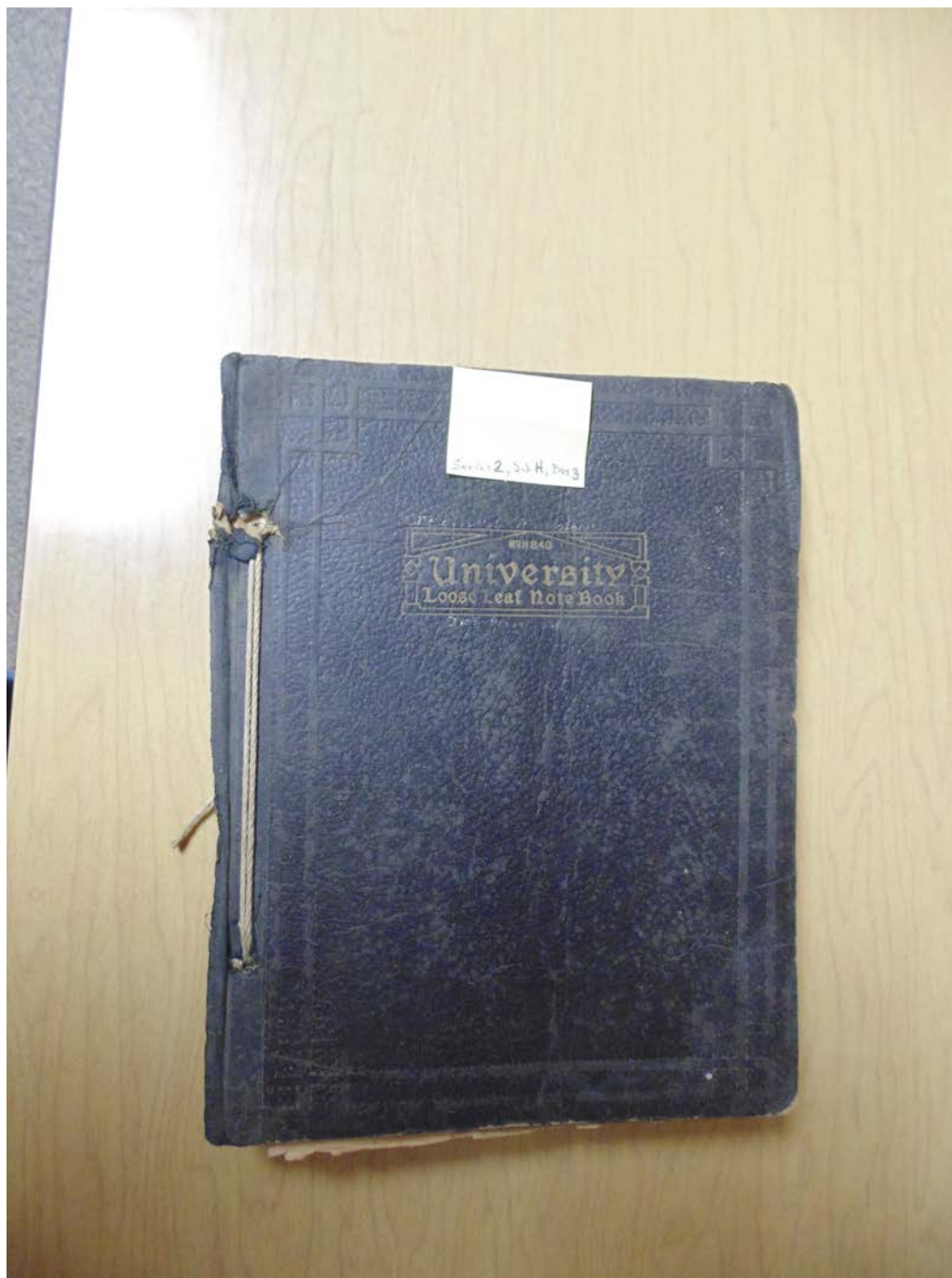


Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

Image 1 r02h03-00-002-6272 [Contents](#) [Index](#) [About](#)



Names:

Pathology note book

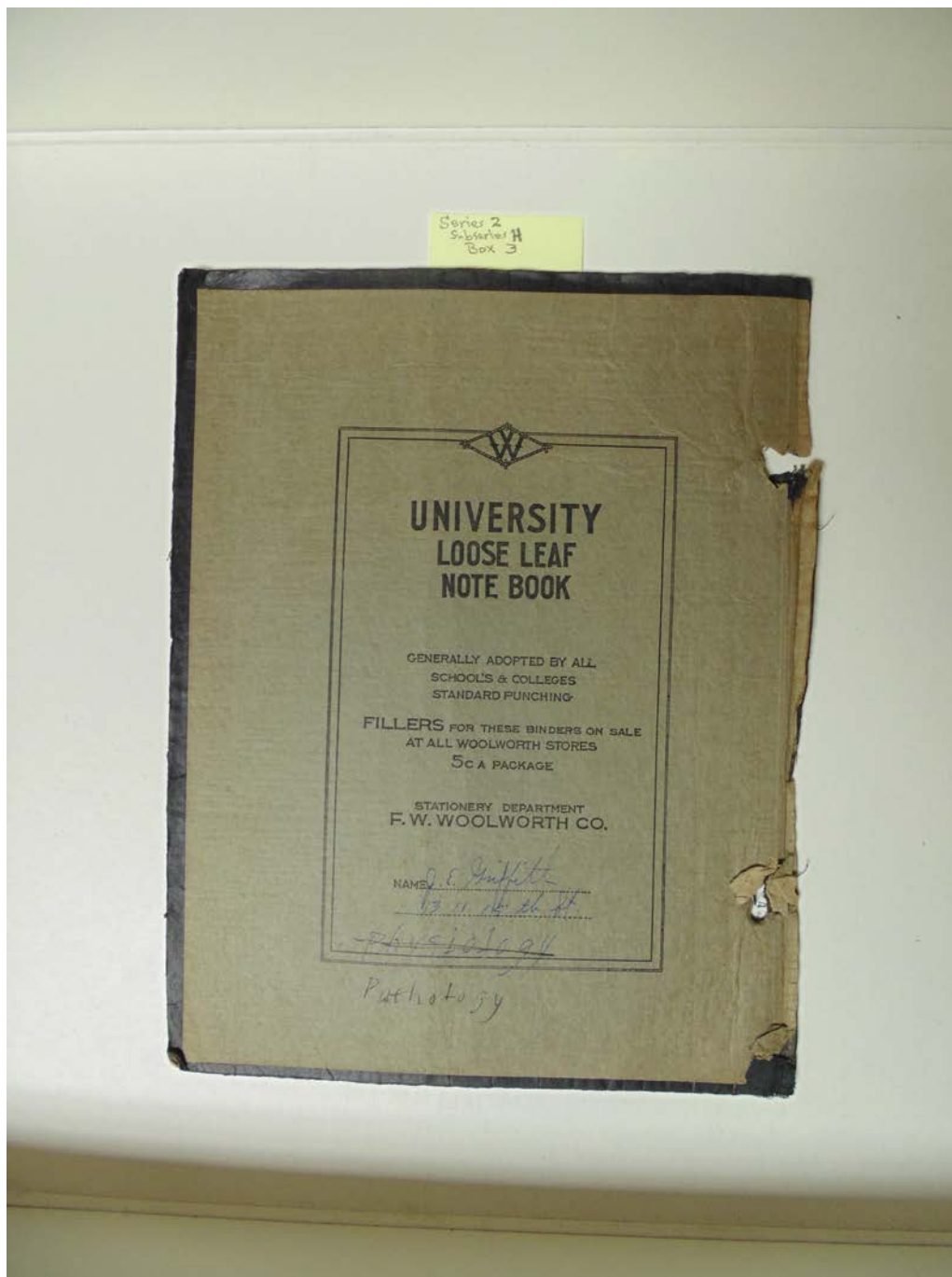
Types:

cover

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

Image 2 r02h03-00-002-6273 [Contents](#) [Index](#) [About](#)



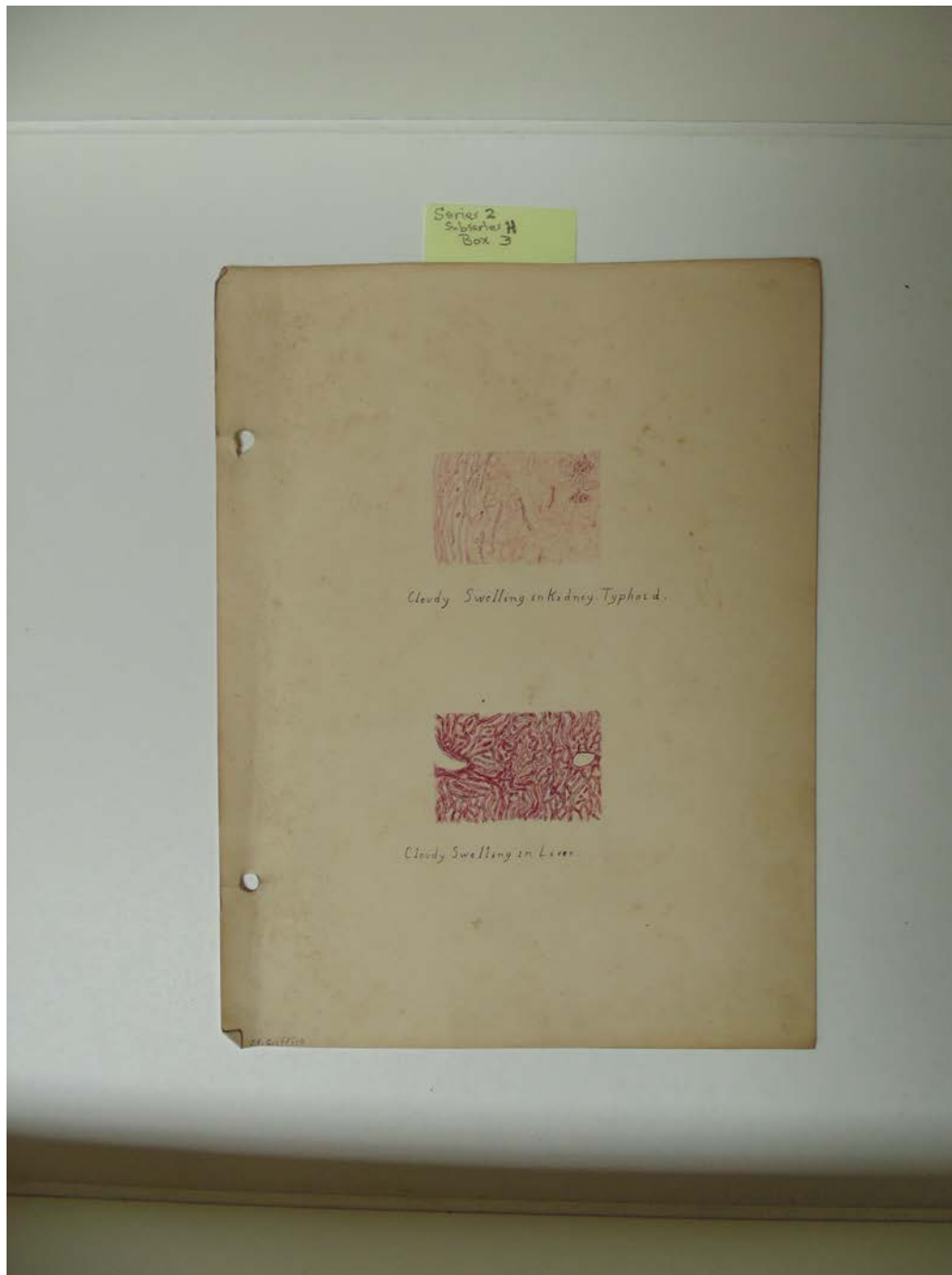
Names:

Griffith, J. E.

Pathology

Types:

note book



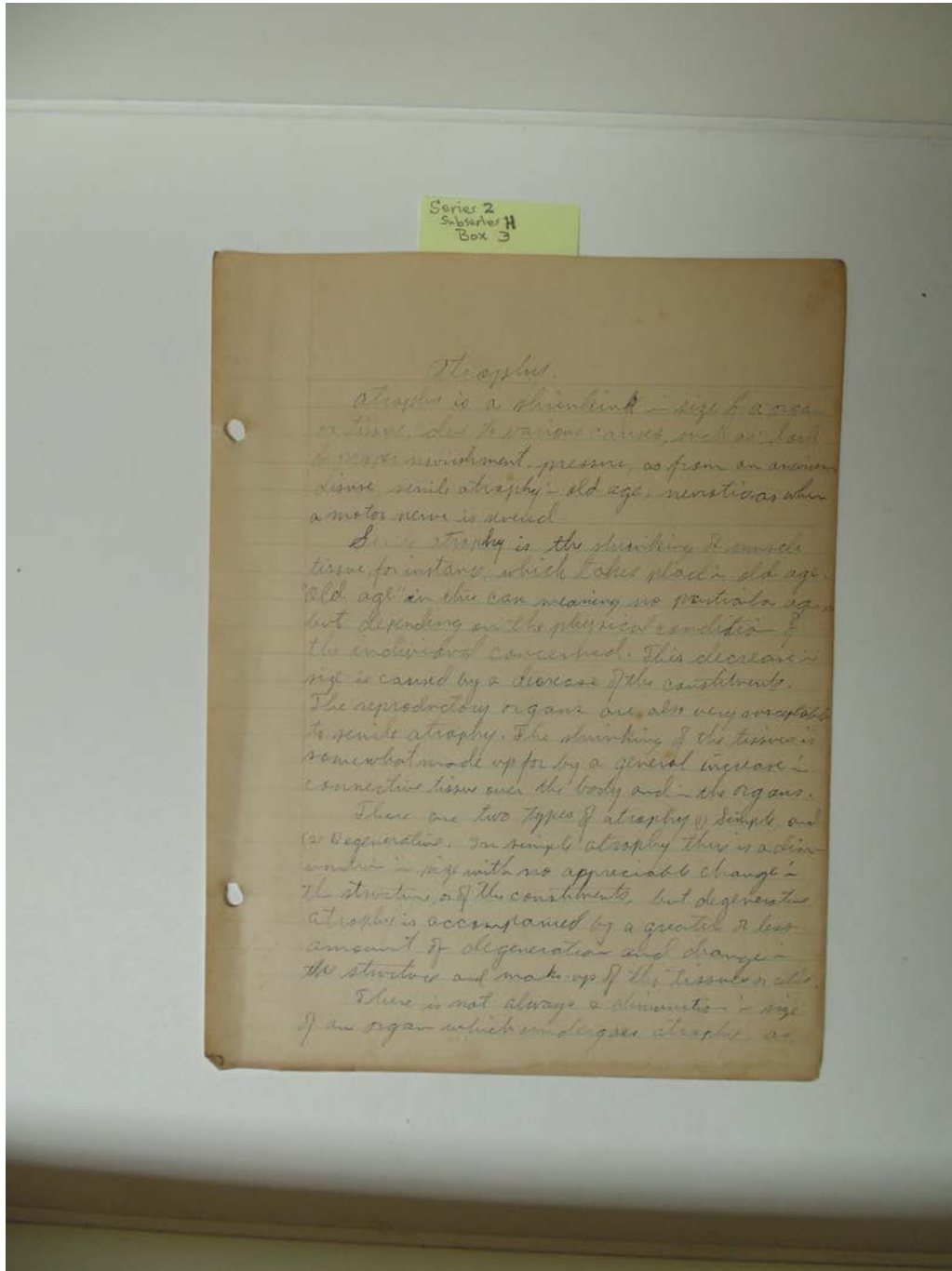
Names:

Cloudy Swelling in
kidney - typhoid

Cloudy Swelling in
liver

Types:

drawing



Names:

Atrophy

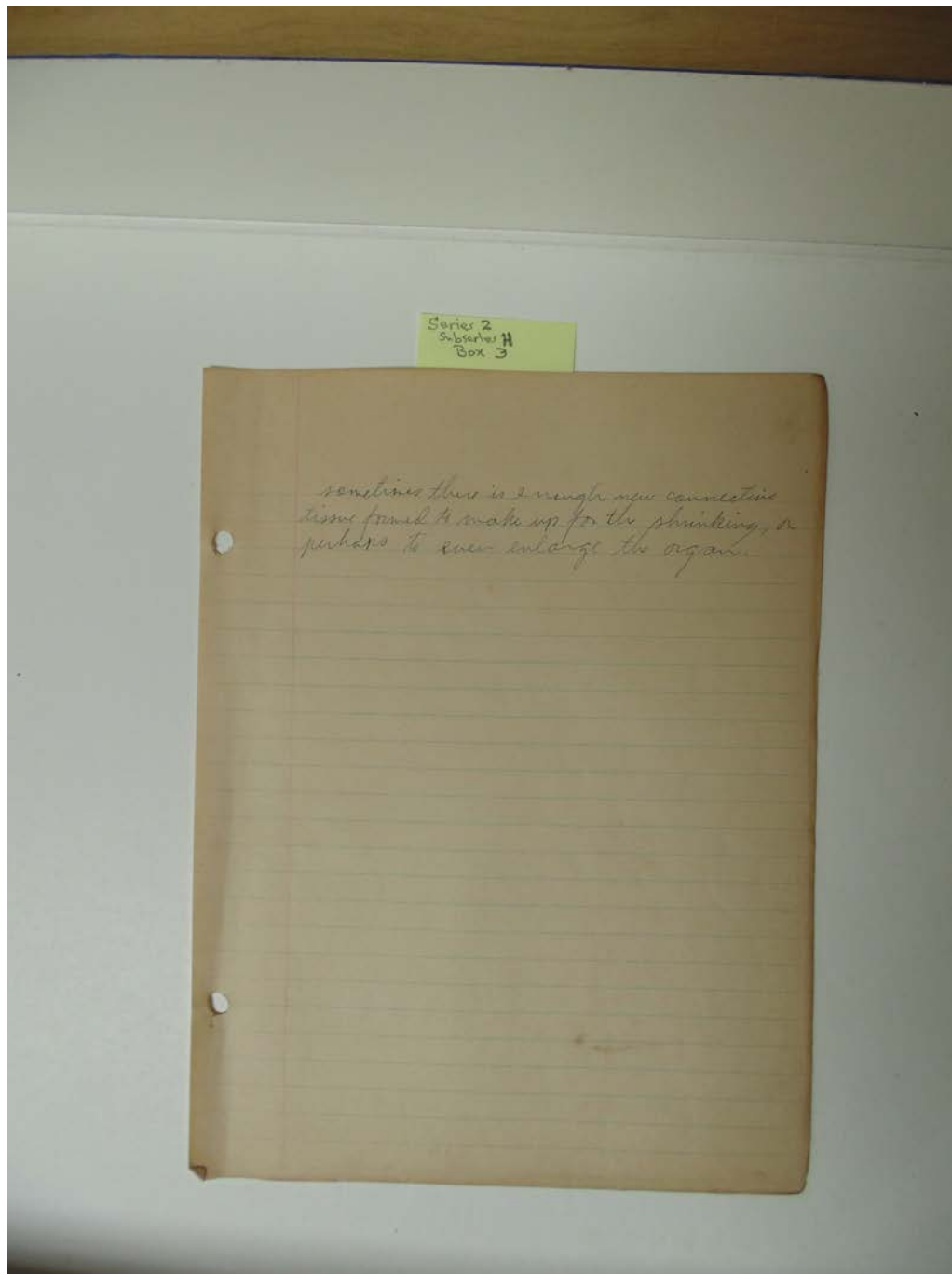
Types:

essay

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

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Names:

Atrophy

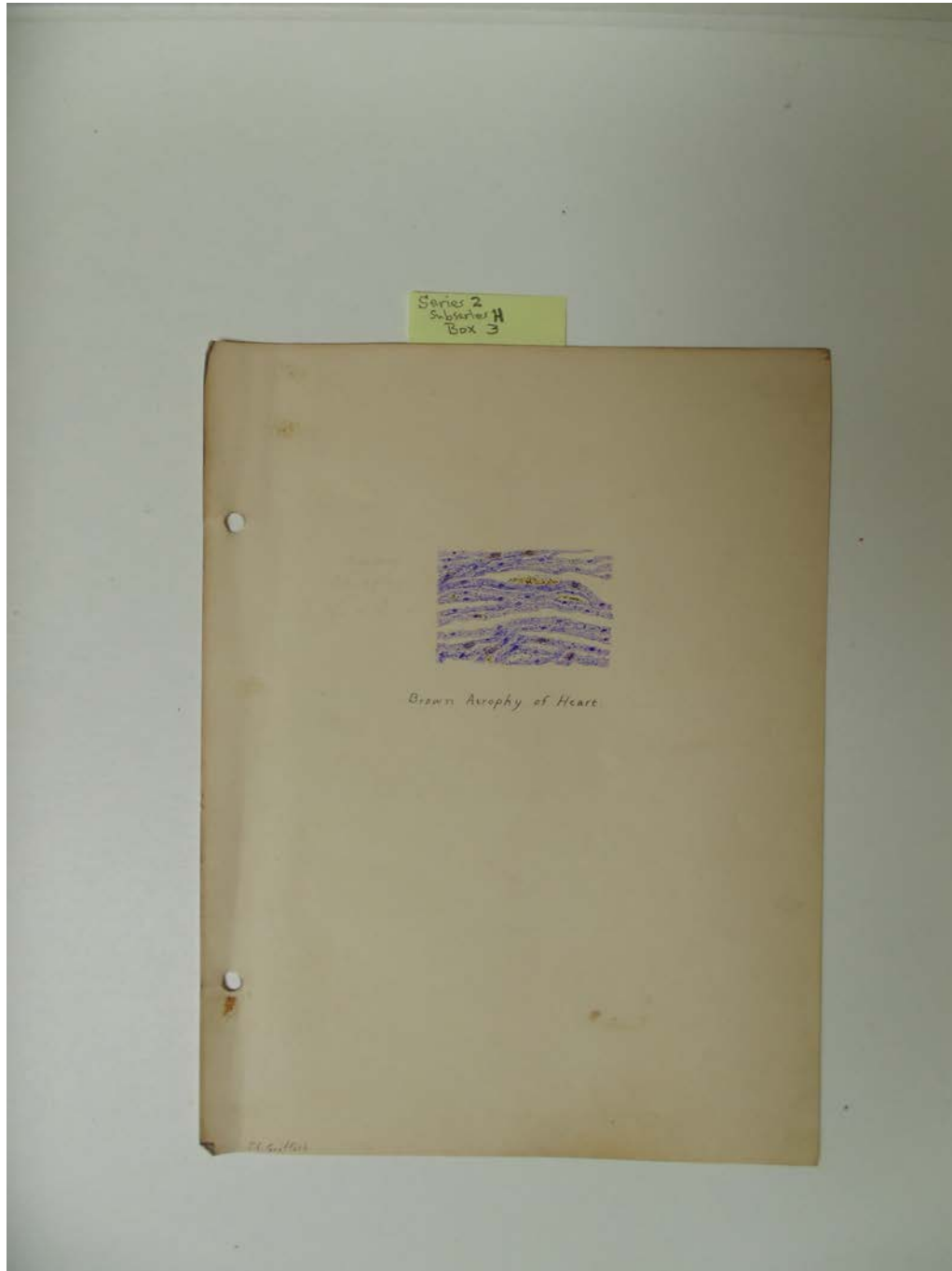
Types:

essay

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

Image 6 r02h03-00-002-6277 [Contents](#) [Index](#) [About](#)

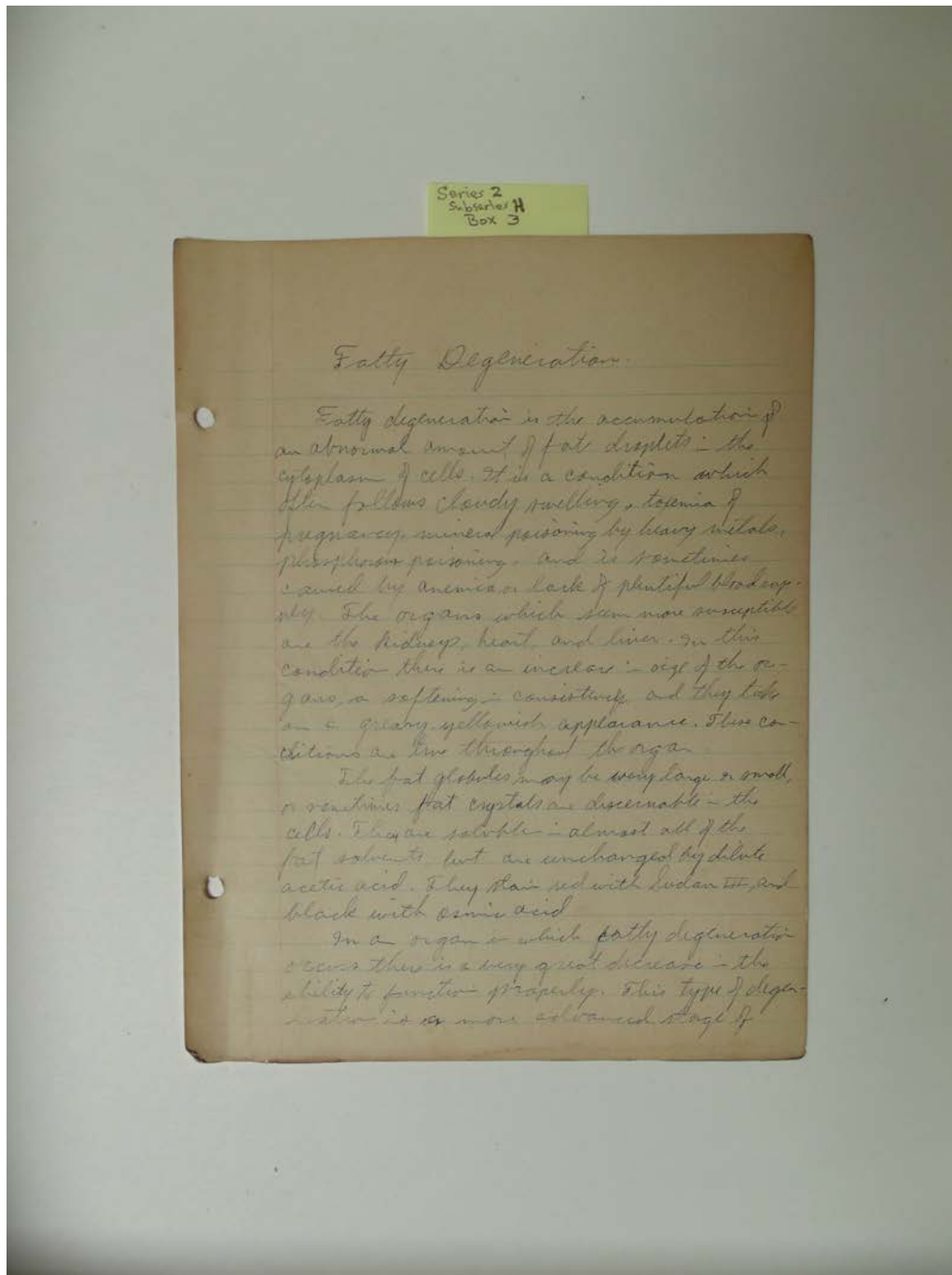


Names:

Atrophy of heart

Types:

drawing

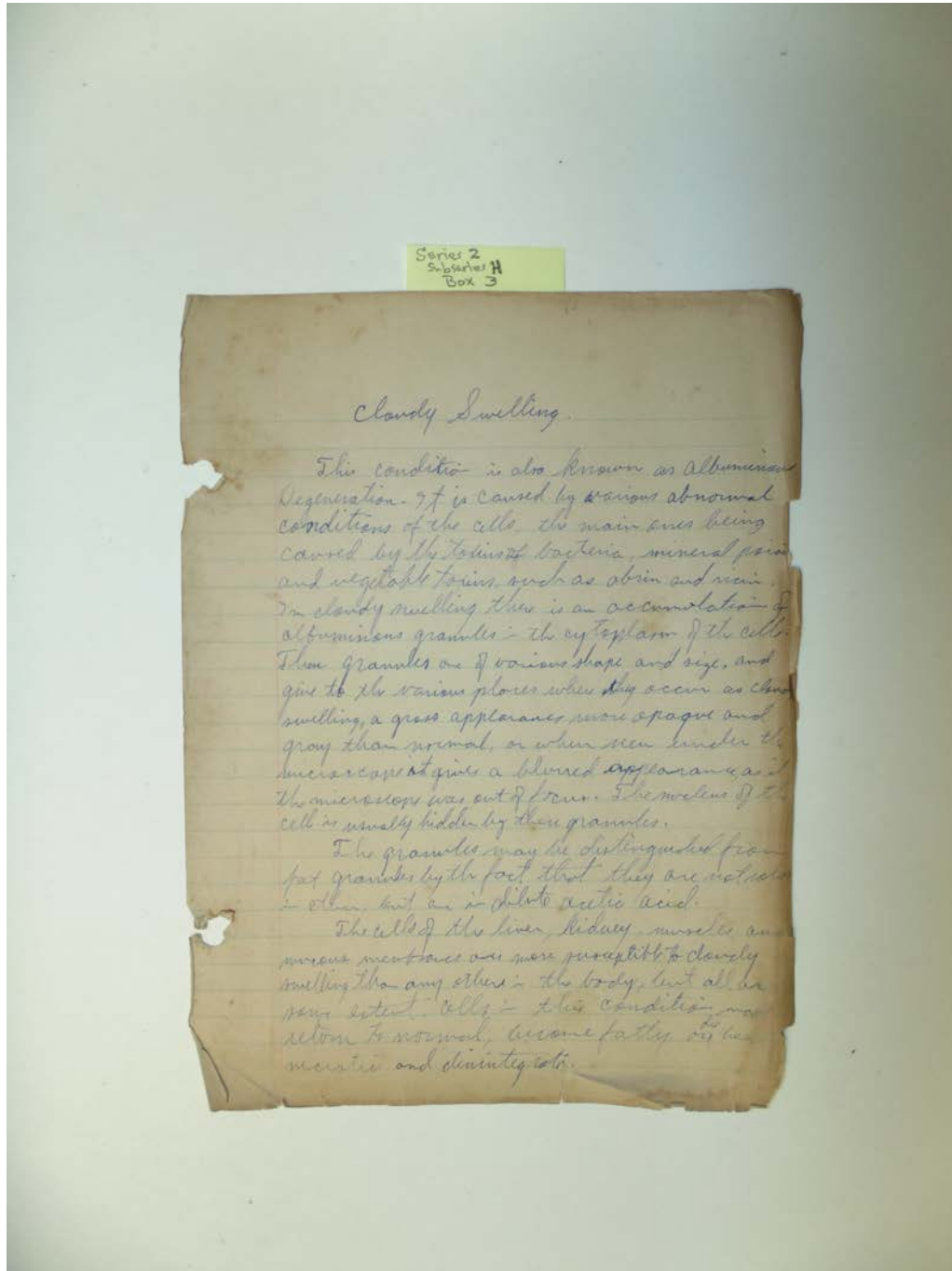


Names:

Fatty Degeneration

Types:

essay



Names:

Cloudy Swelling

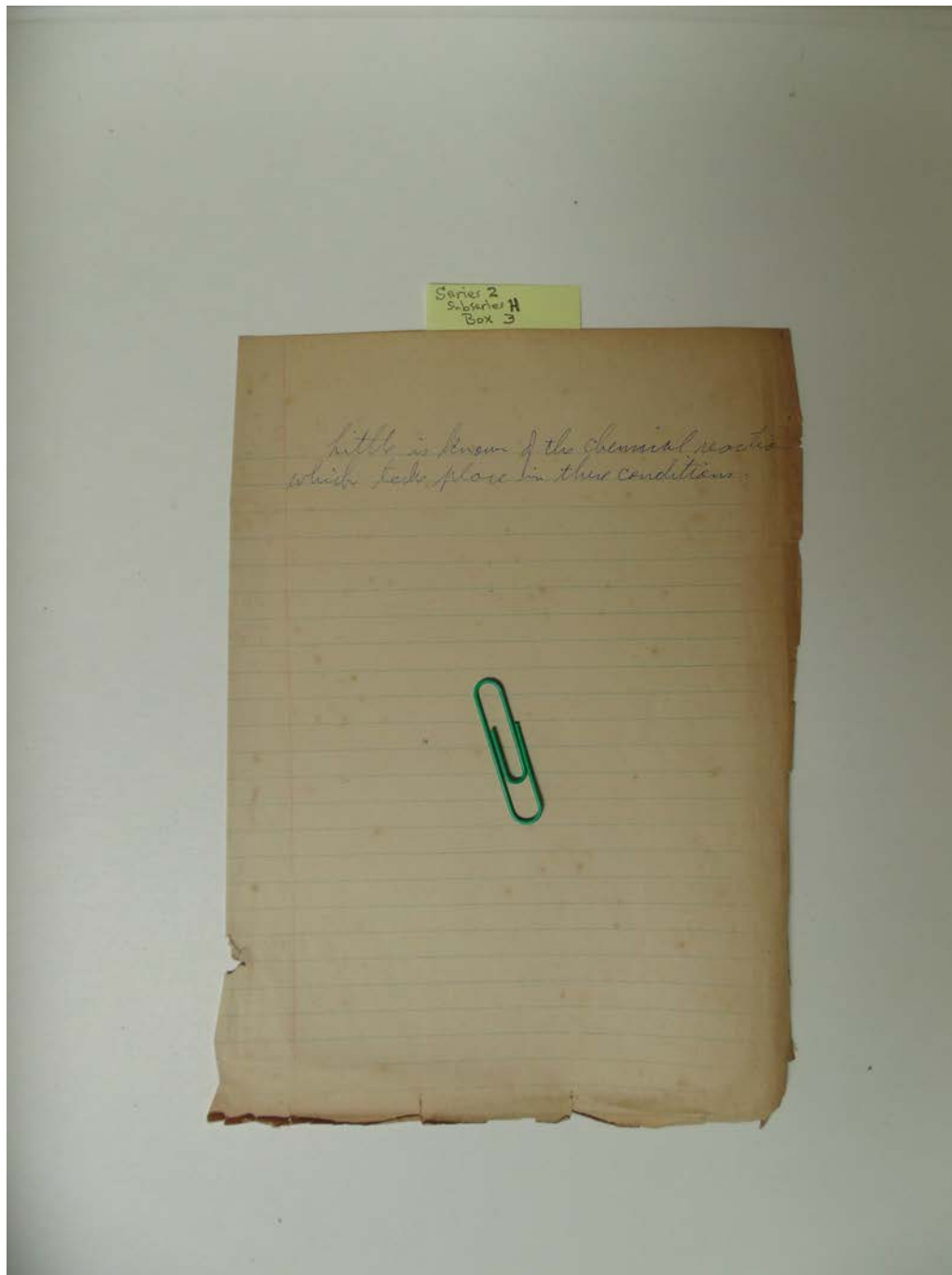
Types:

essay

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

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Names:

Cloudy Swelling

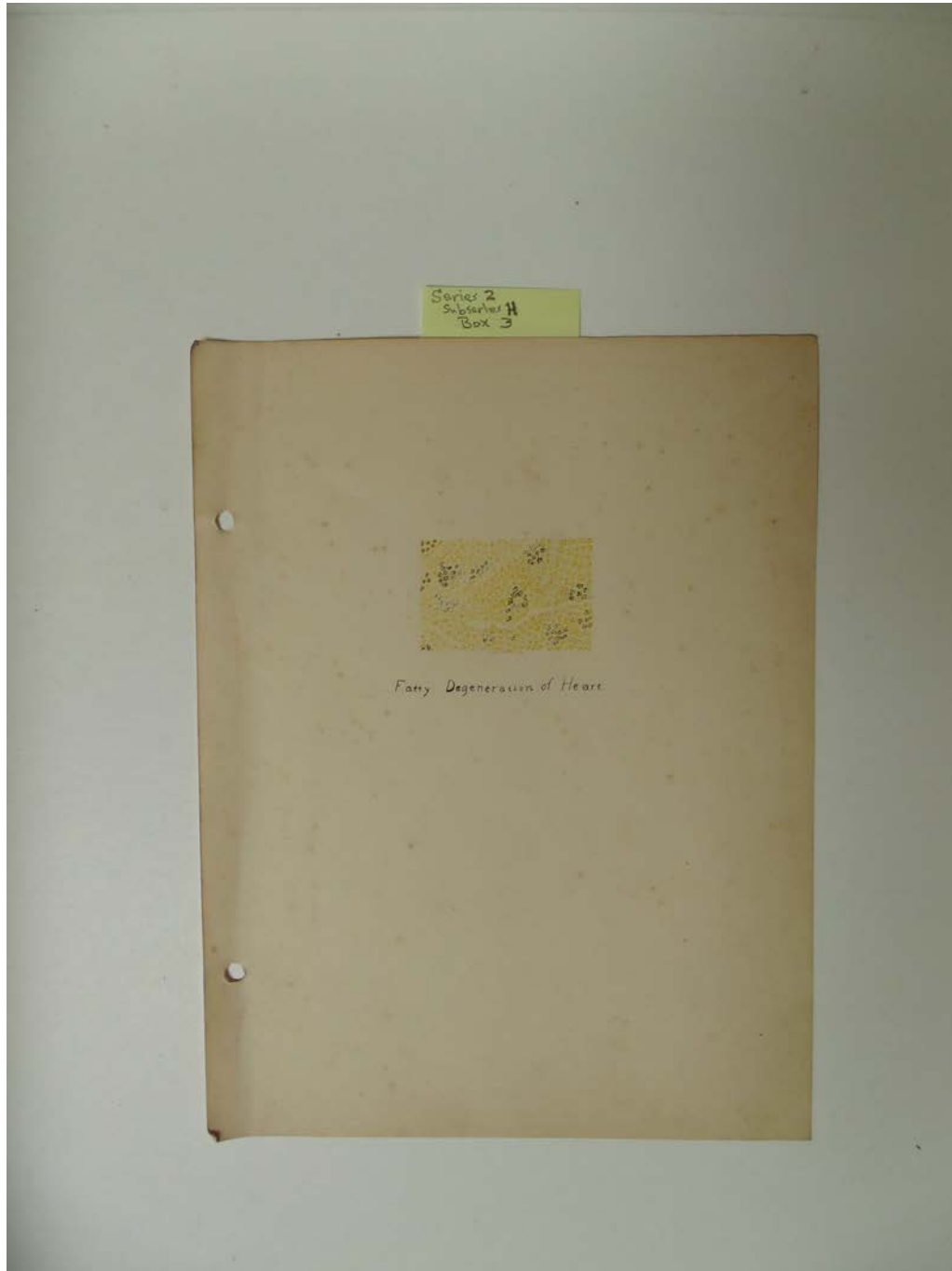
Types:

essay

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

Image 10 r02h03-00-002-6281 [Contents](#) [Index](#) [About](#)

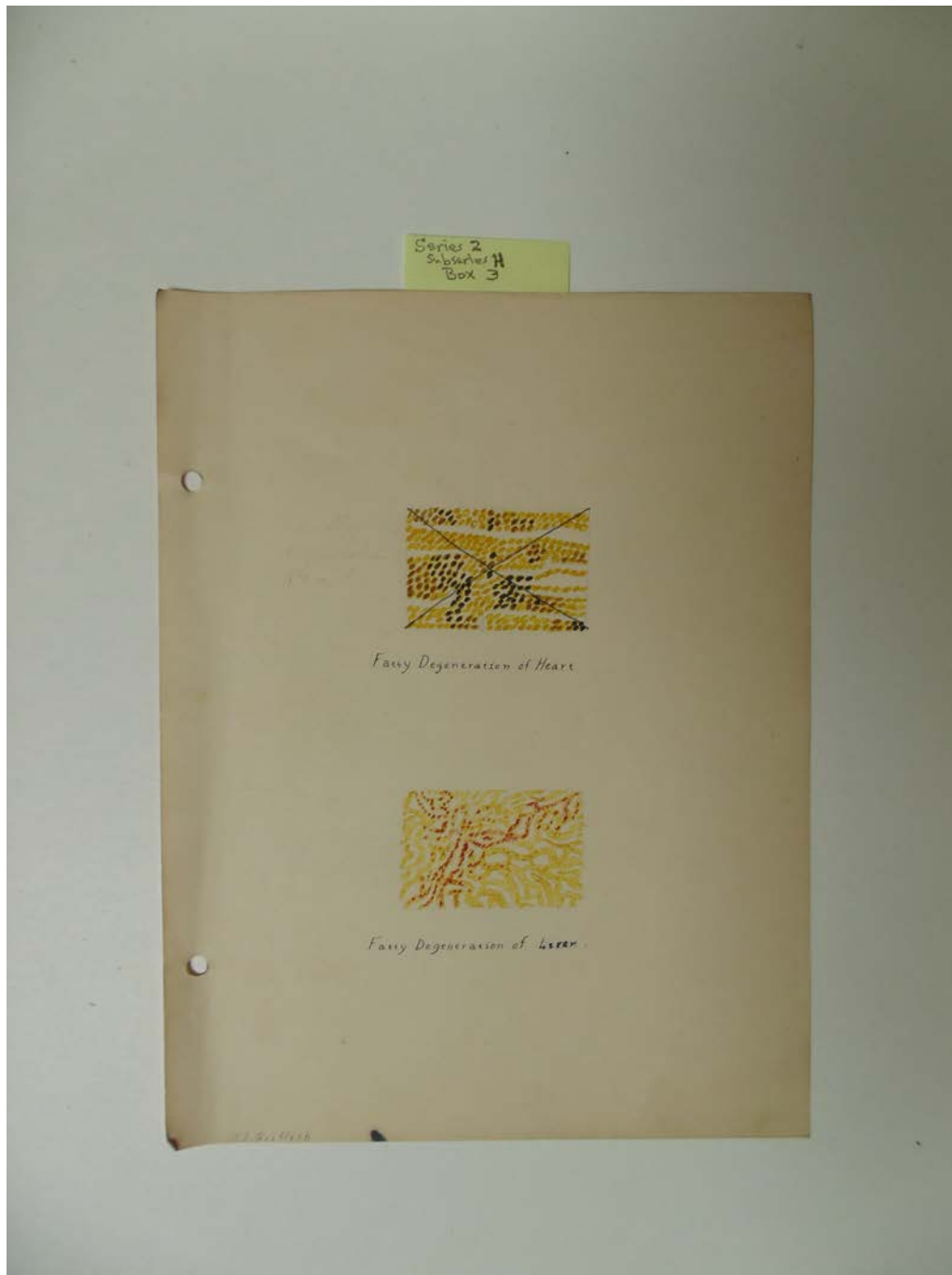


Names:

Fatty Degeneration of
heart

Types:

drawing



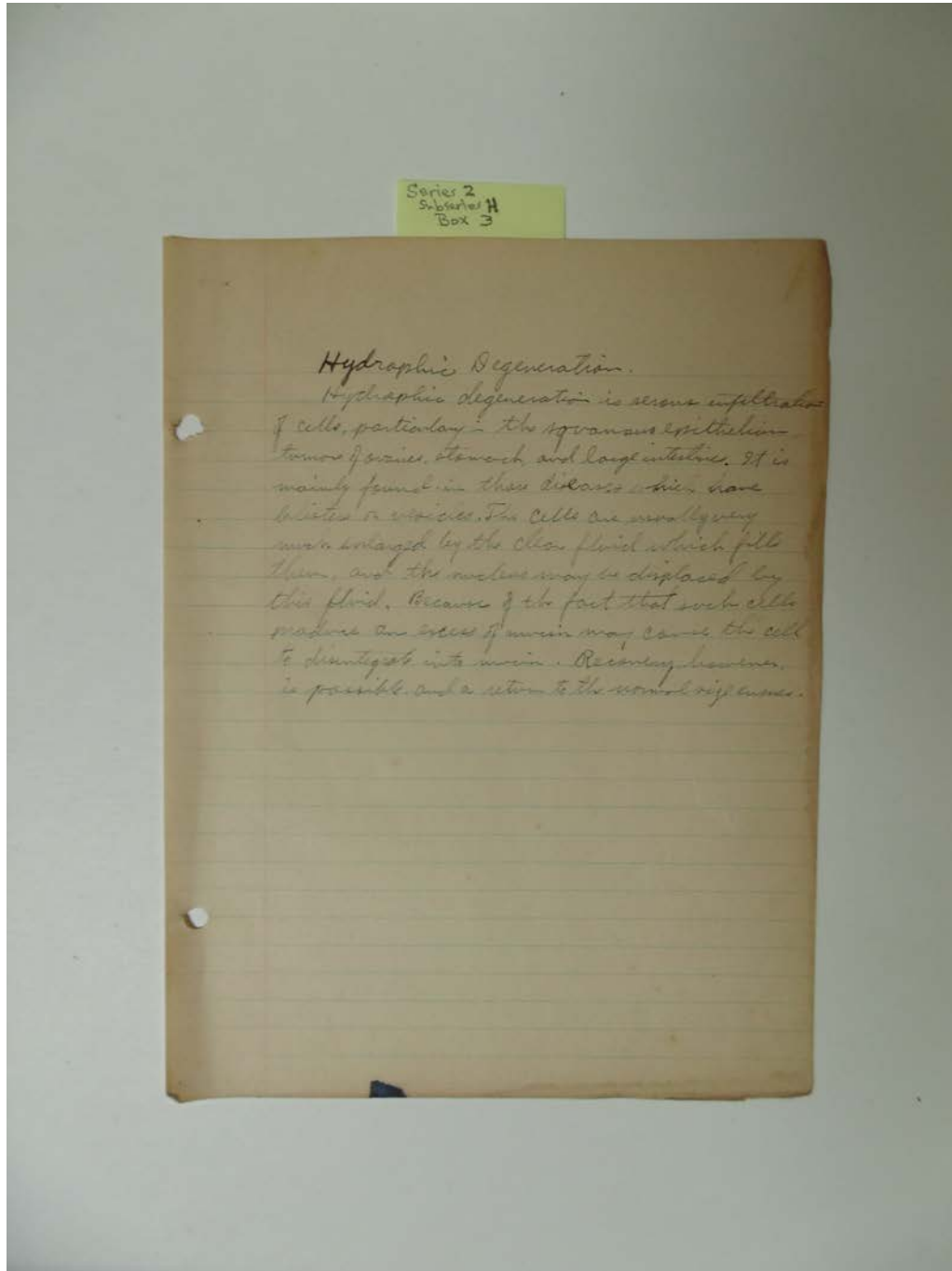
Names:

Fatty Degeneration of
heart

Fatty Degeneration of
liver

Types:

drawing



Names:

Hydropic
Degeneration

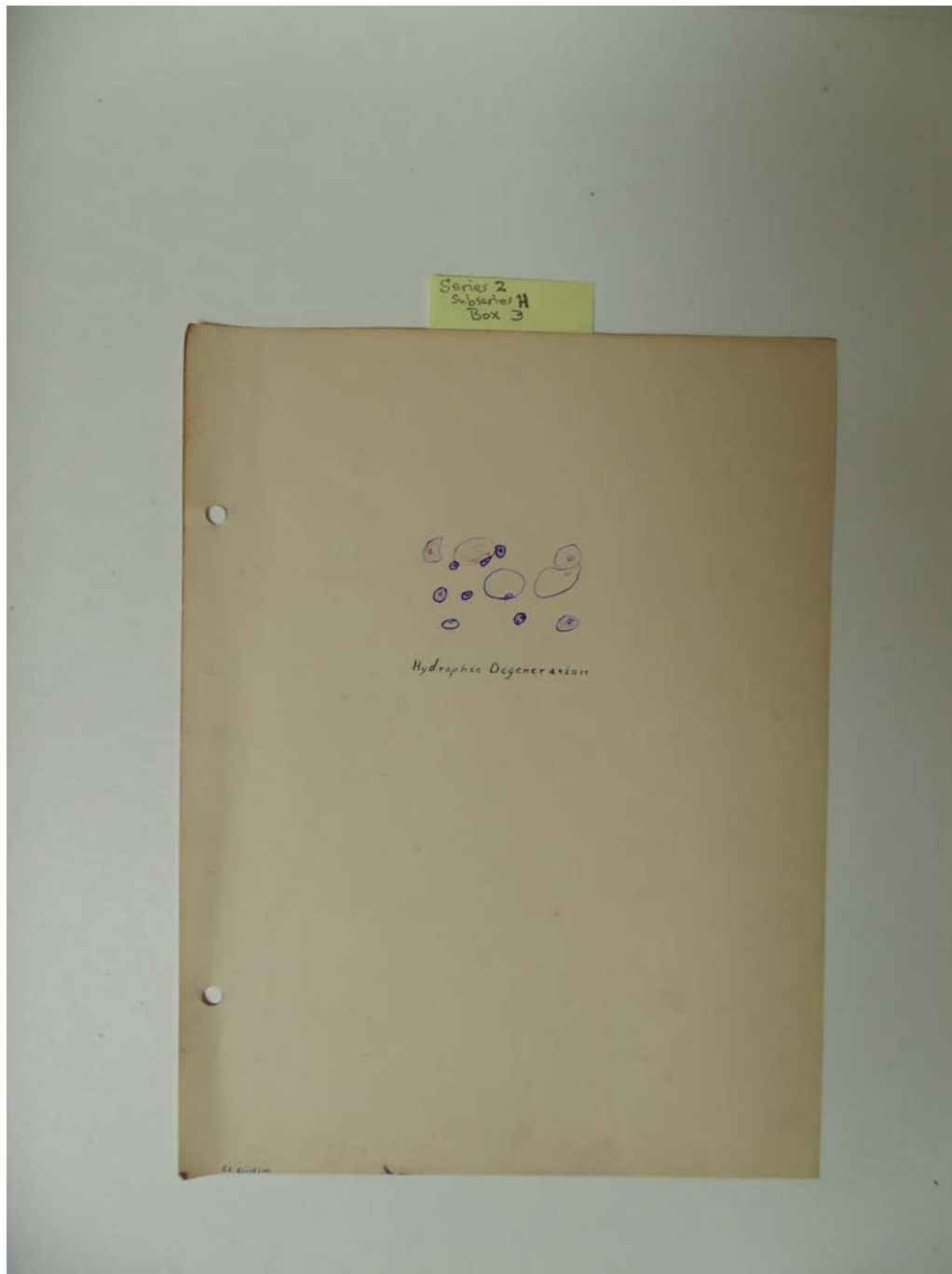
Types:

essay

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

Image 13 r02h03-00-002-6284 [Contents](#) [Index](#) [About](#)

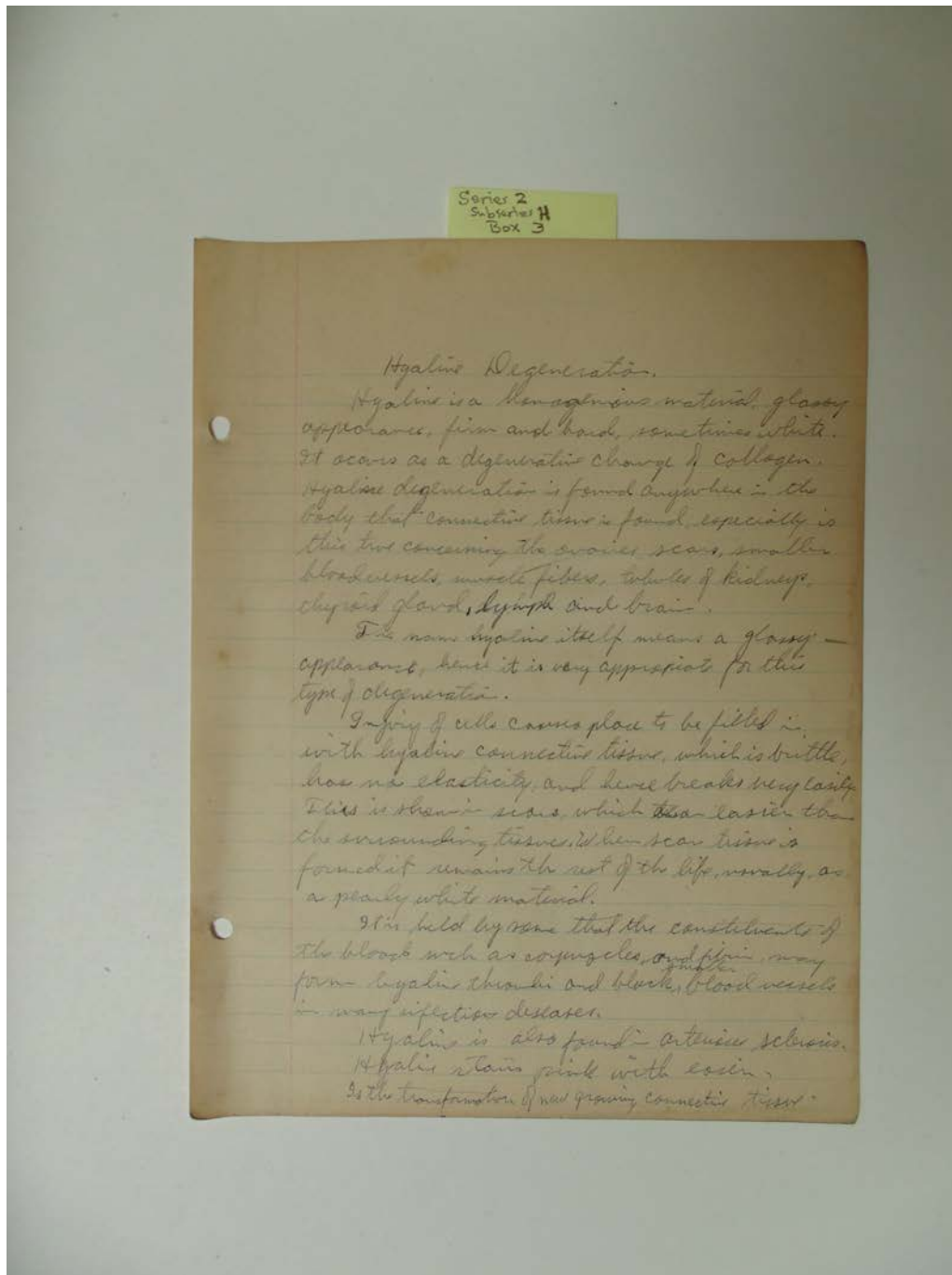


Names:

Hydropic
Degeneration

Types:

drawing



Hyaline Degeneration.

Hyaline is a homogeneous material, glassy appearance, firm and hard, sometimes white. It occurs as a degenerative change of collagen. Hyaline degeneration is found anywhere in the body but connective tissue is found especially in this type concerning the arteries, scars, smaller blood vessels, muscle fibers, tubules of kidney, thyroid gland, lymph and brain.

The name hyaline itself means a glassy appearance, hence it is very appropriate for this type of degeneration.

Injury of cells causes place to be filled in with hyaline connective tissue, which is brittle, has no elasticity, and hence breaks very easily. This is what is seen which is easier than the surrounding tissues. When scar tissue is formed it remains the rest of the life, usually as a pearly white material.

It is held by some that the constituents of the blood such as corpuscles, and fibrin may form hyaline thrombi and blocks, blood vessels in many infectious diseases.

Hyaline is also found in arteriosclerosis.

Hyaline stains pink with eosin.

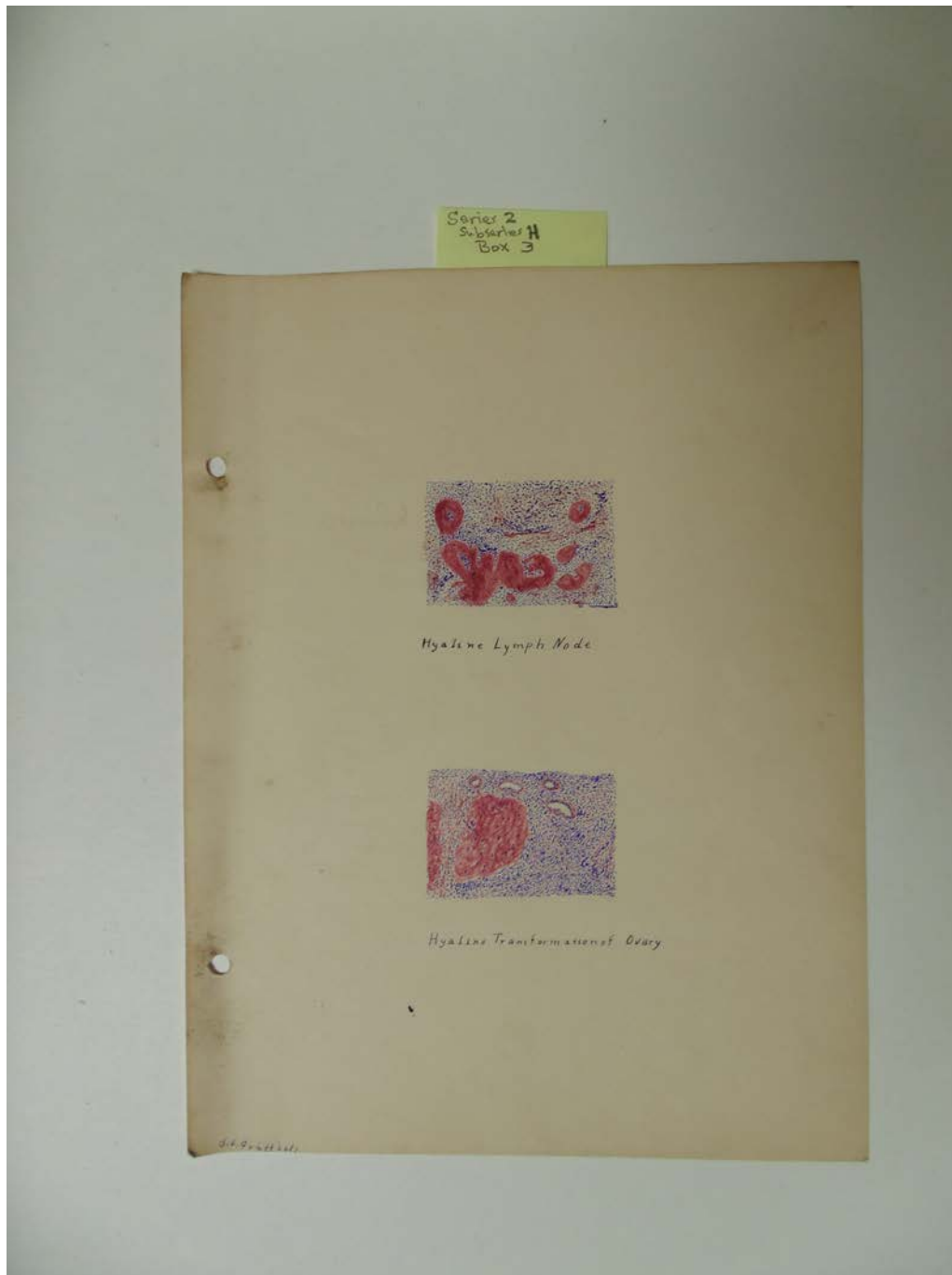
As the transformation of new growing connective tissue.

Names:

Hyaline Degeneration

Types:

essay



Names:

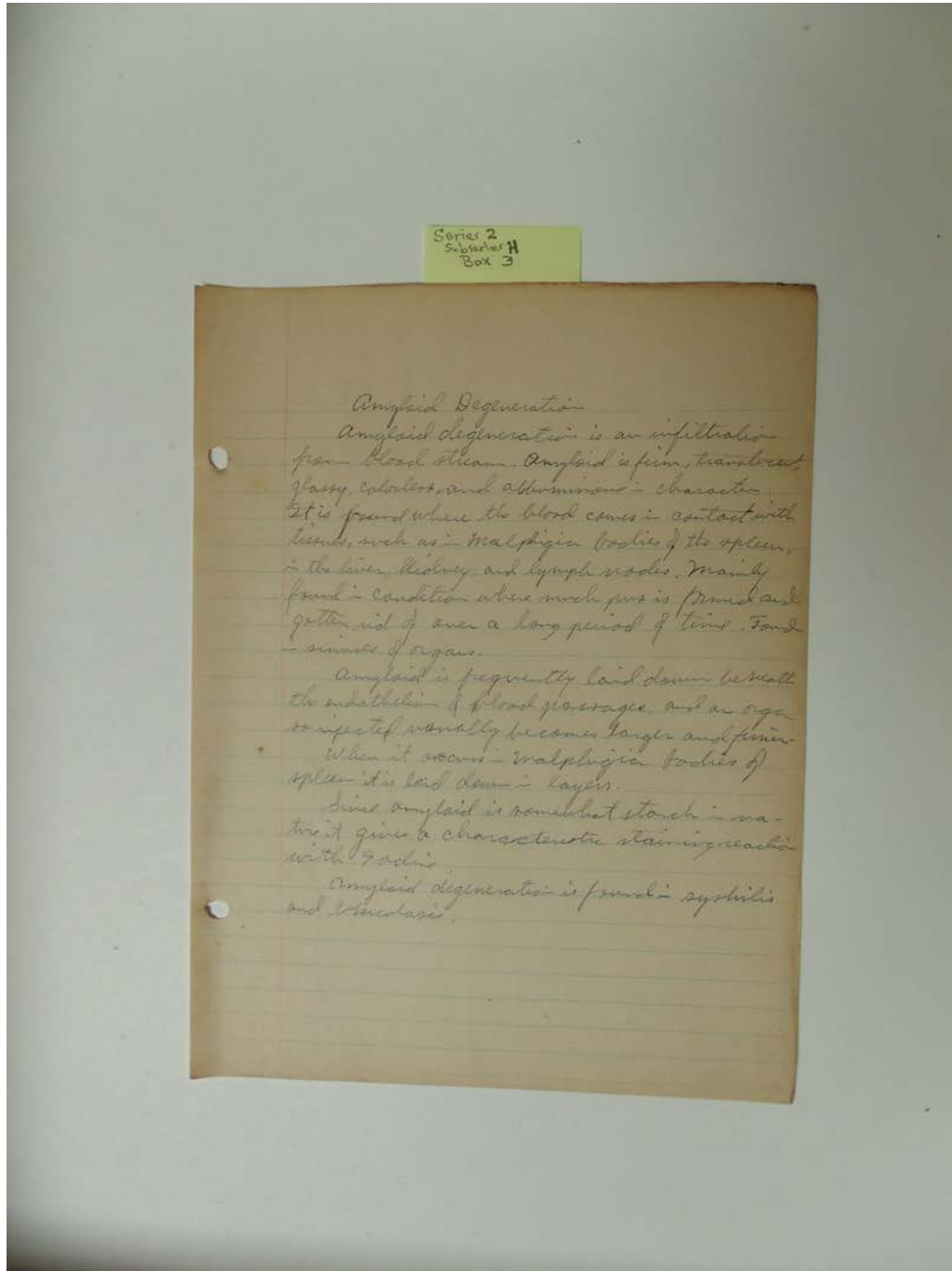
Hyaline Lymph Node

Hyaline
Transformation of

Ovary

Types:

drawing

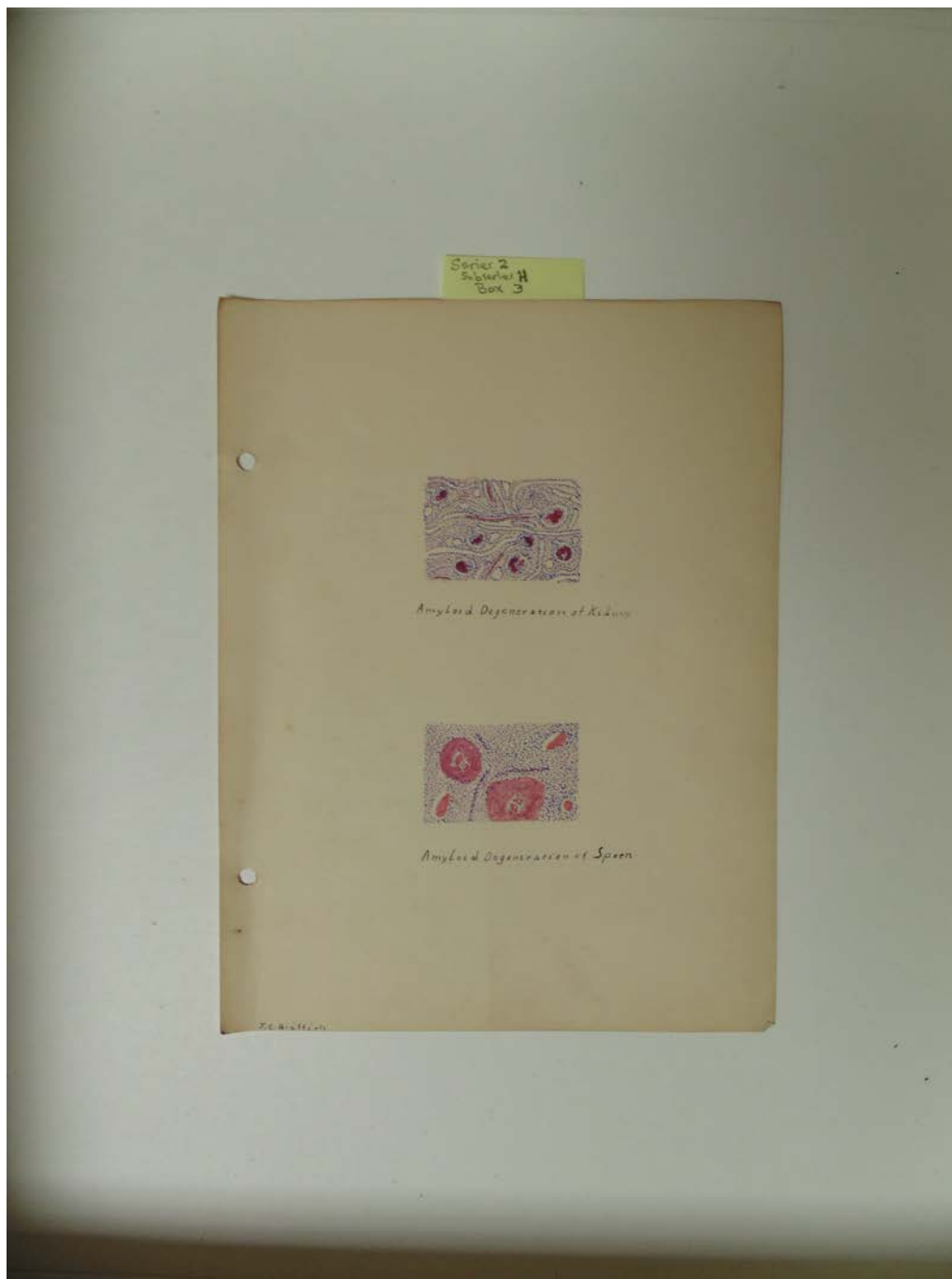


Names:

Amyloid
Degeneration

Types:

essay



Names:

Amyloid
Degeneration of

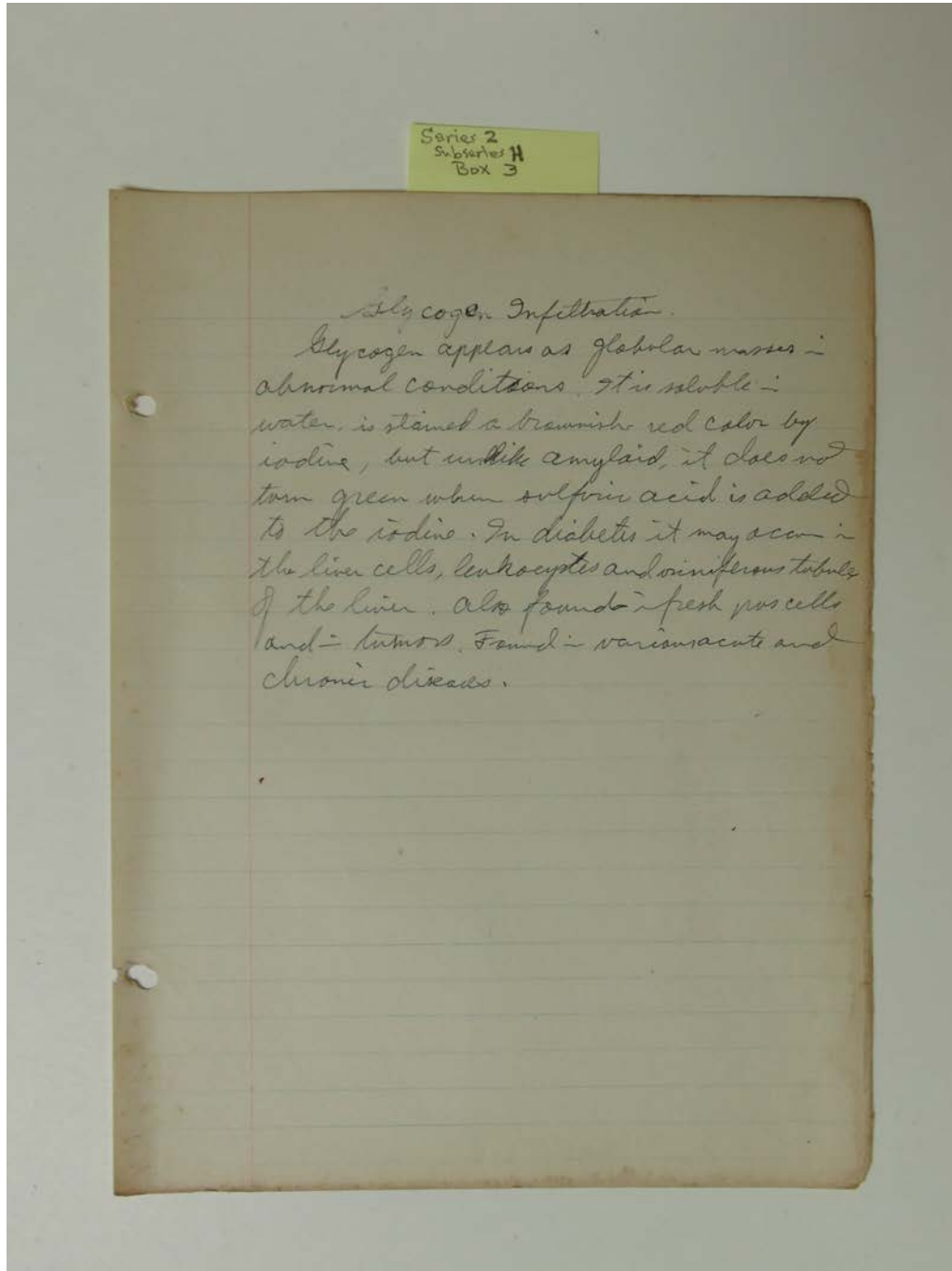
Kidney

Amyloid
Degeneration of

Spleen

Types:

drawing

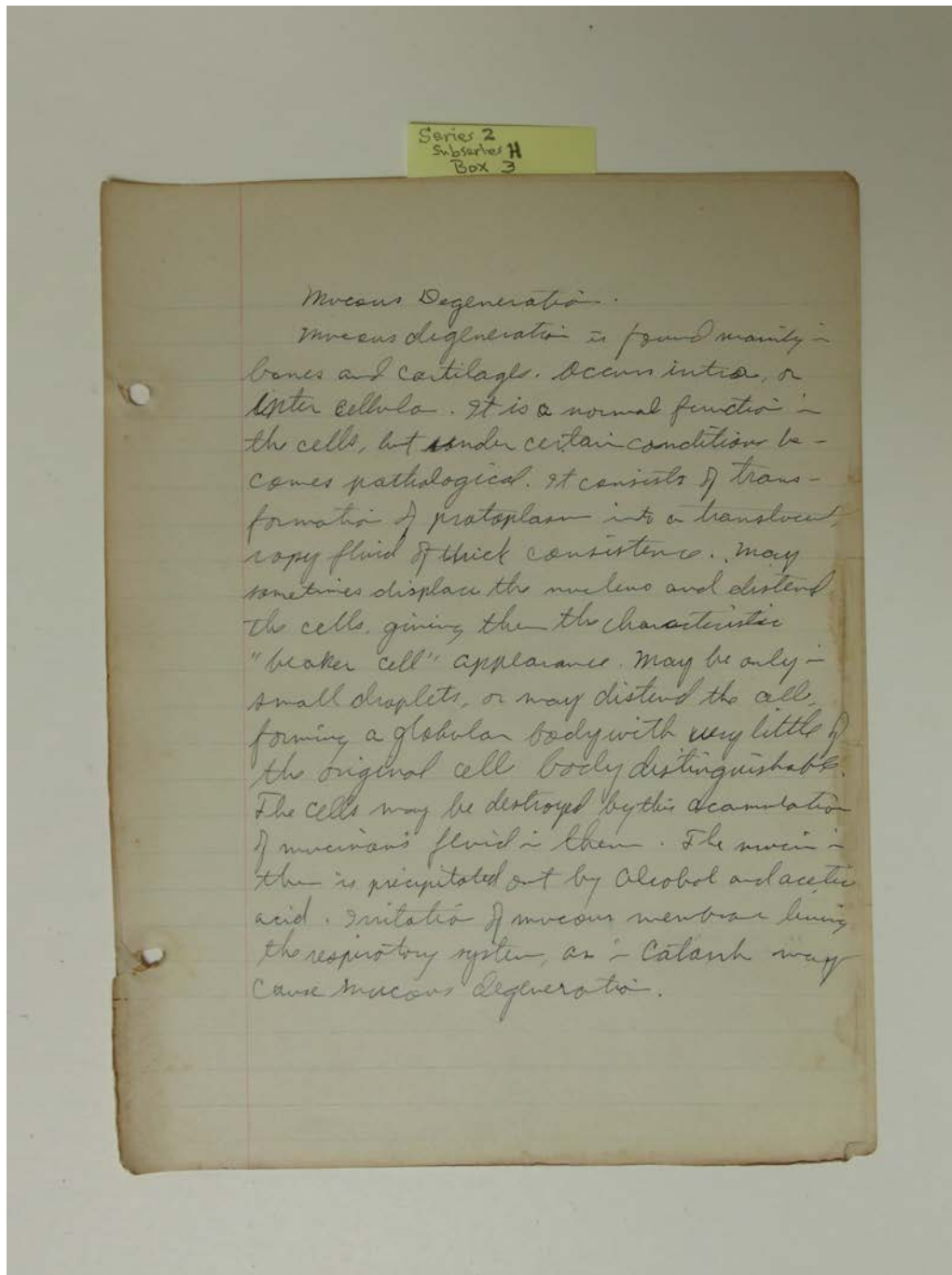


Names:

Glycogen Infiltration

Types:

essay

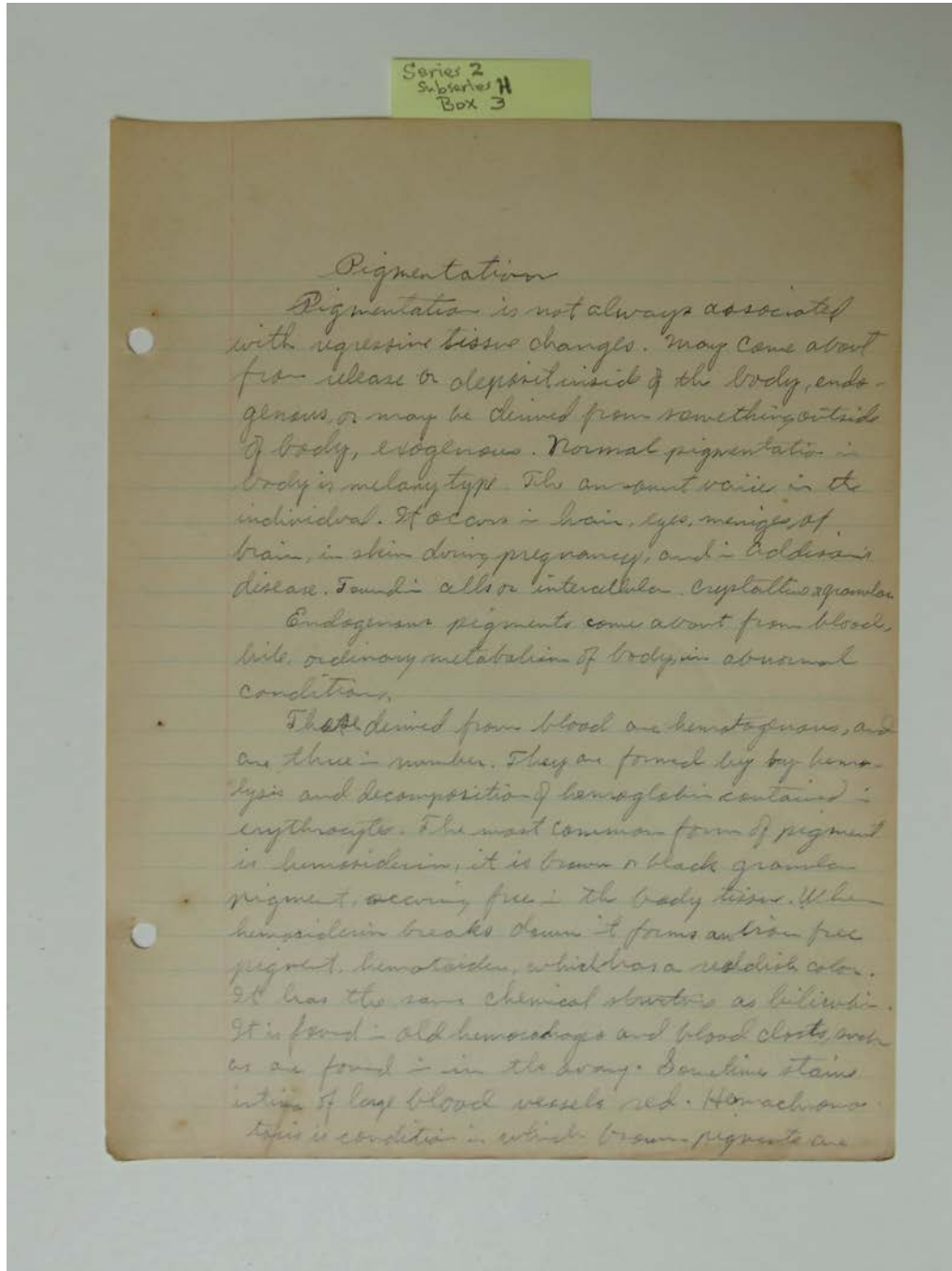


Names:

Mucous Degeneration

Types:

essay

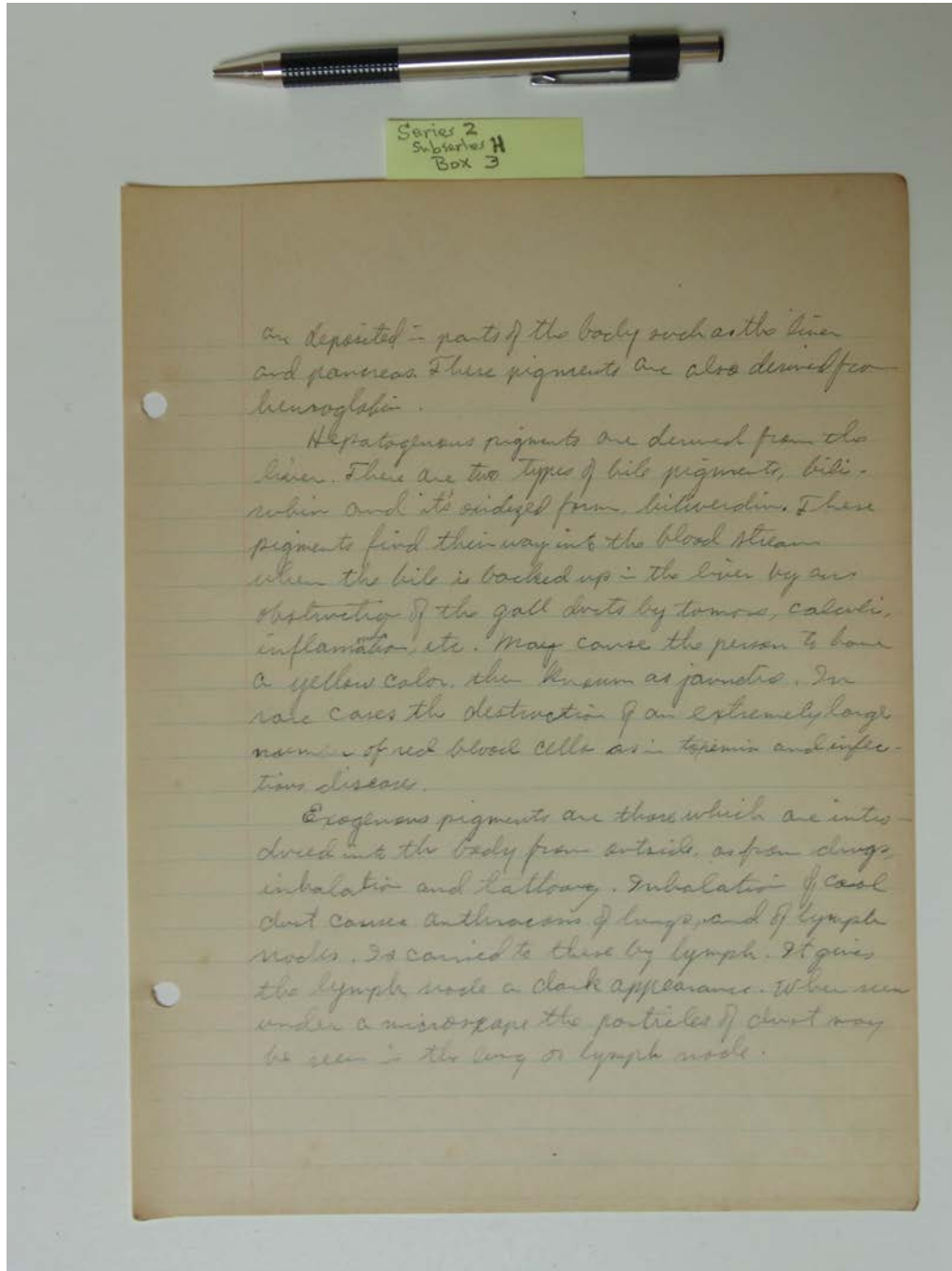


Names:

Pigmentation

Types:

essay



Names:

Pigmentation

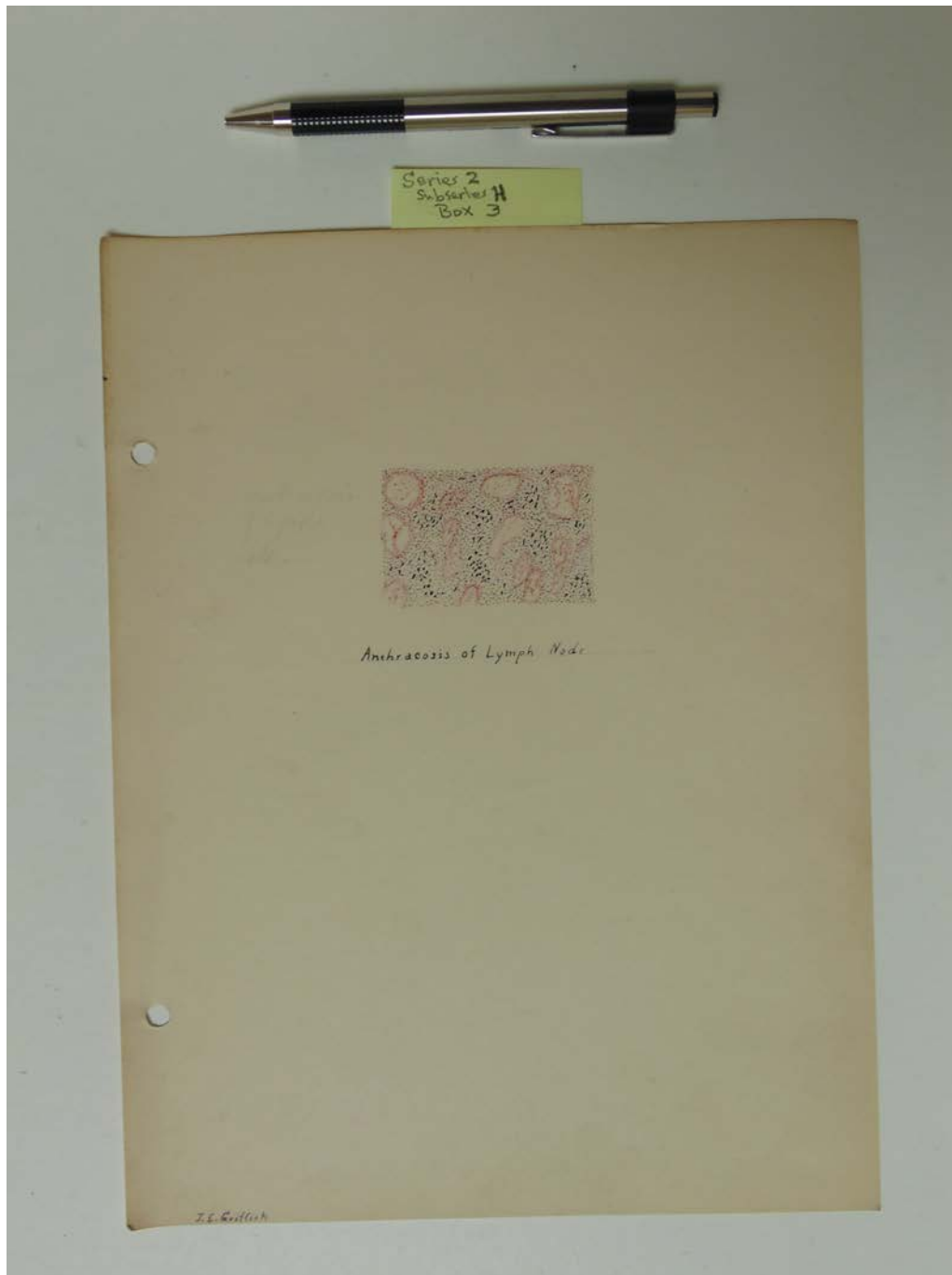
Types:

essay

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

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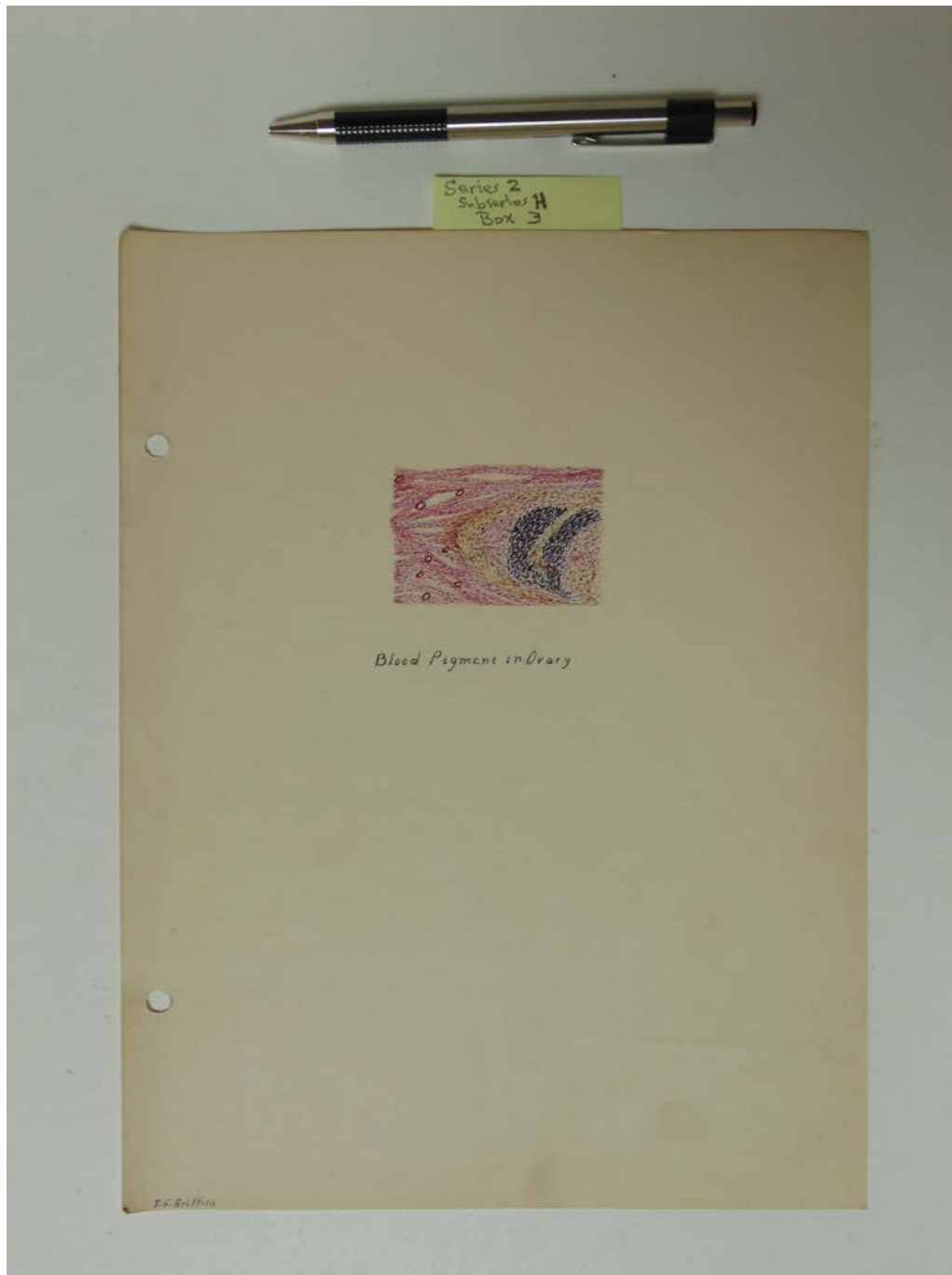


Names:

Anthracosis of
Lymph Node

Types:

drawing



Names:

Blood Pigment in
Ovary

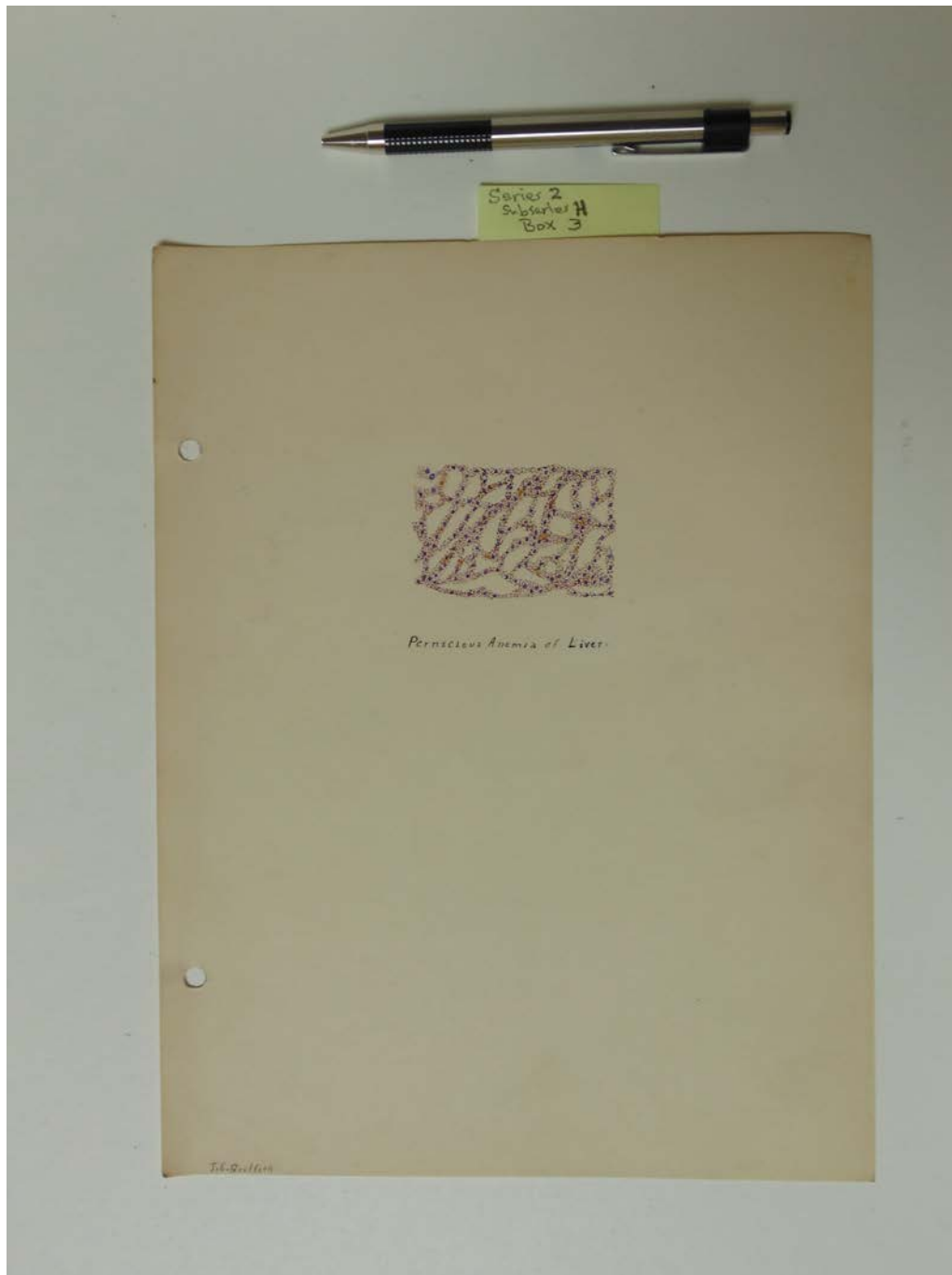
Types:

drawing

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

Image 24 r02h03-00-002-6295 [Contents](#) [Index](#) [About](#)

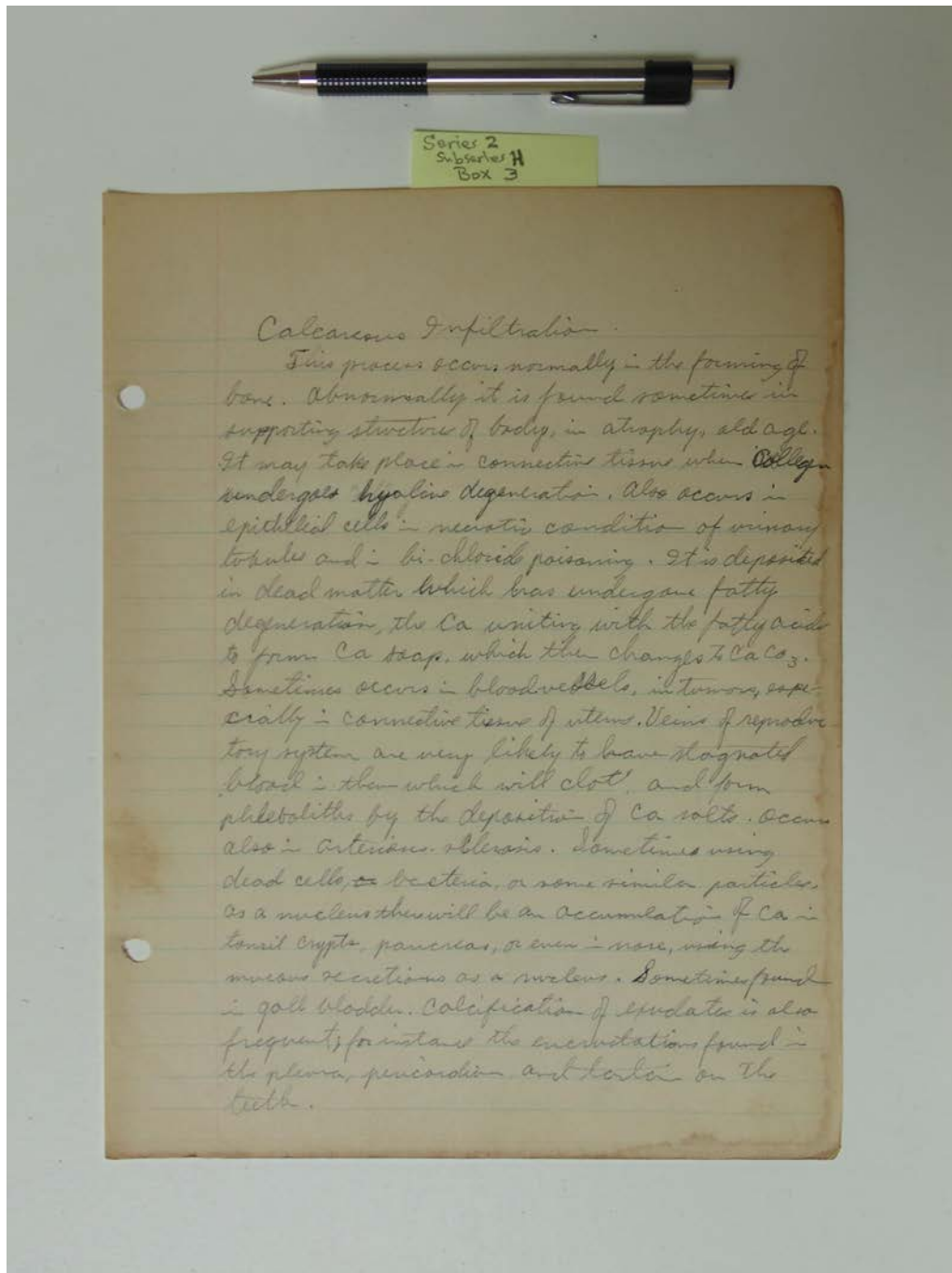


Names:

Pernicious Anemia of
Liver

Types:

drawing



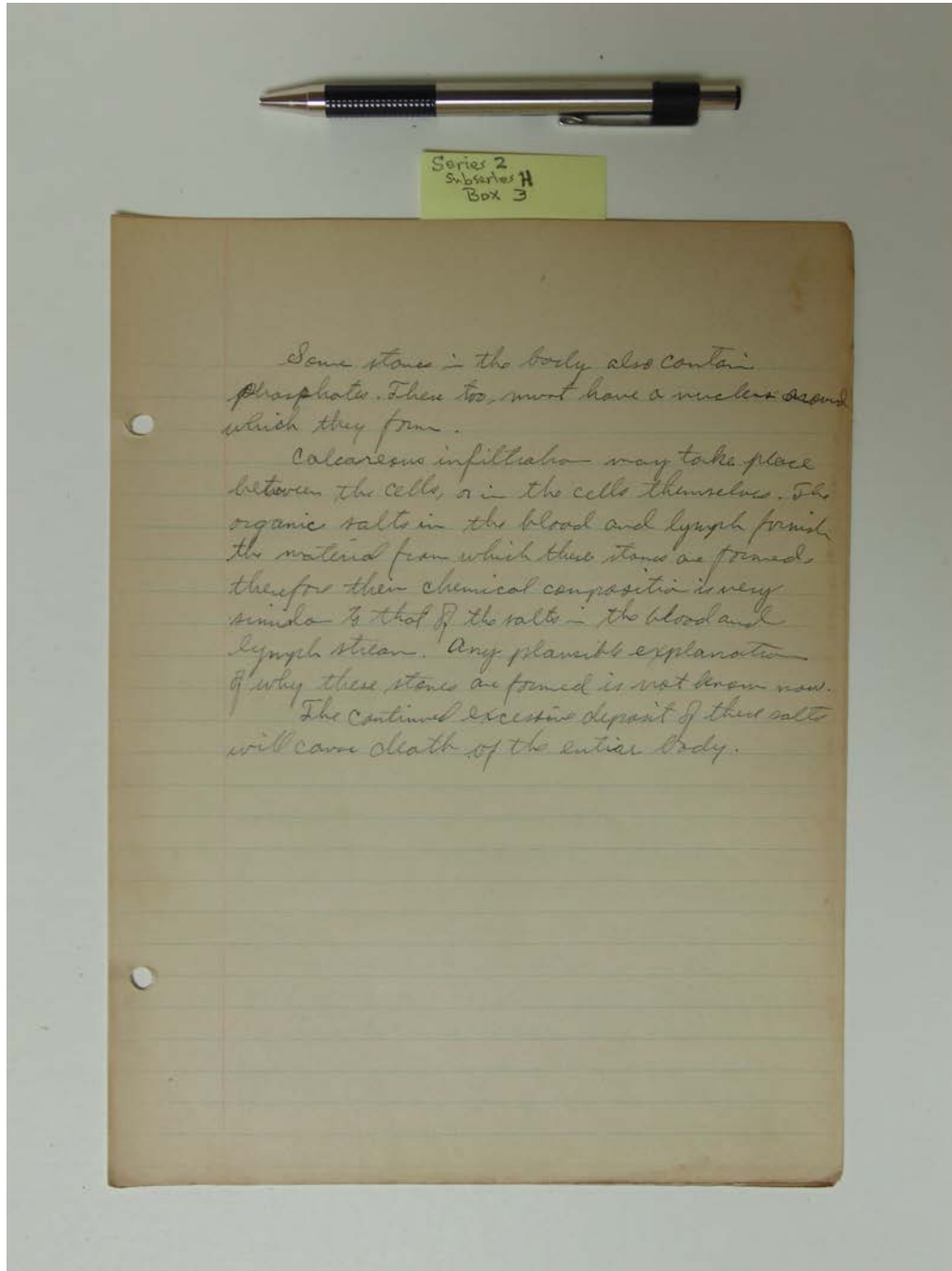
p. 1

Names:

Calcareous
Infiltration

Types:

essay



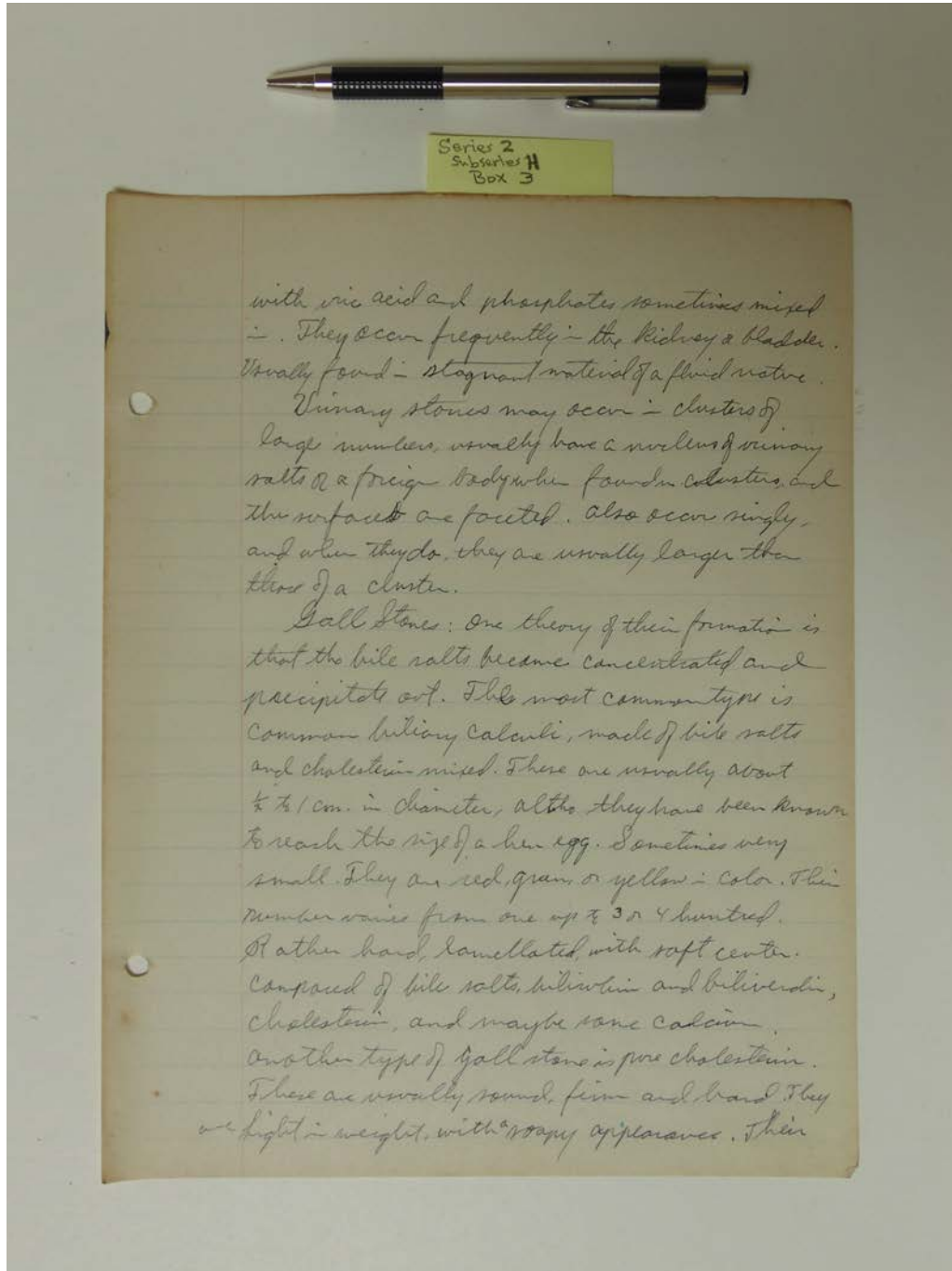
p. 2

Names:

Calcarous
Infiltration

Types:

essay



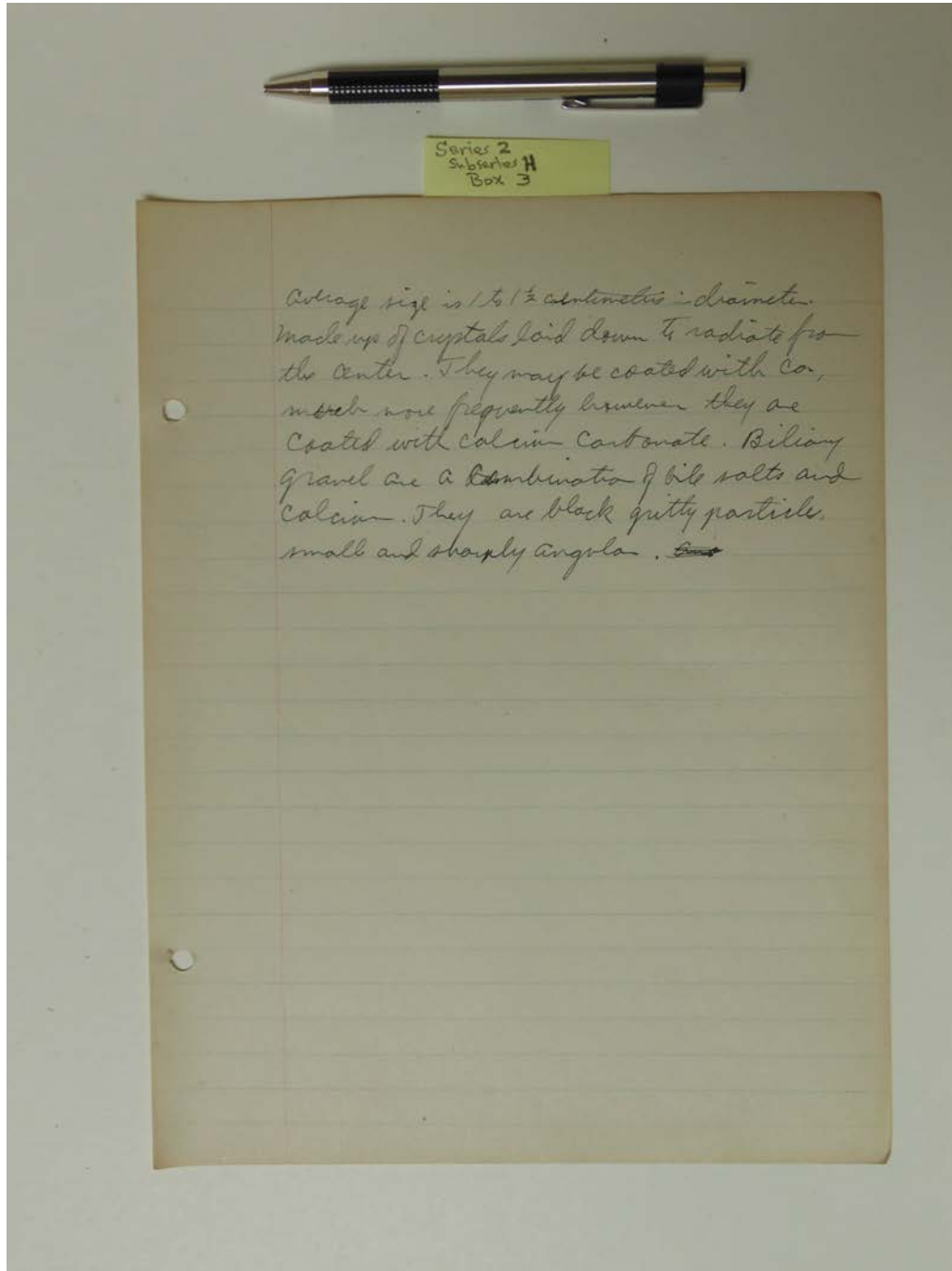
p. 3

Names:

Calcareous
Infiltration

Types:

essay



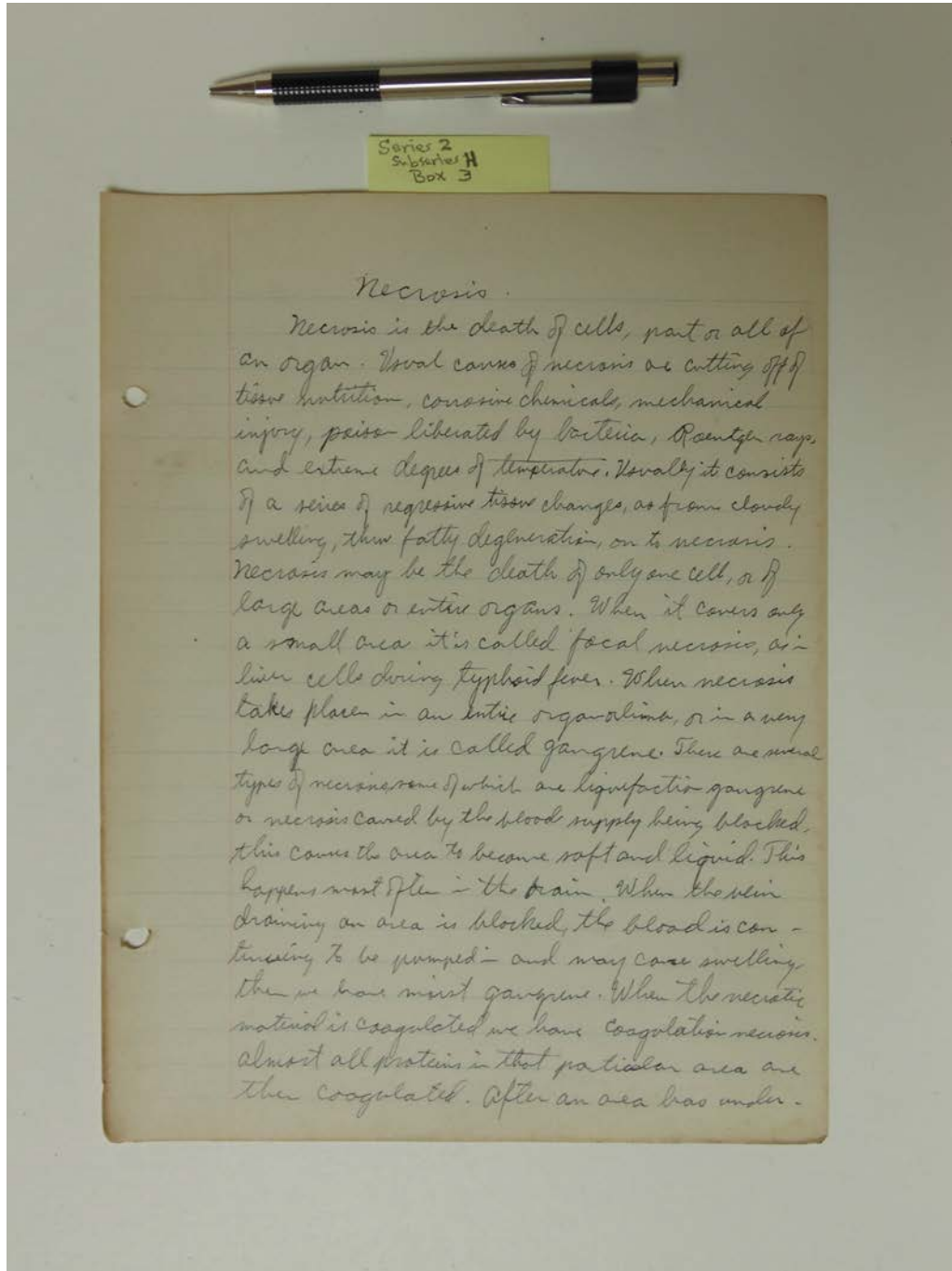
p. 4

Names:

Calcareous
Infiltration

Types:

essay

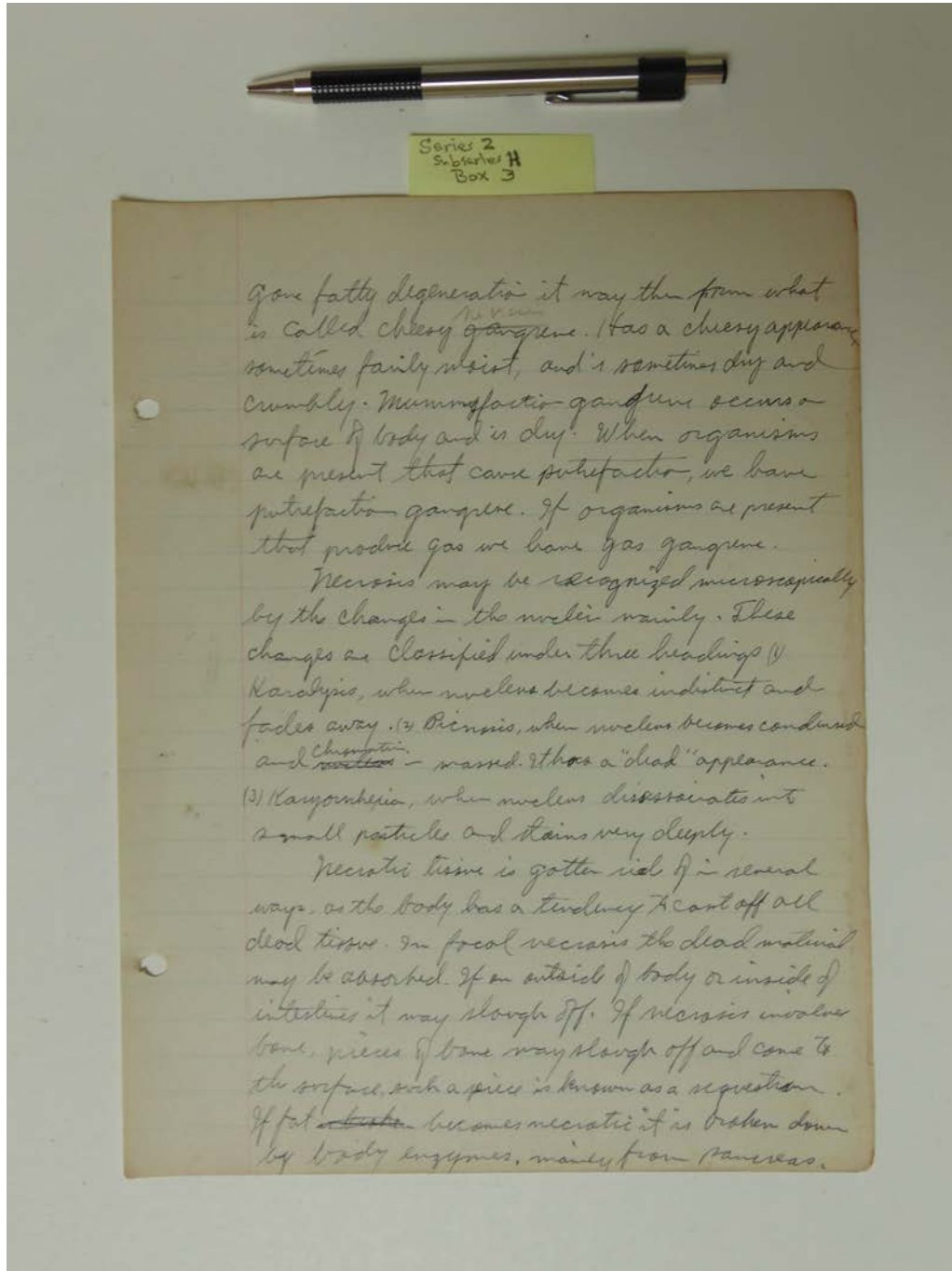


Names:

Necrosis

Types:

essay



gone fatty degeneration it may then from what is called cheesy gangrene. Has a cheesy appearance sometimes fairly moist, and is sometimes dry and crumbly. Mummification gangrene occurs on surface of body and is dry. When organisms are present that cause putrefaction, we have putrefaction gangrene. If organisms are present that produce gas we have gas gangrene.

Necrosis may be recognized microscopically by the changes in the nuclei mainly. These changes are classified under three headings (1) Karyolysis, when nucleus becomes indistinct and fades away. (2) Pyknosis, when nucleus becomes condensed and ~~condensed~~ ^{chromatin} - massed. It has a "dead" appearance. (3) Karyorrhexis, when nucleus disintegrates into small particles and stains very deeply.

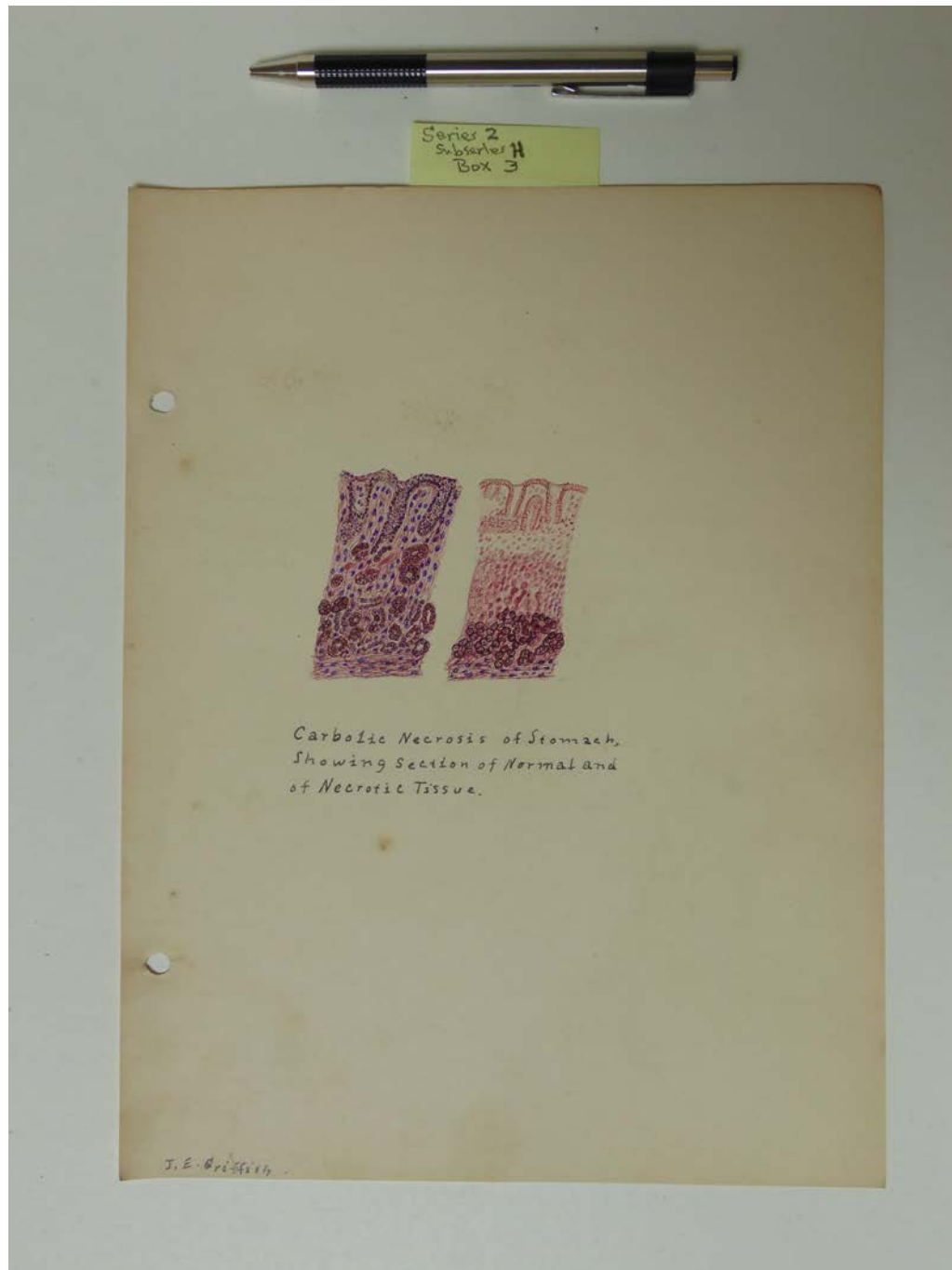
Necrotic tissue is gotten rid of in several ways, as the body has a tendency to cast off all dead tissue. In focal necrosis the dead material may be absorbed. If on outside of body or inside of intestines it may slough off. If necrosis involves bone, pieces of bone may slough off and come to the surface, such a piece is known as a sequestrum. If fat ~~tissue~~ becomes necrotic it is broken down by body enzymes, mainly from pancreas.

Names:

Necrosis

Types:

essay

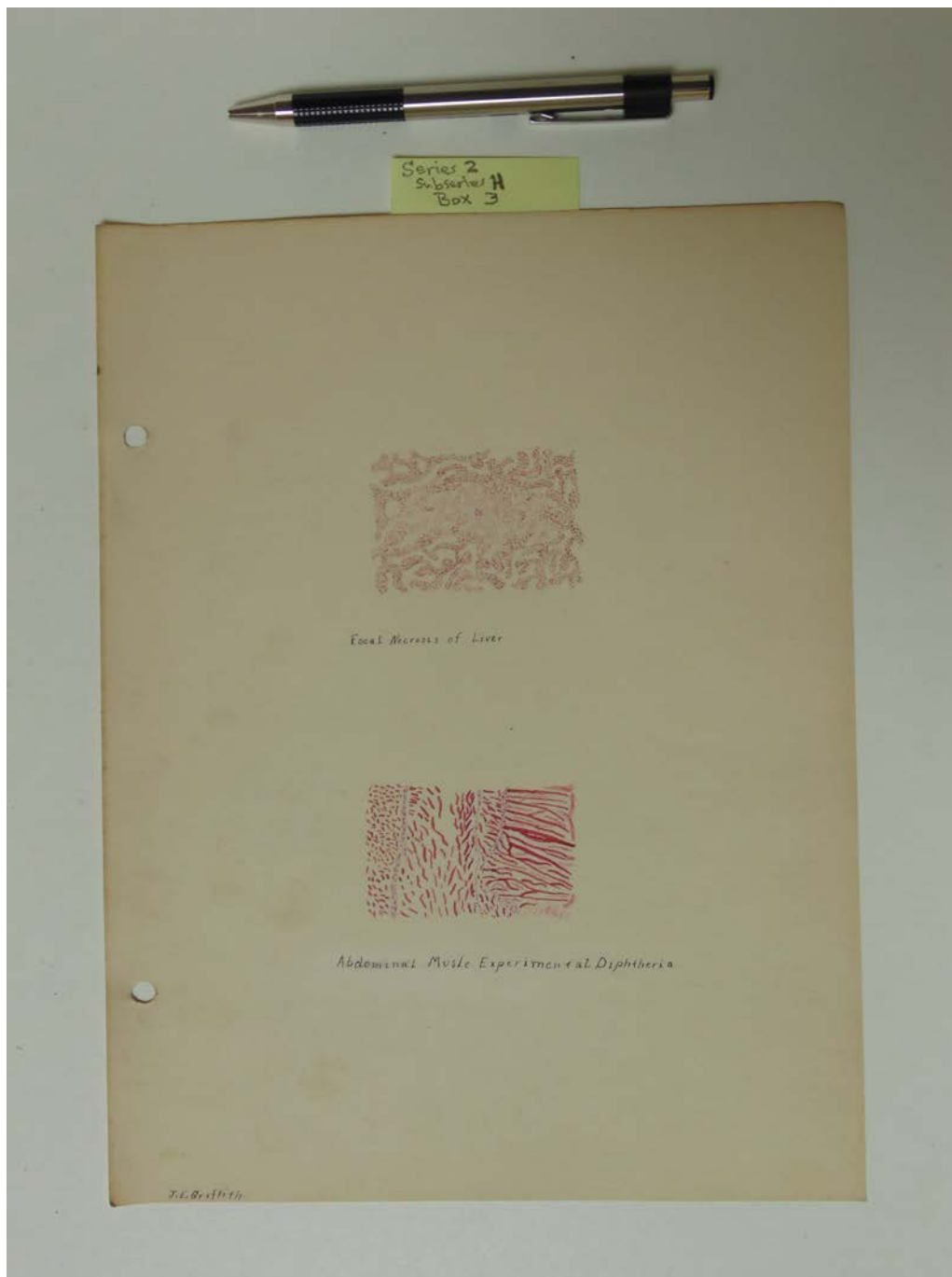


Names:

Carbolic Necrosis of
Stomach

Types:

drawing



Names:

Abdominal Muscle
Experimental

Diphtheria

Focal Necrosis of
Liver

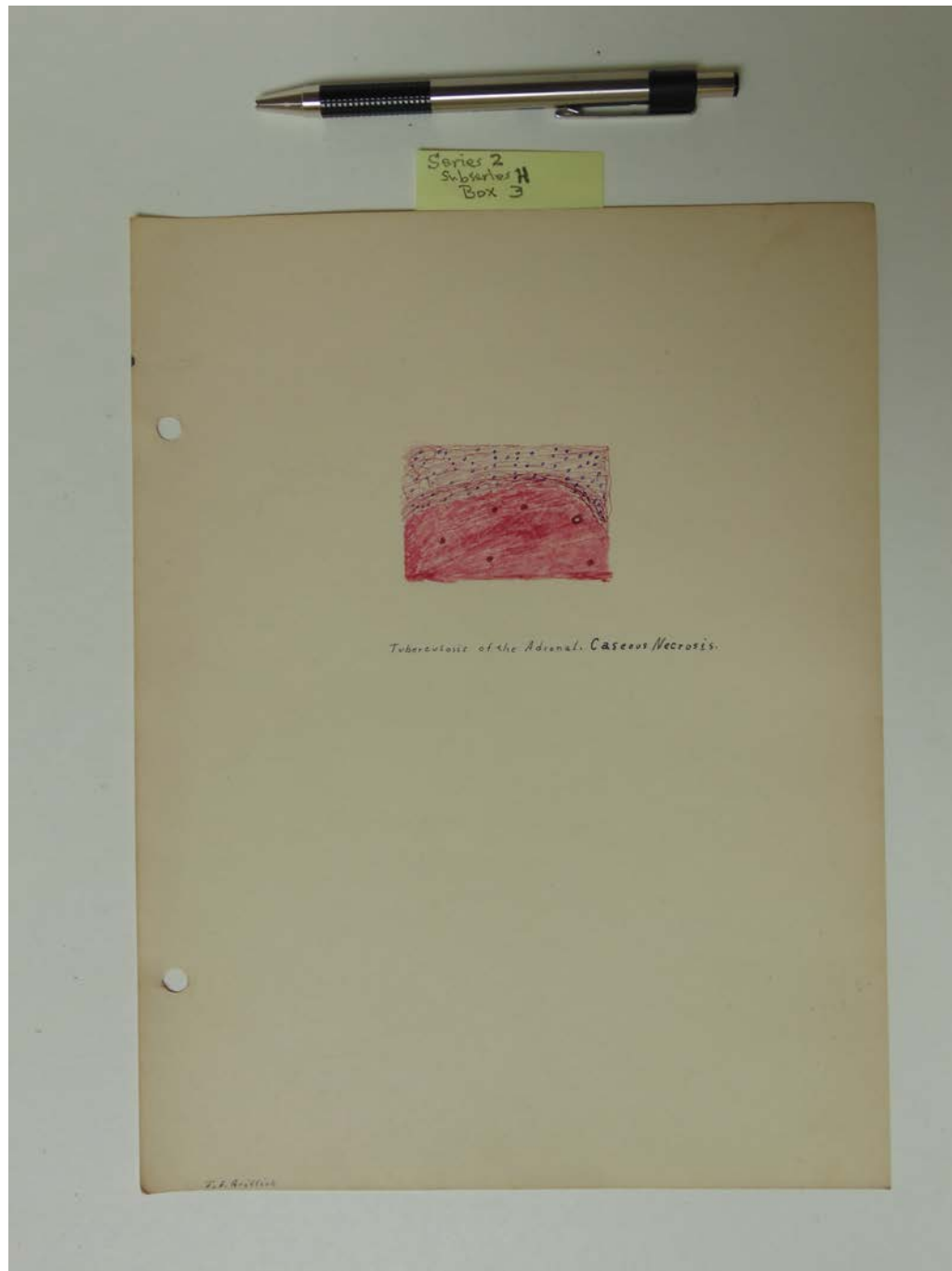
Types:

drawing

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

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Names:

Tuberculosis of the
Adrenal

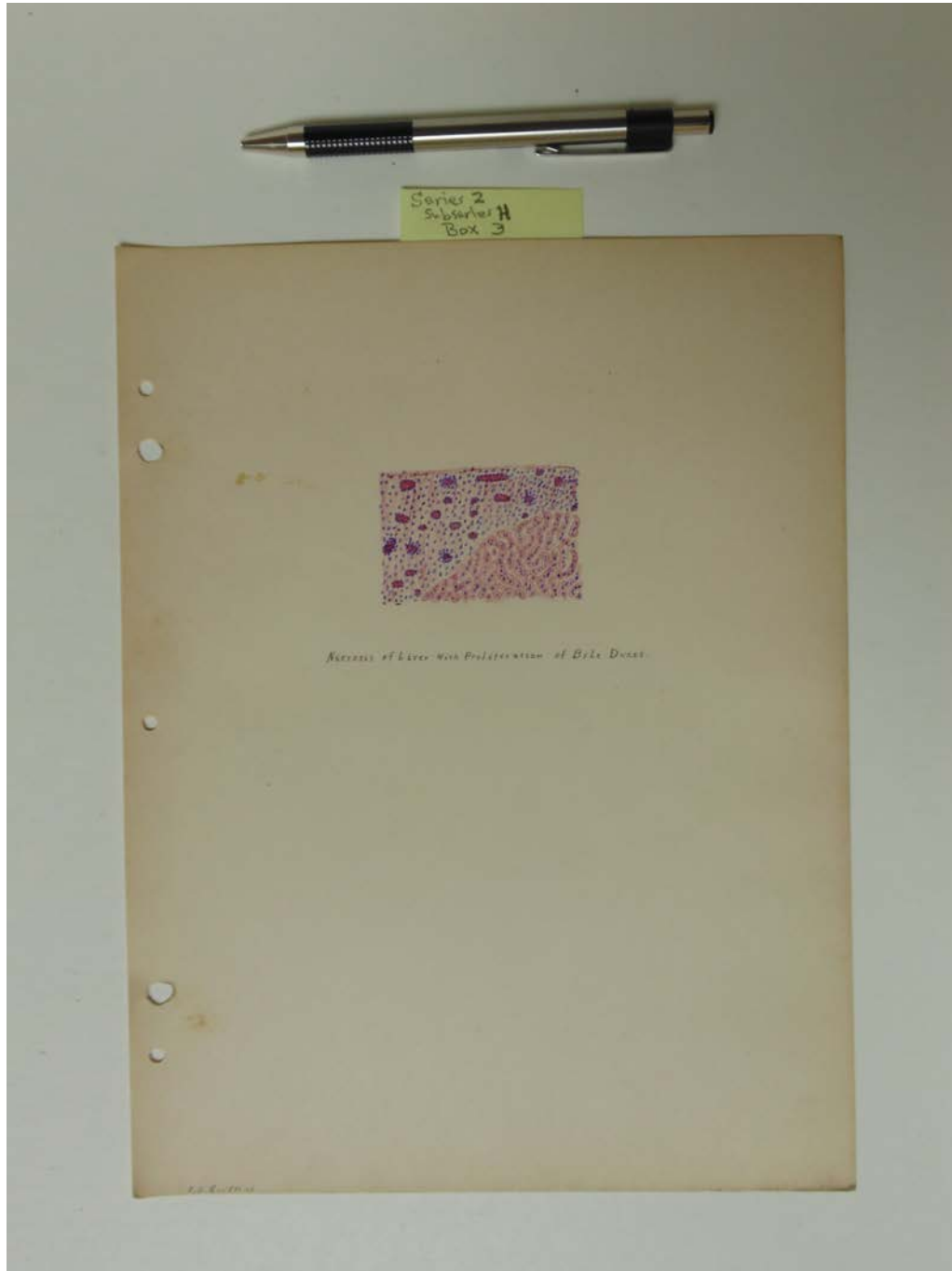
Types:

drawing

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

Image 34 r02h03-00-002-6305 [Contents](#) [Index](#) [About](#)

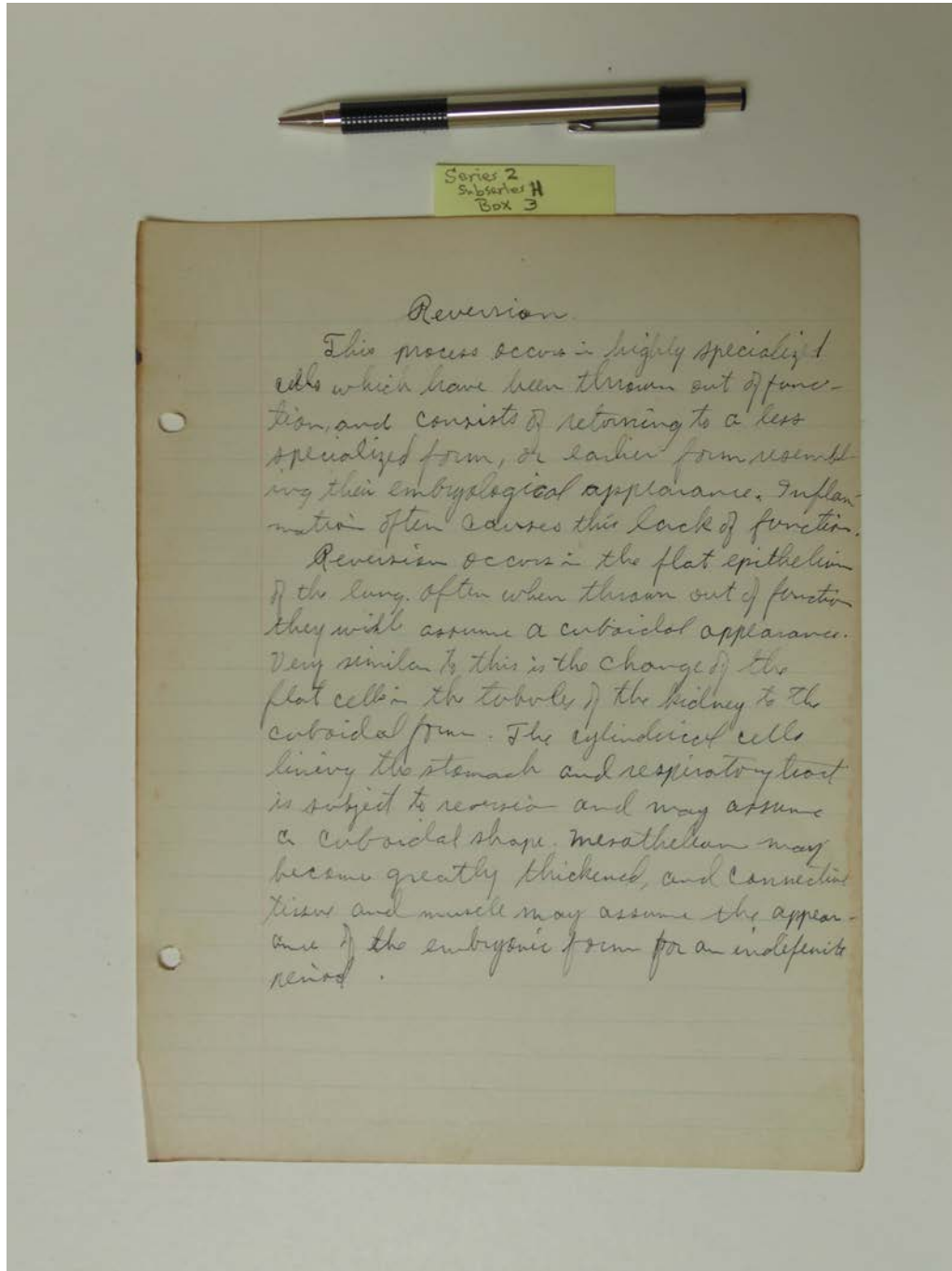


Names:

Necrosis of Liver

Types:

drawing



Series 2
Subseries H
Box 3

Reversion

This process occurs in highly specialized cells which have been thrown out of function, and consists of returning to a less specialized form, or earlier form resembling their embryological appearance. Inflammation often causes this lack of function.

Reversion occurs in the flat epithelium of the lung. Often when thrown out of function they will assume a cuboidal appearance. Very similar to this is the change of the flat cells in the tubules of the kidney to the cuboidal form. The cylindrical cells lining the stomach and respiratory tract is subject to reversion and may assume a cuboidal shape. Mesothelium may become greatly thickened, and connective tissue and muscle may assume the appearance of the embryonic form for an indefinite period.

