CASES
OF
FUNGUS HÆMATODES,
CANCER,
AND
TUBERCULATED SARCOMA,
WITH
OBSERVATIONS.

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THE first part of the Eighth Volume of the Transactions of this Society contains several of my cases of Fungus Hæmatodes, with observations. I there promised to describe some of the species and varieties of this disease, and to endeavour to trace the affinity it sometimes bears to carcinomatous affections; but fearing the paper would be considered too long, I reserved its completion until the present occasion, which I hope will not prove unacceptable.

Case of Fungus Hæmatodes in the lungs.

Mr. —, thirty years of age, of the middle stature and rather robust, of a fair complexion with red hair, by trade a cloth-presser, had been afflicted with cough and difficulty of breathing nearly two years, and had sought advice from some of the most eminent physicians in London.

By some, his complaint was considered asthma ; by others, phthisis pulmonalis. During the last six months of his life, the cough and dyspnoea had become so distressing, and the expectoration so profuse, as to induce him, by the advice of his friends, to consult a physician distinguished for his knowledge of diseases of the lungs. By this gentleman he was pronounced to be in the last stage of consumption.

I only saw the patient the day previous to his death. He was labouring under the greatest difficulty in breathing I ever recollect witnessing ; his countenance had a leaden hue, and his eyes appeared to protrude ; his pulse was full, hard, and intermittent ; and what he had expectorated, which was very profuse in quantity, looked like mucus mixed with a white fluid exactly similar to cream.

He was very hoarse, and complained of great pain in swallowing. With great difficulty he was

able to inform me of his having suffered for several months violent palpitation of the heart, accompanied with excessive pain in the right side of the chest, also under the clavicle, and along the under and inner part of the arm; that the least bodily or mental exertion increased the shortness of his breathing to such a degree as to threaten suffocation; and at those times he mostly experienced the sensation of fainting.

From this history of his case, and his not having had hectic fever, and being little emaciated, I did not consider the lungs in an ulcerated state; but there was little doubt of their being organically affected, and the symptoms strongly indicated a disordered or diseased condition of the heart, with some obstruction to the pulmonary circulation.

Dissection.

The heart was of an enormous magnitude, owing to the increased size of the left ventricle and thickness of its parietes, and would have been considered by Corvisart in an aneurismal state.

The auricles were greatly distended with very dark-coloured coagulated blood, but more particularly the left; and there was a considerable quantity of the same coloured blood in the left ventricle.

The pleura covering the lung and lining the chest on the right side, was thickly coated with organized coagulated lymph, and the adhesions between them were firm. The three lobes of the lung were converted into one firm elastic mass; but the upper anterior lobes formed at their root the chief bulk of the diseased structure, which adhered firmly to this side of the pericardium, the trachea and œsophagus being considerably compressed by the tumor. The right lung had degenerated into a white, moderately firm, pulpy, elastic substance, not unlike brain in appearance, which, when cut into, was found to contain a cream-coloured fluid exactly similar to that which had been expectorated. So much was the structure of the lung changed that it would scarcely have been recognized, had it not been for the small remains of cellular tissue, and the blue patches interspersed in the diseased production.

The disease had caused one side of the right bronchus to be absorbed, which allowed of its penetrating that part of the air tube, and had nearly closed it. The mucous lining of the trachea about an inch above where it divides into bronchi had a white shaggy appearance, and was loaded with cream-coloured fluid.

The pulpy mass was not possessed of high vascularity, which could not be expected, as the right

main branch of the pulmonary artery was so much compressed by the diseased growth as to render it almost useless, and the bronchial arteries could not be traced in the disease.

On the left side of the chest, the lung was distended with air to such an extent as to make it appear too large for its cavity. The arteries of the pleura pulmonalis were remarkably minute, numerous, and more beautifully displayed than I ever recollect noticing. There was not the least sign of inflammation, nor was there any appearance of disease in the substance of the lung; but the bronchial ramifications were loaded with fluid, similar to that which was seen in the lung on the right side, and the principal number of the bronchial glands were converted into a greyish pulpy substance, containing a thick white fluid; the other appeared to be enlarged, which was found to be occasioned by similar productions having been formed in their centres, whilst the glandular structure possessed its peculiar appearance.

Observations.

I have seen three more cases somewhat similar to the last described. The glandulæ bronchiales were changed into pulpy tumors, some as large as a swan's-egg pear, which pressed considerably upon the right and left division of the pulmonary artery; a large mass of the same structure occu-

pying the angle made by the bifurcation of the trachea, and lessening the caliber of the bronchiæ.

In M. Bayle's excellently arranged work on pulmonary phthisis, some cases and dissections of this disease are given, under the denomination of cancerous phthisis.

I consider the case I have just described, and the two succeeding, also those related by M. Bayle, as species of Fungus Hæmatodes, or similar to what Mr. Abernethy has termed pulpy or medullary sarcoma.

Case of Fungus Hæmatodes affecting the liver, without the disease appearing in any other part of the body.

Ann Kendall, a pauper, fifty-six years of age, was placed under the care of Mr. Barnett, surgeon, St. John's Street, on the 20th of October 1816. The patient was apparently of a robust and full habit of body, and had enjoyed good health, although she had for a series of years accustomed herself to the abuse of spirituous liquors. She was suddenly attacked with violent bilious vomiting, attended with excruciating pain in the stomach and bowels, the latter being greatly relaxed.

The liver was found projecting considerably beyond its boundary ; and when pressed upon, pain was occasioned in it, and also in the right shoulder. Bleeding, blisters, effervescing medicines, mercury, opium, and an infinite variety of remedies were employed without subduing the violent irritability of the stomach, and the bowels remained in a relaxed state, the evacuations being mostly clay-coloured and free from foetor. The pain in the liver and shoulder became more distressing ; there was also slight jaundice ; and as the stomach could not allow medicine in a solid or fluid state to remain in it a sufficient length of time to be of service, and nutriment being rejected, her powers sunk, and she died the eighth day from the attack.

Dissection.

There was not the least sign of peritoneal inflammation. The liver seemed to occupy nearly the whole abdomen ; it felt very firm, and its external appearance was of a dark green colour, with the exception of numerous whitish circular spots, immediately beneath its peritoneal covering. Those maculæ were various in size, the largest not exceeding an inch in diameter ; they had scarcely any projection ; the largest had central depressions, from the peritoneum having become cartilaginous, and there were a number of minute arteries supplying those diseased parts.

The gall-bladder did not contain much bile, it was extremely viscid, and nearly as black as pitch, but on dilution with water imparted a dark green colour.

The cystic duct, also the hepatic and common one, were completely plugged up with such morbid secretion as was found in the gall-bladder, and so considerable was the force required to urge it through these tubes in the direction it should pass to get into the intestine, that I was almost inclined to suppose that the inferior part of the ductus communis choledocus was obliterated.

