

CASE IX. Miss C., age 43, single, admitted to Infirmary Oct. 1st, 1894, suffering from scirrhus of right mammary gland.

Grandmother on maternal side died from cancer and other members of family had tumors—there is a marked malignant history in family. She has always been in good health. About two years ago, in June 1892, she noticed a lump in her right breast, the hardness of it attracted her attention, it gradually became larger and a little painful, but did not affect her health or prevent her working. On examination found a tumor of the right breast, very hard and stoney and some retraction of the nipple. On Oct. 1st, 1894, the breast was excised and the axilla cleared of glands—the ordinary antiseptic dressings were applied—the case did very well. A small ulcerating surface was present for a time in the line of the wound, but under action of nitrate of silver, locally every second day, it healed nicely. She went home well on Nov. 5th, 1895.

CASE X. *Scirrhus of Breast ; Amputation ; Recovery.*—M. W., admitted to hospital Oct. 6th, 1894. Family history doubtful. Had a tumor in her breast a considerable time which caused her much pain and suffering. She was ill-nourished and her general health poor.

Cancer of breast in a very advanced stage presented itself on examination. The breast tissue was wholly replaced by the cancer growth, with a dry cancerous ulcer on its surface. The axillary glands were very much involved. Operation, Oct. 11th, 1894. The whole breast and tissue surrounding it were freely removed and that part of the pectoralis major muscle upon which the tumor rested was taken away and the cellular tissue and lymphatics along the edge of that muscle. The axilla was then cleared of all its fat, cellular tissue and glands. Very little could be done to close the wound which was left to granulate. She remained in hospital all winter, improving in health week by week and the wound slowly healing. She left the hospital on April 10th, 1895, having been six months an inmate. She was then strong, fat and well. The wound completely cicatrized.

CASE XI. Mrs. R. married, age 35, admitted to Infirmary Dec. 10th, 1894, suffering from tumor in right breast.

There is a history of malignancy in family. Mother died from retro-peritoneal sarcoma. This patient was generally healthy, she occasionally suffered from asthma, has been married 12 years, has had 3 children. In July, 1894, she noticed a small lump in right breast, it gave her no pain until Sept. 1894, her general health was fairly good all the time. On examination of the breast, found a small hard tumor about half the size of a hen's egg. No retraction of the nipple—no apparent enlargement of axillary glands.

On Dec. 12th 1894. Excised breast, cleared the axillary of any glands, a few of which showed signs of infiltration. The tumor in breast was seated deep down upon the pectoral muscle, and the muscular tissue upon which it rested was also cut away. The wound was dressed antiseptically—a continuous subcutaneous silk suture introduced, also a small drain at lower and outer part of wound, the latter was removed on 2nd day. Primary union resulted—removed sutures on 7th day and she went home on Dec. 24th, 1894, very well.

CASE XII. *Scirrhus of Breast ; Amputation ; Recovery.*—Mrs. R., age 62, admitted to hospital Feb. 15th 1895, complaining of an ulcerated sore on right breast with enlargement of axillary glands.

Previous history good. No history of malignancy in family. 7 years ago first noticed a small lump the size of a pea in right mammary region. This grew slowly for about 6 years, at times giving her slight pain. A year ago an ulcer formed, which has been discharging some ever since. Discharge has lately had an offensive odor. 3 months ago axillary glands began to enlarge. Operation on Feb. 19th 1895. The "complete" operation was done and wound left to granulate. Patient remained in hospital until April 24th. Wound was nearly all healed when patient was discharged. General health good. No sign of return.

CASE XIII. Miss. O. R., single, age 37, admitted to Infirmary April 9th, 1895, suffering from tumors in breast.

There is no history of tumors, phthisis, or Cancers in family. Her health has always been good—she has suffered from piles at times. About 15 years ago she