

It must be observed that these last-mentioned trials are rather specimens of what he could do by care and by attending to what he was doing, and not of what he could say when talking loosely. As he still said that he made mistakes at home, I asked him to collect them for me. The following is the result.

"Intending to say the following words, I said, for case, clase; for sister, sisper; for stomach, spomach; for that, sthat; for never learnt, never lant, never tant; for to wear, to pear; for plate, s-s-s-plate; for three, th-th-th-ree; for pig, prig; for bedstead, beekstead; for Emma, Enna; for go to bed, go to ded; for reid [read], leid; for coat, sloat; for turn his toes out, turn his nose out; for later in the day, laer in the day; for answer as a tung [tongue], answer as a tooth; for how is your tooth? how is your hand—your tongue—your feet? for mistake or two, mistalabal; for to such extent, to such an expemut; for going to wear, going to vell; for sticking plaster, picking plaster; for sight, fight; for blood, brod; for beat, bread; for going right, going rike; for you need not wet it, you need not wat it; for you have a little cold, you have a little clean; for the sun is at its high, the sun is at the moon; for you want some more meat to eat with them, you want some more meat to drink with them; for meat, bread; for knife, eggs; for wall, floor; for walk a mile, take a mile; for of meat, of mead; for not been my doing, not been ny doing; for nise [nice], nite; for tight, trite; for of a boy, of a dog; for alf [half] a sleep [sleep], alf a sleass; for travel, traverk; for he is nocked [knocked] up, he is locked up; for to school on Saturday, to school on Skatterday; for people coming from church, people coming from slearch; for one stair, one floor; for all the week, all the sweet; for you had better save them, you had better ceave them; for its all mussell, its all muddle; for custard, tustard; for shoves as bright, shoves as shite; for table, tadle; for the fastest train, the largest train."

I called on him one day, and asked him to spell several words. For plough he gave plow; for cough, coff; for dough, first dough, then dowe; for daily, daly; for generally, he began several times, and when I told him it began by g, he could not proceed; for laugh he gave lauf (he pronounced the word something like this). For picturesque, at the first trial, picthuress; at the second trial, pickthuressk; at the third trial, he said, "No, that's not right", and deliberately spelled "esque".

I then dictated the following from an article in the *Saturday Review*. His mistakes are in brackets.

"The man [mand] whose [woos] mind [minds] is entirely taken up [out] with small [sall] details [detales], fancies [sances] he has a right to sneer [seen] at every one gifted [gisted] with less [lest] minute knowledge [knowledge]. Because [Begase, and again Begause] he can [gan] grease [crease] the wheels [weels] and tighten [bighten] the screws [schrees] of machinery [masheenery] he fancies [sances] himself an authority on the laws [laus] of motion [mosien]."

I then asked him to spell the word whose, aspiring it strongly. He wrote "hose". Small, he spelled "sall", as in the text; but quickly remarked, "No, that's not it; that's sall." He then hesitatingly spelled it rightly. Sneer he spelled sneer; because, becaus; and laws, lass. I said no. He then spelled "lause". I again said no. He said interrogatively, "There is a laws spelled l a s s?" I said, "That is lass, not laws." He replied, "So it is"; but still could not spell the word correctly.

[To be continued.]

A FEW REMARKS ON CANCER.

By R. H. MEADE, F.R.C.S., Consulting Surgeon to the Bradford Infirmary.

HAVING been a great deal interested last year at Leamington, by hearing Mr. Moore's paper on Cancer, with the discussion which followed it, I venture to hope that the same subject may be revived at Chester, this summer, and that Mr. Moore may be able to report the acquisition of some valuable information in answer to the statistical inquiries which he made of the profession respecting the antecedents of cancer.