With a view of better ascertaining the morbid structure of the liver, I injected it with subtile injection. Sections shewed that the principal bulk given to that viscus was by an addition of tumors, which pervaded pretty generally its substance and surfaces. That part of the liver not beset with tumors was of a very deep green colour, as if the pori biliarii had diffused their contents instead of conveying them to their main tubes ; and so completely was the dye given, that nothing of the natural arrangement could be detected. The tumors were composed of pulpy white matter, from which an abundance of fluid similar to thick cream could be expressed ; they were retained by reticulated cellular membrane and new formed coagulated lymph.

The tumors were not enveloped by capsules, but so intimately connected with the remaining structure of the liver, as to induce me to suppose, there must have been first interstitial absorption, to allow the vessels to take on the office of depositing these diseased masses. The liver was not much tinged with the coloured injection, except in the boundaries and substances of the tumors, which, with the green, gave a diversified appearance to the whole.

There were not any other signs of medullary tumors in or on the viscera of the abdomen. The spleen was enlarged, but not diseased; and the mucous coat of the stomach and intestines was loaded with blood, and appeared very red. The thoracic viscera were perfectly healthy.

Observations.

This is another proof of this disease affecting an important organ of the body without its being disseminated to other parts. And I think it will be admitted, that the diseased condition of the liver occasioned a morbid functional effect, which produced a nervous or sympathetic disorder of the other digestive viscera, and caused the death of the person.

In Mr. Wardrop's observations on Fungus Hæmatodes, he says, he never knew the liver to be

affected with Fungus Hæmatodes in any individual in whom the same disease had not first appeared in some other organ.

Case of Fungus Hæmatodes affecting the external part of the body, also most of the abdominal and thoracic viscera.

Master Fisher, who had from his birth evinced a more delicate constitution than is usual with children born and nurtured in the country, was observed to have a swelling the size of a small nutmeg, on the front of the forearm, about two inches above the wrist, with an inclination nearer the radius than the ulna. The boy at this period of the disease was only three years and a half old. In consequence of the gradual increase of the swelling, although there was not the least pain experienced, the child was placed under the care of my friend Mr. Snow, surgeon, Highgate.

The tumor was hard, and insensible to pressure. Means were employed to retard its progress, and for its dispersion, without effect, as it still continued to increase.

In the course of eighteen months from the commencement of the swelling, it attained only the size of a large orange; during its progress, very

little uneasiness was complained of, nor was the power of the flexor tendons materially interrupted or œdema occasioned.

Not the least inequality of the surface or substance of the tumor was discernible, nor had there been any increase of temperature or discolouration of the skin during the morbid growth, until about three weeks previous to the removal of the forearm; when pain was complained of, the skin covering the swelling became rather hot, and shewed that dappled purplish hue, which is generally noticed in the latter stages of this disease.

There was not that degree of elasticity in the diseased part, which helps to give its specific character, until it had grown to a considerable size, and gradually attained a conical projection; from this time the springiness increased, and a few days before amputation was decided upon, the fluctuating sensation appeared so decisive, as to induce Mr. Snow to make a small opening with a lancet. About half an ounce of thick dark-coloured blood escaped, the tumor retaining its elasticity.

A few hours after the opening was made into the tumor, a fungus protruded, which increased in a most surprising manner, from which there was a foetid bloody discharge.

The boy's health had not been materially affected

till this period. Mr. Astley Cooper saw the patient, and advised amputation of the fore-arm. The operation was performed by Mr. Snow on the 1st of May 1816, four days after the fungous protrusion, and about nineteen months from the first appearance of the morbid growth.

On dissection, the disease seemed to have its origin in the cellular tissue connecting the thecæ of the flexor tendons, and had made its way between those parts and the median nerve to the integuments, without occasioning the least disease in the former parts. The internal structure presented a firm, elastic, pulpy mass, mixed with coagulated blood; but the blood-vessels were small, and not numerous. The fungous substance had a sloughy fibrous appearance.

The stump healed tardily; the patient's health did not improve. About a month after the operation a small tumor was observed immediately above the left clavicle, about half an inch from its sternal extremity, partly covered by the clavicular portion of the musculus sterno-cleido-mastoideus. There was also a similar swelling in the left axilla. Those swellings felt and looked like indurated scrofulous absorbent glands. The tumors increased, and shewed the external character of the one which obliged the patient to submit to amputation.

Shortly after the appearance of the last described

enlargements, the patient's health became more affected, and he was teased with a frequent, dry, short cough, and dyspnœa.

The progressive stages of organic lesion of the lungs were evinced by the increase of distress in breathing; and the difficulty with which the pulmonary circulation was performed was denoted by the leaden colour of the lips and other features. None of the symptoms of hectic fever were present, nor was there that emaciation of the body, which we notice in tubercular phthisis.

The patient lived till the 9th of August 1816, nearly four months from the time the arm was amputated.

Dissection.

The tumor above the clavicle, and that in the axilla were examined first; the integuments covering them were neither discoloured nor diseased; each tumor had acquired the magnitude of a hen's egg; they possessed cellular capsules, and appeared to have their seat in that tissue.

A section of the morbid growths shewed a semi-cartilaginous structure, with a white pulpy substance, mixed with a small quantity of grumous blood; the absorbent glands in the axillæ, also

those concatenated in the neck, being perfectly healthy.

The stomach and intestines were greatly distended with air; and it was remarked that the stomach, spleen, and liver were depressed considerably lower into the abdominal cavity than is natural, by the contents of the chest having been pushed downwards, and the diaphragm yielding.

There was not the least sign of disease in the liver. The spleen was rather firm, not unlike liver; and there were three small white pulpy tumors, each about the size of a garden pea, near its right edge, immediately beneath the peritoneal covering.

The stomach and intestinal canal were healthy, except a few tumors exactly similar to those on the spleen, found beneath the serous coat of the ilium.

There was not any appearance of disease in the mesenteric glands, nor in the absorbent ones beneath the peritoneum; but there were two small tumors on the anterior surface of the right kidney, of the same character as those just described.

On removing the sternum, a quantity of bloody fluid flowed from the left side of the thorax. This side of the chest appeared filled (except the small

cavity produced by the fluid which escaped,) with broken down coagulated blood, and a pulpy mass, in consistence and appearance so exactly like the *cerebrum*, that I think an anatomist would have been deceived and led to imagine it to be brain, if he had been asked to give his opinion from the structure, without knowing the place in which it was formed.

