

than the original induration. Since then the induration has been rapidly extending into the structure of the side of the organ and the ulcer has advanced towards the apex of the tongue. Within the last three weeks the swelling and ulceration have resulted in fastening the tongue down to the floor of the mouth in such a way as to interfere with articulation. There is considerable salivation, and the breath is somewhat foetid.

Heart and lungs examined and found normal. Urine of normal amount and free from albumen and sugar.

On examining the tongue it is found to be unsymmetrical, owing to the presence of a large firm induration occupying the right side and extending from near the base to the apex. It is somewhat nodulated, and terminates abruptly near the root of the tongue. Much the greater portion of it is contained in the right half of the tongue, but about the middle it encroaches upon the left half and then extends almost to the left edge. Beneath the right margin of the tongue, at its junction with the floor of the mouth, is a deep, excavating ulcer, with sharp edges and a sloughing, unhealthy base. The submaxillary gland on the right side is considerably enlarged and slightly tender on pressure. There is also one enlarged cervical gland just behind the angle of the jaw. This gland is as large as a small walnut, quite hard, painful on pressure, and adherent to the deep fascia.

The diagnosis was that of malignant disease with very slight involvement of the neighboring lymphatic glands, and the opinion was held that the case was a suitable one for excision of the tongue. The patient was seen by several members of the attending and consulting staff of the Hospital, and the above view being unanimously supported, the operation was decided upon.

*1st Nov.*—Operation by Dr. Ross; Drs. Drake and Roddick assisting. The patient having been thoroughly anæsthetized with ether, an incision was made in the median line through the entire thickness of the lower lip, and carried down through the skin and subcutaneous tissues as far as the hyoid bone. The divided vessels were secured with catgut ligatures, cut short.