

growth. Here and there are clumps of cancer cells, and a good deal of inflammatory small cell infiltration. This is probably what they call in Vienna in post-mortem reports *Carcinoma ventriculi ad basim ulceris rotundi*. Some reasons for pronouncing it a cancer due to chronic gastric ulcer are, first, the great predominance of fibrous tissue, the scarcity of cancer cell elements, the fibrous papilloma, and situation of the new growth where chronic gastric ulcer is usually seen.

Ewald says: "Chronic gastric ulcers may be classed among the predisposing factors," and proceeds to detail cases of direct transformation of ulcer into cancer seen by Lebert Dittrich and others, and quotes Brinton for cases "in which lesion, macroscopically an ulcer with thickened edges, was accompanied by unquestionable metastases in liver and lungs." In discussing such a case, only 26 years old, Flatow, of Munich, says "there was evidently at first a cicatricial mass, and this facilitated an atypical proliferation of epithelium. In about half the cases the pylorus is involved. In about 10 or 11 per cent. the cardia or lesser curvature, fundus least frequently, orifices favorite site, 70 to 75 per cent.

Dr. Peters reported a case of

INVAGINATED MECKEL'S DIVERTICULUM.

Baby U., age 6 weeks, under the care of Dr. A. R. Gordon.

At the time of birth Dr. Gordon noticed a pinkish protruberance at the umbilical opening. He tied the cord above this, but noticed that there was some escape of gas at the time. The cord separated normally, but gas and fluid faeces continued to escape in small quantities from the opening. It was observed that the escaping faecal matter had the same character as the motions.

The protuberance was clearly a pervious Meckel's diverticulum in a state of intussusception. It protruded about an inch and a half, being forced out somewhat during straining or crying, and receding slightly in the intervals. During the six weeks of life, the protrusion had increased considerably in size.

The case was operated upon, and made a good recovery. Meckels' diverticulum is an abnormality due to a failure to close of the proximal portion of the omphalo-mesenteric duct. In the process of development the umbilicus begins to be formed about the third or fourth week of foetal life by a growth of the blastodermic membrane, at first from the anterior and posterior extremities of the body, and a little later from the sides. In the sixth week the duct normally becomes obliterated, the atrophied vesicle remaining out-