skin, showed the epidermis to be only slightly affected, there being but a slight proliferation of the epithelium, while beneath it was increased fibrous tissue, a condition of chronic inflammation. Beneath this, in the subcutaneous tissue, was seen the tumour proper, presenting the usual appearance of a simple carcinoma, masses of large irregular cells amid extensive areas of fibrous tissue, in an alveolar arrangement.

On closer inspection of the parts, it was found that the growth took its origin from the epithelial lining of the sudoriparous glands, in whose ducts could be seen the various stages of proliferation of cells, while in the neighboring regions were the appearances of an alveolar cancer. The sebaceous glands presented no abnormal appearance, nor was there any evidence to point to the origin of the tumour, other than that suggested.

Although many cases of adenoma of the sweat glands are said to have been falsely regarded as carcinomatous, there is, however, in the present instance so typical an appearance of an alveolar carcinoma that such an error is quite impossible and the tumour cannot be regarded other than as a cancer arising from the sudoriparous glands.

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