

one of the most actively debated questions in pathology at the present time. I am inclined to take an intermediate position and to suggest that they are of mesothelial or endothelial origin, from the endothelium lining lymph spaces. Their variation from the alveolar, cancerous, type to the purely sarcomatous is what we find in the mesotheliomas as a class, in tumours of the adrenal cortex for example.

TUBERCULOMA OF THE TONGUE.

E. M. VON EBERTS, M.D.—Dr. von Eberts read the report of this case, which appears on page 183 of the March number of the JOURNAL.

TRYPANOSOMES IN MONTREAL RATS. EXPERIMENTAL WORK— ARTERIOSCLEROSIS.

OSKAR KLOTZ, M.D.—The report on these investigations will be found on pages 165 and 169 of the March number of the JOURNAL.

WESLEY MILLS, M.D.—I should like to ask how many treatments that rabbit had.

OSKAR KLOTZ, M.D.—In the vessels of experimental arterio-sclerosis here shown, we have demonstrated two types of the disease, the one occurring in the intima, where there is a definite proliferation with a secondary degeneration, and the other confined to the media with degenerative changes alone present. Identical changes have been produced by means of various chemicals, but none other to my knowledge by this method of increasing the work of the vessels. The treatment was carried out by suspending the animal for three minutes each day for 130 days.

J. G. ADAMI, M.D.—I do not know that I quite agree with Dr. Klotz in laying down the sharp difference between these two types of medial degeneration and intimal proliferation. Here, obviously, we have one simple and single cause producing the two orders of events in two orders of vessels of the same individual. We must look to the difference in structure and strain in the aorta and neck arteries respectively for the explanation of the difference. To me the simplest explanation is that in the wide aorta under the increased pressure, the distending force has been such that there has been excessive giving way of the media, and so great a stretching and strain upon the intima that its cells have not been able to respond by active proliferation, whereas in the smaller carotids and subclavians with their lessened lumina and relatively more powerful media the distending force has led to a lessened giving way of the media, the resulting strain upon the intima being within the limits leading to a strain hypertrophy and proliferation.