ous in vitro experiments had failed to demonstrate fundamental differences between the proteolytic systems of normal and tumor cells, the authors placed the proteolytic enzyme system of the organism under strain by forcing it continuously to produce antibodies against strongly antigenic foreign proteins, e. g., snake venoms, horse serum albumin, egg albumin. The test consisted in studying the development of benzpyrene tumors in albino mice while minute amounts of the antigens were administered continuously by the parenteral route. The observations indicate that the production of sarcoma after subcutaneous injection of 2 mgm. benzpyrene in olive oil is retarded and in some instances even prevented by frequent injections of the protein antigens in amounts ranging from 2 to 30 γ per dose. The authors stress the preliminary character of these findings.—See also Ztschr. f. physiol. Chem., 269:217-226. 1941; 275:215-216; 258:266. 1942; abstr. in Cancer Research, 4:718. 1944.—K. G. S.

Einige Beobachtungen über das Wachstum des Mäuse-Ascites-Tumors und seine Beeinflussung.


When mice are injected intraperitoneally with suspensions of cells of the Ehrlich mouse carcinoma, the tumor cells may multiply diffusely throughout the peritoneal cavity, which simultaneously is filling up with ascitic fluid. The resistance of mice against the ascites-type Ehrlich tumor appears to be much less than that against other transplantable tumors; i. e., the number of "takes" is much greater. Furthermore, test substances injected into the peritoneum of mice bearing the ascites tumor come into contact with the tumor cells better than do substances injected at a distance from a tumor in animals bearing solid tumors. The growth of the ascites tumor may be followed by plotting the weight curves of the animals. Substances found to interfere with the development of the ascites tumor were 5,6-benzo-9-phenyl-flavin and colchicine; neither physiological salt solution nor Prontosil solubile had such an effect.—See also Naturwissenschaften, 31:467-468. 1943; abstr. in Cancer Research, 4:719. 1944.—K. G. S.


A general discussion covering: external carcinogens (sunlight, x-rays, radium, coal tar products, petroleum oil, aniline dyes, burns, mechanical trauma); precancerous lesions; internal carcinogens (steroid compounds, e. g., estrogens and bile constituents); viruses; heredity; milk influence; and accelerators and inhibitors of cancer in mice.—J. L. M.


A review, with bibliography, of the author's studies in this field.—E. E. S.

Clinical and Pathological Reports

Clinical investigations are sometimes included under Reports of Research.

Diagnosis—General


A modification of the Fuchs carcinoma reaction is described that differs from the original in that 2 genetically paired carcinoma substrates are used, i. e., carcinoma blood fibrin substrate and a carcinoma tissue substrate. Proteolysis is detected by a modification of the Coli method in a case of recurrent mammary carcinoma with metastases in the liver; and (2) regression of an inoperable ovarian sarcoma.—E. L. K.


Oral administration of αα-di-(p-ethoxyphenyl)-β-phenylbromoethylene (100 to 600 mgm. daily) was followed by (1) disappearance of edema and relief of biliary obstruction in a case of recurrent mammary carcinoma with metastases in the liver; and (2) regression of an inoperable ovarian sarcoma.—E. L. K.

Therapy—General


A case of melanoma of the conjunctiva of the eye was treated by radical surgery. Subsequent metastases in the skin, liver, and exenterated orbit were treated by castration with no beneficial results. Literature on the use of castration for cancer of the prostate, breast, and choroid, and for metastases, is briefly reviewed.—R. E. S.
histologic type of the lesions. The attributes determining the production of multiple lesions in one type of skin and not in another under apparently similar environmental conditions are unknown, though susceptibility to the action of sunlight may be one factor operating in such cases.—J. L. M.


Both patients received liquor arsenicalis (liquor potassii arsenis U. S. P.) with bromides for epilepsy over long periods:

Case 1.—From 1912 to 1924 (total intake about 22 gm. \( \text{As}_2\text{O}_3 \) in 12 years) and during 1 month in 1935. In 1944 an ulcer developed on the thorax, which was excised and found to be a squamous carcinoma. No palmar or plantar keratoses were present.

Case 2.—From 1913 to 1943 (total intake about 47 gm. \( \text{As}_2\text{O}_3 \) in 31 years). In 1944, there were (a) multiple "plaques" on trunk and thighs, (b) early palmar keratotic changes, (c) a lesion on the nipple that showed "multiple basal-celled carcinoma with marked cystic degeneration."

