

sidered remarkable at the time, because there was no external evidence of such an event as suppuration having occurred. The following autumn he returned with an enlarged glandular growth lower down, and apparently beneath the sterno-mastoid muscle. This was removed on October 13th; three small-sized glands were removed with ease without disruption of their capsule, and in each instance the gland was found in a condition of caseation. Recovery in this instance was rapid; the wound closed in the course of ten days. I met this gentleman during the early part of the present month, August, 1886. He is robust and healthy in appearance, and the two scars in his neck are so indistinct that they would be readily passed over by a casual observer.

CASE II.—March, 1874.—This was a young woman, aged 27. She had a glandular growth situated near the angle of the jaw on the right side. Had been under treatment for several months. The iodide of lead ointment had been used, and other internal remedies. She was pale, thin, and with a phthisical family history, her mother, a sister and a brother having died of phthisis. She consulted me in regard to the tumor, which was most unsightly. I advised its removal, and the operation was done on the 23rd March following. A single straight incision was made and three distinct glandular masses, softened and breaking down, were removed. A portion of the skin over the growth, which had thickened and was adherent, had to be taken away. Recovery was rapid. Six months after the removal this patient had greatly improved in personal appearance, and a very slight whitish scar was visible, but it was soft and non-adherent to the deeper parts.

CASE III.—M. R., aged 20, admitted into the Montreal General Hospital in April, 1883. This patient had been operated on before, and several glands removed from the upper part of the neck. There was a chain of glands, enlarged, extending down almost to the clavicle; two at the upper part, a little below the angle of the jaw, had suppurated, and several sinuses led into a lot of gland tissue, which was disintegrating and discharging. This gave her great annoyance, and had a marked effect on her general health. She was pale, anæmic in appearance, had a very anxious, troubled look, and was very much depressed in spirits. I

recommended their removal, and she willingly consented. The operation was performed on the 25th April. An incision to the outer side of the sterno-mastoid and reaching to the clavicle had to be made; from this quite a number of glands were removed—in fact, all that in any way were enlarged. Several were open and were discharging pus, these being situated at the upper part of the wound; lower down they were small, but all had softened, and contained cheesy matter. With some considerable difficulty they were all removed, the edges of the skin pared and brought well together, and the wound dressed in the usual way after Lister's method. The spray was used throughout the operation and subsequent dressings. On reference to my note-book, I find that the wound had quite closed on the 15th May, but she did not leave the hospital for several days thereafter. I may state that this young woman is at present in robust health, and from being a weak anæmic girl, she is now making rich blood, and has greatly improved in appearance. The scar is white but perfectly free, soft and pliable, and unattached to the deeper parts.

I have the notes of some eight cases in private besides ten or twelve performed at the Montreal General Hospital, making over twenty cases that have come under my own observation. In all the results have been quite satisfactory. The general health of all these patients has been greatly benefited by the removal of the glands. Several, from presenting an appearance of decided ill-health, exsanguine, anæmic, and in a state in which you would suppose a general break-up was threatened, have markedly changed for the better, and assimilation has greatly improved. Several of these patients have become quite healthy and robust, have increased in weight, and have in no way suffered from the removal of these important organs, which were in verity, before their removal, so damaged as to possess little, if any, functional activity. I cannot do better, in this connection, than endorse the conclusions of Mr. Pridgen Teale, in some very excellent clinical remarks made by that surgeon in reference to tuberculous glands: "That surgery can secure the healing, in a very few weeks, of sinuses and cavities leading to diseased or tuberculous glands, even though they have existed for years, and that in cases of caseous and suppurating glands, the action of the surgeon should be vigorous and thorough."