

ache persisted. On May 12th she felt her right arm and hand numb, and on the following morning but one, when attempting to get out of bed, she found she had lost all power of movement in her right arm, and that the fingers were firmly flexed into the palm of the hand. A fortnight later she had a fit. The convulsion was slight; she was unconscious for about an hour. On recovering consciousness she found that her right leg was now also paralyzed and numb. Condition on admission—partial paralysis of right upper arm, and loss of power in right forearm and fingers is complete. No impairment of sensation. Slight analgesia of right leg. In walking she drags the right foot as it is lifted heavily from the floor, when it is observed to be extremely tremulous. There is slight paralysis of the lower half of the right side of the face, and the tongue deviates to the right. Double optic neuritis in the first stage; pupils equal.

Operation November 14th, 1894. Details as in Case I. The growth was removed and with it a margin of healthy-looking cerebrum. The tumor proved to be a simple angioma. There was loss of speech (aphemia) after the operation. November, 1898: she has almost complete use of words. Slight fattening of right side of face. Complete power in muscles of upper arm, but fingers are spasmodically flexed in hand and do not relax readily. She can walk well, but gait is that of an old hemiplegic. There has been no return of the cerebral growth.

Surgical Treatment of Cancer of the Stomach.

Guinard (*Thèse de Paris*, 1898) collected 302 cases of resection of the stomach. He holds that every new growth of the stomach should be treated by resection as long as that operation is possible and justifiable on the grounds that the general condition of the patient is satisfactory. The mortality of the operation, once very high, is steadily decreasing. Kahn, in 1883, gives a percentage mortality of 85. The author makes out a mortality of 35 per cent. in 291 cases of pyloro-gastric resections within the last eight years. The certainty of recurrence is not so constant as might be supposed. Löbker reported two cases free from recurrence, five and seven years after operation respectively. Guinard states that forty-five out of 131 patients who recovered from resection of the stomach, were at least alive at the end of a twelvemonth. Surgeons should interfere early and cut well beyond the diseased area. He admits that diagnosis is extremely difficult in the earlier stages of cancer of the stomach. Even when the abdomen is opened by the knife, and the tumor is to be felt and seen, it is not always easy to be certain that it is a cancer. Histological evidence alone can decide, and this is not easy to obtain. He holds that under two conditions explora-