There is no legal obstacle to the continued supply of arsenic that has once been prescribed by a medical practitioner. In the discussion, a case of carcinoma of the lung in a man who took large amounts of liquor arsenicalis for attacks of dermatitis herpetiformis was mentioned.—E. L. K.


Incompetent treatment of pigmented moles entails a danger of inducing malignancy in lesions that appear benign. Of 100 patients with malignant melanoma, observed at the Holt Radium Institute, 34 died as a direct result of incorrect treatment by simple excision, ligation of the pedicle, or chemical cautery. It is advised that treatment of pigmented moles for cosmetic reasons should not be carried out unless such treatment is as radical as that adopted when signs of active growth have been observed. The treatment recommended for various types of malignant melanoma consists in radical surgery with block dissection of regional lymph nodes, radical radiation, or a combination of both. Four clinical photographs but no photomicrographs are incorporated in the article.—L. W. P.


The first 2 of these letters criticize the article by M. C. Tod on "Tragedy of Malignant Melanoma," which appeared in Lancet, 247:532. 1944 [see preceding abstract], on medical, statistical, and sociological grounds, and the third and fourth letters defend the same article. Wigley and Brain object to the proposal of irradiation as an alternative to surgery. Ellis, however, asserts that many malignant melanomas are radiosensitive [Brit. J. Radiol., 12:327. 1939].—M. H. P.


The association of cutaneous xanthomas and biliary cirrhosis of the liver in a woman of 48 is described. The hepatic disease is regarded as primary although there was no evidence of biliary retention on postmortem examination and all the bile ducts were freely patent. The patient had an extremely high plasma lipid content during part of her illness. Other cases of similar pattern are briefly mentioned. Complete explanation of the syndrome cannot be offered.—E. E. S.


In the 6 years from 1938 to 1944, there were 8 microscopically proved cases of Bowen's disease seen in the Barnard Clinic. This group comprised 0.3% of the 2,449 cases of carcinoma of the skin (basal, squamous, and basosquamous type) examined microscopically. This total figure does not include lesions of the lower lip, vulva, penis, or anus. The 8 case histories are presented, and the following points discussed: sex, race, and age incidence; occupation; family and personal history; duration of the disease; differential diagnosis; and treatment. Total excision of the tumor is recommended, by whichever method is best suited to the individual case: either scalpel excision, actual cautery, or surgical diathermy.—J. L. M.

Eye


A candidate's thesis for membership in the American Ophthalmological Society. Cases of malignant and benign tumors from the literature, and previously unpublished instances, some from the Army Medical Museum, are described with an extensive bibliography. The 4 cases presented in most detail, with photographs and photomicrographs, were of relatively benign epithelial tumors affecting the iris principally and showing local destructiveness without producing metastases. They were all treated by enucleation.—E. C. R.


Report of a case.—E. C. R.

Female Genital Tract


Four cases of benign theca-cell tumor of the ovary are reported.—A. K.

A case report. Masculine characteristics had been present for 9 years before operation at the age of 24. After removal of the ovary bearing the tumor the patient became more feminine but retained some of the male secondary sex characters. A progestational endometrium was present. The opposite ovary, which also was removed, showed a dermoid cyst, circumstantial evidence in favor of the teratomatous origin of the arrhenoblastoma.—A.K.


"This report is based upon an analysis of 88 cases of carcinoma of the uterus treated at the Barnard Free Skin and Cancer Hospital between the years 1919 and 1936. It is estimated that carcinoma of the uterus is responsible for 30% of all deaths from gynecological disease. Of these, over 10% are due to carcinoma of the uterine body.

"The poorest results were in the cases with cervical involvement, although a majority of these were not advanced cases. In the inoperable group, no patient survived 10 years, 20% survived 5 years, and 25% showed no evidence of disease 3 years after treatment. In the operable group a 10 year survival rate of 67.7% was obtained. Improvement in results can be chiefly effected by earlier diagnosis."—J. L. M.


Experience with approximately 1,000 cases of carcinoma of the cervix at Barnard Free Skin and Cancer Hospital over a period of 15 years forms the basis of a study on present-day methods of diagnosis and treatment of this widespread disease. The condition accounts for more than 80% of the hospital admissions on the gynecological service.

