

that the rays pass through and do not injure the visceral organs, as the stomach, liver, intestines, brain, etc., I fail to see grounds for hope in these cases. I think, however, that these observations may possibly be considered as not to be depended upon, otherwise how can we explain the disappearance of secondary growths in mammary cancer, or of growths in lymphatic glands such as I have reported above and as have been reported by all writers on the subject? Personally, I will continue to experiment on other lines for the treatment of these cases of internal cancer with the hope of finding something more valuable.

What is true of cancer of the stomach is also true of cancer of the uterus, and so need not be further discussed at present. If a cancer of the mouth cannot be cured, what hope can there be for one of the uterus?

What I have said of cancer of the stomach and of the uterus holds good as regards any internal cancer. The disease may be retarded and the pain lessened, but that is the limit of usefulness obtained up to the present time.

I have not taken up your time with the relation of a list of personal cases of cutaneous cancer, as my experience coincides with that of such excellent and reliable observers as Sequira, of London; Williams, of Boston, and others who have published upon the subject, and I have taken it for granted that you are familiar with their writings and that you rely upon them and not upon the "articles" and interviews in "yellow journals."

#### CONCLUSIONS.

1. The Roentgen ray is a very valuable addition to our armamentarium for the treatment of cancer.

2. Some cases of advanced epithelioma are incurable except by the rays.

3. Many of the cases cured and regarded as inoperable by other means could have been quickly cured in an early stage of the disease, hence physicians should devote proper attention to this serious disease, much more attention than they have as yet given it.

4. The majority of the cases so far reported as cured, have been cases that could have been cured much more quickly by the knife or caustics, especially by the latter.

5. In cutaneous cancer the scar is sometimes better after the ray treatment than after the use of caustics, but for the majority of cases caustics are preferable, as their action is definite and there is a great saving of time to the patient.

6. In many cases of cutaneous cancer the ray is a valuable agent in combination with other methods, and when the disease is situated around the important blood vessels it is the only proper