Names:

Reversion

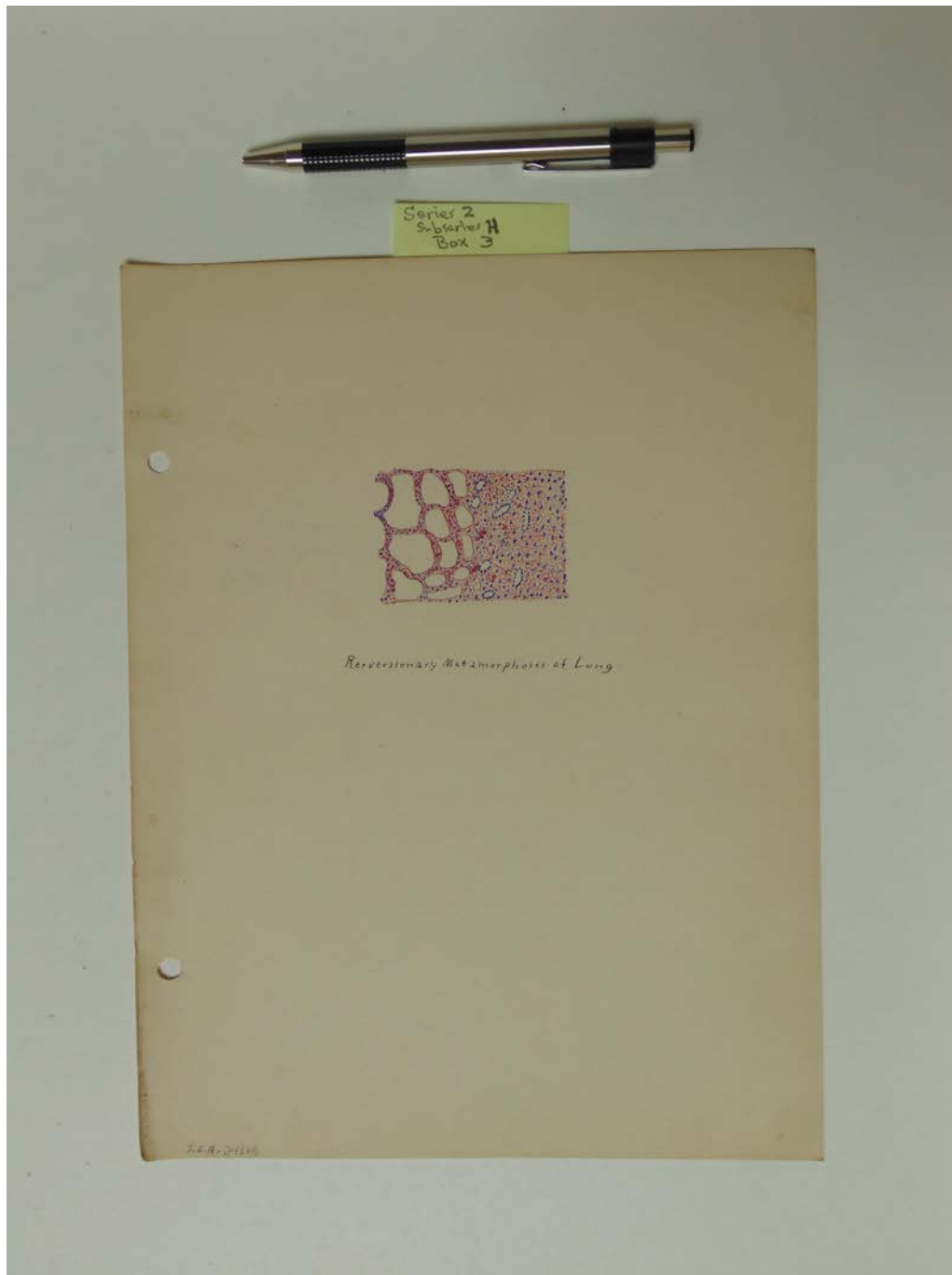
Types:

essay

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

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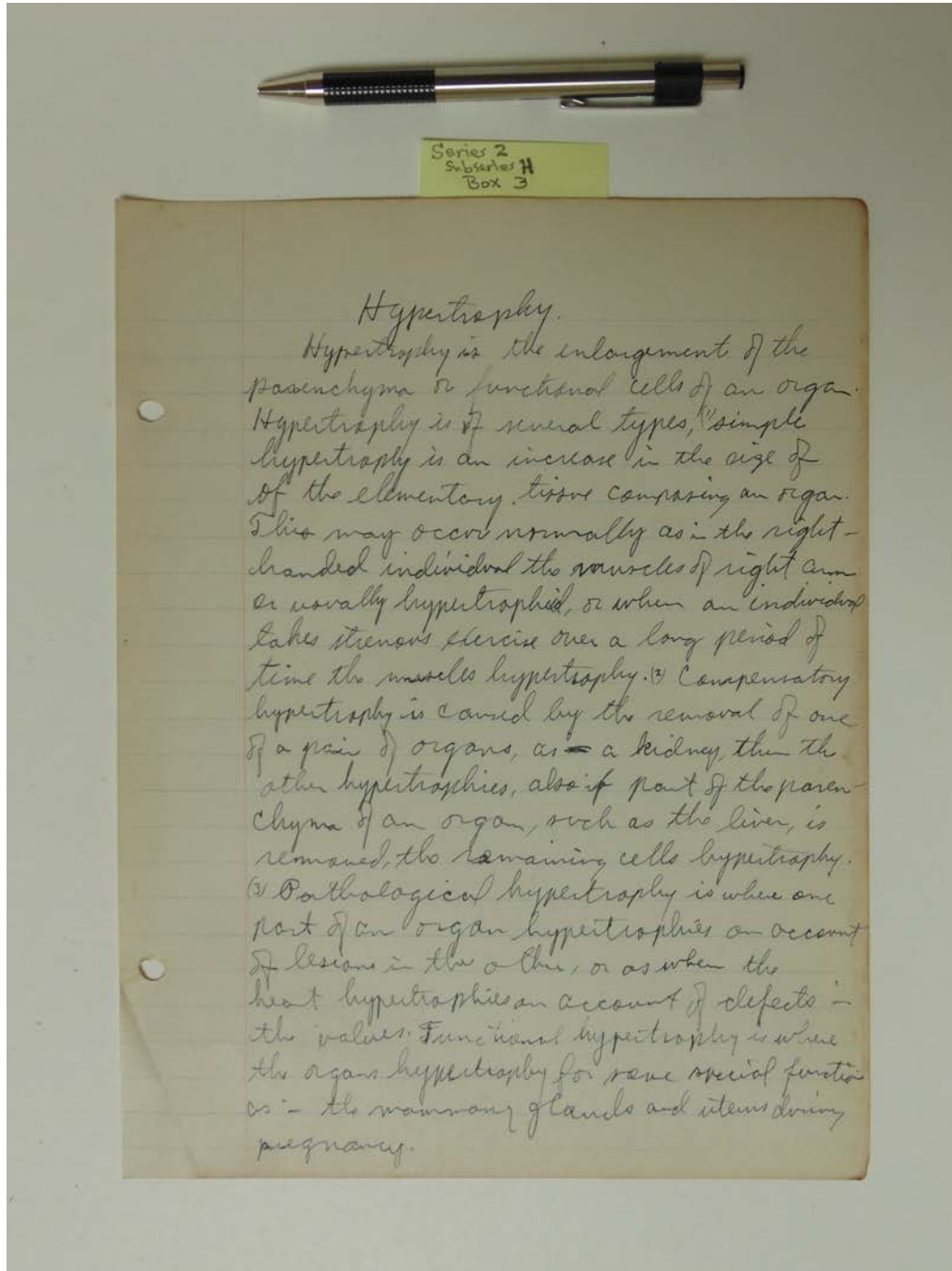
Names:

Reversionary
Metamorphosis of

Lung

Types:

drawing

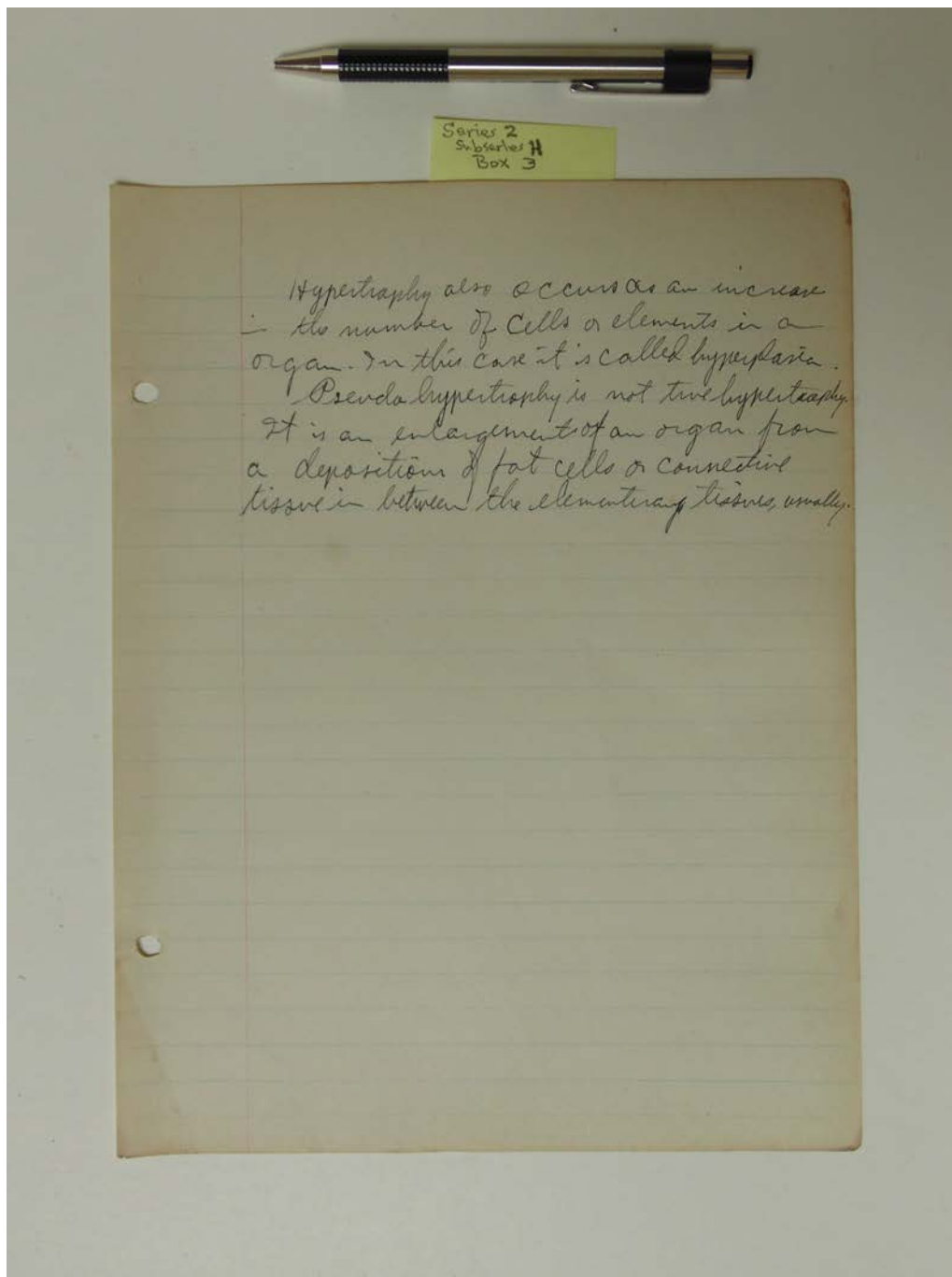


Names:

Hypertrophy

Types:

essay



Names:

Hypertrophy

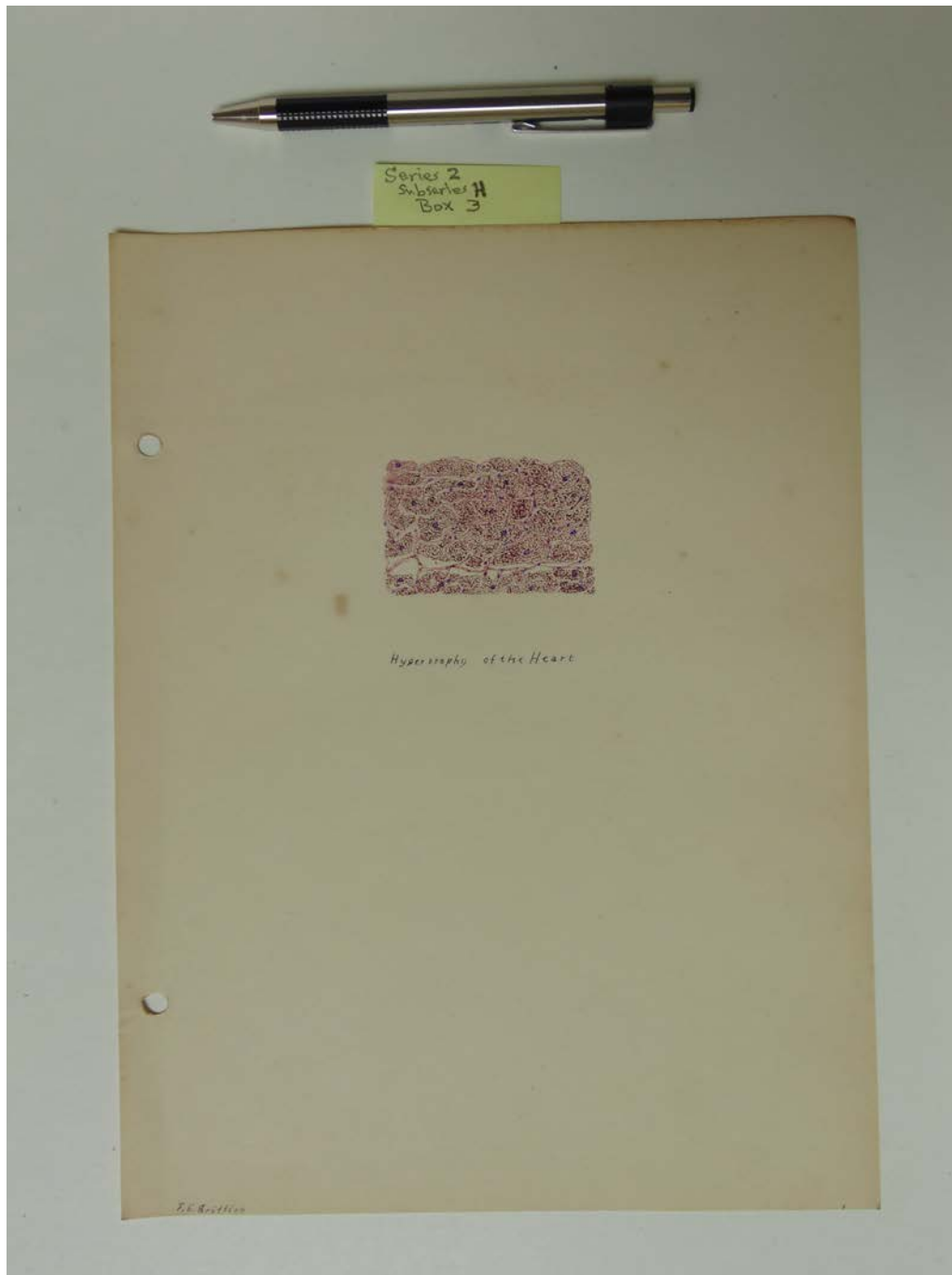
Types:

essay

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

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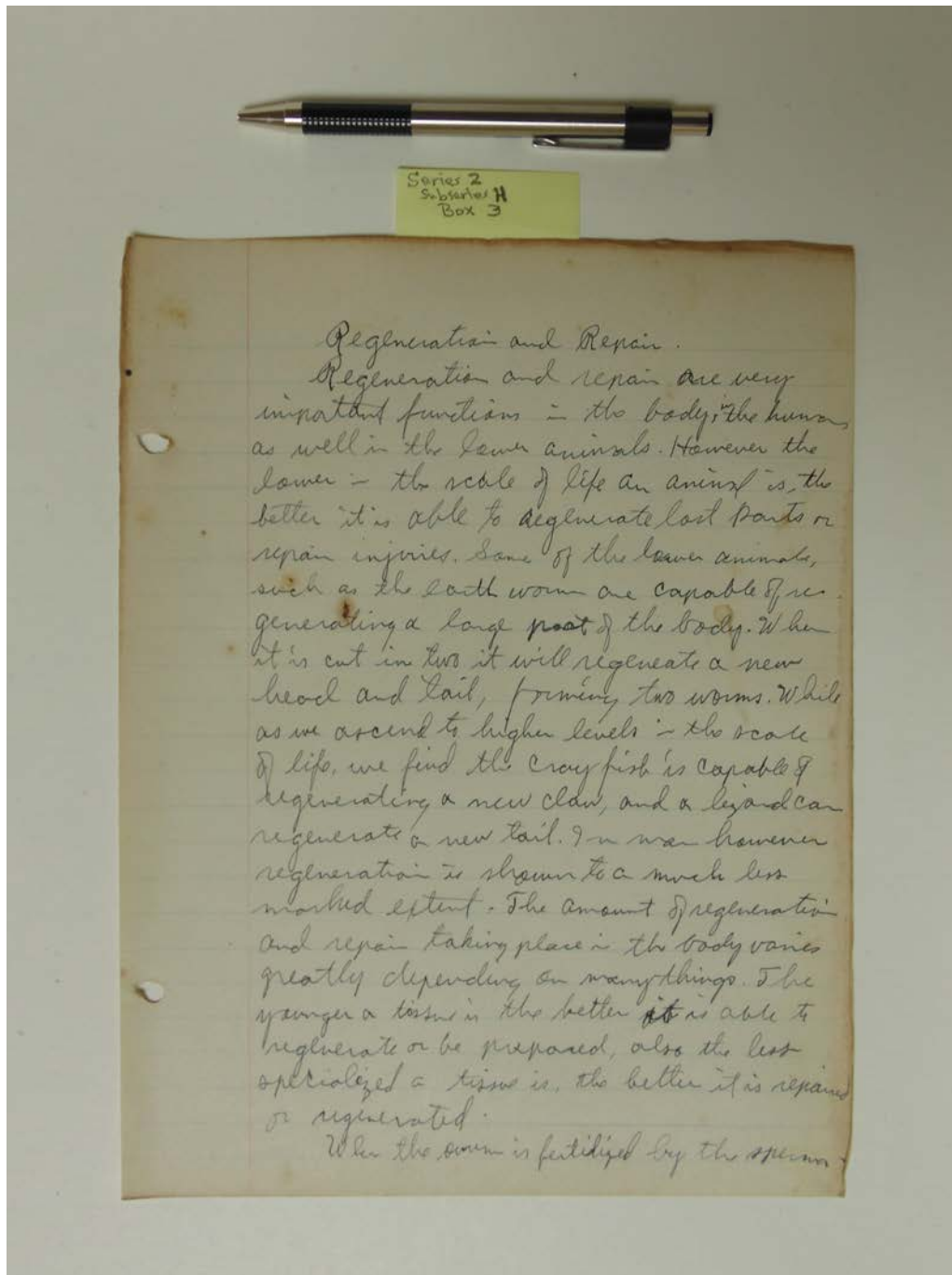


Names:

Hypertrophy of Heart

Types:

drawing



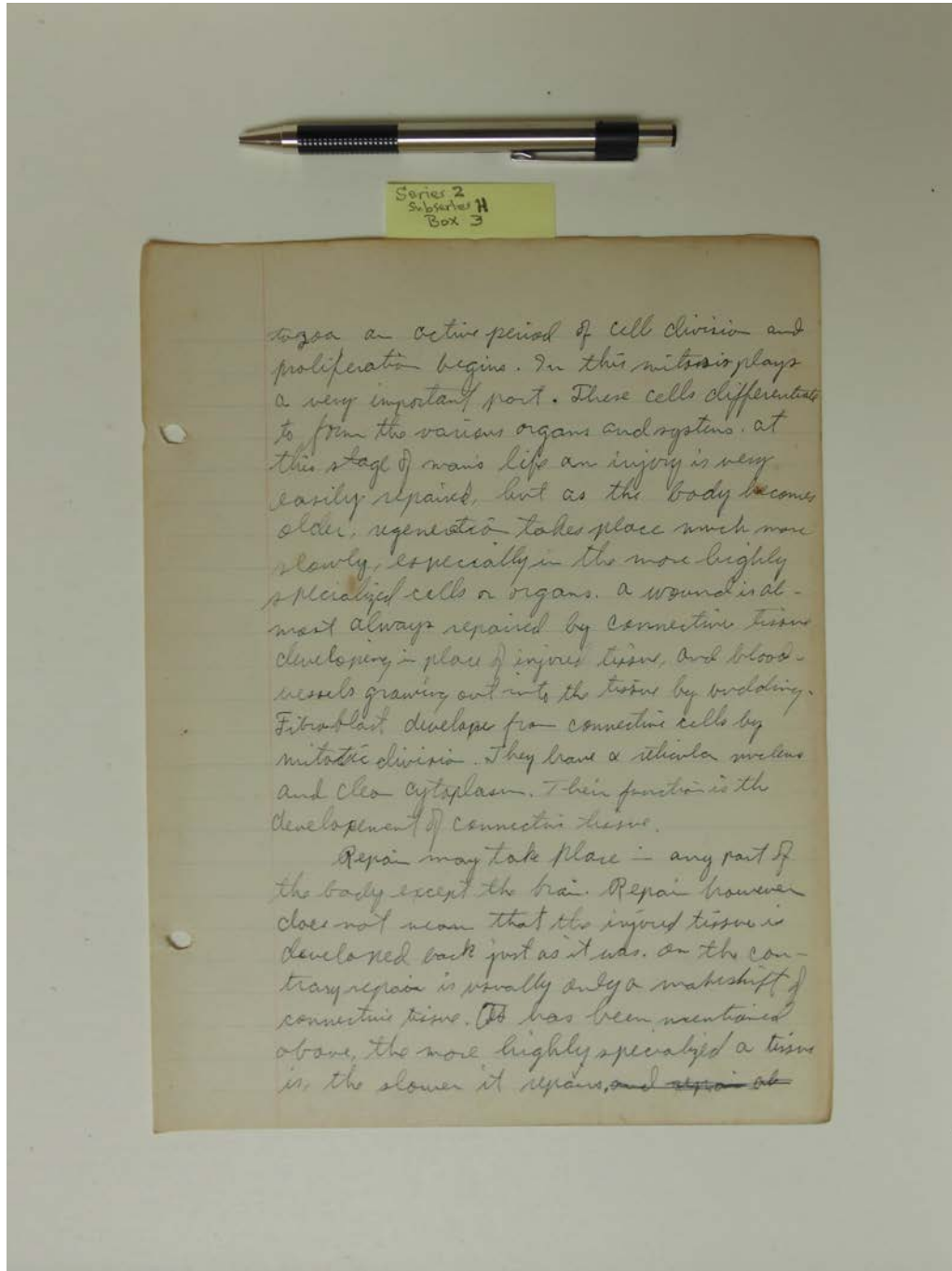
p. 1

Names:

Regeneration and
Repair

Types:

essay



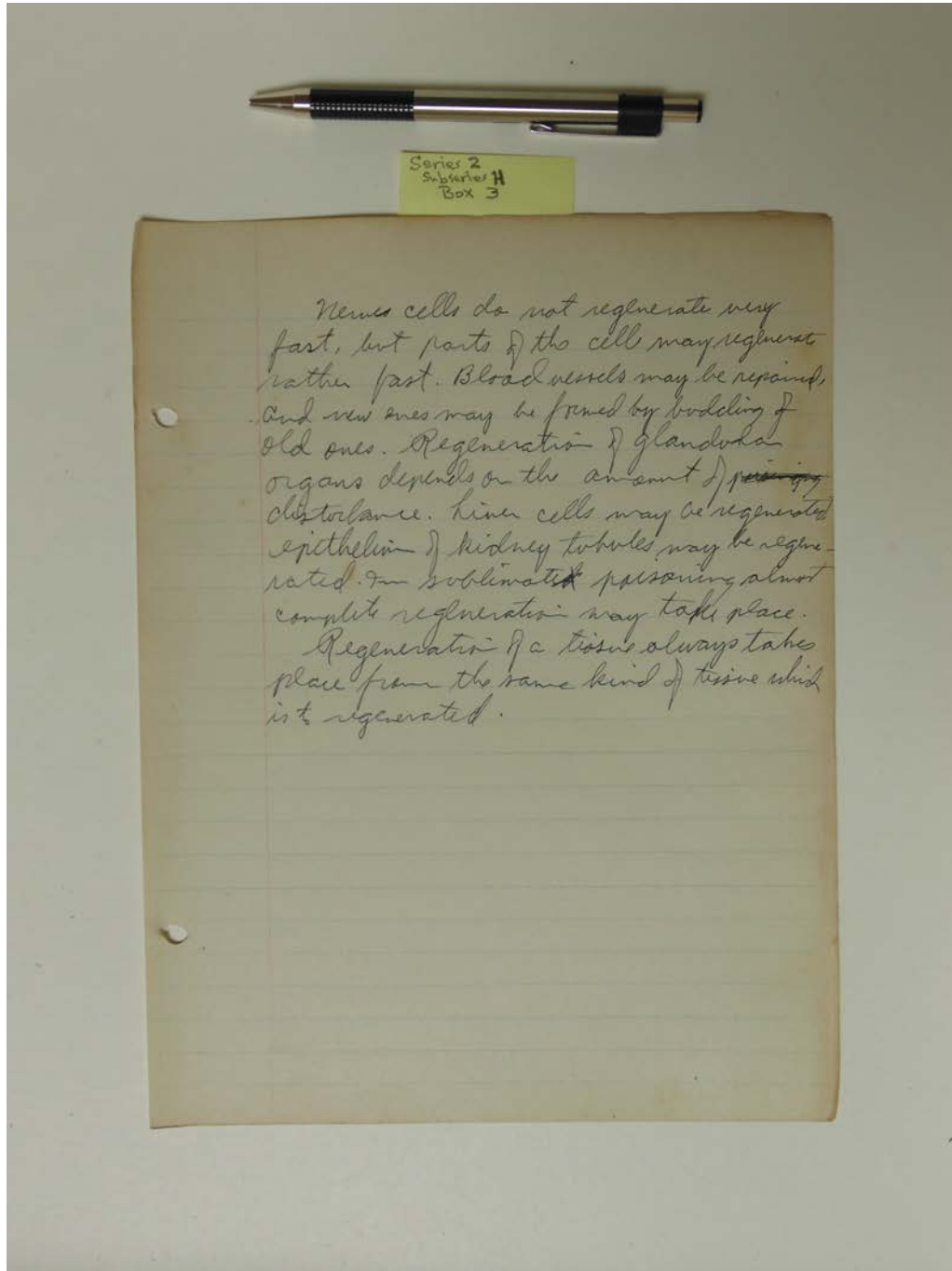
p. 2

Names:

Regeneration and
Repair

Types:

essay



p. 3

Names:

Regeneration and
Repair

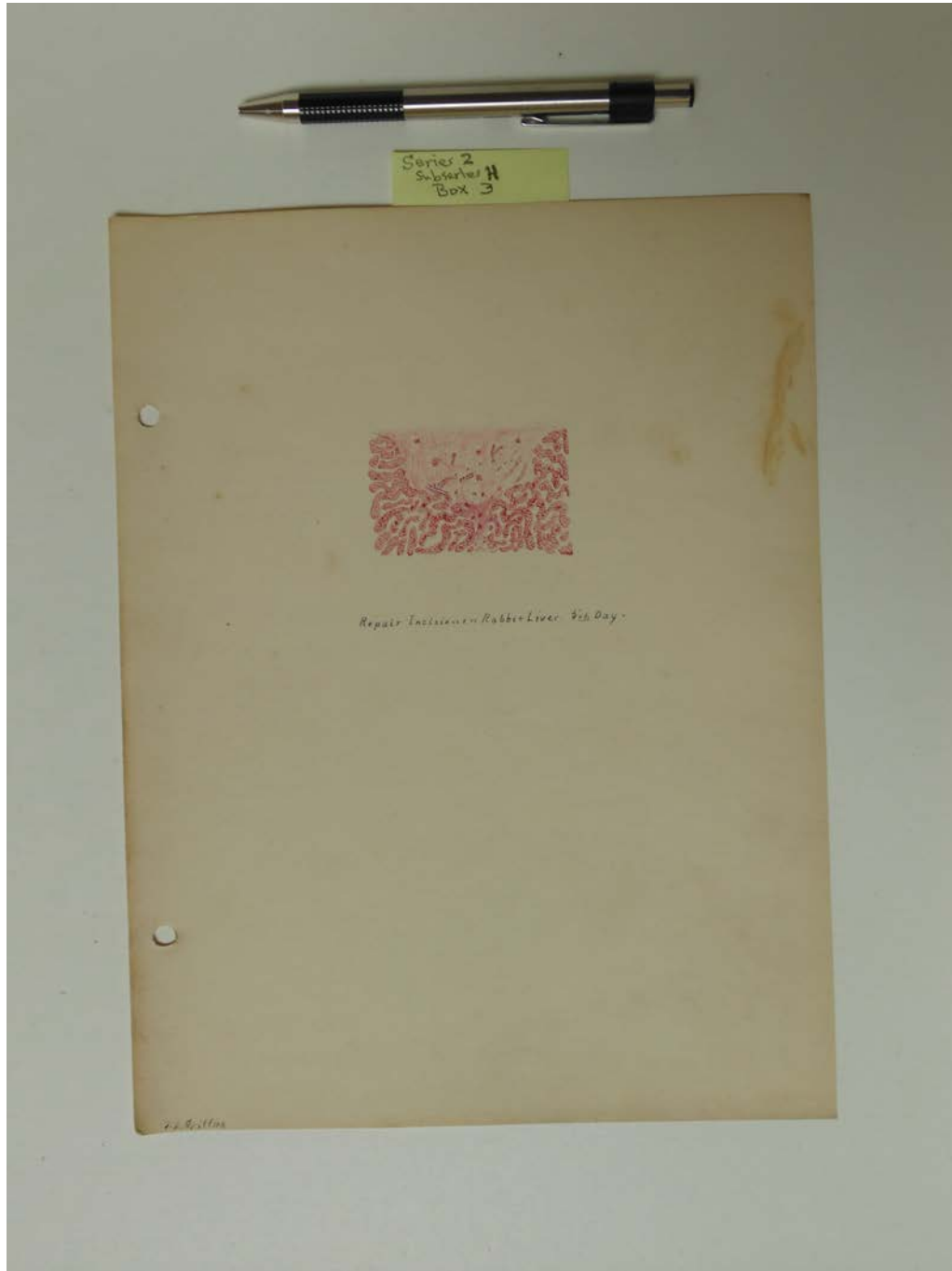
Types:

essay

Frances Cabaniss Roberts Collection: Series 2, Subseries H, Box 3, Item 2

J.E. Griffith Pathology Notes, circa 1928

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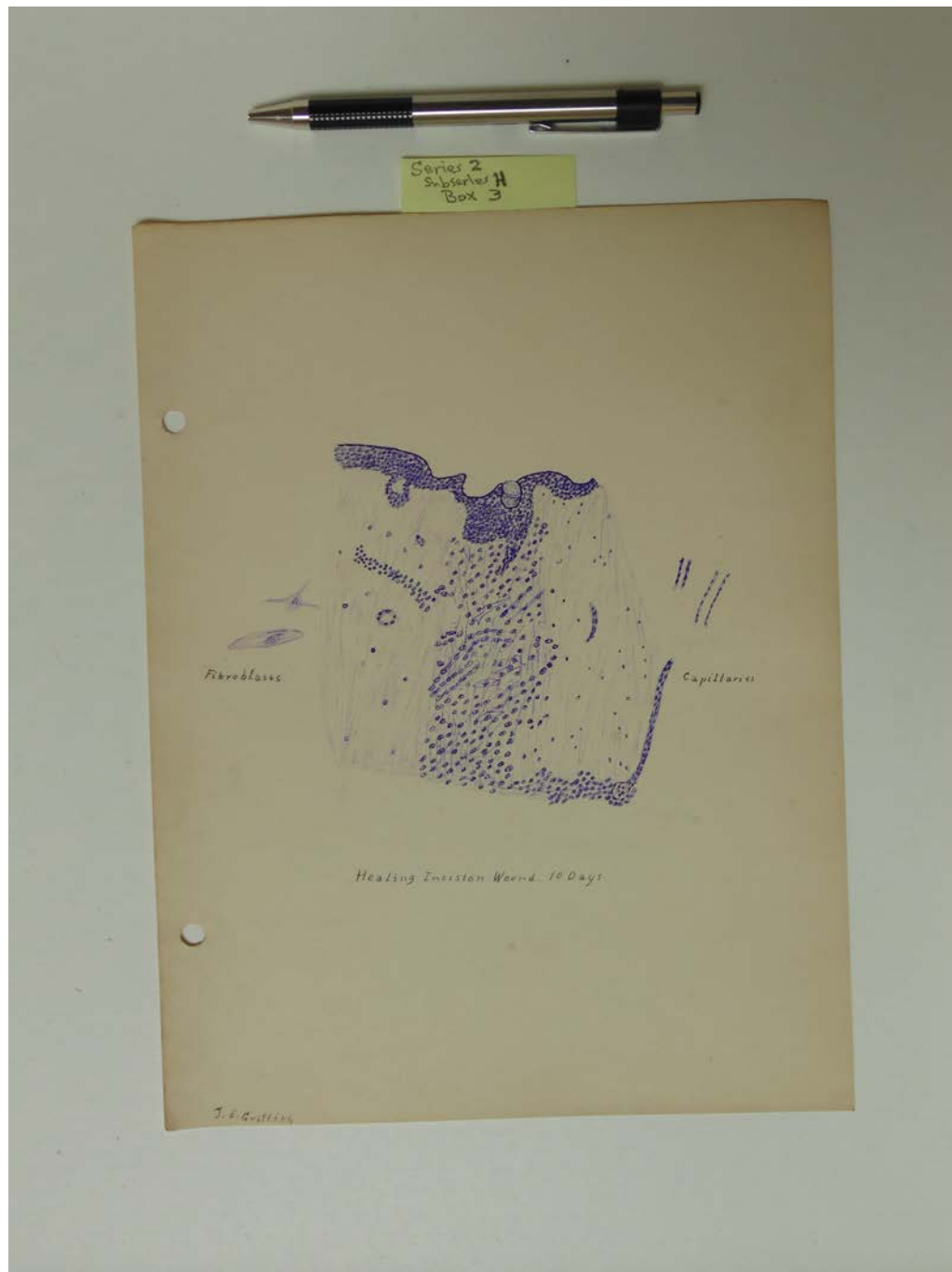


Names:

Repair Incision in
Liver

Types:

drawing

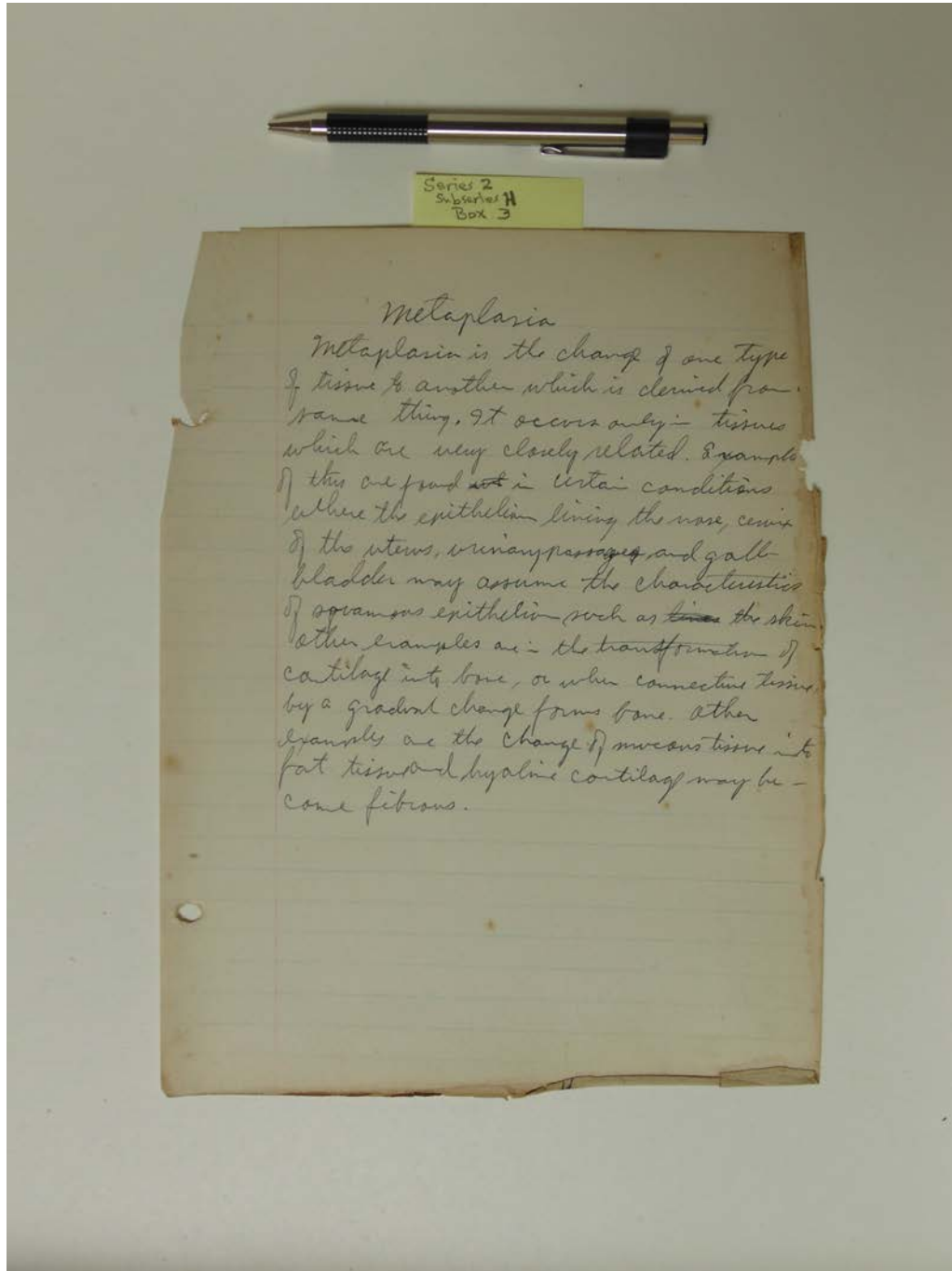


Names:

Healing Incision
Wound

Types:

drawing

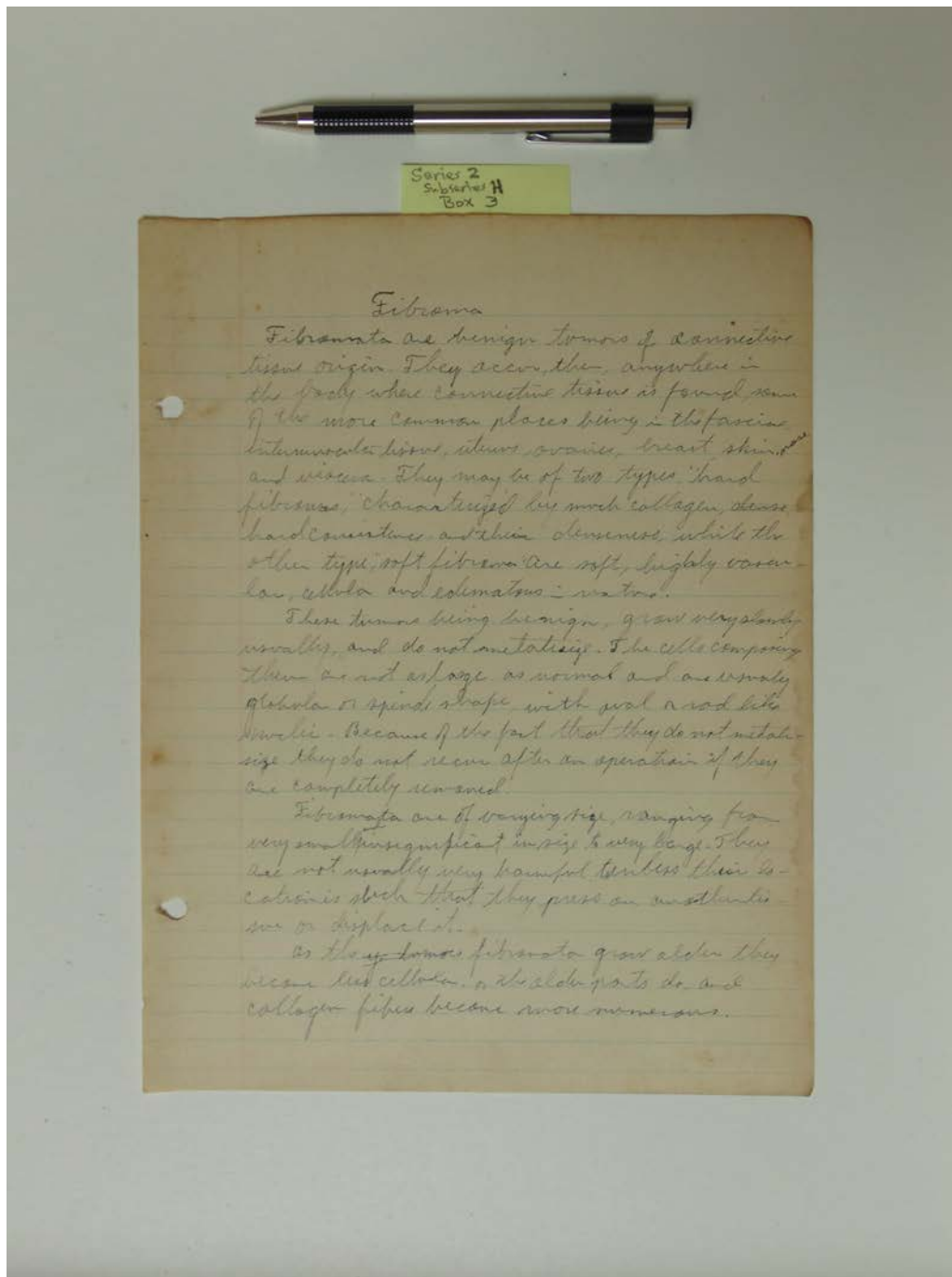


Names:

Metaphasia

Types:

essay

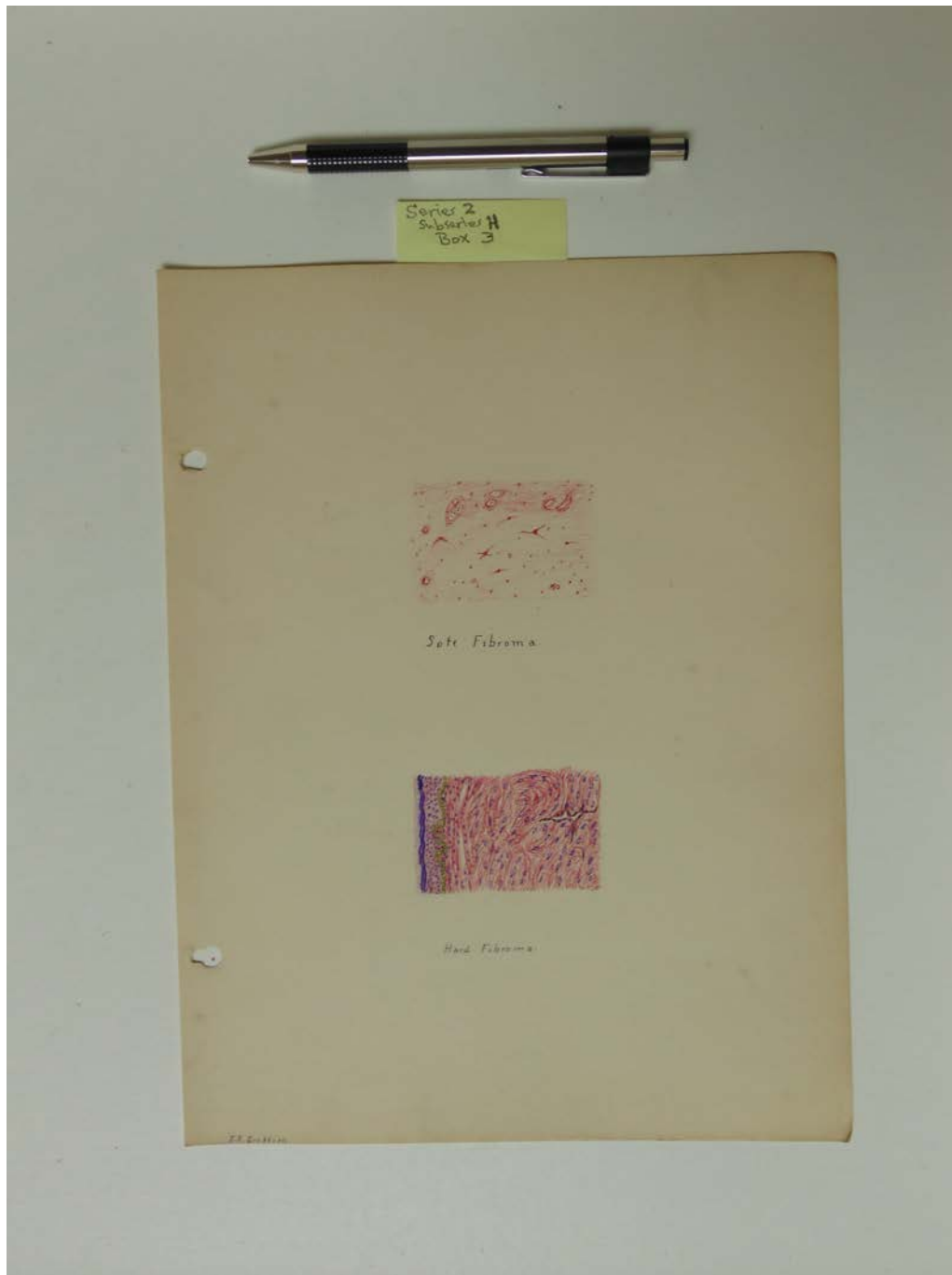


Names:

Fibroma

Types:

essay



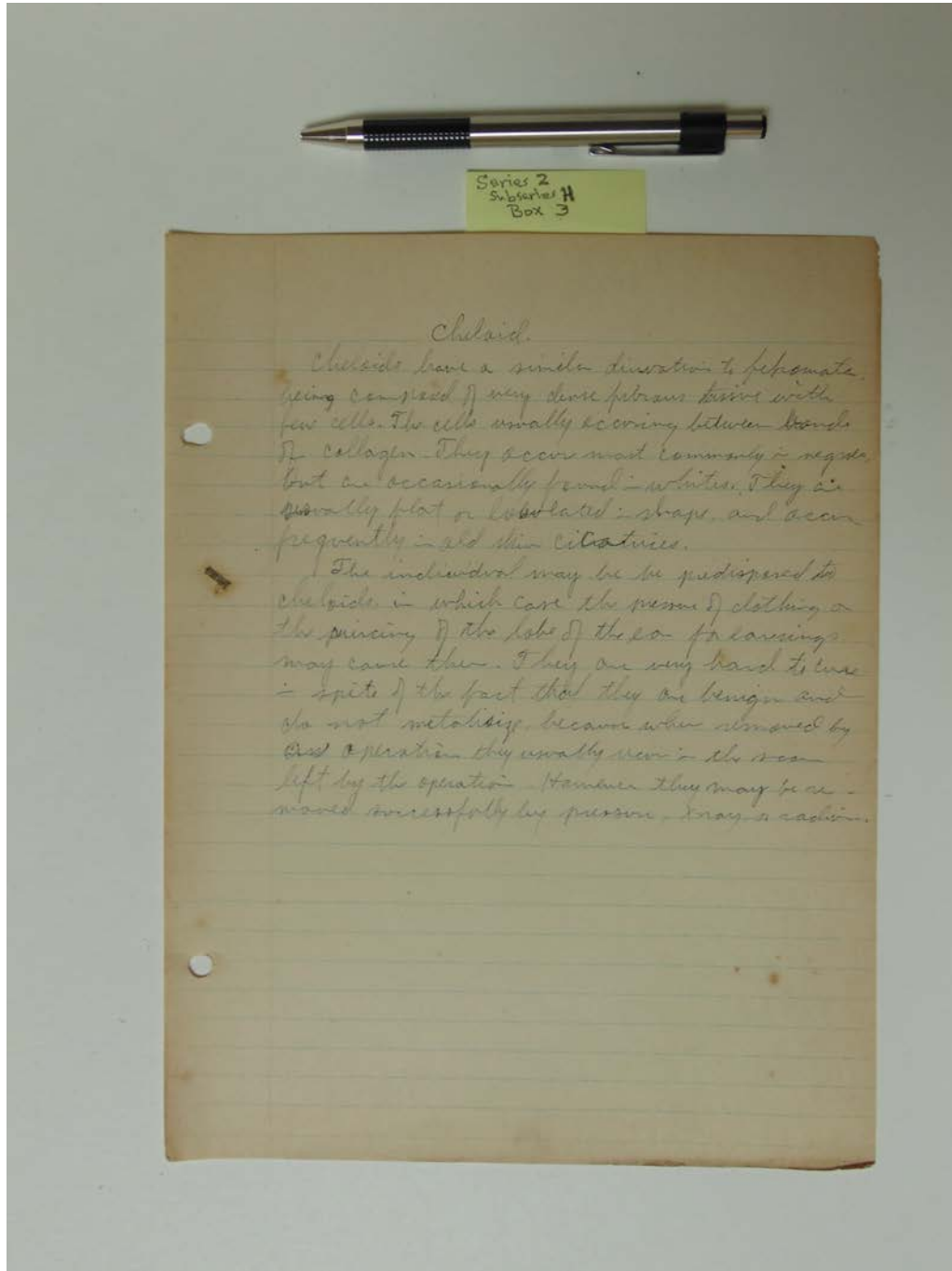
Names:

Hard Fibroma

Soft Fibroma

Types:

drawing

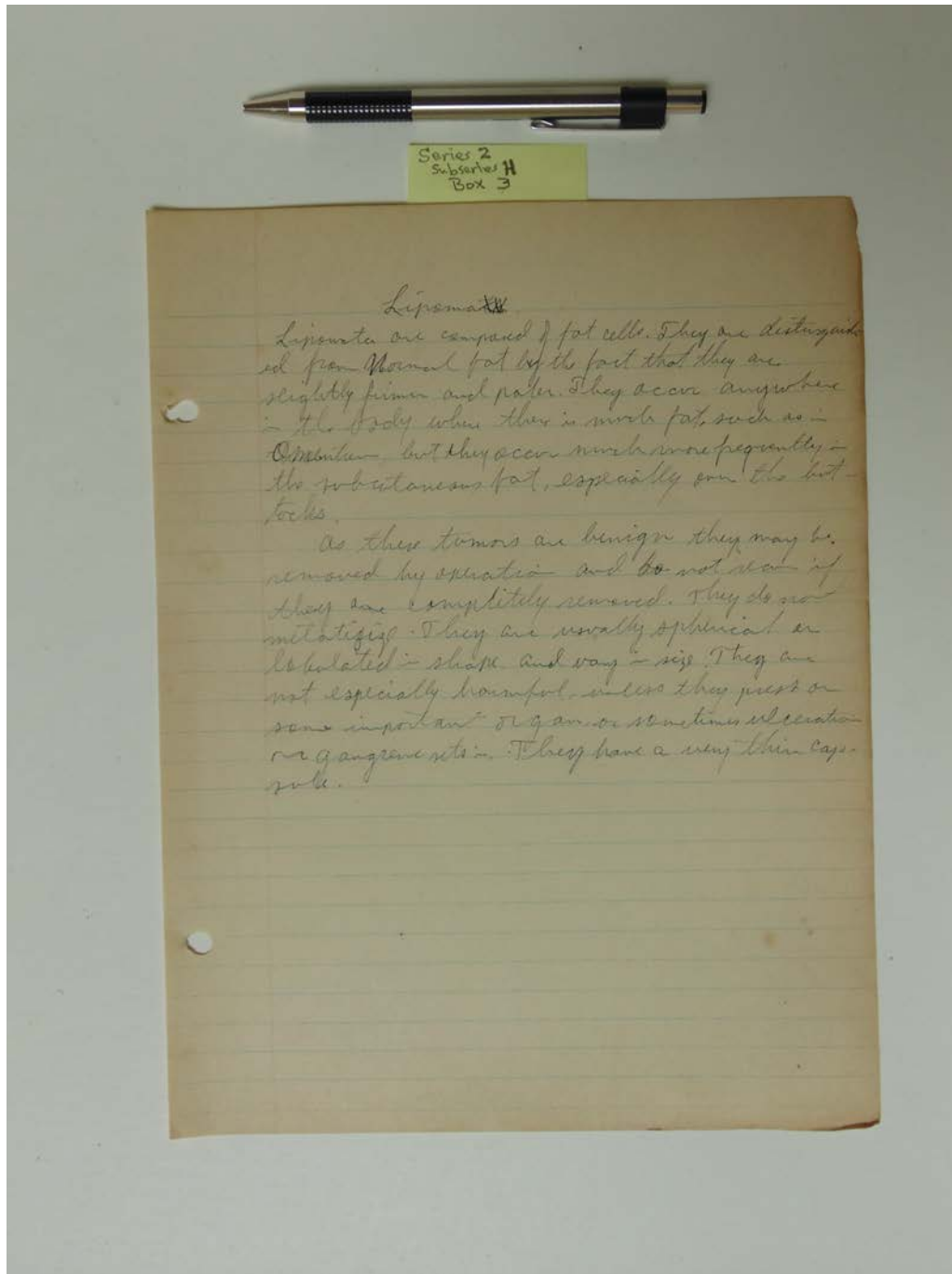


Names:

Cheloid

Types:

essay



Lipoma

Lipomas are composed of fat cells. They are distinguished from normal fat by the fact that they are slightly firmer and paler. They occur anywhere in the body where there is normal fat, such as in the subcutaneous fat, especially on the buttocks.

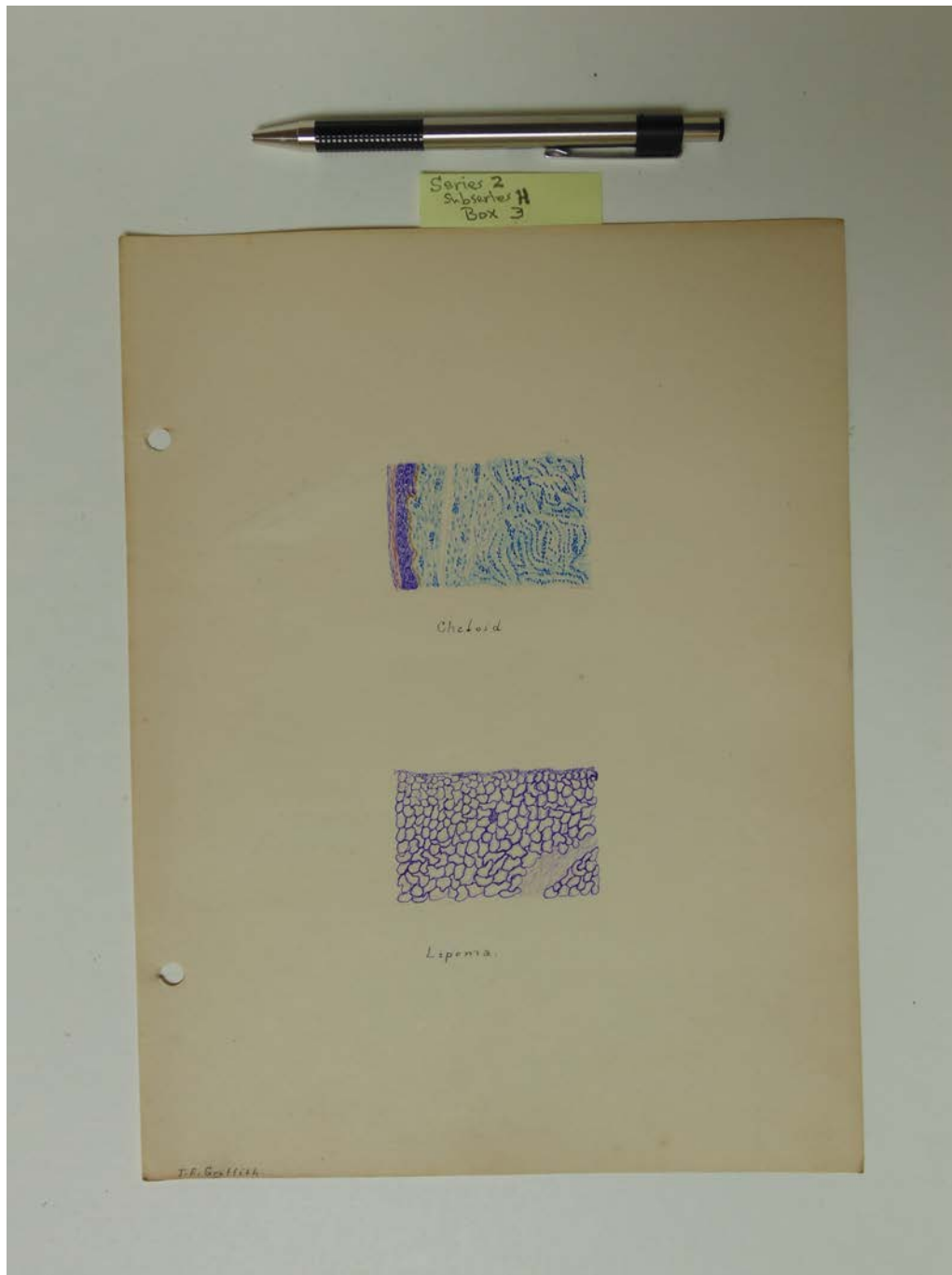
As these tumors are benign they may be removed by operation and do not recur if they are completely removed. They do not metastasize. They are usually spherical or lobulated in shape and vary in size. They are not especially harmful, unless they press on some important organ or sometimes ulcerate or gangrene sets in. They have a very thin capsule.

Names:

Lipoma

Types:

essay



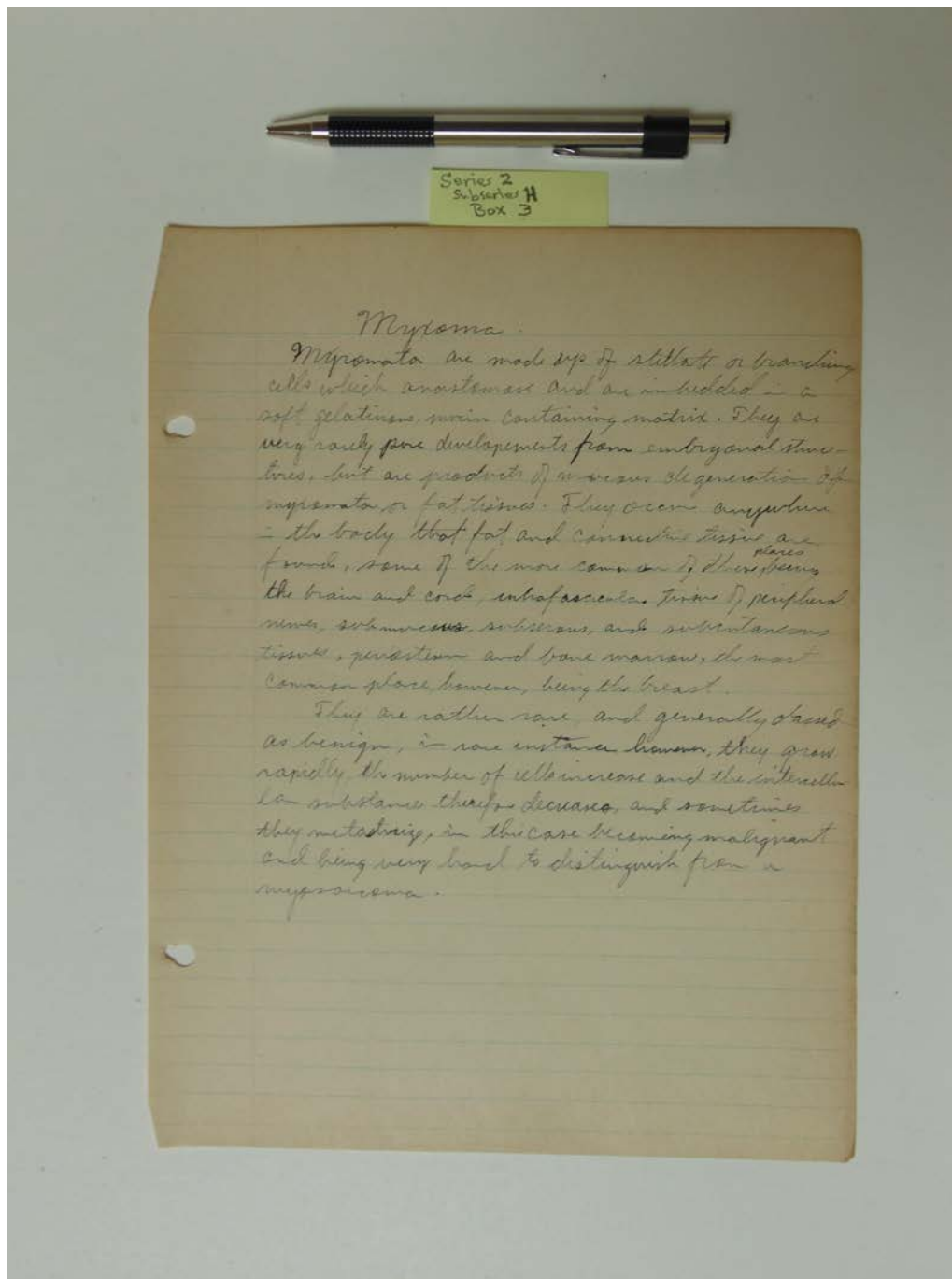
Names:

Cheloid

Lipoma

Types:

drawing

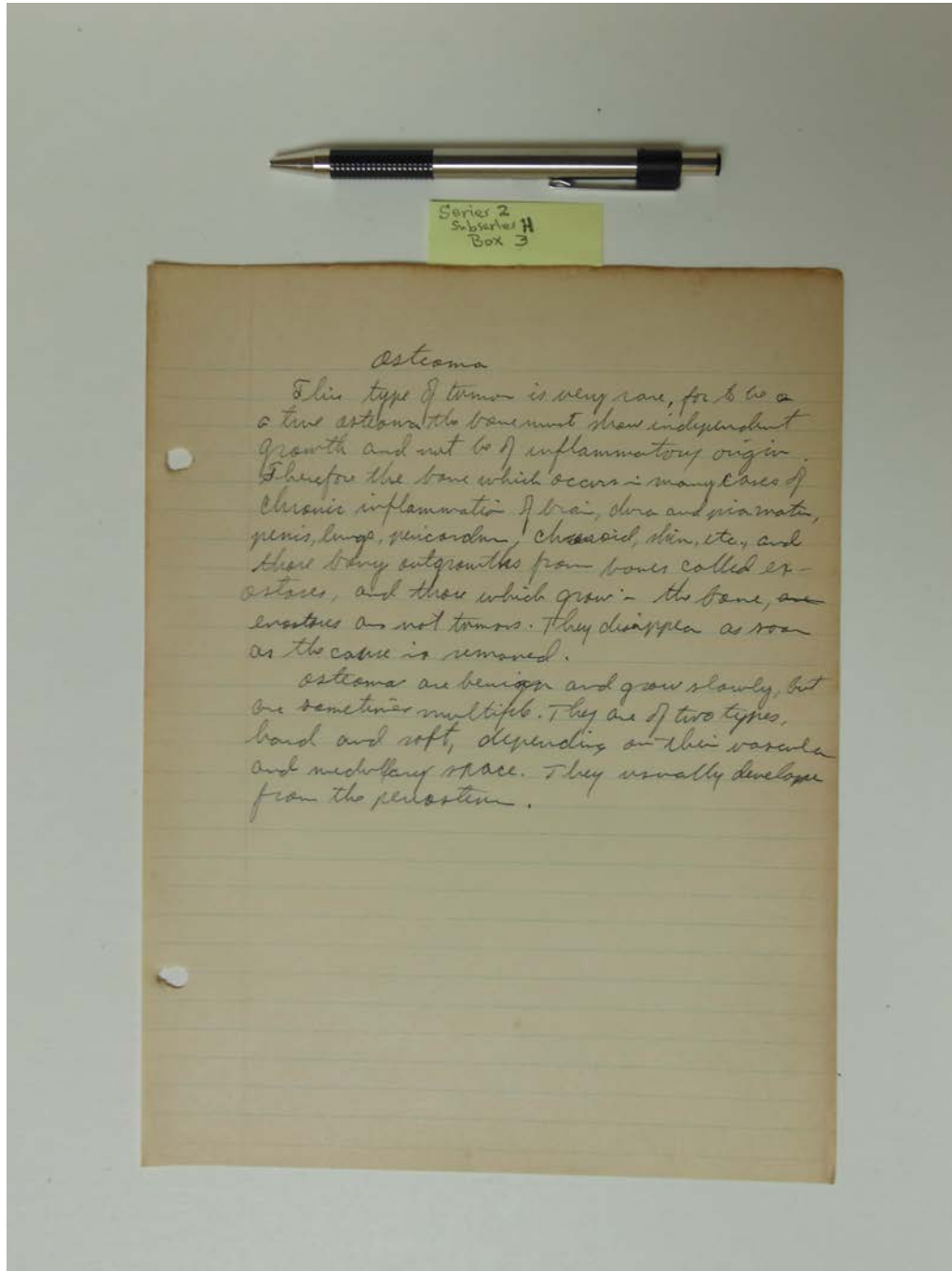


Names:

Myxoma

Types:

essay



osteoma

This type of tumor is very rare, for to a
a true osteoma, the bone must show independent
growth and not be of inflammatory origin.
Therefore the bone which occurs in many cases of
chronic inflammation of brain, dura and pia mater,
penis, lungs, pericardium, choroid, skin, etc., and
these bony outgrowths from bones called ex-
ostoses, and those which grow in the bone, are
essentially not tumors. They disappear as soon
as the cause is removed.

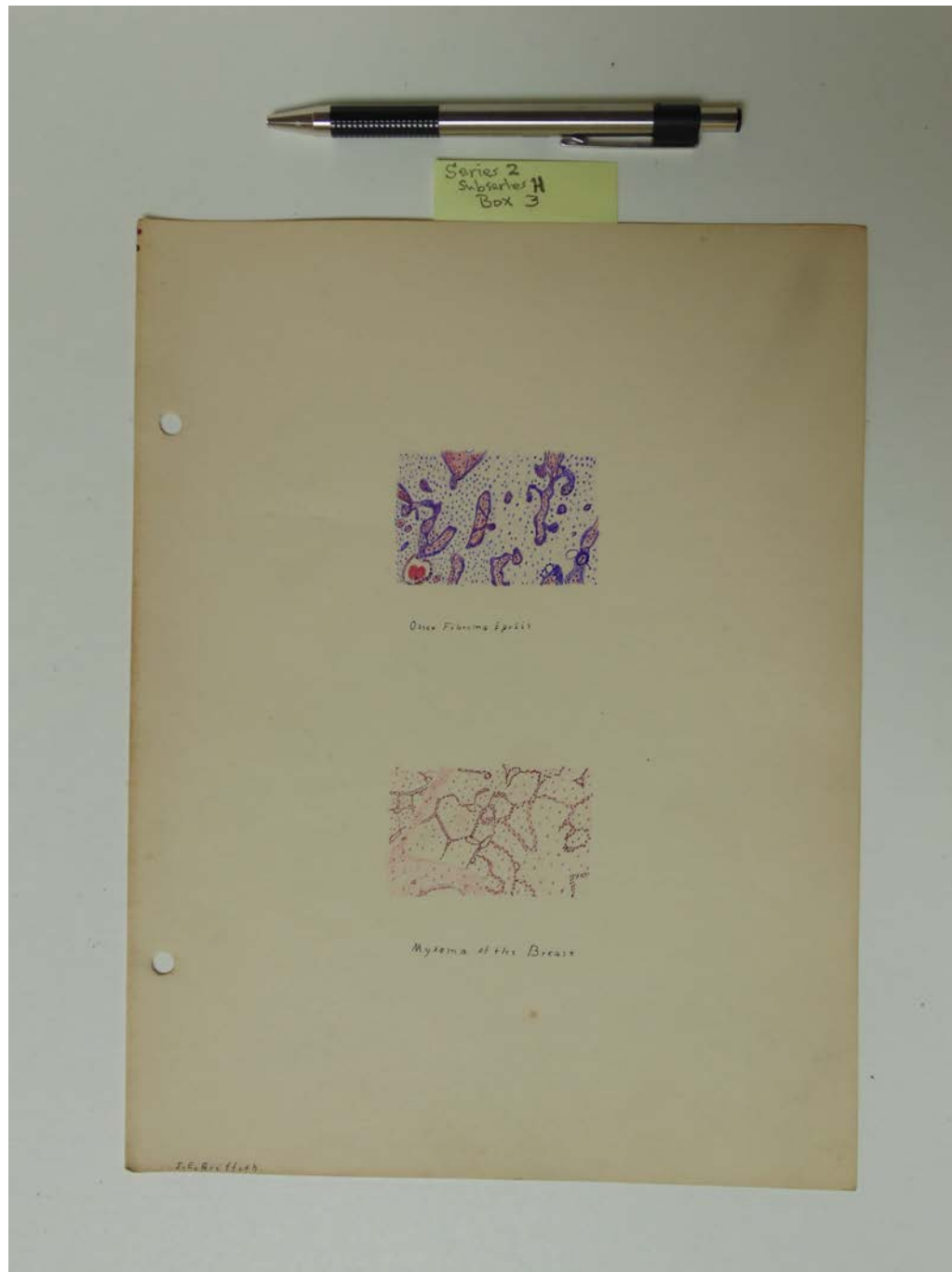
osteomas are benign and grow slowly, but
are sometimes multiple. They are of two types,
hard and soft, depending on their vascular
and medullary space. They usually develop
from the periosteum.

Names:

Osteoma

Types:

essay



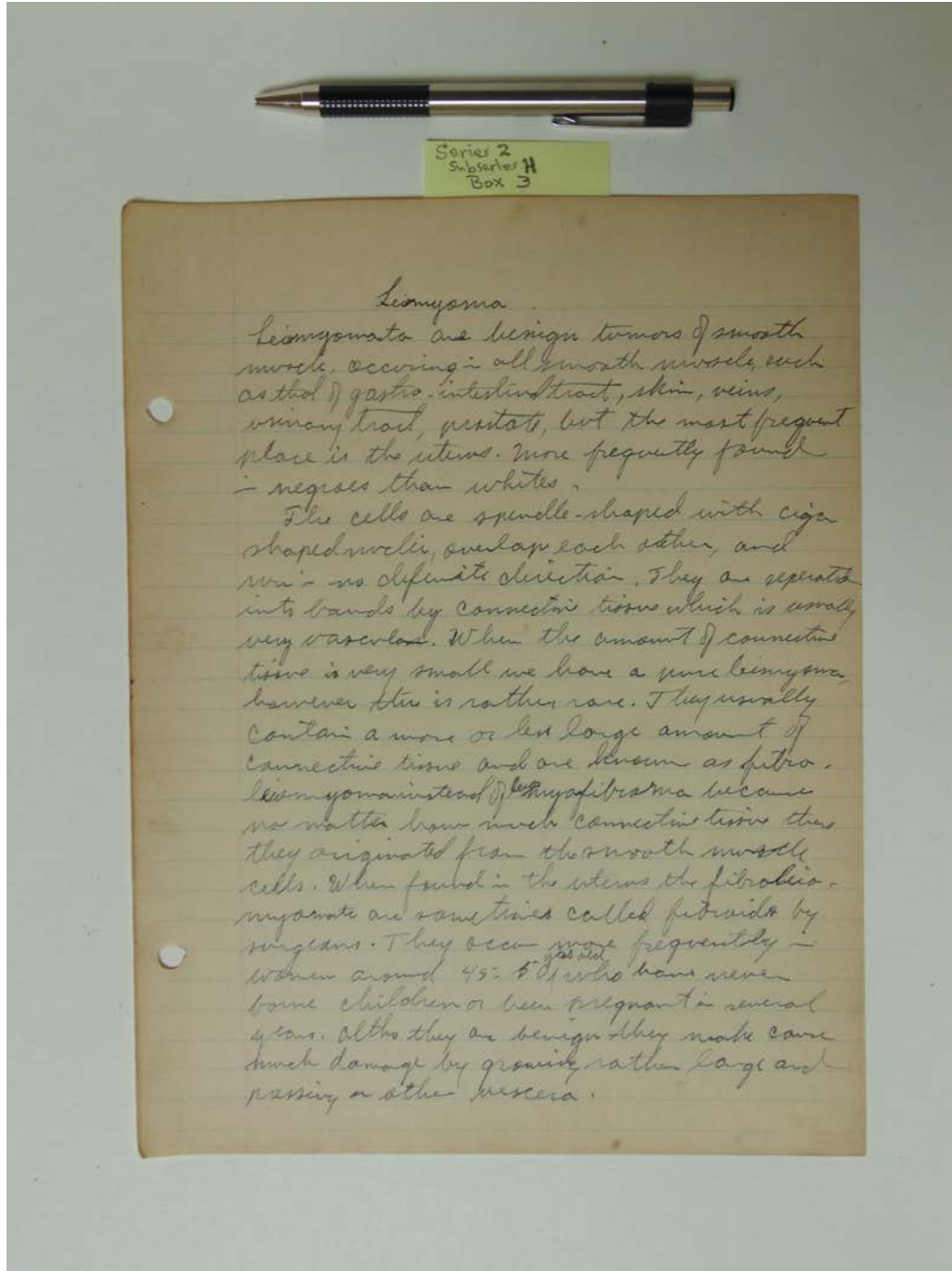
Names:

Myxoma of the
Breast

Osteo Fibroma Epulis

Types:

drawing



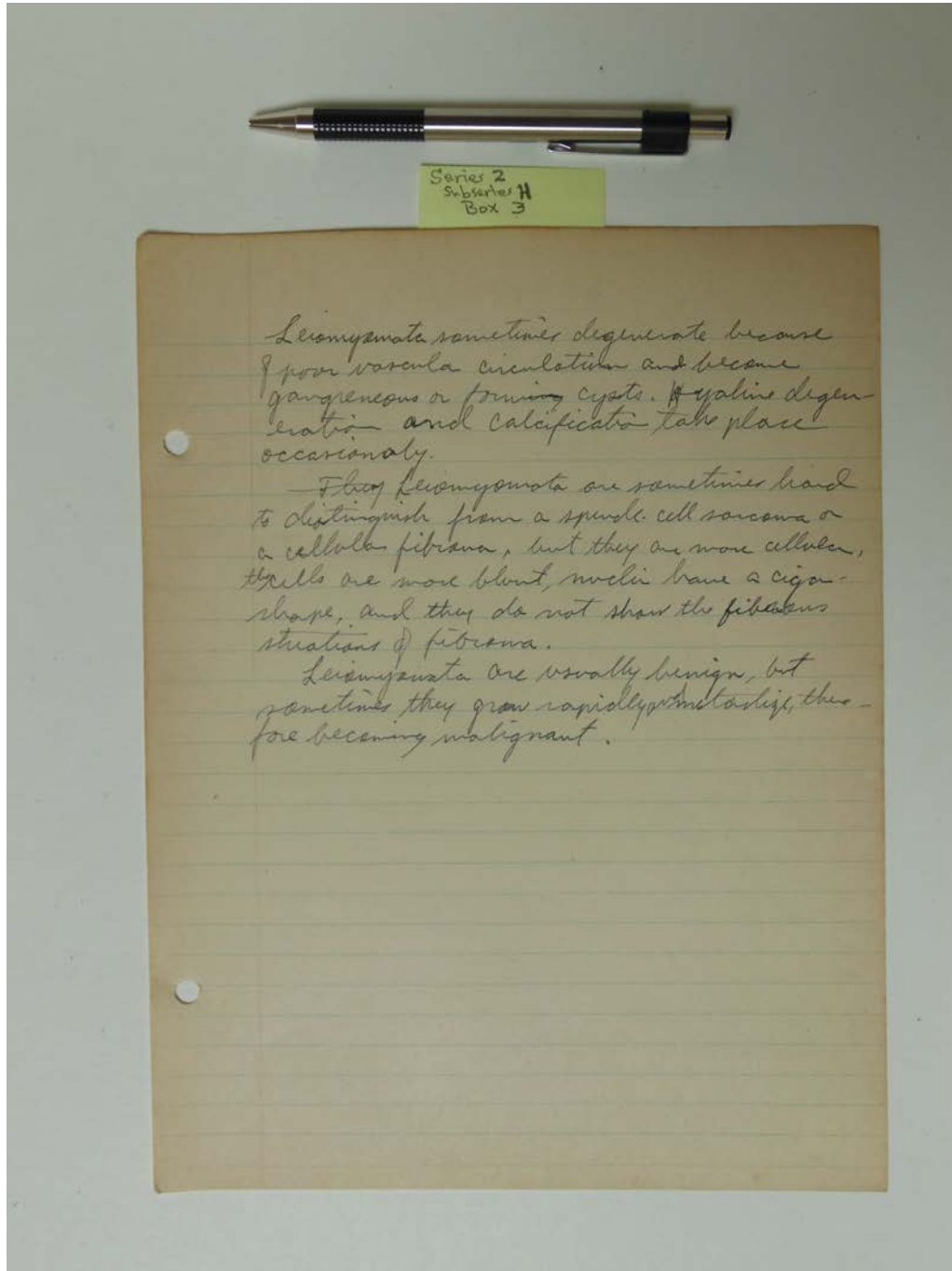
p. 1

Names:

Leiomyoma

Types:

essay



Series 2
Subseries H
Box 3

Leiomyomata sometimes degenerate because of poor vascular circulation and become gangrenous or forming cysts. Hyaline degeneration and calcification take place occasionally.

These leiomyomata are sometimes hard to distinguish from a spindle cell sarcoma or a cellular fibroma, but they are more cellular, the cells are more blunt, nuclei have a cigar shape, and they do not show the fibrous striations of fibroma.

Leiomyomata are usually benign, but sometimes they grow rapidly and metastasize, therefore becoming malignant.

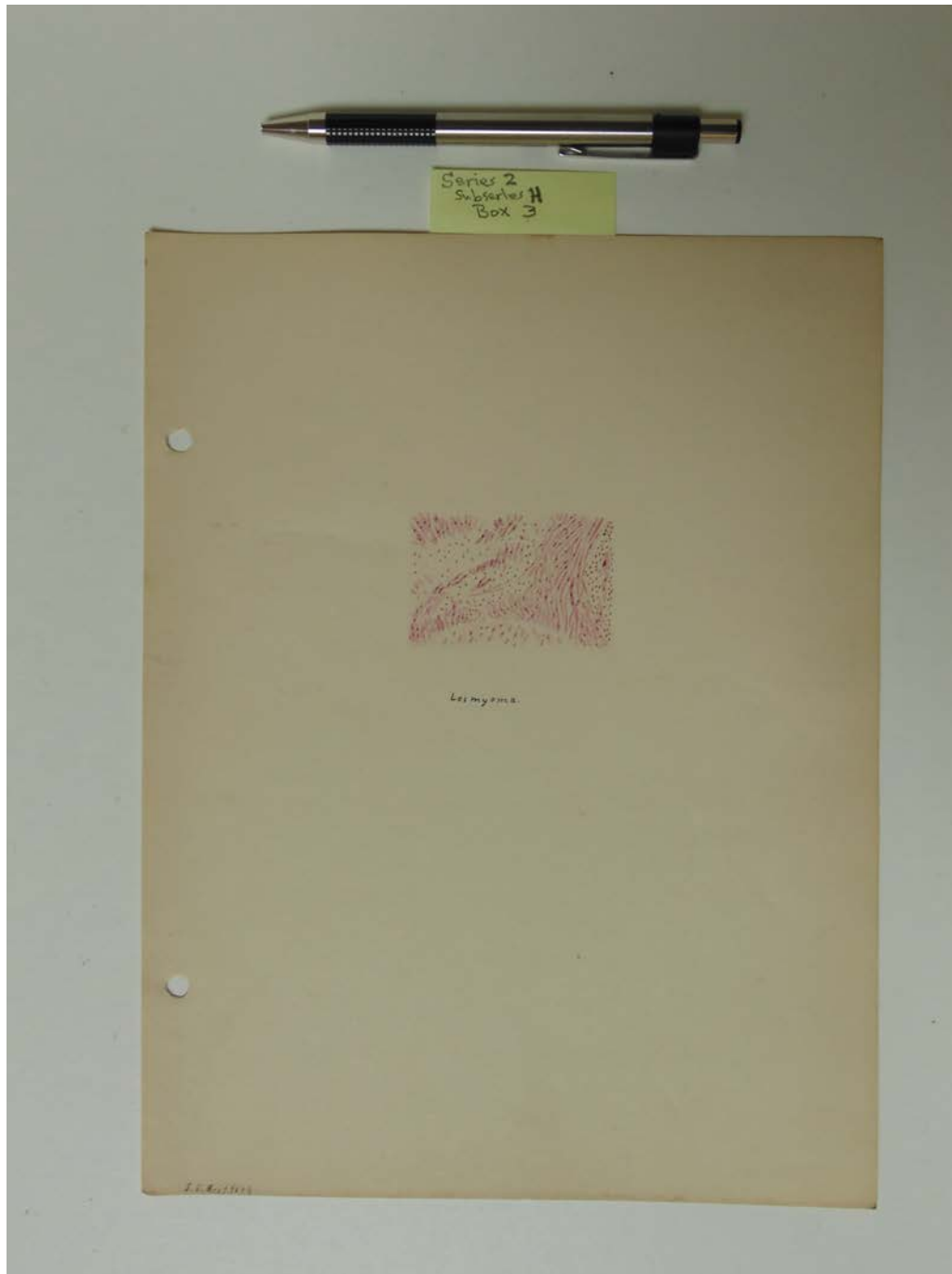
p. 2

Names:

Leiomyoma

Types:

essay



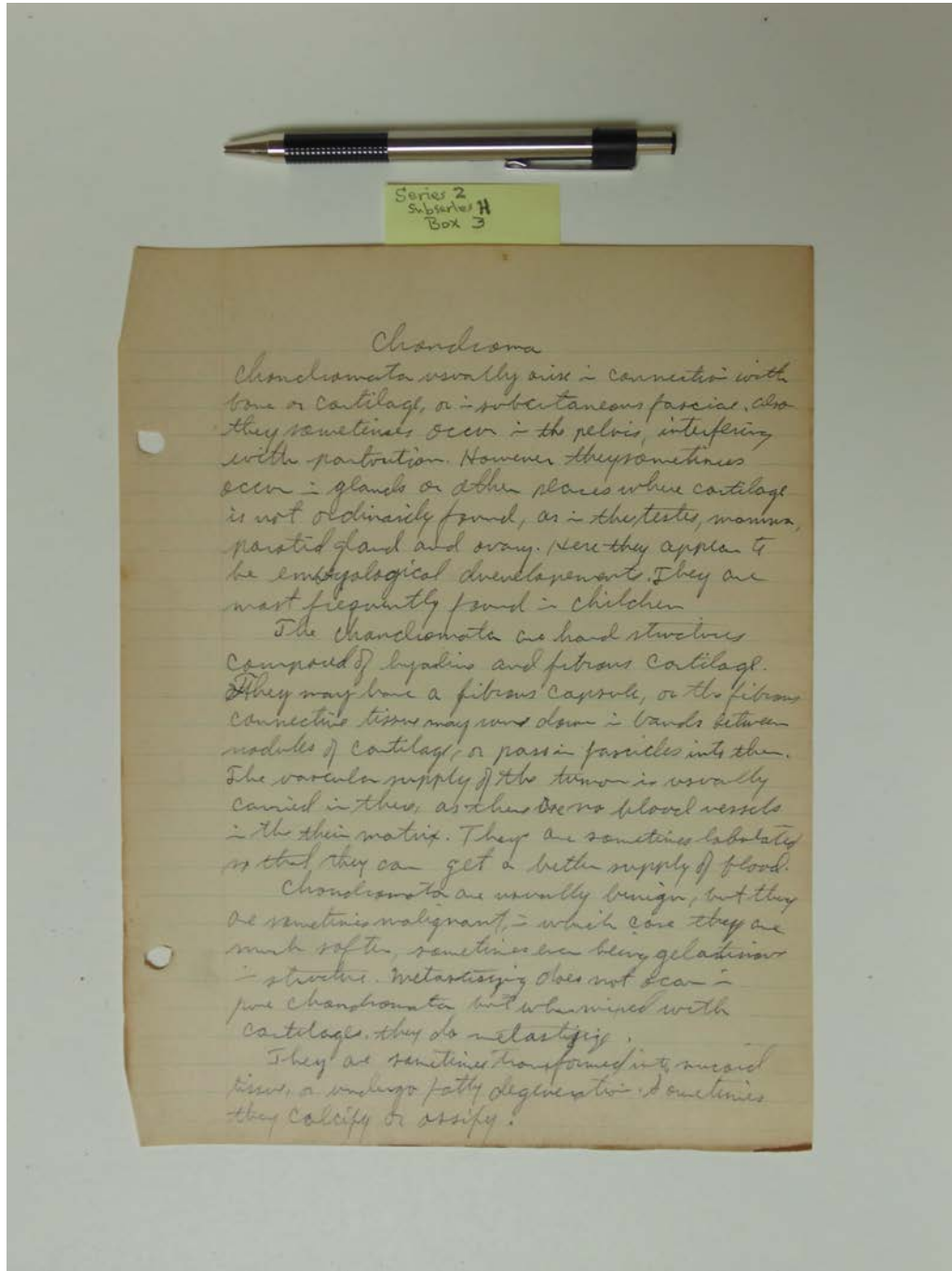
p. 3

Names:

Leiomyoma

Types:

drawing

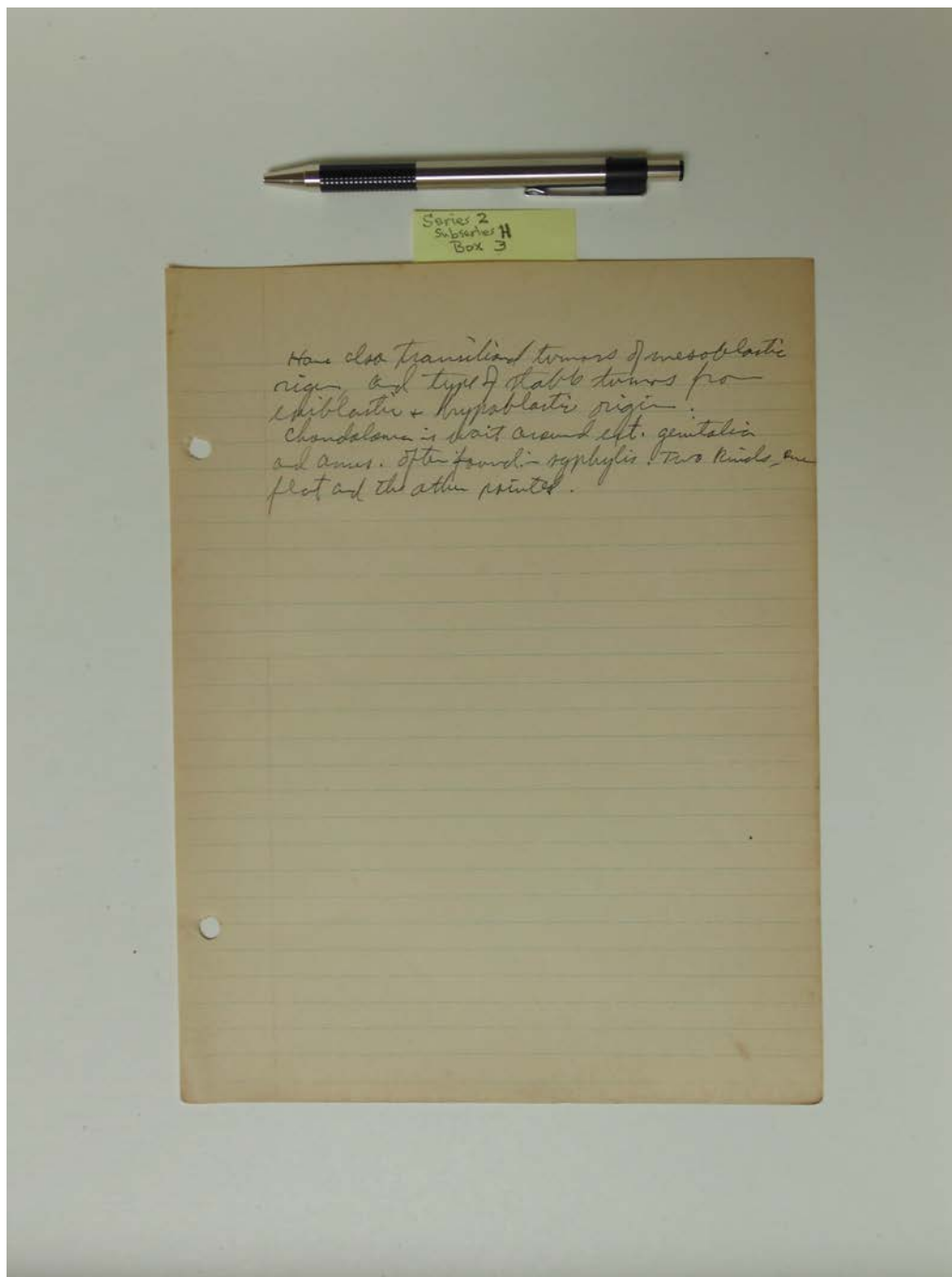


Names:

Chondroma

Types:

essay



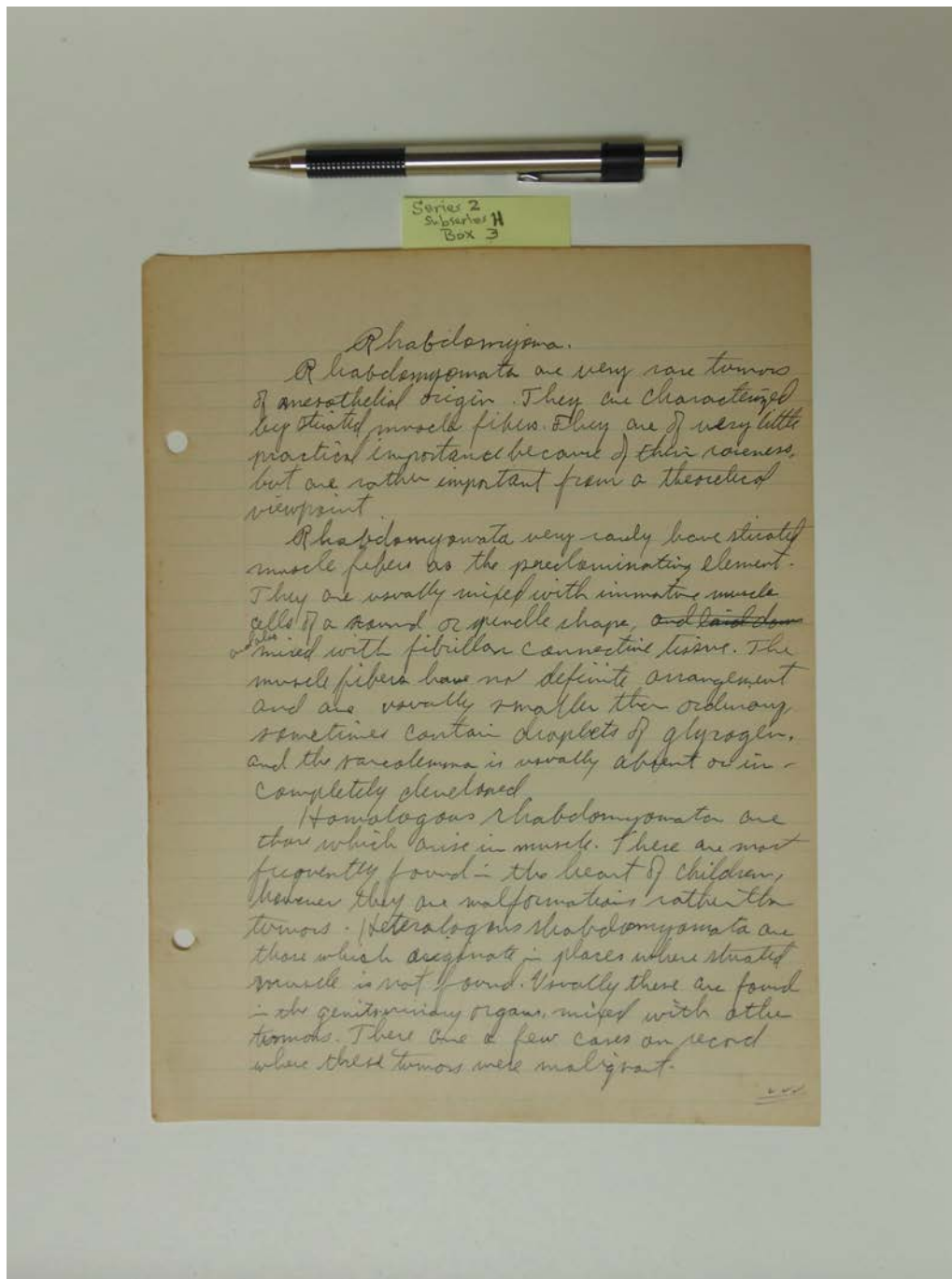
Have also transitional tumors of mesoblastic
origin and type of that's tumors from
epiblastic + hypoblastic origin.
Chondroma is most around left genitalia
and anus. often found in syphilis. Two kinds, one
flat and the other pointed.

Names:

Chondroma

Types:

essay



Rhabdomyoma.

Rhabdomyomata are very rare tumors of mesothelial origin. They are characterized by striated muscle fibers. They are of very little practical importance because of their rareness, but are rather important from a theoretical viewpoint.

Rhabdomyomata very rarely have striated muscle fibers as the preponderating element. They are usually mixed with immature muscle cells of a round or spindle shape, and ~~and contain~~ mixed with fibrillar connective tissues. The muscle fibers have no definite arrangement and are usually smaller than ordinary, sometimes contain droplets of glycogen, and the sarcolemma is usually absent or incompletely developed.

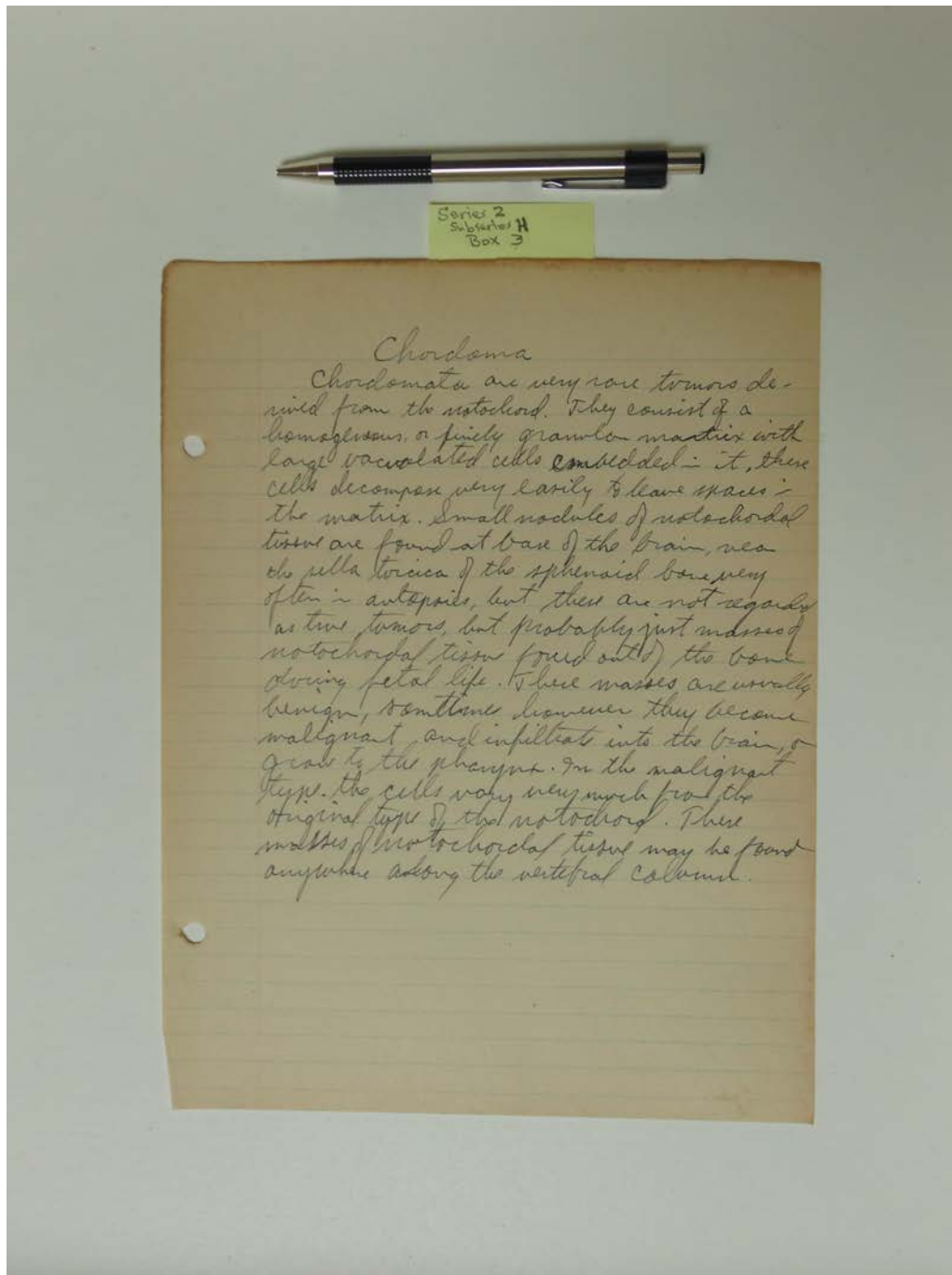
Homologous rhabdomyomata are those which arise in muscle. These are most frequently found in the heart of children, however they are malformations rather than tumors. Heterologous rhabdomyomata are those which aggregate in places where striated muscle is not found. Usually these are found in the genitourinary organs, mixed with other tumors. There are a few cases on record where these tumors were malignant.

Names:

Rhabdomyoma

Types:

essay

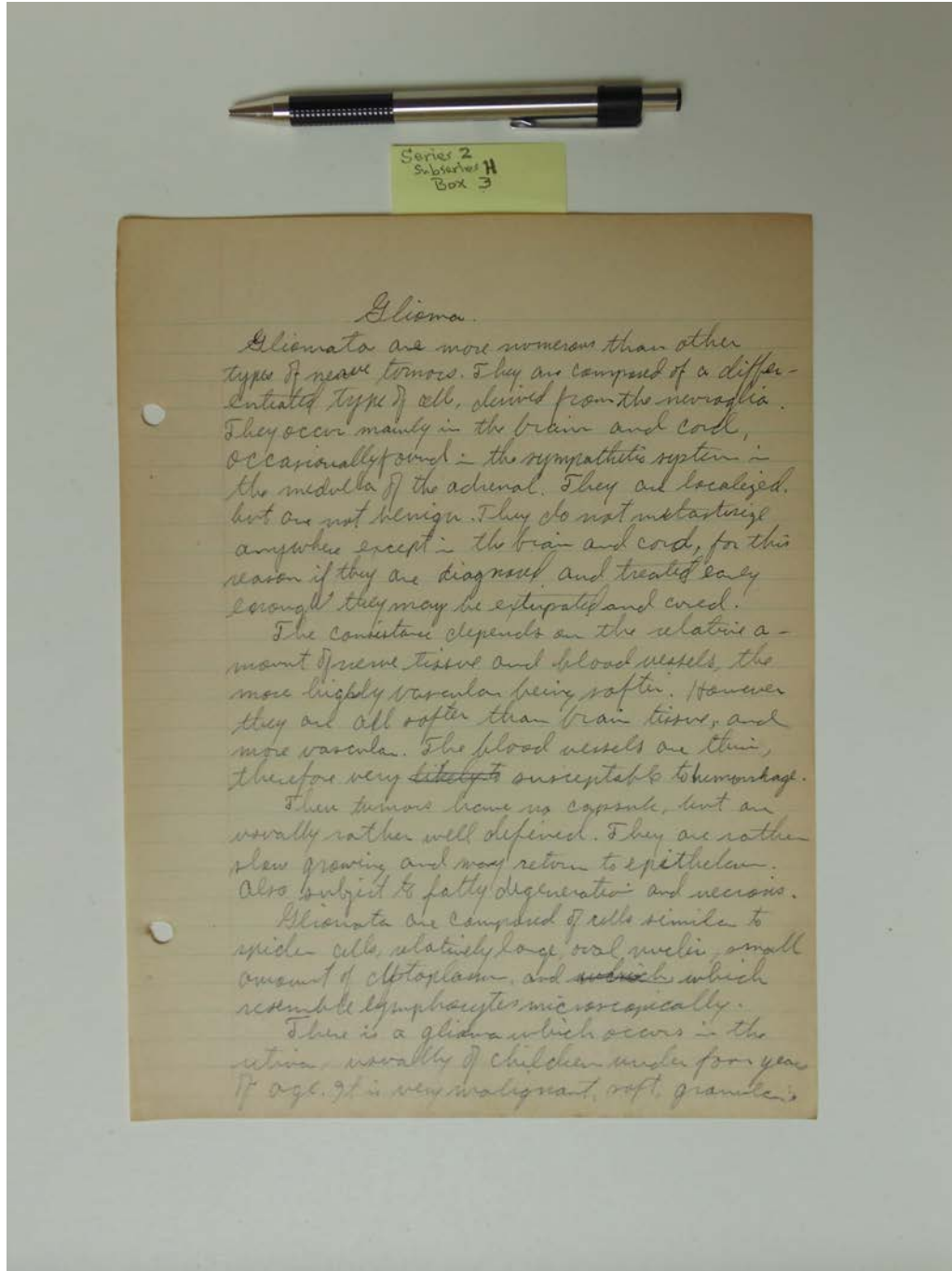


Names:

Chordoma

Types:

essay



Glioma.

Gliomata are more numerous than other types of neave tumors. They are composed of a differentiated type of cell, derived from the neuroglia. They occur mainly in the brain and cord, occasionally found in the sympathetic system in the medulla of the adrenal. They are localized, but are not benign. They do not metastasize anywhere except in the brain and cord, for this reason if they are diagnosed and treated early enough they may be extirpated and cured.

The consistency depends on the relative amount of dense tissue and blood vessels, the more highly vascular being softer. However they are all softer than brain tissue, and more vascular. The blood vessels are thin, therefore very ~~likely~~ susceptible to hemorrhage.

These tumors have no capsule, but are usually rather well defined. They are rather slow growing and may return to epithelium. Also subject to fatty degeneration and necrosis.

Gliomata are composed of cells similar to spindle cells, relatively large oval nuclei, small amount of cytoplasm, and ~~some~~ which resemble lymphocytes microscopically.

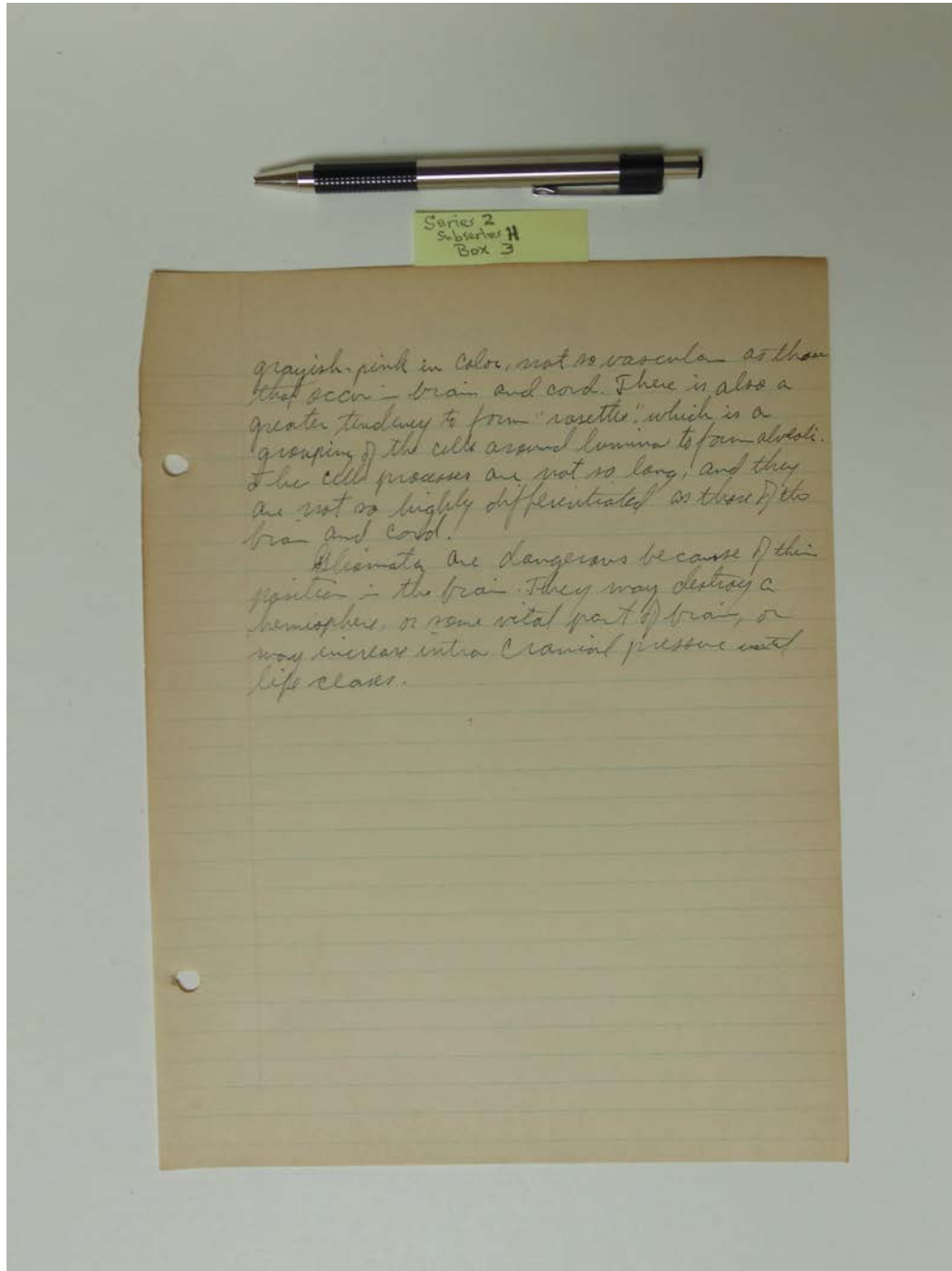
There is a glioma which occurs in the retina, usually of children under four years of age. It is very malignant, soft, granular,

Names:

Glioma

Types:

essay



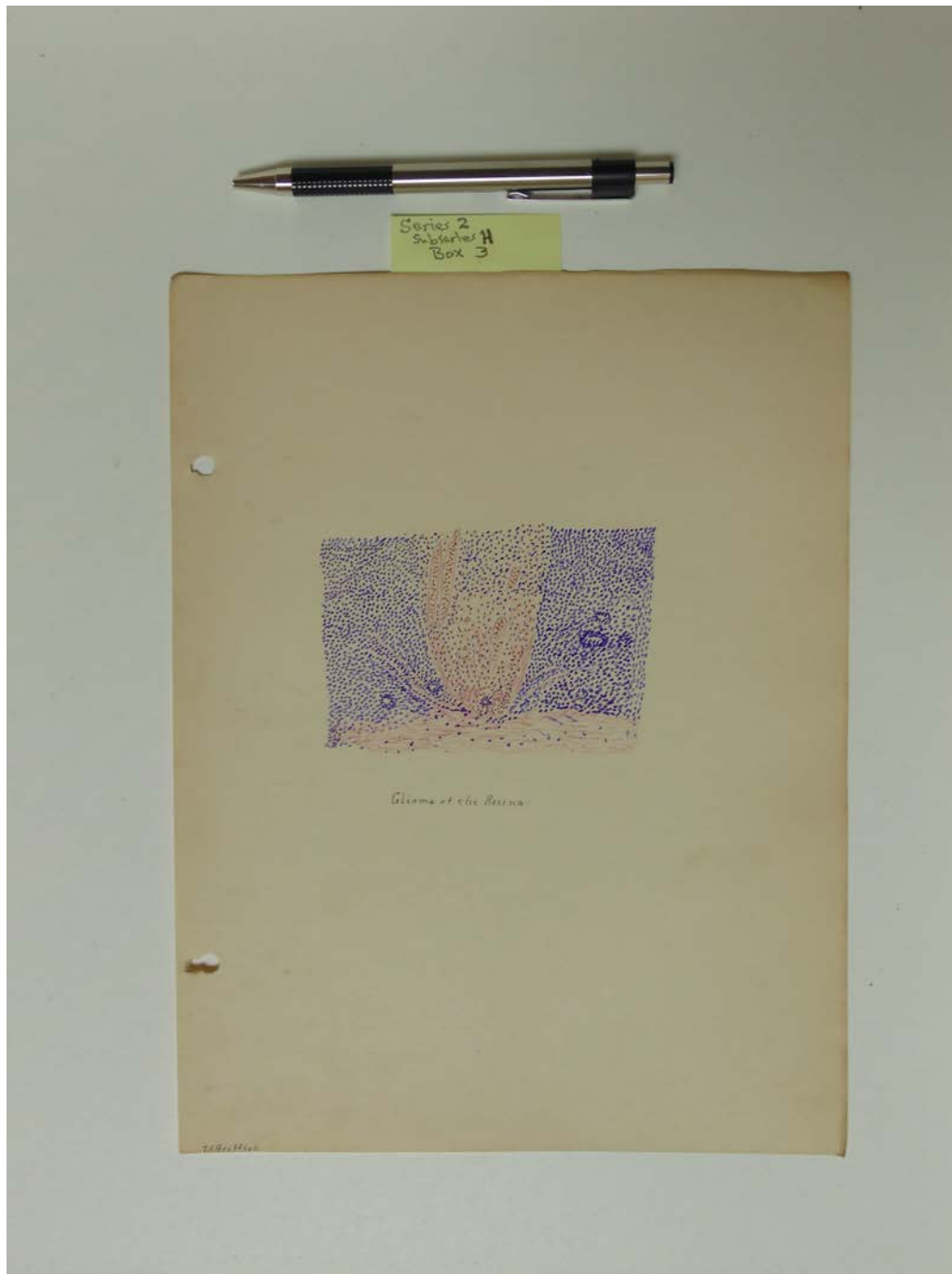
Names:
Glioma

Types:
essay

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J.E. Griffith Pathology Notes, circa 1928

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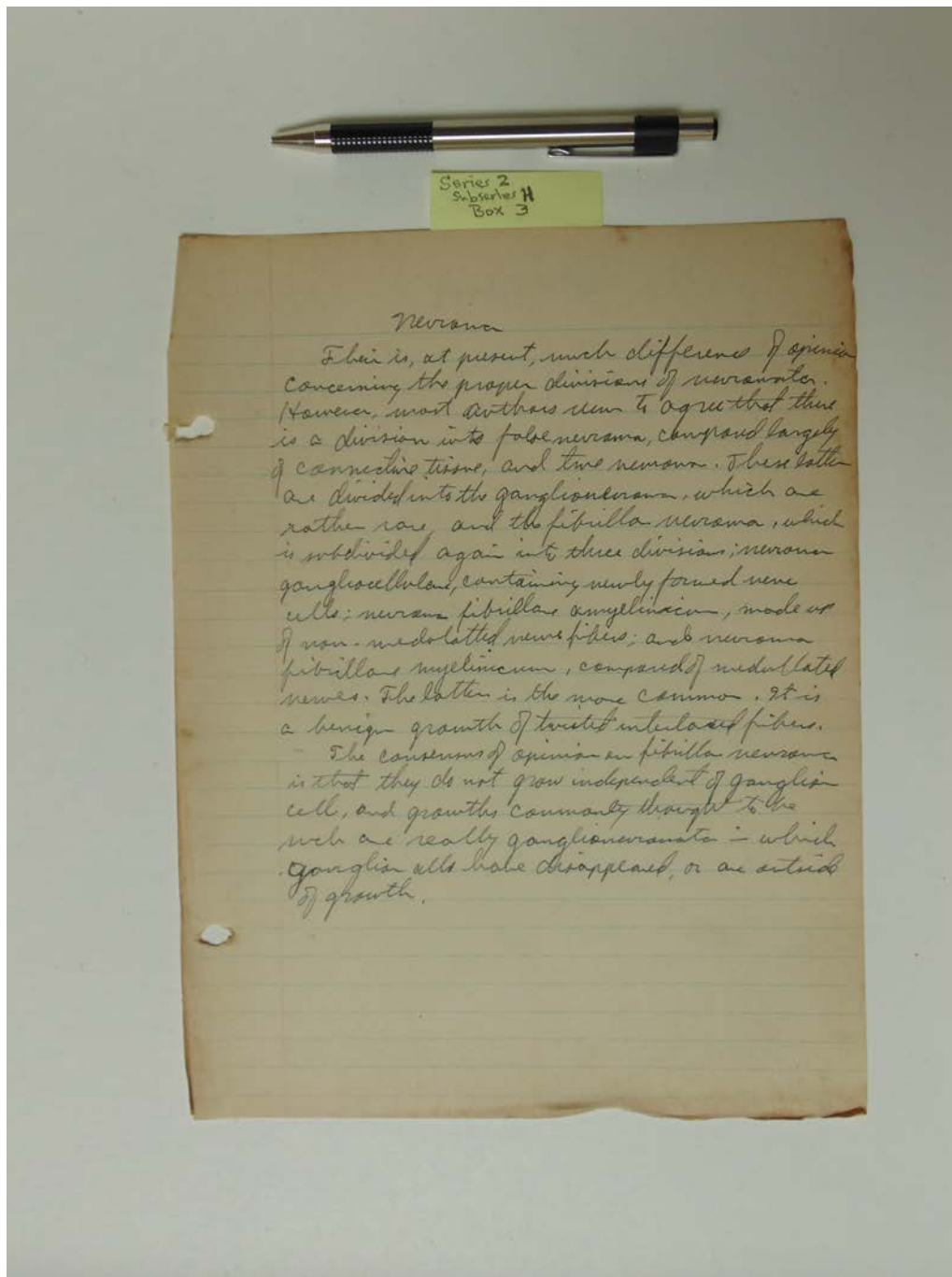


Names:

Glioma of Retina

Types:

drawing

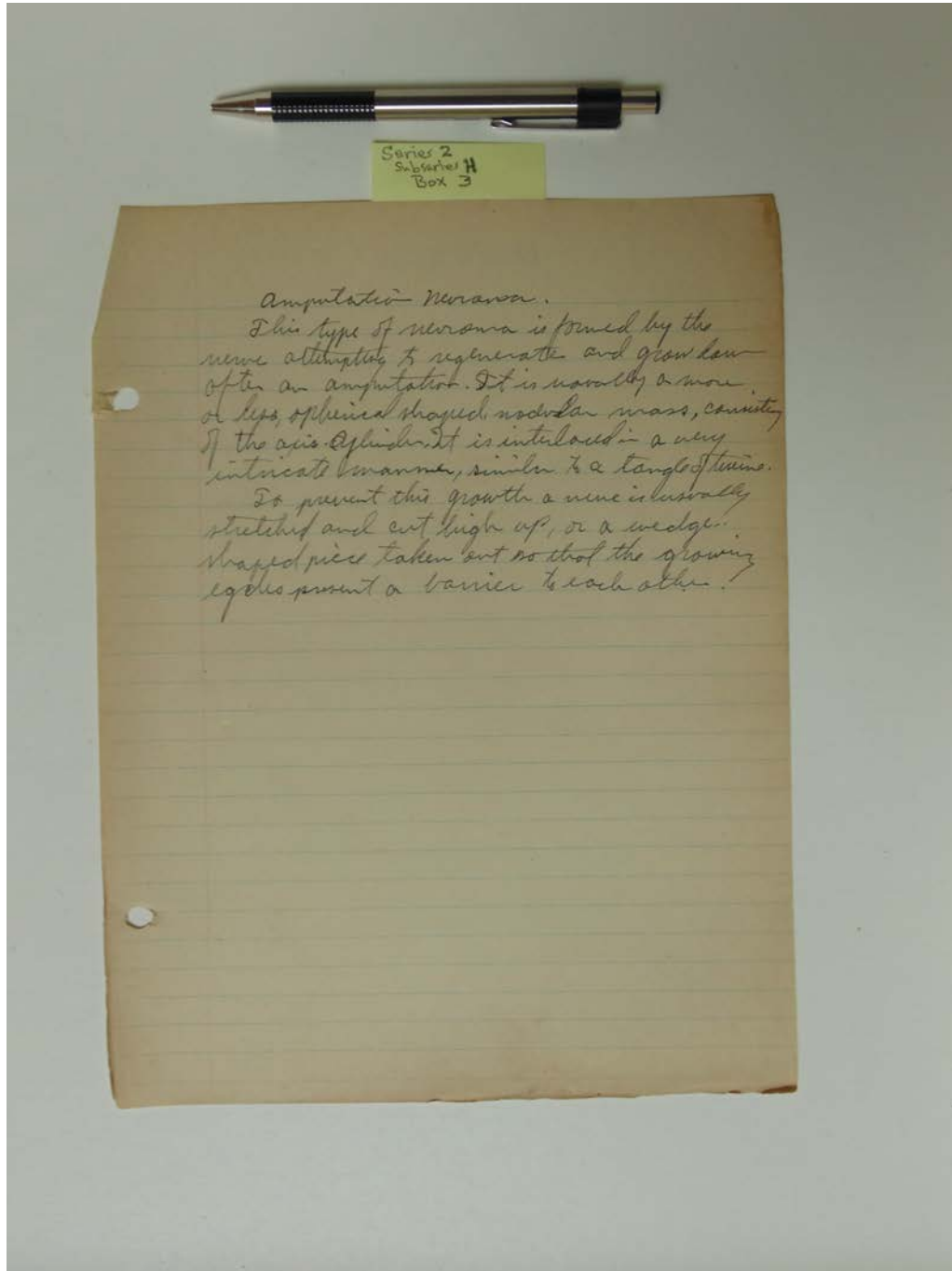


Names:

Neuroma

Types:

essay



Names:

Amputation Neuroma

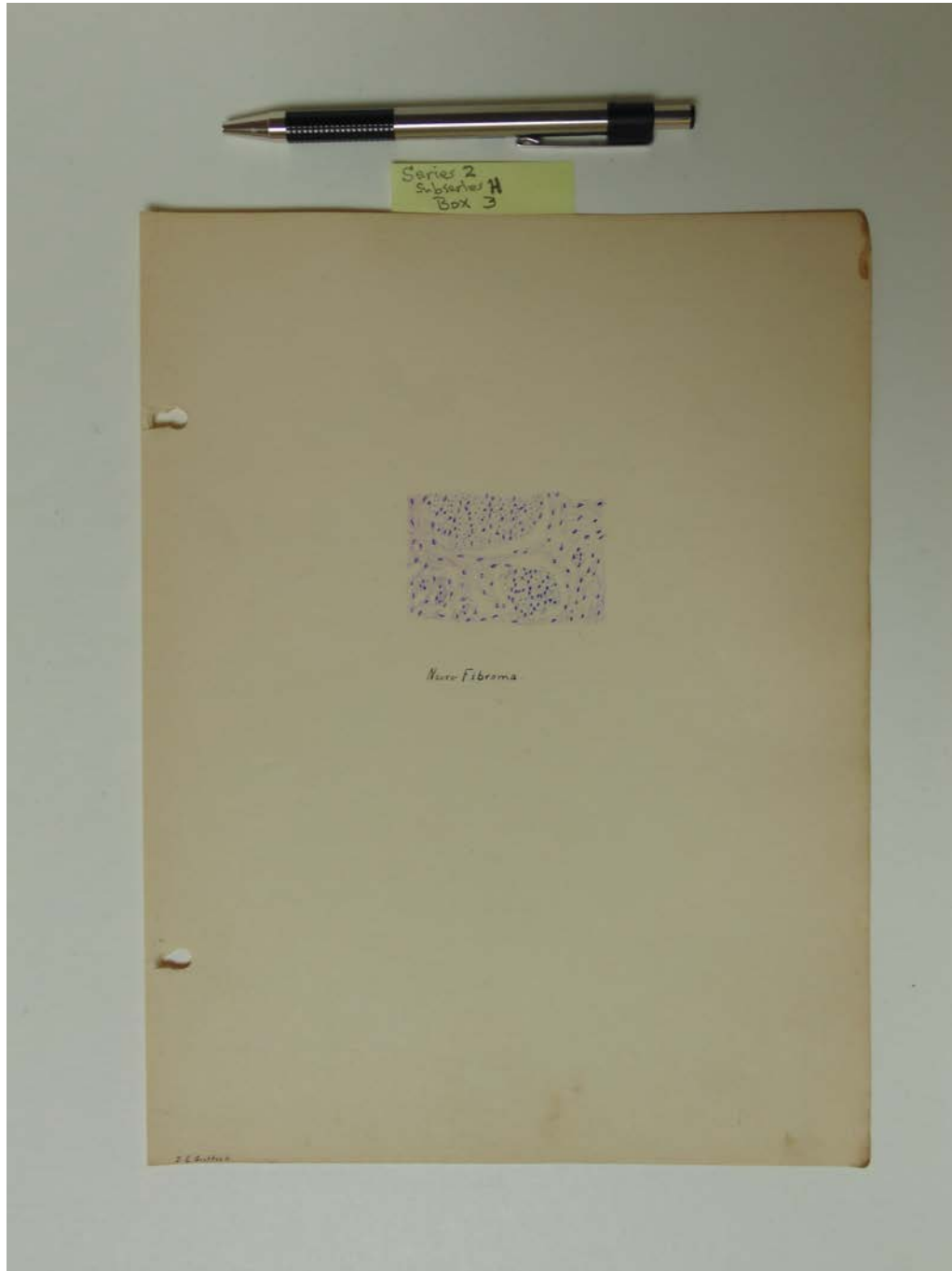
Types:

essay

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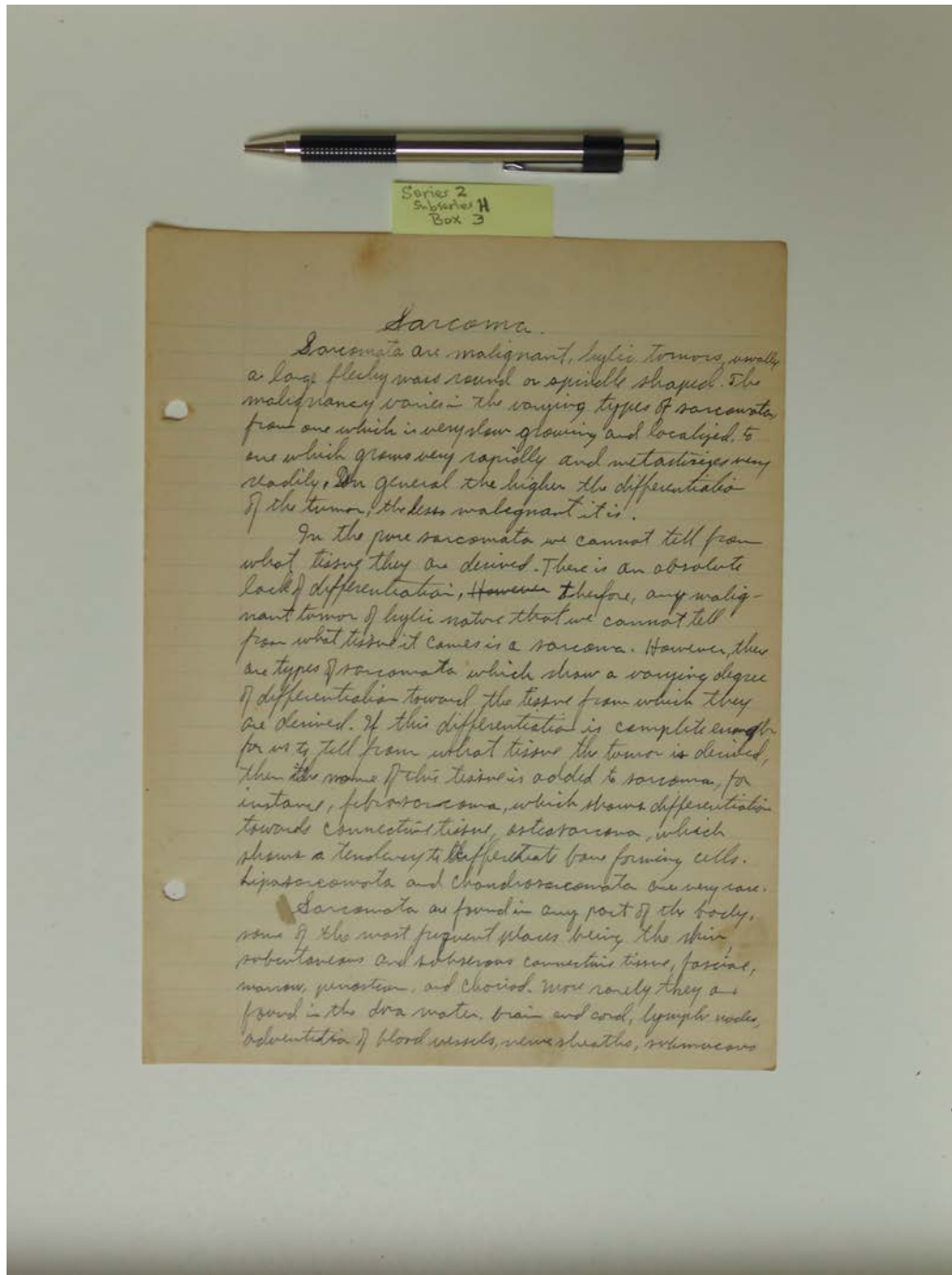


Names:

Neuro-Fibroma

Types:

drawing



Sarcoma.

Sarcomata are malignant, lymphic tumors, usually a large fleshy mass round or spindle shaped. The malignancy varies in the varying types of sarcomata from one which is very slow growing and localized, to one which grows very rapidly and metastasizes very readily. In general the higher the differentiation of the tumor, the less malignant it is.

In the pure sarcomata we cannot tell from what tissue they are derived. There is an absolute lack of differentiation. However therefore, any malignant tumor of lymphic nature that we cannot tell from what tissue it comes is a sarcoma. However, there are types of sarcomata which show a varying degree of differentiation toward the tissue from which they are derived. If this differentiation is complete enough for us to tell from what tissue the tumor is derived, then the name of this tissue is added to sarcoma, for instance, fibrosarcoma, which shows differentiation towards connective tissue, osteosarcoma, which shows a tendency to differentiate bone forming cells. Liposarcomata and chondrosarcomata are very rare.

Sarcomata are found in any part of the body, some of the most frequent places being the skin, subcutaneous and subserous connective tissue, fascia, marrow, peritoneum, and choroid. More rarely they are found in the dura mater, brain and cord, lymph nodes, adventitia of blood vessels, nerve sheaths, and viscera.

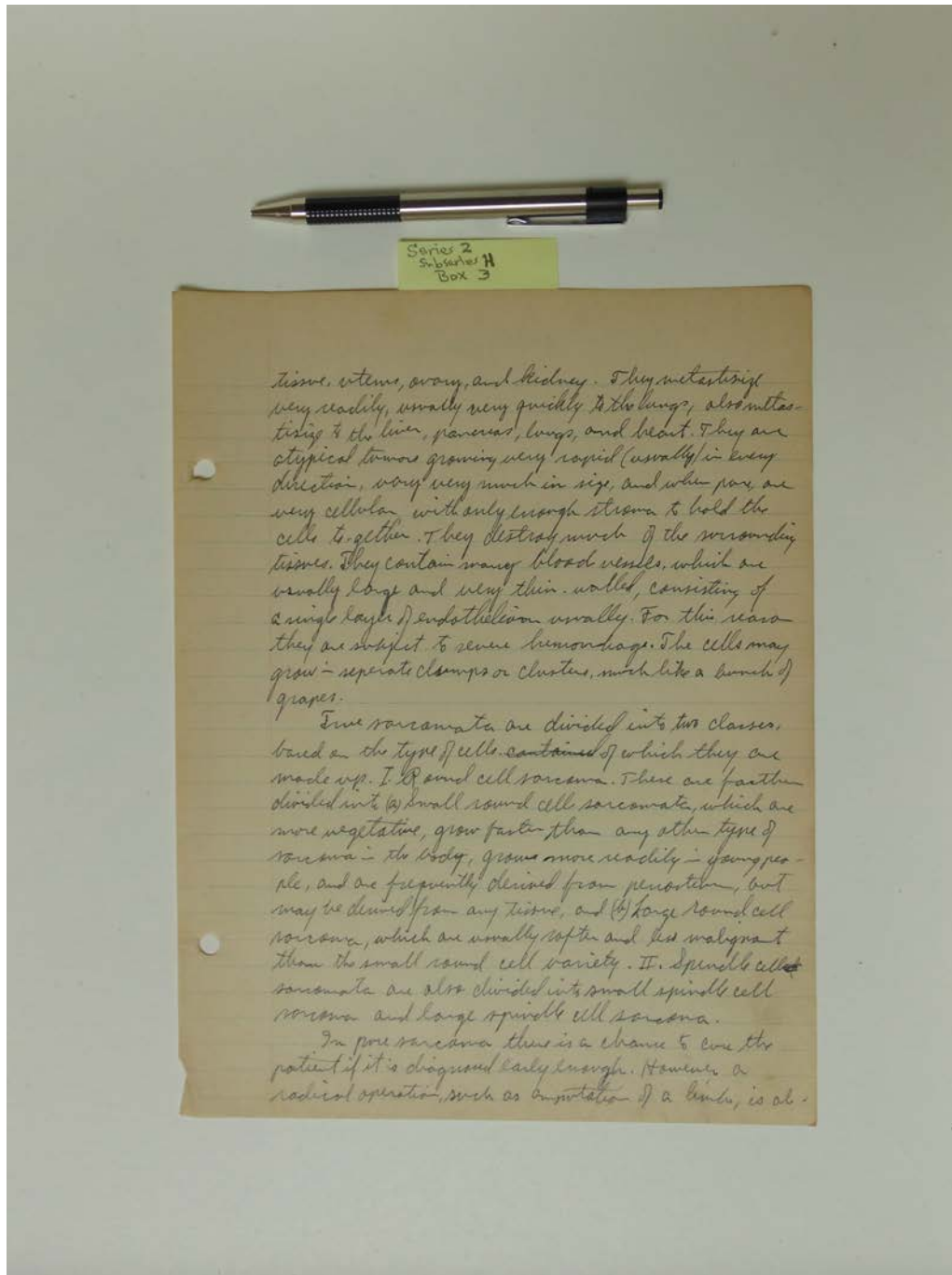
p. 1

Names:

Sarcoma

Types:

essay



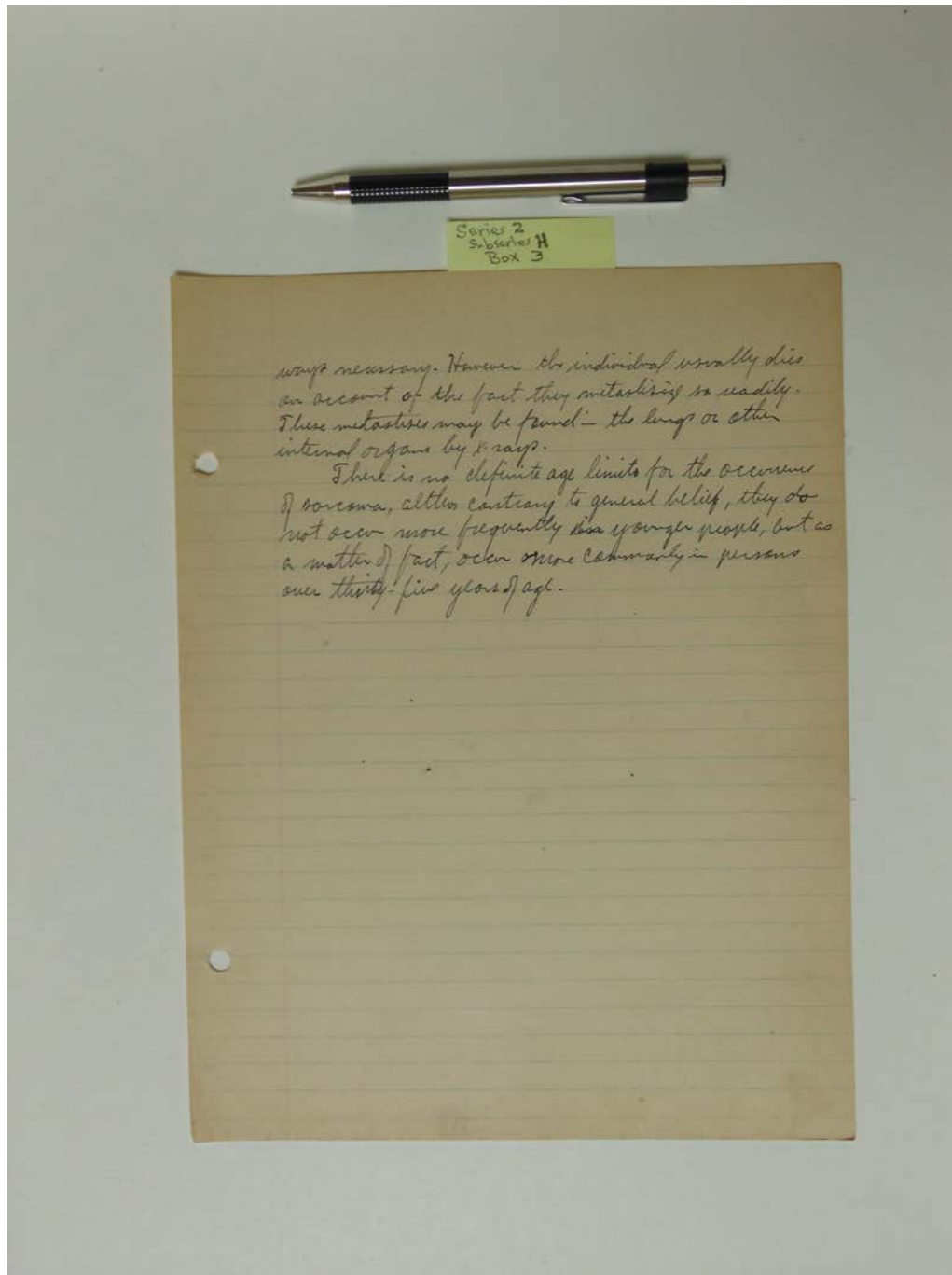
p. 2

Names:

Sarcoma

Types:

essay



ways necessary. However the individual usually dies
on account of the fact they metastasize so readily.
These metastases may be found - the lungs or other
internal organs by x-rays.

There is no definite age limits for the occurrence
of sarcoma, altho contrary to general belief, they do
not occur more frequently in younger people, but as
a matter of fact, occur more commonly in persons
over thirty-five years of age.

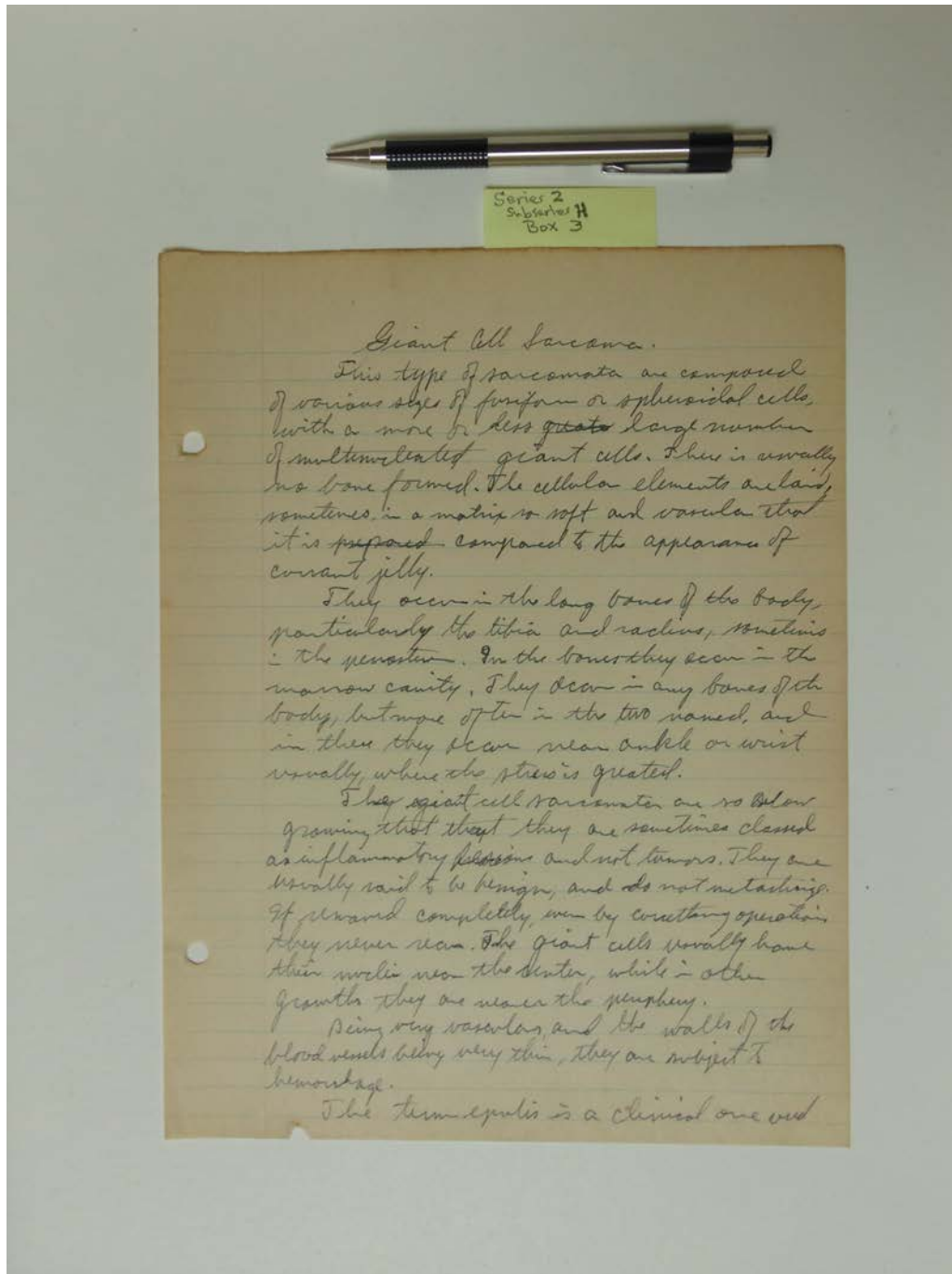
p. 3

Names:

Sarcoma

Types:

essay

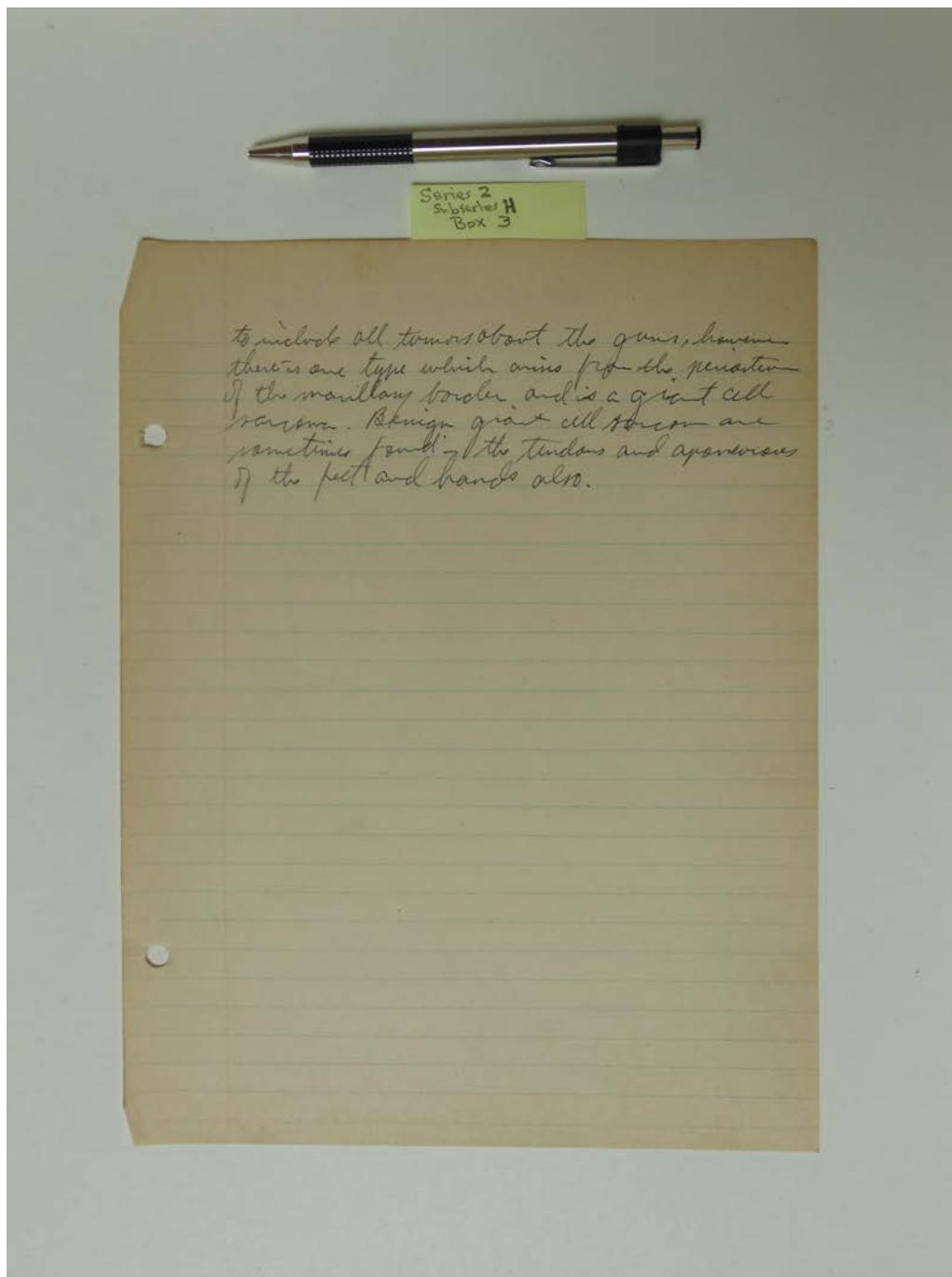


Names:

Giant Cell Sarcoma

Types:

essay

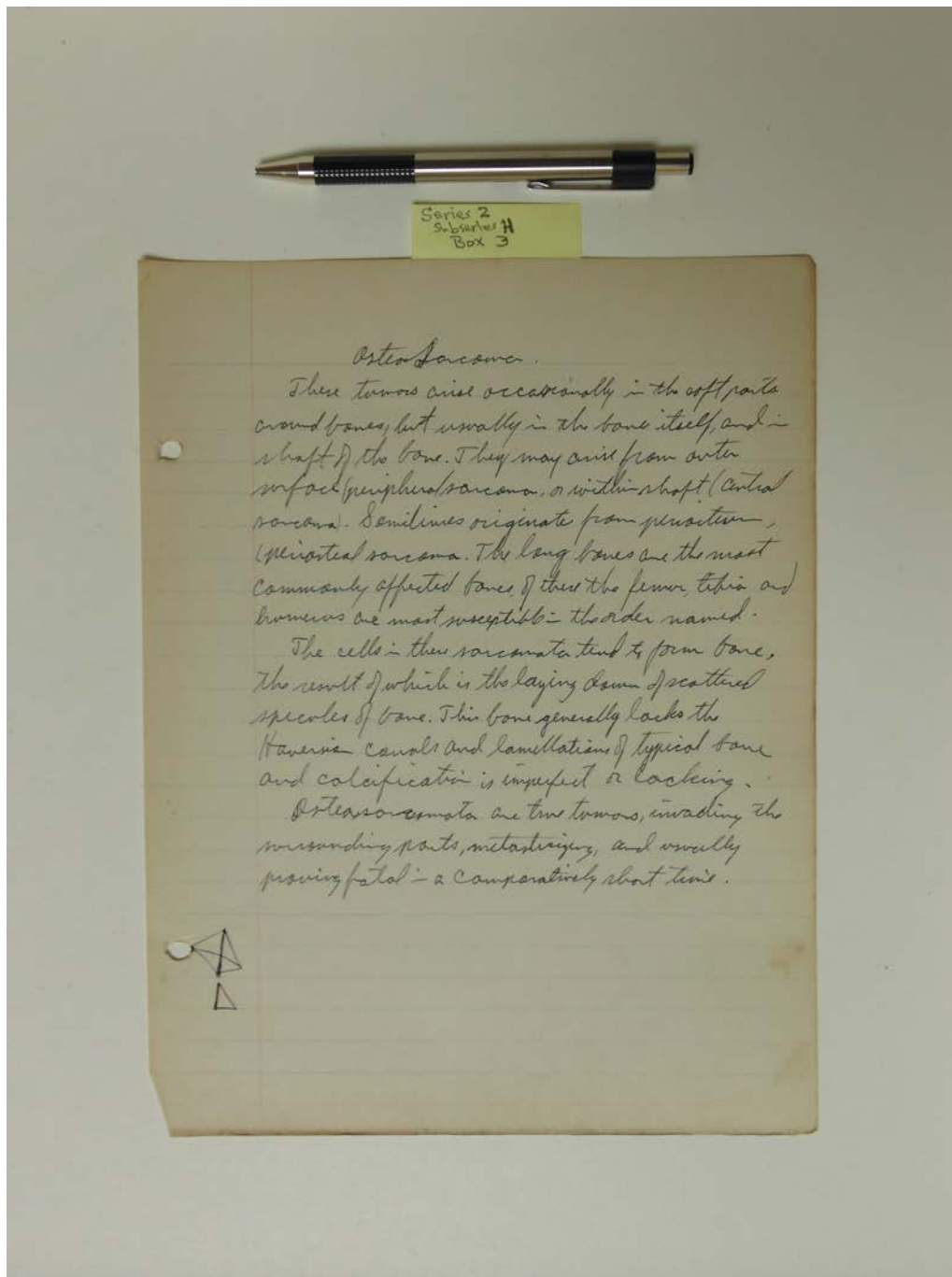


Names:

Giant Cell Sarcoma

Types:

essay



Names:

Osteosarcoma

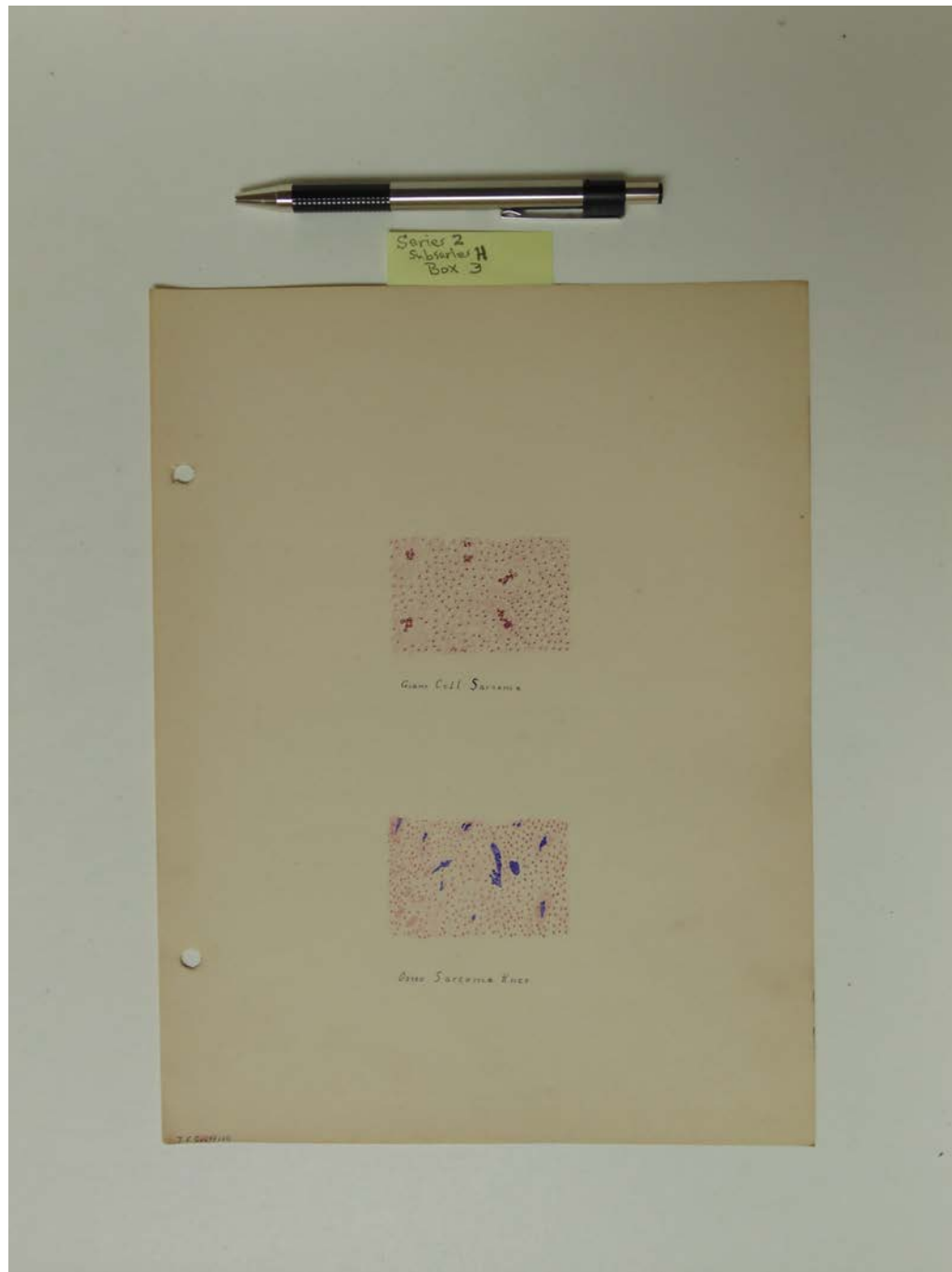
Types:

essay

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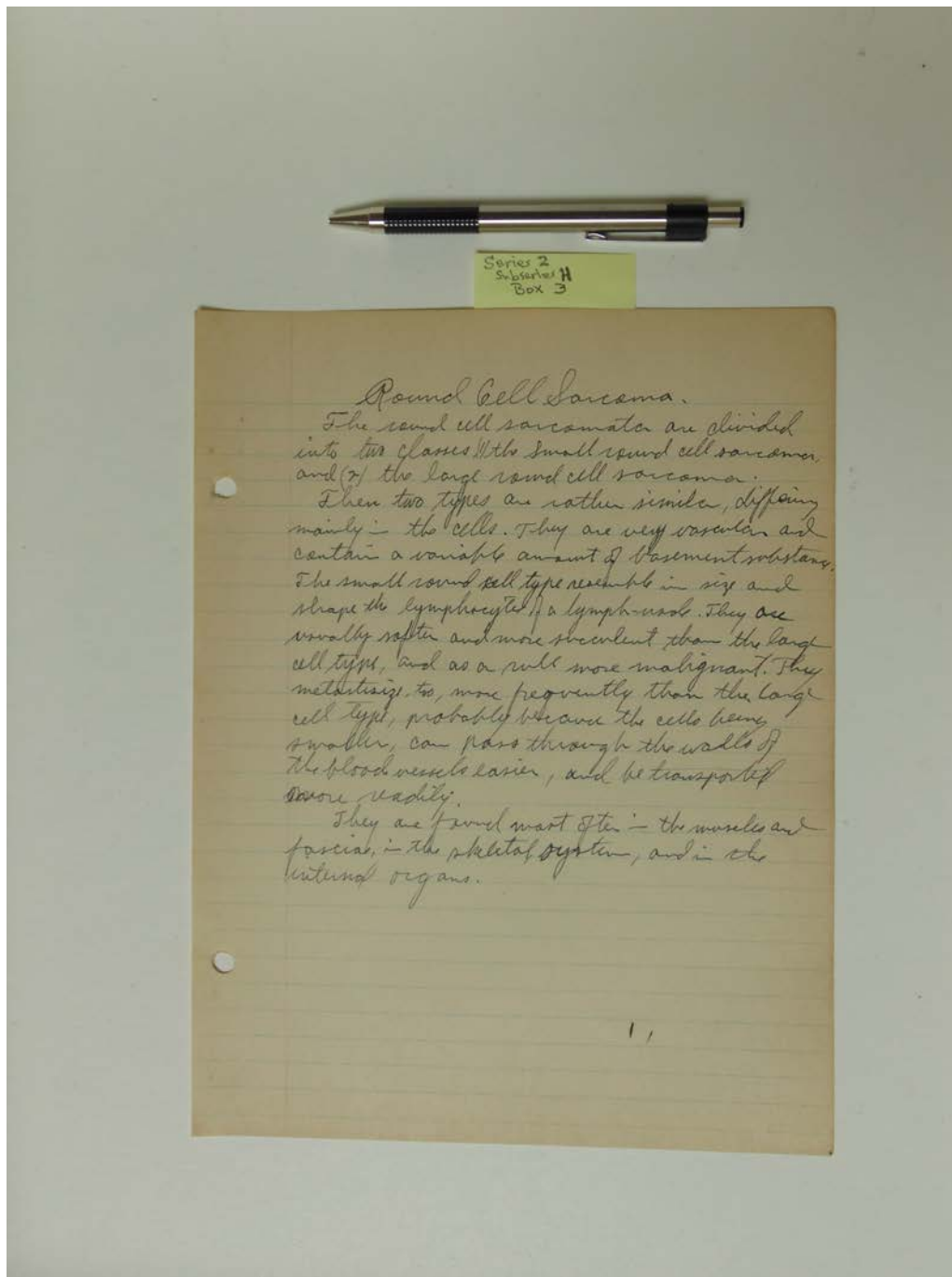
Names:

Giant Cell Sarcoma

Osteosarcoma Knee

Types:

drawing

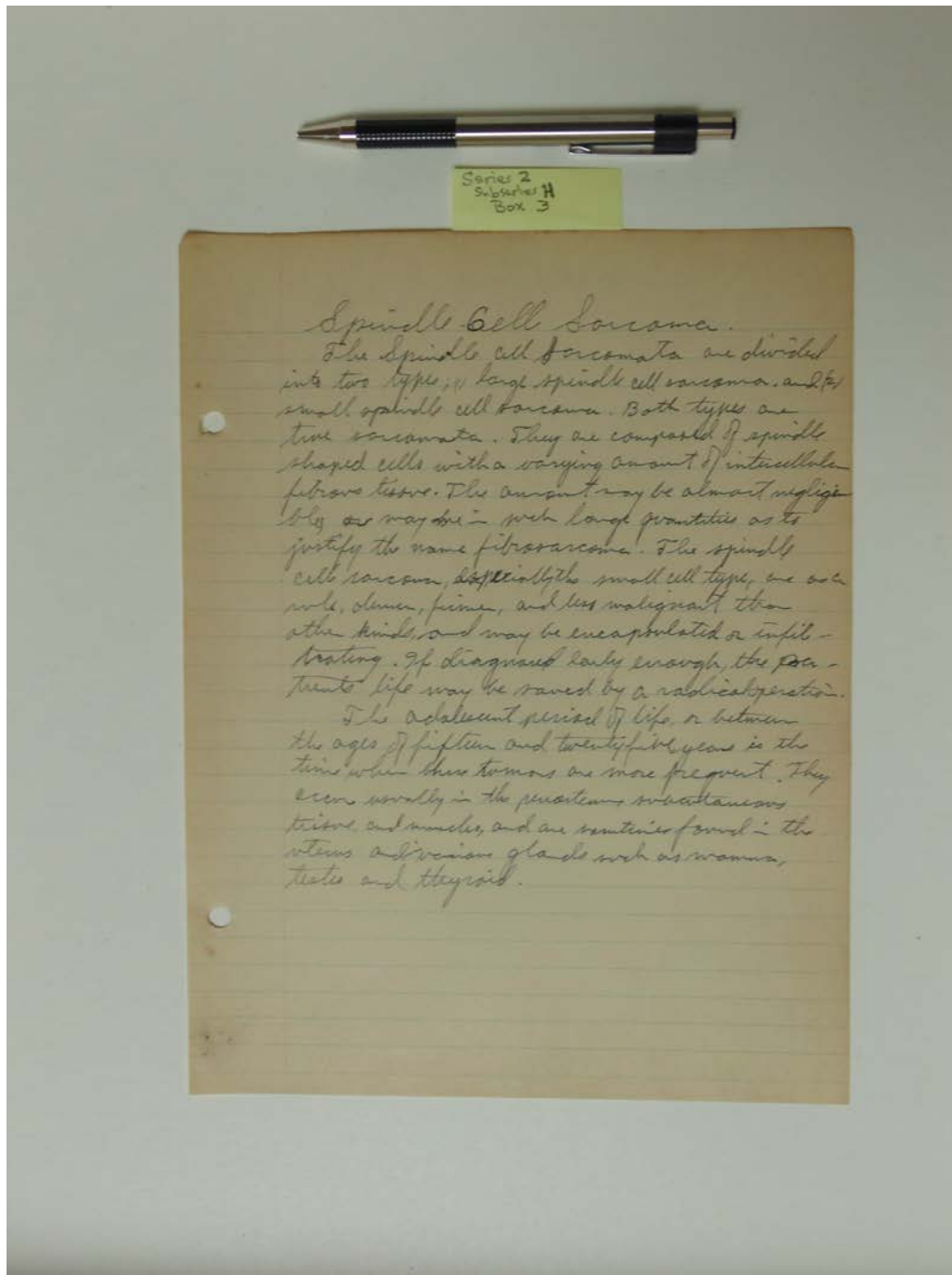


Names:

Round Cell Sarcoma

Types:

essay

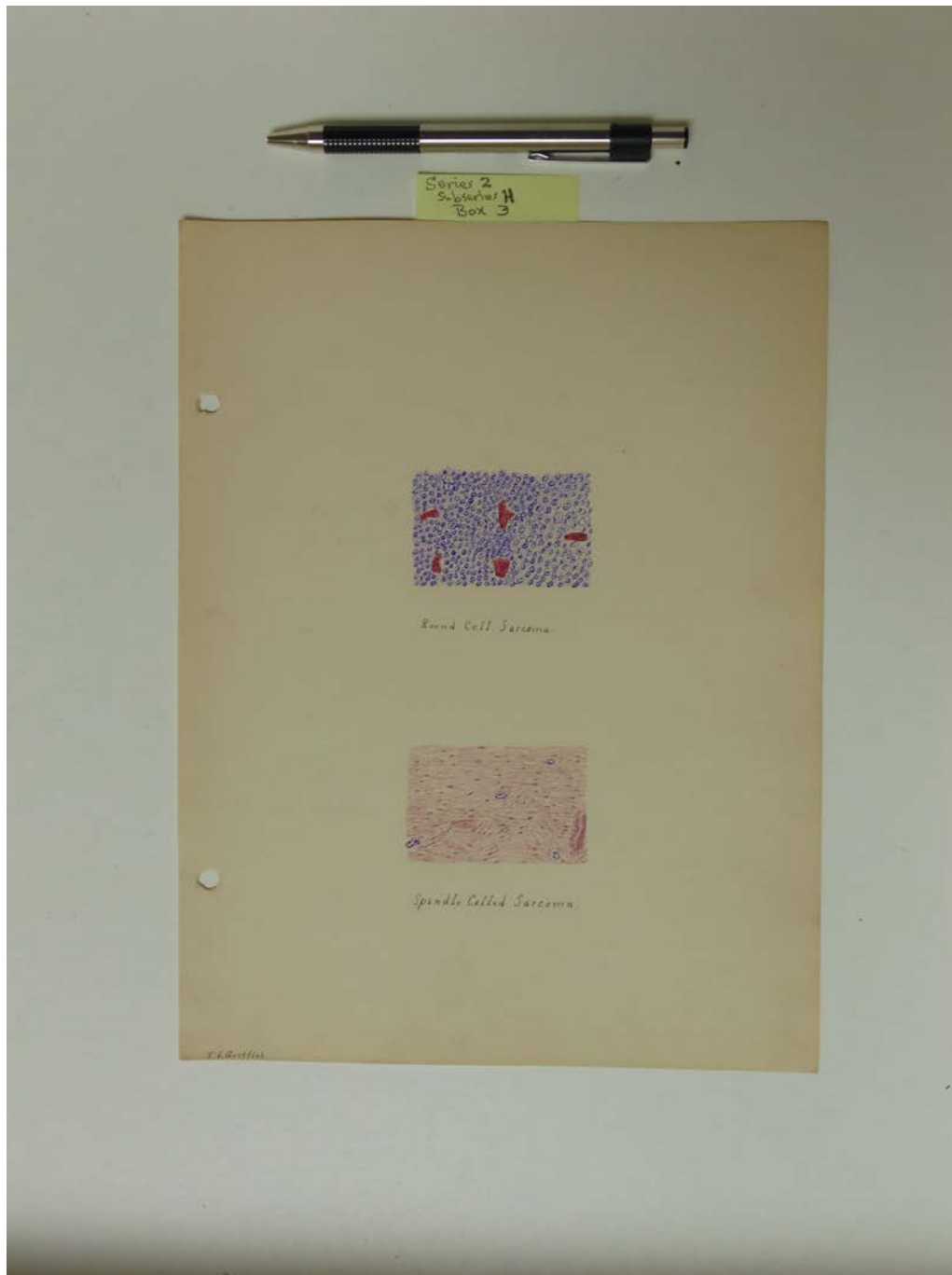


Names:

Spindle Cell Sarcoma

Types:

essay



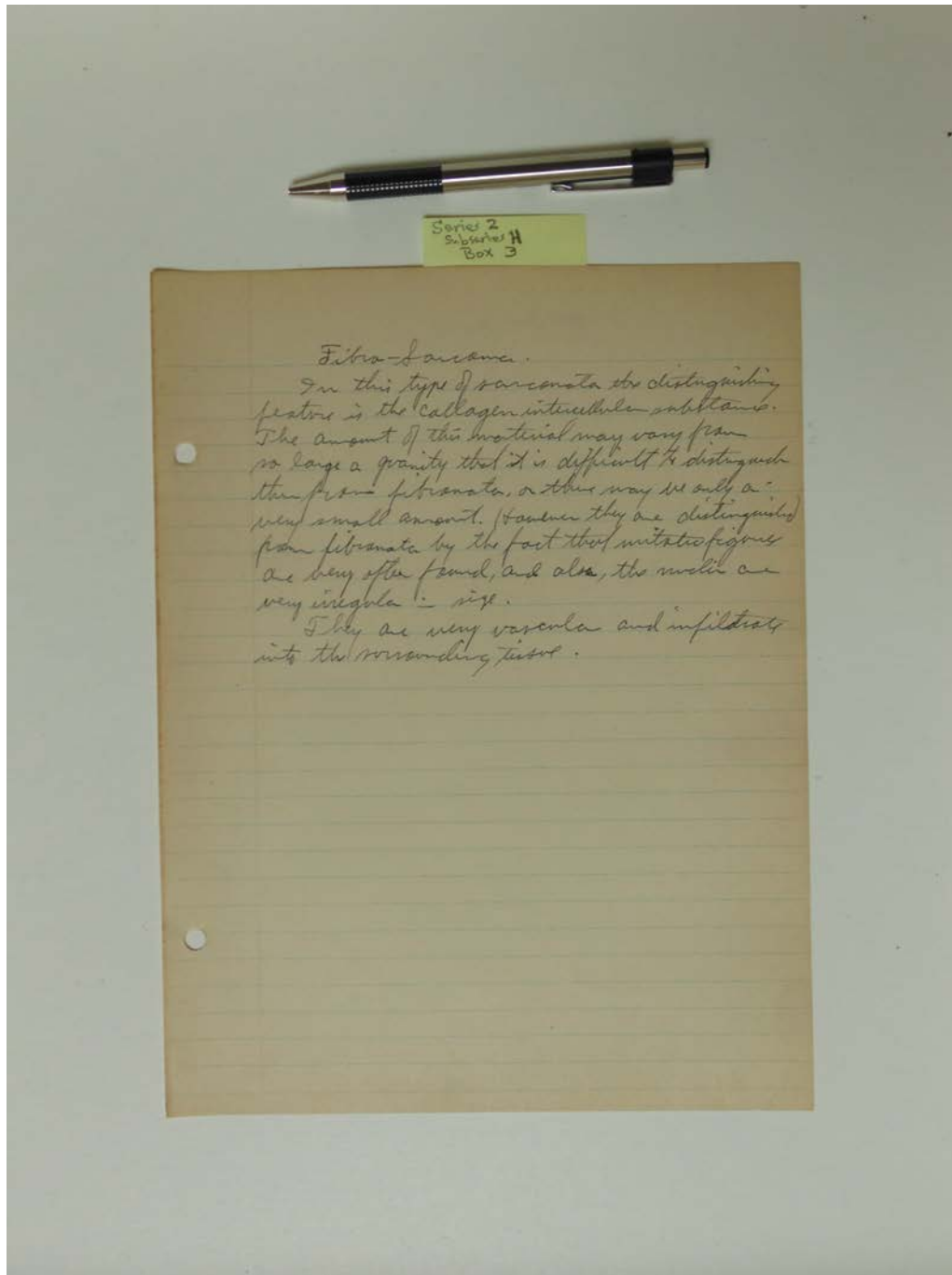
Names:

Round Cell Sarcoma

Spindle Cell Sarcoma

Types:

drawing



Names:

Fibrosarcoma

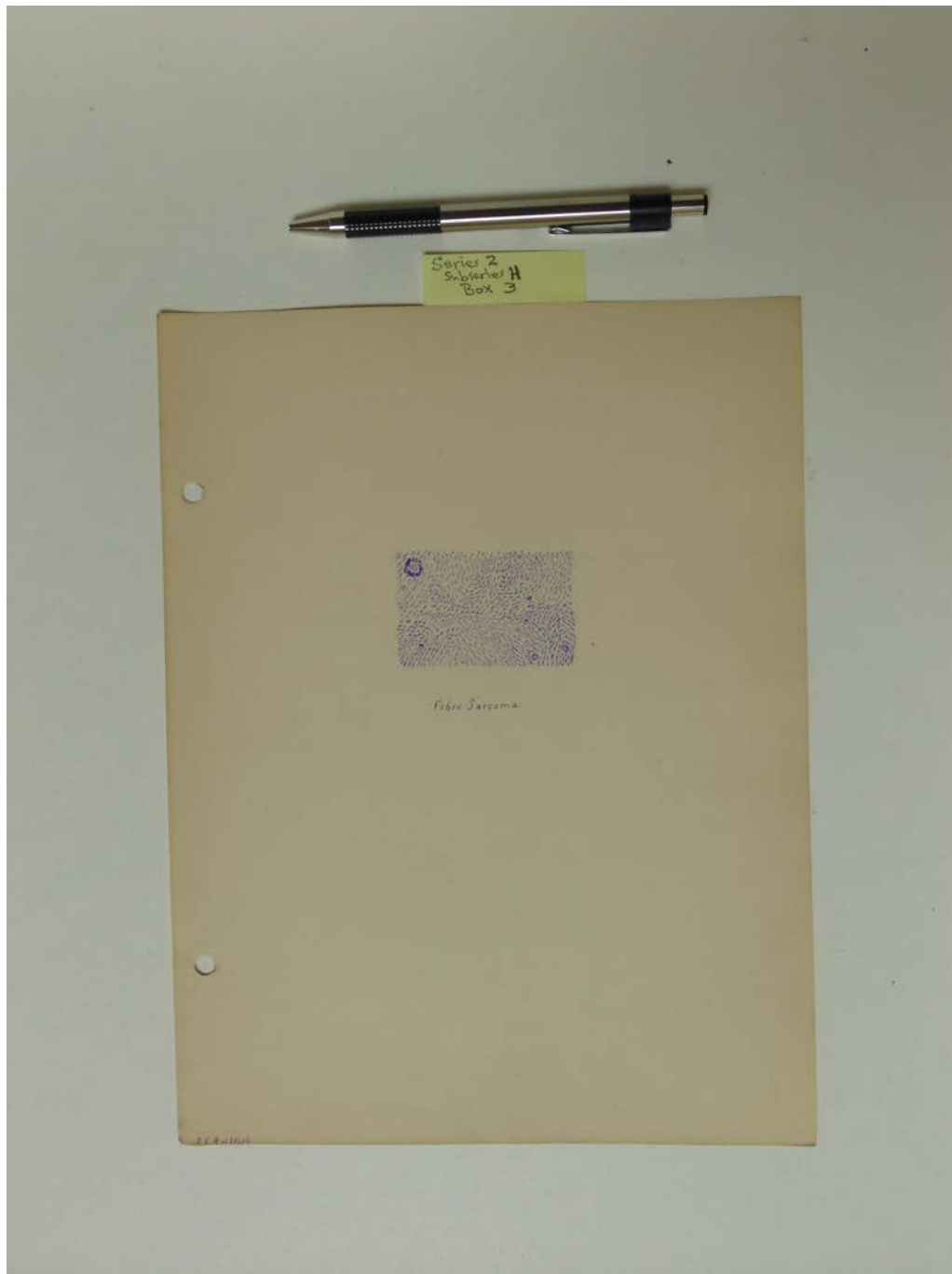
Types:

essay

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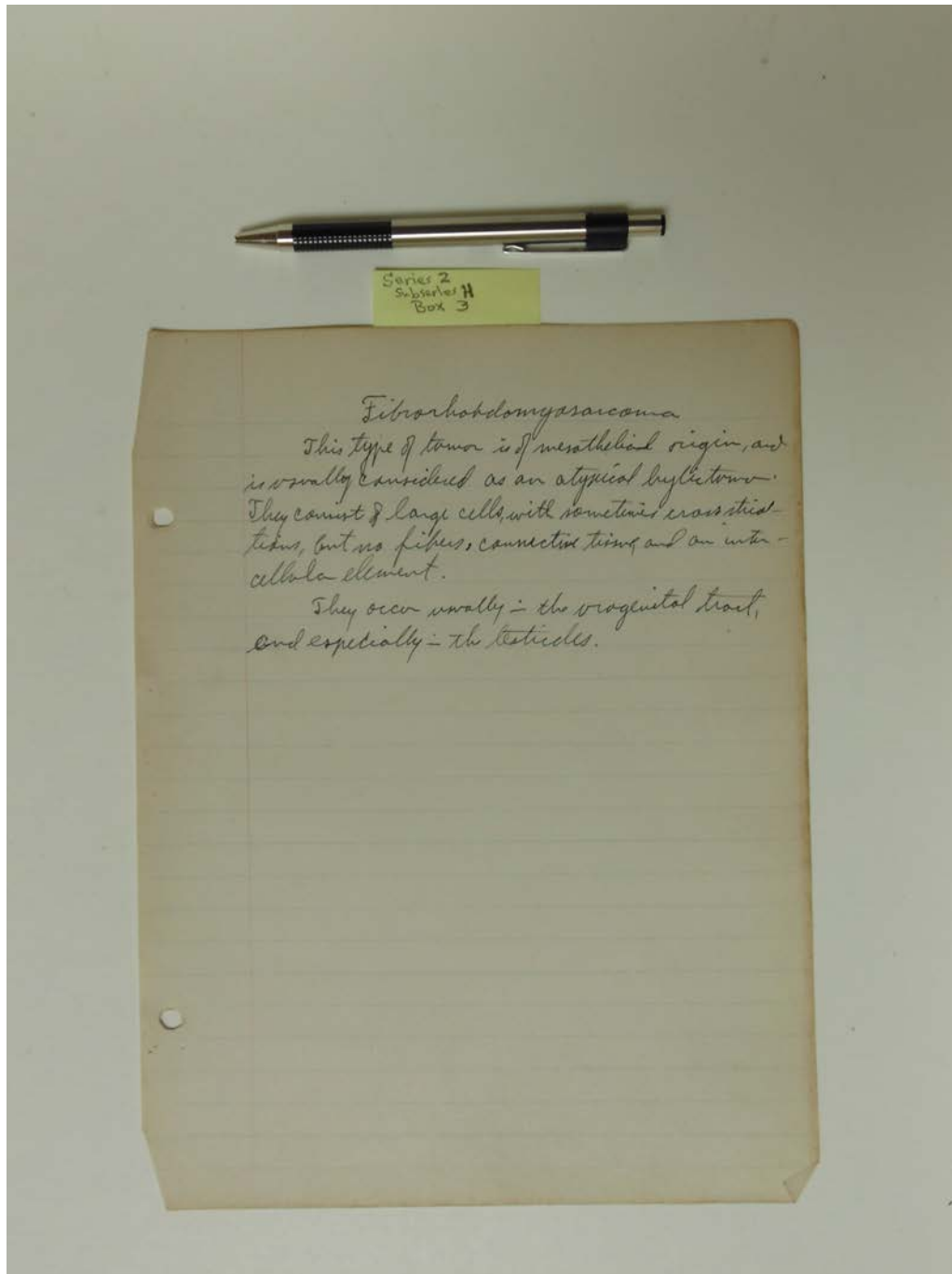


Names:

Fibrosarcoma

Types:

drawing



Names:

Fibrorhabdomyosarcoma

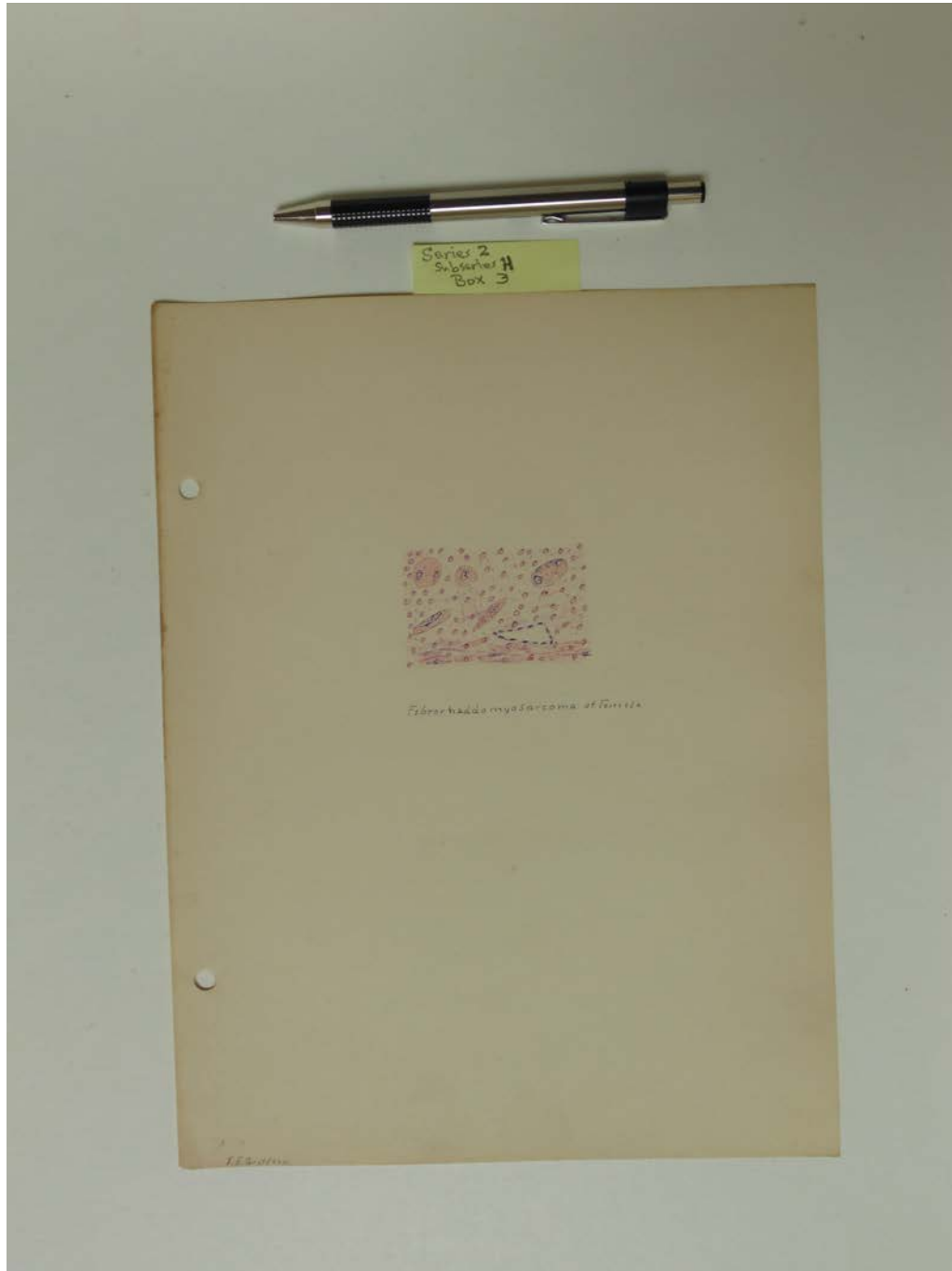
Types:

essay

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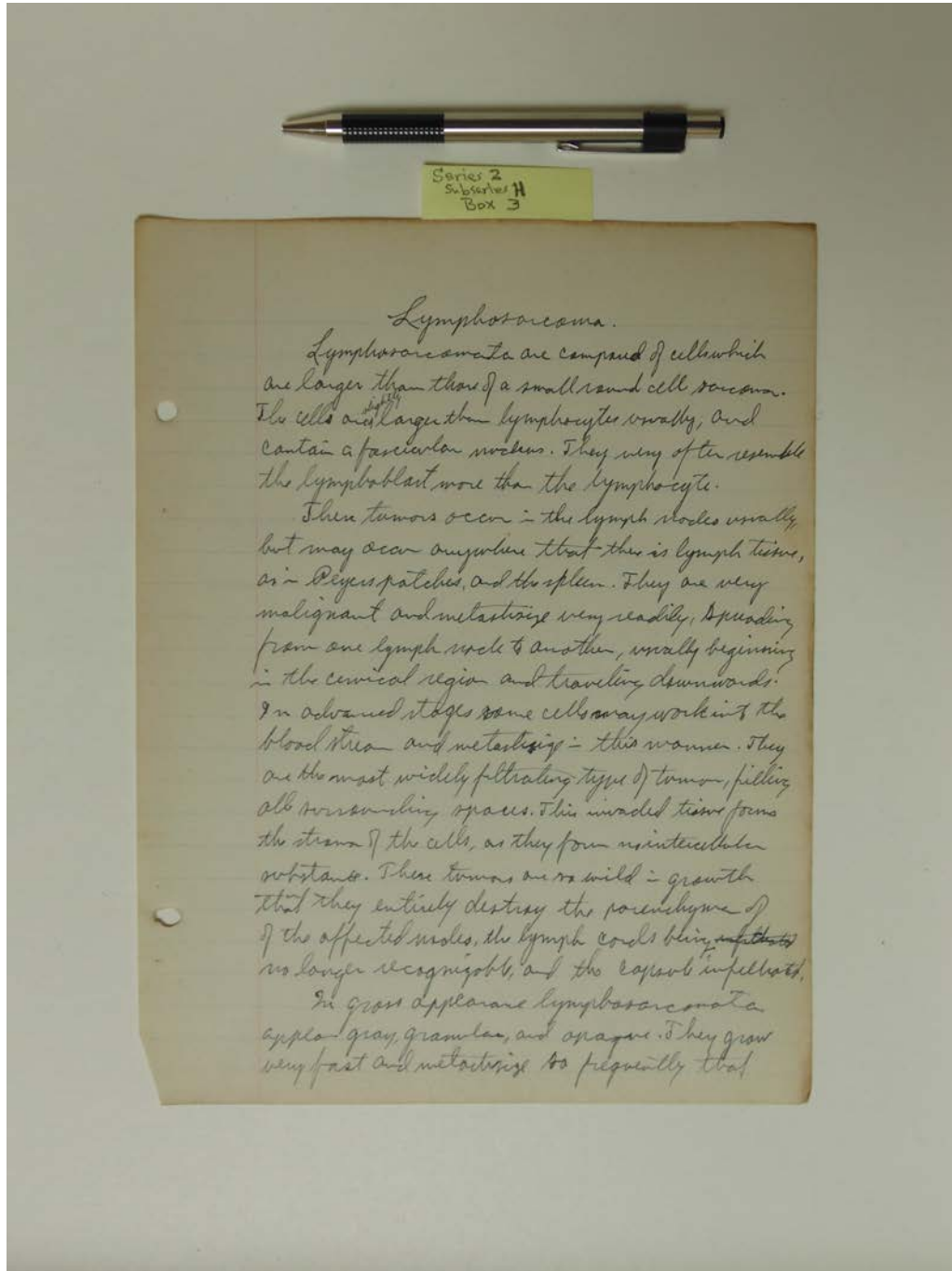


Names:

Fibrorhabdomyosarcoma
of Testicle

Types:

drawing

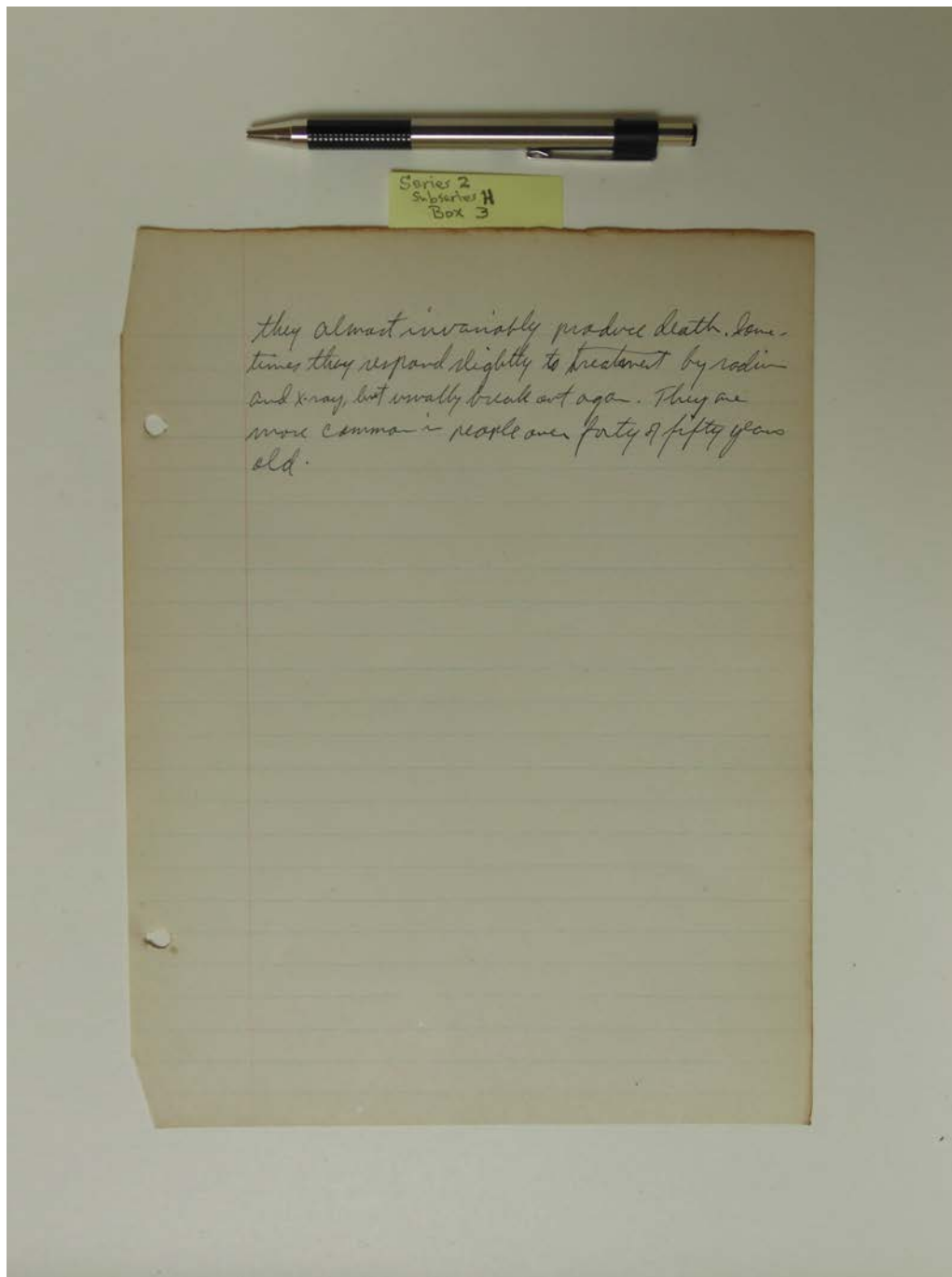


Names:

Lymphosarcoma

Types:

essay



Names:

Lymphosarcoma

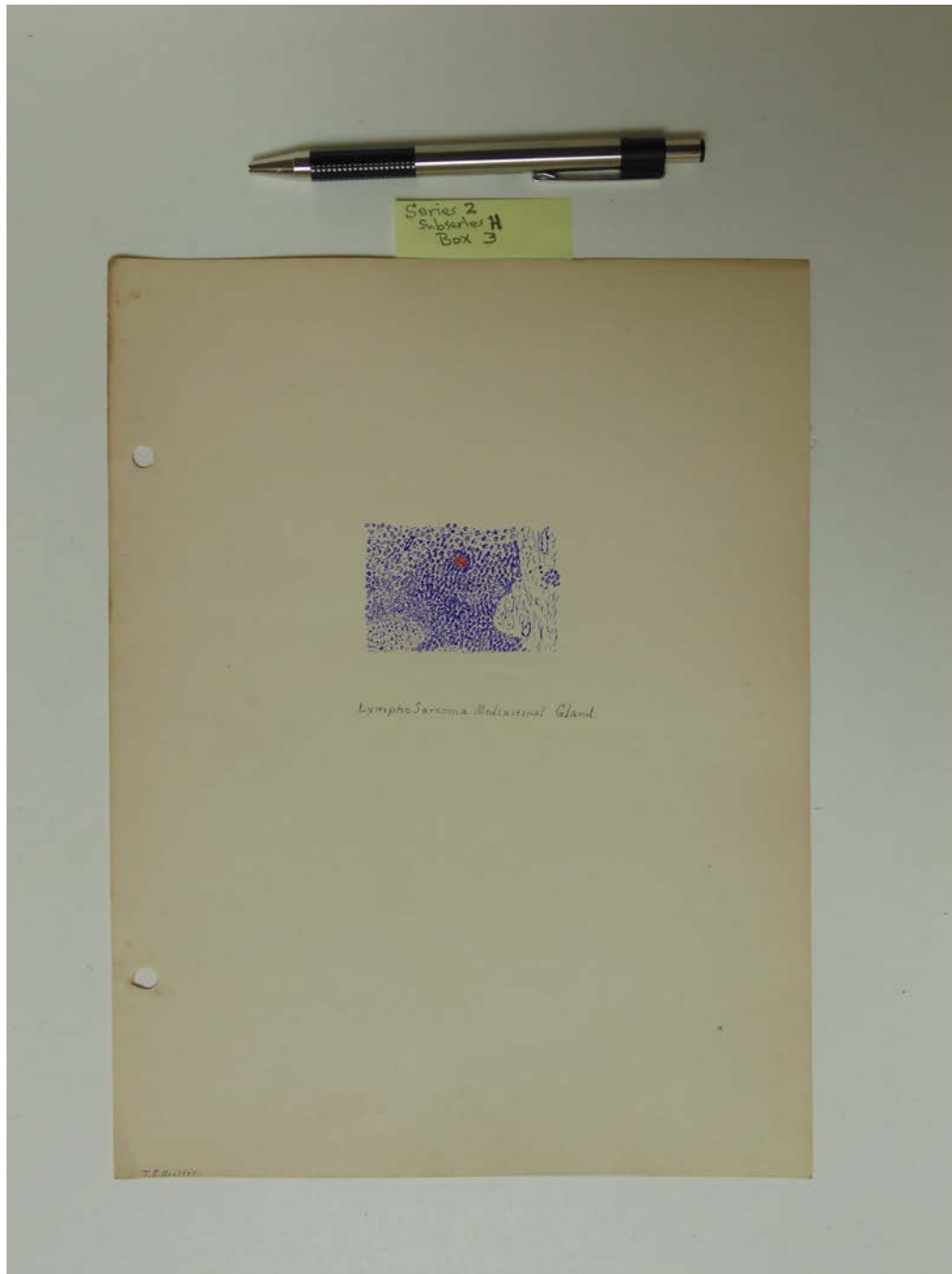
Types:

essay

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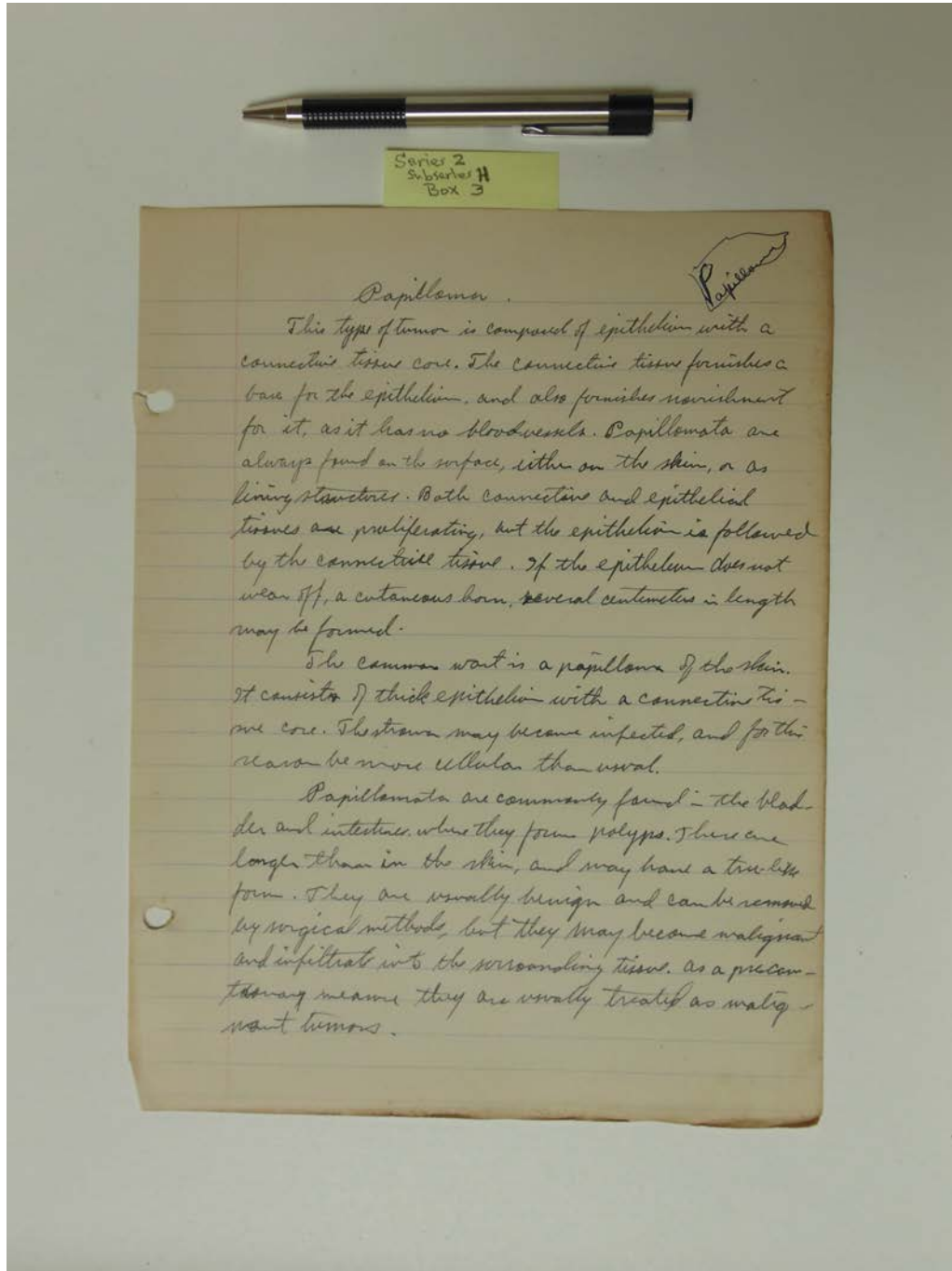


Names:

Lymphosarcoma
Mediastinal Gland

Types:

drawing



Papilloma

This type of tumor is composed of epithelium with a connective tissue core. The connective tissue furnishes a base for the epithelium, and also furnishes nourishment for it, as it has no bloodvessels. Papillomata are always found on the surface, either on the skin, or as lining structures. Both connective and epithelial tissues are proliferating, but the epithelium is followed by the connective tissue. If the epithelium does not wear off, a cutaneous horn, several centimeters in length may be formed.

The common wart is a papilloma of the skin. It consists of thick epithelium with a connective tissue core. The stroma may become infected, and for this reason be more cellular than usual.

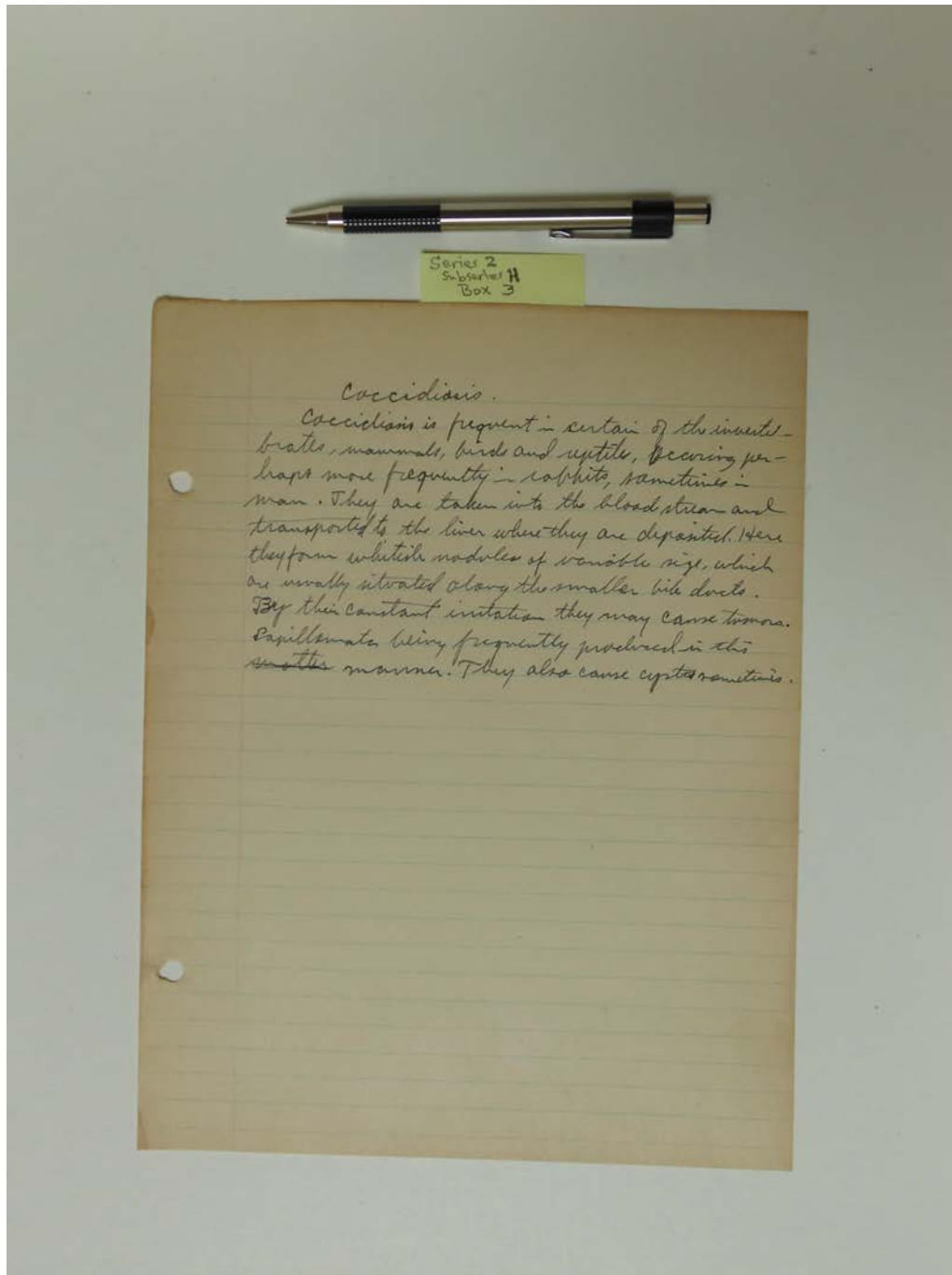
Papillomata are commonly found in the bladder and intestines, where they form polyps. These are longer than in the skin, and may have a tree-like form. They are usually benign and can be removed by surgical methods, but they may become malignant and infiltrate into the surrounding tissues. As a precautionary measure they are usually treated as malignant tumors.

Names:

Papilloma

Types:

essay



Coccidiosis.

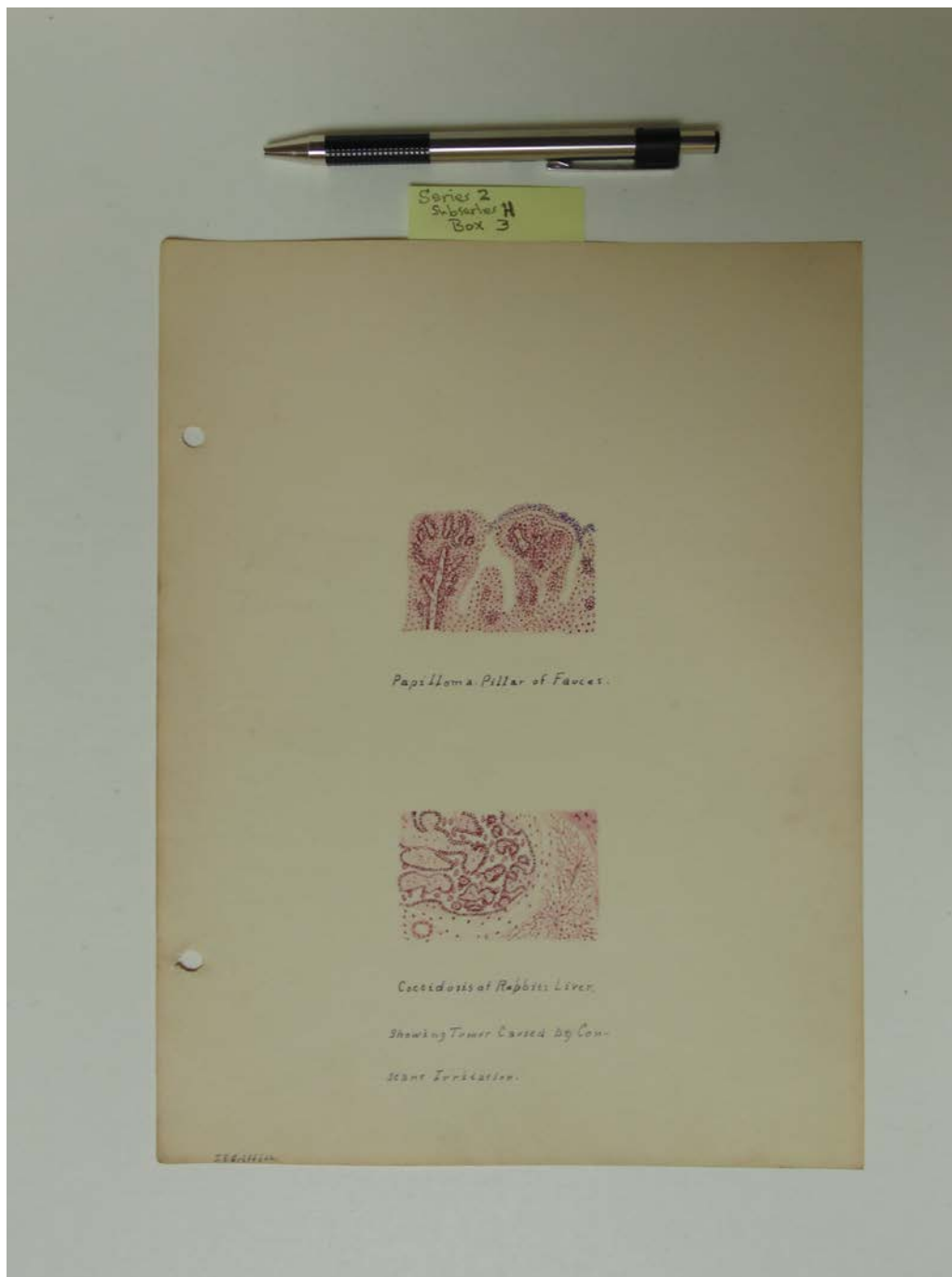
Coccidiosis is frequent in certain of the insectivores, mammals, birds and reptile, occurring perhaps more frequently in rabbits, sometimes in man. They are taken into the blood stream and transported to the liver where they are deposited. Here they form whitish nodules of variable size, which are usually situated along the smaller bile ducts. By their constant irritation they may cause tumours. Capillaries being frequently produced in the same manner. They also cause cysts sometimes.

Names:

Coccidiosis

Types:

essay



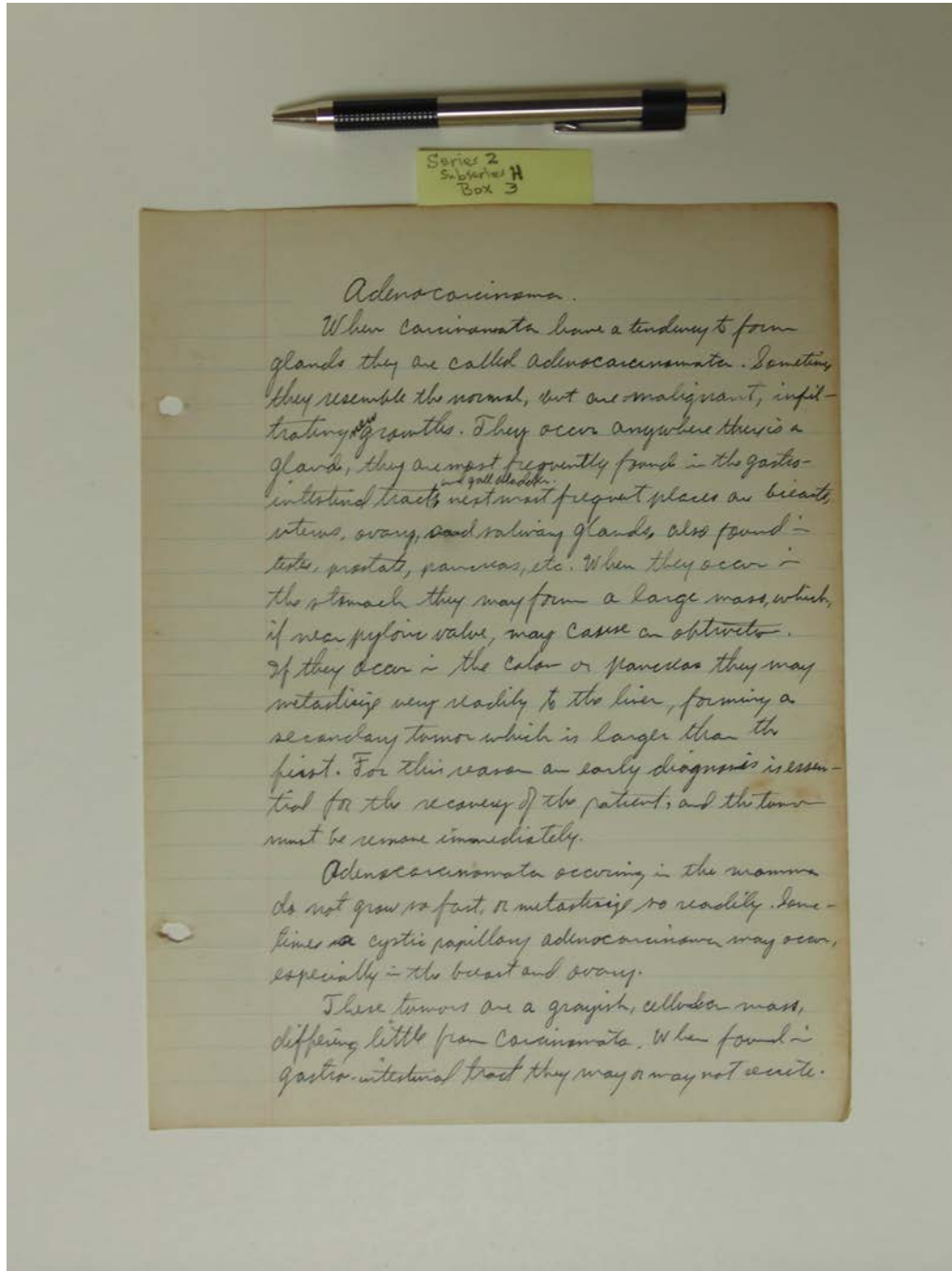
Names:

Coccidiosis

Papilloma Pillar of
Fauces

Types:

drawing



Adenocarcinoma.

When carcinomata have a tendency to form glands they are called adenocarcinomata. Sometimes they resemble the normal, but are malignant, infiltrating ~~the~~ granules. They occur anywhere there is a gland, they are most frequently found in the gastro-intestinal tract, next most frequent places are breasts, uterus, ovary, ~~and~~ salivary glands, also found in testis, prostate, pancreas, etc. When they occur in the stomach they may form a large mass, which, if near pyloric valve, may cause an obstruction. If they occur in the colon or pancreas they may metastasize very readily to the liver, forming a secondary tumor which is larger than the first. For this reason an early diagnosis is essential for the recovery of the patient, and the tumor must be removed immediately.

Adenocarcinomata occurring in the mammae do not grow so fast, or metastasize so readily. Sometimes a cystic papillary adenocarcinoma may occur, especially in the breast and ovary.

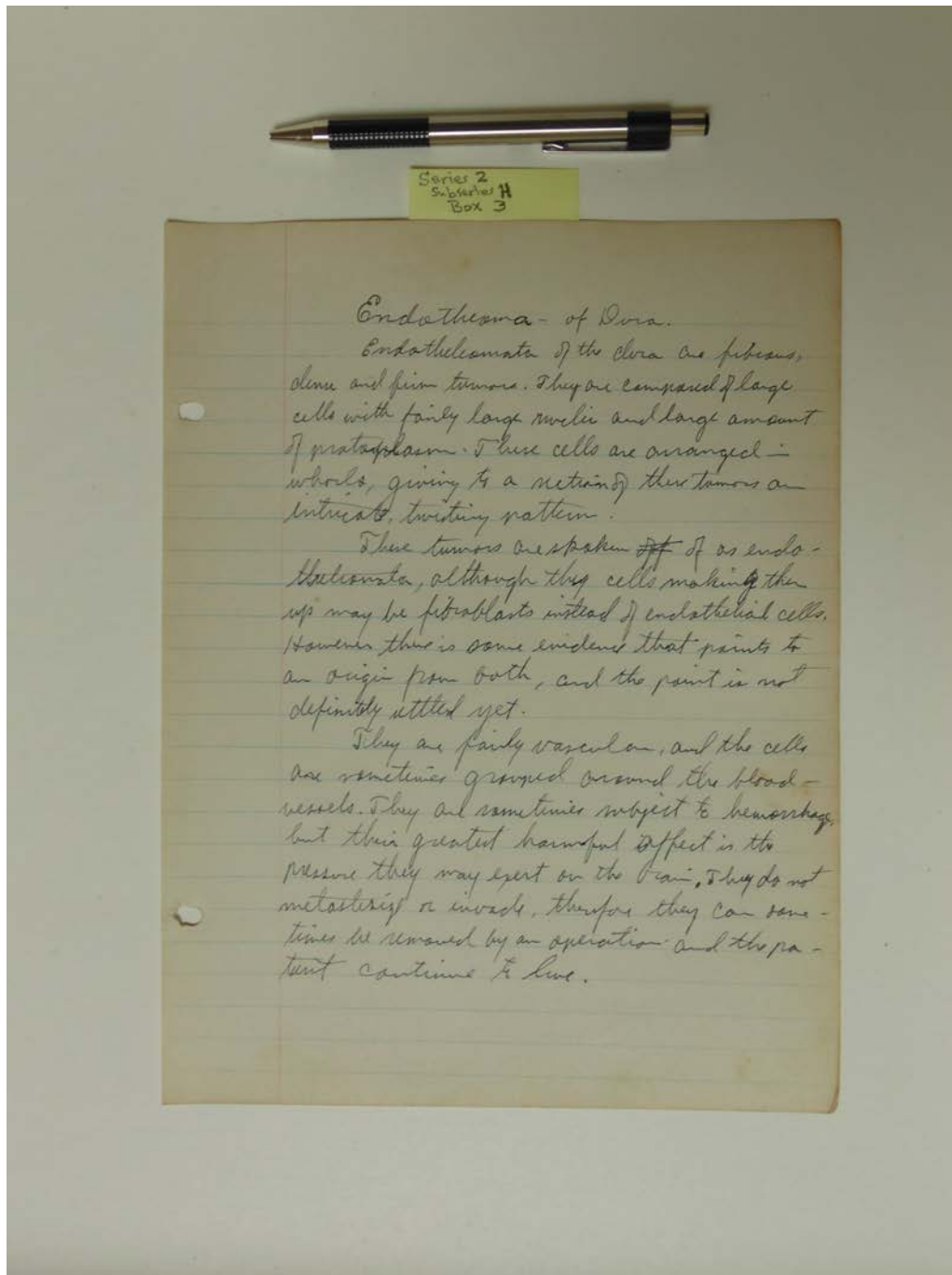
These tumors are a grayish, cellulosic mass, differing little from carcinomata. When found in gastro-intestinal tract they may or may not excite.

Names:

Adenocarcinoma

Types:

essay



Endothelioma - of Dura.

Endotheliomata of the dura are fibrous, dense and firm tumors. They are composed of large cells with fairly large nuclei and large amount of protoplasm. These cells are arranged in whorls, giving to a section of these tumors an intricate, twisting pattern.

These tumors are spoken of as endotheliomata, although the cells making them up may be fibroblasts instead of endothelial cells. However, there is some evidence that points to an origin from both, and the point is not definitely settled yet.

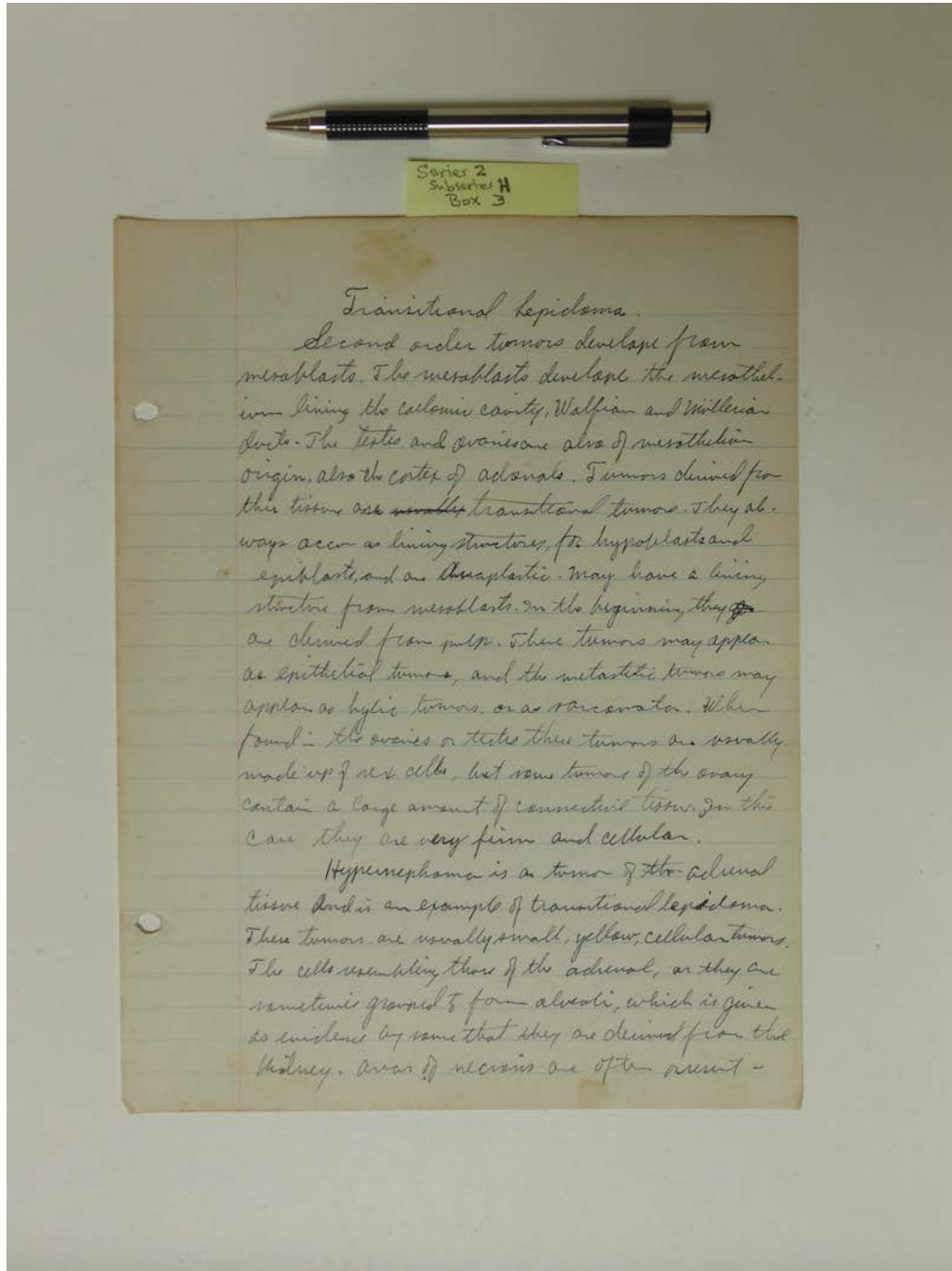
They are fairly vascular, and the cells are sometimes grouped around the blood-vessels. They are sometimes subject to hemorrhage, but their greatest harmful effect is the pressure they may exert on the brain. They do not metastasize or invade, therefore they can sometimes be removed by an operation and the patient continue to live.

Names:

Endothelioma of Dura

Types:

essay



Transitional lepidoma.

Second order tumors develop from mesoblasts. The mesoblasts develop the mesothelium lining the coelomic cavity, Walpian and Müllerian ducts. The testes and ovaries are also of mesothelium origin, also the cortex of adrenals. Tumors derived from these tissues are ~~usually~~ transitional tumors. They always occur as lining structures, for hypoblasts and epiblasts, and an Anaplastic may have a lining structure from mesoblasts. In the beginning they are derived from pulp. These tumors may appear as epithelial tumors, and the metastatic tumors may appear as hyaline tumors, or as sarcomata. When found in the ovaries or testes these tumors are usually made up of sex cells, but some tumors of the ovary contain a large amount of connective tissue. In these cases they are very firm and cellular.

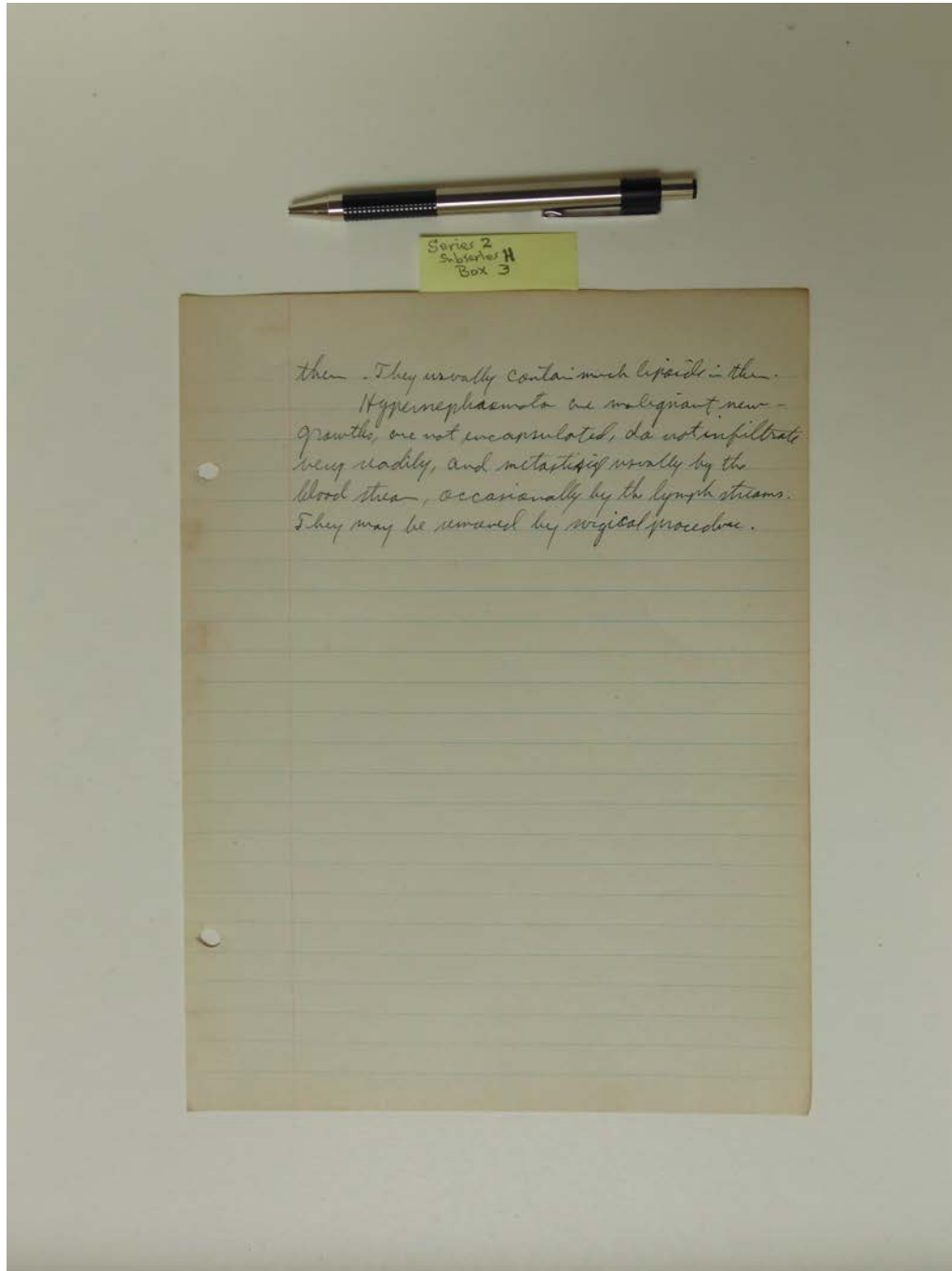
Hypernephroma is a tumor of the adrenal tissue and is an example of transitional lepidoma. These tumors are usually small, yellow, cellular tumors. The cells resembling those of the adrenal, as they are sometimes grouped to form alveoli, which is given as evidence by some that they are derived from the kidney. Areas of necrosis are often present.

Names:

Transitional
Lepidoma

Types:

essay

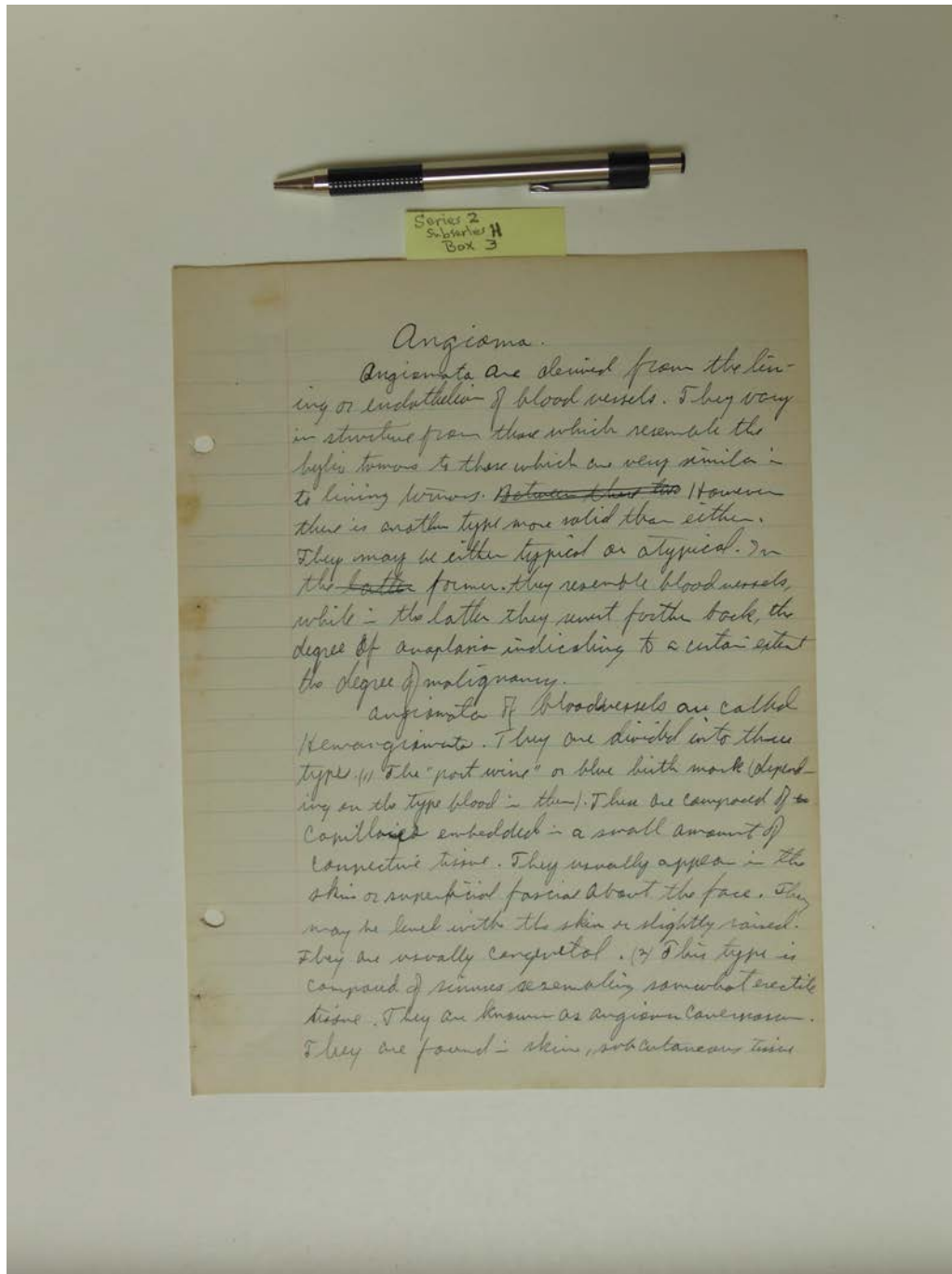


Names:

Transitional
Lepidoma

Types:

essay

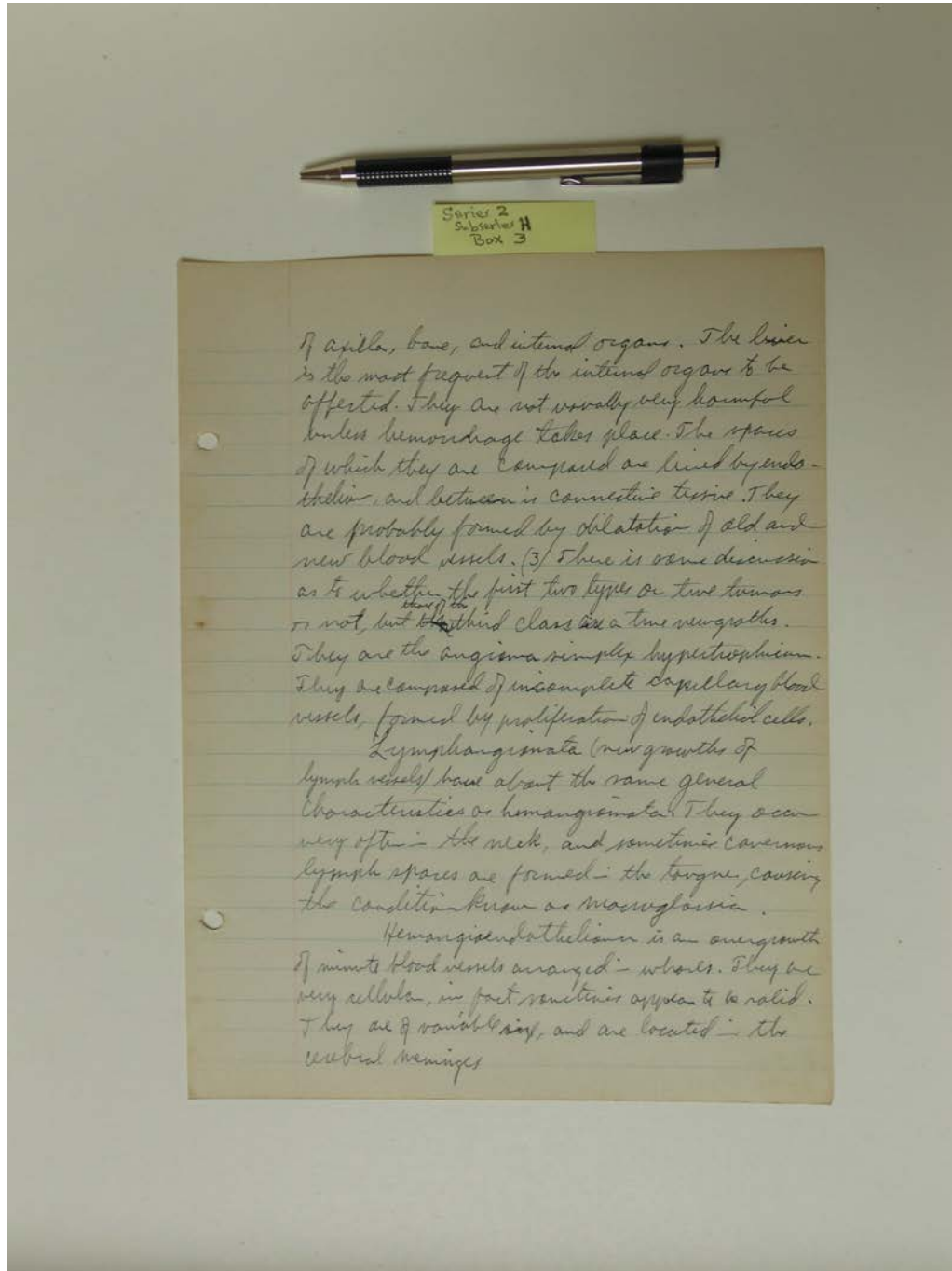


Names:

Angioma

Types:

essay



of axilla, base, and internal organs. The liver is the most frequent of the internal organs to be affected. They are not usually very harmful unless hemorrhage takes place. The spaces of which they are composed are lined by endothelium, and between is connective tissue. They are probably formed by dilatation of old and new blood vessels. (3) There is some discussion as to whether the first two types or true tumors or not, but the third class are a true neoplasms. They are the angioma simply hypertrophium. They are composed of incomplete capillary blood vessels formed by proliferation of endothelial cells.

Lymphangiomas (neoplasms of lymph vessels) have about the same general characteristics as hemangiomas. They occur very often in the neck, and sometimes cavernous lymph spaces are formed in the tongue, causing the condition known as macroglossia.

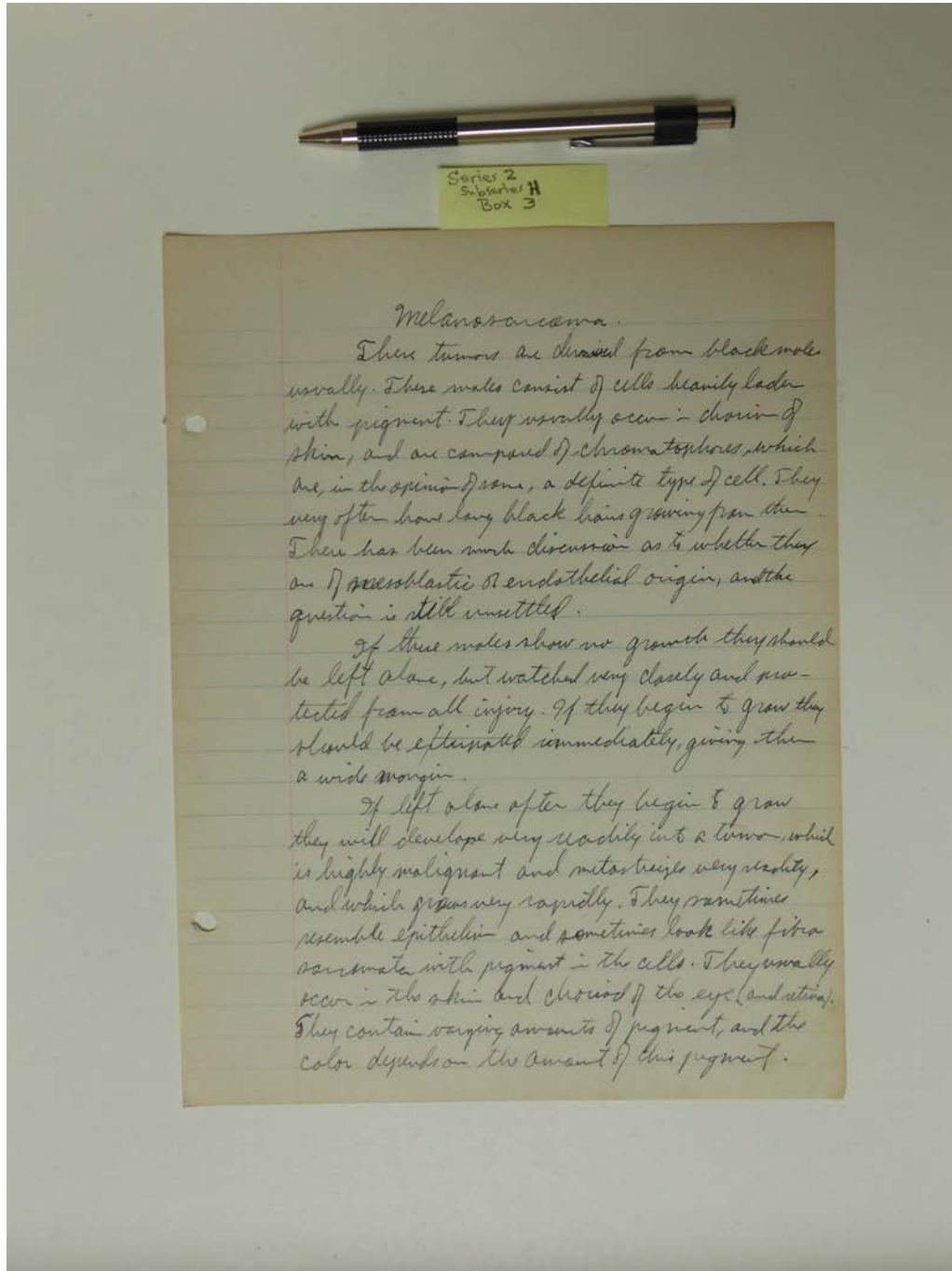
Hemangioendothelioma is an overgrowth of minute blood vessels arranged in whorls. They are very cellular, in fact, sometimes appear to be solid. They are of variable size, and are located in the cerebral meninges.

Names:

Angioma

Types:

essay



Melanosarcoma.

These tumors are derived from black mole usually. These moles consist of cells heavily laden with pigment. They usually occur in chorion of skin, and are composed of chromatophores, which are, in the opinion of some, a definite type of cell. They very often have long black hairs growing from them. There has been much discussion as to whether they are of mesoblastic or endothelial origin, and the question is still unsettled.

If these moles show no growth they should be left alone, but watched very closely and protected from all injury. If they begin to grow they should be extirpated immediately, giving them a wide margin.

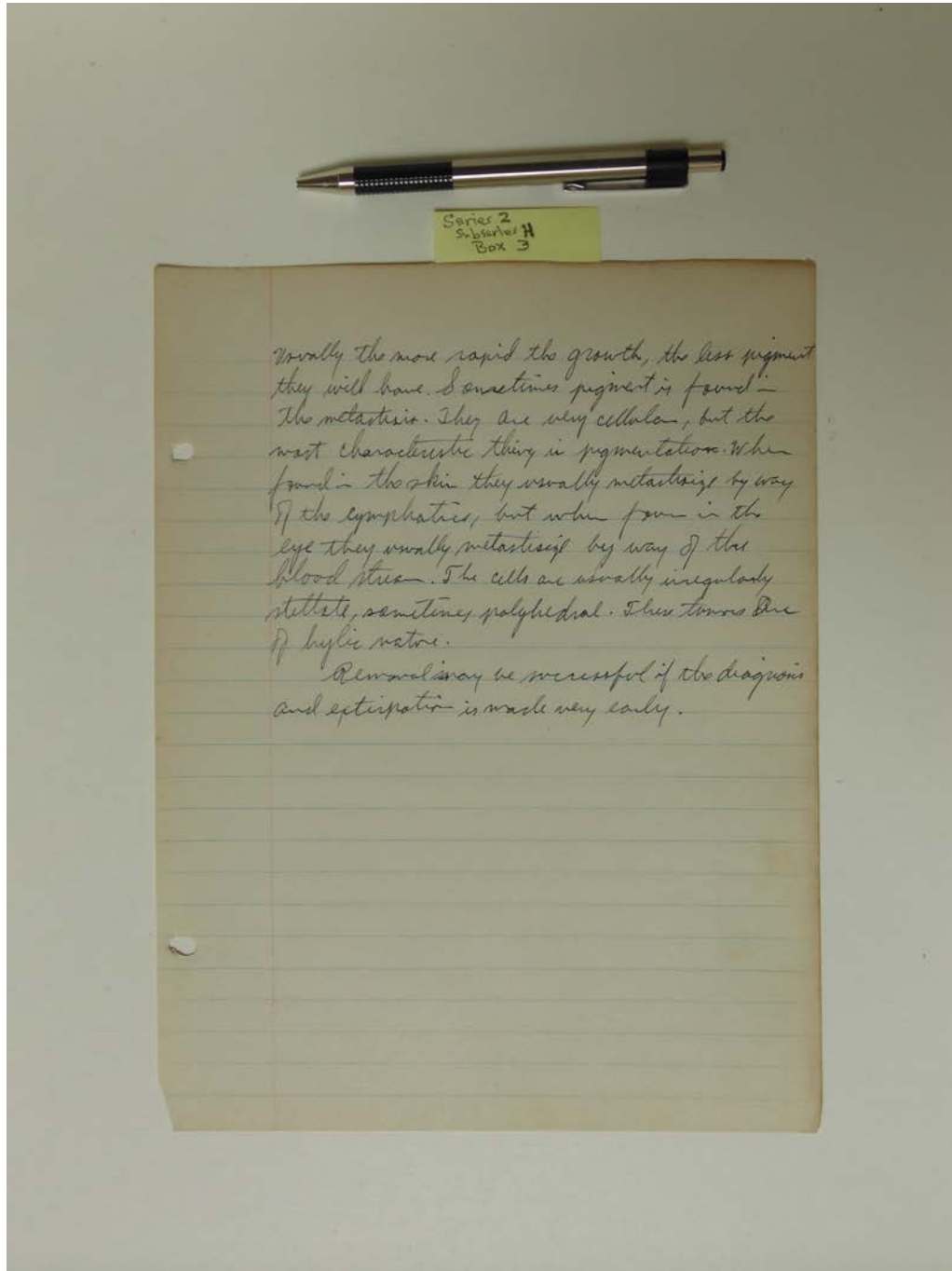
If left alone after they begin to grow they will develop very readily into a tumor, which is highly malignant and metastasizes very readily, and which grows very rapidly. They sometimes resemble epithelium and sometimes look like fibrosarcoma with pigment in the cells. They usually occur in the skin and choroid of the eye (and retina). They contain varying amounts of pigment, and the color depends on the amount of this pigment.

Names:

Melanosarcoma

Types:

essay



Usually the more rapid the growth, the less pigment they will have. Sometimes pigment is found in the metastasis. They are very cellular, but the most characteristic thing is pigmentation. When found in the skin they usually metastasize by way of the lymphatics, but when found in the eye they usually metastasize by way of the blood stream. The cells are usually irregularly stellate, sometimes polyhedral. These tumors are of hyaline nature.

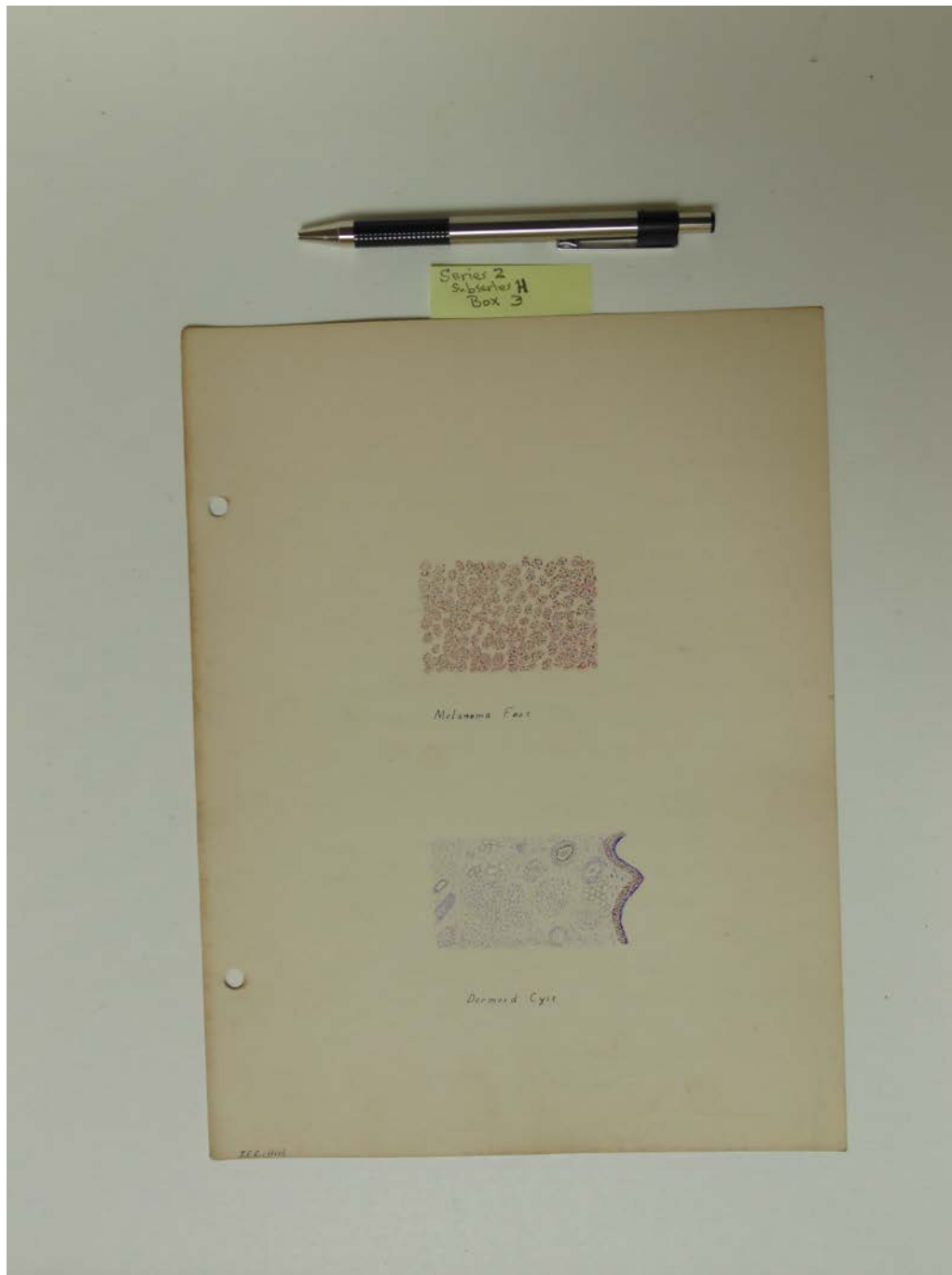
Removal may be successful if the diagnosis and extirpation is made very early.

Names:

Melanosarcoma

Types:

essay



Names:

Dermoid Cyst

Melanoma Foot

Types:

drawing

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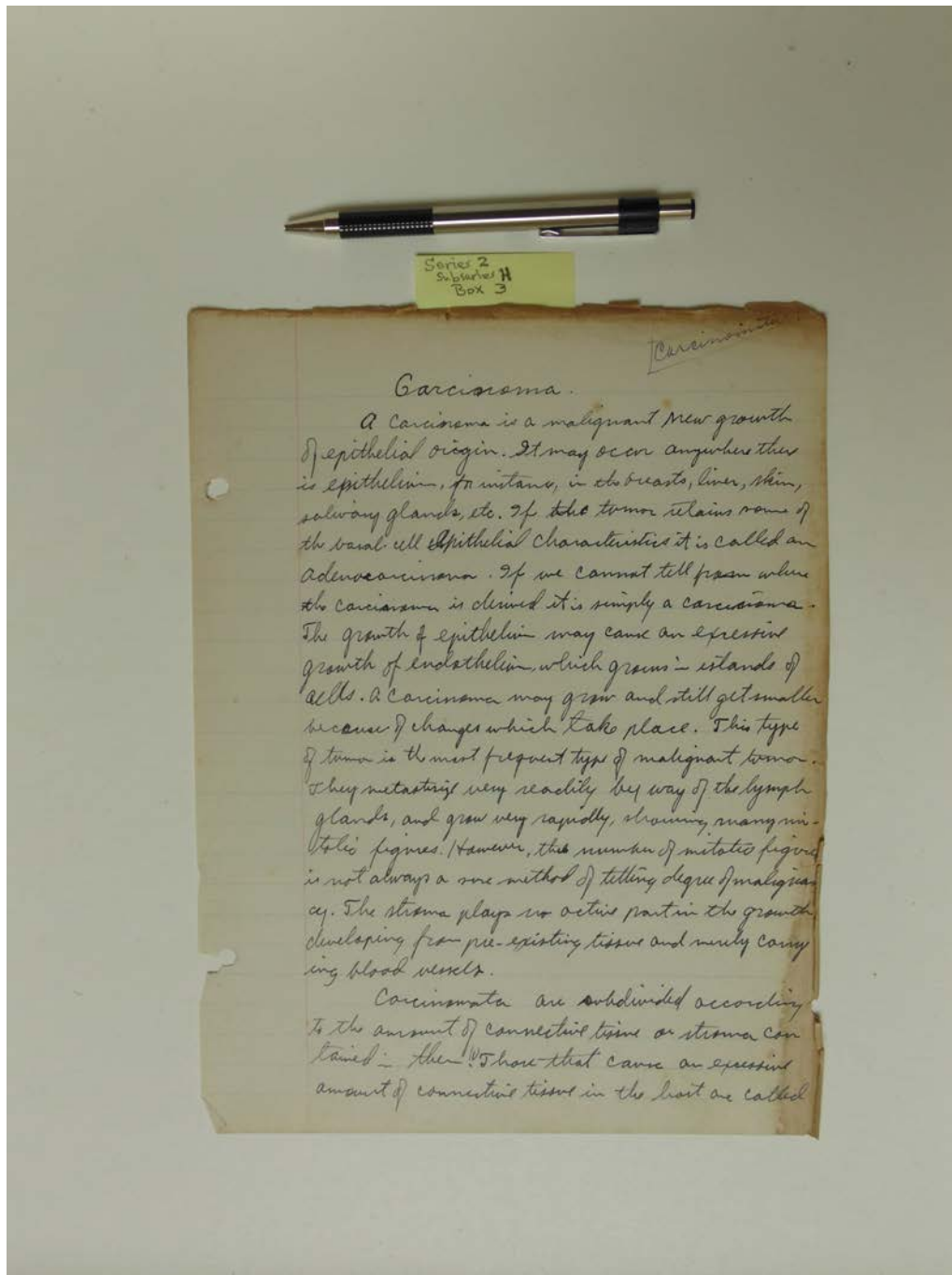
Names:

Hemangioma Naevus

Hypernephroma of
Kidney

Types:

drawing



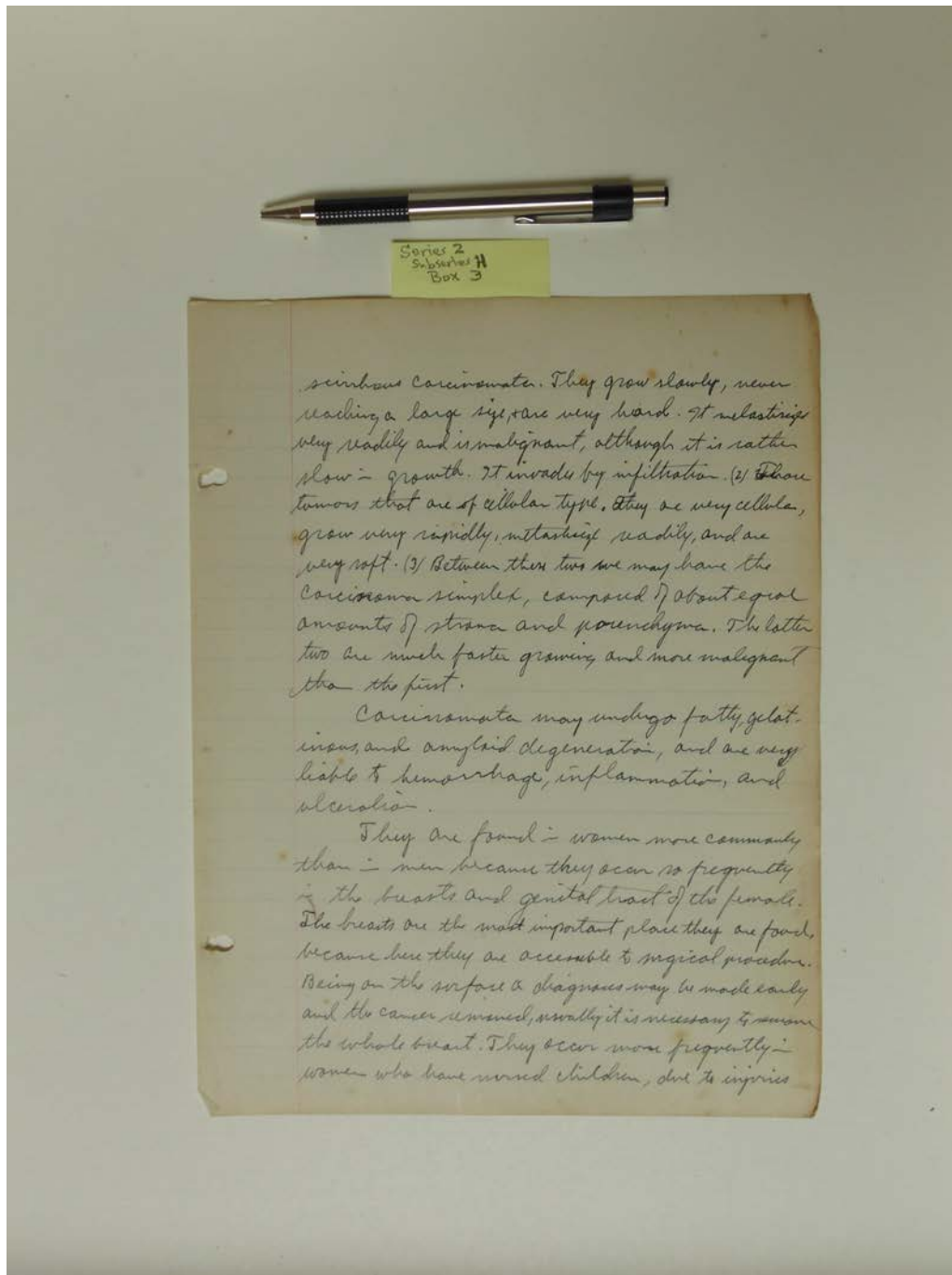
Names:

Carcinoma

Carcinomata

Types:

essay



scirrhous carcinomata. They grow slowly, never reaching a large size, are very hard. It metastasizes very readily and is malignant, although it is rather slow in growth. It invades by infiltration. (2) These tumors that are of cellular type, they are very cellular, grow very rapidly, metastasize readily, and are very soft. (3) Between these two we may have the Carcinomata simplex, composed of about equal amounts of stroma and parenchyma. The latter two are much faster growing and more malignant than the first.

Carcinomata may undergo fatty, gelatinous, and amyloid degeneration, and are very liable to hemorrhage, inflammation, and ulceration.

They are found in women more commonly than in men because they occur so frequently in the breasts and genital tract of the female. The breasts are the most important place they are found, because here they are accessible to surgical procedure. Being on the surface a diagnosis may be made early and the cancer removed, usually it is necessary to remove the whole breast. They occur more frequently in women who have nursed children, due to injuries

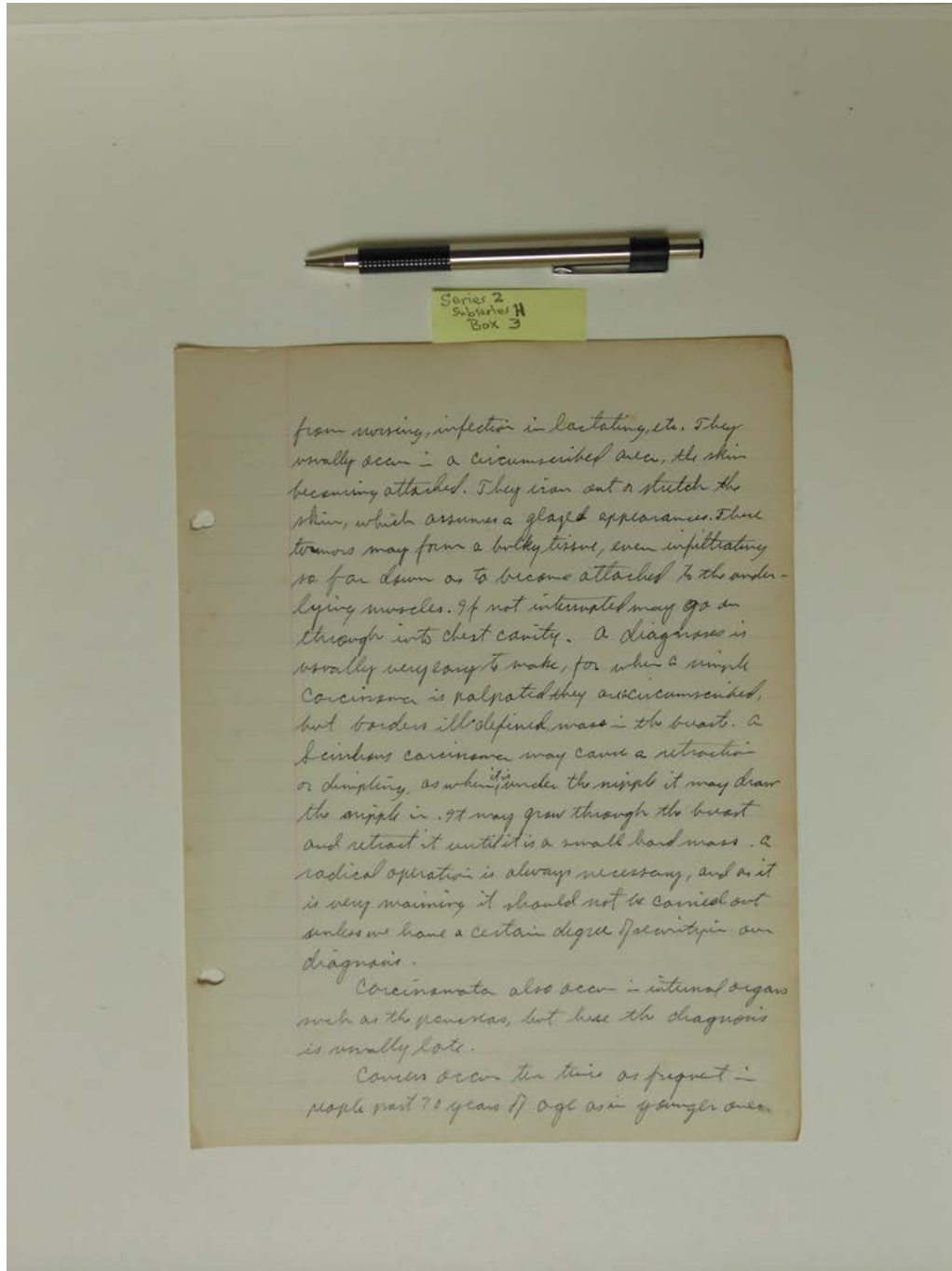
p. 1

Names:

Carcinoma

Types:

essay



from nursing, infection in lactating, etc. They usually occur in a circumscribed area, the skin becoming attached. They run out or stretch the skin, which assumes a glazed appearance. Some tumors may form a bulky tumor, even infiltrating so far down as to become attached to the underlying muscles. If not interrupted may go on through into chest cavity. A diagnosis is usually very easy to make, for when a simple carcinoma is palpated they are circumscribed, but borders ill defined, mass in the breast. A scirrhous carcinoma may cause a retraction or dimpling, as when ^{it is} under the nipple it may draw the nipple in. It may grow through the breast and retract it until it is a small hard mass. A radical operation is always necessary, and as it is very painful it should not be carried out unless we have a certain degree of certainty in our diagnosis.

Carcinoma also occur in internal organs such as the pancreas, but here the diagnosis is usually late.

Cancers occur the time as frequent in people past 70 years of age as in younger ones.

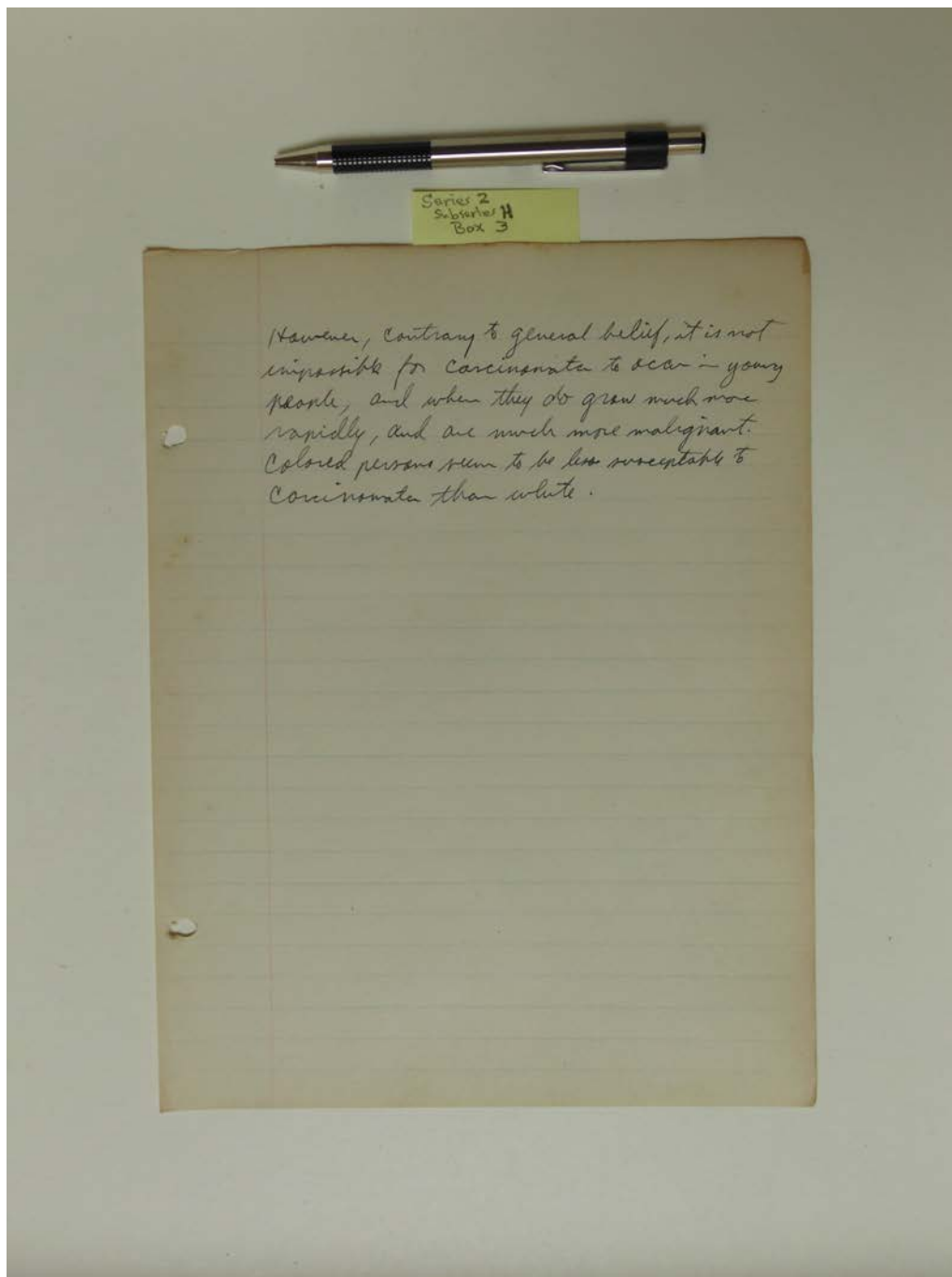
p. 2

Names:

Carcinoma

Types:

essay



p. 3

Names:

Carcinoma

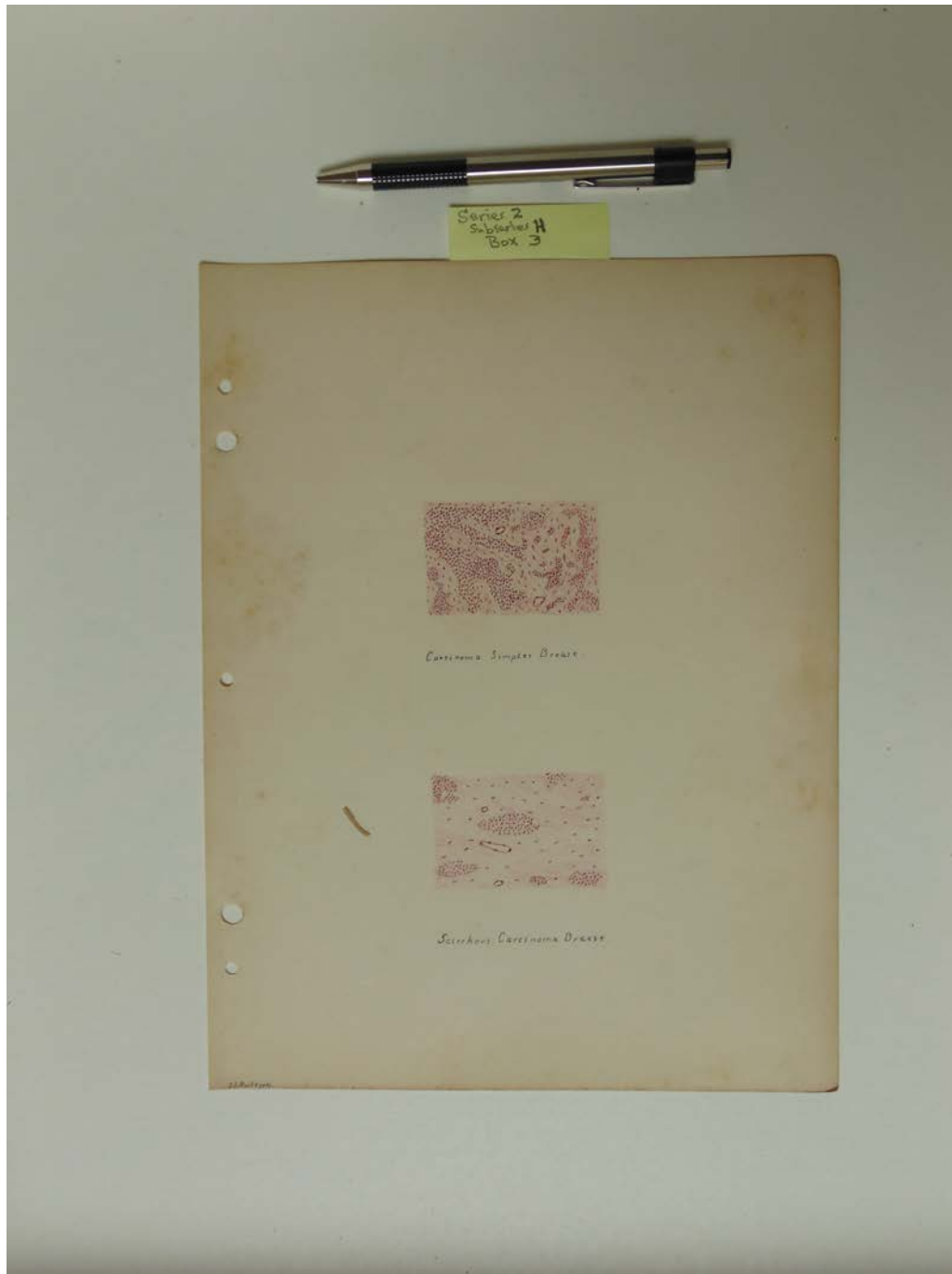
Types:

essay

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Names:

Carcinoma Simplex
Breast

Scirrhus Carcinoma
Breast

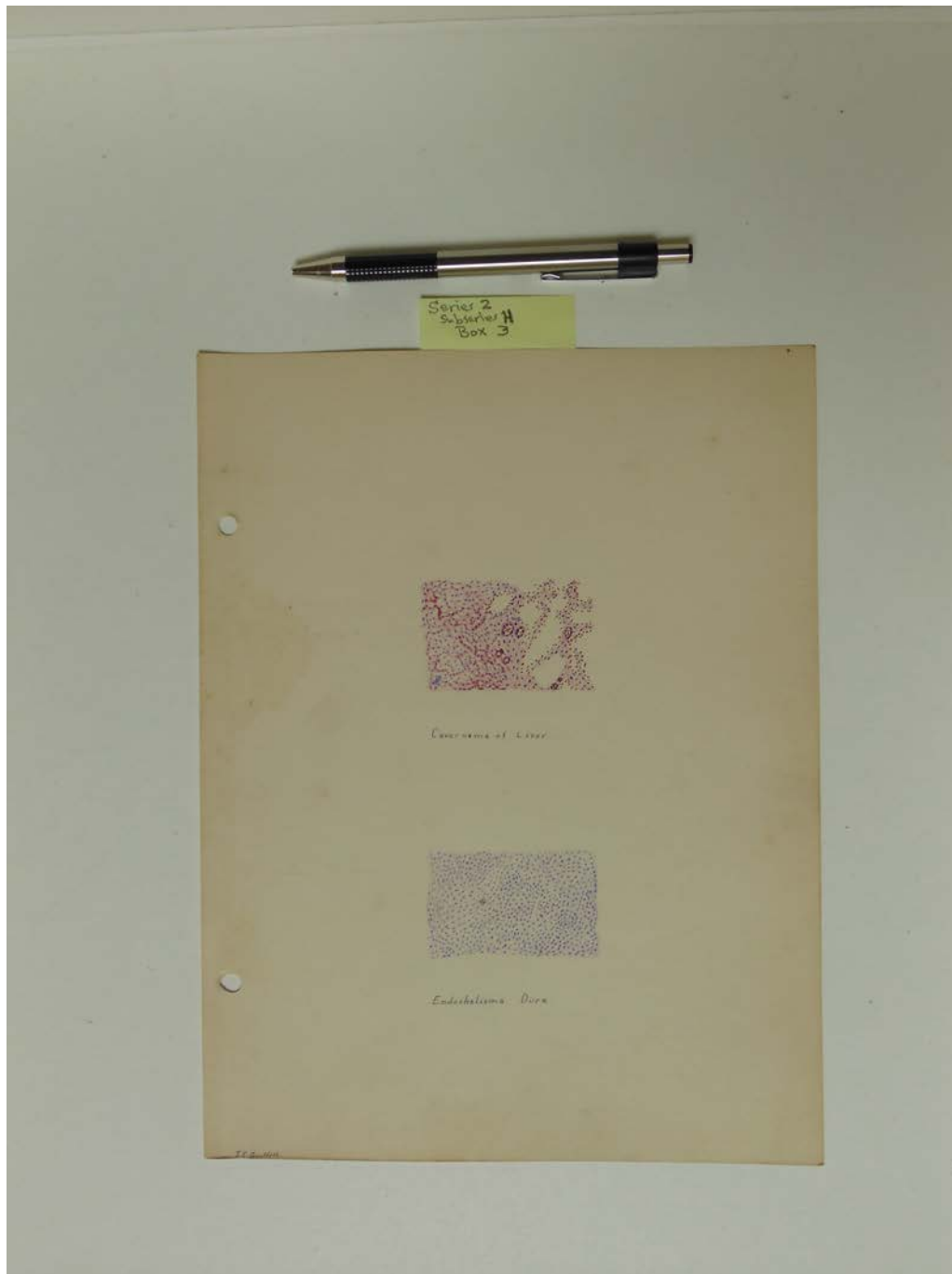
Types:

drawing

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J.E. Griffith Pathology Notes, circa 1928

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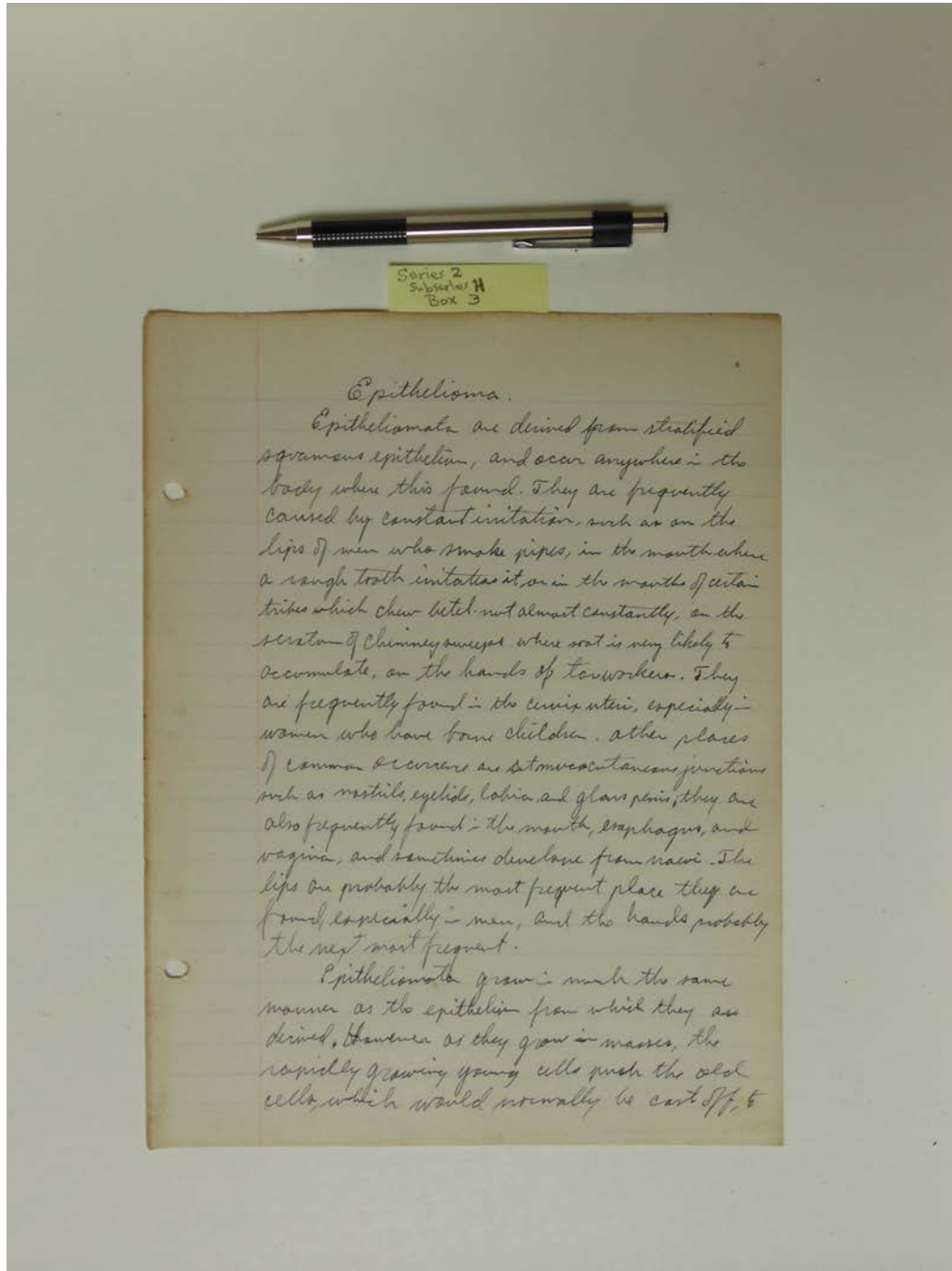
Names:

Cavernoma of Liver

Endothelioma Dura

Types:

drawing

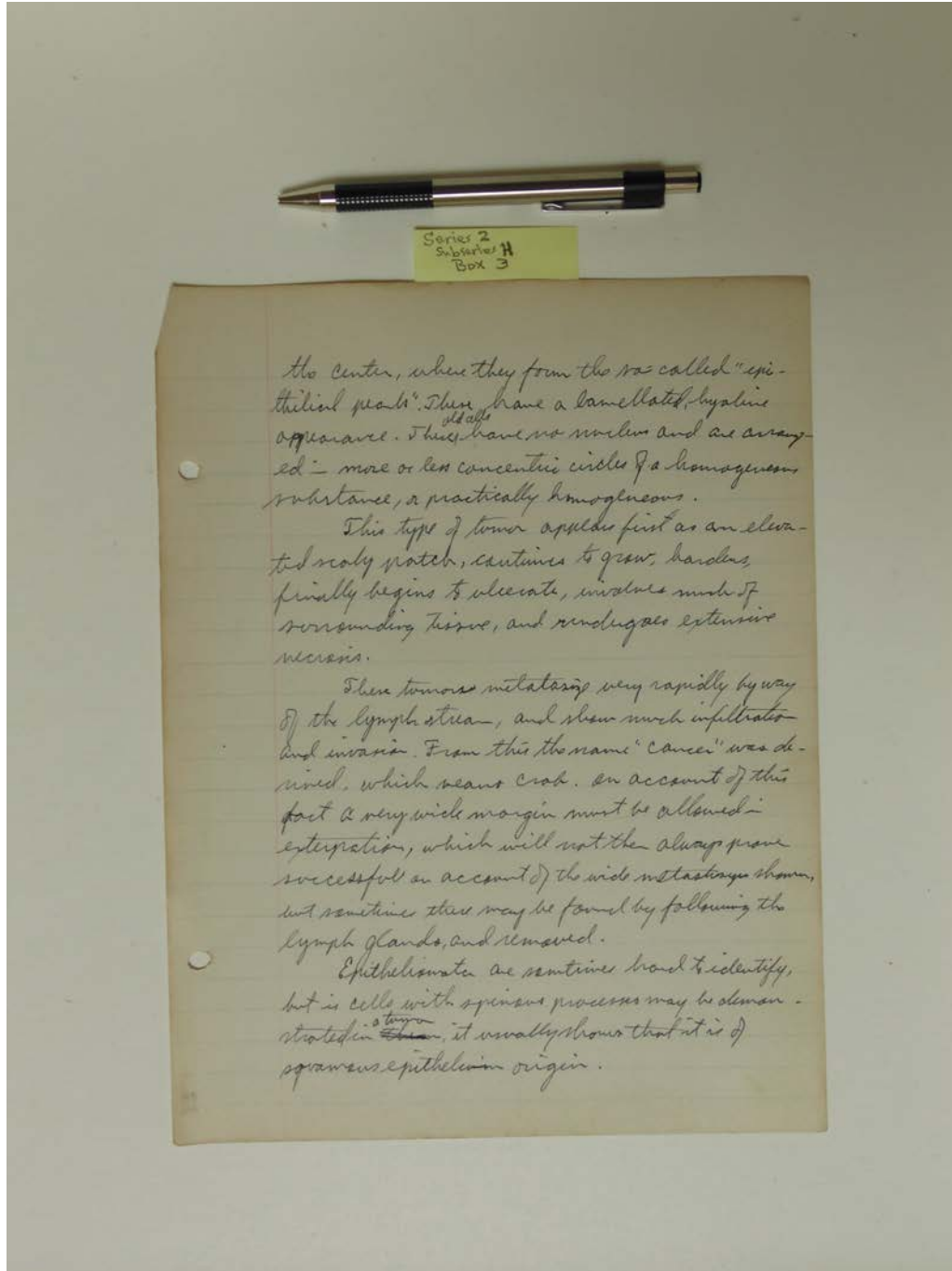


Names:

Epithelioma

Types:

essay



Names:

Epithelioma

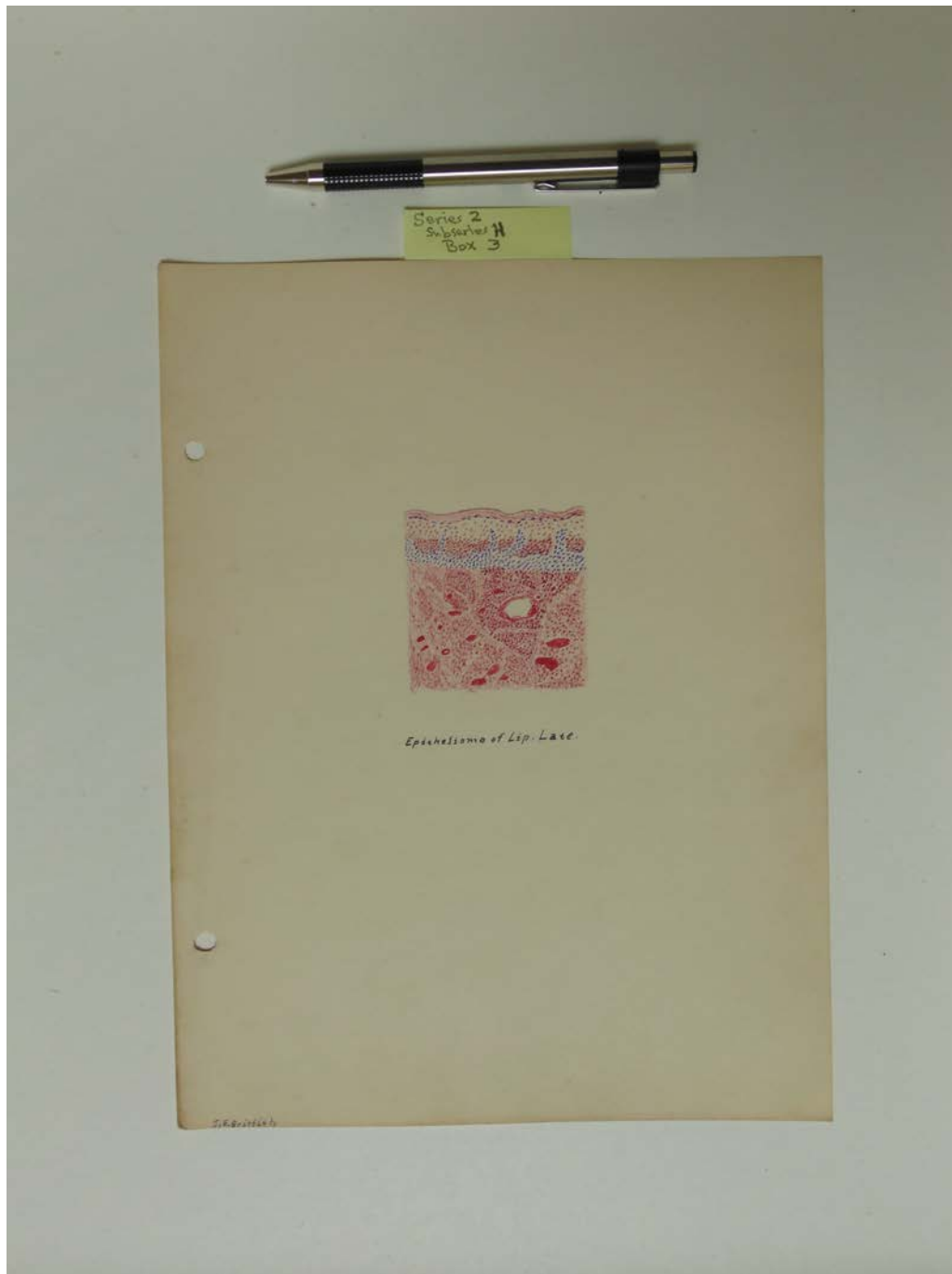
Types:

essay

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J.E. Griffith Pathology Notes, circa 1928

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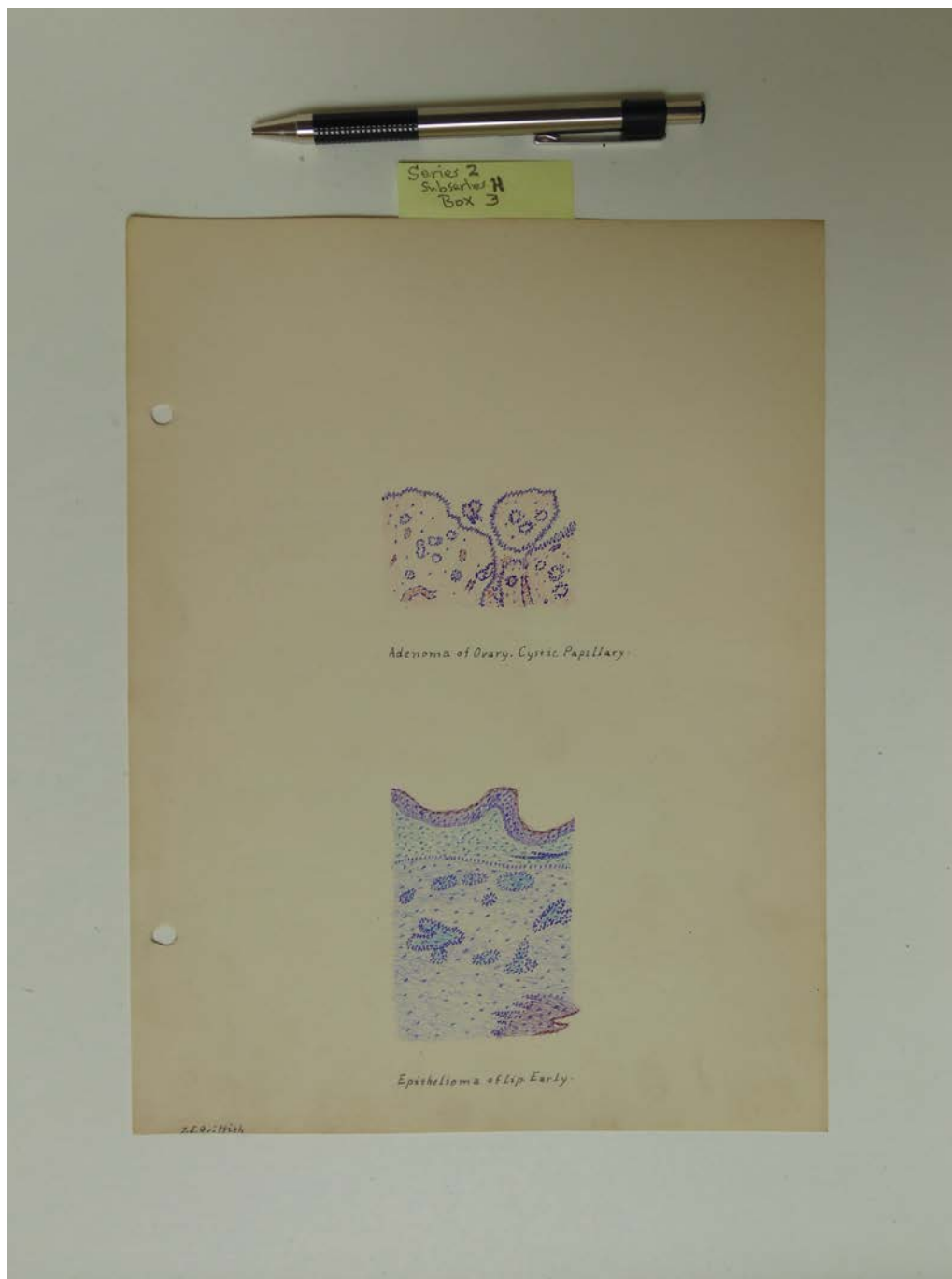
Names:

Epithelioma of Lip.

Late

Types:

drawing



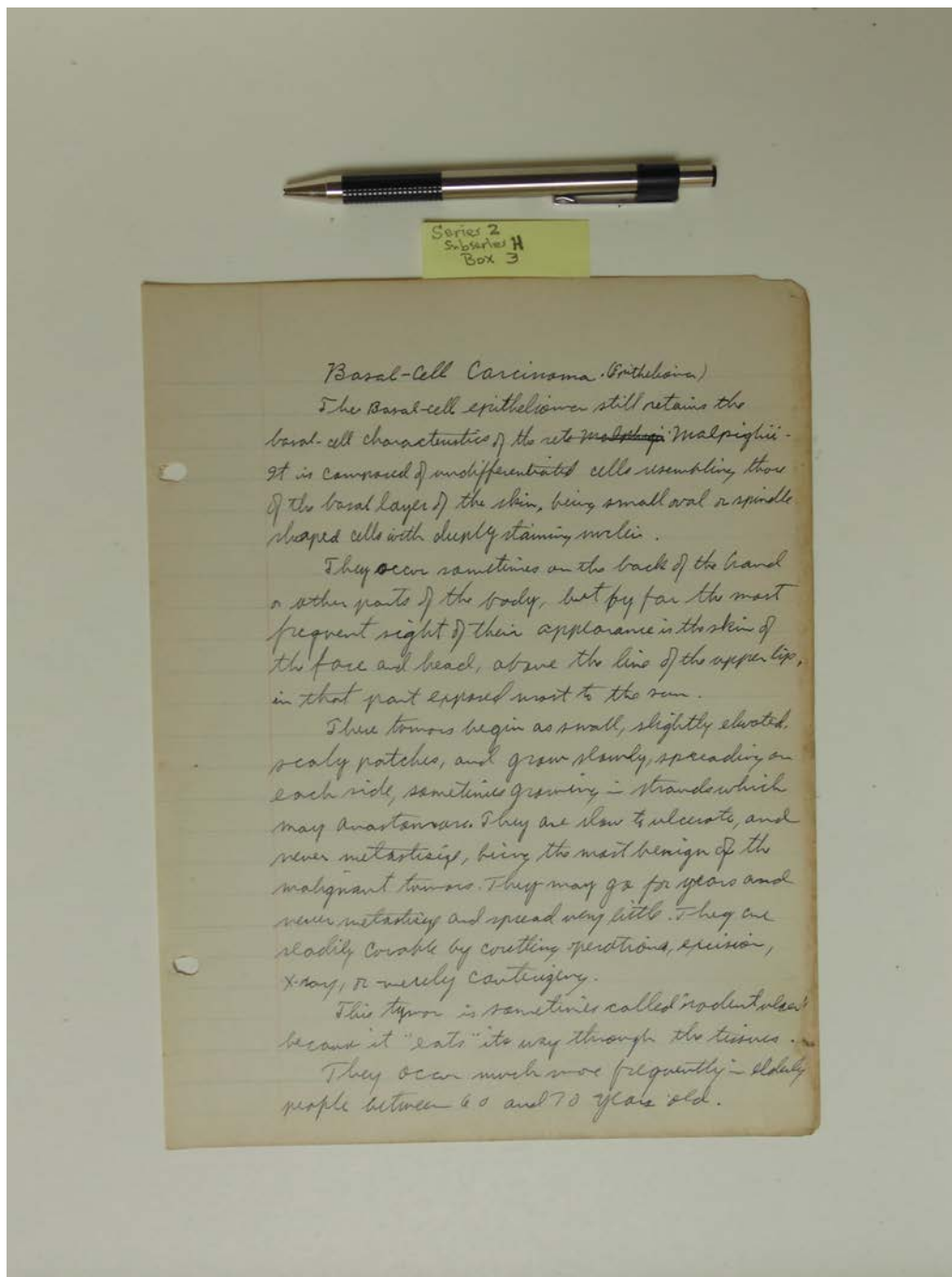
Names:

Adenoma of Ovary.
Cystic Papillary

Epithelioma of Lip.
Early.

Types:

drawing



Basal-Cell Carcinoma (Epithelioma)

The Basal-cell epithelioma still retains the basal-cell characteristics of the rete ~~malpighii~~ Malpighii. It is composed of undifferentiated cells resembling those of the basal layer of the skin, being small oval or spindle shaped cells with deeply staining nuclei.

They occur sometimes on the back of the head or other parts of the body, but by far the most frequent sight of their appearance is in the skin of the face and head, above the line of the upper lip, in that part exposed most to the sun.

These tumors begin as small, slightly elevated, scaly patches, and grow slowly, spreading on each side, sometimes growing in strands which may anastomose. They are slow to ulcerate, and never metastasize, being the most benign of the malignant tumors. They may go for years and never metastasize and spread very little. They are readily curable by cauterizing operations, excision, X-ray, or merely cauterizing.

This tumor is sometimes called rodent ulcer because it "eats" its way through the tissues.

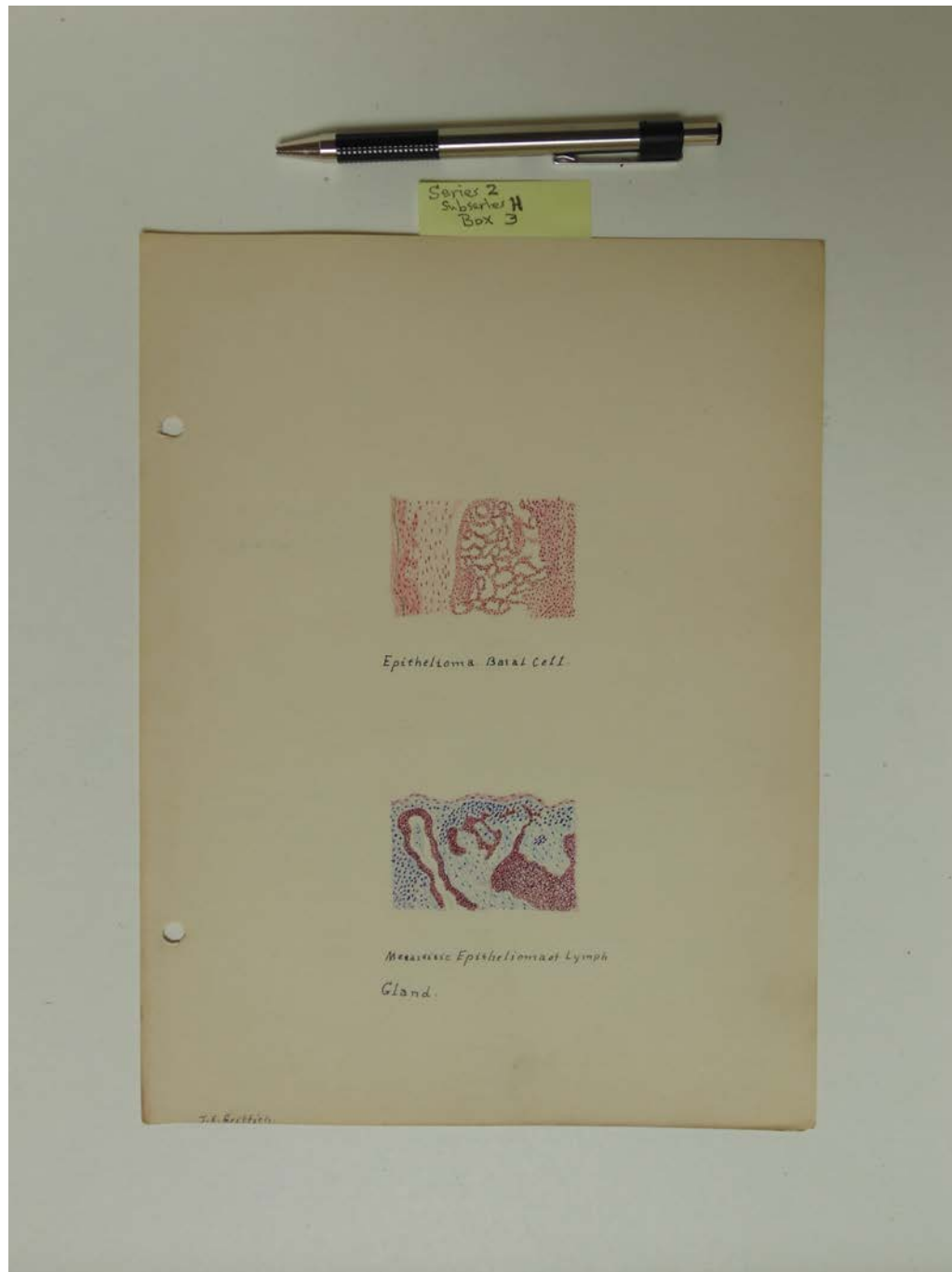
They occur much more frequently in elderly people between 60 and 70 years old.

Names:

Basal-Cell Carcinoma
(Epithelioma)

Types:

essay



Names:

Epithelioma. Basal
Cell

Metastatic
Epithelioma of

Lymph Gland

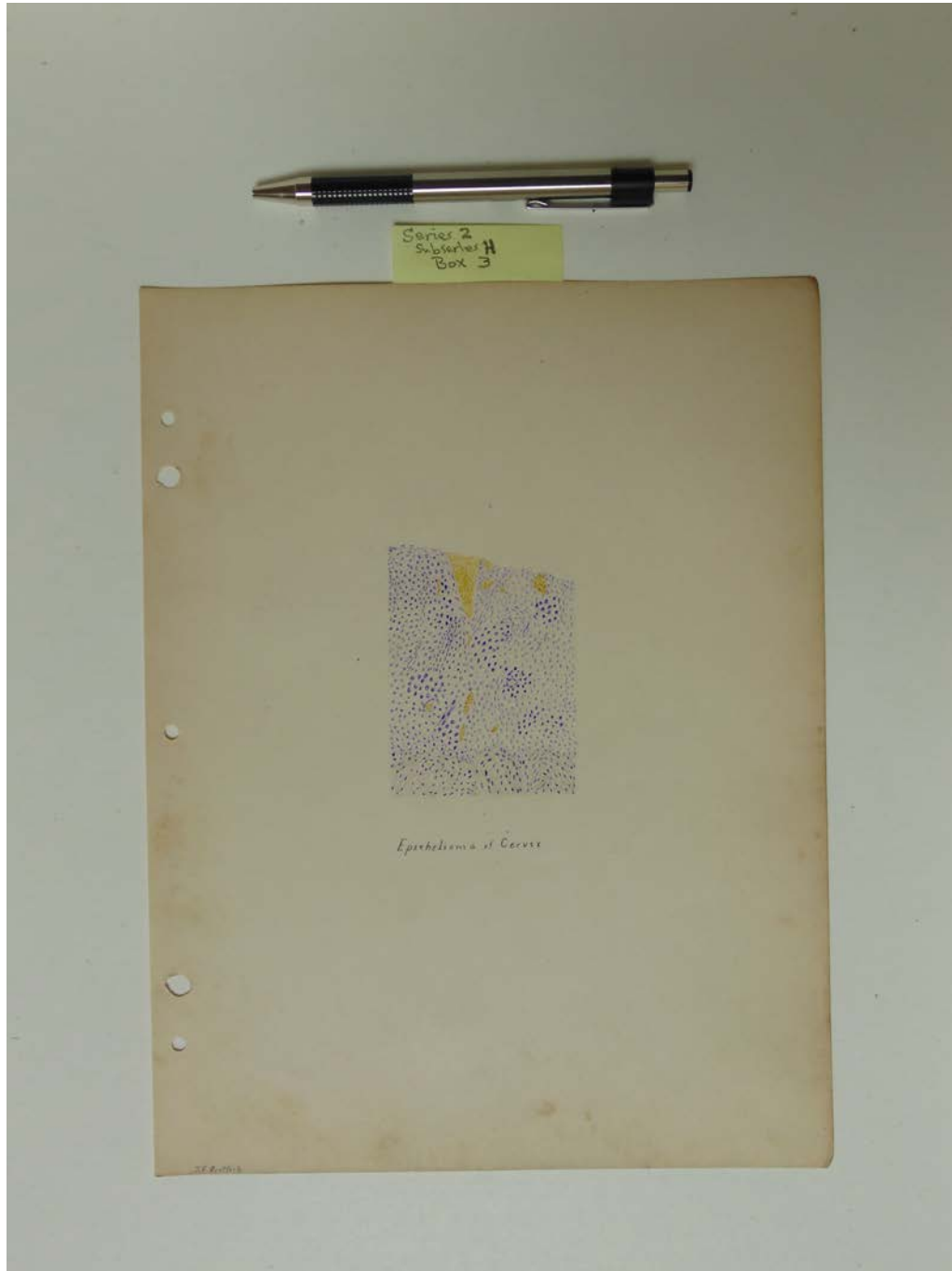
Types:

drawing

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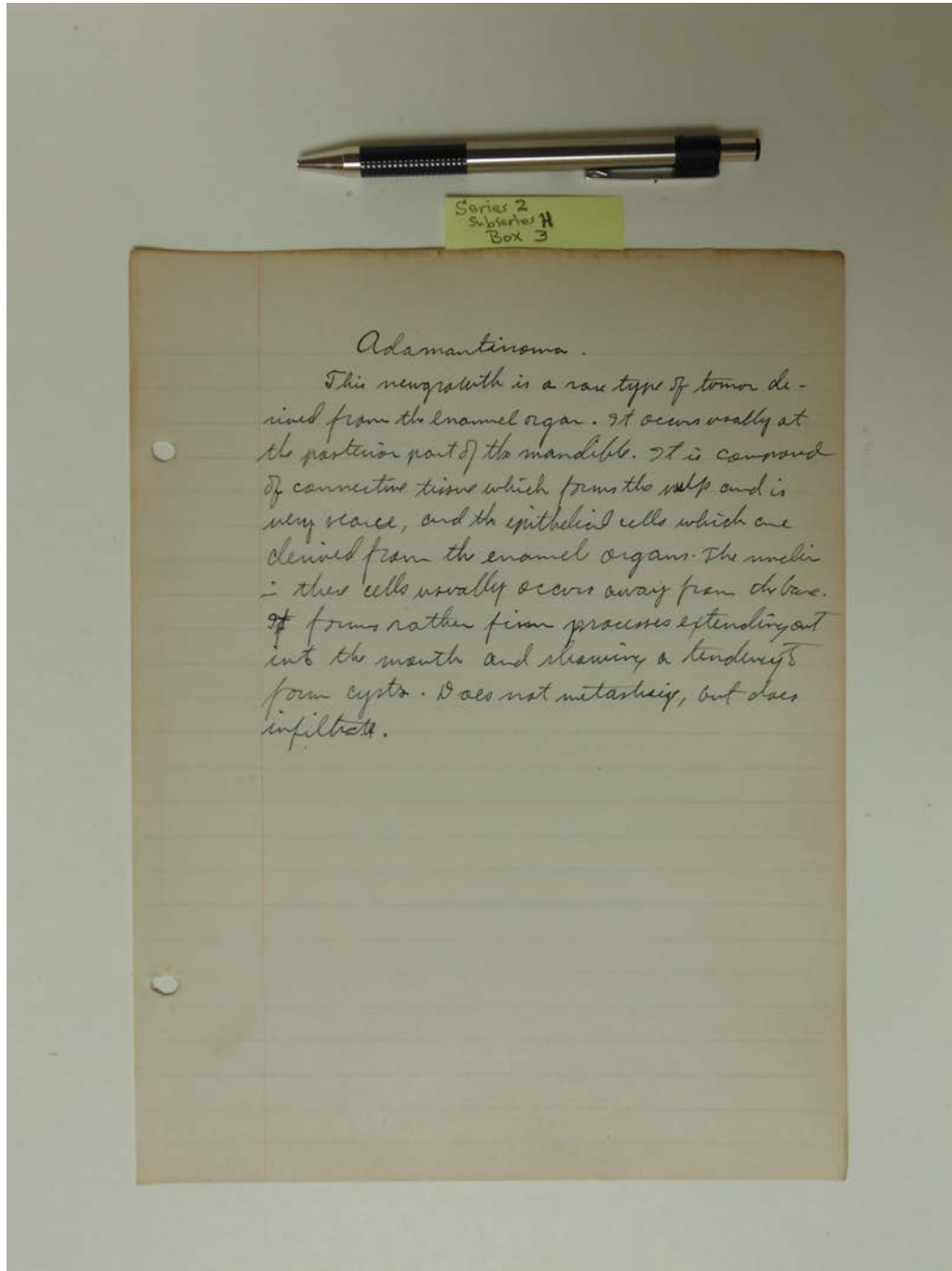


Names:

Epithelioma of
Cervix

Types:

drawing

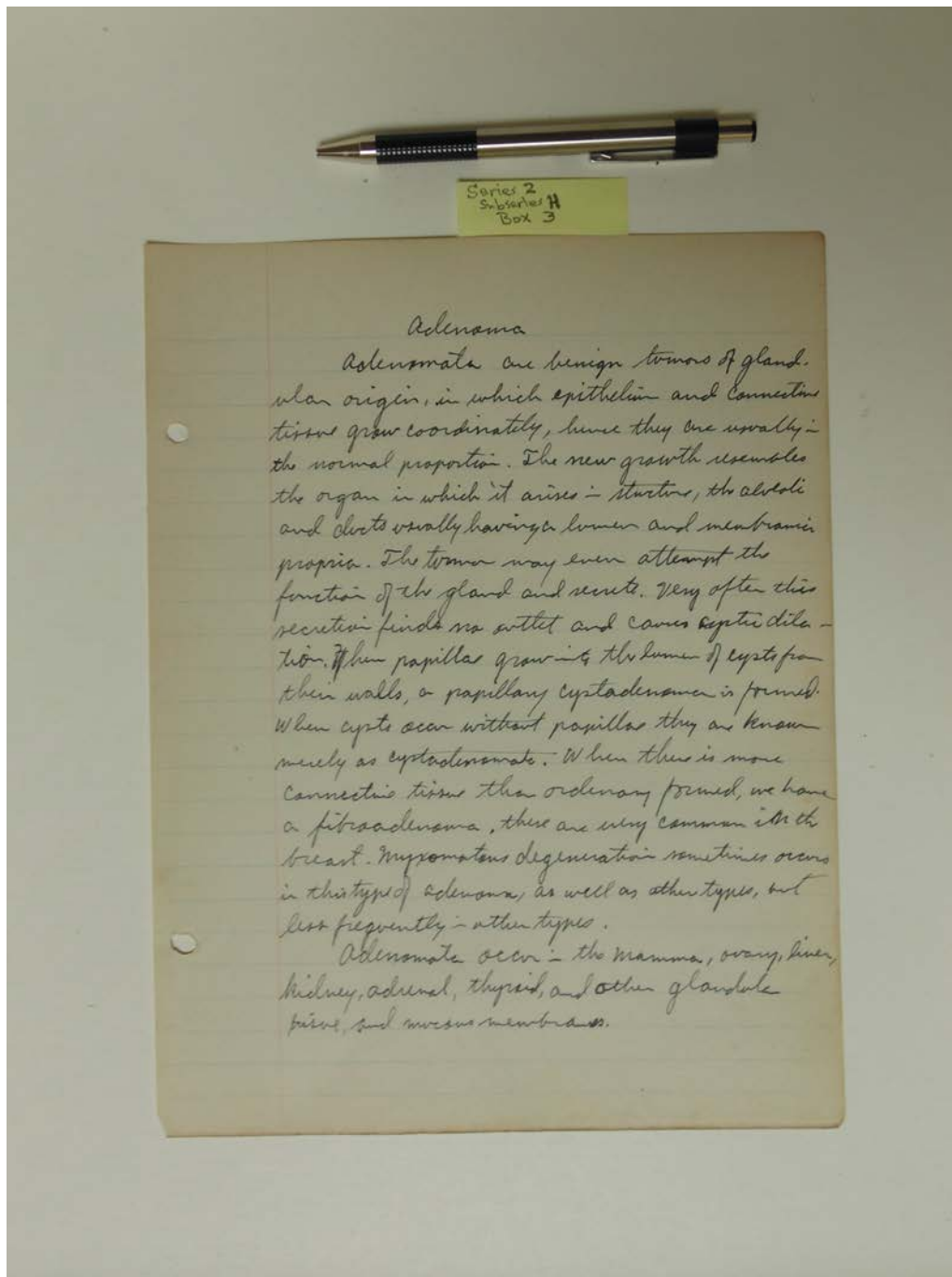


Names:

Adamantinoma

Types:

essay



Adenoma

Adenomas are benign tumors of glandular origin, in which epithelium and connective tissue grow coordinately, hence they are usually in the normal proportion. The new growth resembles the organ in which it arises - structure, the alveoli and ducts usually having a lumen and membranous propria. The tumor may even attempt the function of the gland and secrete. Very often this secretion finds no outlet and causes cystic dilatation. When papillae grow into the lumen of cysts from their walls, a papillary cystadenoma is formed. When cysts occur without papillae they are known merely as cystadenomas. When there is more connective tissue than ordinary formed, we have a fibroadenoma, these are very common in the breast. Myxomatous degeneration sometimes occurs in this type of adenoma, as well as other types, but less frequently in other types.

Adenomas occur in the mamma, ovary, liver, kidney, adrenal, thyroid, and other glandular tissue and mucous membranes.

Names:

Adenoma

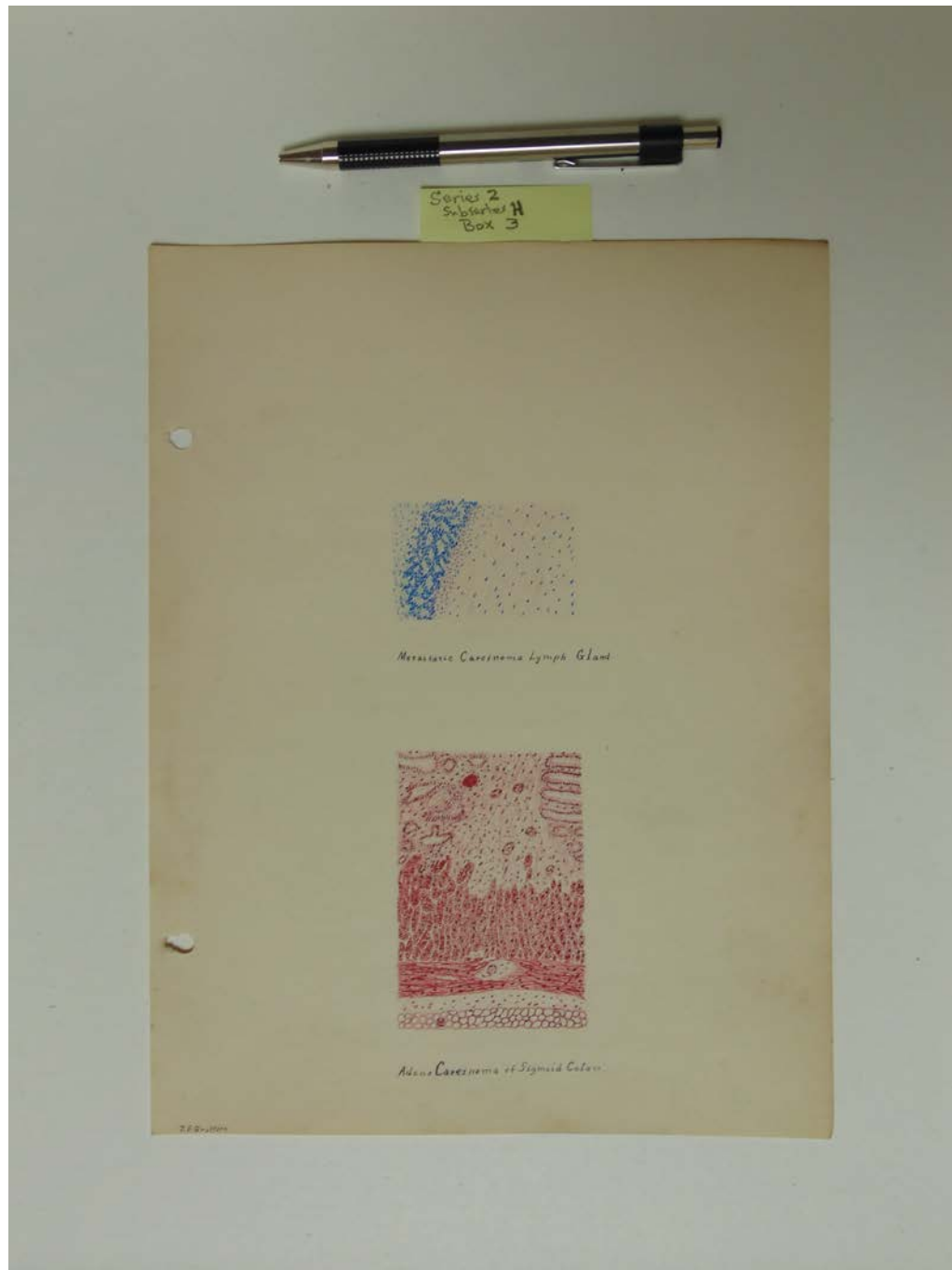
Types:

essay

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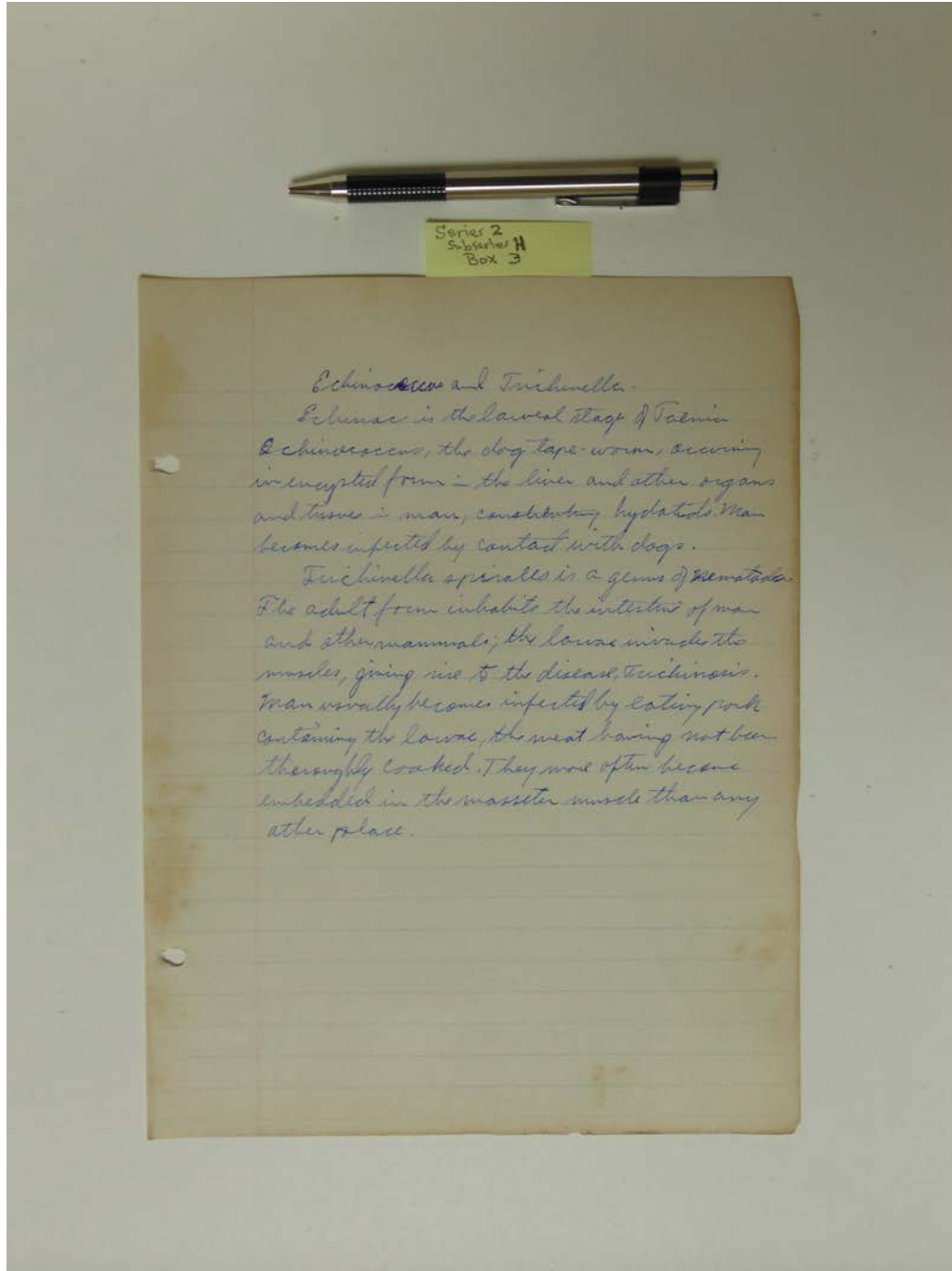
Names:

Adenocarcinoma of
Sigmoid Colon

Metastatic Carcinoma
Lymph Gland

Types:

drawing



Echinococcus and Trichinella.

Larvae in the larval stage of *Taenia Echinococcus*, the dog tapeworm, occurring in encysted form in the liver and other organs and tissues in man, constituting hydatids. Man becomes infected by contact with dogs.

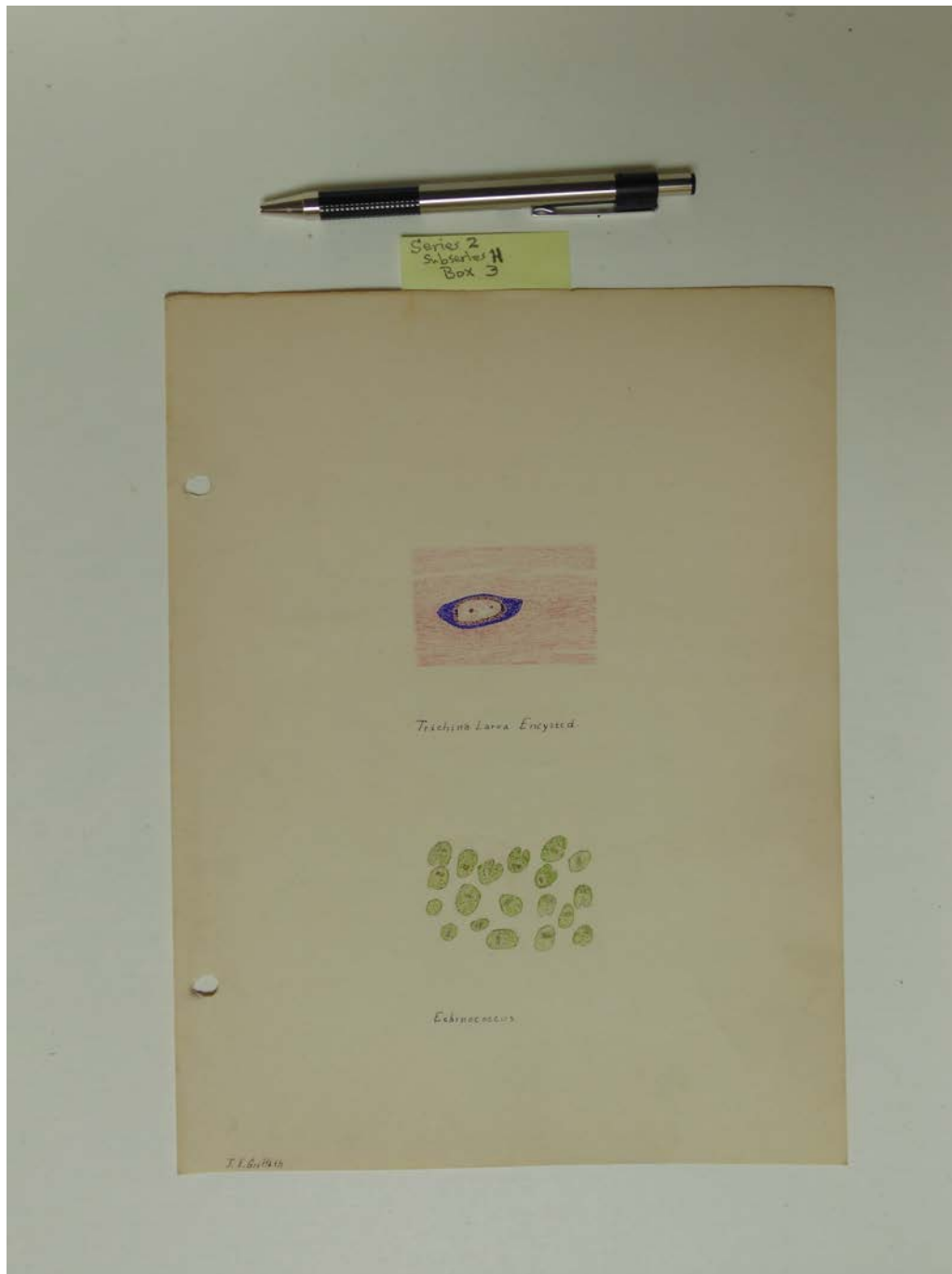
Trichinella spiralis is a genus of Nematoda. The adult form inhabits the intestines of man and other mammals; the larvae invade the muscles, giving rise to the disease trichinosis. Man usually becomes infected by eating pork containing the larvae, the meat having not been thoroughly cooked. They more often become embedded in the masseter muscle than any other place.

Names:

Echinococcus and
Trichinella

Types:

essay



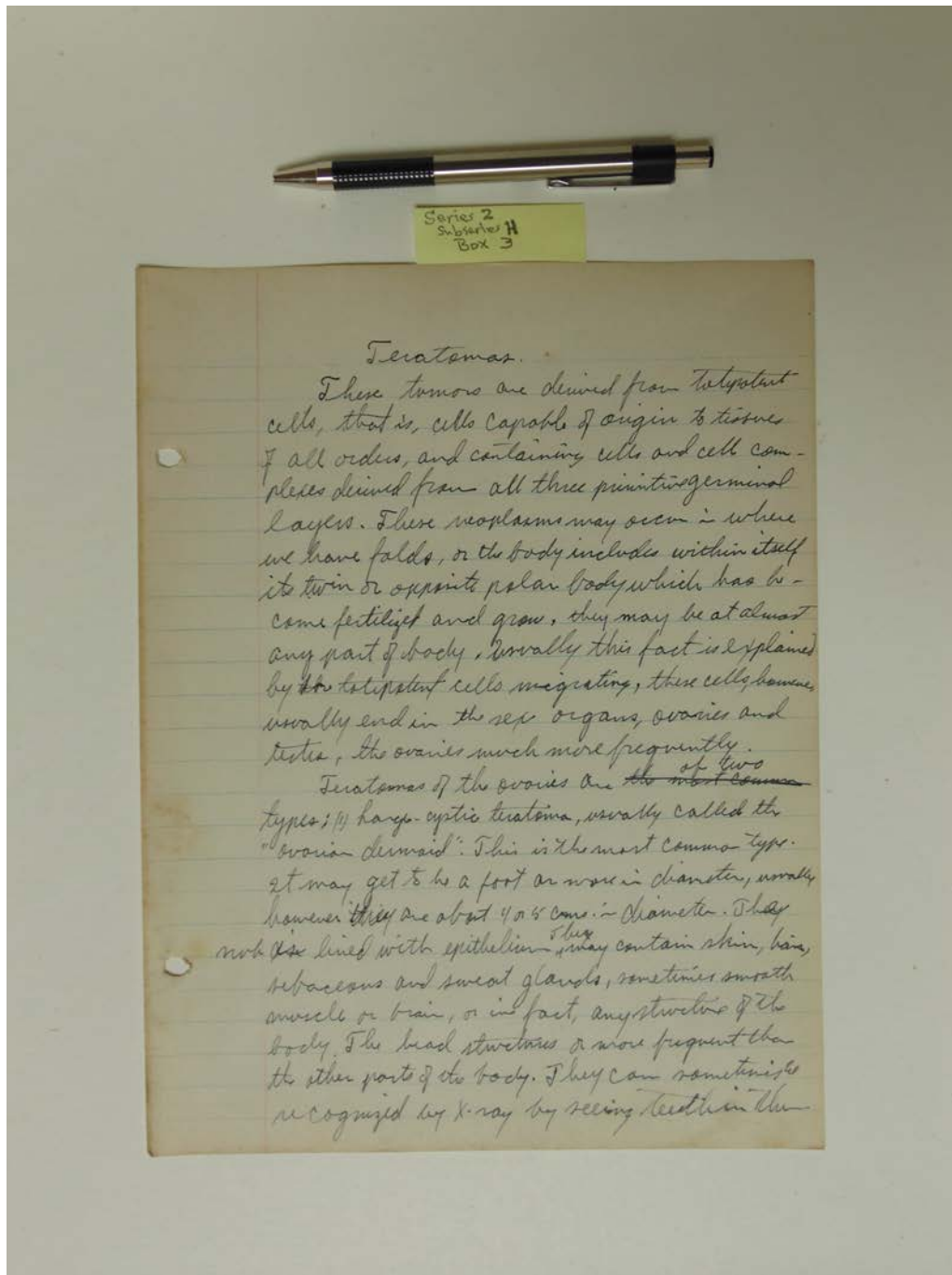
Names:

Echinococcus

Trichina Larva
Encysted

Types:

drawing



Teratomas.

These tumors are derived from totipotent cells, that is, cells capable of origin to tissues of all orders, and containing cells and cell complexes derived from all three primitive germinal layers. These neoplasms may occur in where we have folds, or the body includes within itself its twin or opposite polar body which has become fertilized and grow, they may be at almost any part of body, usually this fact is explained by the totipotent cells migrating, these cells, however, usually end in the sex organs, ovaries and testes, the ovaries much more frequently.

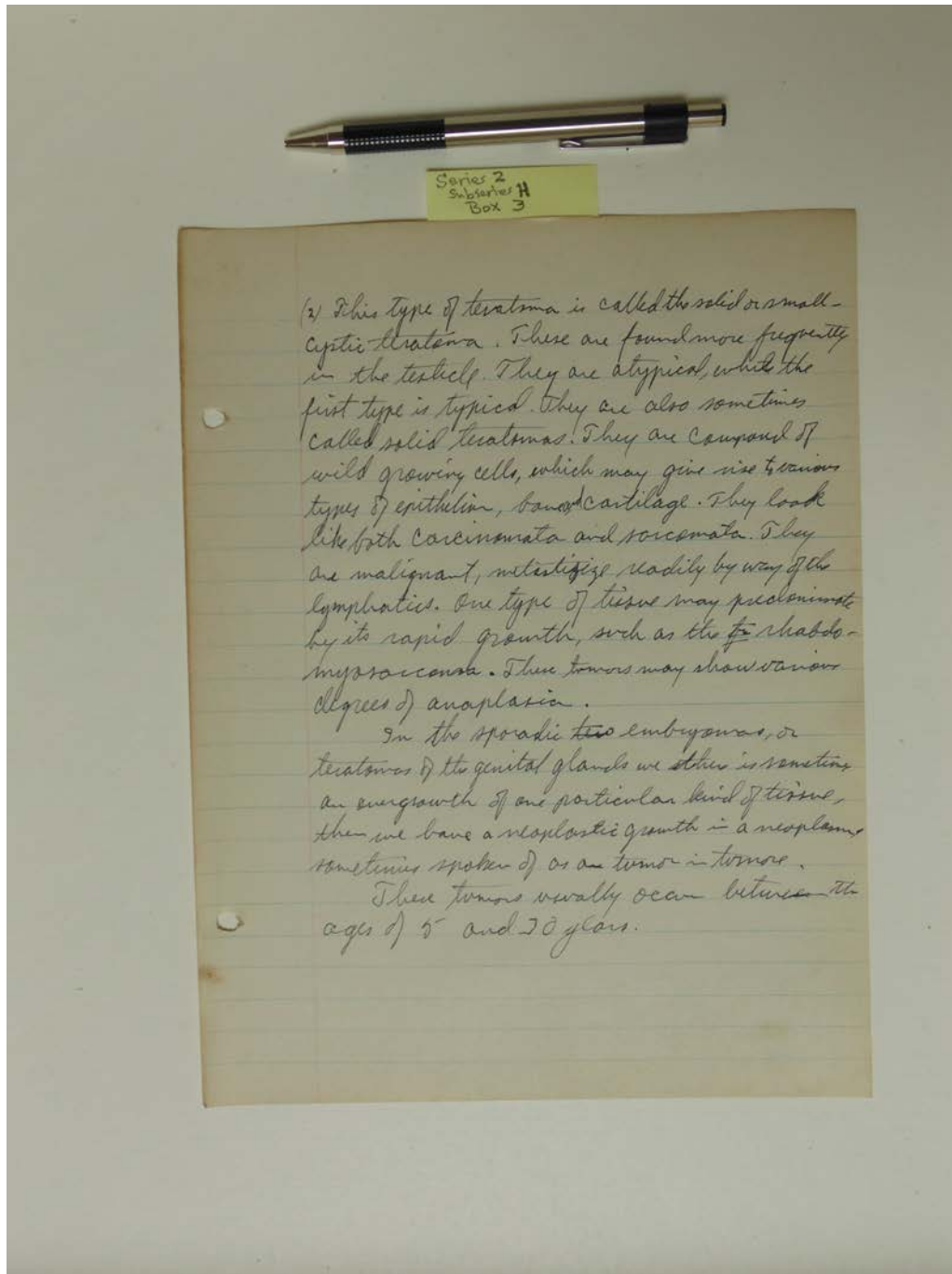
Teratomas of the ovaries are ~~the most common~~ ^{of two} types; (1) large cystic teratoma, usually called the "ovarian dermoid". This is the most common type. It may get to be a foot or more in diameter, usually however they are about 4 or 5 cms. in diameter. They ~~are~~ ^{may} not be lined with epithelium ^{they} contain skin, hair, sebaceous and sweat glands, sometimes smooth muscle or brain, or in fact, any structure of the body. The head structures are more frequent than the other parts of the body. They can sometimes be recognized by X-ray by seeing teeth in the

Names:

Teratomas

Types:

essay

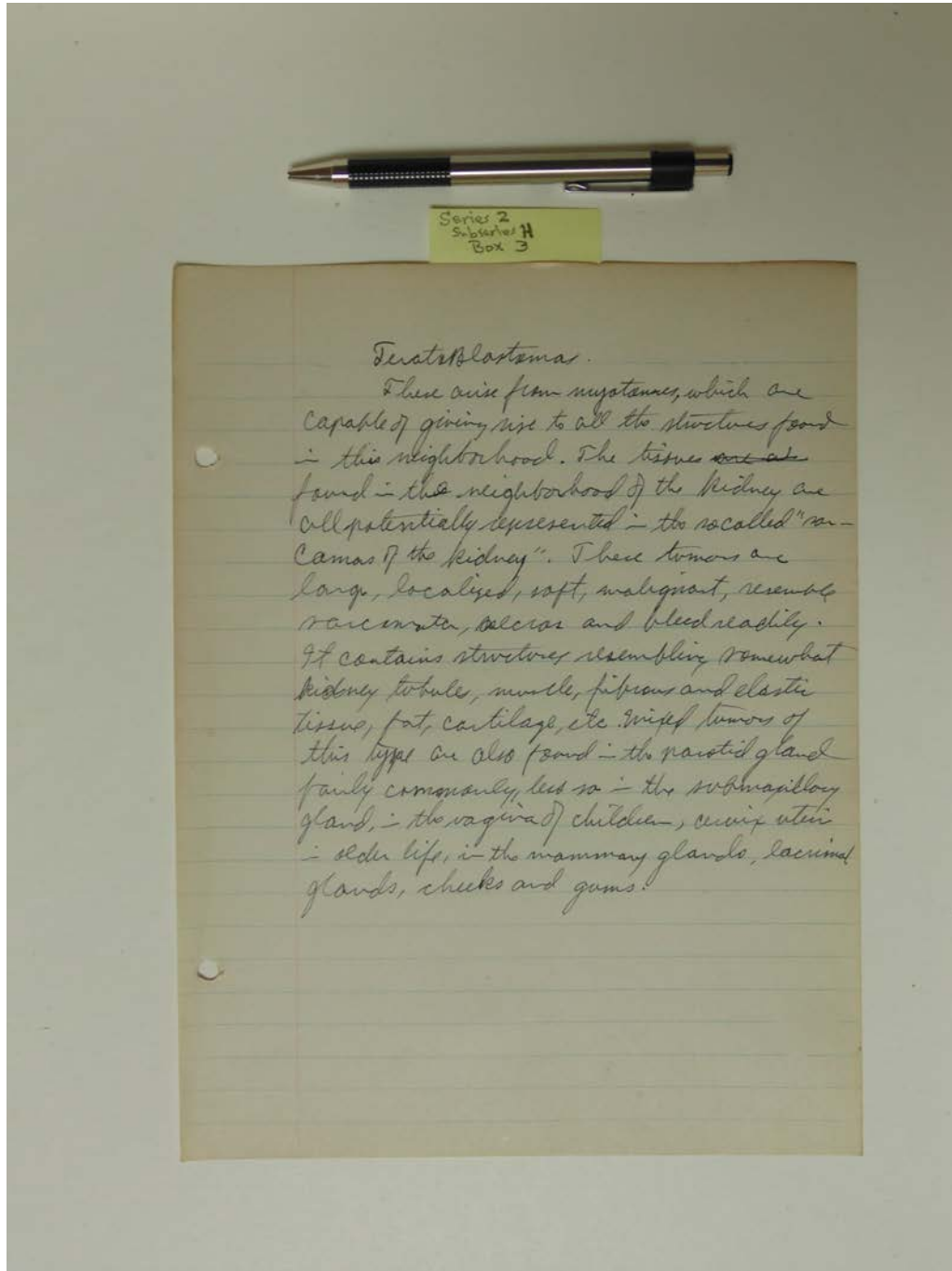


Names:

Teratomas

Types:

essay

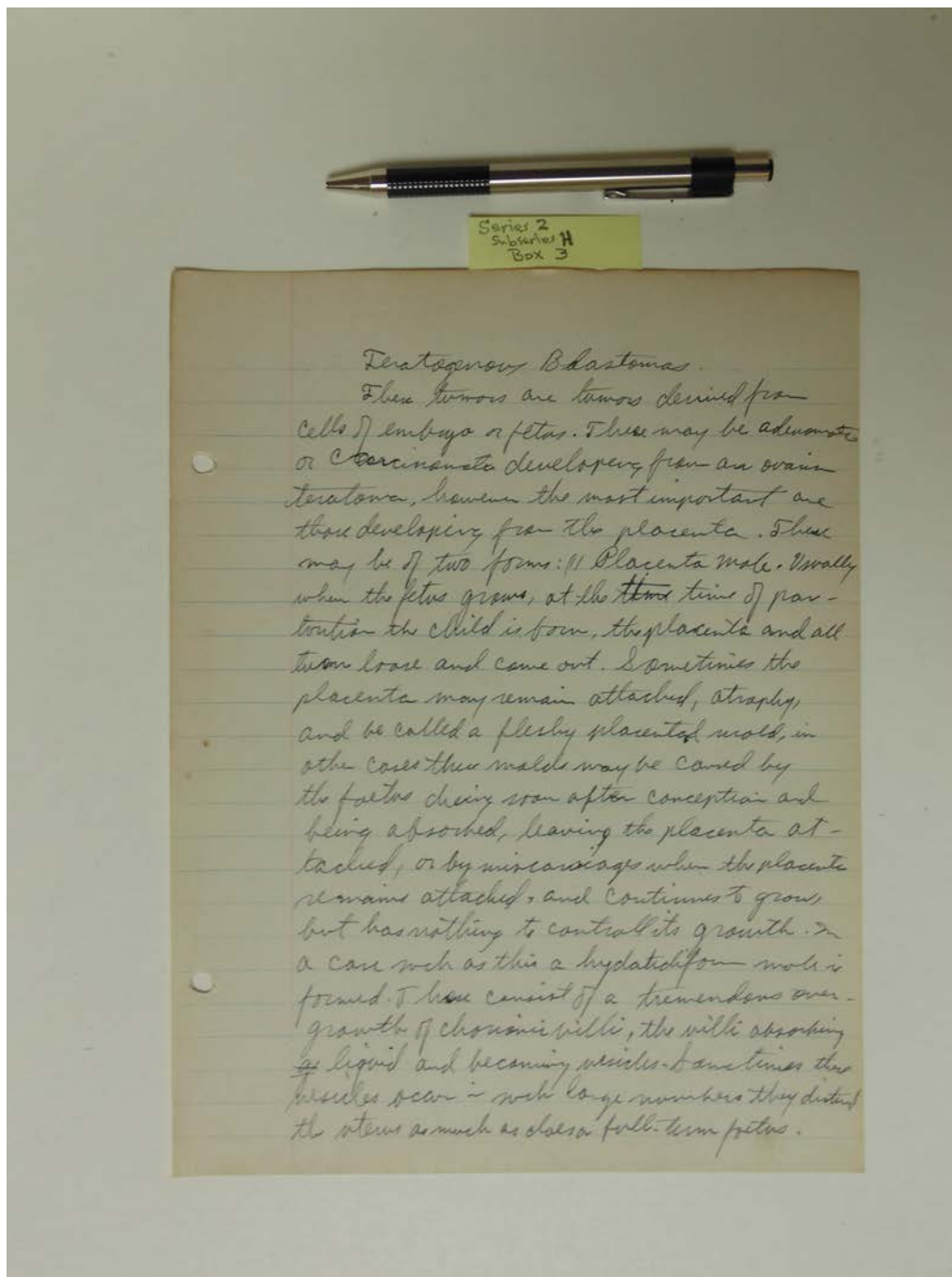


Names:

Teratoblastomas

Types:

essay



Teratogenous Blastomas

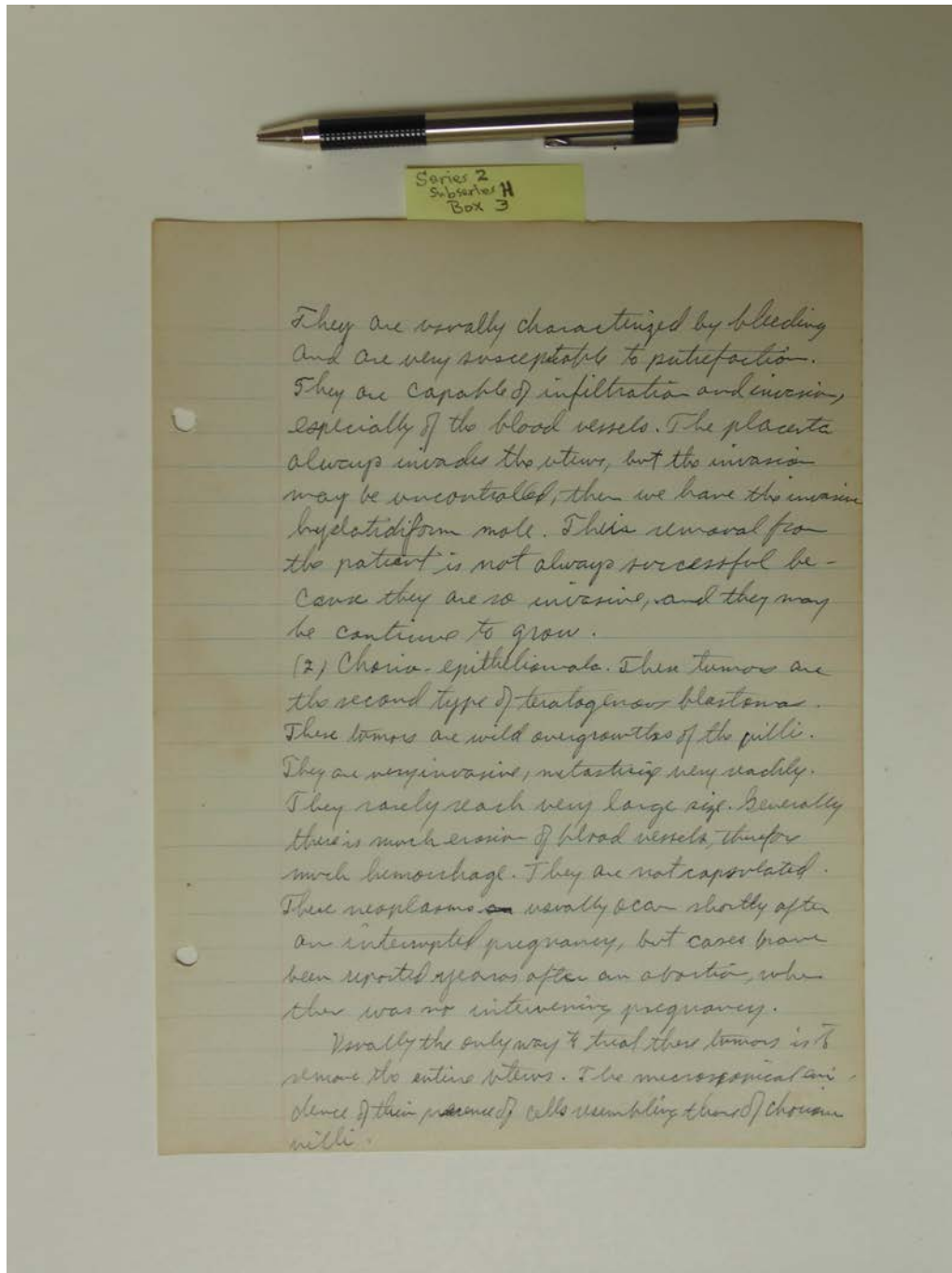
These tumors are tumors derived from cells of embryos or fetos. These may be adenomas or carcinomas developing from an ovarian teratoma, however the most important are those developing from the placenta. These may be of two forms: 1) Placenta mole. Usually when the fetus grows, at the time of parturition the child is born, the placenta and all tumor loose and come out. Sometimes the placenta may remain attached, atrophy, and be called a fleshy placental mold, in other cases these molds may be caused by the fetus being soon after conception and being absorbed, leaving the placenta attached, or by miscarriages when the placenta remains attached, and continues to grow but has nothing to control its growth. In a case such as this a hydatidiform mole is formed. These consist of a tremendous overgrowth of chorionic villi, the villi absorbing the liquid and becoming vesicles. Sometimes these vesicles occur in such large numbers they distend the uterus as much as does a full-term fetus.

Names:

Teratogenous
Blastomas

Types:

essay

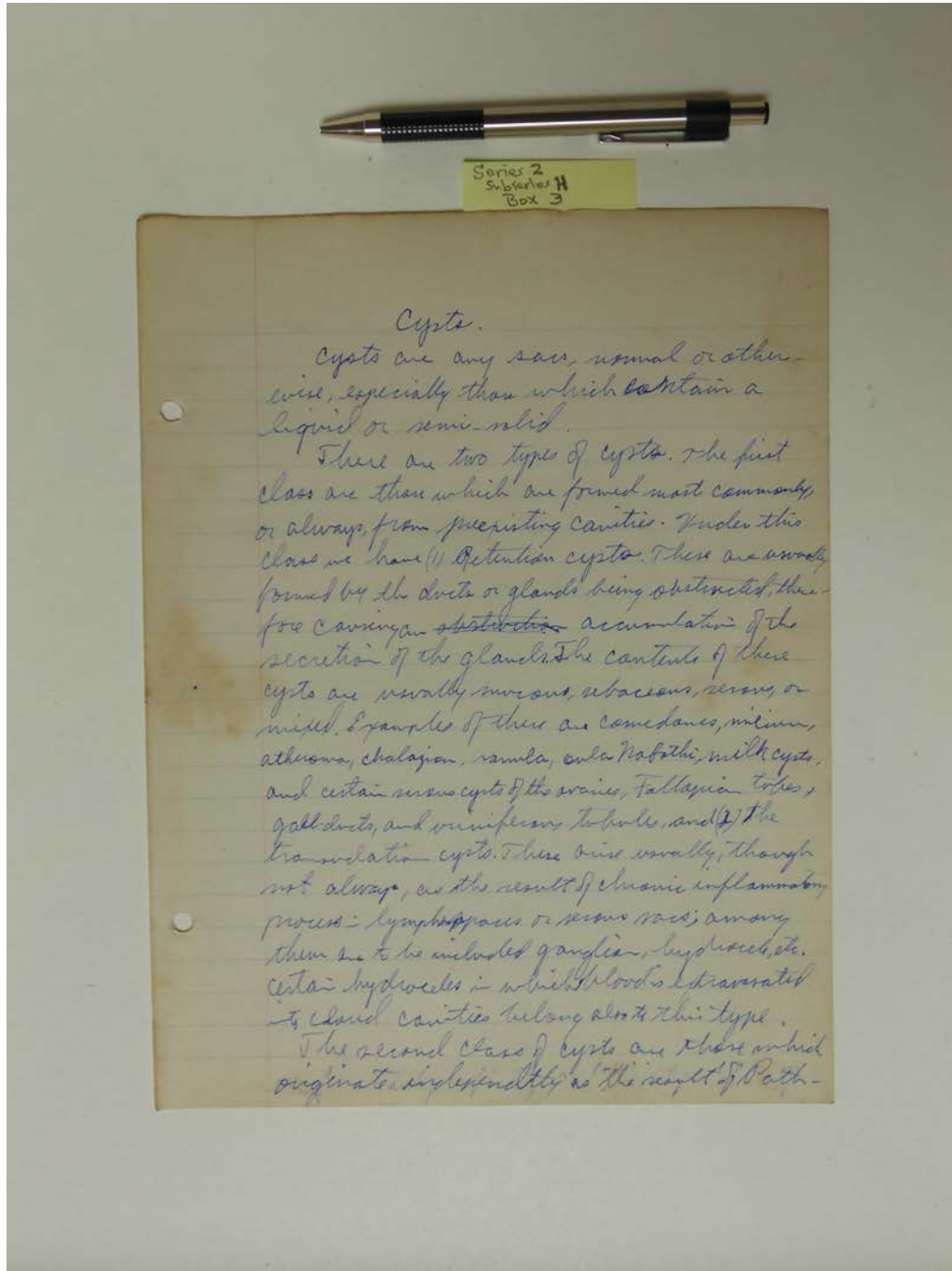


Names:

Teratogenous
Blastomas

Types:

essay



Cysts.

Cysts are any sacs, normal or otherwise, especially those which contain a liquid or semi-solid.

There are two types of cysts. The first class are those which are formed most commonly, or always, from preexisting cavities. Under this class we have (1) Retention cysts. These are usually formed by the ducts or glands being obstructed, thus preventing an ~~obstruction~~ accumulation of the secretion of the glands. The contents of these cysts are usually mucous, sebaceous, serous, or mixed. Examples of these are comedones, milium, atheroma, chalazion, xanthoma, cysta Rabothi, milk cysts, and certain mucous cysts of the ovaries, Fallopian tubes, gall ducts, and muciferous tubules, and (2) the transudation cysts. These arise usually, though not always, as the result of chronic inflammatory process: lymphopneumonia or serous sacs; among them are to be included ganglion, hydrocoele, etc. Certain hydrocoele in which blood is extravasated into closed cavities belong also to this type.

The second class of cysts are those which originate independently as the result of Path-

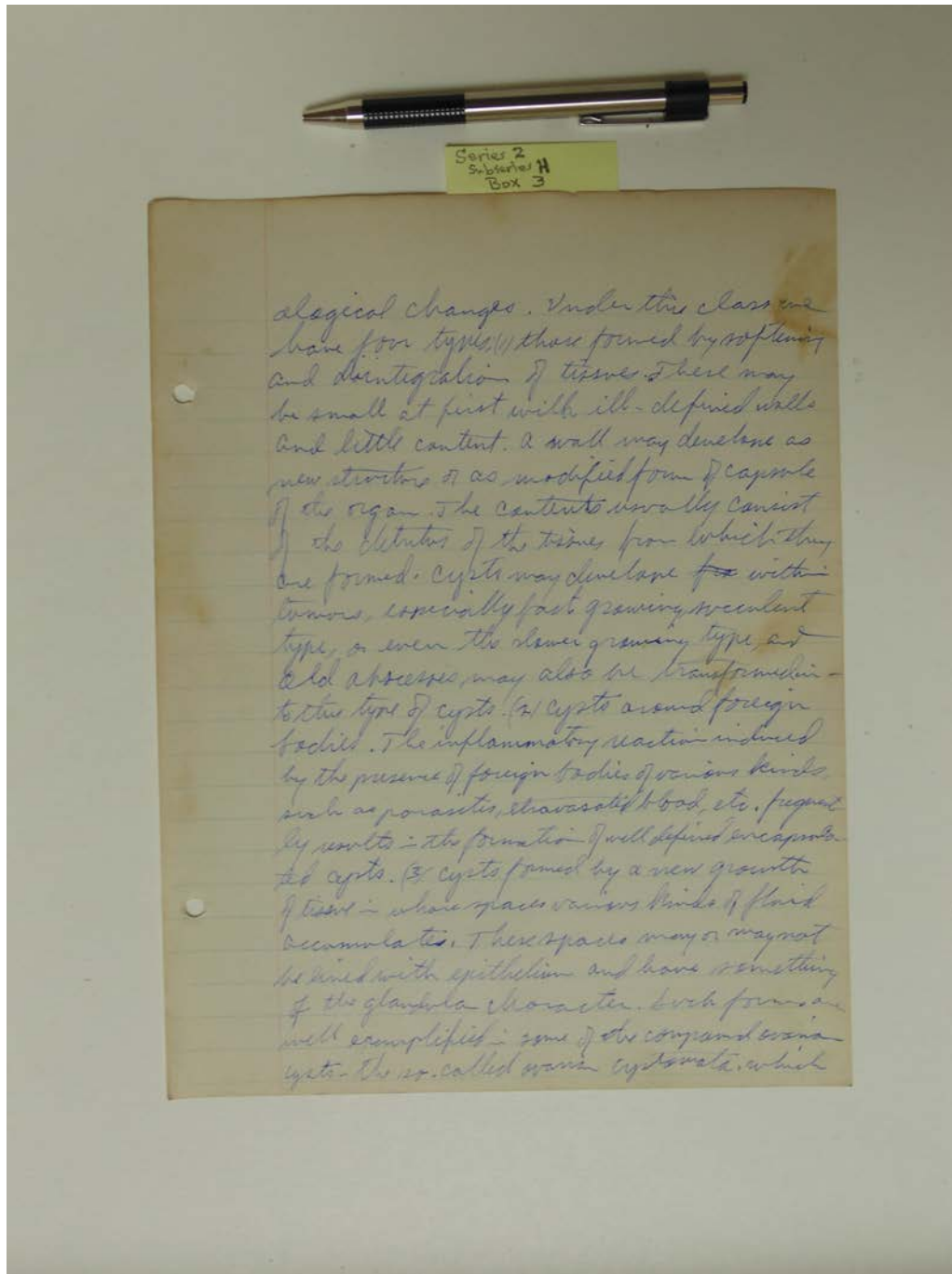
p. 1

Names:

Cysts

Types:

essay



allegical changes. Under this class we have four types, (1) those formed by softening and disintegration of tissues. These may be small at first with ill-defined walls and little content. A wall may develop as new structure or as modified form of capsule of the organ. The contents usually consist of the detritus of the tissue from which they are formed. Cysts may develop ~~for~~ within tumors, especially fast growing, necrotic type, or even the slower growing type, and cold abscesses may also be transformed to this type of cysts. (2) Cysts around foreign bodies. The inflammatory reaction induced by the presence of foreign bodies of various kinds, such as parasites, extravasated blood, etc., frequent result in the formation of well defined encapsulated cysts. (3) Cysts formed by a new growth of tissue in whose spaces various kinds of fluid accumulate. These spaces may or may not be lined with epithelium and have something of the glandular character. Such forms are well exemplified in some of the compound serous cysts - the so-called ovarian cystomata, which

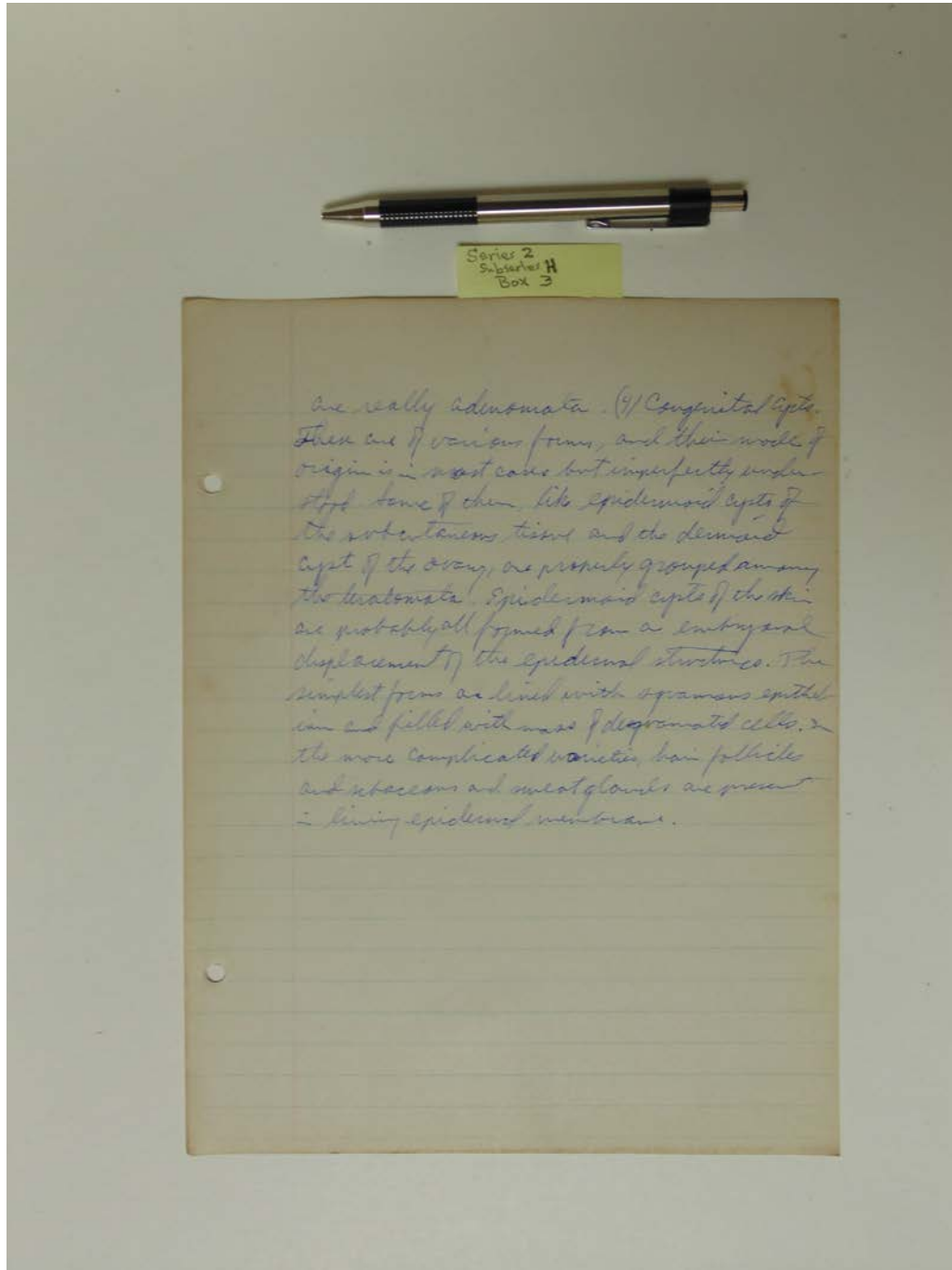
p. 2

Names:

Cysts

Types:

essay



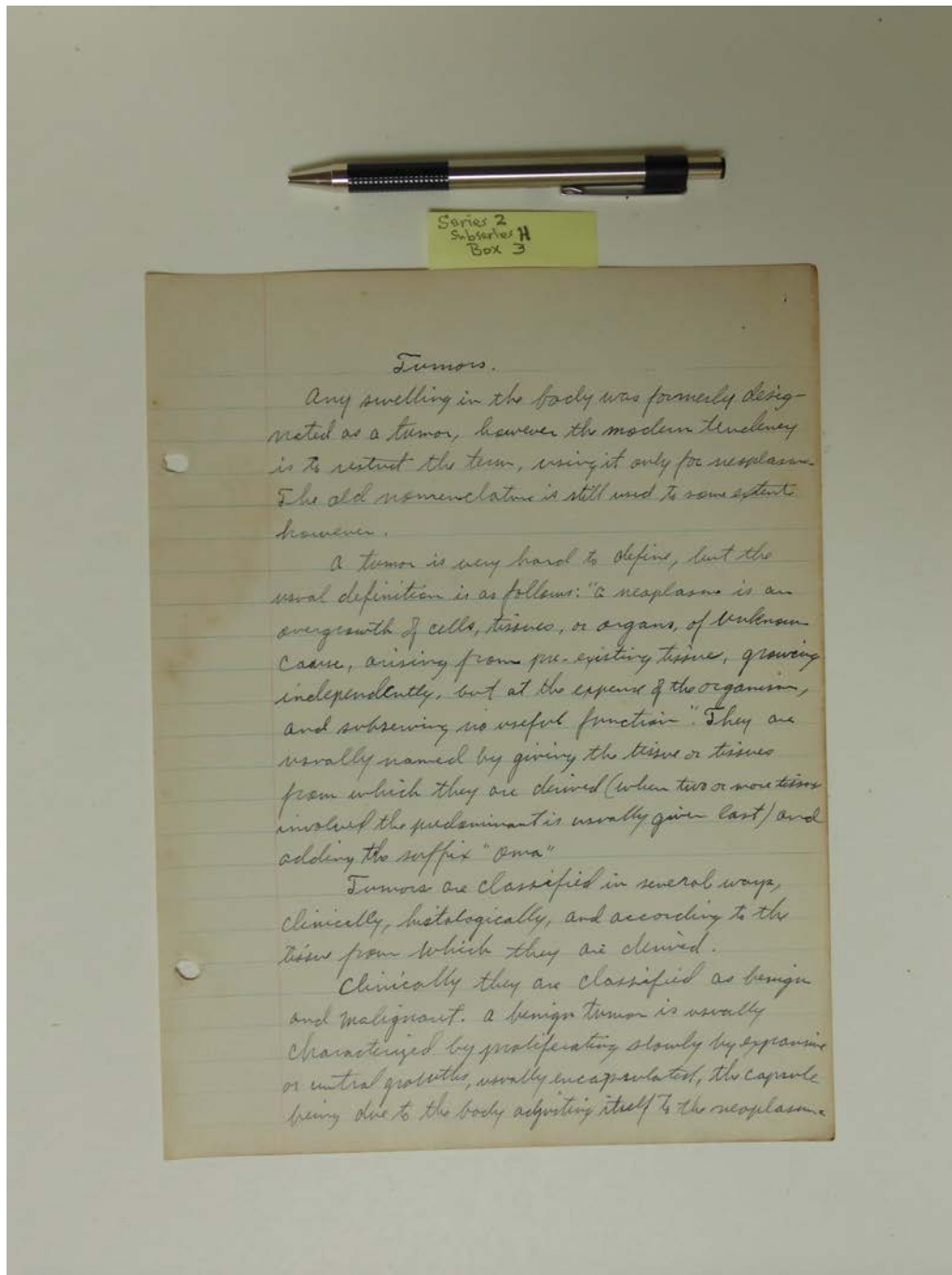
p. 3

Names:

Cysts

Types:

essay



Tumors.

Any swelling in the body was formerly designated as a tumor, however the modern tendency is to restrict the term, using it only for neoplasms. The old nomenclature is still used to some extent however.

A tumor is very hard to define, but the usual definition is as follows: "a neoplasm is an overgrowth of cells, tissues, or organs, of unknown cause, arising from pre-existing tissue, growing independently, but at the expense of the organism, and subserving no useful function". They are usually named by giving the tissue or tissues from which they are derived (when two or more tissues involved the predominant is usually given last) and adding the suffix "oma".

Tumors are classified in several ways, clinically, histologically, and according to the tissue from which they are derived.

Clinically they are classified as benign and malignant. A benign tumor is usually characterized by proliferating slowly by expansion or central growth, usually encapsulated, the capsule being due to the body adjusting itself to the neoplasm.

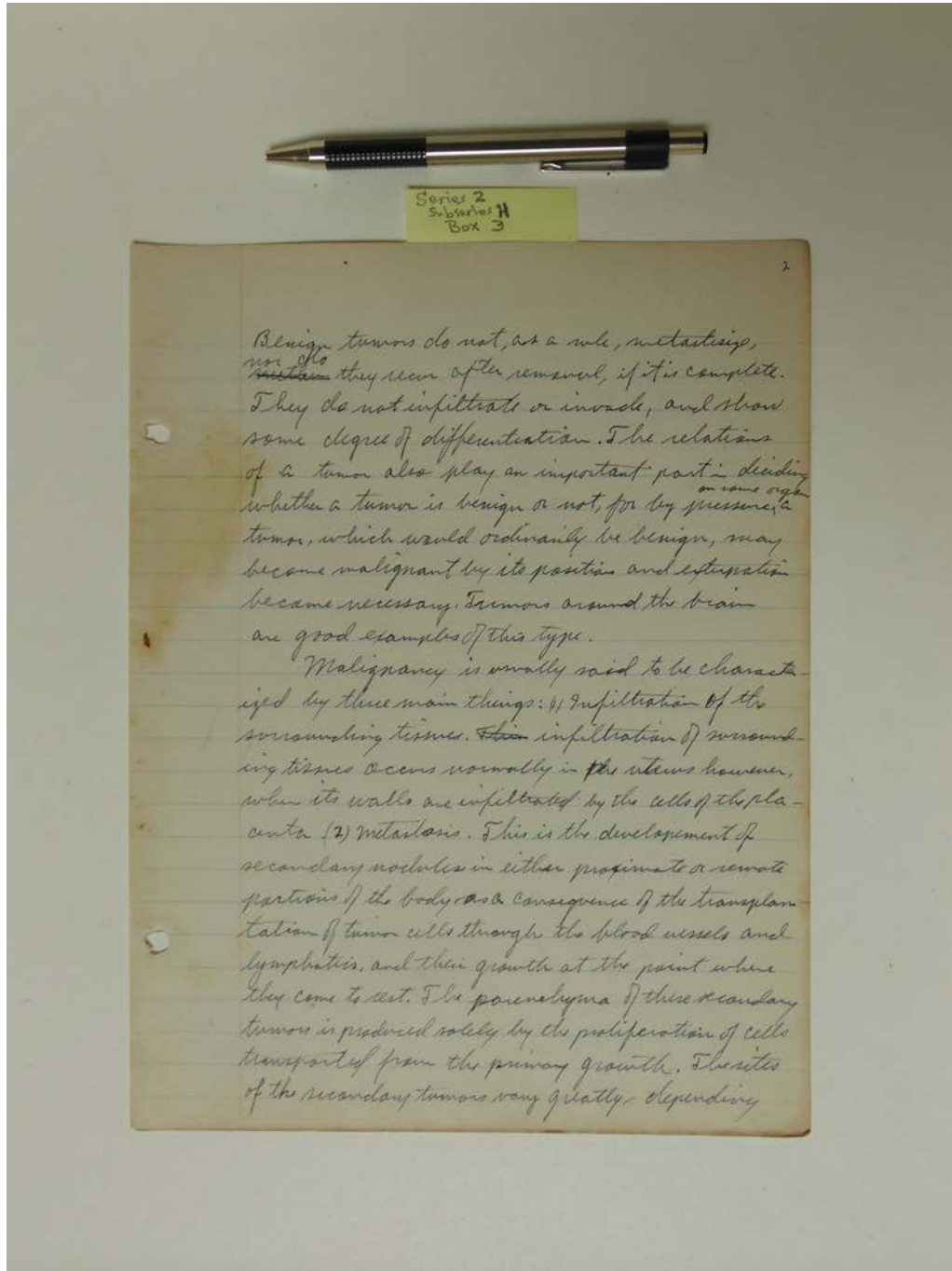
p. 1

Names:

tumors

Types:

essay



Benign tumors do not, as a rule, metastasize, ~~nor do~~ they recur after removal, if it is complete. They do not infiltrate or invade, and show some degree of differentiation. The relations of a tumor also play an important part in deciding whether a tumor is benign or not, for by pressure, a tumor, which would ordinarily be benign, may become malignant by its position and extirpation became necessary. Tumors around the brain are good examples of this type.

Malignancy is usually said to be characterized by three main things: (1) Infiltration of the surrounding tissues. ~~This~~ infiltration of surrounding tissues occurs normally in the uterus however, when its walls are infiltrated by the cells of the placenta. (2) Metastasis. This is the development of secondary nodules in either proximate or remote portions of the body as a consequence of the transplantation of tumor cells through the blood vessels and lymphatics, and their growth at the point where they come to rest. The parenchyma of these secondary tumors is produced solely by the proliferation of cells transported from the primary growth. The sites of the secondary tumors vary greatly, depending

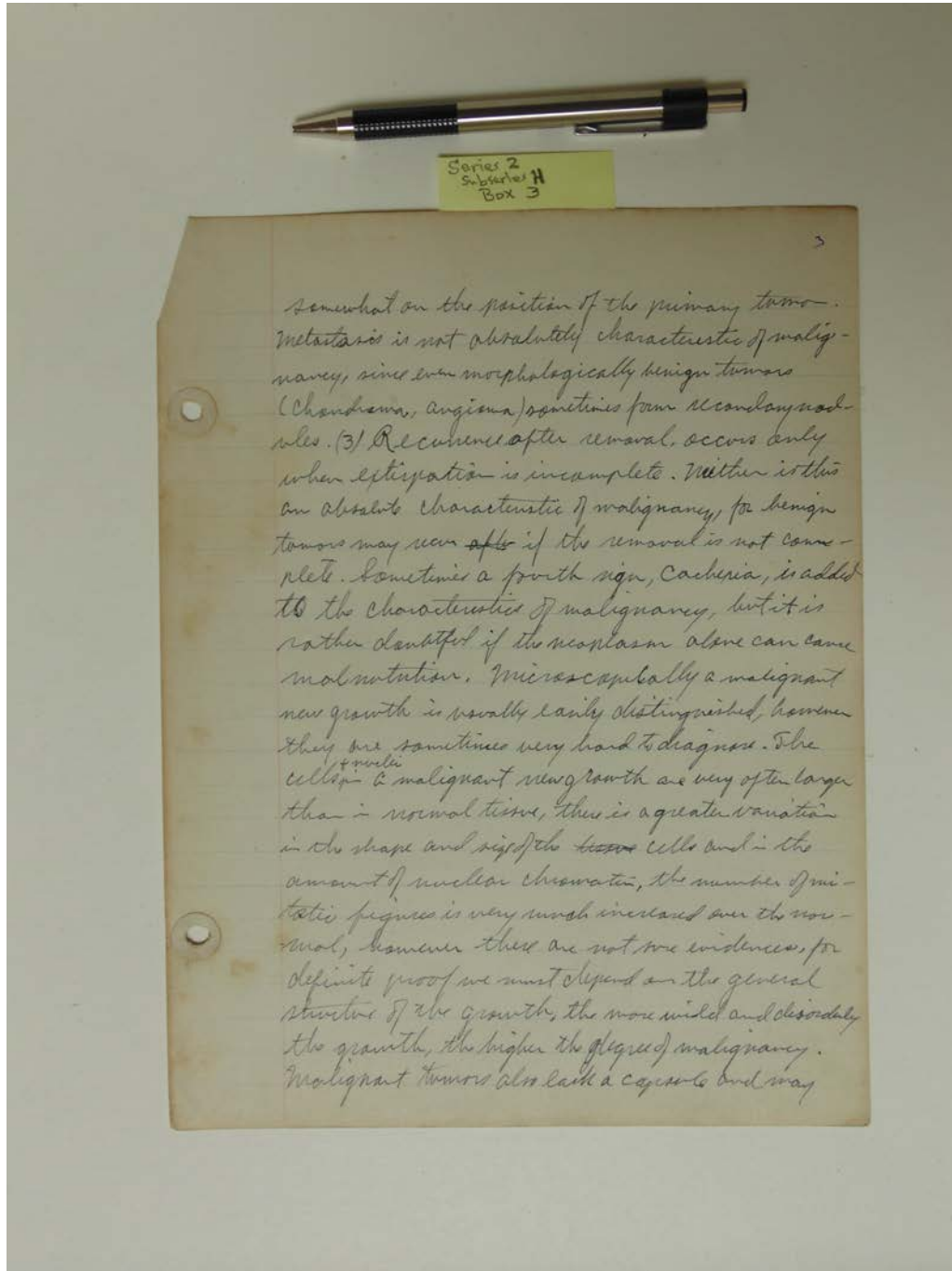
p. 2

Names:

tumors

Types:

essay



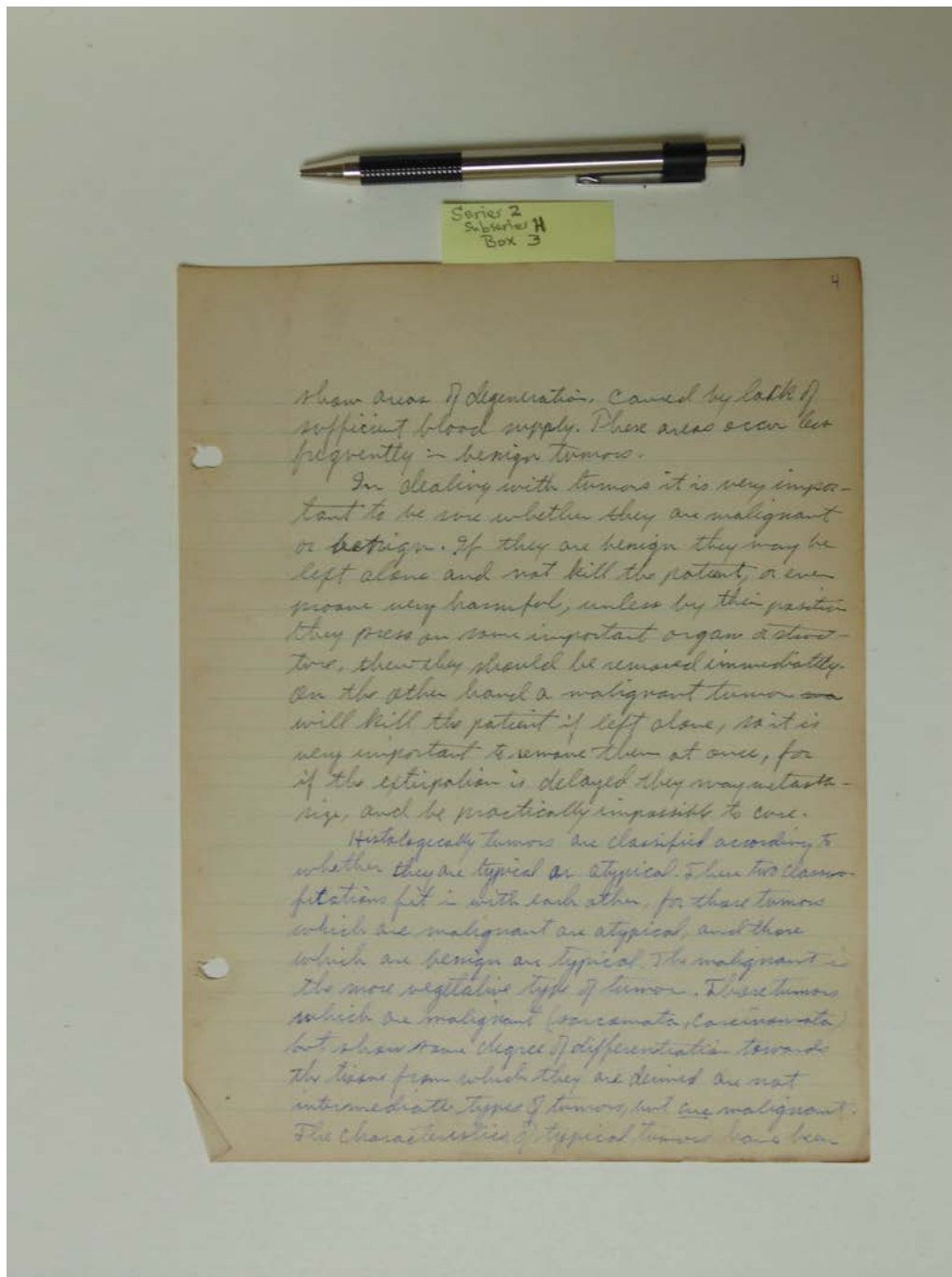
p. 3

Names:

tumors

Types:

essay



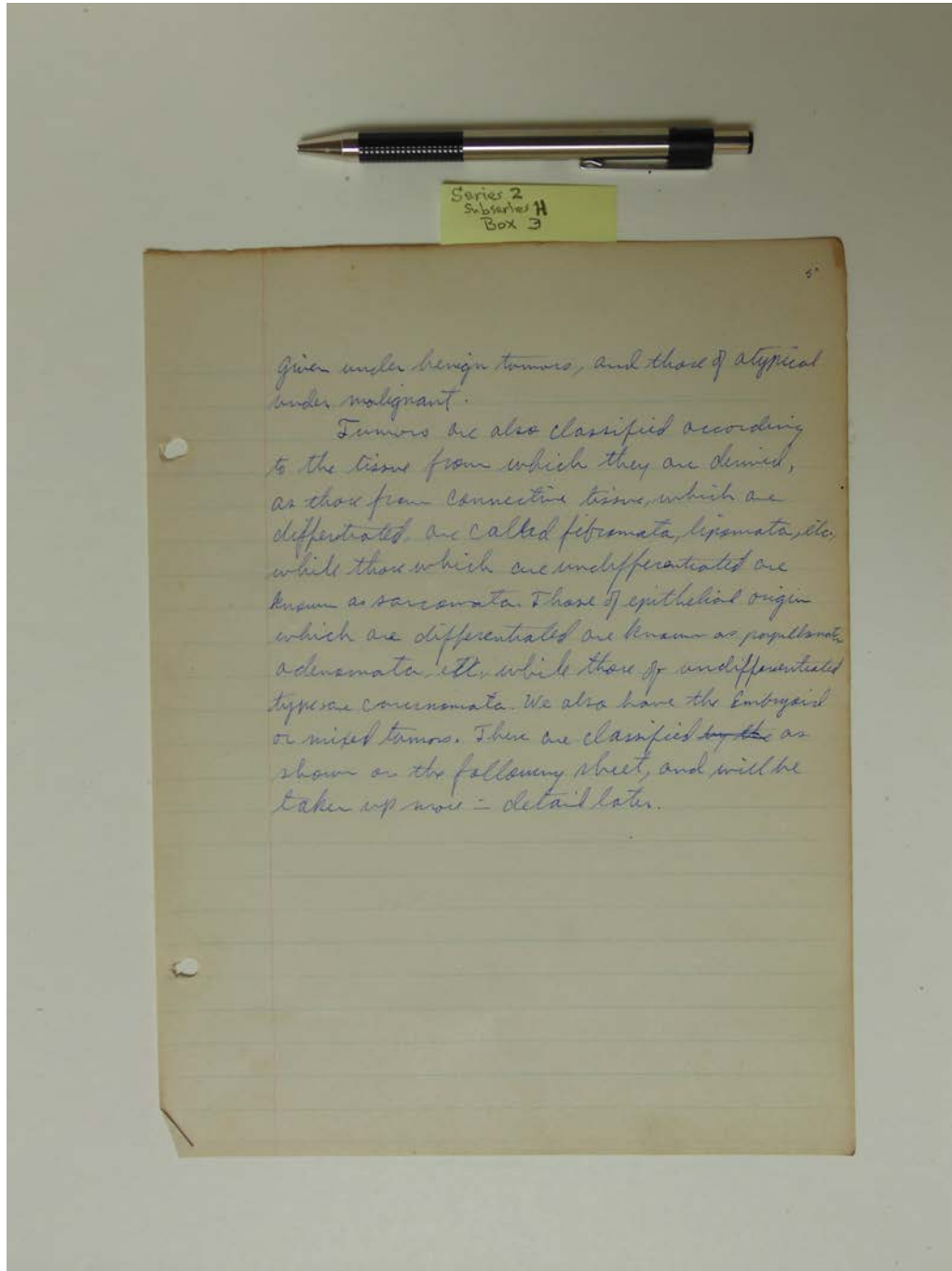
p. 4

Names:

tumors

Types:

essay



given under benign tumors, and those of atypical under malignant.

Tumors are also classified according to the tissue from which they are derived, as those from connective tissue, which are differentiated, are called fibromata, lipomata, etc. while those which are undifferentiated are known as sarcomata. Those of epithelial origin which are differentiated are known as papillomata, adenomata, etc. while those of undifferentiated type are carcinomata. We also have the embryoid or mixed tumors. These are classified ~~by the~~ as shown on the following sheet, and will be taken up now - detail later.

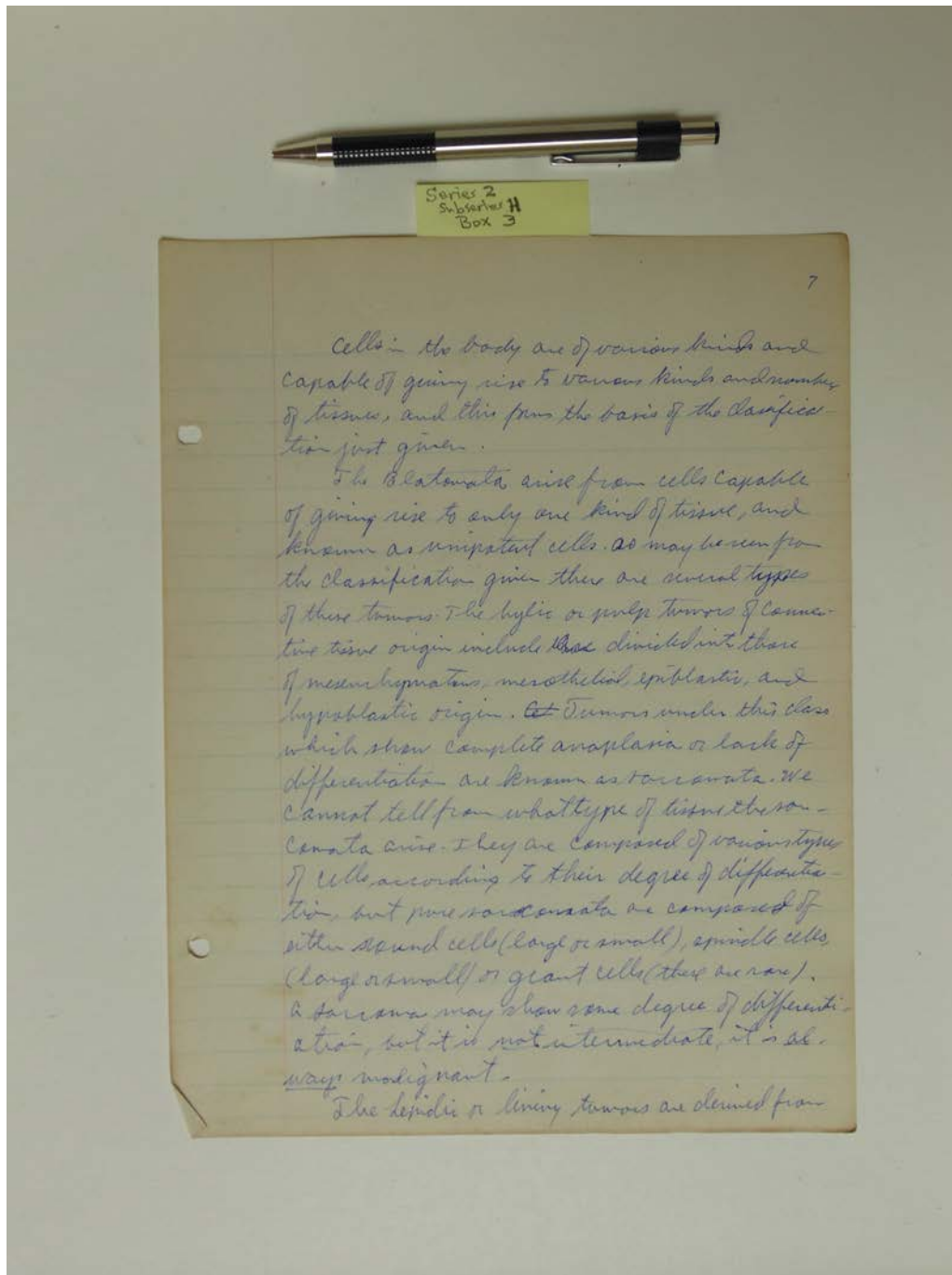
p. 5

Names:

tumors

Types:

essay



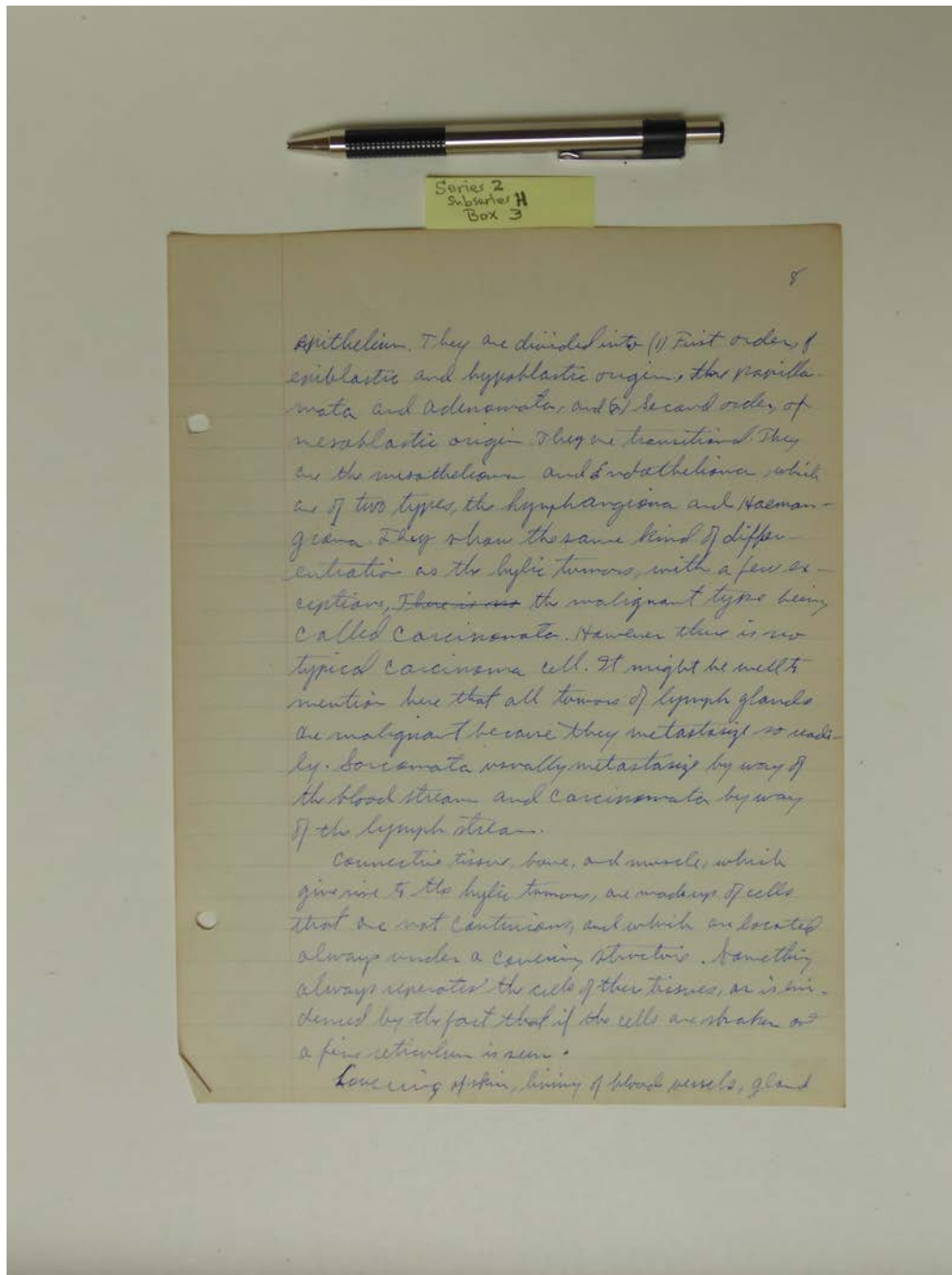
p. 7

Names:

tumors

Types:

essay



8
epithelium. They are divided into (1) First order of
epiblastic and hypoblastic origin, the papilla-
mata and adenomata, and (2) second order of
mesoblastic origin. They are transitional. They
are the mesothelium and endothelium, which
are of two types, the lymphangioma and Haeman-
gioma. They show the same kind of differ-
entiation as the hyaline tumors, with a few ex-
ceptions, the malignant type being
called carcinomata. However this is not
typical carcinoma cell. It might be well to
mention here that all tumors of lymph glands
are malignant because they metastasize so easily.
Sarcomata usually metastasize by way of
the blood stream and carcinomata by way
of the lymphatics.

Connective tissue, bone, and muscle, which
give rise to the hyaline tumors, are made up of cells
that are not continuous, and which are located
always under a covering structure. Something
always separates the cells of these tissues, or is im-
plied by the fact that if the cells are shaken out
a fine reticulum is seen.

Loose ring of protein, lining of blood vessels, gland

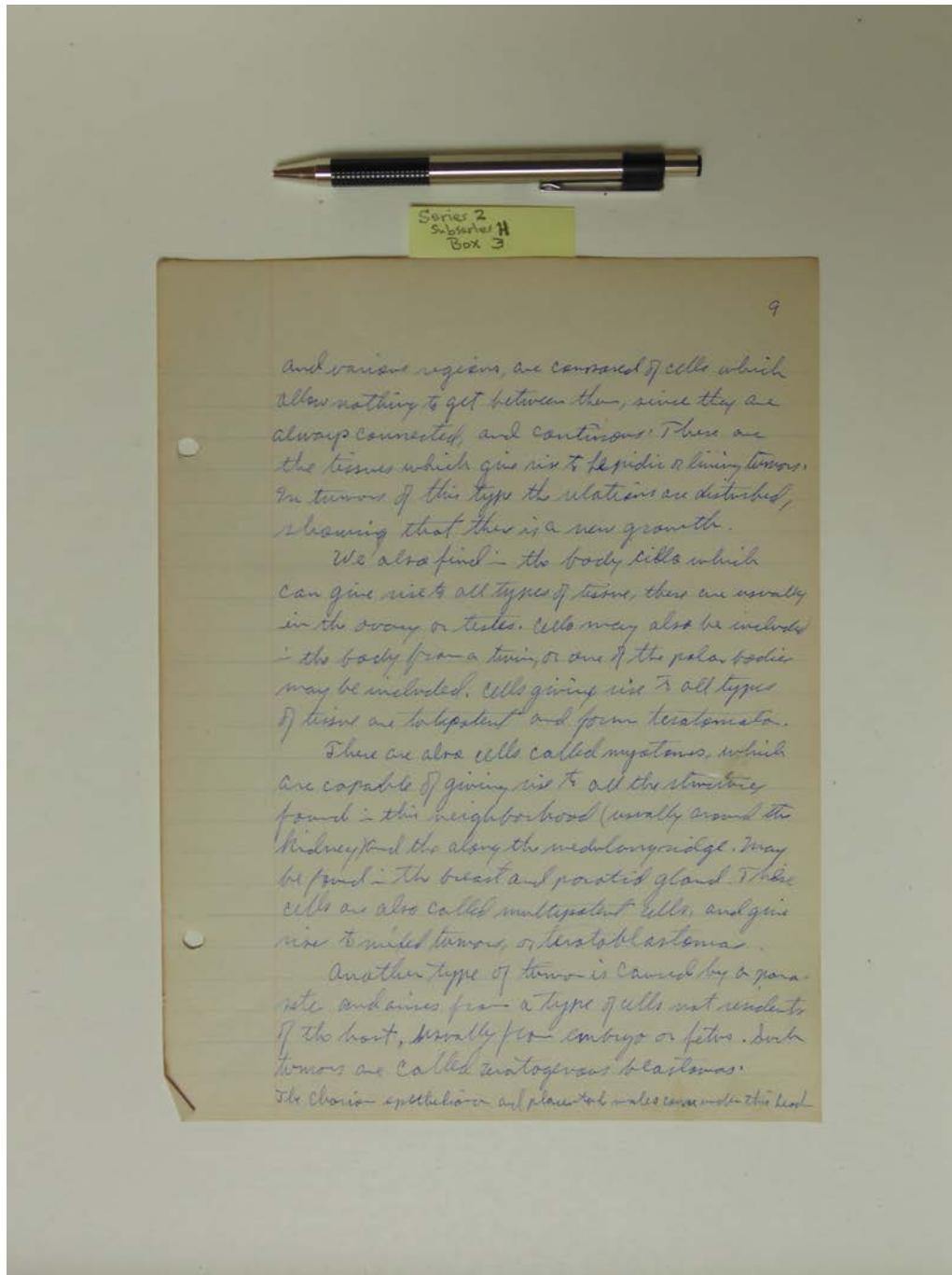
p. 8

Names:

tumors

Types:

essay



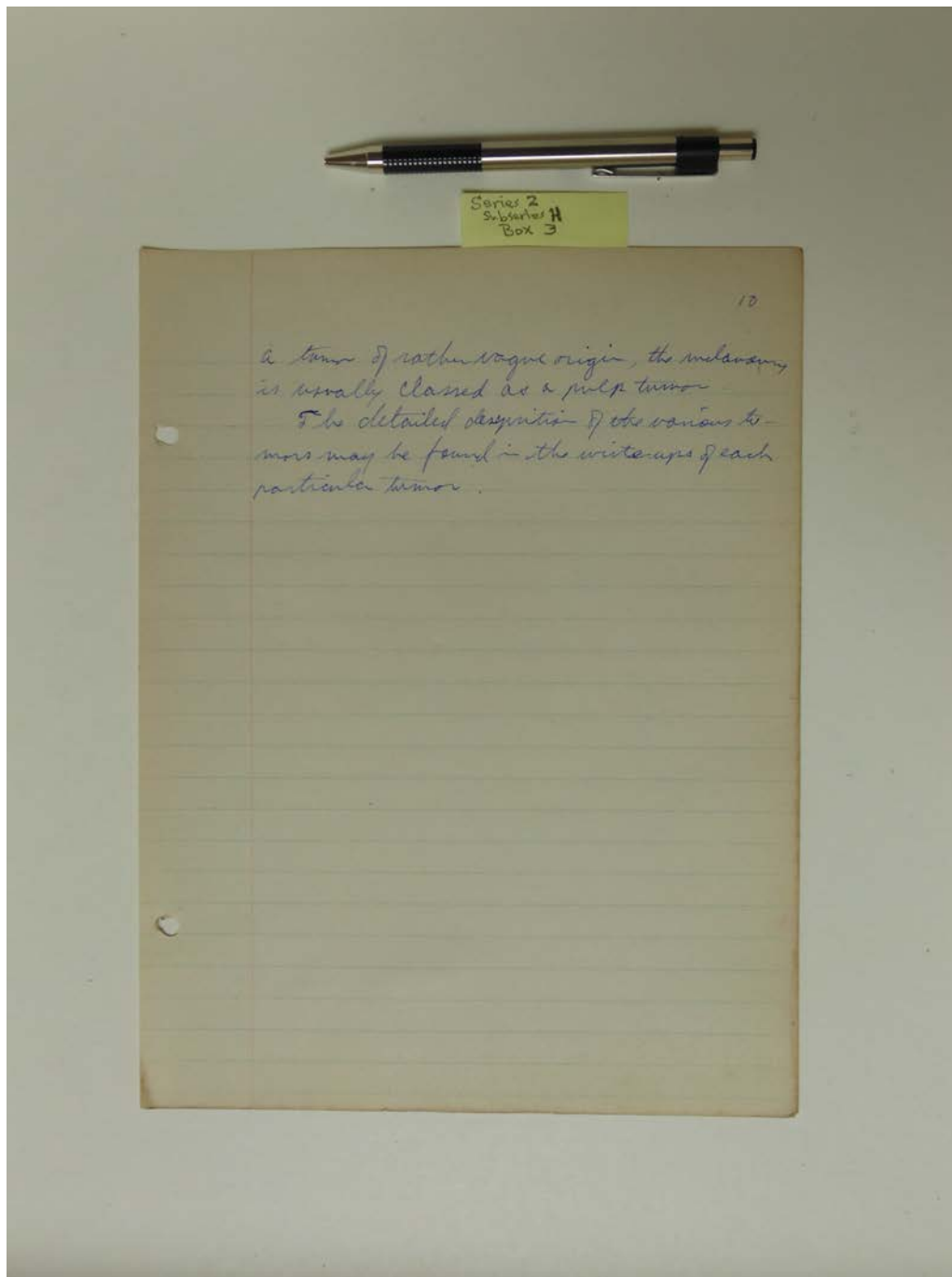
p. 9

Names:

tumors

Types:

essay



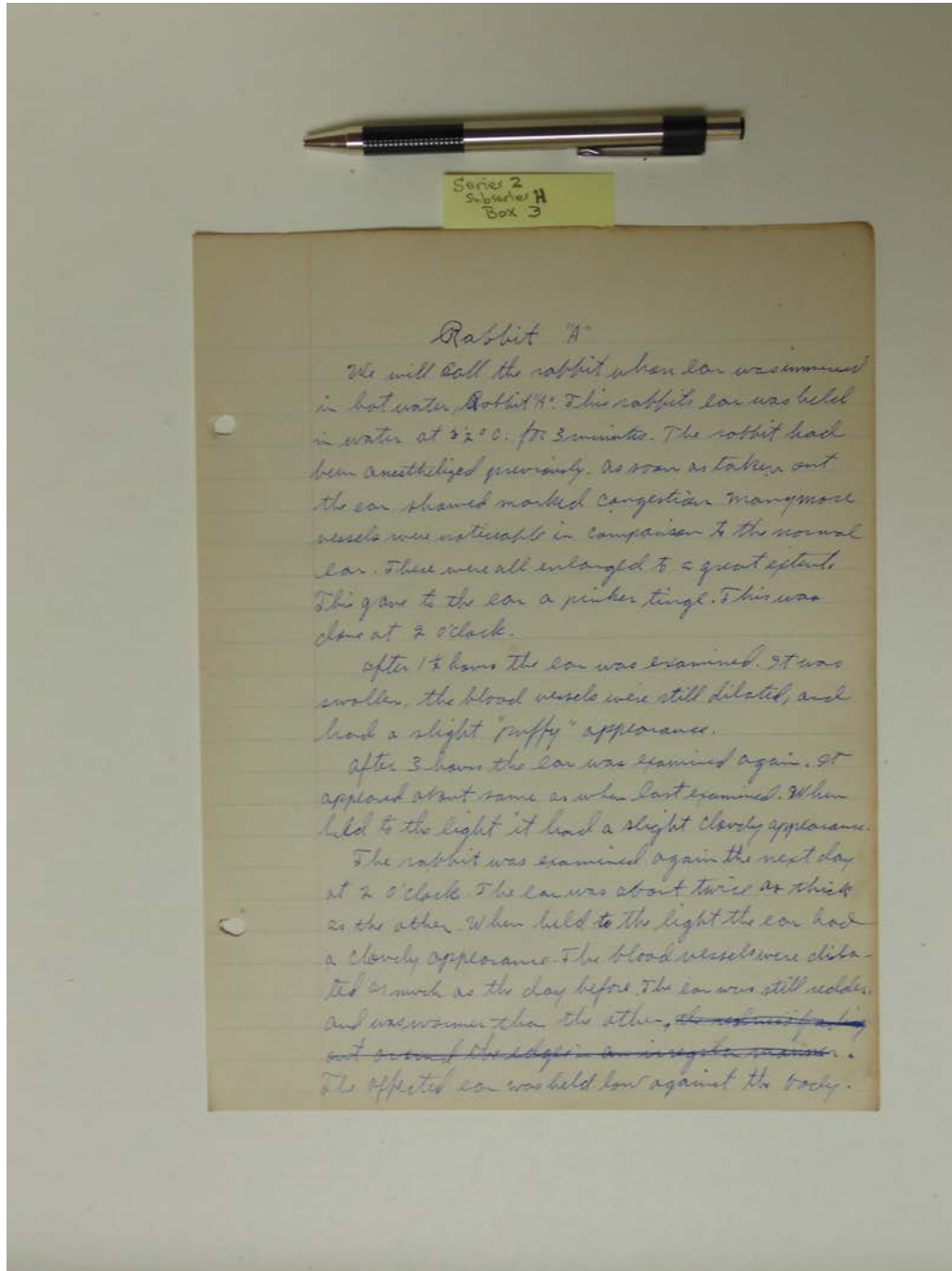
p. 10

Names:

tumors

Types:

essay



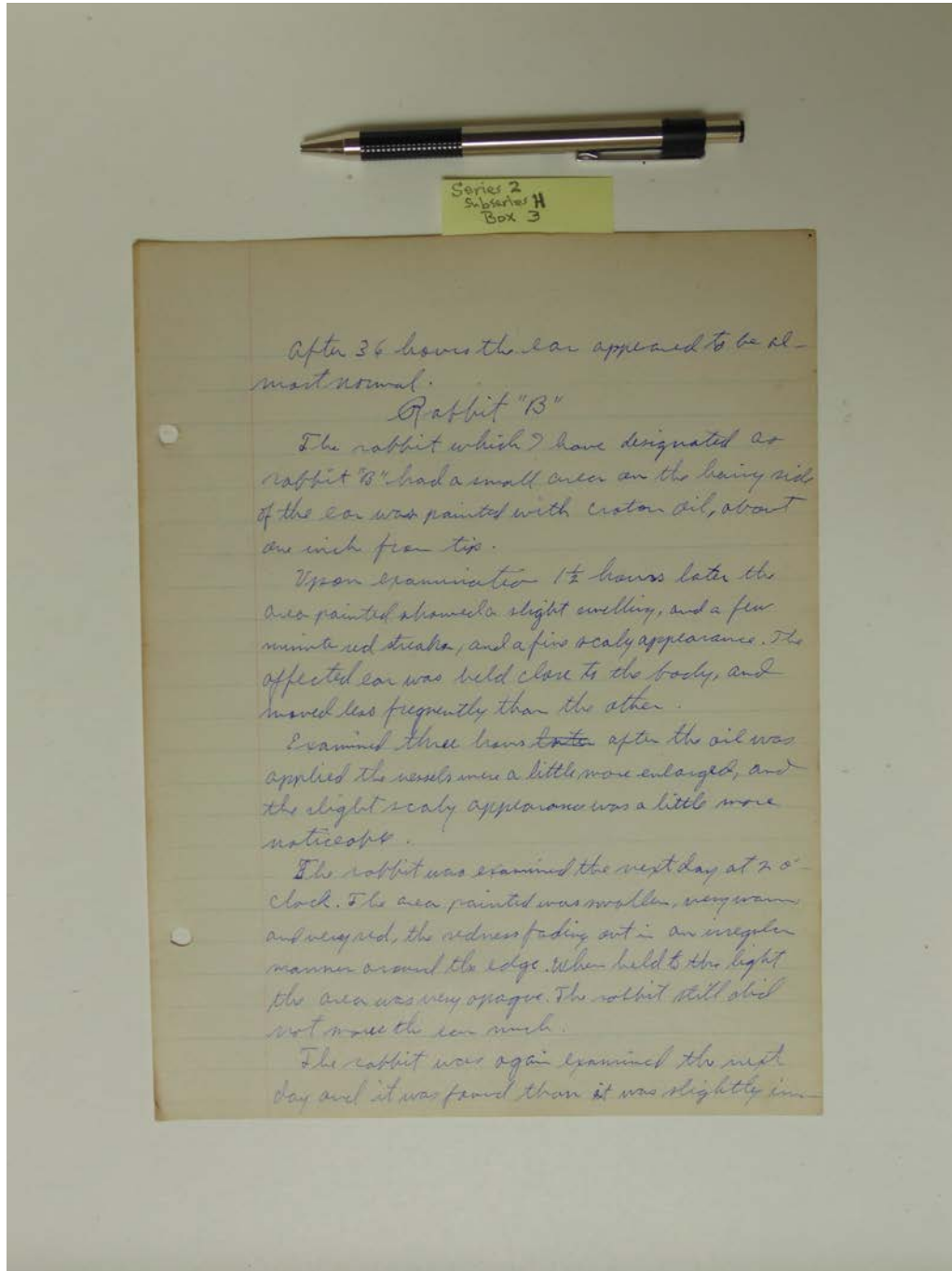
p. 1

Names:

Rabbit lab experiment

Types:

essay



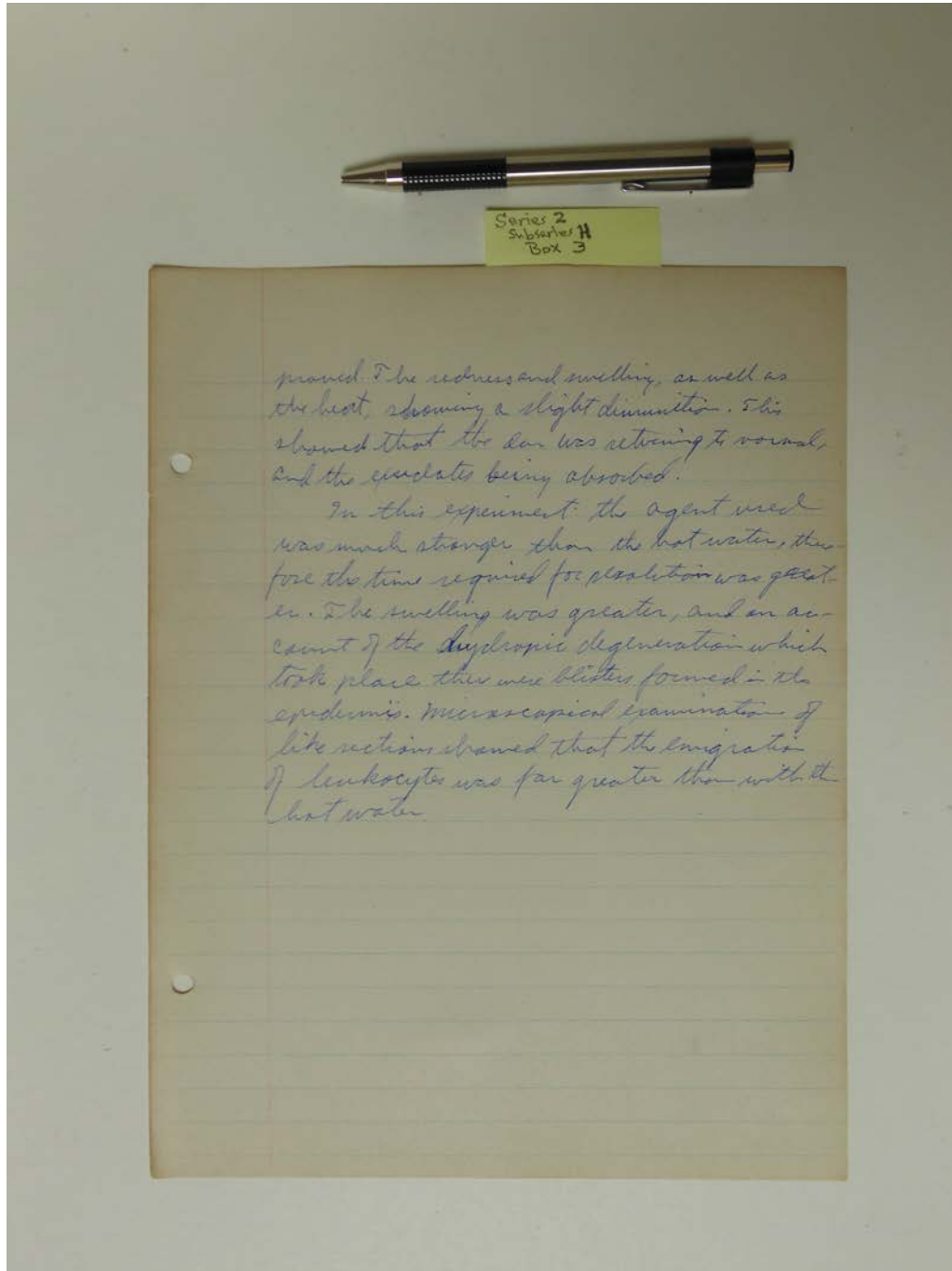
p. 2

Names:

Rabbit lab experiment

Types:

essay



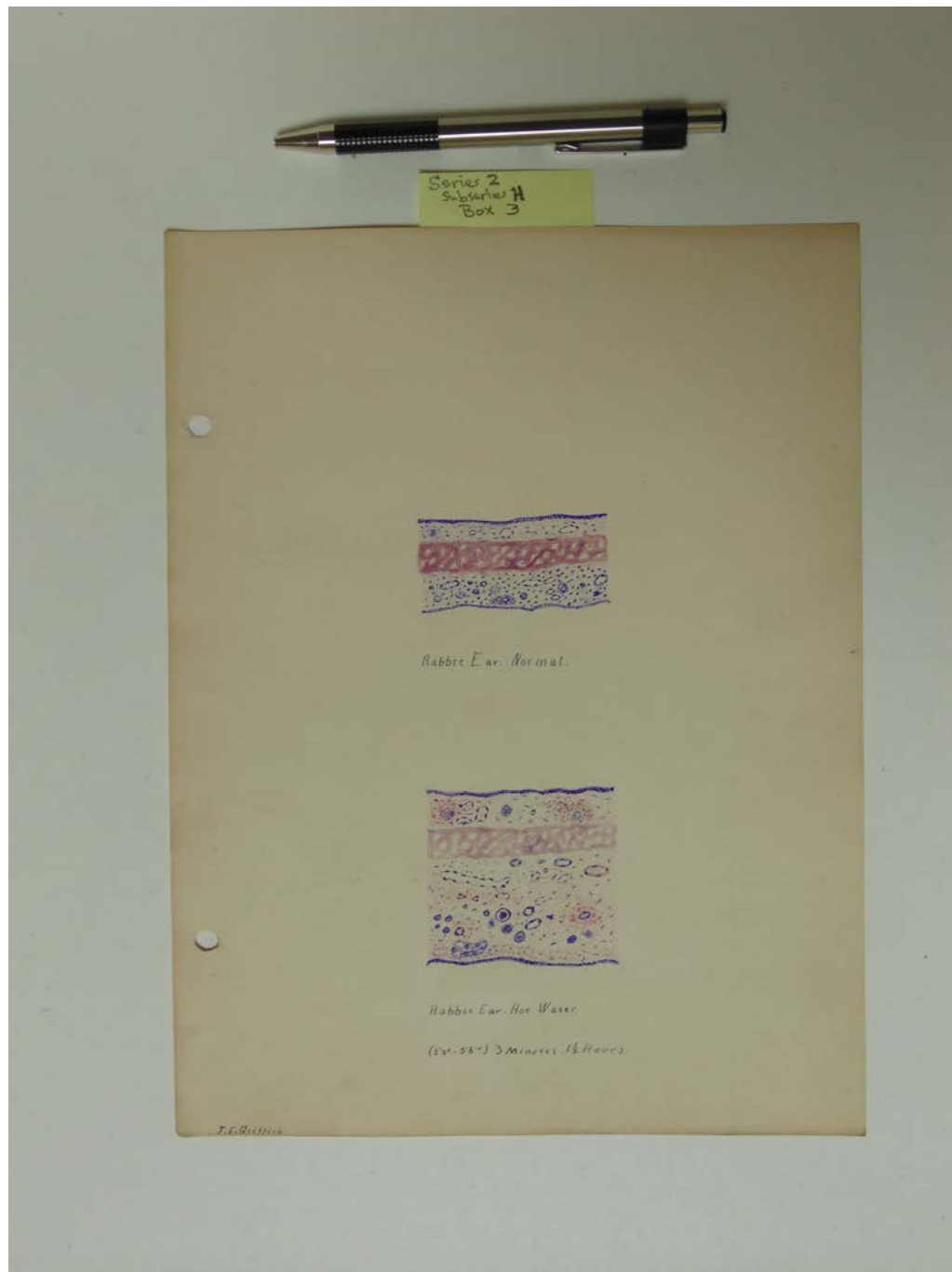
p. 3

Names:

Rabbit lab experiment

Types:

essay



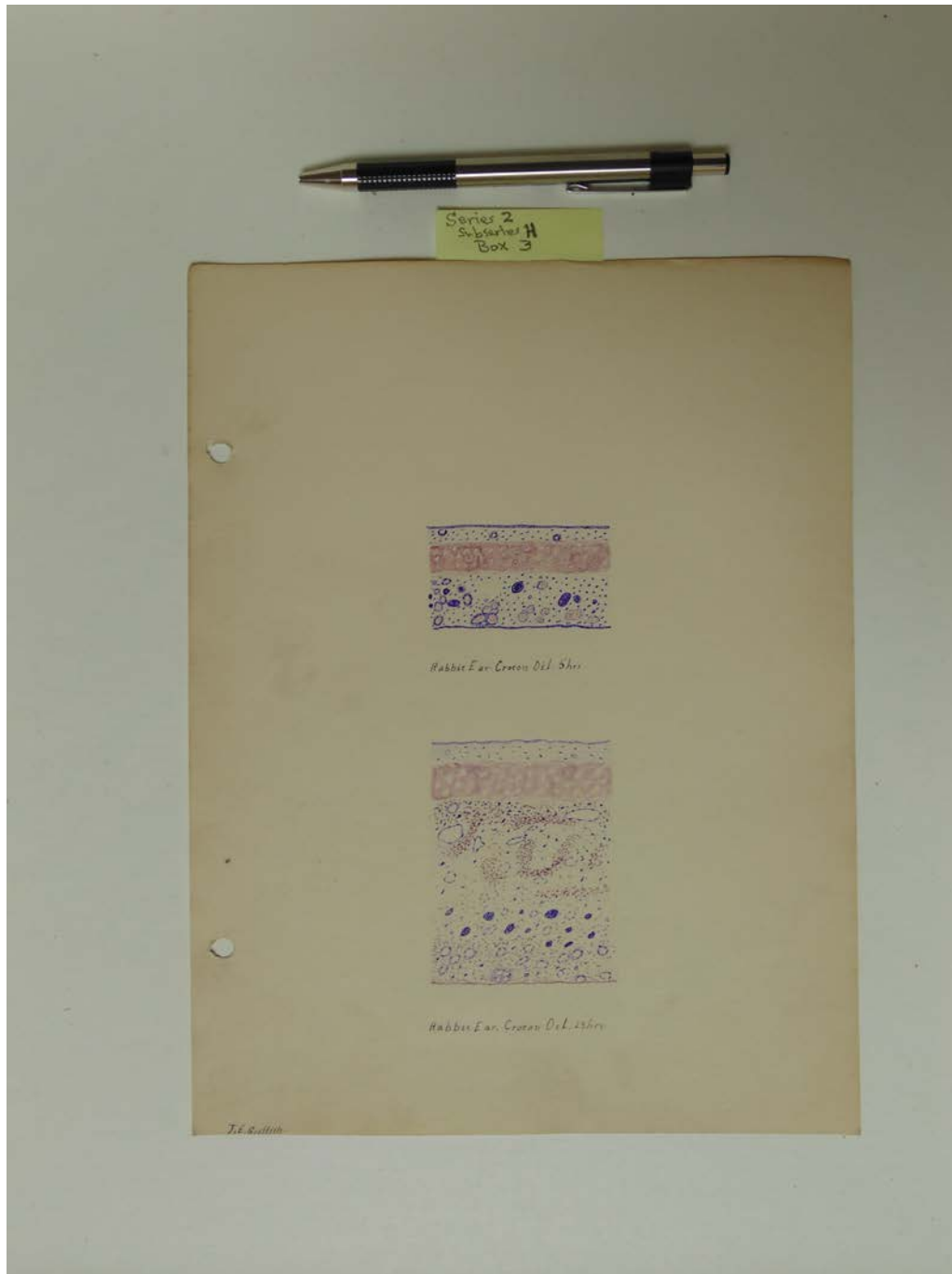
p. 4

Names:

Rabbit lab experiment

Types:

drawing



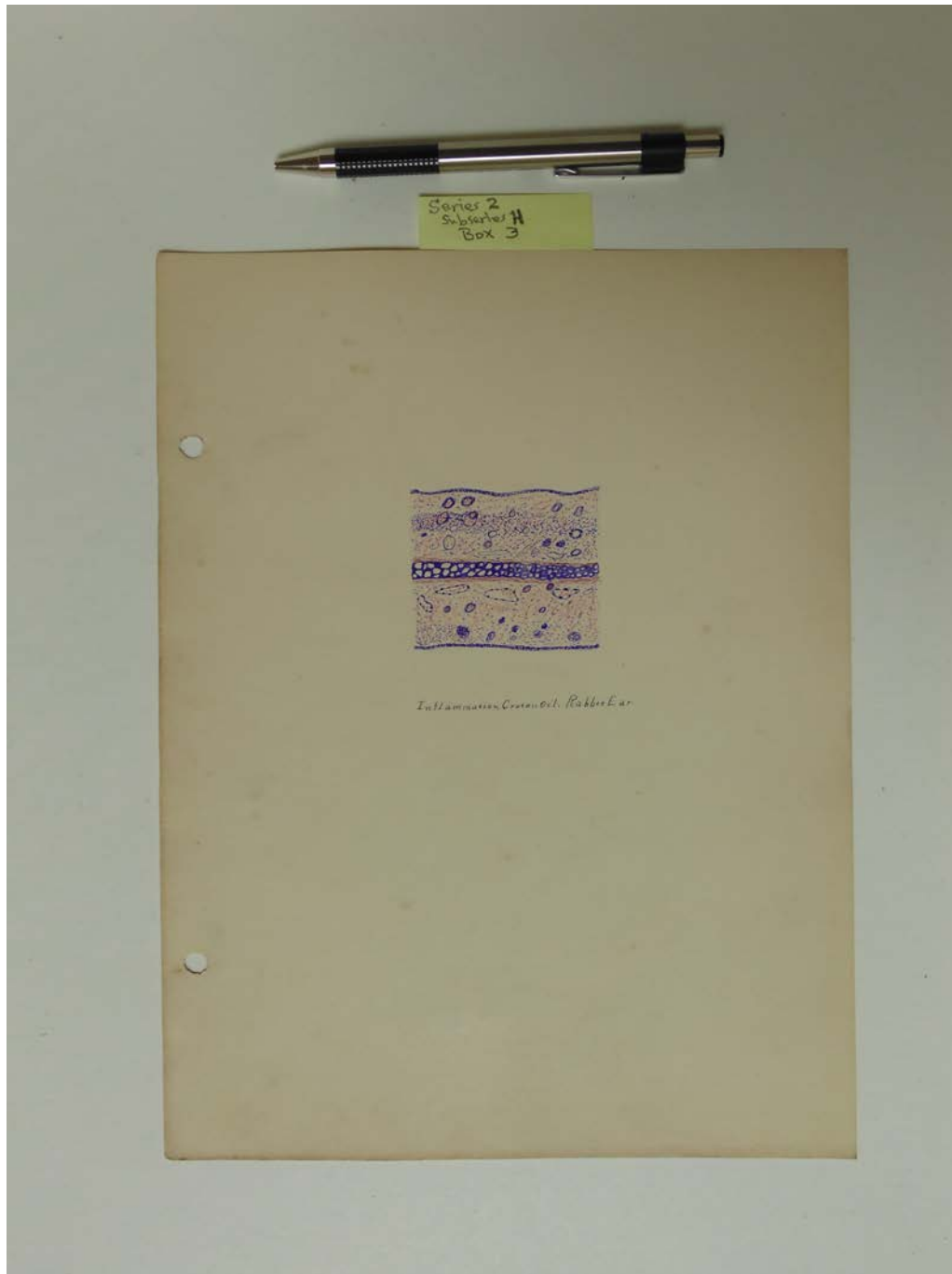
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Names:

Rabbit lab experiment

Types:

drawing



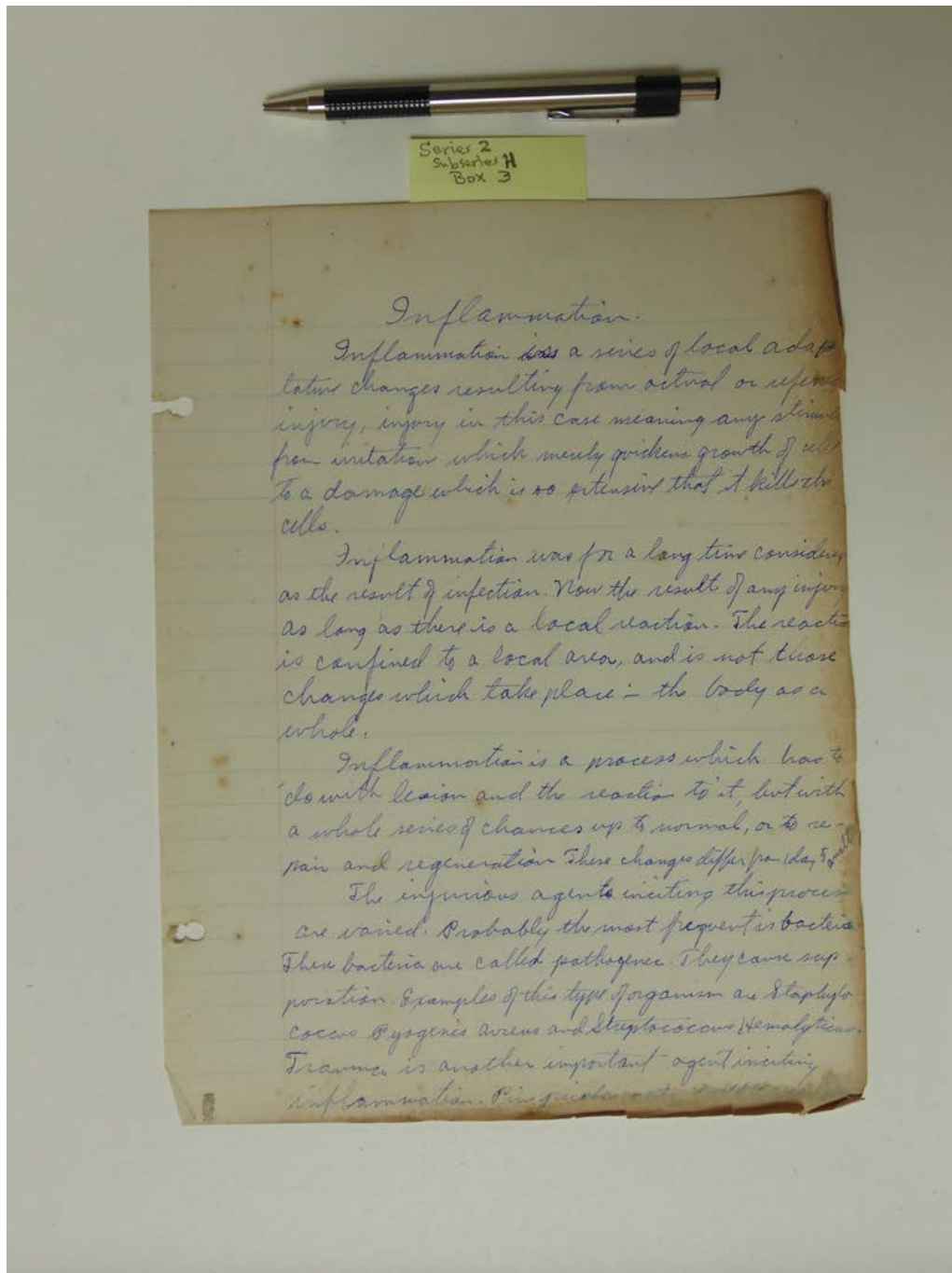
p. 6

Names:

Rabbit lab experiment

Types:

drawing



Series 2
Subseries H
Box 3

Inflammation.

Inflammation is a series of local adaptive changes resulting from actual or supposed injury, injury in this case meaning any stimulus from irritation which merely quickens growth of cells to a damage which is so extensive that it kills the cells.

Inflammation was for a long time considered as the result of infection. Now the result of any injury as long as there is a local reaction. The reaction is confined to a local area, and is not those changes which take place in the body as a whole.

Inflammation is a process which has to do with lesion and the reaction to it, but with a whole series of changes up to normal, or to repair and regeneration. These changes differ from day to day.

The injurious agents inciting this process are varied. Probably the most frequent are bacteria. These bacteria are called pathogenic. They cause suppurative. Examples of this type of organism are *Staphylococcus pyogenes aureus* and *Streptococcus hemolyticus*. Trauma is another important agent inciting inflammation. Pirqueto...

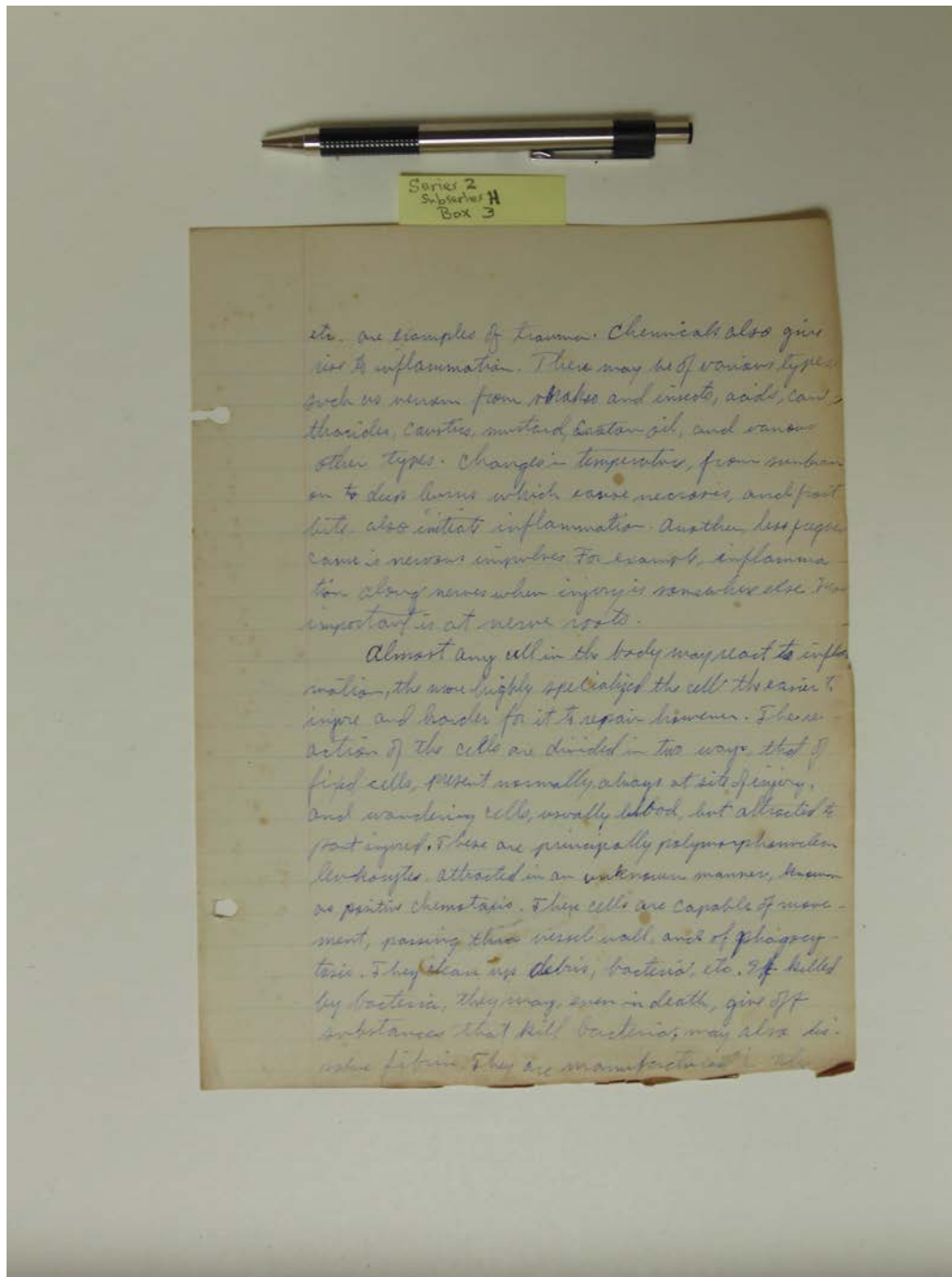
p. 1 of 8

Names:

Inflammation

Types:

essay



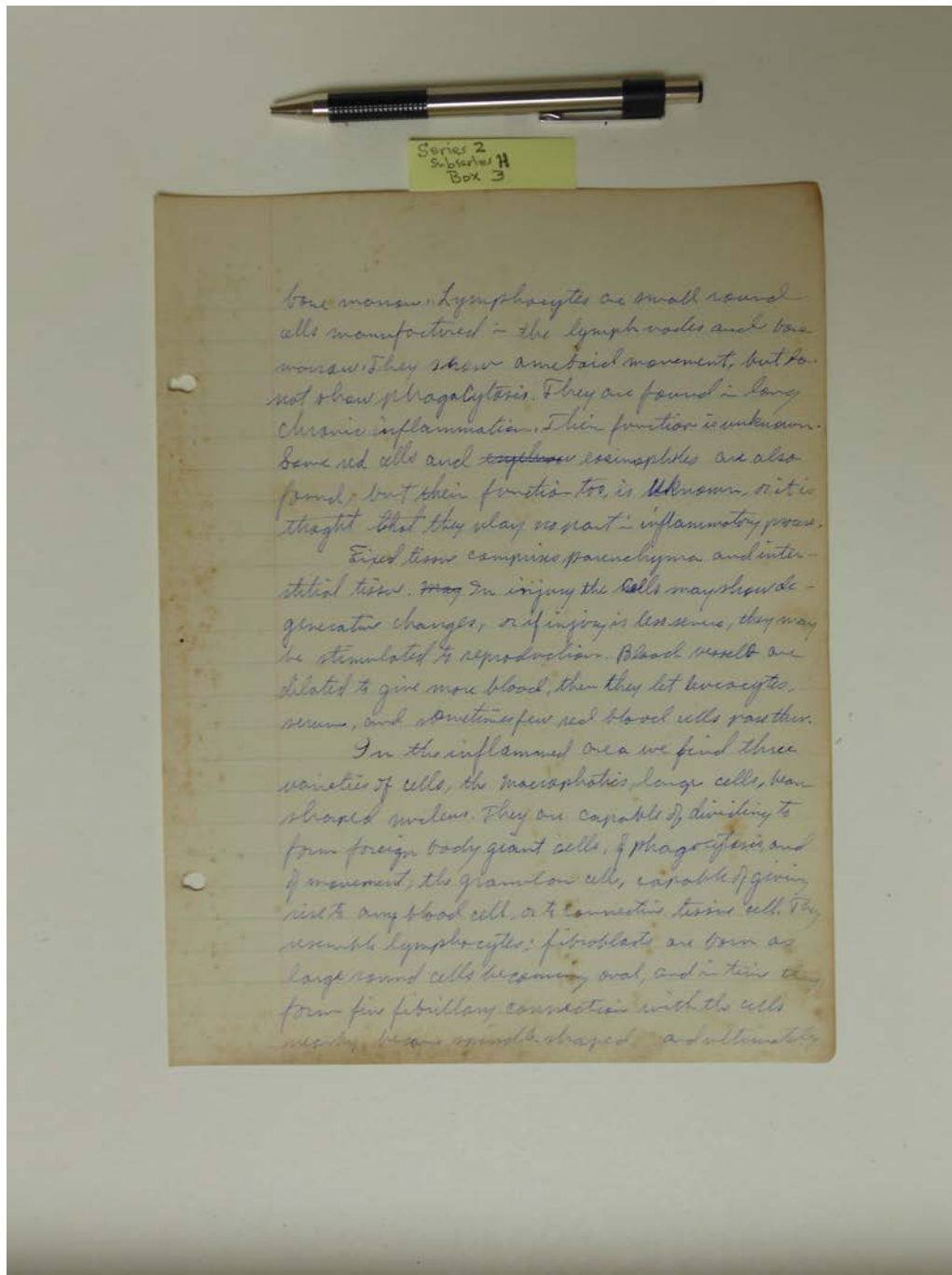
p. 2

Names:

Inflammation

Types:

essay



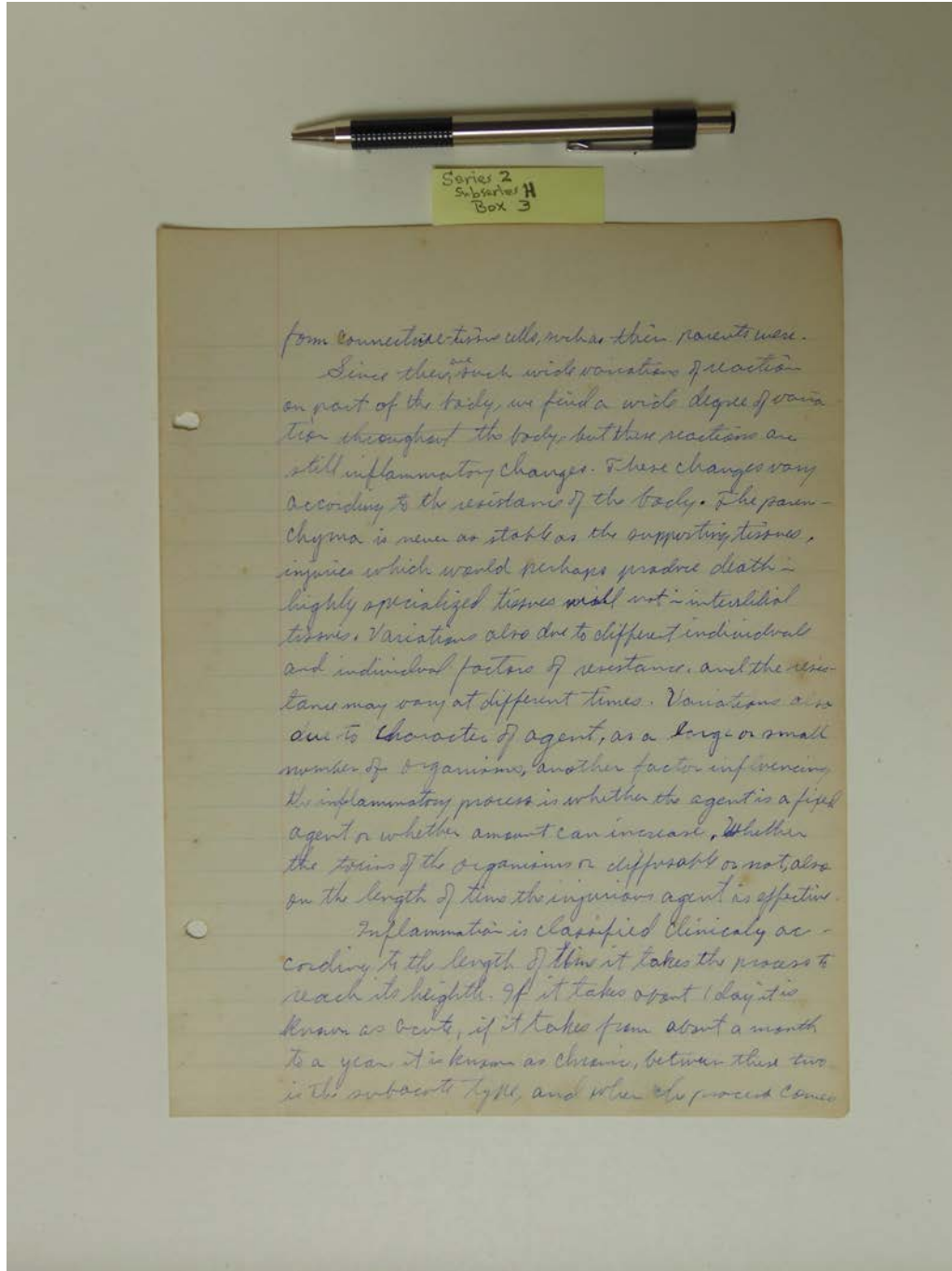
p. 3

Names:

Inflammation

Types:

essay



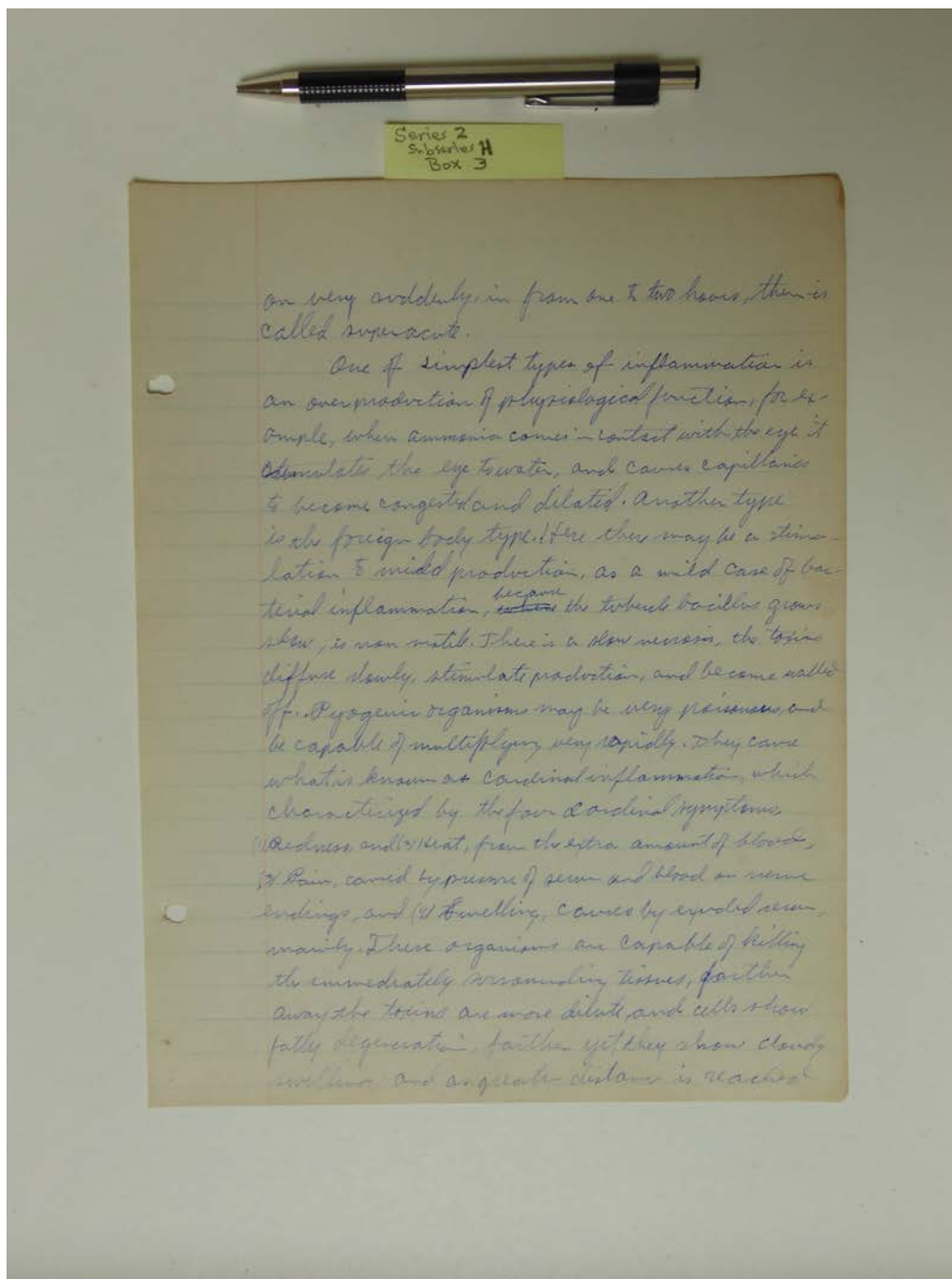
p. 4

Names:

Inflammation

Types:

essay



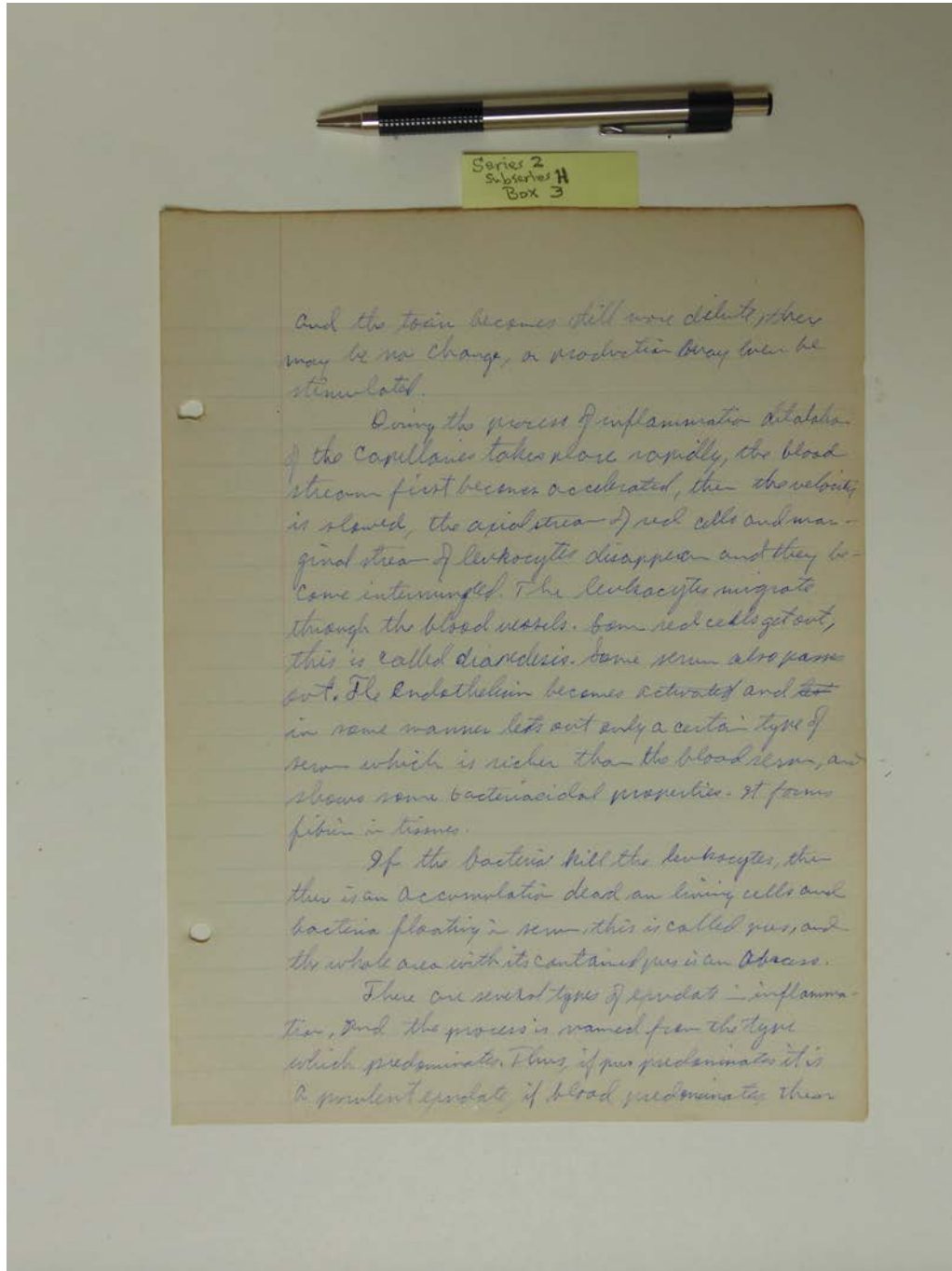
p. 5

Names:

Inflammation

Types:

essay



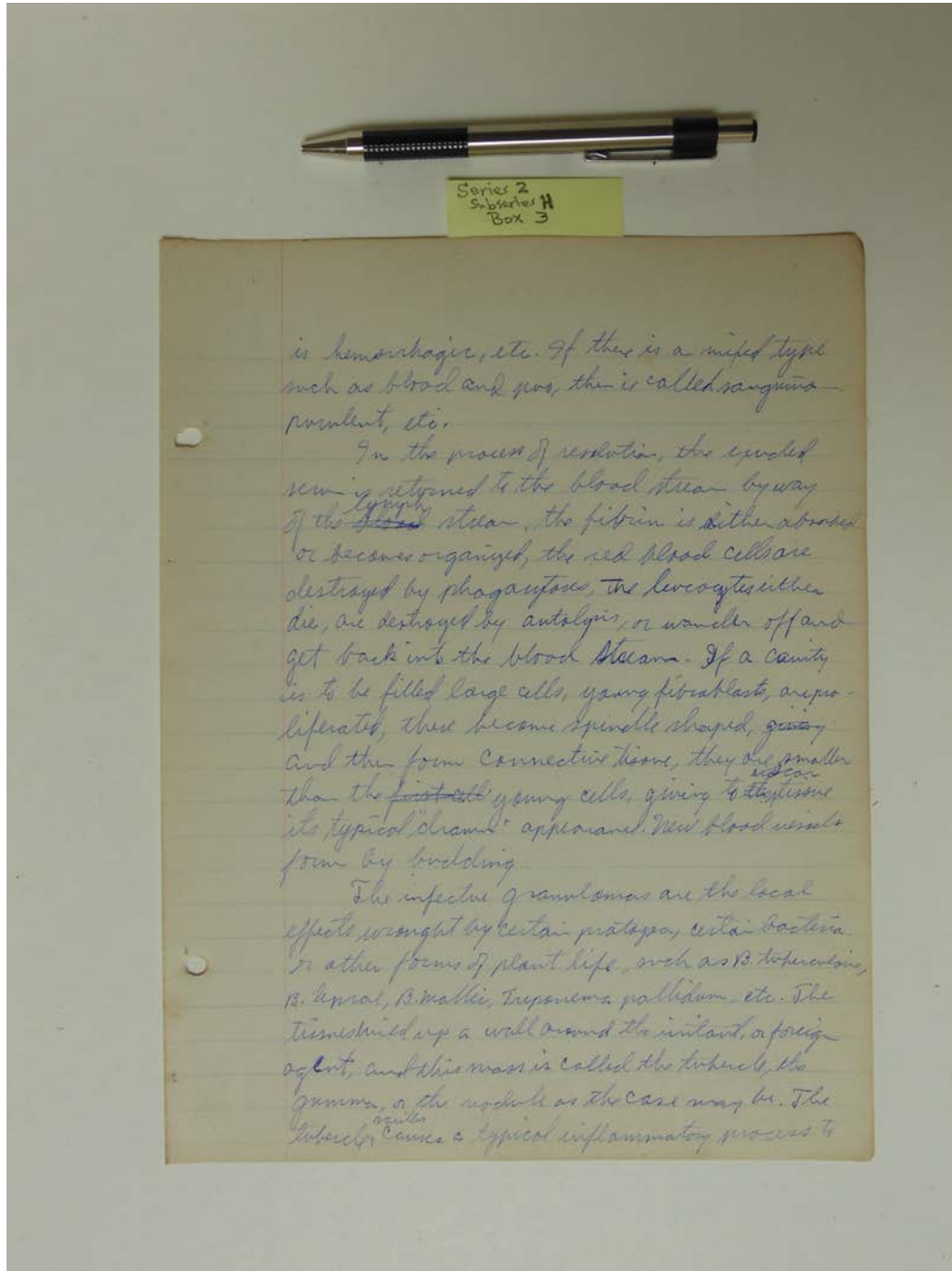
p. 6

Names:

Inflammation

Types:

essay



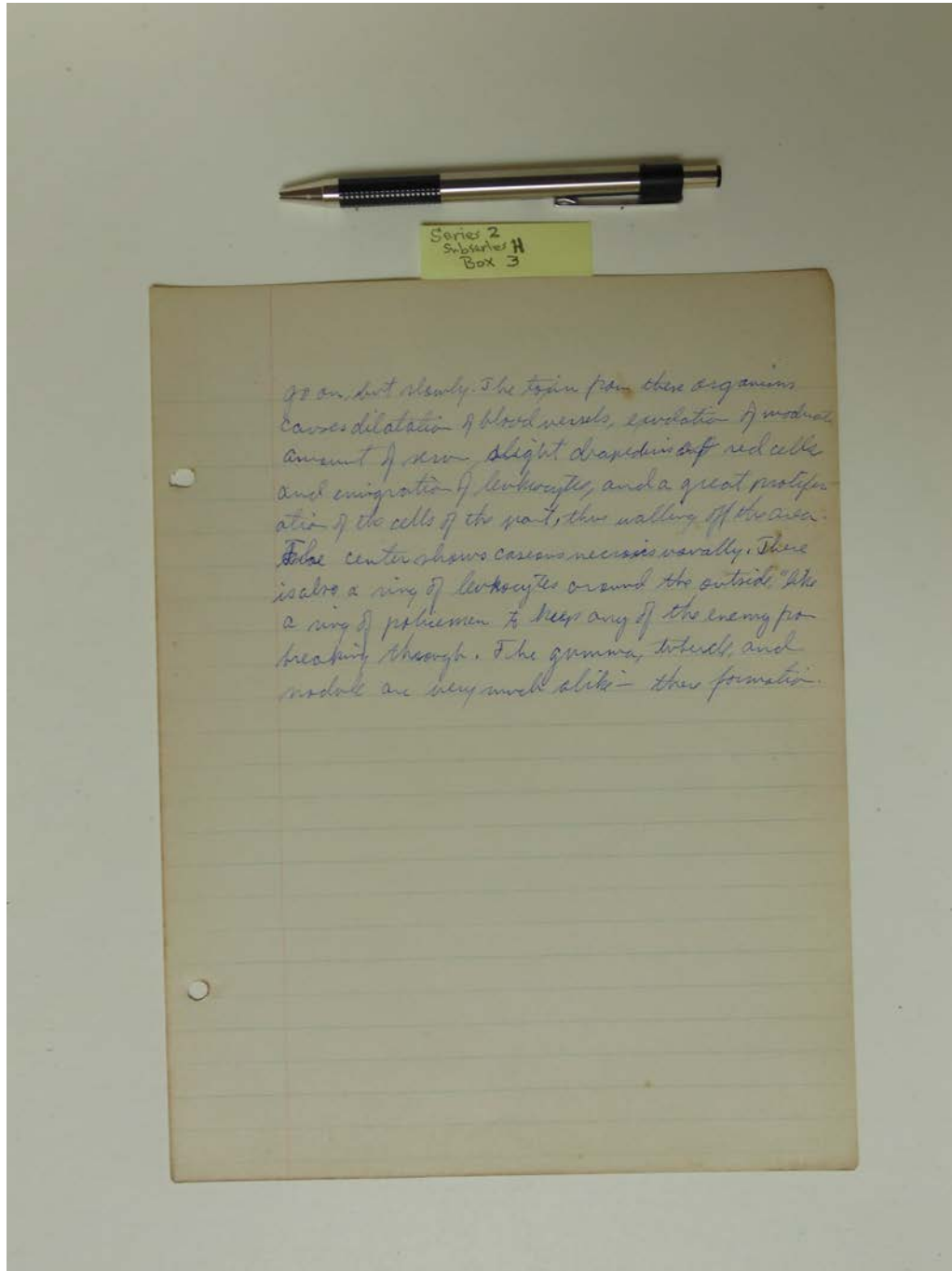
p. 7

Names:

Inflammation

Types:

essay



p. 8

Names:

Inflammation

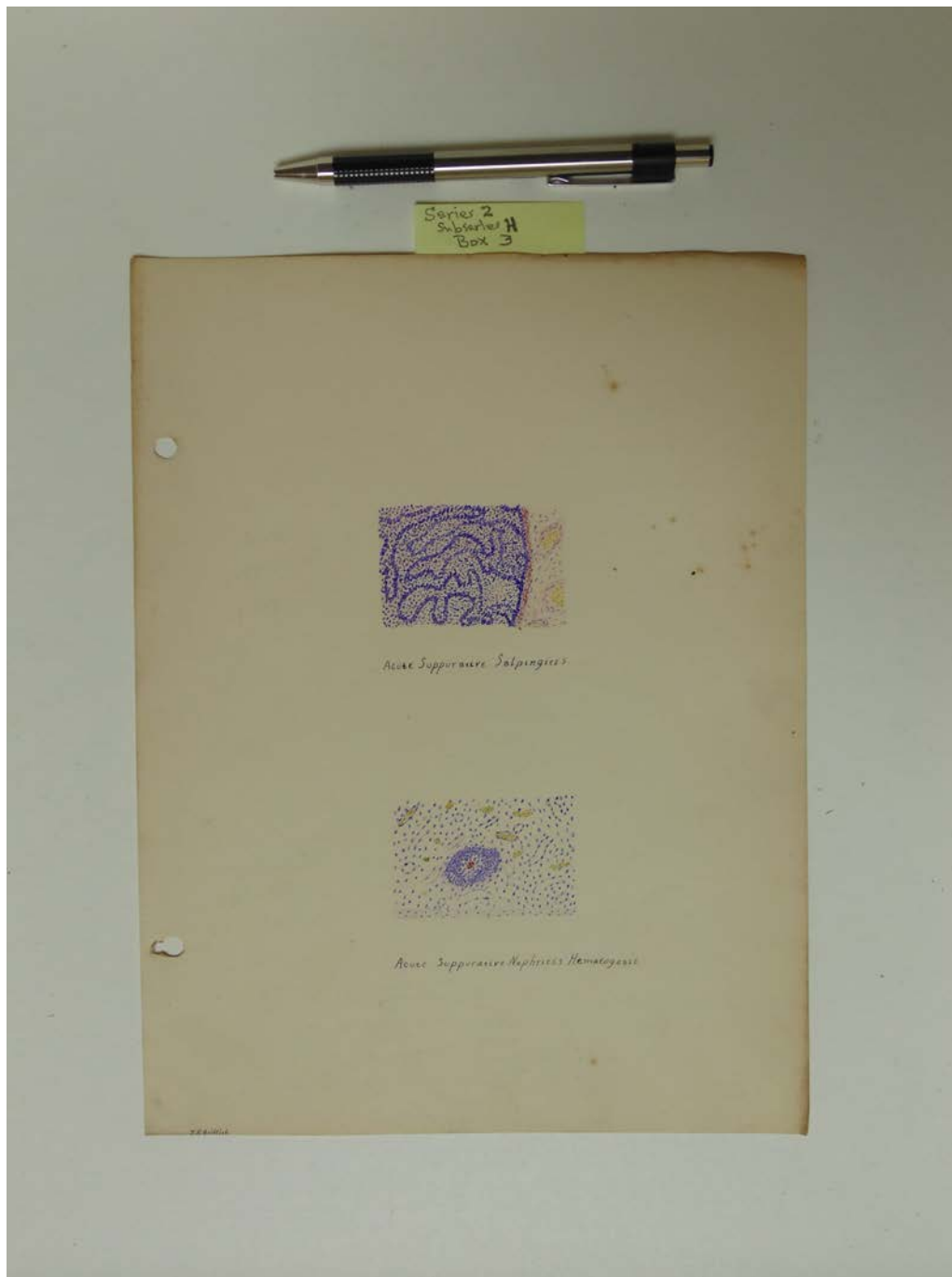
Types:

essay

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Names:

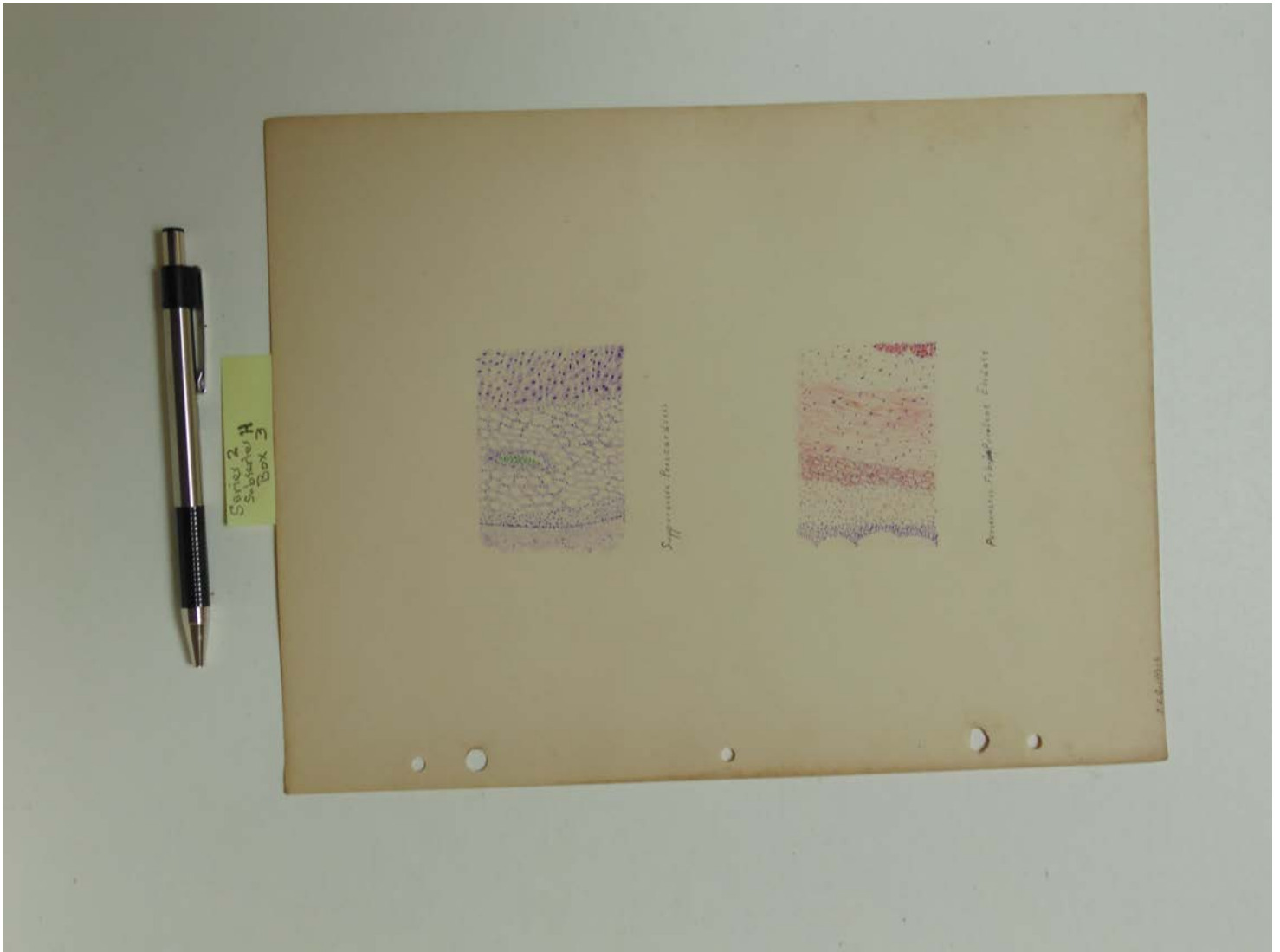
Acute Suppurative
Nephritis

Hematogenic

Acute Suppurative
Salpingitis

Types:

drawing



Names:

Peritomytis
Fibroporelent

Erudate

Suppurative
Pericarditis

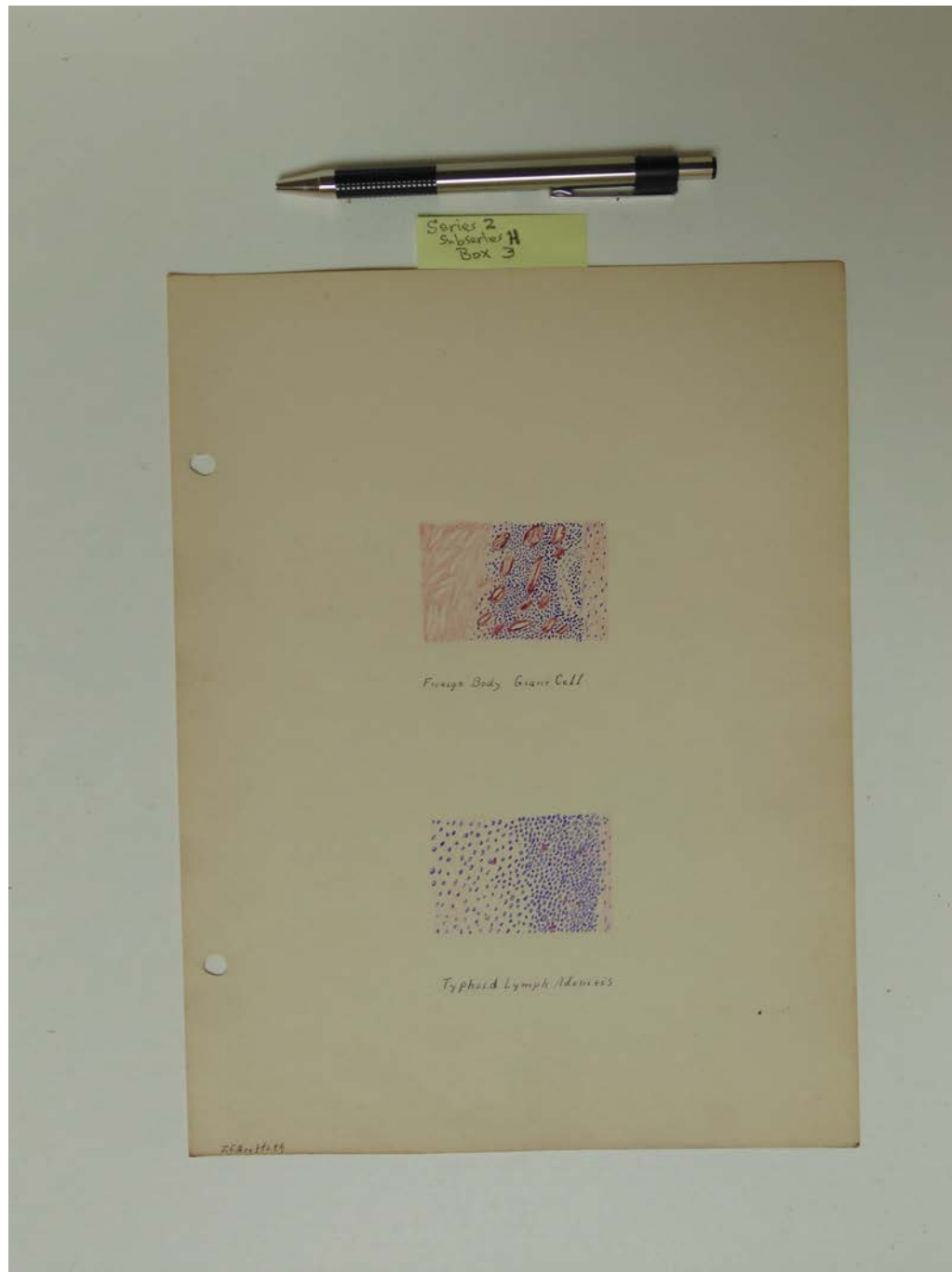
Types:

drawing

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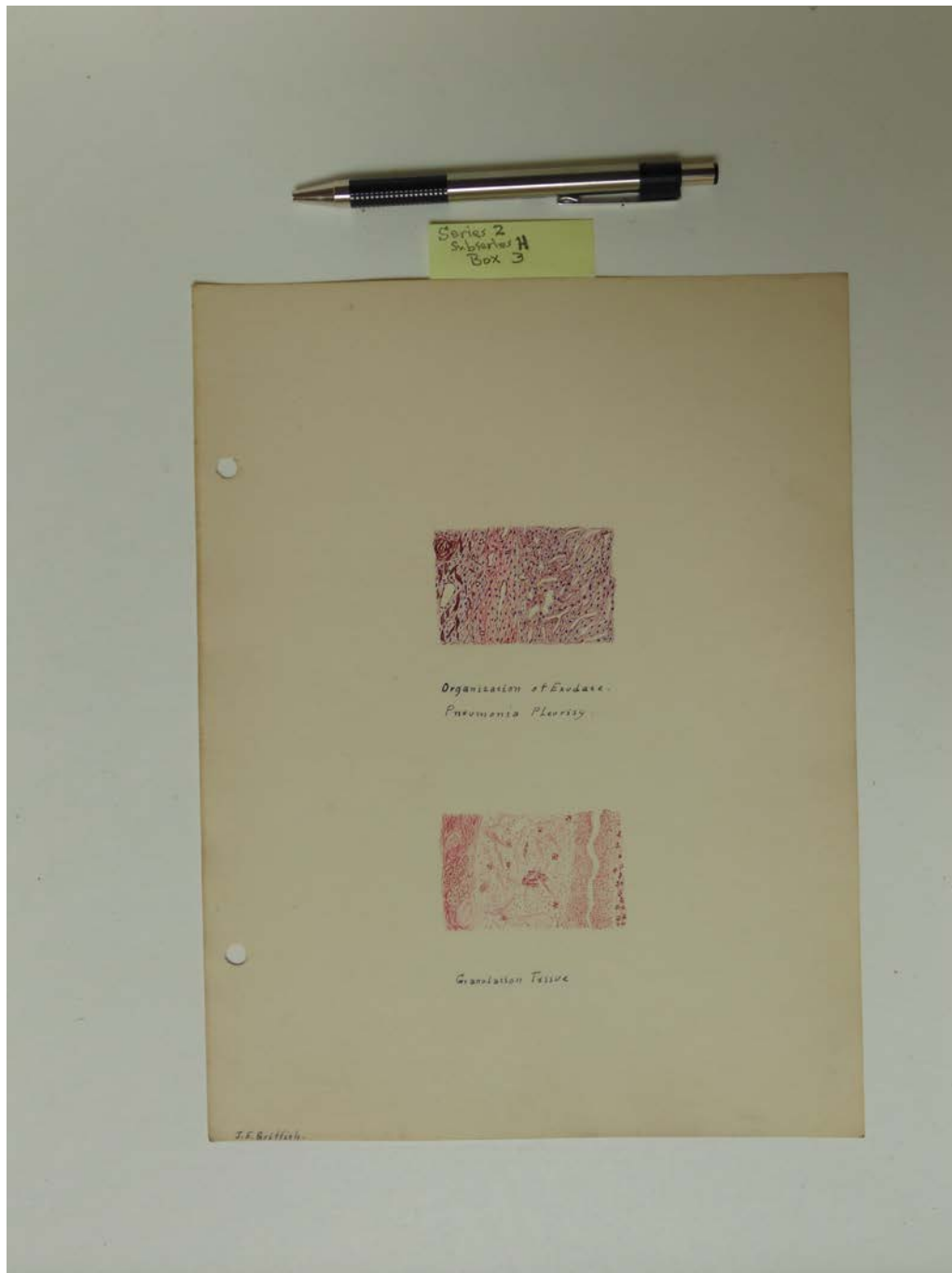
Names:

Foreign Body Giant
Cell

Typhoid Lymph
Adenitis

Types:

drawing



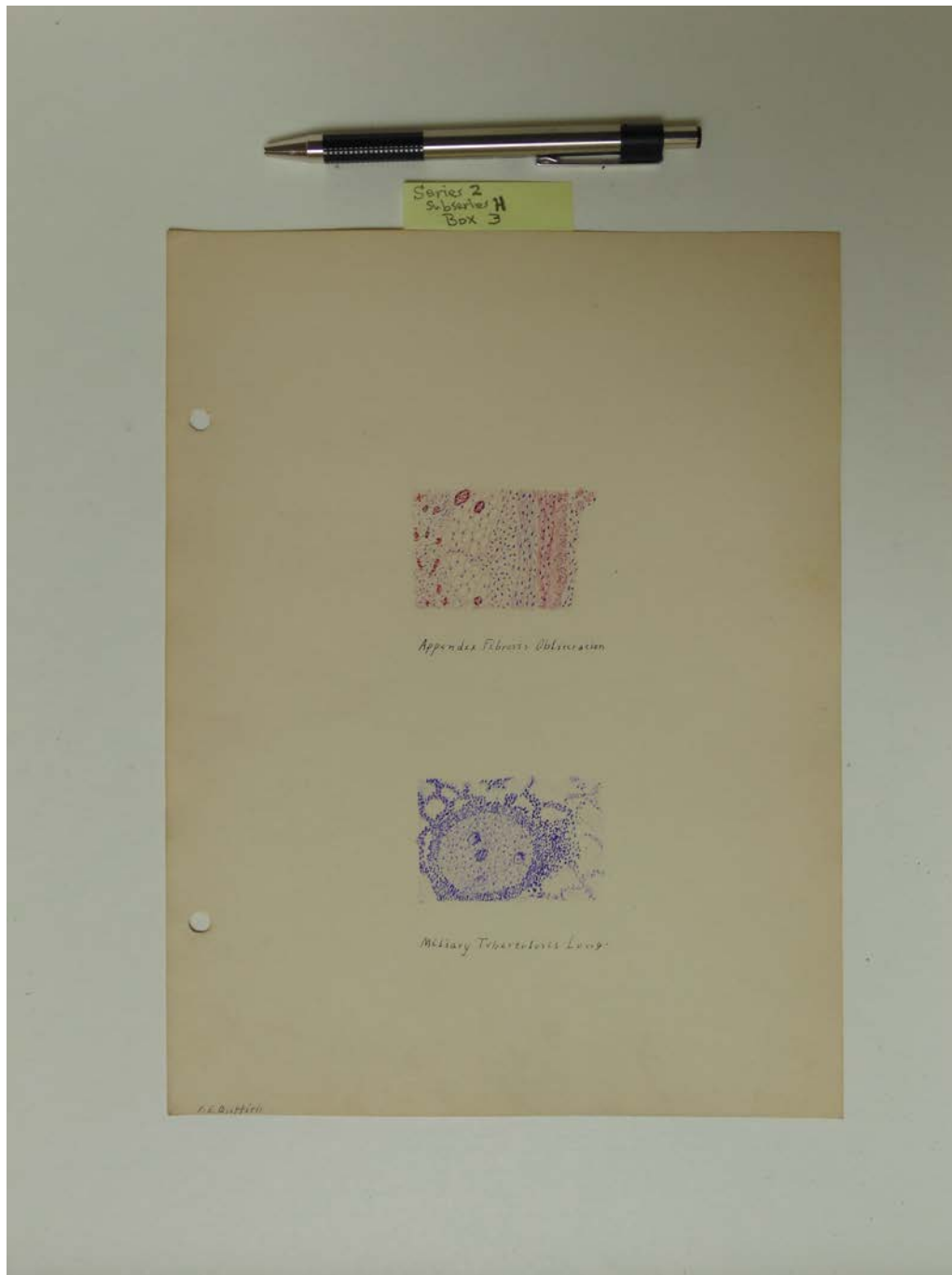
Names:

Granulation Tissue

Pneumonia Pleurisy

Types:

drawing



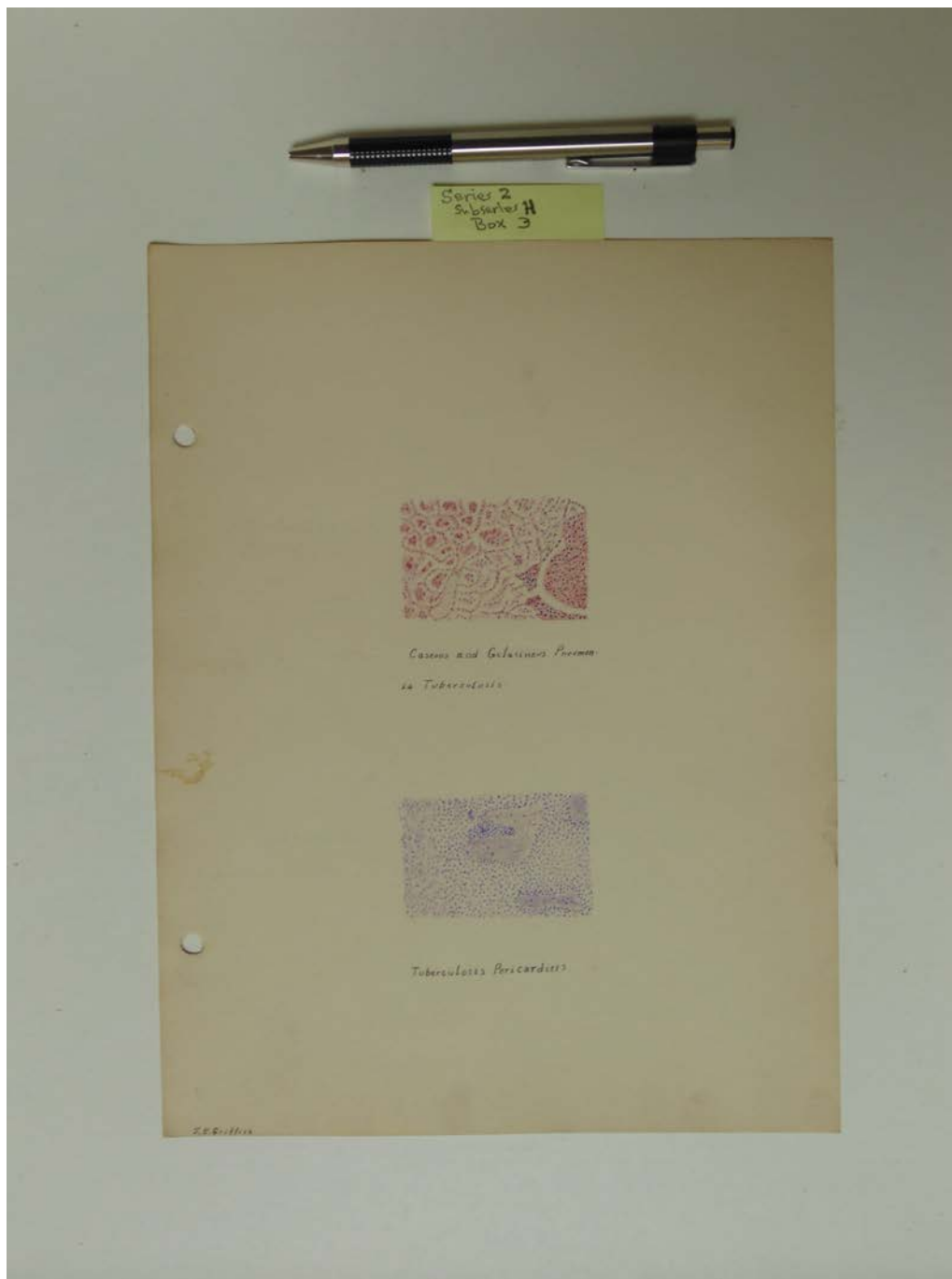
Names:

Appendix Fibrosis
Obliteration

Miliary Tuberculosis
Lung

Types:

drawing



Names:

Caseous &
Gelatinous

Pneumonia
Tuberculosis

Tuberculosis
Pericarditis

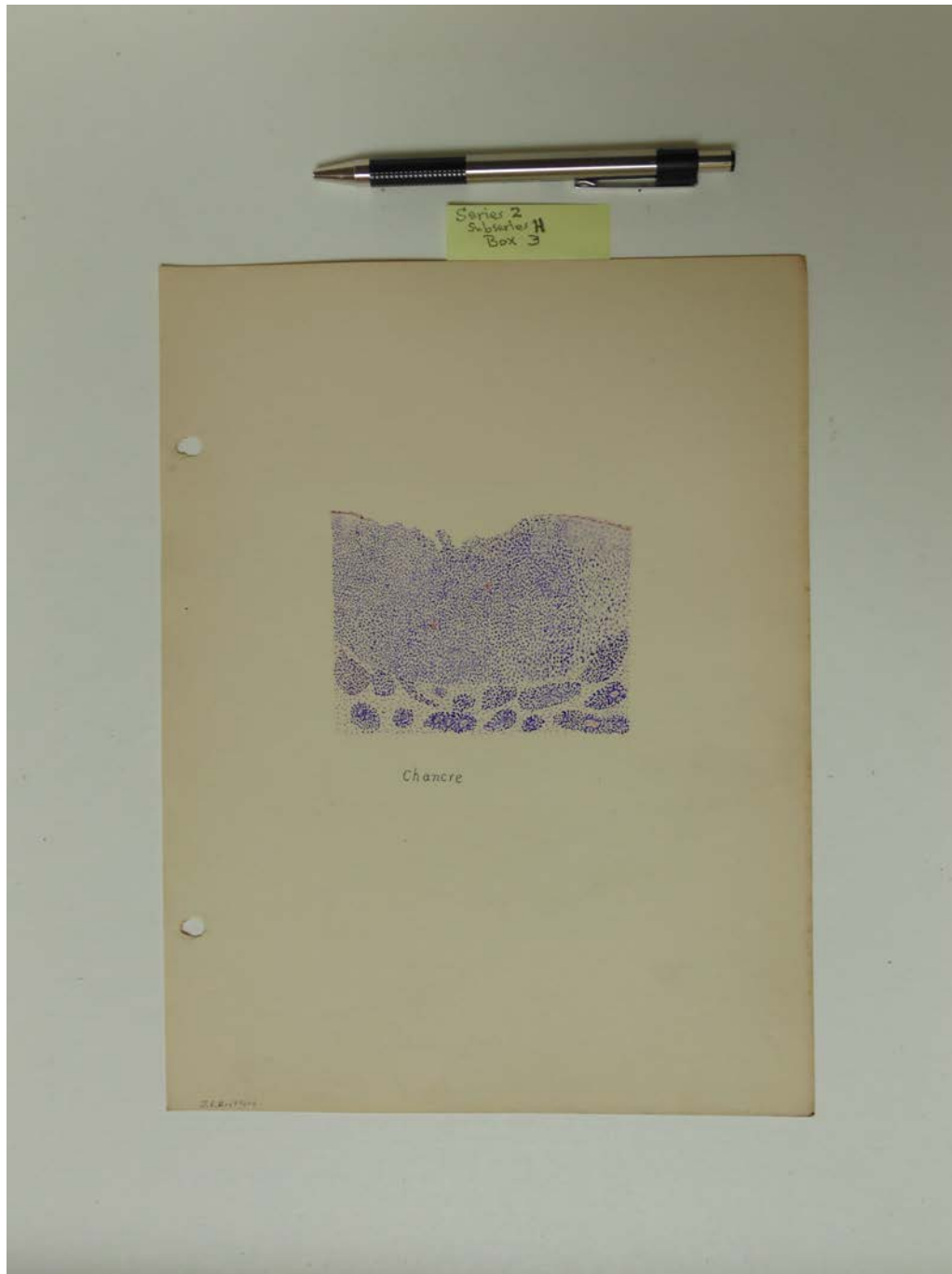
Types:

drawing

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J.E. Griffith Pathology Notes, circa 1928

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Names:

Chancre

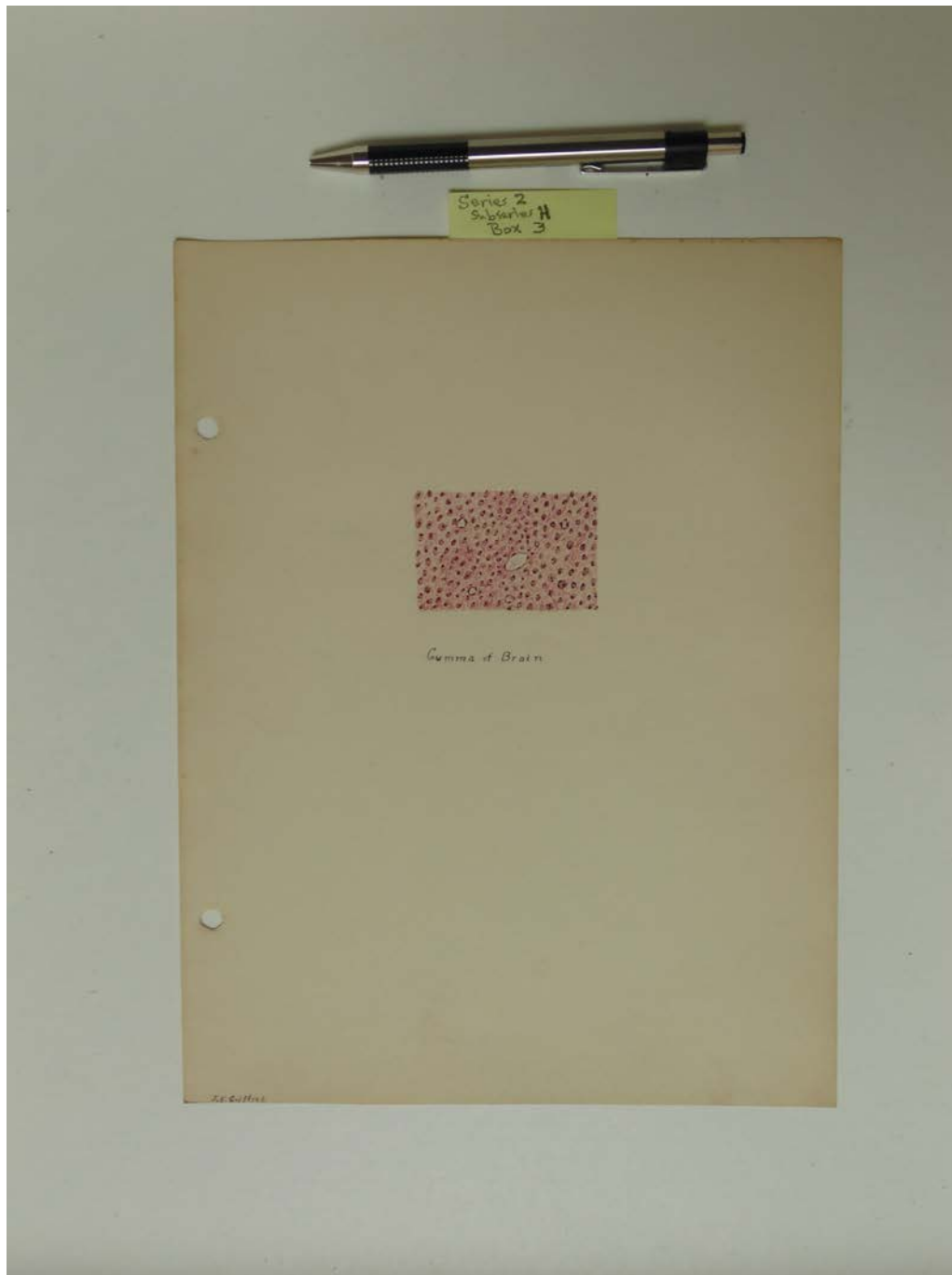
Types:

drawing

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J.E. Griffith Pathology Notes, circa 1928

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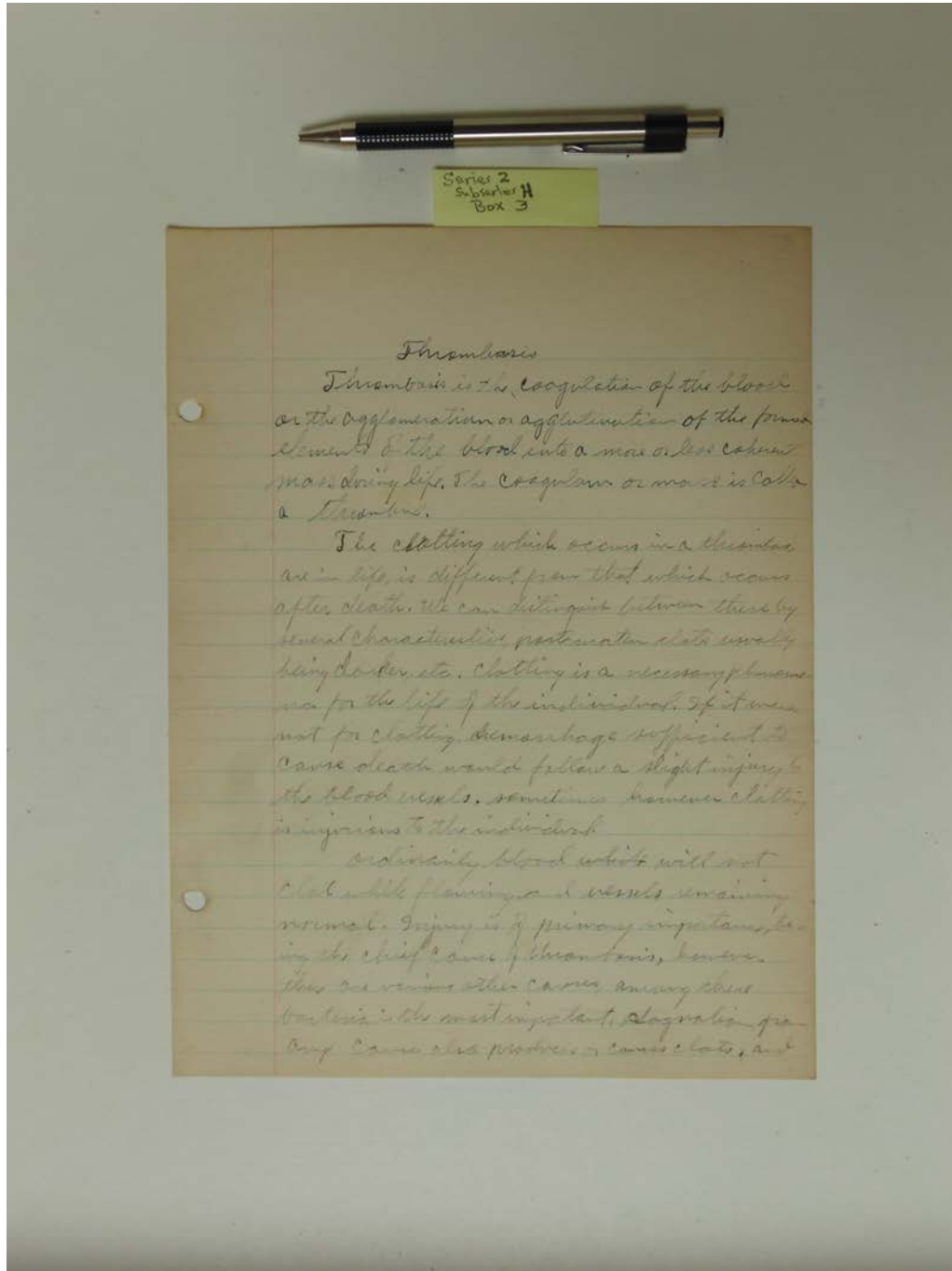


Names:

Gumma of Brain

Types:

drawing



Thrombosis

Thrombosis is the coagulation of the blood or the agglomeration or agglutination of the formed elements of the blood into a more or less coherent mass during life. The coagulum or mass is called a thrombus.