"The treatment of cancer of the cervix leaves much to be desired, except in early cases. . . . While the immediate mortality following radiation treatment is considerably less than that following hysterectomy, the late complications often leading to death are definitely more frequent. In stage I cancers, radical surgery in patients who are good operative risks presents definite advantages over irradiation. In stage II cancers, radical surgery gives too high a primary mortality, hence radiation of the primary lesion is advisable. The authors are not prepared to say at this time whether radiation combined with the removal of the individual iliac glands will increase the survival rate. In stage III and stage IV cancers, radiation is the only means of treatment."—J. L. M.


Of 63 women with carcinoma of the vulva seen during the years 1925 to 1940 at the Barnard Free Skin and Cancer Hospital, 41.2% had a history of leukoplakia of that region. The treatment of choice for vulval carcinoma is radical excision of the vulva and the inguinal lymph nodes. The rate of 5 year survival without evidence of disease was 45% among 40 patients treated by radical vulvectomy, and 31% among 13 treated by simple vulvectomy. Among the 40 patients of the former group, 15 and 7 showed unilateral and bilateral lymph node involvement, with 5 year, disease-free survival rates of 40 and 14.2%, respectively.—J. L. M.

Male Genital Tract

There was no difference in the total, α-, or β-17-ketosteroid excretion between a group of 16 patients with carcinoma of the prostate and a control group of 8 persons of similar age, nor between castrated and uncstratated patients in the former group. Excretion was decreased in men older than 40 years.—V. F. M.


The authors compare a series of 75 prostatic cancer patients treated by castration, with one of 50 treated by diethylstilbestrol, and conclude: 'There was no significant difference in subjective response; objective changes suggesting regression were significantly greater in the castration group; neither form of therapy was prophylactic against the appearance of, or increase in, metastases. One patient with metastases and an elevated serum acid phosphatase level died of the disease even though the serum acid phosphatase was reduced to normal limits by stilbestrol; the osseous metastases, however, at the time of death contained considerable acid phosphatase. Hence, the authors believe the serum acid phosphatase level is not a reliable index of metastatic activity. One person who failed to benefit from castration improved after stilbestrol therapy.—V. F. M.


An instance of this rare condition is described.—V. F. M.


Metastatic tumors to the testis are rare. A case of testicular metastasis from prostatic carcinoma is described.—V. F. M.


Without serial sections the author found evidences of teratoma in 24 of 50 instances of testis tumors, but the original diagnoses were solid carcinoma, adenocarcinoma, or choriocarcinoma. Hence, he favors Ewing's opinion
that all testis neoplasms are actually teratomatous. A
definitely positive result in the Aschheim-Zondek test
has grave prognostic significance. In 1 patient, however,
with a positive A-Z reaction, the reaction became negative
after surgery and irradiation, despite widespread metastases.
The histology can not be correlated with the results of the
A-Z test. The author warns against too great enthu-
siasm over the use of x-radiation, since Cabot and
Benkson reported 58.9% and 41.7% of 5 year cures for
seminoma and adenocarcinoma respectively in a series of
37 cases treated by orchidectomy alone. The 5 year survival
rate of the author's series, in which treatment was by
orchidectomy, irradiation, or both, was 38.9%.—V. F. M.

Embryonal Adenocarcinoma of the Testicle in
an Infant—Case Report. MATASARIN, F. W. [Station
This is a case history of a 7 month old infant.—V. F. M.

Prognosis in Teratoma Testis. BARRINGER, B. S.
1944.
The author reviews 69 cases and concludes that adeno-
carcinoma with metastases has a better prognosis than
metastasizing seminoma, in spite of the fact that seminoma
is the more radiosensitive. The liver was involved in 75%
of patients having lung metastases.—V. F. M.

A Critical Review of the Pathogenesis of Chori-
oma Testis and a New Theory. PATILLO, D. [New
The hypothesis is advanced that chorioma testis and
chorioma ovarii are not teratomas but "embryo-choriomas"
that arise from the sex reversal of germ cells. Thus, in
the testis, some of the male germ cells become converted
into oocytes, which collide with the normally present
spermatocytes (autofertilization) to form embryos that
ultimately die and degenerate, leaving the chorion. In the
ovary, correspondingly, some of the ova become converted
to spermatocytes, and similar autofertilization takes place.
—M. H. P.

Hemangioma of the Testis. KLEIMAN, A. H. [Vul-
1944.
Testicular hemangioma occurring in a 51 year old patient
is described.—V. F. M.

Rhabdomyosarcoma of the Spermatic Cord.
SHIVERS, C. H. deT. [Atlanta City Hosp., Atlanta City, N. J.]
J. Urol., 52:266-274. 1944.
A case report, illustrated.—V. F. M.

