

Gyn.-Path. No. 8490.—The specimen consists of the cecum, appendix and a small part of the ileum, also of several mesenteric lymph glands. The growth itself is approximately 10 cm. in length, 9 cm. in breadth and about 8 cm. in thickness. The outer surface is nodular and at several points rather friable. It looks waxy or gelatinous and at first sight would make one think that it was somewhat edematous. The enlargement, on careful examination, is found to be due to infiltration of the fat, especially in the vicinity of the appendix, by the nodular growth which here and there is granular. The walls of the cecum vary from 5 mm. to 1.5 cm. in thickness. The tissue has a gelatinous appearance and is somewhat transparent. In some places the growth is dirty and necrotic-looking. The line of junction between the growth and the ascending colon is sharply defined, the growth projecting about 8 mm. from the surface. The line of demarcation between the growth and the ileum is also sharply defined, but here the mucosa of the ileum is undermined. The largest lymph gland in the mesentery reaches 2.5 cm. in diameter.

On *histological examination* the mucosa at the edge of the growth is seen to be normal. As we approach the growth, however, it shows considerable small round-celled infiltration. It then ends abruptly and is replaced by the new growth, which also consists of glands. These glands, however, are large and small and not regular as we find in the normal mucosa. Their epithelium in many places has so proliferated that the gland lumen is obliterated. In other places large and small colonies of glands are seen. The nuclei of the gland epithelium are fairly uniform in size; some, however, are larger than usual and stain deeply. From the gland grouping one would not hesitate to make an immediate diagnosis of carcinoma. In other places the glands are exceedingly small and closely packed together. This is especially evident where the tissue is dense and surrounded by much small round-celled infiltration. At other points the glands are separated from the stroma by a colloid secretion, and in the outlying portions of the growth where the cancer has run wild this colloid material is so pronounced that the epithelium has almost entirely disappeared, apparently being converted into this colloid material. The growth has extended to the outer surface of the bowel and, as was noted at the operation, extended to the adjoining mesentery. Far out in the adipose tissue is a lymph nodule 4 mm. in diameter. Along its margin at two points are large areas of carcinomatous infiltration where the gland type is perfectly preserved. The large lymph gland has been given over almost entirely to the new growth and few if any lymphoid elements are to be detected except just along the margin of the nodule. The case is one of adeno-carcinoma of the cecum, in which the colloid-producing cells predominate.