

E. W. ARCHIBALD, M.D. I would like to ask one or two questions concerning points which are not clear to me. For instance, I do not quite gather from Dr. Pennoyer's description whether the cavity led only as far as the internal table or under it to the dura mater. Further, one would like to know whether this cavity contained granulation tissue or not, such as one would expect to find from an inclusion of gravel for so long a time in such a situation. With regard to tumours in this situation it is, of course, not common to find dermoids within the skull, but it is common to have dermoids in the outer layers, and in such dermoids it is not so very uncommon to have slight calcification. I would like to ask if there was any evidence of lime salts in the material examined.

A. R. PENNOYER, M.D. I might say that at the time of the operation I took particular pains to see if the cavity communicated in any way with the cranial cavity and we could definitely say that it did not, it lay inside of the outer table. Neither was there any evidence of granulation tissue; the lining of this cavity was almost ivory-like in appearance and a little irregular in outline, but the gravel, or this dark gritty material, came away and left it quite clean. The apparent discrepancy in position I would explain by the natural changes in relative position that would occur in growth, and also that at the time he had this injury there was a fracture of the outer table which was not noticed and some gravel was included. With regard to the lime salts I can only say from its gross appearance that it had not any of the characteristics of this at all.

PRIMARY TUBERCULOSIS OF THE BREAST.

E. M. VON EBERTS, M.D., read the paper of the evening.

E. W. ARCHIBALD, M.D. It is a little difficult to discuss such an exhaustive paper as that we have just heard, based as it is, too, upon a rather rare condition. Yet the hard work evidenced in its very thoroughness deserves at least an attempt at discussion. One or two points were to me of special interest. First, the classification. It seems to me that the term "primary tuberculosis of the breast" ought to be reserved for such cases as develop inside the gland itself. No case that involves the skin first and the breast secondarily can be counted in. I may be mistaken, but I thought that one or two of the cases quoted were of this nature. Another point concerns the question of tuberculin. I suppose that no one of us here present has such an extensive experience in the therapeutic use of tuberculin as has Dr. von Eberts; certainly I have not. With regard, however, to the question of tuberculin used for diagnosis, and particularly with regard to the point raised as to the local reaction at the