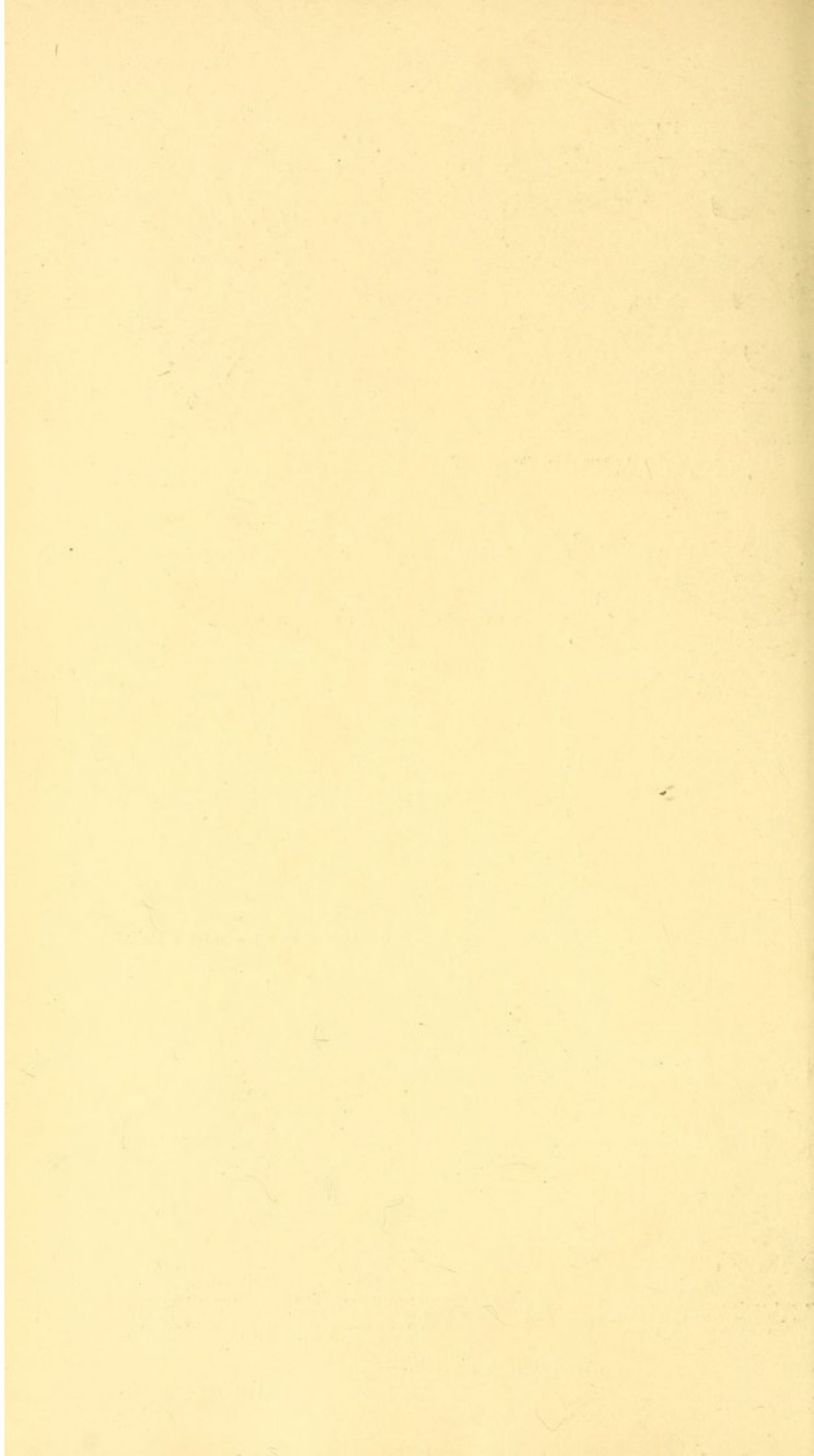
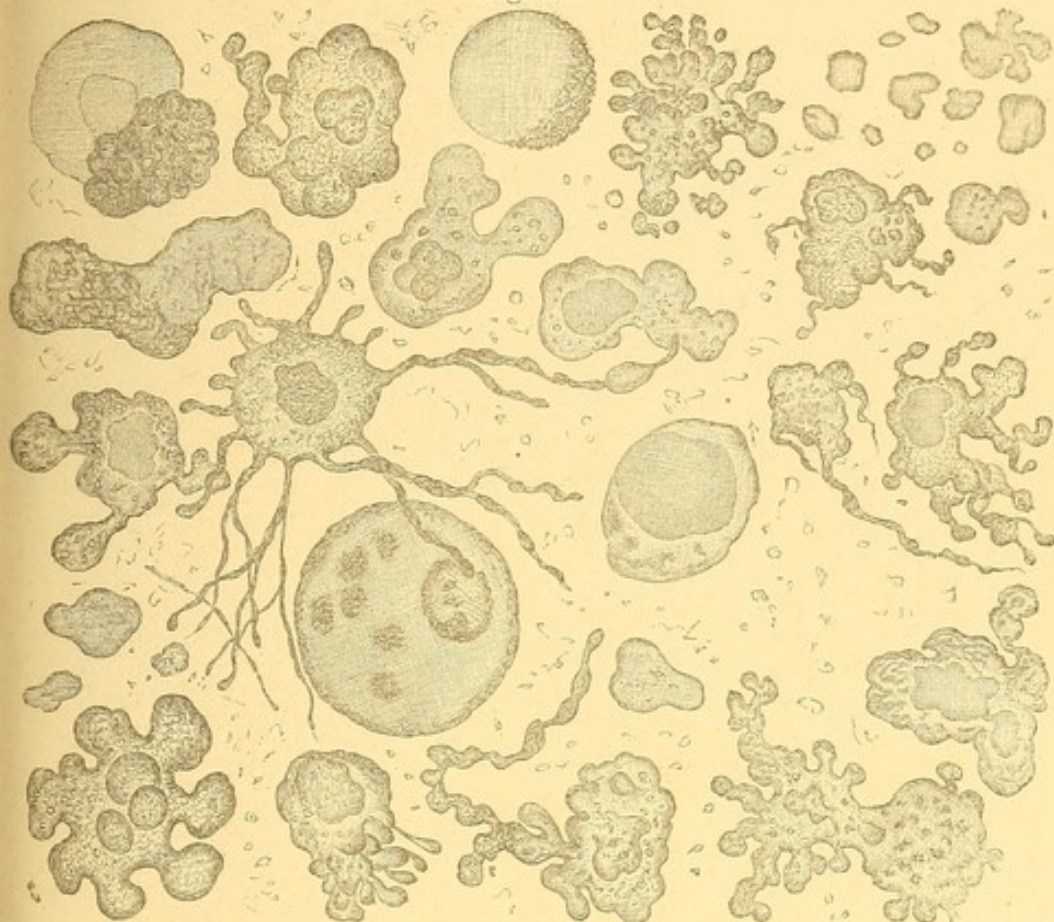


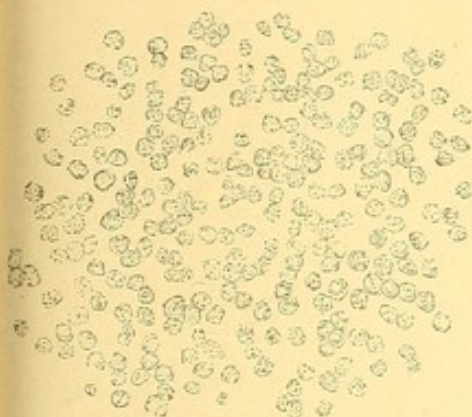


Fig. 125.



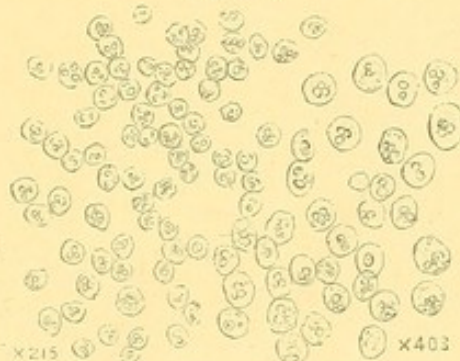
Pus corpuscles exhibiting very active movements. From the bladder of a patient suffering from chronic inflammation. Showing alterations in form due to (vital?) movements.  $\times 1300$ . p. 364.

Fig. 126.



Pus corpuscles from urine.  $\times 215$ . p. 364.

Fig. 127.



Pus corpuscles which have been acted upon by acetic acid. p. 361.

Fig. 128.



Pus corpuscles under the action of acetic acid. a, action commencing. b, complete.  $\times 215$ . p. 364.

Fig. 130.



Formation of pus from germinal matter of epithelial cells.  $\times 215$ . p. 362.

Fig. 129.



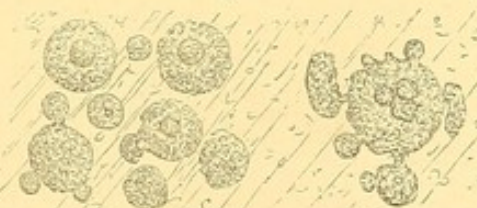
Pus corpuscles showing protrusions.  $\times 700$ . p. 364.

Fig. 132.



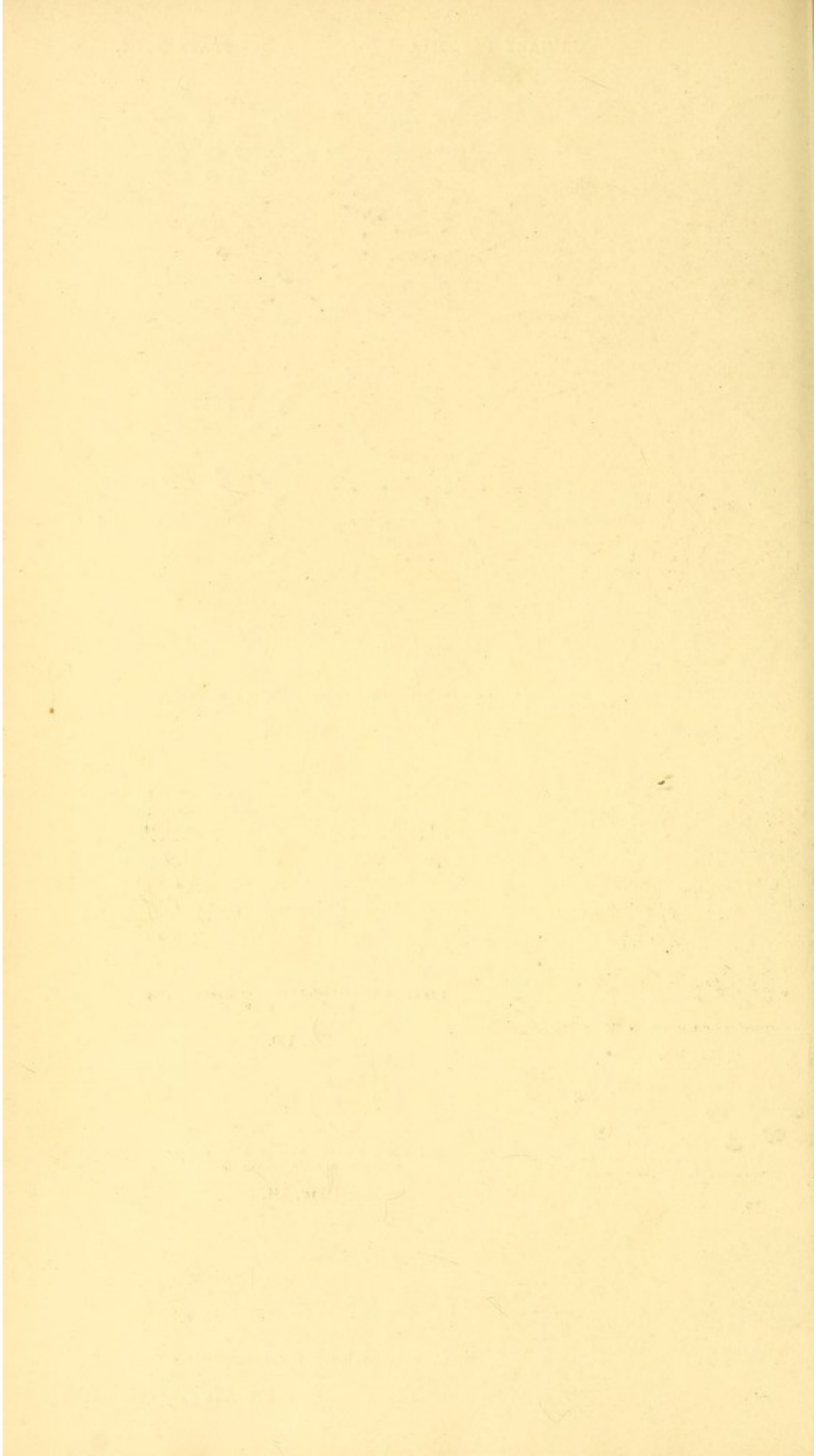
Multiplication of pus corpuscles by detachment of protruding portions from each corpuscle.  $\times 700$ . p. 364.

Fig. 131.



Growth and multiplication of pus corpuscles when free. p. 364.

[To face page 364.]





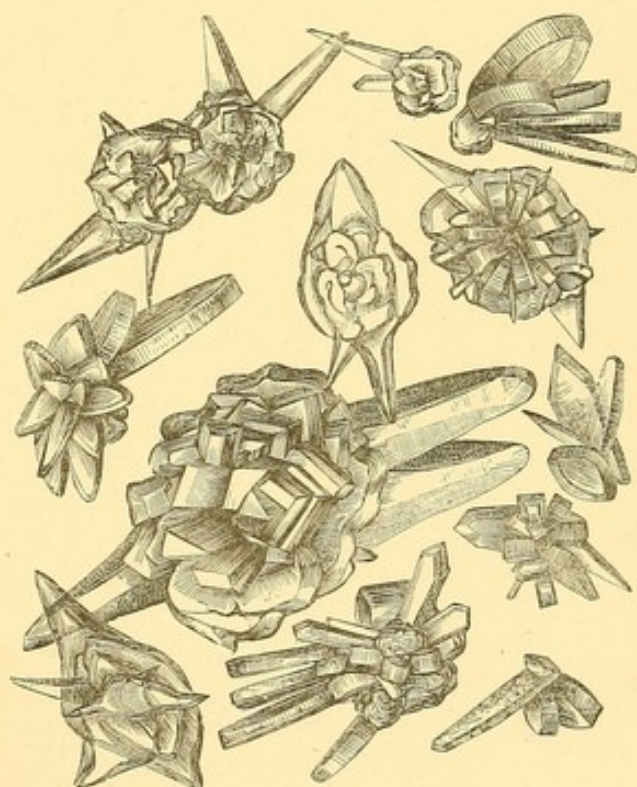
URINARY DEPOSITS.

Fig. 133.



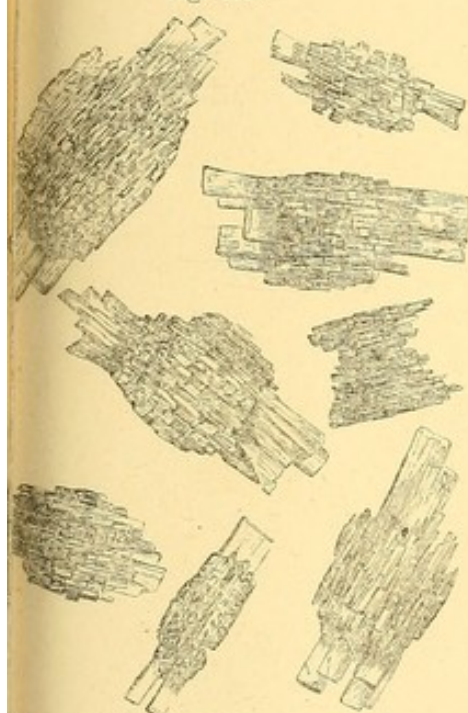
Groups of crystals of uric acid, often termed 'cayenne-pepper grains,' with octahedra of oxalate of lime. x 215.

Fig. 135.



Beautiful aggregations of uric acid. x 215.

Fig. 134.



Masses of small uric acid crystals. x 215.

$\frac{1}{1000}$  of an inch [ ] x 215.

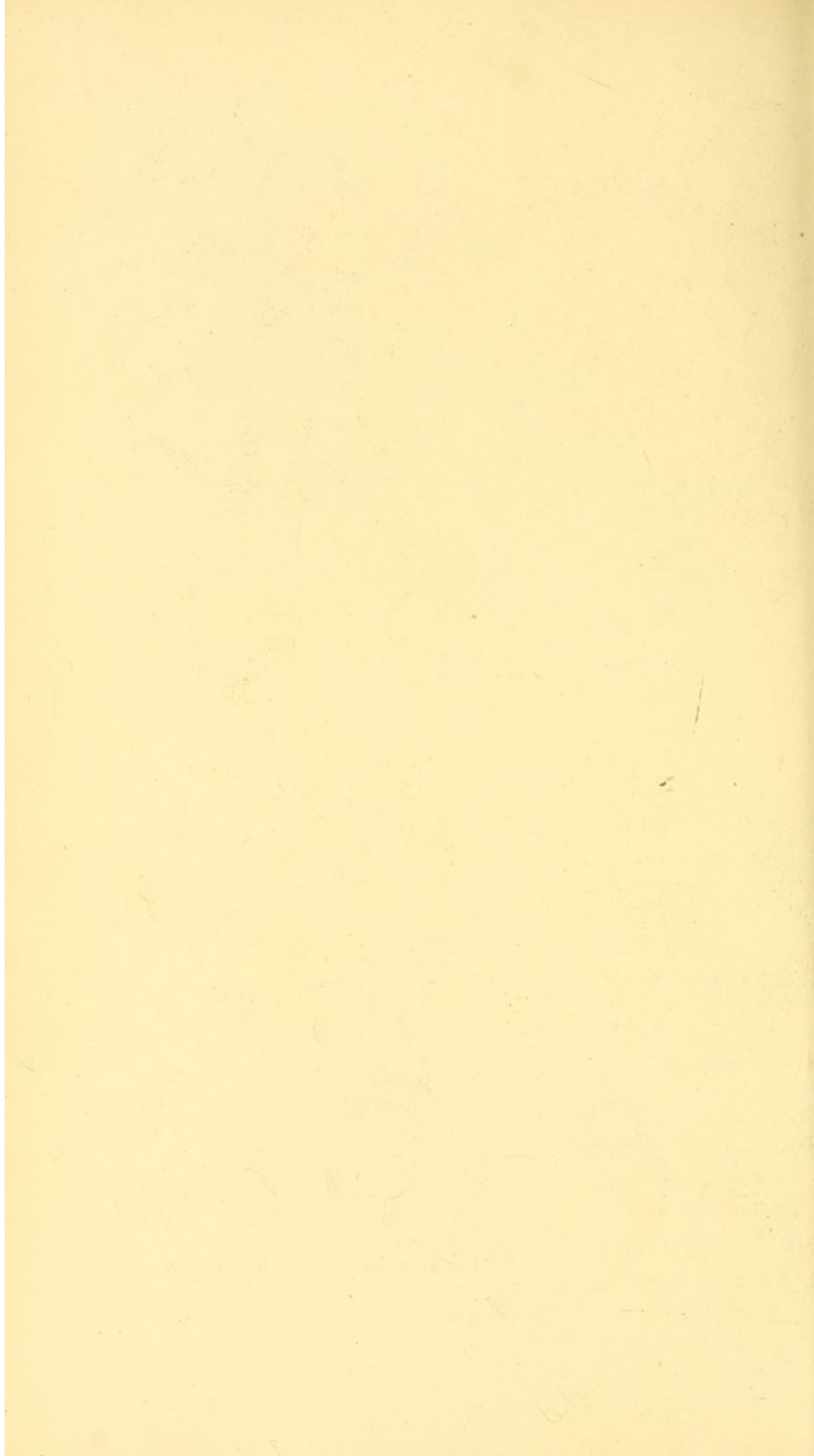




Fig. 136.

