

It will thus appear that the occurrence of enlargement of the left supraclavicular glands in cases of gastric carcinoma, by many authors, is not alluded to. Others refer to its clinical significance, without alluding to the thoracic duct, as the means of transmission of the infection. From the clinical observations of Troisier, Osler and McCrae and others, it is evident that the occurrence is not a rare one, and in the smaller number of cases where the thoracic duct has been carefully examined post-mortem, this channel has been shown to be the route of transmission of the infection. In this way, moreover, we have a satisfactory anatomical explanation of the clinical fact that the left supraclavicular glands are almost invariably the ones to be enlarged. The following conclusions therefore appear warranted:

1. That enlargement of the left supraclavicular glands occurs in a small proportion (15 per cent., Osler and McCrae) of cases of gastric carcinoma.

2. That the thoracic duct is the route of transmission of the infection.

3. That the statement of Riegel, quoted by Osler and McCrae, may be accepted that "This symptom is a valuable positive one (of gastric cancer), but its absence should not be considered as of any value against the presence of gastric cancer."

4. That the enlargement may occasionally occur in carcinoma of other abdominal organs, and also in some microbial infections.

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