of the enlarged glands on the lumbar and sacral plexuses, noted at the autopsy.

In this case the diagnosis was not difficult, and it is interesting only from the coincident involvement of the left supraclavicular glands by way of the thoracic duct.

The following resume of the literature on the subject may be of interest:

Troisier's first article was published in 1886; others appeared in 1888 and 1889. In 1890 he reported a case of primary cancer of the left suprarenal body in a man 34 years of age, with involvement of the thoracic duct, left supraclavicular lymph nodes, and generalized secondary cancer of the lungs. The patient suffered from dyspnea and pulmonary hemorrhage. During one of these attacks the patient expectorated a gland, which examination proved to be cancerous. Death resulted from asphyxia, and autopsy showed the lesions abovementioned, along with involvement of the lumbar, posterior mediastinal, prevertebral and bronchial glands.

Riegel afterwards called especial attention to the clinical significance of enlargement of the left supraclavioular glands, stating that the one usually first to be involved is situated behind the posterior border of the sterno-mastoid.

Ewald, dealing with the subject, dismisses it with the statement that "the swelling of the supraclavicular glands, which was first claimed by Henoch and Virchow, and later by many others, to be a pathognomonic symptom (of cancer of the stomach) is, in my opinion, a rare and by no means constant occurrence." The editor says Lipine observed it in only three out of forty cases on which autopsies were performed. In an analysis of 150 cases occurring in the Johns Hopkins Hospital by Osler and McCrae, the left supraclavicular glands were analysis of 150 cases of cancer of the stomach occurring in the Johns Hopkins Hospital by Osler and Mc-Crae, the left supraclavicular glands were enlarged in 22 cases, or nearly 15 per cent.; the left axillary in noted in 36 per cent. of their cases. No mention of the Martin, Robson and Moynihan, D. D. Stewart, Eichorst and others, refer to the clinical significance of the sign, the first named mentioning the thoracic duct as the means of carrying the infection.

On the other hand, I can find no reference to the matter in the works of Hemmeter or Sidney Martin, nor in the articles on "Cancer of the Stomach," by Hale White, in Allbutt's system, nor by Riegel, translated by Stockton, in Nothnagel's Encyclopedia.