istics." He records one striking instance of nasal polypi taking on malignancy (sarcomatous) some months after efforts of removal. A few instances are also mentioned in nasal polypi taking on epitheliomatous transformation.

Nasal sarcomata differ in symptoms from nasal carcinomata in that sarcoma are less liable to ulcerate and bleed and do not so readily infect neighboring glands, though the soft nature of the round cell variety of sarcoma bleeds very easily.

Green says of round-celled sarcoma that they are of softer consistency than the spindle-celled growths, and from its frequent resemblance in physical character to encephaloid, it is sometimes known as medullary encephaloid, or soft sarcoma.

Histologically it is elementary embryonic tissue, consisting mainly of round cells embedded in a scanty, soft, homogeneous or finely granular intercellular substance. They are exceedingly vesicular, the vessels often being dilated and varicose, and from their liability to rupture frequently, give rise to ecchymosis, and to the formation of sanguineous cysts.

Dr. Rufus Baker, of Cleveland, in the *Laryngoscope*, a journal devoted to nose, throat and ear work, cites a case occurring in his practice, of a small tumor forming on the cartilaginous septum. The growth was removed and submitted to skilled microscopical examination, and was pronounced a non-malignant adenomata. Thorough curettage and cauterization followed the operation. Two years following, a recurrence appeared, and a portion of this, after being examined, was pronounced malignant by the same microscopist. The case was reported because of its rarity, and as a slight contribution to the mooted question as to whether a benign ever becomes transformed into a maliguant one. Dr. Wurdeman, in the same journal, cites a case very similar to mine, in which polypi were forcibly twisted out. A recurrence following, microscopical examination of the polypi removed showed small round-celled sarcomata. The opinion is expressed that the originally benign condition was owing to trauma made malignant.

Sedziak, of Poland, writes of a case of intra-nasal sarcoma treated successfully by intra-nasal methods.

Delie, in the *Rev. hebdom. de Laryngol.*, records a case of endothelial sarcoma of the middle turbinal in a woman aged fifty-nine. The ethmoid cells and base of the skull were involved, causing meningitis and death without operation.

J. F. McKernon, in the *Laryngoscope*, writes of a case of epithelioma of the nose, involving the external wall and inferior turbinal in a man aged seventy-two. All the diseased parts were removed with good results, and no recurrence after several months.

In the same journal, Newcombe cites a case of adeno-sarcoma