25th February, 1942.

Dr. C. H. Prouse,
Cherry Street,
WERRIBEE.

Re George SLEEMAN.

Filed under "S"

Telephone:
J 2002 - J 4987

Anti-Cancer Council of Victoria

(AFFILIATED WITH THE BRITISH EMPIRE CANCER CAMPAIGN)

Incorporated by Act of Parliament for the purpose of promoting, co-ordinating, and carrying out investigations in relation to the cause, prevention, and treatment of Cancer

C/o ROYAL AUSTRALASIAN COLLEGE OF SURGEONS
Spring Street,
Melbourne, C.1.

see letter to
Mrs. R. V. Peterson,
18 Main St,
Ballarat

26th February, 1942.

Dr. W. A. Pryor,
125 Victoria Street,
BALLARAT.

Dear Dr. Pryor,

I am enclosing for your personal information a copy of a letter which I have sent to one of your patients. It is my universal practice to support the local medical practitioner, and to endeavour to help him in any way should he desire my assistance.

Yours sincerely,

C. V. MACKAY,
Executive Medical Officer.

CVM.BH

12th March, 1942.

Mrs. J. Preston,
Boyce Street,
AVOCA, Vic.

Dear Mrs. Preston,

I am always disturbed in mind about swellings in the breast. It is true that many of these are simple and inflammatory in nature, but all swellings and lumps have to be regarded with suspicion. In your case it would appear from your description that inflammation is the cause and not cancer.

I should, however, show your local doctor my answer to your letter and ask him to make an examination of your breast from the point of view of the possibility of cancer. If he would like my assistance in any way I am at his service.

Please let me know later if I can help you any further.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer.

CVM.BH

Boyce St,
Avoca, Vic.
10-3-1942,

Anti Cancer Council,
H. G. Wheeler,

Dear Sir,

Several times over the [illegible] I have heard the appeal made for any person who has the slightest doubt about cancer to get in touch with the Anti Cancer Council.

For several years I have had the dread superstition hanging over me. About ten years ago I developed a cyst in the right breast while I was still feeding my first baby. I went to our lodge doctor about it & he said it was nothing. It came up like a blind boil, would never discharge & after poulticing for three to four days [illegible] would go back to a hard lump like a pea under the flesh. It slowly grew bigger & came up at least once a month. A new doctor took over the practice & he thought if it was not removed it would turn into a abyess. I had it removed about four years ago. It had grown that part of the breast had to be taken. Three weeks after two small cysts, one each end of the wound appeared.

may still appear although not quite so often. I have perfect health otherwise & am 36 years old.

What has finished me is a very near friend of mine had a lump in her breast. She went to several doctors only to be told it was nothing to worry over. Several weeks ago a X ray was taken which revealed a cancer beyond human aid.

I would like the advice of some competent doctor & have the matter cleared up

I am

Yours sincerely

Nellie Preston.

26th March, 1942.

Mrs. N. Preston,
Boyce Street,
AVOCA, Victoria.

Dear Mrs. Preston,

Under the circumstances which you have outlined in your letter I quite agree with you that your best plan is to consult Dr. Hoban of Maryborough concerning the trouble in your breast.

I know Dr. Hoban and I shall communicate with him today. Please see him as soon as you can arrange a visit.

If it is necessary for you to require my assistance later on, I shall be very pleased to do all in my power to help you.

Yours faithfully,

C. V. MACKAY
Executive Medical Officer.

LH.

Boyce St.,
Avoca,
23-3-1942,

Dr C. V. Mackay,

Dear Sir,

I received your reply of the 12 inst. concerning the swellings on breast.

About six months ago I had occassion to visit the local Dr here in Avoca, & he examined it & said there was nothing to worry about it. He also told my friend (who now is aware of cancer too far gone) that she had nothing to worry about — no more than an over strained muscle. I feel it would be useless to go back to this Dr; but I will go to a Dr Hoban of Maryborough early next month & get him to give it a good examination. In fact is was Dr Hoban who operated on it some four years ago. He also has his own X ray if that would be more satisfaction to both you & me.

I would like very much for you to get in touch with him or else advise me.

Thanking you very sincerely

I am Yours faithfully
(Mrs) Nellie Preston.

6th April, 1942.

Mrs. F. A. Pearce,
KOONDROOK P.O.

Dear Madam,

I have much pleasure in sending you our booklet with the compliments of the Anti-Cancer Council.

It is quite impossible for me to express an opinion of any value concerning your husband's illness. There can be no doubt that he should see a medical practitioner as early as possible.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.BH

Koondrook
April 2nd 1942

Dear Sir

Please send me your free booklet on cancer

Yours truly
Mrs E A Pearce
Post Office
Koondrook

my husband is 43 years old. and has had a pain under his right ribs for 15 months constant, there seems to be a rib missing and a hole in his side and he says he can feel a lump inside but it is to sore to touch, sometimes the pain gets worse & he sperspires & almosts faints he is very thin some days he eats a lot other days he touches hardly anything and he is always complaining of being tired lately do you think it is a cancer I have tried to make him see a "D" but he wont go near one

had a talk to our Dr he wanted
my husband to go still to him
but he would not go near him
I am terrible worried as I have
13 children 10 under 16 years & my
eldest in camp he is my sole
support.
is there any way I could tell
~~if he~~ ~~ha~~ my husbands was a
cancer
waiting your reply. I see by
the Sunbeams that you do
give Reply & a booklet.
yours truly
Mrs ~~Tot~~ Pearce

P.S. he smokes a 2 oz tin of
tobacco every second day and he
coughs all night a dreadful
hard cough.

18,774	RYAN,	Delia,	59.	O.P.	Skin. Basal cell carcinoma, epithelioma on surface.	15/1
18,777	KENDALL,	Thomas,	63.	wd. 8.	Peritoneum. Carcinoma.	16/1
18,781	HOWE,	William,	71.	wd.16.	Lip. Epithelioma.	20/1
18,793	PEAT,	Thomas,	58.	R.O.P.	Lip. Epithelioma.	21/1
18,794	WEIR,	George,	64.	R.O.P.	Lip. Epithelioma.	21/1
18,805	OPIE,	Elizabeth,	79.	wd.022.	Skin. Epithelioma.	28/1
18,806	KNIGHT,	Elizabeth,	79.	R.O.P.	Skin. Some epitheliomatous tissue present.	28/1
18,810	PATTISON,	Dennis,	49.	wd.20.	Mass in right supraclavicular region. Malignant growth, atypical carcinoma with peritheliomatous appearances.	29/1
18,812	DAVIS,	Bolton,	66.	wd. 8.	Rectum. Adenocarcinoma.	29/1
18,815	DOHERTY,	Agnes,	71.	wd.16.	Tongue. Epithelioma.	29/1
18,819	ROSS,	Isabella,	61.	wd. 4.	Parotid tumour. Epithelial tumour of salivary gland type.	29/1
18,821	ROSENOW,	Peggy,	24.	wd. 6.	Tumour of foot. Giant cell sarcoma.	3/2
18,823	BRANDLE,	Berry,	55.	wd.11.	Rectum. Adenocarcinoma of rectum, no growth found in gland.	3/2
18,827	RYAN,	Delia,	59.	R.O.P.	Arm. Rodent ulcer type of growth.	3/2
18,841	TODD,	Florence,	26.	R.O.P.	Vagina. Papillary adenocarcinoma.	6/2
18,847	BENTON,	Honor,	67.	wd. 2.	Colon. Adenocarcinoma with some mucoid degeneration.	6/2
18,852	BROWN,	Jessie,	63.	wd.30.	Lymphgland. Carcinoma.	10/2
18,862	SCARRATT,	Eliza,	51.	wd. 4.	Liver nodule. Carcinoma.	11/2
18,866	CRYER,	Francis,	68.	wd. 8.	Skin. Adenocarcinoma with large spaces.	16/2
18,870	SKELTON,	Eliz.,	62.	O.P.	Rectum. Adenocarcinoma.	16/2
18,872	STORKE,	Edward,	65.	O.P.	Colon. Recurrence of growth.	16/2
18,873	FRANZKE,	Emma,	72.	wd.14.	Breast. Duct carcinoma.	18/2
18,880	BRIEN,	Fred,	49.	wd.16.	Lip. Epithelioma.	18/2
18,881	CROCKFORD,	John,	56.	R.O.P.	Lip. Epithelioma.	18/2
18,883	REYNOLDS,	Alfred,	65.	wd. 5.	Prostate. Suggests an early carcinomatous development.	18/2
18,885	OLIVER,	Charles,	63.	wd.11.	Scrotum. Epithelioma.	18/2
18,887	KELM,	Alfred,	50.	wd. 1.	Fascia. Fibrosarcoma.	18/2
18,892	BLOOMFIELD,	Isador,	43.	R.O.P.	Lymphgland. Fibrous tissue invaded with rodent growth.	18/2
18,899	SMITH,	Thomas,	67.	R.O.P.	Hand. Epithelioma.	20/2
18,900	BERTHISEL,	Ernest,	32.	R.O.P.	Tongue. Epithelioma.	20/2
18,901	BERTHISEL,	Ernest,	32.	R.O.P.	Lip. Rather superficial for diagnosis but suggests epithelioma	20/2
18,903	DAVIDSON,	Donald,	62.	wd.20.	Mass from bronchus. Very scrappy, shows some collections of cells which rather suggest carcinoma.	20/2
18,886	DOUGLAS,	Dorothy,	26.	wd. 2.	Lump on inner side of thigh. Papillary adenocarcinoma.	23/2
18,909	DUFF,	Daisy, Annie,		O.P.	Breast. Carcinoma.	23/2

Red

Yellow

Pink

Green

White

Brown 1

Brown 2

5th March, 1942.

Dr. N. F. Pescott,
Medical Superintendent,
Prince Henry's Hospital.

re Cecelia BJURSTROM (Miss)

Filed under "B"

Cancer Council of Victoria

(AFFILIATED WITH THE BRITISH EMPIRE CANCER CAMPAIGN)

by Act of Parliament for the purpose of promoting, co-ordinating, and investigations in relation to the cause, prevention, and treatment of Cancer

CANCER INFORMATION BUREAU,
Royal Melbourne Hospital,
Melbourne, C.1.

4th March, 1942.

Dr. James H. Paterson, M.B., B.S.,
GARFIELD.

Dear Dr. Paterson,

Many thanks for your replies to our questionnaire. If you have any difficulty in arranging for patients suffering from cancer to travel to Melbourne for treatment, I shall be very pleased if you would avail yourself of our organization.

Through the almoners at the public hospitals we can arrange for free railway passes, etc. My Council has subsidised special Samaritan Funds for this purpose.

Yours faithfully,

C. V. MACKAY,
Executive Medical Officer.

CVM.BH

OPB.DAE Geelong & District Hospital
Phone: 3435 (KITCHENER MEMORIAL) Box 110
Geelong

9/3/42.

Dr. C. V. Mackay,
C/- Royal Aust. College of Surgeons,
Spring St.,
Melbourne, C.1.

Dear Doctor,

re treatment - Cancer of Breast.

Dr. J. E. Piper has handed me your letter for my information, and wishes me to thank you on his behalf.

We also wish to thank you for your advice on treatment, and your offer to help in the event of difficulties arising.

Yours faithfully,

O. Burger,

Medical Superintendent.

3rd March, 1942.

Dr. James E. Piper, M.D.,
Latrobe Terrace,
GEELONG.

Dear Dr. Piper,

Many thanks for your answers to our questionnaire. I am very pleased to reply to the best of my ability to your questions concerning the best routine treatment for cancer of the breast. So far as I have been able to ascertain, this is as follows:

1. Early malignancy of three to six months known duration of small size, etc., with no appreciable axillary glandular involvement.
Radical surgery only.

2. Early malignancy with one and not more than two small glands clinically involved in the axilla.
Radical surgery plus post-operative deep x-ray therapy.

3. Malignancy, which can no longer be classed as early, with one or at most two glands in the axilla not more than 2 cm. in diameter. Pre-operative deep therapy to breast and axilla, followed by radical surgery, and further followed by post-operative deep therapy.

4. The course of deep therapy in post-operative cases usually begins in from four to six weeks after operation, and several courses spaced over a couple of years may be given. The amount of skin reaction, blood examinations and the patient's general response, are carefully watched. Rest in bed, nourishing diet, vitamin therapy are important factors.

26th February, 1942.

Mrs. R. V. Peterson,
18 Main Street,
BALLARAT EAST.

Dear Madam,

I am very pleased to send you our booklet on cancer.

Your letter of the 18th of February has been carefully studied. It is my definite opinion that there is no necessity whatever for you to come to Melbourne for examination or for treatment.

Patients in Ballarat have a wide choice of first-class medical men, and you may personally have full confidence in the diagnosis made by your own doctor. The condition which you have described as a "blockage of the salivary gland" is not at all uncommon, and is not associated with cancer.

So far as I can judge from your description you have no need for any worry or anxiety.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer.

Enc.
CVM.BH

18 Main Street
Ballarat East
18/2/42

To The Medical Officer in Charge
The Royal Australasian College
of Surgeons
Spring Street
Melbourne

Dear Sir

In the morning Ballarat paper "The Courier"
I read where you will send all information regarding Cancer"
now it is only a week & I find I have a pimple under the Tongue.
I went to the Dentist & thinking it was my bottle plates the filled the bottom plate so thin I went to my lodge Doctor Pryor & he tells me its the glands what they call the slives not functioning & its blocked so I am painting it & mouthe mouth with Peroxide of Hydrogen, & to come back in a fortnight.
Well I dont want to let it linger on

II

in case I have to get it removed
please advise me what to do
for the best, what Doctor will
I come down to see at once
I am very worried about it.
It is like a piece of skin
with a white top on it & I can move it
about with my tongue
Thanking you to send
me a special Booklet & advice
I am
yours faithfully
(Mrs) R V Peterson
18 Main Street
Ballarat East

21st February, 1942.

Mrs. P. M. Peters,
"Elgan,"
South Road,
MOORABBIN, S.20.

Dear Madam,

I am pleased to answer your enquiry and also to send you our booklet on cancer.

It is impossible to decide from your description of your case whether you have or have not cancer. It seems most probable that the trouble is not of a cancerous nature. I would, however, recommend you to consult your local medical practitioner and to ask his advice.

If you do not wish to do this then I would recommend you to attend the Women's Hospital, Carlton as an out-patient.

Yours faithfully,

I have not been able to get any satisfaction

"Elgan,"
South Road,
MOORABBIN. - S.20

18th February, 1942.

Cancer Information Bureau,
Royal Australasian College of Surgeons,
Spring Street,
MELBOURNE. - C.1

Dear Sirs,

Having read of your Bureau in the daily papers, I thought you might be able and willing to help me.

Approximately three years ago, haemorrhages began at the Period. (The latter has always been irregular, being anything from 5 to 10 weeks).

In November, 1940, I was operated on (D.M.C.) and later told that a number of Fibroids had been removed, though I understand a large one could not be removed. This was followed by Deep Therapy treatment. Ever since operation, the uterus feels as though it were out of position and seems to be in the way of free movement, with a bruised feeling. I have not been able to stoop or bend ever since operation without this feeling, followed by dull pains on left side, through to back, and over hip. Haemorrhages ceased after the operation, but on 31st January of this year, a copious menstruation began and lasted approximately four days. Then just a fortnight later, a dark brown discharge began, with dull pains. Pains did not cease for approximately 18 hours; relief for a few hours, then pains recurred at intervals, and I still have them, accompanied by slight brown discharge already mentioned. Pains are bad to-day, especially over hip and left kidney.

I have not been able to get any satisfaction regarding these pains and aches, and now this discharge has taken place, I thought it advisable to seek your advice, as I am unable to pay a Specialist's fee.

I would be very grateful for any assistance you could give me, and enclose a stamped, addressed envelope.

Thanking you in anticipation,

Yours faithfully,

(Mrs). P. M. Peters.

Enc.1

P.S. - I am a severe case of Diabetes (16 years).

20th February, 1942.

Mrs. O. Price,
Dunlop Street,
MARIBYRNONG, W.3.

Dear Madam,

I have much pleasure in sending you our booklet on Cancer. The history which you have given me of your condition at present causes me some anxiety.

I should advise you, therefore, to see your local medical practitioner without delay and ask for a complete examination. If you have no local doctor you should then attend the out-patient department of the Women's Hospital, Carlton. You may show this letter. Please let me know if I can be of any further assistance in the future.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer.

