

the rectum, and noticed a discharge of mucus and slime, which she for a time attributed to piles. She was placed under my care in October, and I asked Dr. J. F. W. Ross, of Toronto, to see her with me. Cancer of the rectum was found to be so far advanced as to render surgical interference useless. In view, however, of the success which had attended my treatment of her brother, she was anxious that something should be attempted. Therefore, at her own request, I did a preliminary colotomy, and followed this by removal of the lower part of the rectum. The diseased tissue was found to extend beyond the reach of the operation, so that only part of it could be safely removed. The wound did as well as is usual in such cases, and the patient was soon up and around again. Electrolysis and cataphoresis were resorted to, while arsenic was administered internally, but very soon the abdominal glands and liver became involved, and she was advised to return to her home, where she died in June, 1900. Unfortunately, the tumor was not subjected to microscopic examination.

CASE 5.—J. T. M., aged 40; physician; family history good. Irreducible inguinal hernia and undescended testis on the left side. Had suffered one or two attacks of renal colic on the right side. Was my chief assistant in all operations mentioned in Cases 2 and 4 of this paper.

In the spring of 1901 he noticed an enlargement in the region of the left kidney and had several attacks of hematuria, gradually lost weight, and was obliged to quit work in August. The enlargement continued to increase, and an exploratory operation was advised. He therefore went into the hospital at London, where he was kept under observation from September 8th to 27th, when Drs. Wishart and Meek cut down upon the kidney. Very extensive adhesions were found, and upon laying open the pelvis of the kidney a lot of soft tissue somewhat resembling blood clots was removed. Dr. Cullen, of Johns Hopkins Hospital, made a microscopic examination of this, and found it to consist of giant-celled sarcoma. The Dr. was soon after taken to his home, but the wound never entirely healed. The new growth rapidly extended along the sinus to the surface of the back, and became a fungating mass, requiring a great deal of care and attention on the part of his attendants. He died April 6th, 1902.

CASE 6.—Mrs. J. T. M., widow of Dr. J. T. M. (Case 5), aged 30; family history good, previous health good. Was the chief attendant upon her husband during his last illness, and herself looked after the daily dressings of the bleeding,