

believe in the existence of Graves' disease without goitre. Among recent writers Buschan (26) especially holds this view, but save in the above case I cannot find anatomical substantiation for the opinion. Clinically Graves' disease without enlarged thyroid has very frequently been noted; in some cases enlargement supervenes, in others it does not, but there may well be increased activity of the gland without marked enlargement. All that can be said at present from this evidence is that apparently the condition does occur. So also evidence as to the occurrence of marked hyperplasia and presumably increased secretion without symptoms is not so full and precise as could be wished. I can only point out that if adenomatous nodules in the thyroid produce any internal secretion then, while many cases of adenomatous goitre show a train of symptoms somewhat allied to exophthalmic goitre, and while a few cases pass on to undoubted Graves' disease, many on the contrary appear to last for years without symptoms. And in autopsies upon those dying from diseases, other than exophthalmic goitre, we find a wide variation in the condition of the thyroid, from atrophy on the one hand to a condition not far removed from what Greenfield and others describe in association with exophthalmic goitre.

Altogether, therefore, while not prepared, from general as from anatomical considerations, to state positively that exophthalmic goitre is in all cases primarily due to increased thyroid secretion, I cannot but admit upon the whole that the facts can be best reconciled by assuming the existence of relative increase in glandular activity.

#### THE PITUITARY BODY AND ACROMEGALY.

Finally some few words must be said concerning that strange collection of symptoms and anatomical changes to which Marie has given the name of acromegaly. Yearly it has become more clearly recognized that the term indicates a definite disease although there is a liability towards confusion with gigantism on the one hand, and on the other with the remarkable overgrowth of bone in certain cases of chronic disease (mainly of the lung) which again Marie was the first to group together under the title—voluminous, and in other respects unsatisfactory—of hypertrophic pulmonary osteoarthropathy.

Here again the remarkable trio of conditions forces itself upon our notice; there may be acromegaly with disease of the pituitary, acromegaly with apparently unaffected pituitary and extensive disease of the pituitary without acromegaly. Where there is acromegaly, there in by far the greater number of cases the glandular portion of the body is diseased. It is true that the condition is rare. Between 1890.