Unusual Tumors and Secondary Carcinomas of
the Penis. Review of the Literature and Report of a
of Med., and Barnes Hosp., St. Louis, Mo.] J. Urol., 52:169-
175. 1944.
This is a tabulation and review of unusual penile tumors,
and a report of a case of carcinoma arising in the urinary
bladder and metastasizing to the corpora cavernosa of the
penis.—V. F. M.

Sarcoma of the Penis. LEVANT, B. [Pittsburgh, Pa.]
A primary sarcoma, "probably of the reticulum cell type,"
occurring in the corpus cavernosum in a 29 year old Negro
is described.—V. F. M.

Primary Fibrosarcoma of the Penis: Review of
the Literature and Report of a Case. WATTENBERG,
C. A. [Washington Univ. Sch. of Med., Barnes Hosp., and
1944.
The literature contains reports of only 7 primary fibro-
sarcomas of the penis. An additional case is described. The
prognosis is usually good.—V. F. M.

52:611-614. 1944.
Horn formation by a penile cancer is described.—V. F. M.

Renal Malignancy and the Prostatic Patient.
This is a discussion, with illustrative cases, of coincidental
renal neoplasm and prostatectomy.—V. F. M.

Tumors of the Kidney. WHITMORE, E. R., LACOMBE,
A classification of renal tumors is presented with illus-
trative cases.—V. F. M.

Primary Adenocarcinoma of the Kidney—A Cli-
nical and Pathological Study. CAROLI, A. R. [Elizabeth
1944.
An analysis of 21 instances of renal adenocarcinoma.—
V. F. M.

A Twelve-Year Cure Following Nephrectomy for
Adenocarcinoma and Lobectomy for Solitary Me-
tastasis. BARNEY, J. D. [Boston, Mass.] J. Urol., 52:
406-407. 1944.
A female with adenocarcinoma of the kidney and a
lung metastasis was treated by nephrectomy and lobectomy.
Twelve years later she is well and without evidence of
disease.—V. F. M.

Wilms' Tumor: A Case Report. McGEE, H. J.
The author advocates surgical treatment, and describes a
case in which failure to operate promptly may have been
responsible for the fatal outcome.—V. F. M.

Adenomyosarcoma of the Kidney in the Adult
(Wilms' Tumor). WOOD, D. A. [Nav. Hosp., Mare Island,
The case of a 45 year old Filipino with extensive metas-
tases from a Wilms' tumor is presented and illustrated.
Twenty-three previous instances of Wilms' tumors in adults
are recorded in the literature.—V. F. M.

Oral Cavity and Upper Respiratory Tract

Carcinoma of the Lip. ECKERT, C. T., and PETRY, J. L.
[Barnard Free Skin and Cancer Hosp., and Washington Univ.
Sch. of Med., St. Louis, Mo.] S. Clin. North America, 24:1061-
1076. 1944.
No local recurrence from carcinoma of the lower lip
after 5 years occurred in 94% of 299 patients treated by
V-excision, in 90% of 121 patients given surface
radium therapy, or in 36.3% of 11 patients with extensive

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lesions treated by radium needles. Among patients with carcinoma of the upper lip, the rate of 5 year survival without recurrence at the primary site was 50% after either surgery (12 cases) or radium therapy (6 cases). Biopsy is the only reliable method of diagnosis. A routine suprathyroid neck dissection should be performed in every early case of cancer of the lip, even if no lymph nodes are palpable, and meticulous follow-up examinations should continue throughout the life of the patient.—J. L. M.


The primary operative mortality from laryngectomy at the Barnard Free Skin and Cancer Hospital, which was 55.5% in 9 cases during 1920 to 1929, was reduced by improvements in technic to 23.5% in 21 cases during 1930 to 1944. In the author's private practice and in his practice in other hospitals, the primary operative mortality from laryngectomy has been 15.8% in 16 cases: of the 13 survivors, 8 were still alive and well at the time of writing, up to 17 years after operation. Usually 50% of the patients surviving the operation can be expected to live 5 years or more. The surgical technic and rehabilitation are discussed.—J. L. M.

Gastrointestinal Tract


A reminder that few permanent cures are obtained in the average hospital. There has been slight improvement in the mortality statistics in the past few years, but accuracy of diagnosis is still far from satisfactory, and the disease is not being recognized in its incipient stage. Differentiation from ulcer may be difficult, and negative roentgenologic findings should not be regarded as final in the face of a typical clinical picture. The author believes gastric ulcer in middle life should be explored for accurate diagnosis.—E. E. S.