V
FOR VICTORY

Dunlop St.
Maribyrnong. W3
18.2.42.

Dear Sir

I noticed an article you were refering to called Early Treatment of Cancer. Well as I am suffering from something wrong with the womb I am very interested in the above mentioned I am 44 years of age. I look healthy but I suffer with a discharge with a stain of blood in it sometimes worse than others. I have had medical advice & twice I was told I had a tumor in the womb & others said not so if you would send me your free book of advice I might know better for my self I have lost just on ten stone in weight in two years I have four children & they are all healthy.

Thanking you
O Price

21st February, 1942.

Dr. Charles H. Prouse,
Cherry Street,
WERRIBEE.

Dear Dr. Prouse,

Many thanks for your answers to our questionnaire. I am now sending you a copy of the original letter.

If you would kindly let me have the name of your male patient suffering from cancer who is waiting for a bed at the Austin Hospital I may be able to be of assistance in obtaining his early admission. Admission for male patients is comparatively easy at present.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer.

CVM.BH

18th February, 1942.

Mrs. M. Parker,
Springfield Road,
TUNSTALL.

Dear Madam,

I have pleasure in answering your enquiry of the 17th of February.

Cancer in not infectious or contagious and no danger would be incurred by the remainder of your family if your father used the same lavatory seat.

I am enclosing the booklet as requested.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.BH

Springfield Road
Tunstall
17.2.42.

Dear Sir

I have a father of 73 yrs who is living with us at present. He is supposed to have cancer of the bowel. He suffers from loss of memory, backache + pains occasionally across the front, from the back each side + extending to the navel. He bleeds from the back passage. Is it dangerous to others, to have to sit on the same lavatory? We are in an unsewered area. Also will you please send me your free special booklet "What every adult should know about cancer". Thanking you in anticipation

Yrs Faithfully
(Mrs) M. Parker

12th February, 1942.

Dr. Sydney Pern,
7 Raglan Street North,
BALLARAT.

Dear Dr. Pern,

Many thanks for your letter of the 11th of February. I am enclosing a copy of the letter which was sent to all country medical practitioners in Victoria in April of last year. This explains the procedure with regard to indigent cancer patients coming to Melbourne for treatment.

If a medical practitioner communicates with me I arrange with the Medical Superintendent of one of the metropolitan hospitals for a bed, and then I ask the hospital almoner to communicate with the patient and to arrange with the Treasury for a railway pass. We accept the medical practitioner's statement of indigency.

The question of accommodation in Melbourne is also tackled by the Almoner Department and we have subsidised a special Samaritan fund for this purpose at the Royal Melbourne Hospital, St. Vincent's Hospital and at the Women's Hospital.

There has recently been a definite shortage of hospital beds in Melbourne caused by air raid precautionary measures. This would probably account for the non admittance of your patient.

I have had the pleasure of reading at various times your letters and articles in various medical journals.

Believe me,

Yours faithfully,

C. K. MACKAY

January. 1941.

Pats. Name	Sex	Age	Serial Number	Ho. Name	Wd.	Spec.	Report	Date
Hedley 1043 Elizabeth ✓	F	61	17,433	Syme	5	breast	carcinoma in breast + gland	3/1
Griffin 1039 Millicent ✓	F	48	17,434	K. Scott	Ra.	uterus	Epithelioma	3/1
Whitehead 11 Oliver ✓	M	45	17,437	Syme	4	lip	Epithelomatous	8/1
~~Fathoway Richard~~	M	29	17,440	Syme	0.20	anus	shows some giant cells rather vascular granulation tissue, probably tuberculous	8/1
~~Hall 10 Edward~~ ✓	M	26	17,444	K. Scott	16	gland	nothing definite probably inflammatory reviewed 16/7/41 Lymphosarcoma.	10/1
McIndoe 1109 Clara ✓	F	67	17,446	K. Scott	Ra	hand	Epithelioma	10/1
Edwards 1157 George ✓	M	74	17,447	Turner	of	jaw	Epithelioma	10/1
~~Loney Dr~~ ?	M	74	17,452	Lawson	8	prostate	active cells in ducts, possibly precancerous	13/1
France 1090 Chas	M	58	17,455	Lawson	8	anus	adeno-carcinoma	13/1
Wimble 1140 alfred	M	76	17,457	K. Scott	16	cheek	epithelioma	13/1
Wright 1228 Sarah	F	76	17,458	K. Scott	16	cheek	spec. very superficial suggest commencing epithelioma	13/1
Kerr 1068 George	M	77	17,459	K. Scott	16	tonsil	Epithelioma	13/1
Longmore 816 John	M	35	17,466	K. Scott	O.P.	neck	Epithelomatous	15/1
Hale 585 Margaret	F	55	17,467	K. Scott	O.P.		Epithelomata	15/1
Bryson 1196 James	M	47	17,471	K. Scott	O.P.	ear	Epithelomatous	17/1
Murphy 1160 John	M		17,474	K. Scott	O.P.	throat	active looking growth probably carcinoma though in some places, it suggests endothelioma	20/1
Naylor 840 Esther	F	59	17,475	K. Scott	O.P.	chest wall	active cartilage cells + some spindles suggests chondro-sarcoma	20/1
Lowe 1200 Minnie	F	72	17,478	Burke	O.P.	finger	Epithelioma	20/1
Young 1192 Charles	M	76	17,480	Shaw	3	oesophagus	Epithelomatous	22/1
Skinner 1110 alfred	M	-	17,481	K. Scott	16	larynx	Epithelioma	22/1
Powell Old Case ? William	M	-	17,482	K. Scott	O.P.		shows some rodent like cells	22/1
Allen 464 David	M	68	17,483	Turner	11	rectum	Adeno-carcinoma	22/1
~~Smithwick Robt~~	M	17	17,484	Gladell	4	neck	suggests Tuberculous gland	22/1
O'Meara 178 Thomas	M.	59	17,495	Kay Scott	O.P.	nose	Epithelioma	24/1
Thorburn George ?	M	74	17,489	Burke	O.P.	arm	melanoma rather active	22/1
Rogers 1107 alva	F	65	17,490	K. Scott	O.P.	eye	Rodent ulcer	22/1
Old Case ? Foreman James	M	67	17,491	K. Scott	O.P.	ear	mostly inflammatory, but shows a number of large epithelomatous looking cells	22/1
~~Helms Florence~~	F	40	17,499	Paul Jones	14	kidney	Tuberculous	24/1
Lewis 1156 Henry	M	62	17,505	K. Scott	O.P.		commencing epithelioma	29/1
Edwards 1157 George	M	74	17,506	K. Scott	O.P.	cheek	Epithelioma	29/1
Nicholson Robt ?	M	65	17,509	Tait	4	prostate	Carcinoma	29/1
Bowtell 1134 Lila	F	45	17,513	K. Scott	O.P.	scalp	adeno-carcinoma	31/1

1154 Rustem Emin	M	50	17,521	K. Scott	O.P.	gum	only 1 piece sent, it shows some giant cell growth	3/2
Old Case ? Thomas Herbert	M	63	17,522	K. Scott	O.P.	lip	an epithelial invasion, more basal cell than squamous	3/2
1175 Mc Donald Alexander		60	17,528	K. Scott	16	lip	Epithelioma	5/2
1275 Holt Emma	F	67	17,531	Syme	5	colon	very confused looking, probably carcinoma	6/2
1207 Ellerton Emma	F	49	17,533	Lawson	9	breast	Duct carcinoma	8/2
1211 Hill Wm	M	43	17,535	Shaw	3	oesophagus	some active epithelium probably from near a growth	10/2
1144 Morrissey Thos	M	48	17,536	K. Scott	O.P.	lip	Epithelioma	10/2
1196 Cosgrove Michael	M	73	17,537	K. Scott	O.P.	ear	Epithelioma	10/2
1179 Wilderton ~~Cosgrave~~ Catherine	F	77	17,538	K. Scott	O.P.	finger	Epithelioma	10/2
1204 O'Neil Thomas	M	73	17,539	Harry	O.P.	Lip	Epithelomatous	10/2
1253 Smith Alice	F	49	17,541	Turner	9	breast	Carcinoma in breast probably commencing in gland	10/2
Wright Not found ?			17,542	Burke	O.P.	chest wall	Adeno-carcinoma	8/2
1087 Bullus John	M	54	17,544	K. Scott.	O.P.	lip	active epithelium, probably epithelomatous	10/2
910 Sly William	M	69	17,546	K. Scott.	O.P.	neck (gland)	Epithelioma	10/2
699 Gunn William	M	74	17,547	K. Scott	O.P.	neck.	Epithelioma	10/2
1142 Rumble Ruby	F	50	17,549	Harry	9	breast.	Carcinoma in breast + glands	8/2
1252 Morrison Margaret	F	70	17,556	Paul Jones	14	breast	small cell carcinoma in breast no growth gland	14/2
1133 Gilchrist Keith	M	40	17,559	K. Scott	16	tongue	Epithelioma	14/2
? 1261 Hallgren Stela	F	59	17,560	Paul Jones	11	breast	Carcinoma in breast + glands	14/2
Raisbeck Francis ?	M	58	17,565	Kelly	O.P.	back	Looks definitely neoplastic ? melanoma or endothelioma	17/2
1190 Lange Herbert	M	48	17,574	M'Meekin	18	gland	suggests lympho-sarcoma	17/2
1085 Fry Edgar	M	50	17,575	Harry	1	colon	adeno-carcinoma	17/2
1220 Smith Joseph	M	54	17,577	Paul Jones	11	lip & glands	commencing epithelioma of lip, no growth in glands	19/2
1236 Solly Alice	F	47	17,579	Syme	5	nodule peritoneum	mucoid carcinoma	19/2
1170 Bates Eliza	F	68	17,583	K. Scott	Ra		adenoid type of epithelioma	19/2
1159 Edwards George	M	74	17,584	K. Scott	Ra.	glands	Epithelioma	19/2
Old Case ? Shurs Eliz. a.	F	74	17,590	K. Scott	Ra	nose	Rodent ulcer rather adenoid in type	21/2
1212 Kinnish Jessie	F	42	17,612	Paul Jones	2	breast	Carcinoma of breast + gland	26/2
1173 Kerr Charles	M	52	17,613	K. Scott	O.P.	eyelid	suggests epithelioma rather than rodent	26/2
1224 Stonge Sybil	F	42	17,617	Turner	9	breast	Carcinoma + chronic mastitis	28/2
1243 Schinlick Frederick	M	65	17,619	K. Scott	Ra		Epithelomatous	28/2
1272 Rainey Arthur	M	74	17,623	Scantlebury	3	pharynx	Epithelioma	28/2
1232 Bermingham Eliz	F	48	17,628	Turner	8	breast	Carc in breast, no growth found in gland	3/3
1201 Canny Annie	F		17,634	K. Scott	O.P.	nose	adenoid type of epithelioma	5/3

August 1941

Napier David 1520	M	50	18,172	Stephens	32	penis	Epithelioma	1/8
McDonald Godfrey 1604	M	84	18,173	K.Scott	O.P.	ear	some epithelomatous tissue present	1/8
Esposito Louise 1622	F	50	18,178	Syme	4	breast	Carcinoma no growth found in gland	1/8
Stark Christina 1650	F	57	18,179	K.Scott	O.P.	cervix	Epithelioma	1/8
~~Heibel Wm~~	M	46	18,181	P. Jones	O.P.	mouth	hyperplastic epithelium suspicious	1/8
Hall 1640 Lily	M	48	18,188	Syme	4	breast	Carcinoma of breast & glands	6/8
Mason 1547 Carrie	F	55	18194	K.Scott	16	cervix	Epithelioma	6/8
Clarke 1633 Thomas	M	59	18,195	P. Jones	11	gland	Carcinoma	6/8
Barton-Kerrick 696 Doris	F	51	18,200	K.Scott	O.P.		Carcinomatous tissue	8/8
Billings 1976 Alfred	M	39	18,215	Burke	O.P.	abdominal wall.	Carcinomatous, no definite evidence of origin possibly adrenal or kidney	11/8.
McQueen 1612 Ruby	F	58	18,217	Harry	1	rectum	Carcinoma of bowel & commencing in glands	13/8
Betts 1525 Charles	M		18,225	K.Scott	O.P.	penis	Epithelomatous	13/8
Bavin 1322 Amelia	F	48	18,226	K.Scott	16	breast	small spot of what ~~might be~~ carcinoma but nothing so definitely marked as last spec.	13/8
Schroder 1627 Eleanor	F	76	18,228	K.Scott	O.P.	eyebrow	Epithelioma	15/8
Radnell 1629 Chas	M	57	18,234	Searby	11	bowel	adeno-carcinoma	18/8
Carr 1689 Elizabeth	F	58	18,236	K.Scott	O.P.	cervix	Epithelioma	18/8
Scott 1678 Walter.	M	73	18,237	K.Scott	O.P.	ear	Epithelioma	18/8
Doran 1480 Arthur	M	69	18,238	K. Scott	O.P.	ear	Epithelomatous, cells spindly of radiation result	18/8
Stork 1581 Edward	M	65	18,242	Syme	5	bowel	adeno-carcinoma	20/8
Jones 1666 Pat	M	69	18,243	Paul Jones	11	lip	Epithelomatous	20/8
Smith 1643 Myrtle	F	47	18,246	Syme	4	breast	suggests commencing carcinoma no growth in gland	20/8.
[illegible] 1696 Mary.	F	58	18,248	Kilmington	9	breast	Carcinomatous	22/8
Forsyth 1692 George	M	60	18,254	K.Scott	O.P.	fore-head	Rodent ulcer	22/8
Wilson 1648 Leonard	M	47	18,267	K.Scott	16		Epithelomatous	27/8
McDonald 1496 Mary	F	65	18,272	K.Scott	O.P.	breast	Carcinomatous	29/8

September 1941

Potts 1721 Frederick non malight.	M	36	18,277	Turner	8	leg	Non malight.	
Monk 1721 Leslie	M	58	12,281	Turner	9	gall bladder	Adeno Carcinoma	3/9
Stanway 1530 Eliz	F	68	12,293	upjohn	14	glands	glands invaded & growth	5/9.
Smith Chas	M	66	18,296	Syme	5	kidney area	mainly inflammatory but one small suggests Carcinoma	8/9
Quilty 1625 John	M	61	18301	K.Scott	32	lip	Epithelomatous	10/9
Taylor 1720 Jane	F	60	18,302	Chambers	2	ovarian cyst.	Carcinoma, origin uncertain small bit of ovarian tissue, in outside wall of cyst.	10/9
~~Fordham Allen~~	M	17	18,307	P. Jones	11	fore head	probably an early melanoma	10/9
Fisk 1727 George	M	64	18,311	K.Scott	16	ear	Epithelioma	12/9
Betts 1525 Chas	M	54	18,325	Syme	5	penis	Epithelioma in one gland	15/9

