

sections of it. I may say, however, that it contained numerous spicula of bony deposits in its structure, showing, no doubt, ossific transformation going on.

General and Histological description of the Tumour. By DR. OSLER.

In size and shape the tumour resembles an adult kidney, presenting a convex side and an irregular concave surface corresponding to the hilus. At this latter situation one or two partially attached lymphatic glands are seen. A tolerably dense capsule encircles the whole, and can easily be peeled off.

One section of the tumour, which has been in alcohol for three weeks, has a greyish-white colour, is firm, elastic, and about the consistence of a lymphatic gland. Several strong fibrous septa dip in from the capsule, but otherwise the surface section is by no means fibrous. Towards the centre, at a point near the hilus, a fibro-cartilaginous and osseous change has taken place, and a few other spots of a similar character, but smaller, may be noticed over the sections; with the naked eye a pitted or alveolar appearance may be observed in the sections. This alveolar character, it may be remarked, is also very well seen in sections of the cortical portions of lymphatic glands. Microscopically the tumour proves to be one of considerable interest, being an adenoid tumour of the cervical lymph glands, a lymphoma or, as some call it, a local lymphadenoma. Sections show a finely reticulated fibrous meshwork in the interspaces of which are numerous lymph cells, the structure in fact of a lymphatic gland with which indeed these growths are strictly homologous. The proportion of cellular elements to the matrix varies in the different parts of the tumour; the former being more abundant in the superficial, the latter in the central regions. The corpuscles are very well seen in prepared specimens, and in places the fibrous net work is also visible. It may be looked upon as a simple hypertrophy, a hyperplasia of the elements of the lymphatic glands, the proportion between the fibrous and cellular elements remaining tolerably normal.

This same condition of the lymphatic glands is met with in Hodgkin's disease, in which a general enlargement of these structures takes place throughout the body, and certain growths of a lymphoid character are found in the liver, spleen, and kidneys, forming, in fact, a disease very analogous to leucæmia, but differing from it in the absence of any excess of white blood corpuscles. The specimen under consideration represents a local lymphadenoma, while

Hodgkins disease is a general lymphadenoma. This tumour is distinguished on the one hand from simple transitory enlargement of the lymphatic gland by its persistence; and in the other from scrofulous enlargement by the lack of any tendency to undergo the caseous or suppurative process. From the syphilitic enlargement it is characterized by the absence of induration; the fibrous elements do not predominate over the cellular. Other and more important relations are with the sarcomatous tumour of the lymph glands—the lympho-sarcomas. In the early stage many of these are simple enlargements of the glands, sometimes the cervical, more frequently the mediastrical, occasionally the retro-peritoneal. Gradually, as the growth proceeds, the cellular elements increase greatly, the tumour becomes infective and infiltrates the surrounding tissues. These lympho-sarcomas form the great majority of intro-thoracic tumours.

Leeching in the treatment of Cerebro Spinal Meningitis. By WILLIAM E. BESSEY, M.D., C.M.
Read before the Medico-Chirurgical Society of Montreal, January 28, 1876.

MR. PRESIDENT AND GENTLEMEN,—My object in the present paper is not to theorise or throw any new light upon the pathogenesis or pathology of this disease, but to add my humble testimony to the value of local depletion in the treatment of it.

My opportunities for observation have been limited to seven well-marked cases. At times I have seen other cases, in which there seemed to be the evidence of spinal meningitis as a complication.

My first case occurred about three years ago, and need not be detailed here, as it was reported at the time and read before the Society.

Suffice it to say that it was a strongly marked case, coming on suddenly and violently without prodromata, marked by strong convulsions, exacerbations. Having an interval of intermission from all the symptoms, during which sensibility returned, food was taken, and there appeared a delusive prospect of a favorable termination. The symptoms returned with increased violence, and death resulted in thirty-six hours. No depletion was used in this case.

I was assisted by Dr. Howard, and every other remedy that suggested itself was given a fair trial. No autopsy could be secured.

Case No. 2.—This was a child fourteen months old, in Point St. Charles. Without any premonition this child was suddenly seized in the morning with convulsions, insensibility, and retraction of head