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Abstracts

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Vol. 1, No. 1

Studies on Urinary Tuberculosis

Report I : Clinical Observation of Urinary Tuberculosis

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(Director : Prof. T. Inada)*

1 : 1 — 9 (March) 1955

I reported the clinical observations in 2439 cases with urinary tuberculosis these had experienced for this 32 years in our clinic.

- 1) The patients with urinary tuberculosis were 11.3% of total ambulatory patients, and they were 14.3% of those who were underwent the cystoscopic examination.
- 2) In the grouping the sex, there were 3 males and 1 female.
- 3) An age group 20-30 was 46.4%, the infant group (1-10) was 1.2%, and the senile group (over 60 years) was 1.1% of urinary tuberculosis cases.
- 4) Concerning the affected side, right side was 51.2%, and both side was 4.1%.
- 5) In the family history, 21.5% had tuberculous disposition.
- 6) In the past history, pulmonary tuberculosis had occurred in 85%, epididymitis in 12.7%.
- 7) A little over the 90% of the patient complained of the vesical symptoms.
- 8) The duration of the disease before the patient consulted our clinic for relief was almost within 1 year.
- 9) In 85.1% of urinary tuberculosis, the acid fast bacilli were found in the urine.
- 10) Renal palpation will be aid to the diagnosis of renal tuberculosis, especially in the determination of affected side.
- 11) In the complications, epididymitis occurred in 7.2%, urethral tuberculosis in 12.3%, prostatic tuberculosis in 14.9% and urinary calculi in 0.9%.

Experimental Studies on Vesical Tuberculosis

Report I : Studies on the Incidence of Experimental Vesical Tuberculosis and Its Histological Findings

Tomio NAKANO

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(Director: Prof. T. Inada)*

1: 10 — 21 (March) 1955

I made various experiments causing vesical tuberculosis in rabbits, and studied the spreading process of tuberculous changes and its histological findings in every period after the inoculation of tubercle bacilli.

Studies on Benign Prostatic Hyperplasia

Shigeru MIYAZAKI

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(Direct: Prof. T. Inada)*

1: 22 — 28 (March) 1955

I. Clinical Statistical Study of Benign Prostatic Hyperplasia

The total of 470 patients with benign prostatic hyperplasia, all of whom were examined at the Urological Clinic, Kyoto University during the 37 years from 1915 to 1951, were reviewed in this paper.

1. Frequency: The per centage of patients with benign prostatic hyperplasia to total out patients that visited the Department of Urology and Dermatology in one year ranged from 0.034–0.553 % during 21 years from January 1915 to March 1935, and their average was 0.126 % for one year.

During 16 years and 9 months from April 1935 to December 1951, the per centage of the patients with benign prostatic hyperplasia as compared to the total number of the out patients that visited the Department of Urology in one year ranged from 0.79 to 3.35 % and their average was 1.94 % for one year.

2. Age: The age of patients at the first examination ranged from 43 to 92 years old and it was observed that the majority of patients with benign prostatic hyperplasia that visited for the first examination were in the sixth decade of life and the onset of symptoms in total patients was most frequently in the same decade.

3. Occupation: Of the total patients 31.4 % were retired, 25.2 % were farmers and 18.2 % were business-men.

4. Medical History: No correlation was recognized between the benign prostatic hyperplasia and any other kind of previous disease. However, the history of gonorrhoea was seen in 53.7 % of total patients.

5. Period from the onset of symptoms to the initial examination: This period

was highly variable, varying from 1 day to 30 years, and approximately half of the total patients visited the physician with one year after the onset of symptoms.

6. Seasonal Relationship for Initial Examination: The largest number of initial examination occurred with peaks appearing in September-October, and next highest in May-June.

7. Chief Complaints: The most common complaints were urinary frequency (48.8%), dysuria (33.4%) and total urinary retention (26.8%).

8. Complications: The bladder calculus was most often observed, and the next was cystitis and urethral stricture.

9. Residual Urine: 54.7% of total patients had less than 150 cc. of residual urine.

10. Renal Function: The excretion test by the use of Indigocarmine and PSP test showed distinctly low function in about 20 per cent of all patients.