September 1941

1698 Mallows Robert	M	80	18,328	K.Scott	16	ear	Rodent ulcer	17/9
1979 Bent Frank ✓	M	85	18,330	K.Scott	Ra	face	probably slow growing epithelioma	17/9
1802 Sheldon			18,333	K Scott	Ra	throat	Epithelioma	18/9
1801 Wx Frederick	M	75	18,334	K.Scott	Ra	mouth	Commencing epithelioma	18/9
1433 Lindsay Charles	M	63	18,340	Kilwinston	1	glands neck	Epithelomatous	18/9
1828 Eggleston Leslie	M	48	18,342	Syme	OP	ear	Epithelioma	18/9
Old Case Hart Robert	M	71	18,351	K Scott	OP	? ear	probably atypical epithelioma	22/9
1708 Moore Edward	M	85	18,355	K.Scott	OP	sublingual region	Epithelioma	24/9
1619 Kendall Thomas	M	62	18,357	Stone	8	colon	Carcinoma	24/9
1831 Jones Frederick	M	62	18,359	Stone	OP	? rectum	Carcinoma	24/9
1803 Barkels Emma	F	64	18,362	P. Jones	2	lip & glands	Epithelioma of lip, no growth in glands	24/9
1734 O'Neil Will	M	59	18,368	Syme	5	stomach	Carcinoma, no growth found in gland	26/9
Old Case Halliday Albert	M	-	18,376	Oct 1941. K.Scott	OP	ear	probably epithelioma, but specimen too small for definite diagnosis	1/10
1810 Quick Jack	M	42	18,382	P. Jones	11	penis glands	Epithelioma of penis, no definite growth in glands	1/10
1807 Geddes Catherine	F	52	18,383	K.Scott	16	uterus	epithelioma	1/10
1740 Kerr Pearl	F	20	18,384	K.Scott	16	back groin (gland)	papillary melanoma benign, but tending to become active — appears to be neoplastic, too small to determine type	3/10
1927 Williams Olive	F	52	18,386	Harry	OP		shows some epithelomatous invasion	3/10
1823 Perry John	M	71	18,390	K.Scott	OP	ear	Epithelioma + a scrap of rodent ulcer tissue	3/10
1814 Savage William	M	45	18,391	Harry	1	lip & glands	Early epithelioma of lip, no growth in glands	3/10
1924 Bruton Seymour	M	32	18,411	P. Jones	11	bladder	suggests carcinoma	7/10
~~Wallis Maud~~	F	43	18,412	P. Jones	2	neck	Angioma lymphangioma	8/10
1842 Aird Marie	F	47	18,424	Searby	2	bowel	Carcinoma, no growth in gland	8/10
1836 Jenkin Sarah	F	71	18,426	K.Scott	OP	cheek	Spec very superficial. I think epithelioma	8/10
1848 Spikin Arthur J.	M	40	18,427	Upjohn	10		Tissue necrotic, suggests carcinoma	8/10
1839 Hetcher Eliz	F	75	18,436	K.Scott	16	eyebrow	Epithelomatous	8/10
1838 Calgin Wm	M	73	18,443	Searby	11	lip	Epithelioma	15/10
Todd Beatrice	F	36	18,445	Gladell	2	uterus	Sarcomatous degeneration of myoma	15/10
1870 Stuckey Myrtle	F	46	18,448	K.Scott	OP	cervix	Epithelomatous	17/10
Crocker Jean	F	-	18,451	Syme	OP	hand	commencing epithelioma	20/10
1865 Mathews Roy	M	34	18,455	Kilwinston	1	kidney	Carcinomatous	20/10
1924 Baring Maggie	F	53	18,457	Stone	OP	lip	Epithelomatous	20/10
1879 Walsh Jane	F	60	18,462	Harry	9	breast	Carcinoma in breast + glands	22/10
~~Bartlett~~	-	-	18,464	Harry	OP	finger	Haemangio endothelioma	22/10
1880 Roy John	M	63	18,465	K.Scott	OP	lip	Epithelioma	22/10
1880 Roy John	M	63	18,466	K.Scott	OP	hand palate	Epithelioma	22/

~~Bowles Ethel~~	F	48	18,467	Cowen	30	axilla gland.	suggests Hodgkins disease	22/10
Bearley Vincent	M	72	18.468	Rawson	20	lymph gland	Sarcoma endothelial type	24/10
1878 Kneen Lily	F	56	18,476	Kilwyston	9	stomach	carcinomatous infiltration + in adjacent glands	24/10
Anderson Betty	F	42	18,478	Kellaway	26	axilla gland	Hodgkins Disease	24/10
1827 Evans Robt	M	76	18482	K.Scott	Ra	ear	epithelioma	24/10
1826 Callow James	M	76	18,483	K.Scott	Ra	nose	rodent ulcer	20/10.

18,497	1933	WARD, Gwen,	38,	wd.4,	Lymphglands. Carcinomatous.	29/10
18,503	1543	FOLEY, James,	40,	R.O.P.	Lip. Early epithelioma.	29/10
18,513	1873	SMITHAM, Wm.,	66,	wd.5,	Kidney. Clear cell carcinoma.	3/11
18,523	1903	DUFF, Daisy,	59,	wd.4,	Breast. Carcinoma in breast & gland.	6/11
18,524	1144	MORRISSEY,	49,	wd.8,	Lymphgland. Epithelioma in on gland.	6/11
18,525	724	PEARSON, Wm.,	61,	R.O.P.	Buccal surface of cheek. Epithelioma.	6/11
18,520	old	CALLINAN, John,	60,	R.O.P.	Skin. Active epithelioma.	7/11
18,522	1935	LLEWELLYN, Fran.,	48,	wd.2,	Liver. Carcinomatous growth, not like secondary from intestine.	7/11
18,531	1851	JONES, Fred.,	62,	wd.8,	Rectosigmoid junction. Adenocarcinoma, growth in larger gland.	7/11
18,532	1177	SHANKS, Thomas,	74,	R.O.P.	Tongue. Epitheliomatous.	7/11
18,536	1883	BUCKLEY, Donald,	33,	R.O.P.	Skin. Epithelioma.	7/11
18,537	1886	BAKER, Sydney,	56,	R.O.P.	Lip. Epithelioma.	7/11
18,538	1885	SELLICK, Arthur,	76,	R.O.P.	Skin. Epithelioma.	7/11
18,545	1914	KENNEDY, John,	53,	wd.16,	Lip. Early epithelioma.	7/11
18,546	1896	MAHADY, John,	68,	wd.16,	Lip. Epitheliomatous.	7/11
18,552		CLAYTON,	76,	wd.5,	Rectal polyp. Adenomatous growth but suggesting commencing carcinoma.	12/11
18,554	1959	BOOTH, Fred,	62,	wd.1,	Bladder. Carcinoma.	12/11
18,556	1906	BARTLETT, Wm.,	65,	R.O.P.	Lip. Epithelioma.	12/11
18,560		CONBROUGH, A.D.,	73,	O.P.	Mouth. Epitheliomatous.	14/11
18,565	1940	STEWART, Alex.,		wd.11,	Lip. Hyperplasia of epithelium suggesting early epithelioma.	17/11

~~O.P. → 22/11/41~~

March 1941

Birmingham Eliz. 1232	F	48	17,628	Turner	9	breast	carcinoma in breast, no growth in gland	3/3/41
Canny Annie 1201	F	-	17,634	K.Scott	O.P.	nose	adenoid type of epithelioma	5/3/
Power Ellen 1237	F	63	17,635	Harry	9	breast	adenocarcinoma of breast, glands cystoid, no growth in them	5/3
McIntyre Ian 1439	M	2	17,637	K.Scott	16	nose	delicate spindle cell tissue probably sarcomatous with an inflammatory surface	7/3
Williams Anne 1258	F	41	17,639	K Scott	OP	os	Epithelioma	7/3
Johnston William 1260	M	58	17,640	K.Scott	OP	mouth	Epitheliomatous	7/3
Fitzgerald Eliz. 1279	F	57	17,641	Turner	9	colon	adeno-carcinoma + in gland	7/3
Roberts Olive 1241	F	41	17,642	Upjohn	14	breast	Carcinoma in glands, no definite growth found in breast	7/3
Ash Sydney 1254	M		17,648	K. Scott	16	bladder	Carcinoma	10/3
Wilkinson Ethel 1296	F	59	17,652	Chambers	OP	cervix	Epithelioma	12/3
Webb Mabel 1246	F	44	17,655	K.Scott	16	leg	Active melanoma	12/3
~~Brandt~~ Oscar 135	M	-	17,662	K Scott	O.P.	hand	irritated epithelial surface + some tendency to downgrowth	14/3
Dobson Hazel 1429	F	30	17,664	Fitts	19	bronchus	suggests a carcinomatous growth	14/3
O'~~Day~~ Dea Margaret 1478			17,667	Burke	OP		invaded + scirrhous carcinoma	17/3
Richards John 1199	M	75	17,670	K.Scott	16	neck	Epithelioma, many cell nests	17/3
Rogan Ethel 1245	F	55	17,675	K.Scott	16	foot	active melanoma	17/3
O'Neil Thomas 1204	M	73	17,676	K.Scott	16	lip	Epithelioma	17/3
Ashworth Henry 1335	M	70	17,680	Syme	5	gland	active growth suggesting secondary melanomatous growth	19/3
Jordan. W.	·	39	17,686	Burke	O.P.	leg	Xanthoma	26/3
France John 1641	M	32	17,693	Price	7		fibroid myxoma or mucoid meningioma	21/3
Turner Ada 1357	F	63	17,697	Chambers	OP	cervix	Epithelioma	21/3
Sell Hannah 1276	F	70	17,704	Upjohn	14	breast	carcinoma in breast + glands	26/3
Minnie Cecilia ? Non malign.	F	77	17,705	Syme	OP	neck	melanomatous	26/3
Seabridge Wm 1311	M	65	17,707	K.Scott		foot	Epitheliomatous	26/3
Inder Jane 1303	F	87	17,710	P. Jones	16	arm hand	Epitheliomatous growths on hand + forearm	28/3
Allchin Thomas 1305 Old Cope	M	-	17,711	K Scott	16	gland	shows some melanomatous tissue	28/3
Barber Wm. J.	M	15	17,712	Syme	O.P.	forehead	suggests a fibro lymphangioma	28/3
Fisher Sarah 1294	F	69	17,715	P. Jones	2	breast	carcinoma in breast + glands	28/3
Huggard William 1221	M	-	17,716	K.Scott	32	neck	Epithelioma	28/3
Gill William 1286	-	-	17,717	K.Scott	16	tongue	Epithelioma	28/3
Baird Amelia 1322	F		17,722	K.Scott	OP	breast	carcinoma	28/3
Pridmore Wm 1317	M	70	17,727	Burke	10	bowel	adeno-carcinoma	31/3
~~Hetter~~ Carter Nellie 1288	F	50	17,734	Stone	9	breast	carcinoma in breast + axillary glands, none in other glands	2/4
Schimlich Fred 1243	M	69	17,739	K.Scott	16	cheek	atypical epithelioma	2/4

April 1941

Williamson 1399 ~~Williamson~~	Edith	F	59	17,740	K. Scott	16.	cheek	atypical epithelioma	2/4
Jordan 1287	Eliz	F	73	17,744	K. Scott	O.P.	leg	Rodent ulcer	5/4
Spooner	Christina	F	40	17,748	Stone	O.P.	gland	suggests Hodgkins disease	7/4
Eason 1366	Ann	F	81	17,749	Burke	O.P.	face	Rodent ulcer type of growth	7/4
Edgar 1268	Francis Ed.		60	17,751	P. Jones	11	oesophagus	Epithelomatous	4/4
King	John	M	52	17,756	Searby	11	pharynx	squamous epithelium	7/4
Non english ? other Male									
Featherstone 1532	Henry	M	83	17,757	K. Scott	O.P.	gland	Epithelomatous	7/4
Scott 1324	Eliz.	F	50	17,758	K. Scott	O.P.	cervix	Epithelioma	7/4
Puddy 1376	John	M	64	17,759	Miller	24	glands	suggests lympho-sarcoma	7/4
Whitfield 1341	—	-	67	17,767	Stone	8	arm	Sarcomatous - ? Rhabdo-myo-sarcoma	9/4
Reynolds 1351	Myrtle	F	43	17,778	Searby	2	breast	Carcinoma of breast + gland	15/4
Laidler 1355	Flora	F	44	17,779	Upjohn	14	breast	Carcinoma of breast + gland	15/4
Miller 1465	Arthur	M	48	17,783	Burke	O.P.	axilla	suggests commencing epithelioma	15/4
Broussard 1409	Ellen	F	53	17,785	Hurley	30	gland	Adeno-carcinoma	16/4
Berry	Thos.	M	72	17,786	McMeekin	18	glands	active cellular tissue suggesting an active Hodgkins or possibly a lympho-sarcoma	18/4
Stafford	Florence	F	74	17,787	Burke	O.P.	nose	Basal cell adenoid type of growth	21/4
Jennings 466	Ada	F	76	17,795	K. Scott	O.P.	sub. max	Epithelioma	22/4
Robbins 1358	Richard	M	64	17,803	K. Scott	O.P.	lip	Epithelomatous	23/4
Parish 1348	George	M	72	17,804	K. Scott	O.P.	lip	Epithelomatous	23/4
Bolton 1377	Bertha ✓	F	65	17,806	Turner	9	bowel	carcinomatous	28/4
Murray 1513	John	M	65	17,811	Upjohn	10	bladder	carcinoma	29/4
McDonald 1404	Godfrey	M	84	17,812	K. Scott	O.P	ear	Epithelioma	29/4
McDonald	Godfrey	M	84	17,813	K. Scott	O.P.	nose	Rodent ulcer	29/4
Griffiths 1370	Daisy	F	35	17,815	Syme	4	breast	Carcinoma in breast no growth in glands	29/4
Edwards 1388	Berlie	M	37	17,821	Syme	5	glands	Epithelioma	30/4
Dobson 1429	Hazel	F	32	17,830	Fitts	19		Carcinoma	30/4
Skillan 1462	Alex	M	73	17,834	K. Scott	16	palate	Epithelomatous	2/5
Smith 1389	Norman	M	19	17,839	Searby	11	inguinal glands	Myxo-sarcoma	2/5
Laird 1420	Richard	M	76	17,845	K. Scott	OP	palate	Epithelioma, no adeno epithelioma	5/5
Seacombe 1412	Florence	F	43	17,857	Upjohn	14	breast	Carcinoma in breast, no growth in gland	7/5
Gillespie 1394	—	-	-	17,858	Searby	11	colon	Blood clot + inflammatory tissues a few gland tubes suggesting carcinoma.	9/5
Longmore 816	John	M	36	17,863	K. Scott	O.P.		scraps show rodent tissue	9/5
Elliot 1446	George	M	76	17,864	Kilington	1	prostate	shows carcinomatous patches	9/5
Austin 1382	Harry	M	69	17,869	K. Scott	O.P.	lip	shows epithelial hyperplasia + patch of rodent like tissue.	9/5

May 1941.

McInerny ? 1964			17,872	Burke	O.P.	hand	Epithelioma		12/5
Bentley 1490	Jean	F	30	17,874	Upjohn	4	spine	fibro-meningioma	12/5
Brown 1408	Lillian	F	59	17,876	Turner	9	stomach	mucoid carcinoma	12/5
Bent 1462	Archie	M	68	17,878	Burke	O.P.	gland	Carcinomatous	12/5
Morris 1374	Thomas	M	52	17,882	K. Scott	16		Epithelioma	12/5
Roberts 1422	Jas	M	52	17,884	Harry	1	stomach	Carcinoma	14/5
Olin 1459	Jessie	F	72	17,898	Upjohn	14	breast	Carcinoma	19/5
Read 1523	Alfred	M	62	17,903	K. Scott	O.P.	cheek	Basal cell type of carcinoma	19/5
Moriarty 1461	Arthur	M	67	17,904	K. Scott	O.P.	hand	Epithelomatous	19/5
Williams 1448	Helen	F	43	17,905	K. Scott	O.P.	breast	Carcinoma of breast, no growth in glands	21/5
Booth 1422	Wm	M	77	17,911	K. Scott	O.P.	cheek	Epithelioma	21/5
Rule 956	Cecilia	F	82	17,912	K. Scott	O.P.	arm	Epithelioma	21/5
Thomas 188	Maisie	F	49	17,916	K. Scott	O.P.	gland	stains badly, but looks malignant	21/5
Wise ? Mrs	Non malign. Norfolk	M	71	17,919	Kilvington	1	cheek	chr. inflammation, a small island of epithelium in the connective tissue may be rodent ulcer not typical	22/5
Harvey 1390	Mathew	M	82	17,927	Upjohn	10	caecum ~~colon~~	Carcinoma + glands	26/5
Dean 1465	Rosie	F	55	17,926	Upjohn	14	breast	Carcinoma in breast + glands	26/5
Dobson 1479	Hazel	F	31	17,928	Searby	2	lung	Carcinoma on bronchus, suspicious in glands	26/5
Wallace 1491	Wm	M	–	17,929	Turner	8	prostate	Carcinomatous	26/5
Simmons	Les	M	15	17,936	Syme	O.P.	skin	Angiomatous c̄ haemorrhage	28/5
Jones 1468	Arthur	M	41	17,937	Syme	5	arm	osteogenic sarcoma (chondro-sarcoma)	30/5
Hekker	–	–	–	17,942	Kelly	O.P.	cheek	angioma	30/5
Harding 1471	Grace	F	43	17,948	Harry	9	breast	Carcinoma in breast + glands	2/6
Handley 1519	John	M	69	17,950	Harry	1	prostate	Carcinoma	2/6
Gonnon 1502	Pearl	M	30	17,955	Chambers	O.P.	cervix	Carcinoma	4/6
Stewart	Francis	F	36	17,961	Syme	4	glands	suggests Hodgkins disease, not very typical	6/6
Lindsay 1433	Charles	M	63	17,981	K. Scott	16	lip	Epithelioma	11/6
Gonnon 1502	Pearl	F	30	17,994	K. Scott	16	cervix	Carcinoma	18/6
Stanway 1530	Elizabeth	F	68	17,995	K. Scott	O.P.	tongue	Epithelioma	18/6
Higgins 1529	Thomas	M	82	17,996	K. Scott	O.P.	cheek	Epithelioma	18/6
Hardy 1623	Old Page Thomas	M	56	17,997	K. Scott	16	parotid	Epithelioma	18/6
Johnston 1536	Henry	M	65	18,012	K. Scott	O.P.	lip	Epithelioma	23/6
Cadd 1499	Wm	M	60	18,013	Syme	5	stomach	Carcinoma	23/6
Morgan 1538	Ellen	F	48	18,017	Syme	4	breast	Carcinoma in breast + gland	25/6
Betts 1525	Charles	M	54	18,021	Syme	5	penis	Epithelioma	25/6

