multiple pitch cancer, described by the same investigator, a corkstone worker first showed a cancer on the corner of the eye, followed by a cancer on the lower lid, which, in turn, was succeeded by an epithelioma on the other eyelid. Sladden mentioned a case of multiple pitch cancer, in which the first tumor was situated on the external ear, while the second involved the scrotum. The same investigator related a case of heterogenic, multiple, malignant responses which developed in a pitch worker, affecting successively scrotum, jaw, lip and, ultimately, the urinary bladder. A case of successive multiplicity of pitch epithelioma in a corkstone worker affecting successively lip, nostrils (3 cancers), forehead, and corner of the eye was reported by Lauchs. Brenner found in a laborer in a tar distillery, first, a cancer of the ear, which was later followed by an epithelioma of the cheek. Multiple pitch and tar cancers are not uncommon, according to these observations, which contradict Sladden's contention that pitch cancers are and usually remain solitary new growths.

VII. PROGNOSIS

The ultimate prognosis of tar and pitch cancer is determined by various factors. It is obvious that the diffusiveness of skin changes, existing in the majority of the affected workers, favors the occurrence of successive primary tumors, and influences the ultimate prognosis although the first malignancy is successfully removed. This course and prospect is made more definite, if the tar or pitch worker affected by a cutaneous malignancy continues his occupation. The ultimate prognosis is made markedly worse by such a combination of anatomical and occupational conditions (Teutschlaender; and Schürch).

Furthermore, the prognosis depends, apart from the extent of the primary tumor at the time therapeutic procedures are instituted, on the site of the neoplasm. Cancers situated at the scrotum metastasize more readily into the regionary nodes and from there into the internal organs than those located on the face, neck, arms, and hands. In general, the growth rate of pitch and tar epitheliomas is a slow one and metastases occur late in the course of the disease.

English investigators have furnished some data from which relative prospects of tar and pitch malignancy in regard to the actual danger to life may be gauged. Legge reported that out of 66 cases of pitch cancer notified during 1920 to 1922 two ended in death, and the same number of fatalities was observed during this period among 21 cases of tar malignancy. Bridge and Henry supplied for the years 1920 to 1927, and 1933 to 1937, the following data:

Pitch operations:	163 cases of epithelioma	5 deaths	1920-1927
	146	5	1933-1937
Tar distilleries:	103 cases of epithelioma	13 deaths	1920-1927
	238	13	1933-1937