

was performed, and the wound healed up. Within two years she had a return of the ulceration and applied for a third operation with a large superficial ulceration of the cicatrix and surrounding skin. It was deemed impossible to deal with this surgically and she was advised X-ray treatment. This began on June 18th, when there was present an ulcerated area as big as two hands, and giving considerable pain, a hard cicatrix and considerable infiltrated tissue surrounding. The discharge had a foetid odour. On commencing the treatment, the pain and odour both stopped, and after 20 applications at a distance of 12 inches, the skin for three inches around seemed to be reddened, and therefore further treatment was stopped for the time. Healing went on all over the wound, and at present, there are only two small areas not quite healed, but both are closed with a scab, which is expected to fall off in a few days, showing the whole area healed. In this case there was slight reddening of the surface of the other breast, looking as if the disease had extended to the skin of the other side, but a few exposures to the rays seem to have stopped it.

Two other cases of *Cancer* in the breast in two young women, aged respectively 35 and 38 years, were treated. One had her breast removed two years previously and the cicatrix ulcerated immediately afterwards and now presents the appearance of an indolent ulcer with thickened edges, raised above the wound and surrounding skin, and purple in colour. Treatment has reduced the thickened edges until they are level with the surrounding skin and the ulcer is cicatrizing. The pain is gone. The other case is one that has not been operated upon and is of two years standing. A line along the lower border of the pectoralis major marks the position of the ulceration. The nipple is gone and the area over the heart is composed of hard thickened tissue with a dense yellow mass, looking like the core of a huge boil, in the centre. Applications of X-rays in the same manner and of the same strength as in the other cases has brought about the healing process. The hard tissue is disappearing and is becoming soft, and the edges of the wound are showing healthy granulations.

I have two cases wherein success did not attend the exhibition of X-rays. One was a man 56 years of age who had had cancer of the stomach, for which he had been operated upon 18 months ago, and came back for another operation. It was then found that the stomach itself and the mesenteric glands were affected to such an extent that no surgical interference was likely to be of any avail. He was therefore handed over to X-rays without any hope of improvement. A tube was allowed to act upon his stomach at ten inches distance ex-