

dense and extensive adhesions but she made a good recovery and her general condition was very much improved. During the winter of 1897-'98, she wrote me from Virginia, where she was then living, that there was a small tumor in her right breast and I at once advised her to consult Dr. Halstead, of Baltimore, but, this was not done and in April 1898 she entered the General Hospital at Chatham and on the 5th of that month I removed the breast as in case II. For nearly two years there was no return, then a small nodule appeared about midway between the ends of the first incision. This was excised by a southern surgeon and a few months later another growth and a part of a rib beneath it was removed by the same surgeon. Early in May of this year, she again came under my care at Chatham when I found a hard bluish mass firmly adhered to the ribs about midway between the ends of the primary incision, and as large as the top of our ordinary teacup. It was unmovable and painful and there was a small ulcerated sput at its centre. As the case seemed inoperable I advised treatment by the x-rays which I had known to prove beneficial in a case of superficial cancer. She is at present undergoing treatment in that way, but sufficient time has not elapsed to know with what result. This case is instructive as showing that, however beneficial removal of the ovary may be in curing mammary cancer, it did not in this case prevent the development of the disease.

*Case III.* Mrs. J. J. married and has had three children. She first came under my care in July, 1896, suffering from laceration of the cervix and perineum and inability to articulate distinctly on account of a partial paralysis that occurred a year earlier and a few days after the birth of a child. On July, 6th 1896, I repaired the lacerations and her health soon improved although her speech remained somewhat imperfect. In Sept. 1897, I detected a suspicious looking tumor in left breast, near the nipple, and on the 9th, of that month performed the Halstead operation. Fifteen months later, or on Dec. 12th, 1898, I removed a small nodule from near the scar of the former wound and similar nodules appeared and were excised on May 16th, Sept. 27th, and Nov. 1st, 1900, March 8th, and May, 26th, 1901. On July 26th, 1901, I removed a hard mass from the axilla and in doing so I found it necessary to exsect a portion of the axillary vein which was so involved in the growth that it could not be detached. On Aug. 12th, and Nov. 10th, 1901, several cervical glands were removed. Within the next six weeks numerous other cervical glands became involved and were so situated that further operation for their removal was deemed inadvisable. Knowing that some favorable results in such cases had followed removal of the ovaries, I decided to offer her this chance. She willingly consented, and on Jan. 6th, 1902, I