11. Rectal Examination: The quality of the prostate glands in most of patients was elastic hard, smooth surface, without pain by the pressure and estimated to be smaller than the hen-egg size.

12. Cystoscopic Findings: Most often observed was the swelling in all lobes of the prostate gland, and next was the swelling of both lateral lobes. It was also observed that almost all patients had the trabecular formation in the urinary bladder wall.

Studies on Serum Protein in the Realm of Urology

The 1st Part; Variation of Serum Protein in Various Urinary Diseases

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From the Department of Urology, Faculty of Medicine, Kyoto University

(Director: Prof. T. Inada)

From the Clinic of Urology, Himeji Red Cross Hospital

1 : 29 — 35 (March) 1955

I measured the concentration and the fraction of serum protein by the method of saulting out with Na_2SO_4 in various urinary diseases.

1. In acute cystitis, gonorrhoea and hydronephrosis serum protein were almost normal.

2. In pyonephrosis, A/G showed a small quantity of 0.7 on the average, because of the decrease of albumin and the increase of γ -globulin.

3. In urolithiasis of long duration, or in the intense infection, I found little increase of concentration of serum protein and little decrease of A/G.

4. In essential renal hematuria, there is nothing much changed except the

slight hypo-albuminemia.

5. In nearly all cases of urinary tuberculosis, I found a remarkable decrease of albumin, little increase in α -globulin, and an intense increase of γ -globulin. This increase of γ -globulin seems to be parallel to the advance of the condition of tuberculosis.

6. In prostatic hyperplasia, γ -globulin was not so changed, which means this disease is not malignant.

7. In benign neoplasm of the urinary tract, I could not find so much change. In malignant disease, I found a remarkable decrease of serum protein, a conspicuous decline of albumin, and an eminent increase in γ -globulin.

Studies on 17-Ketosteroid in the Realm of Urology

Report I : The Fundamental Study on 17-Ketosteroid

Toshito URABE

From the Department of Urology, Faculty of Medicine, Kyoto University

(Director : T. Inada)

1 : 36 — 44 (March) 1955

I measured the 17-KS in urine by Miyake's method which is based upon the original method of Zimmerman's reaction and Pearson's method.

On the daily difference of 17-KS in urine, I could not get the definite amount of excretion, but in a day, the amount was slightly more abundant at the time of rising than at any other time in the morning or in the afternoon. During the night time it was the least, and the average ratio of the night time to the time of rising was 0.59. The amount of excretion during the night time was 30 % of that in a whole day.

Studies on Gonococcal and Non-gonococcal Urethritis

Report I : Concerning Clinical, Statistical Observation of Gonococcal Urethritis and Examined Results from Cultivation of Gonococci

Hiroshi SHINTANI

From the Department of Urology, Faculty of Medicine, Kyoto University

(Director Prof. T. Inada)

1 : 45 — 53 (March) 1955

I had made the statistical observation of gonorrhoea for 9 years, from 1946 to

1954 at the Urological Clinic of Kyoto University. Gonorrhoea had subsequently decreased by the appearance of penicillin, and its peak was in 1947. Its incubation period had not been prolonged, rather, slightly shortened. The acute form had increased and on the contrary chronic form had decreased, Complication had also decreased year by year.

With the increase of use of penicillin, the rate of cure had greatly ascended. About 10 % of the gonococci-negative patients on microscopic examination were gonococci-positive in the examination by culture, but even these patients could be cured by the strict use of penicillin.

Studies on So-called Essential Hematuria

I. Clinical Statistical Study of So-called Essential Hematuria

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From the Department of Urology, Faculty of Medicine, Kyoto University

(Director : Prof. T. Inada)

1 : 54 -- 63 (March) 1955

This paper is a clinical analysis of 209 cases diagnosed as essential hematuria at the Urological Clinic, Kyoto University during the 22 years from 1931 to 1952. The number of cases of essential hematuria amounts to 299 (2%) in 10527 urological patients where cystoscopic examination was performed. There were 133 males and 76 females in this series and in 117 cases (56%) bleeding occurred from right kidney, in 83 (39.9%) from left kidney and in 9 (4.1%) from both sides.

