The Effect of Nitrogen Mustards on the Viscosity of Thymonucleate. 


Data are presented to show that the viscosity of thymonucleate solutions is decreased by nitrogen mustards, particularly when the ionic strength of the solution is low. It has been shown that the ethylene-imine ring transformation product of these mustards appears to be responsible for the depolymerizing effect. Thiosulphate is capable of completely inhibiting the effects of the ethylene-imine ring.—Authors’ abstract.


Spectrophotometric evidence is presented to show that the nitrogen mustard, tri(β chloroethyl) amine, reacts with sodium thymonucleate, adenine, guanine, xanthine, and uracil.—Authors’ abstract.

Clinical and Pathological Reports

Clinical investigations are sometimes included under Reports of Research

THERAPY—GENERAL


A study by social workers of 200 patients attending Boston clinics, with recommendations as to proper management.—C. W.

FEMALE GENITAL TRACT


The authors present a case in which it is pointed out that Brenner tumor may be mistaken for a primary or metastatic epithelioma. The predominant fibrous nature of the growth, the complete absence of mitosis, and the peculiar combination of islands of squamous cells showing central transitions to columnar elements are the salient points in the diagnosis.—J. L. M.


Two cases of cancer are presented. The first was a case of pseudomucinous cystadenocarcinoma involving the left periovian tissue, peritoneum, liver, lungs, spleen, kidneys, heart, vertebrae, left ureter, left common iliac and peri-pancreatic lymph nodes. Renal cell carcinoma of the right kidney, with carcinoma in and occluding the right renal vein and inferior vena cava and within the right atrium of the heart, was found in the second case. There was also invasion of the wall of a hepatic vein by carcinoma and metastasis to the upper lobe of the left lung.—M. E. H.


A case report.—J. G. K.


A unique case of carcinoma occurring in fetal life is reported.—J. G. K.


Ten cases of myoma undergoing severe degeneration in pregnancy are presented. Treatment should be conservative. Five patients had natural spontaneous deliveries; 5 patients were treated by cesarean section with myomectomy.—M. E. H.

MALE GENITAL TRACT


The authors conclude, after a histologic study of 3 recent cases and consideration of the literature, that choriocarcinoma of the testicle arises from primitive cells with essentially the same capacity as the developing ovum, and that the malignant trophoblastic elements of this tumor are derived from ectoderm in the same way as the comparable tissue in ordinary pregnancy. They consider that the cells from which the tumor arises are multipotential sex cells, probably spermatogonia, and that tumor cells of this type alone are responsible for the production of gonadotropic hormones.—J. G. K.


During the period between January 1941, and November 1943, 75 cases of advanced cancer of the prostate were treated with orchietomy. Eighteen of these cases received prostatic resection in addition to castration. The diagnosis, in 66 cases, was proved by microscopic examination. In the remainder of the series the diagnosis was made by rectal examination and by x-ray studies. All of these patients complained of symptoms referable to the act of urination, varying from frequency to complete retention. Forty-two patients complained of low-back pain and loss of weight. Hematuria was a symptom in only 7 patients.

In 23 cases there was no clinical or x-ray evidence of any metastasis. Radical perineal prostatectomy was considered inadvisable, insomuch as the disease was not confined within the capsule of the prostate, in all of the cases.
Eighteen patients were found to have a normal serum phosphatase estimation prior to orchiectomy. In the remainder of the series there was an elevation of the serum phosphatase, and one was recorded at 155 units, using the King-Armstrong technic.

Following orchiectomy 18 patients were considered as complete clinical failures. In no instance was there any relief of pain and the progressive advancement of the disease was in no way altered. Stilbestrol was administered to these patients and found to be effective. In this group microscopic examination of tissue from the prostate revealed carcinoma of the undifferentiated type. Fifty-seven patients showed immediate clinical results characterized by complete clinical disappearance of the carcinoma. Eighteen to 30 months. Examination revealed only partial regression of the cancer occurred only in those cases in which microscopic examination of tissue from the prostate revealed a typical adenocarcinoma. Serum phosphatase estimations were obtained for all patients following orchiectomy. These recordings were found to parallel the clinical features of each individual. In many patients a return of the carcinoma was signalled by a rise in the serum alkaline phosphatase before digital examination revealed any evidence of recurrent prostatic changes. Stilbestrol administered to this group of patients was found to be of value in the control of their symptoms but not of the disease.—J. L. M.


