

pora striata were markedly dilated. The choroid fringes were pale, brown and flocculent. On lifting up the fornix, the venae galeni were found dilated and distended with fluid venous blood. At the entrance of these veins into the straight sinus, there was a thrombus in the vein, but on micro-examination this thrombus was found to present the appearance of post-mortem thrombus. Lifting up of these veins exposed the dilated third ventricle, filled with serous fluid. Corpora striata and optic thalami on both sides normal, except a portion of the outer side of the left optic thalamus. Here to the outer side and behind was found a tumor mass measuring about two inches antero-posteriorly and an inch to an inch and a half from above down. This mass occupied the anterior and middle-portions of the occipital lobe and the posterior and lower mid portions of the temporo-sphenoidal lobe. It reached to the posterior cornu of the lateral ventricle but did not seem to involve the descending cornu, except at one point. This tumor was covered over externally and below by convolutions of the occipital and temporo-sphenoidal lobes. Below at one point it approached quite close to the under surface of the temporo-sphenoidal lobe giving rise to a slight area of retraction ($\frac{1}{4}$ inch square). This tumor on section was pale greenish yellow in color, and was clearly marked off from surrounding brain tissue though not encapsuled. A few small cystic spaces, never larger than a pea and containing serous fluid; were noted; no hæmorrhagic areas seen. Appearances to naked eye are those of a sarcoma. On microscopic examination of specimen from the edge of tumor it was found to be a pure sarcomatous growth showing no glia cells, *i e* neuroglial structure. It was made up of small round and spindle cells. The blood vessels were numerous and their walls formed of the cells of the tumor mass. Specimens taken from the centre, present like appearances plus microscopic hæmorrhagic areas plentifully noted throughout the sections.

Pons Varolii, medulla and cerebellum normal in all respects. Straight sinus, temporo-sphenoidal and lateral sinus contain fluid blood.

The interest in this case lies in the close simulation of Hysteria by the symptoms of this tumor; and the fact that even after suspicion had been aroused no other diagnosis than Hysteria