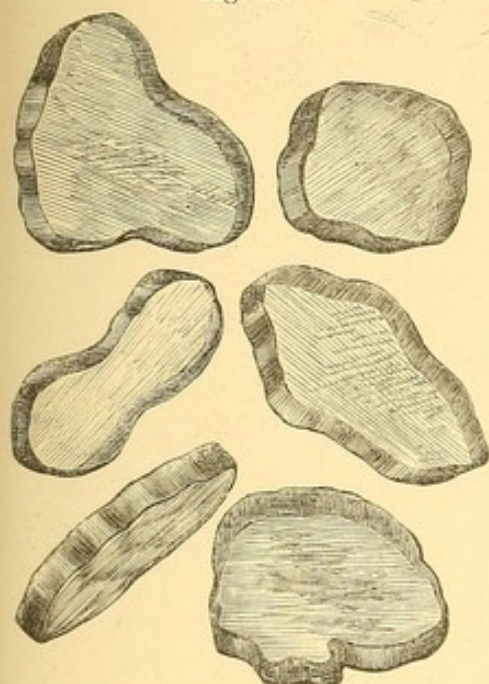
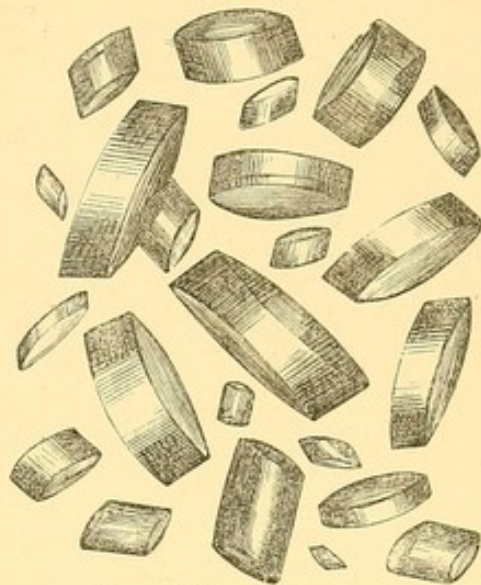
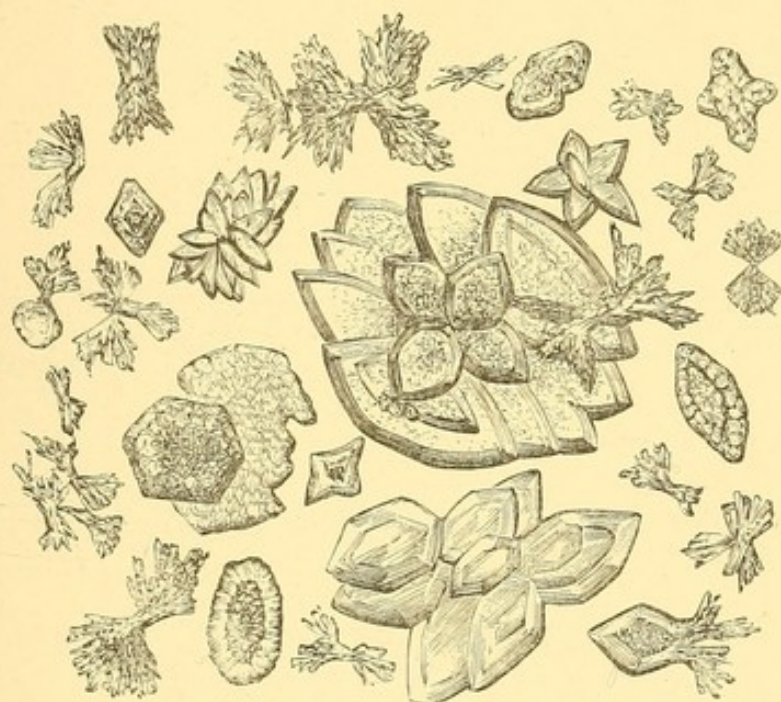
Large fiddle-shaped flattened crystals of uric acid.  
x 130.

Fig. 137.



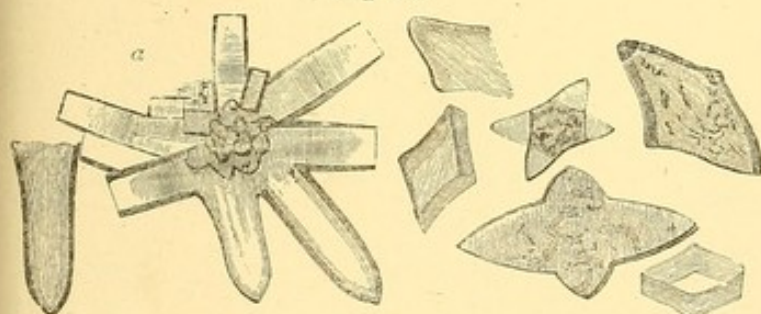
Uric acid from urine x 130.

Fig. 138.



Curious forms of uric acid from urine x 215.

Fig. 139.

Large halbert-shaped crystals of uric acid a, 'cayenne-pepper' grain.  
x 215.



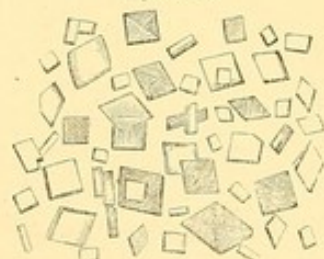
$\frac{1}{1000}$  of an inch  130.  
" "  x 215.

Fig. 140.

Minute crystals of uric acid.  
x 215.

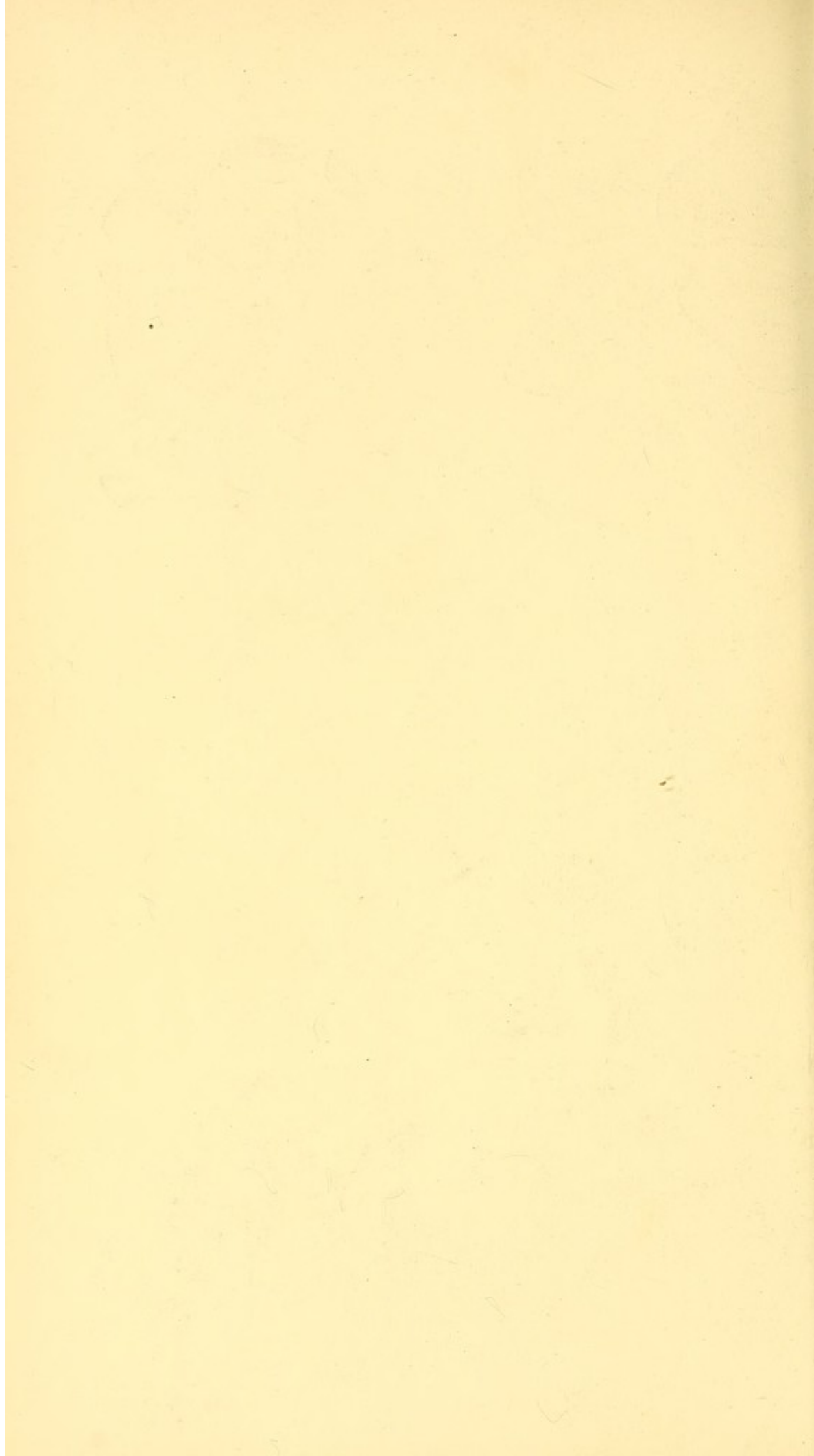
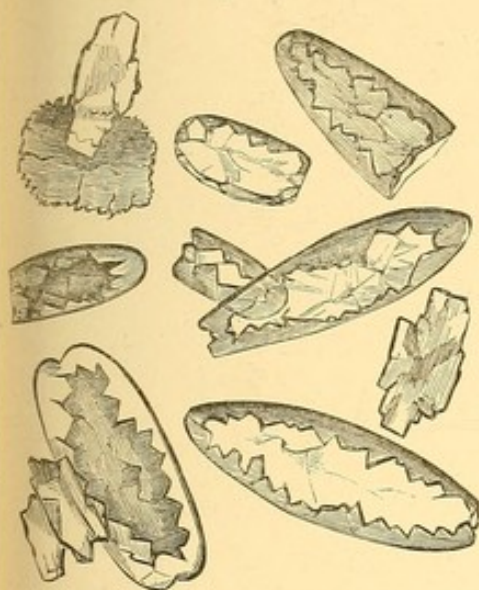


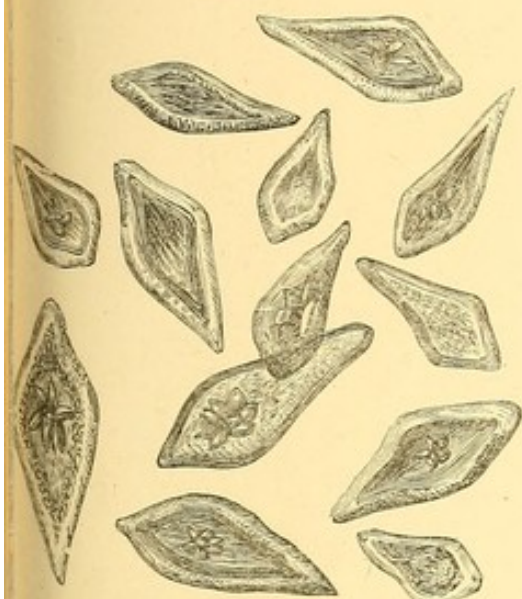


Fig. 141.



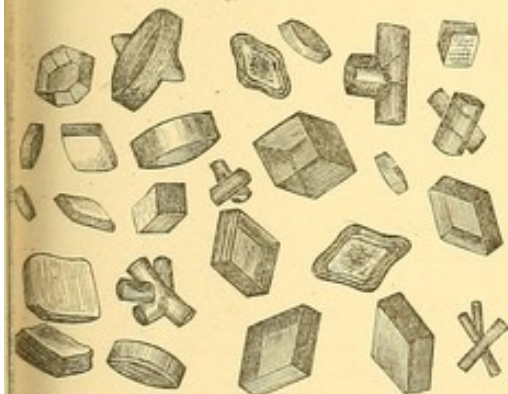
Common lamellar crystals of uric acid, perfectly colourless.  
Sent by Mr. Lawrence.  $\times 215$ .

Fig. 143.



Crystals of uric acid from urine.  $\times 130$ .

Fig. 146.



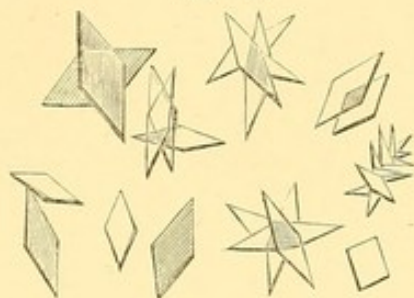
Common rhomboidal and cubical forms of uric acid from urine.  $\times 215$ .

Fig. 142.



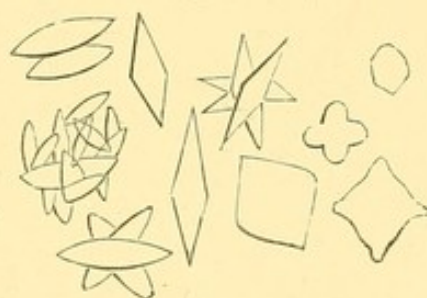
Lozenge-shaped crystals of uric acid, precipitated by the addition of acid to urine.  $\times 215$ .

Fig. 144.



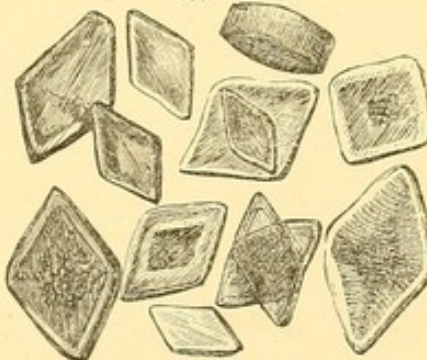
Lozenge-shaped crystals of uric acid obtained by adding acid to urine.  $\times 215$ .

Fig. 145.



Common forms of uric acid crystals.

Fig. 147.



Large crystals of uric acid, deposited in urine after standing.  $\times 130$ .

$\frac{1}{1000}$  of an inch  $\square$   $\times 130$ .  
" "  $\square$   $\times 215$ .

[To follow PLATE XXV.]

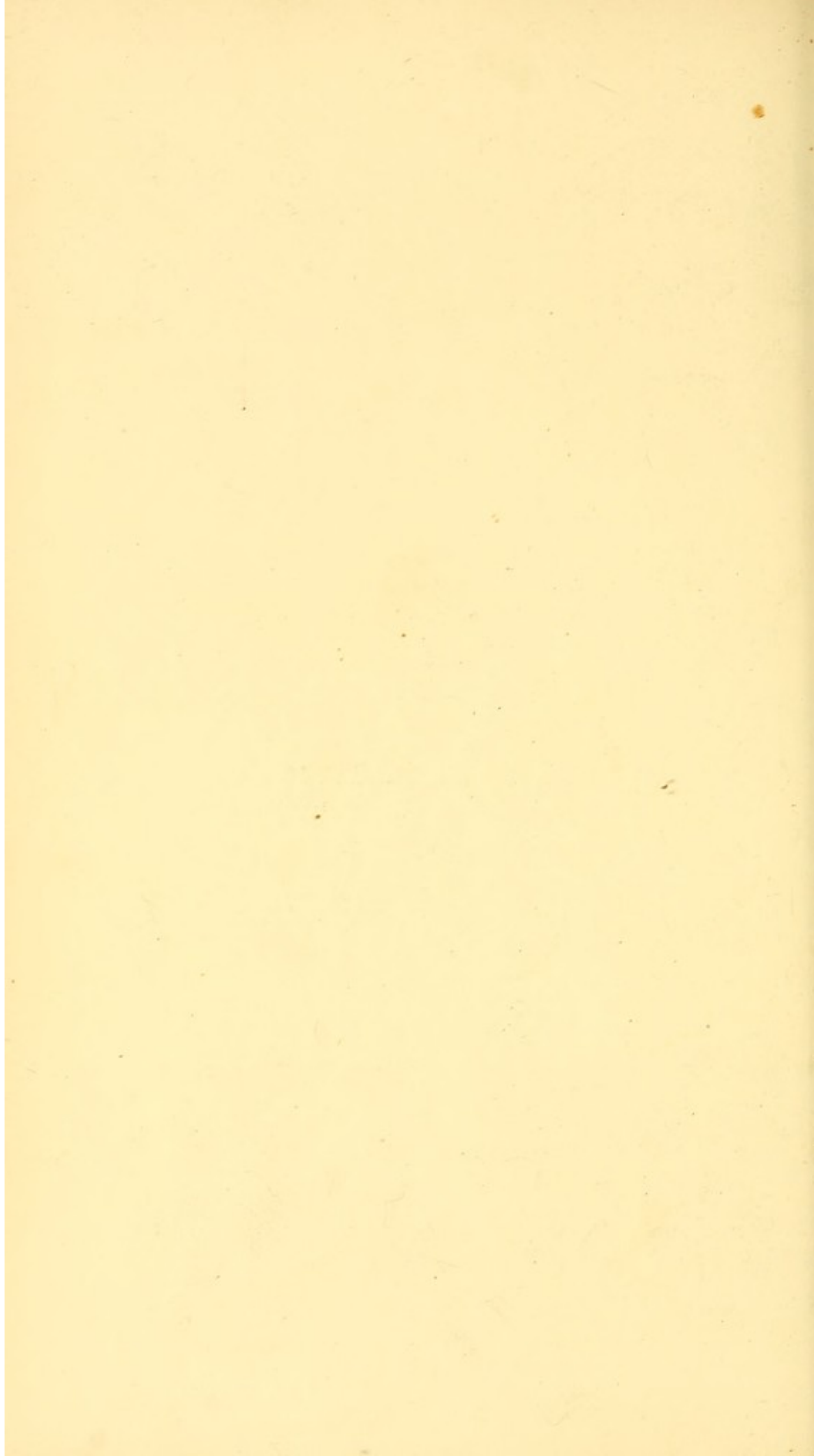
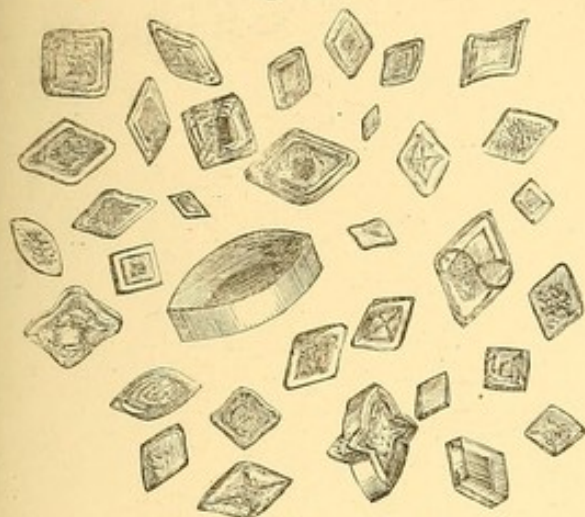


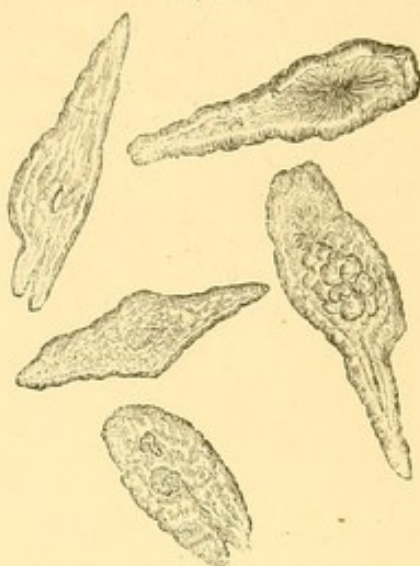


Fig. 148.



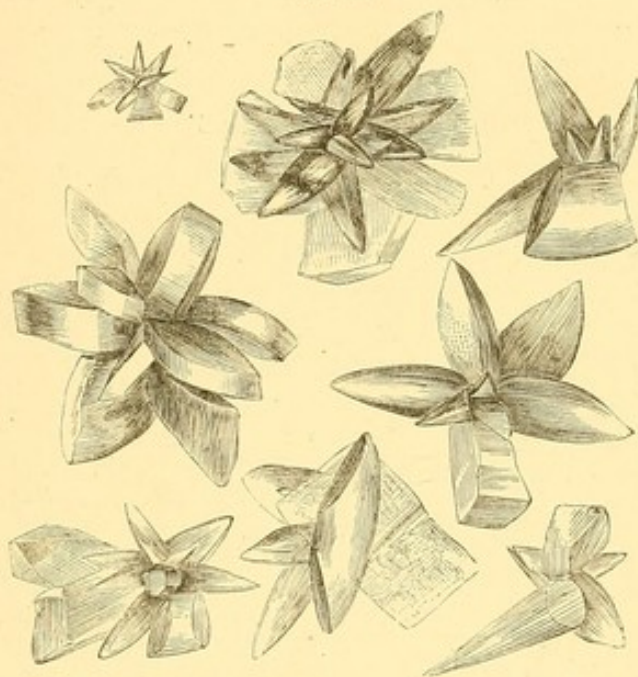
Rhomboidal crystals of uric acid. Very common form  
x 215.

Fig. 149.



Curious forms of uric acid, deposited in the  
urine of a case of fatty degeneration of the  
kidneys. x 130.

Fig. 150.



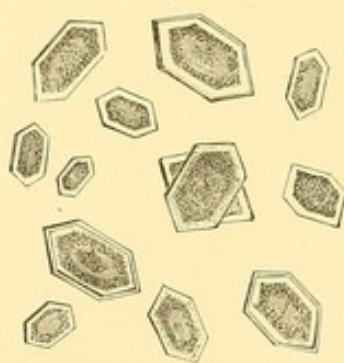
Large, very transparent glomeruli of uric acid, from urine. x 130.

Fig. 151.



Round, oval, and spear-headed masses of uric acid.  
Deposited from urine. x 215.

Fig. 152.



Hexagonal crystals of uric acid. This form  
occurs in urine very rarely x 130.

$\frac{1}{1000}$  of an inch [ ] x 130.

" " [ ] x 215.

