

is said that three members of his mother's family died at an early age from intestinal tumours.

*Case II.*—J. M., aged 45 years, was admitted to the Royal Victoria Hospital on January 8th, 1901. He had always been a strong and healthy man (with the exception of the loss of his eyesight through an accident with molten lead several years ago) until April last, when he began to suffer more or less from a sense of fulness after eating. There were no other symptoms until August, when pyrosis was added, and about three weeks before admission he noticed a hard, movable, painless tumour in the right lower quadrant of the abdomen. He had never suffered from any intestinal symptoms nor from any digestive symptoms except those above noted. His bowels were regular and his general health good. He had not lost weight appreciably. There was no tubercular heredity.

On examination, a tumour as large as a goose egg was seen and felt lying normally in the region of the so-called McBurney's point. It lay close to the abdominal wall; was hard, irregular and painless, and freely movable within an area limited by the middle line internally, and a line about two inches above and another about two inches below the level of the umbilicus. It was clearly not a kidney and could be definitely diagnosed to have no connection with the stomach or gall-bladder. It was clearly either omental or cæcal.

On January 10th, the abdomen was opened over the mass, external to the right rectus muscle, and it was found to be a cancerous growth of the cæcum. It was definitely limited to the cæcum, and there were no enlarged glands except several small shotty masses in the mesentery of the lower part of the ileum. The mass was removed and the lower end of the ileum attached to the colon by Maunsell's method. As only a little more than twenty-four hours have elapsed since the operation in this case I can only say that he is doing typically well.

[The patient has since made an excellent recovery.]

The following is the pathological report by Dr. E. Archibald:—The tumour involved about half of the ascending colon with the hepatic flexure and about two or three inches of the transverse colon. Ulceration has gone on so much, hand in hand, as it were, with overgrowth, that in spite of considerable contraction the lumen has not become materially occluded. Histological sections show the growth to be a carcinoma in which there can still be made out some attempt at preservation of the adenomatous type; that is, one sees here and there an indication of—more or less abortive—tube-formation, lined by several layers of roundish or oval cells, the deepest of which, however, retain the columnar shape. Anaplasia, according to Hausmann's ideas, has not reached its limit.