Edmonds 1536	Harriette	F	84	18,022	K.ScA	O.P	parotid	Epithelial tumor of parotid gland	25/6
Finch ? Old Case	Elizabeth	F	72	18,023	K.ScA	O.P.	nose	small cell carcinoma of nasal passages	27/6
Morris 1374	Thomas	M	32	18,024	K.ScA	16	gland	some suspicious cells in gland tissue	25/6
Hope 1521	Ellen	F	92	18,026	K.ScA	O.P.	lip	Epitheliomatous	25/6
Higgins 1501	Clarence	F	48	18,027	K.ScA	O.P.	lip	Epithelioma	26/6
Walsh 1493	Charles	M	60	18,030	K.ScA	O.P.	rectum	carcinoma	27/6
Curtis 1516	Juanita	F	37	18,031	K.ScA	O.P.	anus	Adeno-carcinoma	27/6
Kendall 1551	Edith	F	58	18,034	Chambers	O.P.	cervix	Epithelioma	27/6
Motherwell 1533	Margaret	F	49	18,041	Searby	2	breast	Carcinoma in breast + gland	30/6
				July. 1941.					
Olsen 467	Wm	M	47	18,043	Harry	1	neck gland	shows some infiltration & epitheliomatous growth	2/7
Robinson 1542	James	M	81	18,051	K.ScA	O.P.		rodent ulcer	2/7
Selbridge 1550	Walter	M	75	18,058	K.ScA	O.P.	cheek	Epitheliomatous	4/7
Brittain 1614	Augusta	F	46	18,062	K.ScA	O.P.	mandible	Giant cell growth	2/7
Thorn 1556	Arthur	M	55	18,069	Upjohn	10	parotid	probably an atypical carcinoma	7/7
Hardy 1645	John	M	62	18,072	Pennington	28	bronchus	fibrous tissue & tiny scrap of growth suggests carcinoma	7/7
Wirtanen 1656	May	F	33	18,079	Kilington	9	shoulder	melanomatous	9/7
				Old Case					
Cousins ?	Emily	F	47	Non malign- 18,082	P. Jones	O.P.	forearm	commencing melanoma	9/7
1963 ?									
Robbins	Florence	F	31	18,086	Chambers	2	uterus	adeno-carcinoma	9/7
				Miss Hale ✓					
Gordon 1569	John	M	83	18,087	K.ScA	O.P.	ear	Epithelioma	9/7
Walsh 1616	Philip	M	41	18,090	Harry	O.P.	foot	Epithelioma	9/7
Doran 1480	Arthur	M	69	18,094	K.ScA	O.P.	neck	atypical epithelioma	11/7
Gow 1573	Janet	F	89	18,095	K.ScA	O.P.	parotid	atypical epithelioma	11/7
Darby 1599	George	M	66	18,103	Stone	O.P.	anus	epithelioma	14/7
Hevey 1562	John	M	77	18,112	K.ScA	16	tongue	Epithelioma	16/7
Clark 1585	Benjamin	M	66	18,113	K.ScA	O.P.	neck	Epithelioma	16/7
Hall 1086	Edward	M	-	18,114	K.ScA	O.P.	-	small round cell infiltration suggests lympho-sarcoma	18/7
M'Connell 1595	~~Arthur~~ Alban	M	49	18,115	K.ScA	O.P	-	shows horny thickened epithelium probably commencing epithelioma	18/7
Thomas 188	Maisie	F	51	18,116	K.ScA	-	breast	carcinomatous	18/7
Taylor 1634	Elsie	F	46	18,126	Burke	14	breast	marked epithelial ~~hyperplasia~~ proliferation + confusion suggests commencing carcinoma	21/7
Walsh 1616	Philip	M	41	18,127	K.ScA	O.P.	foot	Epithelioma, tissue rather necrotic	21/7
Hassell 1601	Mabel	F	68	18,128	K.ScA	O.P.	neck	Epitheliomatous	21/7
M'Namara 1603	James	M	70	18,129	K.ScA	O.P.	ear	Epithelioma	21/7
Kendall 1551	Edith	F	52	18,130	K.ScA	16	cervix	Epithelioma	21/7
Gill 1286	William	M	50	18,131	K.ScA	16	tongue	Epithelioma still present	21/7

July. 1941

Williams Jas 547	M	58	18,142	Syme	15	bladder	Carcinoma	29/7
Young George 1867	M	75	18,144	Searby	11	pharynx	epithelial lining suggests commencing epithelioma	28/7
Skews Emily 1594	F	53	18,145	Turner	9	parotid	epithelial tumor of salivary gland	24/7
Wilson Leonard 1648	M	47	18,147	P. Jones	O.P.	mouth	Epithelioma	25/7
Edwards George 1157	M	74	18,149	K. Scott	O.P.	face	epithelioma	25/7
Lee Mary 1618	F	66	18,150	K. Scott	O.P.	rectum	Carcinoma	25/7
Russell John G. 1654	M	36	18,153	Searby	11		Giant cell tumor & lipoid material	25/7
Bridges R. 1680	1	46	18,155	Harry	O.P.	tongue	Epithelioma	25/7
Aldersen Wm 1560	M	70	18,157	Searby	11	gland	Carcinomatous	28/7
Bridges Rae	M	20	18,159	Stone	O.P.	-	suggests a glomus tumor	28/7
Shanks Thomas 1177	M	74	18,170	K. Scott	16	sub max gland	Epithelioma	30/7

August. 1941.

18,629	WEBB, Mabel, 1246	wd. 9.	Skin. Active melanoma.	1/12
18,632	DAVIS, Bolton, 2025	O.P.	Rectum. Adenocarcinoma.	1/12
18,633	MCINTOSH, Ruby,	O.P.	Rectum. Adenocarcinoma.	1/12
18,634	TATE, June, 2013	wd.14.	Lump in groin. Sarcoma (active looking cells).	1/12
~~18,639~~	~~WEBB, Mabel,~~	~~wd. 9.~~	~~Skin. Active melanoma.~~	~~1/12~~
18,639	ENEVER, Eliza, 1984	wd. 4.	Sigmoid colon. Adenocarcinoma.	3/12
18,642	PRISMALL, Isobel, 1874	wd. 9.	Descending colon. Adenocarcinoma, mostly necrotic.	3/12
18,644	FARDON, Jessie,	wd. 2.	Ovarian cyst. Adenocarcinoma.	3/12
18,649	CAYZER, Arthur, 1988	wd. 5.	Mass on leg. Glands from groin. Active melanoma, also in gland.	3/12
18,656	BRADLEY, Norman, 1991	R.O.P.	Penis. Epithelial downgrowths and irritation suggesting epithelioma.	8/12
18,659	ROBE, Elizabeth, 1968	wd. 9.	Rectum. Adenocarcinoma.	8/12
18,667	BROCK, Patrick, 2002	wd.11.	Lip. Epithelioma in lip, no growth in glands.	9/12
18,660	STANNAGE, Wm., 1940	wd. 9.	Rectum. Adenocarcinoma.	10/12
18,668	TORANTO, Nunziato, 2024	wd.26.	Tissue from bronchus. Tissue necrotic, but suggests carcinoma.	10/12
18,670	ANDERSON, Charles, 1947	wd. 1.	Bladder. Carcinoma.	10/12
18,671	HARBRIDGE, May,	O.P.	Cervix. Adenocarcinoma.	10/12

18,570	PERRY, Fred.,[1930]	R.O.P.	Skin. Active melanoma.	19/11
18,571	CARROLTON, Geo.,[1917]	wd.16.	Skin. Squamous type of epithelioma.	19/11
18,572	BIGGINS, Kate,[1928]	wd.16.	Cervix. Epithelioma.	19/11
18,578	DAVIES, Sara,[1996]	wd. 4.	Ascending colon. Carcinoma.	19/11
18,580	MCMAHON, Alice,[1949]	wd. 9.	Breast. Carcinoma in breast and glands.	21/11
18,582	HINDLE, Illingworth,[1929]	R.O.P.	Lip. Epitheliomatous.	21/11
18,583	O'BRIEN, Daniel,[1905]	R.O.P.	Lip. Epitheliomatous.	21/11
18,591	COX, John,[1969]	R.O.P.	Tonsil. Epithelioma.	24/11
18,592	DICKINS, Geo.,[1958]	wd.11.	Lymphgland. Carcinomatous.	24/11
18,594	MACUMBER, Phyllis,[1981]	wd. 9.	Lump in groin. Active growth suggesting endothelioma rather than carcinoma.	24/11
18,595	ROBERTSON, Marj.,	wd. 4.	Bladder. Suggests malignant papilloma, but specimen was very small.	24/11
18,596	MOODY, Harry,[1956]	wd.10.	Stomach. Carcinoma.	24/11
18,598	CALLINAN, John, Gld Bas	wd.16.	Skin. Above ear - rodent ulcer. Below ear - spot of rodent and larger area of squamous epithelioma.	24/11
18,600	FOSTER, Pearl,[1957]	wd. 9.	Breast. Carcinoma with large, flattened cells.	24/11
18,611	YOUNG, Jane,[1639]	wd.16.	Tongue. Epitheliomatous and inflammatory tissue.	26/11
18,[illegible]2	MAY, Samuel,[1907]	wd.16.	Tongue. Epithelioma.	26/11
18,613	BENNETT, [illegible] 2008	O.P.	Skin. Epithelioma.	26/11
18,615	DEVINE, Ambrose, Gld	R.O.P.	Skin. Shows epithelial invasion suggesting epithelioma.	26/11
18,616	BARING, Maggie,[1927]	R.O.P.	Lip. Epithelioma.	26/11
18,617	WEBB, John,[1916]	R.O.P.	Lip. Epithelioma.	26/11
18,618	COOPER, John,[1875]	wd.5.	Colon. Adenocarcinoma.	26/11
18,620	HARVIE, [1953]	wd.10.	Pelvi-rectal flexure. Adenocarcinoma.	28/11
18,621	MARTIN, Edith,[1895]	wd. 9.	Breast and glands. Carcinoma in glands.	28/11
18,622	BOGLE, Thomas.[1319]	R.O.P.	Skin. Epithelioma.	28/11

18,687	COXON,	Cecilia,	31,	wd.14.	Breast.	Duct carcinoma.	15/12
18,690	TOMLIN, 450	Daphne,		R.O.P.	Lip.	Epithelioma.	15/12
18,692	WALSH, 846	Ruby,	39,	R.O.P.	Cervix.	Adenocarcinoma.	15/12
18,701	WATERS, 2010	Edward,	41,	R.O.P.	Lip.	Epithelioma.	17/12
18,702	FURNESS, 2009	Ena,	49,	R.O.P.	Lip.	Epithelioma.	17/12
18,703	BOGLE, 1319	Thomas, Cld	71,	R.O.P.	Skin.	Epithelioma. ROP. 4518	17/12
18,706	FENNER,	Margaret,	58,	R.O.P.	Skin.	Active melanoma.	19/12

Wd. 16 - Allen Y266

Lewis D.T.

Pesach 6555

18,717	MAXWELL, Thos.,	55,	wd.3.,	Epiglottis. Epitheliomatous.	22/12
18,723 2032	FORSYTH, Florence,	63,	wd.4.,	Breast. Carcinoma.	24/12
18,728 2026	HOLMAN,		wd.4.,	Breast. Small area suggesting an early duct carcinoma.	24/12
18,724 2033	BLACK, Richard,	55,	wd.1.,	Parotid tumour. Sarcoma with some giant cells, more malignant than benign.	24/12
18,726 2006	CHILTON, Arthur,	74,	R.O.P.	Tragus left ear. Epithelioma.	24/12
18,729 2069	GRANT, James,	27,	wd.11,	Kidney. Carcinoma suggesting kidney origin.	24/12
18,730 2044	LANDER, Thomas,	81,	R.O.P.	Skin. Rodent ulcer.	24/12
18,733 1616	WALSH, Phillip, (2)	41,	R.O.P.	Skin. Epithelioma.	30/12
18,734 2110	HOLE, John,		O.P.	Skin. Marked hyperkeratosis and cellular reaction in dermis with small areas of tissue suggesting epithelioma.	30/12
18,740 1997	RUSSELL, Angus,	66	wd.1.	Rectum. Adenocarcinoma.	31/12
18,741 2056	WHITE, Hugh,	75	R.O.P.	Skin. Rodent ulcer.	31/12
18,745 2036	PATERSON, James,	79	wd.16.	Mouth. Epithelioma.	31/12
18,746 2041	SEXTON, Thomas,	73	wd.11.	Colon. Adenocarcinoma.	31/12
18,754 1616	WALSH, Phillip,	41	wd. 1.	Skin. Epithelioma. 1941	9/1
18,765	LUSCH, Charles,	49	wd.5.	Testis. Carcinoma (Seminoma)	14/1

Maxwell Thos. } Histories not
Lusch Charles } available yet 15/1/42.

HOLE John. M42M 19/12/41

6 Thomson St, Dennis From P.P.

Dr Kelly Lump in Rt. arm. 6 mths.
Syme Removed 6 mths ago by P.P. & has recurred.

Removed by Mr Syme in O.P.
no Ra. to date.