Sixty-five cases of teratoma of the testis have been observed and treated within the past 33 months at an Army general hospital. The average age at the time of discovery of the lesion was 28 years. The most important diagnostic sign is painless swelling of the testicle. Three-fourths of the patients received medical attention within the first year after symptoms were noted. Treatment consisted of orchidectomy, removal of the cord high at the internal abdominal ring, and postoperative irradiation. Seven of the 65 patients have died, the same number have had continuing symptoms. The remainder are believed to be well and to have returned to a wage-earning, civilian life.—E. H. O.


A report of a case with photograph and photomicrographs, and a review of 14 cases from the literature. In the present patient, as in most of the other instances of the disease reported in adults, there were no signs of endocrine dysfunction.—M. H. P.


A review of the subject together with the author’s clinical experiences.—V. F. M.


Report of a case of squamous cell carcinoma of the renal pelvis occurring in a 58 year old woman. This lesion was associated with a large calculus of the left kidney and a palpable left upper quadrant mass, but presented no urinary tract symptoms.—W. A. B.


A study was made of all personal and service cases that had been seen at the Beth Israel Hospital for the past 5 years, either on the urological or other services. From these groups, 33 patients were found, upon pathologic study, to have renal tumors. The oldest patient was 75; the youngest was 38; the average age was 54. There were 22 men and 11 women. Gastrointestinal symptoms were presented in 23 cases (69%) of the entire series. This also includes symptoms referable to the gall bladder.

Concerning the tumors, hypernephromas were the most common (22 cases, or about 65%). Next in frequency were tumors of the renal pelvis (6 cases, or 17%). Of these growths 4 were malignant (carcinoma) and 2 non-malignant (benign papilloma or fibroepitheliomas). There were 3 cases of carcinomas of the kidney (or 8.5%), one of lipoma of the kidney, and one of unrecognized pathology. Five cases (or about 15%) were masked by symptoms other than urologic and mimicked such diseases as carcinoma of the ovary, carcinoma of the transverse colon, possible gall bladder or liver malignancy, acute suppurative cholecystitis, that exploratory surgery was indicated. In none of these 5 patients was there at any time an indication of urological disease. Urines in all were practically negative; an occasional white blood cell was noted in 3. All 3 cases of carcinoma were included in this group. The other 2 were hypernephromas. Histories on 15 cases are reported.—J. L. M.

The author presents a general discussion of Wilms' tumors including incidence, morphology, symptoms, diagnosis, differential diagnosis, and treatment.—J. L. M.


Case report. Papillomas located in the posterior urethra are usually preceded by inflammation. Although these growths may be benign at first they often become malignant later, as do papillomas of the bladder. Examination of the posterior urethra is of importance since symptoms frequently occur sufficiently early to allow removal of the growth before malignant change takes place.—M. E. H.


A well illustrated account of this disease, containing a section on neoplasms of the bladder in Egypt is presented. In 2 years at the Kasr-el-Aini Hospital, Cairo, of 130 cases of carcinoma of the bladder 114 were of the papilliferous type, and the great majority of these were judged to be the result of bilharzial disease. Twenty-two occurred in patients under the age of 30. Ten of the cancers were of the nodular infiltrating type.—E. L. K.


Forty-six cases of this unusual form of endometriosis have previously been reviewed in the literature since it was first described as an entity in 1921. In 42 of the 46 cases there had been previous pelvic surgery or associated pelvic disease.

In the past year 5 cases of endometrioma of the bladder were seen at the Mayo Clinic, and these are reported. All had undergone pelvic operation previously or had associated pelvic disease, and all patients showed some urinary symptoms. Cystoscopic examination aided in the diagnosis of two of these cases; in a third the diagnosis was confused with inflammation and carcinoma.—J. L. M.

