

"amputation or nothing" had to be his choice, he was frequently driven to quacks and returned later for amputation when it was too late. Thus the gross mortality was in reality increased. The weak point in the argument, as König pointed out at the time, lay in the fact that local recurrence from foci left in unresected bone was much more likely to develop after resection than after amputation. Against this v. Mikulicz urged careful watching and early second operations where necessary. For the finer points in the argument the reader is referred to the original.

Vogel, after reviewing the somewhat scanty literature, reports in detail a case of Schede's, which in his opinion, lends support to the views of v. Mikulicz. The tumour was a "round-celled sarcoma of the character of a chondromyxosarcoma," situated in the upper end of the humerus, of two years' duration; operated a year and a half previously, with recurrence in a few months. Schede did a resection, removing all save the lower 3 cm. of the humerus in slices, inasmuch as at each slice the medulla was found affected until he approached the elbow-joint. He also took away the ends of the clavicle and the scapula which were diseased in the neighbourhood of the joint; and the affected muscles. The main vessels and nerves were not involved, and could be spared. The patient was discharged well in 26 days, with a leather prosthesis fastened to shoulder and chest for the upper and part of the lower arm, provided with a joint at the elbow. Function was ultimately good, and there was no recurrence in four years.

While Vogel gives us here a clear case of a definitely malignant round-celled sarcoma cured by resection, a careful review of the literature which he cites has shown the reviewer that his case stands practically alone. Only one other case, that of a spindle-celled sarcoma of the lower end of the femur (Nasse), showed no recurrence after the lapse of three years. All the others, including several of v. Mikulicz, are seen either to have shown recurrences or to have been followed but a short time.

One apparently paradoxical point is emphasized in Vogel's article; that the more proximal a tumour is situated, the greater is the indication for resection; the more distal it is, the greater for high amputation. In the first case the chances of metastasis and local recurrence are about equal as between resection and exarticulation; in the latter these dangers are much more certainly guarded against by high amputation.

Narcosis in Ileus.

W. KAUSCH. "Narcosis in Ileus." *Berl. Klin. Woch.*, 17th Aug., 1903.

The author remarks on the danger of vomiting with consequent