~~John Shaw~~

		M.	63.	wd. 1.	
18,923 2114	HAWKES, Alfred,			/ Sigmoid colon. Adenocarcinoma.	27/2
18,925 2234	JEFFREY, Stanley,		35.	wd. 5.	Rectum. Adenocarcinoma. 27/2
18,932 2186	MOSS, 1935 Case Florence,		50.	wd. 2.	Breast. Carcinomatous. 2/3
18,936 2187	HAMILTON, Kath.,			wd.14.	Breast. Carcinoma and in gland. 4/3
18,939 2206	STARES, Harry,		48.	R.O.P.	Mandible. Epithelioma. 4/3
18,940 2205	DUNN, Ray,		60.	R.O.P.	Ear. Epithelioma. 4/3
18,944 2189	ROBERTSON, Ellen,		75.	wd. 2.	Cervix. Epithelioma. 4/3
18,947 2251	ROWE, Colin.		26.	wd.16.	Cheek. Active melanoma. 4/3
18,952 2248	SWALLOW, Amy,		22.	wd.14.	Liver. Carcinoma. 4/3
18,961 2300	HICK, Ethel,		43.	wd. 2.	Ovary. Adenocarcinoma, more like an ovarian growth than intestinal. 6/3
18,967	SHAW, John,		32.	wd. 1.	Appendix. Carcinoid tumour. 6/3
18,971 2010	WATERS, Edward,		42.	wd. 9.	Lymphgland. Epithelioma. 6/3
18,974 2216	JASPER, Roy,		48.	wd. 1.	Colon. Adenocarcinoma. 6/3
18,977	MEDDINGS, Olive,		42.	wd. 2.	Breast. Adenocarcinoma. 6/3
18,979 2169	CROCKFORD, John,		56.	wd.16.	Lip. Epithelioma. 11/3
18,980 2136	O'DONNELL, James,		78.	wd.16.	Nose. Papillary form of epithelioma. 11/3
18,991	NUCKER, Kathleen, 1934 Case		42.	R.O.P.	Scalp. Active looking lymphoid tissue suggesting lymphosarcoma rather than Hodgkin's. 11/3
18,992 2197	SHUGG, Charles,		74.	R.O.P.	Cheek. Epithelioma. 11/3
18,993 2203	HANN, Andrew,		72.	R.O.P.	Nose. Very scrappy, small fragment, rather suggesting rodent ulcer, no epithelioma found. 11/3
18,997 2233	PASCINOS, Ennette,		39.	wd.14.	Adenocarcinoma. 13/3
19,001 1538	MORGAN, Mrs. Private patient		48.	R.O.P.	Cervix. Epithelioma. Dr. Gladell 16/3
19,004 2312	MOORE, Kathleen,		55.	R.O.P.	Mouth. Epithelioma. 16/3
19,005	BOULTON, William,		56.	O.P.	Breast. Adenocarcinoma. 16/3
19,008 2321	HALLAM, Margaret,		51.	wd.14.	Spine. Meningioma. 18/3
19,012 2181	SKELTON, Elizabeth,		62.	wd. 9.	Rectum. Adenocarcinoma. 18/3
19,015 750	TOMLIN, Daphne,		46.	wd.16.	Lip. Epithelioma. 18/3
19,022 568	KNOWLES, Chlorine,		37.	R.O.P.	Skin. Some epitheliomatous nodules. 16/3
19,027	APPLIN, Harry,		60.	wd. 1.	Stomach. Carcinomatous. 20/3
19,028 1954	CALLINAN, John, Old Case		61.	R.O.P.	Ear. Epithelioma. 20/3
19,029 2225	REES, Henry,		74.	R.O.P.	Wrist. Epithelial hyperplasia, probably epitheliomatous, but tissue is rather shallow. 20/3
19,039 2284	KOFOED, Malcolm,		48.	R.O.P.	Scalp. More like a rodent than a squamous epithelioma. 20/3
19,049 2199	BRIDGELAND, George,		84.	wd.16.	Epithelioma. 23/3
19,052 2028	MCINTOSH, Ruby,		53.	wd. 9.	Rectum. Adenocarcinoma. Adenomatous polyp. 25/3
19,053 2120	HAMLEY, Sadie,		48.	wd. 9.	Colon. Adenocarcinoma, no growth found in gland. 25/3
19,055 2265	WILLIS, Elizabeth,		62.	wd. 2.	Carcinoma in breast. No growth in glands. 25/3
19,056 2204	HAMS, Violet,		65.	wd. 9.	Duct carcinoma. 25/3
19,059 2244	SCAMMELL, William,		63.	wd.16.	Suggests salivary gland carcinoma. 25/3
19,060 2156	BUTLER, Elizabeth,		55.	wd.16.	Urethra. Epithelioma. 25/3
19,063 2318	SKELTON, George,		76.	wd.24.	Lymphglands. Adenocarcinoma. 25/3
19,067 2270	POLLARD, Alex.,		65.	R.O.P.	Nose. Rodent ulcer. 28/3
19,069 2243	STEWART, Jean,		23.	wd. 4.	Kidney. Papillary adenocarcinoma. 30/3
19,078	GREGSON, Thomas,		59.	R.O.P.	Skin. Rodent ulcer. 1933 Case 1/4
19,086 2269	SCHWAGLEY, Victor,		61.	wd.11.	Femur. Very tiny fragments, malignant growth but nature not definite, does not suggest an osteogenic sarcoma — pieces too small to give diagnosis 1/4

Lymph gland 15/4/42 — tuberculous.

Boulton. Wm.
M56M 2/3/42
"Prior Pk"; Bell St., Heidelberg.
Labourer Mr. Burke & Potts

Indigestion noticed 3/12 ago

COPY

PRINCE HENRY's HOSPITAL

21st November, 1941.

H. G. Wheeler, Esq.,
Secretary, Anti-Cancer Council of Victoria,
C/o Royal Australasian College of Surgeons,
MELBOURNE.

Dear Sir,

In reply to your letter regarding your Council's Executive Medical Officer, Dr. C. V. Mackay, M.D. F.R.A.C.P. visiting this Hospital in connection with the work of the Anti-Cancer Council of Victoria. My Committee will gladly welcome any visits Dr. Mackay may desire to pay to this Institution in order to discuss any problems relating to cancer.

I need hardly assure you that my Board will gladly co-operate with your Council in the great work it is doing.

Yours faithfully,

E. A. BENNETT

Manager & Secretary.

TEL. MAFFRA 1

PRYCE
Theodosia

Johnson Street
Maffra

24th Nov. 1941

Dear Dr Mackay,

Mrs R.H. Pryce of Valencia Creek presented herself for examination today and I beg to make the following report.

She looks very well & feels well being now heavier that she has ever been at 10 st 2 lbs

Bowels are quite regular & normal.

Bladder condition seems quite good except just after her menstrual period when she complains of a sense of heaviness in the vulval region and that the urine is at this time slightly discoloured. The urine on examination contains a slight amount of albumen & pus cells are present on microscopic examination.

Abdominal examination shows the small stones to be well healed & I could not detect any thickening anywhere. P.V. there is a slight thickening in the R. fornix.

Yours Sincerely

R. Le Coll MB.BCH.B.

Mrs. G. POWER

Timboon

28-10-41.

Dear Sir,

In reference to your notice in The Sun, I would like to know if you could advise me about a matter that is worrying me. First of all I am 33 and have 4 children. I had occasion to go to a doctor about 4 years ago and in his examination discovered a small lump in the left breast. He advised me to go straight into the Women's Hospital to have it treated. I did so and the Doctor that examined me said it was only milk left from the last baby then, she

29th October, 1941.

The Medical Superintendent,
The Women's Hospital,
CARLTON.

Dear Dr. Mackie,

I am enclosing a copy of a letter from a former patient of your hospital.

In my reply I have advised further attendance at the Women's Hospital and that my letter should be shown to you.

The condition may be trivial but it is advisable to encourage all breast cases to report as early as possible.

Yours sincerely,

C. V. MACKAY,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

Enc.
CVM.BH

PENN Alice

To.

Executive Medical Officer
Anti Cancer Council.

Sirs
Having read in this days Age about Cancer Treatment.
And as I am in very bad health. I am worried!
I am a married woman 45 years of age next Friday & have 2 children. 18 years & one 8 years & 9 months the last named being premature.
I have not been getting good health for years & have suffered from Stomach Trouble for years.
I have no pain or rarely & no vomiting but suddenly go off my food & bad taste in my mouth & feel as if the stomach is in knots.
I have had Inflammation of the Tubes twice 1st in 1934 & the last time in 1938. I was in a Public Hospital on the last occasion for nearly 6 weeks & had Diathermy Treatment.

for the last 12 months I have been troubled with a Bad discharge from the front passage just like a watery fluid & at times brownish & pink stain on the clothing.
My periods are regular & I have never had pains with them -
I suffer severely with a bad pain up the back passage & itching
I have had repeated examinations both for back & front passages - & Doctors said there was probably some trouble but they thought it due to the menopause.
But I am very worried over my health.
I quite understand that while a woman is going through the changes she is often tortured by fears.
may state my home life is very unhappy in consequence my husband he has been unfaithful for 10 years & ~~ever~~ before each time I got Inflamm-ation of the Tubes he has had V. D. twice since 1934.
Smears taken of my discharge proved negative:
So. I want your candid opinion Doctor as to whether you think I have any sign of Cancer.

16th October, 1941.

Mrs. Alice Penn,
9 Gordon Street,
FAIRFIELD, N.20.

Dear Mrs. Penn,

I have read your letter carefully. It is quite impossible to be certain from your symptoms what is the exact nature of your trouble.

My only possible advice to you is to consult your local medical practitioner or to attend the gynaecological clinic at one of the public hospitals such as the Women's Hospital, St. Vincent's Hospital or the Royal Melbourne Hospital.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer,

RS
11.30 A.M. - 12 P.M.
2 P.M. - 3 P.M.
7 P.M. - 8 P.M.

"Arranmore"
Camperdown.

10·10·41

Dr. Edward C. Varley.

Dear Dr Mackay. Mr James O Roberts c/o Talendut Est Camperdown came to me today with your letter.

He is very well indeed. Is eating practically full diet, has put on 20 lbs weight since leaving hospital and is doing his usual work. Physical examination does not disclose any abnormality and he tells me that he is entirely free of indigestion.

Yours faithfully
Edward C. Varley MB BS

10th October, 1941.

Dr. Edward C. Varley,
"Arranmore",
CAMPERDOWN.

Dear Dr. Varley,

Many thanks for your clinical note about Mr. James Roberts.

I am very glad to learn that he has done so well since leaving hospital.

We have recently seen a patient who had a partial gastrectomy for proved Carcinoma of the Stomach nineteen years ago.

Yours sincerely,

C. V. MACKAY,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.BH

Royal Melbourne Hospital

SURGICAL FOLLOW-UP DEPARTMENT

MELBOURNE, C.1.

TELEPHONE: CENTRAL 9001

8th October, 1941.

PATTERSON John

John Patterson, Esq.,
494 Bay Street,
PORT MELBOURNE.

Dear Mr. Patterson,

Would you please communicate with me at this Hospital and inform me of the present condition of your health? If possible, I should like this report to be obtained from your local doctor.

The above information is required as an essential part of the follow-up treatment of this department of the Hospital. It enables us, for your personal benefit, to keep a close watch on the progress of your case, and also to arrange for any further necessary attendances at this Hospital.

A stamped addressed envelope is enclosed for your reply.

Yours faithfully,

per B Hanna

C. V. MACKAY, M.D.,
Medical Officer,
Surgical Follow-up Department.

Memo

Enc.

This patient gives a history of having received treatment at M.H. some years ago for a cutaneous lesion in the R. inguinal region. The skin is thin, and the tissues corresponding to it have breakdown again, now present no evidence of disease.

[illegible]

12.10-41

13th October, 1941.

Dr. W. L. Potter, M.D.,
380 Bay Street,
PORT MELBOURNE.

Dear Dr. Potter,

Many thanks for your clinical note re Mr. John Patterson. He was treated last year for a Rodent Ulcer.

Kind regards,

Yours sincerely,

C. W. MACKAY,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CWM.BH

(Mrs) S. Potter
24 Melbourne Rd
Dandenong.

To Sir Hugh Devine,

As you are Chairman of Antic Cancer Council. I would like to state my case to you. I had a very severe nose operation eleven years ago, since then, something appears to be worrying me all the time. I am in poor circumstances have a family of six. I have been to three local Doctors, and they all treat me lightly they just say it is my teeth, but I can feel a soreness all the time and I feel a swelling on the gum & well up under the lip, will you please advise me, what to do, I am forty seven years of age.

Yours, Sincerely (Mrs) S. Potter

At the Royal Melbourne Hospital

27th September, 1941.

Mrs. S. Potter,
24 Melbourne Road,
DANDENONG.

Dear Madam,

I am answering a letter which you have addressed to Sir Hugh Devine, Chairman of the Executive Committee of the Anti-Cancer Council of Victoria.

It is impossible for me to give you any advice of value unless I am able to communicate with your own local doctor at Dandenong.

I should be greatly obliged, if, therefore, you would again consult one of the doctors in practice at Dandenong and show him this letter. If he thinks that you have a growth of any kind, and if he desires the help of the Anti-Cancer Council in your case, I shall be very pleased to do all in my power to assist him.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.BH

6 Emily St
Mid Brighton
3. 9. 41 (S. 5)

Dear Sir

I have sent for, & ricived your Book of (What Every Adult Should Know About Cancer.)

After reading same I would like to see a Doctor, therefore I am asking you to give me advice for same.

As far as I know I am not suffering from Cancer, but some 3 Months back a small growth appeared of my Leg it is now very much larger, it may not be much, but at the same time I would like it seen to, and here is where I thought you could advise me.

I remain
Yours Respectfully
Mrs G. M. Pike

5th September, 1941.

Mrs. G. M. Pike,
6 Emily Street,
MIDDLE BRIGHTON, S.5.

Dear Madam,

I would advise you to consult one of the local medical practitioners at Brighton about the growth on your leg.

If he has any doubt about its character I should be glad to assist him in deciding which specialist you ought to see. If you do not wish to consult a local doctor then I would recommend you to see a surgeon at the Alfred Hospital.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.BH

DR. E. A. C. FARRAN
M.B., B.S., M.D., M.S. (MELB.)

TEL. 888

741 YOUNG STREET,
ALBURY

August 14th 1941

Dr C.V. Mackay

Dear Dr,

re Mrs Jane Pratt of Albury

This lady has asked me to reply to your letter of the 2nd inst. to her.

She feels well, is gaining weight, and her wound is soundly healed. She has no pains and considers herself to be cured.

Yours faithfully

E. Farran

16th August, 1941.

Dr. E. A. C. Farran, M.B., B.S., M.D., M.S.,
741 Young Street,
ALBURY.

Dear Dr. Farran,

Many thanks for your clinical report on Mrs. Jane Pratt which I received this morning.

Yours faithfully,

C. V. MACKAY,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.BH

16th August, 1941.

Dr. E. A. C. Farran, M.B., B.S., M.D., M.S. (Melb.)
741 Young Street,
ALBURY.

Dear Dr. Farran,

Many thanks for your clinical report on Mrs. Jane Pratt

4th August, 1941.

The Medical Superintendent,
Prince Henry's Hospital,
St. Kilda Road,
MELBOURNE.

Re Mr. HOLLINGSHEAD

Under "H"

PLEASE SEND ALL REMITTANCES DIRECT TO THE HONORARY TREASURER, THE RIGHT HONOURABLE THE LORD MAYOR, TOWN HALL, MELBOURNE.

SURGICAL FOLLOW-UP DEPARTMENT

2nd August, 1941.

IMPORTANT - REPLY REQUESTED

Mrs. Jane Pratt,
"The Lees,"
Sackville Street,
ALBURY.

Dear Mrs. Pratt,

Would you please communicate with me at this Hospital and inform me of the present condition of your health? If possible, I should like this report to be obtained from your local doctor.

The above information is required as an essential part of the follow-up treatment of this department of the Hospital It enables us, for your personal benefit, to keep a close watch on the progress of your case, and also to arrange for any further necessary attendances at this Hospital.

A stamped addressed envelope is enclosed for your reply.

Yours faithfully,

C. V. MACKAY, M.D.,
Medical Officer,
Surgical Follow-up Department.

Enc.

SURGICAL FOLLOW-UP DEPARTMENT

2nd August, 1941.

IMPORTANT - REPLY REQUESTED

Mrs. Ethel Phelan,
153 Cecil Street,
SOUTH MELBOURNE.

Dear Mrs. Phelan,

Would you please communicate with me at this Hospital and inform me of the present condition of your health? If possible, I should like this report to be obtained from your local doctor.

The above information is required as an essential part of the follow-up treatment of this department of the Hospital. It enables us, for your personal benefit, to keep a close watch on the progress of your case, and also to arrange for any further necessary attendances at this Hospital.

A stamped addressed envelope in enclosed for your reply.

Yours faithfully,

C. V. MACKAY, M.D.,
Medical Officer,
Surgical Follow-up Department.

Enc.

CANCER INFORMATION BUREAU,

5th March, 1941.

Samuel Phillips, Esq.,
18 Service Street,
HAMPTON.

Dear Sir,

Your recent trouble with your lips is probably not in any way of a cancerous nature, and the treatment should be comparatively simple.

I would strongly recommend a consultation with your local medical practitioner.

You may show him this letter.

Yours faithfully,

C. V. Mackay, M.D.,
Executive Medical Officer.

CVM.MD

18 Service St
Hampton
2. 3. 41

Executive Medical Officer,
Royal Australian College of Surgeons,
Spring St
Melbourne C1

Dear M. O.

About 3/1/41 a sore devolped on the middle of my bottom lips, that was very sore and painful and did not clean up until about 10/2/41.

About 24/2/41 another sore shows up on the right side of the bottom lip, and at time of writing is a sore sore.

I would much appreciate any direction you can give me, as to what to do, or who to see.

Thanking you
Sam Phillips

SURGICAL FOLLOW-UP DEPARTMENT

3rd June, 1941.

IMPORTANT

Samuel Phillips, Esq.,
152a Harold Street,
THORNBURY.

Dear Mr. Phillips,

Would you please attend Mr. Paul Jones's Out-Patient Clinic at the Royal Melbourne Hospital in order that an examination may be made of the condition for which treatment was given here?

This examination enables us, for your personal benefit, to keep a close watch on the progress of your case, and is an essential part of the follow-up treatment of this Department. It also enables us to arrange for any further necessary attendances at this Hospital for you.

An appointment card is enclosed marked with an attendance date and time. When you have seen Mr. Paul Jones make sure that the next appointment is marked on it. Please let the clerk in the desk in the Out-Patients' Hall know the date of this next appointment, so that unnecessary correspondence may be avoided.

If prevented by reason of ill-health, etc., from attending, please let me know as soon as possible when you can attend. Mr. Paul Jones visits this Hospital every Monday and Thursday at 12.30 p.m.

