ventured to enunciate a formula which seems to satisfy the requirements of our present knowledge of the subject. It is, that the nearer the constituent cells of a tumour approach to the healthy lymph-cell in form and power of development, the more clinically benign is the tumour; the farther they are removed in these two particulars from the healthy type, the more destructive or malignant is the growth. To this I would add the further observation, that tumours of rapid growth, and with a tendency to recur, have round or oval cells, which are rapidly reproduced, and have small powers of development in the direction of fibres, while the more chronic tumours, as a rule, are composed of cells which have more or less tendency to form fibre. By a combined use of these formulæ or laws, a correct conclusion may generally be deduced as to the rate of growth of any given tumour, and its tendency to return, even when its clinical history and features are unknown to us. It is not, however, expedient to get the habit of examining tumours microscopically, without as accurate an acquaintance as possible with their clinical aspect."

The author differs with Virchow and Beale as to the true meaning of the multiple nucleus of the pus cell. He says:

"Pus affords another example of the low vitality of the lymph-cell. Pus-cells are only lymph-cells which have perished, and which in parting with most of their nitrogenous elements exhibit a superabundance of oily granules in their interior. This is the true reading of the multiple nucleus of the pus-cell; it is not, as Virchow and Lionel Beale would have it, a spontaneous and vital division of the nucleus preparatory to a multiplication of the cell by division; it is only a step towards the disintegration of the cell, and an evidence of the loss of its life in its very centre and most vital part."

In the chapter on the clinical aspect of tumours, Mr. Collis refers to and reproduces at length the tabular view of cancer or carcinoma given by Walsh now quite out of date as an authority on the structure of cancer. He differs from Mr Paget in his arrangement or classification of tumours into "Benign and Malignant." On this point he says:

"To the general arrangement into malignant and benign or innocent there is one great objection, namely, that many tumours are malignant or destructive to life, if allowed to run on to a natural conclusion, which would be undoubtedly benign if duly and timely treated. Mr. Paget cuts this difficulty short by making the terms malignant and cancerous identical; but the public and the profession do not accept this exclusively, and confusion is the result. It is, I think, much better to use these terms in their natural sense, as implying clinical features. If a tumour is destructive to life or tissue, it is malignant; if not, it is innocent or