

of the remarks which follow is the study of several cases which came to autopsy at the Royal Victoria Hospital, Montreal, added to a collection of similar cases observed in England.

The class of case under consideration is one in which there is a mass at the root of the neck, associated or not with glandular enlargement up the sides of the neck, and with dulness over the upper part of the manubrium sterni. It is assumed that tubercle and syphilis are excluded by the usual means. There may or may not be a slight, possibly periodic, elevation of temperature.

There are three possible methods of aiding the physician or surgeon:

1. By the histological study of an excised gland.
2. By the examination of the blood-films.
3. By the examination of the bone-marrow.

These three methods each have their peculiar pitfalls, and it is proposed to discuss them largely from this point of view. The interpretation of the histological findings of excised glands requires a pre-formed clear conception of the nature of the changes (other than syphilitic or tuberculous) which may occur in them.

1. The histological study of an excised gland. When glandular enlargements of obscure nature have existed for some time it is desirable to make a "test-excision" as long as the absence of any serious adhesions allows this to be done without danger. The tissue so excised should not be subjected to the freezing method of section-cutting, but should be very carefully treated, and the sections prepared slowly and with exact technique. Portions may be placed in formalin if a preliminary report (not earlier than 24 hours) be really desired, but other portions, as thin as possible, should be placed in Zenker's or Orth's fluid. Harris' acid haematein, and eosin and methylene blue are useful methods for staining these tissues.

The structural changes which may be met with are: those of chronic lymphadenitis of different types (excluded in our imaginary case); those of secondary new-growths (carcinoma of different forms, and spindle-celled sarcoma); and those associated with disease of the blood-forming organs.

It may be assumed that the ordinary text-book prevents any difficulties arising in the diagnosis of the secondary new-growths. The problem therefore consists in correctly differentiating certain forms of "blood-disease" by the histological changes which they produce in the lymphatic structures. As regards round-celled sarcoma, however, which is stated in some text-books to occur primarily in lymphatic glands, the view may be here expressed that