Yours faithfully,

C. V. MACKAY, M.D.

P.S. Please present this letter at the Out-Patients' Department.

Enc.

SURGICAL FOLLOW-UP DEPARTMENT

30th June, 1.

Samuel Phillips, Esq.,
152a Harold Street,
THORNBURY.

Dear Mr. Phillips,

I am sorry that your journey in to the Royal Melbourne Hospital on Sunday was unsatisfactory. I usually leave on Saturday at twelve midday.

It is very advisable for you to see your surgeon once in every six months, but I realize that this is a difficult matter. If you could see me some Saturday morning between 11.30 and 12 I could examine you on behalf of the surgeon.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer,
Surgical Follow-up Department.

CVM.BH

20th June, 1941.

Dr. W. A. Pryor,
125 Victoria St.,
BALLARAT.

Re Mr. T. H. MASON

Filed under "M"

"COMBAT CANCER WITH CASH"

Anti-Cancer Council

STATE OF VICTORIA

Incorporated by Act of Parliament for the purpose of promoting, co-ordinating, and carrying out investigations in relation to the cause, prevention, and treatment of Cancer.

C/o ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

Spring Street,

Melbourne, C.1.

SURGICAL FOLLOW-UP DEPARTMENT

3rd June, 1941.

IMPORTANT - REPLY REQUESTED

Mrs. Theodosia Pryce,
Valencia Creek,
via MAFFRA.

Dear Mrs. Pryce,

Would you please communicate with me at this Hospital and inform me of the present condition of your health? If possible, I should like this report to be obtained from your local doctor.

The above information is required as an essential part of the follow-up treatment of this department of the Hospital. It enables us, for your personal benefit, to keep a close watch on the progress of your case, and also to arrange for any further necessary attendances at this Hospital.

A stamped addressed envelope is enclosed for your reply.

Yours faithfully,

C. V. MACKAY, M.D.
Executive Medical Officer,
Anti-Cancer Council of Victoria.

Enc.

Johnson Street
Maffra
9th June 1941

Dear Dr Mackay,

Mrs Theodosia Pryce of Valencia Creek called on me today & presented the letter which she received from you.

On abdominal examination I found a small discharging sinus about the middle of the operation scar but was unable to detect by physical examination any evidence of metastases in the abdomen or elsewhere.

Her general health appears to be very satisfactory except for some urinary disability, and the urine on examination shows a fair amount of albumen with some pus cells & R.B.C.

I have given her some treatment for the urinary condition but would be glad of your advice as to whether you think any further investigation should be done.

Yours Sincerely
R. McCall

10th June, 1941.

PRYCE Theodosia

Dr. Neil McColl,
Johnson Street,
MAFFRA.

Dear Dr. McColl,

Many thanks for your clinical notes concerning Mrs. Theodosia Pryce who had a Carcinoma of the Sigmoid Colon removed by Dr. Upjohn. The bladder and the colon were found to be communicating. The bladder was repaired.

I showed your letter to Dr. Upjohn today, and he would be glad if you would communicate with him direct at 12 Collins Street giving him particulars of the urinary disability, frequency, etc.

He will be pleased to give any advice in his power.

Yours sincerely,

C. V. MACKAY.

CVM.BH

27th May, 1941.

Miss Elsie Page,
272 Latrobe Terrace,
GEELONG.

Dear Miss Page,

I am very pleased to have the opportunity of answering your letter of the 23rd of May.

Our organization has not yet developed a special department of its own for the examination of patients who may be suffering from cancer. We do, however, advise patients or enquirers where to go for examination.

This information is naturally limited to private doctors who mainly specialize in the treatment of cancer or to the special cancer departments of hospitals.

It would be impossible to arrange for an examination at a hospital during a week-end and I would, therefore, recommend you to see a specialist early on a Saturday afternoon.

I could probably arrange this for you.

The usual fee is two guineas, but if your circumstances do not permit of the payment of this amount, I may be able to arrange for the fee to be halved.

Yours faithfully,

C. V. MACKAY, M.D.
Executive Medical Officer,

272 Latrobe Terrace
Geelong.
23. 5. 41.

The Executive Medical Officer.
Cancer Information Bureau.
Royal Australian College of Surgeons
Melbourne.

Dear Sir.

I am writing to make inquiries regarding an examination for cancer as I have noticed in the papers that it is your desire to assist people in this direction.

I would like to

il myself of this service
should be pleased
know how long the
annulation would take
a if it could be arranged
a Saturday afternoon as I
m in business all the
eek so could not come up
o Melbourne other than
the weekend. I would
also be pleased to know
the fee for this service.

Thanking you.

yrs faithfully
(Miss) Elsie L. Page.

23rd May, 1941.

Mrs. R. J. Park,
c/o Garage,
LAKE BOLAC.

Dear Mrs. Park,

I am pleased to reply to your enquiry of the 20th of May.

So far as I can judge from your description of the trouble both outside and inside your nose, I should say that your fears regarding the possibility that either of these lesions is a form of cancer are groundless.

When you see Dr. Donaldson of Skipton ask him to examine the inside of the nose, and if he discovers anything of a suspicious character I shall be pleased to assist him with regard to any necessary special treatment.

Yours faithfully,

C. V. MACKAY, M.D.
Executive Medical Officer,
Anti-Cancer Council of Victoria.

Lake Bolac,
20 - 5 - 41.

The Secretary,
The Anti-Cancer Council of Victoria,
Spring Street.

Dear Sir,

I am writing you for advice: Some five or six years ago I developed a little mark on the side of my nose. Shortly afterwards (in "Doctor's Diary" of The Herald) there appeared an article on skin cancer, one of the main causes excessive sunburning, which caused me some thought. I mentioned the matter to local Doctor who laughed at my fears and informed me the mark was an enlarged blood vessel.

I thought no more of the matter until approx 3 months ago when I developed swelling inside nose (the opposite side to that on which is the outside mark.) A crust of matterlike substance forms on the inside of the nostril which when cleared forms again. I have not consulted a Doctor yet, I thought possibly you could advise me and I could pass on any information to the Doctor. I would be consulting Dr Donaldson of Skipton.

Thanking you and trusting my fears are groundless,

I am, Yours Sincerely,
(Mrs) Audrey Park.

30th April, 1941.

Mrs. G. N. Pearce,
45 Charles Street,
BRIGHTON EAST.

Dear Madam,

In reply to your letter of Sunday last I am forwarding to you one of our booklets on cancer.

The symptoms of cancer in the stomach and breast are clearly set forth.

If you desire to consult a doctor at one of the public hospitals or a specialist please let me know.

Yours faithfully,

C. V. MACKAY, M.D.
Executive Medical Officer,
Anti-Cancer Council of Victoria.

45 Charles St
Brighton
East
Sunday

Dear Sir

I wondered if you would tell me the symptoms of cancer in the stomach, also of the breast. I am worried about both, as my health has not been good lately, but I think the cause is that my Mother died of cancer, & that is why I am so worried.

Yours truly

(Mrs) G. A. Pearce

"Carrick"
Tongala East
31. 3. 41.

Dear Sir,

Would you kindly forward me the handbook published recently on the subject of Cancer. The name is: "What every adult should know about Cancer". I am very worried about myself as I have Neuralgia, for no understandable reason. Of course I might be quite on the ~~rogt~~ wrong track, so would like to study the aforementioned book.

Thanking you,

I remain
Yours truly
G. Purdey (Mrs)

SURGICAL FOLLOW-UP DEPARTMENT

4th March, 1

Mrs. Jane S. Pratt,
Sackville Street,
Albury.

Dear Mrs. Pratt,

Many thanks for your letter of the 24th February.

I am glad to learn that you have gained a stone in weight since you left hospital.

As you are aware, you had an extensive operation at this hospital by Mr. Coates, and it is hardly to be expected that the wound would not cause some trouble.

The journey to Melbourne is a long one and I would recommend you to see Dr. Farran again before you decide to do this. He may find some simple explanation for the discharge from the wound.

Yours faithfully,

C. V. Mackay, M.D.

Sackville St
Albury. 7/2/24

C.R. 968

Dr MacKay
Royal Melbourne Hospital

Dear Sir

At the beginning of this month I received a letter from you enquiring about the Condition of my health since leaving the Melbourne Hospital. As you stated in your letter you would rather have the report from my local Dr. Accordingly I call in Dr Farren of Albury & told him about my operation & asked him to report to you. I gave him the envelope you sent. (addressed).

Since then I received a letter from my Sister Mrs Cockroft of Eltham Vic. Stating you had written her as I had not

replied to your letter I am sorry this happened.

The condition of my health is fair I have some very off days when the wound discharges my freely & gets very sore then the discharge almost ceases & I think it is going to heal & it starts as freely as ever again.

Dr Farrar examined the wound & he said a stitch might be carry the irritation & suggested the proof the wound. to see

Hmm, I would rather wait a little while & if the wound does not heal I will come down & report at the hospital. You could let me know if you think this advisable. & if it is all right for the wound to still discharge. I might state I have

gained a stone in weight for every the help

Truly to have for the

Thank you for your sympathy. Jane. F. Walls

4th March, 1941

Dr. E. A. C. Farran, M.B.,B.S.,M.D.,M.S.(Melb.),
741 Young Street,
ALBURY.

Dear Dr. Farran,

Many thanks for your clinical notes about Mrs. Pratt.

She was sent to the Royal Melbourne Hospital from the Women's Hospital as a case of chronic intussusception. Mr. Coates found a carcinoma of the caecum and performed an extensive resection in October of last year.

Mrs. Pratt has written to me since the receipt of your letter and I am advising her to see you again before deciding to return to Melbourne.

Yours faithfully,

C. V. Mackay,
Executive Medical Officer.

CVM.MD

E. A. C. FARRAN.
M.B., B.S., M.D., M.S. (MELB.)

TEL. 888

741 YOUNG STREET,
ALBURY

Feb 26th 1941

Dr G.V. Mackay
Royal Melbourne Hospital

CR 968

Dear Dr,

re Mrs Pratt

This lady asked me to answer your letter to her.

When I saw her about 10 days ago she was very well but had a fairly deep discharging sinus from the centre of the wound. I asked her to call at my surgery to have it probed etc as I thought it was due to an unabsorbed suture. I delayed answering your letter until after her visit. She has not yet made that visit.

I now learn from her daughter that the wound has completely healed again and that she is very well.

Yours faithfully

E A Farran

Main Rd
Eltham
Feb 18th 1941.

C.R. 968

Dr Mackay.

Dear Sir

Mrs Jane Pratt
My Sister

has not changed her address.
I recieved a letter from her last ~~week~~, telling me she had recieved a letter from the hospital asking for a report on her condision,
said she was going to see her Dr. She seems disapointed as the wound is still discharging It heals ~~to~~ up for nearly a week, & then starts again,
In her letter she said she felt as though she was getting flu.
So perhaps that is the reason she has not replied to your letter.

Yours Respectfully

Mrs E B Cockroft.

PENROSE
Editor of
"Fellowship"

See 'F's'

CANCER INFORMATION BUREAU,

18th February, 1941.

Bruce Peart, Esq.,
4 Princess Street,
SEDDON, W.11.

Dear Sir,

I am pleased to answer your enquiry of the 16th February.

I have referred this to the head of one of the largest cancer clinics in Australia, and he assures me that there is no evidence of any direct action, caused by the blowing of a trumpet, cornet, etc., which would cause a cancer of the lip or mouth. He can recall no example of cancer caused in this manner throughout his public or private practice.

Yours faithfully,

C. V. Mackay, M.D.,
Executive Medical Officer.

CVM.MD

4. Princess St.
Seddon
N11.
16-2-41.

The Anti-Cancer Council of Victoria.

Dear Sir-s.

After reading a handbook issued by you I though I should like to write and ask you if a boy, a youth, or even a man who is in a band and plays a trumpet, a cornet (or any other mouth played instrument) is in the slightest danger of developing a cancer either of the mouth or lip.

Hoping you will forward me full information of this matter.

I Am.
Yours Sincerely
Bruce Peart

CANCER INFORMATION BUREAU,

12th February, 1941.

Mrs. I. A. Philips,
C/o Post Office,
ELTHAM NORTH, Vic.

Dear Mrs. Philips,

In reply to your request of the 6th February, I am sending one of our booklets on Cancer to you and one to Mrs. Webb.

I beg to acknowledge the enclosure of sixpence in stamps for postage.

I am writing to Mrs. Webb separately to advise her concerning the mole to which you have referred.

Yours faithfully,

C. V. Mackay, M.D.,
Executive Medical Officer.

ENC.

CVM.MD

C/o P.O. Eltham North
Victoria.
February 6th
1941.

Royal Australian College of Surgeons,

Dear Sirs,

Seeing your advert in the Sun of a few weeks back re your booklet on cancer & being very eager for more information I would be obliged if you would forward same to me for which I enclose Threepence (3d) value in stamps: Also my friend has a blue black mole which has began to trouble her of late. Being on the back of the leg it gets agrivated by her dress hem so I wonder if you would be kind enough to forward another booklet to her for which I enclose an additional Threepence (3d) value in stamps as I believe the information your booklet contains would benefit her.

Yours most sincerely.
I. Philips. (Mrs).

FULL POSTAL ADDRESSES.

Mrs I. A. PHILIPS.
C/o POST OFFICE
ELTHAM NORTH.
VICTORIA.

Mrs O. WEBB
C/o POST OFFICE.
ELTHAM NORTH
VICTORIA

INFORMATION BUREAU,

January 10th, 1941.

Mrs. Ada Purtell,
18 Jervois Street,
EAST ST. KILDA, S.2.

Dear Mrs. Purtell,

I am pleased to answer your enquiry of the 3rd January.

I do not consider that you have any cause for alarm about your symptoms.

You have been given a considerable amount of deep therapy treatment following upon the removal of your breast, and it is very possible that many of your minor symptoms proceed from that treatment.

You should certainly mention them to the Doctor who is in charge of your treatment.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer.

CVM.MD

MRS PURTELL - C.R. 413

Admitted to R.O.P.
19/3/40 for Deep Therapy
after Radical Mastectomy
at Q.V.H. in Feb. 1940.
She was Stage ii then.
She is 49 yrs, married.

C.R. 413

Jan 3rd 41 18 Jervois St.
East St Kilda S2

Dear Sir

Last February I had my left Breast removed on account of a growth that developed from a knock I received about two years previous, have had about thirty seven (37) treatments of Deep Therapy. In september I got Bronchial Pneumonia and coughed a great deal I used to get a pretty severe pain on my left side that caused inflamation that spread to the naval since coughing ceased have just had pain slight & no inflamation do you consider there is any cause for alarm

Also my left ear gets very itchy & I feel a stiffness in left jaw bones my chin is numb & tender to touch inside of lip is very sensitive and I get a sharp pricking pain in chin and the cold air affects it.

Would this be another growth or just the effects of the Deep Therapy treatment.

Would be pleased if you would advise also send one of your Booklets published on Cancer

Yours faithfully
(Mrs) Ada Burtell

Book & note sent 4.1.41

37 Hanslope Ave
Alphington N20
9/12/40

Royal Cancer College of Surgeons

Dear Sir

Would you kindly send me the handbook "What every Adult should know about Cancer". I had a growth removed from the left breast about three years ago and at the beginning of this year another removed from under the left arm (after deep Therapy treatment).
At present I appear to be alright but am naturally interested in anything pertaining to the subject.

Yours truly

Ernest J Priest

10.12.40

INFORMATION BUREAU.

13th December, 1940.

Mr. G. H. Prittie,
60 Phillip Street,
West Coburg.

Dear Mr. Prittie,

I have much pleasure in answering your enquiry of the 11th December.

In my opinion the advice of your family doctor was quite sound and you should abide by it. If any definite change occurs in the lump, then go and see him again.

Yours faithfully,

C. V. Mackay, M.D.,
Executive Medical Officer.

CVM.MD

60 Phillip St.
West Coburg.
11. 12. 40

Executive
Medical Officer.

Dear Sir,

Having read with interest the publication "What Every Adult Should Know About Cancer." prepared by your Society; I am writing to seek your advice.

I am 22 years of age (male).

