

Schlegenthal (*Langenbeck's Archiv*, Bd. xxxvi). In all these cases other typical epidermal structures were detected, and, as in the present case none were found, and no cases of pure adenoma of the sebaceous glands, unaccompanied by epidermis, are recorded, I think that the resemblance is only apparent and due to a degenerative process in the cell-body, the result of slow growth and defective nutrition.

As to the possibility of the tumor belonging, after all, to the class of aberrant supra-renal strumæ it is not easy to express a positive opinion. The cells of these tumors often contain fat-drops, and fat-containing cells are normally found in the supra-renal cortex. The arrangement of the supra-renal tumors as to epithelium, as far as shown by the specimens I have examined, is dendritic and in columns, rather than tubular and in alveoli. The columnar and not the tubular arrangement is one characteristic of normal supra-renal cortical tissue, and supposing we are correct in assuming that the arrangement of the tumor remains true to its physiological prototype, tubular adenomata would not be derived from supra-renal tissue. The occurrence of aberrant struma in the kidney does not exclude, but rather renders probable, the occurrence of other heterologous growths. Formerly, when renal tumors were not removed by operation, more carcinomata and fewer adenomata were reported. In the present case it cannot positively be stated that this tumor might not have become cancerous, though the absence of metastasis and infiltration of the adjoining kidney substance as well as the microscopic appearance of the tumor itself seems to negative it. All that can be stated of the tumor here described is that it had existed for a long time in the kidney, possibly from an early period of foetal life. Subsequent degenerative changes occurring in it, an incidental contamination by putrefactive bacteria (entering by the blood-vessels?) caused the recent changes, giving the case the clinical changes it presented.