mendous reaction was secured. There was severe pain, but the lesion, as soon as the reaction subsided, began to get well, and now the affected region is covered by a smooth, supple scar. This epithelioma was of a kind that I have before seen on the nose tip. They frequently spread quite rapidly, and present a bright red, irritable, easily bleeding surface, with very little tendency to deep infiltration or to the formation of nodules.

Now we come to the consideration of the use of the X-ray, not as a sole means of treatment of epithelioma, but as a most useful addition to some other means of treatment. Even in epithelioma of the lip, where so many acknowledged failures with the X-ray are shown, it may be an excellent aid. The Xray may be used to check the growth or to decrease the size of the tumor, after which an operation of much less extent may be performed than in the first place would have been necessary. What is true of the lip in this respect is decidedly true of epithelioma of the free surface. In fact the X-ray not alone cures or benefits the epithelioma, but it also benefits the diseased skin in which the cancer is situated, and in which the cancer is often only the most prominent and threatening symptom. Α patient presents himself, for example, with his face covered with seborrheic and senile patches, some of which have developed into epitheliomata. If the epitheliomata alone are cured, there is still left the disease from which they sprang. The accompanying photographs show this condition of affairs very well, and the X-ray in these cases does a great deal in clearing up this seborrhea, which is disfiguring, disagreeable, and which may be ultimately dangerous to the patient. The X-ray may therefore be used before an operation to decrease the size of the lesion, or it may be used after an operation for the benefit of the surrounding skin, and as an additional guarantee in eradication of the cancer.

The X-ray should be used in those cases where cauterization or curetting, or both have failed, or when an operation is difficult or dangerous. For example, the following is an instance in my practice where an epithelioma had extended deep into the tissues at the internal canthus of the eye, and where the X-ray reached the difficulty in a way nothing else could have done. Arsenic paste had previously been used to burn off the growths on the eyelids and down the side of the nose. Arsenic could not, however, be used down in the corner of the eye, because the tears washed it away. Some of the disease had also been successfully treated with the Finsen light. The Finsen light could not, however, reach down into the corner of the eye, because the nozzle of the instrument was not small enough to be pressed into the narrow space, and pressure is an important factor in Finsen light treatment. It was a dangerous place to