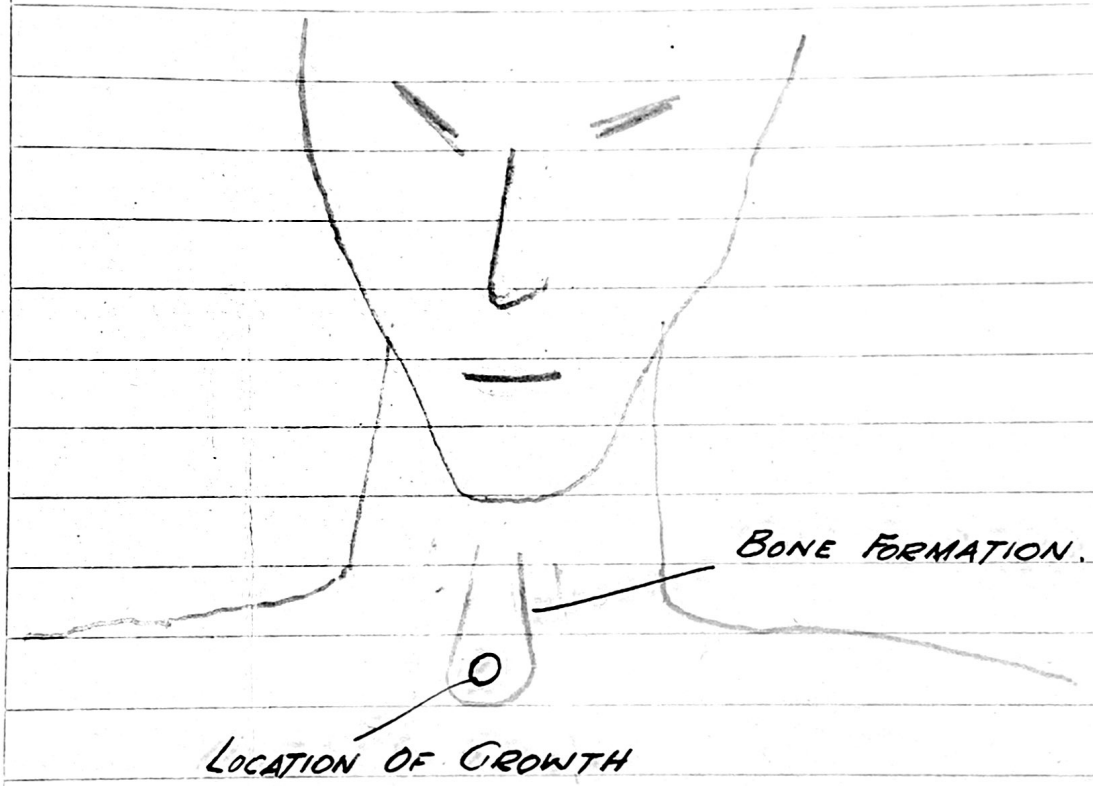
I first noticed about 4 years ago a small lump about the size of a pea in my neck. Since its first appearance it has increased to the size of a marble. It appears to be a growth in the skin near the surface.

My family Doctor said it was a Cyst? when I showed it to him about a year ago, & he said not to take any notice of it unless it troubled me.

I have noticed that lately it increases in size, I think due to temperature changes, that is

it gives me a certain amount of worry on a hot day by increasing in size & becoming itchy.

I might state that my Grandmother died with Cancer.



The above rough sketch may help you in advising me.

Trusting you may help me in this matter

Yours faithfully
G. H. Drittel.

5th December, 1940.

Mrs. E. S. Perry,
15 Mackay Avenue,
GLENHUNTLY, S.E.9.

Dear Mrs. Perry,

I have pleasure in answering your enquiry.

The symptoms which you have enumerated to me do not definitely point to the existence of any cancer. My advice is to consult your local medical practitioner. If he is unable to diagnose your condition, ask him for a recommendation to a Collins Street specialist or to a public hospital.

Yours faithfully,

C. V. Mackay, M.D.,
Executive Medical Officer.

CVM.MD

Mrs E. J. Perry
15 MacKay Av
Glen Huntly
S.E.4
TEL. U.L. 1448

To the Cancer Bureau

Dear Sirs

I am suffering from contracted Bowell caused - they tell me - through worry.
Seem to have had numerous complaints
Have had injections for Hemorrhoids & Ulcers. It is the constant nagging soreness or pain which wears me down.
I am 60 yrs. but a very strong woman with a big responsibility Is there anything that might be done for me. I would be very grateful for your consideration.

& Thank you
in anticipation
Yours yrs
Emily Perry

72 Playne Street
Frankston
20.11.40.

To Mrs Richards

Would you kindly forward me one of the cancer pamphlets you are introducing over the radio 3DB please and enclosed penny stamp for postage and oblige

Yours faithfully
M. J. Phillips

Mrs L. B. Phillips
72 Playne Street
Frankston

29.11.40

INFORMATION BUREAU,

25th November, 1940.

Harold Parker, Esq.,
52 Dudley Street,
WEST PRESTON.

Dear Mr. Parker,

I have much pleasure in submitting to you a list of surgical specialists. You may consult any one of these about your trouble with complete confidence.

Mr. Leo Doyle, 45 Spring Street, Melbourne, C.1.;

Mr. W. Allan Hailes, 14 Parliament Place, Melbourne, C.2.

Dr. John Kennedy, 16 Collins Street, Melbourne, C.1.

Mr. Balcombe Quick, 120 Collins Street, Melbourne, C.1.

Mr. C. A. Marshall Renou, 12 Collins Street, Melbourne.

Mr. Henry Searby, 14 Parliament Place, Melbourne, C.2.

Mr. John Turner, 71 Collins Street, Melbourne, C.1.

Dr. W. G. D. Upjohn, 12 Collins Street, Melbourne, C.1.

Thank you for enclosing the postage.

Yours faithfully,

C. V. Mackay, M.D.,
Executive Medical Officer.

52 Dudley Street,
West Melbourne
23/11/40

Cancer Information Bureau
R.A.C.S. Spring Street, Melbourne.

Dear Sir,

Being interested in the treatment and early signs of cancer, I have received your booklet which I have perused with much interest.

I have been a sufferer of chronic irritation of the rectum for nearly two years now, and other treatment having failed, I feel that it would be wise for me to consult a specialist, with a view to having an accurate diagnosis made. There is the usual blood etc. in the stools which are ribbon shaped. This impresses me with the possibility of a growth.

As I have no permanent ordinary doctor I would like you to recommend a specialist, from whom I could obtain some degree of satisfaction.

Thanking you for this favor.

I am

Yours Sincerely.

Harold Parker

INFORMATION BUREAU.

14th November, 1940.

Mrs. W. Phillips,
"Hallora,
via DROUIN.

Dear Mrs. Phillips,

I have pleasure in sending you one of our handbooks on the subject of cancer.

The treatment of cancer of the breast, after surgical removal of the breast and glands, is mainly by deep X-rays. More than one course of treatment may be necessary and sometimes Radium is used in addition to the X-rays. Each individual case varies in degree, and treatment must vary accordingly and with the experience of the particular specialist in charge of treatment.

Kindly let me know if I can be of any assistance to you.

Yours faithfully,

C. V. Mackay, M.D.,
Executive Medical Officer.

ENC

Hallora
13-11-40.

Dear Sirs,

Will you please send me your book as advertised in the Age "What every adult should know about cancer". and will you tell me if after having a breast & glands removed also X ray treatment can anything further be done,

Thanking you
Yrs faithfully
(Mrs) W. Phillips
Hallora
Via Drouin

INFORMATION BUREAU.

8th November, 1940.

Robert B. Pascoe, Esq.,
Healesville.

Dear Mr. Pascoe,

I am very pleased to have the opportunity of answering your letter of the 6th November.

Unfortunately you omitted to give me the name of your mother-in-law, and I was therefore unable to make any enquiries at the Women's Hospital. I have no means of reaching a conclusion in the conflict of opinion between Dr. Sherwin and your own local doctor as to the exact diagnosis of the condition.

As you are unable to afford the fees at the local Bush Nursing Hospital, I would strongly recommend you to get your mother-in-law admitted to the Austin Hospital at Heidelberg. This is now essentially a treatment hospital, with a high standard of medical and nursing work. I enclose the special forms for this purpose which your local doctor will help you to fill in.

Yours faithfully,

C. V. Mackay, M.D.,
Executive Medical Officer.

Enc.

Healesville
6th Nov., 1940.

Secretary Royal Aust.
College of Surgeons.
Spring St. Melbourne C1.

Dear Sir,

Reading an article in Wed. Sun I am writing you for the information you advise is available.

Two years ago my wifes mother had an operation for a tuma on the womb. This was thought to be successful, but about 2 months ago she took bad again, Dr. Sherwin who operated in the first place ordered her to the Womens Hospital for observation, she was there for two weeks then discharged, we were told it was a fibrous growth, we have had our local doctor since coming home, and he put it more bluntly as a cancer in the stomach.

She has been in constant pain, doctor has prescribed medicine to deaden the pain but she cannot keep it down.

The last few days, has been so bad for her that today we took her to the local Bush Nursing Hospital.

The fees are more than we can possibly afford.
I am sure she could not be moved just at present, but I would be grateful if you could advise me just what we can do.
We can afford to pay something each week, but the fees of this Hospital is too much for us, but we felt we could not let her suffer as she was.
Trusting to hear from you at your earliest convenience,
I am,
Yours sincerely,
Robert. B. Pascoe

383 Barkly St
Footscray W.
Victoria
30/10/40

To The Medical Executive Officer

Dear Sir

your little booklet entitled what every adult should know has come under my notice as well as friends and I have been asked to write to you for 6 copies of the same I was very interested in it being a victim of the dreadful complaint myself I will enclose postage for the same 6

thanking you

I remain Yours Sincerely
(Mrs) S J Pearce

6 sent
31-10-40

Ellengowan
Finley

Dear Sir

please send me book on cancer as advertised in Saturdays Argus.

and oblige

yrs sincerely
Mrs Robt. Fyfe.

P.S.

We have a brother dying from that disease.

Rent 23.10.40

C/o Mrs. Austin
Coree St
Finley. N.S.W.
21st Oct 1940

Dear Sir,

My husband underwent an operation 2 yrs ago. I have been told it was for a very bad cancer on the kidney another Dr. says he feels sure it was not a cancer as he says he would not be going about his work as usual all this time He was 61 at time of operation. I saw an advertisement in the Argus of a free hand book. "What Every adult should know about cancer and I would be very pleased if you would forward a book to me

I am enclosing 2 postage.

Yours truly
R. A. Pinchen

Rec'd (1)

25/10/40

INFORMATION BUREAU.

12th September, 1940.

Mrs. Paterson,
92 Victoria Street,
KERANG.

Dear Mrs. Paterson,

I am very pleased to have the opportunity of answering your enquiry of the 9th Sept.

I have read your letter, with its detailed account of your symptoms, very carefully, and I find great difficulty in sending you a satisfactory reply. You will, I hope, understand that it is almost impossible to diagnose a difficult case wholly from the patient's description.

If I am to be of any service to you it must be with the knowledge and assistance of your own local medical practitioner, who has examined you over a period of years and who knows your condition. If he considers it advisable to avail himself of my specialized information as to the treatment of cancer and allied conditions in Melbourne, I shall be most pleased to do all in my power to help you.

I can inform you that it is possible for a patient to suffer from both tuberculosis and cancer at the same time.

I am enclosing a copy of a handbook recently published by the Anti-Cancer Council of Victoria on Cancer for your information.

Please do not hesitate to make any further enquiries.

Yours faithfully,

C. V. Mackay, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

Enc.
CVM.MD

92 Victoria St.
Kerang.
9/11/20.

Cancer Information Bureau
Dear Sis
Could you please give me advice on my symptoms.
I had a lump taken out of my breast about 5 yrs ago. previous to this I had a lump under my right arm so it went away without treatment. sometime later another one developed in the breast so the Doctor suggested it to be taken out which I allowed him to do so.
Unfortunately after 5 yrs. another one came under the same arm again so it has been painful like the previous ones. but my doctor says it ought to be treated with radium.
I also must state for the last 9 yrs. I have been suffering from a bad cough

which my local doctor in Banffshire thinks may be T.B. as I have had 2 slight hemorrhages lately. I am very short of breath I have been unable to do my housework on account of shortness of breath. I do sometimes. I expectorate thick yellow sputum. but that is not always.

I am passing through the change of life, I have not menstruated for a very long time now. I am also suffering from catarrh of the nose. & eye trouble.

Do you think my case is suggestive of cancer in the breast? & if so would radium do me any good: as I would not submit to an operation. on account of my heart. & do you pass blood after change of life for cancer in the breast? altho' there is no swelling of the breast actually. only the lymp. which doctor says is a swollen gland under the arm.

I am worried over my condition & would

be grateful for advice on same.

Would it be possible for one to have the two complaints. D.B. & Cancer at the same time! as the sputum is nearly always streaked with blood.

Trusting you will reply at yr earliest convenience.

Yours faithfully

(Mrs) Maude Paterson

(P.S)

I do not pass any blood from the lower organs: only through my mouth & nose. I have been told you pass blood. if you have cancer of breast & mouth. but fortunately I have no pain or blood in lower organs.

11th September, 1940.

Mrs. P. Pearson,
ELAINE.

Dear Mrs. Pearson,

I have much pleasure in sending you one of the handbooks prepared and published by the Anti-Cancer Council of Victoria, "What every adult should know about Cancer."

The use of radium by medical practitioners is not exclusively confined to the treatment of cancer.

Yours faithfully,

C. V. Mackay, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

Enc.

CVM.MD

Elaine
Sept 4th.

Dear Sir,

Please send me a copy of your Booklet "What every Adult should know about cancer free of charge.

Yours
Mrs P Pearson
Elaine.

If a Dr wants to burn anything with Radium is it any form of cancer.

INFORMATION BUREAU.

29th August, 1940.

Mrs. L. G. Palmer,
"Mayfield,"
BARFOLD, Vic.

Dear Mrs. Palmer,

I am sending you a copy of our usual letter of information on the subject of cancer treatment, and I shall attempt to supplement it by answering your particular questions. I am repeating these to make certain of my reply:

"What I particularly want to know is where, or to whom, a person in Melbourne should go to get the most accurate diagnosis obtainable, with the least possible delay, and the approximate cost of examination."

To answer this question wholly satisfactorily it is essential for me to know what organ or region of the body is affected. Certain medical men in Melbourne are, for example, more competent to treat cancer of the larynx, and others cancer of the breast, or the uterus, or the skin, than their fellows.

If I have some specific knowledge of your condition, then I can give you a list or roster of the names of several medical men whom I would regard as competent to give an accurate diagnosis without delay.

If, however, the malignant condition is thought to be present inside the abdomen, a somewhat complicated X-ray examination is necessary to determine its presence and location in the digestive tract.

The usual diagnostic fee would be two guineas; if an X-ray examination is necessary this may be increased by three or five guineas.

I shall be pleased to supply further particulars if you should wish to obtain them.

Yours faithfully,

CVM MD

C. V. Mackay, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

Enc.

"Hayfield"
Barfold
Victoria
26th Aug 1940

Mr. H. G. Wheeler
Secretary
Anti-Cancer Council.
Spring St.

Dear Sir,

I would like you to send me information on the treatment of Cancer, which, according to the Argus of Thursday 15th the Cancer Research Bureau will supply

What I particularly want to know is, where, or to whom, a person in Melbourne should go to get the most accurate diagnosis obtainable, with the least possible delay: and the approx: cost of examination

Iam

Yours faithfully
(Mrs. L. G.) J. Palmer

INFORMATION BUREAU.

12th July, 1940.

A. Pleydell, Esq.,
9 Unley Grove,
Ascot Vale.

Dear Mr. Pleydell,

It is somewhat difficult to answer your enquiry of the 10th July.

The Cancer Information Bureau deals with cancer and allied conditions, and your skin rash hardly seems to come into that category.

I should recommend you to ask your local medical practitioner for a letter to a skin specialist in the Collins Street area, or to the skin department of one of the large public hospitals.

Yours faithfully,

C. V. Mackay, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.MD

10-7-40

9 Ulley Grove
Ascot Vale

Dear Sir

In refence to your article in the daily papers. I am of the age of 31 years and for a number of years have had a rash running from my testicles to the left side of my back passage. This rash irritates me mostly after I retire of a night, it is of a dry nature, it has for a number year. been of the same state.
I have had medical advice on it and have been treated with ointments but they seem to irritate it all the more. Hoping you will be able to give me some advice on this complaint

I am Yours faithfully
A Playdell

INFORMATION BUREAU.

27th June, 1940.

Mrs. A. Power,
10 Bellarine Street,
PRESTON, N.18.