This pulpy mass had accumulated in such an enormous quantity on the *pleura pulmonalis*, as to push the heart considerably beyond its usual situation into the right side of the chest, besides having, as I before mentioned, encroached on the abdominal cavity. A perpendicular section of the disease proved it to be principally formed of a congeries of various sized tumors, some as large as a small lemon, and all possessing delicate cysts. The consistence of those tumors was chiefly a brain-like mass, mixed with coagulated blood; but the largest kind were not unlike those described in the axilla and above the clavicle.

In the section the lung was recognized, but so much condensed by the surrounding disease, that it must have been completely useless in respiration, for a considerable time previous to the boy's death. This appearance also proved that the tumors had grown more from the surface, than the substance of the lung; and this opinion was corroborated by the state of the lung on the right side, the

tumors there occupying chiefly the surface beneath the pleura, many of which had by their growth occasioned absorption of that membrane, which allowed of their growing into the cavity of the chest, and would have produced, if the child could have lived much longer, a morbid growth like that on the left side.

Some of the tumors on the external part of the lung were as large as a walnut; there was also a progressive series of them, from the size of a pepper-corn to the magnitude above mentioned. They projected considerably from the lungs; their external appearance was delicately white, as if possessed of low vascularity; figure roundish, without any central depression; and each had its cyst. Their internal arrangement, more especially the larger kind, was a blended admixture of a semi-cartilaginous and pulpy matter, with small coagula of blood, but the smallest were exactly like the medullary part of the cerebrum; but none of them were divided by cellular septa or coagulated lymph.

Slight inflammation had existed on the pleura pulmonalis, as the three lobes of the lung were partly united by very delicate adhesions; but the pleura costalis had not been affected. The ramifications of the bronchial tube were loaded with a dirty looking mucus mixed with blood, unconnected with inflammation of the mucous lining.

The heart was perfectly healthy, as was the internal surface of the pericardium; although its external part was loaded with the disease, and those portions of the phrenic nerves which pass over each side of it, were with difficulty dissected out.

I injected the right lung with size and vermilion, from the pulmonary artery, which made it and the capsules of the diseased growths red. The capsules were very vascular, particularly their internal surfaces; but few vessels entered their contents, which led me to conclude, that the arteries supplying the capsules were the principal agents in secreting these heterogeneous substances.

Observations.

These capsules are not so vascular as those in which the matter is intersected by cellular septa, which might *a priori* be conceived, as this substance cannot be produced or supported without blood-vessels. I do not consider the matter secreted, which forms the various kinds of fungoid or scrophulous tumors, as possessing vitality; that must only belong to the vessels which deposit such foreign matter.

In those instances where the tumors of this denomination are not covered with cysts, the parts on or in which they are seated are rendered consi-

derably more vascular than natural for the production of such secretions.

Case of Fungus Hæmatodes on the external part of the body, and in the lungs.

J. P——, a weaver, whilst shaking a bed, suddenly felt a severe pain, and, as he termed it, “a crack in the left side.” On examining the part about a quarter of an hour afterwards, he found a lump as big as a small tennis-ball at the part where he felt the sudden and acute pain, namely, about midway between the crista of the ilium and margin of the false ribs. There was no discoloration; the pain soon abated, but the tumor slowly increased in size, without occasioning pain. About three years from the commencement of the swelling, a surgeon saw the patient and handled the part very roughly, with a view of ascertaining its nature and internal limits. From this time the tumor was supposed to increase; the growth was unaccompanied with pain, and the patient’s health continued unimpaired. The tumor acquired almost an incredible magnitude; very large veins were seen ramifying on its external surface; the skin became discoloured, and the swelling conical; he now suffered severely from pain, and the integu-

ments began to ulcerate about the middle of August 1814.

His health began to suffer, and he was troubled with cough and dyspnœa ; there was considerable hæmorrhage from the tumor, and a constant copious sanious discharge. The integuments and principal part of the convexity of the tumor sloughed ; the discharge was immense, and from the extreme unpleasantness of the foetor, the poor fellow was in a most deplorable state. His powers gradually sunk, and he died at the latter end of October 1814, in the forty-sixth year of his age, and seven years from the first appearance of the swelling.

Dissection.

The tumor presented, to use the words of Mr. Pott, a strangely distempered mass. The external sloughy surface had a fibrous appearance ; the internal structure was composed of masses of coagulated blood, firm, gelatinous, and medullary matter, and several distinct white tumors of a semi-cartilaginous density ; the whole seeming to have had their seat in the adipose membrane.

There was not the least appearance of disease in any of the abdominal viscera. But the lungs were nearly filled with tumors, many as large as a small apple. Most of the tumors felt extremely

firm and elastic; when cut into, some appeared composed of a substance not unlike blanchmange; others had more of the medullary character, and some were similar to the semicartilaginous parts of the external tumor, only not quite so firm. The capsules were rather thick, and many of the veins were plugged with pulpy matter.

Observations.

This case, the preceding, and the third related in my paper in the first part of the Eighth Volume of this Society's Transactions, I consider as varieties of Fungus Hæmatodes.

Mr. George Young occasionally saw the patient. To my friend Mr. Hodgson I was indebted for the opportunity of being present at the inspection, and the privilege of taking specimens of the diseased parts.

Case of Fungus Hæmatodes excited by Cancer Scroti.

William Lawrence, fifty years of age, a chimney-sweeper, was admitted into the sick ward of Cripplegate Workhouse, on the 25th of October 1815, with what has been denominated cancer scroti. The disease was on the right side of the scrotum, and had existed eight months. The

fungus was about an inch and a half in diameter, and had proceeded gradually from a small excrescence or wart. The integuments surrounding the diseased part were of a schirrous density, particularly the edges, which curled outwards; there was a considerable discharge of ichor, and frequently of blood. As the spermatic chord and inguinal glands were not contaminated, and his health had not been seriously impaired, I proposed extirpation of the diseased part as the only chance of saving his life, which he was anxious to have accomplished.

I performed the operation on the 5th of November, assisted by my friend Mr. Kingdon, surgeon. The disease having affected the tunica vaginalis, and from the testis not being considered of much importance to the patient, its removal was thought prudent, to prevent the possibility of the disease being communicated to that gland.

On inspecting the amputated parts, the tunica albuginea and testicle were found perfectly healthy, as also the spermatic chord.

A section of the tumor presented a medullary substance, with small portions or patches of coagulated blood, and orifices of minute blood-vessels. Although the density of the growth was considerably greater than that of brain, moderate

pressure with the fingers reduced it into a pulpy consistence.

The diseased integuments were schirrous, but without those ligamentous bands which are said to characterize carcinoma.