A discussion of deaths from carcinoma of various organs, and early symptoms, operability, and causes for high mortality in gastric carcinoma. Cancer of the stomach should be suspected in any patient with a history of tired and weak feeling, loss of appetite (especially for meat), or indigestion of 4 weeks' duration or more.—J. L. M.


A case report, presented because of the rarity of the lesion and the interesting X-ray findings.—R. E. S.


A review of incidence, mechanical factors, diagnosis, preoperative therapy, and surgical technic.—J. L. M.


Three cases are presented to show that microscopic examination of a small fragment of an adenoma of the rectum is entirely inadequate for diagnosis. Since this tumor so frequently becomes malignant, it should be completely excised, with the underlying rectal wall. Adequate microscopic study can then be made, and if malignant invasion is found, further surgery may be performed.—J. L. M.


In a treatment period ending 5 years ago, 17 patients received surgery or radiation for squamous cell carcinoma of the rectum or anus, and 7 of them have survived cancer-free for 5 years or more. The characteristics, diagnosis, and treatment of the disease are discussed, with special reference to the 17 patients mentioned above and to 33 others who were untreated or who received therapy too recently for assessment of the 5 year cure rate.—J. L. M.

Peritoneum and Retroperitoneum


Three large chylous cysts in the mesentery, causing strangulation of the lower coil of the ileum in a boy from time to time during his seventh to ninth years of age, were excised, and proximate parts of the intestine were removed. Radical surgery is recommended for mesenteric cysts, since they may lead to serious complications. Photograph; photomicrograph.—M. H. P.


A case report.—C. J. M.


A teratomatous mass was excised from a thick-walled retroperitoneal cyst near the duodenum and pancreas in a 13 year old girl. It contained a well developed digit with two nails, a metacarpal bone, and fused phalanges. Twenty other reports of nail- and digit-bearing teratomas are referred to, and the unwarranted identification of "limbs" is criticized. Drawings; photographs; roentgenograms.—L. W. P.
Bone, Bone Marrow, Joints


A case of osteochondrosarcoma of the right ischium is reported.—R. E. S.

Capillary Hemangioma of Bone. SHERMAN, M. S. [Univ. of Chicago, Chicago, Ill.] Arch. Path., 38:158-161. 1944.

Case report.—J. G. K.


A case of osteosarcoma of bone (No. 2032, Bone Sarcoma Registry) is described, in which the lesions appeared at approximately the same time in many bones, and in which the tumors, although highly infiltrative, retained the normal configuration of the bones. The distribution and extent of the sarcoma was that of the hemopoietic and reticuloendothelial areas in the skeleton. There were small metastases in many viscera. It is believed that this is an example of a medullary fibrosarcoma somewhat analogous to the myelornas, and that it, like them, might have had a multicentric origin.—Author's summary. (J. G. K.)


A case of plasma-like cell multiple myeloma in a boy of 15 is reported. It illustrates the importance of bone marrow aspiration in the diagnosis of myeloma, and emphasizes the point that youth should not rule out the possibility of this disease.—J. L. M.


The anatomy and physiology of the shoulder joint are reviewed, and a case report of fibrosarcoma of this joint is presented with roentgenograms, diagrams, and photomicrographs.—R. E. S.

Leukemia, Lymphosarcoma, Hodgkin's Disease


A case report.—J. L. M.


In a 3½ year old child with myeloid chloroleukemia, the green color of the abnormal growths was found to be due to protoporphyrin. This finding confirmed a previous report by Thomas.—M. H. P.


A general discussion, illustrated by 2 case histories, roentgenograms, drawings, and diagrams. The subjects covered comprise the anatomy of the spinal epidural space, the modes of involvement of this region by lymphomas, and the symptoms, diagnosis, forms, and treatment of these tumors. Laminctomy with removal of the spinal epidural lymphoma, followed by roentgenotherapy in cases in which the spinal epidural space is the primary region of involvement, offers moderately favorable prognosis. Roentgenotherapy alone is indicated only when compression of the cord is a terminal manifestation resulting from an infiltrating lymphomatous process from regional lymph nodes.—J. L. M.


A case of lymphoblastoma belonging to the Hodgkin's sarcoma type is reported.—R. E. S.


The incidence of lymphogranuloma associated with cancer is low. Nine cases in a total of 12,546 patients with cancer and allied diseases are reported.—R. E. S.


