

conditions are due to too weak a dosage. I consider that lupus exedens requires a much more vigorous treatment than lupus hypertrophicus; whilst, if you would cure epithelioma, you must produce a most decided inflammation of the diseased tissue and the surrounding healthy skin.

The *alterative* action of the rays is more called for in certain cases where the diseased condition is not advancing rapidly, and in the whole series of hopeless cases where a palliative effect only is desired; here, the rays may be used for their sedative effect. According to Leonard, the destruction and liquefaction of a large mass of malignant tissue would flood the system already depressed by the presence of the disease, with an amount of toxin too great to be absorbed, thereby favouring auto-intoxication. An increase in vitality and body weight and general metabolism is an indication of the adequate dosage of X-rays, whilst the reverse indicates either a deficiency or an excess of irradiation.

In all debilitated persons, either from prolonged disease, or advanced age, the question of dosage acquires a fresh element of dubiousness. The adequate degree of irradiation must fall somewhere between the two distinct metabolisms, the general (systematic), and the local. The line of cleavage between them may be indistinct, as it were, or altogether lost, so that you cannot estimate exactly what amount of irradiation you require with the end in view, and you are left with tissues easily injured by your treatment, and repaired with the greatest amount of difficulty. This is probably what constitutes in great part, individual susceptibility, and different as it is, there is no well-known or reliable method of prognosticating what it will be.

Cumulative as the light effect is generally, in a few the skin may show an acquired resistance. In others where a reaction has once been obtained, a second or third reaction can be obtained with increased facility. Among many, two of my cases exemplified this. One, an old man of 80, with low vitality, suffering from a facial rodent ulcer, showed a remarkable resistance to raying. A first reaction was obtained, but, when a second was desired later on, no safe X-radiation could evoke it. A second case showed increased susceptibility in a remarkable degree. The patient was a young girl of 18, of stunted growth, with tubercular caries of the anterior portion of the os calcis of the left foot. After an apparent cure by the X-rays, a recurrence having taken place, the X-rays