Oral Cavity and Upper Respiratory Tract


The authors believe that the operation described is valuable in cases of malignant tumor of the nasal cavity in which there is no roentgenographic evidence of involvement of bone. This method of treatment of malignant tumors of the nasal cavity was used in 16 patients during the period from January 1934 to July 1944. Fourteen (88%) of these patients remained free from any evidence of recurrence to the time this paper was written. Two representative case reports are presented in detail.—J. L. M.


After a historical and clinical-pathological presentation of the subject, the author reports 16 cases followed for periods of 1 to 24 months. All the patients had roentgen therapy, usually 2,100 to 3,200 r to the primary lesion (tumor dose) and additional treatment to any involved nodes. Three patients are living with disease and 3 apparently free from disease, but the follow-up period is too short for any conclusions.—E. H. O.


A review.—J. G. K.

Parotid


This case is reported because the authors feel that certain important conclusions can be drawn from their observations. The contrast between the benign appearance of the tumor both macroscopically and microscopically were in sharp contrast to the highly malignant clinical course. The treatment recommended is the total extirpation of the growth, sacrificing the facial nerve and parts of the parotid gland if necessary. Surgery should be followed by radiation therapy. Prognosis is favorable where surgery has been early and radical.—M. E. H.

Intrathoracic Tumors


The cyst resembled a bronchogenic one, which is well recognized as occurring in the mediastinum, but this was situated in the subcutaneous tissues at the sternal angle. It was thin-walled, lined by ciliated pseudocolumnar epithelium, and mucous glands, cartilage, vessels, and nerves were recognized in the wall. The mass had been present in this 55 year old woman as long as she could recall. In recent years a sinus discharging small amounts of thin milky fluid had appeared over it. The cyst and sinus were removed without untoward event.—E. E. S.

Gastrointestinal Tract


This is the final division of a series of papers by the authors appearing currently in the West. J. Surgery concerning a pathological study of gastric adenomas. The collected divisions will eventually be published as a monograph. This present manuscript deals with certain general comparisons of the various series studied. Certain observations made and certain conclusions reached deserving special attention are emphasized. Size, as measured by diameter, the volume of the tumor, and the thickness of the involved mucosa seemed to bear a relation to the malignant changes present. If a gastric adenoma has a diameter greater than 2.3 cm., or if the tumor mucosa external to the muscularis mucosa is thicker than 0.44 cm., or if the calculated volume of the tumor is greater than 4.15 cc., the tumor is very probably malignant. However, some of the adenomas smaller than this harbored adenocarcinomas of grades 1, 2 or 3. The management of a patient presenting a gastric tumor depends on: the age
and general condition of the patient, presence of metastasis, the size, location and number of the adenomas, the presence of symptoms, complications and technical difficulties.—M. E. H.


Report of a case.—J. G. K.

LIVER


A case report with autopsy findings. The tumor was of the mixed cell type, both liver parenchyma cells and bile duct cells being present. The polythrombocytremia present led to the correct ante mortem diagnosis of primary carcinoma of the liver.—M. E. H.


Case report. The patient gave a clinical history suggestive of gastric ulcer. The x-ray findings corroborated this. Exploratory laparotomy revealed millet-like nodules in both lobes of the liver which proved to be bile duct adenomas on biopsy.—M. E. H.


Discussion of 12 cases.—J. G. K.


Two cases are reported, occurring in males aged 4 months and 23 years respectively. The usual symptoms are enlargement of the liver, abdominal distress, anemia, and cachexia. Jaundice, which was present in both of these children, has been inconstant in appearance or a terminal manifestation in other reported cases. Despite its rarity, primary liver cell carcinoma is the most common hepatic tumor of infancy and to a lesser degree of childhood.—H. S. K.

SPLEEN


A review and a classification of splenic neoplasms are presented, together with reports of 7 instances of primary reticuloendothelial sarcoma, reticulum-cell sarcoma, primary endotheiloma (2 cases), hemangiomia, lymphangiomia, and epidermoid cyst, respectively.—J. G. K.


