

tumors have followed injuries about the head, or some constitutional febrile condition. This case belongs in the last mentioned group, and was attributed, by the parents at least, to the attack of measles already mentioned. This occurring as it did, some months before vision failed, a possible connection between the two cannot be denied, when we take into consideration the definite history of vision having failed gradually within six months, and allowing for the fact that the tumor must have been growing for quite a long time before the child would have noticed any loss of vision, this would in all probability bring the commencement of the trouble back to about the same period of time as the attack of measles.

In Dr. Byers' paper referred to in this report, his synopsis of 102 cases, shows one other case to have followed measles. This case is moreover somewhat rare, though not unique, as already stated, in the involvement of both optic nerves, and exemplifies the fact which Byers has pointed out, viz:—"The Frequent Co-Existence of an Inter-Cranial Growth with that of the Orbital Portion of the Optic Nerve," so that the former is not the result of extension from the orbit, but constitutes a part of the original neoplasm.

Dr. Byers has kindly furnished me with a pathological report of this case, which is herewith submitted.

PATHOLOGICAL REPORT.

After hardening for some time in Formalin, the tumor presented the appearance depicted in the accompanying sketch. Anteriorly the optic nerve was almost uniformly enlarged to a diameter of 5 or 6 mms., for a distance of about 2 cms., and then occurred a sudden marked increase in the size of the growth, which measured here about 15 mms., from before backwards and 30 mms., in height and breadth. The capsule of the tumor was formed by the nerve's dural sheath, which was present everywhere except on the posterior surface of the larger portion where separation had taken place. The anterior portion of the growth as depicted in the sketch was twisted one whole turn upon itself.

Section of the tumor showed the usual conditions—dural sheath externally separated from the paler nerve proper by the newly formed subdural tissue. In no part of the growth was there anything resembling a cystic condition. The course of the optic nerve proper throughout the tumor was quite eccentric, and this structure, apparently normal anteriorly, slightly increased in size towards the optic foramen near which, oval in shape, it measured 5 x 3 mms.

Microscopically the subdural overgrowth consisted of a loose mesh-