

weeks increased. She gradually became drowsy; temperature, subnormal, respiration slowed; pulse, feeble and varied between 109 and 140; she could be roused, and talked rationally at times; pupils equal. Three days later the drowsiness deepened into coma; pupils became unequal, left much dilated, when death ensued. No post mortem could be obtained; but the case was so identical with one reported in the London *Lancet*, October 11th, 1890, page 767, under the care of Mr. Walsham, that I feel fairly convinced that we had a case of secondary deposit in or near the floor of the fourth ventricle, as in Mr. Walsham's case it was verified by post mortem, which pathological change took place as the result of the operation, whereby the urine was so much reduced in daily quantity, or was it only a coincidence? The same fact was noted in the case referred to.

And now, in conclusion, I would say that if in the near future any reasonable hopes can be held out through the perfecting of our present knowledge or physical means of determining the nature of the neoplasms in their beginning departure, so that radical means, either by the surgeon's cut or by seropathy, can be put into action at a much earlier date than at present we are able to do, then a great service to suffering humanity will have been rendered through the instrumentality of a noble calling.

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THE PRESERVATION OF GROSS MORBID SPECIMENS.—Melinkow-Raswedenkow (*Centralblatt für allgemeine Pathologie*) says that in the ordinary methods employed for the preservation of gross morbid specimens the tissues are so discolored or decolorized and shrunken that the natural picture of diseased alterations is changed to an artificial dissimilar one. In order to prevent such undesirable changes in specimens for permanent preservation, it is suggested: (1) To preserve the fresh tissue in pure formalin. In the formalin it is true that the tissue is decolorized a little, but the histological elements are fixed. (2) After removal of the formalin the tissue is placed in 95 per cent. alcohol, which brings back the color again in part. (3) The permanent preservation and final recall of the color and normal appearance is secured by a solution of acetate of potassium 30, glycerin 60, and distilled water 100. The method is not so well adapted for the preservation of the large organs as for the smaller ones, such as the kidneys and spleen. When the liver or other massive tissues are to be preserved, it is suggested to cut them into disks.—*University Medical Magazine*.