

existed as long as he can remember; they are firm, and the integument covering them is of the same colour as that of the rest of the body; a few may be seen on the back and on both arms, but none on the lower extremities; these vary in size from a split pea to a five cent piece, and are only slightly elevated.

In the lumbar region, a little to the right of the median line, a comparatively soft flaccid tumour about the size and shape of a good sized lemon exists, which, on grasping between the fingers gives the sensation of a number of firm coils contained within it, not unlike that produced by a lymph-angioma; the integument covering this growth is pigmented, being of a dirty brown colour; it has been present from childhood, increasing gradually in size up to twenty years ago, since which time it has remained stationary; has never been at any time painful or tender; closely surrounding it is an abundant growth of long coarse black hair. In a space about 6 in. x 3 in., near the inferior angle of the left scapula there is a quantity of long black hair, none existing on the opposite side. About three inches to the left of the umbilicus is a firm slightly elevated tumour 1 in. x $\frac{1}{2}$ in., the duration of which is unknown; this tumour has the appearance of an unpedunculated lipoma.

Aspiration of the tumour over the clavicle only yielded a few drops of blood.

The tumour when examined on the day before operation was found to be softer, and to give fluctuation much more readily; firm pressure on one end seemed to distinctly force a considerable amount of fluid to the other.

Operation, July 20th.—A longitudinal incision about three inches long, being made over the most prominent part of the tumour, through the integument and subjacent tissue, the growth was discovered to be firmly enclosed in a capsule, closely adherent to the clavicle; by carefully separating the surrounding attachments with scalpel and fingers, (care being needed to

avoid the wounding of important vessels) the soft mass was removed, about the size of a goose egg, extremely vascular, and containing on cutting into it a large quantity of extravasated blood; the cut surface had a greyish-white, faintly translucent appearance, at parts slightly fatty, at no part could any softening or breaking down of the tumour be detected; the general appearance was characteristic, of a rapidly growing sarcoma. Another growth of about equal size was also removed from behind, and beneath the sternal end of the clavicle, and extending about two inches down the posterior surface of the sternum; this, with the exception of being much less vascular, was similar to the one first removed. After arresting all oozing, which was considerable, a few carbolized cat-gut sutures were used, strips of plaster and antiseptic dressings; for some days there was considerable gaping of the wound, and some discharge of thick pus, both of which had entirely disappeared two weeks after operation, the wound looking clean and healthy, and union almost complete. During the last few days of the healing process iodoform was used, which appeared to hasten it, so that perfect union exists three weeks after operation. The temperature ranged from 99° to 102° (reaching the latter twice, viz., on the evening of the 3rd and 5th days.)

August 9th.—Complains of constant dry irritable cough preventing his sleeping; a week before this had coughed up some small blood clots at which time he complained of severe pain in the splenic region increased on taking a long breath.

August 16th.—No pain or cough, appetite good, feels "as well as he ever did," no symptoms to point to metastatic visceral growths.

Microscopical examination of the tumour showed it to be a spindle-celled sarcoma, with portions here and there composed entirely of round cells, very vascular and showing beautifully the arrangement of the