CARCINOMA OF THE PONS.

READ BEFORE THE KINGSTON MEDICAL AND SURGICAL SOCIETY NOV. 2ND.

J., aet. 52, married, two children. Family history—No tubercle, syphilis or malignant disease. Personal history—In the early part of '94 the patient noticed a small, painless nodule on the right breast just below and external to the nipple. It gradually increased in size, until in the autumn, it was about as large as an orange. She experienced at this stage an occasional severe darting pain in the breast and consulted her physician, who diagnosed scirrbus and advised immediate operation. Several months however elapsed before she consented to operative procedure.

By this time the tumor was firmly adherent to the skin and subdacent tissue; enlarged glands were found in the axilla, the right arm was slightly swollen, only a trace of the nipple remained. The supraclavicular glands were not enlarged.

On the 31st of January, '95, assisted by Drs. Alger and Moran, I removed the entire breast and cleared the axilla of all enlarged glands. Recovery rapid and uneventful.

For about three months she was morose and melancholy not caring to see her most intimate friends. She apparently recovered from this condition and for eight months enjoyed excellent health, gaining several pounds in weight.

About one year after the removal of the mammary tumor she began experiencing pain in the right occipital region with vertigo, had occasional convulsive seizures with momentary loss of consciousness. Speech dragging and incoherent. There were slight convulsive movements of right upper eyelid.

Admitted to the Hospital, July 2nd, in the service of Dr. Garrett. She had lost much in weight, was dull and apathetic. Her face was pale and expressionless. The temporal veins were engorged and prominent, pulse 80, weak, no arterio-sclerosis. There was well marked paras, as of 3rd nerve, right side. Dynanometer, right 30, left 20, about a narmal relation. No atrophy. Patellar tendon reflex unchanged. It required two or three efforts to bring the index finger to the nose with eyes closed, showing co-ordinating centres somewhat disturbed. Appetite good, by times ravenous. Bowels constipated,