

assert themselves, either in childhood or later, is the best means of avoiding this disease.

*Hypertrophied Turbinals.*—Submucous linear cauterization is advocated by Pierce as superseding all other methods of reducing hypertrophied turbinals. The technique is simple and the advantages claimed are—cheapness of outfit, reliability, simplicity, not terrifying to nervous people, painless under cocaine, does not destroy mucous membrane, reaction slight, and much less than follow electrical cautery.

*Death after removing adenoids, due to hæmophilia*—This case, related by Dr. R. Sachs (Hamburg) died four days after operation, all means having failed to arrest the bleeding. The operation was done before the family failing was ascertained, the bleeding tendency being easily traceable. The importance of invariably asking before operation if any evidence of hæmophilia has been at any time noticed is emphasized.

## Selected Articles.

### TREATMENT OF INOPERABLE CANCER.

By WILLIAM B. COLEY, M. D., New York.

It is unnecessary to state here that however great were differences of opinion as to the value of operations upon cancerous tumors a quarter of a century ago, to-day we are practically all agreed that early and complete removal by the knife, while far from ideal in results, still furnishes the best hope of permanent cure of all the methods with which we are acquainted. This, it is needless to say, applies only to operable tumors, and here at once arises a difficulty in what shall we regard as operable and what as inoperable. Certain general rules may be laid down, but the classification of doubtful cases will have to be left to the personal judgment of the surgeon.

I believe that in recent years much harm has been done by surgeons attempting impossible operations, or performing operations upon patients in cases in which it was clearly impossible to remove the entire tumor. Not infrequently