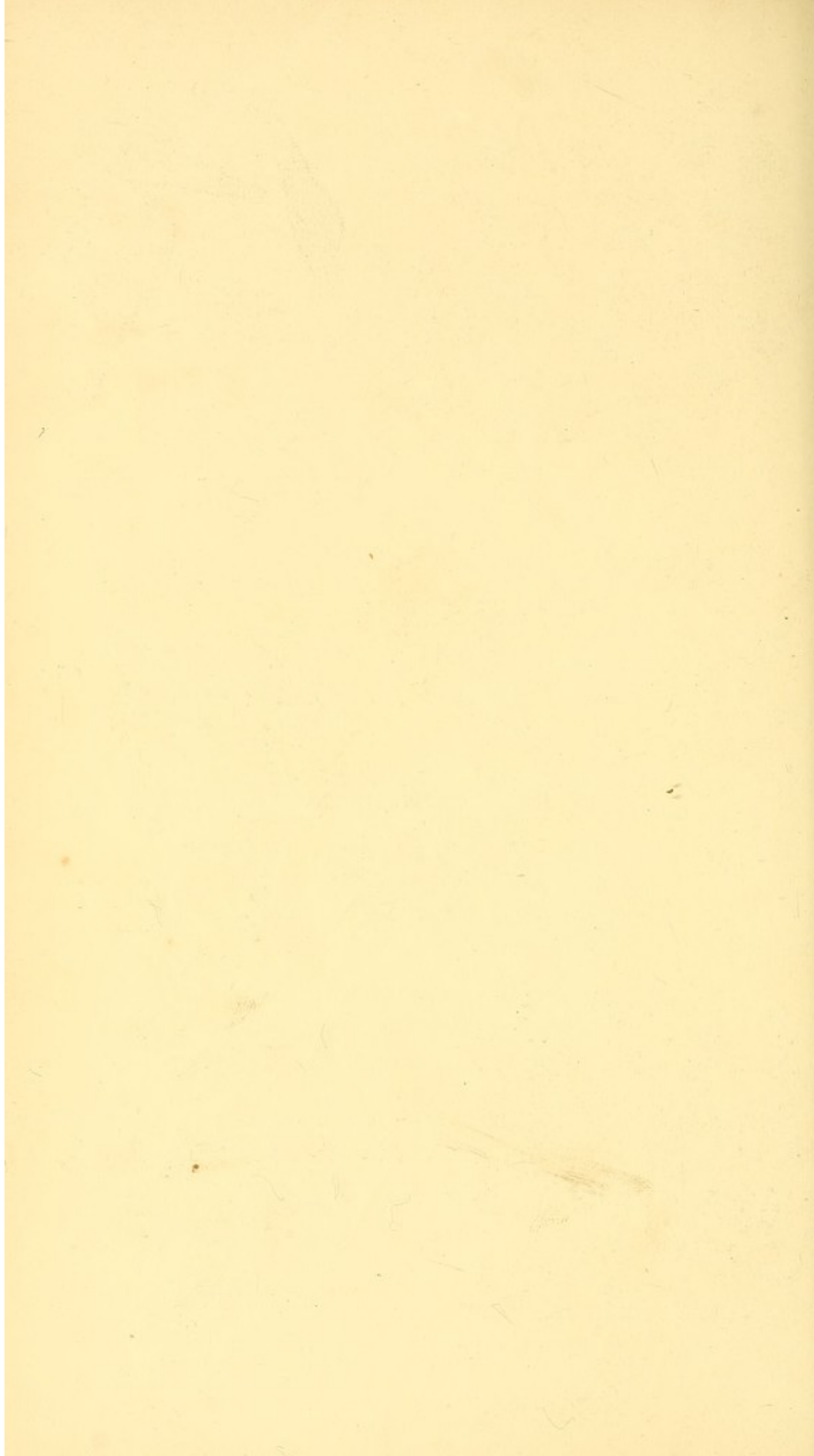
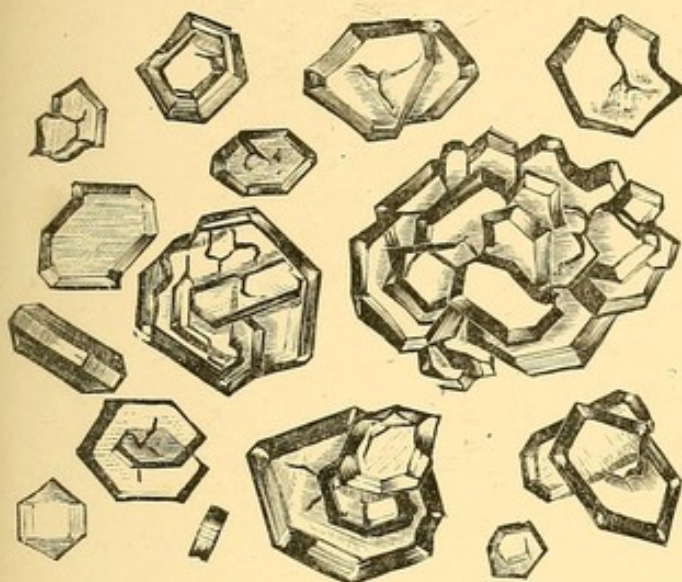




Fig. 153.



Perfectly colourless crystals of uric acid, resembling cystine. From the urine of an epileptic patient. Sent by Dr. Head. x 215.

Fig. 154.



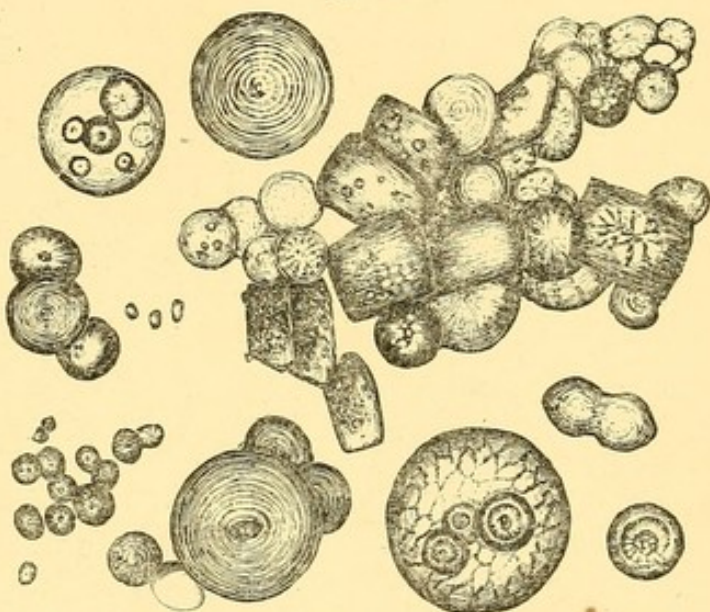
Small crystals of uric acid of a rhomboidal form; many of them resemble sections of small cylinders.

Fig. 155.



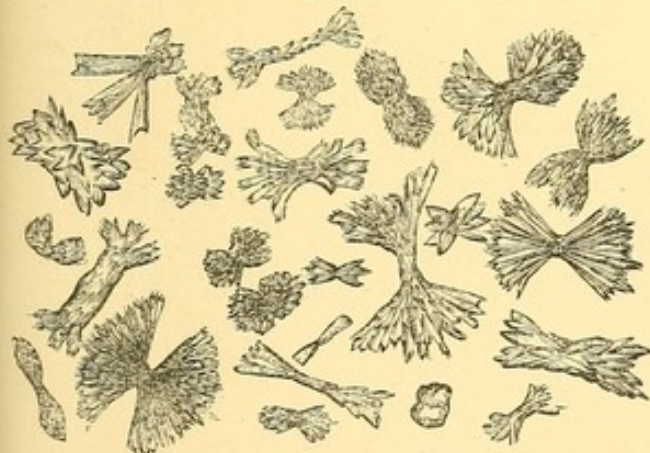
a. large spherules of urate of soda. b. film composed partly of urate of soda and partly of uric acid. c. uric acid. From the urine of a case of long-continued bilious and remittent fever. Sent by Dr. Kennion. x 42.

Fig. 156.



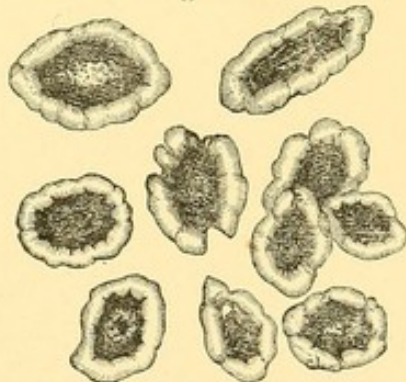
The spherules of urate of soda (Fig. 155) more highly magnified x 215.

Fig. 157.



Dumb-bell-like crystals of uric acid, obtained by adding Hydrochloric acid to urine. Sent by T. W. Roper, Esq. x 215.

Fig. 158.

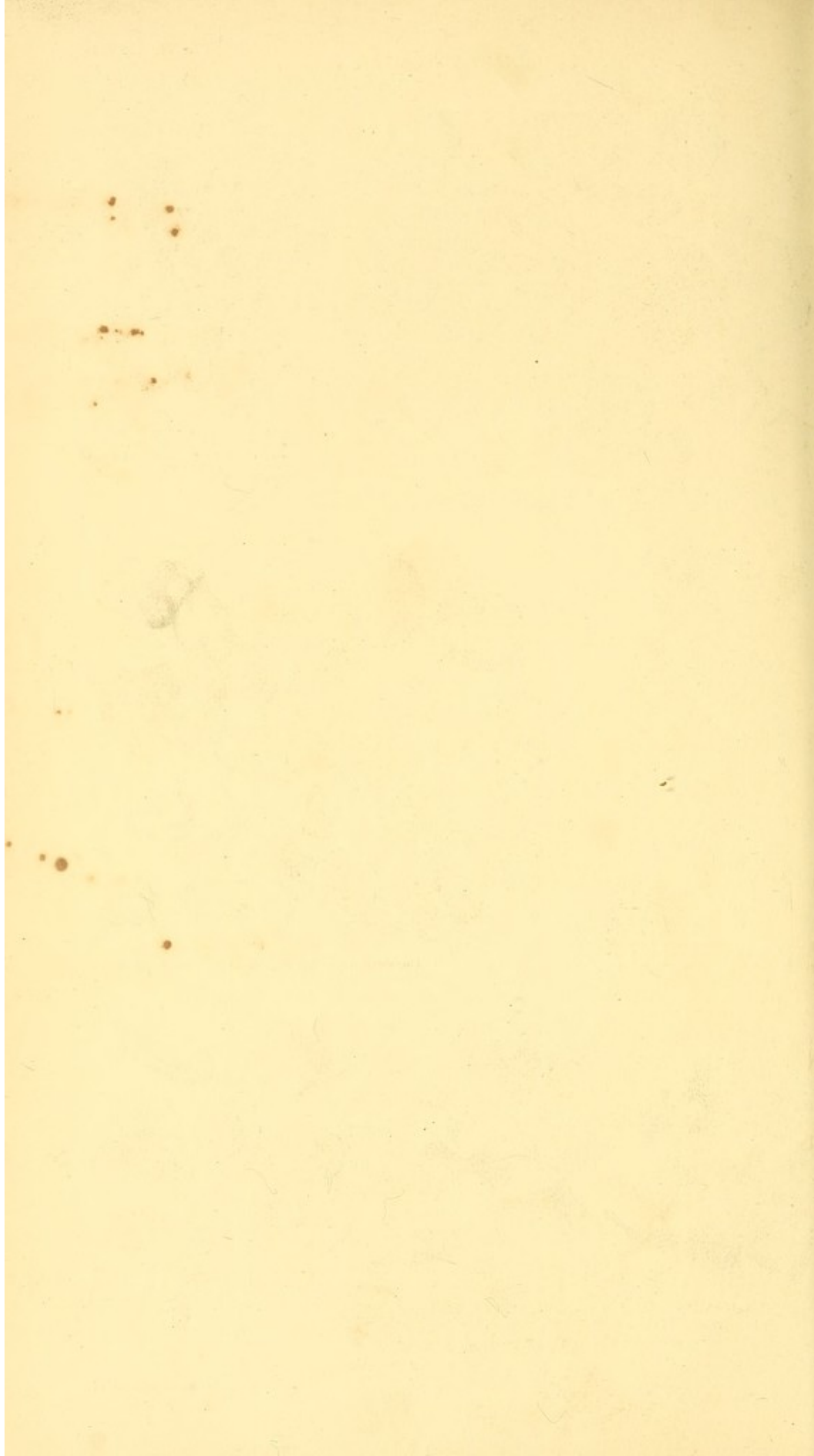


Crystals of uric acid, partly disintegrated. From a specimen which had been preserved for many years in the naphtha and creosote fluid. x 215.

$\frac{1}{1000}$  of an inch  $\times 42$ .

" "  $\times 215$ .

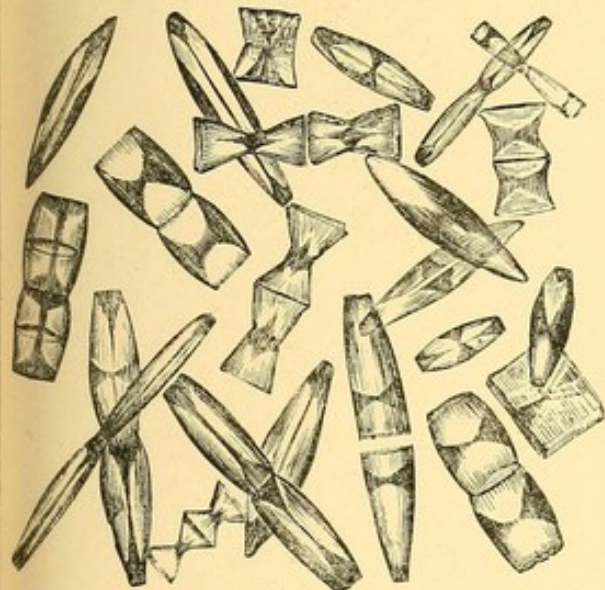
[To follow PLATE XXVII.]





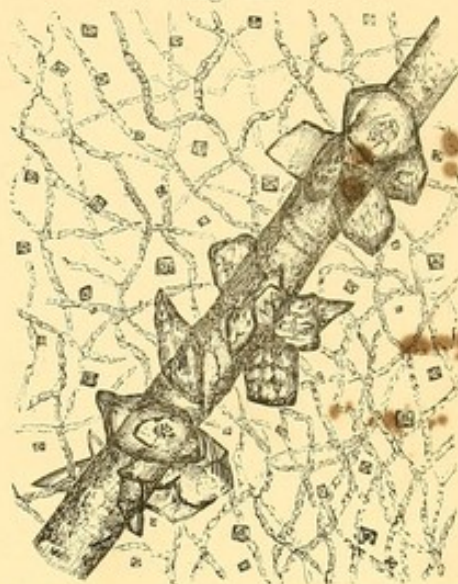
URINARY DEPOSITS.

Fig. 159.



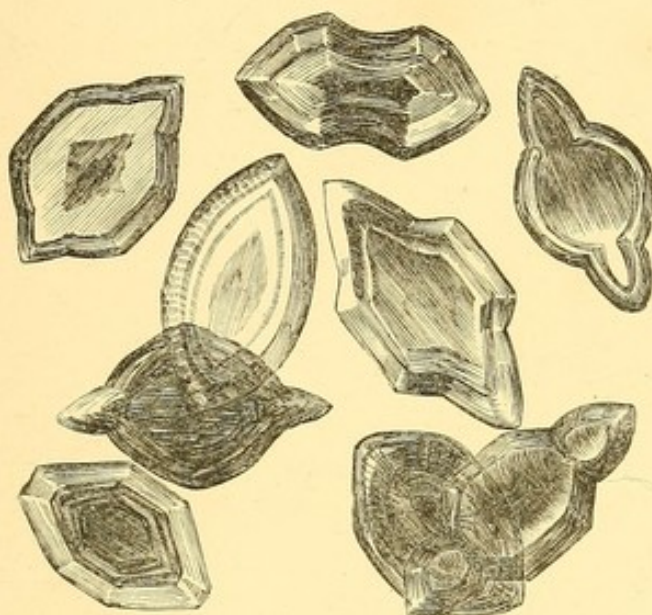
Curious crystals of uric acid. From a specimen of urine sent by Mr. Atchley.  $\times 215$ .

Fig. 160.



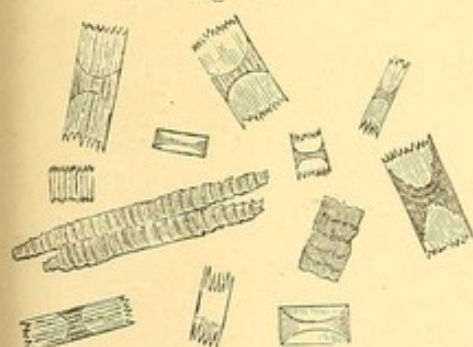
Uric acid crystallized round a hair; also octahedra of oxalate of lime, and penicillium glaucum. From the urine of a patient suffering from chronic bronchitis and emphysema.  $\times 215$ .

Fig. 161.



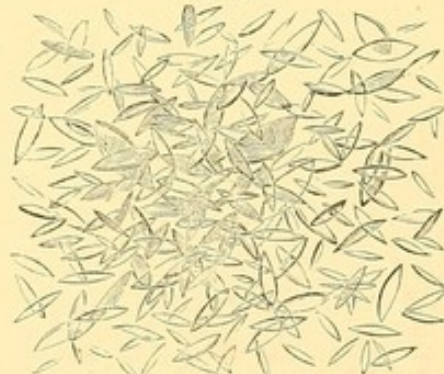
Very large and symmetrical crystals of uric acid, from urine. The form and peculiar markings of the crystals are well seen.  $\times 215$ .

Fig. 162.




Forms of uric acid produced by rapid crystallization after the addition of nitric or hydrochloric acid to urine.  $\times 215$ .

Fig. 163.



Small crystals of uric acid massed together so as to form a plate.  $\times 215$ .

p. 372.

$\frac{1}{1000}$  of an inch   $\times 215$ .

[To follow PLATE XXVIII.]

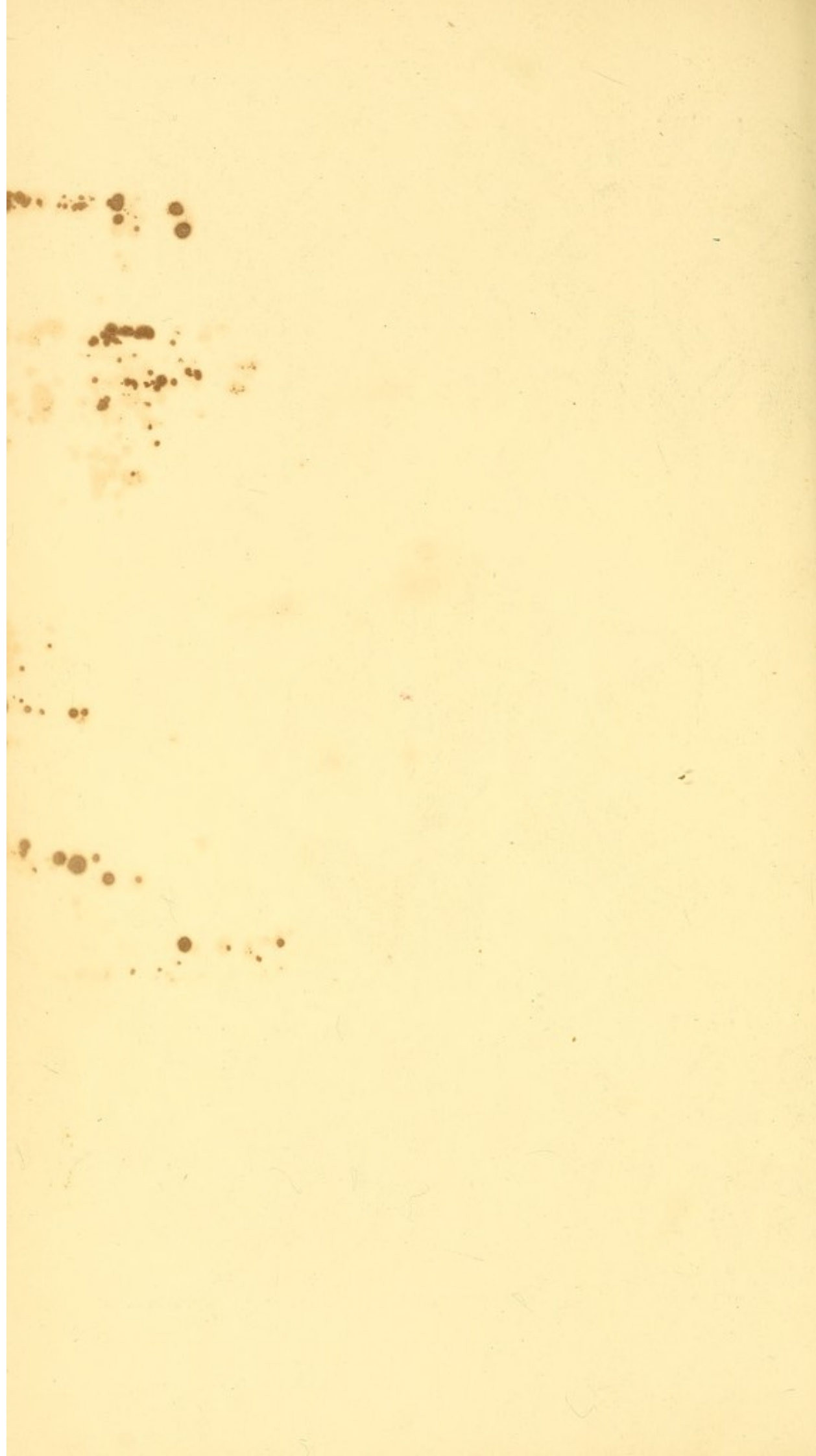
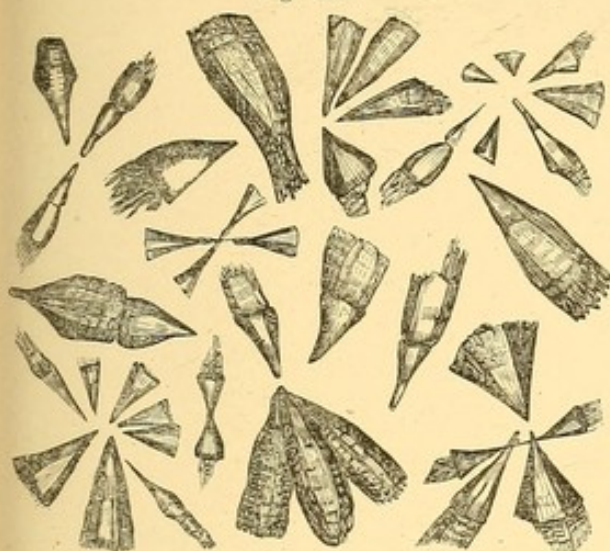


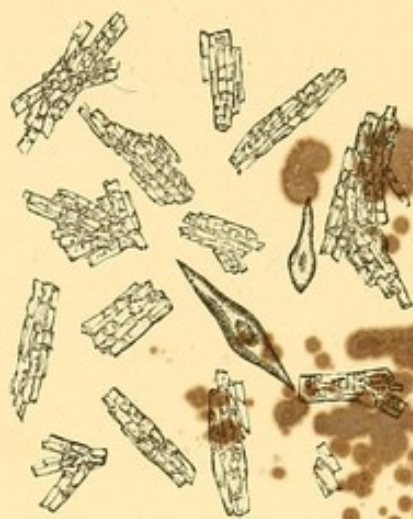


Fig. 164.



