

ed through the medullary cavity, and terminated abruptly at the line of the epiphyses; towards its limits it appeared to be more soft pulpy and dark. The microscopical appearances I obtained were not sufficiently pronounced to justify my entering upon their description; and some of my friends, who also placed portions under their instruments, experienced a similar hesitation.*

Half of the bone was examined after it had macerated for 43 days:—it was a mere shell, below its neck it was expanded into a bulbous form and displayed a surface covered with ossicula, projecting more or less horizontally. They presented fine spars and delicate laminae, so arranged as to make a spiculated rete or thorny net-work of beautiful pattern; their length was various, several jutted out an inch or more. In their midst was discernible a conformity to the bilocular disposition, already noticed, both in regard to the entire and divided tumor; the two cavities communicated through a constricted portion, or rounded mouth. Close against the inside lay, remaining, several arterial (injected) trunks, each nearly of the magnitude of the ulnar artery. Several were of unequal bore in their course, and appeared to be varicose from being in the state called cirroid aneurism. They were tortuous, and emitted branches also swollen at irregular points. Together they formed bunches of vessels, and the probability is, in the live-state, they all inosculated by multifarious anastomoses, were preternatural deviations from the nutrient or endosteal branches, and were so distributed as to have branched over the surface as well as pass through the interior of the diseased pulp, producing a vascular congeries of intricate arrangement.

WHAT WAS THE DISEASE?—The presumption afforded by an inspection of the tumor would be that it was an osteocephaloma, but presumption is not always truth. Even actual dissection can fail to solve a mystery, for appearances may be disclosed which admit of different interpretations. According to some, the case before us is a strong example in point. Instead of assumed osteocephaloma, the disease, they might urge, was a myeloid tumor, and not without eminent authority. Mr. Paget refers to cases of these affections, in which he says "during life the diagnosis was impossible," and Mr. Gray confidently declares that an ocular examination of their internal structure "fails to detect any difference between them." He contends, however, that the microscope is sufficient to solve the difficulty. Were this absolutely true, and no alterna-

*Subsequently to the above, Dr. Fraser, an experienced histologist, observed in the juice of the tumor "clear oval cells of various sizes, but mostly large," which, after being tested by ether, shewed that their contents "had simply been converted into granules," there were no distinct nuclei.—W.