

removed the differential diagnosis can readily be made by making an incision into the tumor substance, and by examining a section of the tumor under the microscope. These polypi can be very readily removed, as the thrombosis of the vessels at the pedicle prevents hemorrhage, provided the pedicle is separated below the upper limit of the occlusion of the vessels. I have seen such black tumors as large as a man's head, between the thighs, entirely outside the labia. The so-called red degeneration is nothing more nor less than the early stage of necrotic change; the tissue has the appearance of being acutely inflamed and hence looks red.

*Calcareous Degeneration.*—Calcareous degeneration is more frequently found in the sub-peritoneal variety of fibro-myomatous growths; these growths become roughened on the surface, and owing to the presence of intraperitoneal fluid they are liable to simulate malignant disease; they may be found bobbing about in the fluid, and may as a consequence feel much like fetal parts. I have several times operated on such growths, when a diagnosis of probable malignancy had been made, and we were afraid that operative interference would be useless; under such circumstances it is always wiser to open the abdomen. When the tumors are removed, often by means of ligatures round the pedicle, the peritoneal dropsy disappears and the patients resume a normal condition.

*Malignant Change.*—Myxomatous degeneration in fibro-myomatous tumors is in my experience fairly common in proportion to the number of cases that undergo malignant change. I have never seen any other malignant change except myxomatous degeneration and sarcomatous degeneration; myxomatous degeneration is particularly prone to recur after removal of the tumor; this recurrence presents some interesting features; the peritoneal surface of the intestines and the parietal walls appear as if injected with gelatine, the bowels become stiffened and partly rigid as a consequence of this thickening of the coats; the disease has been called pseudo-myxoma-peritonei. The patients gradually become weaker and weaker and finally die with some of the symptoms of intestinal obstruction. When sarcomatous degeneration occurs in the tumor the tumor becomes rapidly enlarged, there may be some elevation of temperature, the patient's general health is not particularly affected, and there are no other changes to be noted; it is only after the tumor has been removed and has been cut into that the sarcomatous change is determined; the microscope then completes the diagnosis. After removal of the tumor the patients may be free from re-