An account of a case with a review of the literature.—E. L. K.

BONE AND BONE MARROW


This paper describes an operative technic indicated in the treatment of: (1) carcinoma or sarcoma of the hand, forearm or arm, with metastases to the axilla and involvement of the shoulder joint or shoulder muscles; (2) axillary tumors adherent to vessels and nerves; and (3) extensive irreparable trauma to the extremity. The 5 patients in this series upon whom this procedure was carried out survived from 7 months to 1 year and 7 months; of these, 3 who had sarcoma died of metastases, but the remaining 2 were alive and apparently well at 18 and 19 months after operation.—W. A. B.


Diagnosis of the pathologic type of malignant bone tumor cannot be made with certainty from the roentgen examination alone. Benign conditions may simulate malignant bone tumors. In order to make as many correct diagnoses as possible, one should do a complete skeletal survey in every patient where a bone lesion is suspected of being malignant, and the material submitted to the pathologist as a biopsy should be representative of the tumor. Adequate time should be allowed to make and study paraffin sections if there is any doubt about the nature of the lesions.—J. L. M.


The paper gives a brief review of this benign, destructive lesion, first described as a clinical entity in 1940, together with reports of 2 cases that occurred in naval personnel. It includes roentgenograms and photomicrographs. Treatment is excision and x-ray therapy.—C. W.


Pain in the back, developing after a short period of malaise, became excruciating, but x-ray just before admission to the hospital revealed only "arthritis." Later a compression fracture of a vertebra was detected. The ribs, sternum, and ilium shared in the tenderness, and erythrocytes and casts appeared in the urine. Bence-Jones proteinemia could not be demonstrated, but rouleau formation was excessive in a blood smear. Ninety-five per cent of intravenous congo red dye was absorbed. The diagnosis was established by biopsy of a rib, and autopsy showed that in addition to plasmacytoma in many portions of the skeleton, mesenteric lymph node, and in the lung, there was a deposit of amyloid in the kidneys, liver, and spleen. A review of some of the literature concerning myeloma is appended. This is said to be the 41st case to be reported having a coincidence of amyloid and myeloma. There are no photomicrographs.—E. E. S.


Case report. The only absolute diagnostic criterion is biopsy. The treatment remains as Bloodgood outlined it in 1910 and has been considered until recently too radical. Giant-cell tumors are benign in nature.—M. E. H.

Extradural diploic epidermoids (apparently a cholesteatoma), producing unilateral exophthalmos and gradual loss of vision in a young woman were completely removed through the supraorbital approach. Photographs, roentgenograms, and a review of the literature are presented.—M. H. P.

BLOOD VESSELS


A case is reported and a tentative explanation of the morphogenesis of this condition is presented.—M. E. H.


Case report. Hemangiomas of the leg are important clinically, chiefly from the standpoint of the pathological physiology they engender in the cardiovascular system. Growth disturbances of the extremity and osteohypertrophy may accompany the lesion. Ligation and excision of the vessels connecting the mass to the general circulation is the treatment of choice; selected cases may require complete excision of the tumor.—M. E. H.


During the past two decades, only 5 cases of bone hemangiomas have been referred to the Radiation Therapy Department at Bellevue Hospital and the present case report is the only one in a child with vertebral involvement. Irradiation is the treatment of choice and the patient presented shows the favorable results of this type of therapy.—M. E. H.


A report of a case in a 20 year old woman. The hemangiomata in the spleen was apparently primary, and that in the liver, metastatic.—M. H. P.

LEUKEMIA, LYMPHOSARCOMA, HODGKIN'S DISEASE


The author reports a case of chronic myelogenous leukemia in which the onset of the disease occurred before the patient was three months of age. The disease lasted for twelve months, and was terminated by the death of the patient.—J. L. M.


In the cases reported, leukemia and adenocarcinoma, apparently arising from the biliary passages, developed independently of one another.—M. H. P.


A case of leukemic myelomatosis is presented. Its clinical picture corresponded to an acute leukemic state. Differential counts on the circulating blood and bone marrow showed a considerable preponderance of myeloma cells. Plasmaglobulin was not augmented. The myeloma cells are less basophilic than normal plasma cells.—Authors' summary. (G. H. H.)