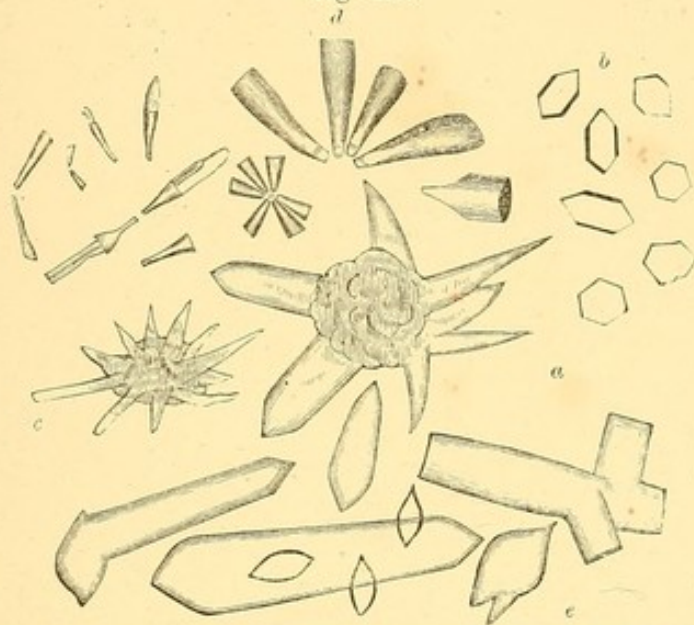
Quadrilateral pyramidal crystals of uric acid. Precipitated from urine by nitric acid.  $\times 215$ . p. 371.

Fig. 165.



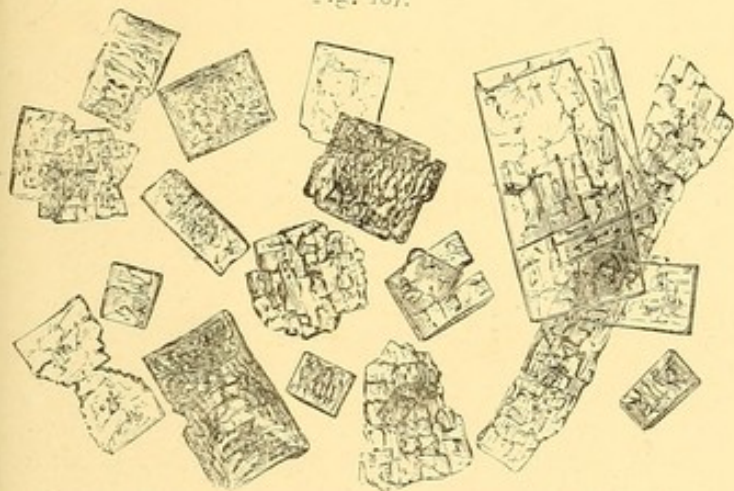
Uric acid from the urine of a case of fatty degeneration of the kidneys.  $\times 45$ .

Fig. 166.



Less common forms of uric acid crystals. *a*, crystal like cayenne-pepper grain. *b*, six-sided crystals. *c*, mass with small uric acid crystals projecting from it. *d*, small pyramidal crystals of uric acid: very uncommon. *e*, peculiar forms of uric acid.

Fig. 167.



Irregularly shaped crystalline plates, consisting of uric acid. From urine.  $\times 215$ .

Fig. 168.



Two forms of uric acid. From a specimen of urine sent by Mr. Atchley  $\times 45$ .

$\frac{1}{1666}$  of an inch —  $\times 42$ .

" " —  $\times 215$ .

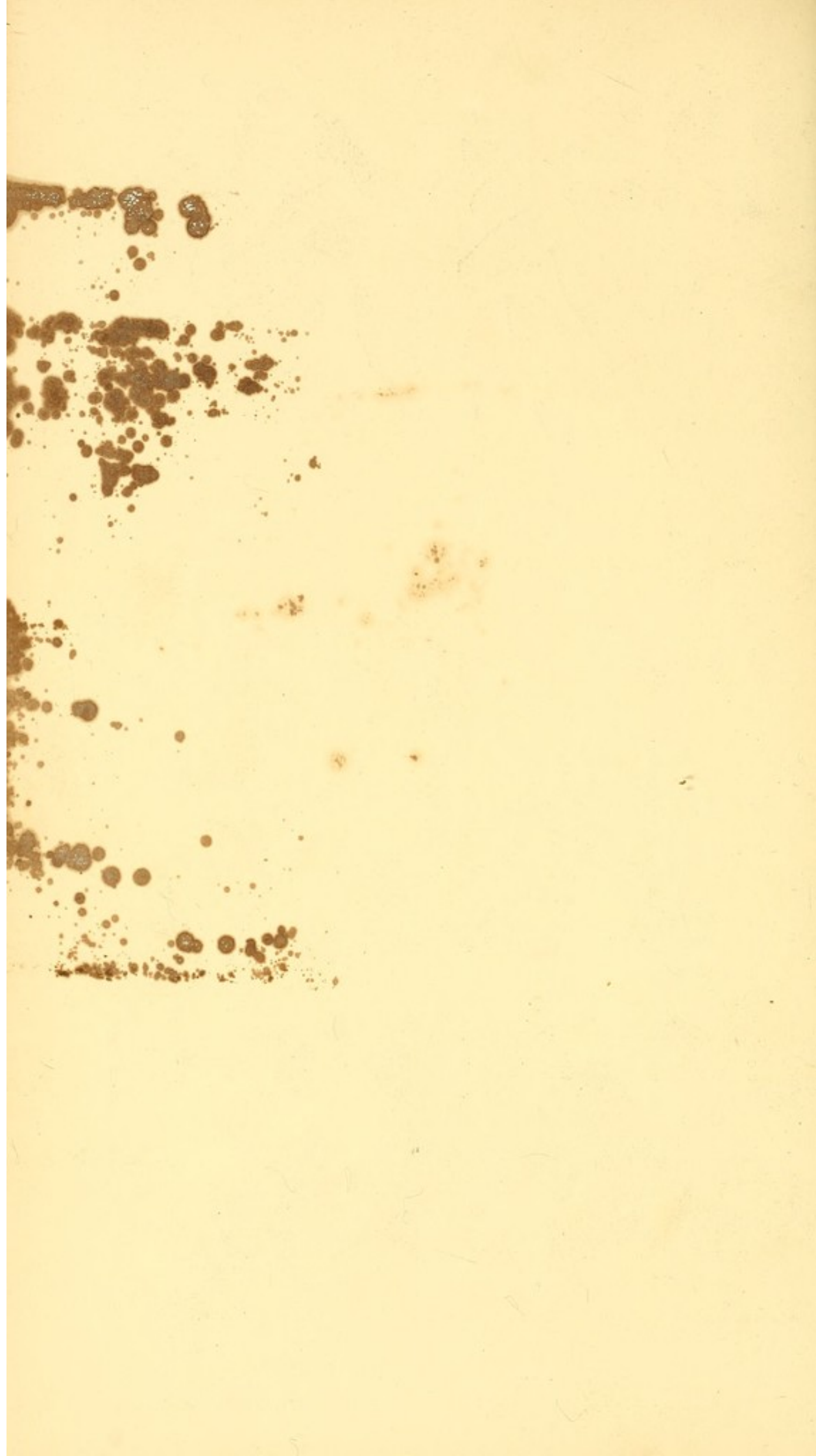
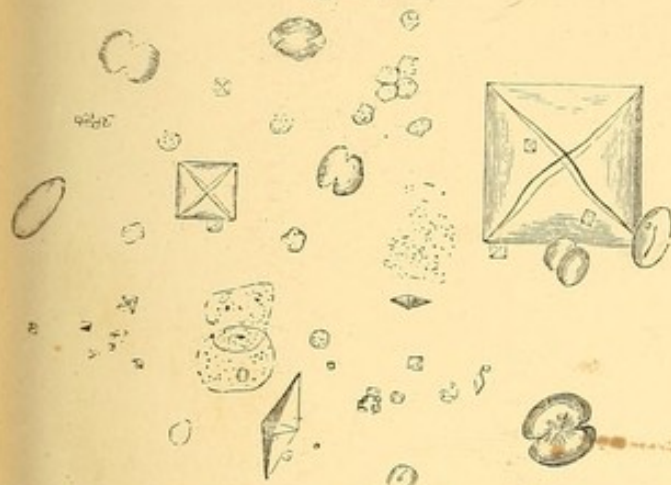




Fig. 169.



Dumb-bell and octahedral crystals of oxalate of lime. One very large octahedron is seen at the right-hand side of the figure.  $\times 215$ . p. 378.

Fig. 170.



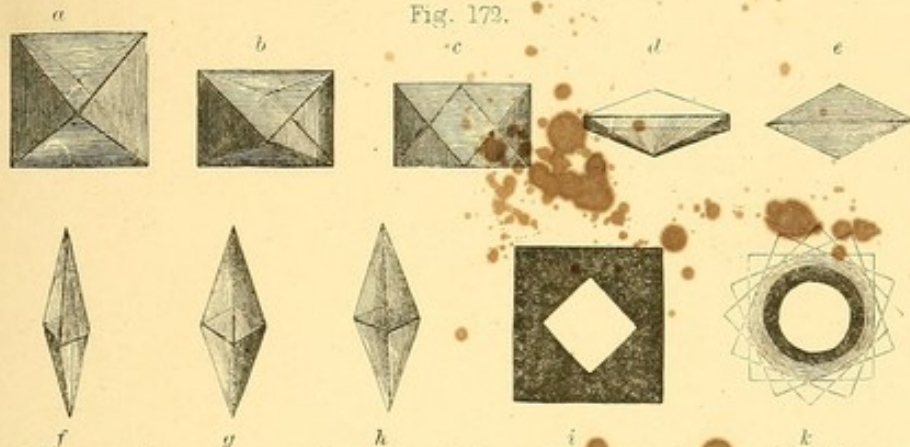
Octahedral crystals of oxalate of lime.  $\times 215$ .

Fig. 171.



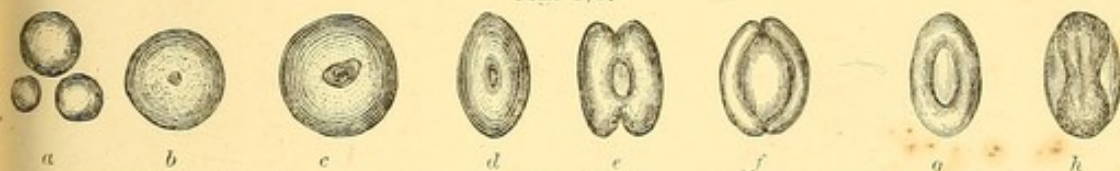
Curious prismatic crystal of oxalate of lime. p. 375.

Fig. 172.



*a, b, c, d, e*, to illustrate the appearance of the same octahedron of oxalate of lime viewed in different positions. The crystal is supposed to be seen first lying upon one of its broad surfaces, and then gradually rotated from the observer until one edge is opposite the eye. *f, g, h*, the same crystal seen sideways, one of the lateral angles being towards the eye. *i*, the appearance of an octahedron when mounted as a dry object. *k*, unusual form of compound crystal of oxalate of lime. p. 375.

Fig. 173.



Circular and oval forms. p. 377.

Dumb-bell crystals and allied forms of oxalate of lime. p. 377.

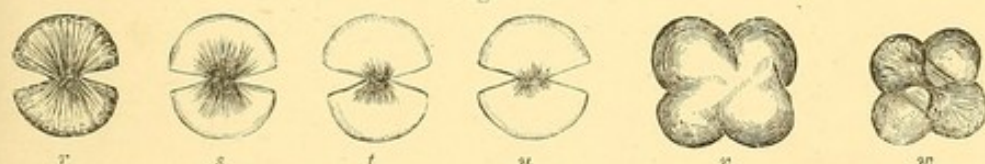
Fig. 174.



Dumb-bell crystals and allied forms of oxalate of lime.

Crystals approximating in form to the perfect dumb-bell.

Fig. 175.



Perfect dumb-bell crystals of oxalate of lime which have been subjected to the prolonged action of weak acetic acid, by which much of the salt has been dissolved out from the organic matrix, which exhibits the appearance of a cell wall. p. 378.

Masses consisting of two dumb-bell crystals joined together.

$\frac{1}{1600}$  of an inch  $\times 215$ .

[To follow PLATE XXX.]

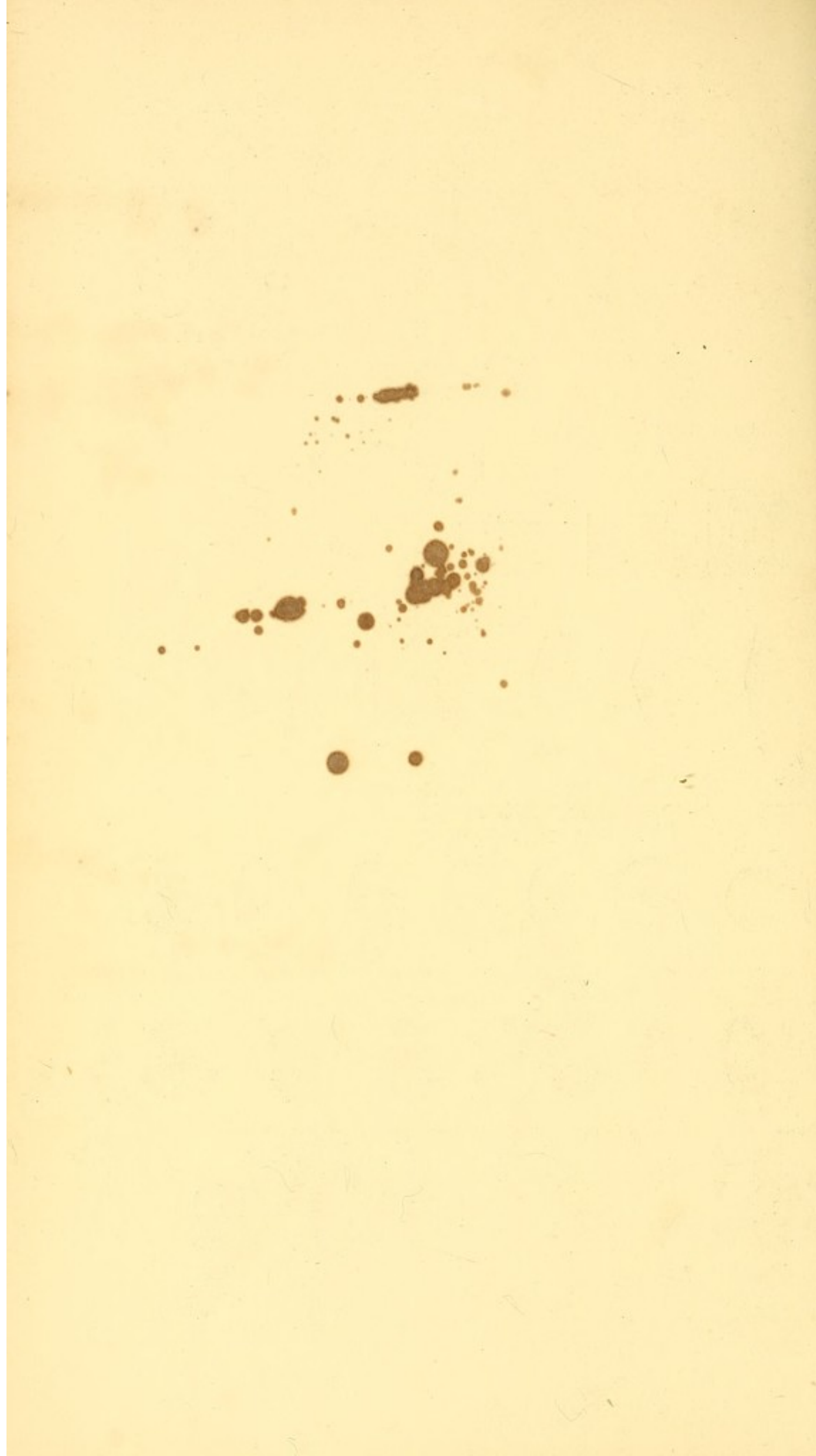
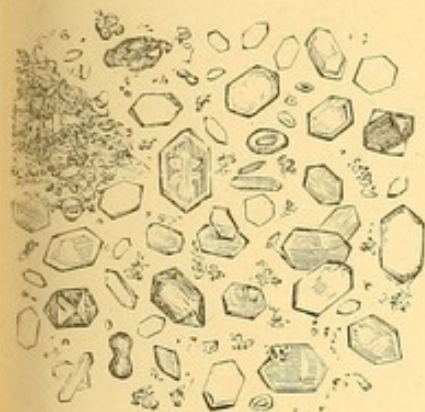


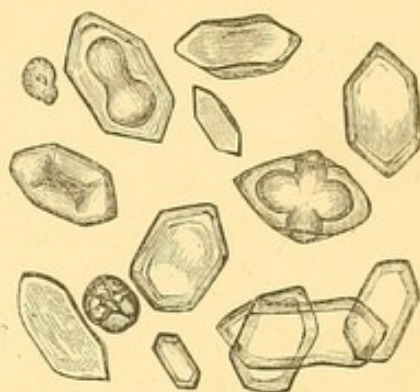


Fig. 176.



Modified forms of oxalate of lime. From the urine of a patient who was poisoned by oxalic acid. p. 332.  $\times 215$ .

Fig. 177.



Some of the crystals in Fig. 176 magnified 500. p. 332.

Fig. 178.



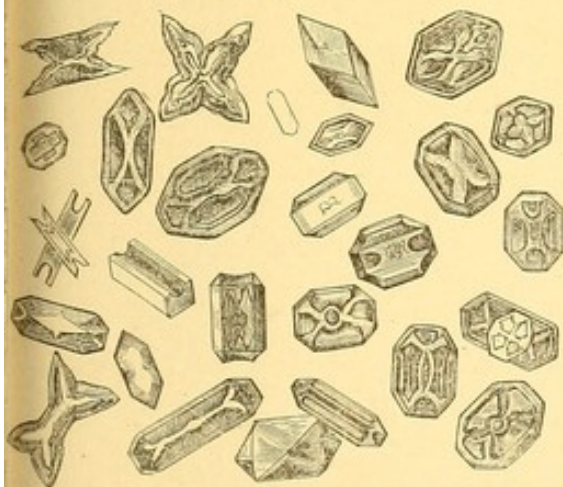
Beautiful feathery crystals of phosphates of lime and magnesia, with sections of octahedra of oxalate of lime, the angles of which are rounded. p. 330.  $\times 215$ .

Fig. 179.



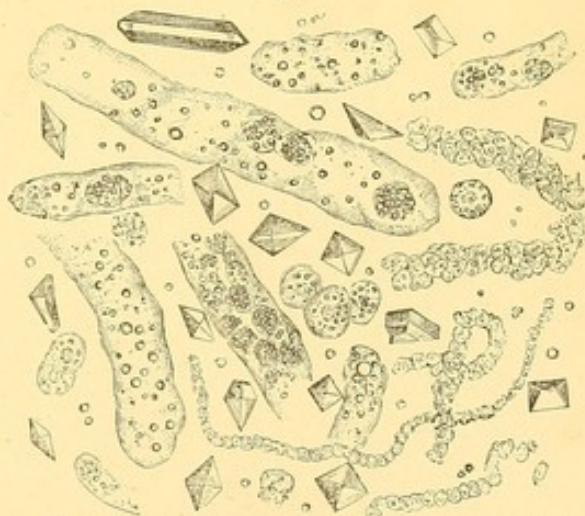
Small globules and octahedra of oxalate of lime.

Fig. 179\*.



Beautiful crystals of triple phosphate, exhibiting peculiar markings resulting from partial solution.  $\times 215$ .