In Mr. Moore's paper, (which he afterwards published in a more extended form, and a copy of which he kindly sent me) there were many interesting remarks upon the pathology and treatment of this frightful disease; but several points were very open to criticism; and it is upon one or two of these that I venture to make a few observations. First, as to the constitutional nature of cancer; Mr. Moore is of opinion that it is purely local in the first instance, and independent of any morbid taint in the body. Now it would be very gratifying to be convinced that this hypothesis is strictly true, but I fear that we cannot at present come to that conclusion; there being so many facts which militate against it. The exceeding difficulty of preventing the recurrence of cancer after operation, is a strong argument in favour of its constitutional origin. How is it that a patient sometimes remains well for one or more years, and the disease then returns? If its return depend upon its incomplete extirpation, one would expect it to show itself quickly.

If cancer be not constitutional, how can we explain the fact of the comparative frequency of the occurrence of what are called recurrent tumours, "in the descendants or near relatives of those who are or who have been cancerous?" The distinguished surgeon and pathologist (Mr. Paget) whose words I have quoted, adds, "It is as if their growth" (that of recurrent tumours) "were due to some diathesis, through which the cancerous, in some instances, fades away into health, or is in some gradually developed."

Mr. Moore is obliged to admit that cancer is in some measure hereditary; but here he will not allow that any constitutional affection is transmitted; but says that, in his opinion, the inherited peculiarity is clearly a local one, and arises from the same kind of parental influence as may determine the production of deformities, or peculiarities of external form.

Mr. Moore suggests that, if cancer were in the blood, it might be found by chemistry, or the microscope. Can these means detect tubercle there, in patients predisposed to consumption? And yet will not Mr. Moore admit that phthisis is constitutional?

There can be no doubt of the hereditary nature of cancer, though, as in all other hereditary complaints, its descent cannot always be traced, and parents or other near relatives of a cancerous patient may have died of the same complaint in some internal form, without its nature having been known. I think that many old people die of cancer of the liver, or of some other internal organ, in whom the disease is not recognised during life. Believing, however, that cancer is both hereditary and constitutional, I admit that, as in other diseases of the same class, the diathesis may often originate *de novo* in the individual whom it attacks.

As in scrofula and tuberculosis, so in cancer, the constitutional taint varies greatly in intensity, so that the disease may appear sometimes to be strictly local. In scrofula we often see a single joint affected;

and, when this is removed by operation, the health of the patient is restored, and he may live to old age, without shewing any further symptoms of the complaint. No pathologist, however, would say that the affection in this case had been a purely local one.

The deposit of cancer differs no doubt from that of tubercle, or struma, in possessing a much greater degree of vitality, and thus spreading more easily to neighbouring, and, through the absorbents, to distant parts. Still, I think, it is sometimes possible to remove the local disease in cancer, with a prospect of success, if an operation be performed sufficiently early; for the cancerous predisposition may exist in a very slight degree, and the local affection may have been excited by a blow, or some other external cause of irritation.

There seems to be a great difference in respect to the liability to return, or rather in the difficulty of complete extirpation, between cancer in one part of the body and in another, even with respect to the same form of the disease. Thus, while the chances of success by an operation are greater in the epithelial than in any other form of cancer (except perhaps, the melanoid) when it is seated in the skin or lip; on the contrary, when it attacks the tongue, no form is so malignant. It appears to me that cancer is peculiarly liable, also, to return after extirpation in the female breast; and, unfortunately, the surgeon is more frequently called upon to operate here than in any other locality.

In my own experience, the most favourable cases for operation are those in which the disease occurs in an organ or part which is separated from the other tissues by some distinct capsule or coat, and can thus be more completely extirpated; so, in the testis, if the organ can be removed before the morbid growth has penetrated through the tunica albuginea, or extended up the cord, we may hope for success. In one case in which I removed the testis of a gentleman, whose brother had previously died of cancer of the same organ, where the characters of malignancy, both before and after the operation, were very well marked (though the disease was in an early stage), the patient lived for fourteen or fifteen years afterwards, and then died of apoplexy. Four years ago I removed another testis, affected in a very similar manner, from a middle aged gentleman, who is now in good health. I am sorry to say that these are the only two successful cases of the kind that I can record; but I am convinced that one great cause of failure is the postponement of an operation until the disease has proceeded so far that its complete removal is impossible.