A case report. Penicillin controlled bacterial infection of the mucous membranes during attacks of granulocytopenia in a patient with aleukemic leukemia, but there was no evidence that the drug affected the leukemia per se.—J. G. K.


More than 11,000,000 units of penicillin were given intramuscularly over a 60 day period. There was no change in the clinical course, and biopsies of the lymph nodes before and after penicillin therapy revealed no change in the histopathological characteristics of the lesion.—J. G. K.


Lymphogenous leukemia as proved by blood examinations and by biopsy of a cervical lymph node, and a squamous cell carcinoma of the larynx with metastasis to an adjacent lymph node were found in a 71 year old white man.—J. G. K.


Chloroma represents a rare form of myeloblastic leukemia in which the cells show an unusual tendency toward tumor formation. Spectroscopic and polariscope studies suggest that the green pigment is an intermediary product in the breakdown of hemoglobin to bilirubin.—M. T.


Leukemoid reactions of the lymphatic type are seen commonly in infectious mononucleosis and in pertussis. Two cases are presented in which during hemolytic crises the peripheral blood picture closely resembled that of myelogenous leukemia.—M. E. H.


When clinical demonstration of node involvement exists,
the course generally accepted is en bloc removal of the
node groups. The proper method of dealing with draining
node areas in which there is no clinically demonstrable
disease is in dispute; some recommend prophylactic dis-
section whenever the tumor is of known metastasizing
potentials, and others feel that careful follow-up studies,
with avoidance of unnecessary surgery is the procedure of
choice.—W. A. B.

Hodgkin's Disease. GOLDMAN, L. B., and VICTOR, A. W.
[Dept. of Hosps., City of New York, N.Y.] N. Y. State J. M.,
45:1313-1318. 1945.

The authors reported a statistical analysis of 212 cases of
histologically proven Hodgkin's disease (J.A.M.A., 114:
1611. 1940). Since that date their study has continued with
an additional 107 cases, a total of 319 patients. In the previ-
ous paper the disease with its different manifestations was
described in detail; in this paper they emphasize the salient
clinical features and stress the relative value of the various
methods of treatment. In this present series 193 patients
(60%) were observed until death and 69 of these (32%) had
complete postmortem studies. The following aspects of Hodgkin's disease are discussed: history and physical findings, sternal node involvement, cutaneous manifestations, thoracic involvement, gastrointestinal involvement, abdominal localization, bone in-
volvement, blood and narrow picture, the effect of preg-
nancy, and finally treatment.—J. L. M.


The association of uveitis with Hodgkin's disease has
not been reported previously. This is the report of one
case. Whether the uveitis that accompanied Hodgkin's
disease in this case is due to the latter condition, or is a
concomitant disease is not clear. The pathologic section
of a cervical lymph node, by means of which the diagnosis
of Hodgkin's disease was established, and colored drawings of the lesions in the ocular fundi are
well reproduced.—E. C. R.


At the age of 50, a woman with Hodgkin's disease in the early stages suffered involvement of the lymphatics in
the bulbar conjunctiva of each eye. These were flat,
reddish growths that were excised but reappeared in the
same locations within 6 months. Roentgen radiation was
applied, and at the present time, 5 years later, there is
no evidence of recurrence.—E. C. R.

Hodgkin's Disease: Special Reference to Survival.
SMELETZER, C. C. [Knoxville, Tenn.]. J. Tennessee M.

The introduction includes a brief summary of the characteristics of the disease as listed in textbooks. Report is
made of the survival times given in several large series.
Marked extremes in length of life after onset have been
noted by many observers regardless of therapy. Two
cases are presented as illustration of the variability of
course; one patient who developed enlarged cervical nodes
was dead 10 weeks later, another patient has lived 13
years after removal of an affected node followed by
radiotherapy. Recurrence in the latter case occurred 1 year
ago and was treated as before.—E. E. S.