Of 55 proved cases of Hodgkin's disease in which chest roentgenograms were available, 35 showed intrathoracic involvement. The varied manifestations were correlated with the distribution of lymphoid tissue within the chest; mediastinal, parenchymal, pleural, osseous, and cardiac types were described. Seventeen of 23 patients with intrathoracic Hodgkin's disease showed favorable response to x-ray therapy.—E. H. Q.


A wide variety of cutaneous manifestations have been placed under the heading of the lymphomatoid diseases
of the skin. The skin phenomena that occur in Hodgkin's disease may be put in one of two groups. Those in the first group are the more common and consist of non-specific lesions that are neither histologically nor clinically pathognomonic of the disease. (Of their symptoms, itching is the most frequent. It may be extremely intense and unaccompanied by any changes whatsoever in the skin.) The second group includes lesions that show the specific and pathognomonic histologic characteristics of the disease in the skin. These lesions are comparatively rare; they are usually tumors or plaques. The cutaneous changes may antedate the general symptoms and signs or occur concurrently with them. In the case reported, palliation followed x-ray therapy, in both the systemic and the cutaneous manifestations. However, the cutaneous lesions became radioresistant and formed firm keloidal masses.—A. Cnl.


A case report. The cutaneous lesions presented the unusual feature of ulceration. The author suggests that the occurrence of terminal blood stream spread without evidence of embolic phenomena is consistent with a virus etiology of Hodgkin's disease.—M. E. H.

Pancreas


Two clinical case reports, with autopsy findings, demonstrate invasion of the right ureteropelvic region by pancreatic carcinoma. The literature on the subject is reviewed.—V. F. M.

Thyroid


Two case reports of so-called benign metastasizing colloid goiter.—M. E. H.

CANCER CONTROL AND PUBLIC HEALTH


After a review of the modes of origin of cancer, a 10 point program for the prevention and control of this disease is outlined. The recommendations concern: responsible individual hygiene; avoidance, from childhood on, of prolonged or repeated exposure to irritants in the environment; industrial hygiene; social hygiene; education by private physicians and public health authorities; special curative prophylaxis of precancerous lesions; early radical elimination of all puncta minoris resistentiae; immediate eradication of early cancer; thorough care of persons subjected to surgery or irradiation; and periodic physical examinations.—M. H. P.


A filling-machine operator aged 57, for 43 years in a factory manufacturing sheep dip containing sodium arsenite, died of carcinoma of the lung. "Three similar cases of pulmonary carcinoma occurring in arsenical sheep dip workers have been notified since 1939."

In Great Britain during the year, 160 (15 fatal) cases of epitheliomata of the skin were notified, 111 due to pitch or tar, 48 to mineral oil, and 1 to shale oil. "Of the 111 cases due to pitch or tar, 20 occurred in patent fuel makers, 61 in tar distillers, 10 in coke oven workers, 13 in gas workers, 2 in stevedores loading and unloading pitch at wharfs, 2 in makers of electric brushes, and 1 in proofing of battrice cloth, making of coalite (coal carbonisation), and handling creosote." A large number of these cases, when notified in the early stages, receive radiological treatment.—E. L. K.


The Ministry has issued as a booklet a series of suggestions drawn up by the Radium Commission for the guidance of those responsible for keeping records of patients suffering from cancer. A form-card is arranged to give details of history, diagnosis, clinical findings, histology, treatment, and follow-up.—E. L. K.


The author points out that the mass of data collected on the cards described in the preceding abstract will be difficult to handle unless a punch-card system with mechanical sorting is adopted. The card is criticized also in that it provides for the calculation of survival rates but not for a "disease-free rate" associated with any one method of treatment.—E. L. K.


This is a summary of the activities of the National Cancer Institute dealing mainly with: (1) the functions of the National Advisory Cancer Council, (2) radium loans by the National Cancer Institute to other institutions, (3) the establishment of traineeships in the diagnosis and treatment of cancer in various medical centers, (4) the establishment of research fellowships in the National Cancer Institute, (5) the Journal of the National Cancer Institute, (6) a summary of the nature of the fundamental cancer research being carried on at the National Cancer Institute, (7) the work of the Clinical Research Center at the U. S. Marine Hospital in Baltimore, Md., (8) a summary of the statistical studies on cancer being done at the National Cancer Institute, (9) notes on the examination of cancer cures, and (10) the function of the education and information services.—R. B.
Clinical and Pathological Reports

Cancer Res 1945;5:440-446.

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