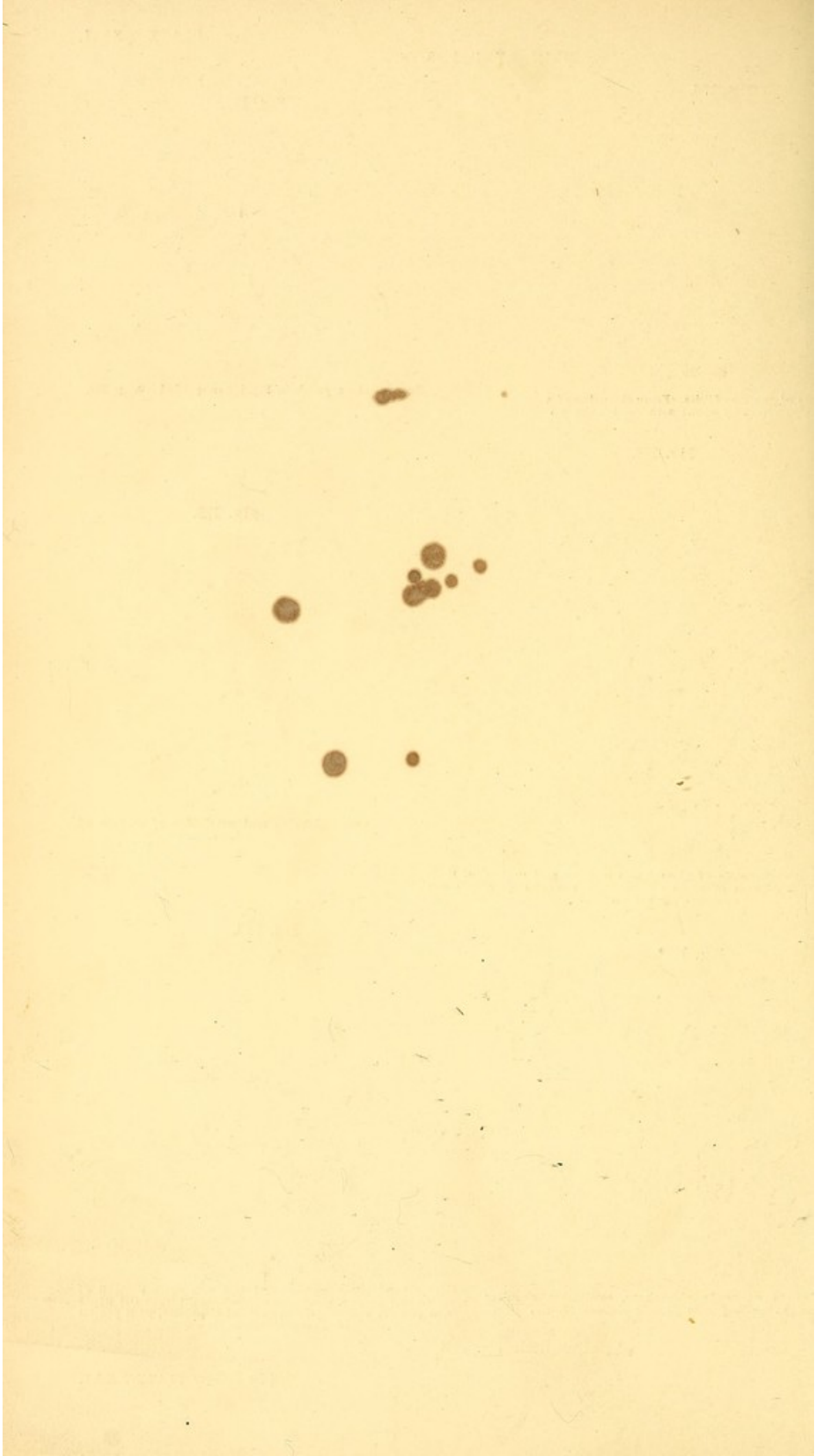
Fig. 180.



Crystals of triple phosphate; the prismatic portion of which is defective, and casts containing oil from the urine of a patient suffering from chronic nephritis, with partial fatty degeneration. p. 330.

$\frac{1}{1000}$  of an inch  $\times 215$ .

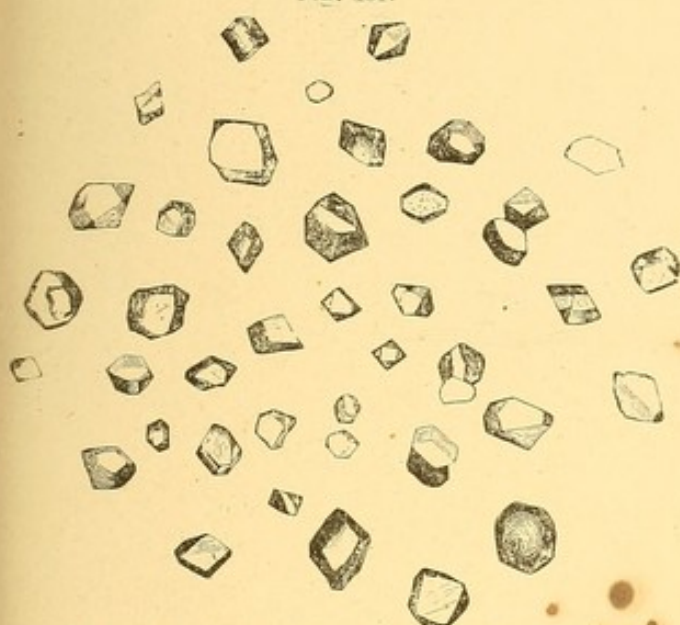
[To follow PLATE XXXI.]





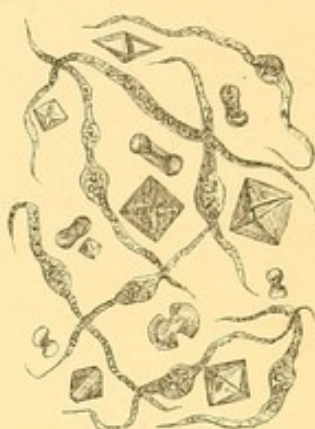
URINARY DEPOSITS.

Fig. 181.



Modified form of triple phosphate or phosphate of lime and triple phosphate.  $\times 150$ . Sent by Mr. Richardson, of Dublin.

Fig. 181\*.



Octahedra and dumb-bells of oxalate of lime, and curious forms of fungi found in the urine of a young man passing much oxalate of lime.  $\times 215$ .

Fig. 184.



Dumb-bells subjected to the prolonged action of acetic acid, showing the crystalline material nearly dissolved away. p. 377.

Fig. 182.



Collection of dumb-bells firmly adherent to each other. Such a mass might very easily become converted into a small calculus by deposition of material of a similar composition in the intervals. p. 379.  $\times 215$ .

Fig. 183.



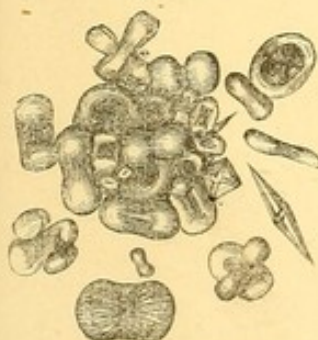
Minute crystals of oxalate of lime, with sporules of fungi resembling blood corpuscles.  $\times 215$ .

Fig. 185.



Perfect dumb-bell crystals from the urine of a child, two years old, suffering from jaundice. p. 379.  $\times 215$ .

Fig. 186.




Dumb-bell crystals of oxalate of lime aggregated together, and forming a minute calculus. p. 379.  $\times 215$ .

Fig. 187.



Spherical, oval, and dumb-bell crystals of oxalate of lime, with larger spherules, which may be regarded as microscopic calculi.  $\times 215$ .

$\frac{1}{1000}$  of an inch   $\times 215$ .

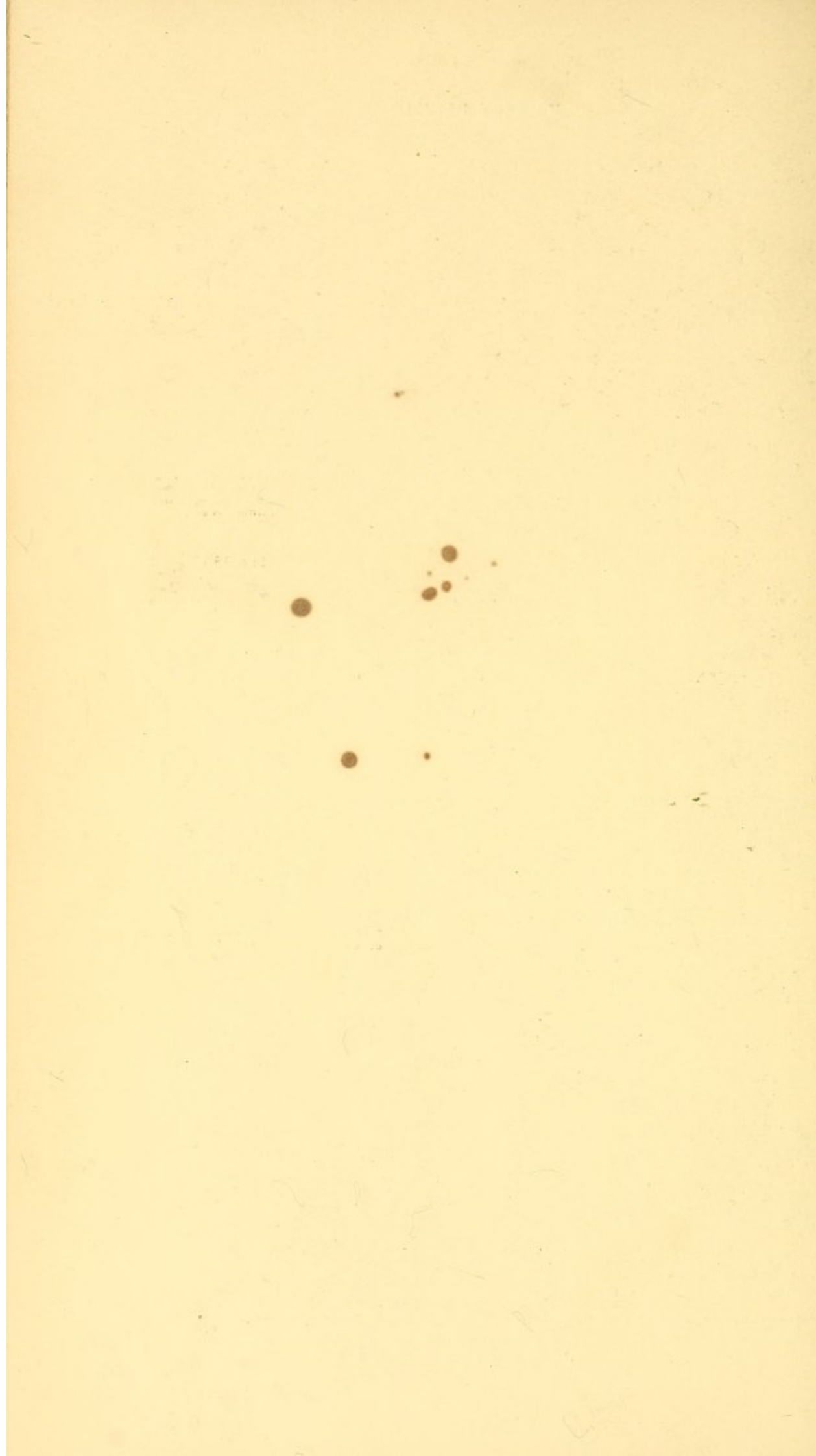
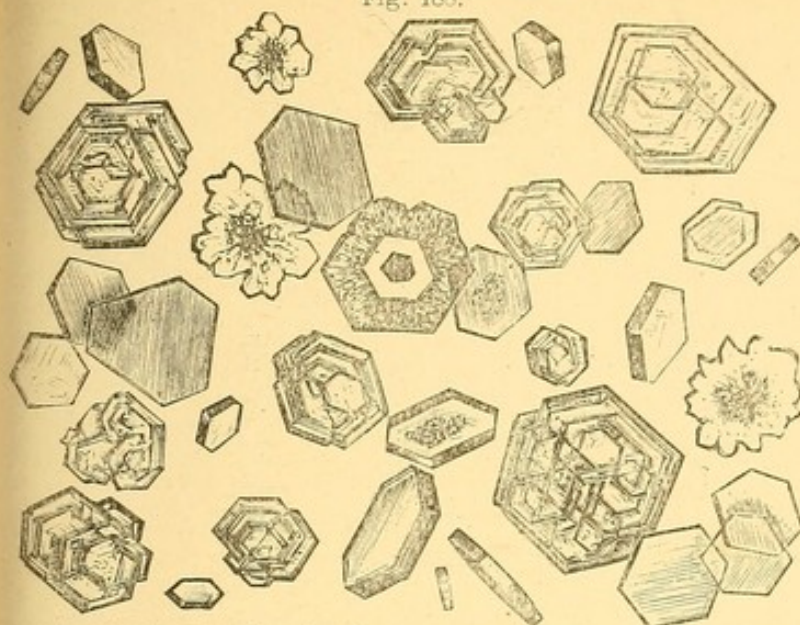




Fig. 188.



Crystals of cystine from the urine of an insane patient. Numerous crystals of aric acid were also present in the deposit. p. 353. x 215.

Fig. 189.



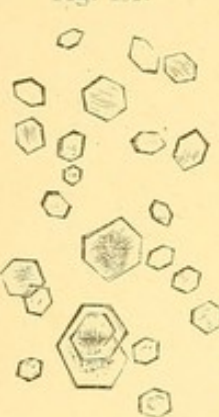
Crystals of cystine. p. 353. x 215.

Fig. 190.



Clusters of crystals of cystine, formed by evaporating a solution of the crystals represented in Fig. 188 in ammonia. x 215.

Fig. 191.



Six-sided crystals of cystine, formed from a solution of the crystals in ammonia. x 215.

Fig. 192.



Irregularly formed crystals of cystine, formed by allowing the ammoniacal solution (Figs. 190, 191) to evaporate to dryness. x 215.

Fig. 193.



Crystals of carbonate of lime, seen by reflected light. p. 357.

Fig. 196.



Crystals of carbonate of lime, in Canada balsam: seen by transmitted light. p. 357.

Fig. 194.



Blood corpuscles. a, b, c, taken from the living body; d, e, f, from the urine. d, corpuscles smaller than natural; at e their circumference is serrate and ragged; and at f a somewhat similar appearance is shown. p. 393.

Fig. 197.



Tubercle corpuscles from a tubercle in the lung. p. 394. x 215.

Fig. 198.



Cells found in the urine of a case of renal dropsy. p. 395.

Fig. 195.



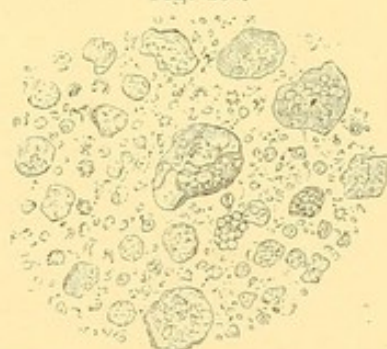
Large veins filled with granular matter; chronic bronchitis. p. 395.

Fig. 199.



Epithelium from the uriniferous tubes and pelvis of the kidney, with granules of colouring matter embedded in them. p. 390. x 215.

Fig. 200.



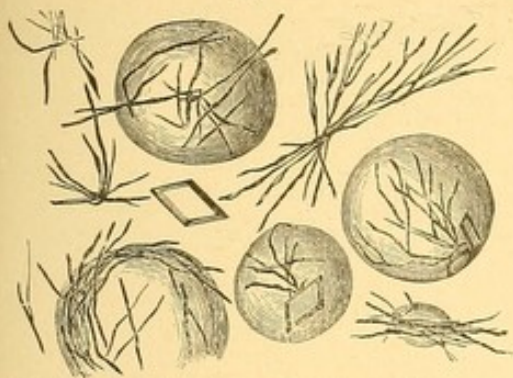
Altered blood from a menstrual secretion. p. 385.

[To face page 392]



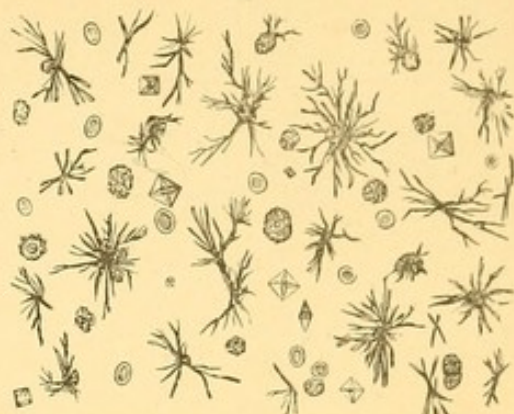


Fig. 201.



Rhomboidal and feathery crystals of haematoidin, from a softened clot. Human. p. 389. x 215.

Fig. 202.



Feathery crystals of haematoidin, found in the urine a fortnight after slight rupture (?) of one kidney. Human subject p. 389. x 215.

Fig. 203.



Cancer cells from the urine in a very bad case of cancer of the uterus. The deposit was very abundant. p. 394.

Fig. 204.



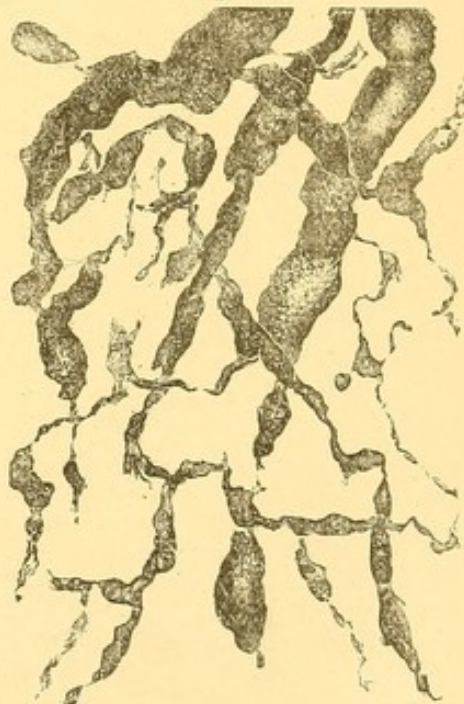
Cancer cells found in urine. From the bladder. p. 394.

Fig. 205.




Cells from the urine of a case of acute rheumatism. *a*, in the natural state. *b*, treated with acetic acid. *c*, resembling pus. *d*, the same treated with acetic acid. The small circular bodies are blood corpuscles. p. 395.

Fig. 206.



Blood clots in the form of irregularly shaped cords. From the vagina, found in urine. p. 399. x 215.

$\frac{1}{1000}$  of an inch  x 215.

All these figures x 215.

[To face page 391]

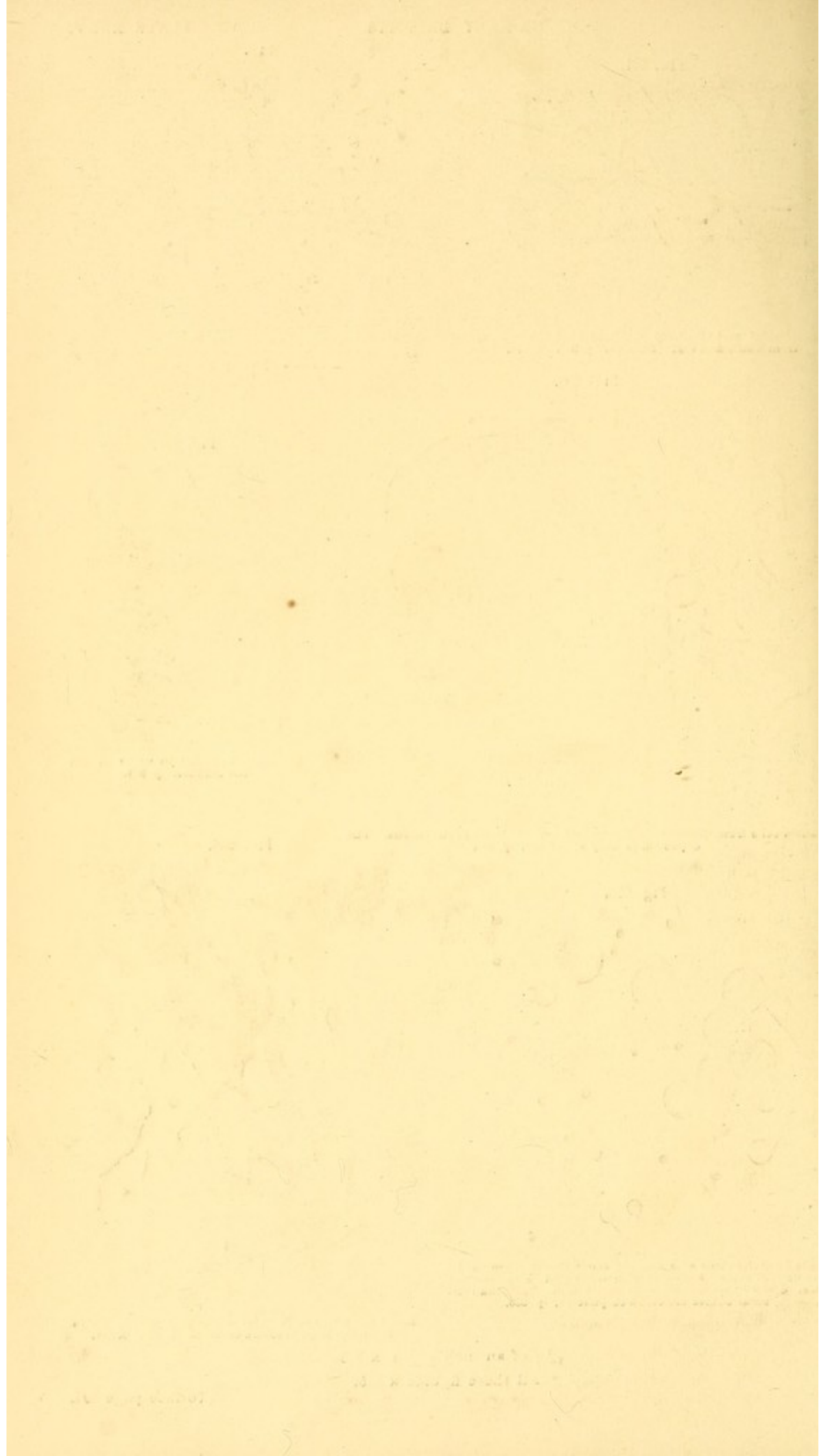
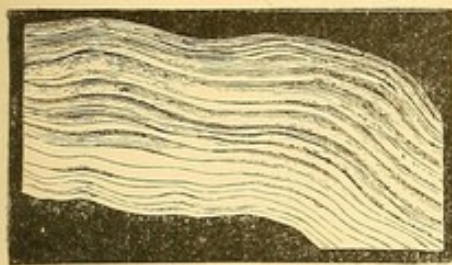


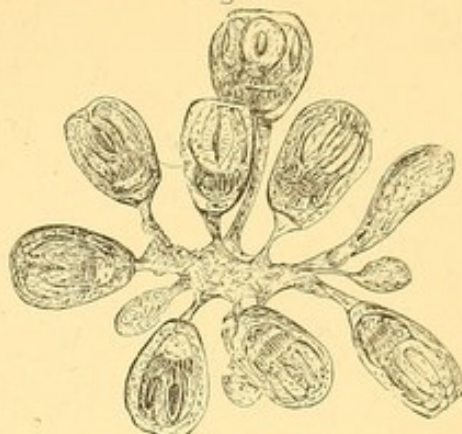


Fig. 1.