Binocular Papilledema in a Case of Torulosis As-
associated with Hodgkin’s Disease. CONN, M. [New

Report of an unusual case in which Hodgkin's disease
was associated with torulosis. The outstanding clinical
features were pronounced binocular papilledema, and
severe cerebal symptoms. Torula organisms were re-
covered from the spinal fluid, and were also found in brain
tissue at autopsy.—E. C. R.

ADRENAL

Hypertensive Retinopathy Associated with Ad-

Pheochromocytoma is a rare form of chromaffin tumor,
the cells of which contain epinephrine, or an epinephrine-
like substance. A patient with this type of tumor of the
adrenal medulla showed changes in the retinas character-
ized by alterations in the normal appearance of the blood
vessels, hemorrhages, and the formation of exudate. The
appearance of the ocular fundi returned to normal after
surgical removal of the tumor. Fundus photographs before
and after operation are included. This is a new clinical
entity.—E. C. R.

PANCREAS

Case Report of Barnes Hospital. Clinical and
Postmortem Records Used in Weekly Clinico-
pathologic Conference at Barnes Hospital, St. Louis.
WOOD, W. B., JR., and MOORE, R. A., Editors. J. Missouri M. A.,
43:391-396. 1946.

Case 89 proved to be one of carcinoma of the islands
of Langerhans with extensive metastases to the lungs, pleurae,
kidneys, tissues of the anterior mediastinum, the medi-
astinal bronchial periaortic, periportal, peripancreatic and
pelvic lymph nodes, skull, dura, leptomeninges, ribs and
vertebrae. Exsanguinating hemorrhage from a chronic
ulcer at the esophageal-cardiac junction of the stomach was
the immediate cause of death.—M. E. H.

Clinical Pathological Conference. LUND, P. K.
1946.

The case was one of adenocarcinoma of the pancreas
arising in Wirsung's duct and causing obstructive jaundice
and subacute cholecystitis. The discussion centers around
the errors in clinical diagnosis and the necessity for care-
ful evaluation of clinical laboratory procedures.—M. E. H.

Islet-Cell Tumors of the Pancreas. MAXWELL, S. R.,
and BUNBY, H. E. [United States Veterans Hosp., Minneapolis,

The literature is reviewed and Whipple's triad for
diagnosis of islet-cell tumors cited. A case is presented
that illustrates all of these points: (1) attacks of insulin
shock during fasting or due to an over-fatigued state,
(2) blood sugar findings of 50 mgm. % or less, and (3)
prompt relief by the ingestion of glucose. In the patient

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presented, no tumor was palpable at laparotomy, but following the removal of 75% of the pancreas (that portion to the left of the superior mesenteric vessels), all symptoms were relieved. In the resected area, several small nodular masses were found on serial section, and these proved to be typical islet-cell tumors.—W. A. B.

**Hypophysis**


A case of slow-growing pituitary tumor associated with hypothyroidism is presented. The tumor was unusually large. Its relationship to thyroid deficiency is discussed. The importance of considering the endocrine glands as anatomic units of a single interplaying physiologic system is pointed out.—J. L. M.

**Thymus**


Fifteen cases of tumors of the thymus associated with myasthenia gravis were studied. Most of the tumors were of a single histologic type being comprised of lymphocytes and larger pale cells with faintly acidophilic cytoplasm and occasional Hassal's corpuscles. Metastases were noted in 2 instances and direct extension into the vena cava in 1 case. The authors conclude that the incidence of myasthenia gravis among patients suffering from thymoma is nearly 100%.—J. G. K.

**Thyroid**


The authors report a case of hypernephroma with thyroid metastasis for which thyroidectomy was done. It was the third case observed at the Mayo Clinic over a period of fifty years, and the eleventh reported in the literature. The salient feature was the latent period of about eight years between the time of nephrectomy and the first sign of metastasis. It appears that metastatic carcinoma of the thyroid occurs most frequently in glands which clinically thought to be adenomatous.—J. L. M.


