gists are inclined to believe that metastasis to the bones is much more frequent in all forms of cancer than has heretofore been thought to be the case. My own experience is not in accord with that of other observers on this point, as in none of my cases was there any sign of bone involvement when the diagnosis was made; and in one case only am I aware of this form of metastasis recurring after operation, but it is true that no attempts have been made to follow up the later histories of my cases.

I will describe here, briefly, a case which came under my care nearly three years ago, as it not only illustrates the results of partial enucleation but is also the case in which bony metastases occurred two years after operation.

A man, 71 years of age, had suffered for two years with some frequency to which at the end of one year was added urgency and difficulty, and later on pain: and still later on, retention. The pain increased. There was no hæmaturia; his health became poor and he lost about 15 lbs. in weight. On admission to hospital, he had a distended bladder; the urine was of a low specific gravity, turbid; and contained albumen but very little pus. The prostate was removed by suprapubic incision and enucleation. The tissue removed weighed 17 grammes and was definitely cancerous. The patient made an uninterrupted recovery, had perfect urinary function and normal urine and became so well that the diagnosis was questioned. At the end of about two years, however, he showed evidences of metastases in the sacrum, gradually failed and died two and a half years after operation.

Prognosis:—When the disease has advanced to such a degree as to admit of clinical diagnosis, the outlook is bad. This, of course, is precisely what is to be said of cancer in almost any organ. In one such case, (above mentioned) the patient, æt. 71, where a fairly satisfactory enucleation was possible, lived two and a half years with perfect urinary function to the end and with good health for about two years. In some cases in which cancer has been found in the prostate after operation, but where it had not been suspected clinically, the patient has enjoyed good health for several years: but when the disease has progressed to a degree at which satisfactory enucleation is impossible, the prognosis is bad in every way, and while incomplete operation will often restore the urinary function for a time, it will also probably in most cases hasten the growth and spread of the disease and shorten life.

Treatment:—As may be inferred from what has already been said, an ordinary prostatectomy (enucleation) will often give satisfactory results for a long time in the early cases. Some surgeons recommend