Layers of which the wall of an hydatid cyst is composed. p. 397. x 215.

Fig. 2.



Echinococci from hydatid. Liver of ox. p. 393. x 40.

Fig. 3.



Echinococci. p. 396. x 42.

Fig. 4.



Free hooklets from echinococcus. p. 399. x 215.

Fig. 5.



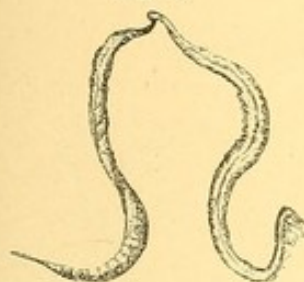
Hooklet of echinococcus. p. 399. x 100.

Fig. 6.



Taenia echinococcus. p. 398. x 15.

Fig. 7.



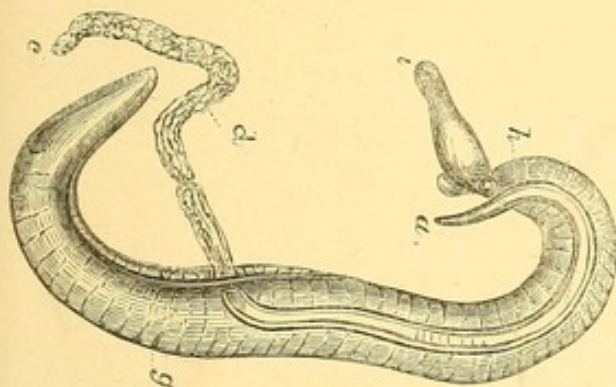
Diplosoma crenata; one-half the real size. After Dr. Farre. p. 399.

Fig. 8.



Ova of bilharzia hæmatobia in urinary deposit. Drawn from a preparation of Dr. Harley's. p. 401. x 15.

Fig. 11.



Bilharzia hæmatobia. a, c, d, the female lodged in the gynæcophoric canal of the male. h, i, g. After Bilharz.

Fig. 9.



Ovum of bilharzia hæmatobia, from a specimen of Dr. John Harley's. p. 401. x 215.

Fig. 10.



Ova of bilharzia hæmatobia, from urine. Drawn from Dr. Harley's preparations. p. 401. x 130.

1/1000 of an inch [ ] x 130.

" " [ ] x 215.

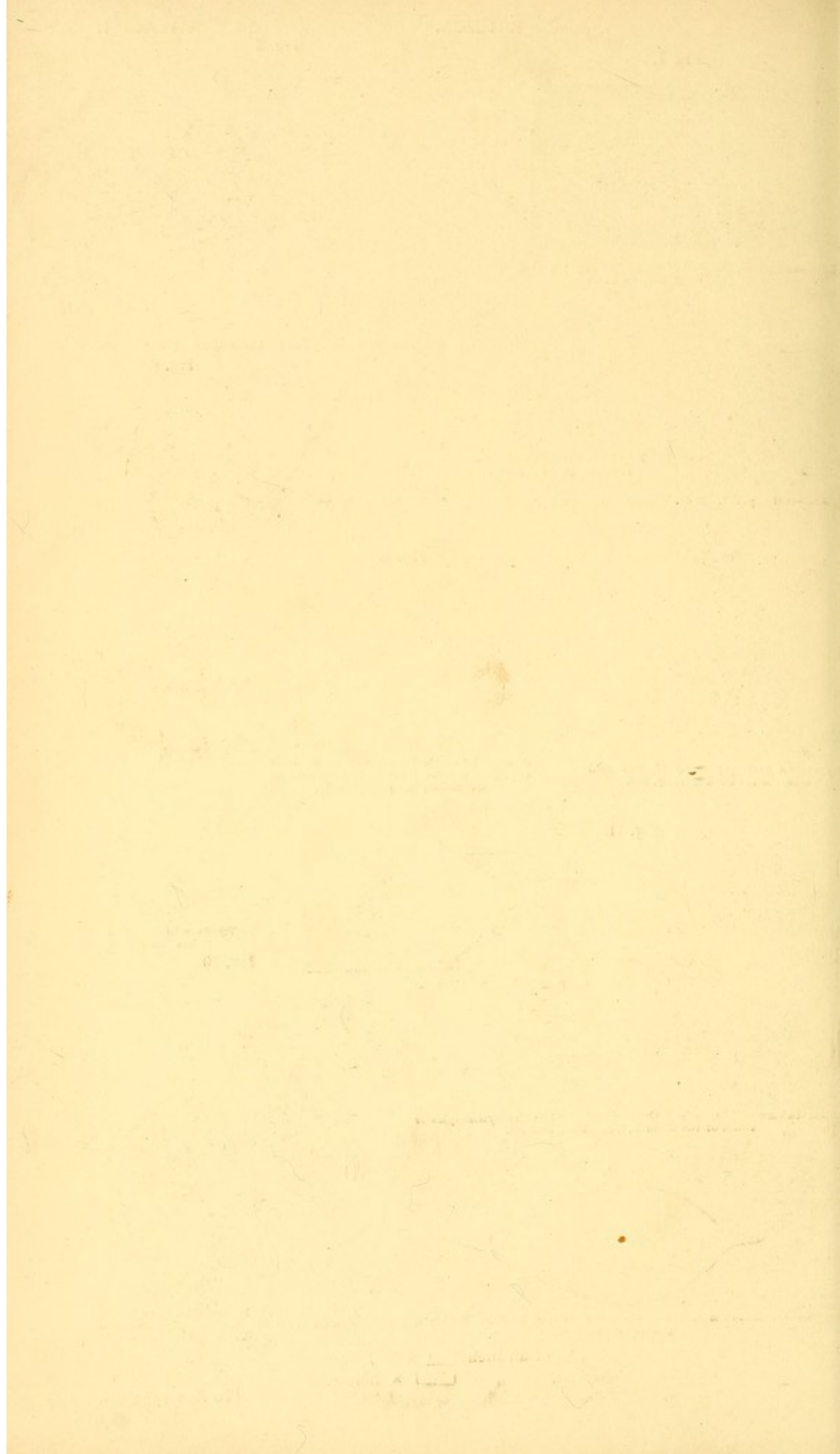




Fig. 1.



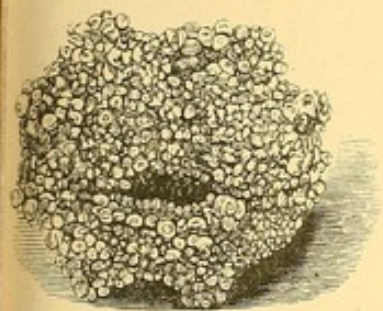
Large uric acid calculus, consisting of concentric layers of uric acid, deposited upon a smaller calculus composed of oxalate of lime. p. 407.

Fig. 2.



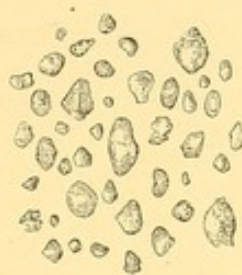
A beautiful example of oxalate of lime calculus, the surface of which is of a pale brown colour, and the tubercles small and delicate. p. 411.

Fig. 3.



Mulberry calculus which was of a rich plum colour. p. 411.

Fig. 4.



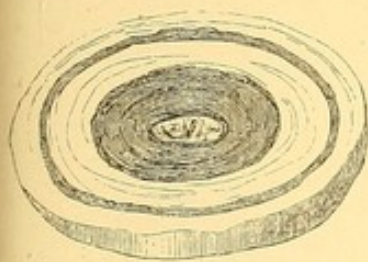
Small prostatic calculi. p. 413.

Fig. 5.



Large mulberry calculus, two-thirds the real size. p. 411.

Fig. 6.



Phosphatic calculus. The composition of the central portion is different to that of the body of the nucleus. p. 413.

Fig. 7.



Blood calculus from one of the infundibula of the kidney. p. 409.

Fig. 9.



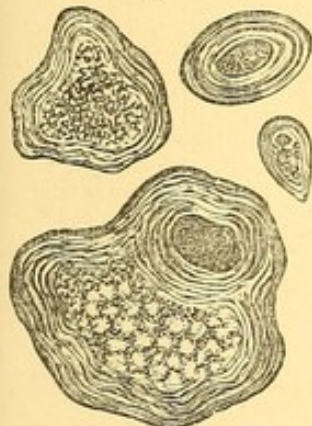
Phosphatic calculus. The nucleus being composed of a small uric acid calculus. p. 413.

Fig. 8.



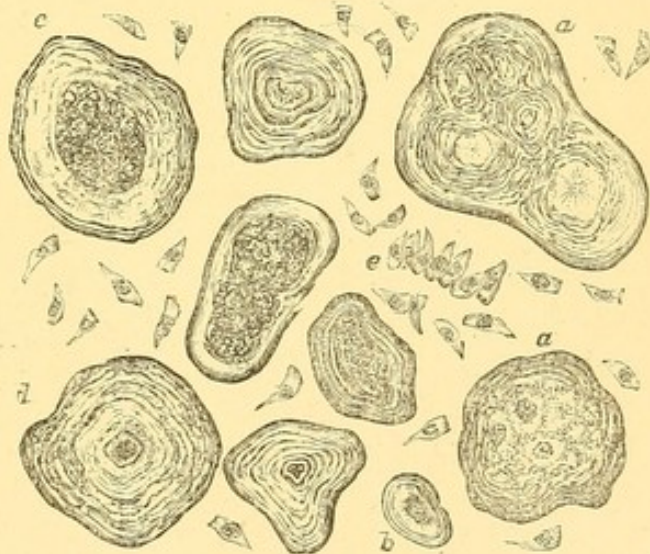
One large and two small black blood calculi, found in the pelvis of the kidney. p. 409.

Fig. 10.



Small phosphatic calculi, from the kidney. The nuclei are composed of a soft granular material, probably consisting of disintegrated epithelium. p. 413. x 130.

Fig. 11.



Very small calculi, from the follicles of the prostate gland of a man, aged 40, who died of pneumonia of three weeks' duration. The structure of the bladder and prostate seemed perfectly healthy. a. calculi composed of a number of smaller ones; b. very small calculus containing a single granular cell in the interior; c. calculi composed of a collection of cells around which the hard material has been deposited; d. calculus in which the nucleus seems to be crystalline; e. epithelium from the ducts of the prostate. p. 417. x 215.

Scale of an inch [ ] x 215.

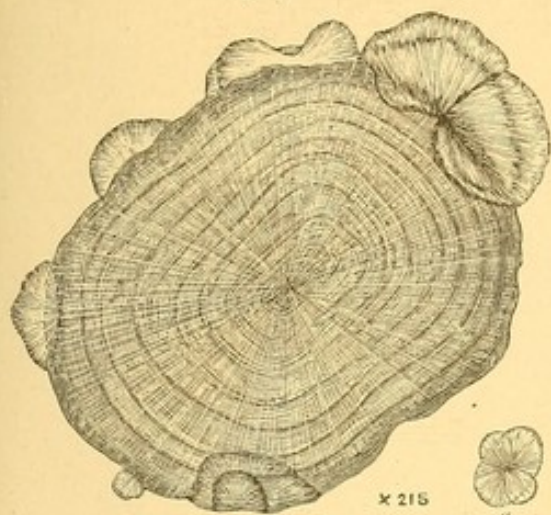
[To face page 416.]





## URINARY CALCULI.

Fig. 12.



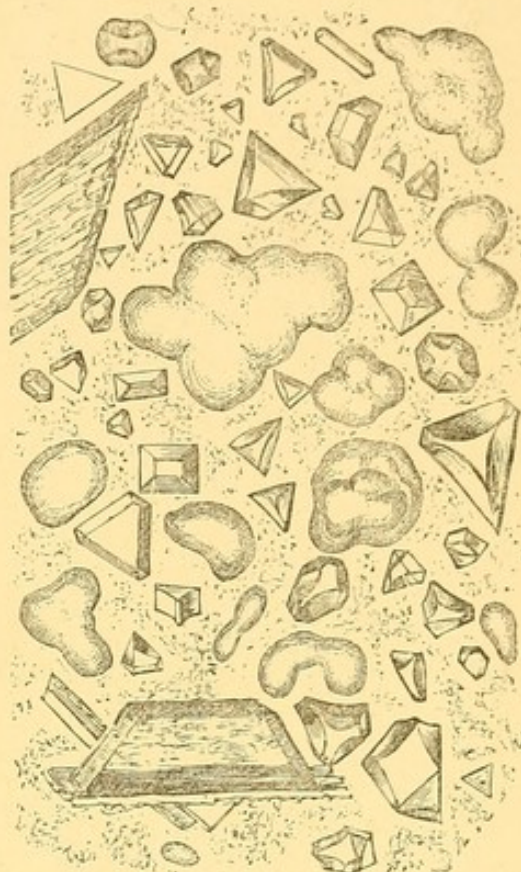
Small compound oxalate of lime calculus, found in the urine of a young man who was passing numerous dumb-bells of oxalate of lime and crystals of uric acid. Around the surface numerous large dumb-bells of oxalate of lime are seen partly incorporated with the mass. pp. 410, 420.  $\times 215$ .

Fig. 13.



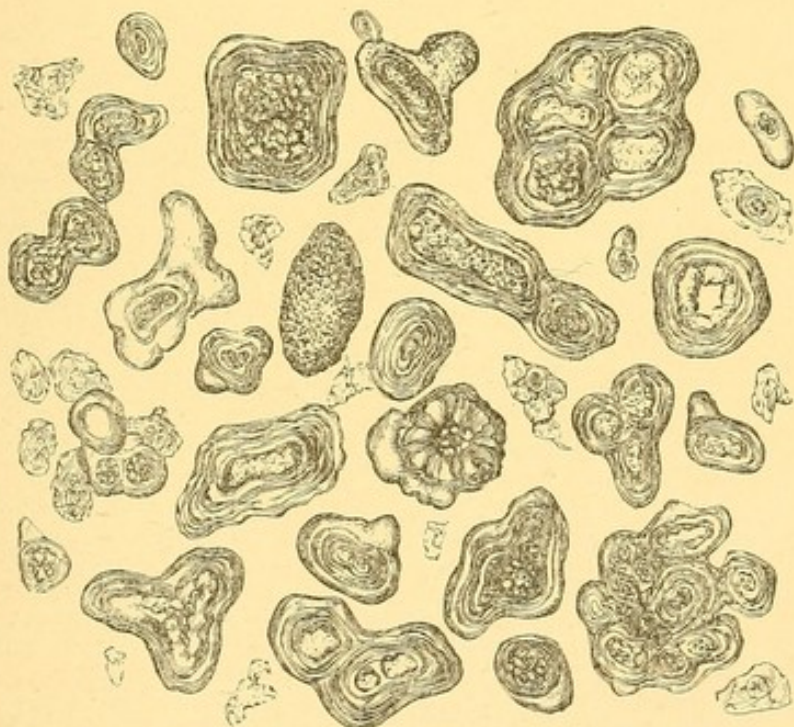
Compound oxalate of lime calculus, from the same case as that shown in Fig. 12. pp. 410, 420.  $\times 130$ .

Fig. 14.




Urinary deposit, consisting of crystals of triple phosphate and numerous smooth and irregularly shaped microscopic oxalate of lime calculi. From a patient suffering from symptoms of renal calculus. Sent by Dr. Cotton. p. 420.  $\times 215$ .

Fig. 15.



The same calculi as shown in Fig. 14, after being treated with acetic acid, dried and mounted in Canada balsam. The nuclei and concentric layers of each individual calculus have been rendered beautifully distinct. p. 420.  $\times 215$ .

$\frac{1}{1000}$  of an inch   $\times 215$ .

[To face page 420.]

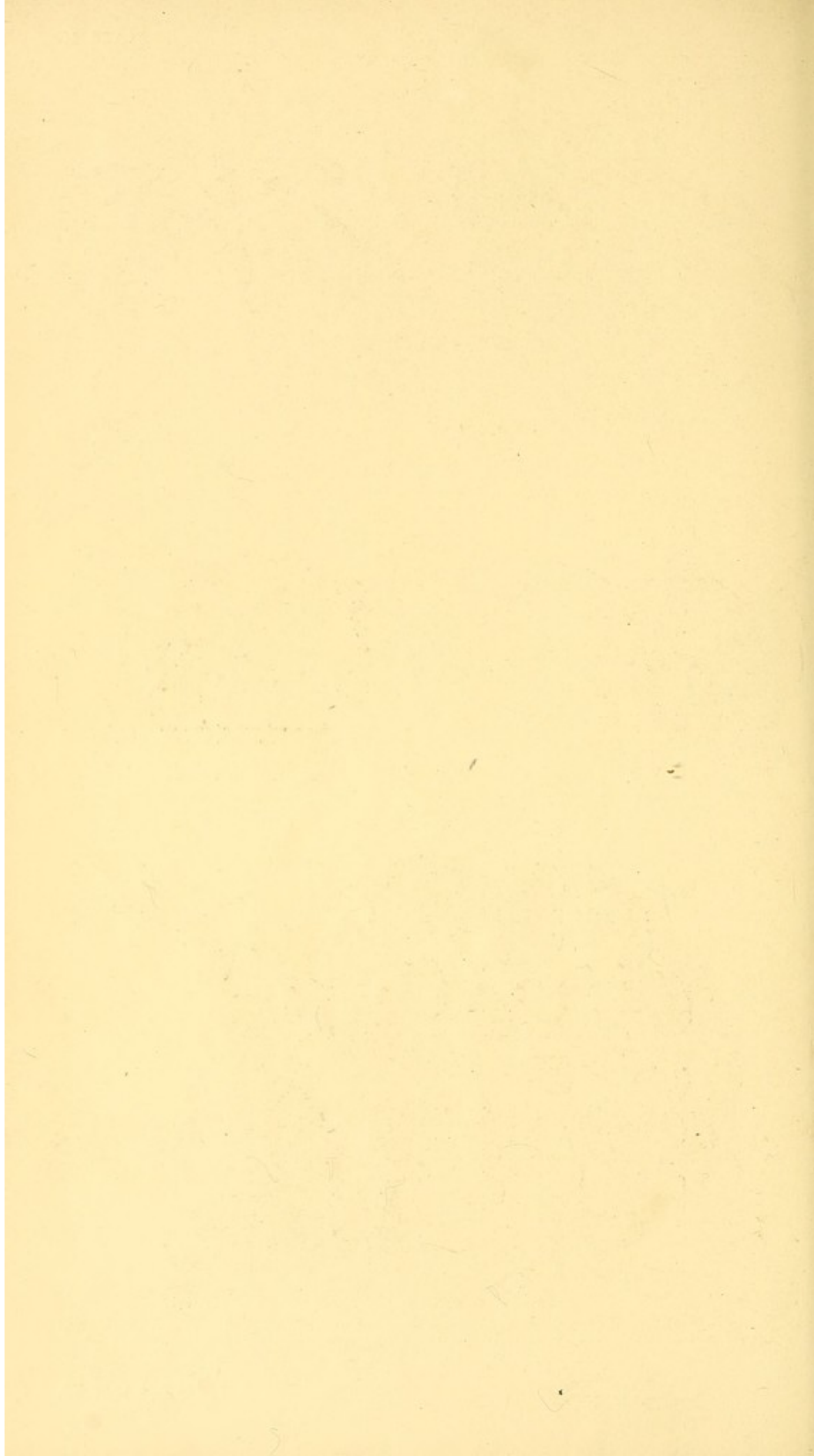
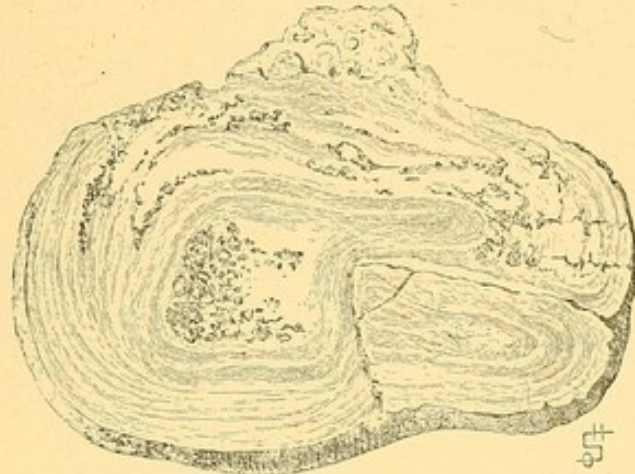


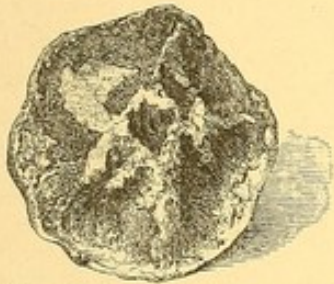


Fig. 16.