Report of a case in a 4 week old male infant is presented. The tumor had been present at birth, and progressed in size until it caused conspicuous respiratory difficulty. Successful removal of the growth was performed when the infant was 6 weeks old. The nodular neoplasm was confined to the left lobe of the thyroid. All 3 germinal layers were represented in the tumor.—W. A. B.


Case report.—J. G. K.

**Miscellaneous**


Three new types of cancer are found in different regions of India; namely, Bombay, Vizagapatam and Patna. They may be called the dhoti, chutta and khaini cancers. They are associated with the wearing of a light garment (the dhoti), smoking of a cigar (the chutta) with the lighted end in the mouth, and the depositing of tobacco and lime (khaini) behind the lower lip of the mouth. A histologic study of the lesions that precede the development of 2 of these cancers reveals a similarity in appearance between them and the "precancerous" stages in mice that have been painted experimentally with carcinogenic substances. The observations reported, and a review of the available experimental literature on the subject of changes in the skin as a result of exposure to mechanical and thermal irritants lead to the conclusion that in the induction of the tumors described the part played by the reaction of the tissues that are the seat of the cancer is equal in importance to that played by the carcinogenic substances themselves.—Authors' summary.—J. G. K.


Report of a case in a 65 year old man. The tumor occurred on the lower part of the anterior abdominal wall, and histologically was diagnosed as a fibroma with sarcomatous changes (malignant desmoid).—W. A. B.


A 26 year old man was observed to have hyperinsulinism until removal of an adenoma of the pancreatic islands of Langerhans. Development of renal stones and the recognition of supranormal levels of calcium in blood and urine led to the removal two years later of an adenoma of the parathyroid gland. The presence of a pituitary tumor was suggested by radiological evidence of erosion of the floor of the sella turcica and the clinoid processes and by defects of the temporal quadrant of the right visual field. The authors claim that their case and another cited in the literature represent a new clinical syndrome characterized by the occurrence simultaneously of adenomatous tumors of three endocrine glands, the pituitary, pancreas, and parathyroids.—J. B. H.


This case is reported because of the large number of the lipomas. The tumors, varying from pea-size to orange-size, were on the arms, trunk, and thighs.—M. E. H.


The purpose of this paper is to show from a study of 17 cases (15 in males and 2 in females) that Dupuytren's contracture is due to a neoplasm—a cellular fibroma of the
palmar fascia. The predominance in males and the positive family history given by 5 patients agrees with previously reported data.—M. H. P.


Two cases are reported that form the background of the discussion concerning differential diagnosis, malignant changes, origin of the tumors, and treatment.—M. E. H.


Literature is reviewed describing experiments that tend to demonstrate that trauma is not an active agent in determining the sites of tumor metastases.—E. H. Q.


Report of a case, with a review of 5 previously reported in the literature.—W. A. B.

STATISTICS


Of the total of 7,186 autopsies performed during the 10 year interval from 1934 to 1943, 1,214 were recorded as revealing definite evidence of malignant growth of some type. Eight hundred and seventy were males; 344 were females. A statistical analysis is presented according to sex, age at death, primary site of new growth, sites of metastases and the microscopic type of carcinoma.—M. E. H.

Observations on Malignant Disease in Ceylon Based on a Study of Two Thousand Two Hundred and Ninety-Five Biopsies of Malignant Tumors. Cooray, G. H. [Univ. of Ceylon, Ceylon] Indian J. M. Research, 2:2-14. 1944.

In a preliminary investigation regarding malignant disease in Ceylon, an attempt has been made to make an analysis of the malignant tumors sent for histological examination from various hospitals on the island to the Department of Pathology of the University of Ceylon during the 7 year period from 1936 to 1942. The total number of specimens examined histologically was 10,880. While most of these were obtained at the time of operation, a few were postmortem specimens. The author includes postmortem material among biopsy reports. The specimens were obtained from Singhalese, Tamils, Burghers, Moors, Europeans and Malaysians. Of 2,295 malignant tumors, 41 were malignant melanomas. The most common sites of the 1,815 primary carcinomas were cervix uteri, 316; buccal cavity, 196 (males) and 78 (females); penis, 248; breast, 5 (males) and 170 (females); skin, 175 (males) and 71 (females). There were 32 cancers of the corpus uteri and 35 chorionepitheliomas. The author remarks upon the high incidence of the latter tumor and states that hydatidiform mole occurs commonly among the women of Ceylon. Three cases of cancer of the penis occurred between the ages of 15 and 24 and some references are given to the literature dealing with the very high incidence of this form of cancer in Southern Asia. Sixty-one per cent of the skin cancers arose from chronic nonspecific ulcers whereas of the 23 malignant melanomas in men, all except one arose on the plantar surface of the foot, and of the 18 similar growths in women more than half arose on the same site. Eleven retinoblastomas were seen in children under 5.—E. L. K.

