

Before speaking generally upon the subject of these cysts, it will be advisable to record briefly the results of the microscopical examination in each case:

CASE I.—In this there were two cysts in the right lobe, whose contents were reported by Dr. Shepherd to be of the nature of a reddish-brown fluid. The cyst wall did not come into my possession, the material supplied to me being an ingrowth into the cyst. It presented the characters of somewhat modified glandular tissue; the average diameter of the vesicles appeared to be 15  $\mu$ , the largest measuring 60  $\mu$ .

Owing to the great variation in the size of the follicles, it is only possible to give a rough approximate statement of the average size of the vesicles. Although these figures have been reached by estimating the diameters of fifty or more neighbouring follicles, it is not pretended that they represent more than a general approximation to the average size.

The majority of the collections of gland cells had no lumen, and were simply clumps of nucleated cells. Some of the vesicles contained a dense colloid material, deeply stained as though by blood pigment, and here and there the colloid masses showed a definite concentric appearance. In some, in the middle of the colloid, it was possible to recognise one or more clear transparent crystals, varying in shape from a square to an oblong, and in longitudinal diameter from 10  $\mu$  to 55  $\mu$  (Plate XV, Fig. 1). As to the exact nature of these crystals, I am not in a position to make any statement; they were unaffected by all the ordinary media employed in hardening and fixation, such as alcohol, Müller's fluid, and the essential oils. It must be added that the crystals were only present where there was surrounding interstitial hæmorrhage, with a degenerated condition of the epithelium.

Corresponding with the irregularity in the size and contents of the vesicles, their epithelium showed great variation in depth. There was periarteritis and also extravascular (interstitial) hæmorrhages; the capillaries were dilated, and the vesicles widely separated. This presence of dilated capillaries and of hæmorrhages is worthy of note in connection with the reddish-brown character of the fluid contained in the cyst.

The above case is unsatisfactory to this extent, that the relationship of this intracystic growth to the cyst wall could not be made out,