The relief afforded by removal of the growth is often very marked, as the following case illustrates:—

Mrs. H., widow, aged 35, a telegraph operator, consulted me December, 1894; a delicate, highly nervous woman, with some exophthalmos, has had enlargement of her neck since childhood. Seven years ago the growth suddenly enlarged, but the enlargement lessened for a time on application of an ointment. The increase was accompanied by palpiration of the heart and great nervous excitability, from that time the gland enlarged until last summer, when it grew much more rapidly. Of late has had frequent attacks of tachycardia, and is very nervous, so much so, that she had to give up her occupation. She has great difficulty in breathing, especially when she has to exert herself. In this case the left lobe was the larger, but both lobes extend from the hyoid bone to the clavicle. The growth seemed to consist of a number of cysts, fluid and solid. Operation was performed, and the patient got rapidly well; all nervousness and tachycardia disappeared, her eyes became normal, and she was able to resume her work.

I have many such cases in my note-book. Here we have symptoms produced by increase of thyroid tissue of the nature of Graves' disease, and perhaps pressure also has something to do with it. I have quite recently operated on a case sent me by Dr. Birkett where pressure from collargement of the right lobe of the thyroid caused contraction of the pupil on that side, and well-marked ptosis. Operation in this case is too recent to state results, but when I last saw her, ten days after the operation the ptosis was certainly less marked.

The symptoms of Graves' disease are familiar to you all; the highly nervous, excitable individual, with prominent eyes, enlarged, soft, vascular thyroid, rapid pulse, tremors, and often pyrexia,-symptoms which are produced by taking thyroid internally. Such cases are the exactly opposite of myxædema, due to loss or absence of thyroid tissue. the patient is dull, sleepy, has a stupid expression of face, low pulse and body temperature, dry, thick skin, with loss of hair. The patient sits about stupidly idle and sleeping most of the day. One disease is the exact opposite of the other—the former due to too much thyroid and the latter to too little. The exactly opposite conditions in these two diseases seem to me to prove the theory that too much thyroid is the cause of all that group of symptoms called exophthalmic goitre or Graves' disease, and the cases I have seen of Graves' disease which commenced with enlargement of the thyroid, and where the severity of the symptoms increased pari passu with the continued enlargement of the gland, also tend to prove the theory that increase of thyroid tissue is followed by symptoms of Graves' disease, and when the increased tissue is removed the patient's health returns to normal, the symptoms of Graves' disease gradually disappearing. The following case illustrates this:—