CANCER CONTROL AND PUBLIC HEALTH


The rapid increase in the number of recognized and suspected agents causing industrial cancers makes it more likely that new and heretofore unsuspected carcinogenic substances of an industrial nature will be discovered during the coming years. For this reason a nationwide survey by skilled investigators should be made to determine the actual scope of the problem of industrial cancer. Representatives of management, industrial physicians, members of the Public Health Service, and of departments of industrial hygiene, and possibly also representatives of the workers, should participate in such a survey.—M. E. H.


The cancer campaign in Ontario coincided with those in Canada and the United States. It was threefold in purpose: for public education, for research, and for better cancer treatment facilities.—M. E. H.


This is a review of the findings in 1,600 cases examined since May of 1943. Among the first 600 there were 10 proved cases of carcinoma of the breast. In the subsequent 1,000 no obvious carcinoma was found and of 126 women in whom biopsies were requested 11 were found with cervical erosions. Of the women on whom pelvic examinations were carried out, biopsy was advised in 13, and reports thus far have not indicated the presence of any cervical carcinoma. Uterine fibromyomas were discovered in 41 of these 1,000 women and in 16 surgery was indicated because of the size of the tumor. Since the examinations were carried out in apparently well women without complaints, the percentage of positive malignant growth is understandably low.—M. E. H.


The Saskatchewan Cancer Commission is empowered by legislation passed in 1930 to collect data on mortality and treatment, to disseminate information to aid in control of the disease, to provide for the establishment of clinics for diagnosis and radiation therapy, to obtain a supply of radium, and to provide facilities for the diagnosis and treatment of cancer for all patients. During 1932 to 1942,
there were 8,897 patients (cancerous, "precancerous," and noncancerous) admitted to the clinics; these paid for services when they could, or the fees were paid by the municipality from which they came. At the 1944 session of the Saskatchewan Legislature, provision was made for care and treatment at the expense of the province for all patients who have resided there for at least 6 months immediately prior to application for admission to a clinic—M. H. P.


The history of cancer prevention clinics is discussed. In a group of well women the author undertook to determine the value of periodic pelvic examinations in detecting cancer of the uterus in an early and curable stage or in the detection of inflammatory lesions of the cervix which are commonly believed to predispose to the development of cancer. Of 1,319 white women between the ages of 30 to 80 years and all presumably well, 550 have come regularly for routine pelvic examination twice a year while an additional 121 were somewhat irregular in their visits. Thus a total of 671 volunteers have been examined for a 5 year period.

Up until December 31, 1944, 10,318 visits were made, during the course of which the examining physicians discovered 11 cancers. Six of these were pelvic growths, and 3 were breast tumors. There was 1 cancer of the parotid gland and 1 of the skin. Eleven other cancers developed in these women during this observation period and were reported to the clinic; 2 of these were in the pelvis, 1 was in the hip, 1 in the pancreas, 1 in the lung, 1 hypernephroma, 1 lymphosarcoma, and 4 malignant tumors of the colon. In addition to the pelvic cancers, 832 benign lesions of the pelvic organs were discovered.

The establishment of similar clinics in Philadelphia in 1944 is described. In the first 6 months, 90 examinations were performed, and 9 cancers found. About 40% of the examinees were referred to the family doctor, and half of these physicians failed to reply.—J. L. M.


The authors give a description of what may be accomplished when the fields of gynecology and radiology pool their resources.—J. L. M.

Correction

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