

neath capsule of kidney (9). Rolleston has also shown that even in adults the gland is often prolonged into renal hilum, and that supernumerary suprarenal bodies may be found along the renal and spermatic veins. Andrewes describes them in so-called fatty tumors of spermatic cord (10); Schmorl and Oberndorger in the right lobe of liver (11); Marchand (12) and Targett in the broad ligament of (fetal) uterus and in round ligament and in inguinal canal.

These findings may be summarized as follows (13) as favoring the adrenal origin:

1. The situation of the tumor beneath the kidney capsule, the usual site of aberrant adrenal tissue.

2. The similarity of adrenal tumors and of those in question.

3. The sharp distinction between the growth and the renal tissues.

4. Dissemination by the blood stream, *via* the veins, rather than by the lymph glands of the kidney.

5. The resemblance of the tumor cells to those of suprarenal cortex.

6. The presence of fat drops and glycogen in the cells, as is usual, not in the adrenal, but in its new growths.

7. The staining quality of the nucleoli, differing from that of the nucleus, rarely, if ever, seen in renal adenomata.

8. The presence of giant cells, as in growths of adrenal.

9. The existence of an abundant capillary network, as in suprarenal cortex.

10. The presence of lecithin in amounts approximating to those characteristic of suprarenal tissue.

These growths are to be distinguished from those arising in remains of the Wolffian bodies which may be retro-peritoneal in site. According to Birch Hirschfeld, those "embryonal mixed tumors" (Brusse) known as "adenosarcomas," may also arise from renal rests of these bodies. They are characterized by their enormous size, by the presence of muscle cells, striped and non-striped, and by early metastasis.

These latter and hypernephromas show well the intrinsic relation that exists between "abnormal growth" and neoplasms; both show the phenomena known as metaplasia and heterology of tissues. Their complexity of growth is clearly associated with their origin. Yet in neither, in certain respects, is the deviation from the typical characteristic of heterology carried so far as in carcinomata. In mixed tumors of children there is no true bursting through of basement mem-