

There was a hard tumor $\frac{3}{4}$ an inch in thickness and about 2 x 3 inches in area. The tumor was firm in consistence, and was situated between the skin and the mucous membrane. The mouth could be opened only $\frac{3}{4}$ of an inch, and she had not been able to wear her false teeth for several months.

Mixed toxins were begun at once at the New York Cancer Hospital and continued for six weeks, at the end of which time there was entire disappearance of the tumor. On March 3rd, 1899, I performed a plastic operation to improve the appearance of the mouth, because of the previous operations. I removed most of the old scar. Careful microscopic examination, made by Dr. Buxton, showed no evidence of sarcoma remaining. A few weeks later the patient complained of stinging pains on the site of the cicatrix, very similar to those she had noticed previously when the disease began to return, and there seemed to be a thickening in the scar. Injections were begun for a time and the pain disappeared. Shortly after this the patient returned to her home in British Columbia, and I am unable to give the later history.

There are other recent cases of interest that I could mention did the time permit. It is true that sufficient time has not elapsed in these particular cases to justify one in claiming them as permanent cures, and they are not mentioned for this purpose, but merely to furnish additional proof that the mixed toxins have a specific action upon sarcoma. That this action is permanent and curative in a large number of cases is proved by a brief reference to my earlier cases already reported. The later history of these cases is as follows:

Case 1. Spindle-celled sarcoma of the neck and tonsil.—Tumor entirely disappeared under injections of the living bouillon cultures of erysipelas, producing an attack of erysipelas. Patient well six years later when last heard from.

Case 3. Spindle-celled sarcoma of the abdominal walls and pelvis.—Mixed toxins administered Jan. 3, 1893. Tumor entirely disappeared. Patient alive and well at present, seven years later. This patient was exhibited before the Academy of Medicine, March 1, 1900.

Case 4. Spindle-celled sarcoma of the abdominal walls.—Pronounced inoperable by Dr. M. H. Richardson of Boston. Microscopical examination by Dr. Whitney, Pathologist to the Mass. General Hospital. Tumor entirely disappeared and the patient is now well, six years later.

Case 5. Recurrent spindle-celled sarcoma of the popliteal space and leg.—Tumor disappeared. Recurred one and a