

ous. If infiltration is high up in the cervix, a rectal examination may help, but the best plan is to remove a piece of tissue with the curette and examine histologically, or even to curette the body as well as the cervix, and vice versa.

DIFFERENTIAL DIAGNOSIS.

1. Metritis or endocervicitis; but here the condition is uniform, and the mucous membrane is intact.

2. Follicular hypertrophy; but here the mucous membrane is intact, and the follicles shining through may be punctured.

3. Interstitial myomata are more rounded, that is, better outlined, and surrounded by soft tissue, while cancer, owing to inflammatory reaction, is not. Ulceration favors cancer.

4. Chronic cervical catarrh in old females. Here the mucous membrane feels rough, uneven and nodular, owing to the granular depression and the surrounding fibrosis, but the mucous membrane is intact and the curette gets no tissue. The microscope decides.

CANCER OF THE UTERINE BODY.

Cancer occurs here about one-fifteenth as often as in the cervix, but is very important to diagnose, since most corporeal cancers arise after the menopause. Hence, there are two important signs.

1. Hemorrhages.

2. Simpson's pains, regular labor-like pains, lasting several hours and recurring at definite times of the day.

But there are no characteristic bi-manual palpatory findings in cancer of the body. The size of the uterus may be normal or even atrophic. Later, it may resemble a fibroid or metritic uterus. Diagnosis is made by exploring the cavity.

1. By the sound, which distinguishes from retained decidua or fungus endometritis, by presence of hard nodules or depressions when cancer is present. If the interior seems smooth, cancer may be excluded, but if there are irregularities of the surface the microscope is necessary. The microscope is the proper method of diagnosing early cancer of the body. Digital exploration may be employed if the os is open, plus curettage, but if the cervix is closed, curettage is employed, and if negative digital exploration is then used; but the latter is more dangerous, besides palpation is not so sure as the microscope.

DIFFERENTIAL DIAGNOSIS.

If the curette is used, the microscope decides; if a digital exploration, then one has to distinguish from: