

In the last five-and-twenty years there have been only fifteen cases of epithelioma of the scrotum admitted into Guy's Hospital. Of these, ten cases occurred in chimney-sweeps; one in a tar-distiller, one in a gas-stoker, one in a lamp-black maker, one in a shoemaker. I shall allude to the influence of other trades and irritants a little later. Keeping at present to "chimney-sweep's cancer," we come to another point of much interest. Epithelioma of the scrotum is a very rare form of cancer, and when met with, the patient has almost always been submitted to the prolonged action of some irritant, the commonest being soot. *Is the disease becoming less common in England, and if so, what is the reason? Is it correct that this disease is almost unknown out of England, and if so, what is the explanation?*

With regard to the first question, it has of late years been generally accepted by surgeons that "chimney-sweep's cancer" was one of those forms of cancer whose importance was diminishing, that it was on the decrease, owing to the fact that chimneys are now swept from below by jointed rods, and no longer by sweeps who climb inside, using short brushes. A more important explanation than the introduction of machinery, is to be found in the fact that chimney-sweeps, being no longer employed in boyhood, the delicate scrotal skin is not exposed so early or so long to the irritation of soot. Mr. Butlin (*loc. supra cit.*) quotes some statistics of the Registrar-General, drawn up as long ago as 1885 (*Forty-fifth Annual Report*, p. 56), as not supporting this view. Mr. Butlin also states that from an examination of the statistics of St. Bartholomew's Hospital during the last twenty years, he is of opinion that scarcely a year has gone by without a case of chimney-sweep's cancer, and that the number of cases during the last ten years was quite as large as the number during the preceding ten years. On these grounds Mr. Butlin looks upon the belief that "chimney-sweep's cancer" is now on the decline as a "false impression."

While one hesitates to differ from an acknowledged authority on malignant disease like Mr. Butlin, I cannot agree with him. In the first place, to judge of the decline of a disease in 1892, we want more recent statistics than those of 1885. Again, to complete our comparison between the frequency of a disease fifty or a hundred years ago and at the present day, we want figures of the number of cases admitted at the above dates: these we shall never have, as no hospital reports were then issued. "Chimney-sweep's cancer" may never have been a frequent disease, but

when it is stated that it is a disease of decreasing frequency, this means in comparison with forty or fifty years ago ; of the real frequency of the disease at this time we shall never have reliable information. The statistics for Guy's Hospital for the last twenty-five years, and my experience as a member of the surgical staff for seventeen years, are not in accord with Dr. Butlin's opinion. Thus, in the twenty-five years between 1867 and 1892, there have been only fifteen cases of "chimney-sweep's cancer" admitted into Guy's Hospital, the last case being in 1886. Since this date we have not had a case of chimney-sweep's cancer, though there have been two cases of cancer of the scrotum admitted : one in a lamp-black maker and one in a labourer at a gasworks. If I am right in my belief that chimney-sweep's cancer is a disease of greatly diminished frequency, the explanation of this must be sought not so much in the change of the mode of chimney sweeping, but in the fact that the last twenty-five years have seen a change for the better as to habits of improved cleanliness amongst the so-called "working classes." Again, the same period of time has seen some improvement in the spread of information and in the rise of intelligence in the same rank of life. The sweeps of the present day are more alive to the risks of soot irritation and its results. They, like their fathers, have heard of the danger of soot cancer, but they show more intelligence in availing themselves of the means of avoiding it ; furthermore, they know well that with anæsthetics surgical operations have been robbed of much of the horror with which they were looked upon fifty years ago. We have seen the same result in another disease of late years—viz., malignant pustule—where the recognition on the part of those who handle raw hides of the risks they run, has led to great attention being paid to any crack, abrasion, or pimple, and to a marked diminution in the number of cases admitted into Guy's Hospital.

With regard to the second statement, also generally accepted in this country—viz., that "chimney-sweep's cancer" is extremely rare in other countries—Mr. Butlin thinks there can be no doubt of its accuracy. He considers that the explanation lies not so much in the fuel burnt and the mode of burning it, but in the great precautions taken by sweeps of the Continent to avail themselves to the full of every protection given by special clothing and frequent thorough washing.

Another most important question remains, *what other trades besides that of chimney-sweeping predispose to cancer of the scrotum.*