enlargements of the glands of the neck were too often attributed to some defect, hereditary or acquired, in the constitution. Such a simple thing as improperly dressing the hair might give rise to enlargement of the cervical glands. When the irritation caused by improperly tying up of the hair had been relieved by a natural way of wearing the hair, the enlarged glands disappear.

Dr. Allbutt, in reply, said that there were different degrees of susceptibility to lymphatic enlargement. Some people could not, as it were, contract so-called scrofulous neck; others easily could, from very slight irritation or other cause. Again, a certain class of subjects (such as fair, blue-eyed people) could not bear peripheral irritation without secondary enlargement or inflammation, but these were not necessarily scrofulous.—International Congress, Brit. Med. Jour.

Pulmonary Cancer.—Sée (L'Union Médicale, January 22, 1881) claims that the following points are of value in the diagnosis of pulmonary cancer. First: A considerable amount of dyspnæa of a permanent character. Second: a sanguino-grumous expectoration. Third: considerable pain. Fourth: Dullness which does not elect any particular place, but develops and grows with the neoplasm and is found but on one side of Fifth: The vesicular murmur is not present. the thorax. Sixth: Local fremitus is not to be detected. Seventh: Slight If the cancer be displacement of the adjacent organs occurs. what Sée styles compressive, cedema, dysphagia, may occur and also variation in the radial pulses, if it presses on the subclavian artery. Phthisis is diagnosticated from pulmonary cancer in the character of the expectoration, in the lesser amount of dyspnœa, by the quantitative difference in dullness and by the difference in soufflé and fremitus. The bronchial gland affections differ from the compressive type of pulmonary cancer by giving rise to not so intense symptoms. Aneurism of the aorta differs from pulmonary cancer in the presence of aortic bruit and pulsation. While these points are of value in differential diagnosis, it is obvious their value is not absolute as the cancer must have attacked the pleuræ to have produced pain, and the other symp-