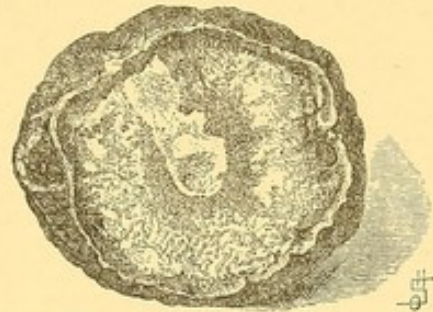
A calculus in which spontaneous fracture has occurred in the internal layers only, the separated portion appears to have become again cemented, and encrusted with a subsequent deposit. After Mr. Southam. p. 434.

Fig. 17.



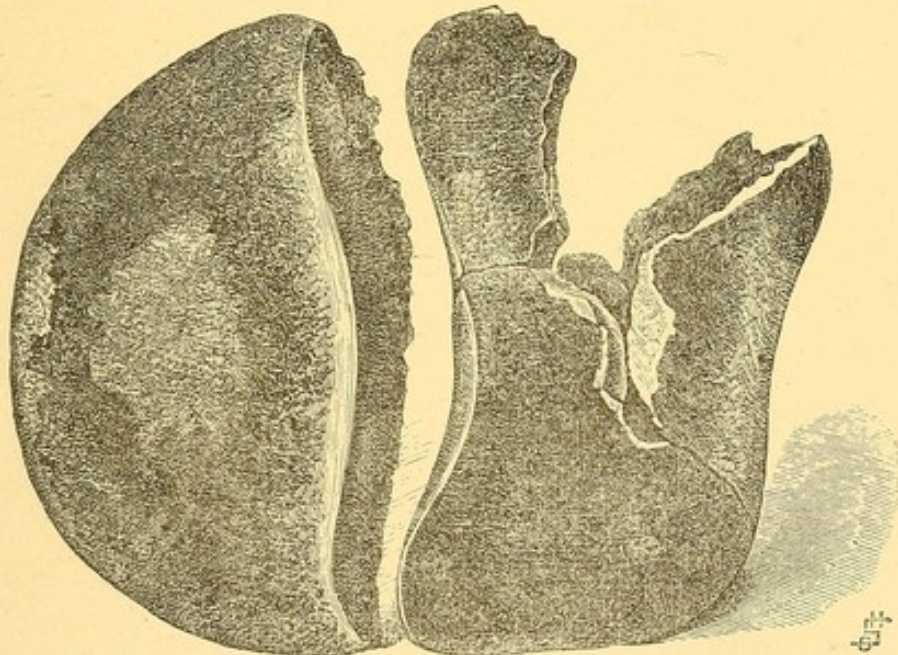
Urethral portion of a calculus, removed by Mr. Southam, from a boy, aged 15. p. 434.

Fig. 18.



Larger fragment of the same stone, which was in the bladder. The separation was not of recent date. p. 434.

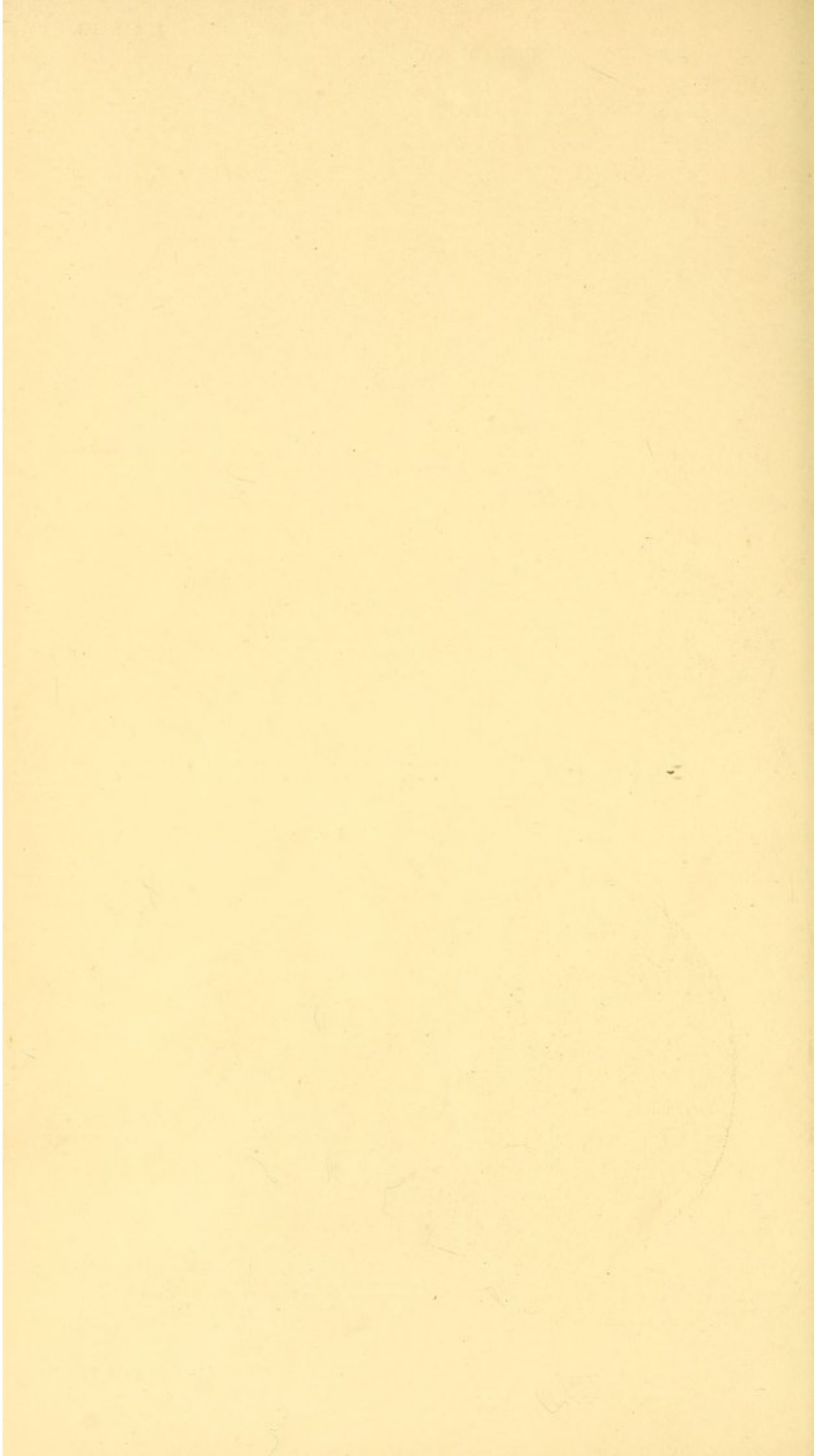
Fig. 19.



Large soft wedge shaped stone, having one rounded surface and two facets, removed by lithotomy, by Mr. Luke. After Mr. Southam. p. 434.

Fig. 20.

Another stone from the same patient, with corresponding facets to those upon the stone represented in Fig. 19.





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TO

## MESSRS. CHURCHILL & SONS' CATALOGUE.

### ANATOMY.

	PAGE
Anatomical Remembrancer ..	7
Flower on Nerves .. ..	16
Heale's Anatomy of the Lungs ..	19
Heath's Practical Anatomy ..	20
Holden's Human Osteology ..	20
Do. on Dissections .. ..	20
Jones' and Sieveking's Patho- logical Anatomy .. ..	22
MacDougal—Hirschfeld on the Nervous System .. ..	v
MacLise's Surgical Anatomy ..	25
St. Bartholomew's Hospital Catalogue .. ..	31
Sibson's Medical Anatomy ..	33
Waters' Anatomy of Lung ..	37
Wheeler's Anatomy for Artists ..	38
Wilson's Anatomy .. ..	39

### CHEMISTRY.

Bernays' Notes for Students ..	9
Bloxam's Chemistry .. ..	10
Do. Laboratory Teaching ..	10
Bowman's Practical Chemistry ..	10
Do. Medical do. .. ..	10
Fownes' Manual of Chemistry ..	16
Do. Actonian Prize .. ..	16
Do. Qualitative Analysis ..	16
Fresenius' Chemical Analysis ..	17
Galloway's First Step .. ..	17
Do. Second Step .. ..	17
Do. Analysis .. ..	17
Do. Tables .. ..	17
Griffiths' Four Seasons .. ..	18
Horsley's Chem. Philosophy ..	21
Mulder on the Chemistry of Wine ..	27
Plattner & Muspratt on Blowpipe ..	28
Shuttleworth's Modern Chemistry ..	32
Speer's Pathol. Chemistry ..	34
Sutton's Volumetric Analysis ..	34

### CLIMATE.

Bennet's Winter in the South of Europe .. ..	9
Chambers on Italy .. ..	12
Dalrymple on Egypt .. ..	14
Francis on Change of Climate ..	16
Grabham on Madeira .. ..	18
Hall on Torquay .. ..	19
Haviland on Climate .. ..	19
Horton on West Coast of Africa ..	21
Lee on Climate .. ..	24
Do. Watering Places of England ..	24
McClelland on Bengal .. ..	25
McNicol on Southport .. ..	25
Martin on Tropical Climates ..	26
Moore's Diseases of India .. ..	26
Patterson's Egypt and the Nile ..	28
Scoresby-Jackson's Climatology ..	32
Shapter on South Devon .. ..	52
Siordet on Mentone .. ..	33
Taylor on Pau and Pyrenees ..	35

### DEFORMITIES, &c.

	PAGE
Adams on Spinal Curvature ..	6
Do. on Clubfoot .. ..	6
Bigg's Orthopraxy .. ..	9
Bishop on Deformities .. ..	10
Do. Articulate Sounds .. ..	10
Brodhurst on Spine .. ..	11
Do. on Clubfoot .. ..	11
Hugman on Hip Joint .. ..	21
Salt on Lower Extremities ..	31

### GENERATIVE ORGANS, Diseases of, and SYPHILIS.

Acton on Reproductive Organs ..	6
Coote on Syphilis .. ..	14
Coulson on Syphilis .. ..	14
Gant on Bladder .. ..	17
Hutchinson on Inherited Syphilis ..	22
Lee on Syphilis .. ..	23
Oppert on Syphilis .. ..	27
Parker on Syphilis .. ..	27
Wilson on Syphilis .. ..	39

### HYGIENE.

Armstrong on Naval Hygiene ..	7
Beale's Laws of Health .. ..	8
Carter on Training .. ..	12
Chavasse's Advice to a Mother ..	13
Do. Counsel to do. .. ..	13
Do. Advice to a Wife .. ..	13
Dobell's Germs and Vestiges of Disease .. ..	15
Fife & Urquhart on Turkish Bath ..	16
Gordon on Army Hygiene .. ..	17
Hartwig on Sea Bathing .. ..	19
Hartwig on Physical Education ..	19
Hufeland's Art of prolonging Life ..	21
Hunter on Body and Mind .. ..	21
Lee's Baths of France, Germany, and Switzerland .. ..	24
Lowndes on the Maintenance of Health .. ..	25
Moore's Health in Tropics .. ..	26
Parkes on Hygiene .. ..	28
Parkin on Disease .. ..	28
Pearse's Notes on Health .. ..	28
Pickford on Hygiene .. ..	28
Robertson on Diet .. ..	31
Routh on Infant Feeding .. ..	31
Wells' Seamen's Medicine Chest ..	38
Wilson on Healthy Skin .. ..	39
Do. on Mineral Waters .. ..	39
Do. on Turkish Bath .. ..	39

### MATERIA MEDICA and PHARMACY.

Beasley's Formulary .. ..	9
Do. Receipt Book .. ..	9
Do. Book of Prescriptions ..	9

### MATERIA MEDICA and PHARMACY—continued.

	PAGE
Birch on Oxygen .. ..	9
Brunton on Digitalis .. ..	11
Flux on Sale of Poisons .. ..	16
Lescher's Elements of Pharmacy ..	24
Nevins' Analysis of Pharmacop. ..	27
Pereira's Selecta & Præscriptis ..	28
Prescriber's Pharmacopœia .. ..	29
Royle's Materia Medica .. ..	31
Squire's Hospital Pharmacopœias ..	34
Do. Companion to the Phar- macopœia .. ..	34
Steggall's First Lines for Che- mists and Druggists .. ..	34
Stowe's Toxicological Chart .. ..	34
Taylor on Poisons .. ..	35
Wahlruch's Materia Medica .. ..	37
Waring's Therapeutics .. ..	37
Wittstein's Pharmacy .. ..	39

### MEDICINE.

Adams on Rheumatic Gout .. ..	6
Addison on Cell Therapeutics ..	6
Do. on Healthy and Dis- eased Structure .. ..	6
Aldis's Hospital Practice .. ..	6
Anderson (Andrew) on Fever ..	7
Austin on Paralysis .. ..	7
Barclay on Medical Diagnosis ..	8
Do. on Gout .. ..	8
Barlow's Practice of Medicine ..	8
Basham on Dropsy .. ..	8
Braidwood on Pyæmia .. ..	10
Brinton on Stomach .. ..	11
Do. on Intestinal Obstruction ..	11
Budd on the Liver .. ..	11
Budd on Stomach .. ..	11
Camplin on Diabetes .. ..	12
Catlow on Æsthetic Medicine ..	12
Chambers on the Indigestions ..	12
Do. Lectures .. ..	12
Cockle on Cancer .. ..	13
Dale's Practical Medicine .. ..	14
Davey's Ganglionic Nervous Syst. ..	14
Day's Clinical Histories .. ..	15
Elam on Medicine, Disease, and Death .. ..	15
Eyre on Stomach .. ..	15
Fenwick on the Stomach .. ..	16
Do. on Diagnosis .. ..	16
Fuller on Rheumatism .. ..	16
Gairdner on Gout .. ..	17
Gibb on Throat .. ..	17
Do. on Laryngoscope .. ..	17
Gully's Simple Treatment .. ..	18
Habershon on the Abdomen .. ..	18
Do. on Mercury .. ..	18
Hall (Marshall) on Apnœa .. ..	18
Do. Observations .. ..	18
Headland—Action of Medicines ..	19
Do. Medical Handbook .. ..	19
Hooper's Physician's Vade- Mecum .. ..	18



## MEDICINE—continued.

	PAGE
Inman's New Theory .. ..	22
Do. Myalgia .. ..	22
James on Laryngoscope .. ..	22
Jencken on Cholera .. ..	22
Jones (Bence) on Pathology and Therapeutics .. ..	22
MacLachlan on Advanced Life ..	25
MacLeod on Acholic Diseases ..	25
MacLeod's Ben Rhydding .. ..	25
Macnamara on Cholera .. ..	25
Marcel on Chronic Alcoholism ..	25
Macpherson on Cholera .. ..	26
Markham on Bleeding .. ..	26
Martyn on Hooping Cough .. ..	26
Morris on Germinal Matter .. ..	26
Mervon on Paralysis .. ..	26
Musket on Apoplexy .. ..	27
Nicholson on Yellow Fever .. ..	27
Parkin on Cholera .. ..	28
Pavy on Diabetes .. ..	28
Do. on Digestion .. ..	28
Roberts on Palsy .. ..	31
Robertson on Gout .. ..	31
Sansom on Cholera .. ..	32
Savory's Domestic Medicine .. ..	32
Semple on Cough .. ..	32
Seymour on Dropsy .. ..	32
Shaw's Medical Remembrancer ..	32
Shrimpton on Cholera .. ..	32
Smee on Debility .. ..	33
Steggall's Medical Manual .. ..	34
Thomas' Practice of Physic .. ..	35
Thudichum on Gall Stones .. ..	35
Todd's Clinical Lectures .. ..	36
Tweedie on Continued Fevers ..	36
Walker on Diphtheria .. ..	37
What to Observe at the Bedside ..	25
Williams' Principles .. ..	38
Wright on Headaches .. ..	39

## MICROSCOPE.

Beale on Microscope in Medicine ..	8
Carpenter on Microscope .. ..	12
Schacht on do. .. ..	32

## MISCELLANEOUS.

Acton on Prostitution .. ..	6
Barclay's Medical Errors .. ..	8
Bascome on Epidemics .. ..	8
Buckle's Hospital Statistics .. ..	11
Cooley's Cyclopædia .. ..	13
Edwards' Photographs .. ..	15
Gordon on China .. ..	17
Graves' Physiology and Medicine ..	17
Guy's Hospital Reports .. ..	17
Harrison on Lead in Water .. ..	19
Hingston's Topics of the Day .. ..	20
Howe on Epidemics .. ..	21
Lane's Hydropathy .. ..	23
Lee on Homœop. and Hydrop .. ..	24
London Hospital Reports .. ..	24
Mayne's Medical Vocabulary .. ..	26
Oppert on Hospitals .. ..	27
Part's Case Book .. ..	28
Redwood's Supplement to Pharmacopœia .. ..	30
Ryan on Infanticide .. ..	31
St. George's Hospital Reports .. ..	31
Simms' Winter in Paris .. ..	33
Snow on Chloroform .. ..	33
Waring's Tropical Resident at Home .. ..	37
Whitehead on Transmission .. ..	38
Wise's Med. amongst Asiatics .. ..	38

## NERVOUS DISORDERS AND INDIGESTION.

	PAGE
Althaus on Epilepsy, Hysteria, &c. ..	7
Birch on Constipation .. ..	9
Carter on Hysteria .. ..	12
Downing on Neuralgia .. ..	15
Hunt on Heartburn .. ..	21
Jones (Handfield) on Functional Nervous Disorders .. ..	22
Leared on Imperfect Digestion ..	23
Lobb on Nervous Affections .. ..	24
Morris on Irritability .. ..	26
Reade on Syphilitic Affections of the Nervous System .. ..	30
Reynolds on the Brain .. ..	30
Do. on Epilepsy .. ..	30
Rowe on Nervous Diseases .. ..	31
Sieveling on Epilepsy .. ..	33
Turnbull on Stomach .. ..	36

## OBSTETRICS.

Barnes on Obstetric Operations ..	8
Hodges on Puerperal Convulsions ..	20
Lee's Clinical Midwifery .. ..	24
Do. Consultations .. ..	24
Leishman's Mechanism of Parturition .. ..	24
Pretty's Aids during Labour .. ..	29
Priestley on Gravid Uterus .. ..	30
Ramsbotham's Obstetrics .. ..	30
Sinclair & Johnston's Midwifery ..	33
Smellie's Obstetric Plates .. ..	33
Smith's Manual of Obstetrics .. ..	33
Swayne's Aphorisms .. ..	34
Waller's Midwifery .. ..	37

## OPHTHALMOLOGY.

Cooper on Injuries of Eye .. ..	13
Do. on Near Sight .. ..	13
Dalrymple on Eye .. ..	14
Dixon on the Eye .. ..	15
Hogg on Ophthalmoscope .. ..	20
Hulke on the Ophthalmoscope .. ..	21
Jago on Entropies .. ..	22
Jones' Ophthalmic Medicine .. ..	23
Do. Defects of Sight .. ..	23
Do. Eye and Ear .. ..	23
Macnamara on the Eye .. ..	25
Nunneley on the Organs of Vision ..	27
Power's Illustrations of Diseases of the Eye .. ..	29
Solomon on Glaucoma .. ..	33
Walton on the Eye .. ..	37
Wells Treatise on the Eye .. ..	38
Do. on Spectacles .. ..	38
Wolfe on Cataract .. ..	39

## PHYSIOLOGY.

Beale on Protoplasm .. ..	8
Carpenter's Human .. ..	12
Do. Manual .. ..	12
Heale on Vital Causes .. ..	19
Richardson on Congulation .. ..	30
Shea's Animal Physiology .. ..	32
Virchow's (ed. by Chance) Cellular Pathology .. ..	12

## PSYCHOLOGY.

	PAGE
Arlidge on the State of Lunacy ..	7
Bucknill and Tuke's Psychological Medicine .. ..	11
Davey on Nature of Insanity .. ..	14
Hood on Criminal Lunatics .. ..	21
Murray on Emotional Diseases ..	27
Noble on Mind .. ..	27
Sankey on Mental Diseases .. ..	31
Van der Kolk on Mental Disease ..	37
Winslow's Obscure Dis. of Brain ..	39