Although it was necessary to secure by ligatures four superficial arteries, beside the spermatic, the incised integuments nearly healed by the first intention. The patient's health and spirits improved daily, and I entertained considerable hope of his doing well, until the 20th of November, when he began to complain of great pain in the situation of the tuberosity of the ischium. Considerable swelling and induration were found in that part, extending to the perineum. The part was poulticed, the swelling and pain daily increased, and he had frequent retention of urine, which was relieved by the introduction of a gum elastic catheter into the bladder. He had also great pain and difficulty in voiding his fæces,

The integuments assumed a purple hue, and the tumor acquired that elastic feel, with a sense of fluctuation, which so strikingly characterize diseases of the fungoid tribe.

On the 25th, the apex of the swollen part was very conical, and seemed merely covered by cu-

ticle. As the pain from the great distention was very distressing, I made an opening into the tumor, which gave outlet to a small quantity of thin bloody fluid, which moderated his sufferings. After this a fungus of a reddish and sloughy appearance protruded, bearing not the smallest resemblance to that removed from the scrotum. This growth increased, and the integuments were rapidly removed by the absorbents to give it egress; and there was considerable swelling and induration of the surrounding parts. The constitution now began to take the alarm; his health was affected; and on the 30th, the upper inguinal glands on both sides became diseased and enlarged rapidly; they were very painful, and felt elastic; the integuments were discoloured like those before described; the skin was gradually absorbed, and it was imagined the cuticle would be removed to allow protrusion of the projecting tumors.

The patient's health daily declined; the fungous growth increased in the perineum and bled freely; the swellings in the groins also enlarged, but did not completely destroy the restraining coverings; the retention of urine was relieved by the use of a catheter.

On the 6th of December, irritative fever commenced; the fungous growth sloughed, he sunk gradually, and death completed the business on the 11th of December 1815.

Dissection.

The diseased external parts were first examined. Most of the muscles arising from the ramus and tuberosity of the ischium, particularly the adductor longus and the gracilis, had become for a considerable distance so much altered by the intruding fungus, that their muscular fibres could scarcely be distinguished. The disease had also spread over the whole perineum, disorganizing the muscles. The tumor pressed firmly against the bulb and membranous part of the urethra, and had reached within the pelvis to the inner and upper part of the pubis, (on the left side,) having occasioned absorption of the periosteum and of the bone.

When the fungous mass was cut through, it was seen to consist of loose cellular substance, parts of which were in a sloughy state, coagulated lymph, minute blood-vessels, and a considerable quantity of fluid similar to thick cream, which fluid could be pressed out in abundance from the tumor. There were also several spiculæ of bone, which in all probability had been separated from the pubis and ischium.

The liver was very large, and contained a great number of various sized pulpy tubera, mixed with coagulated blood and a cream-like fluid.

Some of the tubercles were very small; the largest were near the surface of the liver, and none exceeded the magnitude of the common walnut. They all had delicate cysts, and the contained matter was retained by beautiful reticulated lymph. The large kind were formed by an aggregation of the smaller; they did not project far from the surface of the liver, but had a slight central depression, without the peritoneal covering being thickened; but the blood-vessels were very numerous in those parts, and most likely would (if the man had lived much longer) have occasioned that cartilaginous opacity mentioned in some of the former cases. The gall-bladder contained apparently healthy bile, which I have often noticed even in the greatest state of changes of structure. All the other viscera of the abdomen were free from disease, but the lumbar absorbent glands were changed into tumors exactly similar to those in the groins.

The bladder, although it contained a large quantity of thick foetid mucus, was perfectly healthy, with the exception of a polypous growth about the size of a cherry, with a long thickish pedicle, which had its origin from the mucous surface, immediately above the third lobe of the prostate.

The urethra was free from strictures, but the mucous surface of the membranous part was greatly

inflamed by the pressure and irritation occasioned by the disease in the perineum.

With the exception of old adhesions of the pleura, the thoracic contents were in a healthy condition.

Observations.

I have never seen a patient recover from chimney-sweepers' cancer, where extirpation of the diseased part was performed when the diseased action had affected the inguinal glands. In all those I have had an opportunity of seeing in hospital and private practice, the disease attacked the lumbar and abdominal glands; and frequently the viscera of the abdomen and thorax, occasioning hectic, sometimes irritative fever, terminating in death.

Case of Fungus Hæmatodes excited by a carcinomatous affection of the penis.

John Wall, aged fifty-one, who had led a very dissipated life, was admitted into St. Bartholomew's Hospital with a diseased state of the glans penis, accompanied with phymosis, which was on his admission supposed by Sir Charles Blicke to arise from a syphilitic sore. The man was put into the

ward for the reception of venereal patients, where he used mercury for a fortnight. This plan, instead of checking the diseased action, aggravated it, and brought on a violent inflammation and swelling of the penis. In consequence of this change, the patient was removed into a clean ward, and every attempt was made to subdue the inflammatory action, but in vain; for his health became seriously affected, and the end of the penis sloughed off. His health, after a considerable length of time, improved, but the sore could not be made to heal; the granulations were large, soft, and had a glossy appearance, from whence there issued a bloody, ichorous, fœtid discharge, and the integuments surrounding the disease became extremely thick and hard, and he experienced great pain.

At this time the disease was considered cancerous; the inguinal glands on both sides became painful and enlarged; his health again declined, he left the hospital, and was admitted into the sick ward of Cripplegate Workhouse on the 26th of June 1813. There not being any probability of curing the disease, a plan of treatment was adopted merely to lessen the morbid sensibility of the nervous system, joined with a simple unirritating regimen.

The inguinal tumors increased slowly; they were very hard and painful; there was a very copious discharge of offensive ichor mixed with

blood from the diseased remains of the penis. Cataplasms of linseed meal and strong opiate lotion were applied to the swellings, and carrot poultice to the penis.

Conium, hyoscyamus, opium, and other sedatives were successively given in considerable doses gradually increased, which assisted to lessen his sufferings. The bowels were with difficulty kept regular, and the motions were mostly very dark coloured and extremely foetid, which made the occasional use of the blue pill necessary. From the stump of the penis there was frequent hæmorrhage; sometimes the granulations looked healthy, as if cicatrization was about to commence, but those appearances were only of short duration, and were succeeded by slow sloughing and absorption of parts, which, in the course of about four months, extended to a level with the pubes.

The patient's health became seriously affected; he was greatly emaciated, and looked extremely sallow; the tumors in the groins by this time had increased considerably; they occasioned distressing pain, felt firm and elastic, and the integuments were of a purplish colour, but not much increased in temperature.

On the 28th of October 1813, the integuments in the right groin began to slough, and there was a discharge of blood and ichor, which did

not occasion much reduction of the size of the swelling.

