

viscera is a subject for careful investigation. I have had several patients complain of unpleasant sensations in the hand after a few exposures, and it is quite conceivable that serious nutritive changes within the cranium or abdominal cavity may in some cases result. I raise the question as one worthy of future observation.

The cases of deep nodular and infiltrating epithelioma reported as treated by the rays are too few in number to enable one to form an opinion as to the comparative value of the agent in such a form of the disease. To rely upon the rays alone would seem to me to be not justifiable if the lesions are still recent and covered with apparently normal epithelium. Such cases should be treated in the manner already advised in similar cases of superficial epithelioma. I doubt, however, if anything can stop the course of some of the severe cases of rapidly infiltrating epithelioma—*épithéliome térébrant*, *épithéliome foudroyant*—unless situated upon a part of the body where an incision wide of the apparent limit of the disease can be made. It is true, as stated by Williams, that the rays act best as a rule when the disease is rather active, but that, I believe, refers only to the ordinary superficial forms of the disease. I have not had an opportunity to treat a case of the rapidly infiltrating form, nor has any treatment of such a case been reported.

In that form of epithelioma called rodent ulcer, in which the disease extends downward into the deeper tissues even more than along the general surface, destroying all the tissues of the part as it extends, producing in time a deep ulcer with, as a rule, only comparatively slightly infiltrated walls; if the disease has reached this advanced stage when treatment is requested by patients, and especially if the lesion is situated near the eye, as is usually the case, the rays offer about our only hope. Removal by incision or by caustic is, in such advanced cases, very rarely indeed successful, and should not be attempted if treatment by the rays can be had.

It is possibly too soon to form a definite opinion as to the curative power of the X-rays in the advanced cases of the deeply destroying rodent ulcers, but from my own experience and that of others it appears that a certain percentage of these hitherto hopeless cases can be cured. The X-rays therefore are an absolutely necessary agent to an operator who treats all cases of cutaneous cancer.

I beg, however, to remind the medical profession that all these cases commence as a lesion that, in the great majority of instances, if not in all, can be easily and quickly cured by the previous methods in use, if early diagnosed and properly treated. Sometimes it is the fault of the patient, but it is also often the fault of the physician that these cases are allowed to proceed in their destructive courses until the almost, if not quite, hopeless condi-