

that the patient shall remain perfectly quiet so far as the head and neck are concerned during the first 48 hours after operation.

Case 2. Was an aged woman, with the largest goitre I ever saw, weighing $6\frac{3}{4}$ pounds when removed. The anatomical relations behind the gland were much disturbed and the adhesions were dense. In breaking down some adhesions, the much-displaced and attenuated esophagus was unfortunately torn across and she died three weeks later of inanition. Here, again, the lesson was learned that in all such extreme cases, a stomach tube should be passed and the esophagus carefully outlined before the final steps of the operation are undertaken. Had this been done in Case 2, the accident would not have happened.

Case 3. Was a man aged 45, from whom the right lobe and isthmus had been removed two and a half years ago for Graves's disease. The remaining lobe had been injured some months ago and increased in size quite rapidly, so that he now returned to have it removed owing to severe pressure symptoms. The operation was difficult, owing to the cicatricial contractions and adhesions, and the extremely vascular nature of the tumor. He did fairly well for 30 hours, with the exception of some difficulty in breathing. At that time he suddenly became cyanosed, respiration quickly failed and he died shortly afterwards. It looked like failure of the respiratory centre, but no autopsy was allowed.

I am aware that this mortality of 4.54 per cent. is too large, but I feel sure that at least two of such deaths would never occur in one's practice a second time.

I should like to detail a few points in the history of the last named case, illustrating the effects of operation on a typical case of Graves's disease. Mr. W., aged 42, presented himself in September, 1904, with a very large goitre, both lobes being involved, the right being the larger. The vessels of the gland were enormous, the thrill and bruit being marked. Exophthalmos and tachycardia were extreme, the pulse rate being 130 to 140. Tremor was very marked. Although a tall man, he weighed about 100 pounds. This man's history dated back for about a year, since when he has lost flesh rapidly and all the symptoms of Graves's disease have developed. His mental condition was bad. There has been a complete change of temperament. He has threatened his wife's life and his own, and was noisy, flighty and at times vicious in temper. I removed the right lobe and isthmus and he returned home within two