In one half of the cases the onset of hematuria occurred between 20 and 40 years of age. The bleeding in essential hematuria is for the most part symptomless and the urological examination proved no changes without bleeding. The general health is usually not affected by the loss of blood.

The degree of hematuria at the time of the original examination is reported as follows : 109 cases (52.2%) were marked, 57 (27.2%) were moderate and 38 (18.2%) were slight. In the cystoscopic examination, 171 cases (81.8%) revealed normal vesical mucosa and vesical trabecula, hyperemia, venous dilatation, trigonal anomaly, etc. were found in the other cases. In the indigocarmine test 197 cases revealed normal renal function. The phenolsulphonphthalein test was made in 43 cases ; it was never below 30 per cent, and averaged 64.9 per cent. Twenty-seven cases in which blood examinations were performed revealed no changes other than slight anemia. In 18 cases blood pressure reading averaged 128 systolic and 79 diastolic. Studies of 13 cases with particular attention to blood platelets, coagulation time, bleeding time and the history of bleeding in other areas proved no changes. In 13 cases pharmacological examination of the autonomic nerve system were performed,

and all of these cases revealed positive reaction either sympathically or parasympathically.

Operative procedures have been used in 9 cases, 2 were decapsulation and 7 were nephrectomy. Nephrectomy is the only operation ever indicated, and that only as an emergency measure to save a patient from bleeding to death. It is not a routine measure for intermittent hematuria over a long period. The non-operative methods have been used with success. These have consisted of intrapelvic injection of silver nitrate, of bleed transfusion and of oral administration or injection of hemostatic preparation. Of these the intrapelvic methodes combined with hemostatic preparation have given the best results, and it is of interest to note that in a large number of the cases of the series the urine had become clear within a week or 10 days after this form of treatment.

In the 209 cases who have been followed from one year to 19 years there have been 62 cases with recurrences of hematuria, and in two cases renal tuberculosis developed 4 and 6 years later and nephrectomy was performed. In one case renal calculi developed 2 years later and a small stone was removed by pyelolithotomy. Prognosis in essential hematuria is favorable in spite of the loss of blood and the recurrences of hematuria.

On Cement Kidney

Takao OMORI, Eizo HACHIDA and Eiju KATAMURA

From the Department of Urology, Faculty of Medicine, Kyoto University

(Director : Prof. T. Inada)

1 : 64 — 71 (March) 1955

We described the 4 cases of total cement kidney which had been studied in our clinic recently.

The frequency of cement kidney in our clinic was 10 cases out of 1428 operated cases, and its percentage was 0.7%.

We have been able to collect the reports of 47 cases in the Japanese literature, so adding our cases to these, we have made a brief statistical observation on the cement kidney.

The so-called autonephrectomy is not the permanent cure of renal tuberculosis, because nearly in all cases the active tuberculous changes have been proved histologically.

Basing upon these various grounds, we advocate that surgical operation should be recognized as the principal treatment for cement kidney just as for the other renal tuberculosis.

Of late, abundant chemotherapeutics for tuberculosis were used, and we are

afraid that the cases of so called autonephrectomy may increase because of the abuse of these medicines.

A New Idea for Epididymectomy

(Partial Orchiectomy)

Tsutomu INADA and Hiroshi SHINTANI

*From the Department of Urology, Faculty of Medicine, Kyoto University
(Director : Prof. T. Inada)*

1 : 72 — 75 (March) 1955

In case of tuberculous epididymitis, when adhesion with the testicle is very firm or when we find a limited affected part in testicle, we adopt the new method using the epididymectomy and partial orchiectomy at the same time. By this new operation we can remove the affected part more rapidly and safely than when we use the ordinary epididymectomy, and yet can preserve the most part of testicle.

