locating diseased bone. In this case the boy had stepped on a nail several months before, and though the wound healed up at the time, it began to trouble him later, and I was able with the ray to diagnose caries in the base of the 5th meta-tarsal bone.

Now, returning to the therapeutic action of the ray, it has been used in the treatment of almost all known diseases, and in the majority of cases some improvement, whether permanent or transitory, has been reported by some worker. As always happens, however, at the beginning of every new path of study, there is a great tendency to exaggerate results.

The cumulative action, at first not recognized, is now very generally understood, and instead of the exaggerated notions regarding extreme idiosyncrasy, a knowledge of the methods of employment, which has been learned by experience, makes its use relatively safe.

Numerous types of apparatus for measurement of therapeutic dosage of the X-ray have been presented for the consideration of the profession, with convincing arguments from the point of view of the inventors, but at the present time none of the devices can be counted as reliable. The Chromometer of Benoist has perhaps met with the most favor by specialists in this line. are two important factors to be taken into consideration in the determination of X-ray dosage. First, it is a well-recognized fact that the X-rays projected from a high-vacuum tube have an intensity relative to the greater degree of potential required to overcome the resistance of the tube, and characteristically a greater capacity for penetration. Second, an equal number of rays from a low-vacuum tube have always a degree of penetration relative to the vacuum. The operator who is daily engaged with his X-ray tube becomes familiar with the quality of fluorescence, the relative intensity and volume of radiation, and his judgment, with systemic regulations of periodicity, time distance, and fluorescence, is the best guide for therapeutic dosage.

Now, to refer to some of the diseases in the treatment of which the X-ray holds an undoubted position, I will mention first some troubles of the skin, such as eczema, ringworm, favus, sycosis, acne, etc. I have now under treatment a case of psoriasis in which I am using the ray in connection with the brush discharge, with very pleasing results.

I come now to that all-important disease, cancer. Although many inoperable cases have actually been reported cured by reputable authorities, still we cannot yet hold out the hope that X-rays have proved themselves anything like a specific. But