The ulcerative process likewise continued on the pubes. He was now in a deplorable condition, and his mind extremely wretched. A sloughy fungous growth shot out from the diseased parts where the integuments had been destroyed, from which there was a copious discharge of ichor frequently mixed with blood. The sloughing and ulcerative actions proceeded gradually on the pubes, and destroyed the whole of the skin of the groin, and a considerable portion belonging to the abdomen and thigh. So distinctly were the pulsations of the femoral artery seen, that it appeared naked; and although vessels thus situated do not frequently ulcerate, yet I fully anticipated hæmorrhage in this instance.

With a view of correcting the disagreeable fœtor of the discharge, that he might be less noisome to himself and the other patients in the ward, carrot poultices, charcoal, and oxygenated muriatic acid were at different times employed. From the violence of the pain and burning heat he complained of in the sore, opium was obliged to be taken in large doses, two or three times a day, the other sedative remedies not having the desired effect, although given in very large quantities. The bowels were kept soluble with castor oil.

It is scarcely necessary to notice, that the poor creature's health almost daily declined ; he was reduced to a mere shadow, and became extremely irritable. The fungous part separated and was discharged, which left a deep ragged looking ulcer, with thick, hard, irregular edges ; and there was not the least attempt at reparation during the whole course of the disease, except on the penis, which I have noticed. Hectic fever, if I may be allowed the expression, of a slight kind, came on about the middle of December, which continued till the 12th of February 1814, when the irritative or typhoid commenced, which ended his misery on the 19th of the same month.

Dissection.

The chain of absorbent glands from the abdominal rings to the diaphragm, on both sides of the body, were greatly enlarged ; some had acquired the size of a pigeon's egg ; they felt soft and elastic ; when cut into, their natural structure appeared to have been removed, and a pulpy greyish matter mixed with a thick white fluid supplied their place, which seemed to have been produced by the vessels of the capsules belonging to the original glands.

Many of the mesenteric glands had undergone a similar change ; there were also several of those

tumors in and on the surface of the liver and in the lungs, but they were without capsules; those in the lungs presented appearances common to the early stages of the disease, consequently the specific excitement had not long existed in those viscera.

There was not any disease in the internal coat of the iliac or femoral artery; but the accompanying vein was filled completely from two inches below Poupart's ligament to the internal iliac, with a medullary matter similar to that occupying the place of the diseased absorbent glands, which adhered so closely to the inner surface as to lead to the supposition of its having been secreted there, particularly as there had not been ulceration from without inwards, to allow of such matter obliterating the vein.

The external disease, with the bones of the pubis, the bladder, and remaining organs of generation, were removed to be preserved.

Maceration shewed that the ulcerated parts were thickly coated with organized shaggy lymph; and the vasa vasorum belonging to the blood-vessels had poured out lymph abundantly to defend them from the ulcerative destruction, which I have repeatedly noticed where arteries have been insulated by surrounding disease, on the external part

of the body or in important viscera. This fact I have frequently remarked in the lungs of those patients who died with vomicæ, and satisfactorily accounts for the infrequent occurrence of hæmorrhage in the last stage of phthisis.

The penis had been destroyed as far as its bulb; and the bladder, from having been rendered extremely irritable by the diseased condition of the urethra, and incapable of retaining much urine, was very small in size; its coats were greatly thickened, and the internal surface of the mucous one was slightly coated with coagulated lymph. There was not the least appearance of disease in the testes; but the right was drawn up very firmly to the abdominal ring, which had been occasioned by the ulceration having destroyed the inferior part of the fascia of the external oblique muscle, which exposed the internal oblique, and produced inflammation, retraction, and a thickened state of the cremaster muscle.

In the left groin the tumors had attained a considerable bulk, but the skin had not ulcerated. Their consistence was like the other morbid parts, with the addition of a greater proportion of coagulated blood.

*Case of carcinoma in the breast, with pulpy tumors
in the lungs, liver, and ovaries.*

Catherine Carter, a married woman who had never borne children, was admitted into the sick ward of Cripplegate Workhouse on the 17th of November 1814, in the forty-sixth year of her age.

The patient informed me of her having a diseased breast, which had troubled her above twelve months; and that she had been under the care of Mr. Astley Cooper in Guy's Hospital, which place she left in consequence of that gentleman's wishing her to submit to its removal.

It was the left breast that was affected, which was much larger than the right, and felt extremely hard and nodulated, but it was moveable on the pectoral muscle; the nipple had sunk, its edges were puckered, and there had been frequent oozing of blood through the lactiferous foramina.

As the poor woman's health was not seriously disordered, and there not being any sign of disease in the axillary glands, I considered amputation afforded the only probability of her recovery, which I strongly urged her to agree to; to this she could not make up her mind.

The menstrual periods had ceased about fourteen months previously to her coming into the workhouse. She complained of darting pains in the tumor, and of a burning heat and great degree of tenderness in the breast; her bowels were mostly costive.

Leeches were frequently applied, and poultices of linseed-meal and opiate lotion twice a day; the general state of her health was also attended to.

On the 16th of January 1815, she left the workhouse, and obtained admission into St. Thomas's Hospital, where she was placed under the care of Mr. Cline, Jun. Her breast ulcerated during her stay in the hospital, and she had frequent hæmorrhages from the part, which, with the pain and disturbed rest, reduced her state of health greatly. She was discharged incurable from this institution, and was re-admitted into Cripplegate Workhouse on the 29th of June, 1815. At this time there was a large deep chasm made in the breast by sloughing and ulceration; the edges of the ulcer were extremely hard, partly inverted and retorted; there was likewise a considerable ichorous discharge. The integuments surrounding the diseased part had a purplish appearance, and there were several tumors immediately beneath the cutis, which occasioned violent pain; and there was that peculiar leaden hue of countenance, and high

state of nervous irritability, which are noticed in carcinomatous and fungoid affections.

Carrot, turnip, and charcoal poultices were at different times employed, and opium was taken to mitigate her sufferings. There were occasionally fungous productions from the diseased parts, but their duration was short, as they sloughed, and their separation was mostly accompanied with considerable hæmorrhage, which continued with more or less violence for a week or ten days, then was succeeded by a profuse ichorous discharge which occasioned distressing pain. In this manner the disease committed devastation of the breast, without destroying in the same ratio the integumental parts ; so that there was a deep foul-looking excavation produced.

The glands in the axilla participated ; they became painful, enlarged slowly, and were remarkably hard ; and the arm became oedematous. A great number of small tumors appeared beneath the skin on both sides of the neck, also of the chest and abdomen, as if the sebaceous glands were diseased, the skin covering them having a bluish tint. In proportion to the apparent local mischief did the state of health decline. About seven months from her re-entering the workhouse, the virulence of the cancerous affection in the breast seemed to have (if such an expression is allowable) exhausted or worn itself out, as the

discharge rapidly lessened, the edges of the ulcer contracted, and lymph appeared to be formed by the vessels belonging to the pectoral muscle ; and in this manner was a film or covering given to the ulcer*, which answered the purpose of one produced by granulations ; but the edges of the ulcer and remaining parts of the breast were schirrous. After this unexpected change, the disease in the axillary glands began to be more active ; the lungs became affected ; a state of febrile affection, something similar to what is called hectic, was occasionally present ; there was great dyspepsia, constant nausea with pain in the bowels, and diarrhœa, which carried the patient off on the 26th of April 1816.

