increased connective tissue and diminution of colloid. In some parts there was acinal dilatation.

CASE VII.—Mrs. O., aged 40. Has had for some years a cyst of the thyroid which has been constantly increasing in size and from the discomfort and difficulty of breathing caused she desired operation. There were no nervous symptoms, no tachycardia, no tremors, in fact no symptoms indicative of Graves's disease. Dr. Elder removed the cyst by enucleation and she recovered rapidly. The microscopic appearance showed wellmarked infolding and budding of the epithelium of the acini.

CASE VIII.—Graves's disease with typical infolding, etc., in the right half of gland, which was first removed. Later great increase of left lobe with return of symptoms. This on removal showed no infolding of epithelium but merely acini distended with colloid and lined with flattened epithelium.

Miss R. R., aged 23. For four years had suffered from symptoms of Graves's disease which came on with enlargement of the thyroid. Had tachycardia, tremors, nervousness, vomiting, high temperature, great exophthalmos, and enlargement of the right heart. Was in New York at the time and had the thyroids tied in one of the large hospitals, but secured no berefit from this treatment. In October, 1908, the right half of the thyroid was removed at the Montreal General Hospital with great benefit. The pulse was reduced to below 100, nervousness was less, and she was in every way better and able to return to her work. In the beginning of 1909, the left side of the gland began to enlarge rapidly and all the old symptoms returned. On admission to the Hospital in April, 1909, she seemed to be as bad as before the operation in 1908; in addition she had dilatation of the right pupil. The left half of the gland was removed, only a small piece being left on the trachea. She rapidly recovered from the operation and a month later all the symptoms had been much alleviated. The exophthalmos had disappeared from the right eye and the pupil was normal in size. The exophthalmos of the left eye, however, was as marked as ever. The microscopic appearance of the portion of gland first removed showed wellmarked infolding and budding of the epithelium in the acini. The gland removed at the second operation showed no infolding of budding of the epithelium but merely acini lined with flattened epithelium and full of colloid.

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