

development. In Josephson and Vestberg's first case similar true osteomatous areas were recognized. In this same case, as in Waldeyer's and Dr. Hanna's cases, were also evidences of sarcomatous development, but in one of these only (Waldeyer's) were secondary growths found elsewhere. How benign are these growths is further shown by the fact that in only one instance (Tillmann) was there recurrence (? sarcomatous) after removal, and that in another (Roux) the woman gave birth to a healthy child 6 months after its removal.

On the whole the tendency is for these massive tumours to be of the nature of myxolipoma, or as some term it, of lipoma myxomatodes. One of the fullest descriptions of such a growth is by Bruntzel, under the misleading title of fibroma of the capsule of the kidney. There can be no doubt, however, in reading Dr. Bruntzel's very clear description of his case and the naked-eye appearance of the tumour that he was really dealing with a growth of this nature: there was the same gradual though very slow enlargement of the abdomen and progressive emaciation, unaccompanied for years by any disturbance of the general health, the same perfect fluctuation leading to numerous fruitless attempts to tap the enlargement. Even when the tumour was exposed upon the operating table, the surgeon was so deceived by its appearance and fluctuation that he employed a trocar in the hope of lessening its bulk prior to removal, a feature that speaks powerfully against its having been mainly fibromatous. And indeed the description given in the article is that the tumour was composed of a number of masses from the size of a child's head to that of a man's head, in the fibrous tissue of which lay large quantities of loose fatty tissue; at the back, in a kind of hilum, lay partially imbedded the left kidney. Clearly from this description the growth was a lipoma myxomatodes identical with my own case.

Passing now to the results of operative interference the results obtained were perhaps only what might be expected to follow the removal of enormous masses filling the greater portion of the abdomen and composed of a tissue which, contrary to what is frequently taught, has a peculiarly rich vascular supply. Of the 42 cases, in 26 the tumour was removed, wholly or almost wholly. In twelve cases the operation was successful, or 46.1 per cent. (Alsberg, Buckner, Bruntzel, Belkowsky, Lundin and Hedbom, Lauwers, Madelung, Monod, Péan, Pernice, Roux and Tillman) though as above stated in Tillman's there was recurrence. In general there is little sign of surrounding inflammatory disturbance and the layer of peritoneum covering the growth is described as being smooth and glistening. In general also the huge mass peels out with fair ease from its surround-