Simple chronic endarteritis resulting in atheroma, found mostly in elderly people, especially in alcoholics and those suffering from chronic Bright's disease, gout or syphilis, may here be excluded, for the other arteries of the body were normal.

Chronic syphilitic endarteritis, found in the tertiary stage and affecting the tunica intima, particularly of the smaller arteries, may lead in the end to occlusion of the vessel.

Lastly, we have the obscure lesion of the vessels, known as endarteritis obliterans or proliferans, occurring independently of gout, rheumatism, tubercle, syphilis or other constitutional disease, and independently also of embolism or injury. Under this head one would put the case presented.

It is not known whether this disease is truly syphilitic or not. In some cases an undoubted negative history is obtained. The only suspicious circumstance in this case is that the patient gave birth to two premature infants.

The disease is characterized by a patchy thickening of the tunica intima of a main vessel, which narrows and finally occludes the lumen. This new tissue becomes vascularized and organized into fibrous tissue. This disease stands in need of a distinctive name, for other forms of arteritis are equally "obliterating," "proliferating," and "hyperplastic." For this we must wait until its cause has been ascertained.

John T., aged 49; occupation, farmer; married; six children, alive and well; father died of cancer; has two brothers and two sisters, all healthy; admitted December 7th, 1908.

Personal History.—Has always worked hard. Uses spirits and tobacco in moderation. Denies all venereal disease.

Present Illness.—Eight months ago attempted to lift a cow out of the snow. Three days afterward he felt pain in the testicle of the left side, but not very severe. The scrotum became much distended, but not as hard as now. This swelling was poulticed for a couple of weeks, without producing any change. It has become much harder lately.

The tumor is due to a vaginal hydrocele and an enlarged testicle. Operation was performed and a radical operation was done for the hydrocele. The testicie was represented by a flattened mass, 4 in. long and 2½ in. wide. A portion of this was removed for examination, as the consent of the patient could not then be obtained for castration. Prof. McKenzie reported that the specimen showed caseation, but no positive evidence of tubercle; most likely tuberculous. After this the