The clotting which occurs in a thrombus in life is different from that which occurs after death. We can distinguish between these by several characteristics: post-mortem clots usually being harder, etc. Clotting is a necessary phenomenon for the life of the individual. If it were not for clotting, hemorrhage sufficient to cause death would follow a slight injury to the blood vessels. Sometimes however clotting is injurious to the individual.

Ordinarily blood which will not clot while flowing and vessels remaining normal. Injury is of primary importance, being the chief cause of thrombosis, however. There are various other causes among these but the most important, stagnation from any cause also produces coagulate, and

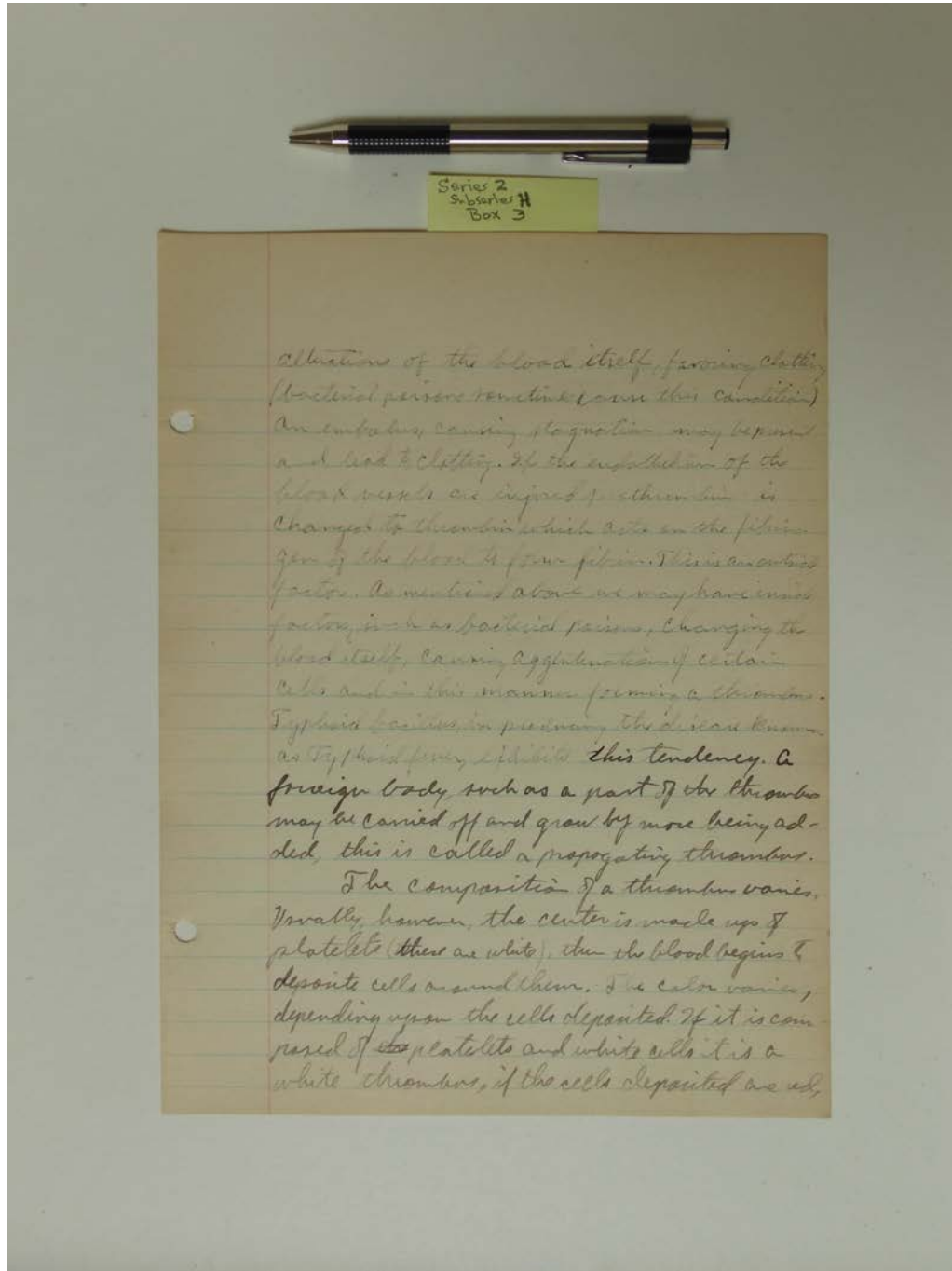
p. 1

Names:

Thrombosis

Types:

essay



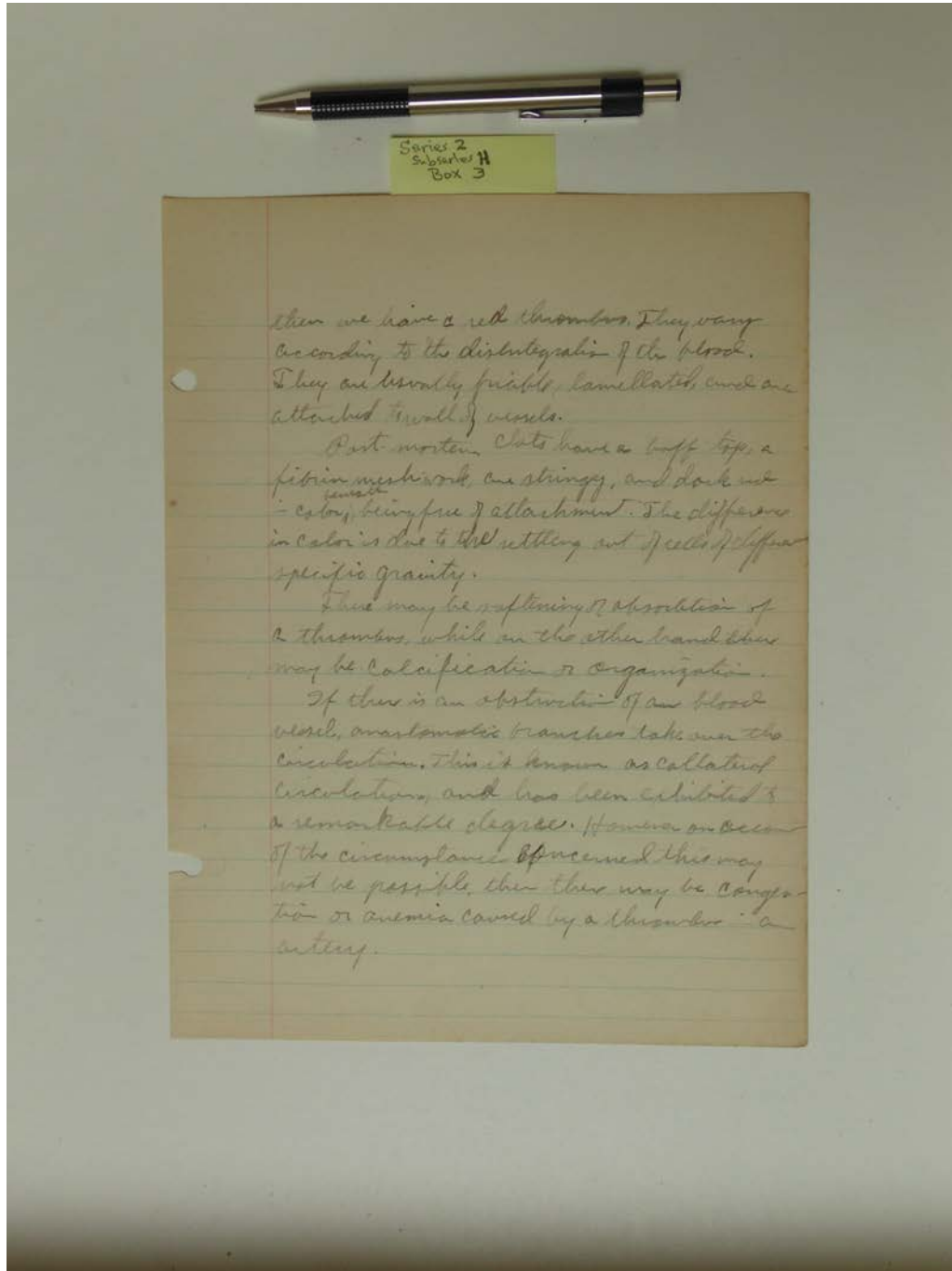
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Names:

Thrombosis

Types:

essay



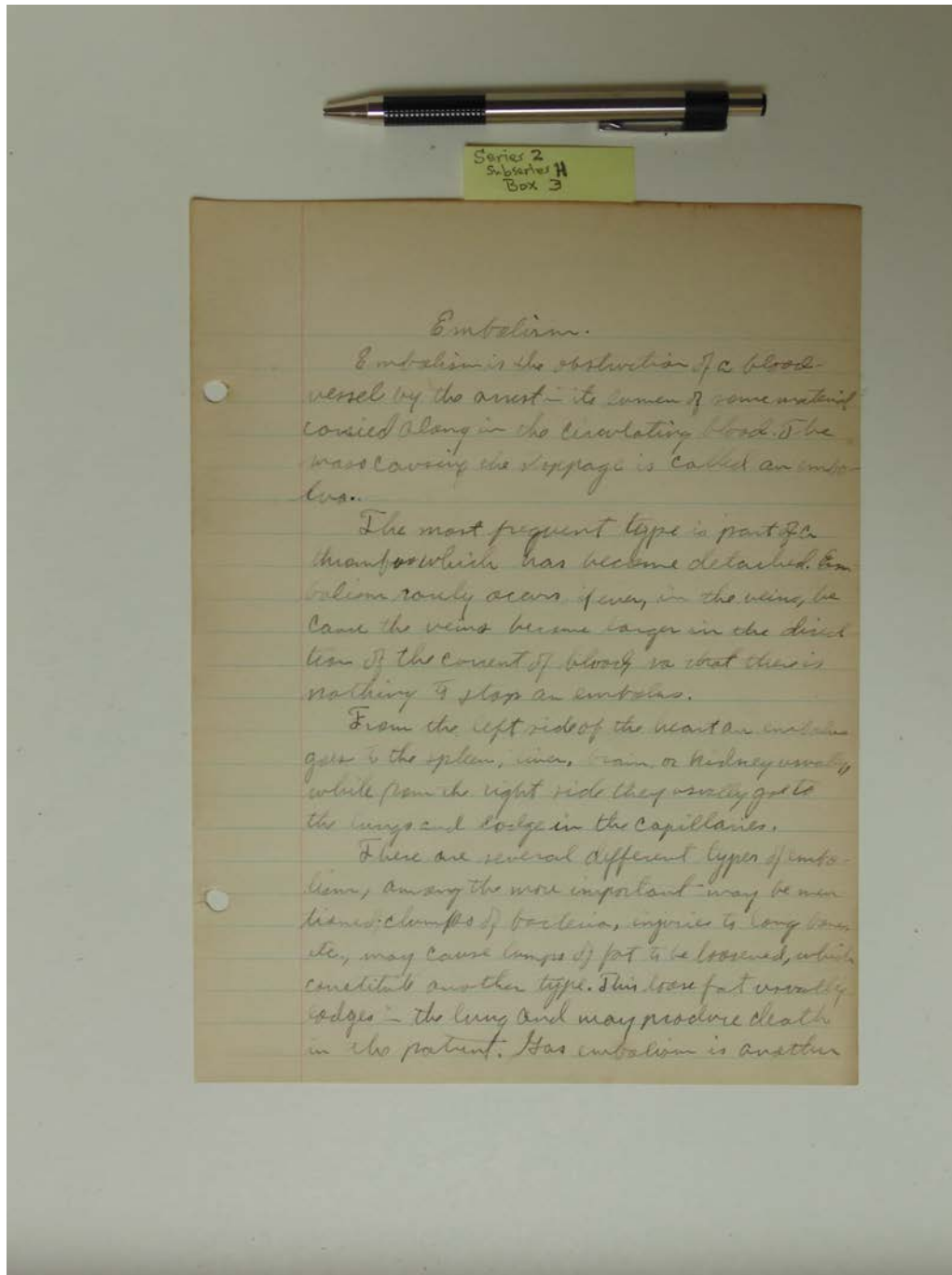
p. 3

Names:

Thrombosis

Types:

essay



Embolism.

Embolism is the obstruction of a blood vessel by the arrest in its lumen of some material carried along in the circulating blood. The mass causing the stoppage is called an embolus.

The most frequent type is part of a thrombus which has become detached. Embolism rarely occurs in veins, in the veins because the veins become larger in the distal than of the course of blood, so that there is nothing to stop an embolus.

From the left side of the heart an embolus goes to the spleen, liver, brain or kidney usually, while from the right side they usually go to the lungs and lodge in the capillaries.

There are several different types of embolism, among the more important may be mentioned: clumps of bacteria, injuries to long bones, etc., may cause lumps of fat to be loosened, which constitute another type. This loose fat usually lodges in the lung and may produce death in the patient. Gas embolism is another

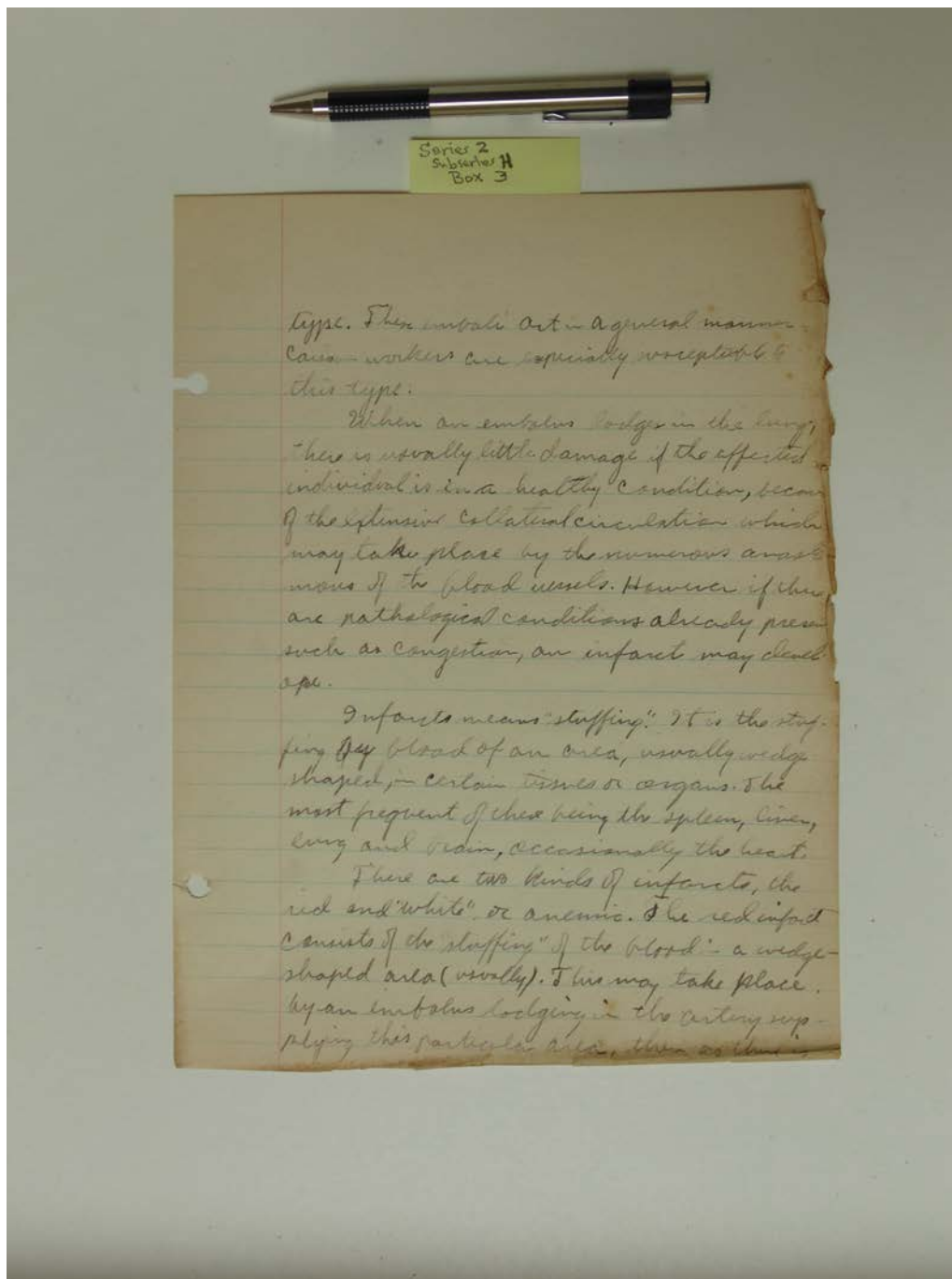
p. 1

Names:

Embolism

Types:

essay



type. These emboli act in a general manner. Cases - workers are especially susceptible to this type.

When an embolus lodges in the lung, there is usually little damage if the affected individual is in a healthy condition, because of the extensive collateral circulation which may take place by the numerous anastomoses of the blood vessels. However if there are pathological conditions already present such as congestion, an infarct may develop.

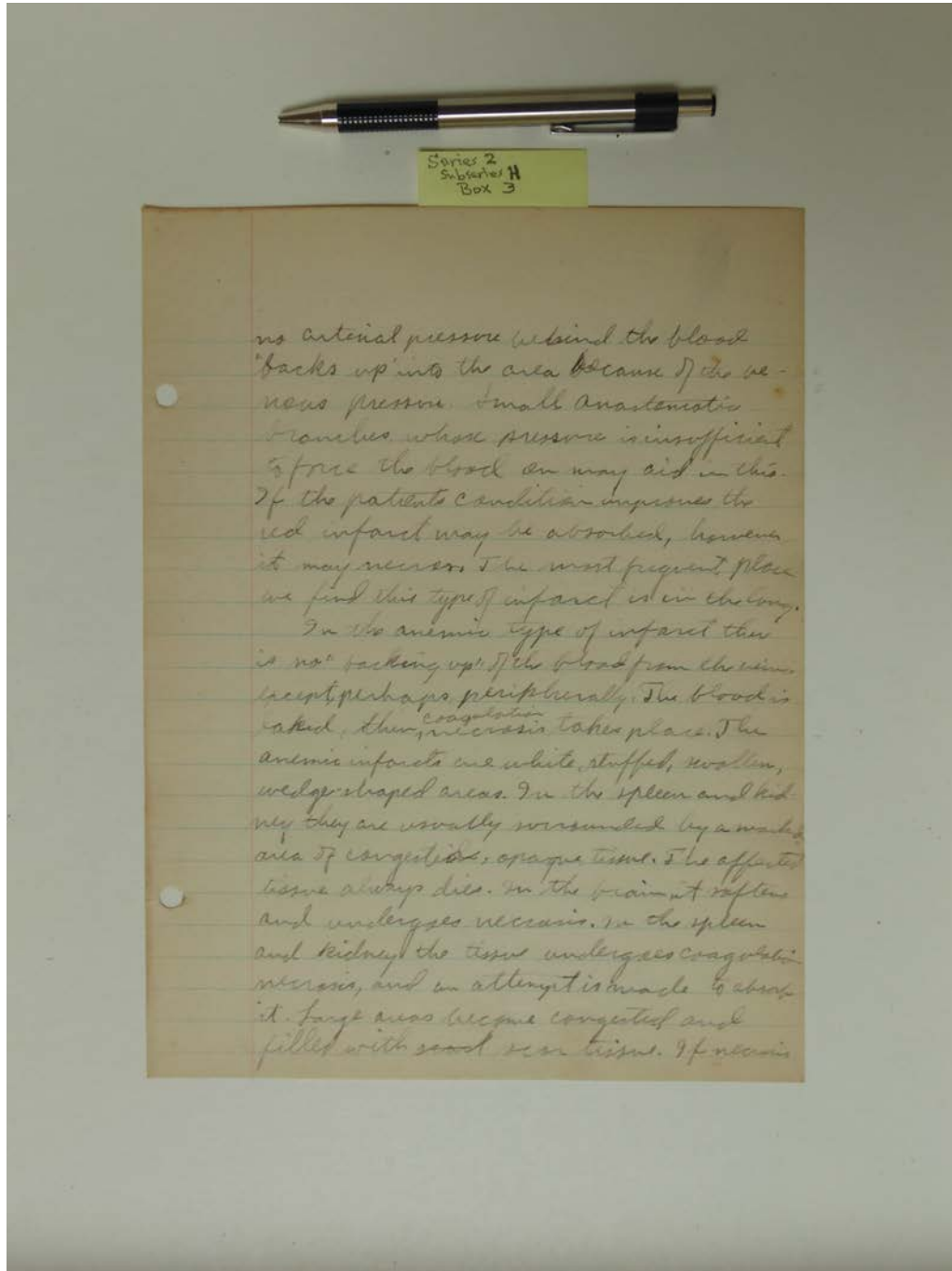
Infarct means "stuffing". It is the stuffing of blood of an area, usually wedge shaped, in certain tissues or organs. The most frequent of these being the spleen, liver, lung and brain, occasionally the heart.

There are two kinds of infarcts, the red and "white" or anemic. The red infarct consists of the "stuffing" of the blood - a wedge shaped area (usually). This may take place by an embolus lodging in the artery supplying this particular area, then as time

p. 2

Names:
Embolism

Types:
essay



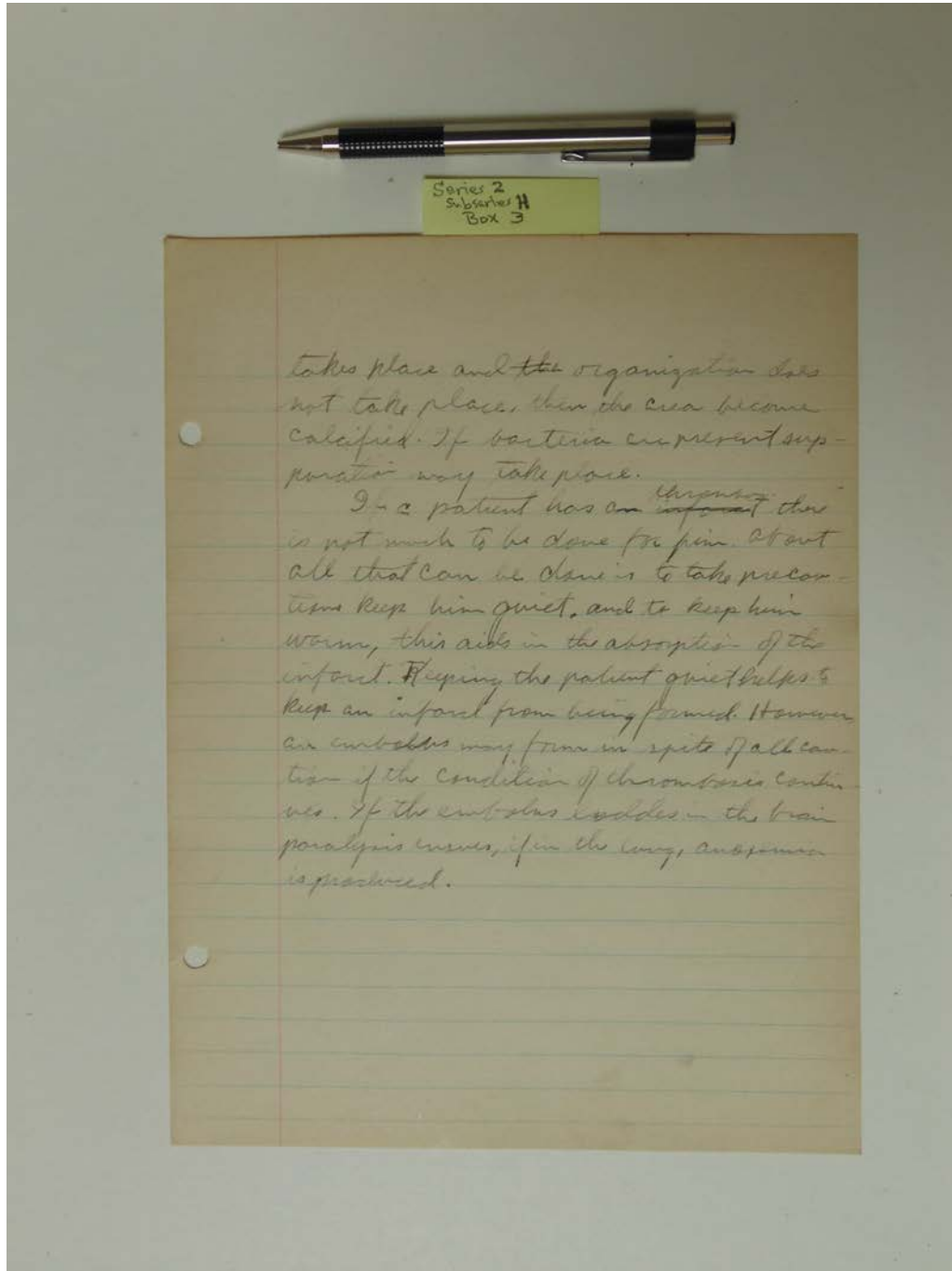
p. 3

Names:

Embolism

Types:

essay



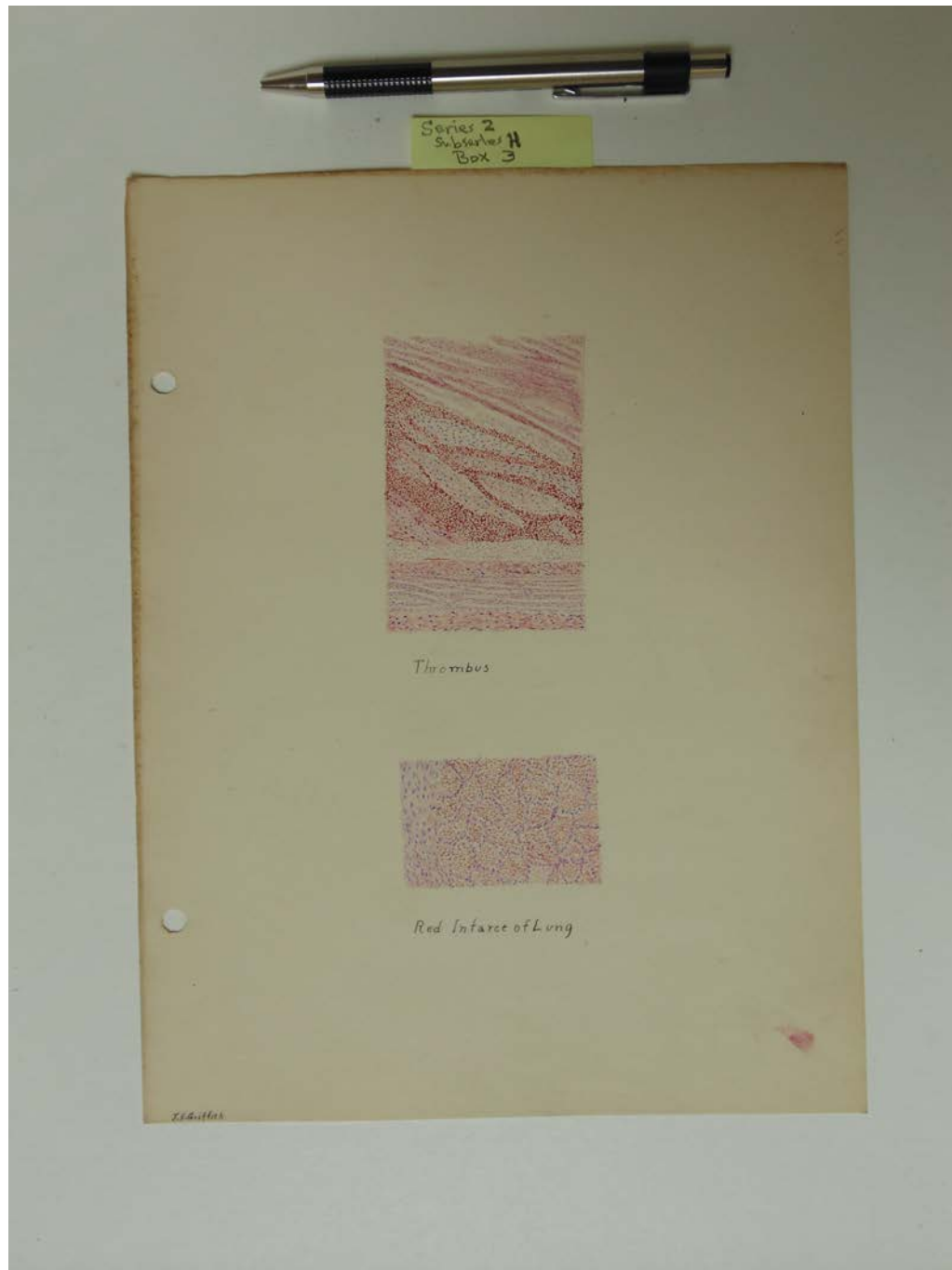
p. 4

Names:

Embolism

Types:

essay



Names:

Red Infarct of Lung

Thrombus

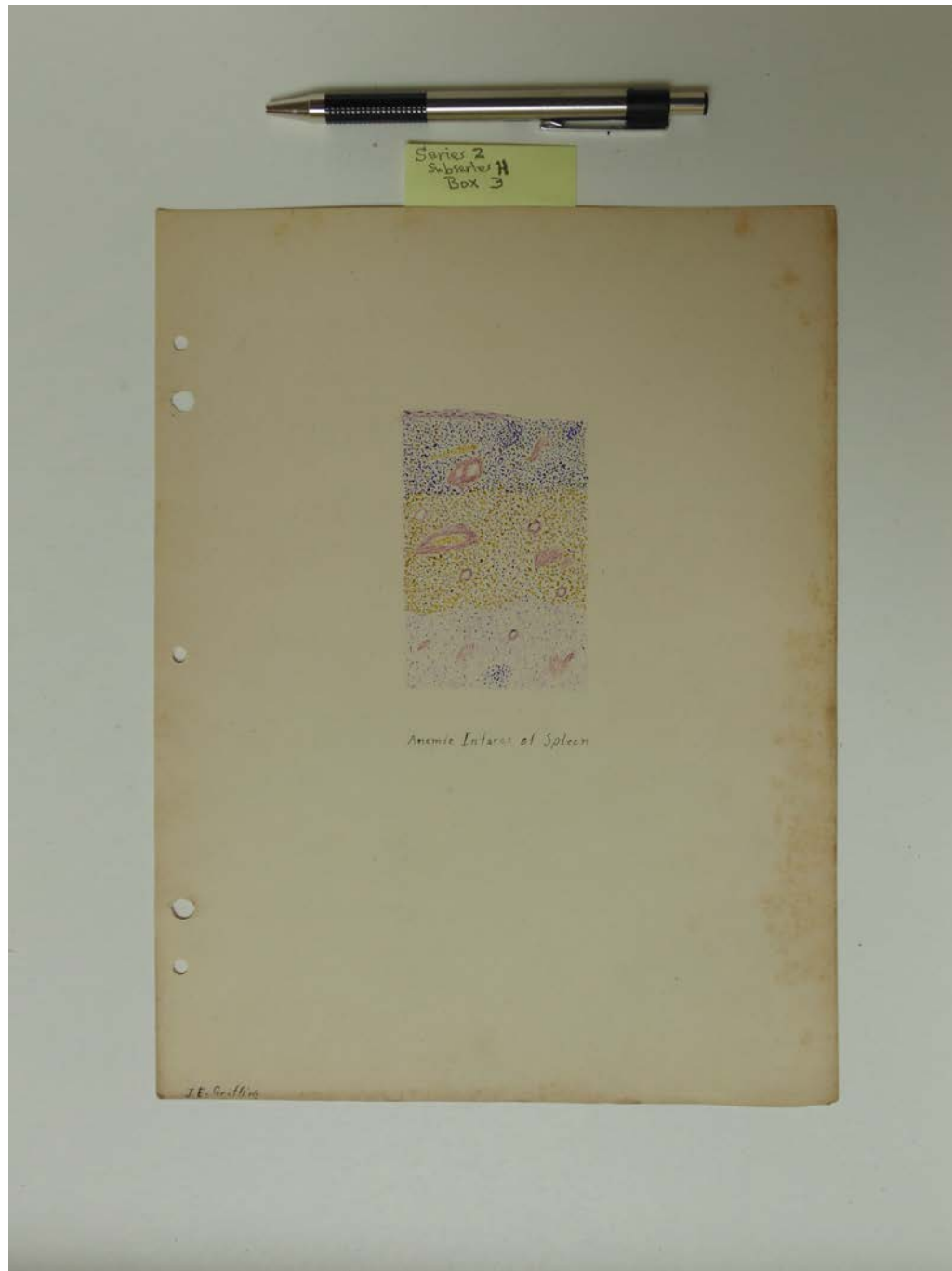
Types:

drawing

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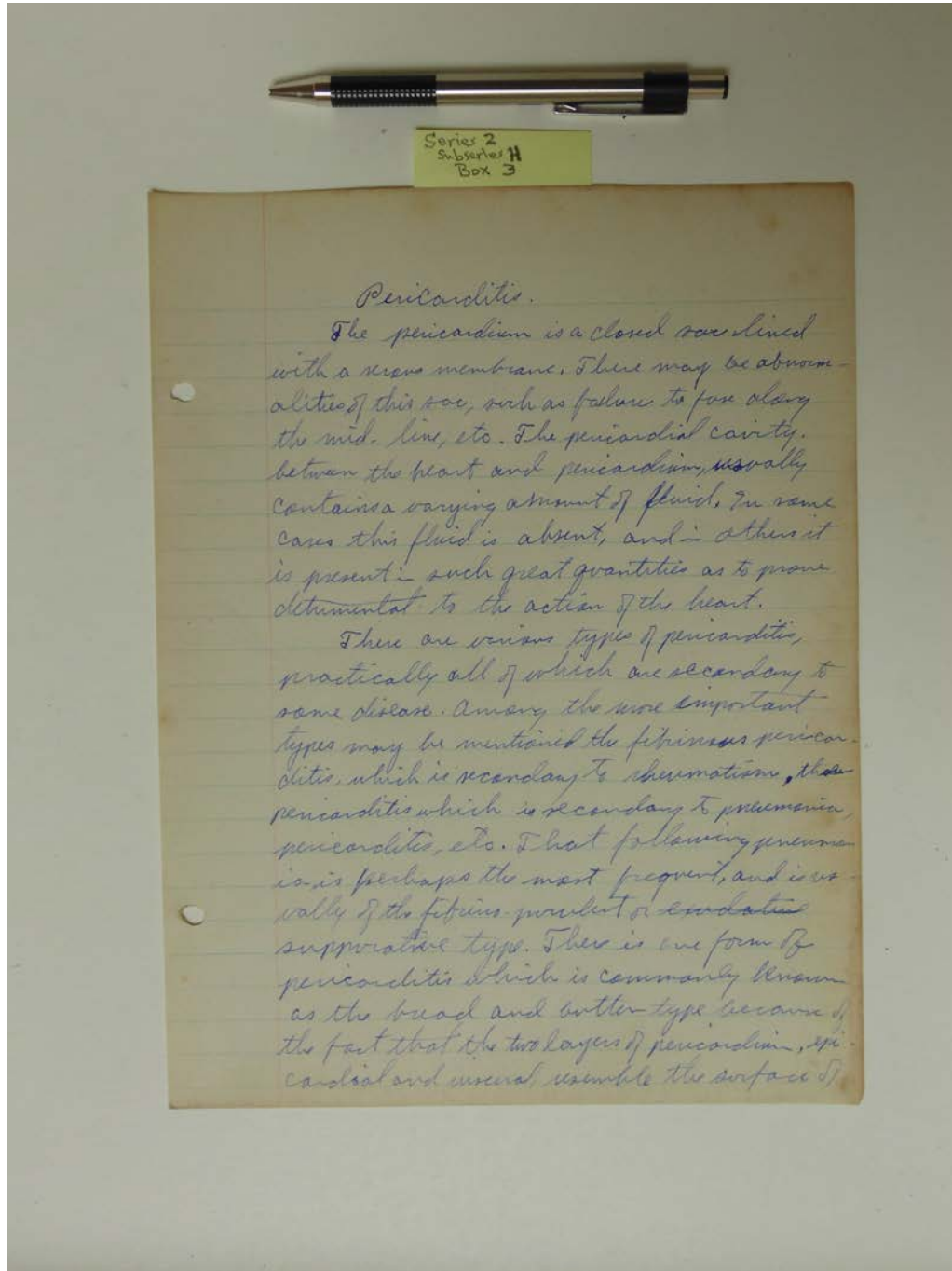


Names:

Anemic Infarct of
Spleen

Types:

drawing



Pericarditis.

The pericardium is a closed sac lined with a serous membrane. There may be abnormalities of this sac, such as failure to fuse along the mid. line, etc. The pericardial cavity, between the heart and pericardium, usually contains a varying amount of fluid. In some cases this fluid is absent, and in others it is present in such great quantities as to prove detrimental to the action of the heart.

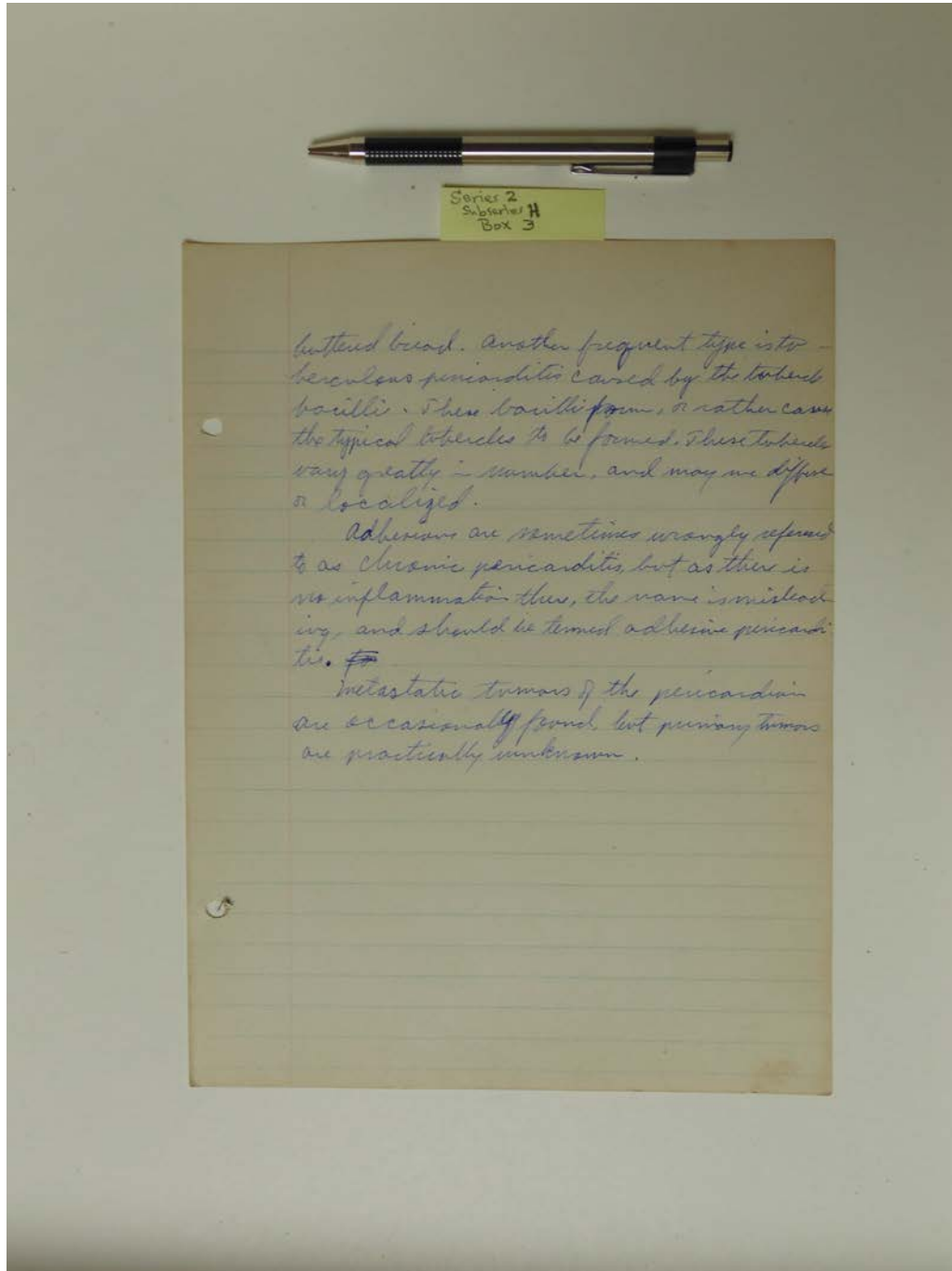
There are various types of pericarditis, practically all of which are secondary to some disease. Among the more important types may be mentioned the fibrinous pericarditis, which is secondary to rheumatism, the serous pericarditis which is secondary to pneumonia, pericarditis, etc. That following pneumonia is perhaps the most frequent, and is usually of the fibrinous purulent or exudative suppurative type. There is one form of pericarditis which is commonly known as the broad and butter type because of the fact that the two layers of pericardium, pericardial and visceral, resemble the surface of

Names:

Pericarditis

Types:

essay

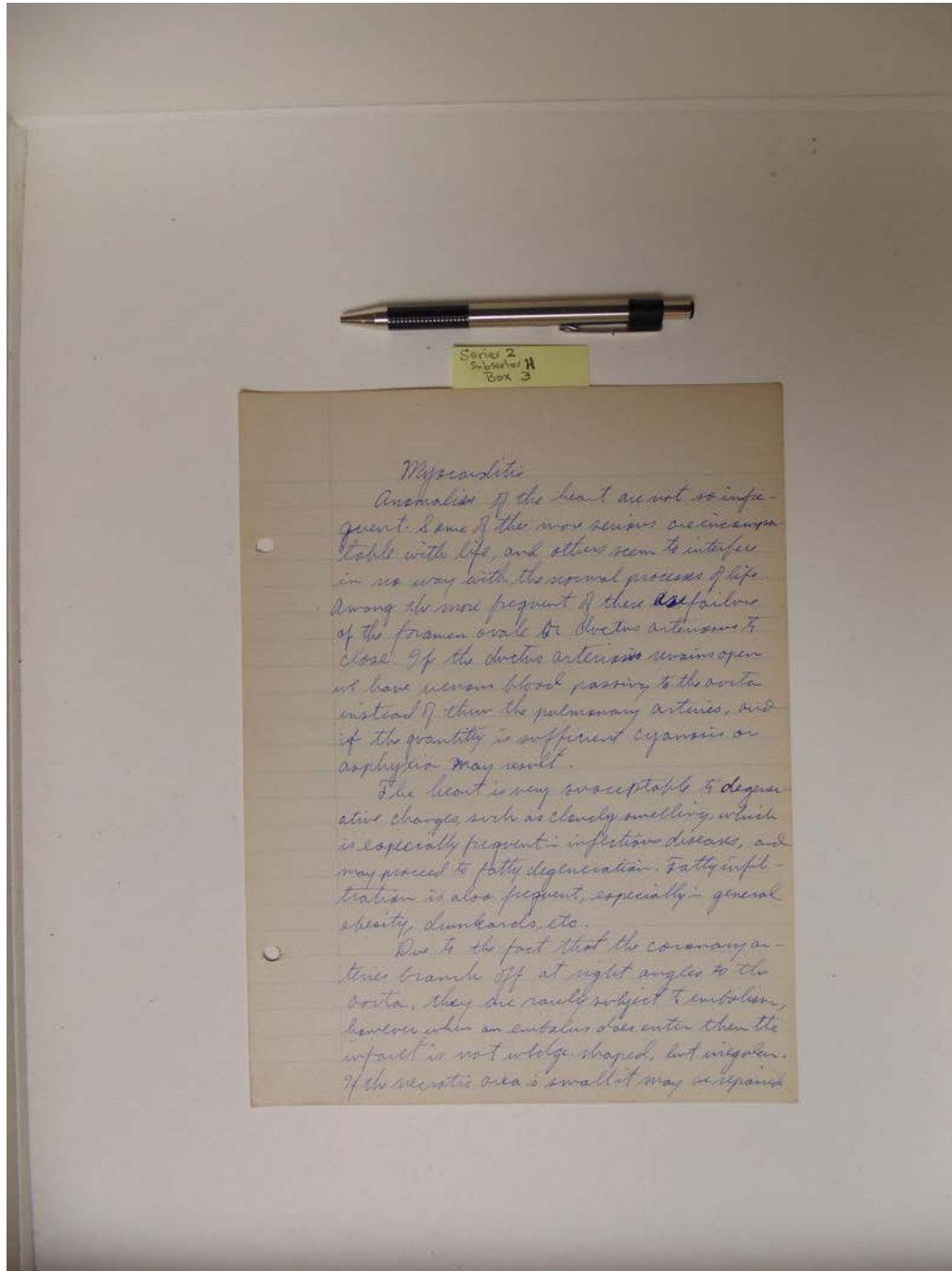


Names:

Pericarditis

Types:

essay



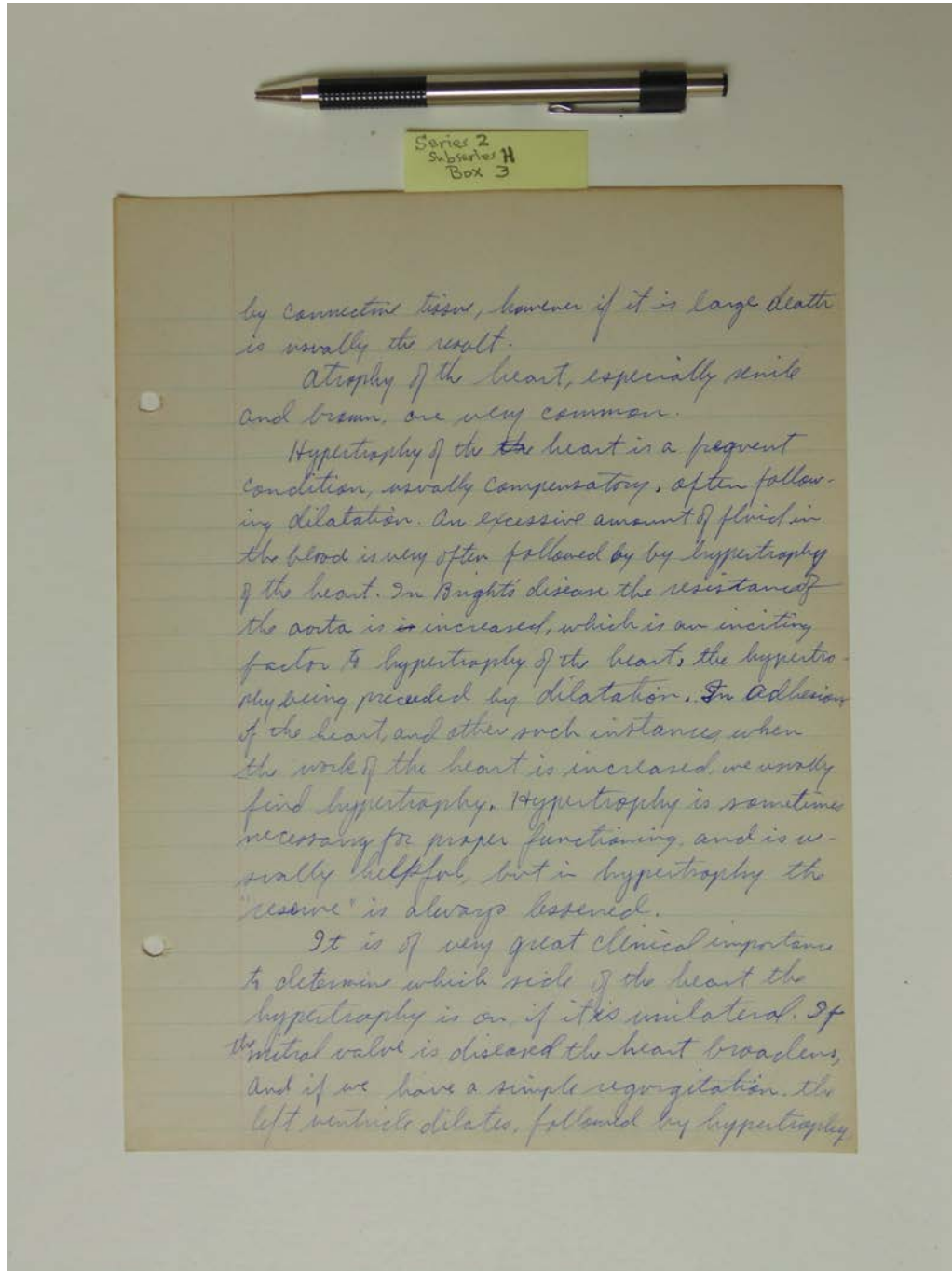
p. 1

Names:

Myocarditis

Types:

essay



by connective tissue, however if it is large death is usually the result.

Atrophy of the heart, especially senile and brown, are very common.

Hypertrophy of the ~~the~~ heart is a frequent condition, usually compensatory, after following dilatation. An excessive amount of fluid in the blood is very often followed by hypertrophy of the heart. In Bright's disease the resistance of the aorta is increased, which is an inciting factor to hypertrophy of the heart, the hypertrophy being preceded by dilatation. In adhesions of the heart and other such instances when the work of the heart is increased, we usually find hypertrophy. Hypertrophy is sometimes necessary for proper functioning, and is usually helpful, but in hypertrophy the "reserve" is always lessened.

It is of very great clinical importance to determine which side of the heart the hypertrophy is on, if it is unilateral. If the mitral valve is diseased the heart broadens, and if we have a simple regurgitation, the left ventricle dilates, followed by hypertrophy.

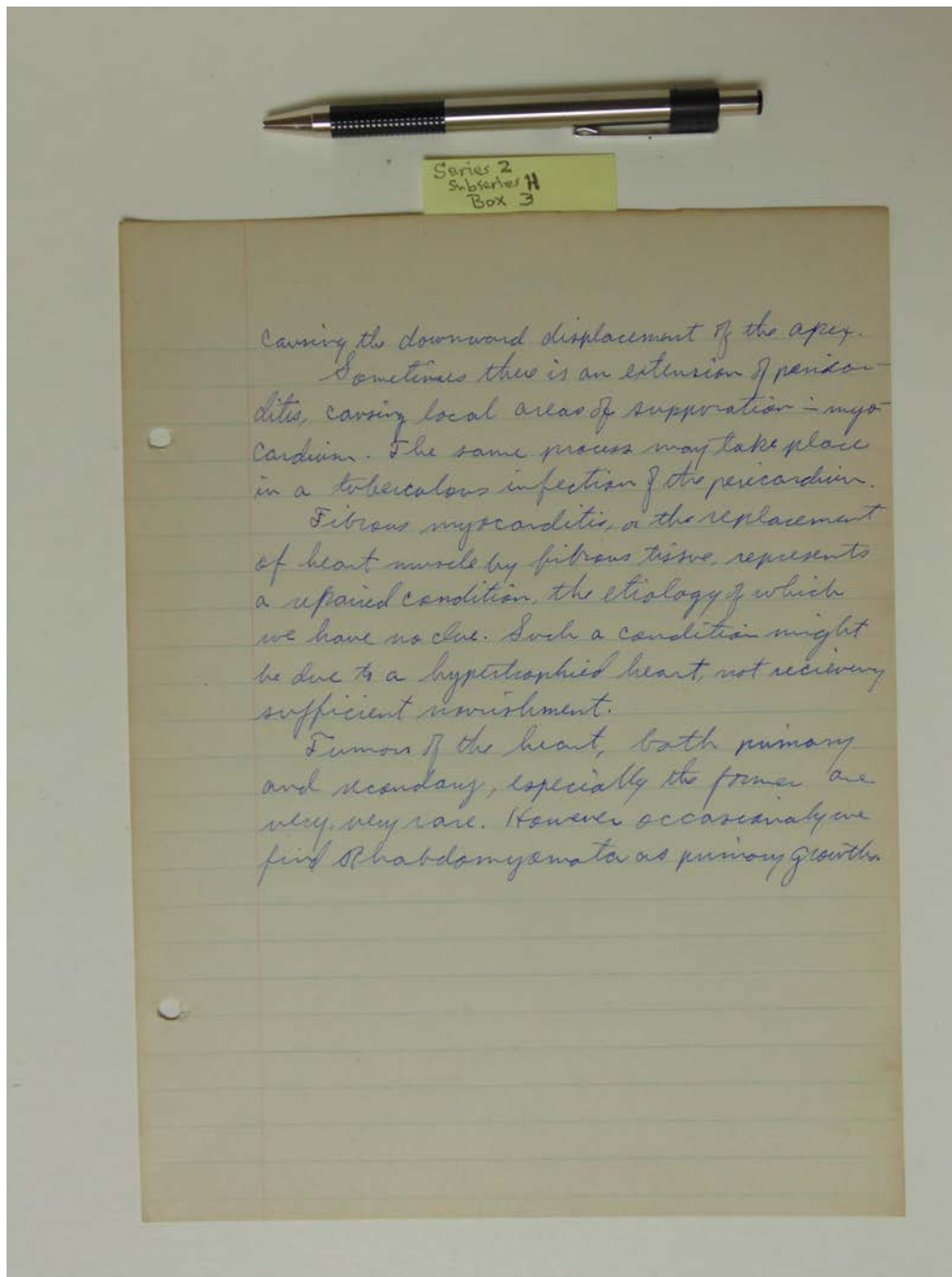
p. 2

Names:

Myocarditis

Types:

essay



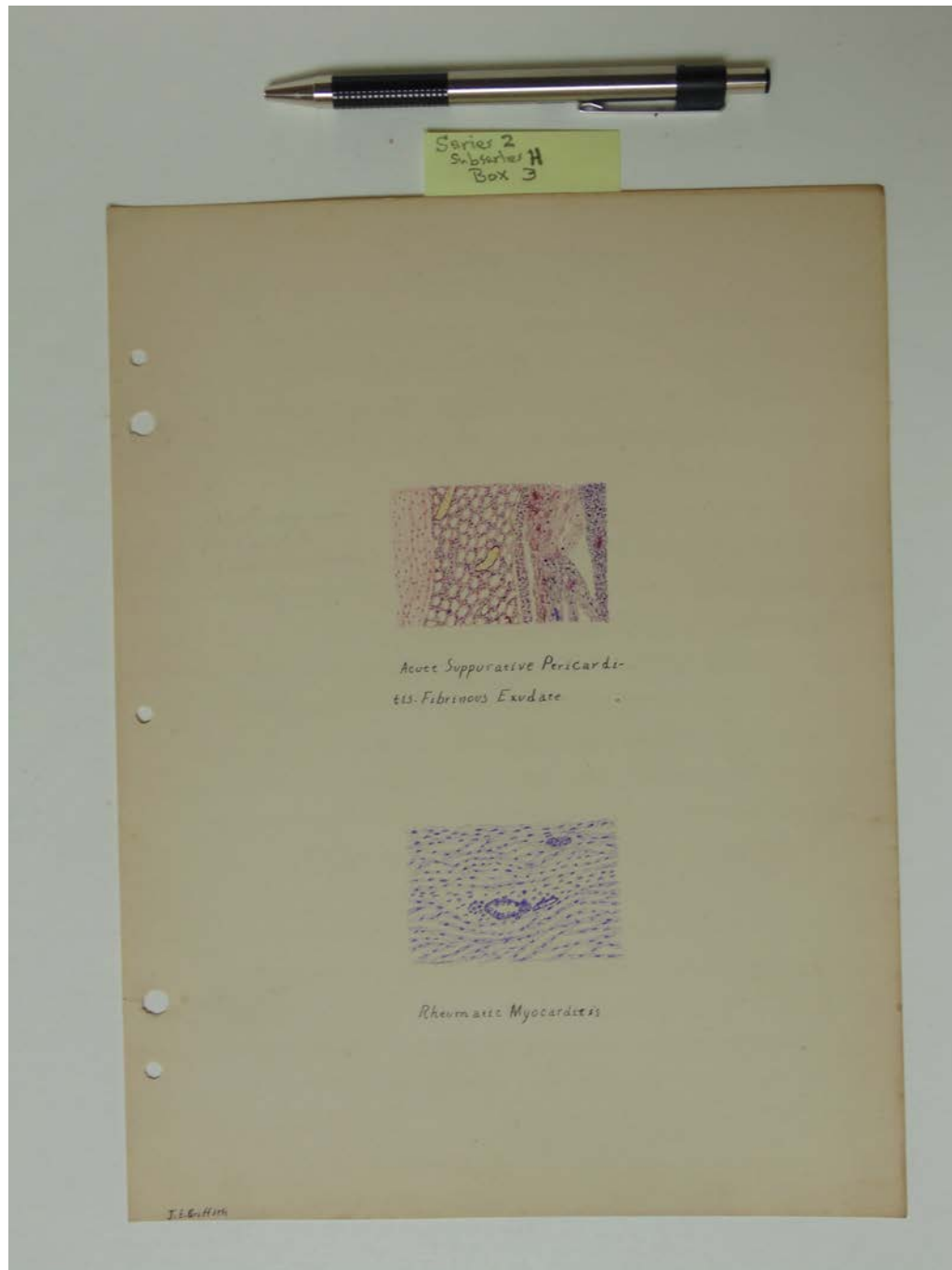
p. 3

Names:

Myocarditis

Types:

essay



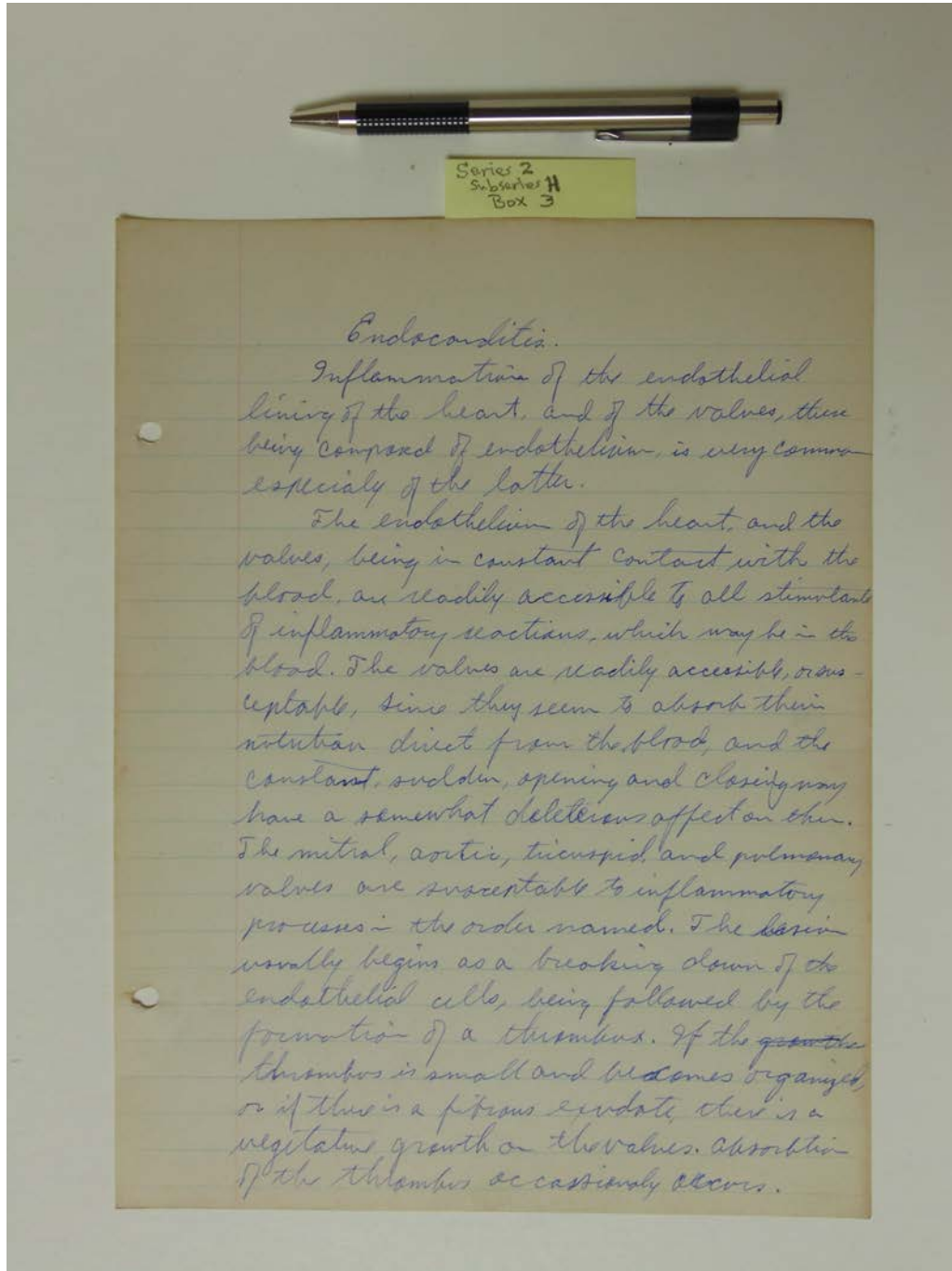
Names:

Acute Suppurative
Pericarditis

Rheumatic
Myocarditis

Types:

drawing

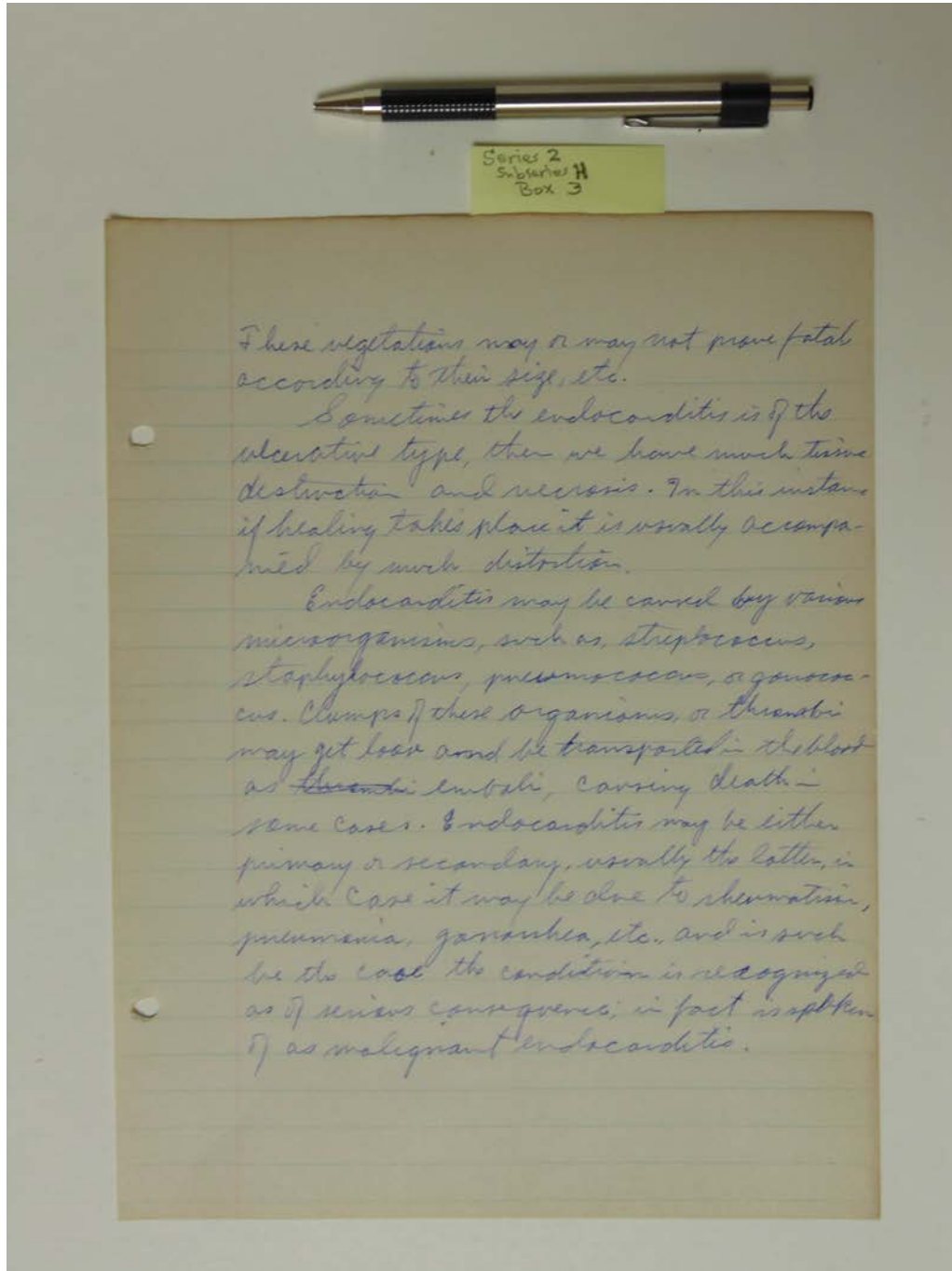


Names:

Endocarditis

Types:

essay



Names:

Endocarditis

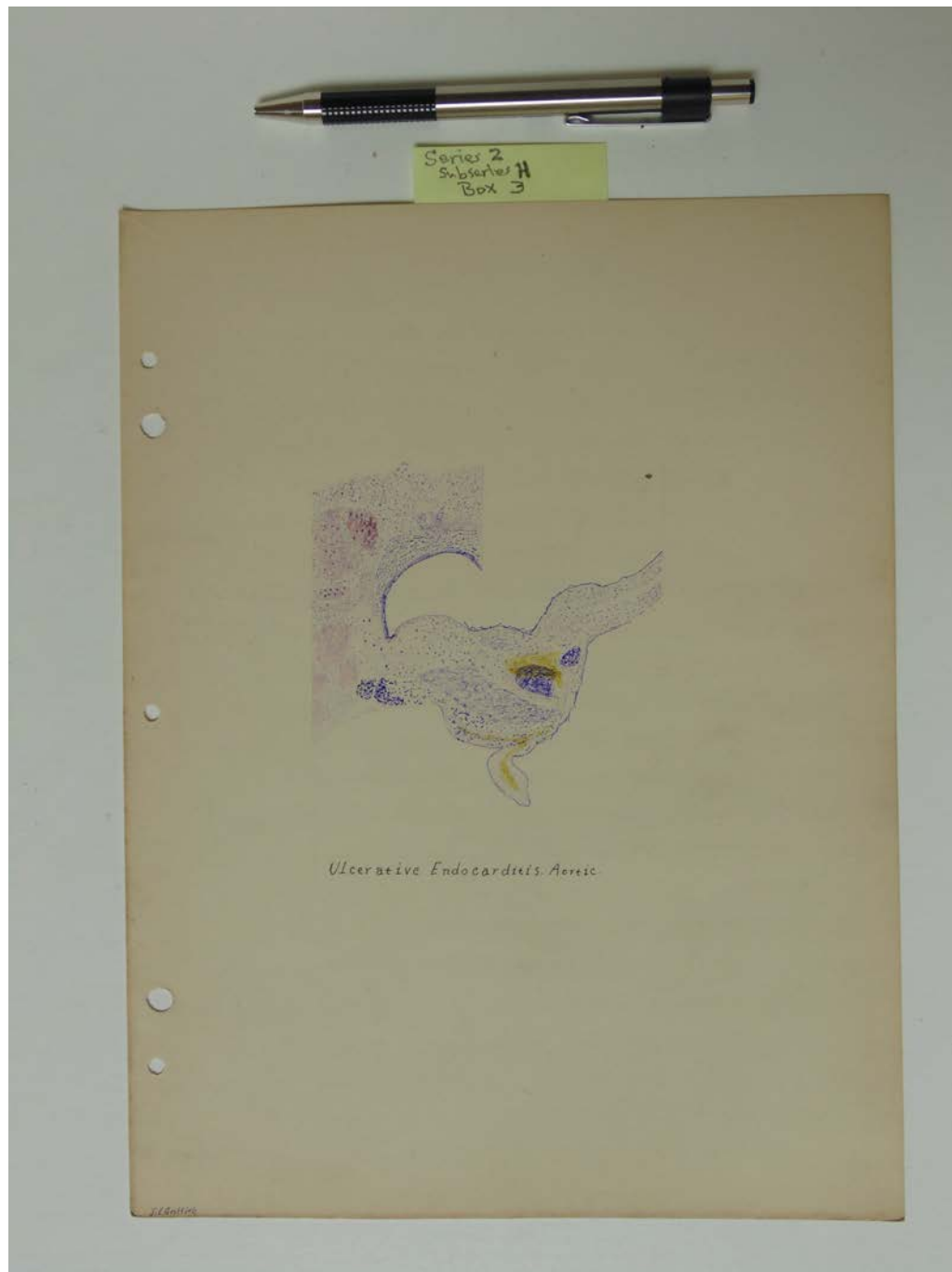
Types:

essay

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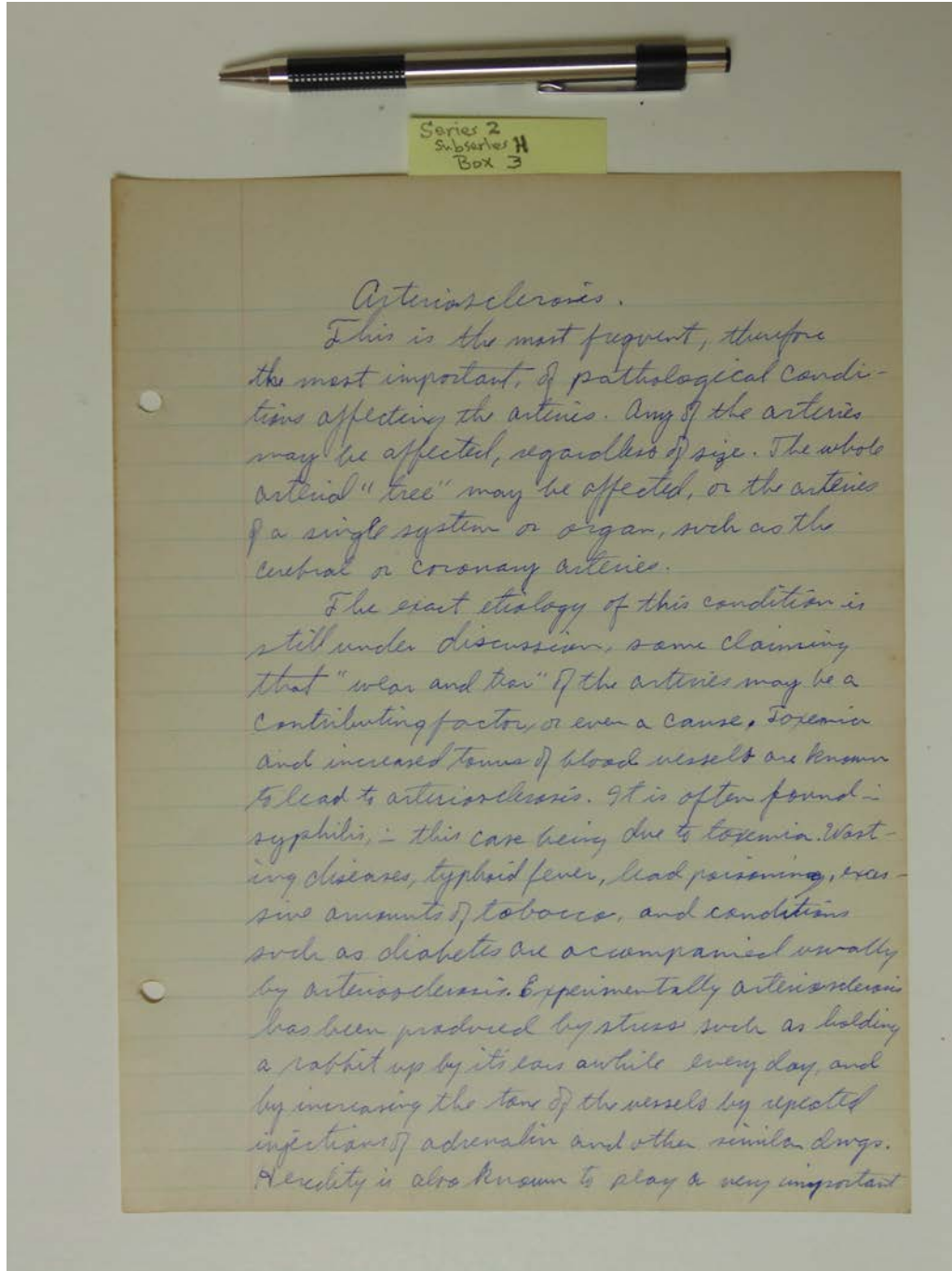


Names:

Ulcerative
Endocarditis Aortic

Types:

drawing



Arteriosclerosis.

This is the most frequent, therefore the most important, of pathological conditions affecting the arteries. Any of the arteries may be affected, regardless of size. The whole arterial "tree" may be affected, or the arteries of a single system or organ, such as the cerebral or coronary arteries.

The exact etiology of this condition is still under discussion, some claiming that "wear and tear" of the arteries may be a contributing factor, or even a cause. Toxemia and increased tension of blood vessels are known to lead to arteriosclerosis. It is often found in syphilis, this case being due to toxemia. Wasting diseases, typhoid fever, lead poisoning, excessive amounts of tobacco, and conditions such as diabetes are accompanied usually by arteriosclerosis. Experimentally arteriosclerosis has been produced by stress such as holding a rabbit up by its ears awhile every day, and by increasing the tone of the vessels by repeated injections of adrenalin and other similar drugs. Heredity is also known to play a very important

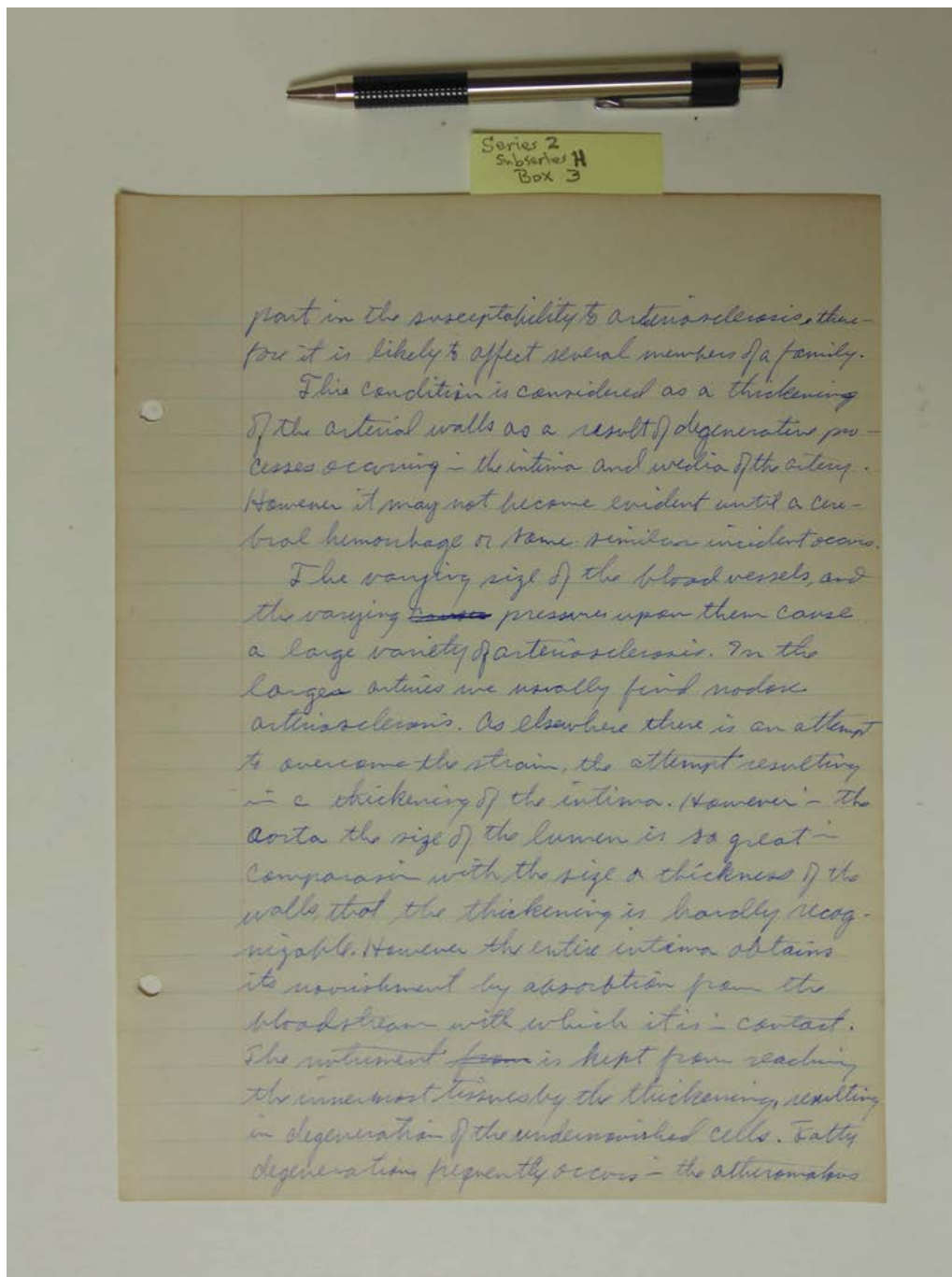
p. 1

Names:

Arteriosclerosis

Types:

essay



part in the susceptibility to arteriosclerosis, therefore it is likely to affect several members of a family.

This condition is considered as a thickening of the arterial walls as a result of degenerative processes occurring in the intima and media of the artery. However it may not become evident until a cerebral hemorrhage or some similar incident occurs.

The varying size of the blood vessels, and the varying ~~pressure~~ pressure upon them cause a large variety of arteriosclerosis. In the larger arteries we usually find nodular arteriosclerosis. As elsewhere there is an attempt to overcome the strain, the attempt resulting in a thickening of the intima. However in the aorta the size of the lumen is so great in comparison with the size & thickness of the walls that the thickening is hardly recognizable. However the entire intima obtains its nourishment by absorption from the bloodstream with which it is in contact. The nutriment from is kept from reaching the innermost tissues by the thickening, resulting in degeneration of the undernourished cells. Fatty degeneration frequently occurs in the atherosclerotic

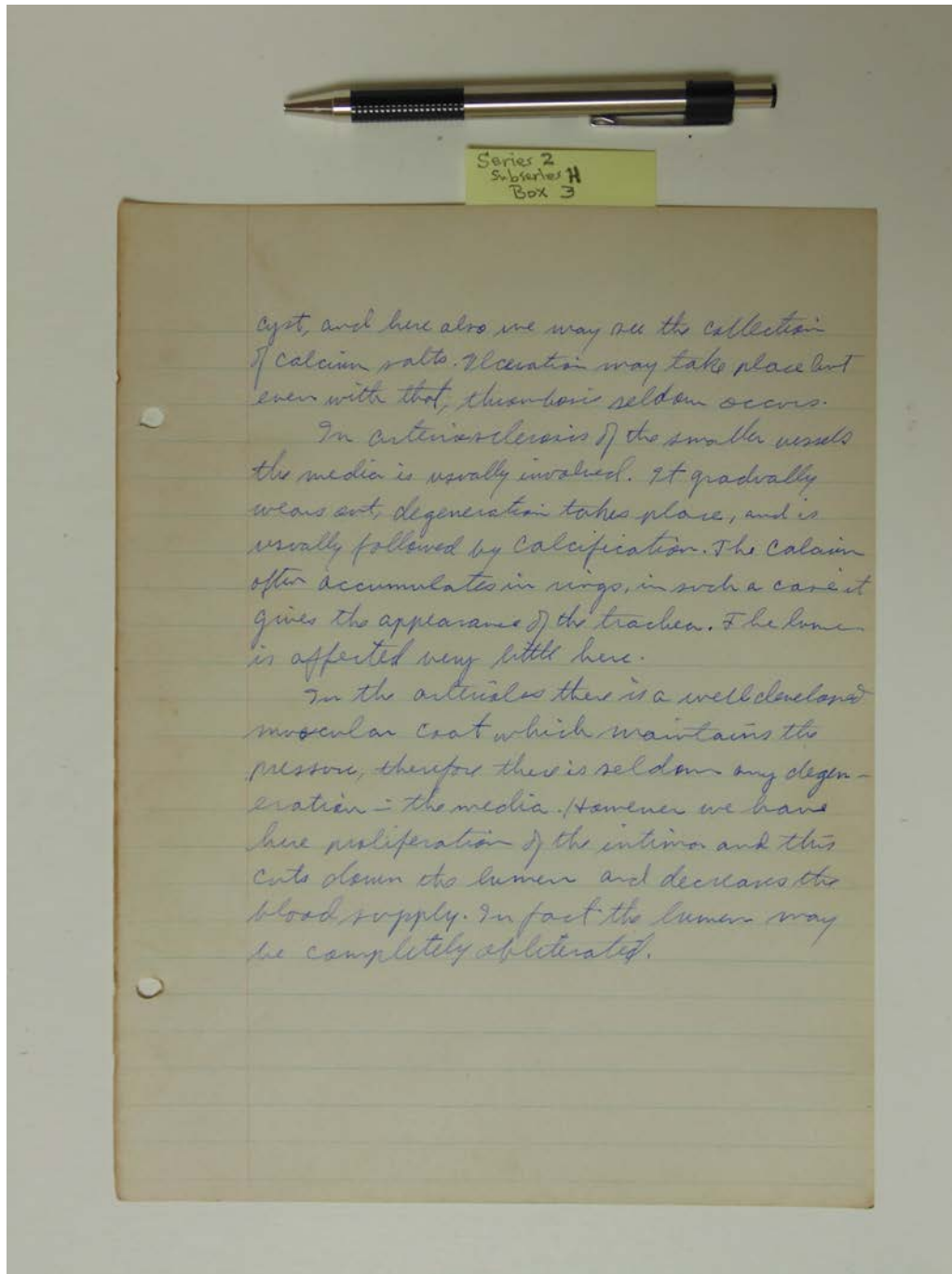
p. 2

Names:

Arteriosclerosis

Types:

essay



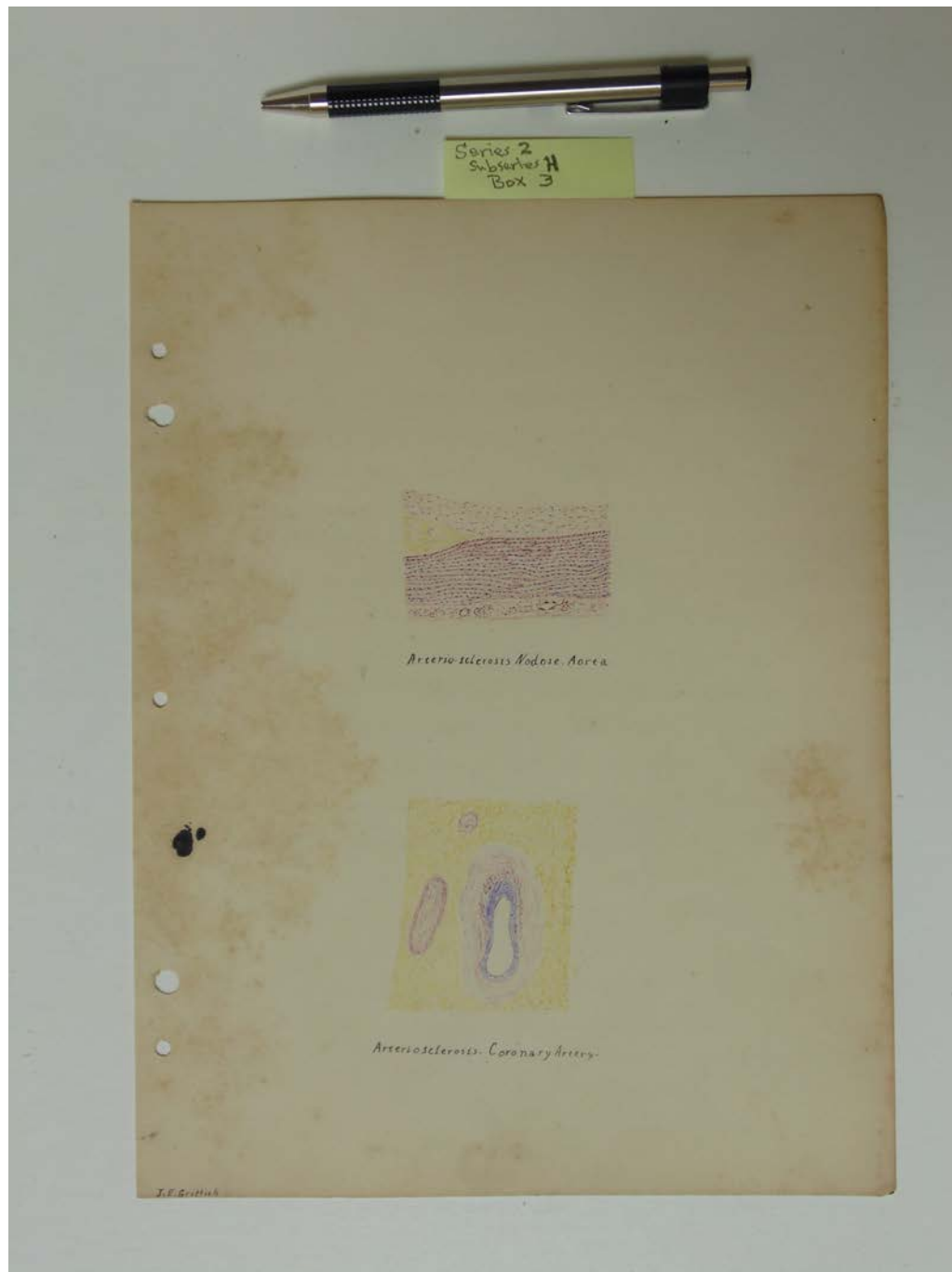
p. 3

Names:

Arteriosclerosis

Types:

essay



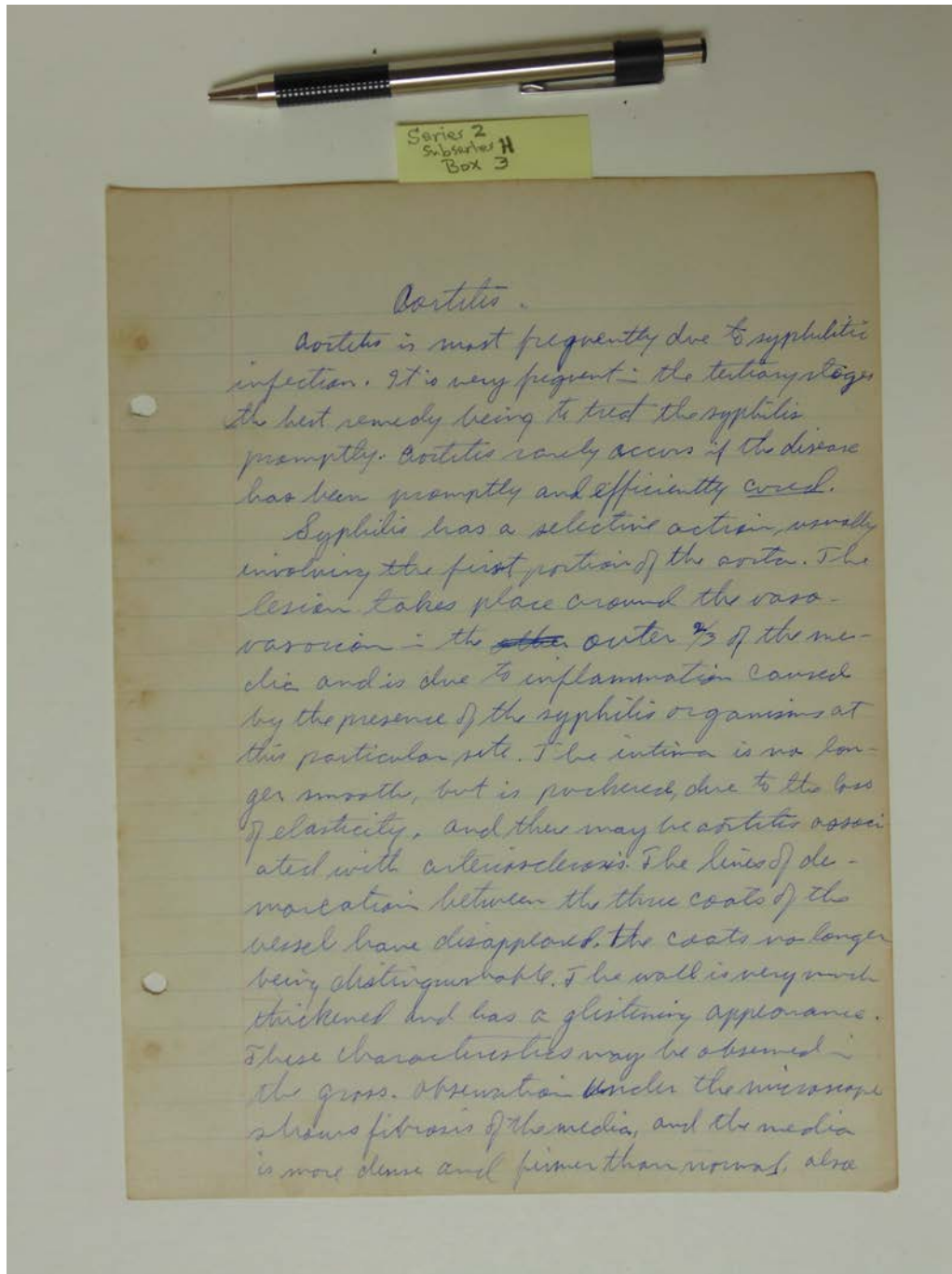
Names:

Arteriosclerosis
Coronary Artery

Arteriosclerosis
Nodose Aorta

Types:

drawing



Aortitis.

Aortitis is most frequently due to syphilitic infection. It is very frequent in the tertiary stage, the best remedy being to treat the syphilis promptly. Aortitis rarely occurs if the disease has been promptly and efficiently cured.

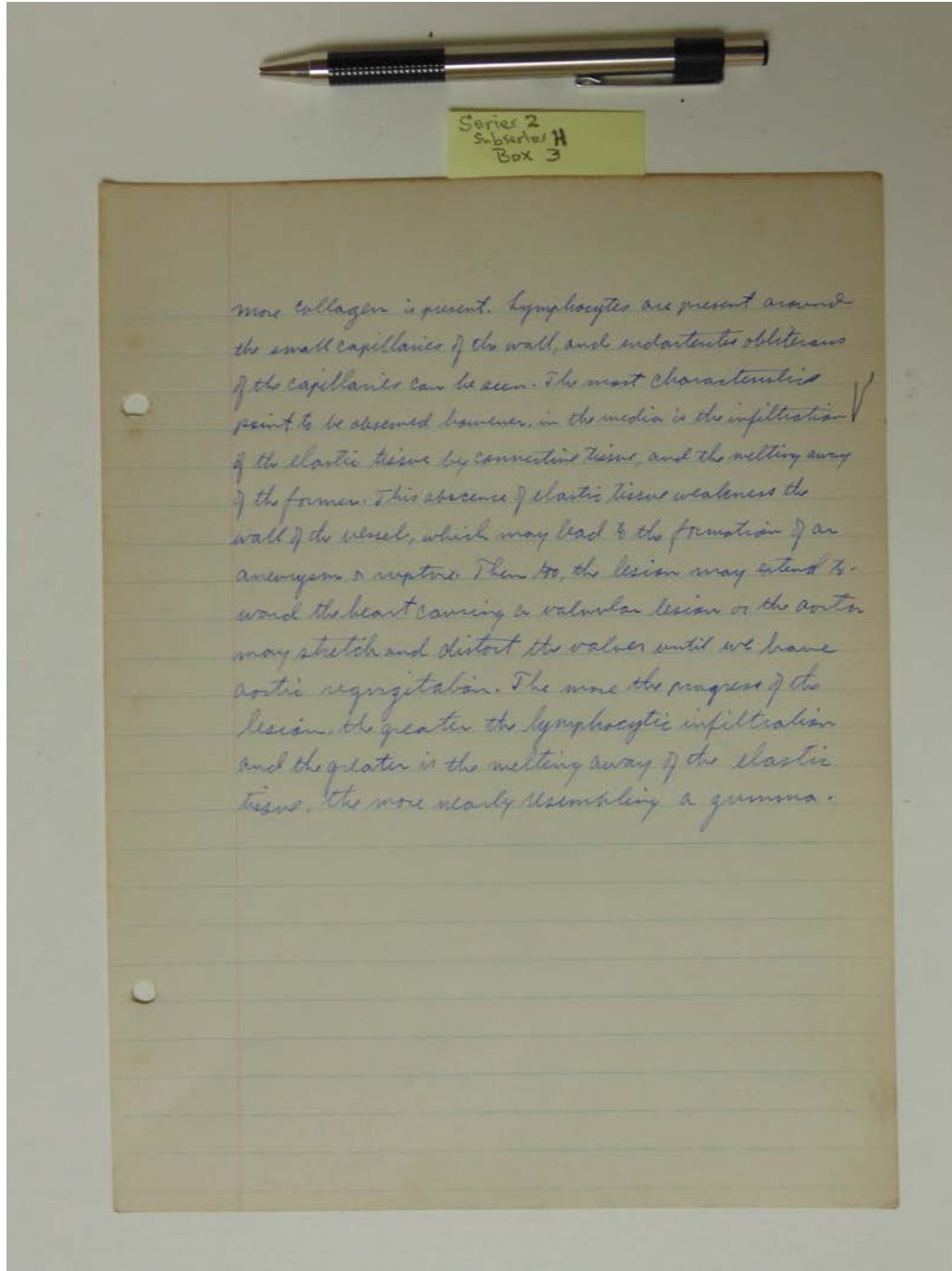
Syphilis has a selective action, usually involving the first portion of the aorta. The lesion takes place around the vasovascular in the outer $\frac{2}{3}$ of the media and is due to inflammation caused by the presence of the syphilitic organisms at this particular site. The intima is no longer smooth, but is puckered, due to the loss of elasticity, and there may be aortitis associated with arteriosclerosis. The lines of demarcation between the three coats of the vessel have disappeared, the coats no longer being distinguishable. The wall is very much thickened and has a glistening appearance. These characteristics may be observed in the gross observation. Under the microscope shows fibrosis of the media, and the media is more dense and firmer than normal, also

Names:

Aortitis

Types:

essay

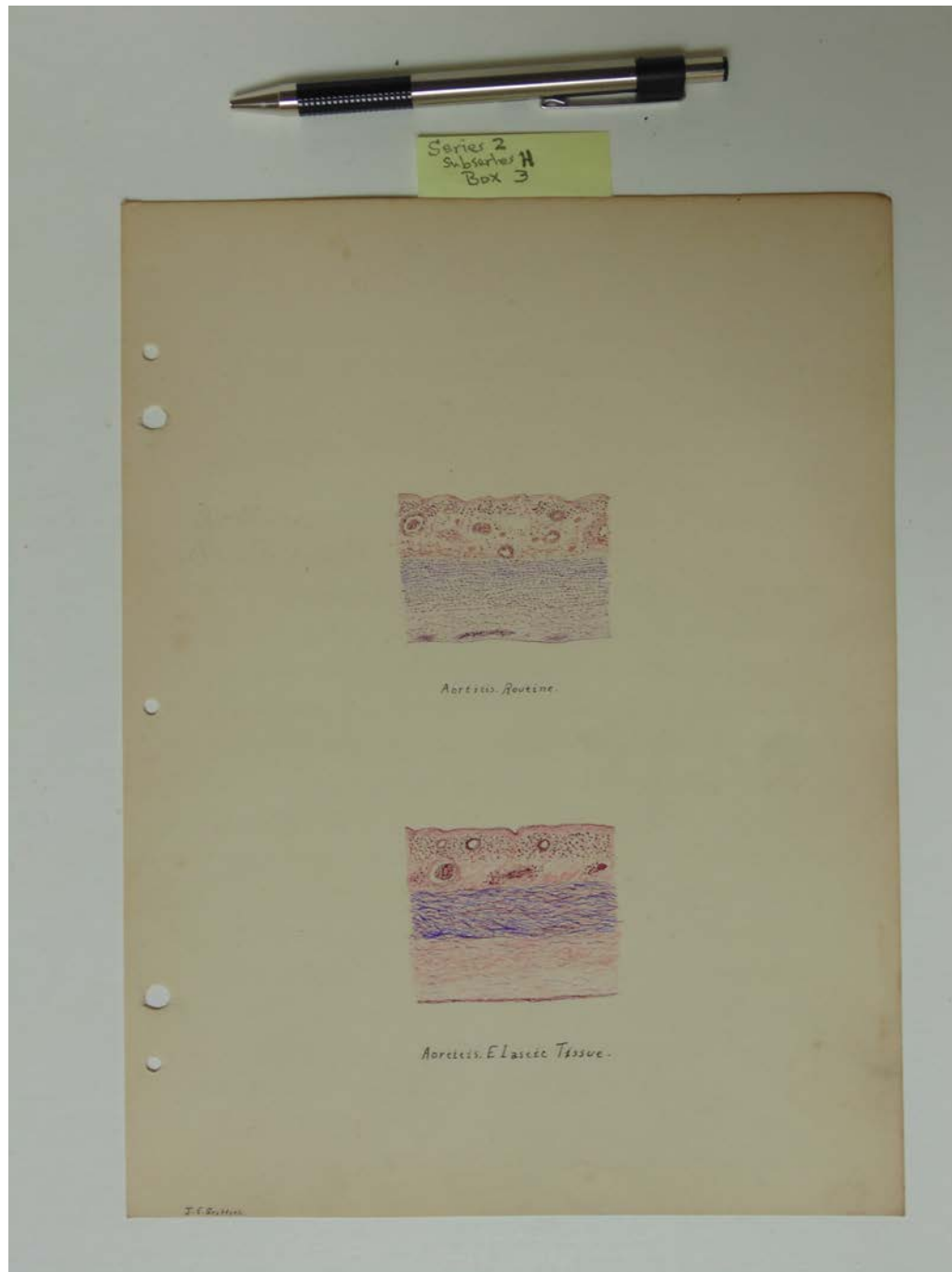


Names:

Aortitis

Types:

essay



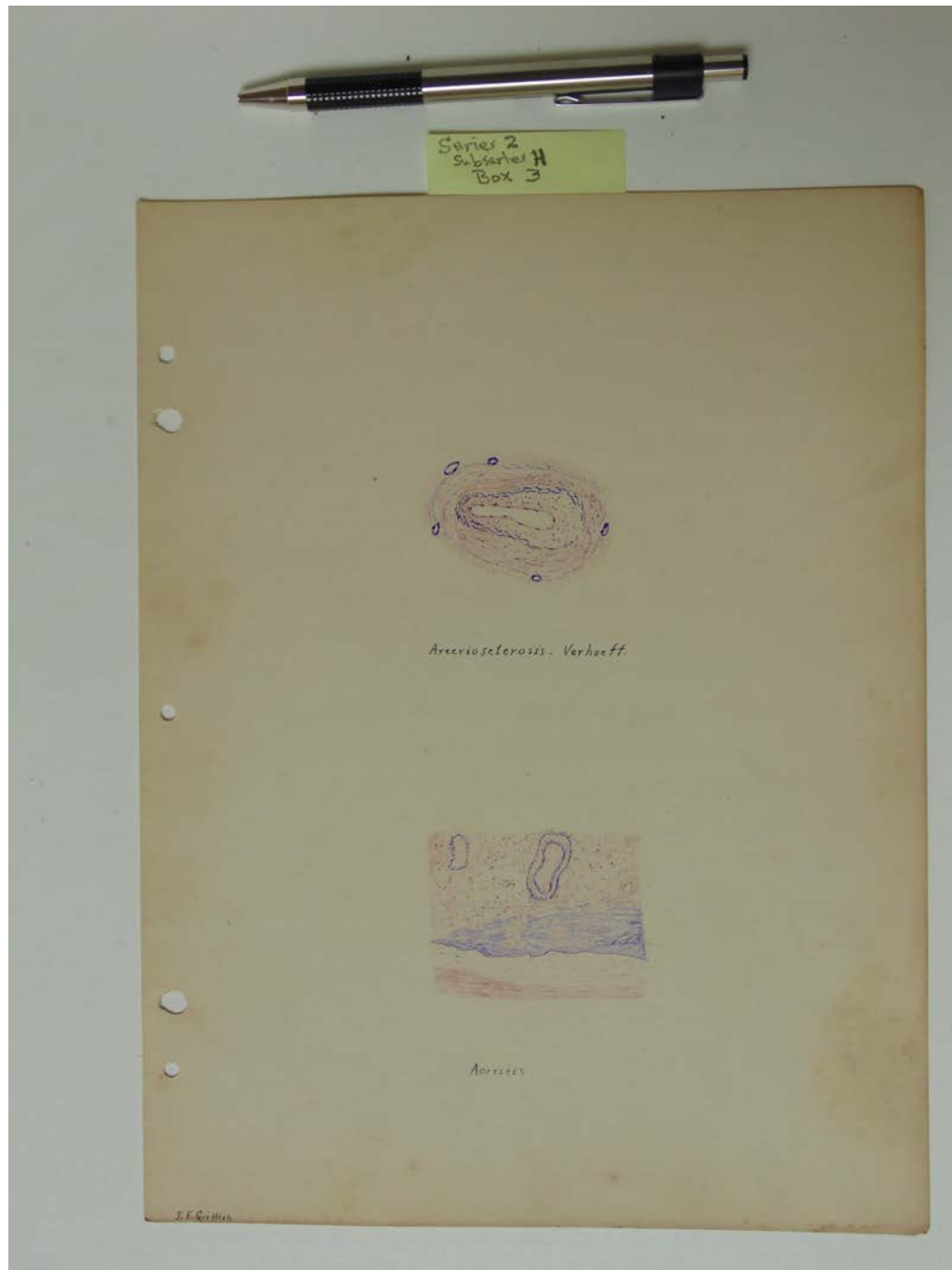
Names:

Aortitis Routine

Aortitis. Elastic
Tissue

Types:

drawing



Names:

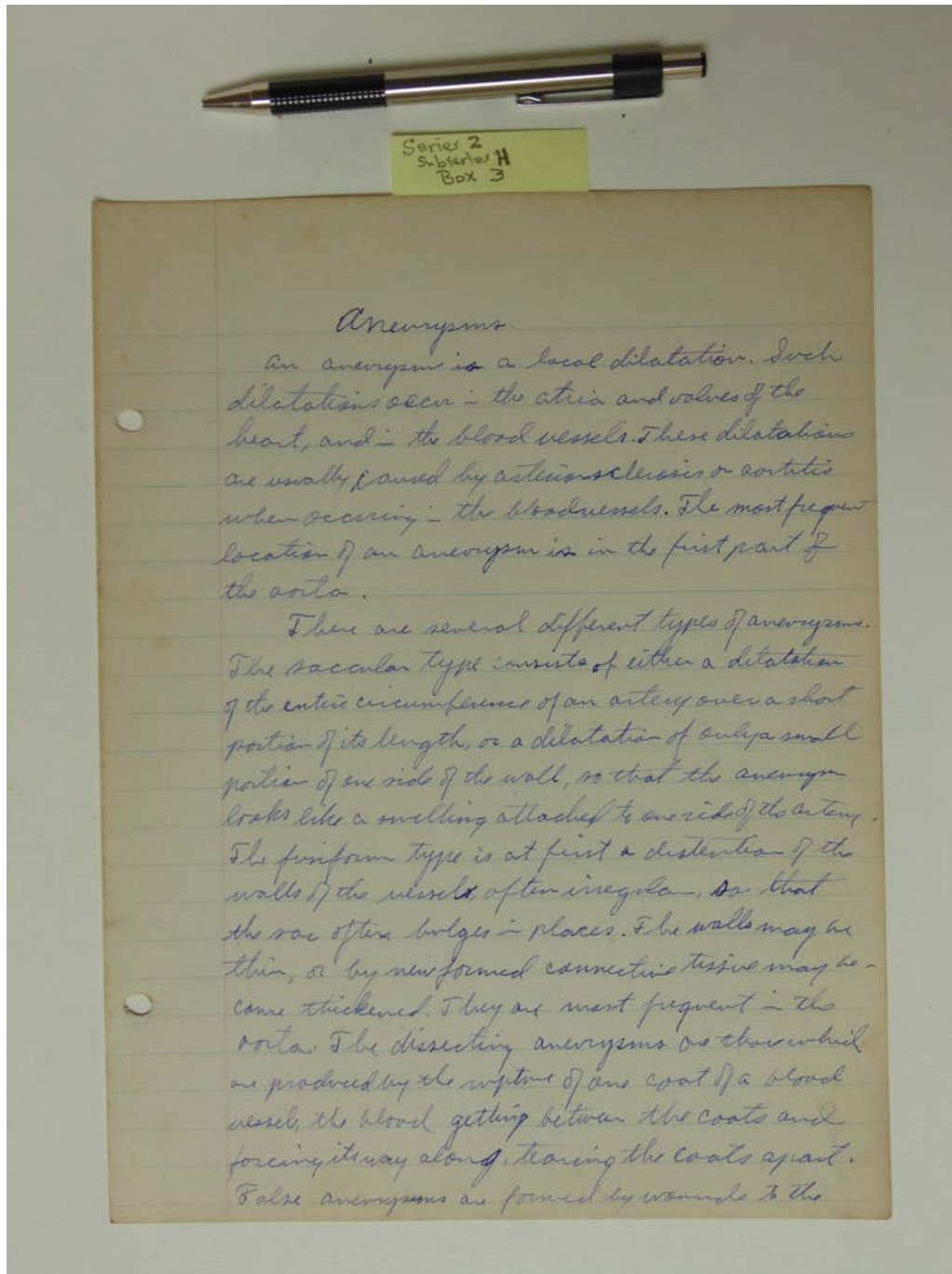
Aortitis

Arteriosclerosis.

Verhoeff

Types:

drawing



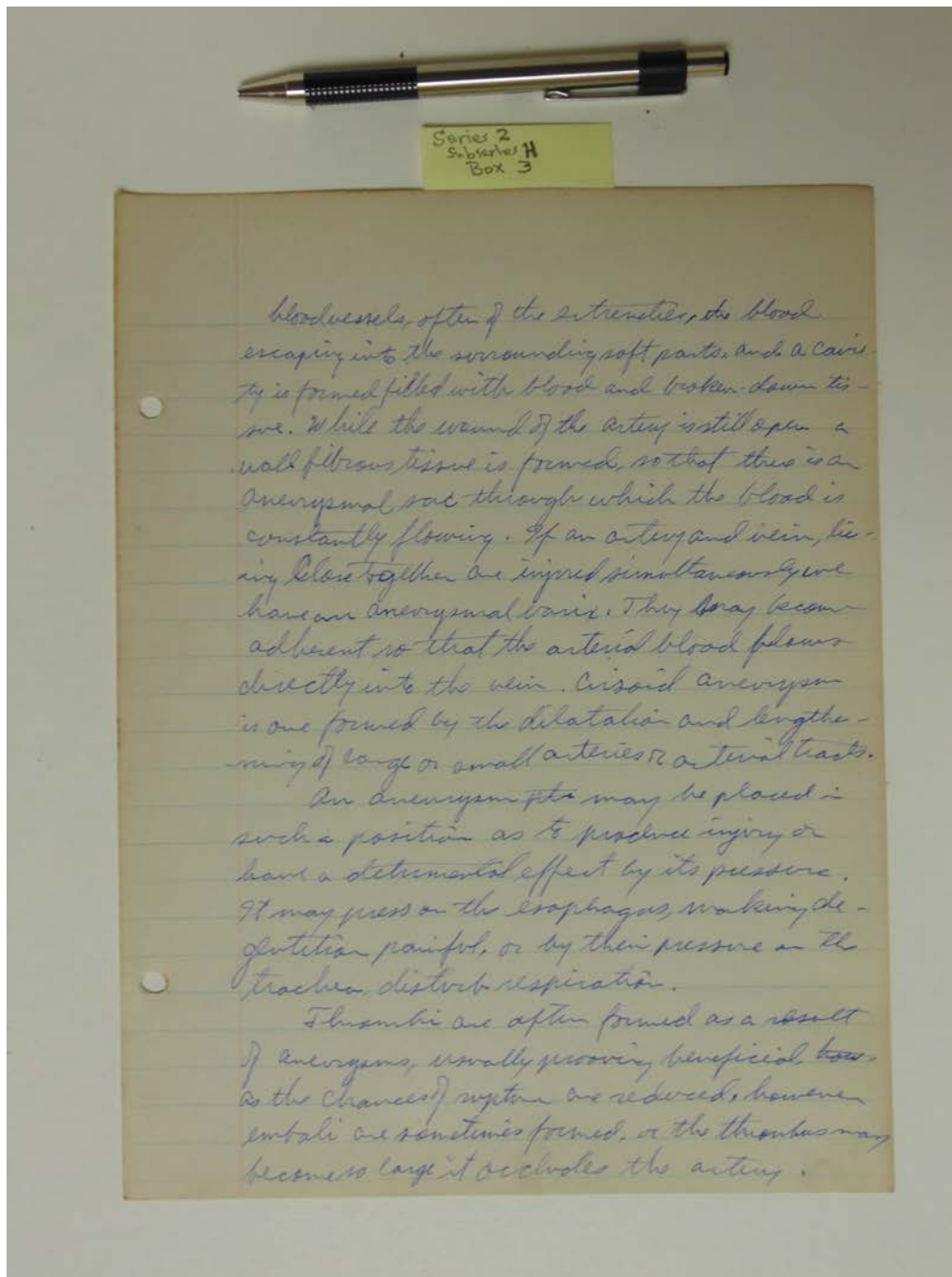
p. 1

Names:

Aneurysms

Types:

essay



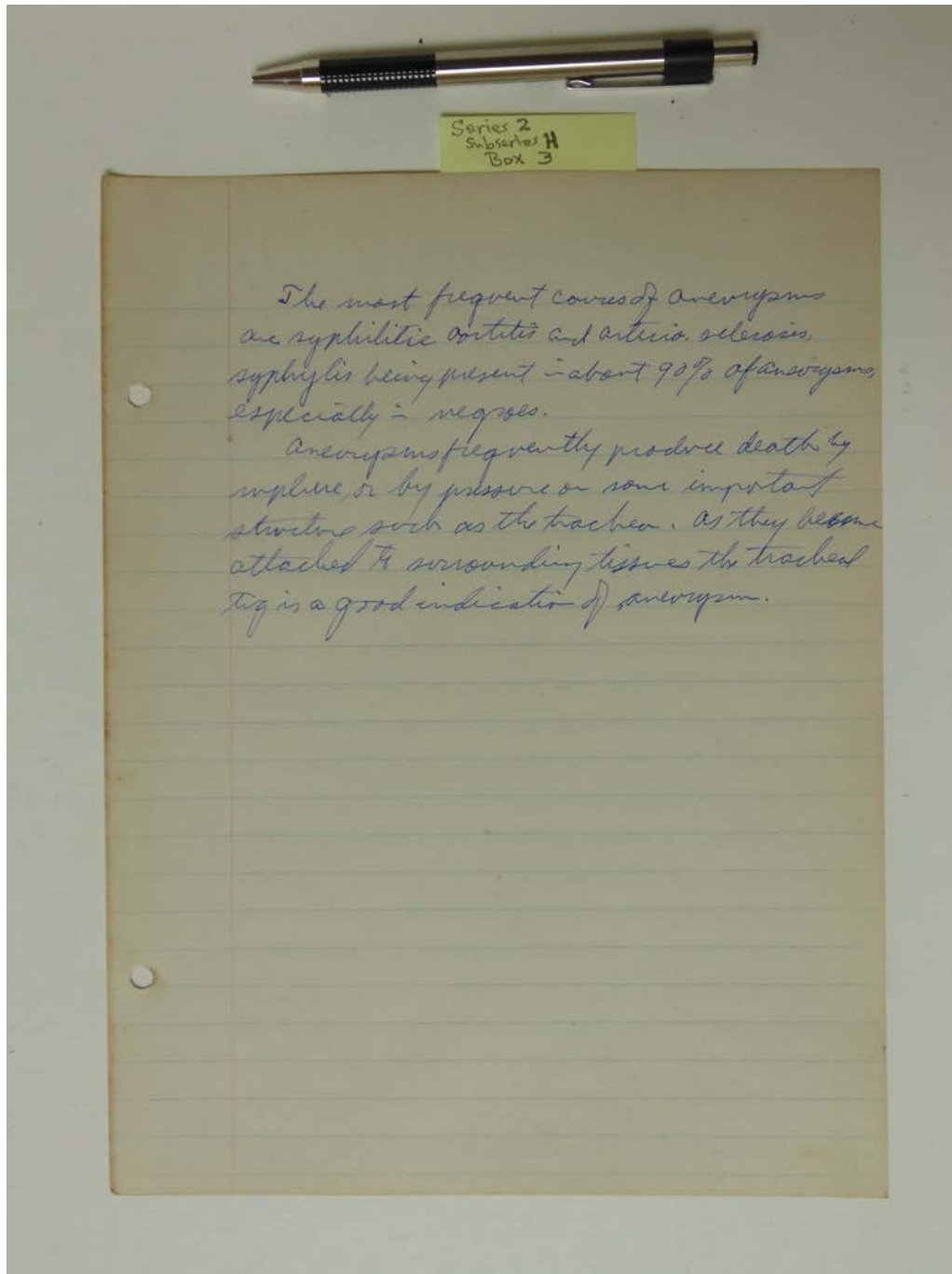
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Names:

Aneurysms

Types:

essay



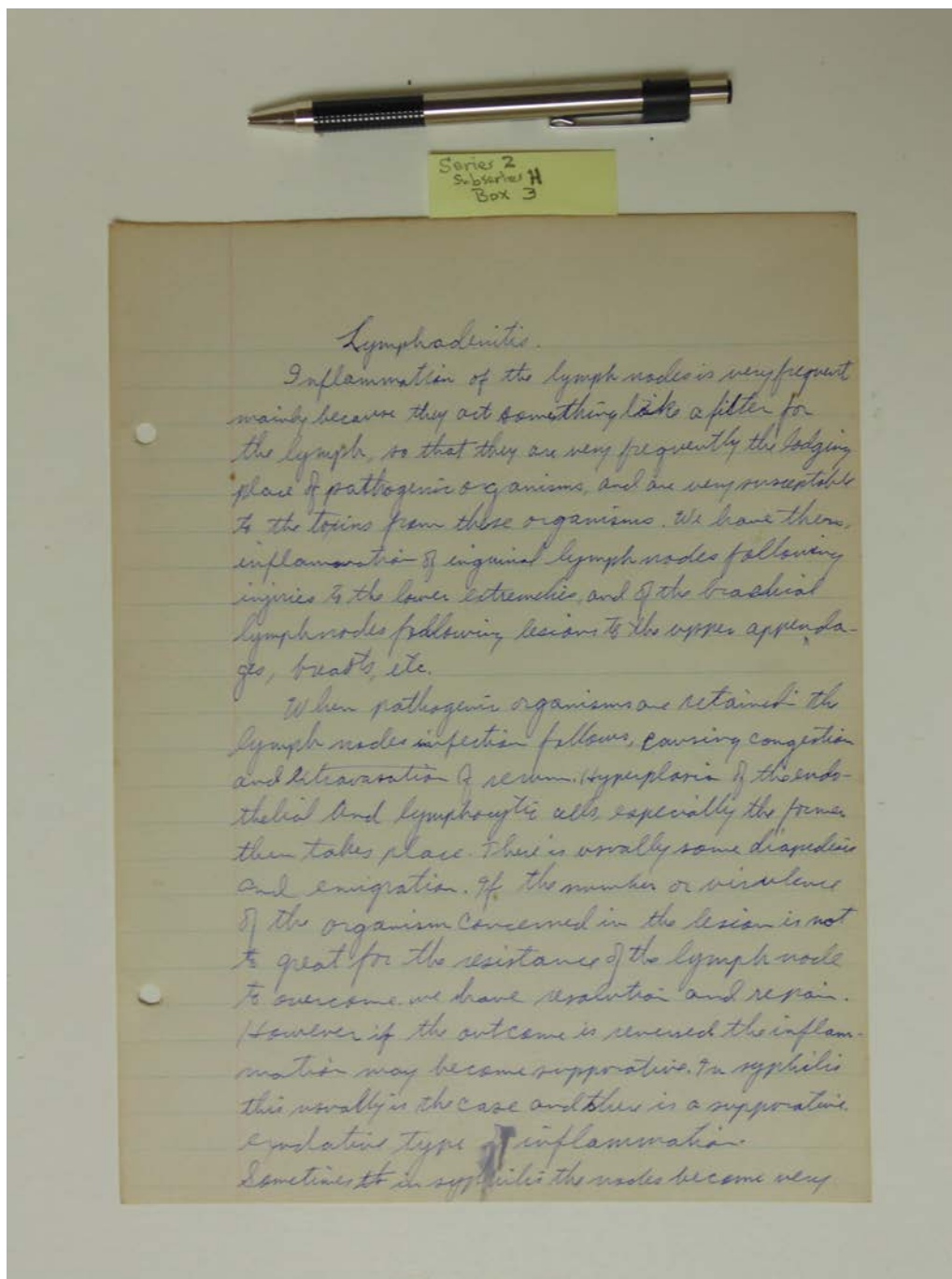
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Names:

Aneurysms

Types:

essay



Lymphadenitis.

Inflammation of the lymph nodes is very frequent mainly because they act something like a filter for the lymph, so that they are very frequently the lodging place of pathogenic organisms, and are very susceptible to the toxins from these organisms. We have then inflammation of inguinal lymph nodes following injuries to the lower extremities and of the brachial lymph nodes following lesions to the upper appendages, breasts, etc.

When pathogenic organisms are retained the lymph nodes infection follows, causing congestion and extravasation of serum. Hyperplasia of the endothelial and lymphocytic cells especially the former then takes place. There is usually some diapedesis and emigration. If the number or virulence of the organism concerned in the lesion is not too great for the resistance of the lymph node to overcome we have resolution and repair. However if the outcome is reversed the inflammation may become suppurative. In syphilis this usually is the case and there is a suppurative exudative type of inflammation. Sometimes, as in syphilis, the nodes become very

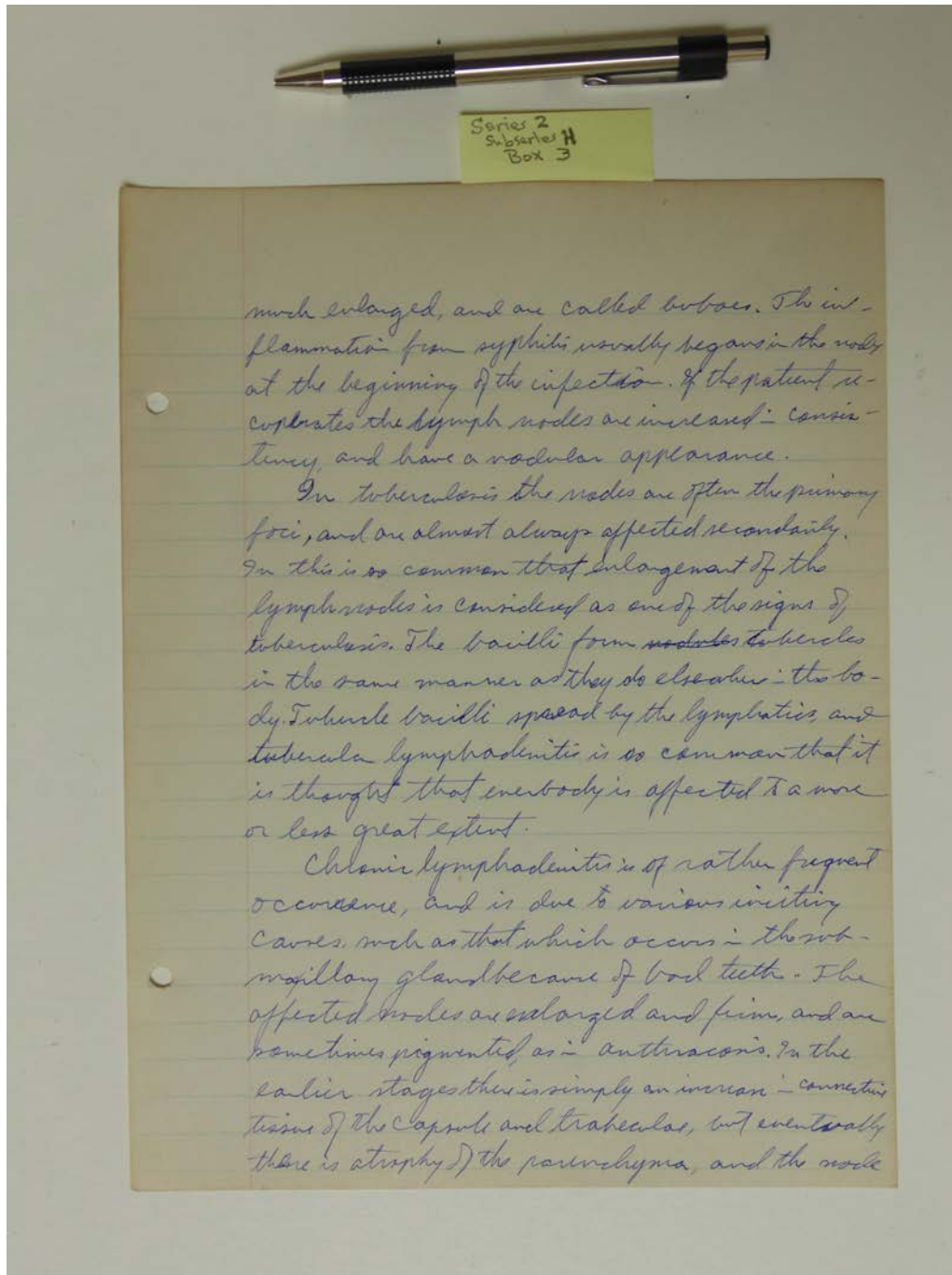
p. 1

Names:

Lymphadenitis

Types:

essay



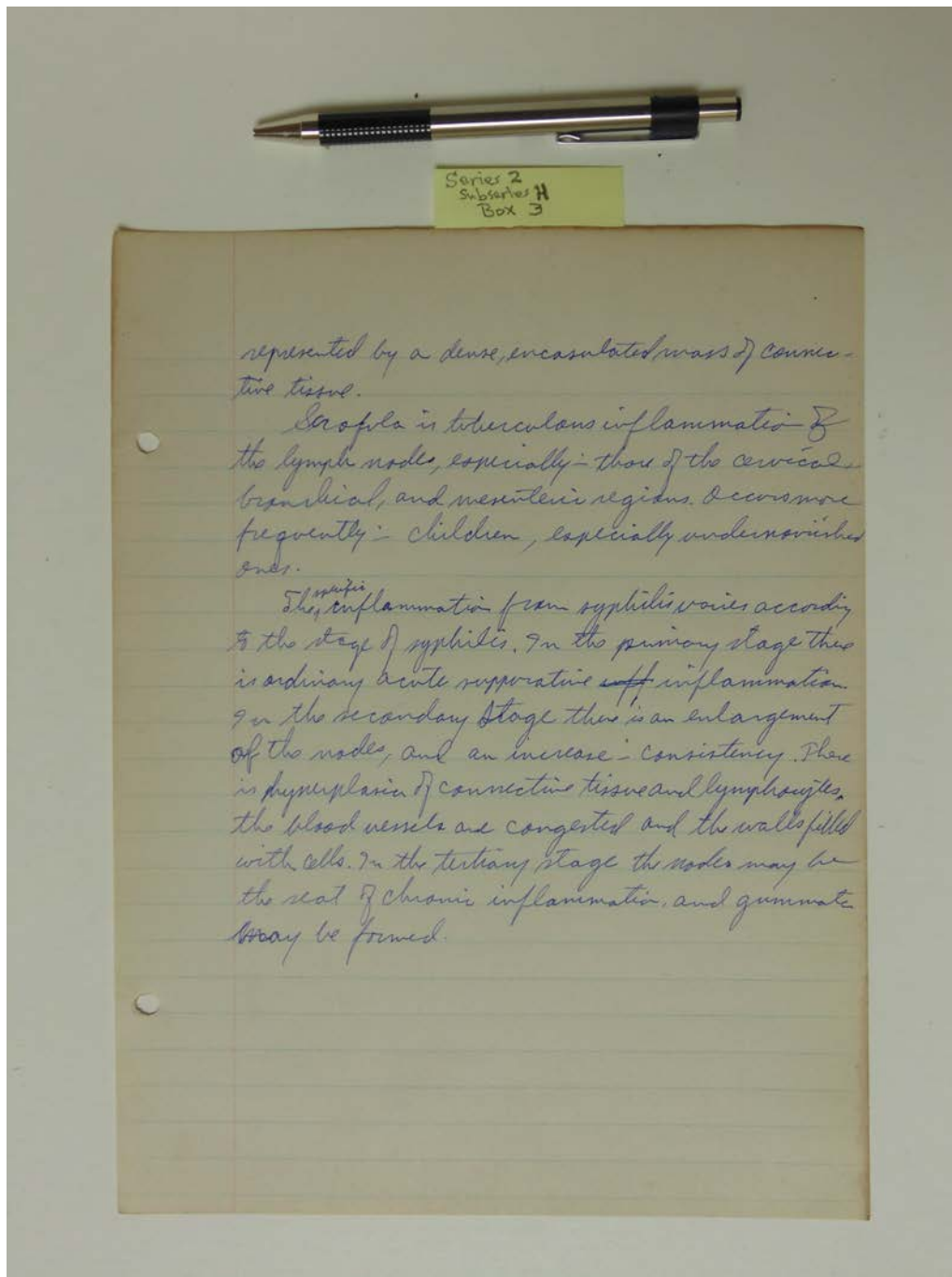
p. 2

Names:

Lymphadenitis

Types:

essay



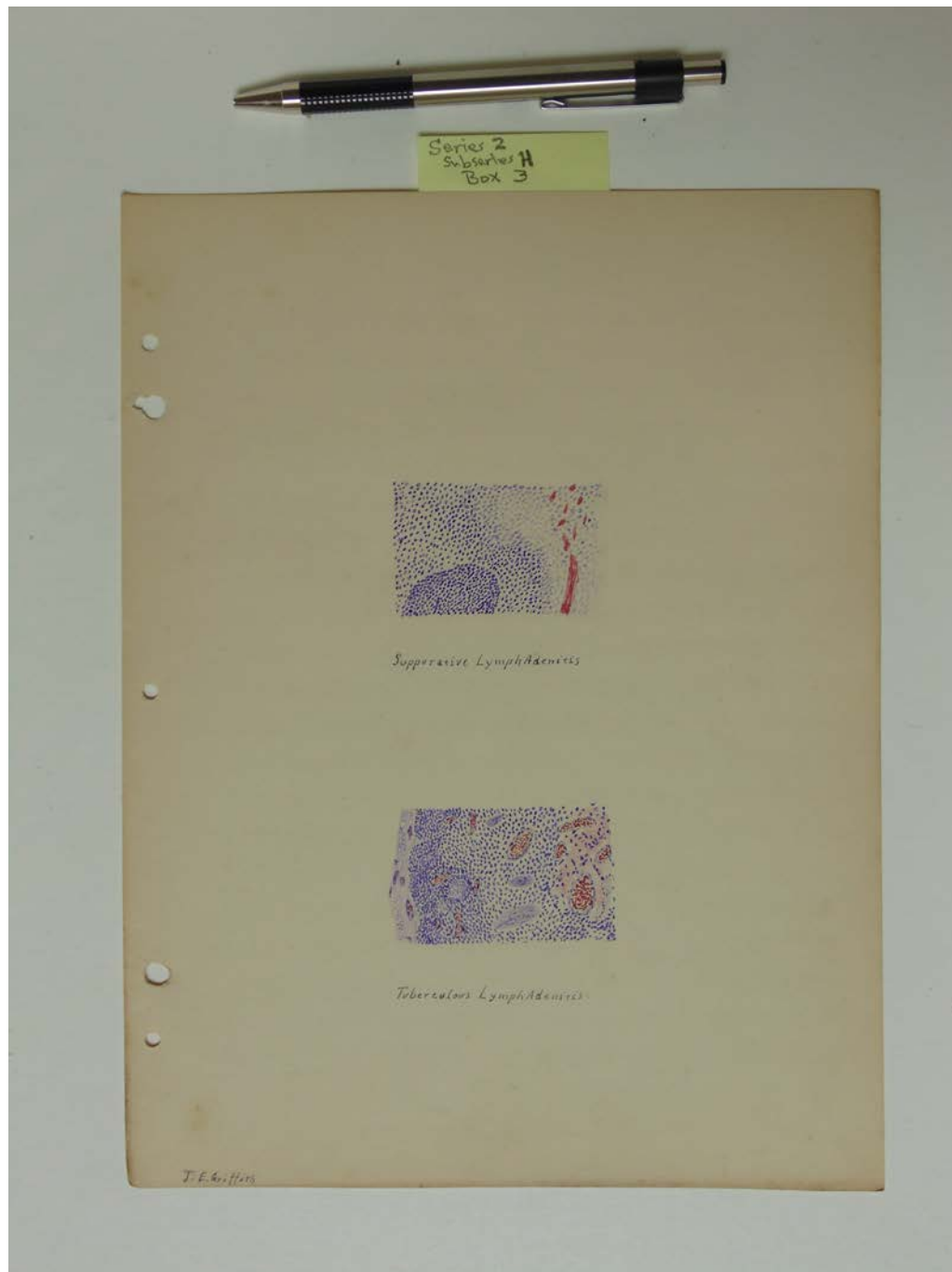
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Names:

Lymphadenitis

Types:

essay



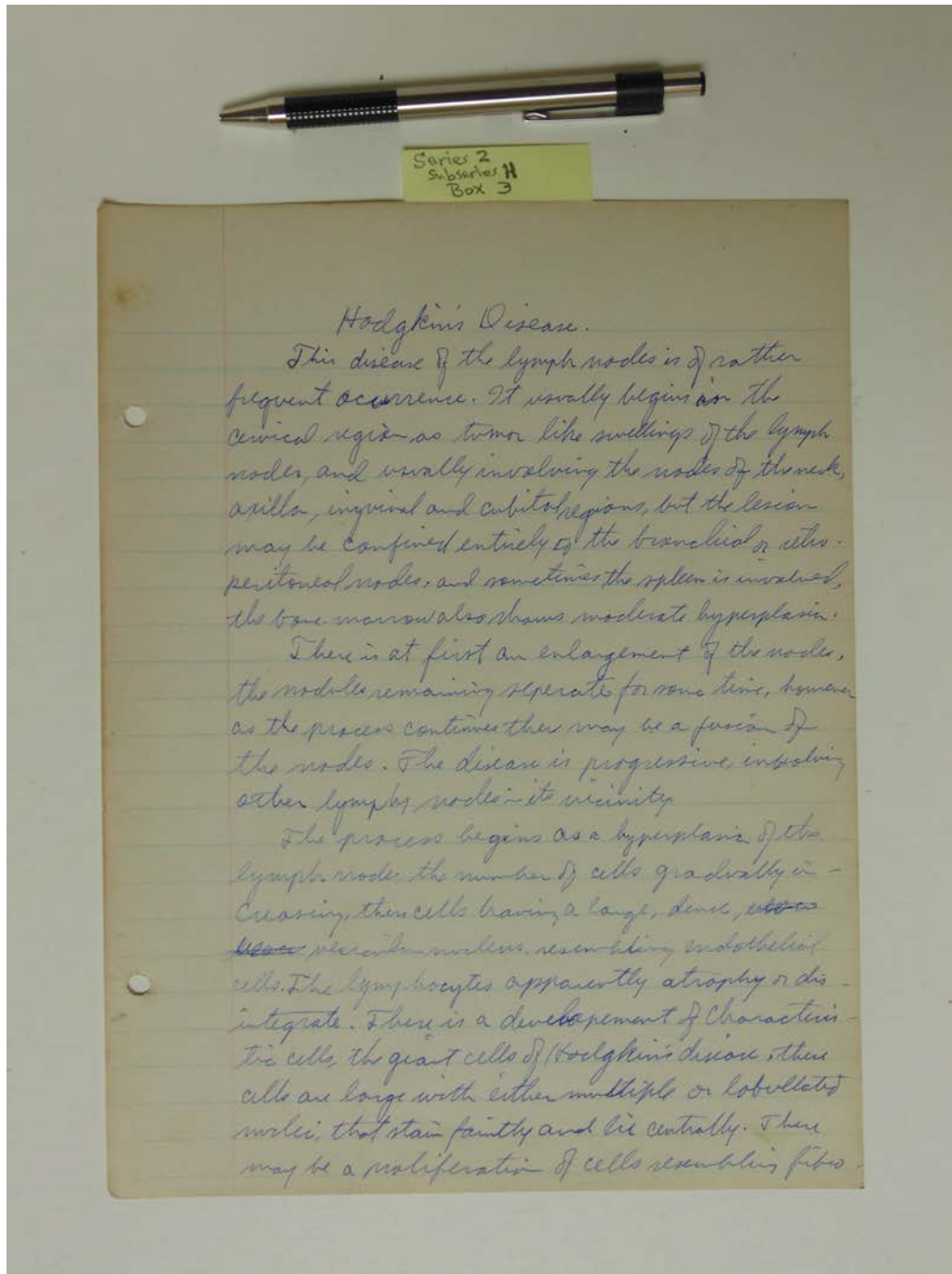
Names:

Suppurative
Lymphadenitis

Tuberculous
Lymphadenitis

Types:

drawing



Hodgkin's Disease.

This disease of the lymph nodes is of rather frequent occurrence. It usually begins in the cervical region as tumor like swellings of the lymph nodes, and usually involving the nodes of the neck, axilla, inguinal and cubital regions, but the lesion may be confined entirely to the bronchial or retro-peritoneal nodes, and sometimes the spleen is involved, the bone marrow also shows moderate hyperplasia.

There is at first an enlargement of the nodes, the nodes remaining separate for some time, however as the process continues there may be a fusion of the nodes. The disease is progressive, involving other lymph nodes in its vicinity.

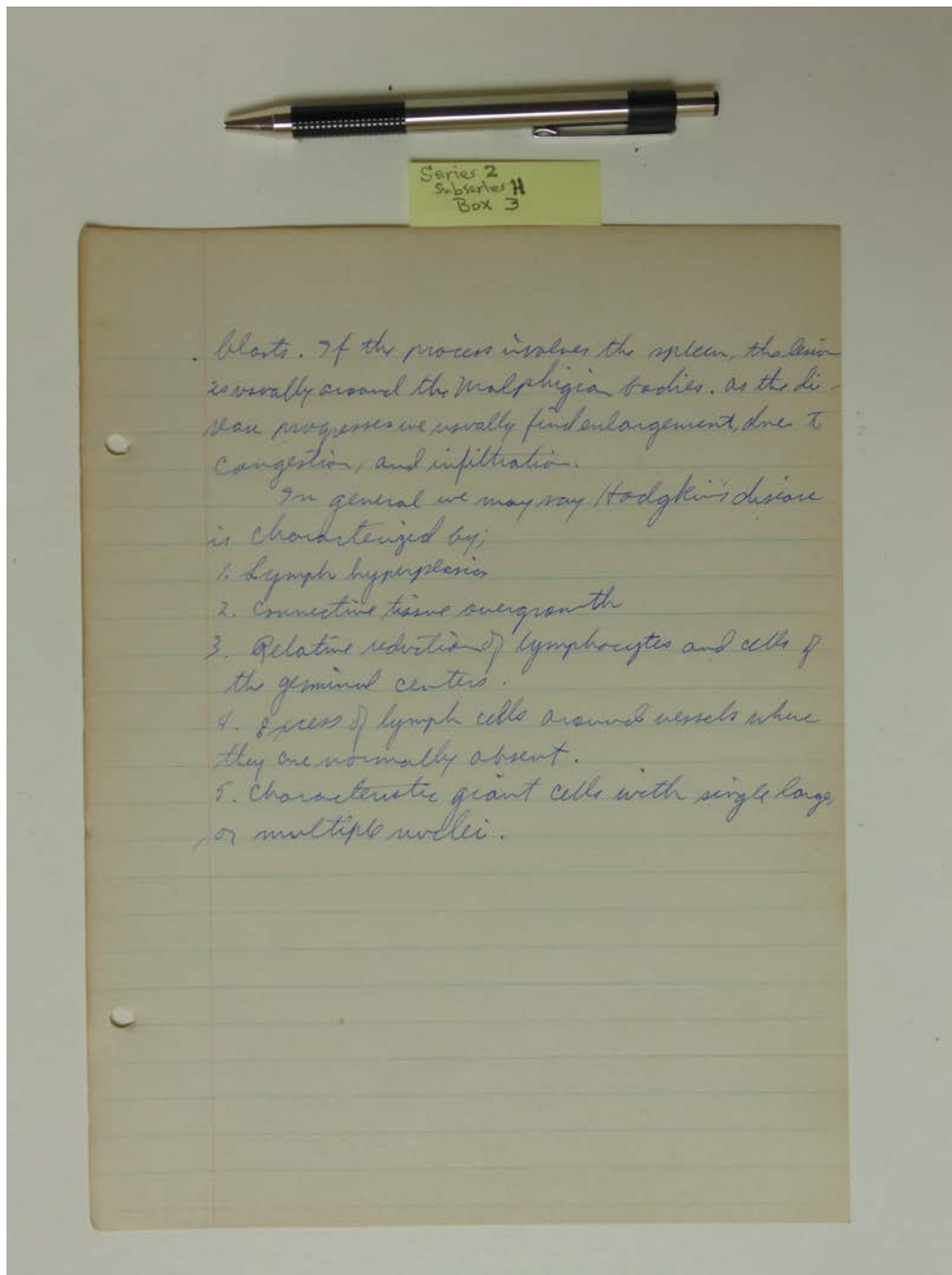
The process begins as a hyperplasia of the lymph nodes, the number of cells gradually increasing, these cells having a large, dense, ~~obovoid~~ ~~nucleus~~ nucleus, resembling endothelial cells. The lymphocytes apparently atrophy or disintegrate. There is a development of characteristic cells, the giant cells of Hodgkin's disease, these cells are large with either multiple or lobulated nuclei, that stain faintly and lie centrally. There may be a proliferation of cells resembling fibro-

Names:

Hodgkin's Disease

Types:

essay



blasts. If the process involves the spleen, the lesion is usually around the Malpighian bodies. As the disease progresses we usually find enlargement, due to congestion, and infiltration.

In general we may say Hodgkin's disease is characterized by:

1. Lymph hyperplasia
2. Connective tissue overgrowth
3. Relative reduction of lymphocytes and cells of the germinal centers.
4. Excess of lymph cells around vessels where they are normally absent.
5. Characteristic giant cells with single large or multiple nuclei.

