

blood vessels, the walls of which consisted almost entirely of the sarcomatous cells, thus demonstrating the manner in which metastatic sarcomata are diffused.

This case is an interesting one in many respects; the rapidity of the growth is of importance both as regards diagnosis and prognosis, and in this respect will bear comparison with a case published in a late number of the *Lancet*, by Mr. F. Mason; a man aged 58 with "a tumour about the size of a foetal head, situated at the upper third of the humerus, moderately firm and somewhat elastic," and only seven weeks growth, which on examination proved to be a round-celled sarcoma; in this case local recurrence and secondary growths resulted, case ending fatally three months after the first appearance of the tumour.

The constant irritation produced by carrying poles over the shoulder suggests a cause, but does not explain why this special form of tumour should have developed, or why instead some form of chronic inflammation should not have been the result; we are therefore driven to the conclusion "that there is a specific, qualitative abnormal reaction of the tissue"* which determines the effect produced in the tissue by the irritation. This peculiar specific predisposition may be accounted for if we accept Cohnheim's embryonic hypothesis which would refer the origin of the tumour to a portion of unused belated embryonic tissue, which on the application of some external or other form of irritation, develops into a tumour. It has been objected, that were these embryonic germs to exist indefinitely buried in the surrounding fully developed tissue, without undergoing any change or development, they would then be simply foreign bodies entirely without independent life, for supposing them to be living and receiving nourishment from year to year why should they not give evidence of their existence long before they often do?

The slight though general enlargement of the glands may have an explanation in the relation observed between the red and white corpuscles of the blood, viz., 1 in 27 (Gowers' Hæmacytometer used).

It is intended to remove the growth in the lumbar region if the patient's permission can be obtained.

Dr. Thorburn considered the marked increase of fluctuation obtained on the day before operation to be due to rather free manipulation a few days previously; this would be borne out by the large quantity of extravasated blood found in the tumour on cutting into it, also by the extreme vascularity of portions of the growth, exhibiting an almost sponge like structure under the microscope. The almost entire freedom from pain is a point to be noted. Speaking of sarcomata Billroth states that if they be not located in or on nerve trunks, they are usually painless till they break out.

A CONTRIBUTION TO THE STUDY OF ENTERIC FEVER.*

BY J. J. CASSIDY, M. D.

Mr. President and Gentlemen:—

So much has been written, and well written, about Enteric fever that it would be difficult to advance anything novel or striking. If however, at this early stage I might be permitted to express a hope, it would be that future observers, following in the footsteps of M. Pasteur, would endeavour to isolate the special germ of this disease, and by inoculating the lower animals with the virus, establish beyond question the correctness of the doctrine that Enteric fever in man always arises from the introduction of a specific germ.

In this country as well as abroad we find the same causes powerful to produce it, and the same preventive measures sufficient for its extinction. According to the general consensus of medical opinion the contagium of Enteric fever is developed from the ex-

* Billroth's Surgical Pathology.

* Read before the Ontario Medical Association, June 6th and 7th, 1883.