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CHORIONEPITHELIOMA.

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The French tell us "souvent femme varie, fol qui s'y fie." This certainly may be said with truth about the theories which we hear laid down in no faltering manner with regard to causes of disease. These are constantly changing and what we hold as absolutely proven to-day, to-morrow we find is quite wrong. Most of us in our student days were taught that the impregnated ovum rested upon the mucous membrane of the uterus, and that this membrane grew around the ovum and held it in position. Not only did the ovum become fixed in this way, but the maternal tissues grew up around the foetal villi, and so formed the placenta. We now know this to be false, and that the placenta is formed by the trophoblastic cells of the embryo penetrating into the maternal tissues, and so preparing the way for the villi to follow. These trophoblastic cells may be found lying not only in the mucous membrane of the uterus, but also in the muscular wall of that organ. These cells, the syncytium and Langhans' cells, are to be found in all uteri between the first and tenth week of pregnancy, and may even be discovered in puerperal uteri. They may disappear, and usually do so, but at times they persist, and form a new growth, the "Deciduoma Malignum" of Sänger or, as it is now universally called, "Chorionepithelioma."

Chorionepithelioma¹ is an extremely malignant growth arising in connection either with pregnancy or teratomata, and characterized, clinically, by its appearance during the puerperal state, by its very rapid growth, by intractable hæmorrhages and by visceral metastases which are propagated by the blood-vessels; and, histologically, by peculiar