Dissection.

The tumors scattered on various parts of the body, although they felt extremely hard, were of a firmish, red, pulpy consistence, and had cellular capsules.

The schirrous remains of the breast had formed close union with the pectoral muscle, and had

* In the way I have noticed in patients with sloughing phagedæna on the penis or in the groin ; and a process something similar takes place occasionally on the exposed periosteum covering diseased bones, as in necrosis, where the action of the absorbents in removing the dead bone happens to be very slow.

occasioned a morbid thickening of that portion with which it was in contact.

A clean longitudinal section of those parts and the axillary glands, presented a very dense white substance with small patches of pulpy matter similar to the external tumors. There were a few irregular appearances of condensed cellular substance, such as we notice in any hardened part of the body, occasioned by disease not of the malignant class ; but none of those firm whitish ligamentous bands, arranged in the way which authors who have described the genuine carcinomatous affection of the breast have discovered. Nor have I been so fortunate as to meet with a single specimen of this description, although I have examined a great number of carcinomatous breasts ; which induces me to suppose, that the nature of carcinoma has become as much modified as the genuine chancre described by that very accurate observer Mr. Hunter.

In carcinoma of the stomach, where there has been considerable interstitial deposition between its coats, I have noticed that the cellular tissue has become thick, and its natural arrangement very obvious, and resembled in a slight degree those fibrous ramifications which are said to give character to cancer in the breast.

These ligamentous bands are very apparent in

the fleshy tubercles frequently met with beneath the peritoneal covering of the uterus, and in the substance and cavity of that organ; yet I believe they have never been found in an ulcerated state.

The lungs were free from adhesions, and there was not any appearance of inflammation of the pleuræ; but there was a thin white layer of stuff beneath the pleuræ pulmonales, not unlike recent mixed whitening or plaster of Paris with water; which appearance I have frequently met with on inspecting the lungs of cancerous patients.

The bronchial ramifications were greatly loaded with very white mucus; and there were a great number of tumors (none of which were larger than a marble) in the substance of the lungs, some pulpy of a brownish red colour, others of the medullary kind, but without cysts.

There were also several of those tumors between the layers of the omentum, and beneath the serous covering of the intestines; the liver seemed to have its principal bulk given by tumors of this description, only of a rather larger size, and the gall-bladder was filled with viscid black-coloured fluid.

There was not any appearance of disease in the substance or cavity of the uterus, except a greater

degree of rigidity of the os uteri than we generally find; but the ovaria were increased in size, their place having been occupied by a deposition of reddish pulpy matter similar to some of the before described tumors.

Observations.

The uterus is known to be subject to carcinomatous affections; it is also liable to a variety of diseases which have the common appellation of cancer. The cervix and cavity of the uterus are sometimes attacked with Fungus Hæmatodes, which disease is equally as unfavourable in its termination as the cancerous, and is mostly accompanied with the pulpy species of tumors in the abdominal viscera.

Case of carcinoma of the breast, with pulpy tumors in the lungs, liver, &c.

On the 20th of September 1816, Mary Caine, a poor Irishwoman, was brought into Cripplegate Workhouse. She had been in an indifferent state of health upwards of six months; she was greatly emaciated, and had a frequent, short cough, with a copious expectoration of very white mucus, accompanied with great dyspnoea; pulse 120, extremely small and weak. She complained of vio-

lent pain and tenderness in the right breast, which had teased her upwards of three months. On examination I found the mamma, although very small, extremely hard, and immoveably adherent to the pectoral muscle; the skin covering the breast was closely studded with very hard, distinct tumors, none of which exceeded the size of a common garden black currant, and the integuments could not be pinched up. There was not any puckering of the nipple, nor were there at this time any other tumors observable. The fate of this poor creature being obviously decreed, it was not in my power to do more than to make her time here as comfortable as I could, by such remedies as tend to assuage bodily and perhaps mental pain.

The pulmonic affection gradually increased; the catamenia ceased; tumors similar to those on the breast appeared in vast numbers in the integuments of the neck, chest, and abdomen. She became extremely irritable and very sallow, as most patients do labouring under cancer.

About the 20th of February 1817, hectic fever commenced; the morning perspirations were profuse, and the discharge of mucus from the lungs considerable.

The axillary and inguinal glands enlarged; the bowels, which had during her illness generally been

disposed to be obstipated, became violently relaxed, and she died on the 24th of March, in the thirty-second year of her age.

Dissection.

None of the tumors on the external part of the body had acquired a bulk larger than a small marble, except those in the axillæ and groins, and they were each as big as a walnut. Although the skin covering most of them had a morbid bluish colour, yet there was not the least sign of beginning ulceration. Sections of those productions presented a brownish red-coloured structure, which was very compact; but when scraped with the edge of a knife, it looked like broken down liver and coagulated blood. The diseased breast seemed formed by an aggregation of those tumors, which had obtained considerable schirrhosity; but there were not any ligamentous bands observable, nor could any portion of the natural structure be detected.

There were a great number of various sized tumors, similar to those on the external part of the body, on the omentum, mesentery, and dispersed over the peritonæum and liver.

The uterus was healthy, but the ovaria were schirrhous, and when divided, appeared like the section of the diseased breast. Most of the ab-

sorbent glands in the groin, pelvis, and abdomen were enlarged, and had the internal appearance above described. The absorbent glands in the chest and neck were similarly affected, and there were a great number of tumors in the lungs, only larger than in any other part, some of which were in consistence like firm brain.

The other parts of the lungs were loaded with mucus, and there was slight inflammation.

Observations.

In this case I suppose the diseased state of the lungs produced such a great degree of constitutional irritation and debility, as to occasion the death of the patient before any of the tumors could get into such a state as to excite ulceration of their integuments. I have seen several cases similar to this, where the patients were destroyed by the disease in the liver or lungs making rapid progress, whilst that situated externally was kept in a "stunted or dwarfish state."

These observations, however, do not correspond with those given by Mr. Abernethy in his invaluable description of carcinomatous sarcoma. That gentleman says, "If the nervous and visceral disorders are active and considerable, the progress of the local disease will be, in general, proportionately rapid and destructive; and if, on the con-

trary, those disorders are mild and less in degree, the progress of the local disease will be proportionably slow and gentle."

