

sometimes necessitating the postponement of the second steps of the operation to a later date. The occipital bone on account of its varying thickness does not lend itself well to any osteoplastic flap being made and is to be discountenanced.

The indications for operation in cases of suspected tumor do not differ materially from those in other parts of the brain. Once the diagnosis has been made, if operation is to be done at all, it should be done at once and not postponed in the hope that improvement may take place under treatment, or that localization may be made with mathematical accuracy. Kocher says there should be less delay in bringing to the surgeon a lesion of the brain, whether it be a neoplasm, tubercle, gumma or abscess. There is no more excuse to-day for delaying operations in case of tumors, because the neoplasm could not be exactly located, than there would be for declining to operate upon a case of intracranial hæmorrhage because one was unable to determine positively the seat of the clot.

In order that the very best results may be obtained, the surgeon and the physician must work hand in hand in this as well as in other fields. As exploratory operation is recognized as the surest, safest and most reliable diagnostic measure in abdominal lesions, such as tumor of the stomach, it should be considered of equal value and importance in tumor of the brain. Patients with cerebral tumors make very poor subjects for surgical intervention. The operation is of itself one of considerable gravity, and the condition of the patient should be as good as to enable him to withstand its depressing effects. Therefore, no postponement of operation should be tolerated if good results are to be expected.

It is well known that cerebellar tumors are more difficult to localize than those of the cerebrum, and at times well nigh impossible. This, however, should not be an indication for delay, but rather for early exploration. When the diagnosis has been made with a reasonable degree of certainty, just so soon should operation be carried out, providing other measures have failed and the operation, *per se*, is not contra-indicated.

During the last month there have been two patients in the General Hospital who were suffering from cerebral tumors, who both died the day before that set for the operation of respiratory failure.

Operation as a palliative measure is indicated for the relief of symptoms when the tumor cannot be found or localized, or it may be inaccessible or of such a size as to make its re-