

how the removal of the sympathetic ganglia can possibly cure a condition which (if my experience of 77 per cent. of cures by operation is of any value), must be caused by some abnormal activity of the gland itself.

Whether the disease be due to the secreting by the enlarged gland of some toxic substance other than the normal secretion as was long ago argued by Horsley; or whether Graves's disease be merely an expression of toxic poisoning by a hyperactivity of the gland and an over-production of its normal secretion is still a debated point. In favor of the latter theory I would point out a fact that is very generally known, viz., that by feeding a healthy subject upon thyroid extract one can produce most of the symptoms of Graves's disease.

MALIGNANT GOITRE.

In this condition complete and early operation offers the only chance for the patient. Unfortunately, a sufficiently early diagnosis is not usually made, the neighboring glands being already involved. Even in such advanced cases the patient may be made fairly comfortable by partial removal, thus relieving pressure and making possible a future tracheotomy.

I have done a thyroidectomy in only three cases of malignant goitre, all females. One who was also suffering from Bright's disease died a week later from uremia. It was at her own earnest solicitation that I operated in this case. The second case; an old lady of 70, died two weeks after operation of exhaustion following a long journey to her home. The third died of recurrence six months after operation.

SIMPLE GOITRE.

In a series of 66 cases of simple parenchymatous goitre operated on, I have had three deaths. The causes of these deaths are of interest:

Case 1. A huge goitre in a girl, aged 17, which was causing very severe pressure symptoms, was easily removed. Twenty-four hours later, when I visited her, I found her extremely lively and clamoring for food. The nurse reported that the patient had been feeling so well all morning, that it had been difficult to keep her in bed and impossible to keep her quiet. Six hours after my visit she suddenly sat up in bed, screamed once and fell back dead. No autopsy was allowed. The cause of death was probably pulmonary embolus. This result impressed me with the wisdom of insisting in all cases and, especially where the operation field has been very large,