Names:

Hodgkin's Disease

Types:

essay



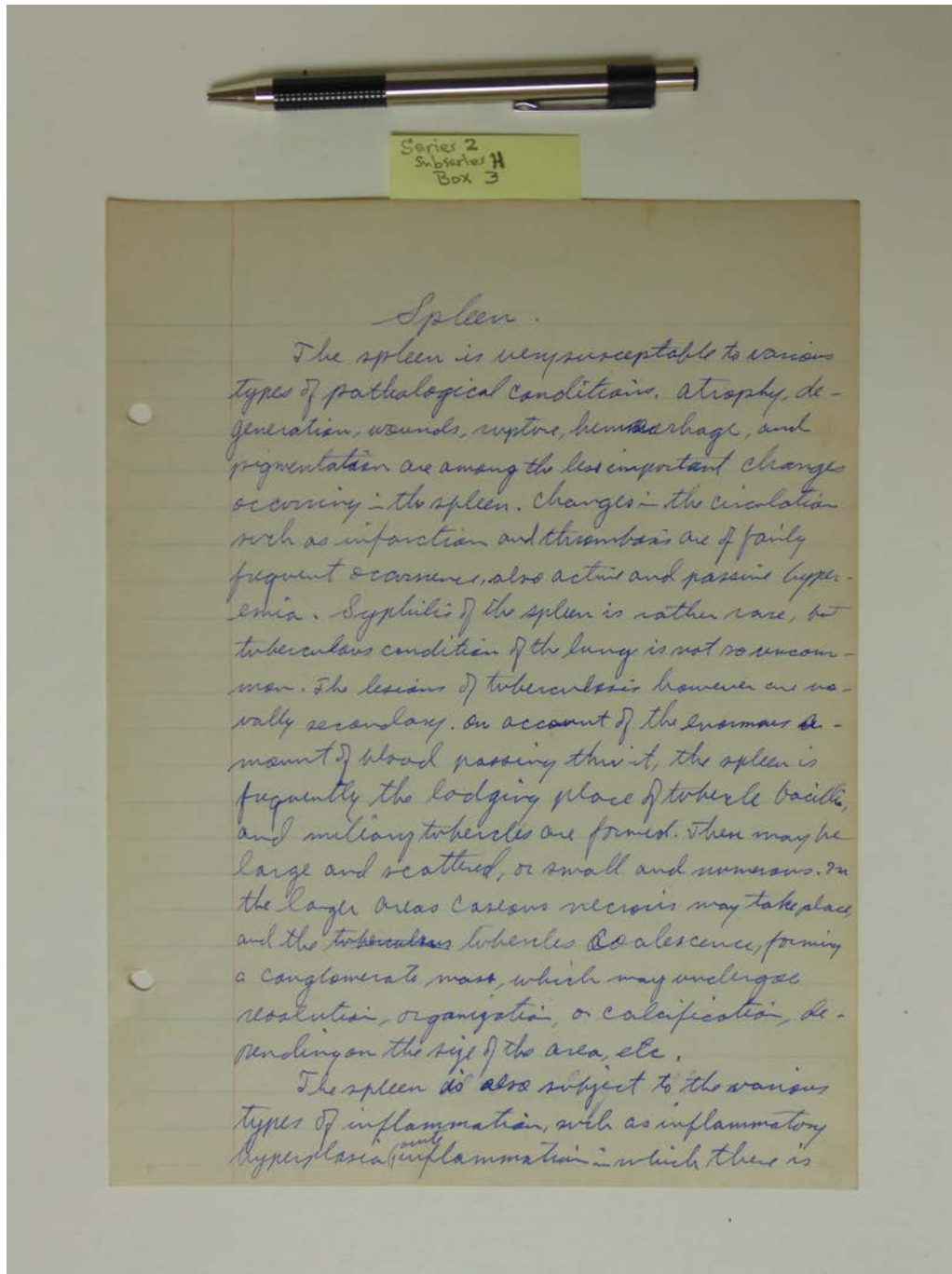
Names:

Hodgkin's Disease

Tuberculous
Lymphadenitis

Types:

drawing



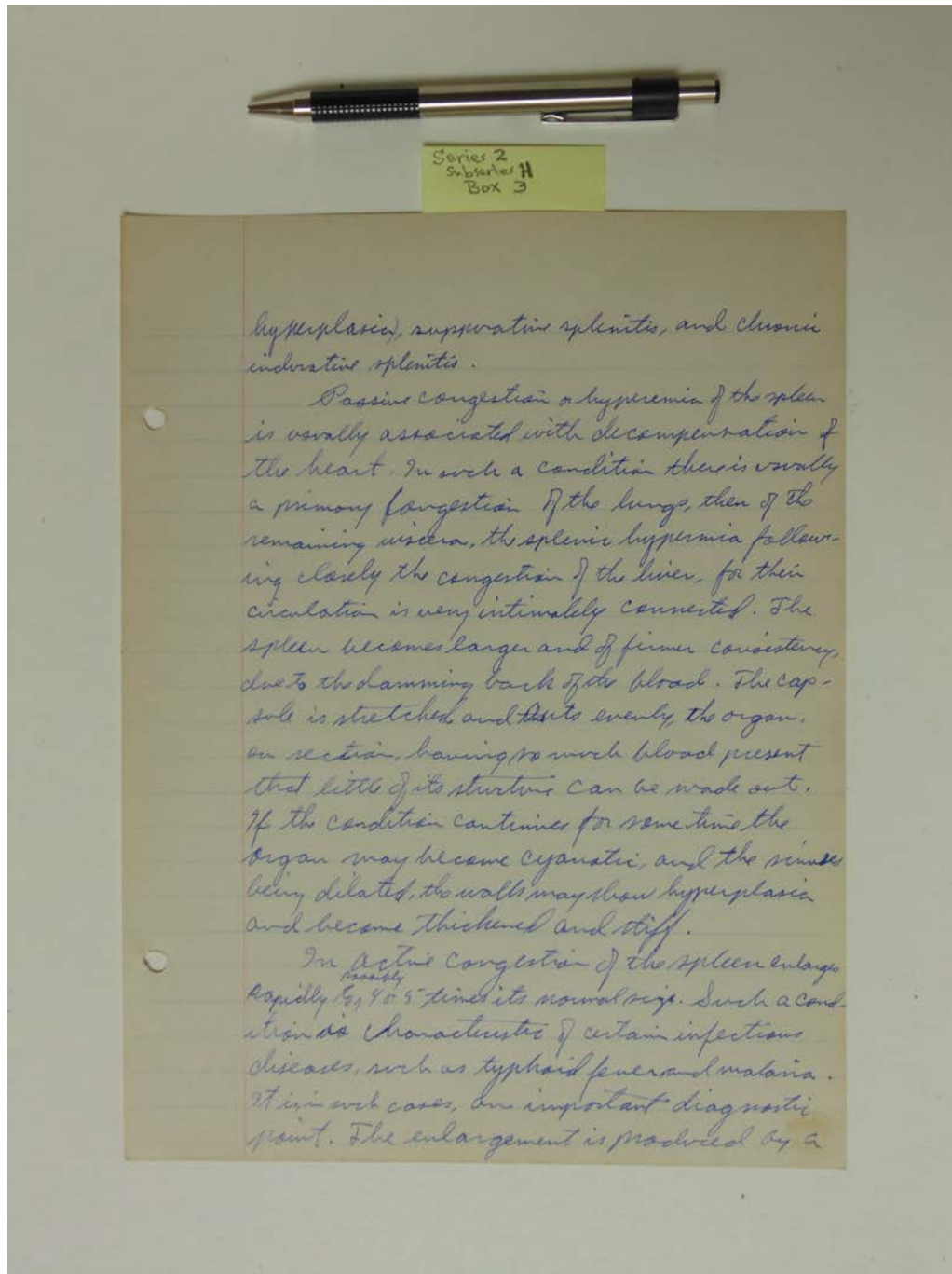
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Names:

Spleen

Types:

essay



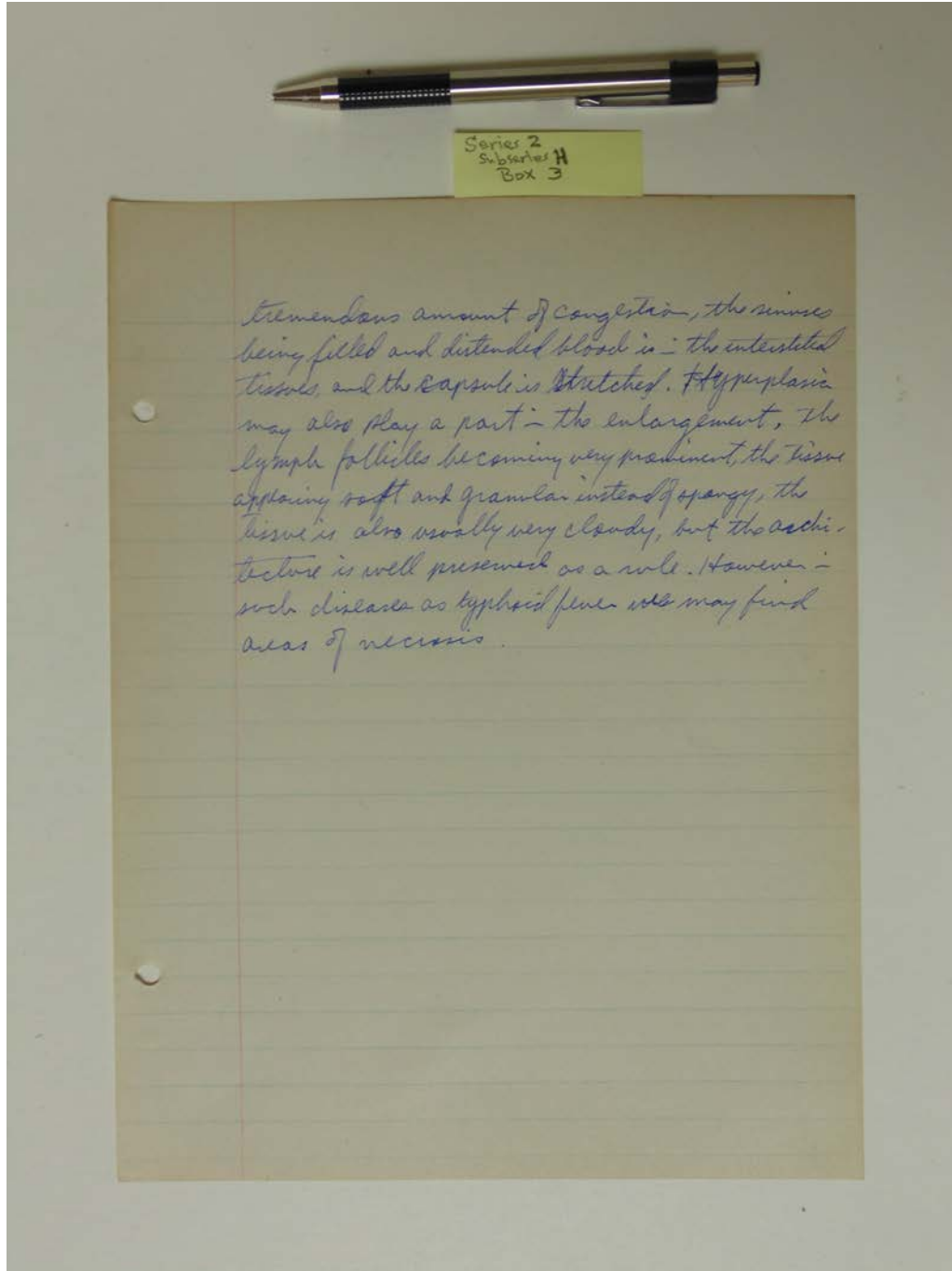
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Names:

Spleen

Types:

essay



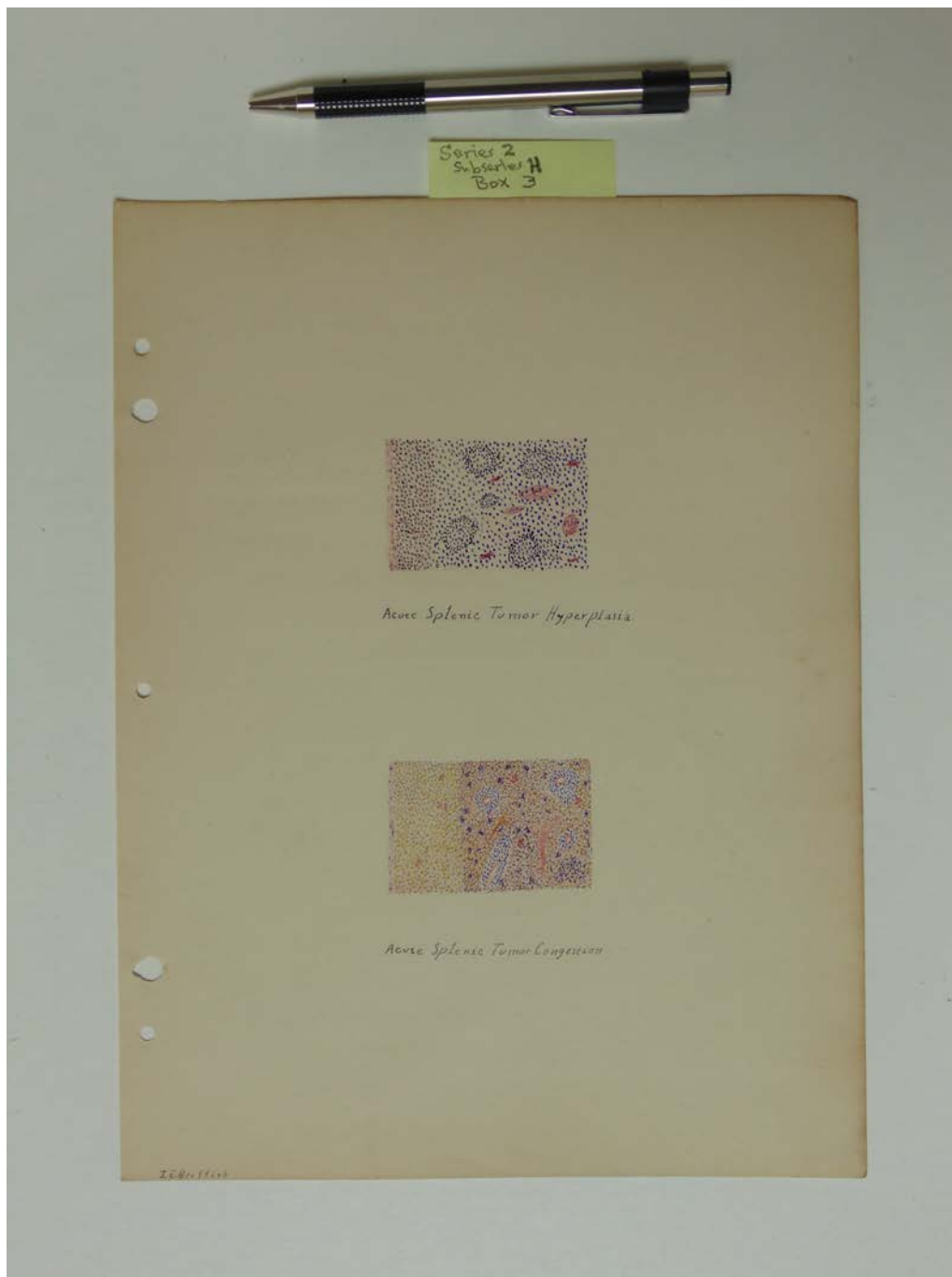
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Names:

Spleen

Types:

essay



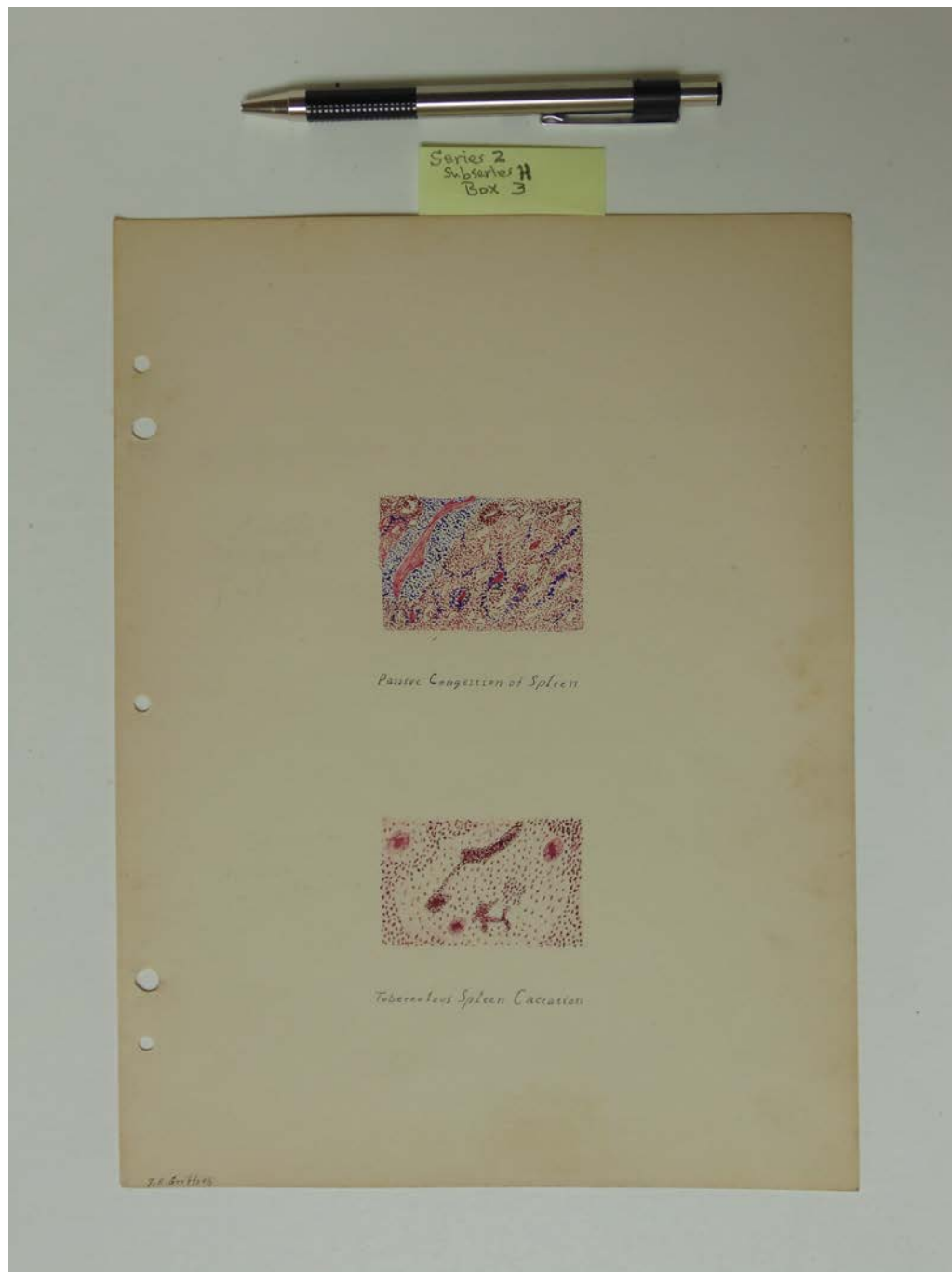
Names:

Acute Splenic Tumor
Congestion

Acute Splenic Tumor
Hyperplasia

Types:

drawing



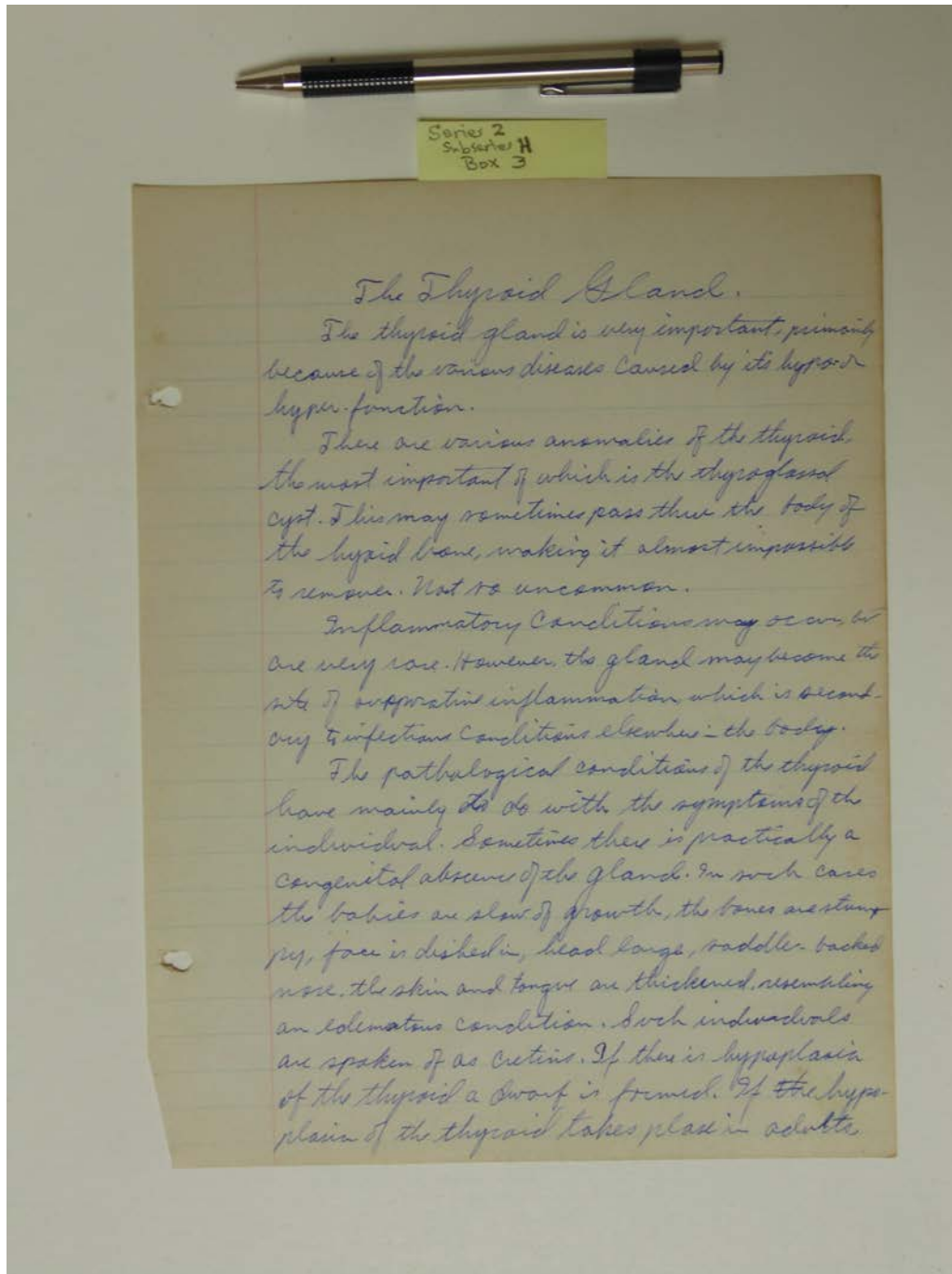
Names:

Passive Congestion of
Spleen

Tuberculous Spleen
Caccation

Types:

drawing



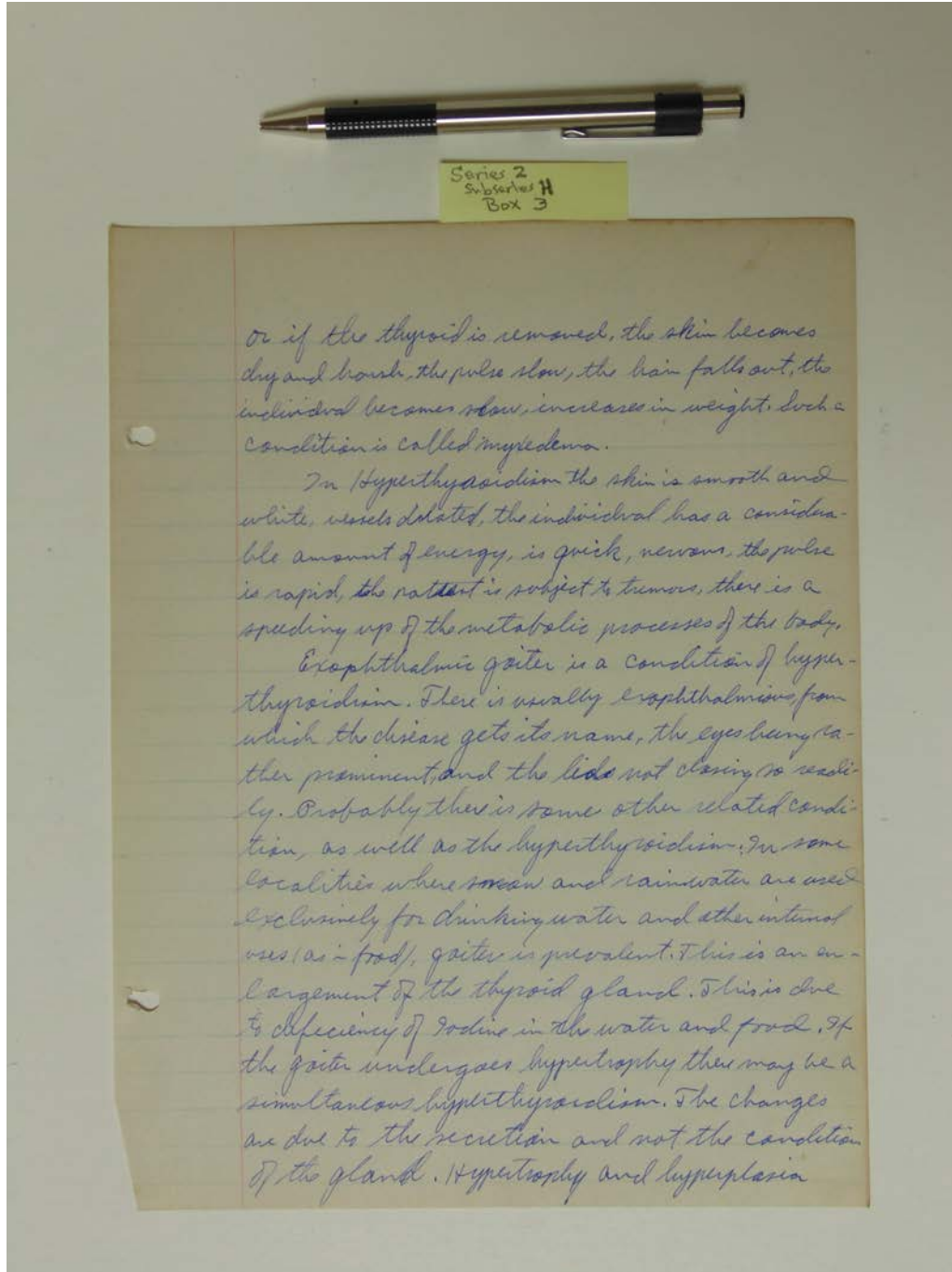
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Names:

Thyroid Gland

Types:

essay



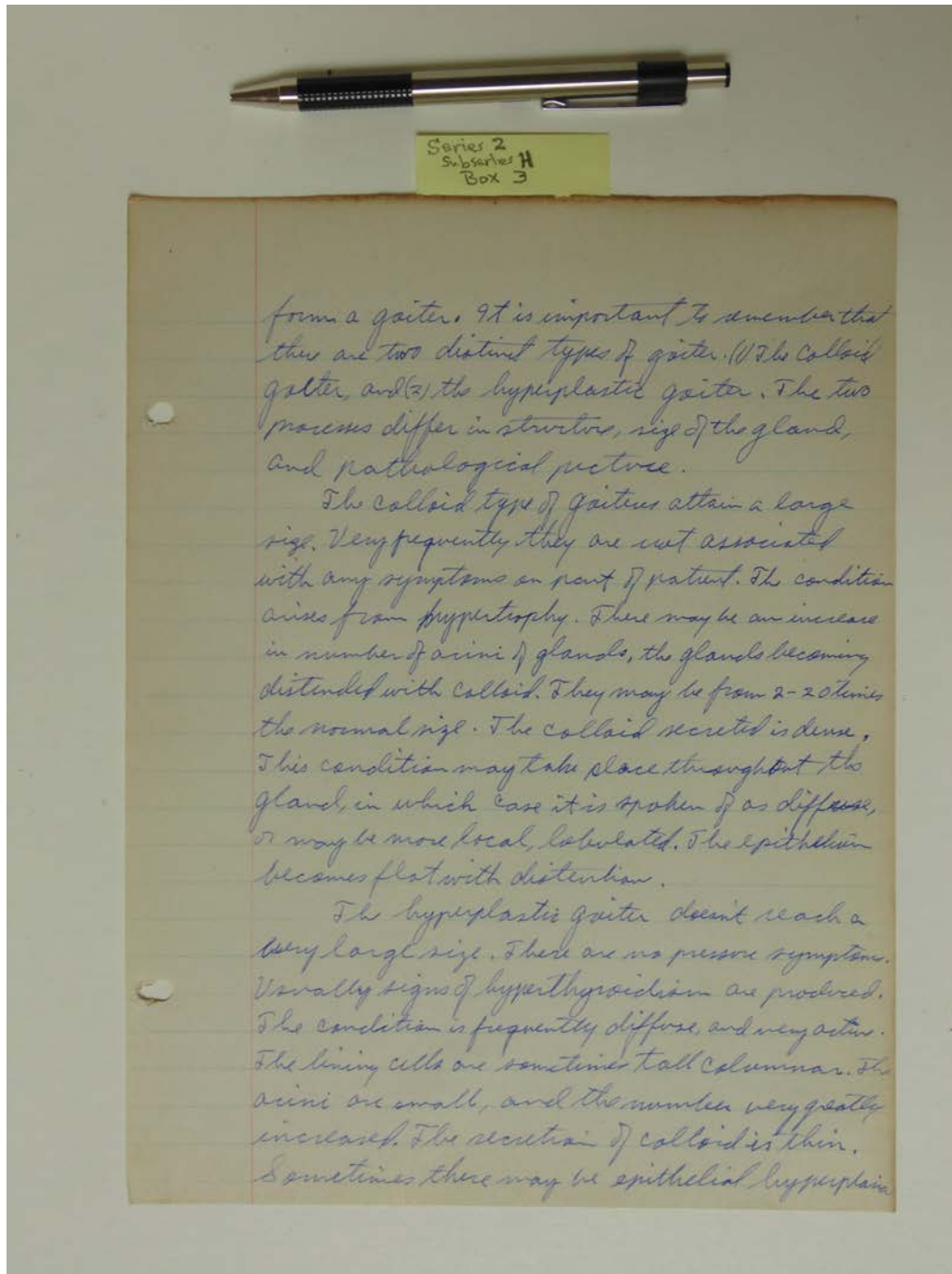
p. 2

Names:

Thyroid Gland

Types:

essay



from a goiter. It is important to remember that there are two distinct types of goiter. (1) The Colloid goiter, and (2) the hyperplastic goiter. The two processes differ in structure, size of the gland, and pathological picture.

The colloid type of goiters attain a large size. Very frequently they are not associated with any symptoms on part of patient. The condition arises from hypertrophy. There may be an increase in number of acini of glands, the glands becoming distended with colloid. They may be from 2-20 times the normal size. The colloid secreted is dense. This condition may take place throughout the gland, in which case it is spoken of as diffuse, or may be more local, lobulated. The epithelium becomes flat with distention.

The hyperplastic goiter doesn't reach a very large size. There are no pressure symptoms. Usually signs of hyperthyroidism are produced. The condition is frequently diffuse, and very active. The lining cells are sometimes tall columnar. The acini are small, and the number very greatly increased. The secretion of colloid is thin. Sometimes there may be epithelial hyperplasia.

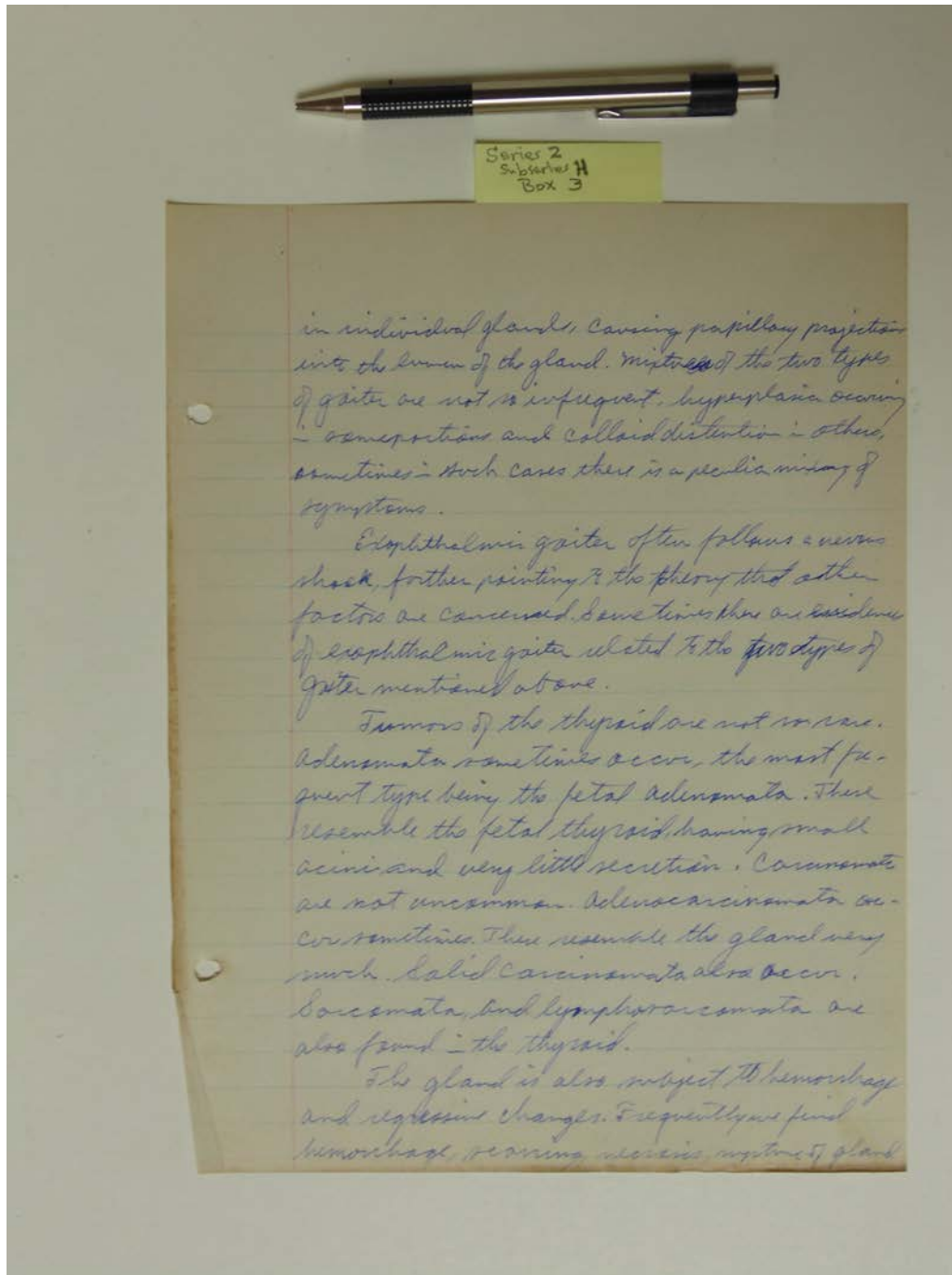
p. 3

Names:

Thyroid Gland

Types:

essay



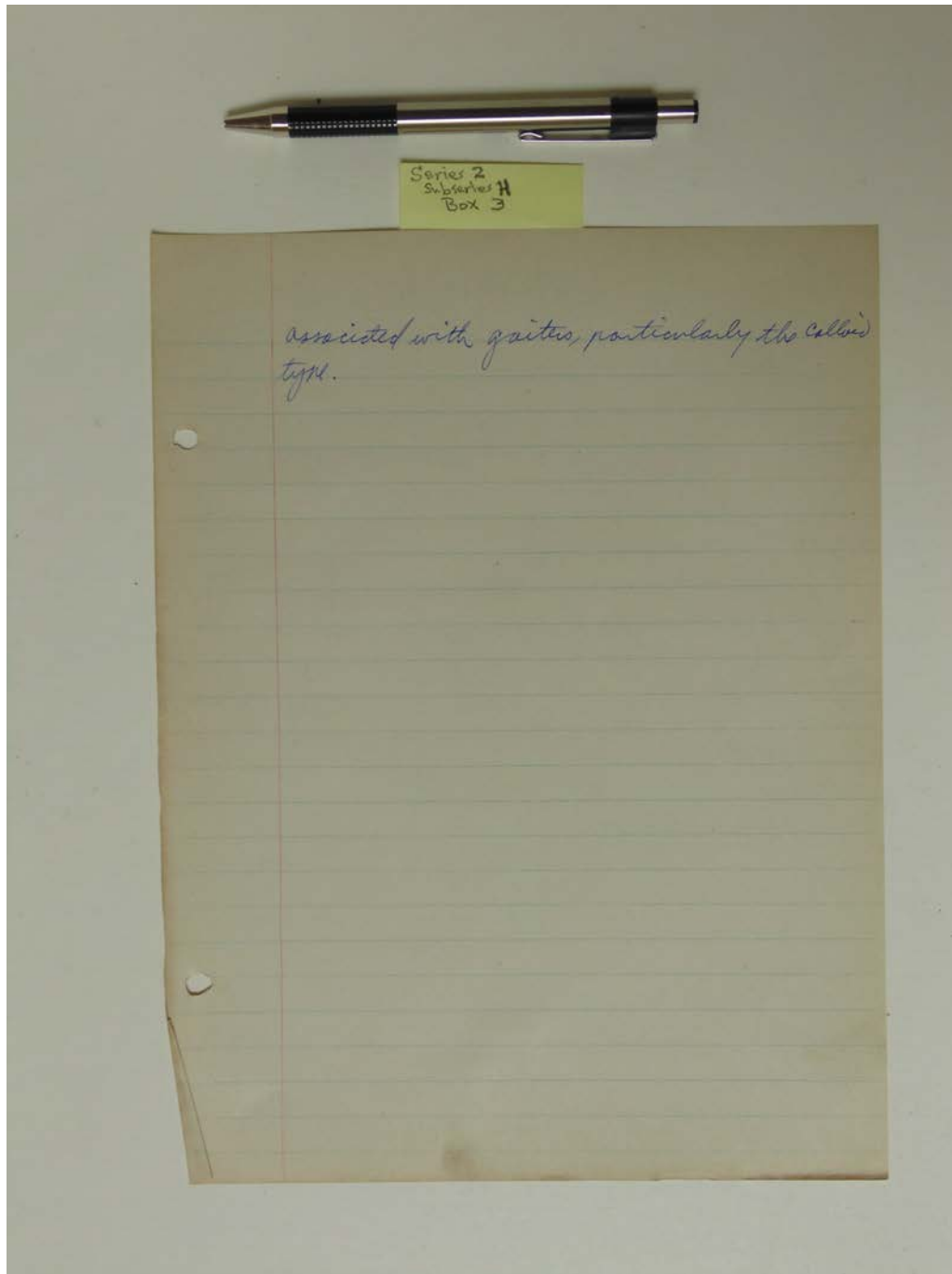
p. 4

Names:

Thyroid Gland

Types:

essay



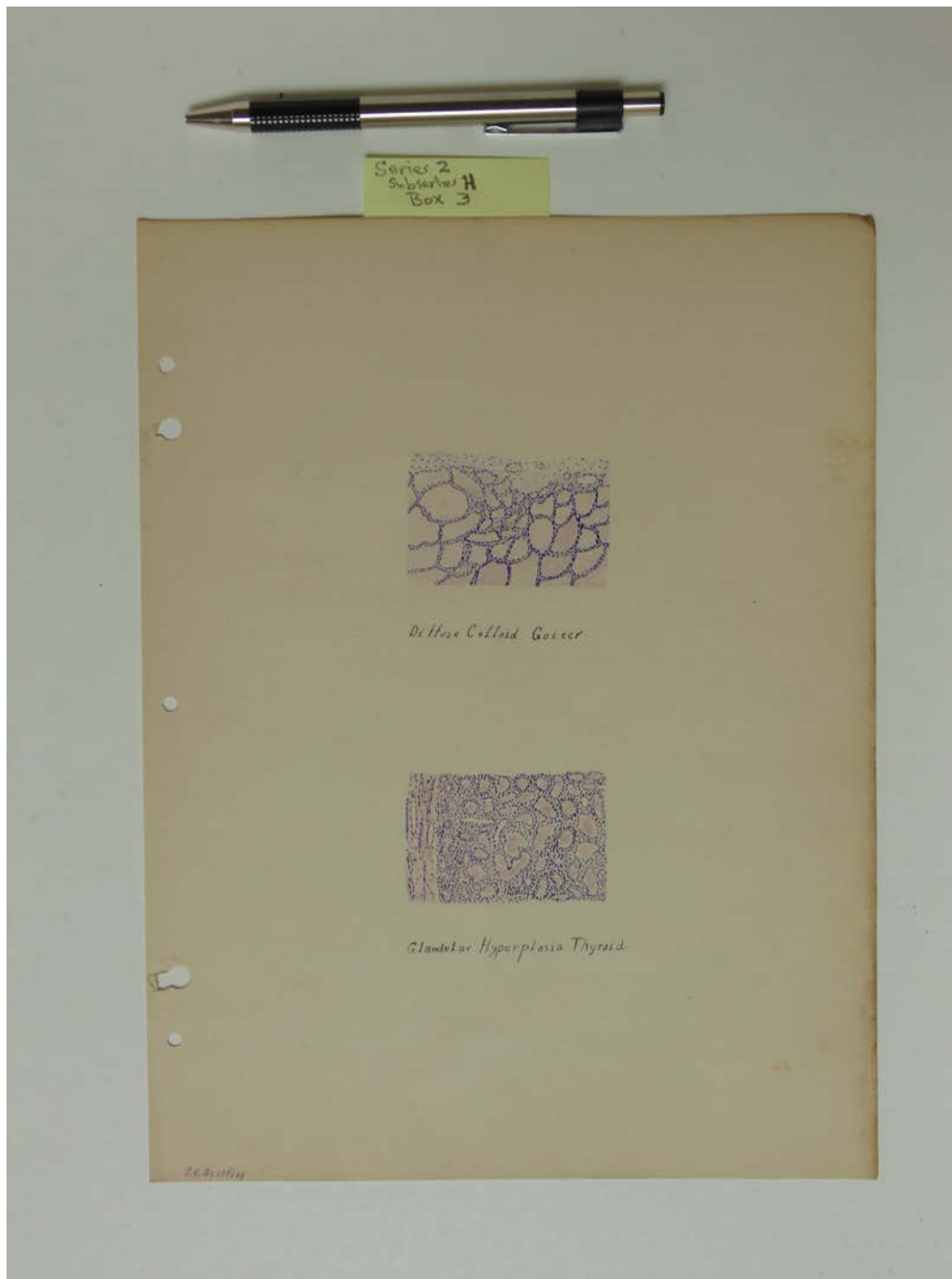
p. 5

Names:

Thyroid Gland

Types:

essay



Names:

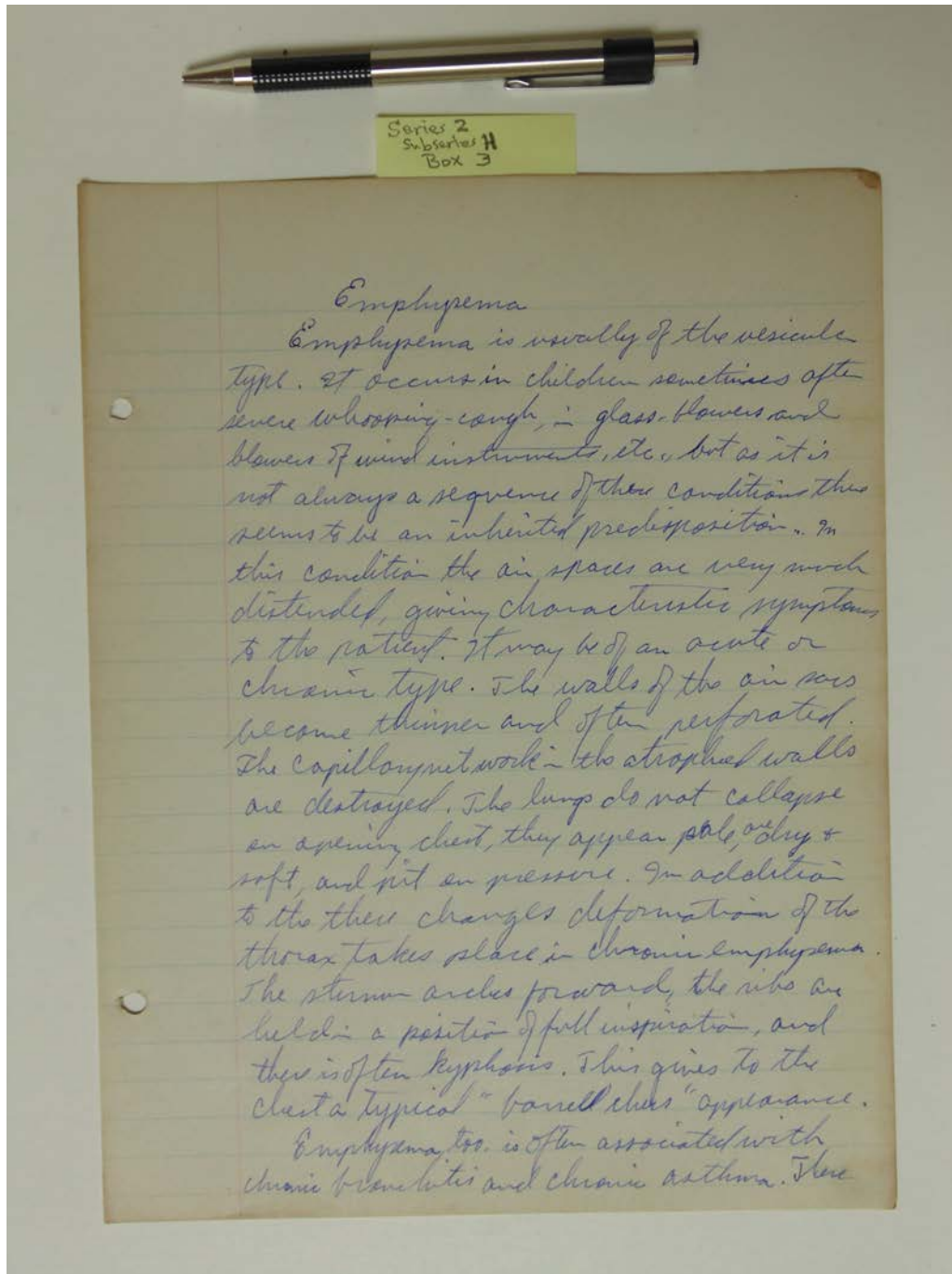
Diffuse Colloid
Goiter

Glandular
Hyperplasia

Thyroid

Types:

drawing



Emphysema

Emphysema is usually of the vesicular type. It occurs in children sometimes after severe whooping-cough, in glass-blowers and blowers of wind instruments, etc., but as it is not always a sequense of these conditions this seems to be an inherited predisposition. In this condition the air spaces are very much distended, giving characteristic symptoms to the patient. It may be of an acute or chronic type. The walls of the air sacs become thinner and often perforated. The capillary network in the atrophied walls are destroyed. The lungs do not collapse on opening chest, they appear pale, dry & soft, and pit on pressure. In addition to the these changes deformation of the thorax takes place in chronic emphysema. The sternum arches forward, the ribs are held in a position of full inspiration, and there is often kyphosis. This gives to the chest a typical "barrel chest" appearance.

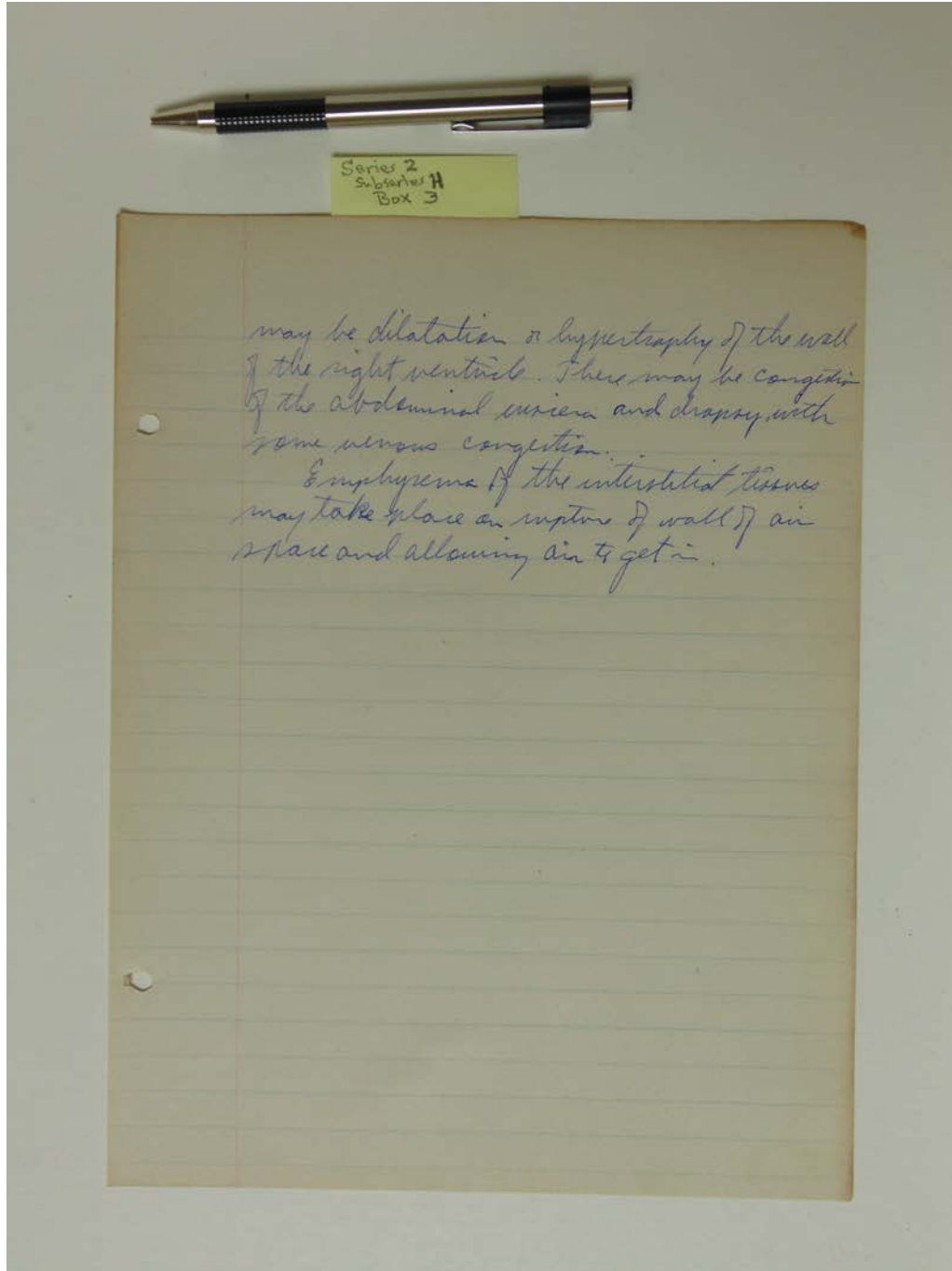
Emphysema, too, is often associated with chronic bronchitis and chronic asthma. There

Names:

Emphysema

Types:

essay

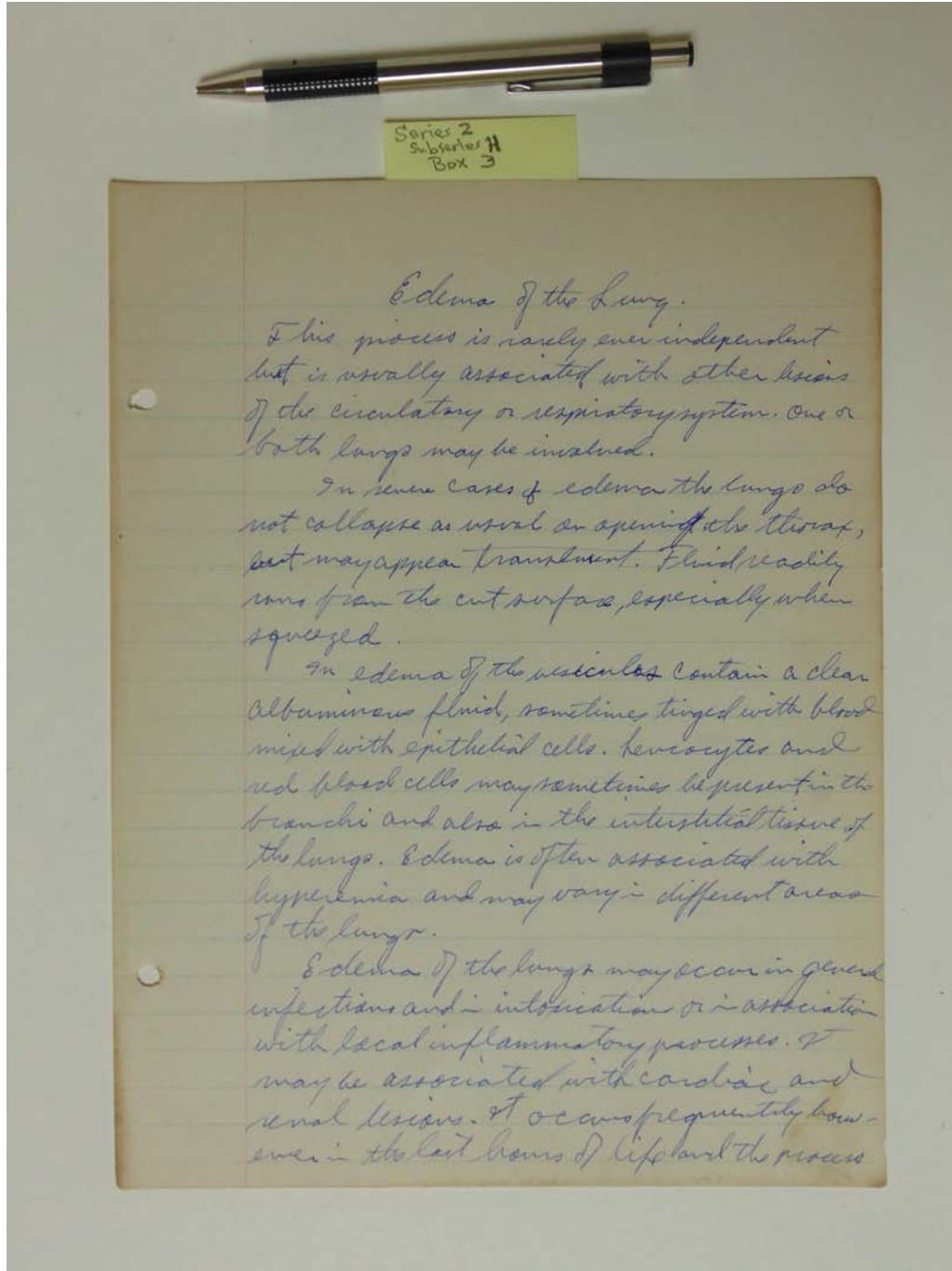


Names:

Emphysema

Types:

essay

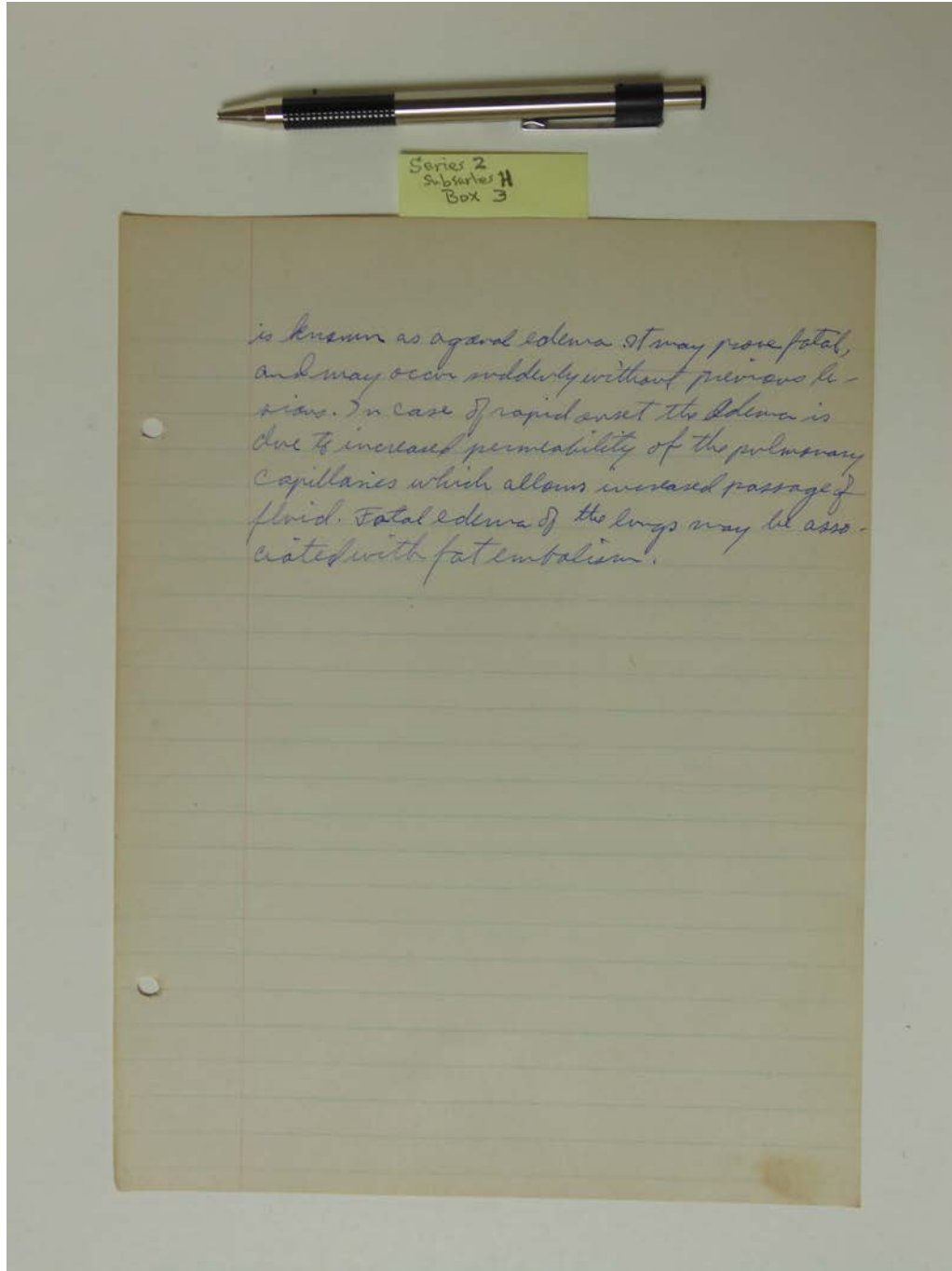


Names:

Edema of the Lung

Types:

essay

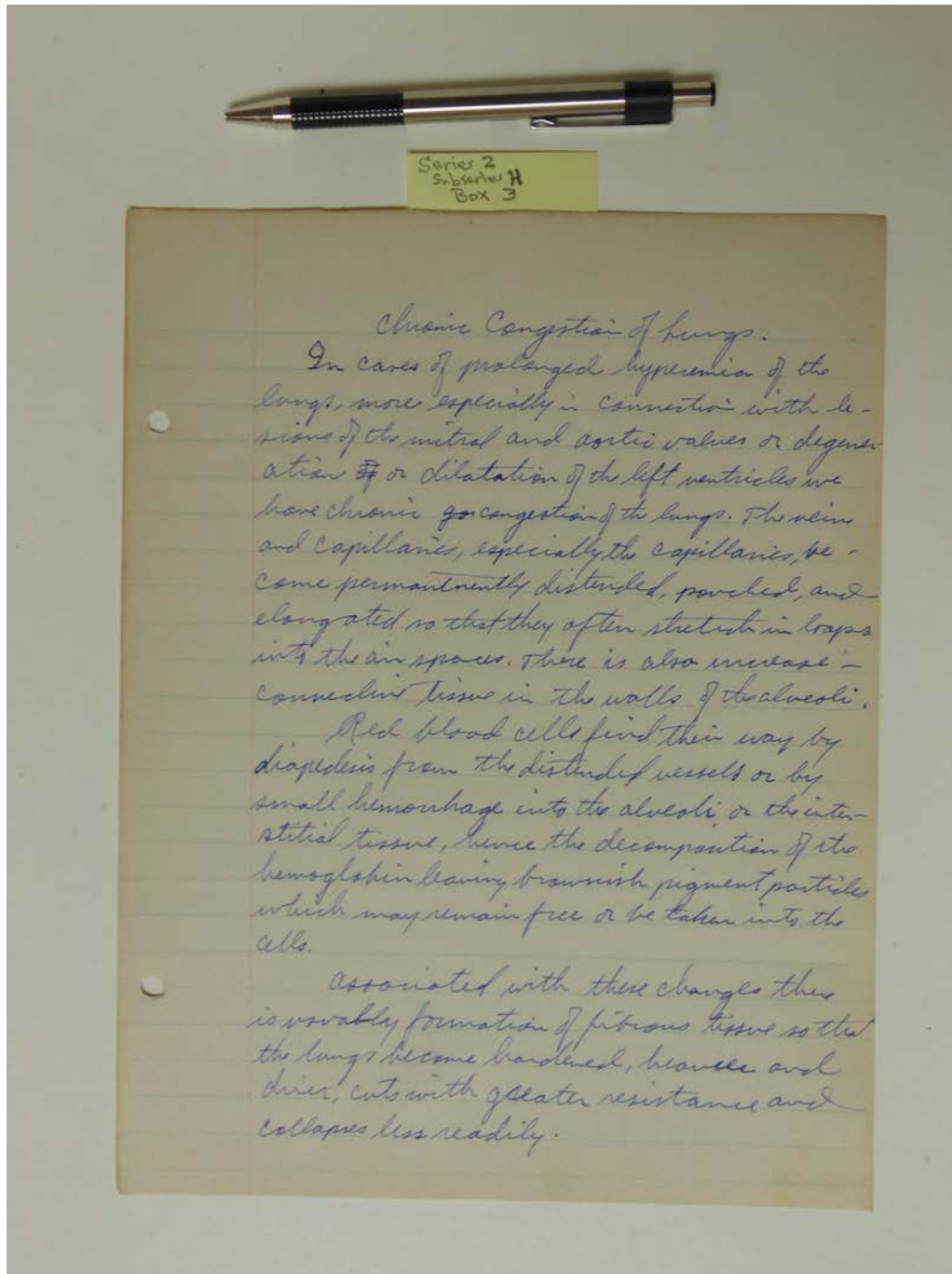


Names:

Edema of the Lung

Types:

essay



Series 2
Subseries H
Box 3

Chronic Congestion of Lungs.

In cases of prolonged hyperemia of the lungs, more especially in connection with lesions of the mitral and aortic valves or degeneration ~~of~~ or dilatation of the left ventricles we have chronic ~~of~~ congestion of the lungs. The veins and capillaries, especially the capillaries, become permanently distended, sponged, and elongated so that they often stretch in loops into the air spaces. There is also increase in connective tissue in the walls of the alveoli.

Red blood cells find their way by diapedesis from the distended vessels or by small hemorrhage into the alveoli or the interstitial tissue, hence the decomposition of the hemoglobin leaving brownish pigment particles which may remain free or be taken into the cells.

Associated with these changes there is usually formation of fibrous tissue so that the lungs become hardened, heavier and drier, cut with greater resistance and collapse less readily.

Names:

Chronic Congestion
of Lungs

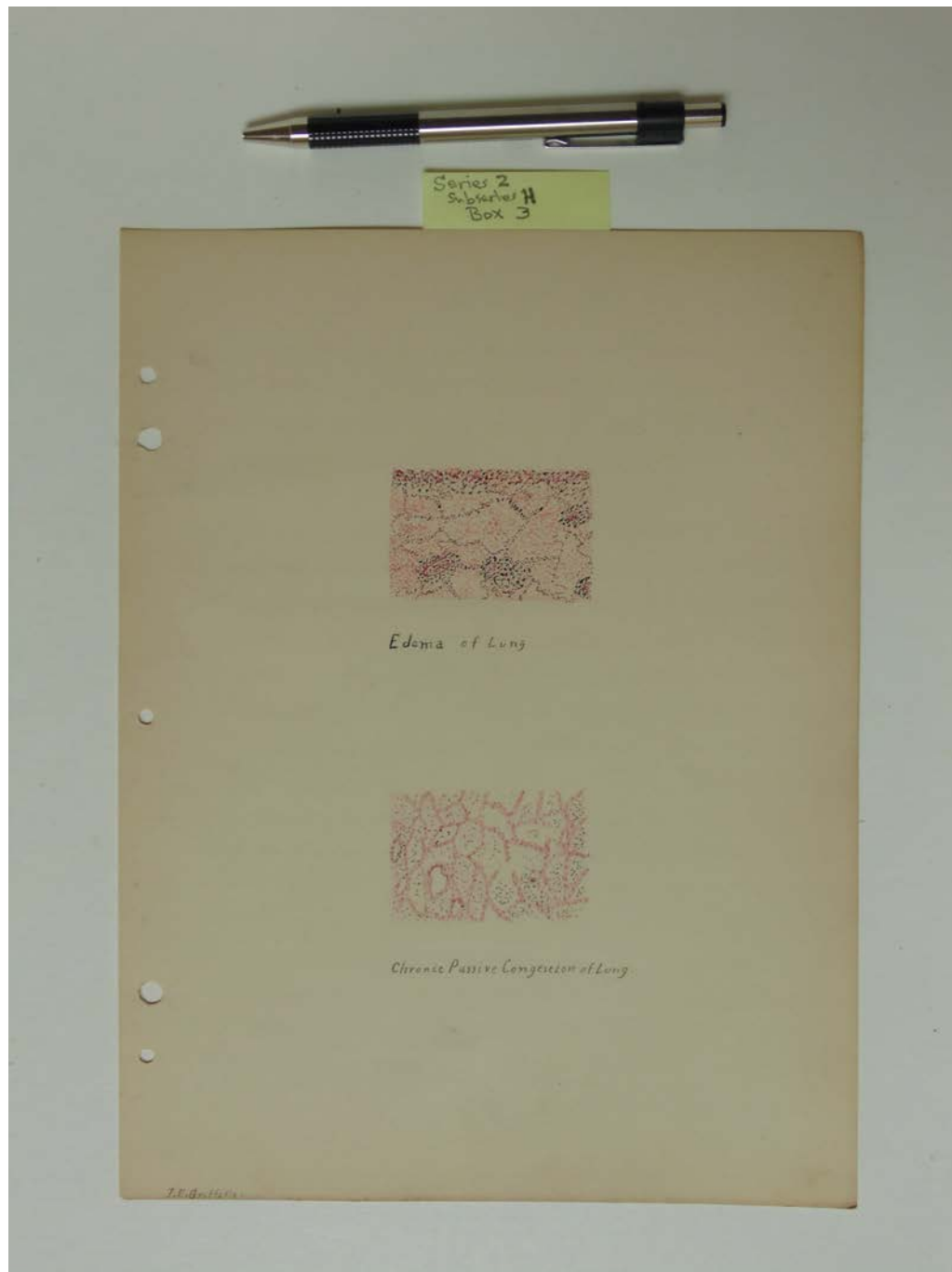
Types:

essay

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J.E. Griffith Pathology Notes, circa 1928

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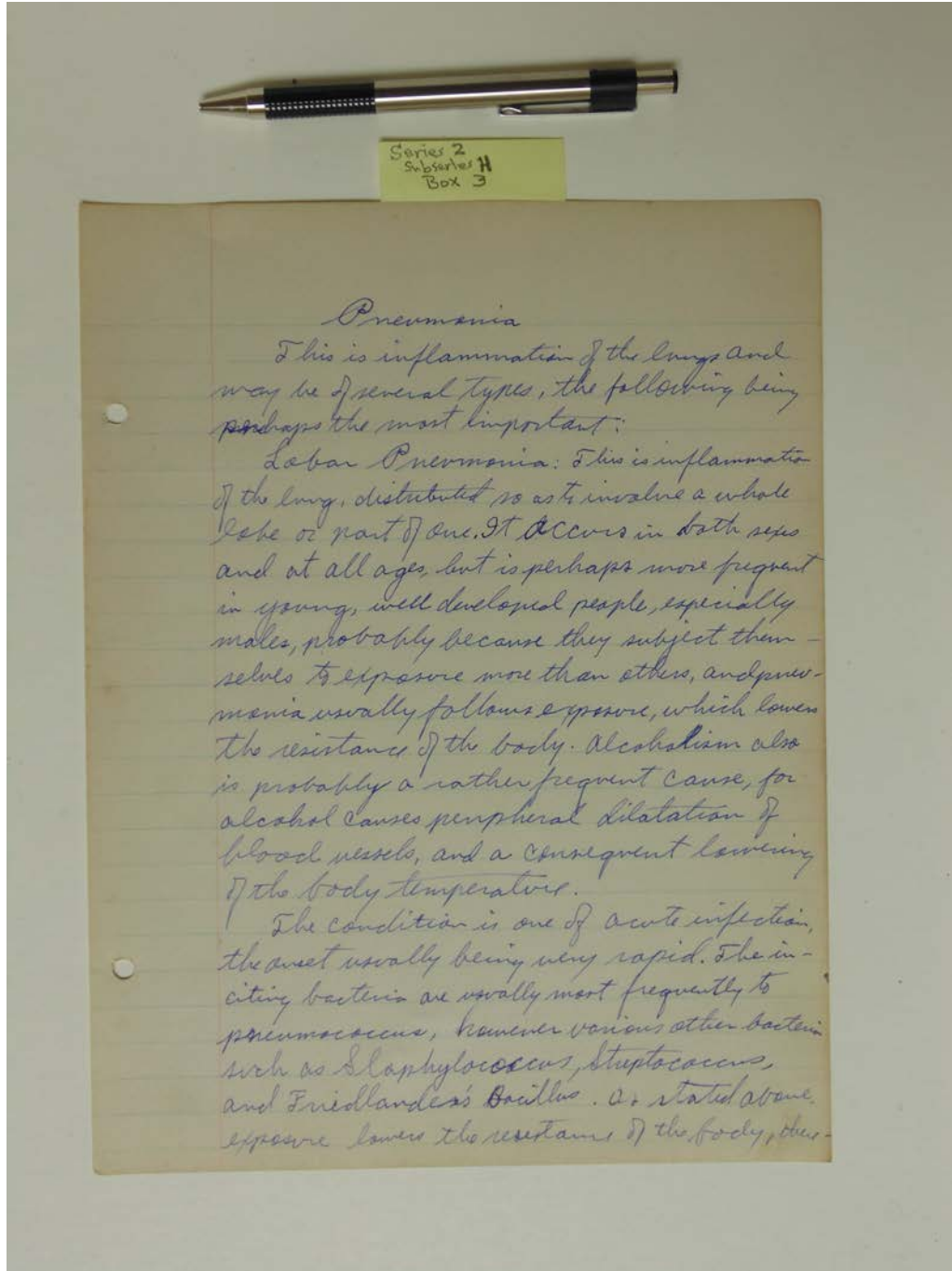
Names:

Chronic Passive
Congestion of Lung

Edema of Lung

Types:

drawing



Series 2
Subseries H
Box 3

Pneumonia

This is inflammation of the lungs and may be of several types, the following being perhaps the most important:

Lobar Pneumonia: This is inflammation of the lung, distributed so as to involve a whole lobe or part of one. It occurs in both sexes and at all ages, but is perhaps more frequent in young, well developed people, especially males, probably because they subject themselves to exposure more than others, and pneumonia usually follows exposure, which lowers the resistance of the body. Alcoholism also is probably a rather frequent cause, for alcohol causes peripheral dilatation of blood vessels, and a consequent lowering of the body temperature.

The condition is one of acute infection, the onset usually being very rapid. The inciting bacteria are usually most frequently the pneumococcus, however various other bacteria such as *Staphylococcus*, *Streptococcus*, and *Friedlander's Bacillus*. As stated above, exposure lowers the resistance of the body, thus

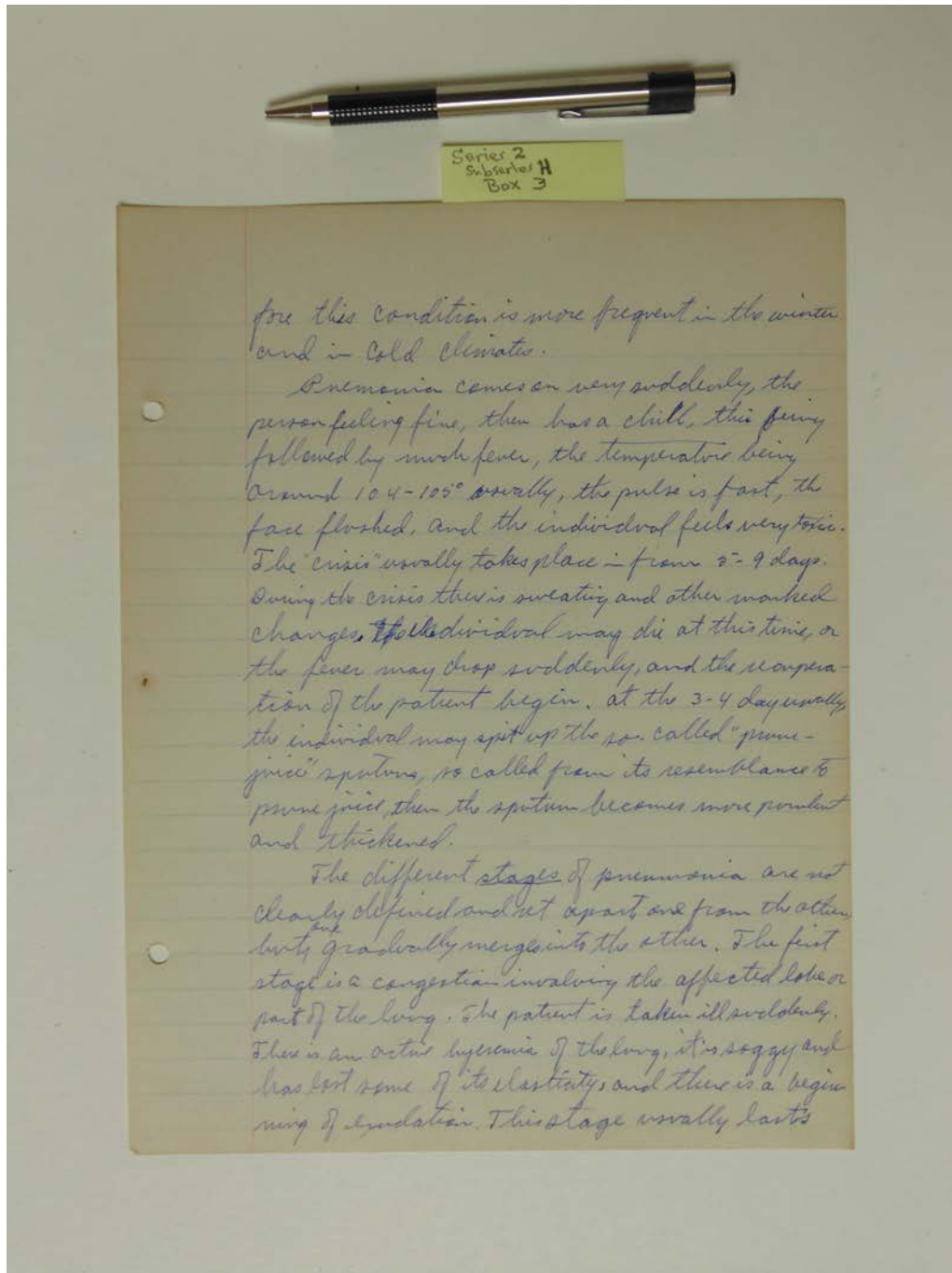
p. 1

Names:

Pneumonia

Types:

essay



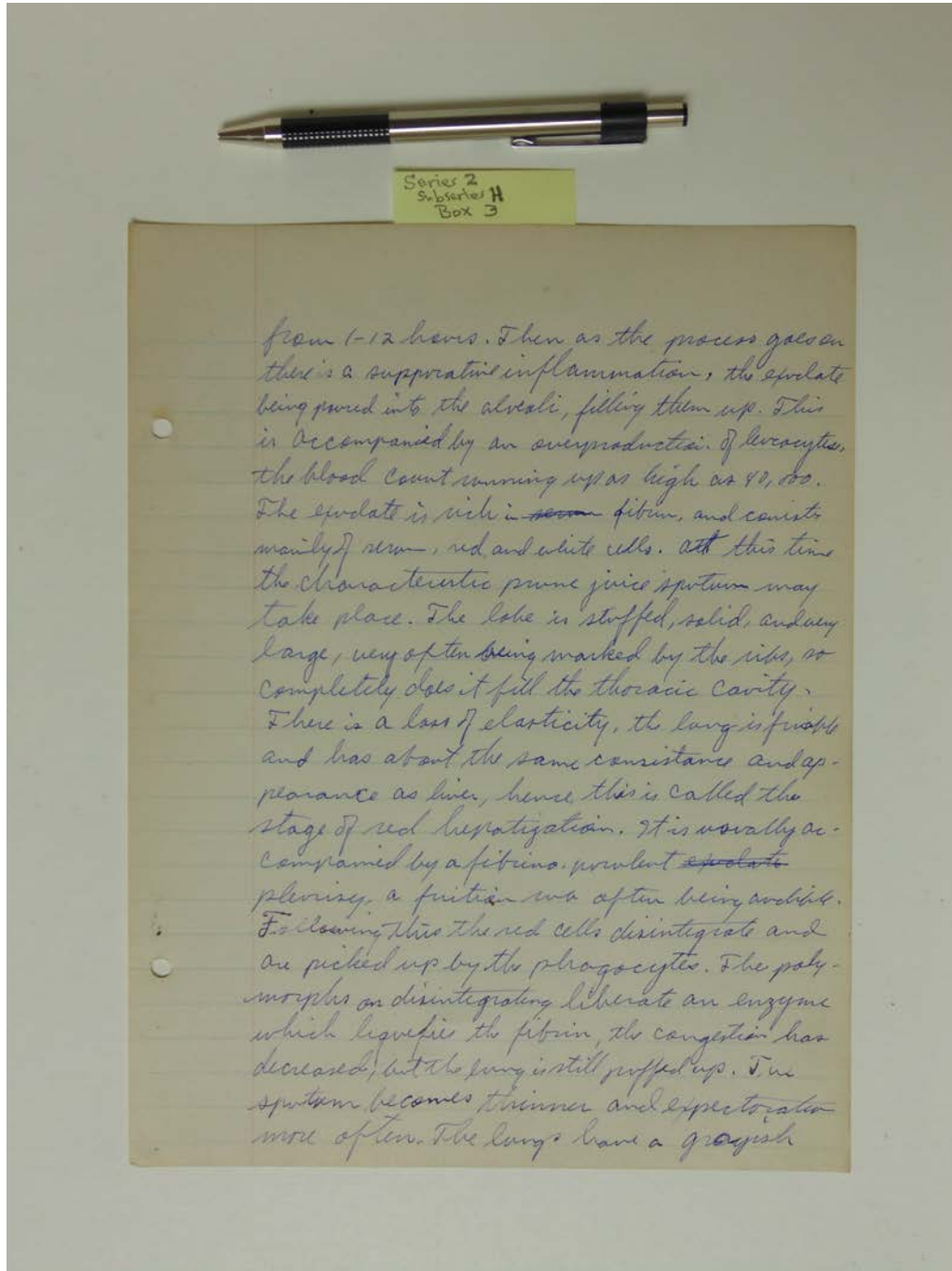
p. 2

Names:

Pneumonia

Types:

essay



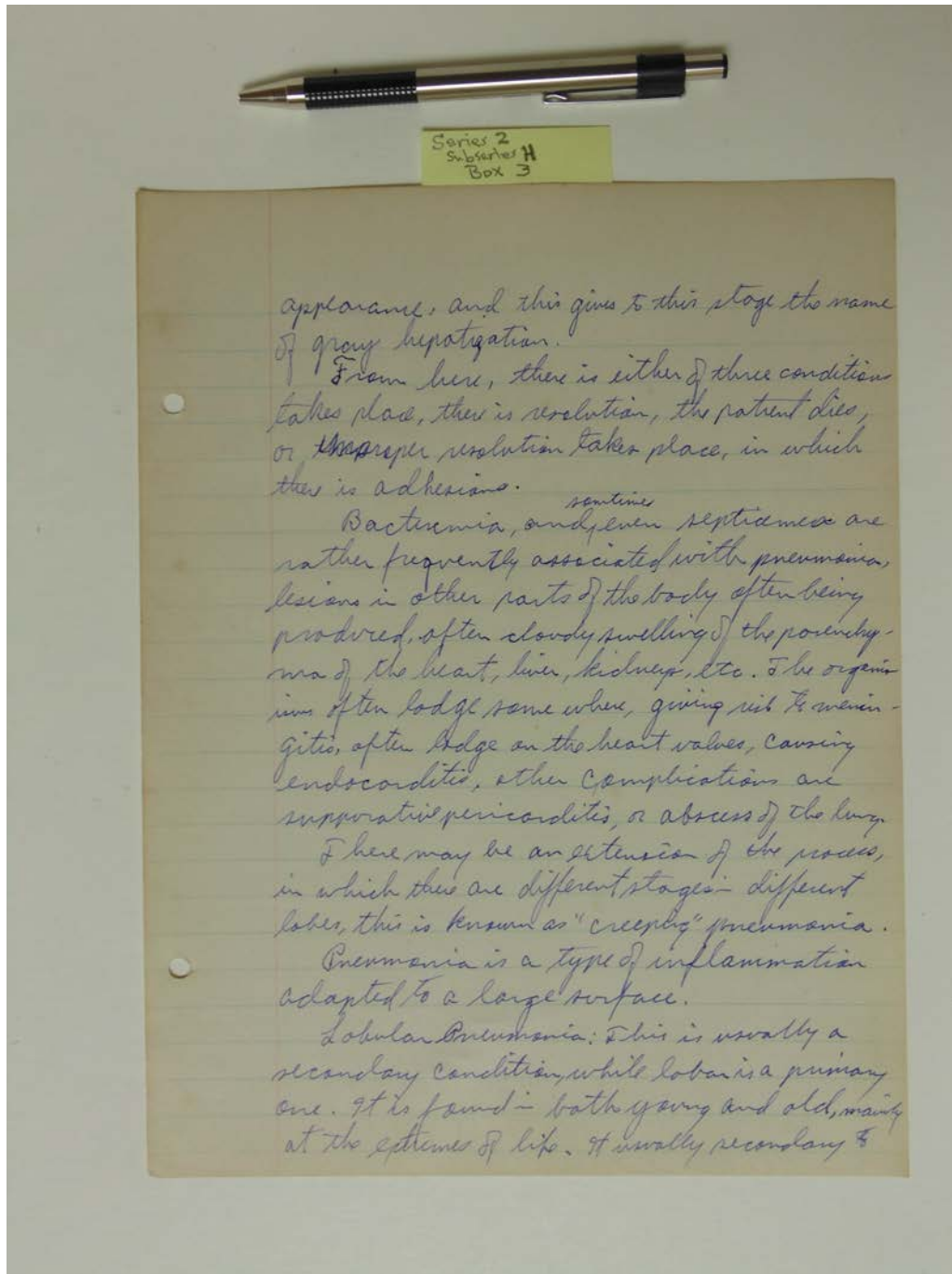
p. 3

Names:

Pneumonia

Types:

essay



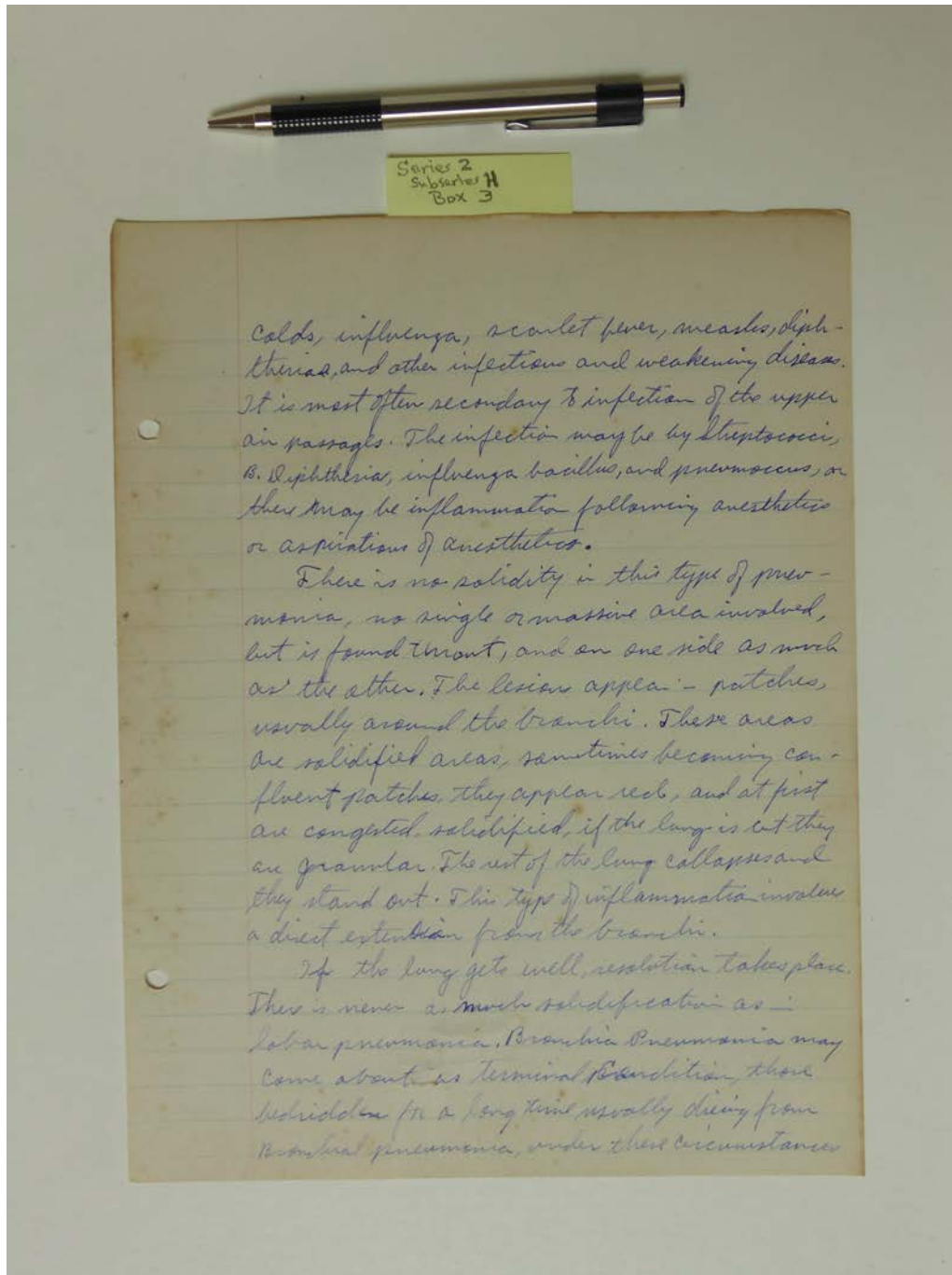
p. 4

Names:

Pneumonia

Types:

essay



Colds, influenza, scarlet fever, measles, diphtheria, and other infectious and weakening diseases. It is most often secondary to infection of the upper air passages. The infection may be by streptococci, B. Diphtheria, influenza bacillus, and pneumococci, or there may be inflammation following anesthesia or aspiration of anesthetics.

There is no solidity in this type of pneumonia, no single or massive area involved, but is found throughout, and on one side as much as the other. The lesions appear as patches, usually around the bronchi. These areas are solidified areas, sometimes becoming confluent patches. They appear red, and at first are congested. Solidified, if the lung is cut they are granular. The rest of the lung collapses and they stand out. This type of inflammation involves a direct extension from the bronchi.

If the lung gets well, resolution takes place. There is never as much solidification as in lobar pneumonia. Bronchial pneumonia may come about as terminal condition, those bedridden for a long time usually dying from bronchial pneumonia, under these circumstances

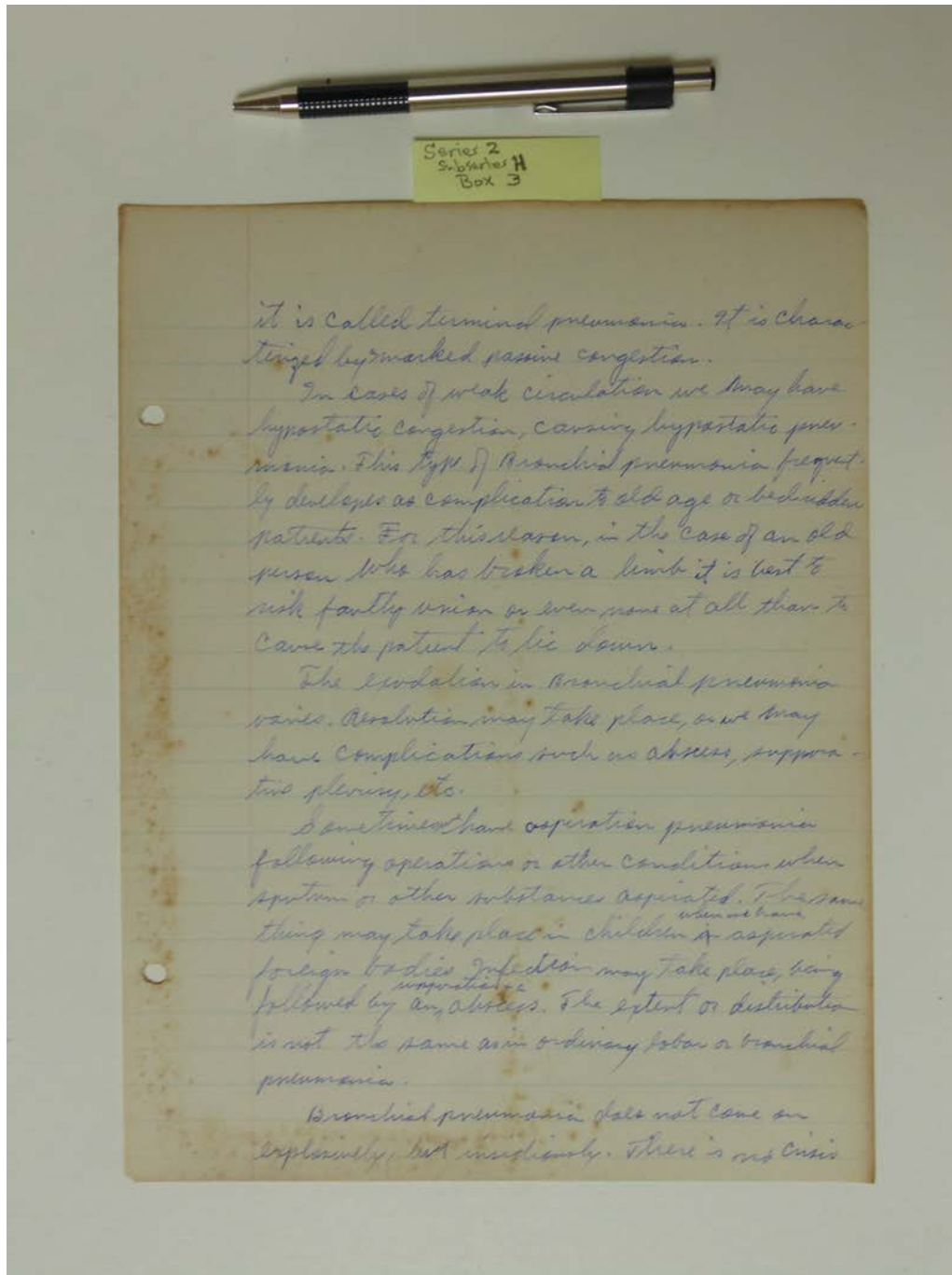
p. 5

Names:

Pneumonia

Types:

essay



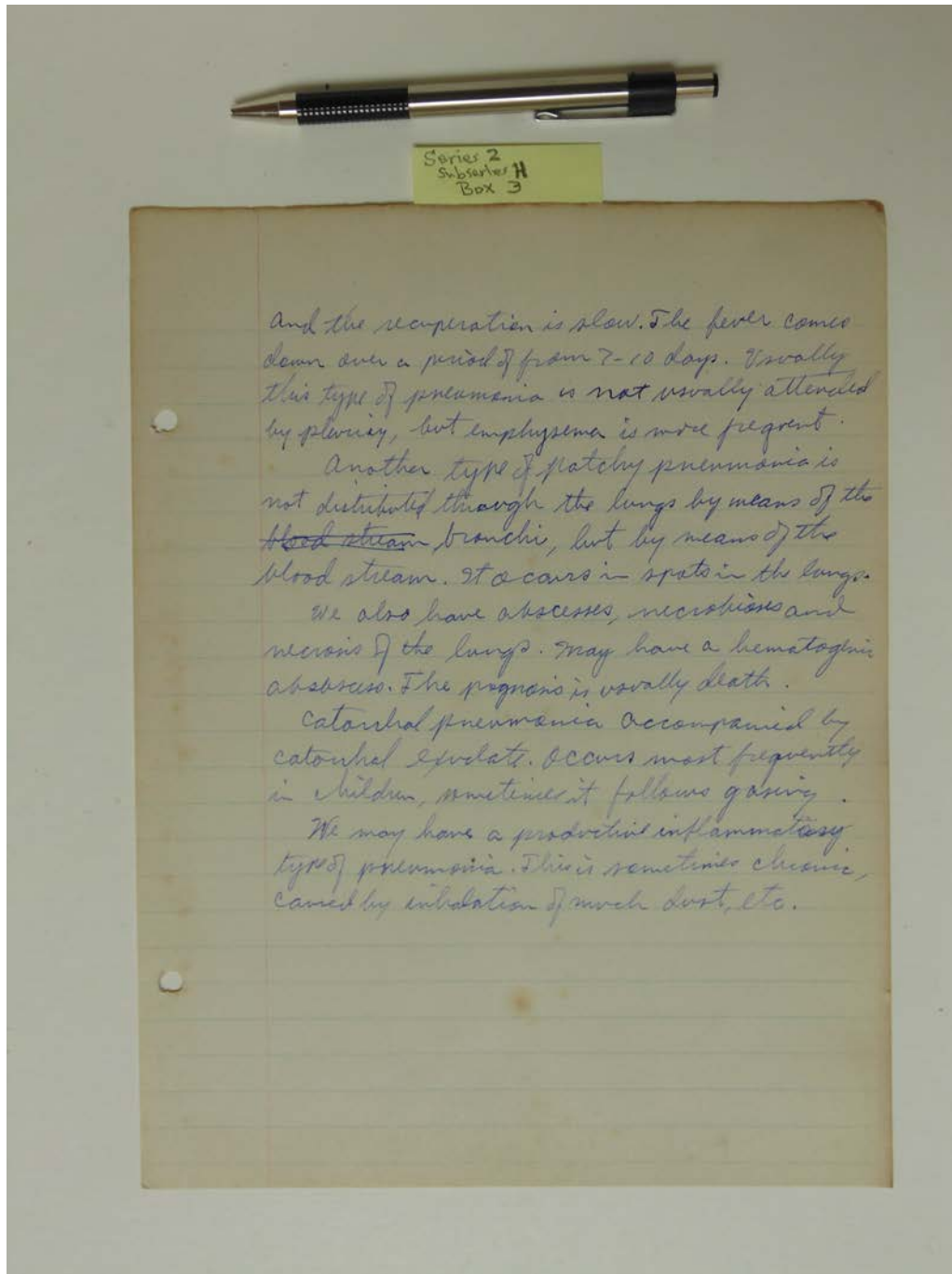
p. 6

Names:

Pneumonia

Types:

essay



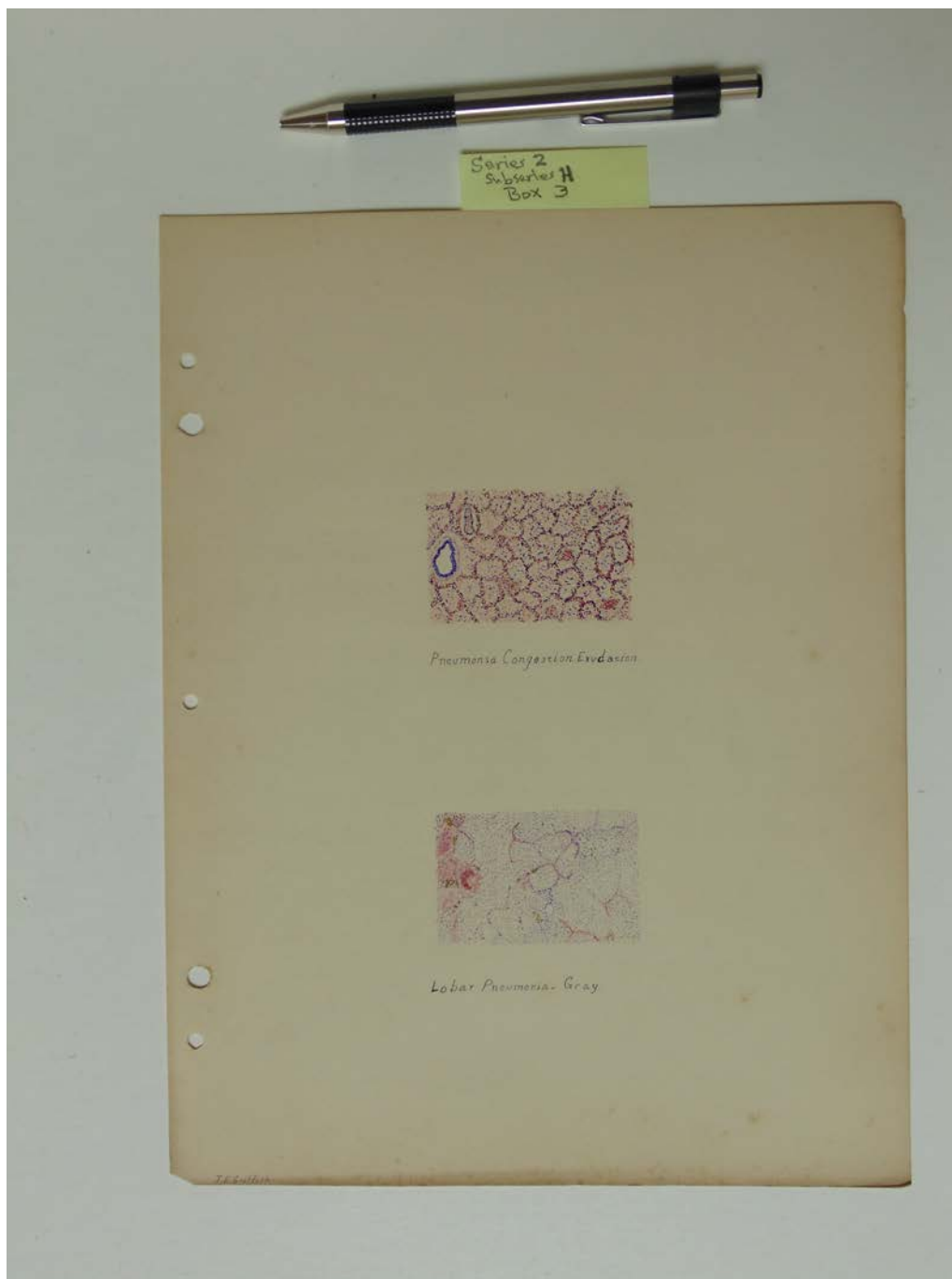
p. 7

Names:

Pneumonia

Types:

essay



Names:

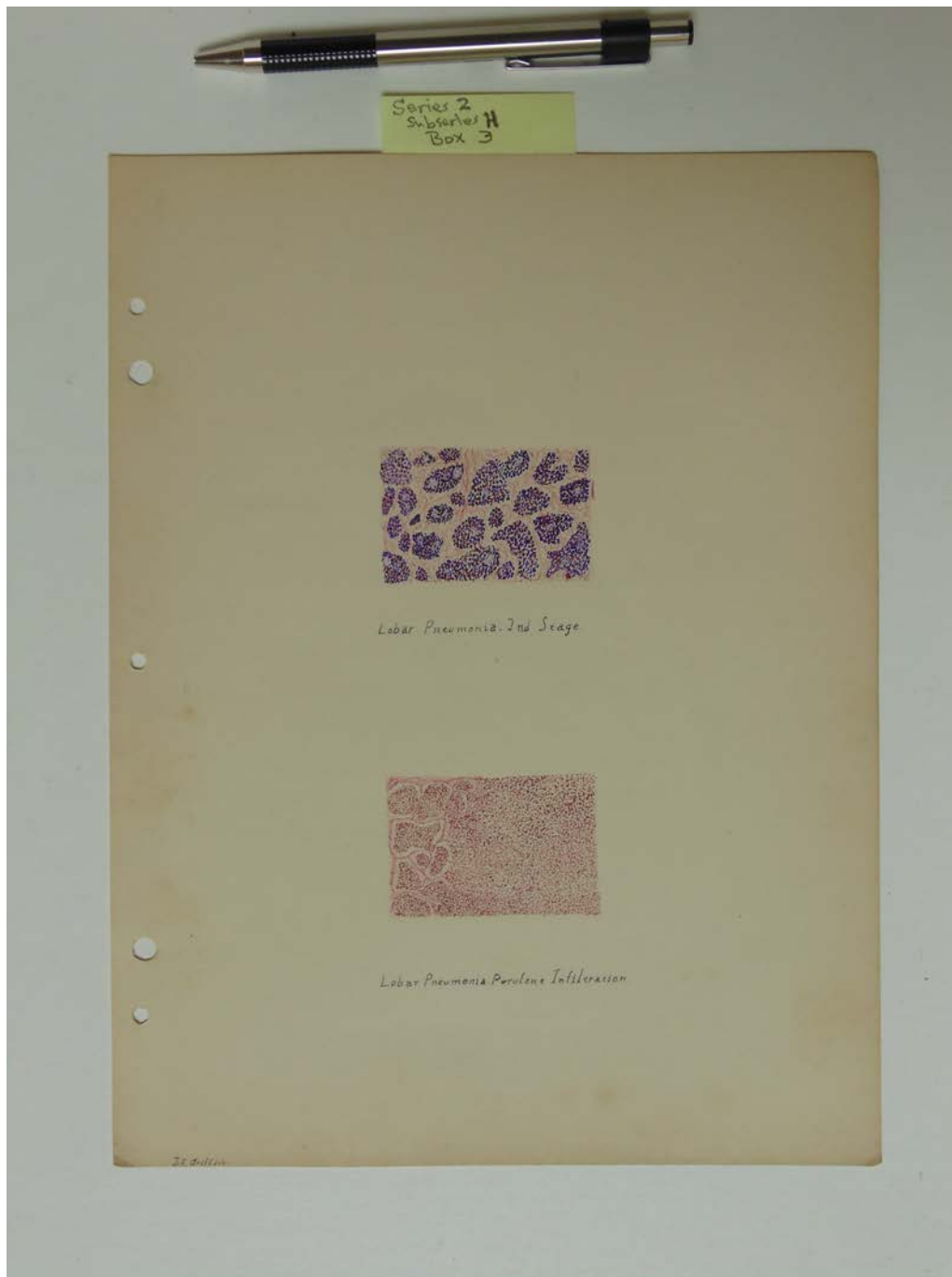
Lobar Pneumonia.
Gray

Pneumonia
Congestion

Exudation

Types:

drawing



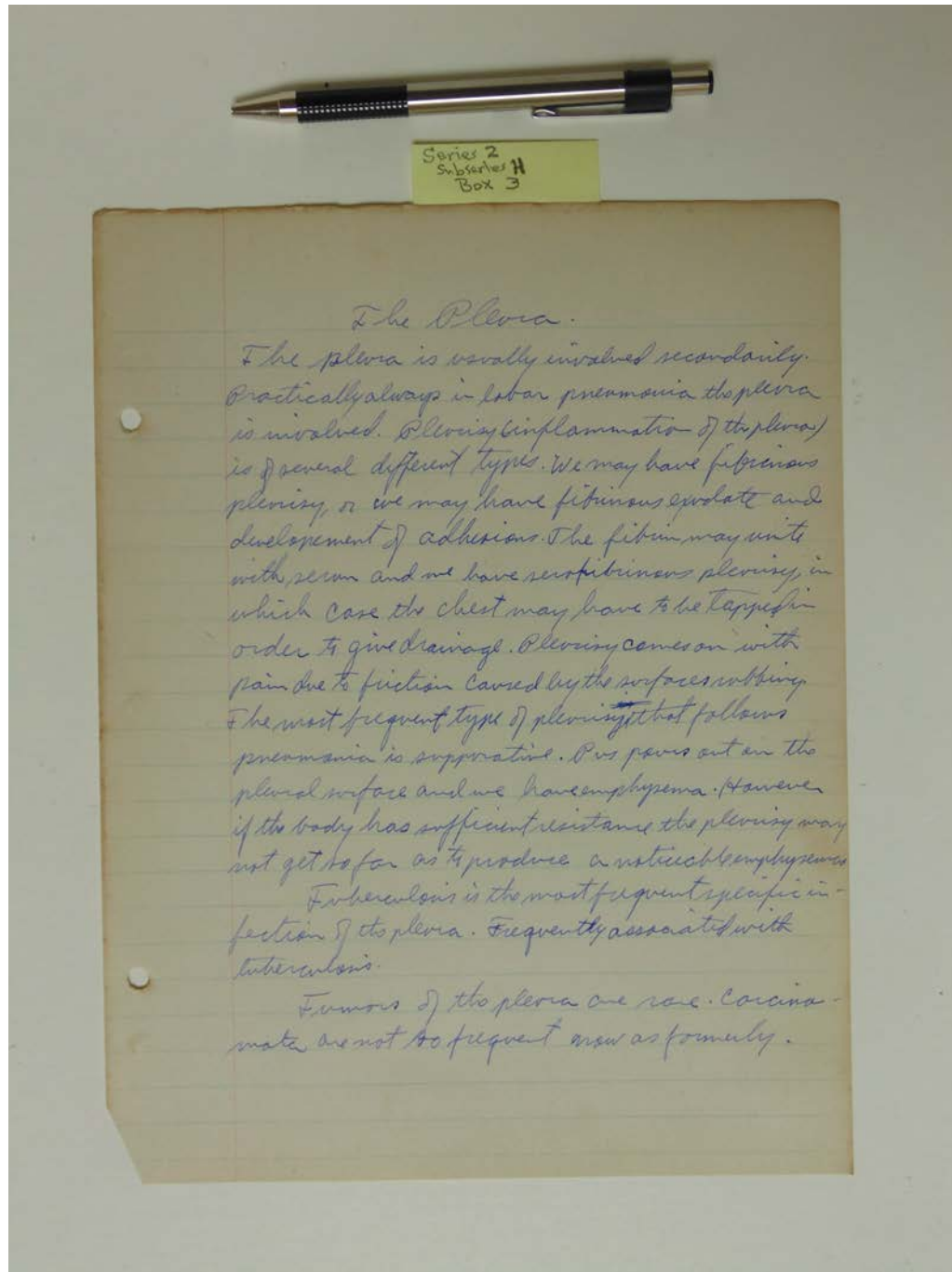
Names:

Lobar Pneumonia.
2nd Stage

Lobar Pneumonia.
Purulent Infiltration

Types:

drawing



The Pleura.

The pleura is usually involved secondarily. Practically always in lobar pneumonia the pleura is involved. Pleurisy (inflammation of the pleura) is of several different types. We may have fibrinous pleurisy, or we may have fibrinous exudate and development of adhesions. The fibrin may unite with serum and we have serofibrinous pleurisy, in which case the chest may have to be tapped in order to give drainage. Pleurisy comes on with pain due to friction caused by the surfaces rubbing. The most frequent type of pleurisy that follows pneumonia is suppurative. Pus pours out on the pleural surface and we have empyema. However if the body has sufficient resistance the pleurisy may not get so far as to produce a noticeable empyema. Tuberculosis is the most frequent specific infection of the pleura. Frequently associated with tuberculosis.

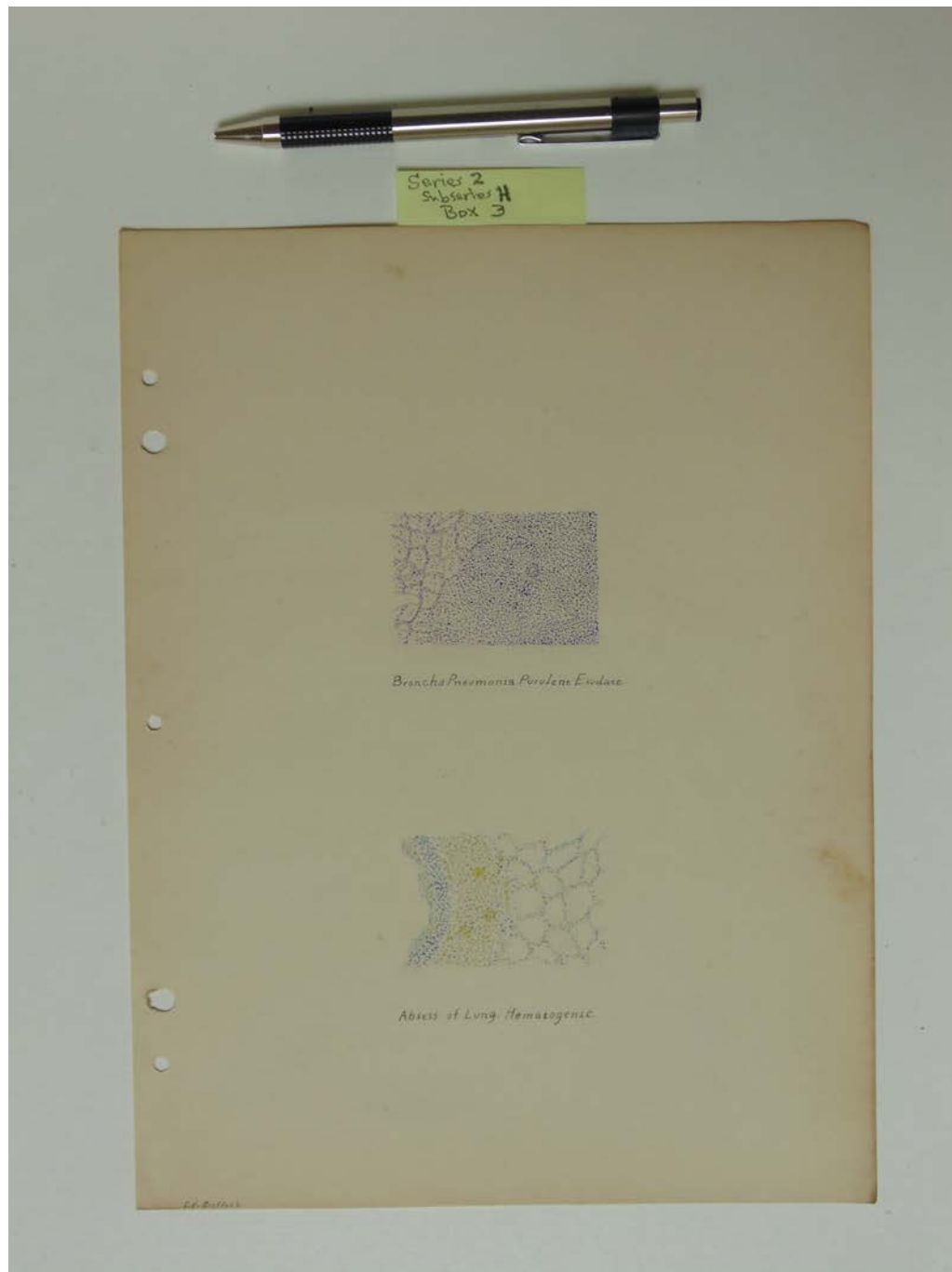
Tumors of the pleura are rare. Carcinomata are not so frequent now as formerly.

Names:

The Pleura

Types:

essay



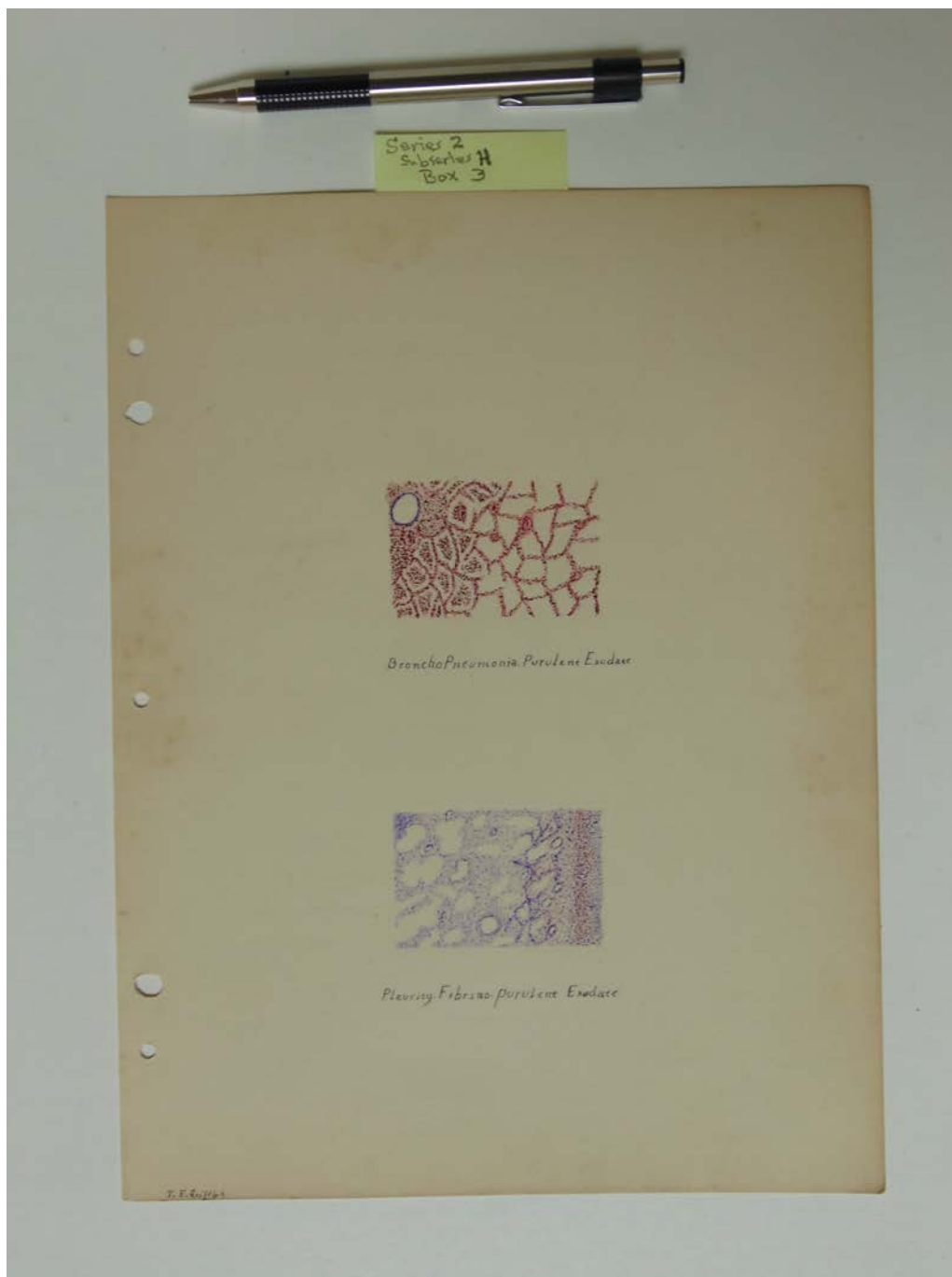
Names:

Abscess of Lung.
Hematogenic

Broncho Pneumonia
Purulent Exudate

Types:

drawing



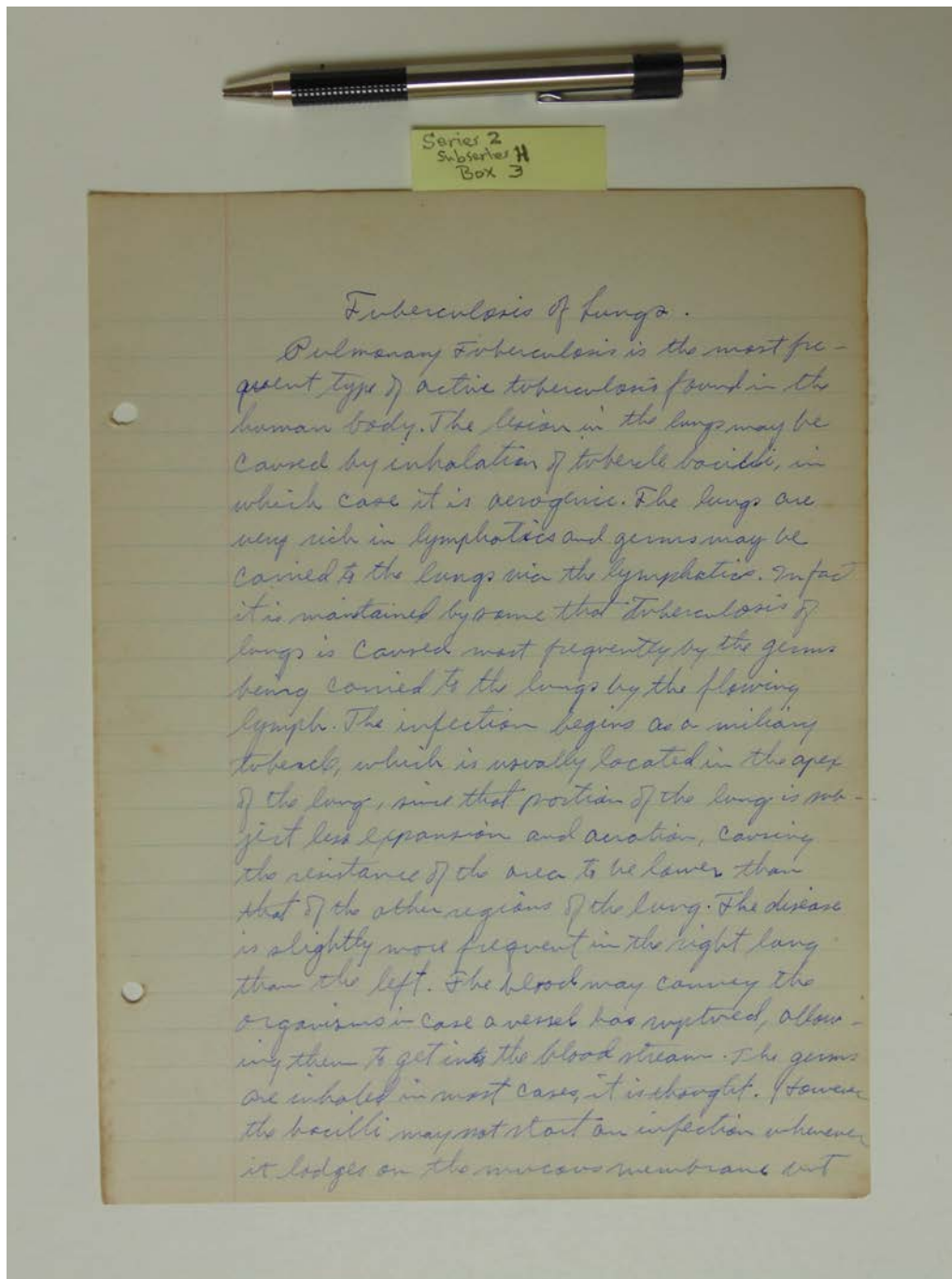
Names:

Broncho Pneumonia
Purulent Exudate

Pleurisy. Fibrino-
purulent Exudate

Types:

drawing



Tuberculosis of Lungs.

Pulmonary Tuberculosis is the most frequent type of active tuberculosis found in the human body. The lesion in the lungs may be caused by inhalation of tubercle bacilli, in which case it is perogenic. The lungs are very rich in lymphatics and germs may be carried to the lungs via the lymphatics. In fact it is maintained by some that Tuberculosis of lungs is caused most frequently by the germs being carried to the lungs by the flowing lymph. The infection begins as a miliary tubercle, which is usually located in the apex of the lung, since that portion of the lung is subject less expansion and aeration, causing the resistance of the area to be lower than that of the other regions of the lung. The disease is slightly more frequent in the right lung than the left. The blood way convey the organisms in case a vessel has ruptured, allowing them to get into the blood stream. The germs are inhaled in most cases, it is thought. However the bacilli may not start an infection whenever it lodges on the mucous membrane but

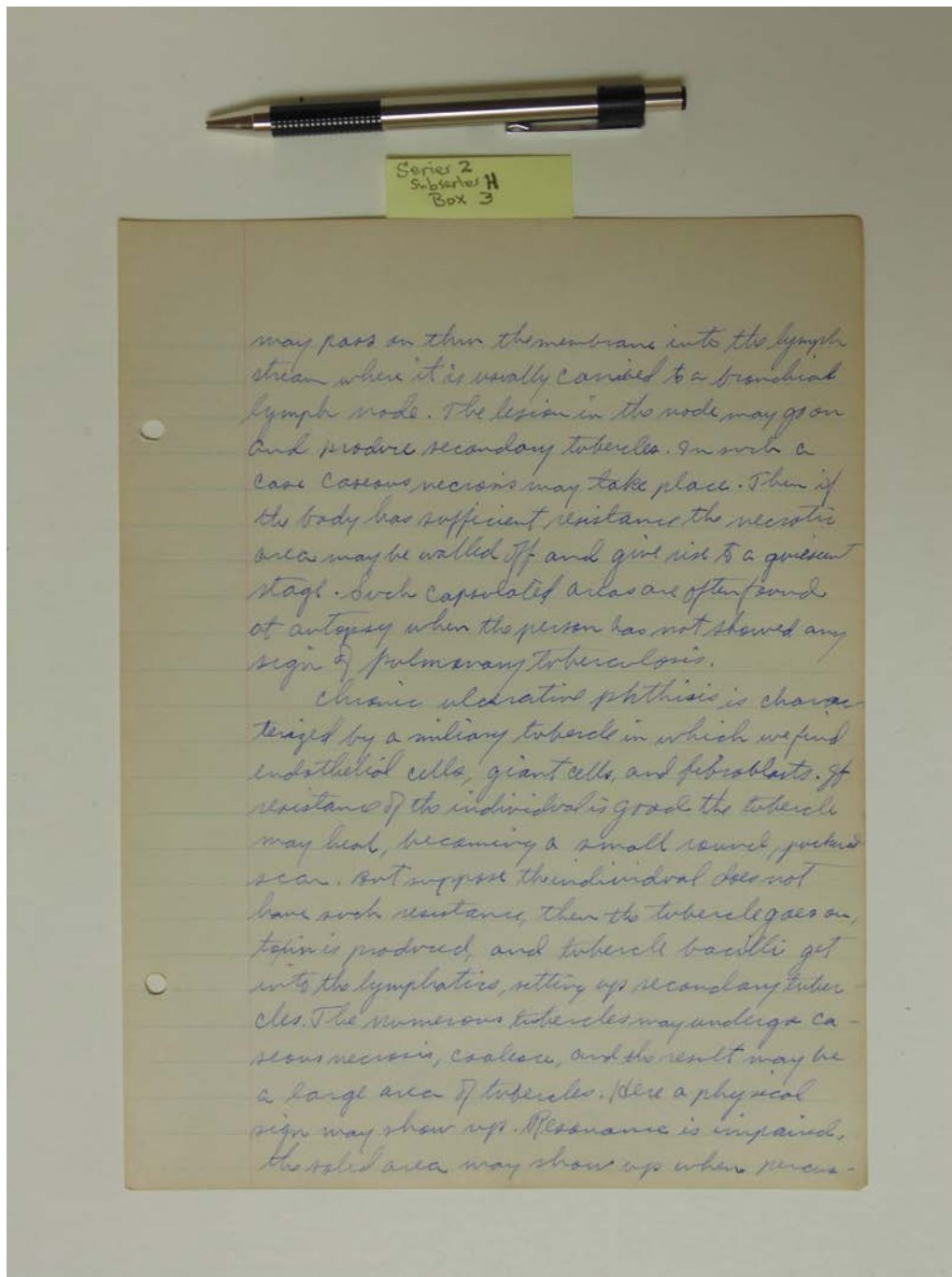
p. 1

Names:

Tuberculosis of Lungs

Types:

essay



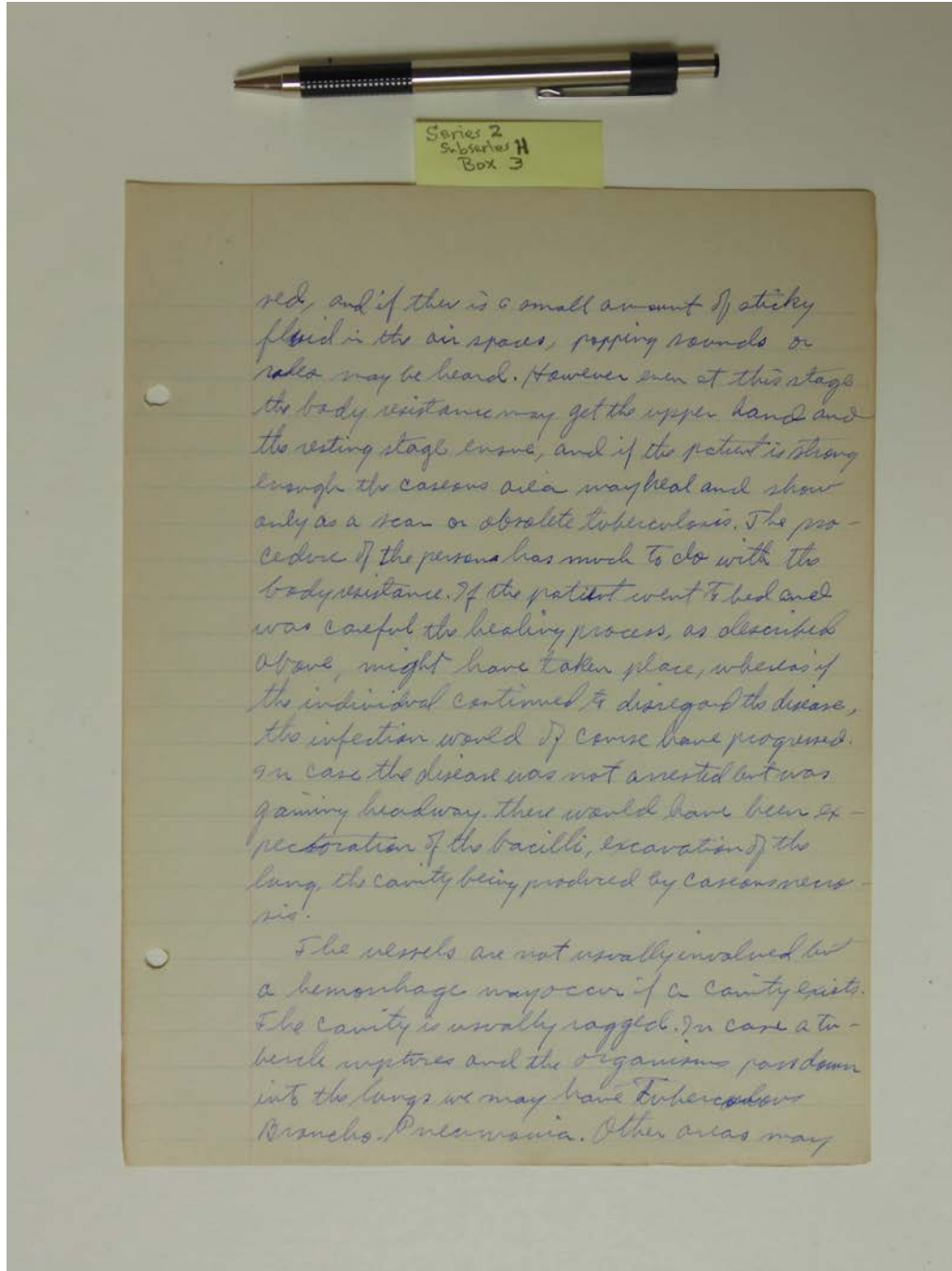
p. 2

Names:

Tuberculosis of
Lungs

Types:

essay



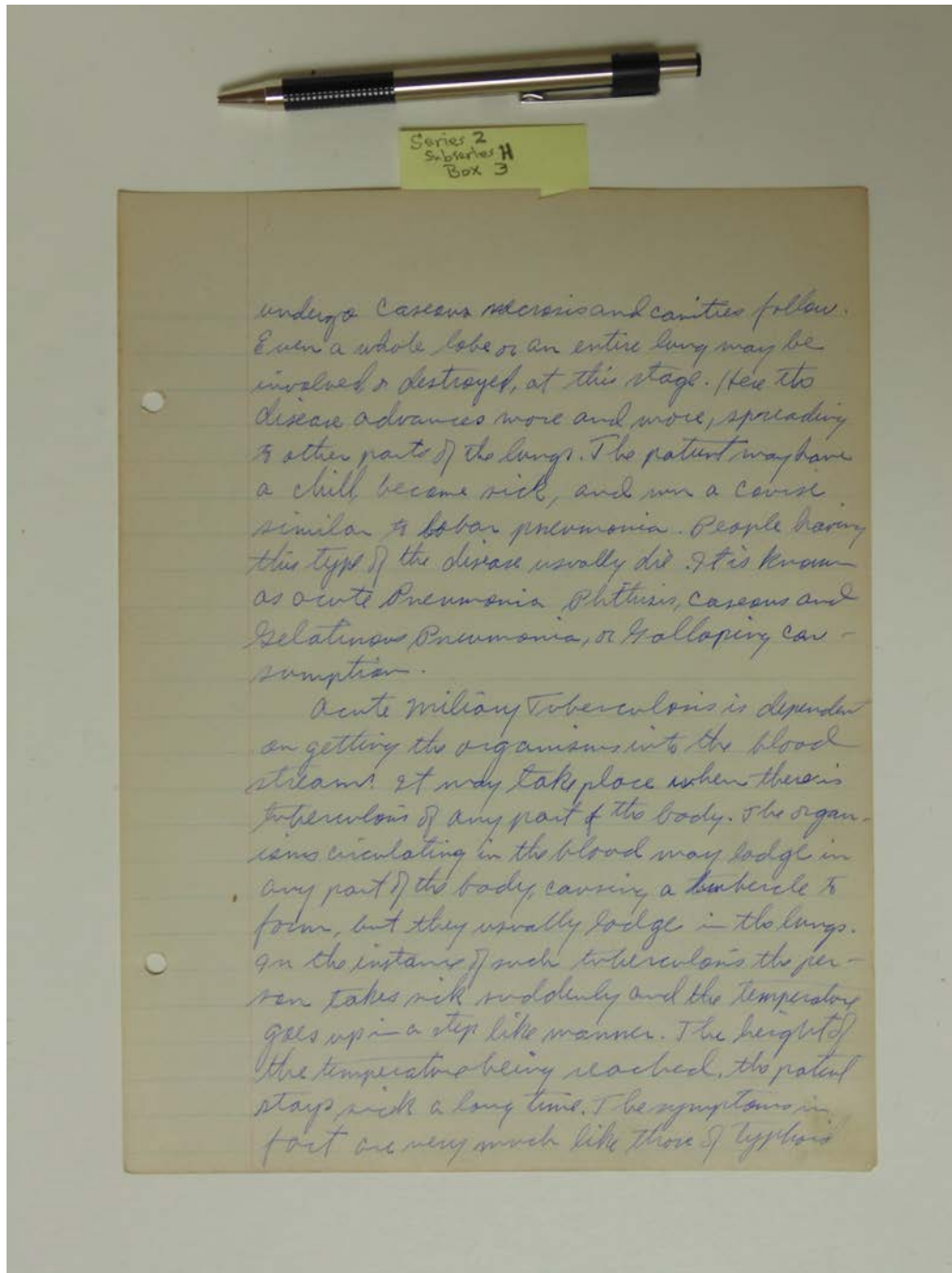
p. 3

Names:

Tuberculosis of
Lungs

Types:

essay



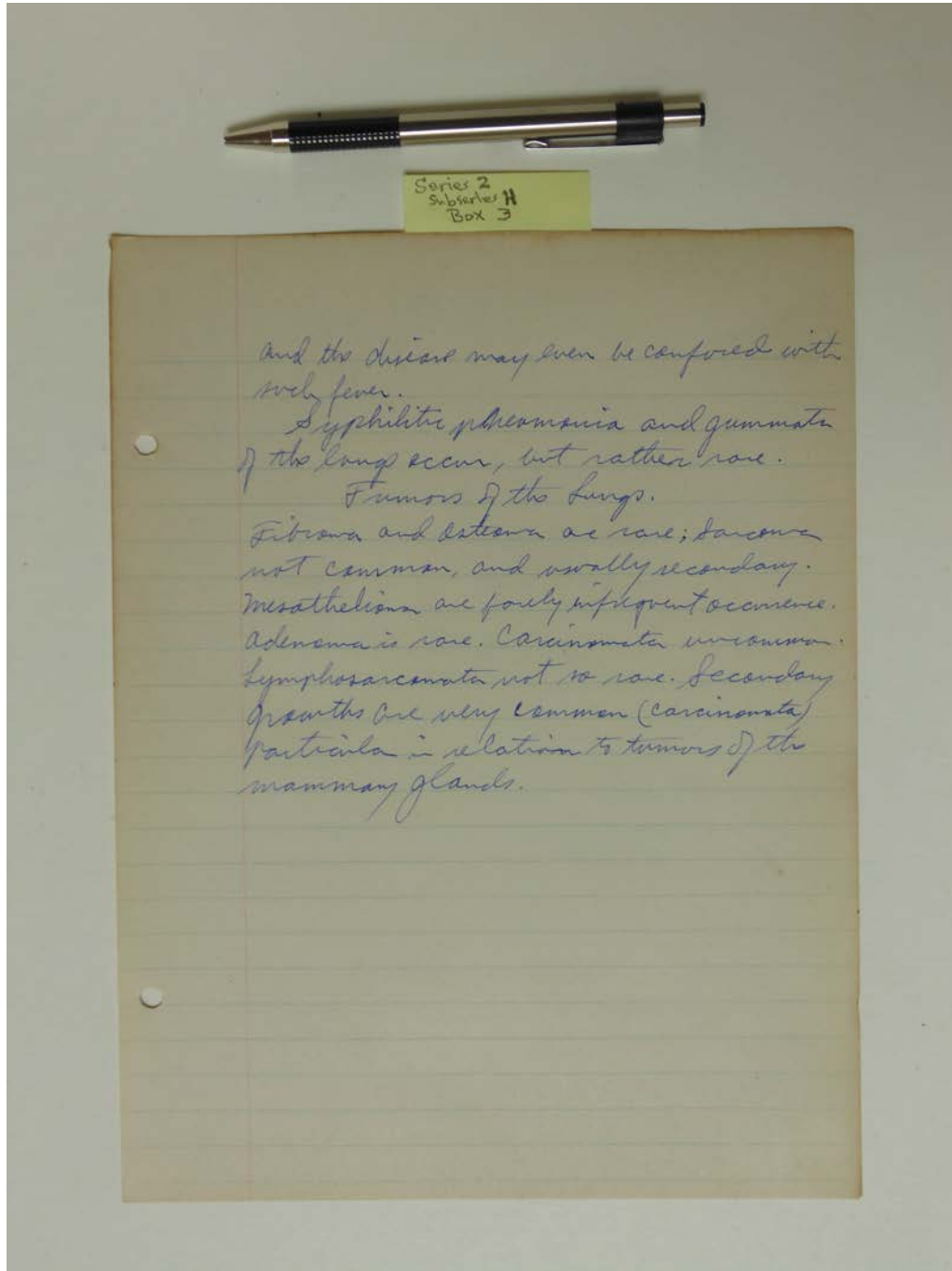
p. 4

Names:

Tuberculosis of
Lungs

Types:

essay



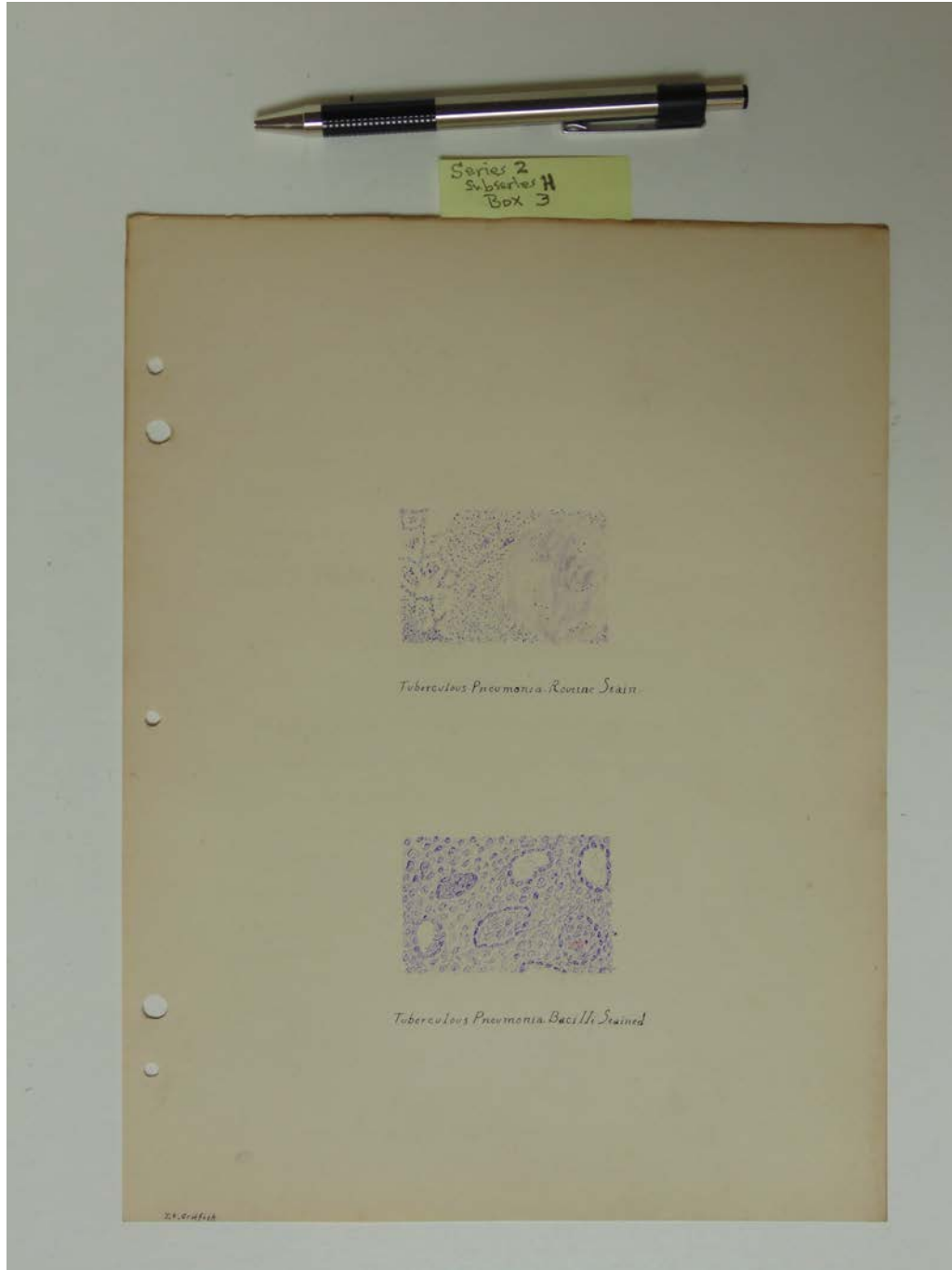
p. 5

Names:

Tuberculosis of
Lungs

Types:

essay



Names:

Tuberculosis
Pneumonia. Bacilli

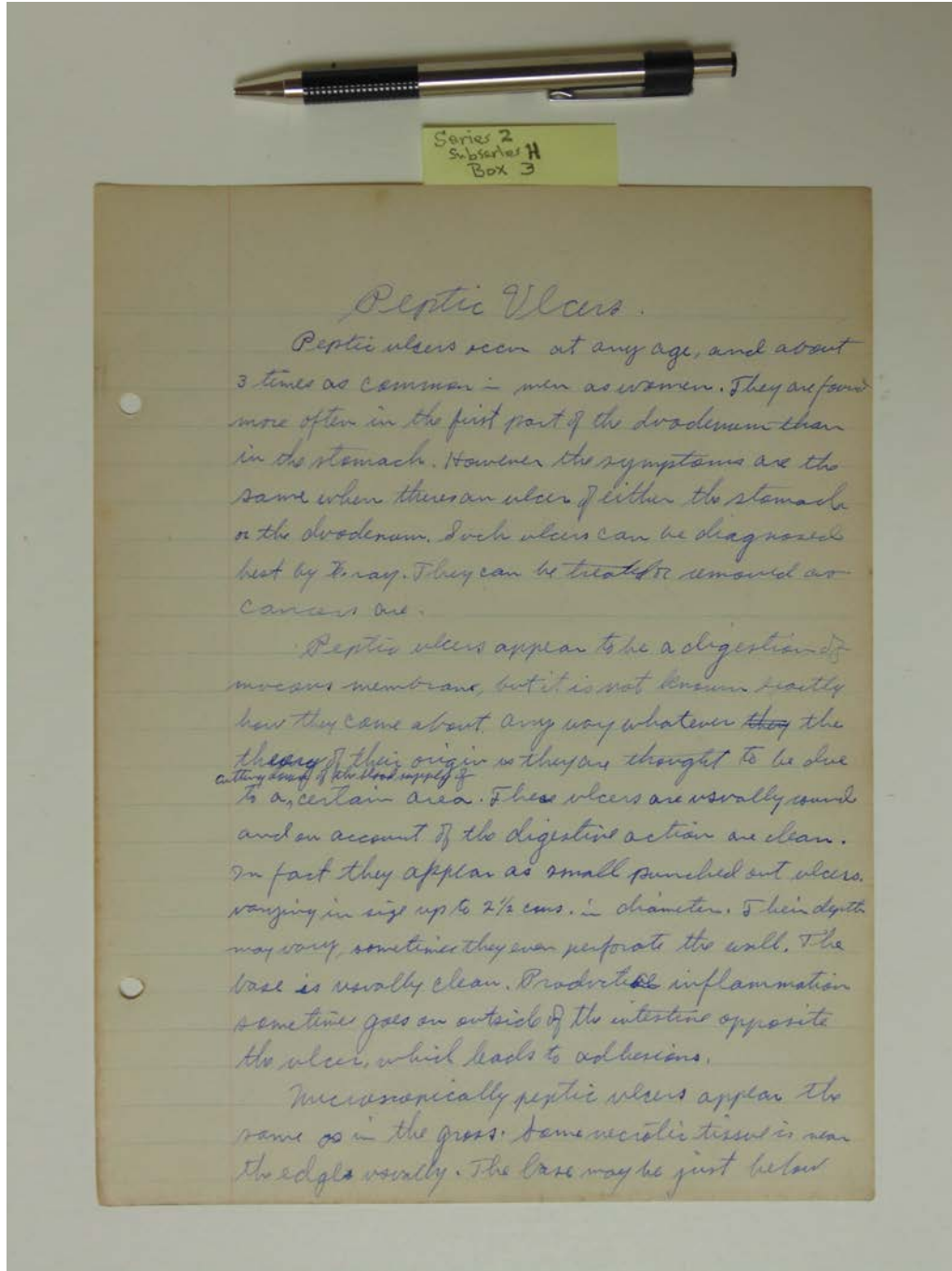
Stained

Tuberculosis
Pneumonia.

Routine Stain

Types:

drawing



Peptic Ulcers.

Peptic ulcers occur at any age, and about 3 times as common in men as women. They are found more often in the first part of the duodenum than in the stomach. However the symptoms are the same when there is an ulcer of either the stomach or the duodenum. Such ulcers can be diagnosed best by X-ray. They can be treated or removed as cancers are.

Peptic ulcers appear to be a digestion of mucous membrane, but it is not known exactly how they come about. Any way whatever ~~the~~ the theory of their origin is they are thought to be due ^{either to a deficiency of the blood supply of} to a certain area. These ulcers are usually round and on account of the digestive action are clean. In fact they appear as small punched out ulcers, varying in size up to 2 1/2 cms. in diameter. Their depth may vary, sometimes they even perforate the wall. The base is usually clean. Productive inflammation ~~sometimes~~ sometimes goes on outside of the intestine opposite the ulcer, which leads to adhesions.

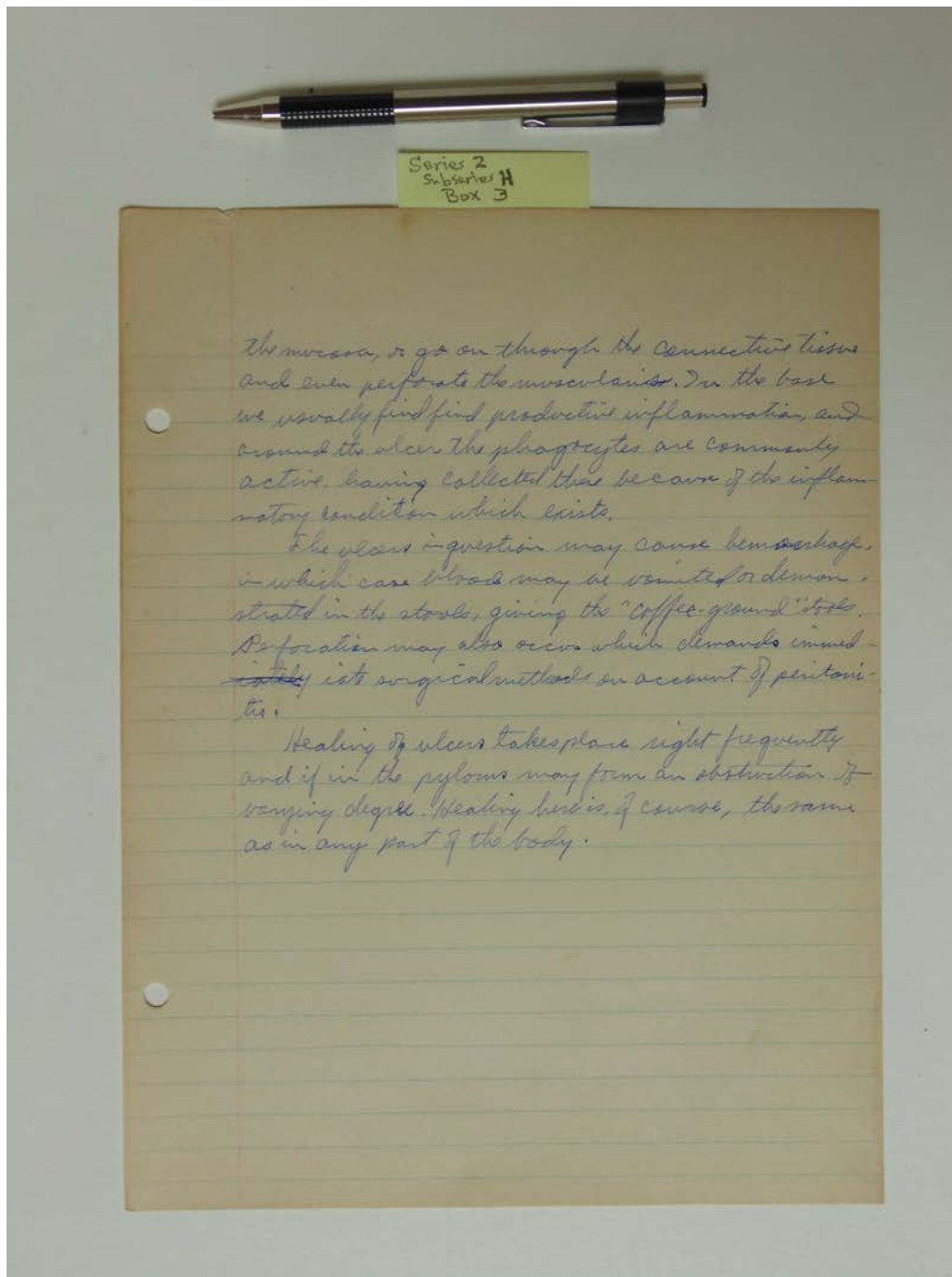
Microscopically peptic ulcers appear the same as in the gross. Some necrotic tissue is near the edges usually. The base may be just below

Names:

Peptic Ulcers

Types:

essay



The mucosa, or go on through the connective tissues and even perforate the musculature. In the base we usually find productive inflammation, and around the ulcer the phagocytes are commonly active having collected there because of the inflammatory reaction which exists.

The ulcer in question may cause hemorrhage, in which case blood may be vomited or demonstrated in the stools, giving the "coffee-ground" stools. Perforation may also occur which demands immediately its surgical methods on account of peritonitis.

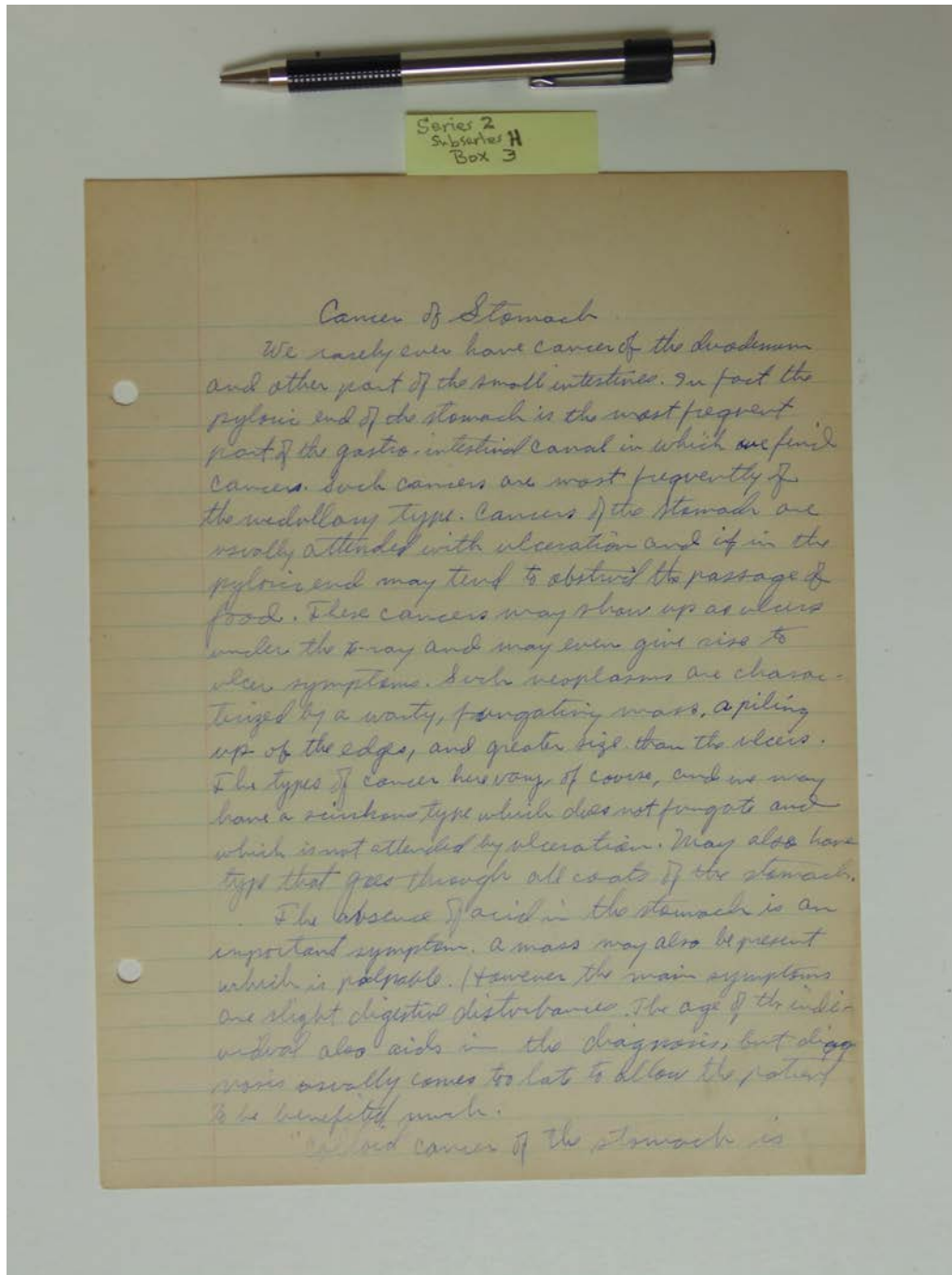
Healing of ulcers takes place right frequently and if in the pylorus may form an obstruction of varying degree. Healing here is, of course, the same as in any part of the body.

Names:

Peptic Ulcers

Types:

essay



Cancer of Stomach

We rarely ever have cancer of the duodenum and other part of the small intestine. In fact the pyloric end of the stomach is the most frequent part of the gastro-intestinal canal in which we find cancers. Such cancers are most frequently of the medullary type. Cancers of the stomach are usually attended with ulceration and if in the pyloric end may tend to obstruct the passage of food. These cancers may show up as ulcers under the x-ray and may even give rise to ulcer symptoms. Such neoplasms are characterized by a warty, fungating mass, a piling up of the edges, and greater size than the ulcers. The types of cancer here vary, of course, and we may have a scirrhous type which does not fungate and which is not attended by ulceration. May also have type that goes through all coats of the stomach.

The absence of acid in the stomach is an important symptom. A mass may also be present which is palpable. However the main symptoms are slight digestive disturbances. The age of the individual also aids in the diagnosis, but diagnosis usually comes too late to allow the patient to be benefited much.

"The most common cancer of the stomach is

Names:

Cancer of Stomach

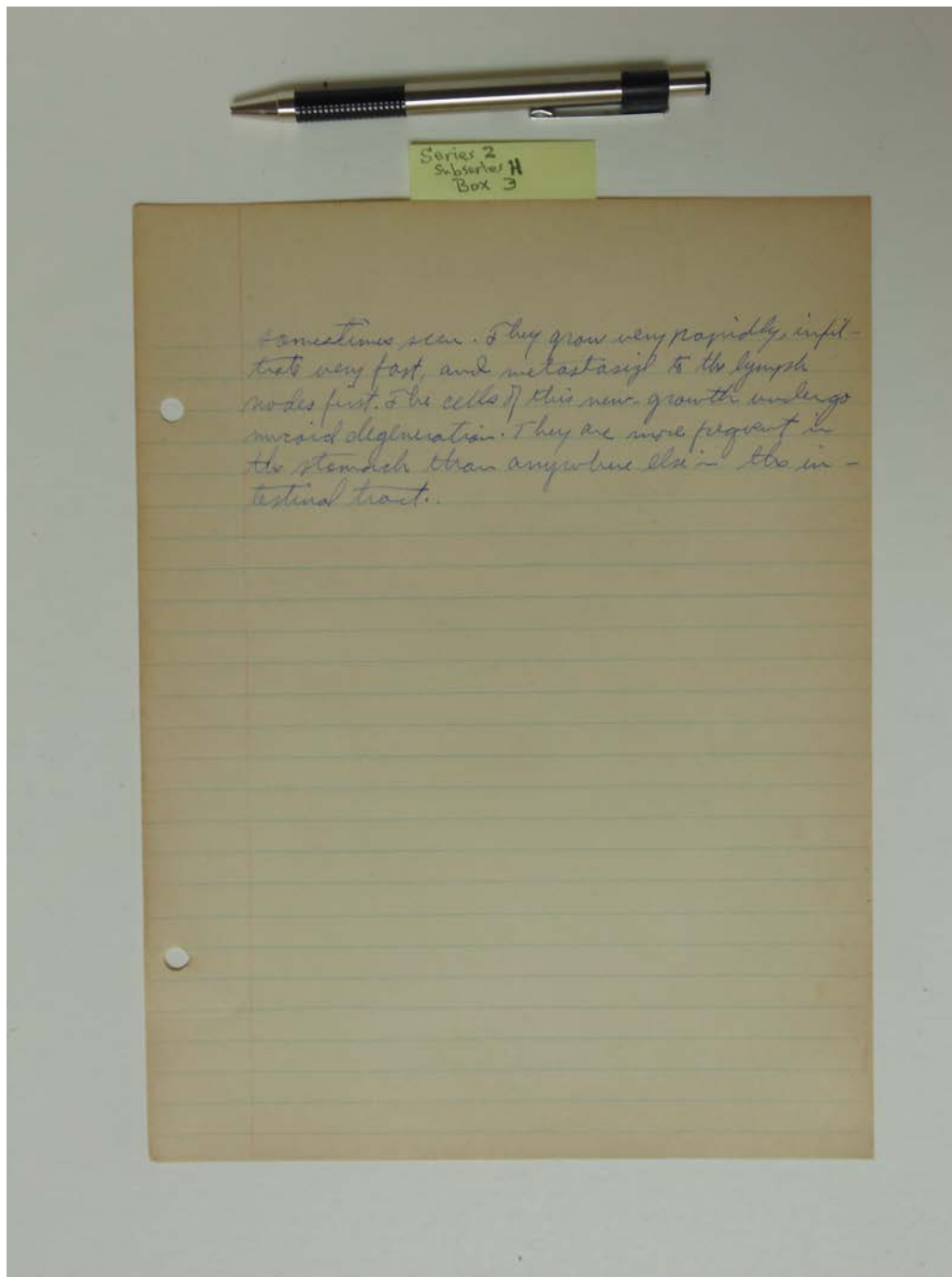
Types:

essay

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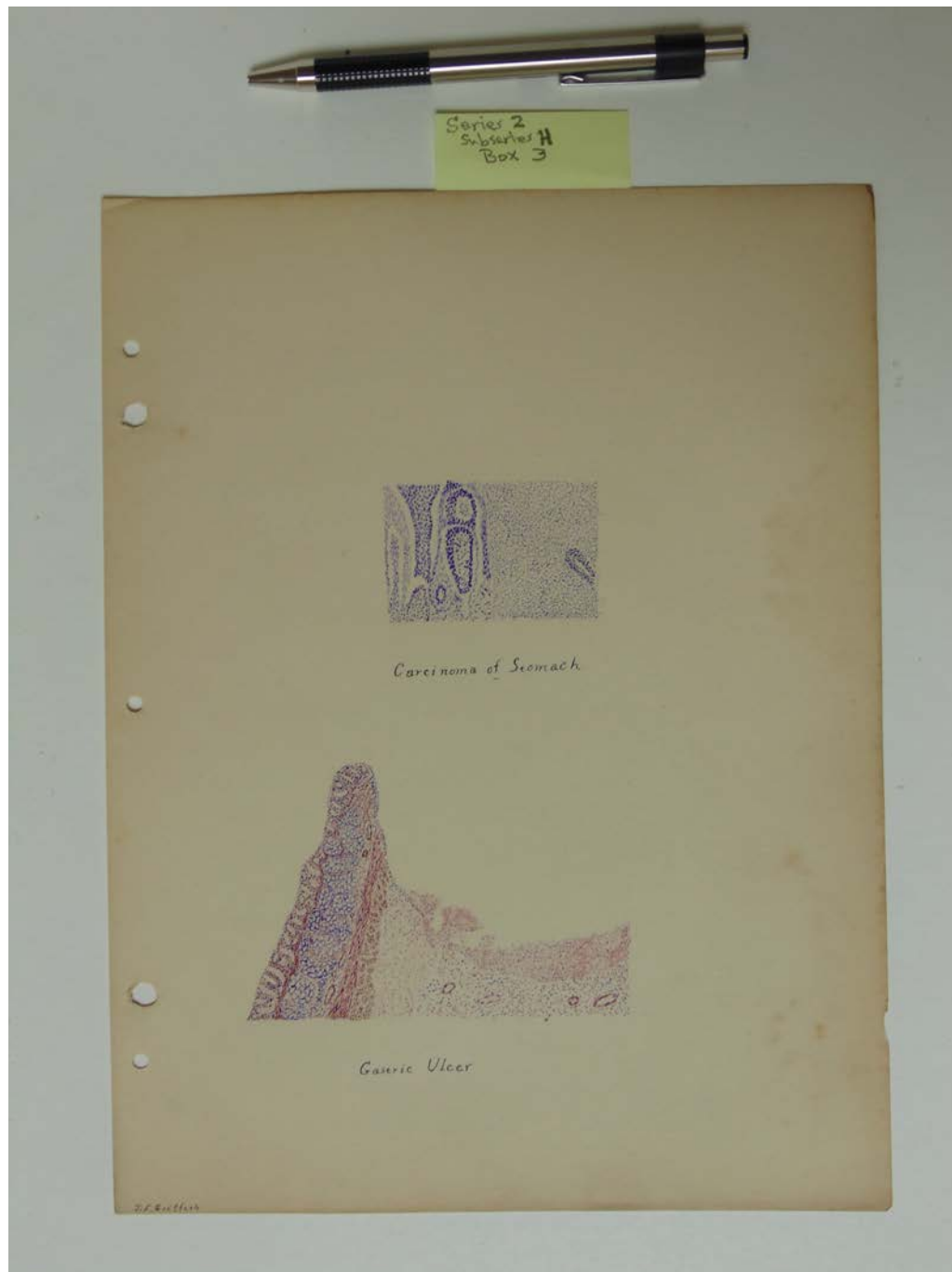


Names:

Cancer of Stomach

Types:

essay



Names:

Carcinoma of
Stomach

Gastric Ulcer

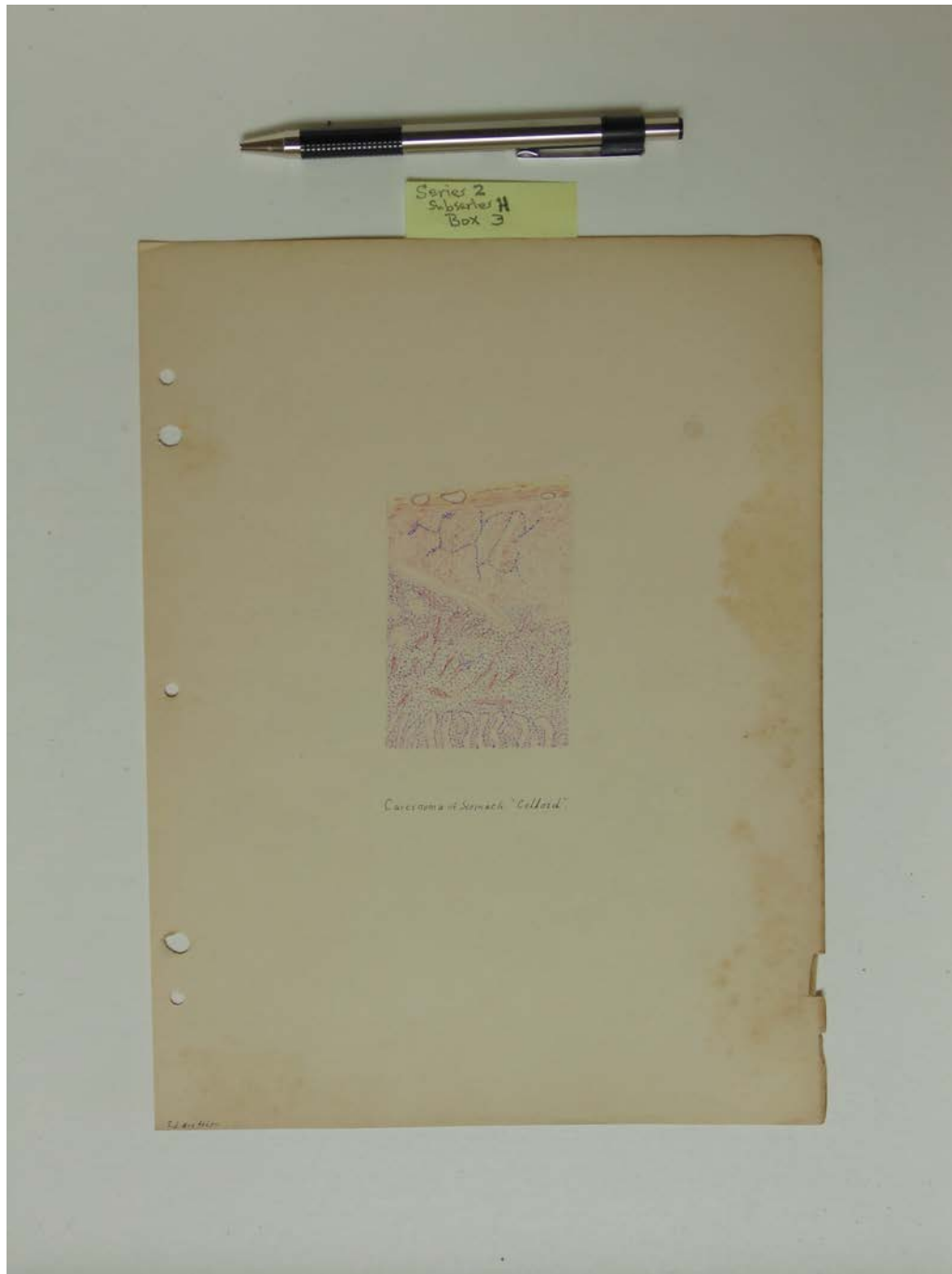
Types:

drawing

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J.E. Griffith Pathology Notes, circa 1928

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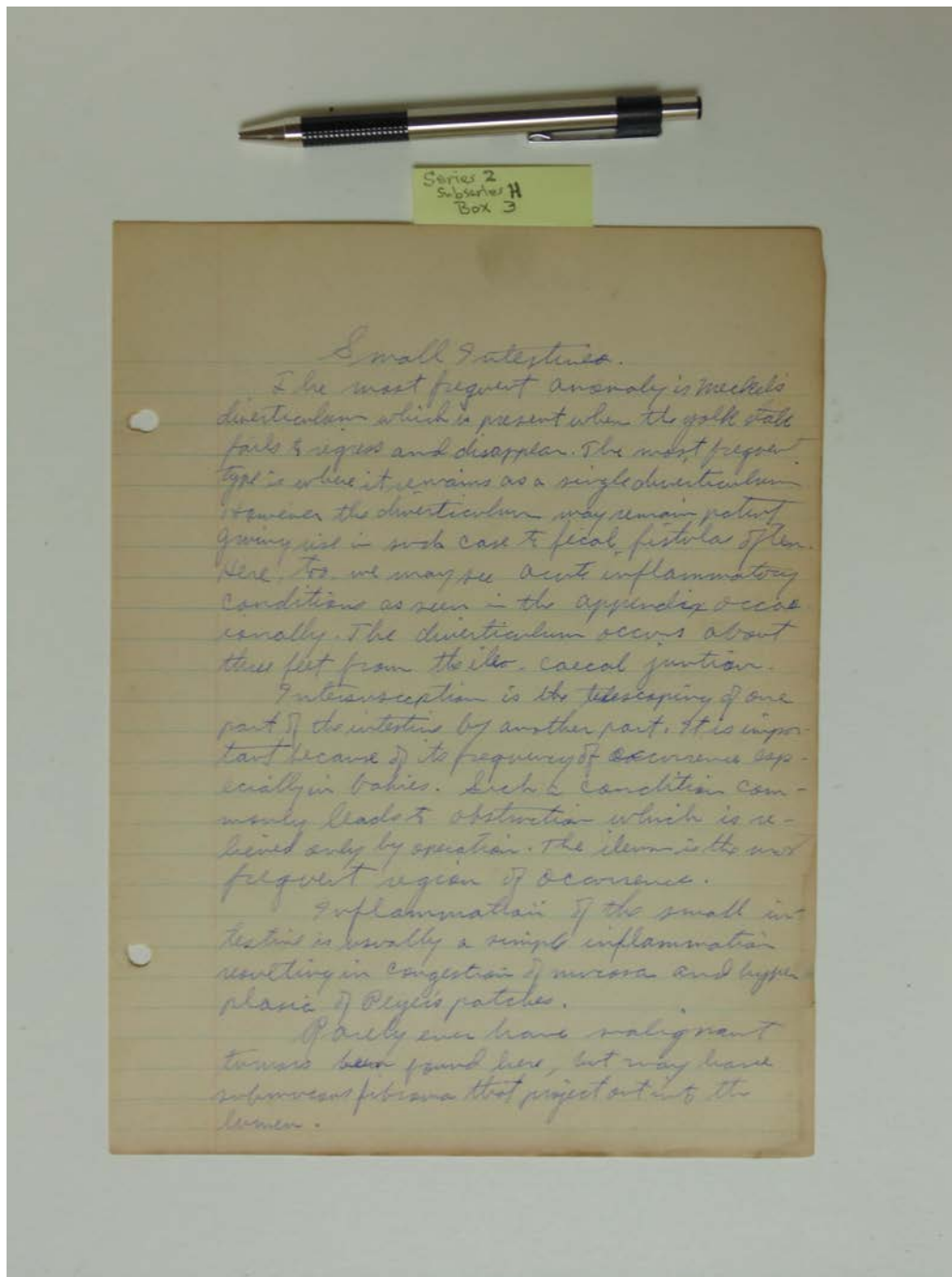


Names:

Carcinoma of
Stomach. Colloid

Types:

drawing



Small Intestines.

