Primary malignant disease of the lungs is by no means so rare as is generally believed. It is true that the old aphorism, according to which those organs which are most frequently invaded by secondary tumors are rarely the seat of primary growths, is valid also to a certain extent for the lungs, but it is quite safe to say that primary carcinoma of the lungs is more frequent than, for instance, primary cancer of the liver. tistical data are as yet very insufficient and unsatisfactory. This need cause no surprise, if the peculiar difficulties of the subject be remembered. Hansemann points out that, of 700 cases of carcinoma that came to the autopsy table in his hospital, the majority having been under the care of the best physicians of Berlin, 156 were not diagnosticated—not even as tumor—during life. Of these, 16 were primary in the lungs and bronchi³. On the other hand, 58 were diagnosed as cancer during life, and not corroborated post-mortem. This fact, a sharp reproach to our diagnostics, would not, however, affect the final statistical figures if every case were examined after death, but unfortunately the great majority of cases do not come to autopsy, and as regards lung tumors, what Boyd wrote more than twenty years ago is still strictly true. He says: "A case of malignant deposit in the bronchial glands, infiltrating the lung, ending in ulceration and in the formation of cavities, is frequently set down as one of hopeless phthisis, a post-mortem of which would be of no interest. and all record of the frequency of the disease is in consequence entirely lost."4 Even the post-mortem examination, however, does not always bring to light the real nature of the case. There are lung tumors which are not recognized as such in the gross specimen, which are put down as chronic, interstitial or fibrous pneumonia, and which only after a careful microscopic examination, often to the great surprise of the pathologist, are found to be genuine carcinoma. Notwithstanding these difficulties, however, the percentage of primary malignant growths in lungs and bronchi, as reported from the various pathological laboratories, is found to be increasing from year to year, not because the disease itself is becoming more frequent, but rather because more attention is paid to the subject, and more thorough examinations are made. As the general practitioner becomes more familiar with this form of disease, and as our diagnostic methods become more perfect, this percentage will, no doubt, become still larger. Roughly, it may be stated that up to date, carcinoma of lungs and bronchi is found in numbers varying from 1 per cent. to 5 per cent. of all cancer cases, and from .2 per cent. to .6 per cent. of all autopsies. Sarcoma is very much rarer, and is not in-