

cervix in the form of a crumbling neoplasm and that is the "cauliflower cancer of the cervix." That is the diagnosis in this woman's case. It will be confirmed by a laboratory report in short time. At present there is no lymphatic involvement, or parametric invasion, discoverable by the examining finger.

I had intended to extensively discourse this morning on the pathology, etiology, symptomatology, differential diagnosis and treatment of carcinoma of the uterus. But the policy of our School is opposed to long, didactic lectures, and very properly so; for, whatever any of us could tell you of these things, you could get much better and more thorough information, at first hand from your text books. Hence I epitomize and condense to the smallest possible space my final remarks concerning this case.

Carcinoma of the uterus may originate in the *portio* (or external surface of the cervix); or in the *cervix proper* (i.e., the lining mucous-membrane of the cervical canal); or in the *uterine interior*. From these situations the malignant process may extend in any or every direction by contiguity or lymphatic routes. The carcinomata of the cervix are the most rapid and dangerous in their course.

All authorities are unanimous in the opinion that surgery of the most radical kind is imperative as soon as the diagnosis has been made. In fact, some of our best operators (and I have, on various occasions, followed their example) have adopted a plan, in doubtful cases, of having the sections or scrapings prepared with the aid of a freezing microtome and examined by a competent expert, while the patient is under the influence of the anesthetic, and reporting the microscopic findings at the time. This course permits the operator to perform either a radical operation or perhaps only a curettage, as the report of the pathologist at the time might indicate.

The operations for carcinoma of the uterus vary in the different cases. Because of the absence of parametric invasion, the early stage of the disease, and the probable absence of lymphatic involvement, this case would suggest to me a vaginal hysterectomy as the operation of choice. Were there doubts