In this paper we report 4 cases operated by this new method successfully.

A New Method of Pelvic Arteriography ; Retrograde Pelvic Arteriography via Femoral Arteries

Kaoru GOTO and Takao OMORI

*From the Department of Urology, Faculty of Medicine, Kyoto University
(Director Prof. T. Inada)*

1 : 76 — 78 (March) 1955

A new method of visualizing the pelvic arteries by injecting opaque medium directly into the femoral arteries was reported in this paper. It is capable of clearly visualizing the ramifications of the internal and external iliac arteries.

By using retrograde ureterography at the same time with the abovementioned method, we could get a clear manifestation of the positional relation between the location of a ureteral calculus and the iliac arteries.

No reaction by this method has ever experienced.

We thank Prof. Inada for his invaluable assistance in guiding us in the completion of this work.

Large Vesical Diverticulum associated with Leukoplakia and Calculi ; Report of A Case

Tokuji KATO, Shigeru TADA and Hiromi NIHIRA

*From the Department of Urology, Faculty of Medicine, Kyoto University
(Director . Prof. T. Inada)*

1 : 79 — 83 (March) 1955

A case of large vesical diverticulum of a man aged 32 was reported. Diverticulectomy was performed and many small calculi were found in this diverticulum. Histological examination of the wall of this diverticulum revealed leukoplakia with partially malignant change.

Vol 1, No. 2

Studies on Benign Prostatic Hyperplasia II. Preliminary Studies of Urinary Acid Phosphatase

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*From the Department of Urology, Faculty of Medicine, Kyoto University
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1 : 85 — 95 (June) 1955

The urinary acid phosphatase was examined by use of the modified method of Shinowara-Johnes Reinhart. The results were as follows :

1. It was recognized that the adult human male urine was rich in acid phosphatase, most of which originated in the prostate gland.

2. The prostatic acid phosphatase was excreted into the urine not only during micturition, but also a portion of the prostatic secretion became mixed with urine in the bladder even without micturition. Therefore, it is assumed that there exists some transmission between the contents of the bladder and of the posterior urethra.

3. It seems that urinary acid phosphatase in the bladder becomes concentrated with presence of residual urine.

4. The amount of urinary acid phosphatase of the adult human male shows a great variation among individuals and daily even in the same individual.

5. It was considered that there was no definite correlation between the urinary acid phosphatase and the specific gravity of urine when the gravity ranged within 1012-1025. Urinary acid phosphatase did not seem to be affected by the concentration of Mg-Ion in the urine when the quantity of Mg-Ion was normal.

6. Formaline-resistant acid phosphatase was examined in ureteral (renal) urine, male-urine, female-urine, and child's urine; and the results showed only a little difference between them. Therefore, the results reported by King and his co-workers do not seem to be substantiated, that is, the formaline resistant acid phosphatase was not so specific for the prostatic acid phosphatase.

Studies on Serum Protein in the Realm of Urology

Part II: The Variation of Serum Protein in Some Cases Before and After Operation

Shinji NISHIZAWA

From the Department of Urology, Faculty of Medicine, Kyoto University

(Director : Prof. T. Inada)

From the Clinic of Urology, Himeji Jed-cross Hospital

1: 96 — 109 (June) 1955

In the urologic diseases, mainly urinary tuberculosis, I measured the concentration and fraction of serum protein in the cases before and after operation.

1. By removal of the tuberculous kidney, albumin is increased, γ -globulin is remarkably decreased and it's showed the A/G is improved. The continuation a high level of γ -globulin in the blood means a poor prognosis.

2. Before operation I administered anti-tuberculous medicine, and found improvement in the quality of serum protein.

3. Before and after operation, giving transfusion and infusion promoted the recovery of the variation of serum protein.

4. In the cases who had castration and epididymectomy, the variation of serum protein quality is just a little.

5. In the cases of old age who had cystolithotomy, the recovery of serum protein is delayed.

6. In the cases of prostatectomy where I did transfusion and infusion in quantities, but the concentration of serum protin and albumin were conspicuously decreased and the recovery of them was delayed.

