and atypical glandular appearance. Some, like Hansemann,* would go so far as to declare that tumors must be described purely according to their histological appearance, and while certain terms in general use must continue to be employed—terms such as adenoma, sarcoma, etc.—nevertheless the only right classification at the present time must be by the organ, the tumors originating from one or other tissue being grouped together. So that, for example, we must group together the adenomata and carcinomata of the liver as a class distinct from the adenomata and carcinomata of the stomach. In short, they urge that the topographical classification is the only one possible at the present time.

There is undeniably a virtue in this position, provided that it is assumed in a proper spirit and regarded in the right light; not as a final stage, beyond which it is impossible to advance, but as a temporary stage of careful collection and collation of all the facts bearing upon the tumors proper to each individual organ, to the end that we may, from the knowledge so gained, proceed to further and sounder generalizations, that we may utilize the facts so amassed, to formulate broad statements concerning neoplasms, their relationship one to the other, and their mode of growth.

But against such a position this has to be said: all these years, whatever the scheme of classification popular at one time or other, pathologists have not been idle, so that we are already in possession of an enormous amount of material, and, what is more, of accurate illustrations of the same. Hence, if preconceived notions as to embryological relationships modified the earlier conclusions reached concerning one or other form, the details have been honestly described, and the descriptions and the accompanying illustrations help us to determine where the earlier conclusions need correction. Nay, more, we already possess exhaustive studies upon the various forms of tumors affecting one or other organ, the mammary gland, uterus, kidney, skin, etc. Taking everything into consideration, the time ought to be ripe for attempting more than this individualizing method. So, to repeat, I believe that we have by us embryological and anatomical observations which permit us to proceed further. What is more, I believe that, for a sound classification, we must inevitably pass backwards to the developmental relationship of the different tissues, that we must accept an embryogenetic basis, but one more in consonance with our present knowledge.

It is not necessary here to dwell upon the relationship of morbid to normal processes, and to show that the former in

*Hansemann, D. "Die mikroscopische Diagnose der bösartigen Geschwülste." Berlin: Hirschwald, 1897, p. 22.