

the wound without filter, and outside with thick filters. After three months the wound was almost cicatrised.

Other series of treatment were again given outside the wound, followed by periods of rest. What is the actual state of the patient now? In the place of his cancer is a hard, fibrous mass, which impedes the movements of the neck.

In such a case is it possible to speak of a cure? Unhappily, I do not think so, because in the middle of the fibrous tissue there must certainly be some epithelial lobes, seeds of a future recurrence, and for this reason I recommence treatment about every two months.

But, even if I cannot yet claim a cure, you will, however, certainly grant that radium in this case has played a very interesting and useful part; inasmuch as a *full year* after the beginning of radium treatment the man is still alive and in good condition.

It is not only in diminishing the thickness of the neoplastic tissues that surgery can render radium more useful, but also in creating artificial orifices so as to conduct radium on the growth or in profiting by the natural orifices; and, in both cases, surgical skill is necessary for conducting the radium apparatus to a good position, right on the cancers when they are otherwise out of our reach.

With Drs. Gaultier and Labey I decided the following technic for the treatment of a cancer of the pylorus in a patient who was in a very low state:

Dr. Labey performed an ordinary gastro-enterostomy, but instead of closing the artificial stomachic orifice, he arranged on the anterior wall of the stomach an orifice which permitted the passage of a probe containing a tube of radium. This probe was so curved as to allow the surgeon to place the tube of radium on the cancer of the pylorus.

At the same time I placed powerful apparatus with thick filter on the skin of the gastric region where the tumor could be felt, and thus produced the "cross-fire." The applications were repeated with special technic which I have no time to detail.

At the fifth month the stomachic orifice was permitted to close.

The operation took place in June, 1909, and to-day, 15 months after, the patient is apparently in good health. Of course I cannot in this case draw any conclusion in favor of radium, since gastro-enterostomy is known to sometimes greatly prolong the existence of the patient.

I have simply mentioned it to draw your attention to different