The most frequent anomaly is Meckel's diverticulum which is present when the yolk stalk fails to regress and disappear. The most frequent type is where it remains as a single diverticulum however the diverticulum may remain patent giving rise in such case to fecal fistula of the ileum. Here too we may see acute inflammatory conditions as seen in the appendix occasionally. The diverticulum occurs about three feet from the ileo-caecal junction.

Intussusception is the telescoping of one part of the intestine by another part. It is important because of its frequency of occurrence especially in babies. Such a condition commonly leads to obstruction which is relieved only by operation. The ileum is the most frequent region of occurrence.

Inflammation of the small intestine is usually a simple inflammation resulting in congestion of mucosa and hyperplasia of Peyer's patches.

Rarely ever have malignant tumors been found here, but may have submucous fibroma that project out into the lumen.

Names:

Small Intestines

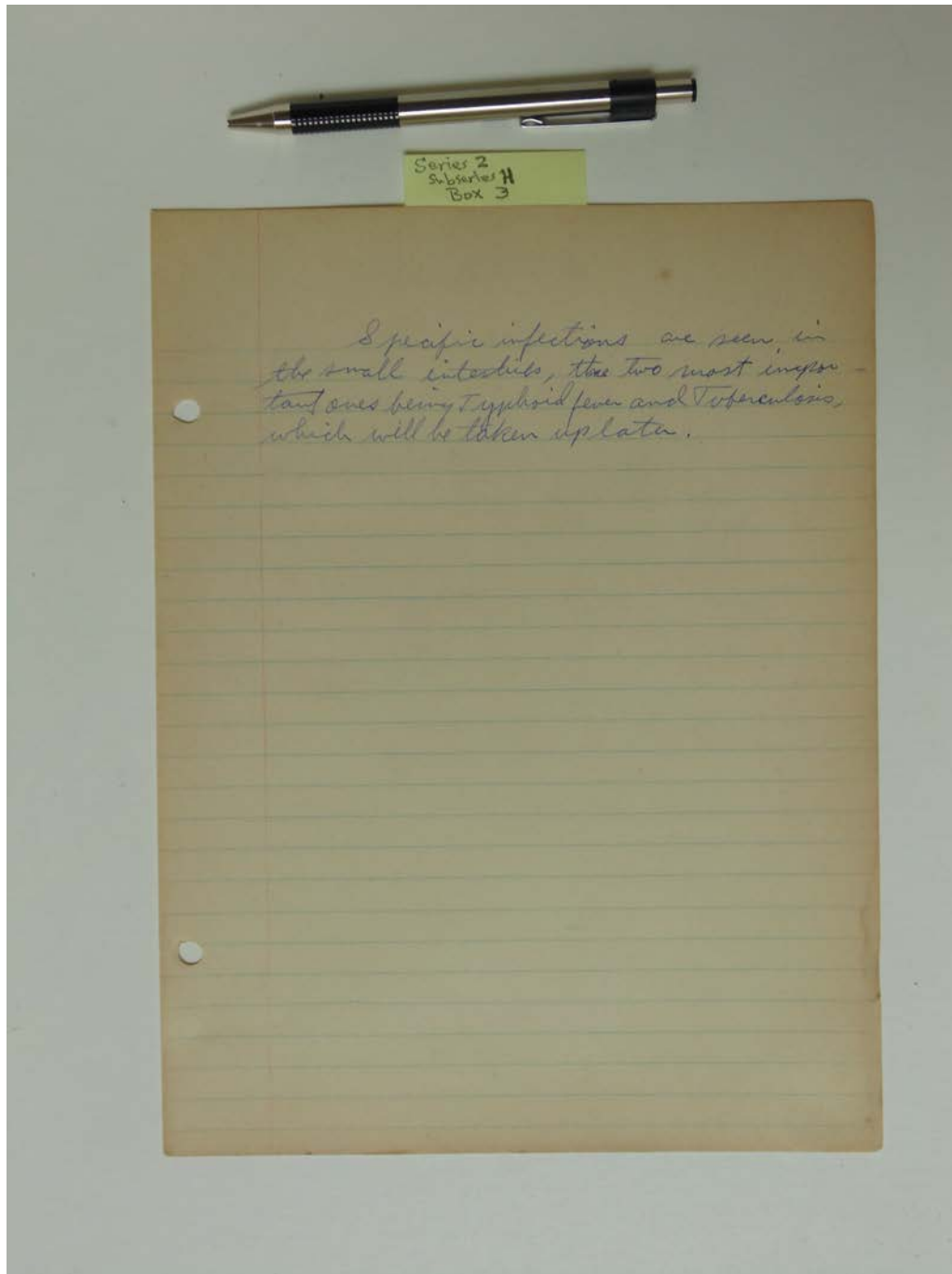
Types:

essay

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J.E. Griffith Pathology Notes, circa 1928

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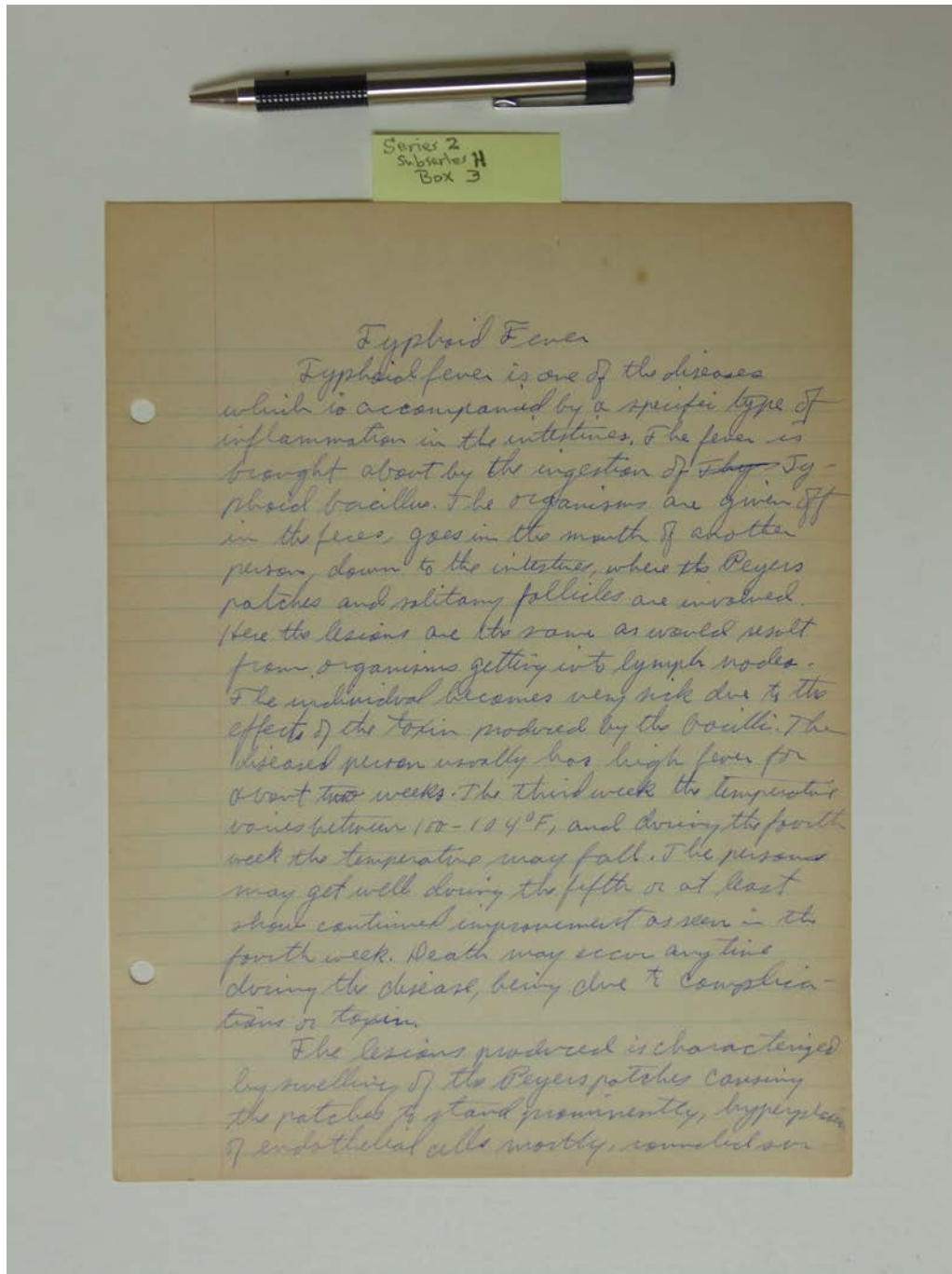


Names:

Small Intestines

Types:

essay



Typhoid Fever

Typhoid fever is one of the diseases which is accompanied by a specific type of inflammation in the intestines. The fever is brought about by the ingestion of ~~typhoid~~ typhoid bacillus. The organisms are given off in the feces, goes in the mouth of another person down to the intestines, where the Peyer patches and solitary follicles are involved. Here the lesions are the same as would result from organisms getting into lymph nodes. The individual becomes very sick due to the effects of the toxin produced by the bacilli. The diseased person usually has high fever for about two weeks. The third week the temperature varies between 100-104°F, and during the fourth week the temperature may fall. The persons may get well during the fifth or at least show continued improvement as seen in the fourth week. Death may occur anytime during the disease, being due to congestions or toxin.

The lesions produced is characterized by swelling of the Peyer patches causing the patches to stand prominently, hyperplasia of endothelial cells mostly, rounded on

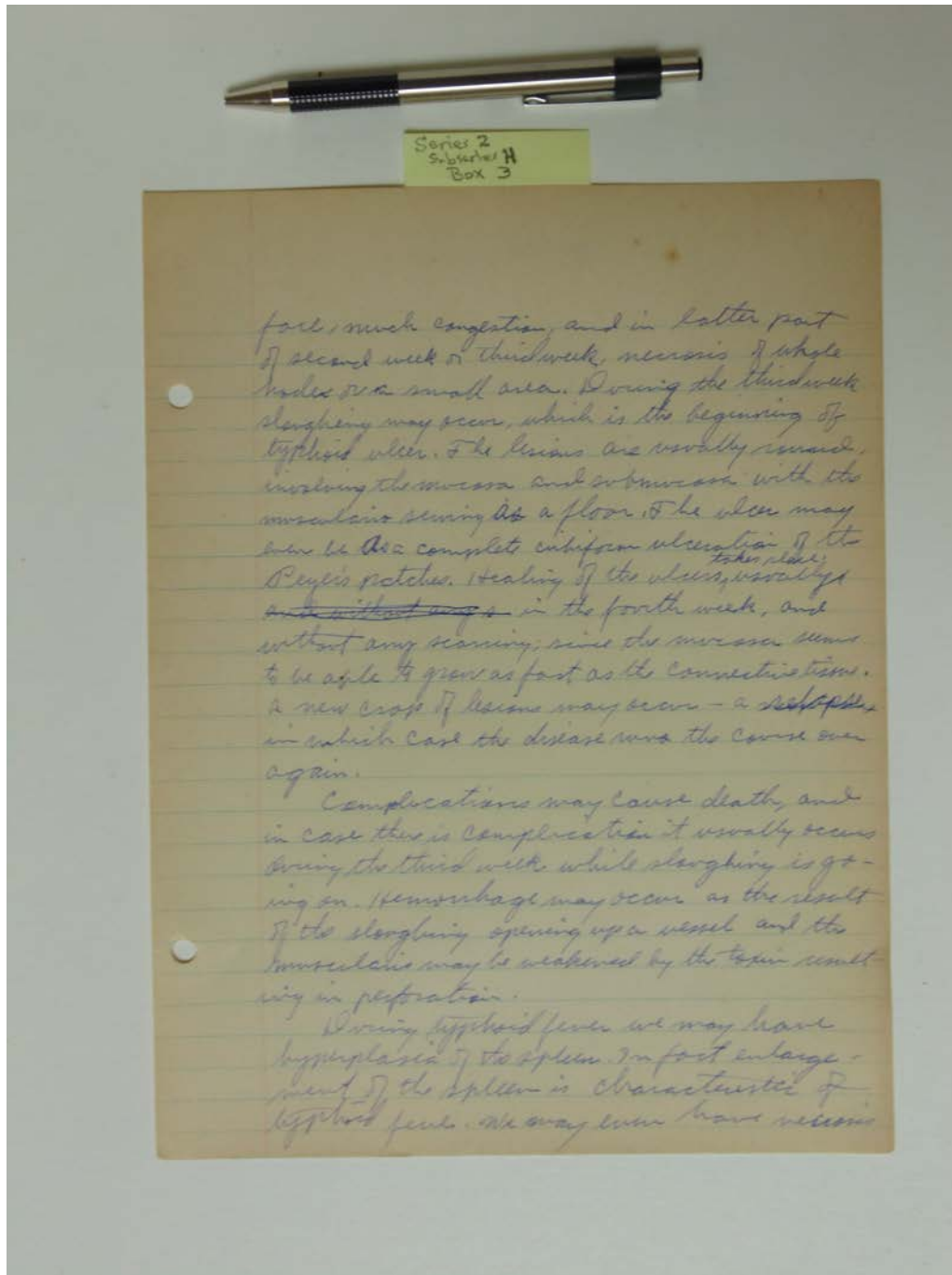
p. 1

Names:

Typhoid Fever

Types:

essay



face, much congestion, and in latter part of second week or third week, necrosis of whole index or a small area. During the third week sloughing may occur, which is the beginning of typhoid ulcer. The lesions are usually rounded, involving the mucosa and submucosa with the muscularis serving as a floor. The ulcer may even be a complete cubiform ulceration of the Peyer's patches. Healing of the ulcers, ^{takes place} ~~and without scars~~ in the fourth week, and without any scarring; since the mucosa seems to be able to grow as fast as the connective tissue. A new crop of lesions may occur - a relapse, in which case the disease runs the course over again.

Complications may cause death, and in case there is complication it usually occurs during the third week while sloughing is going on. Hemorrhage may occur as the result of the sloughing opening up a vessel and the muscularis may be weakened by the toxin resulting in perforation.

During typhoid fever we may have hyperplasia of the spleen or in fact enlargement of the spleen is characteristic of typhoid fever. We may even have necrosis

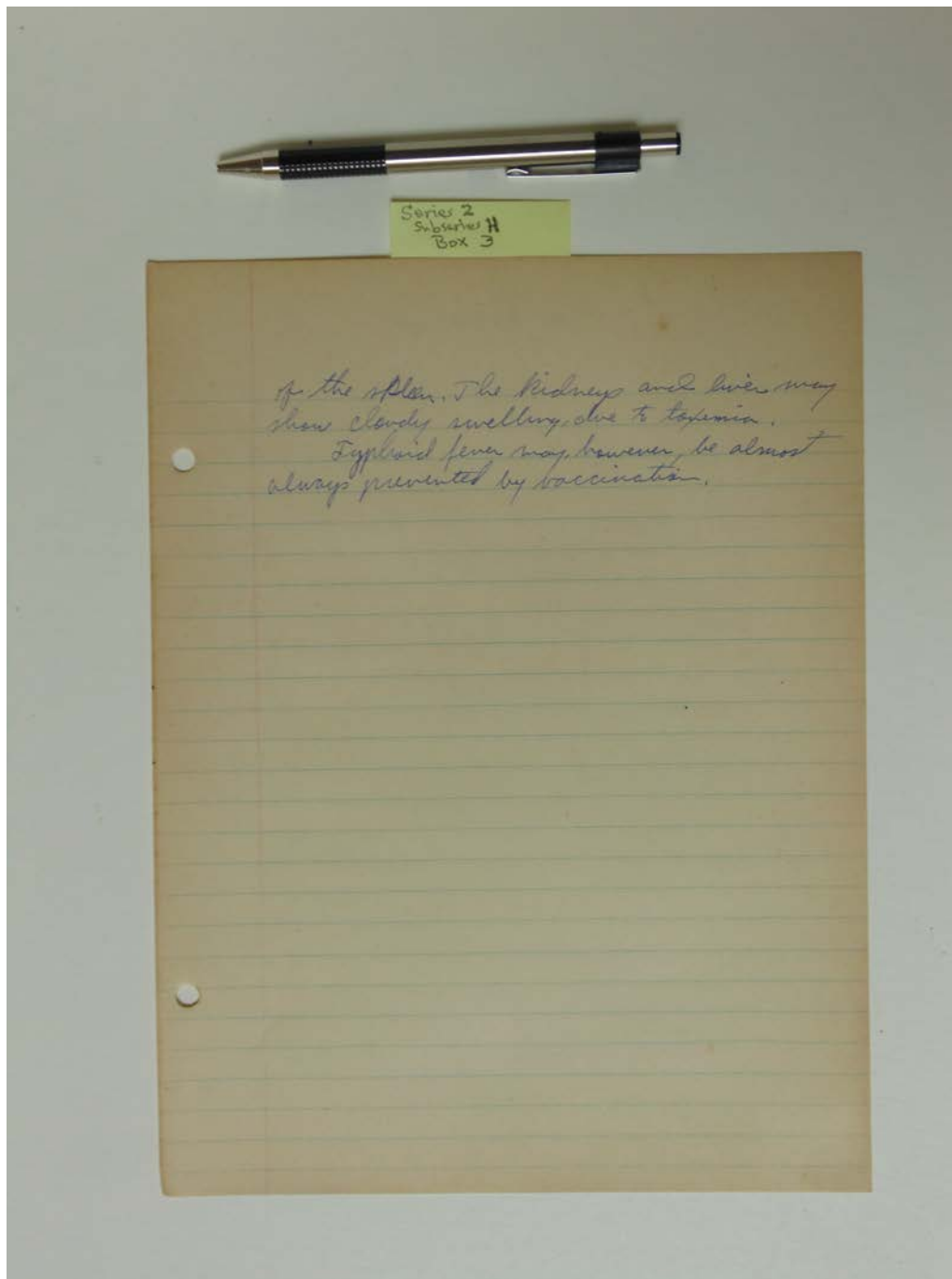
p. 2

Names:

Typhoid Fever

Types:

essay



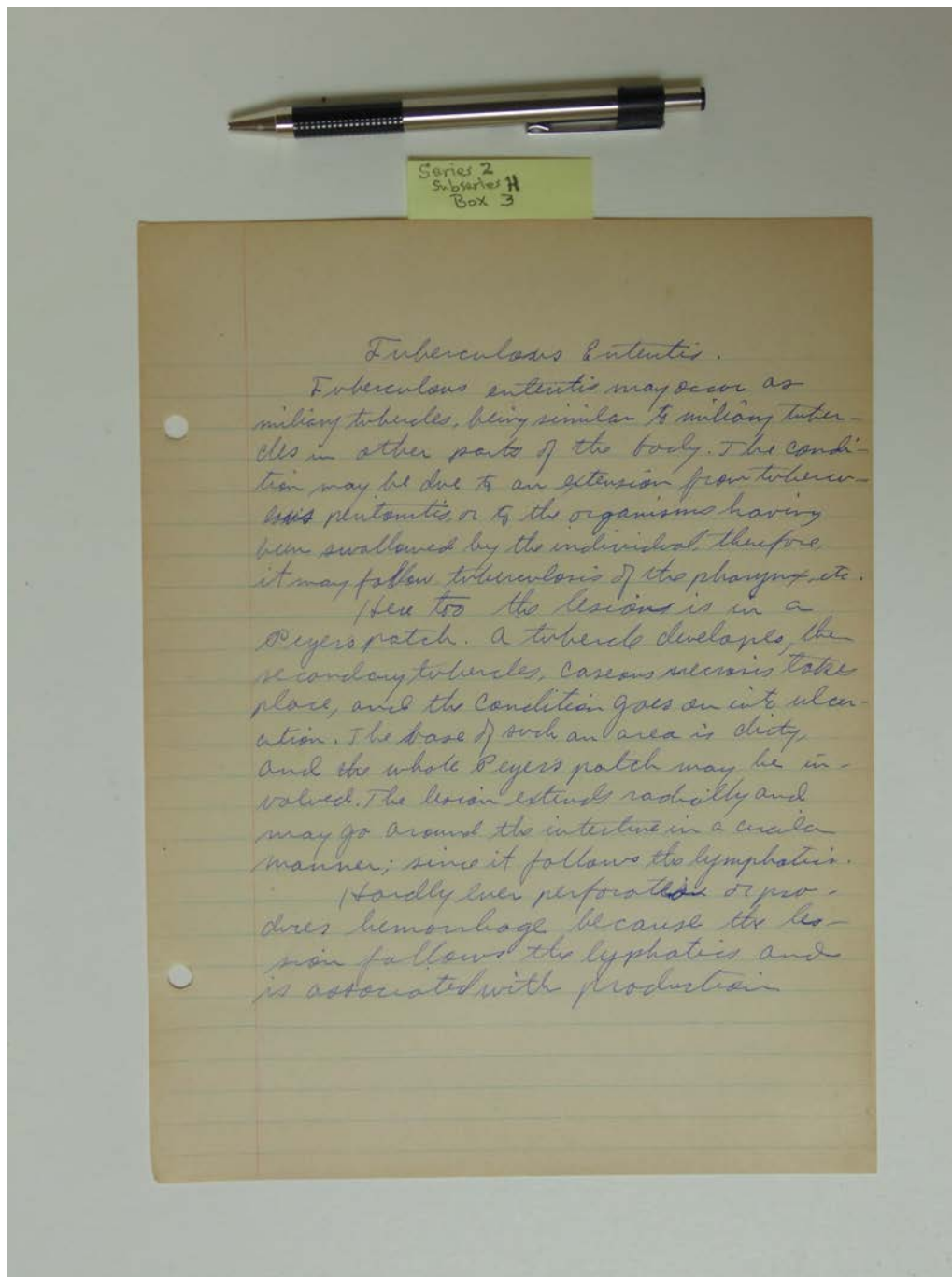
p. 3

Names:

Typhoid Fever

Types:

essay



Series 2
Subseries H
Box 3

Tuberculous Ententis.

Tuberculous ententis may occur as miliary tubercles, being similar to miliary tubercles in other parts of the body. The condition may be due to an extension from tuberculosis peritonitis or to the organisms having been swallowed by the individual, therefore it may follow tuberculosis of the pharynx, etc.

Here too the lesion is in a Peyer's patch. A tubercle develops, the secondary tubercles, caseous necrosis takes place, and the condition goes on into ulceration. The base of such an area is dirty, and the whole Peyer's patch may be involved. The lesion extends radially and may go around the intestine in a circular manner; since it follows the lymphatics.

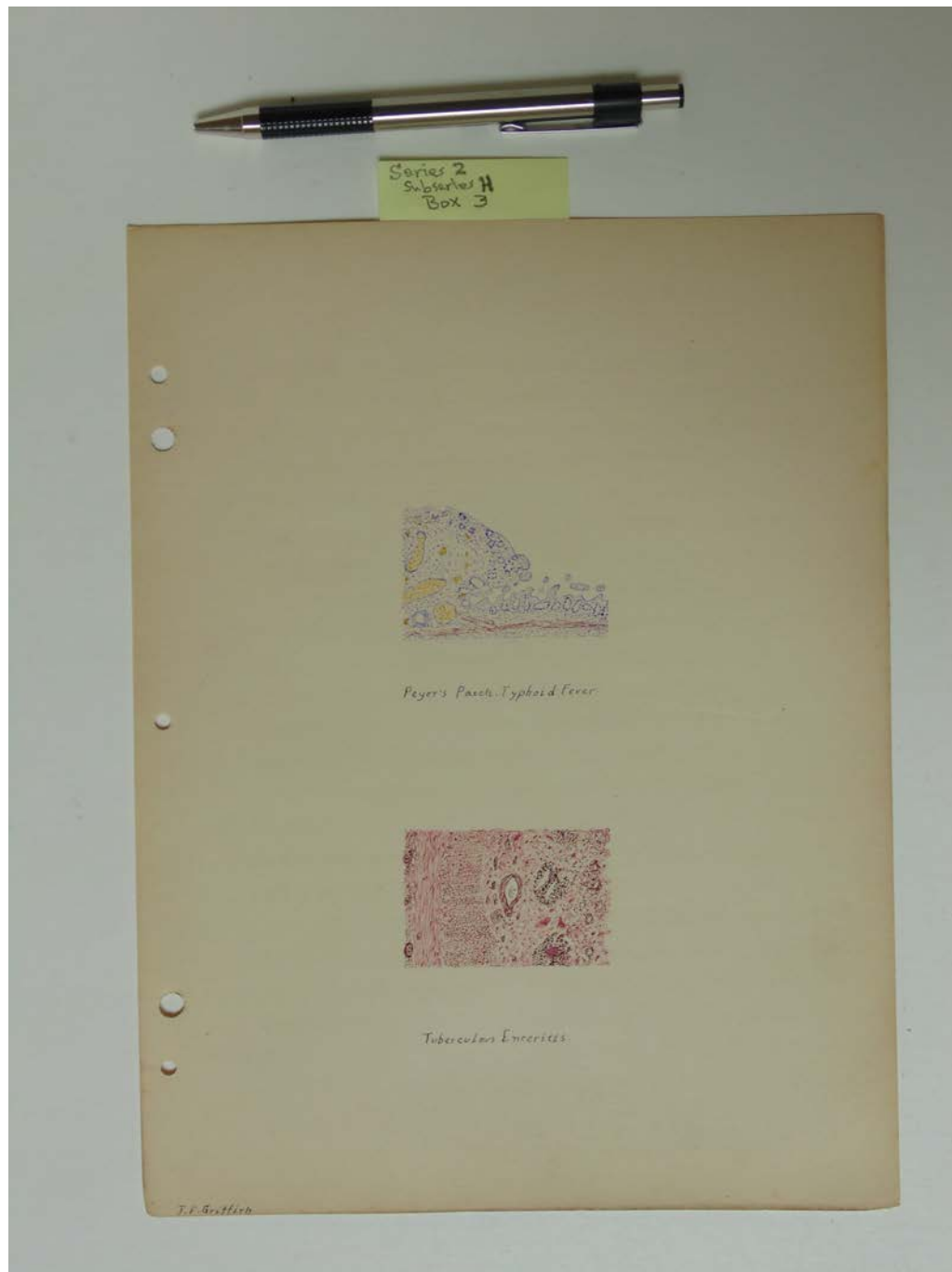
Hardly ever perforated or produces hemorrhage because the lesion follows the lymphatics and is associated with production

Names:

Tuberculosis Ententis

Types:

essay



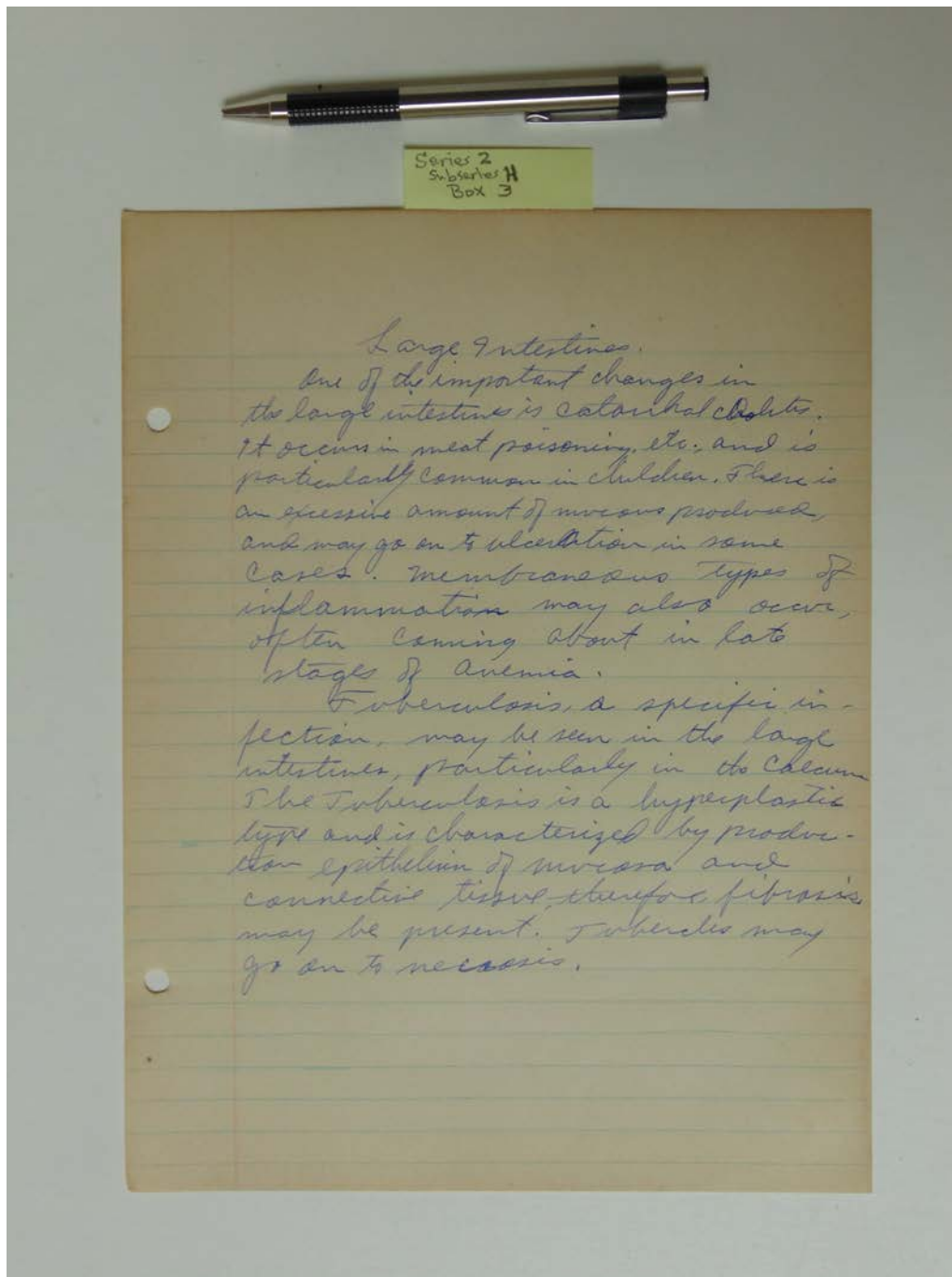
Names:

Peyer's Patch.
Typhoid Fever

Tuberculosis Enteritis

Types:

drawing



Large Intestines.

One of the important changes in the large intestine is catarrhal colitis. It occurs in meat poisoning, etc., and is particularly common in children. There is an excessive amount of mucus produced, and may go on to ulceration in some cases. Membranous types of inflammation may also occur, often coming about in late stages of anemia.

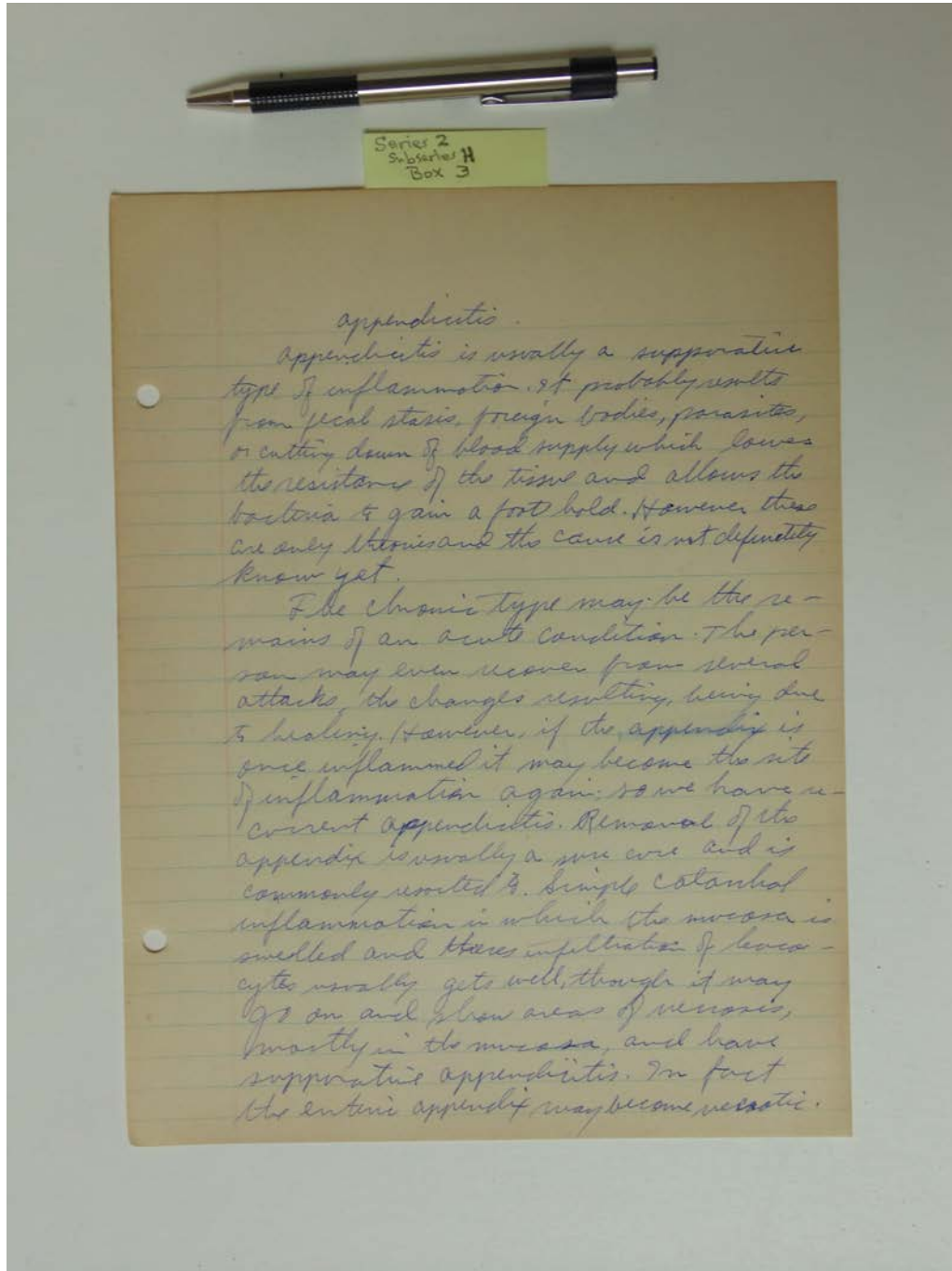
Tuberculosis, a specific infection, may be seen in the large intestine, particularly in the caecum. The tuberculosis is a hyperplastic type and is characterized by production epithelium of mucosa and connective tissue, therefore fibrosis may be present. Tubercles may go on to necrosis.

Names:

Large Intestines

Types:

essay



Appendicitis

Appendicitis is usually a suppurative type of inflammation. It probably results from fecal stasis, foreign bodies, parasites, or cutting down of blood supply which lowers the resistance of the tissue and allows the bacteria to gain a foothold. However, these are only theories and the cause is not definitely known yet.

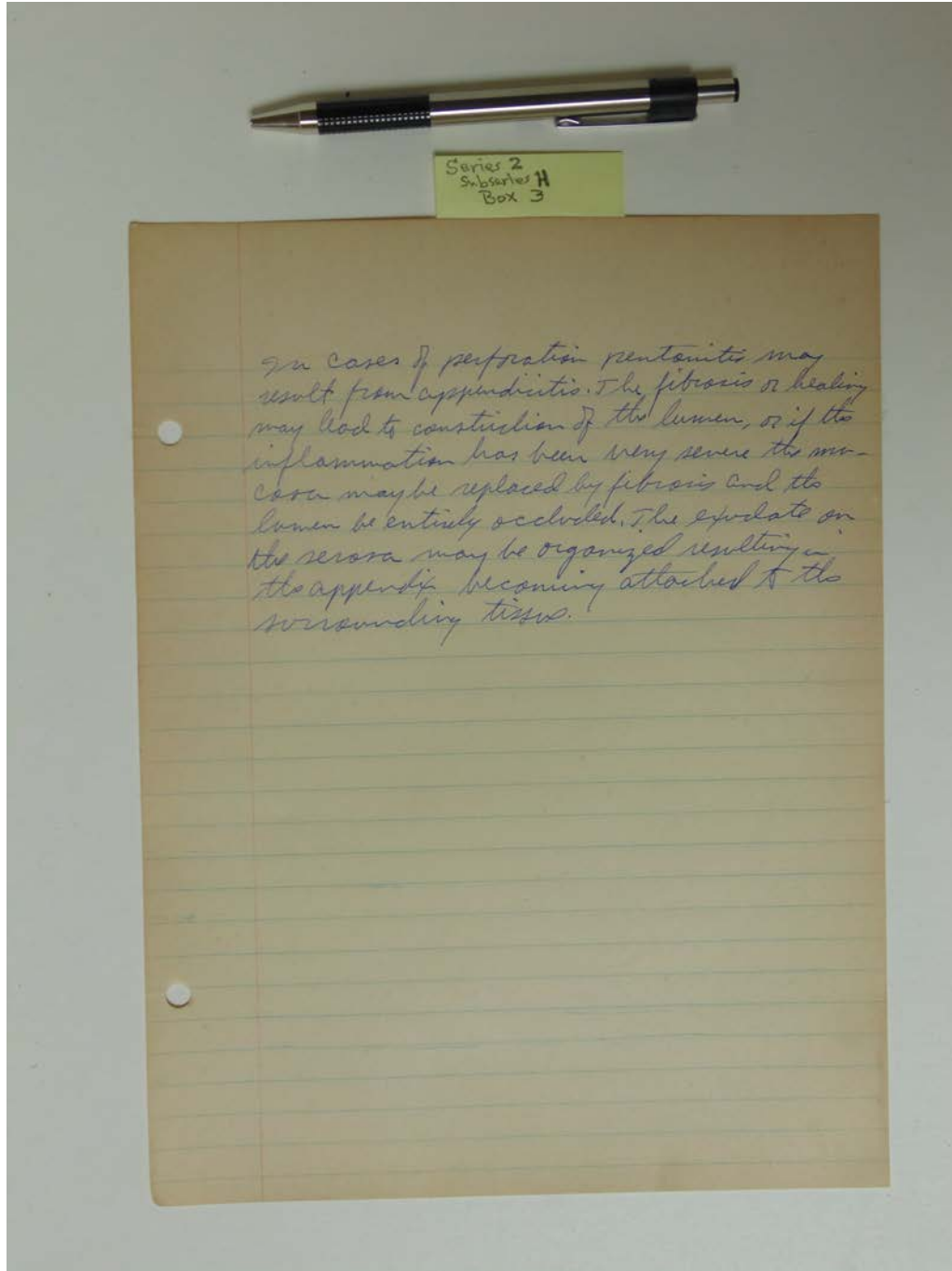
The chronic type may be the remains of an acute condition. The person may even recover from several attacks, the changes resulting, being due to healing. However, if the appendix is once inflamed it may become the site of inflammation again, so we have recurrent appendicitis. Removal of the appendix is usually a sure cure and is commonly resorted to. Simple catarrhal inflammation in which the mucosa is swollen and there is infiltration of leucocytes usually gets well, though it may go on and show areas of necrosis, mostly in the mucosa, and have suppurative appendicitis. In fact the entire appendix may become necrotic.

Names:

Appendicitis

Types:

essay

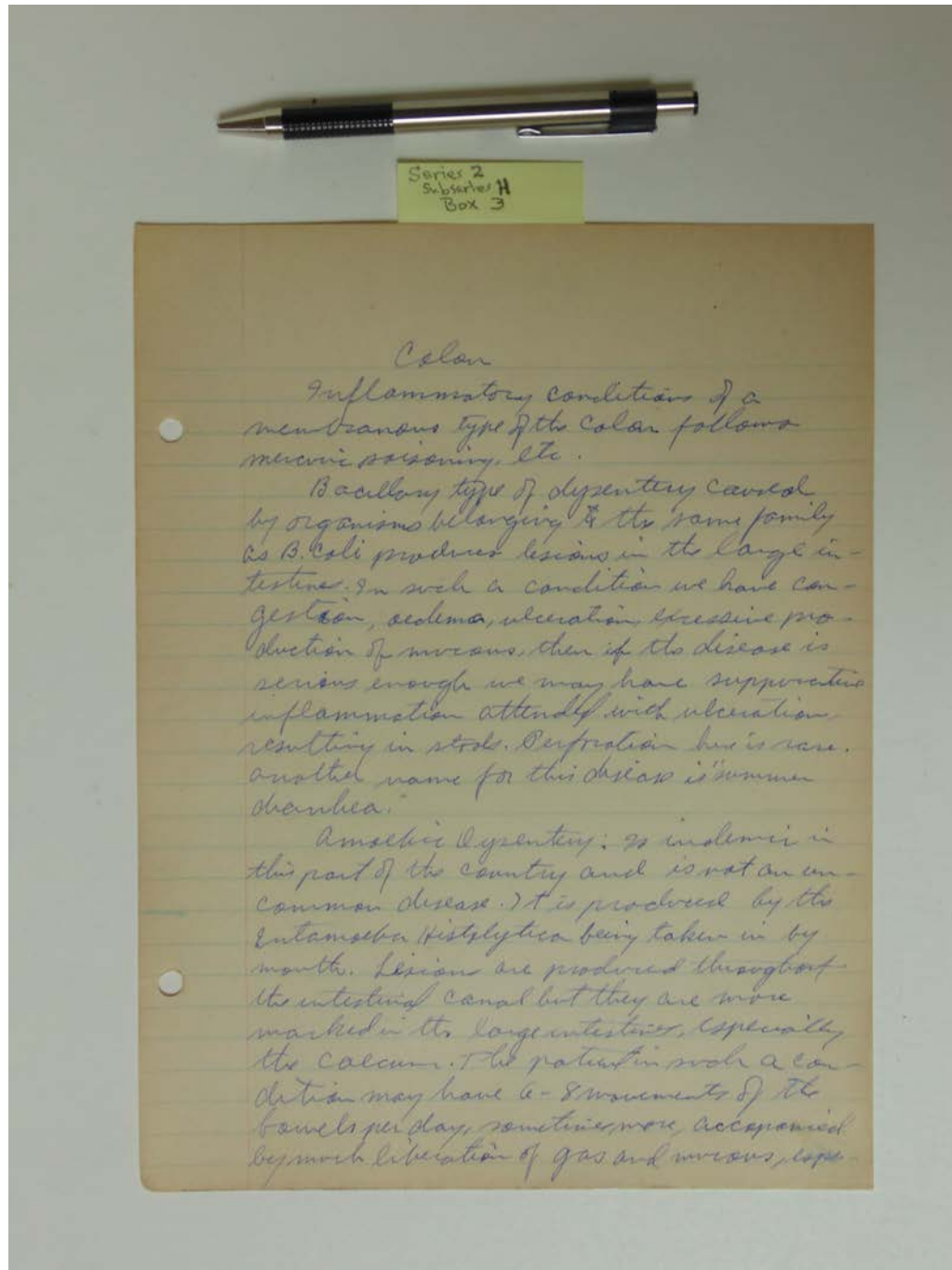


Names:

Appendicitis

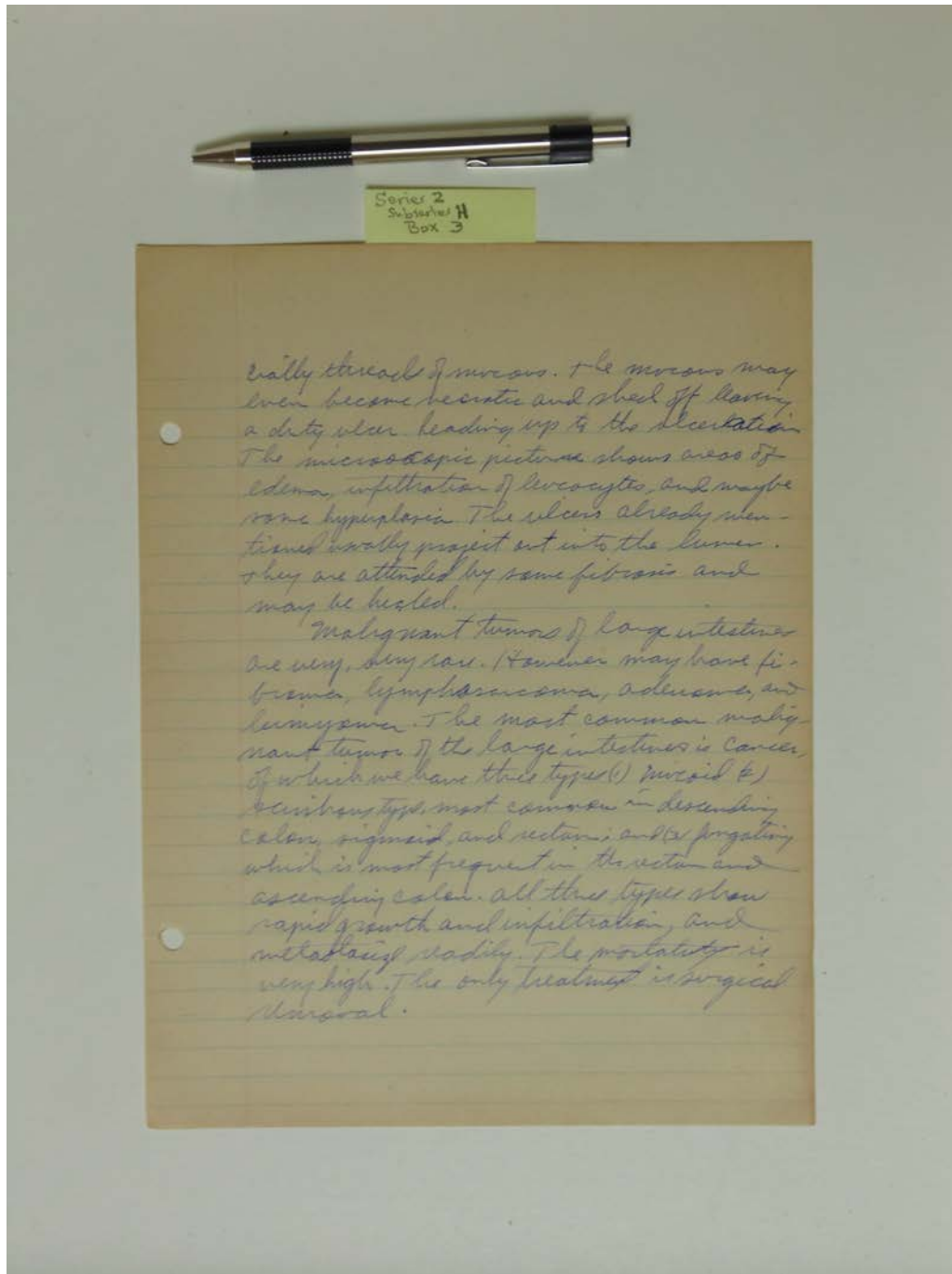
Types:

essay



Names:
Colon

Types:
essay



really thread of mucus. The mucus may even become necrotic and shed off leaving a dirty ulcer leading up to the ulceration. The microscopic picture shows areas of edema, infiltration of leucocytes, and maybe some hyperplasia. The ulcers already mentioned usually project out into the lumen. They are attended by some fibrinous and may be healed.

Malignant tumors of large intestine are very, very rare. (However may have fibrosarcoma, lymphosarcoma, adenoma, and leiomyoma). The most common malignant tumor of the large intestine is cancer of which we have three types (1) mucoid (2) scirrhous type, most common in descending colon, sigmoid, and rectum; and the prostatic which is most frequent in the rectum and ascending colon. All these types show rapid growth and infiltration, and metastasizing readily. The mortality is very high. The only treatment is surgical removal.

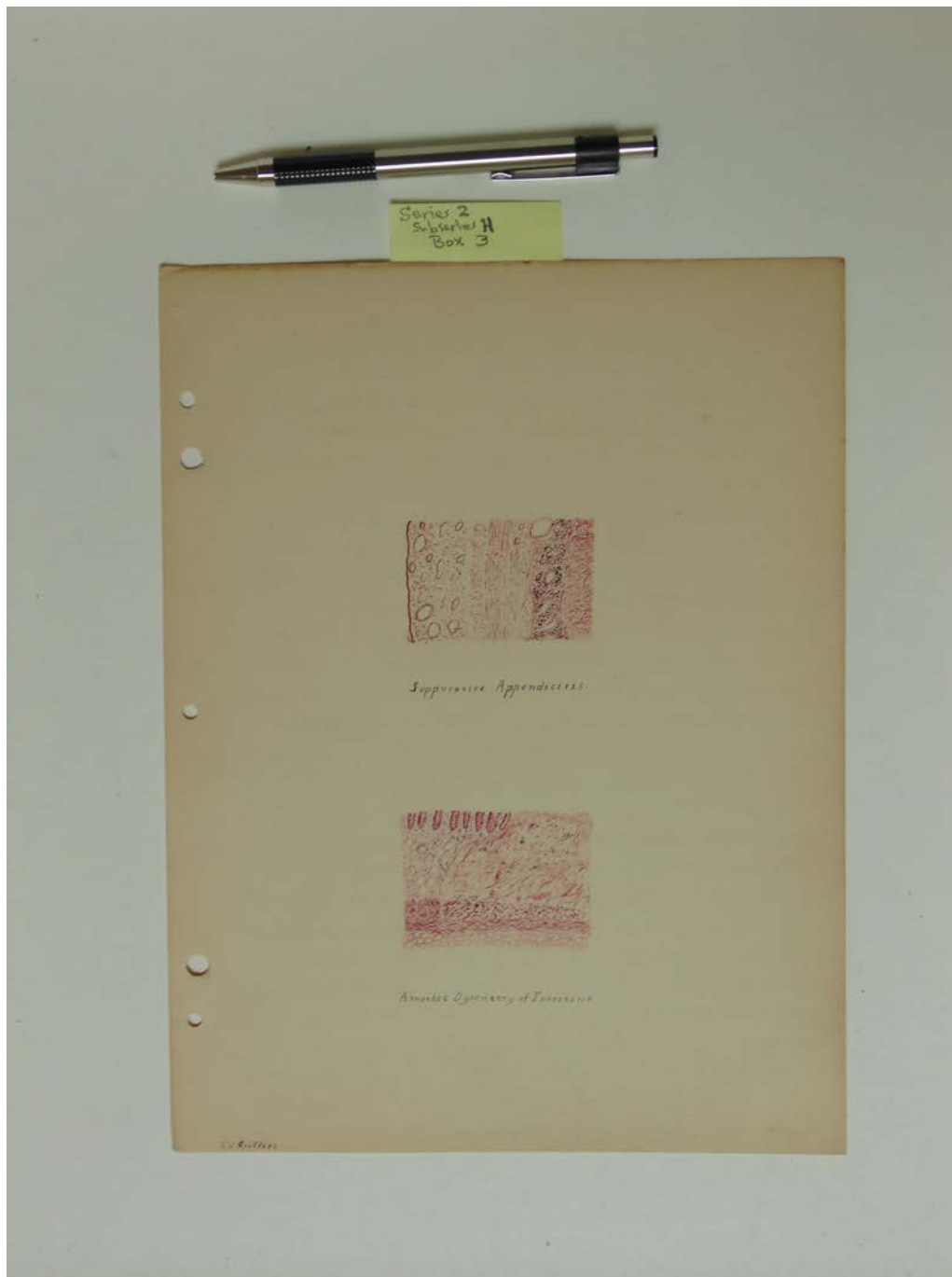
Names:
Colon

Types:
essay

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J.E. Griffith Pathology Notes, circa 1928

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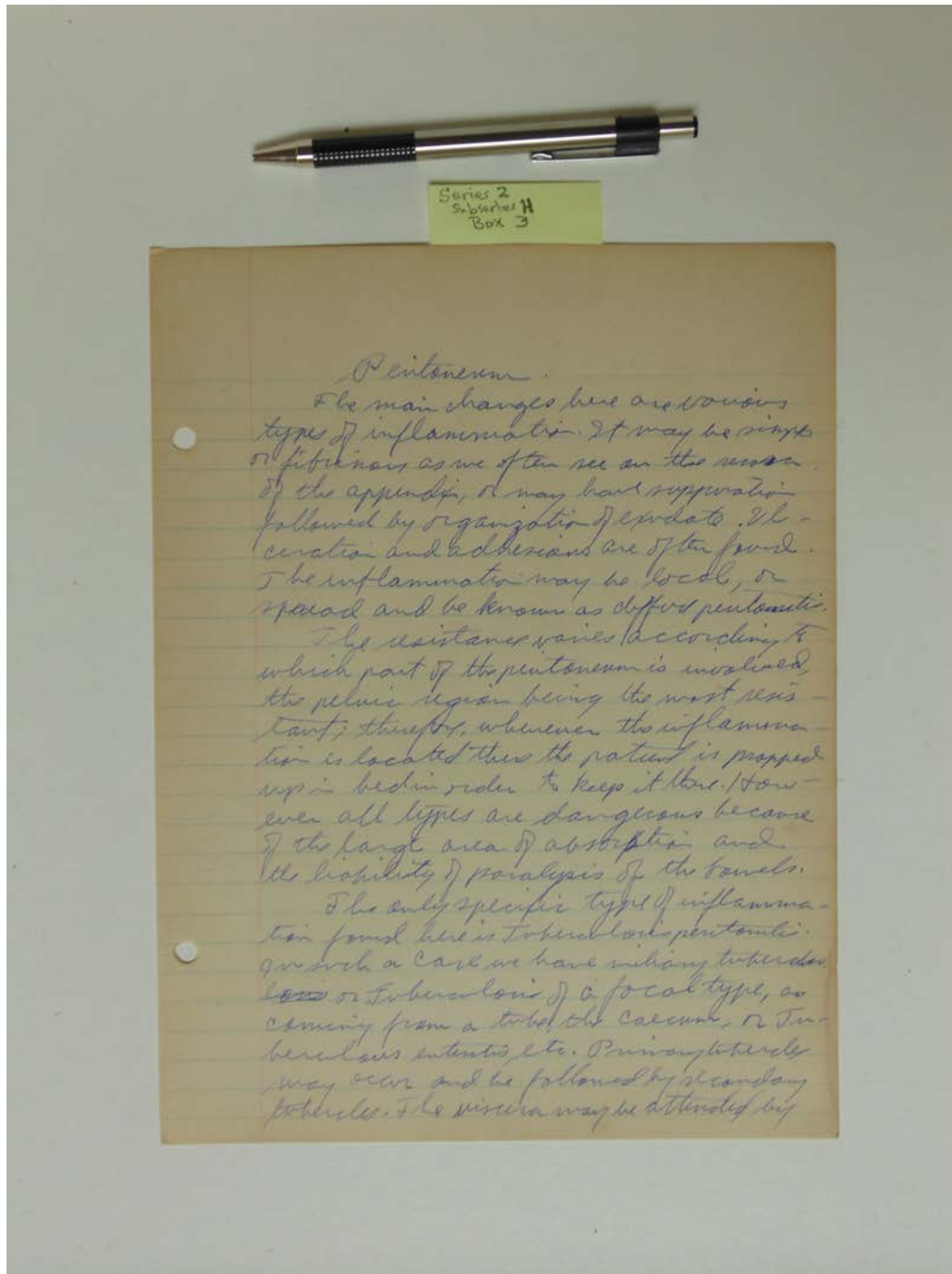
Names:

Amoebic Dysentery
of Intestine

Suppurative
Appendicitis

Types:

drawing



Peritoneum

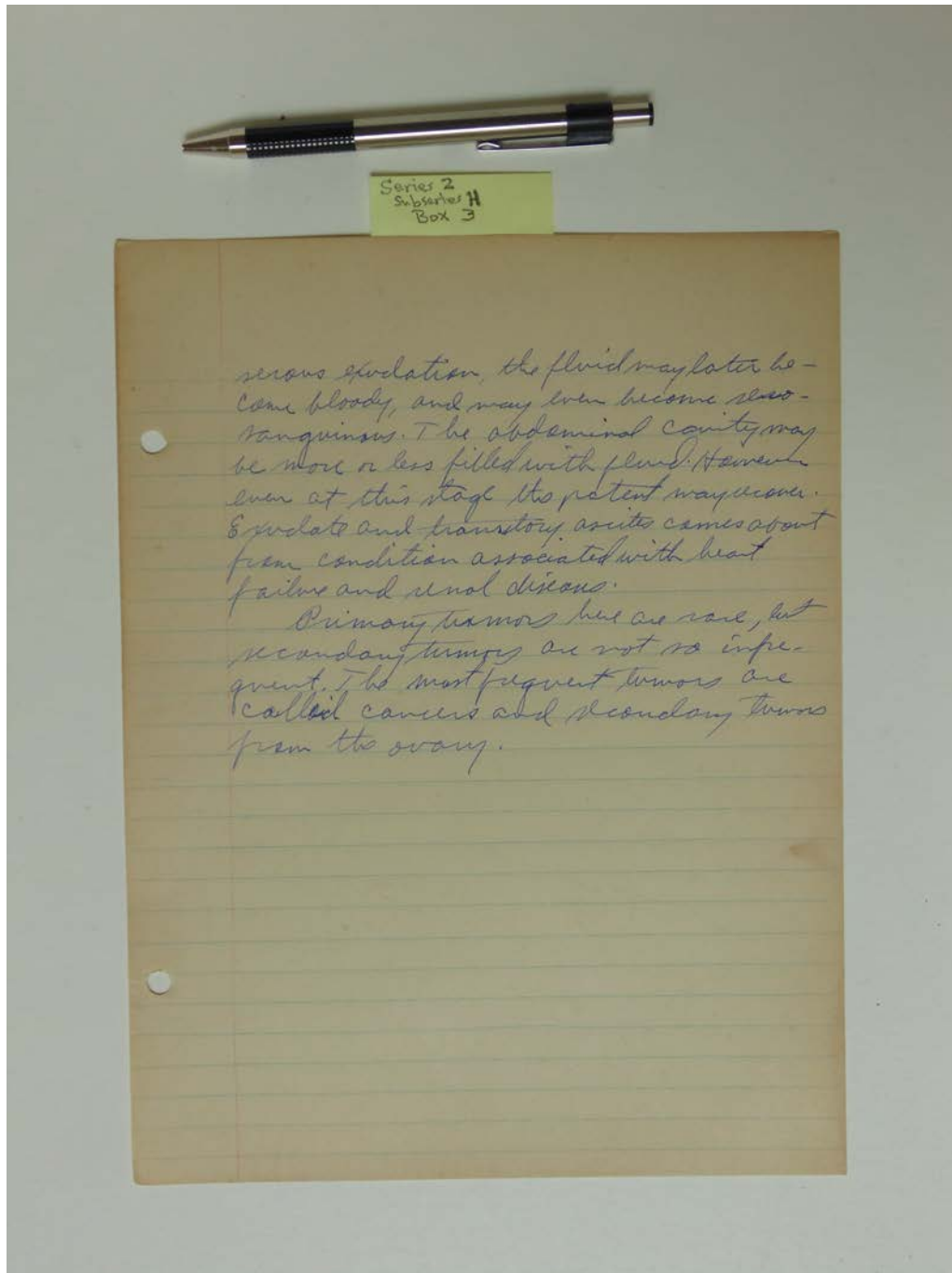
The main changes here are various types of inflammation. It may be simple or fibrinous as we often see on the surface of the appendix, or may have suppuration followed by organization of exudate. Ulceration and adhesions are often found. The inflammation may be local, or spread and be known as diffuse peritonitis.

The resistance varies according to which part of the peritoneum is involved, the pelvic region being the most resistant; therefore, whenever the inflammation is located there the patient is propped up in bed in order to keep it there. However all types are dangerous because of the large area of absorption and the liability of paralysis of the bowels.

The only specific type of inflammation found here is tuberculous peritonitis. For such a case we have primary tuberculous or tuberculous of a focal type, or coming from a tubercle of the caecum, or tuberculous enteritis, etc. Primary tubercles may occur and be followed by secondary tubercles. The viscera may be attended by

Names:
Peritoneum

Types:
essay



serous exudation, the fluid may later become bloody, and may even become sero-haemorrhagic. The abdominal cavity may be more or less filled with fluid. However even at this stage the patient may recover. Exudate and transitory ascites comes about from condition associated with heart failure and renal disease.

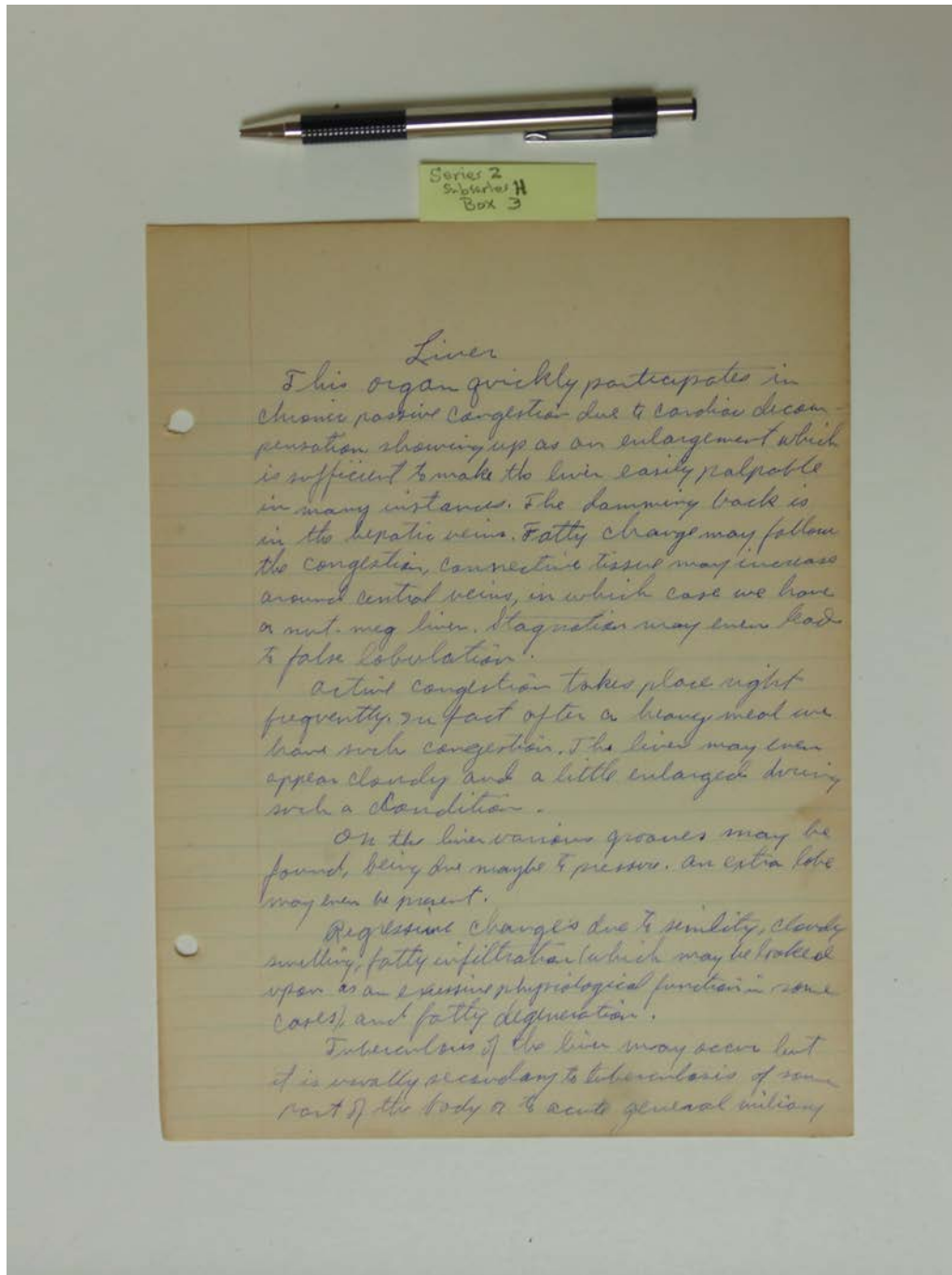
Primary tumors here are rare, but secondary tumors are not so infrequent. The most frequent tumors are called cancers and secondary tumors from the ovary.

Names:

Peritoneum

Types:

essay



Liver

This organ quickly participates in chronic passive congestion due to cardiac decompensation showing up as an enlargement which is sufficient to make the liver easily palpable in many instances. The hammy back is in the hepatic veins. Fatty change may follow the congestion, connective tissue may increase around central veins, in which case we have a nutmeg liver. Stagnation may even lead to false lobulation.

Active congestion takes place right frequently, in fact after a heavy meal we have such congestion. The liver may even appear cloudy and a little enlarged during such a condition.

On the liver various grooves may be found, being due maybe to pressure. An extra lobe may even be present.

Regressive changes due to similitude, cloudy swelling, fatty infiltration (which may be looked upon as an excessive physiological function in some cases) and fatty degeneration.

Tuberculosis of the liver may occur but it is usually secondary to tuberculosis of some part of the body or to acute general miliary

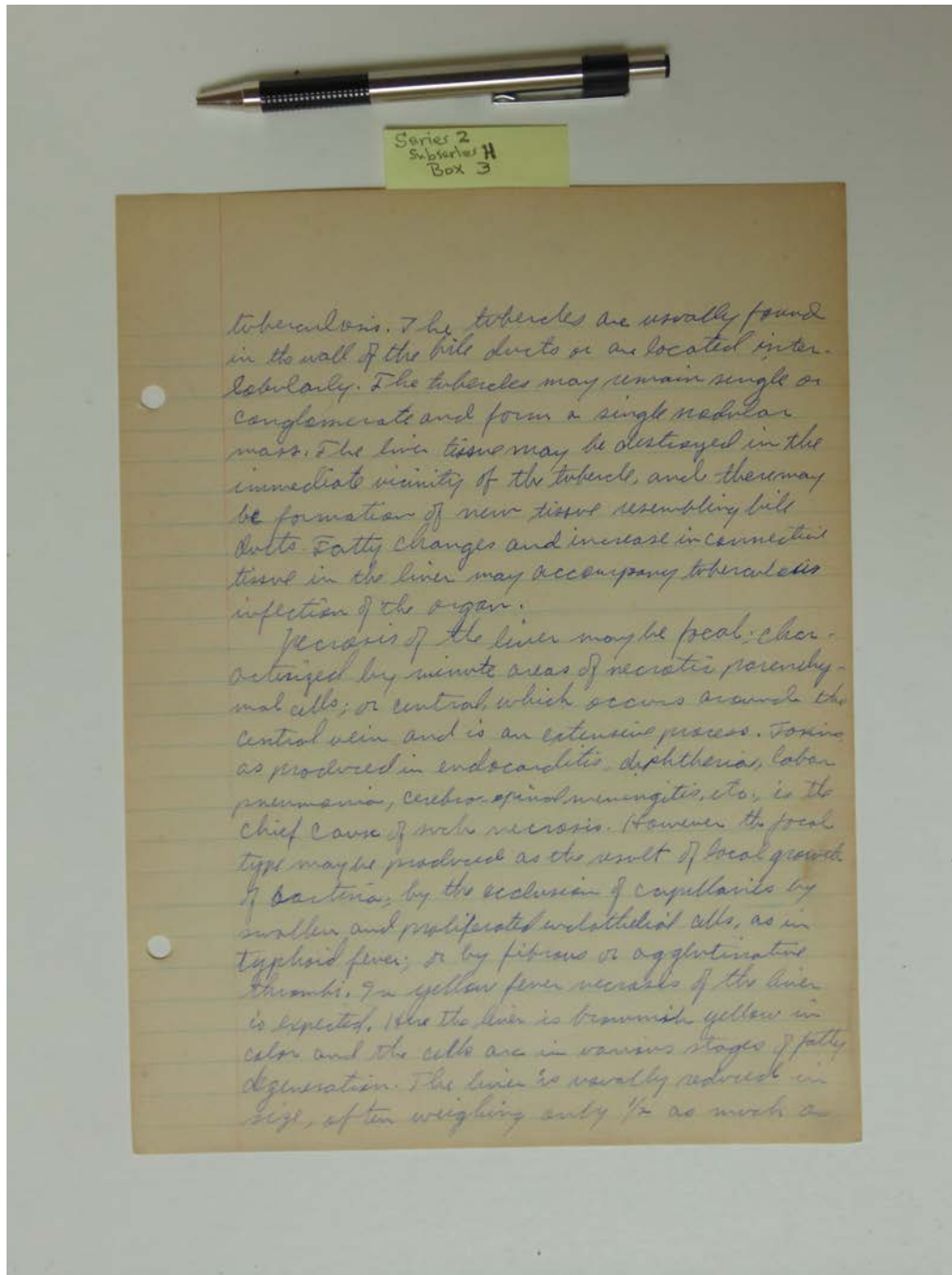
p. 1

Names:

Liver

Types:

essay



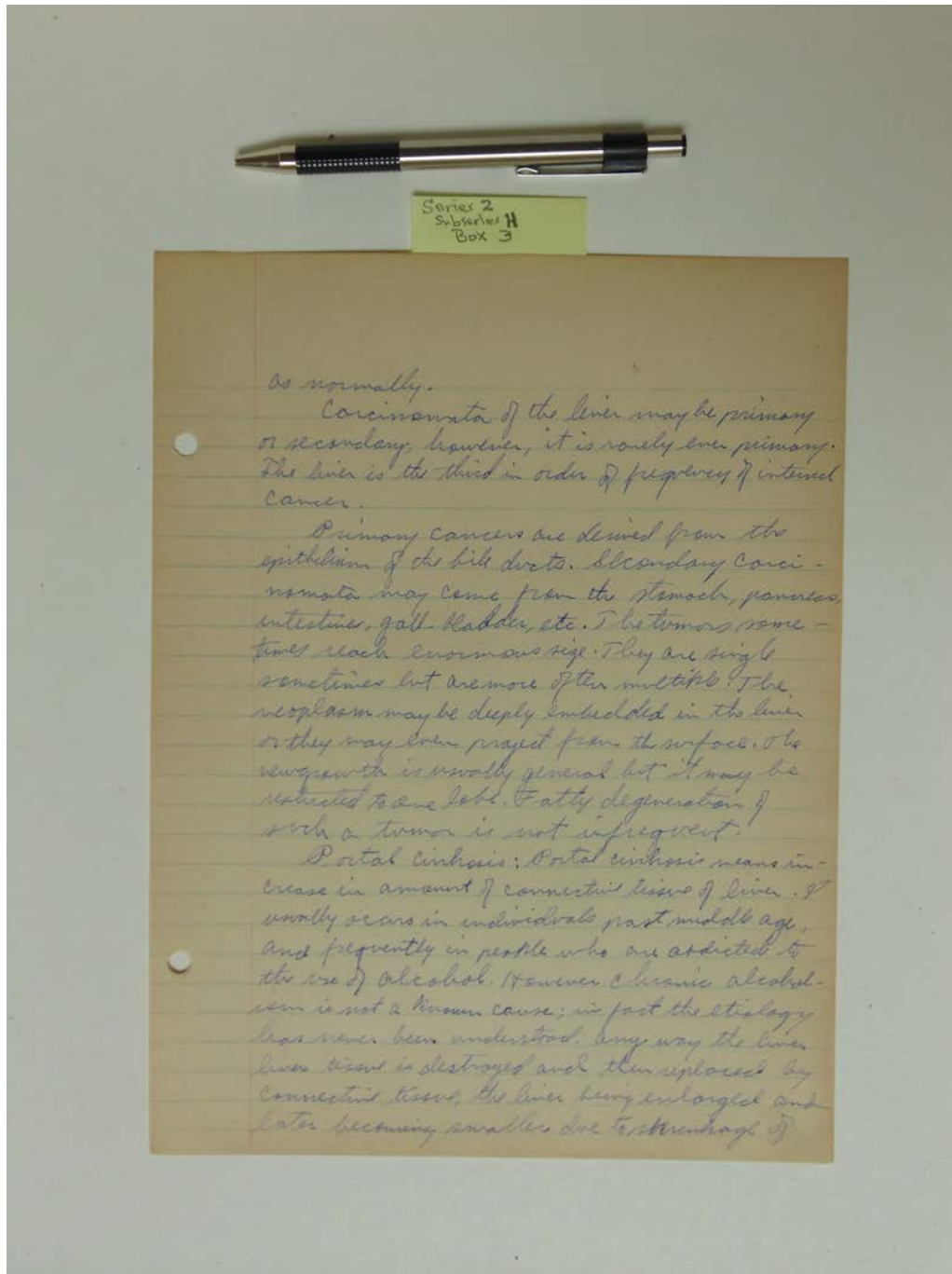
p. 2

Names:

Liver

Types:

essay



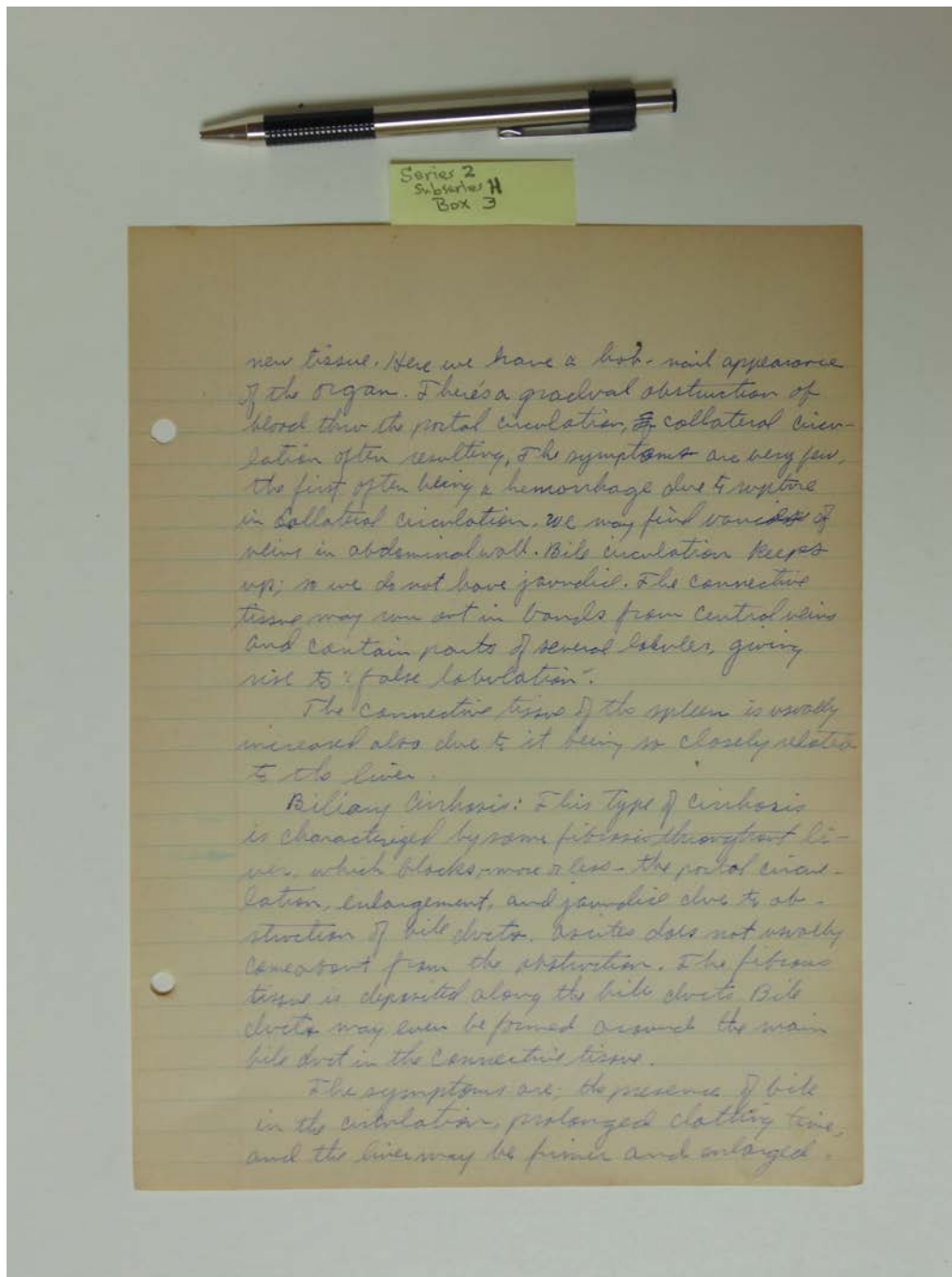
p. 3

Names:

Liver

Types:

essay



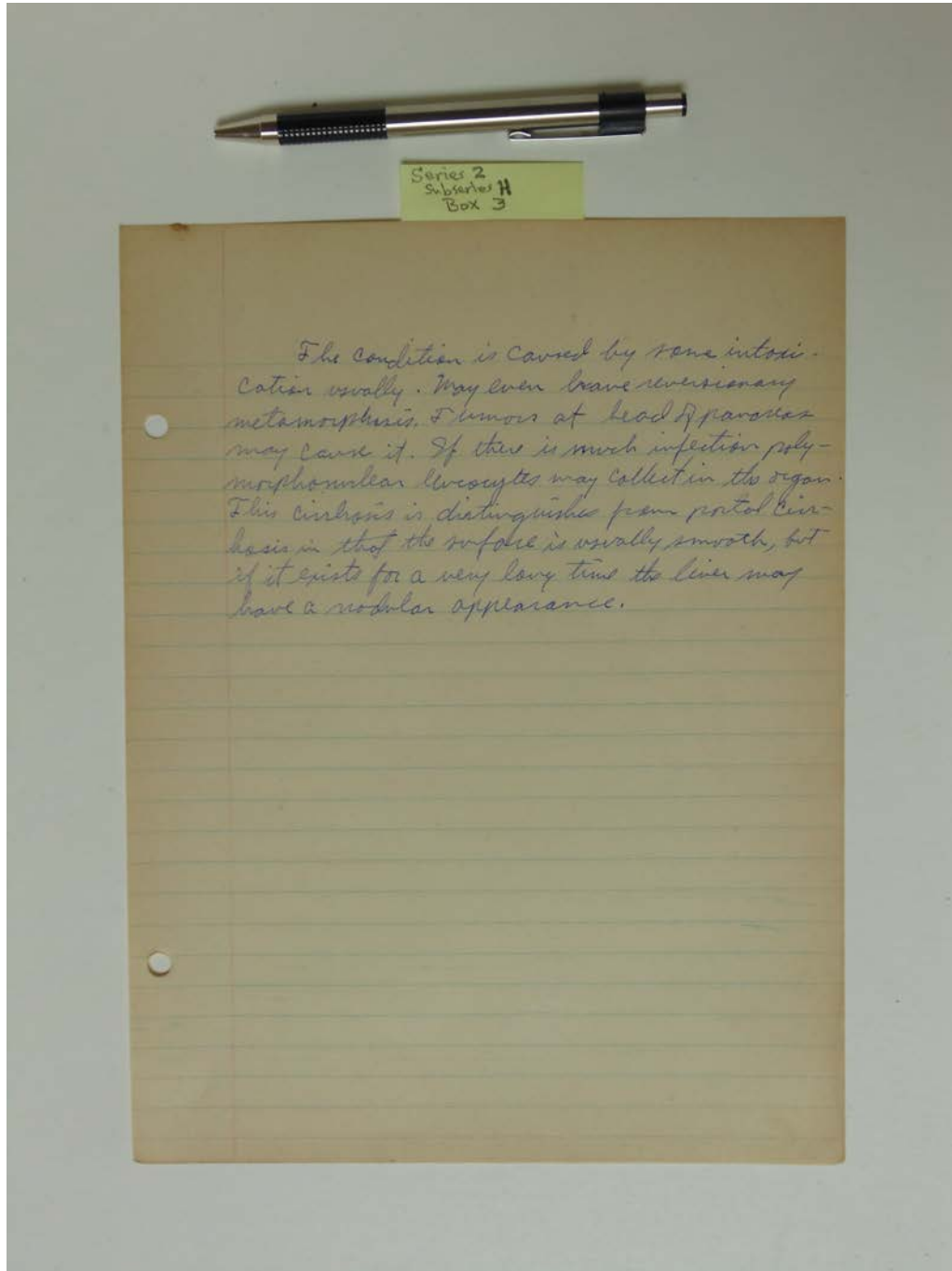
p. 4

Names:

Liver

Types:

essay



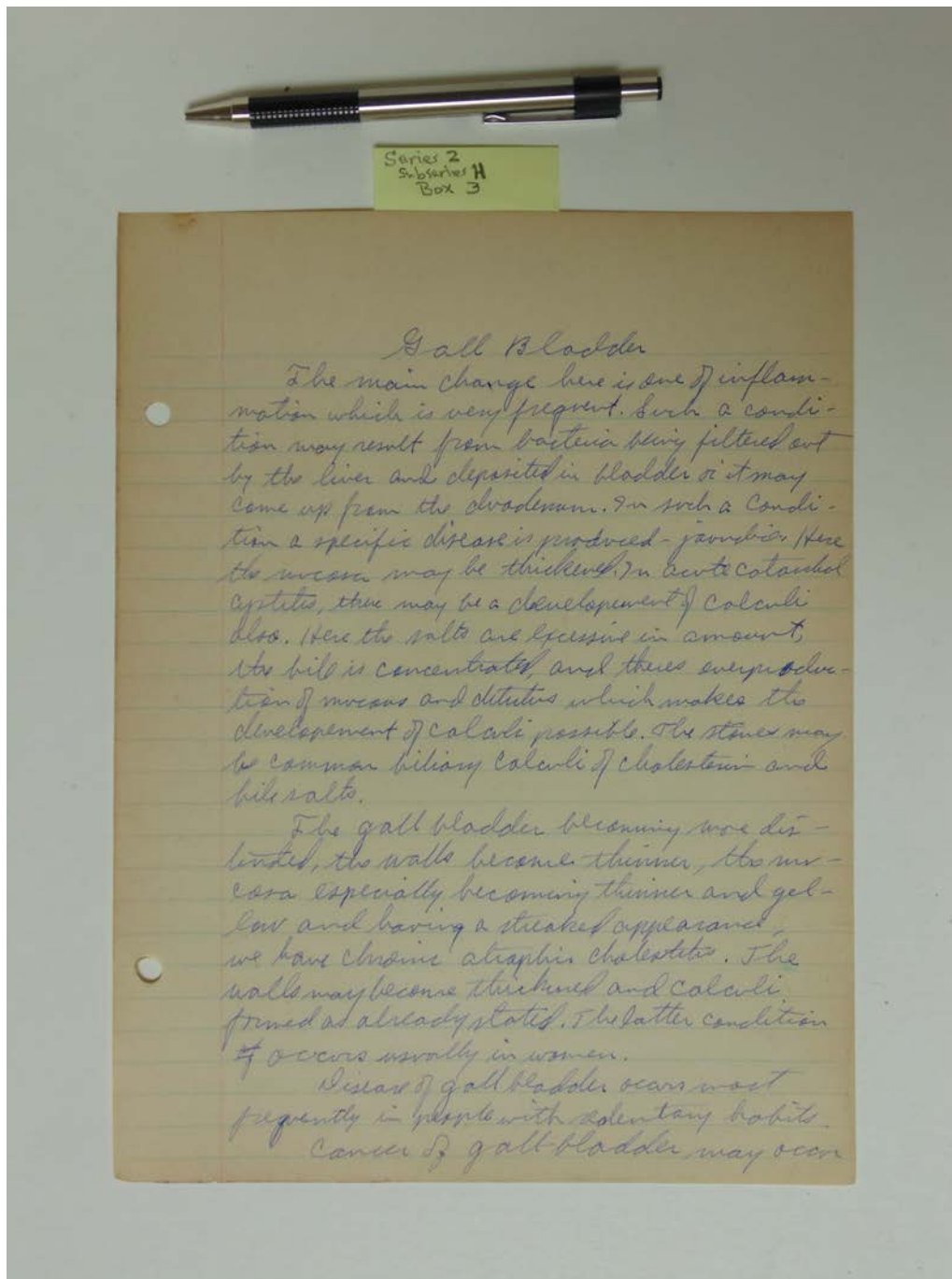
p. 5

Names:

Liver

Types:

essay



Gall Bladder

The main change here is one of inflammation which is very frequent. Such a condition may result from bacteria being filtered out by the liver and deposited in bladder or it may come up from the bloodstream. In such a condition a specific disease is produced - jaundice. Here the mucus may be thickened. In acute catarrhal cystitis, there may be a development of calculi also. Here the salts are excessive in amount, the bile is concentrated and there is an accumulation of mucus and detritus which makes the development of calculi possible. The stones may be common biliary calculi of cholesterol and bile salts.

The gall bladder becoming more distended, the walls become thinner, the mucus especially becoming thinner and yellow and having a streaked appearance, we have chronic atrophic cholecystitis. The walls may become thickened and calculi formed as already stated. The latter condition occurs usually in women.

Disease of gall bladder occurs most frequently in people with sedentary habits. Cancer of gall bladder may occur

Names:

Gall Bladder

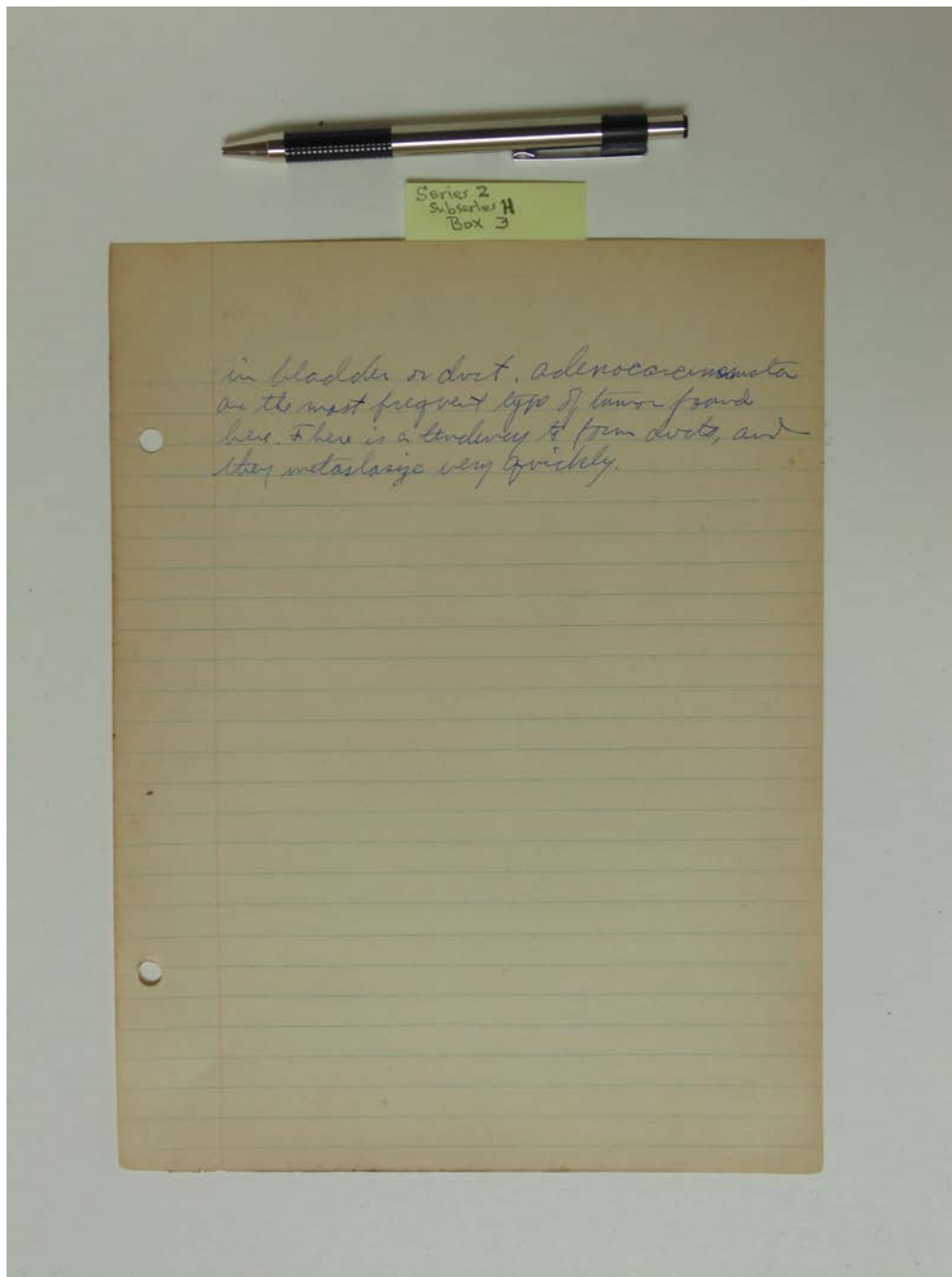
Types:

essay

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Names:

Gall Bladder

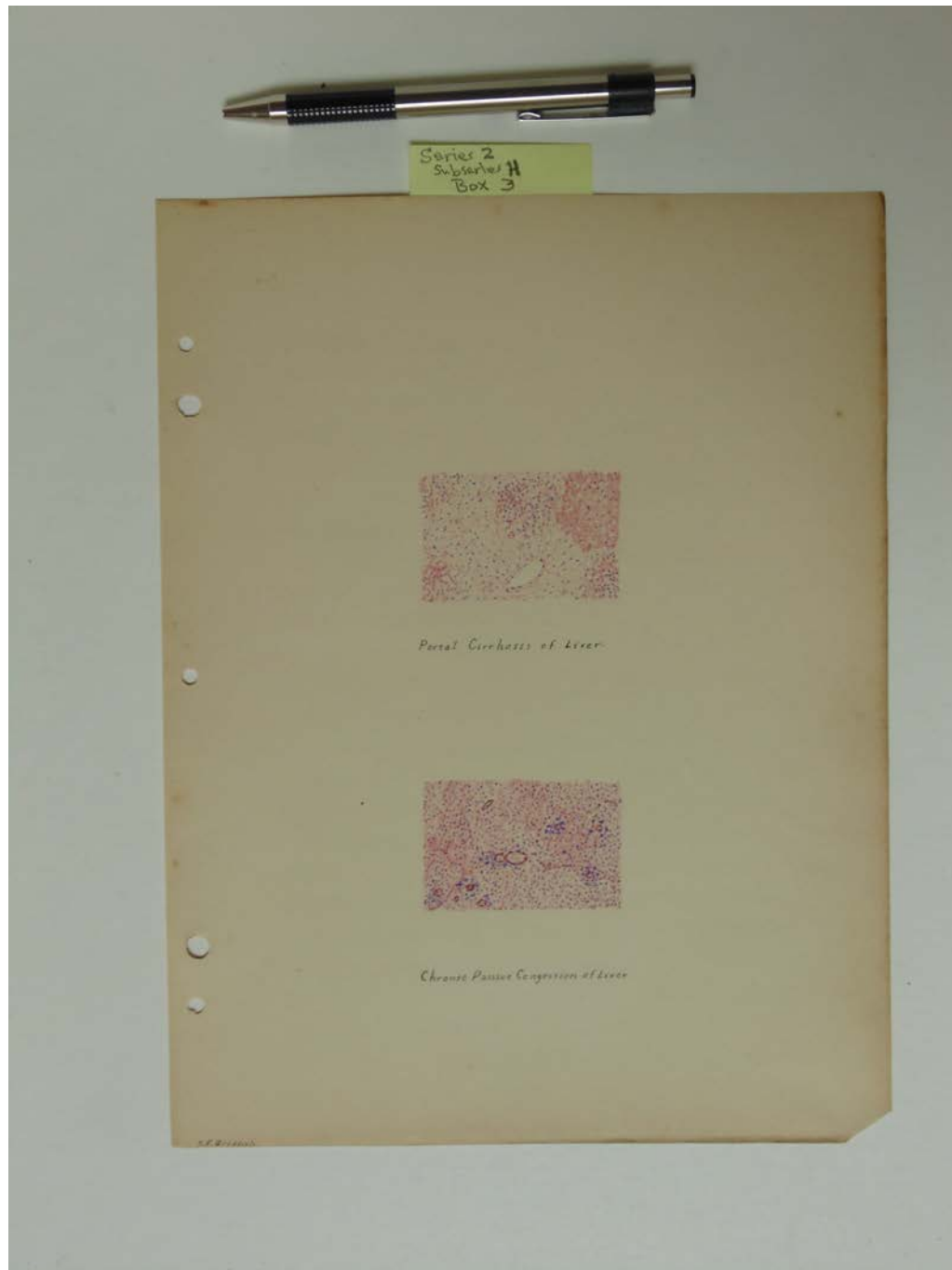
Types:

essay

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J.E. Griffith Pathology Notes, circa 1928

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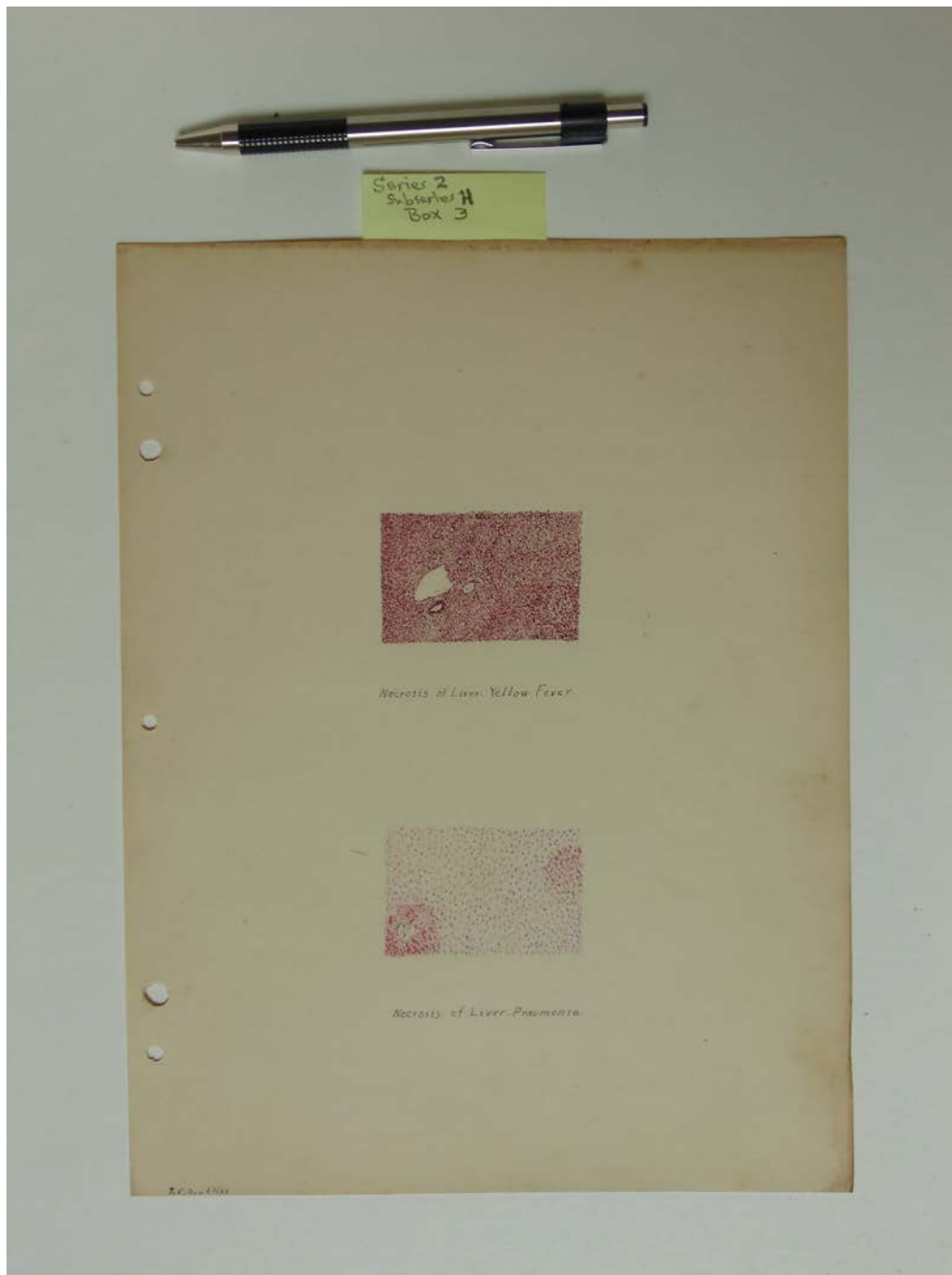
Names:

Chronic Passive
Congestion of Liver

Portal Cirrhosis of
Liver

Types:

drawing



Names:

Necrosis of Liver.
Pneumonia

Necrosis of Liver.
Yellow Fever

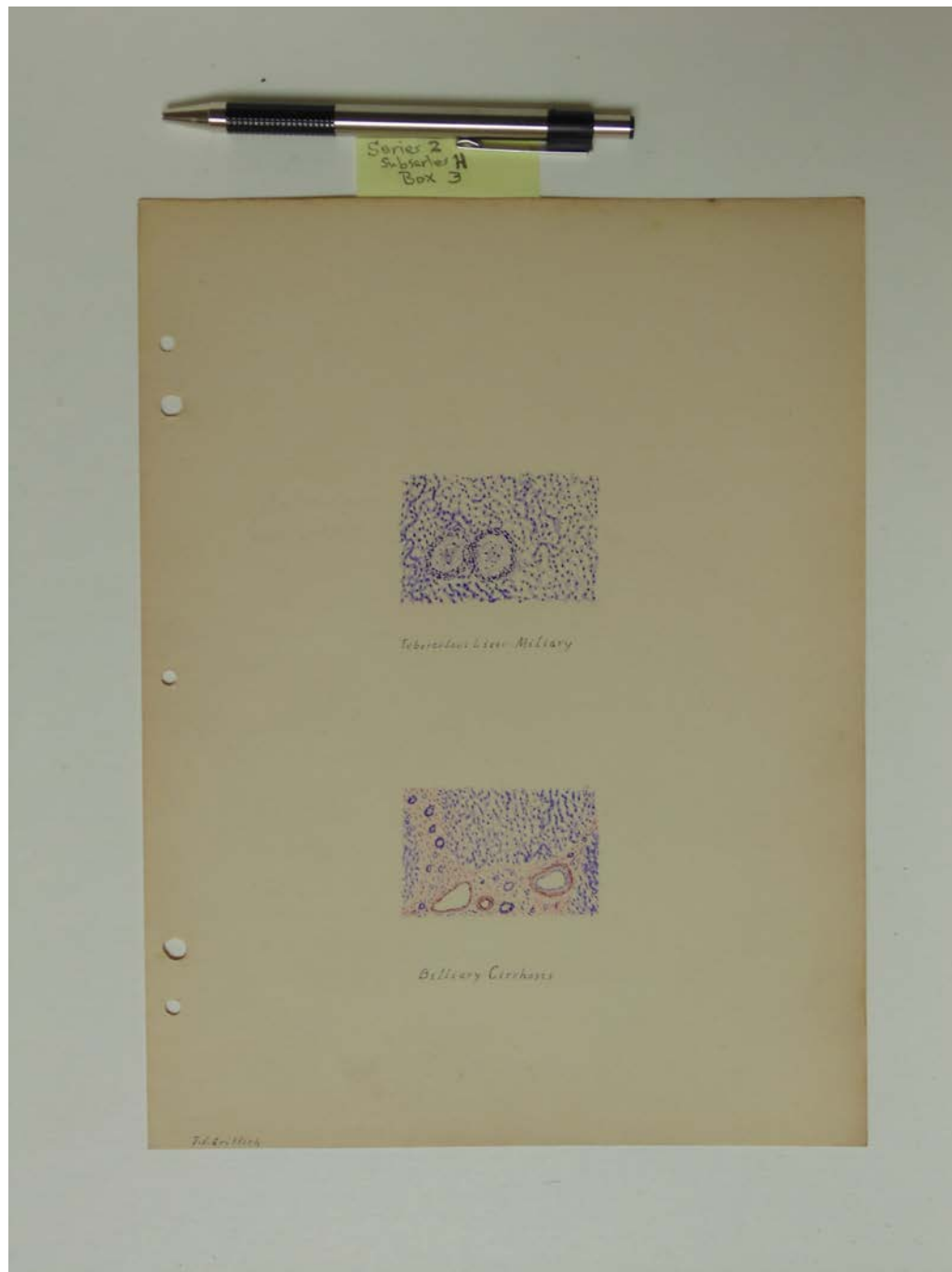
Types:

drawing

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J.E. Griffith Pathology Notes, circa 1928

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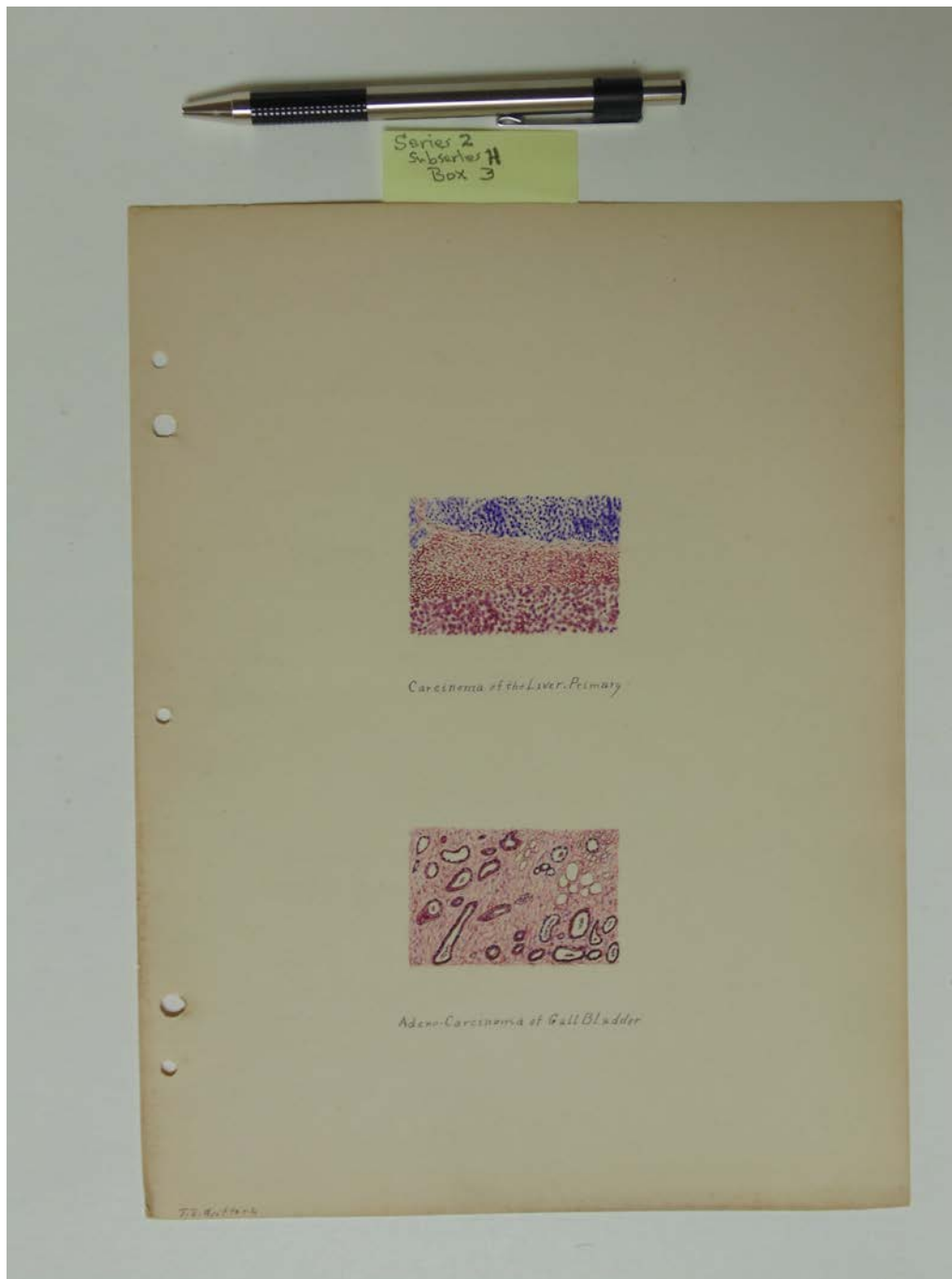
Names:

Biliary Cirrhosis

Tuberculous Liver.
Miliary

Types:

drawing



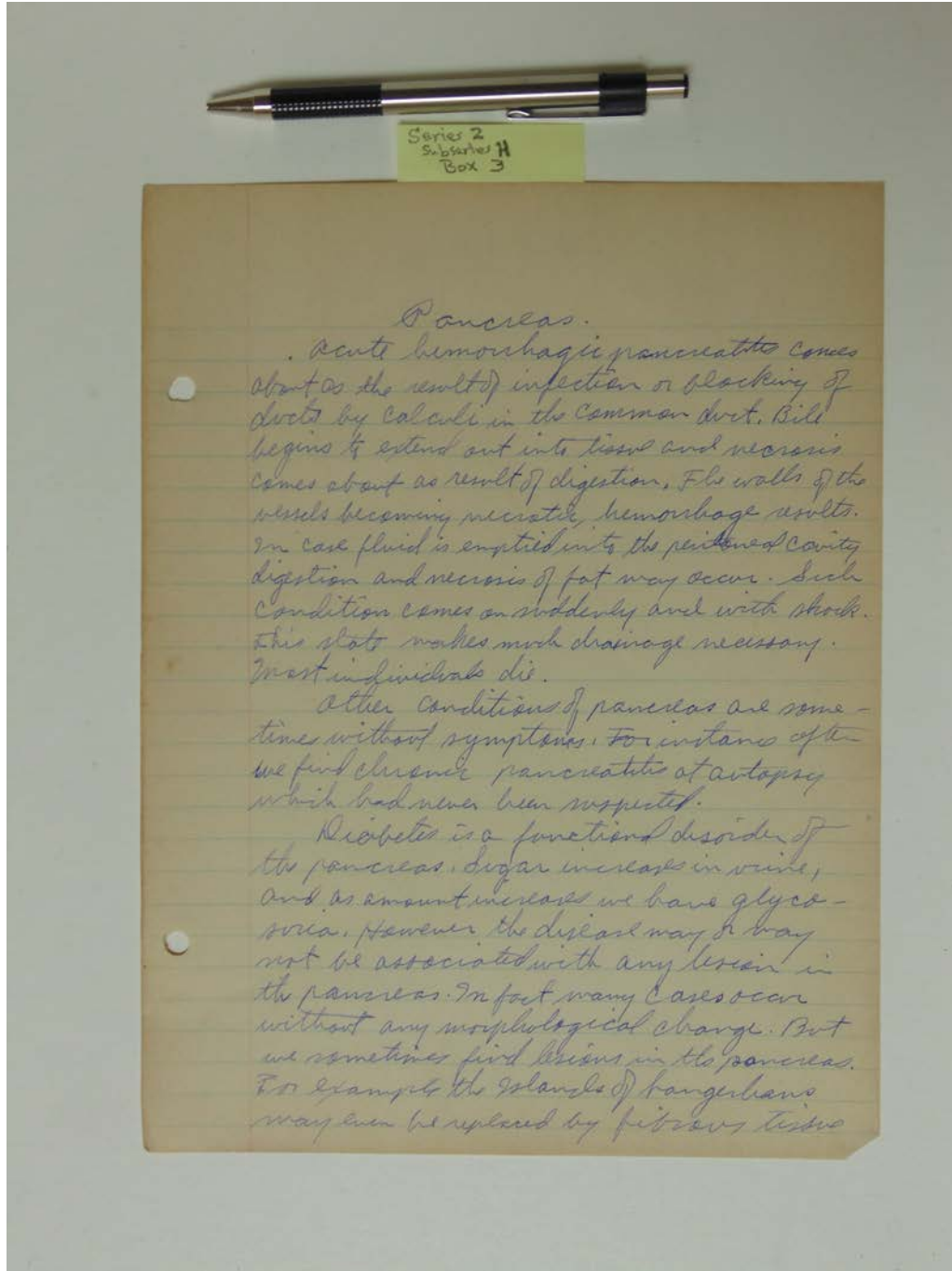
Names:

Adenocarcinoma of
Gall Bladder

Carcinoma of Liver.
Primary

Types:

drawing



Pancreas.

Acute hemorrhagic pancreatitis comes about as the result of infection or blocking of ducts by calculi in the common duct. Bile begins to extend out into tissue and necrosis comes about as result of digestion. The walls of the vessels becoming necrotic, hemorrhage results. In case fluid is emptied into the peritoneal cavity digestion and necrosis of fat may occur. Such condition comes on suddenly and with shock. This state makes much drainage necessary. Most individuals die.

Other conditions of pancreas are sometimes without symptoms. For instance often we find chronic pancreatitis at autopsy which had never been suspected.

Diabetes is a functional disorder of the pancreas. Sugar increases in urine, and as amount increases we have glycosuria. However the disease may or may not be associated with any lesion in the pancreas. In fact many cases occur without any morphological change. But we sometimes find lesions in the pancreas. For example the islands of Langerhans may even be replaced by fibrous tissue.

Names:

Pancreas

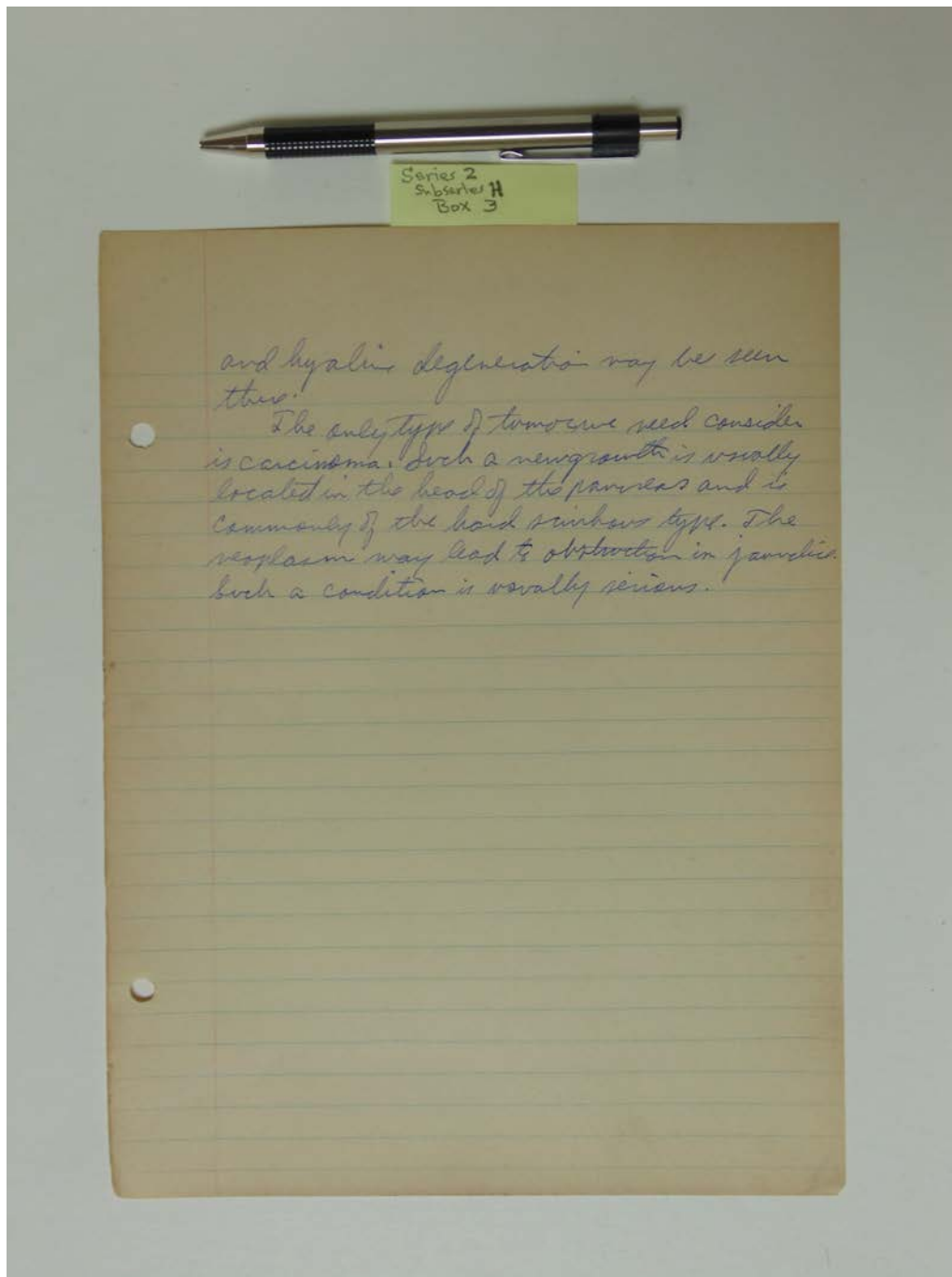
Types:

essay

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J.E. Griffith Pathology Notes, circa 1928

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and hyaline degeneration may be seen
there.

The only type of tumor we need consider
is carcinoma. Such a neoplasm is usually
located in the head of the pancreas and is
commonly of the hard scirrhous type. The
neoplasm may lead to obstruction in pancreas.
Such a condition is usually serious.

Names:

Pancreas

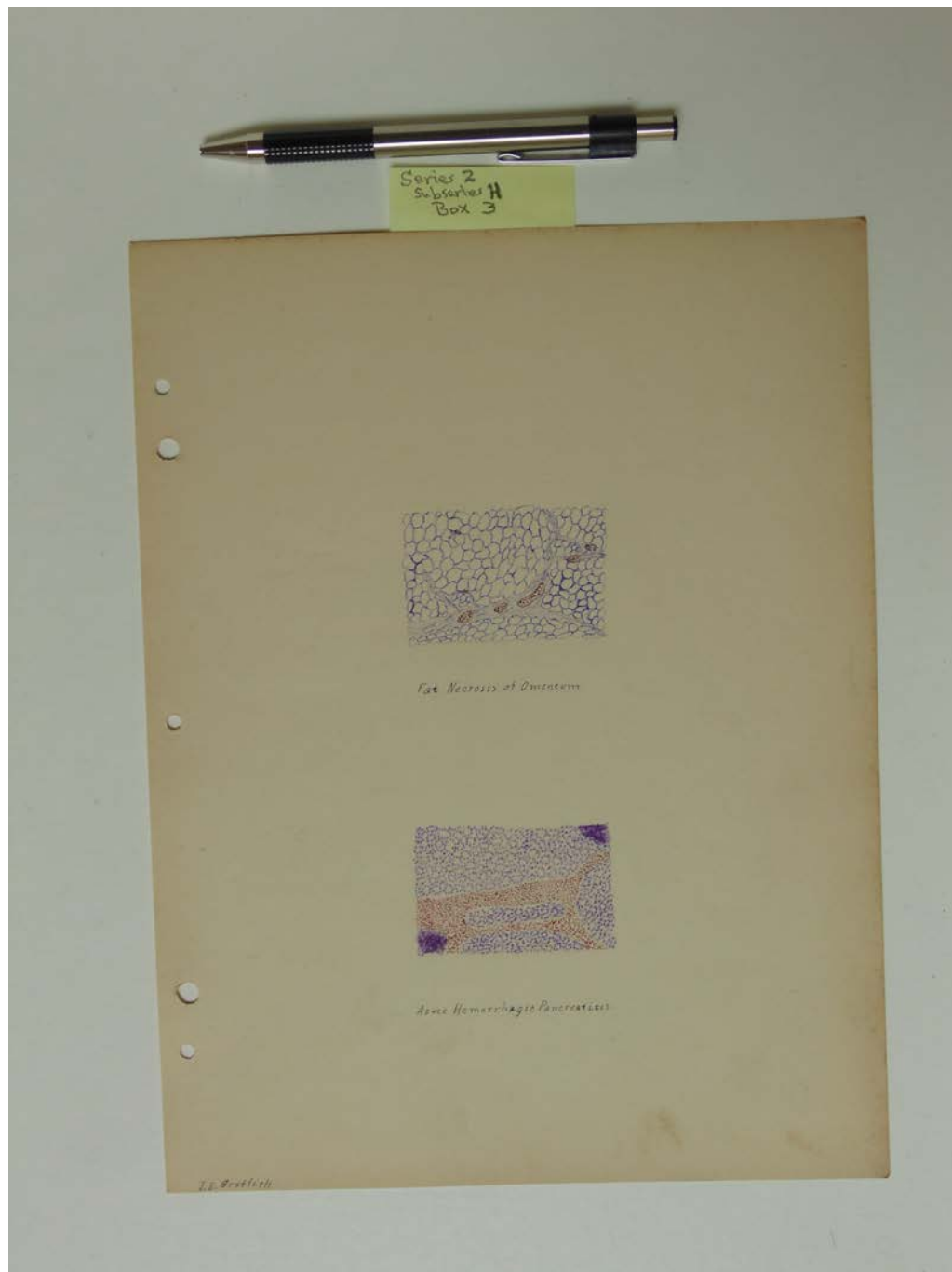
Types:

essay

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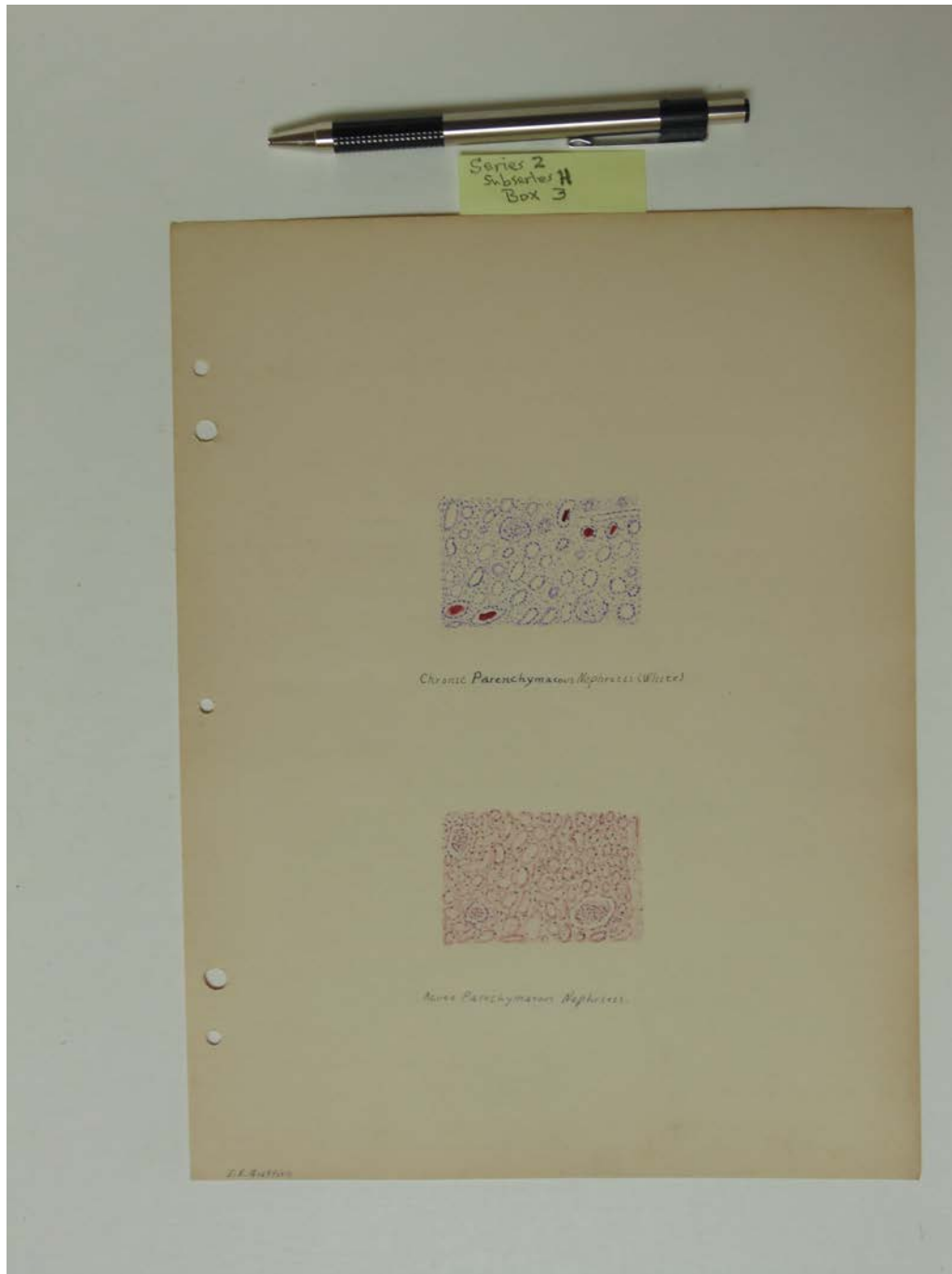
Names:

Acute Hemorrhagic
Pancreatitis

Fat Necrosis of
Omentum

Types:

drawing



Names:

Acute
Parenchymatous

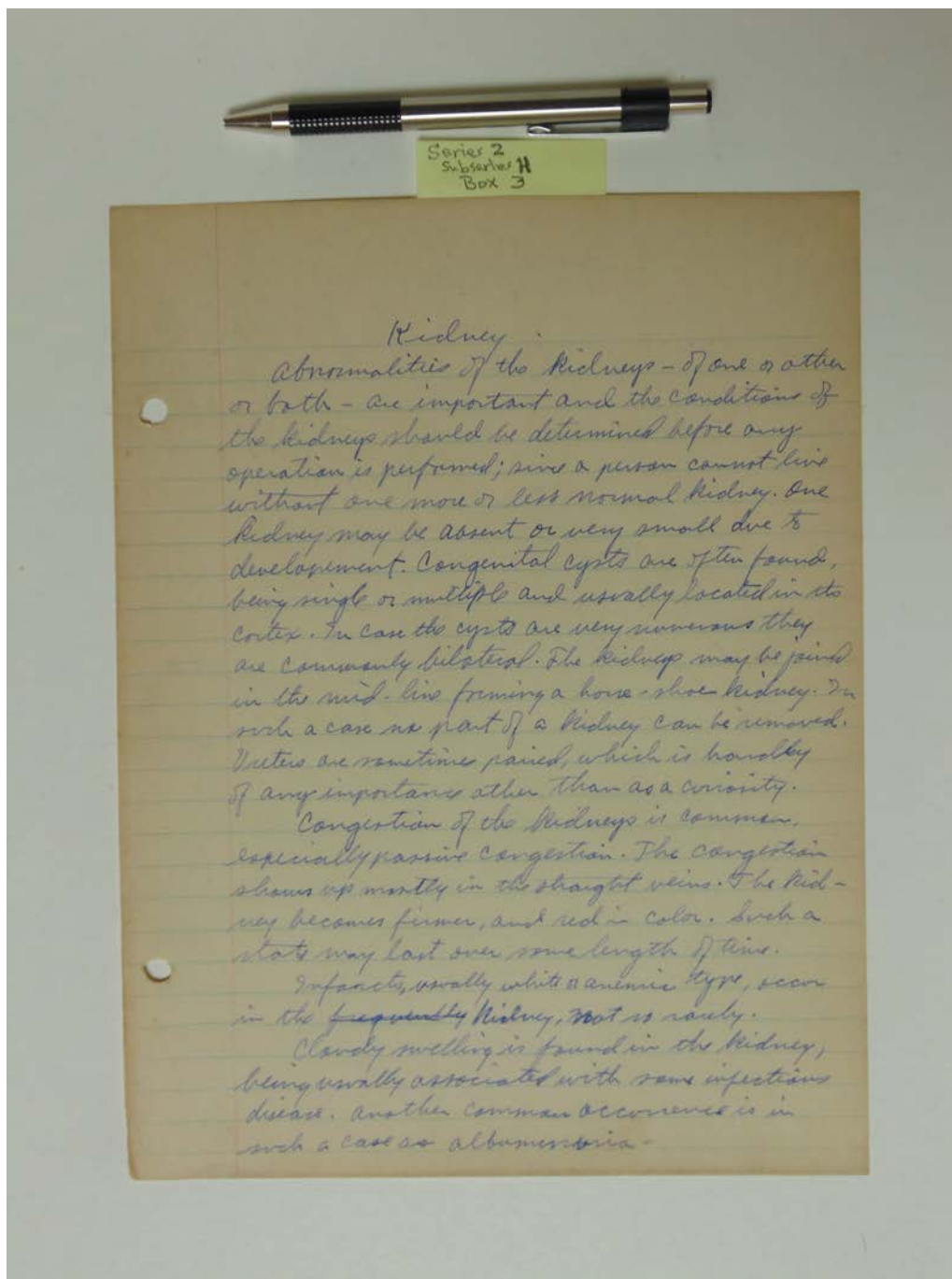
Nephritis

Chronic
Parenchymatous

Nephritis

Types:

drawing



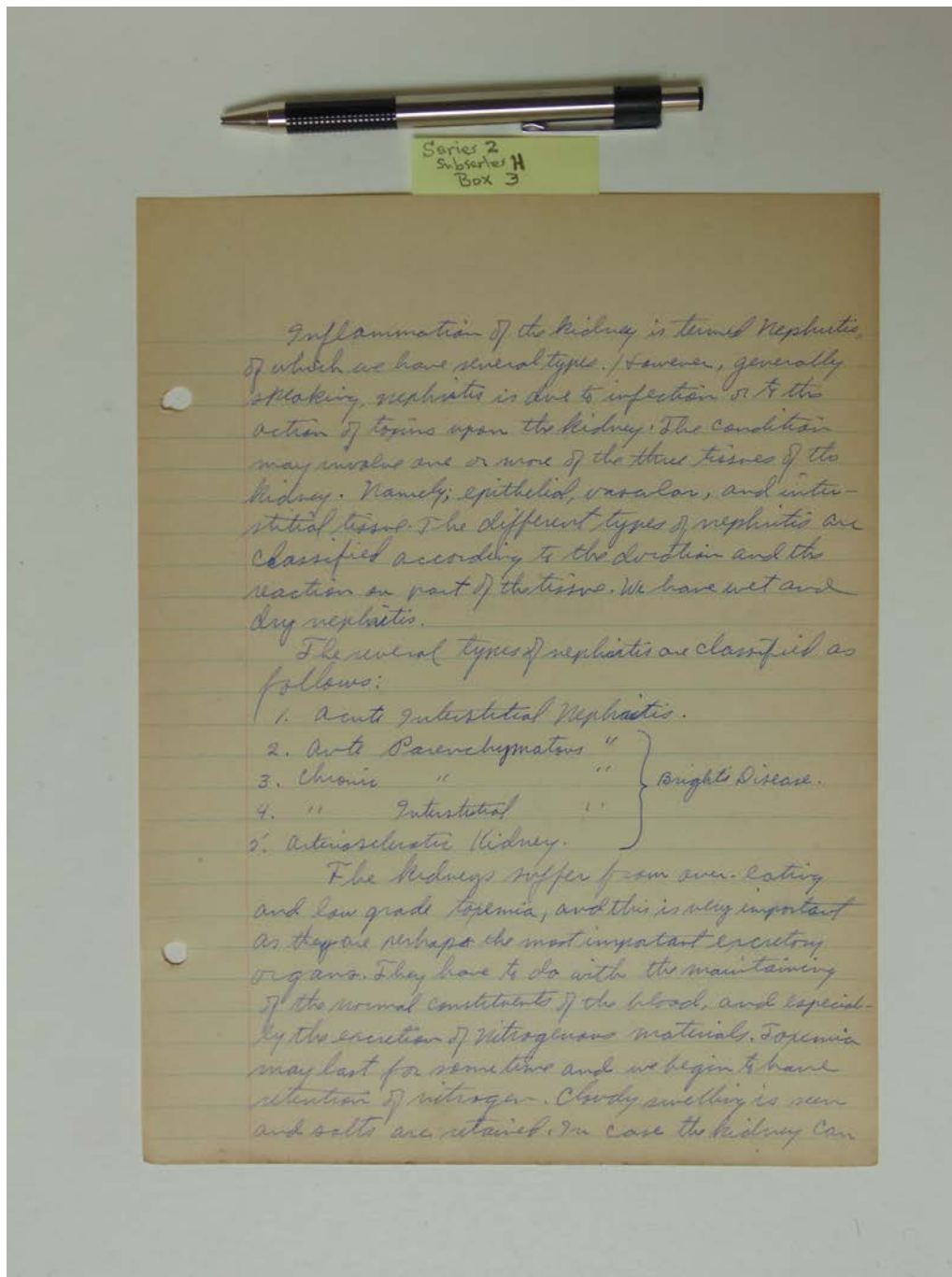
p. 1

Names:

Kidney

Types:

essay



Inflammation of the kidney is termed Nephritis, of which we have several types. However, generally speaking, nephritis is due to infection or to the action of toxins upon the kidney. The condition may involve one or more of the three tissues of the kidney. Namely, epithelial, vascular, and interstitial tissue. The different types of nephritis are classified according to the location and the reaction on part of the tissue. We have wet and dry nephritis.

The several types of nephritis are classified as follows:

1. Acute Interstitial Nephritis.
 2. Acute Parenchymatous "
 3. Chronic " "
 4. " Interstitial "
 5. Arteriosclerotic Kidney.
- } Bright's Disease.

The kidneys suffer from over-eating and low grade toxemia, and this is very important as they are perhaps the most important excretory organs. They have to do with the maintaining of the normal constituents of the blood, and especially the excretion of nitrogenous materials. Toxemia may last for some time and we begin to have retention of nitrogen. Cloudy swelling is seen and salts are retained. In case the kidney can

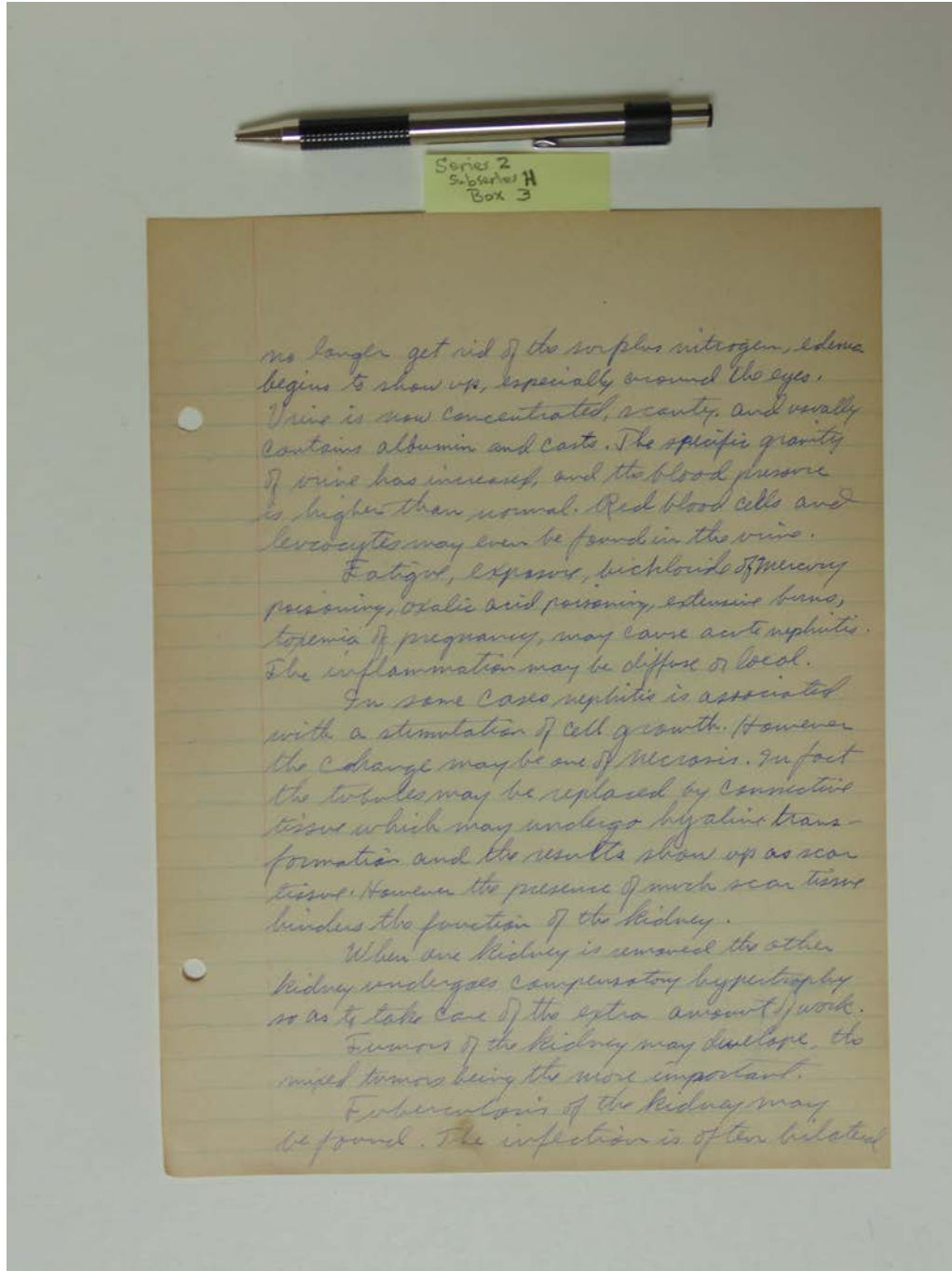
p. 2

Names:

Kidney

Types:

essay



no longer get rid of the surplus nitrogen, edema begins to show up, especially around the eyes. Urine is now concentrated, scanty, and usually contains albumin and casts. The specific gravity of urine has increased, and the blood pressure is higher than normal. Red blood cells and leucocytes may even be found in the urine.

Fatigue, exposure, bichloride of mercury poisoning, oxalic acid poisoning, extensive burns, toxemia of pregnancy, may cause acute nephritis. The inflammation may be diffuse or local.

In some cases nephritis is associated with a stimulation of cell growth. However the change may be one of necrosis. In fact the tubules may be replaced by connective tissue which may undergo hyaline transformation and the result shows up as scar tissue. However the presence of much scar tissue hinders the function of the kidney.

When one kidney is removed the other kidney undergoes compensatory hypertrophy so as to take care of the extra amount of work.

Tumors of the kidney may develop, the mixed tumors being the more important.

Tuberculosis of the kidney may be found. The infection is often bilateral.

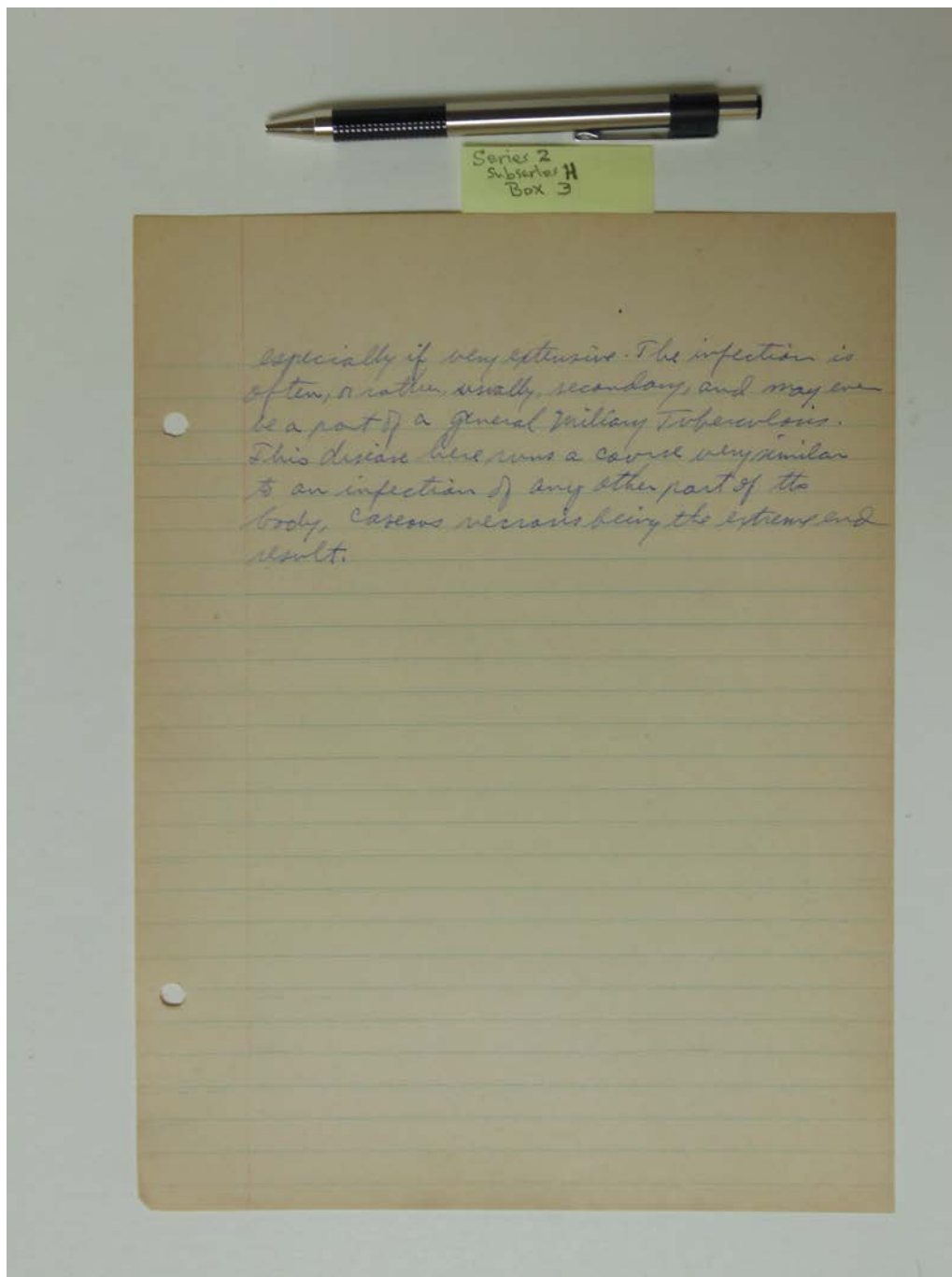
p. 3

Names:

Kidney

Types:

essay



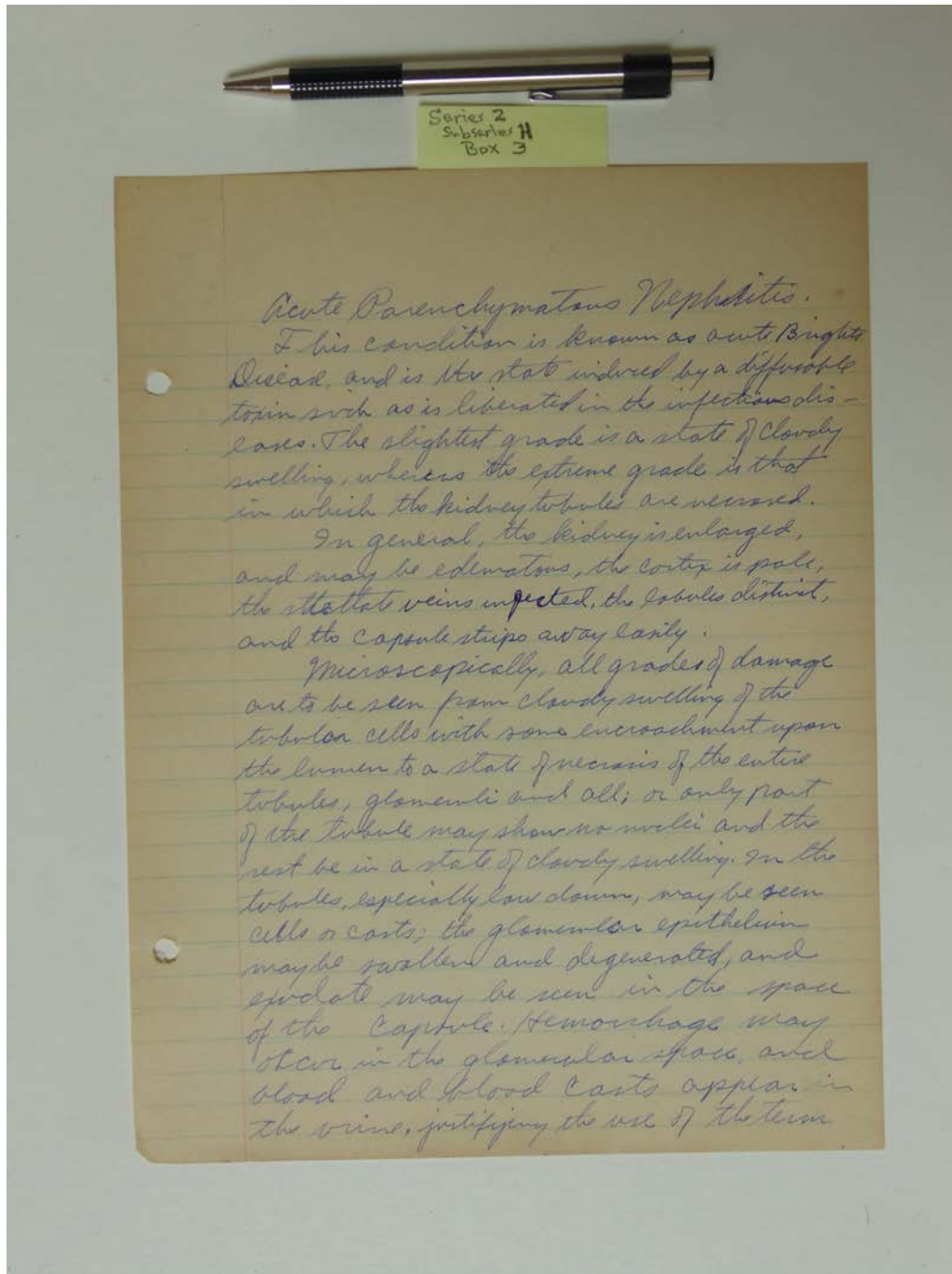
p. 4

Names:

Kidney

Types:

essay



Acute Parenchymatous Nephritis.

This condition is known as acute Bright's Disease, and is the state induced by a diffusible toxin such as is liberated in the infectious diseases. The slightest grade is a state of cloudy swelling, whereas the extreme grade is that in which the kidney tubules are necrosed.

In general, the kidney is enlarged, and may be edematous, the cortex is pale, the arterial veins injected, the lobules distinct, and the capsule strips away easily.