From the similarity of morbid structure existing (as far as I have noticed) between this kind of carcinoma and the disease which has been termed by the above accurate pathologist tuberculated sarcoma, I feel disposed to take the liberty of supposing, that these diseases belong to one class, or have very great affinity, as I will endeavour to prove by the following case.

Case of Tuberculated Sarcoma.

A woman, fifty years of age, greatly emaciated, of a sallow complexion, and rendered extremely irritable by long disordered health, was admitted into St. Bartholomew's Hospital about the middle of August 1817.

She complained of pain in the abdomen, especially in the region of the liver, which was increased when moderate pressure was employed on examination.

There were a great number of various sized small hard tumors situated on the chest, abdomen, and thighs; and there was one about the size of

a hen's egg in the right groin, and another rather less on the labium pudendi of this side.

The growth of the tumors had not been attended with much pain, nor did pressure produce great uneasiness, except in the two last mentioned. The tumors were all beneath the skin, and seemed seated in the cellular membrane. Most of them were solitary; those aggregated felt and appeared similar to what Mr. Abernethy has denominated tuberculated sarcoma. The integuments covering several of the tumors had their vascularity increased, and were of a purplish red colour, particularly on those situated in the groin and labium.

She was distressed with frequent nausea and vomiting, and was constantly thirsty, but took very little nourishment.

The tumors increased slowly, and new ones appeared; her bowels were with difficulty kept open. About a week previous to her death, typhoid symptoms commenced, and she died on the seventh week from her admission into the hospital.

Dissection.

The external tumors presented different stages of the diseased growths; some of the lumps, the small ones, were almost as hard as those of the carcinomatous kind, yet by violent pressure were

made pulpy ; some were partly of that firm structure, mixed with white pulpy matter and blood, similar to foetal brain ; others contained both the latter, with the addition of a blackish pigment.

The liver was rather small. There were a great number of tumors in its substance and beneath its serous covering, from the size of a small cherry to a full-grown peach. Most of those near the surface of the liver projected considerably, and were merely covered with its membrane, which was extremely vascular in those parts. A few of the tumors had central depressions, from the peritoneal covering having become cartilaginous. The external colour was of a reddish white ; those which projected the farthest from the liver had a pulpy elastic feel ; the others were much firmer, and their internal consistence corresponded exactly with the tumors on the surface of the body, only on a larger scale.

On the omentum, which was nearly void of fat, tumors of the same kind were found in considerable number growing from its surfaces, the largest not exceeding the size of a large green pea.

The small intestines, particularly the jejunum, were affected with this disease between the muscular and mucous coats. There were likewise several small growths of the kind in the kidneys and renal capsules.

In the pancreas, which is a viscus seldom affected by disease of any kind, there were several of those tumors.

There were not any adhesions on either side of the chest; the lungs were studded with small tumors, most of which were extremely hard, some rather soft, but all contained an inky fluid similar to what is generally seen in the bronchial glands.

The disease was disseminated on the inner surface of the pericardium as well as over its reflexion, and there were a great number of small tumors in the substance of the ventricles of the heart, on its auricles, likewise on some parts of the lining of its cavities. There were also some growing to the edge of the valve of the coronary vein, and many in the internal surface of the vein.

The spleen was the only viscus not affected with this disease.

Case of Tuberculated Sarcoma.

I lately examined the body of an unmarried woman who had tubercles similar to the last described, but they were more generally disseminated over the body, and the skin covering those situated on the breast and both sides of the neck had

ulcerated. The patient was forty years of age, had been ill eighteen months, and had a jaundiced appearance upwards of six months previous to her death.

Dissection.

The external tumors were so exactly like those last mentioned, that it is not necessary to say any thing more of them.

The mammæ, although possessing their natural rotundity, and without the least puckering of the nipples, were rendered extremely hard, and adhered firmly to the pectoral muscles. When divided, the healthy structure of the breast was seen to be changed into a cartilaginous substance, beset with innumerable various sized tumors, similar to those on the external part of the body; and the pectoral muscles had become hard and of a white colour.

There was a considerable quantity of yellow fluid in the abdomen. The liver was extremely large, very hard, and in colour not unlike white Castile soap, with clusters of yellow spots in it. When cut through, it was equally as hard as any schirous tumor, and the reticulated arrangement of the cellular substance was very distinct in the condensed mass. The yellow spots seemed to be the common tuberculated state frequently seen in the

liver; and in all probability the whole of this viscus was in this condition previous to the cancerous action.

There were a great many tumors on various parts of the peritoneum, and a considerable number on the omentum; the largest did not exceed the size of a small strawberry: some of them when divided were as firm as the hard part of the breast or the liver; others were pulpy, and of a brownish red colour.

The spleen was nearly double the common size, although not diseased. There was not any change of structure in the uterus, but the ovaria were much enlarged and rendered schirrous.

The glands in the groins, those in the pelvis and lumbar regions, were very large and extremely solid. There were a number of small tumors in the lungs, containing a blackish fluid. The other parts appeared healthy.

Observations.

This is the only specimen of schirrous structure of the liver that I have met with.

Perhaps few of the cases I have related will be considered genuine specimens of *Fungus Hæmatodes*, from their not being attended with the

hæmatodal disposition ; this I only consider as one of the effects of the disease : it was the morbid structure of the external tumors, with the corresponding appearances of lesion in the internal organs of the body, and the fatal results, that led me to class them in the way I have, for I know not where to place them better.

All ages are said to be liable to cancer ; the same I believe may be said of Fungus Hæmatodes.

I have not had an opportunity of witnessing either of these diseases in more than one individual of the same family. Are they hereditary ?

In the history of the preceding cases, I have endeavoured to shew that there exists a close resemblance in the morbid structure of Fungus Hæmatodes, pulpy or medullary sarcoma, tuberculated sarcoma, and carcinoma ; or that those diseases may exist together in the same person, locally and constitutionally ; or that fungous tumors may become cancerous, as Sir Everard Home supposes any kind of tumor may.

M. Bayle, in his work on Pulmonary Phthisis, says, “ When I publish the result of my researches into cancerous complaints, I hope to shew that cancer is a primary disease of a peculiar nature, and

that though it is often met with united to other organic degeneracy, this coincidence proves nothing more than that these different degeneracies may occur in the same subject, and sometimes reciprocally influence one another, though one be not a transformation of the other."

So infinite are the varieties of these diseases in different subjects, and so seemingly alike in many instances in structure, that it is extremely difficult, nay almost impossible, to say how the series and modifications are produced.