7. In cases of ureterocolostomy, changes of them were very remarkable. Those cases need more transfusion and infusion than others because they are limited in their food and water for more than one week after the operation.

Experimental Studies on Vesical Tuberculosis

Report II: Influence of several factors on experimental vesical tuberculosis

Tomio NAKANO

From the Department of Urology, Faculty of Medicine, Kyoto University

(Director : Prof. T. Inada)

1: 110 — 125 (June) 1955

I arrived at the following conclusions after examining the influence of tuberculous allergy and filtered liquid of colon bacilli on experimental vesical tuberculosis,

and studied the meaning of mixed infection.

1) Generally speaking, tuberculous allergy acts immunizingly upon vesical tuberculosis.

2) When a large quantity of the filtered liquid of colon bacilli is injected, it promotes tuberculous infection. On the contrary, when a small quantity is injected frequently, it repressed the tuberculous changes.

3) The tuberculous changes of the bladder are accelerated by mixed infection, and the reason for this is the histological disturbance of the blood-vessel system.

On the Clinical and Experimental Survey of the Urinary Candidiasis

(1). Clinical section

Joji ISHIGAMI and Takashi HINO

From the Department of Urology, Faculty of Medicine, Kyoto University

Shohei WATANABE

From the Department of Dermatology, Faculty of Medicine, Kyoto University

Shigetoshi HANAMOTO

From the Department of Urology, Showa Medical College

Hisao IGUCHI

From the Department of Dermato-Urology, Kitano Hospital

1: 126 — 130 (June) 1955

Four cases of the urinary candidiasis (2 of prostatitis, every one of anterior urethritis, cystitis) caused following the administrations of the various antibiotics were reported.

Yeastlike fungi isolated from the urines, excretions of the urethras or the prostates of these cases were candida albicans in 2 cases, cand. parakrusei in one and another one could not be determined in any specific, though we could certify it a sort of candida.

Antibiotics associated with the diseases were penicillin in 2, streptomycin, penicillin and streptomycin, penicillin, sulfathiazol in every one.

Concerning the symptoms, dysuria, pollakisuria, mictionspains, retentions of urine were complained.

Cystoscopy and urethroscopy revealed pseudomembrane on the affected mucosa, from which a large number of spores of candida fided out microscopically.

Administrations of kalium jodi, and irrigations of protargol on the affected lesions were effective in 2 of them. Local treatment of trichomycin solutions proved effeective where these measures failed.

Effect of Chloramphenicol on Inhibition of Streptomycin Resistance of Tubercle Bacilli

Joji ISHIGAMI and Takeshi HINO

From the Department of Urology, Faculty of Medicine, Kyoto University

(Director : Prof. T. Inada)

Hisao IGUCHI

From the Department of Dermato-Urology, Kitano Hospital

1: 131 — 134 (June) 1955

Authors studies on the inhibition of the resistance of tubercle bacilli to streptomycin (SM) by chloramphenicol (CM).

When constant dosis (2 mg/cc, 5 mg/cc, 10 mg/cc) of CM were added to SM (10 mg/cc), the development fo SM resistance was delayed or repressed in the tubercle bacilli, comparing to the subcultures in SM alone.

There was parallel correlation between dosis of CM and repressive effect to the development of SM resistance in tubercle bacilli.

Experimental Studies on the Deuteropathic Renal Tuberculosis

Noriaki KINOSHITA

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(Director : Prof. Ogata, Prof. Morioka)

From the Department of Urology

(Director : Prof. Arakawa)

Faculty of Medicine, Tokushima University

1: 135 — 140 (June) 1955

I investigated the changes in the kidneys of rabbits which had been inoculated the suspension of bovine type tubercle bacilli to its v. auricularis, spermatic duct and testicle; and found that the deutro-pathic renal tuberculosis could be invited from the genital tuberculosis especially epididymal and testicular tuberculosis lymphatically.