Microscopically, all grades of damage are to be seen from cloudy swelling of the tubular cells with some encroachment upon the lumen to a state of necrosis of the entire tubules, glomeruli and all; or only part of the tubule may show no nuclei and the rest be in a state of cloudy swelling. In the tubules, especially low down, may be seen cells or casts; the glomerular epithelium may be swollen and degenerated, and exudate may be seen in the space of the capsule. Hemorrhage may occur in the glomerular space, and blood and blood casts appear in the urine, justifying the use of the term

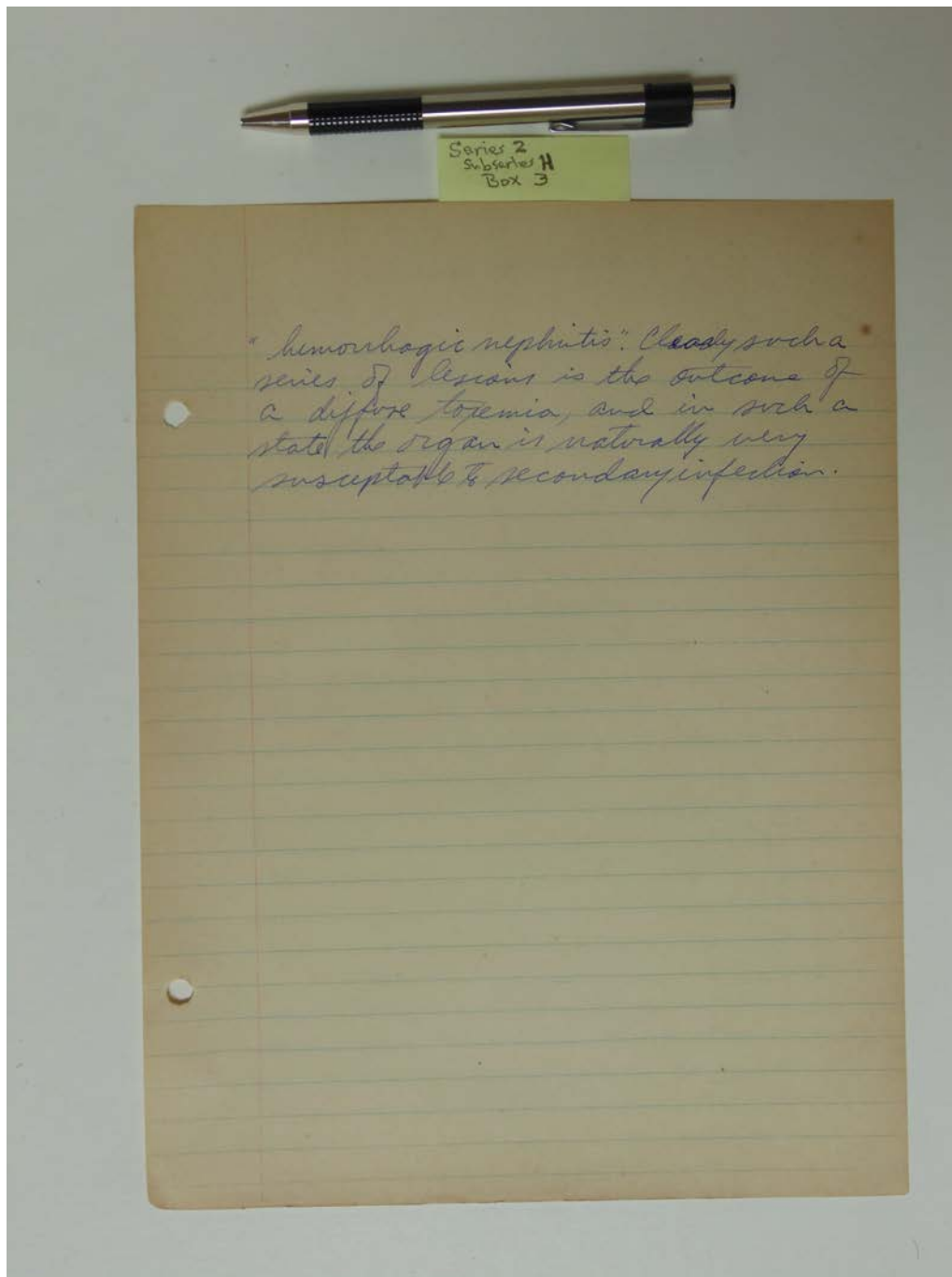
Names:

Acute
Parenchymatous

Nephritis

Types:

essay



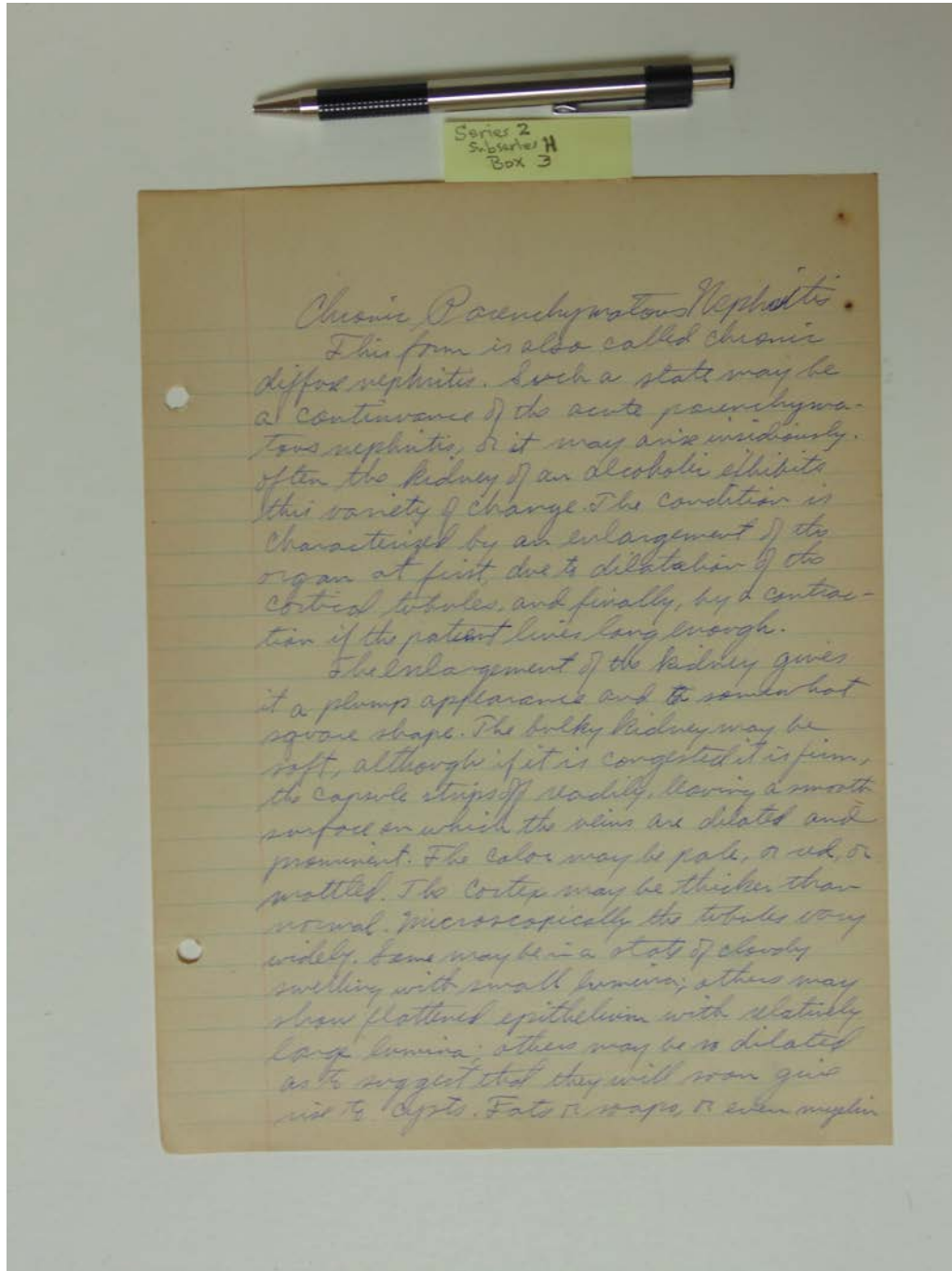
Names:

Acute
Parenchymatous

Nephritis

Types:

essay



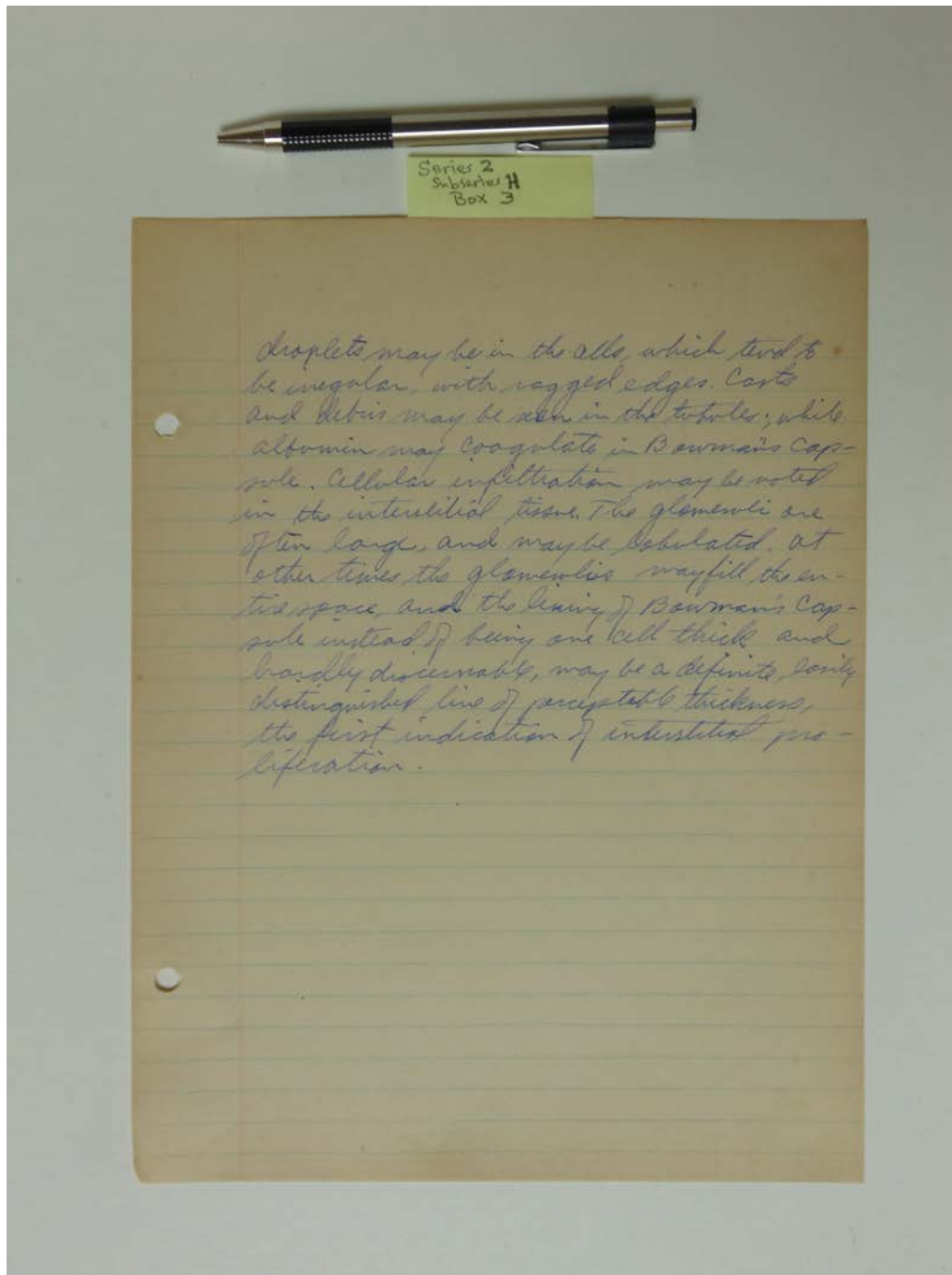
Names:

Chronic
Parenchymatous

Nephritis

Types:

essay



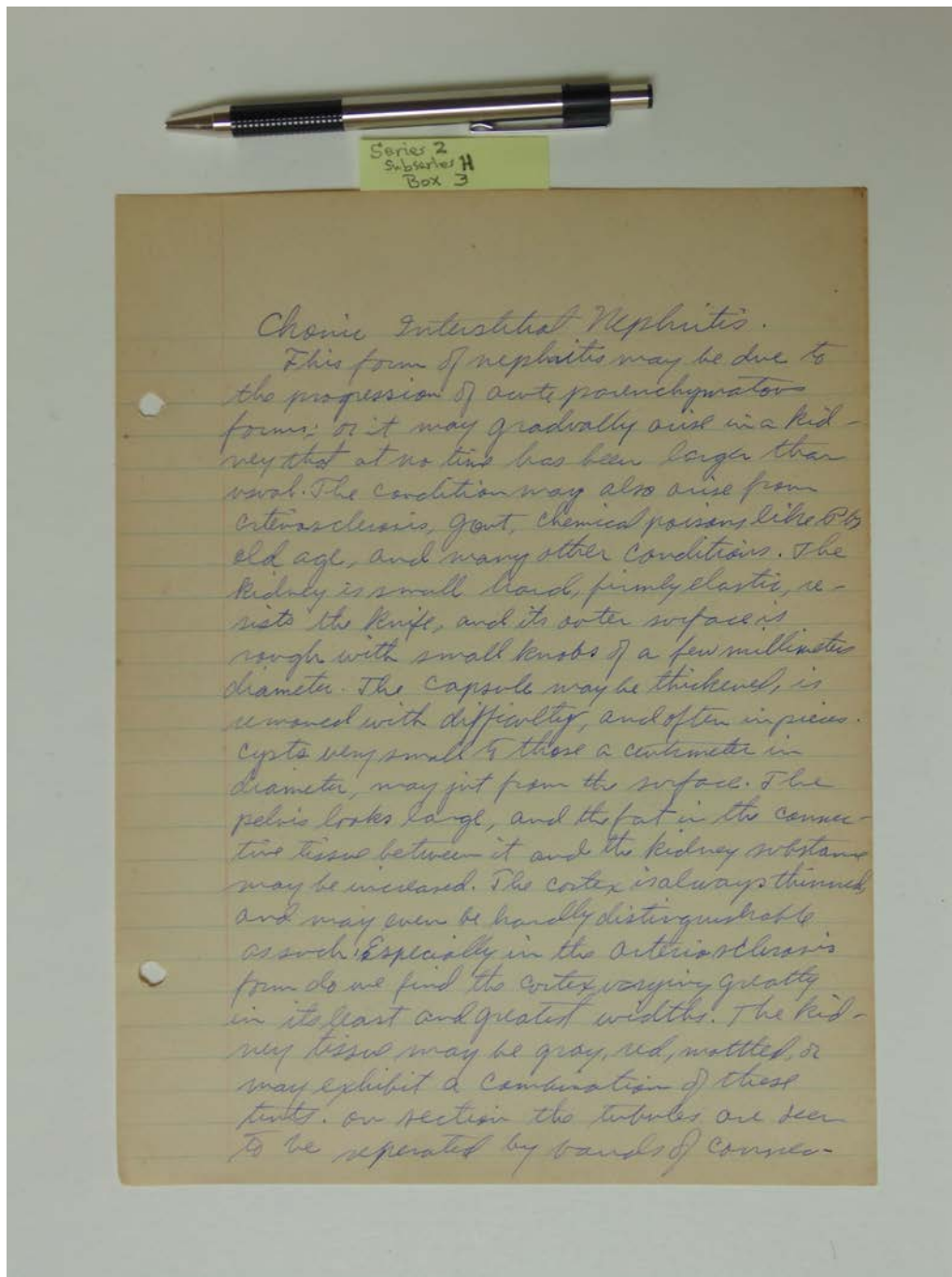
Names:

Chronic
Parenchymatous

Nephritis

Types:

essay



Chronic Interstitial Nephritis.

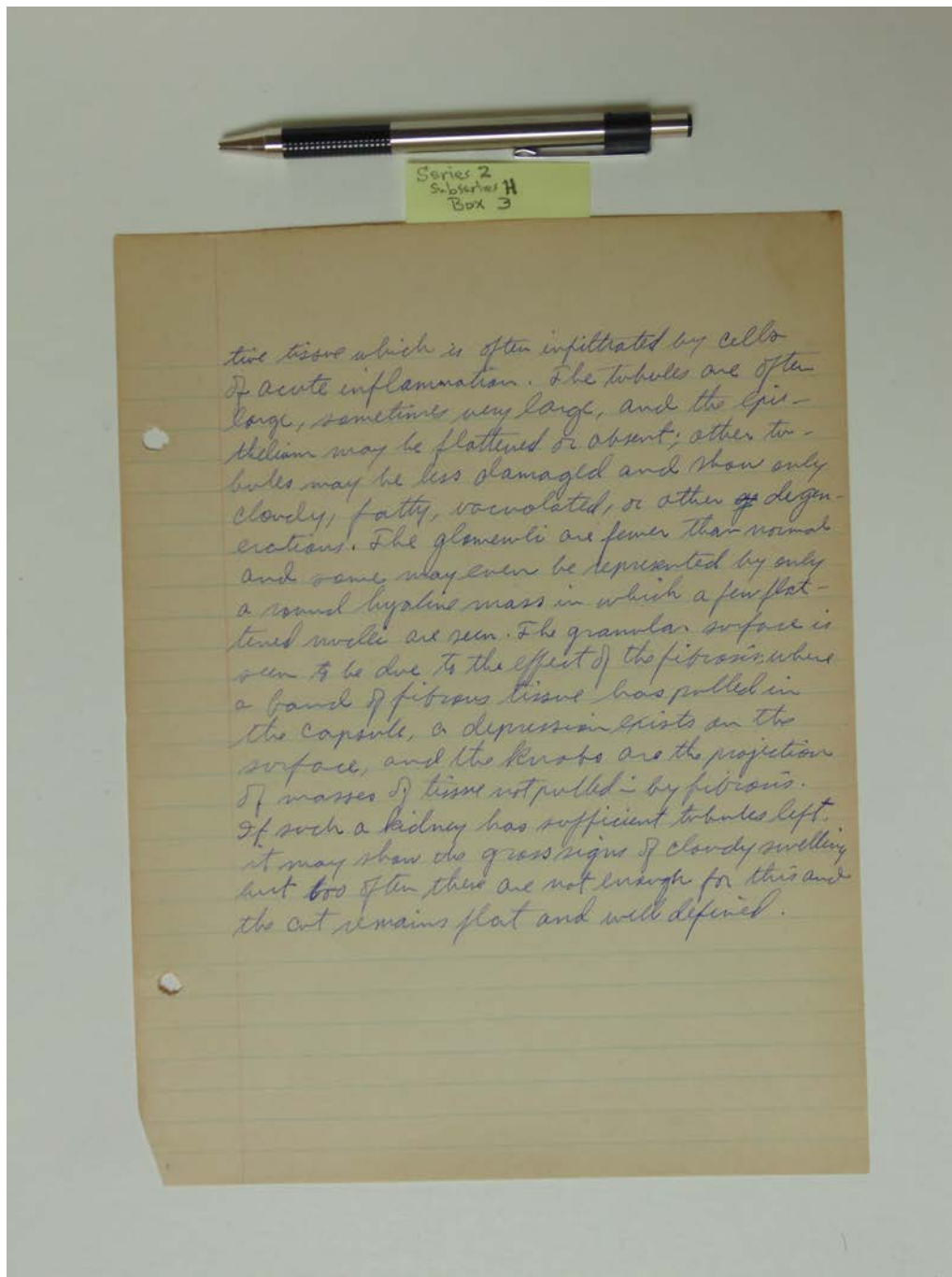
This form of nephritis may be due to the progression of acute parenchymatous forms; or it may gradually arise in a kidney that at no time has been larger than usual. The condition may also arise from arteriosclerosis, gout, chemical poisons, like Pb, old age, and many other conditions. The kidney is small, hard, firmly elastic, resists the knife, and its outer surface is rough with small knobs of a few millimeter diameter. The capsule may be thickened, is removed with difficulty, and often in pieces. Cysts very small to those a centimeter in diameter, may jut from the surface. The pelvis looks large, and the fat in the connective tissue between it and the kidney substance may be increased. The cortex is always thinned and may even be hardly distinguishable as such. Especially in the arteriosclerotic form do we find the cortex varying greatly in its least and greatest widths. The kidney tissue may be gray, red, mottled, or may exhibit a combination of these tints. On section the tubules are seen to be separated by bands of connective

Names:

Chronic Interstitial
Nephritis

Types:

essay

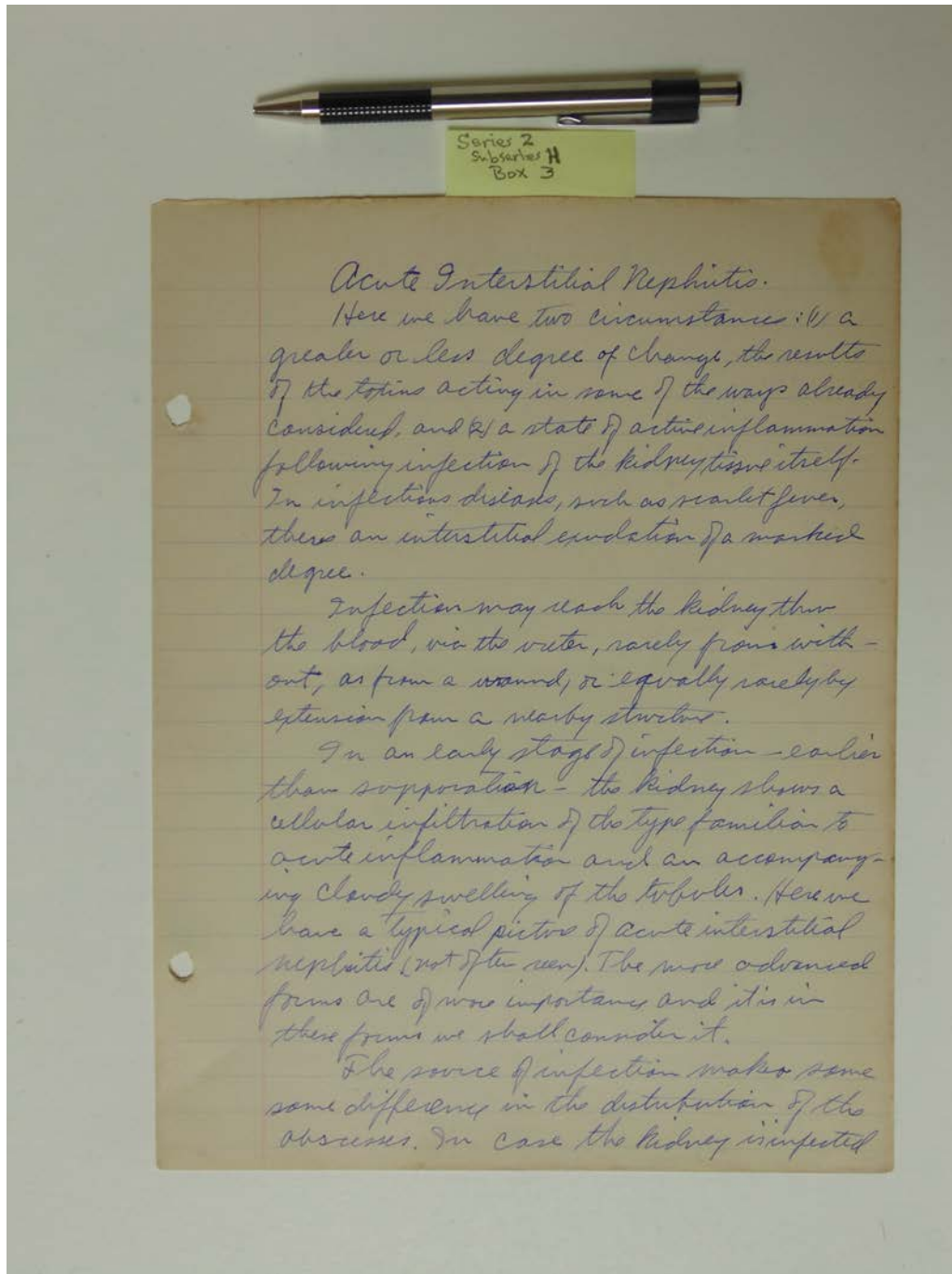


Names:

Chronic Interstitial
Nephritis

Types:

essay



Acute Interstitial Nephritis.

Here we have two circumstances: (1) a greater or less degree of change, the results of the toxins acting in some of the ways already considered, and (2) a state of active inflammation following infection of the kidney tissue itself. In infectious diseases, such as scarlet fever, there is an interstitial exudation of a marked degree.

Infection may reach the kidney thru the blood, via the urine, rarely from without, as from a wound, or equally rarely by extension from a nearby structure.

In an early stage of infection - earlier than suppuration - the kidney shows a cellular infiltration of the type familiar to acute inflammation and an accompanying cloudy swelling of the tubules. Here we have a typical picture of acute interstitial nephritis (not of the renal). The more advanced forms are of more importance and it is in these forms we shall consider it.

The source of infection makes some difference in the distribution of the abscesses. In case the kidney is infected

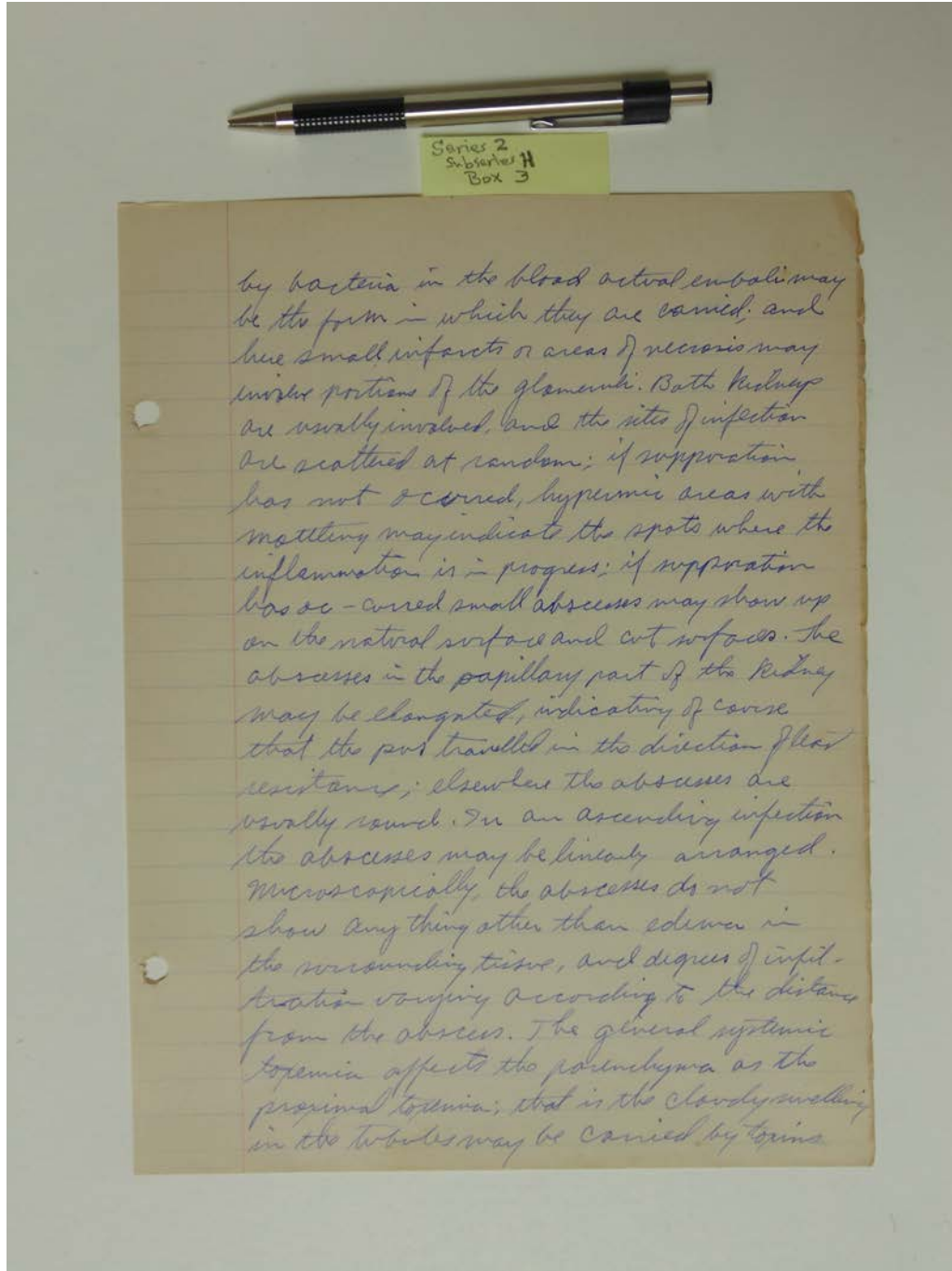
p. 1

Names:

Acute Interstitial
Nephritis

Types:

essay



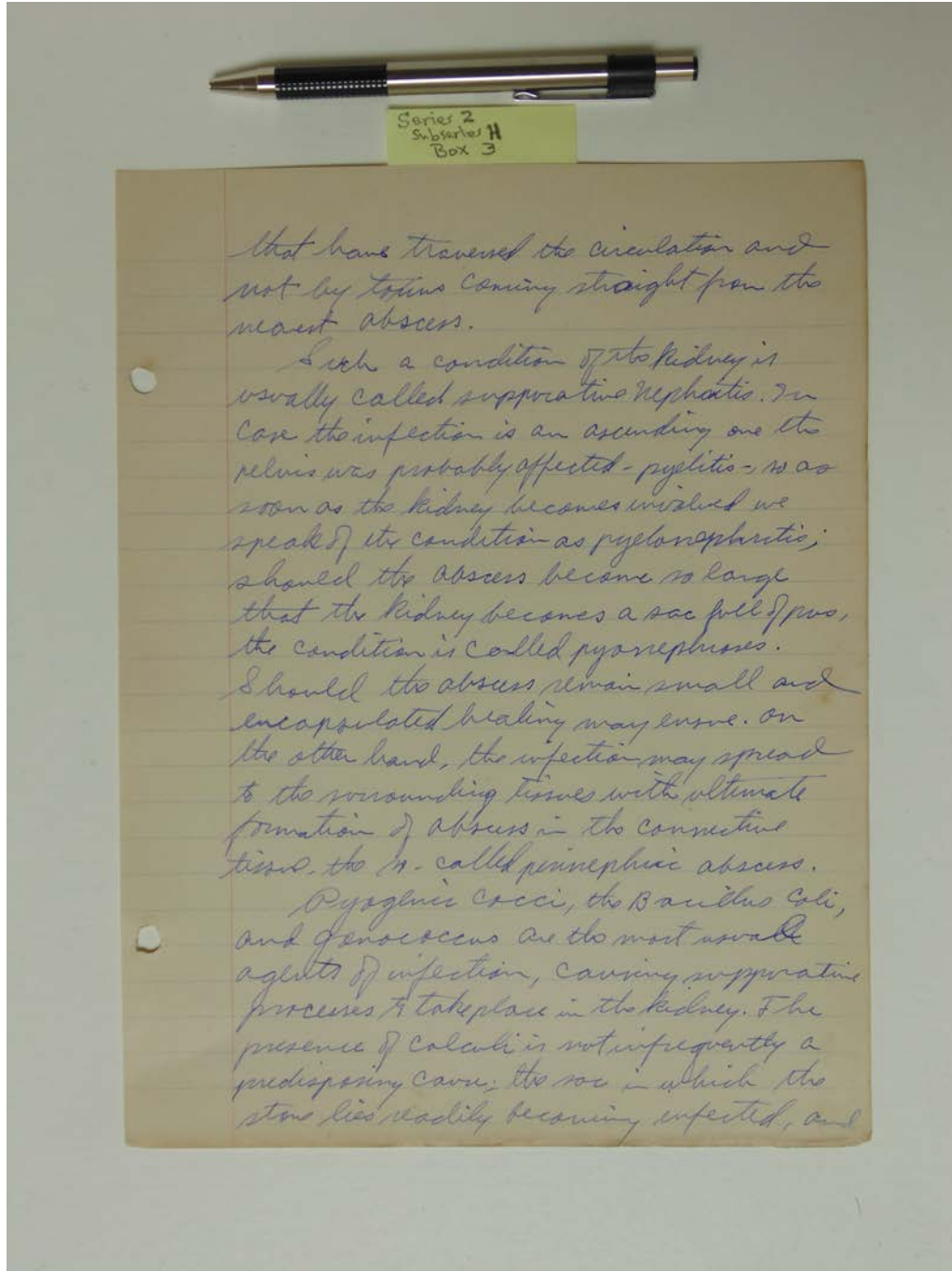
p. 2

Names:

Acute Interstitial
Nephritis

Types:

essay



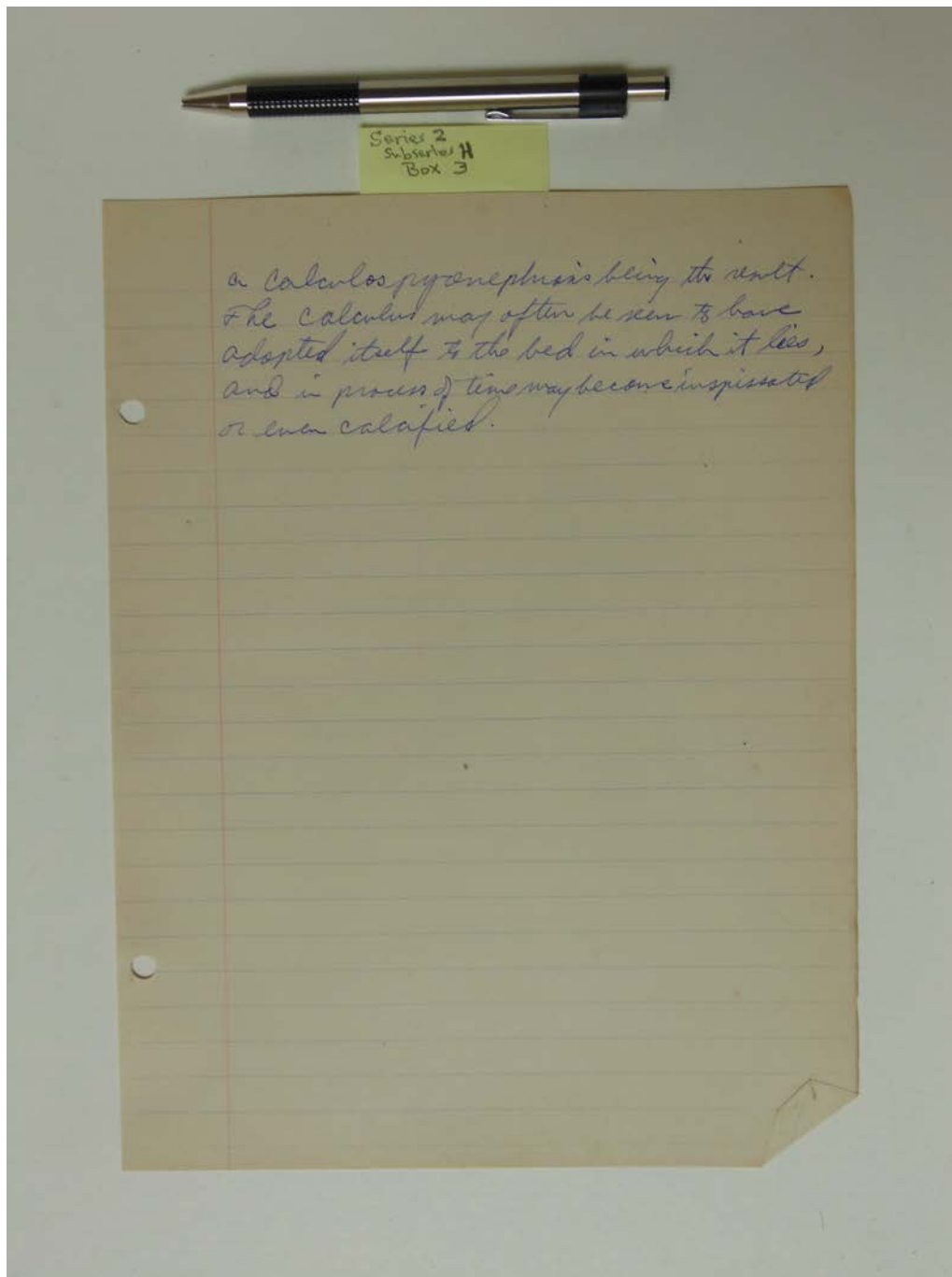
p. 3

Names:

Acute Interstitial
Nephritis

Types:

essay



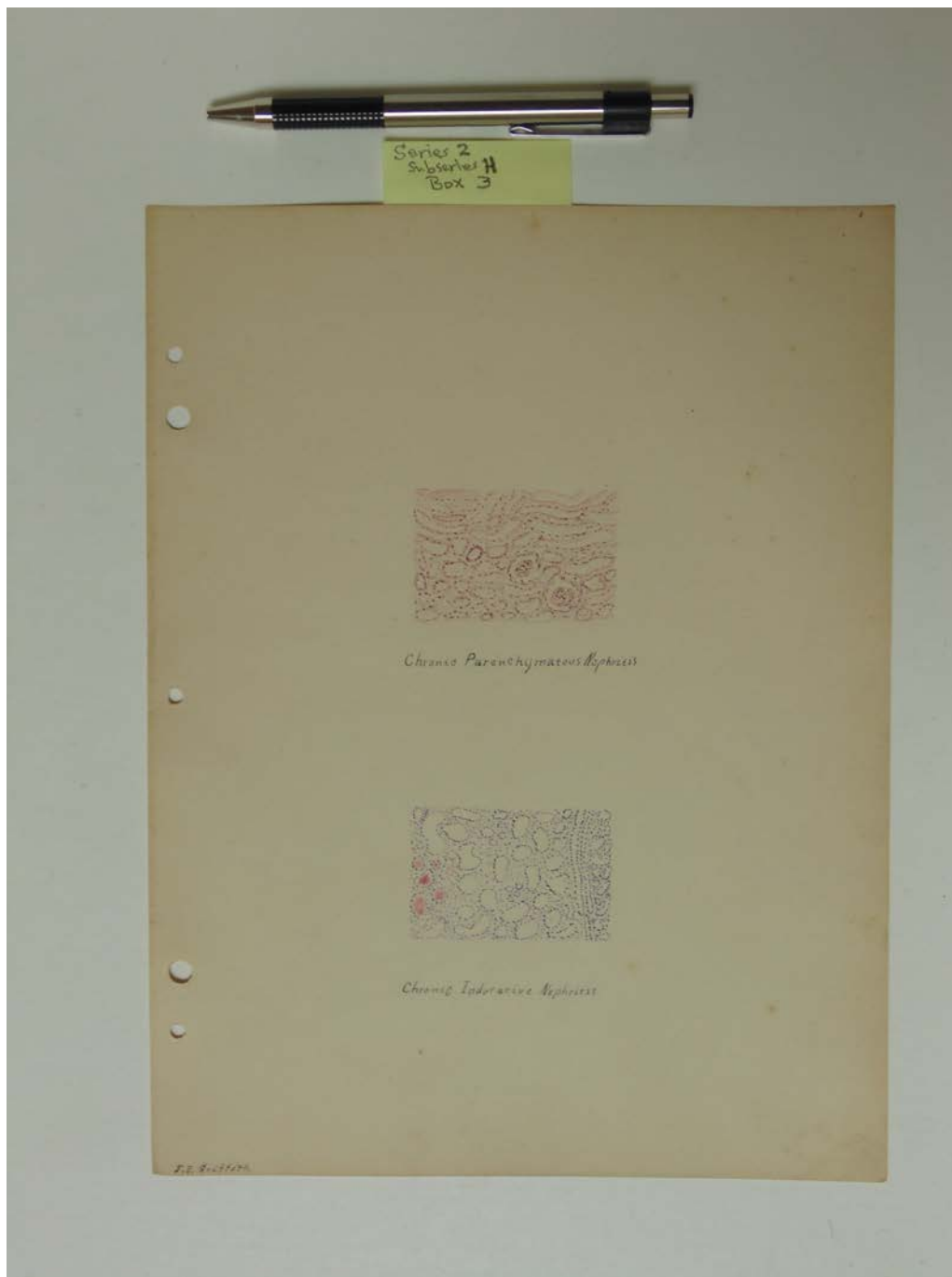
p. 4

Names:

Acute Interstitial
Nephritis

Types:

essay



Names:

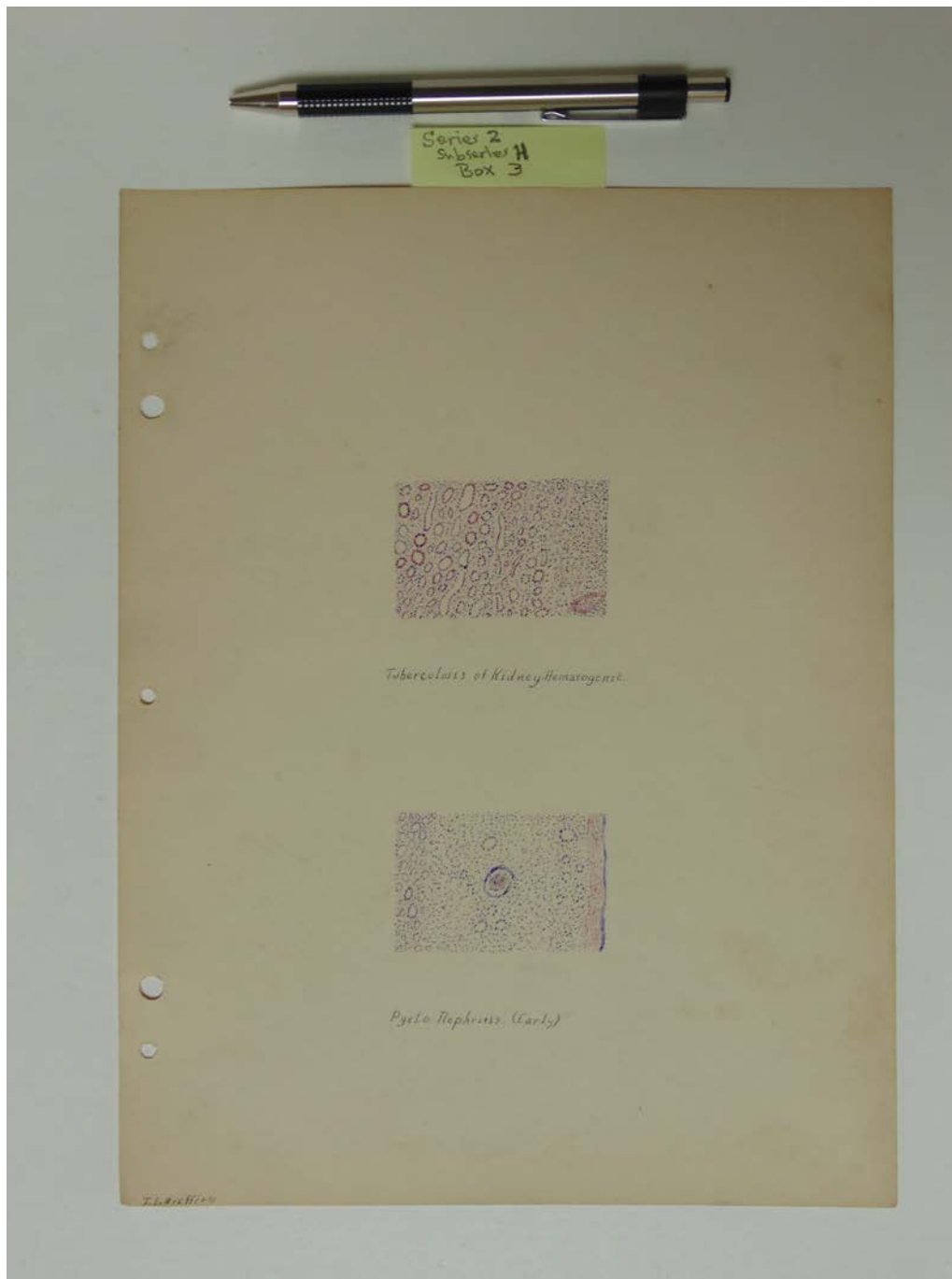
Chronic Indurative
Nephritis

Chronic
Parenchymatous

Nephritis

Types:

drawing



Names:

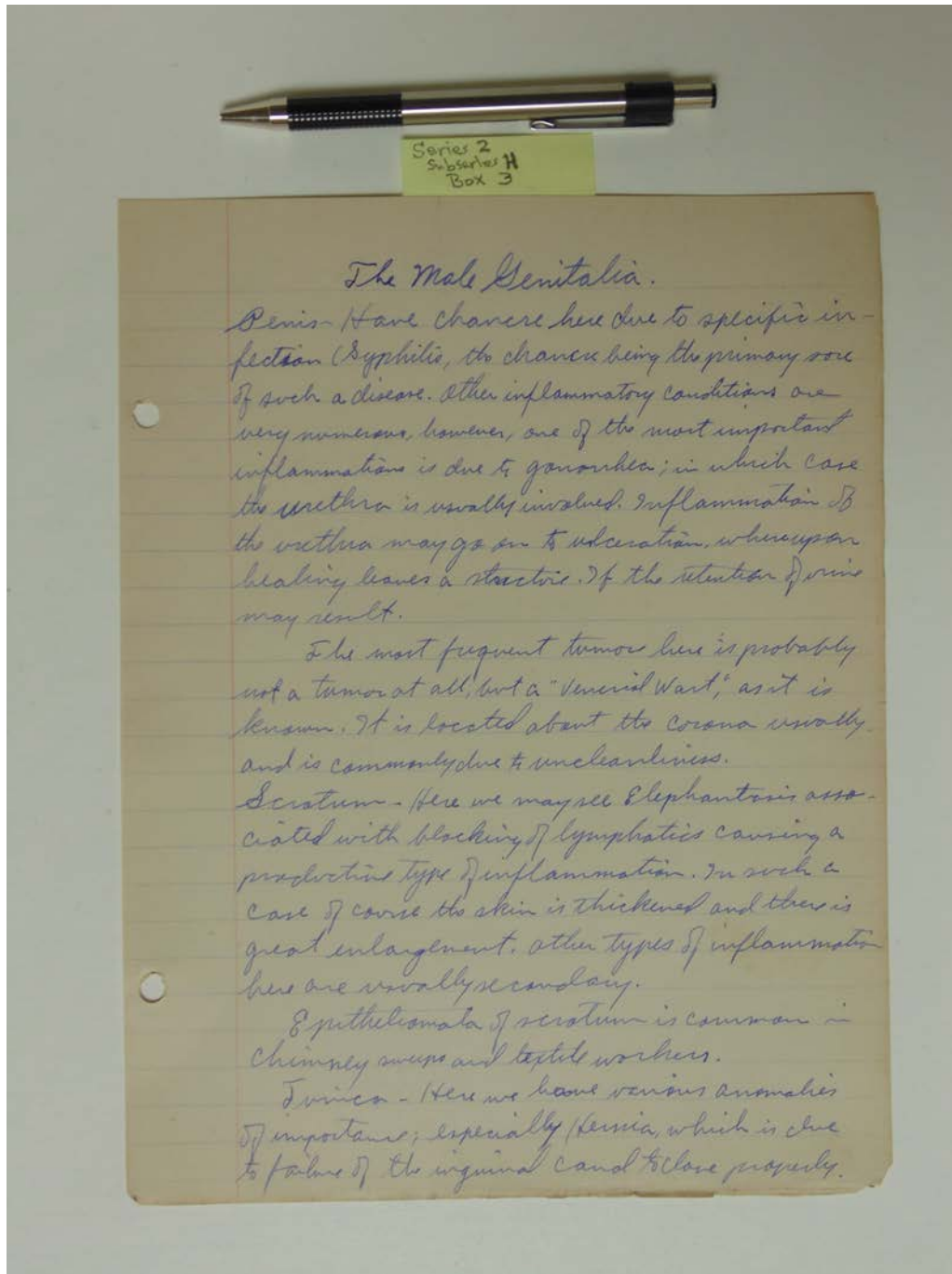
Pyelo Nephritis.
(Early)

Tuberculosis of
Kidney.

Hematogenic

Types:

drawing



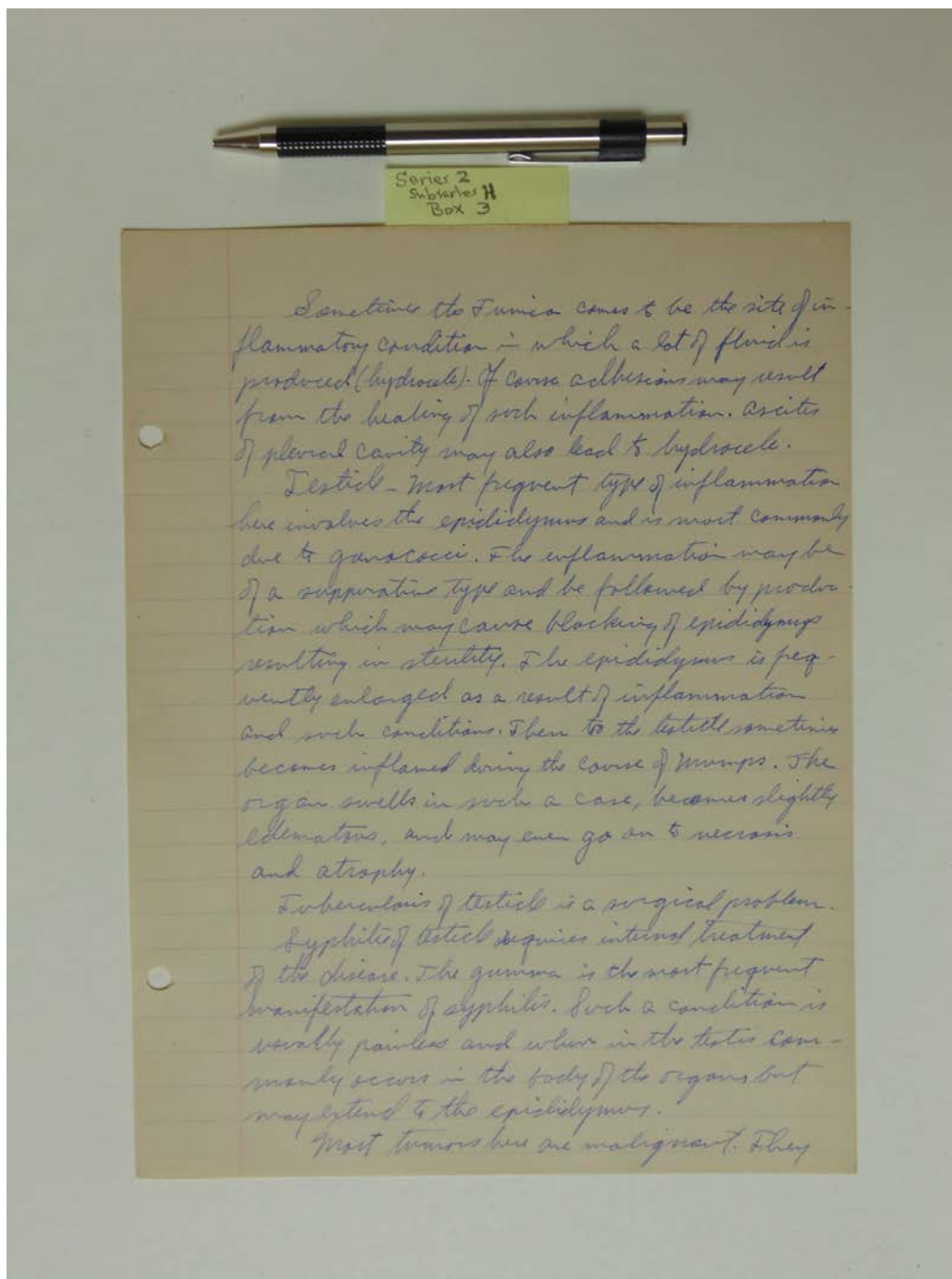
p. 1

Names:

Male Genitalia

Types:

essay



Sometimes the Tunica comes to be the site of inflammatory condition in which a lot of fluid is produced (hydrocele). Of course adhesions may result from the healing of such inflammation. Ascites of pleural cavity may also lead to hydrocele.

Testicul - Most frequent type of inflammation here involves the epididymis and is most commonly due to gonococci. The inflammation may be of a suppurative type and be followed by production which may cause blocking of epididymis resulting in sterility. The epididymis is frequently enlarged as a result of inflammation and such conditions. Then to the testis, sometimes becomes inflamed during the course of mumps. The organ swells in such a case, becomes slightly edematous, and may even go on to necrosis and atrophy.

Tuberculosis of testis is a surgical problem. Syphilitic of testis requires internal treatment of the disease. The gumma is the most frequent manifestation of syphilis. Such a condition is usually painless and when in the testes commonly occurs in the body of the organ, but may extend to the epididymis.

Most tumors here are malignant. They

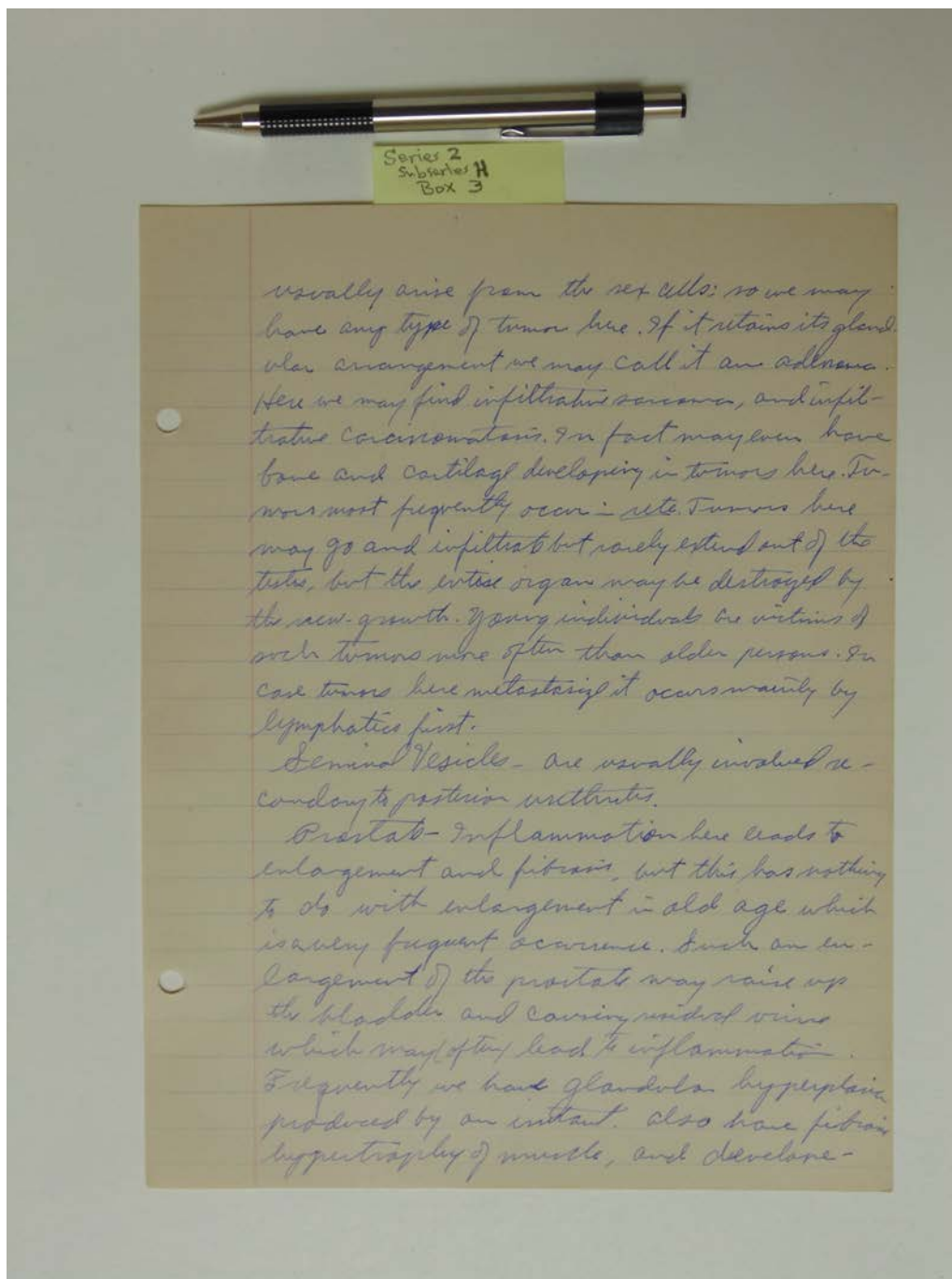
p. 2

Names:

Male Genitalia

Types:

essay



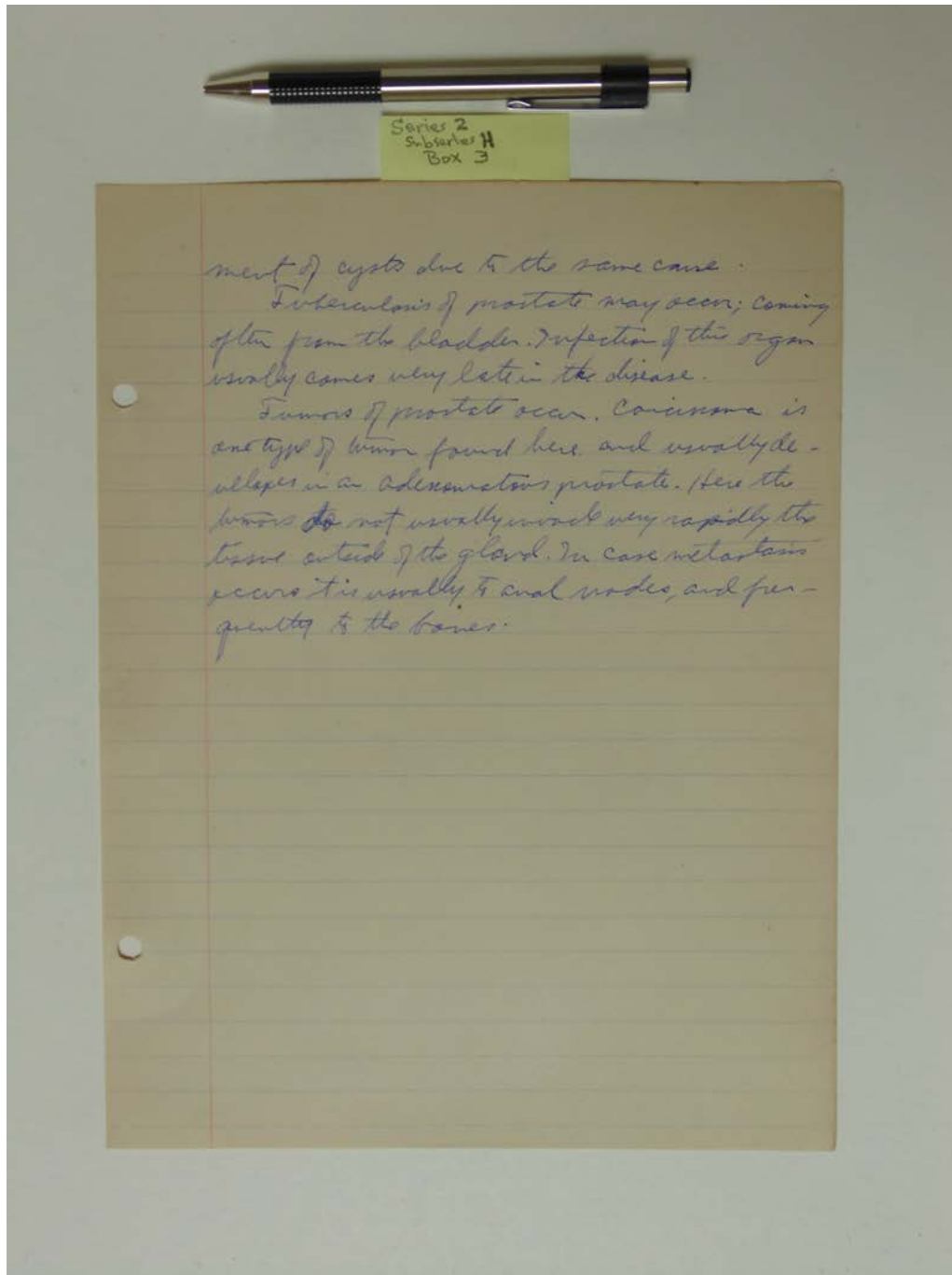
p. 3

Names:

Male Genitalia

Types:

essay



ment of cysts due to the same cause.

Tuberculosis of prostate may occur; coming often from the bladder. Infection of this organ usually comes very late in the disease.

Tumors of prostate occur. Carcinoma is one type of tumor found here and usually develops in an adenomatous prostate. Here the tumors do not usually invade very rapidly the tissue outside of the gland. In case metastasis occurs it is usually to anal nodes, and frequently to the bones.

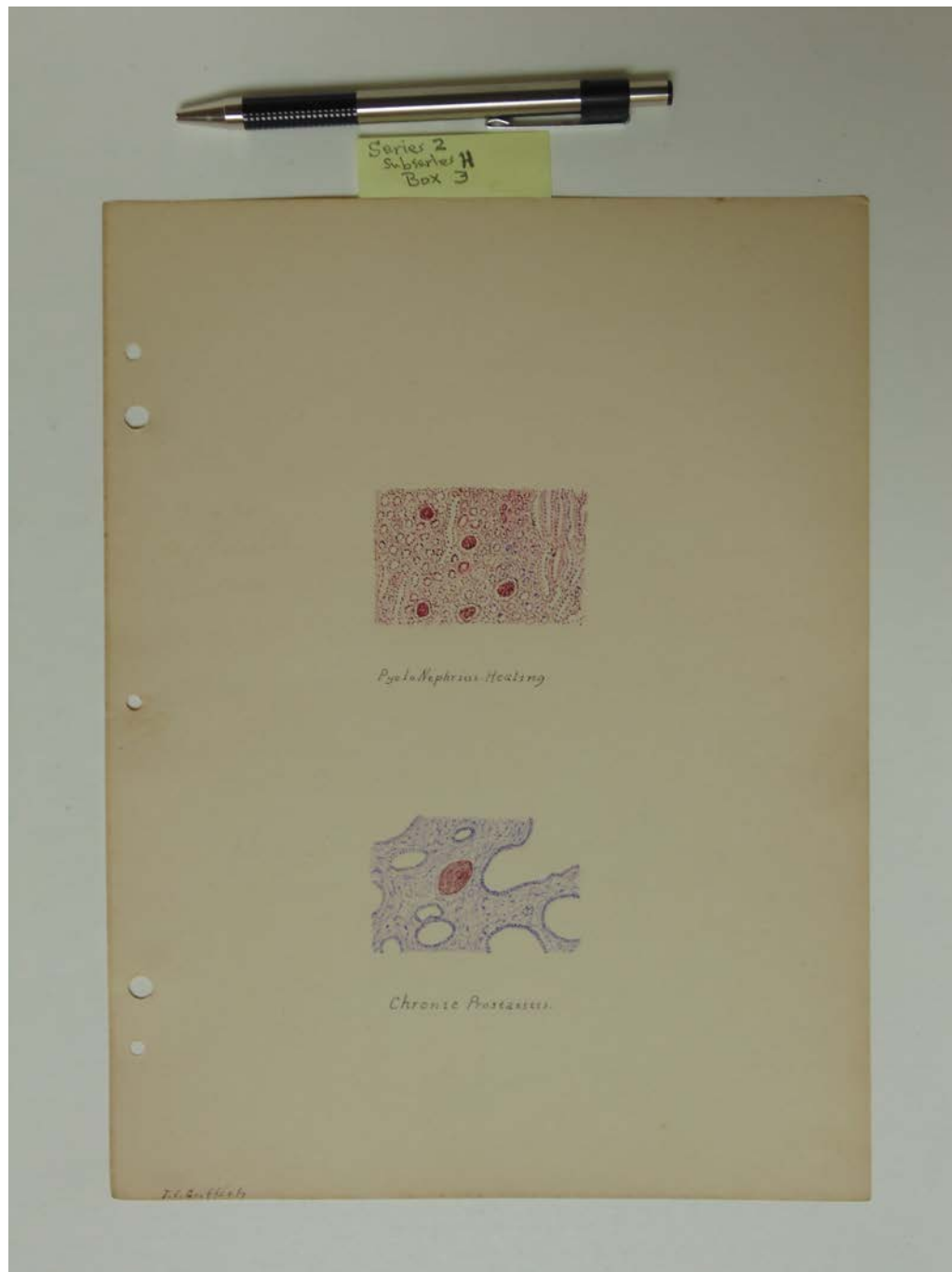
p. 4

Names:

Male Genitalia

Types:

essay



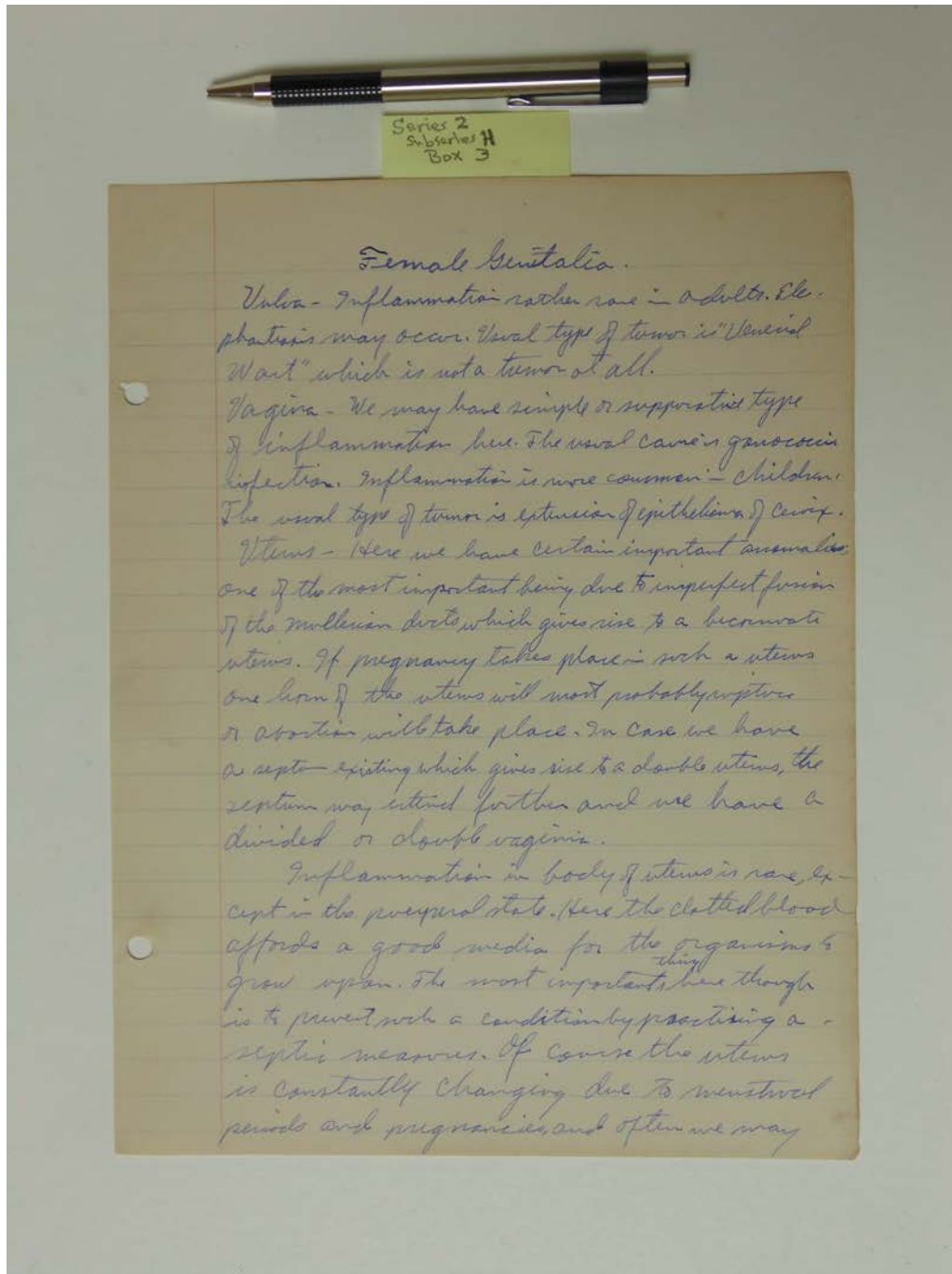
Names:

Chronic Prostatitis

Pyelo Nephritis.
Healing

Types:

drawing



Female Genitalia.

Uterus - Inflammation rather rare in adults. Ectopic pregnancies may occur. Usual type of tumor is "Vascular Wart" which is not a tumor at all.

Vagina - We may have simple or suppurative type of inflammation here. The usual cause is gonococcal infection. Inflammation is more common in children. The usual type of tumor is extension of epithelium of cervix.

Uterus - Here we have certain important anomalies one of the most important being due to imperfect fusion of the Mullerian ducts which gives rise to a bicornuate uterus. If pregnancy takes place in such a uterus one horn of the uterus will most probably rupture or abortion will take place. In case we have a septum existing which gives rise to a double uterus, the septum may extend further and we have a divided or double vagina.

Inflammation in body of uterus is rare, except in the puerperal state. Here the clotted blood affords a good media for the organisms to grow upon. The most important ^{thing} here though is to prevent such a condition by practicing aseptics measures. Of course the uterus is constantly changing due to menstrual periods and pregnancies, and often we may

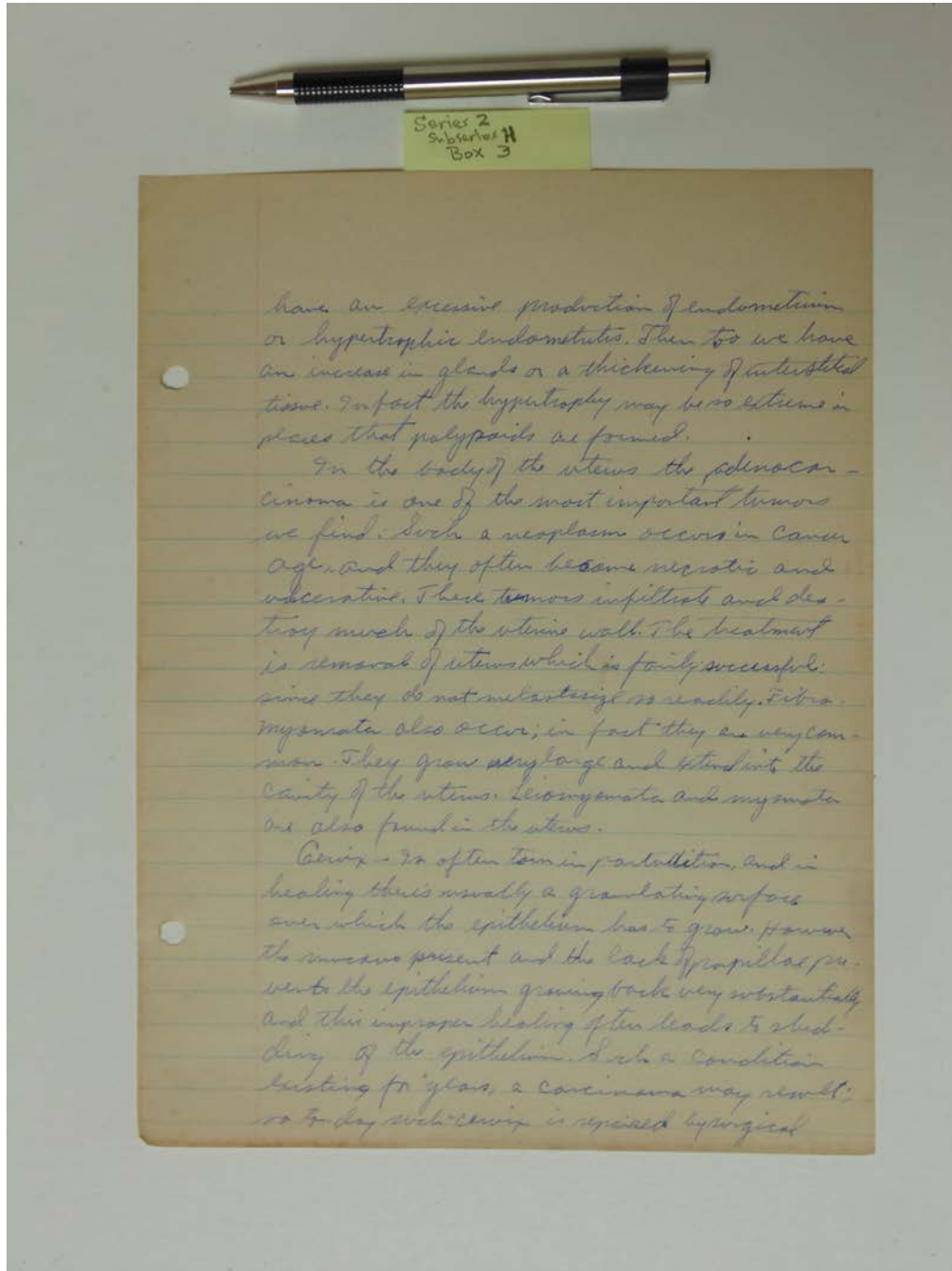
p. 1

Names:

Female Genitalia

Types:

essay



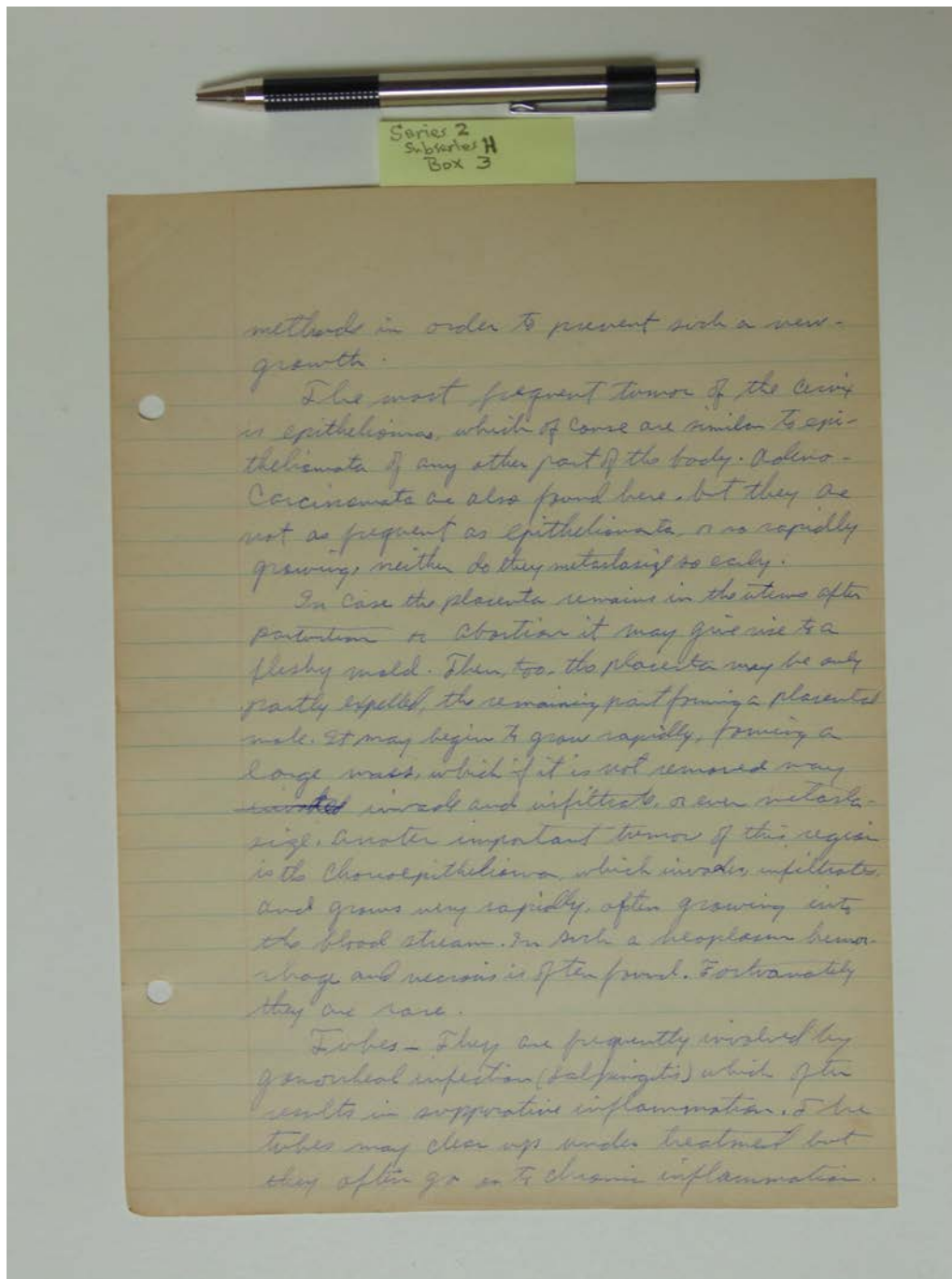
p. 2

Names:

Female Genitalia

Types:

essay



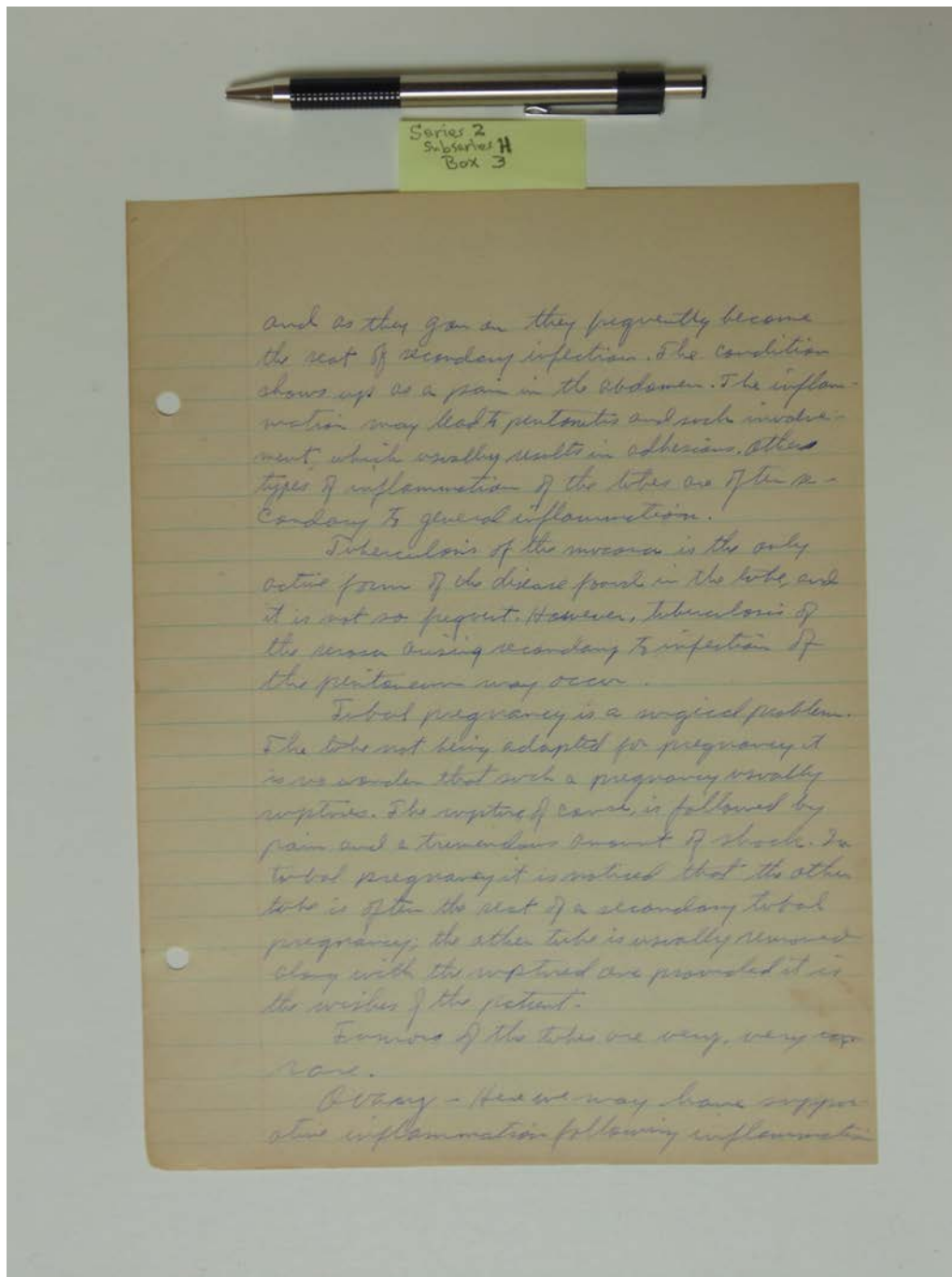
p. 3

Names:

Female Genitalia

Types:

essay



and as they go on they frequently become the seat of secondary infection. The condition shows up as a pain in the abdomen. The inflammation may lead to peritonitis and such involvement, which usually results in adhesions. Other types of inflammation of the tubes are often secondary to general inflammation.

Tuberculosis of the mucosa is the only other form of the disease found in the tube, and it is not so frequent. However, tuberculosis of the cervix arising secondary to infection of the peritoneum may occur.

Tubal pregnancy is a surgical problem. The tube not being adapted for pregnancy it is no wonder that such a pregnancy usually ruptures. The rupture of course, is followed by pain and a tremendous amount of shock. In tubal pregnancy it is noticed that the other tube is often the seat of a secondary tubal pregnancy; the other tube is usually removed along with the ruptured one provided it is the wishes of the patient.

Functors of the tubes are very, very rare.

Ovary - Here we may have suppurative inflammation following inflammation

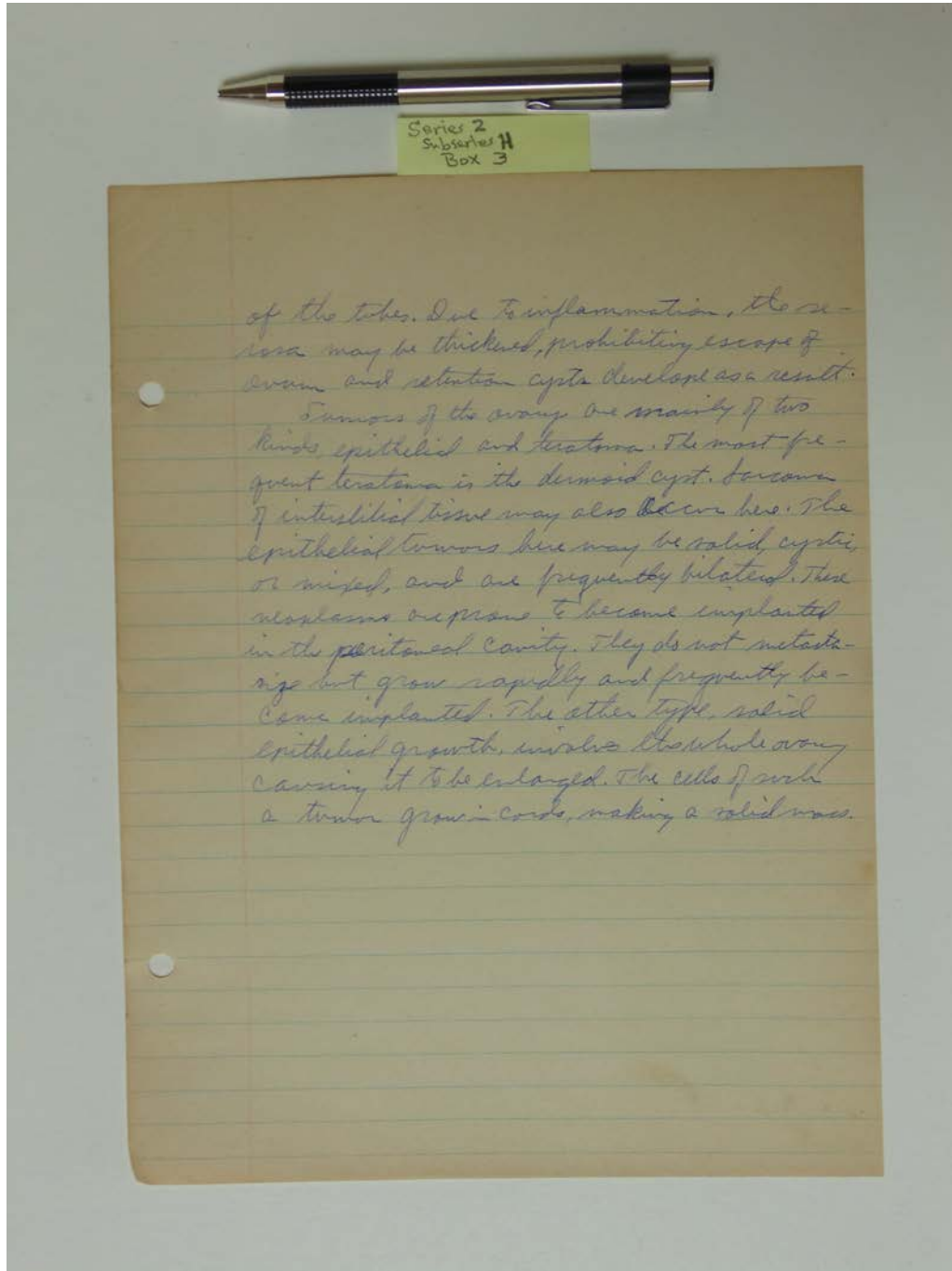
p. 4

Names:

Female Genitalia

Types:

essay



p. 5

Names:

Female Genitalia

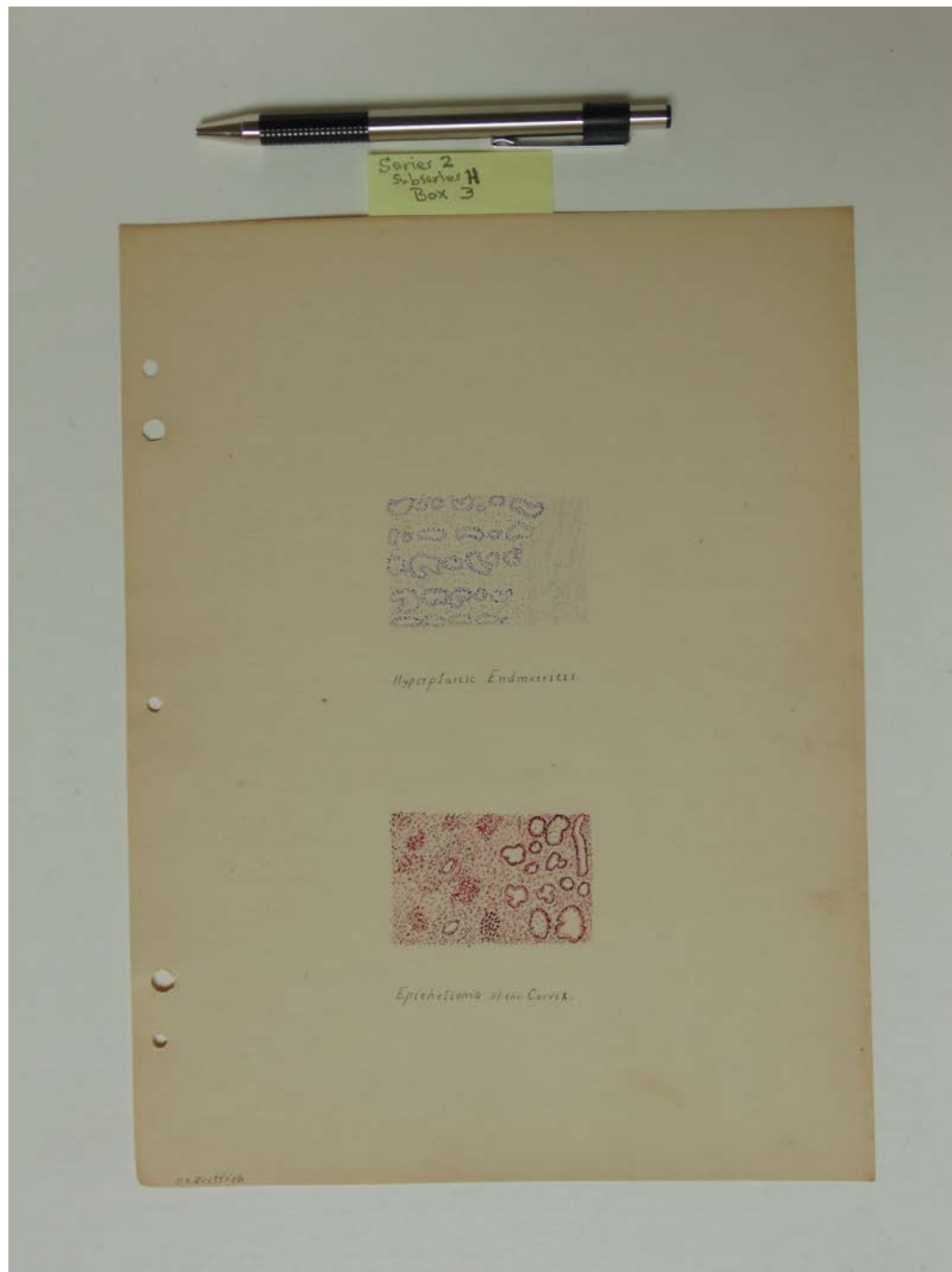
Types:

essay

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Names:

Epithelioma of the
Cervix

Hyperplastic
Endometritis

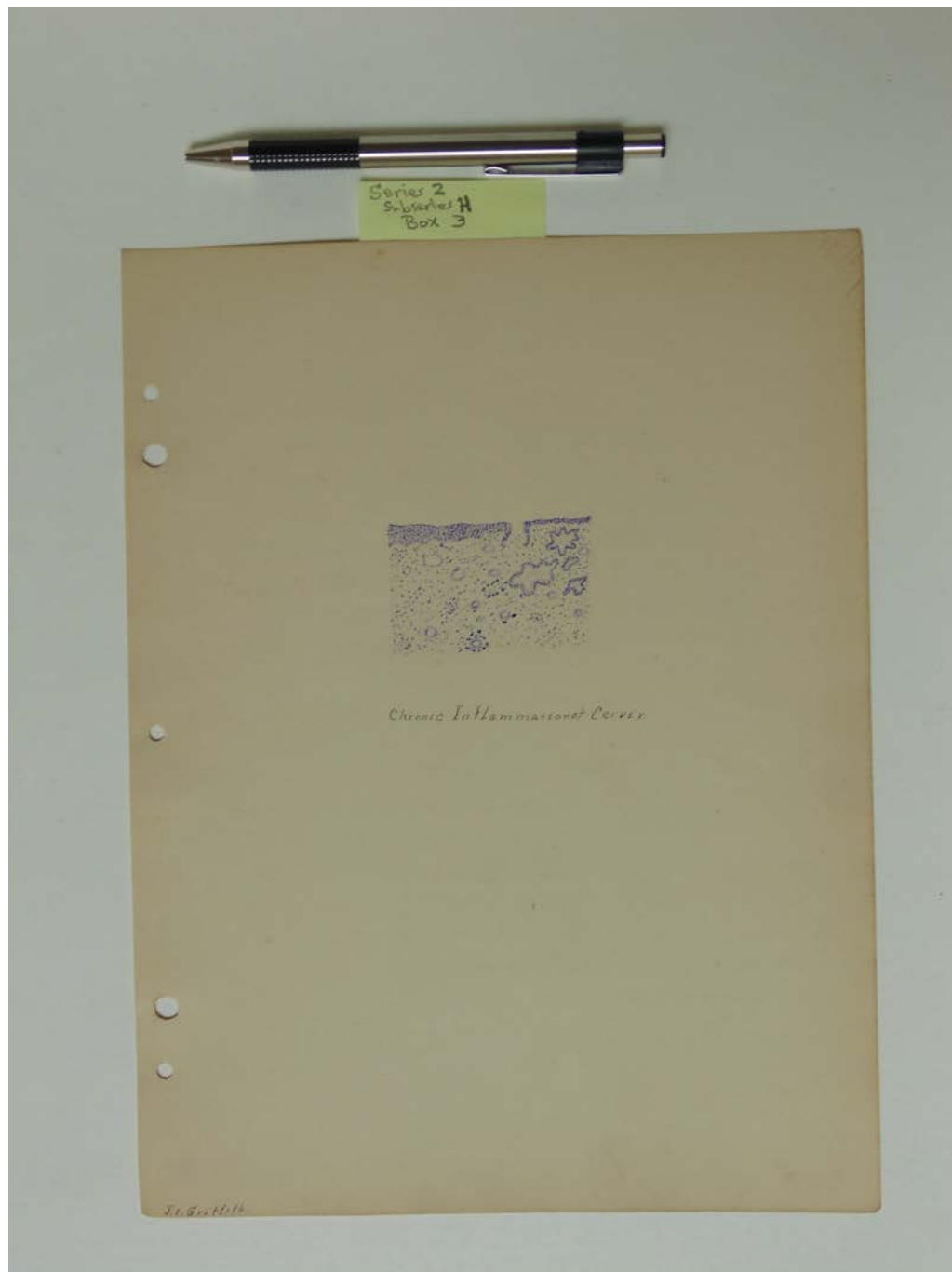
Types:

drawing

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J.E. Griffith Pathology Notes, circa 1928

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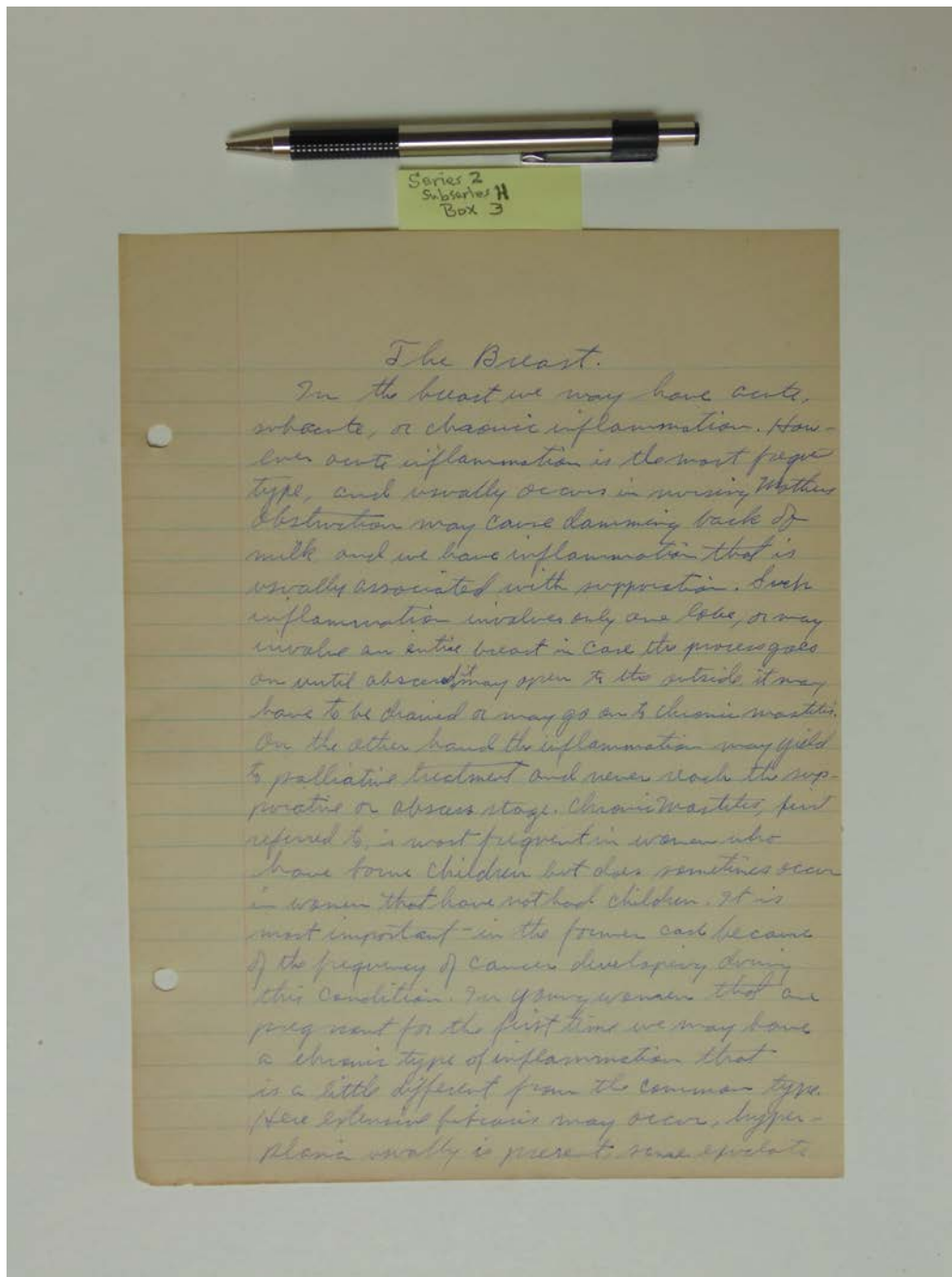


Names:

Chronic Cervix
Inflammation of

Types:

drawing



The Breast.

In the breast we may have acute, subacute, or chronic inflammation. However acute inflammation is the most frequent type, and usually occurs in nursing mothers. Obstruction may cause damming back of milk and we have inflammation that is usually associated with suppuration. Such inflammation involves only one lobe, or may involve an entire breast in case the process goes on until abscess may open to the outside, it may have to be drained or may go on to chronic mastitis. On the other hand the inflammation may yield to palliative treatment and never reach the suppurative or abscess stage. Chronic mastitis, first referred to, is most frequent in women who have borne children but does sometimes occur in women that have not had children. It is most important in the former case because of the frequency of cancer developing during this condition. In young women that are pregnant for the first time we may have a chronic type of inflammation that is a little different from the common type. Here extensive fibrosis may occur, lymphoplasmic usually is present, some epithelioid

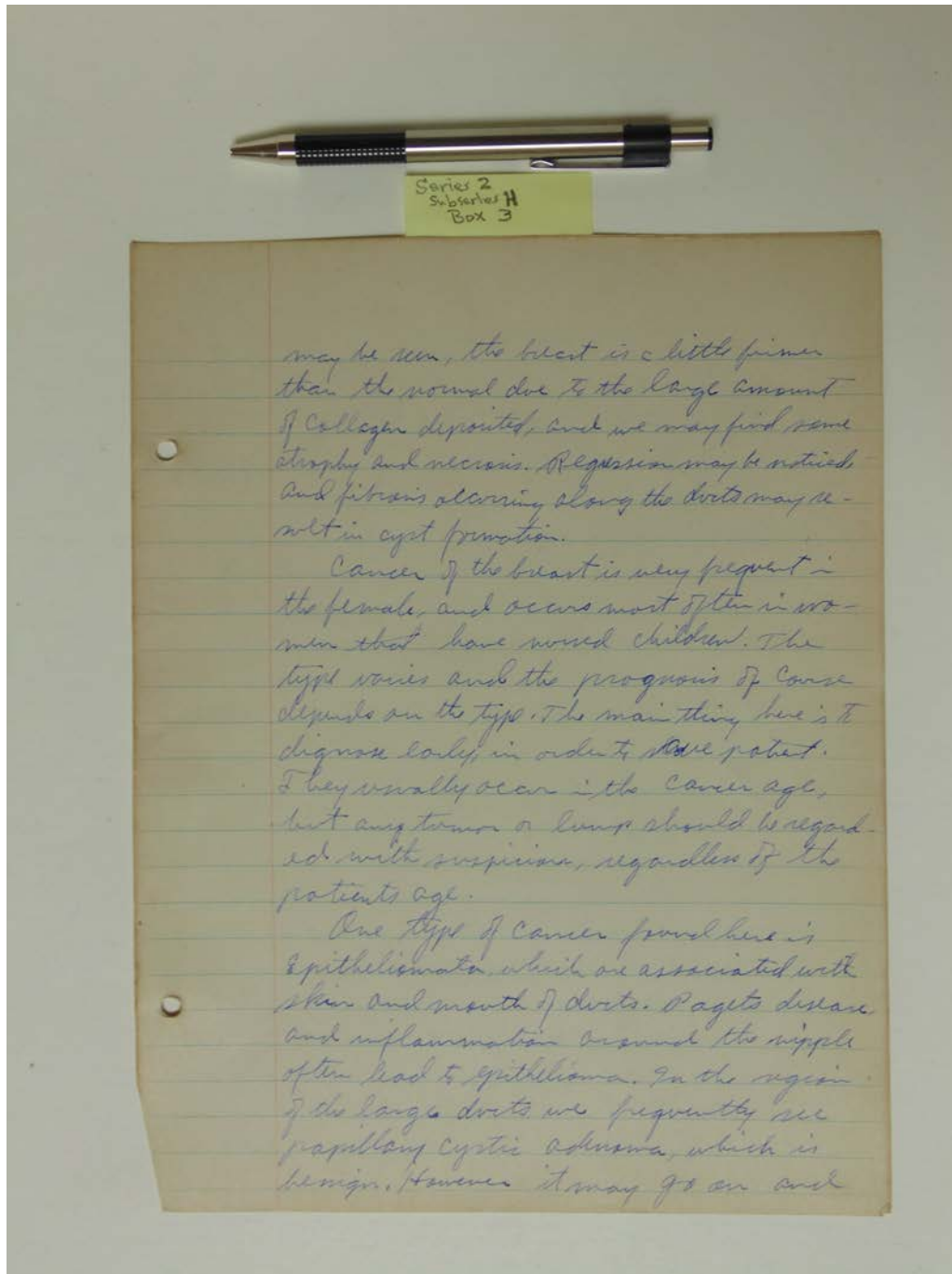
p. 1

Names:

Breast

Types:

essay



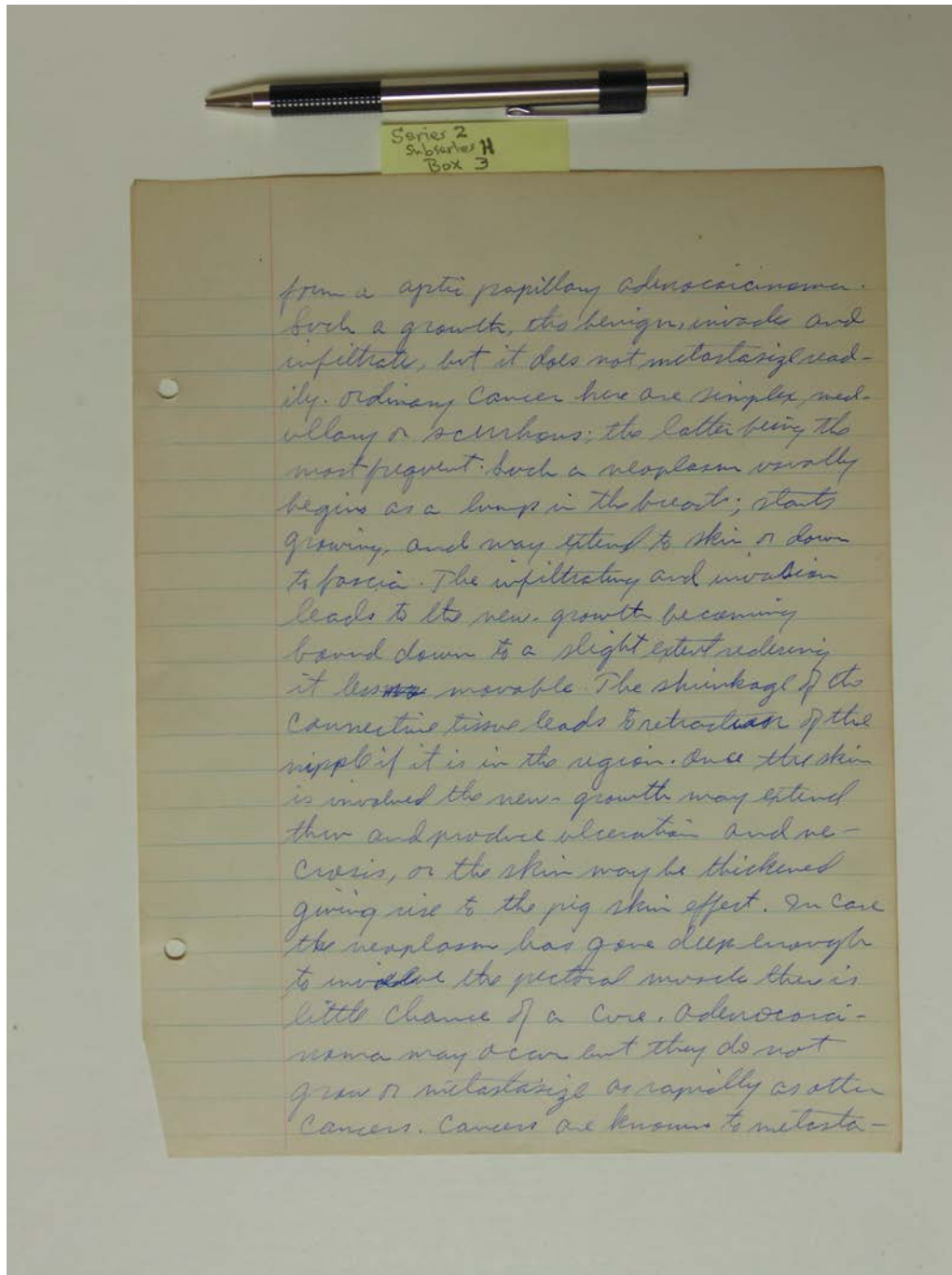
p. 2

Names:

Breast

Types:

essay



from a apitic papillary adenocarcinoma.
Such a growth, tho benign, invades and
infiltrate, but it does not metastasize read-
ily. Ordinary cancer here are simplex, med-
ullary or scirrhous; the latter being the
most frequent. Such a neoplasm usually
begins as a lump in the breast; starts
growing, and may extend to skin or down
to fascia. The infiltrating and invasion
leads to the new growth becoming
bound down to a slight extent reducing
it less ~~movable~~ movable. The shrinkage of the
connective tissue leads to retraction of the
nipple if it is in the region. Once the skin
is involved the new growth may extend
thru and produce ulceration and ne-
crosis, or the skin may be thickened
giving rise to the pig skin effect. In case
the neoplasm has gone deep enough
to involve the pectoral muscle there is
little chance of a cure. Adenocarci-
noma may occur but they do not
grow or metastasize so rapidly as other
cancers. Cancer are known to metasta-

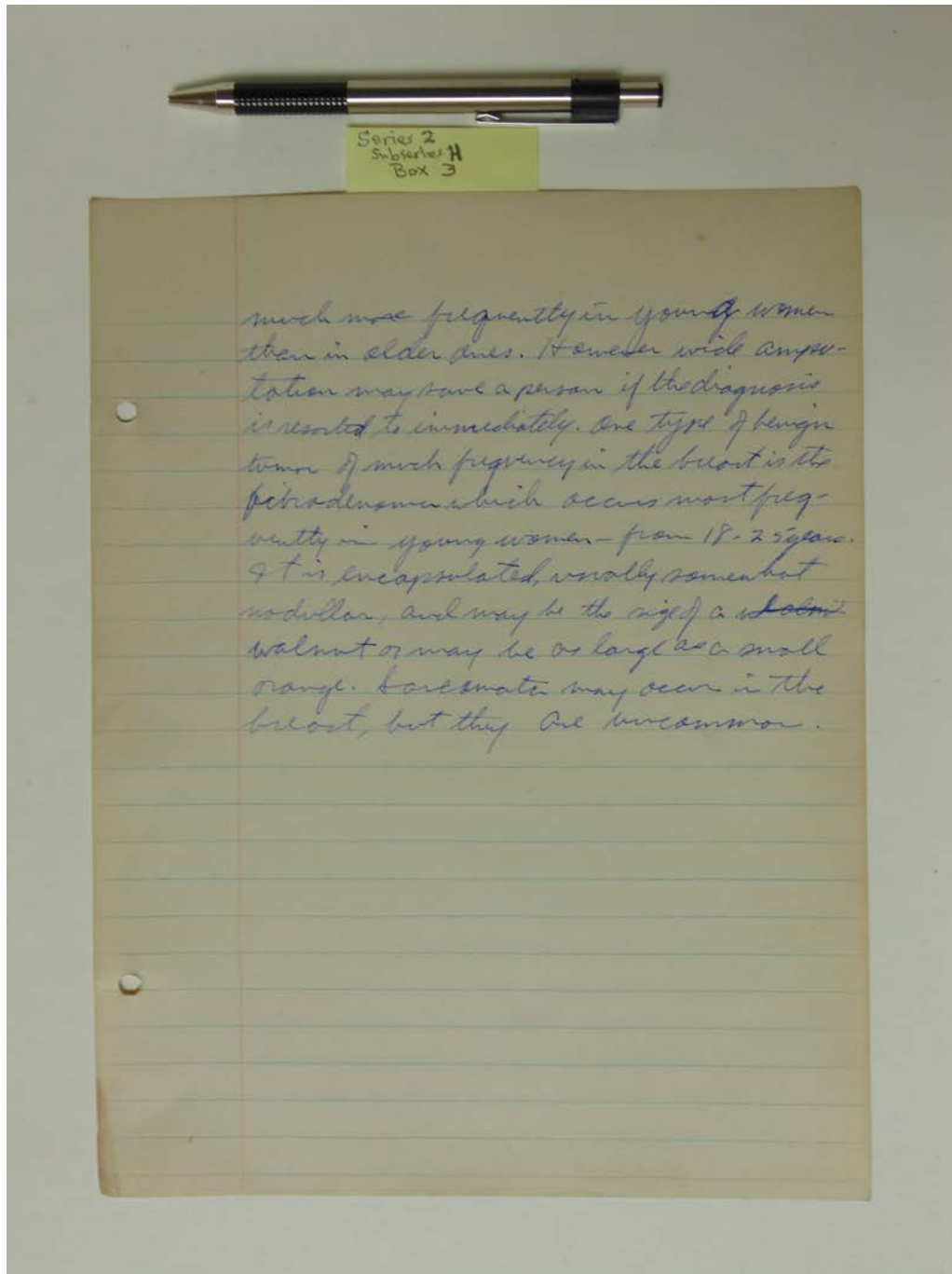
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Names:

Breast

Types:

essay



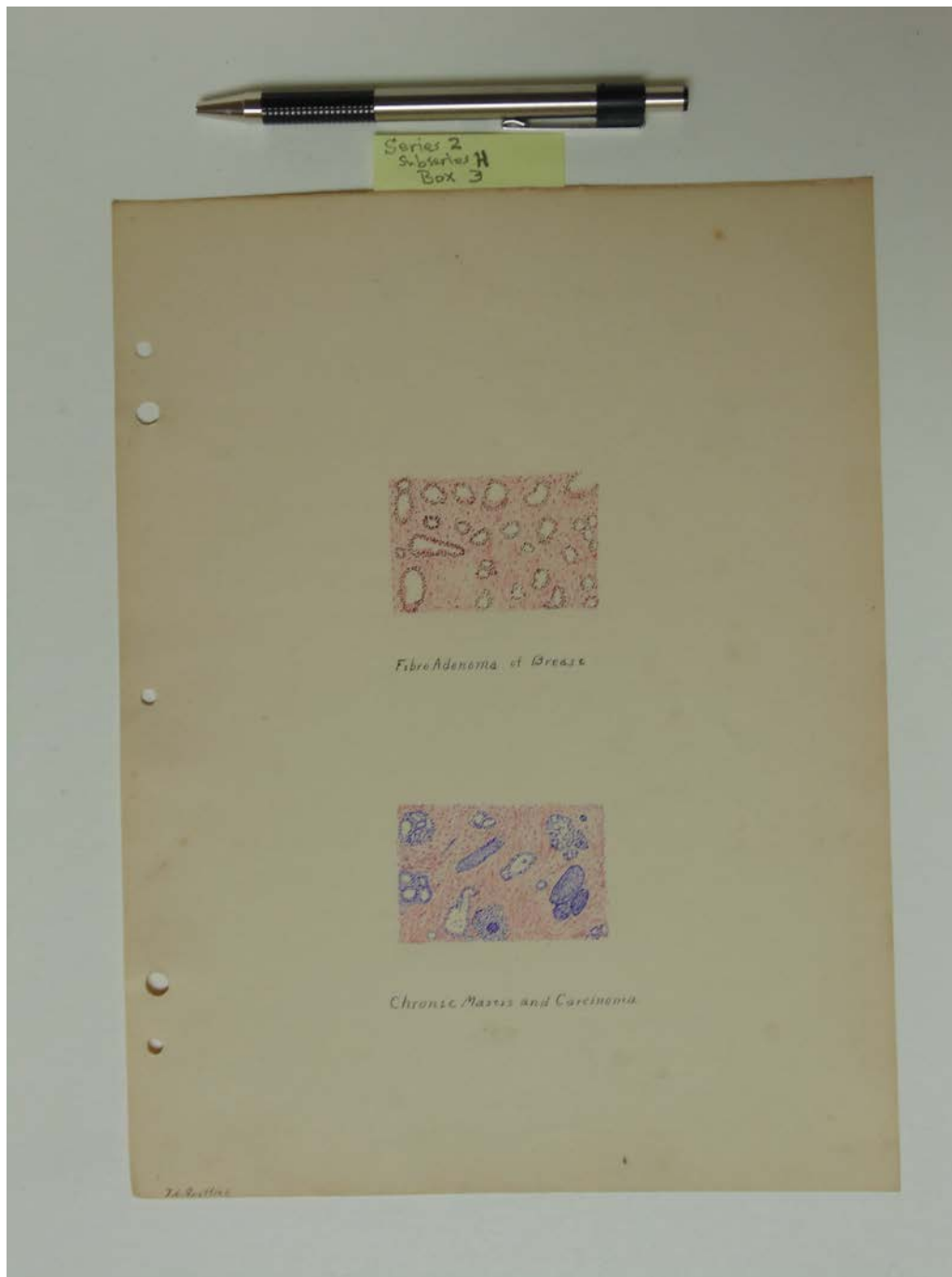
p. 4

Names:

Breast

Types:

essay



Names:

Chronic Mastitis &
Carcinoma

Fibroadenoma of
Breast

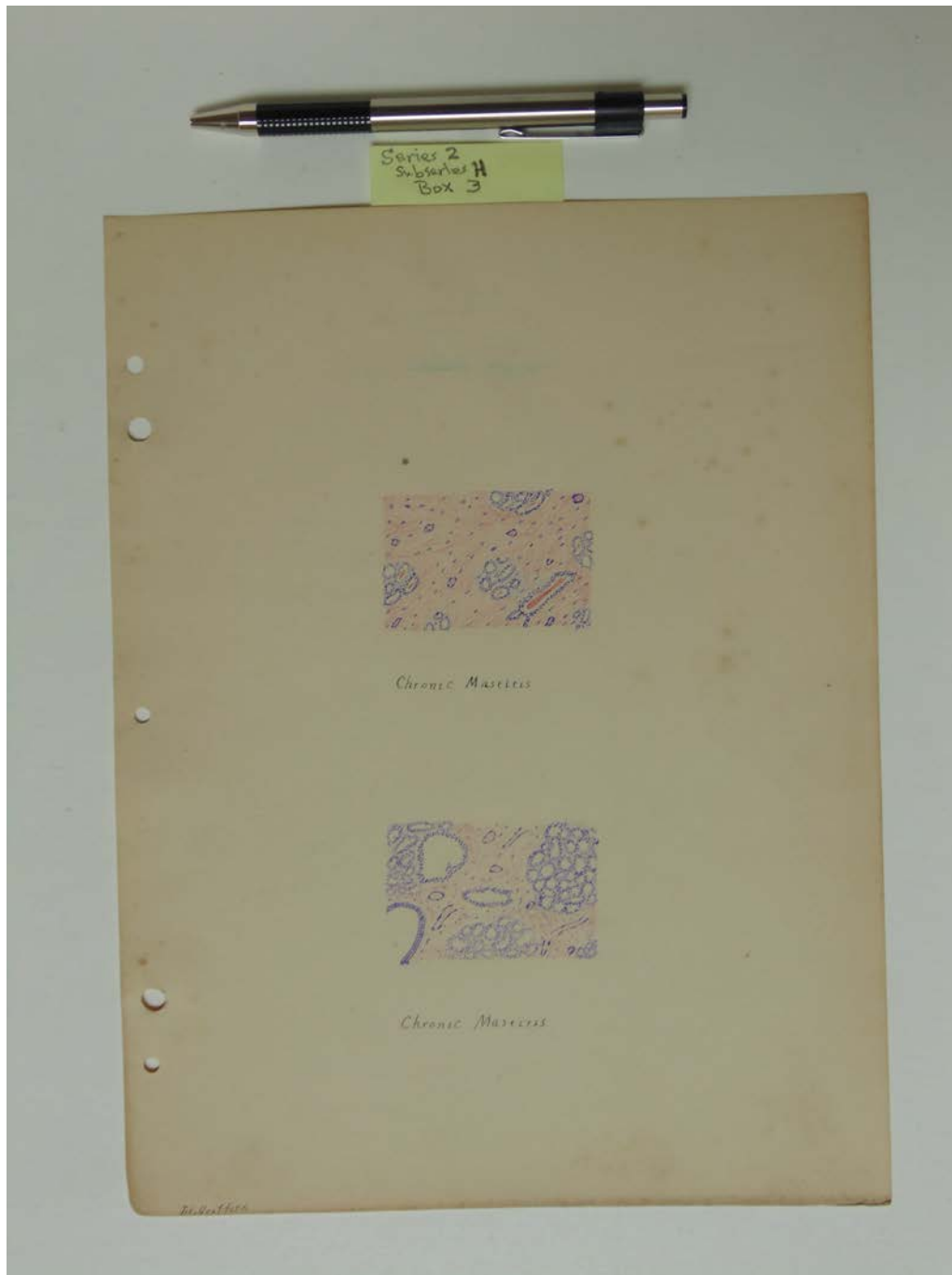
Types:

drawing

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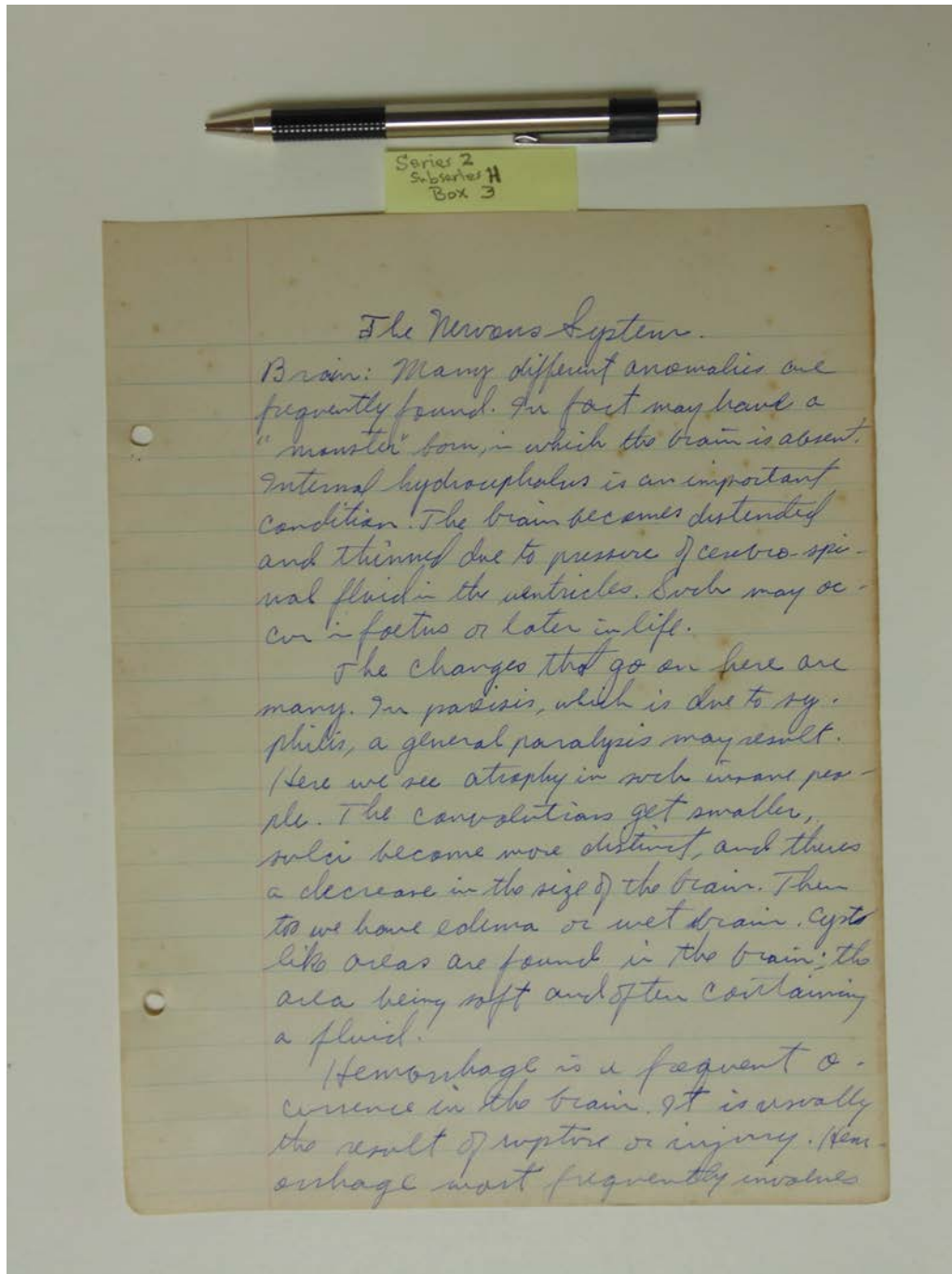


Names:

Chronic Mastitis

Types:

drawing



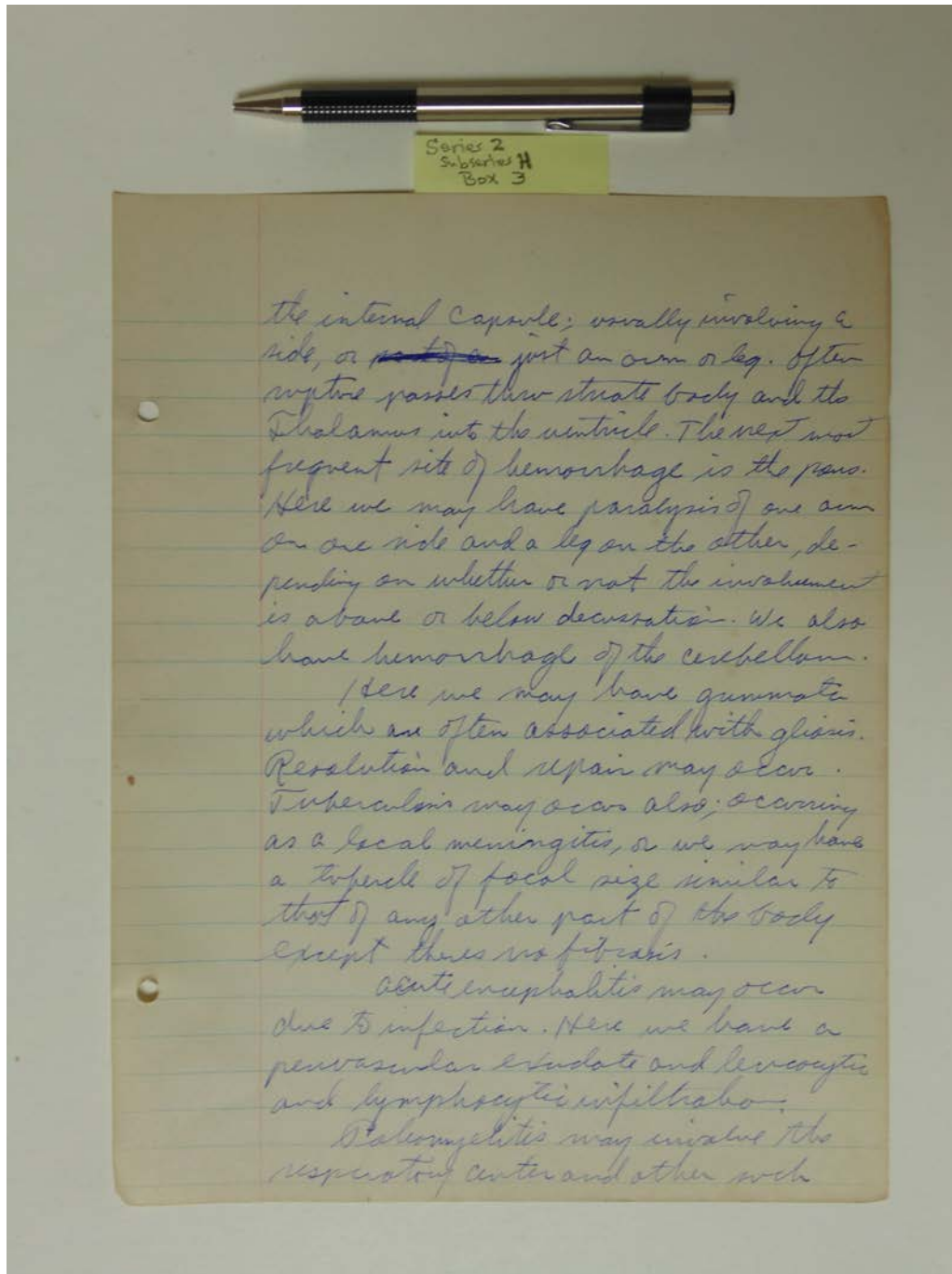
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Names:

Nervous System

Types:

essay



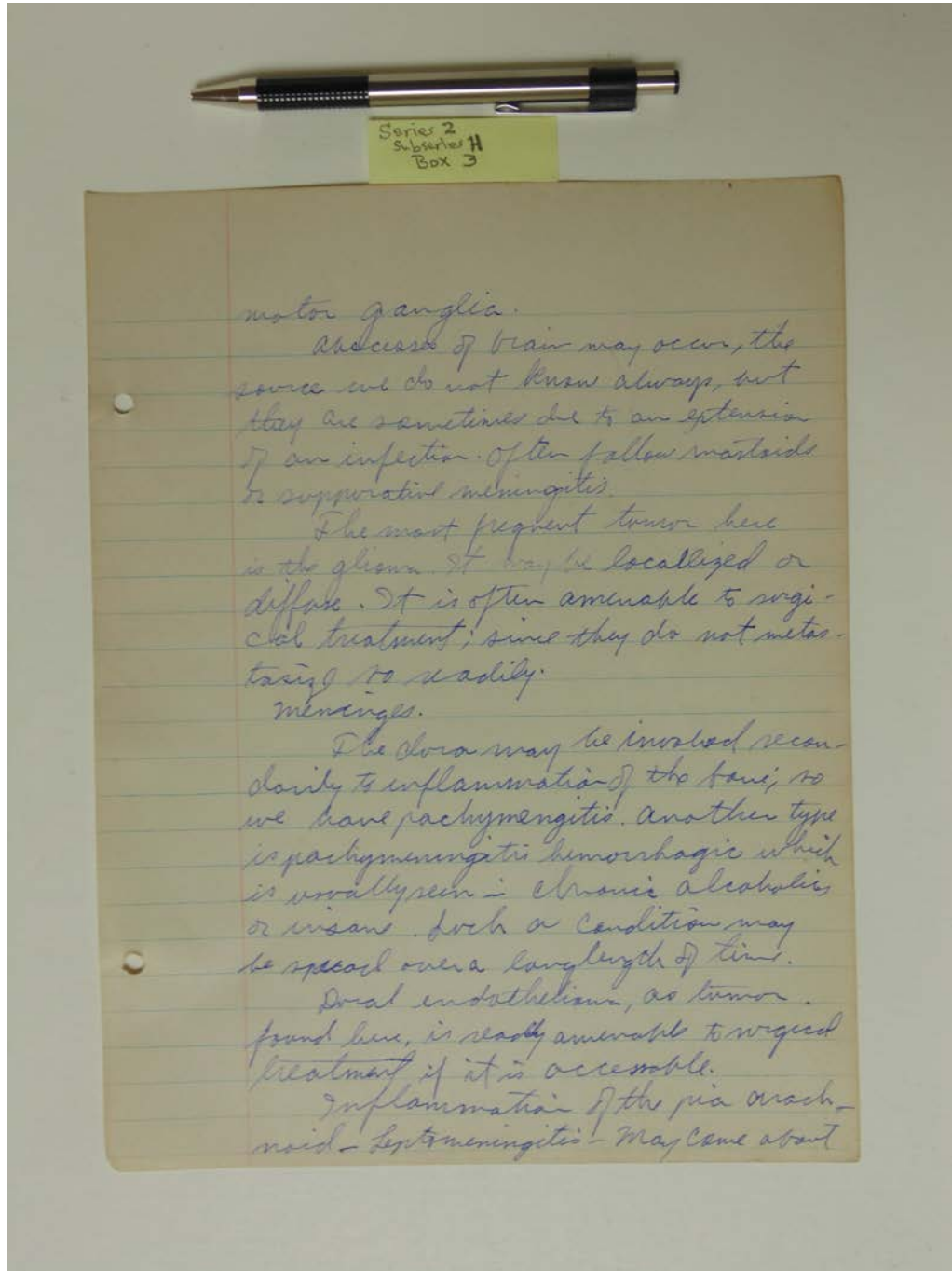
p. 2

Names:

Nervous System

Types:

essay



motor ganglia.

Abscesses of brain may occur, the source we do not know always, but they are sometimes due to an extension of an infection. Often follow mastoids or suppurative meningitis.

The most frequent tumor here is the glioma. It may be localized or diffuse. It is often amenable to surgical treatment; since they do not metastasize so readily.

meninges.

The dura may be involved secondarily to inflammation of the brain, so we have pachymeningitis. Another type is pachymeningitis hemorrhagic which is usually seen in chronic alcoholics or insane. Such a condition may be spread over a long length of time.

Dural endothelioma, as tumor found here, is readily amenable to surgical treatment if it is accessible.

Inflammation of the pia arachnoid - Leptomeningitis - may come about

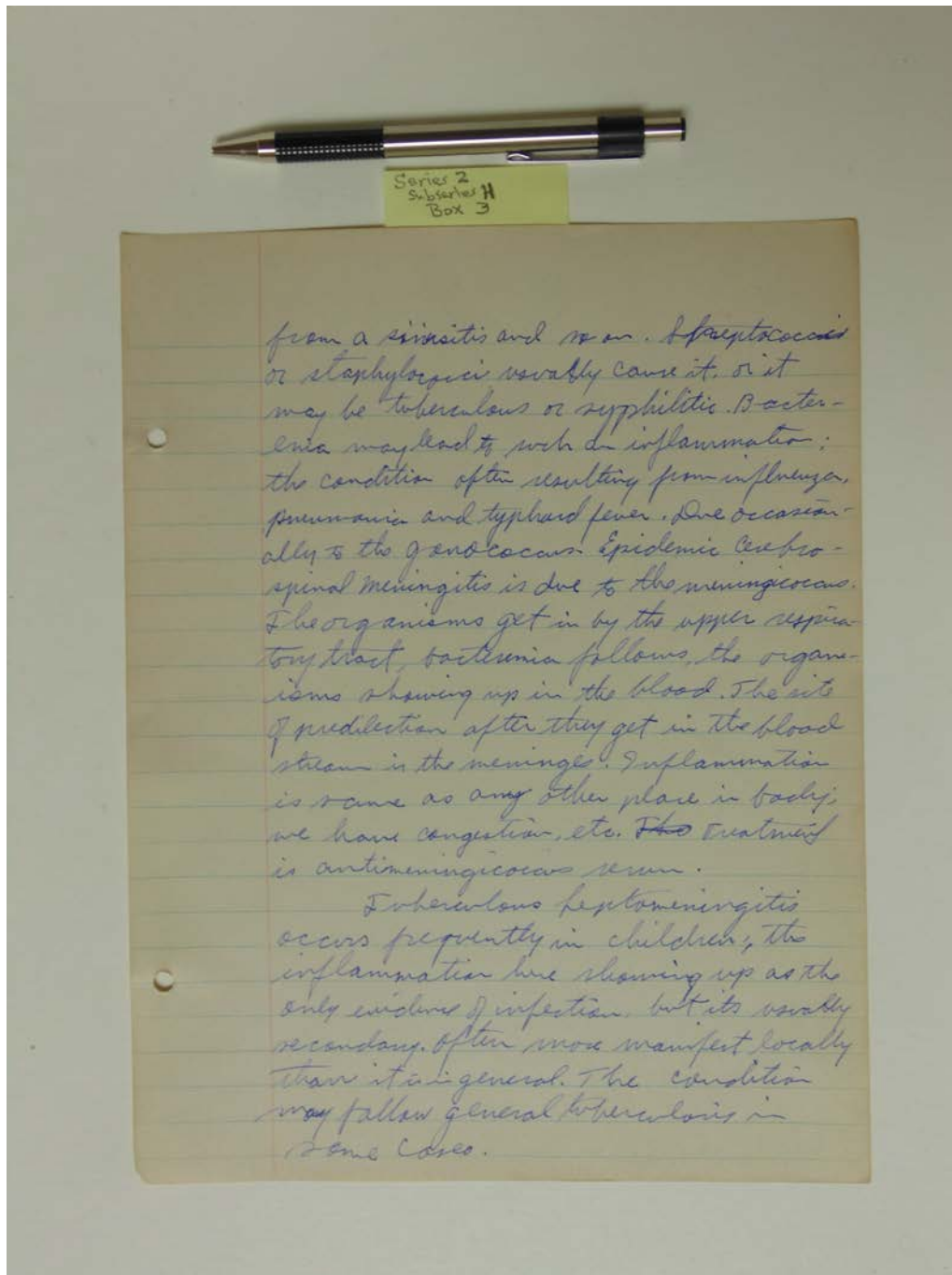
p. 3

Names:

Nervous System

Types:

essay



from a sinusitis and so on. Streptococcus
or staphylococcus usually cause it, or it
may be tuberculous or syphilitic. Bacter-
emia may lead to such an inflammation;
the condition often resulting from influenza,
pneumonia and typhoid fever. One occasion-
ally to the gonococcus. Epidemic cerebro-
spinal meningitis is due to the meningococcus.
The organisms get in by the upper respira-
tory tract, bacteremia follows, the organ-
isms showing up in the blood. The site
of predilection after they get in the blood
stream is the meninges. Inflammation
is same as any other place in body;
we have congestion, etc. The treatment
is antimeningococcus serum.

Tuberculous meningitis
occurs frequently in children, the
inflammation here showing up as the
only evidence of infection, but it's usually
secondary, often more manifest locally
than it is general. The condition
may follow general tuberculosis in
some cases.

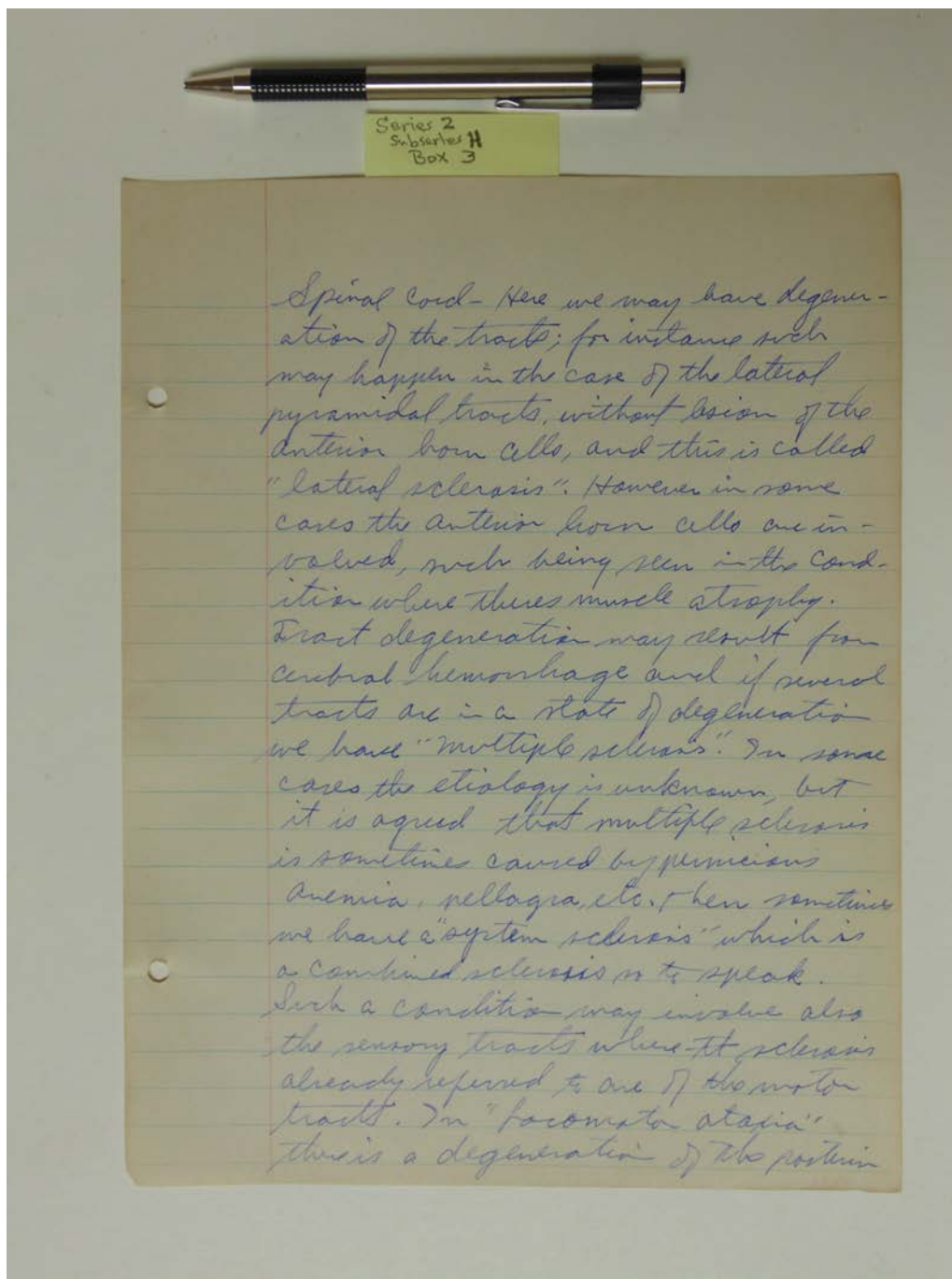
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Names:

Nervous System

Types:

essay



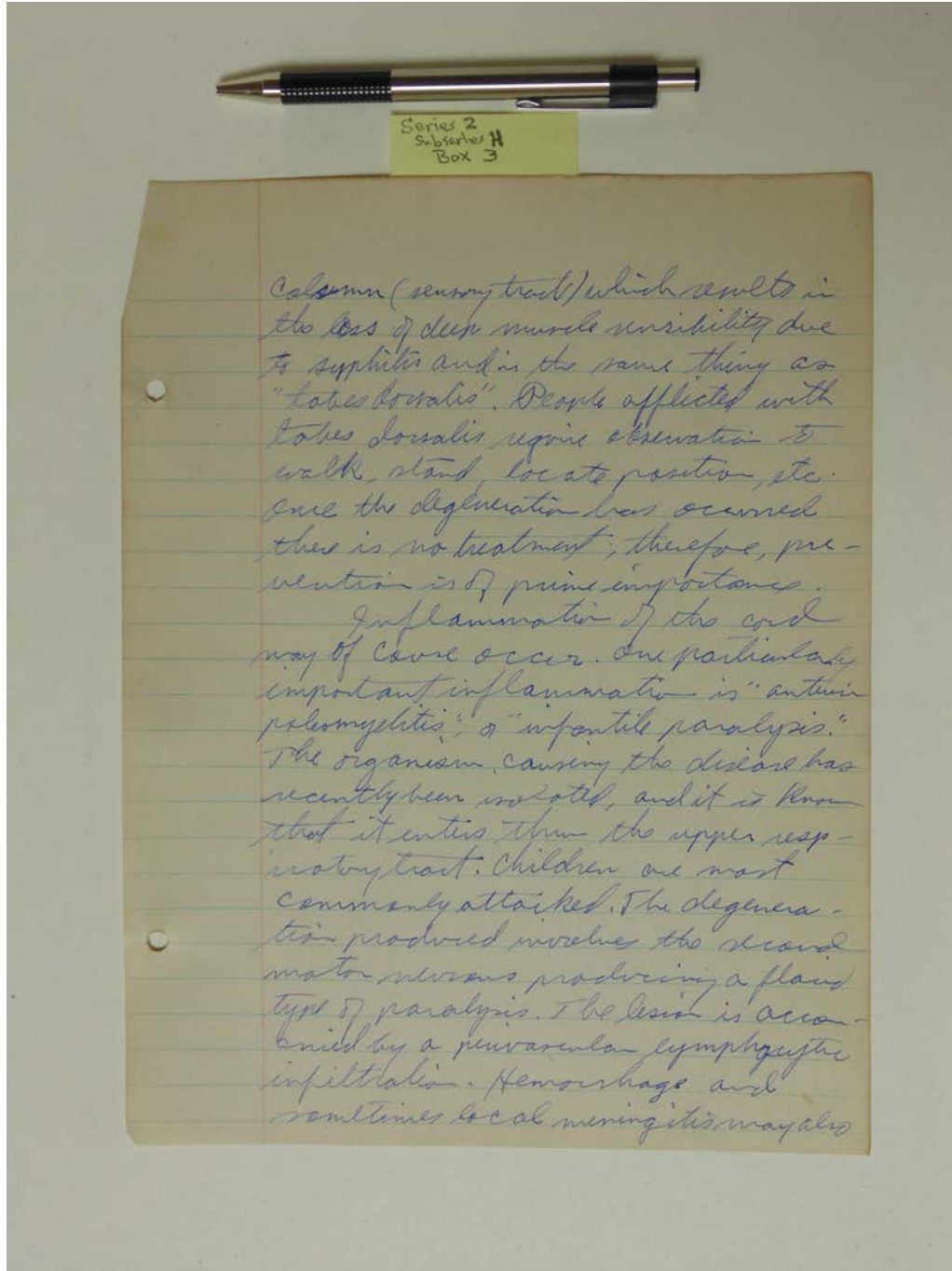
p. 5

Names:

Nervous System

Types:

essay



Calceum (sensory tract) which results in the loss of deep muscle sensibility due to syphilis and is the same thing as "lobes dorsalis". People afflicted with lobes dorsalis require observation to walk, stand, locate position, etc. Once the degeneration has occurred there is no treatment; therefore, prevention is of prime importance.

Inflammation of the cord may be acute or occur. One particularly important inflammation is "antonia poliomyelitis" or "infantile paralysis." The organism causing the disease has recently been isolated, and it is known that it enters through the upper respiratory tract. Children are most commonly attacked. The degeneration produced involves the second motor neurons producing a flaccid type of paralysis. The lesion is accompanied by a perivascular lymphocytic infiltration. Hemorrhage and sometimes local meningitis may also

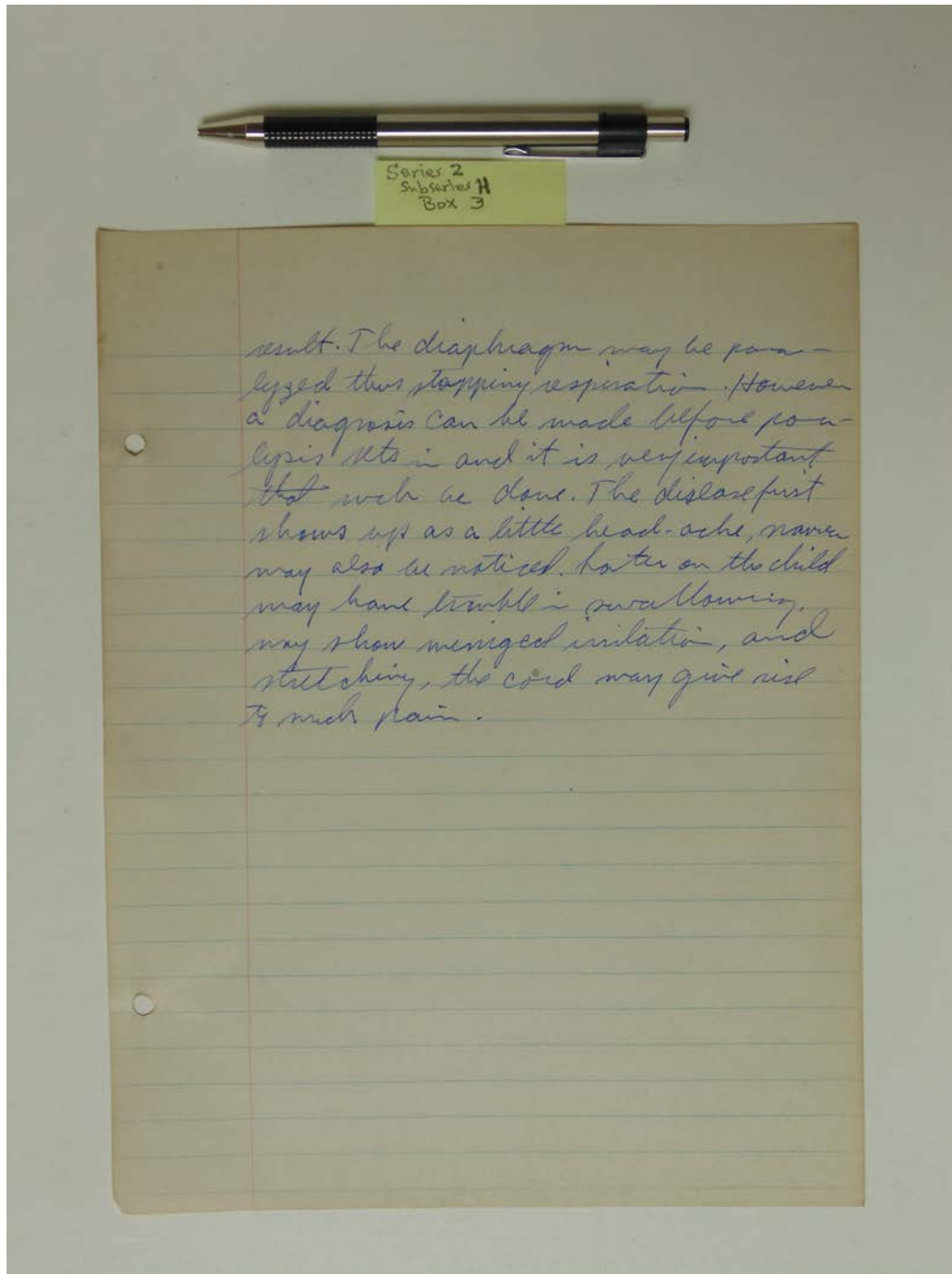
p. 6

Names:

Nervous System

Types:

essay



p. 7

Names:

Nervous System

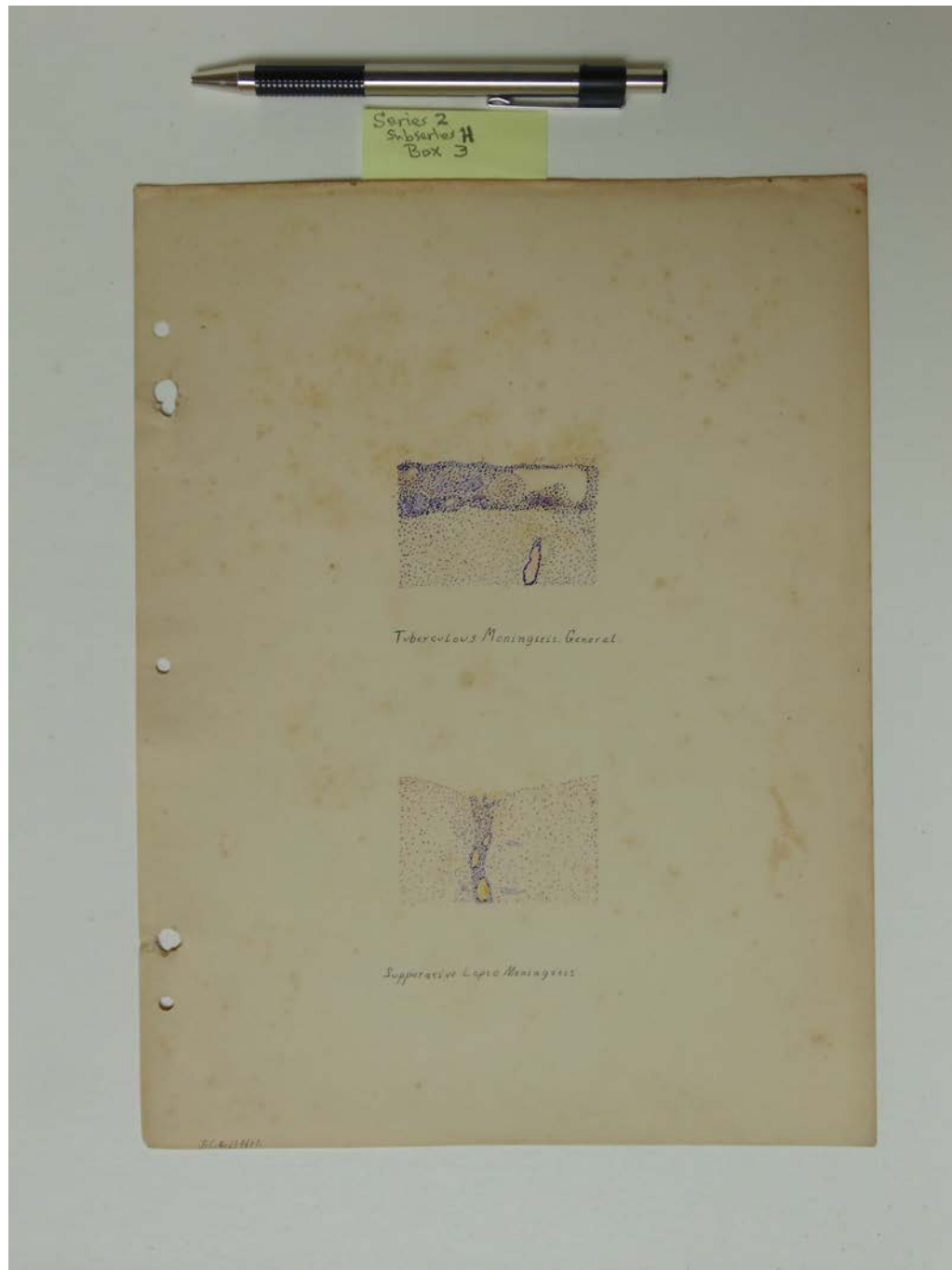
Types:

essay

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Names:

Suppurative Lepto
Meningitis

Tuberculous
Meningitis. General

Types:

drawing

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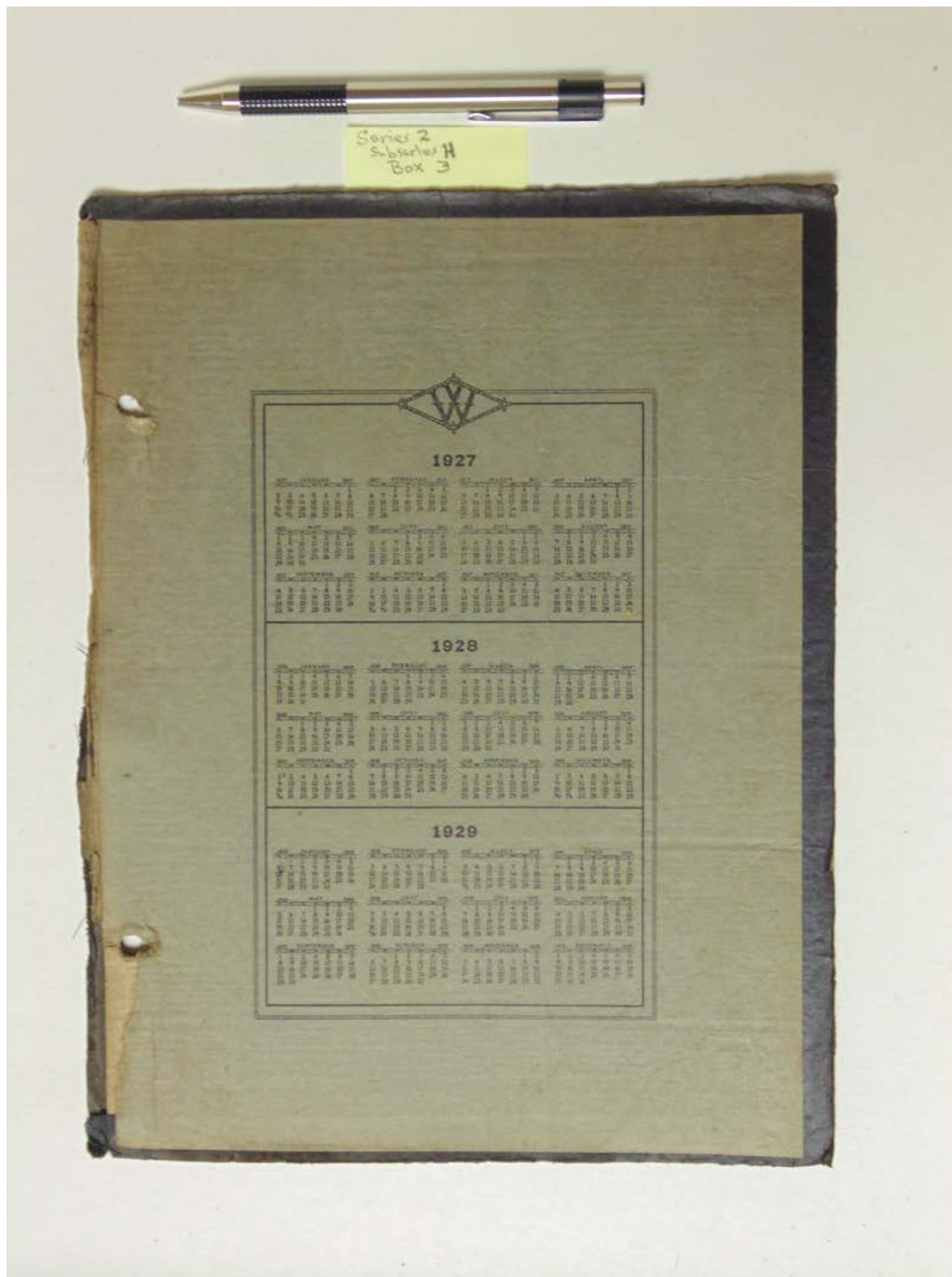
J.E. Griffith Pathology Notes, circa 1928

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Names:

Calendar

Types:

cover

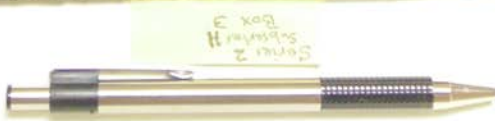
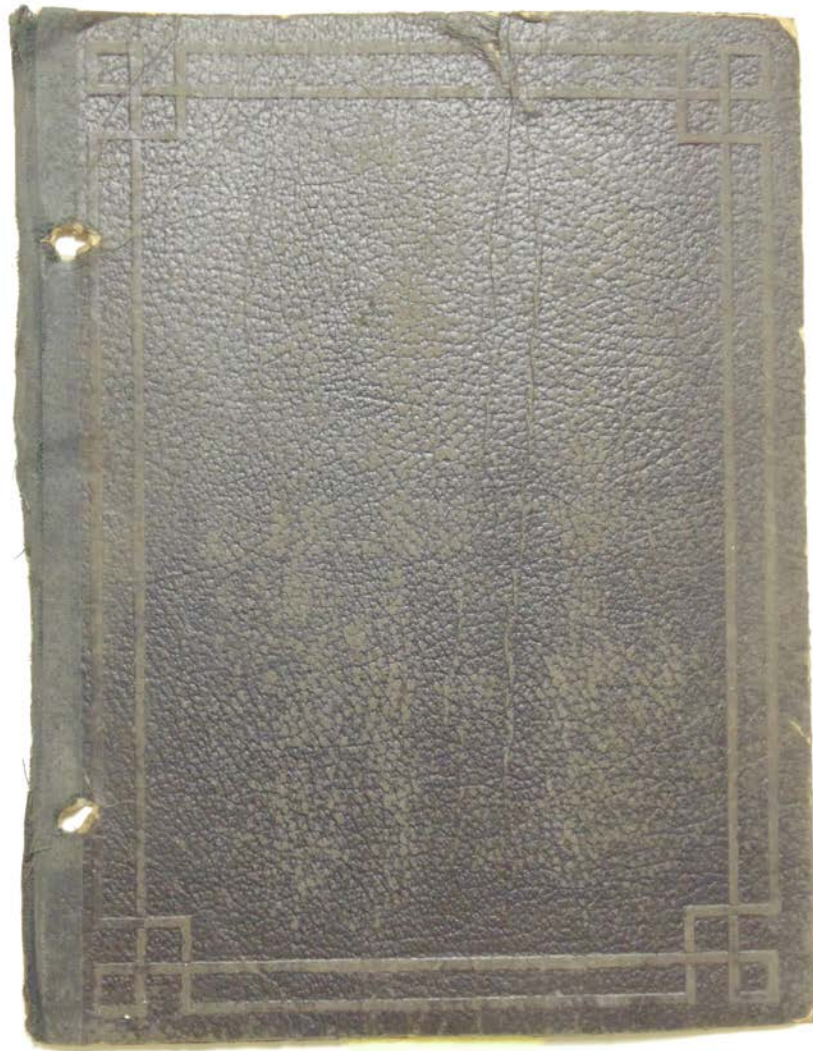
Dates:

1927-1929

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Names:

Note Book

Types:

cover

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