From what I have seen of cancer and Fungus Hæmatodes, I am convinced of their not being local diseases, any more than those of the scrophulous class; they must therefore be considered what has been termed constitutional. And having noticed many small scrophulous tubercles in the lungs of still-born children; also pulpy tumors in the lungs of adult persons, who had not been affected during their lives with the least symptom of pulmonic disorder, and who died of active disease of a different description in other viscera; I am led to suppose that these specific and malignant diseases, such as cancer, Fungus Hæmatodes, and scrophula, have their origin perhaps with the formation or developement of the natural parts of the foetus in utero; and that they remain, after the birth of the individual, in some instances dor-

mant or inactive for a series of years, and in all only require a peculiar morbid excitement to occasion their increase and destructiveness.

On this head I hope to gain more practical information; I therefore at present only mention the deductions I have drawn from the few facts I have seen, with a view of exciting the attention of those gentlemen who are engaged in pathological pursuits, that they may be induced to ascertain whether my conjectures respecting the origin of constitutional diseases are correct. With those ideas of the subject, and having often remarked a recurrence of the disease after patients had submitted to the removal of some member or part of their body; I shall in future carefully avoid inducing patients thus afflicted to consent to amputation of any important part, with the promised hope of preventing any re-appearance of the disease; as I know not any thing more distressing to the mind of a person who has suffered a painful operation, than to have its results unsuccessful; and I need not add, that it is a mortifying sight to the operator*.

* Scrophulous patients likewise frequently die of tubercular phthisis, after having suffered amputation of an arm or a leg; they are also liable afterwards to attacks of struma in the joints. For I have, on dissection, in those subjects found the bones forming the principal articulations much softer than natural, and a caseous deposition in the interstices of the cancelli.

Almost every part of the body seems to be liable to be attacked with Fungus Hæmatodes. I have preserved specimens of this disease in the brain, eye, heart, lungs, liver, spleen, kidneys, uterus, ovaries, intestines, bladder, omentum, veins, bones, and integuments; but I have never seen nerves, tendons, or cartilages thus affected. From the extensive connexion the cellular membrane has with nearly every part of the body, and this structure appearing the seat of the disease, I think I may venture to say, it is the part on which those morbid changes are deposited, or from which they are produced.

Generally speaking, I have found the genuine carcinomatous tumors slower in occasioning death, than the tuberculated sarcoma or fungoid diseases. The two former extend their malignant action to the adjacent absorbent glands; but in Fungus Hæmatodes those glands seldom take on the morbid alteration.

Man is not the only being obnoxious to Fungus Hæmatodes, as I have seen this disease with all its modifications in the external and internal parts of the body of monkeys, horses, oxen, sheep, pigs, dogs, cats, and birds. I have also remarked, that domesticated animals are more frequently the subjects of this affection than those in a state of nature; and that they are liable to most of the mor-

bid alterations of structure to which mankind are prone, with this difference, that they are capable of sustaining for a greater length of time pain and destruction of parts than the human being. Can this be accounted for from their want of a reasoning faculty ?

Monkeys and pigs are very subject to scrofula. I have examined a great variety of the former, brought to this country, and they have generally died of scrofulous tumors, partly in the state of vomicae. I do not think that these abscesses are produced by the suppuration of tubercles, but by affection of the healthy surrounding structure, caused by the irritation of the tumors.

When scrofula attacks monkeys, it appears to be more generally diffused than in the human being, as I have repeatedly found the lungs, liver, spleen, kidneys, omentum, mesenteric and common absorbent glands, likewise several of the bones, greatly diseased.

The human liver is not frequently affected with the large kind of scrofulous tumors ; monkeys afford remarkable specimens of them.

Sometimes the schirrous, medullary, and fungous structures are so blended in various parts of the same subject, that they appear like different stages of morbid growth ; and the difficulty which

the pathologist experiences, is in deciding whether the disease is of the cancerous or hæmatodal kind, or whether they are not of the same class. Sir Everard Home, in his observations on the nature and progress of Cancer, says, so much does the same disease differ, in its appearances in different patients, from the endless peculiarities of their constitutions, by which every part of the body must be more or less influenced, that it is not possible, in practice, to distinguish in all cases between cancerous and scrofulous tumors, after they have advanced to a certain size; he is ready to confess, that in many instances he has mistaken the one for the other, and has removed by operation tumors which at the time had the appearance of being cancerous, and upon examination, after their removal, found them of a scrofulous nature. On the other hand, he has neglected to remove tumors, from the circumstances making it probable that they were scrofulous, which afterwards became cancerous, and destroyed the patient.

There are several cases of medullary species of Fungus Hæmatodes in Sir Everard Home's book, described as cancerous, which have induced me to suppose, that this was the disease he had mistaken for the malignant scrofulous enlargement. But it is not mentioned whether the patients operated on for the supposed cancerous affection recovered, nor are the morbid appearances of the amputated parts described.

I have remarked, when cancerous tumors have been excised, and the disease had re-appeared, that the character of the tumors resembled the fungoid more than the primary ones. I have at present the occasional attendance on a patient similarly situated; a tumor of the cancerous kind was freely removed from her mamma about eighteen months ago, and she has now all the appearance of Fungus Hæmatodes in the same breast, and in the axilla of the opposite side; her lungs are greatly affected, and her health is rapidly declining.

I shall not be considered singular in supposing there is some alliance between cancer and Fungus Hæmatodes, when I state that Sir Everard Home says, the fungated sore and the cancerous are the effects of the same disease, only varying according to the structure of the parts which are attacked. The same author also says, the cases of Fungus Hæmatodes published by Mr. Hey were cases of true cancer, in parts of a muscular or other structure, which was disposed to produce an excrescent fungus. This gentleman afterwards acknowledges that Fungus Hæmatodes is by no means uncommon in our London hospitals.

From the number of cases I have related, and the acknowledgment of my possessing such a great variety of preparations of the fungoid class, it may be necessary to mention the opportunities I have, independent of private practice, of pursuing

pathological researches, lest it should be imagined that a greater number of these cases have come under my care, than fall to the share of most individual practitioners in London ; or that the disease has become more prevalent, since the time it was mentioned by that excellent surgeon Mr. Hey.

I have held the appointment of surgeon to the Workhouse of Cripplegate Without five years, which house generally contains upward of 270 paupers, many of whom are admitted with the worst species of disease, besides having suffered, previous to their admission, all the privations which abject poverty occasions ; and many of them discharged incurable from hospitals. I likewise, through the beneficence of the parishioners, receive orders from the churchwardens, to afford relief to upwards of 300 out-door patients annually.

Since my appointment to this institution, regular sick wards have been established, and every comfort afforded to the patients.

I cannot conclude this paper without expressing my great respect for those gentlemen who conduct the affairs of this parish, for the readiness they have uniformly evinced in allowing me to inspect such deceased bodies as I have had reason to suppose would upon examination be productive of practical utility.

Hitherto I have only related cases which did not admit of cure, and appear *opprobria* to physic and surgery ; but I purpose giving such as shew the happy curative means we possess, and the advantages derived from pathological anatomy.