have been previously employed. It would appear that from being acted upon by so many different physical agents, the tissues have lost their vitality and their ability to form granulations, so that while the disease may be arrested complete healing does not occur. Then again where cartilage or bone is involved great care must be exercised in the dosage given, as too heavy exposure may produce a very painful and prolonged inflammation of the parts. Ordinarily where such parts are not affected I have found the most lasting results to follow sufficient dosage to produce quite a severe reaction. This reaction comes on about a week or ten days after exposure, and shows itself by inflammation of the part with later the development of a radium crust. In about six weeks this crust detaches itself and a smooth, supple, scarcely noticeable scar is left.

The following cases illustrate the excellent results to be obtained from the use of radium, after other methods had proved ineffective.



Plate I. Rodent ulcer of eight years' standing.



Plate II. Same patient as in Plate I. two months after radium treatment was begun.

H. S., aet 54, referred by Dr. Charles McKenna, Toronto. A rodent ulcer developed on the right cheek 8 years ago. Under the X-ray the ulcer healed, but broke down again in three or four months time. For 10 months he underwent treatment with the electric needle without result. When he first came under observation the lesion presented the appearance seen in Plate I; the ulcer was three-quarters of an inch in diameter, with a thickened margin and granulations covering its base. Following a single series of radium treatment healing took place, so that, in two months the