

Is it not possible, therefore, that there is something wrong in our conception of cancer and its treatment? If any other disease presented such a steady and alarming increase in its death rate, would we not stop and consider if our treatment were the best possible? If with the introduction of antitoxin the mortality from diphtheria had steadily risen until it was about 90 per cent. of all cases, would we persist in employing it? And yet the profession and the laity go blindly on, with the idea that surgery offers the only hope of reaching cancer, when the mortality statistics of the United States show that under this line of treatment the death rate has *risen steadily* from 63 per 100,000 of the population in 1900, to 81.1 per 100,000 in 1915, or 28.7 per cent.

Surely the lesson taught by the steadily and greatly *decreased death rate* of tuberculosis should teach us something of the value of most careful dietary, hygienic, and medical control of other diseases. For the great white plague, which a while ago threatened even the destruction of the race, shows now a mortality which has steadily *fallen* 27.8 per cent. since 1900, and that even with the continued presence of the tubercle bacilli. I realize that the comparison is not quite correct in all respects, for it is well established that cancer is not due to a micro-organism; but it does show us that nutritive errors are at the bottom of the ravages of tuberculosis, and efficient biochemical studies in cancer have satisfied many that the same, although different in character, is true of this disease.

In other words, erroneous nutrition, which is productive of disease of the kidneys, heart, and blood vessels, with their steadily rising mortality of 10 to 20 per cent. since 1900, as shown by ample statistics, is operating to increase steadily also the morbidity and mortality of cancer, in spite of active and intelligent surgical treatment. And yet the profession and laity seem to be blind to this fact.

It is also not a little remarkable that during the year 1915, when there was a special effort made to educate both the laity and the medical profession in regard to the advisability or necessity of early operations in cancer, the actual death rate rose by 1.7 persons per 100,000 living, whereas the average yearly rise for the preceding five years had been only 1.2 persons per 100,000!

What then is the real problem of cancer? Surely it is not to increase the surgical activity, which has resulted only in a steadily ascending scale of mortality, which in reality is greater than that observed in any other malady! For the increase in the death rate from cancer throughout the United States from 1900 to the present time has been coincident with the greatest activity both in laboratory research and in the advanced surgery of the disease. I repeat, is it not time for us to stop and consider whether our laboratory work with the microscope on morbid tissues, and our ex-