## PULMONARY and CHEST DISEASES, &amp;c.

Alison on Pulmonary Consumption ..	6
Bright on the Chest .. ..	10
Cotton on Stethoscope .. ..	14
Davies on Lungs and Heart .. ..	14
Dobell on the Chest .. ..	15
Do. on Tuberculosis .. ..	15
Do. on Winter Cough .. ..	15
Do. First Stage of Consumption ..	15
Fuller on the Lungs .. ..	16
Do. on Heart .. ..	16
Jones (Jas.) on Consumption .. ..	23
Laennec on Auscultation .. ..	23
Markham on Heart .. ..	26
Peacock on the Heart .. ..	28
Pirrie on Hay Asthma .. ..	29
Salter on Asthma .. ..	31
Skoda on Auscultation .. ..	26
Thompson on Consumption .. ..	35
Thorowgood on Asthma .. ..	35
Timms on Consumption .. ..	36
Turnbull on Consumption .. ..	36
Waters on the Chest .. ..	37
Do. on Emphysema .. ..	37

## RENAL and URINARY DISEASES.

Acton on Urinary Organs .. ..	6
Beale on Kidney Diseases .. ..	8
Bird's Urinary Deposits .. ..	10
Coulson on Bladder .. ..	14
Hassall on Urine .. ..	19
Parkes on Urine .. ..	28
Thudichum on Urine .. ..	28
Todd on Urinary Organs .. ..	36

## SCIENCE.

Baxter on Organic Polarity .. ..	8
Bentley's Manual of Botany .. ..	9
Brooke's Natural Philosophy .. ..	11
Hardwich's Photography .. ..	19
Hinds' Harmonies .. ..	20
Howard on the Clouds .. ..	21
Huxley on Classification of Animals .. ..	22
Jones (Bence) on Matter and Force .. ..	22
Jones (Wharton) on Vision .. ..	23
Do. on Body, Sense, and Mind ..	23
Mayne's Lexicon of Terms .. ..	26
Noad on the Inductium .. ..	27



## SCIENCE—continued.

	PAGE
Pratt's Genealogy of Creation ..	29
Do. Eccentric & Centric Force ..	29
Do. on Orbital Motion ..	29
Do. Astronomical Investigations ..	29
Do. Oracles of God ..	29
Price's Photography ..	30
Rainey on Shells ..	30
Reymond's Animal Electricity ..	30
Taylor's Medical Jurisprudence ..	35
Vestiges of Creation ..	36

## SURGERY.

Adams on Reparation of Tendons ..	6
Do. Subcutaneous Surgery ..	6
Anderson on the Skin ..	7
Ashton on Rectum ..	7
Brodhurst on Anchylosis ..	11
Bryant on Diseases of Joints ..	11
Do. Clinical Surgery ..	11
Callender on Rupture ..	12
Chapman on Ulcers ..	12
Do. Varicose Veins ..	12
Clark on Visceral Lesions ..	13
Do. Outlines of Surgery ..	13
Collis on Cancer ..	13
Cooper (Sir A.) on Testis ..	13
Do. (S.) Surg. Dictionary ..	14
Coulson on Stone in Bladder ..	14
Curling on Rectum ..	14
Do. on Testis ..	14
Druitt's Surgeon's Vade-Mecum ..	15
Fayrer's Clinical Surgery ..	15
Fergusson's Surgery ..	16
Do. Progress of Surgery ..	16
Gamgee's Amputation at Hip-joint ..	17

## SURGERY—continued.

	PAGE
Gant's Principles of Surgery ..	17
Gay on Varicose Disease ..	17
Heath's Minor Surgery and Bandaging ..	20
Do. on the Jaws ..	20
Higginbottom on Nitrate of Silver ..	20
Hodgson on Prostate ..	20
Holt on Stricture ..	21
Lawrence's Surgery ..	23
Do. Ruptures ..	23
Lee on the Rectum, &c. ..	23
Liston's Surgery ..	24
Logan on Skin Diseases ..	24
Macleod's Surgical Diagnosis ..	25
Macleod's Surgery of the Crimea ..	25
MacLise on Fractures ..	25
Marsden on Cancer ..	26
Maunder's Operative Surgery ..	26
Naylor on Skin Diseases ..	27
Nunneley on Erysipelas ..	27
Pirrie's Surgery ..	29
Pirrie & Keith on Acupressure ..	29
Price on Excision of Knee-joint ..	29
Ramsay and Coles on Deformities of the Mouth ..	30
Sansom on Chloroform ..	32
Smith (Hy.) on Stricture ..	33
Do. on Hæmorrhoids ..	33
Do. on the Surgery of the Rectum ..	33
Do. (Dr. J.) Dental Anatomy and Surgery ..	33
Spender on Ulcers ..	34
Steggall's Surgical Manual ..	34
Swain on the Knee-Joint ..	34
Thompson on Stricture ..	35
Do. on Prostate ..	35
Do. Lithotomy and Lithotrity ..	35
Do. on Urinary Organs ..	35

## SURGERY—continued.

	PAGE
Tomes' Dental Surgery ..	36
Wade on Stricture ..	37
Webb's Surgeon's Ready Rules ..	37
Wilson on Skin Diseases ..	39
Do. Portraits of Skin Diseases ..	39
Yearsley on Deafness ..	39
Do. on Throat ..	39

## VETERINARY MEDICINE.

Blaine's Veterinary Art ..	10
Bourguignon on the Cattle Plague ..	10
Haycock on Shoeing Horses ..	19
Tuson's Pharmacopœia ..	36

WOMEN AND CHILDREN,  
Diseases of.

Ballard on Infants and Mothers ..	7
Bennet on Uterus ..	9
Ellis on Children ..	15
Eyre's Practical Remarks ..	15
Harrison on Children ..	19
Hood on Scarlet Fever, &c. ..	21
Kiwisch (ed. by Clay) on Ovaries ..	13
Lee's Ovarian & Uterine Diseases ..	24
Do. on Speculum ..	24
Ritchie on Ovaries ..	31
Seymour on Ovaria ..	32
Tilt on Uterine Inflammation ..	36
Do. Uterine Therapeutics ..	36
Do. on Change of Life ..	36
Underwood on Children ..	36
West on Women ..	38
Wright on Uterine Disorders ..	39

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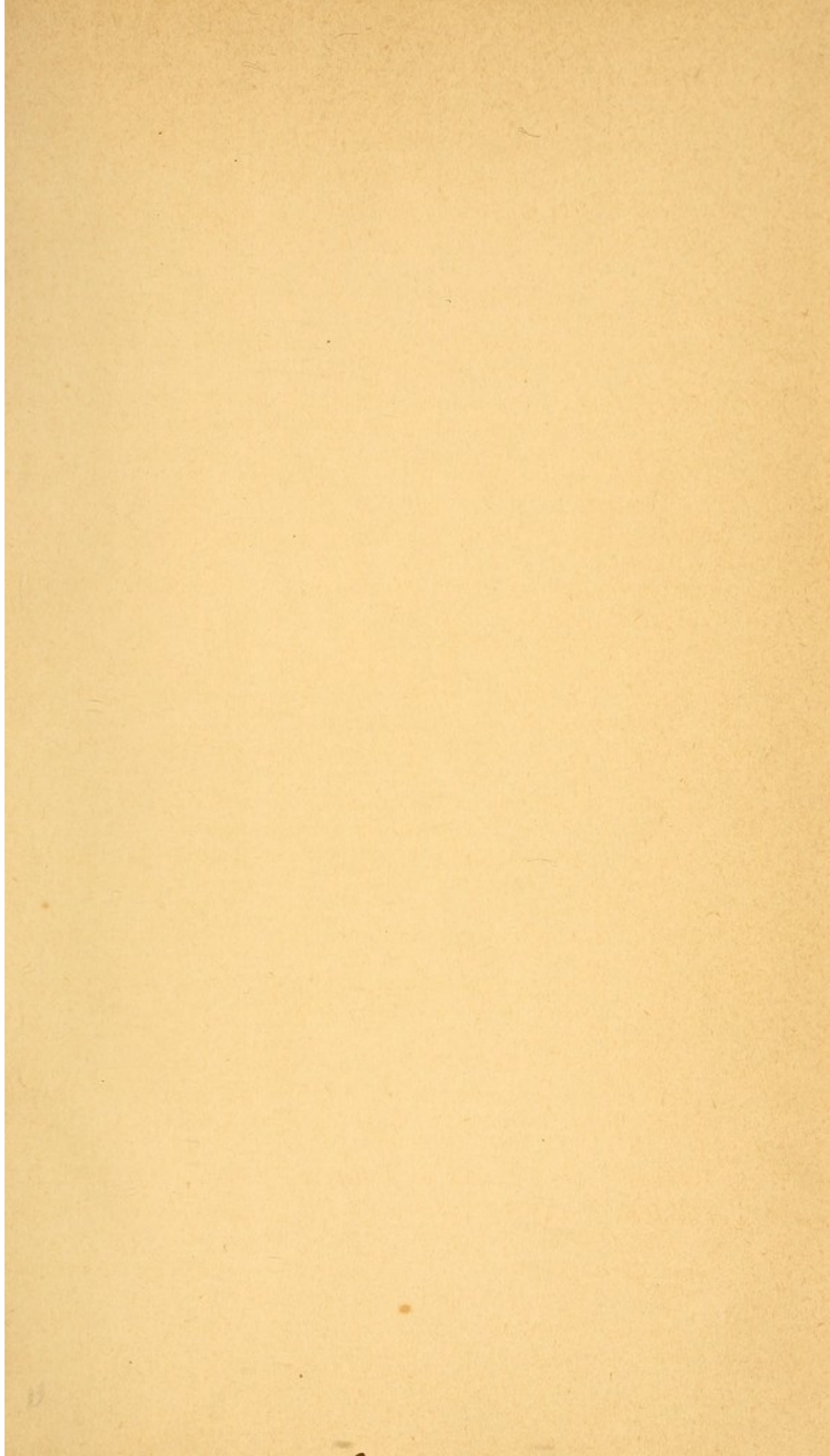
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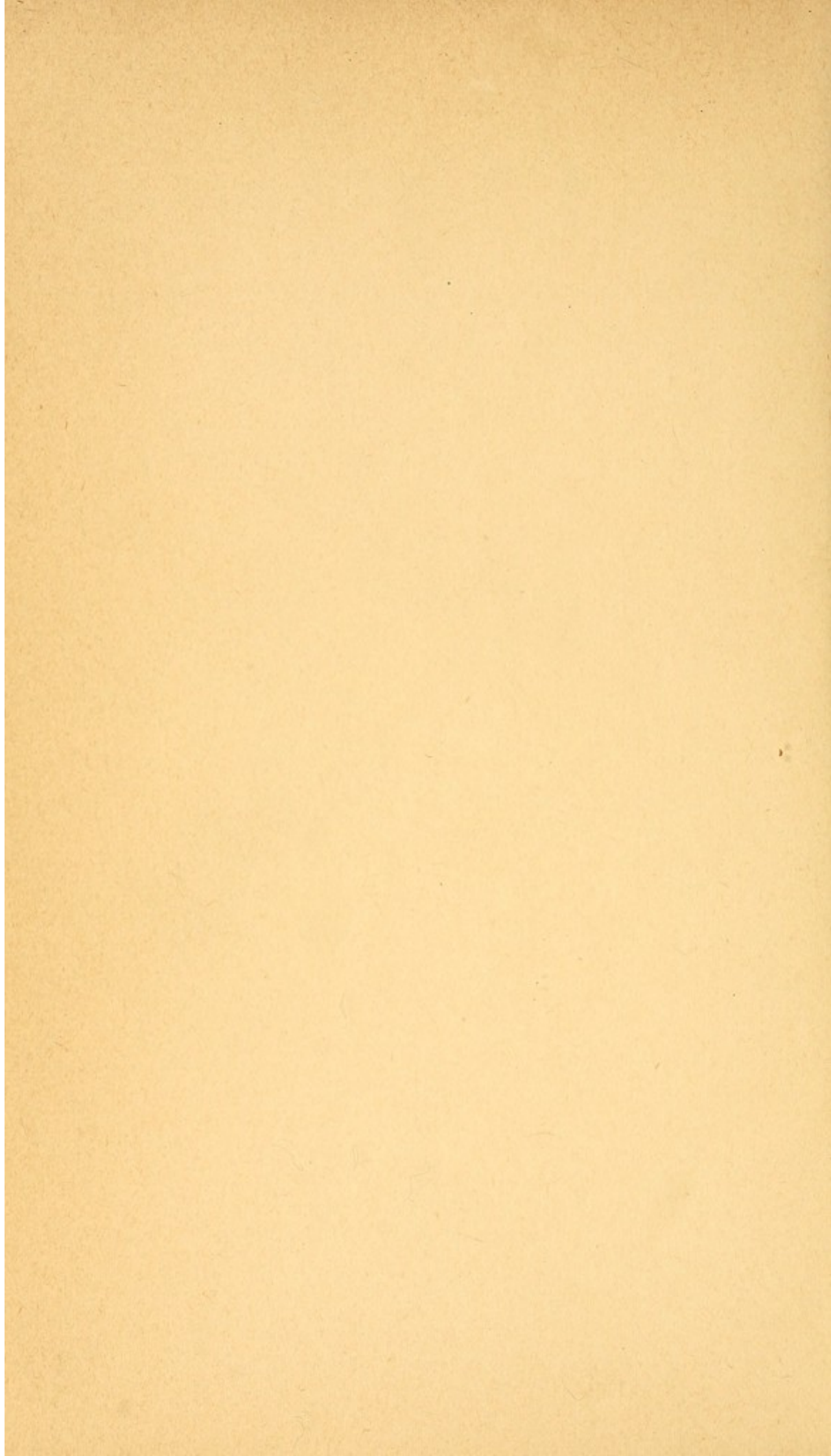
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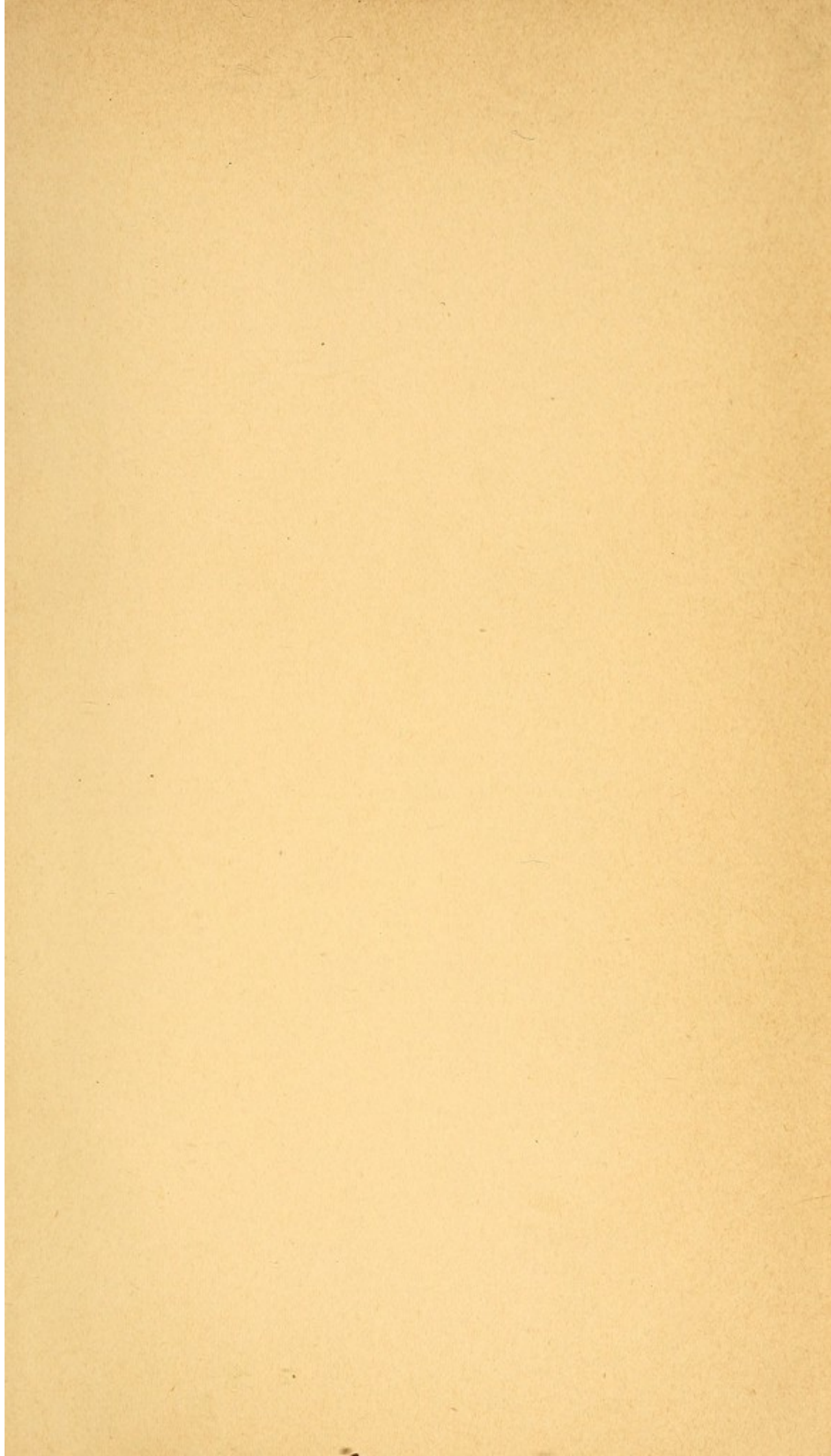
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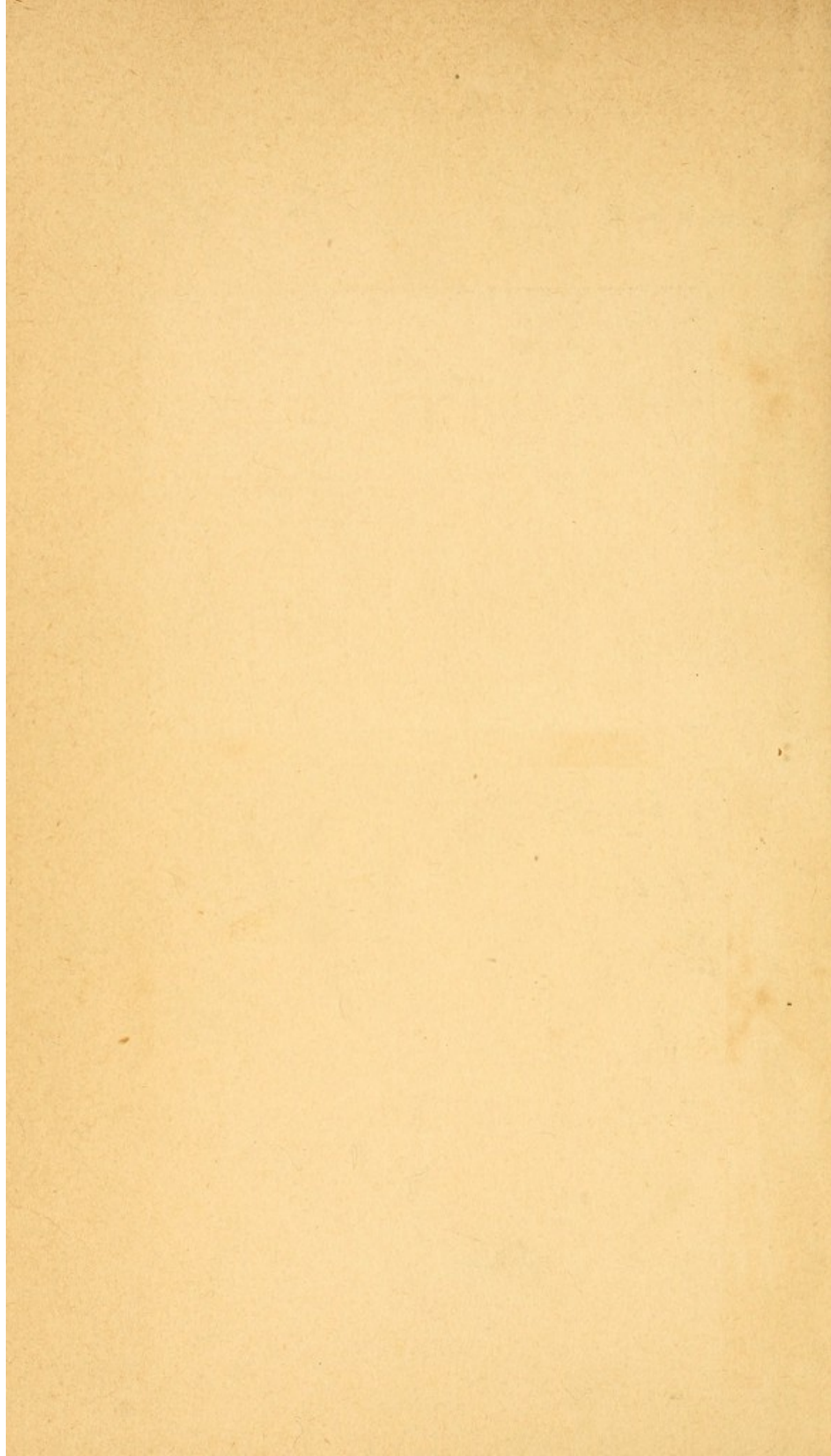














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