The eyeball is another organ in which cancer on its first occurrence is sometimes entirely confined to the limits of the globe; and, if extirpation be performed, as soon as the nature of the disease is clearly apparent, success may be hoped for.

I removed an eye affected with cancer a good many years ago, from a girl 14 or 15 years of age, and she remained well at the end of six years, when I lost sight of her. The form of disease usually affecting both the testis and eyeball, is the encephaloid; and though, under many circumstances, this is usually the most rapid and malignant of any variety of cancer, yet it has been noticed by many surgeons that sometimes it bears removal better than others. The results of my own limited experience support this statement; and I could bring forward several instances where persons remained well for a considerable time after the removal of tumours of the encephaloid or medullary class. I remember one instance in which I excised a large tumour from the side of a man's neck (it extended from the lower jaw

to the clavicle), which had been growing for many years; before the operation, I hoped the tumour was of an innocent character, as there were no signs of cancerous cachexia; but its structure was decidedly malignant. This man remained well for upwards of two years, when the disease returned in the neck, grew to an enormous size, and killed him.

I cannot agree with Mr. Moore, that cancer is eminently a disease of healthy persons; it may sometimes appear to be so, but I have noticed that, where it has occurred in members of families, whose history I have had an opportunity of knowing for many years, there has mostly been an unhealthy (generally a scrofulous or consumptive) tendency. Another point which I have observed, is, that patients affected with cancer are generally prematurely grey. Again, cancer is eminently a disease of the aged; as the vital powers diminish in strength, and the different structures become enfeebled and less capable of resisting degeneration, they seem more liable to cancer.

I have already said that I believe the internal forms of cancer to be more commonly the cause of death than is usually supposed. Old people often sink under chronic jaundice. I have no doubt that this is mostly produced by cancer of the liver. At other times the stomach is the failing organ, and the patient dies with symptoms of chronic dyspepsia. I think there is often cancer of the stomach or pancreas in these cases, though the pylorus may not be affected; and therefore the usual symptoms of cancer of that part are absent. I attended one old lady, who died at the age of 73, with symptoms of disease of the stomach, the nature of which I should have been at a loss to determine without a *post mortem* examination, except for the fact, that I had assisted in the removal of a cancerous tumour from her breast four years before.

In concluding these few remarks, I should feel it necessary to apologise for bringing facts and opinions forward which have been often promulgated before, if I did not feel the necessity of keeping the subject of cancer before the profession, with the hope that something may ultimately be found which will point to the cause, or arrest the progress, of this terrible malady.

EDINBURGH UNIVERSITY ATHLETIC CLUB GAMES. The first annual public competition of this flourishing club took place last week. Many professors and distinguished members of the medical profession were present. Mr. J. W. Moir, son of the late distinguished Dr. Moir (Delta), acquitted himself splendidly. The ease and grace with which he succeeded in clearing a bar five feet seven inches in height, called forth the admiration of all the spectators. Numerous prizes were presented to the successful candidates by the president, Lord Neaves.

THE DEAF AND DUMB. England, with its deaf and dumb population of 12,236, supports eleven institutions for their education, containing about 1,000 pupils; Scotland supports five with about 240 inmates; and Ireland seven, with about 400 inmates: making in all twenty-three schools, with accommodation for about 1,640 pupils; about one twelfth of a class of unfortunate beings who have been described as "deficient in the sense most important to the intellectual and spiritual nature of man," whose need of education is most urgent, and whose claims upon our pity are both powerful and just. There are, therefore, 18,671 deaf mutes, out of the 20,311 in this country, for whom no recognised means of instruction are provided. In the metropolis there are 1819 deaf mutes.