

properly applied as to strength and duration of time, usually causes closing of the eye on the same side from inflammatory oedema. As the action of the arsenic is elective in character in this disease, it follows that with it the best results are obtained with the least destruction of normal tissue, and it is to be used in all cases when not contraindicated. Clinical experience shows that the best results both as regards cure and scarring or deformity, are obtained by the judicious use of this agent. If the part is examined when the paste is removed and the desired result has not been obtained, another application should be made at once, and as the part is probably more vulnerable than before the first application, the next paste should be weaker, or left on a shorter period of time. The proper procedure is to watch the action of the paste and be guided by the effect upon the tissues. The action desired must be obtained, or the patient is injured instead of benefited. If the action is satisfactory, the part is to be treated as a simple wound and should heal quickly under proper dressings. No effort should be made to treat the part antiseptically, as the toxins from pus organisms and the inflammatory process in connection with their presence are of service in destroying organisms and pathological epithelia; at the same time plenty of granulation tissue helps to the restoration of the normal form of the parts. If the tumor is seated just below the eye, the lachrymal secretion may soften the paste too much, and it may be necessary to make a fresh application many times during the eight to twenty hours of treatment. In the superficial forms the paste should be applied over a large area, if a reappearance of the disease is to be avoided. If marked ulceration exists the strong preparation should be used as that lessens the danger of poisoning.

For the successful use of the caustics, the physician must recognize the form of cancer, he must appreciate the manner of extension of the growth in the different forms, and have a definite idea of the action of the caustic employed and the result necessary to be obtained. Some cases demand considerable experience, whilst others are easily handled. A fault which is frequent with physicians is the neglect to treat the case energetically until in their opinion the disease is removed.

Space in this journal will not permit me to enter into a lengthened argument in support of the views here expressed. In previous publications I have gone into that part of the subject fully, and have endeavored to show both from a theoretical and practical standpoint that the great majority of cases should be treated by caustics in preference to the knife or any other agent at present known, and that, when seen early and thus treated, epithelioma is not the fatal disease it is too often supposed to be by physicians.