

lished in pamphlet form by Dr. Bennett, sixteen occurred in males and nine in females. There was more or less distension of the abdomen in twenty cases, dependent, in the majority, on enlargement of some one or more of the abdominal viscera; ascites was also present in five. In twelve cases, the respiration was difficult; dyspnoea being caused in eight by the enlarged abdomen, and consequent diminution of the thoracic cavity; and in five from disease of the lungs. There was hemorrhage from different parts in fourteen; vomiting in seven, and diarrhoea was a marked symptom in many. Febrile symptoms existed in eleven cases; and in *all*, emaciation was present, being more marked, however, in the fatal cases. Post mortem examination revealed in the majority, diseased spleen, liver and mesenteric glands.

Dr. Bennet offers the following theory of its nature: "He regards the spleen, thyroid, supra-renal, pituitary, pineal, thymus and lymphatic, as constituting a great glandular system, whose office it is form the blood corpuscles. These are for the most part thrown off from the organs mentioned, and enter the circulation as colourless nuclei, identical with the peculiar corpuscles of these glands. Sometimes, however, the nuclei proceed to cell-development and appear then as the white corpuscles. The nuclei of these multiply by a process of division, circulate in the blood with colourless cells subsequently escape and become coloured blood-globules. Now, 'in certain hypertrophies of the lymphatic glands', Dr. Bennet believes, that 'their cell-elements are multiplied to an unusual extent, and under such circumstances find their way into the blood, and constitute an increase in the number of its colourless cells. This is leucocythemia" (p. 149) Dr. Jones differs in opinion with Dr. B. All the observations of the former regarding the development of the red globules, are opposed to those of the latter. He believes that the, so-called, vascular glands have no share in the production of the corpuscular elements of the blood; these being altogether formed by the blood itself.

In the chapter on "New Formations" reference is made to the group of Tumours for which Mr. Paget has proposed the name of "Recurring Fibroid". These tumours present all the external characters of the common fibrous tumour. "Their microscopic structure consists of corpuscles caudate and elongated, as if developing into fibres - and the most striking feature in their history is their proneness to return after removal" (*Paget's Surg. Path.* p. 412.) They apparently form a transition between the innocent and malignant tumours. In one of the cases recorded by Mr. Paget, the tumour, which was situated in one of the lower extremities, returned and was removed six different times within a period of four years. The last time it returned, it was as a soft fungoid mass protruding from the front of the leg. Two profuse hemorrhages