

be mistaken for leucorrhœa, and the hæmorrhages my patient at irregular intervals had been subjected to, viewed, as she informed me, as the approach of the menopause. Dr. Ashwell says of this disease—"The progress is exceedingly variable. In some constitutions its exhausting effects are long being realized, the losses being repaired very quickly; the appetite does not fail, the strength holds out extraordinarily, and it is long before emaciation occurs. It differs widely from corroding ulcer and cancer in the absence of pain and attendant evils, and the discharge has scarcely any fœtor. Thus, while death in one disease (cancer), is often preceded by suffering which creates a desire for its occurrence; in cauliflower excrescence (vegetating epithelioma), its approach is gentle, and life is gradually and almost painlessly extinguished."

In view of the general symptoms of this case, both at last seizure and during the previously irregularly occurring hæmorrhages, mistaken, I am inclined to think, for menorrhagia, the prodroma would seem to tally with the supposition of a vegetating epithelioma. To this, however, two objections may possibly be urged. The first, that there was no sufficiently distinctive history of cancerous diathesis; the patient having only a vague idea that her mother's death had been caused by such a disease. With the view of either confirming or negating this opinion, I addressed a letter shortly after the decease of my patient to the physician who had attended, or was said to have attended her mother in her last illness, requesting as a favor that he would inform me whether there was any ground for the belief of hereditary cause in the nature of his patient's ailment, but not having been honored by a reply, I am unable to lay before you evidence of hereditary tendency. The second objection that might be urged would be the absence of evidence in Dr. Zimmerman's microscopical report, of cancer cells. The natural outcome to this objection would be the question: are cancer cells so distinctive and unmistakable as to render their recognition all important for a correct diagnosis? I do not possess the intimate knowledge of metamorphosis and degeneration of tissues, to offer an opinion on this subject, and must limit, therefore, replies to such as I can gather from authorities within my reach. Muller, in his work on the nature and structural characteristics of cancer, remarks, "Carcinoma is no heterologous structure, and the min-

utest elements of its tissue do not differ in any important respect from the constituents of benignant tumors, and of the primitive tissue of the embryo. The elements of carcinoma are nuclei, cells, caudate corpuscles developed from cells, and fibres formed from caudate corpuscles. No other elements occur in benignant tumors. The gelatine yielding enchondroma and albuminous sarcoma, consist of cells. Sarcoma with caudate corpuscles contains the same elements as the corresponding form of medullary fungus. The gelatine yielding cellulo-fibrous tumor, the gelatine yielding tendino-fibrous, and the albumino-fibrous, are all like carcinoma, composed of fibres. The pigment cells of melanosis are repetitions of healthy pigment cells. The peculiar appearance of the white corpuscles in carcinoma reticulatum, and their reticulated arrangement, occurring as they do in but one form of carcinoma, do not warrant us in founding thereon any theory of the heterology of cancer." You may naturally remark, gentlemen, that these views bring us back to where we were before the microscope and chemistry were applied to the analysis of carcinoma, they certainly tend to impress the importance of a careful study of the general characters of the disease, and not to depend too much on the discovery of so called cancer cells. Possibly M. Muller, subscribes to the truth of the aphorism, "I was dogmatic at twenty, an observer at thirty, an empiric at forty, and now at fifty I no longer have any system." With regard to caudate corpuscles as a pathognomonic character of cancer, Schwann's opinions are decidedly adverse. He states that they are as frequently found in innocent as in malignant growths, that the external skin of the fœtus is entirely formed of caudate corpuscles, that they are also to be found in cellular tissue; that they are by no means peculiar to medullary fungus, often not existing in its substance, as frequently met with in non-carcinomatous, as in medullary growths. He considers them simply like germinal cells, an embryonic formation. A more recent writer, Rindfleisch of the University of Bonn, remarks on epithelial carcinomatous growths, "Were we to take into account every variation in consistency, colour and texture, we should find it difficult to get any two specimens of epithelial cancer, taken from parts of the cutaneous and mucous systems, which could be viewed as growths of an absolutely identical char-