Dear Mrs. Power,

I am pleased to answer your enquiry.

There is not in Melbourne at present a special institution for cancer.

If you desire an examination such as you have mentioned, I would advise you to attend the out-patient department of one of our large public hospitals. The institutions I would recommend for you are the Women's Hospital, St. Vincent's Hospital, and the Royal Melbourne Hospital.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

10 Bellarine St
Preston N. 18
26. 6. 40

Dear Sir

I would be very much obliged if you could give me some details in regards to the fine work which is being carried on by the Cancer research I am under the impression that there is an Institution where I can be X. Rayed + Examined to ascertain if I am suffering any pains from the symptoms of any form of Cancer. If you can give me any information to my letter I will gladly appreciate it.

I remain.
Yours sincerely
(Mrs) A. Power.

21st June, 1940.

INFORMATION BUREAU.

William Poston, Esq.,
"Dungiven,"
Wilson Street,
OAKLEIGH, S.E.12.

Dear Mr. Poston,

I am glad to have the opportunity of answering your letter of the 19th of June.

I regret to learn that your wife's complaint has been diagnosed at the Queen Victoria Hospital as Cancer of the Stomach. This is not always a fatal disease and a certain number of cases are operated upon successfully. Unfortunately the disease often exists for a considerable time without any symptoms which would betray its presence.

If the medical authorities of the Queen Victoria Hospital cannot hold out any hope of relief, I am afraid that I cannot be of assistance. I would suggest, however, that you see the operating surgeon personally and obtain from her an explanation of the condition.

Yours faithfully,

C. V. Mackay, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.MD

Dungwin
Wilson St.
Oakleigh.
19. 6. 40 St 12.

The Cancer Information Bureau.

Dear Sirs.

My Wife is at present an in-patient at the Queen-Victoria Hospital Melb suffering from a Malignant or Cancerous Growth in her Stomach, Since they have no hope of any relief for her. I was wondering if there would be anything you could suggest or do in the matter

Thanking you in Anticipation

I am

Yours Etc

Wm Paton

June 15, 1940.

Messrs. Parke, Davis & Co.,
Box 4198 XX,
G.P.O., SYDNEY.

Dear Sirs,

I was very pleased to see the insertion of your special notice in to-day's "Age" - "Anarchy in the Human Body." The subject of the treatment of cancer is well stated, and I am very interested in the objective of the advertisement.

On behalf of the Anti-Cancer Council of Victoria I am conducting an educational campaign against cancer once fortnightly in the columns of the Melbourne press, and I welcome your assistance. It would be difficult to express to lay readers the modern position with regard to cancer more satisfactorily than in your notice. I should be interested to learn whether this is to be followed by any further notices of a similar character.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.MD

CVM:NA

17th May, 1940.

Cancer Information Bureau

Mrs. J. A. Padgeth,
Post Office,
BERRYBANK. VIC.

Dear Mrs. Padgett,

I have much pleasure in replying to your letter from Berrybank.

My advice would be to go to the Ballarat public hospital for examination and investigation. This is an excellent institution with a staff of honorary medical practitioners.

Yours faithfully,

C. V. Mackay, M.D.
Executive Medical Officer.

Berrybank
P.O. Victoria

The Information Branch

Dear Sirs

For the last week or so I have had a peculiar tight feeling in the upper part of my stomach & thought it was wind so went to the local Doctor who gave me a powder & advised me to wear Sergical corsets. but got no releif; is it possible for a Dr to locate a growth without an Xray & if not have you a branch in Ballarat as it is only 40 miles to there & I could go in & be examined awaiting your advice

yrofthfully

J. A. Padgett

P.S. I saw this in the Sun May 1st 40

J. A. P.

CVM/HA

6th May, 1940.

Cancer Information Bureau

Mrs. F. N. Parkes,
19 Macpherson Street,
DANDENONG.

Dear Mrs. Parkes,

I am pleased to answer your enquiry of the 1st May.

Your symptoms are not suggestive of cancer. Should you, however, feel any doubt at all then I recommend an early consultation with your local medical practitioner.

Yours faithfully,

C. V. Mackay, M.D.
Executive Medical Officer.

19 Macpherson St
Dandenong
May 1st 40

The Cancer Information Bureau
Spring St

Dear Sir

Remembering your warning in the Argus, I am writing to ask you what to do about certain symptoms which now exist or if I should take no notice of them.

They are stings of pain as from a burn in the left breast occasionally. It is above the ribs. There seems to be no lump, or soreness when massaged.

Age, in the fifties

I would be obliged if you can advise me as soon as possible.

Yours truly
(Mrs) F. H. Parkes

19th March, 1940.

R. Pretty, Esq.,
14 Raleigh Street,
ESSENDON, W.5.

Dear Mr. Pretty,

In reply to your letter of the 17th March, I am enclosing an enumeration of what are considered early symptoms of cancer.

Yours sincerely,

C. V. MACKAY, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria Information Bureau.

Enc.

CVM.MD

14 Raleigh St
Essendon W5

G V McKay Esq MD

March 17th 40

Dear Sir

I am in receipt of your reply to my letter addressed to the Registrar University

My reason for the enquiry was that a Sister and a brother both died from Cancer and I had been indisposed with what my medical adviser called ~~dyspep~~ dyspepsia and I was afraid it might the start of Cancer as I had lately been troubled by hiccough upon turning over in bed upon mentioning this to my Doctor he asked me if I was losing weight. I replied in the negative he said Well don't worry The Stomach trouble has now disappeared but the hiccough remains as before, but, as I cannot appeal to you as one suffering from Cancer I would thank you for any information concerning early symptoms of the disease.

Yours Sincerely

L Pretty

14th March, 1940.

R. Pretty, Esq.,
14 Raleigh Street,
ESSENDON, W.5.

Dear Mr. Pretty,

Your letter addressed to the Registrar of the Melbourne University has been sent to me for reply.

The Anti-Cancer Council of Victoria, constituted by Act of Parliament in December 1936, has established a Cancer Information Bureau at the Royal Australasian College of Surgeons in Spring Street, Melbourne.

The procedure adopted has been to intimate in the daily Press that the Bureau is anxious to supply all available information about cancer to any enquirers. The only stipulation is that the request must be made in writing, as we are quite unable at present to deal with any personal applications.

As Head of this Bureau, I have been privileged to give advice to many people suffering from cancer.

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.MD

14 Raleigh St
Essendon March 3rd 40

The Registrar
Melbourne University

Dear Sir

Some time ago listening to a talk on Cancer it was said that to successfully combat the disease it must be diagnosed at an early stage, and that the Government intended establishing a Cancer Clinic at the Melbourne University with that end in view

I enclose stamped envelope for reply Would you be good enough to let me know if this has been done, and give me any information you can upon the matter

Thanking you in anticipation

I am Sir

Yours Sincerely

E. Gretty

12th March, 1940.

Mr. L. Powell,
Fraynes Avenue,
RUPANYUP.

Dear Mr. Powell,

Since writing you on the 5th March I have ascertained from the medical authorities of the Horsham Base Hospital the extent of the cancer in your son's case.

It is with the greatest regret that I have to confirm their opinion that medical science cannot do anything more for him of a curative character.

Believe me,

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.MD

Lister House,
Horsham
March 9th.
1940.

Dr. Charles Mackay, M.D. F.R.A.C.P.,
Royal Melbourne Hospital,
Lonsdale St.,
Melbourne.

Dear Charles,

I have received your of March 5th. with the enclosure from Mr. L. Powell of Rupanyup and will give you as much information as I can about the case.

The patient was seen by Dr. Forsyth of Horsham several months ago with a quite advanced carcinoma of the side of the tongue. Dr. Forsyth got me to see him later and we immediately inserted radon with apparently a perfect result as far as the local lesion was concerned. Within three or four weeks however firm glands could be felt in the side of the neck and these have enlarged rapidly and have become much more numerous and now are shewing up in the mediastinum.

Dr. Forsyth sent him to Melbourne for deep x-ray therapy and I think Allan Pryde applied this but the condition has gone rapidly from bad to worse,

This is another of those cases where the delay between the application of radon and removal of the gland appears to be quite fatal. It does almost seem as if the gland should be done first in these cases doesn't it, but I know this is a doubtful point. However this particular case is, I think, quite hopeless. Please let me know if there is any further information you would like about him. With kind regards.

Yours sincerely,

Roy Stokes

5th March, 1940.

Mr. L. Powell,
Fraynes Avenue,
Rupanyup.

Dear Mr. Powell,

I have received your letter of the 1st of March and on your behalf I shall make enquiries from my friends the medical men on the staff of the Horsham Base Hospital.

From what you tell me, I feel quite certain that your son has had every form of treatment which modern medical science can give. Both at the Austin Hospital and at the Horsham Base Hospital there are skilled surgeons.

As I have said, I shall make personal enquiries for you and let you know the result. Please accept my sympathy.

Yours sincerely,

C. V. MACKAY, M.D.,
Executive Medical Officer,
Follow-up Department.

CVM.MD

Mr L Powell

Fraynes Avenue
Rupanyup
Vic
1/3/40

Dear Sir

In the Sun News on March 1st about your cancer inquiry Bureau I would like to draw the case of my son to your notice He is 25 years old and as cancer on the tongue and in the thoat He as been in the Austin Hospital and is now a patient in the Horsham Base Hospital the Doctors tell me that his case is beyond Medical Aid I think it is a pity that something cannot be done for such a young man and I will be pleased to answer anything you would care to know

I Remain
Yours
L Powell

ROYAL MELBOURNE HOSPITAL,
xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx

Lonsdale xxxxx

12th March, 1940.

The Medical Superintendent,
and Cancer Registrar,
Prince Henry's Hospital,
St. Kilda Road,
M E L B O U R N E, X.C.1.

Dear Doctor,

As promised when Mr. Kitson and I inspected the Cancer Register, I am sending you a sample of each of our special cancer history sheets.

If you think that they are likely to be valuable for your work at Prince Henry's Hospital I should be pleased to arrange for a supply.

I am also enclosing a specimen of the completed card which in due course you will have to forward to the Central Registry as a record of the entries in your register. Follow-up cards are also enclosed.

Yours faithfully,

per

(C. V. MACKAY.)

Enc.

CVM.MD

6th March, 1940.

Mrs. L. Priestly,
Barkly Street,
Sale.

Dear Mrs. Priestly,

The symptoms which you enumerate in your letter of the 1st of March do not suggest that you are suffering from any form of cancer.

May I advise that as you have very good doctors at sale you consult one of them privately or at the Gippsland Hospital?

Yours faithfully,

C. V. MACKAY, M.D.,
Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.MD

Sale
Mar 1st 1940

To Medical bureau.
I would like to know of something I could go by. I have had a lot of bad health I have had treatment for gall bladder trouble. and for acids.
I am no better and my muscles are very slack I am 53 yrs
if there is some cymptom I could know if it is cancer I could get som treatment or other advice
and oblige.
J Priestly.

Mrs J. Priestly
Barkly St
Sale.

31st December, 1941.

The Med. Superintendent,
Queen Victoria Hospital.

Re Lillian WOODS.

Filed under "W"

PLEASE SEND ALL REMITTANCES DIRECT TO THE HONORARY TREASURER, THE RIGHT HONOURABLE THE LORD MAYOR, TOWN HALL, MELBOURNE.

6th August, 1941.

The Medical Superintendent,
Queen Victoria Hospital for Women,
483 Lit. Lonsdale Street,
MELBOURNE, C.1.

Dear Dr. Lloyd Green, Jean Hutchings

I should be grateful for the following information.

Could you kindly supply me with histological reports on two cases of carcinoma of the breast sent to the Royal Melbourne Hospital from the Queen Victoria Hospital for Roentgen Therapy. The names are:

EVANS Helen 17/10/39
THOMSON Elizabeth 22/4/41

Yours faithfully,

C. V. MACKAY.

TEL.: CENTRAL 1184 1185

QUEEN VICTORIA MEMORIAL HOSPITAL
For WOMEN and CHILDREN
MINT PLACE, MELBOURNE
CR. WILLIAM & LIT. LONSDALE STS.

ALL COMMUNICATIONS TO BE ADDRESSED TO THE SECRETARY.

6th. August, 1941.

Dr. C.V. Mackay,
Anti-Cancer Council,
Royal Melbourne Hospital,
MELBOURNE. C.1.

Dear Dr. Mackay,

Mrs. Helen Evans was admitted here for mastectomy on 19th. September 1939. She stated she had a lump in the Left breast for 2 years, and had recently noticed a lump in the axilla. The pathologist reported " the tumour was microscopically a scirrhus carcinoma. Other sections showed that the carcinomatous cells had infiltrated more (macroscopically) normal looking tissue. Section of one axillary gland showed great replacement by carcinomatous cells. "

Mrs. Evans was discharged to the Melbourne Hospital for X-Ray therapy on 9th. October, 1939.

Mrs. Elizabeth Thompson was admitted on 17th. February, 1941 for investigation of a lump she had noticed in right breast two weeks previously. The lump was excised and Professor MacCallum reported" the specimen from the breast of the patient is carcinomatous. In some areas it has the characters of a scirrhus, but particularly at the periphery the neoplastic cell masses are larger and the fibrosis less in evidence (accounting for the general softness of the growth). The tumour is very anaplastic shows much cellular and nuclear variation in size and staining characters, and many signs of active growth in the presence of mitoses in most fields. The fat is being invaded and there is a good deal of marginal lymphocytic reaction. No cystic structure was encountered in the specimen. There is no doubt of its active malignancy."

A radical mastectomy was performed on 23rd. February. The pathologist's report is " Macro. Large cavity filled with blood clot. No other lumps found. Axillary tissue contained small glands, one appeared rather mottled. Micro. Two of the

TEL.: CENTRAL 1184 1185

QUEEN VICTORIA MEMORIAL HOSPITAL
For WOMEN and CHILDREN
MINT PLACE, MELBOURNE
CR. WILLIAM & LIT. LONSDALE STS.

ALL COMMUNICATIONS TO BE ADDRESSED TO THE SECRETARY.

glands examined show no definite malignant infiltration. The third - which was mottled macroscopically - has areas of rather degenerated cells which have a very suspicious appearance, and must I think be regarded as infiltrating malignancy."

Mrs. Thompson was referred to you for X-Ray Therapy on 19th. April, 1941.

Yours faithfully,

Jean A. Hutchings

MEDICAL SUPERINTENDENT.

Royal Melbourne Hospital,
xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx
Lonsdalexxxxx

23rd January, 1940.

Capt. E. R. B. Pike,
Secretary,
Queensland Cancer Trust,
Ann-street,
BRISBANE.

Dear Captain Pike,

Many thanks for your letter of the 9th January with enclosed copies of leaflets for publicity. Owing to my absence from Melbourne I was unable to acknowledge your letter at an earlier date.

I am very grateful for the complete information about the Queensland Cancer Trust which you have given me; it will be of considerable assistance.

We are working on similar, if not quite parallel, lines to yourselves.

Yours sincerely,

C. V. MACKAY,

Executive Medical Officer,
Anti-Cancer Council of Victoria.

CVM.MD

TELEPHONE: B 4555

QUEENSLAND CANCER TRUST

THE QUEENSLAND BRANCH OF THE BRITISH EMPIRE CANCER CAMPAIGN

KINDLY ADDRESS COMMUNICATIONS TO
THE SECRETARY, QUEENSLAND CANCER
TRUST, C/O QUEENSLAND AMBULANCE
TRANSPORT BRIGADE
ANN STREET

PATRON
H.M. The King
PRESIDENT
H.R.H. The Duke of Gloucester, K.G.

ANN STREET
BRISBANE

9th January 1940.

Dr. C.B. Mackay,
Liason Medical Officer,
Anti-Cancer Council,
Royal Melbourne Hospital,
MELBOURNE.

Dear Dr. Mackay:

Dr. B.L.W. Clarke, the Honorary Radio-therapeutist to the Trust has asked me to give you some particulars of its general organisation and work.

When the Trust was formed some ten years ago following an appeal for funds, the general opinion was that it was desirable that the body responsible for organising and carrying out a plan for the establishment of a cancer control organisation in the State should contain a number of representative business men, as well as Medical and Scientific people, and at least some representation of Women's organisations. The result was the formation of a body which has been able to administer the funds in such a manner as to provide a reasonable measure of treatment and also to carry out an educational and publicity campaign.

In the first place the Trust quite definitely decided that the funds at its disposal were not sufficient to allow of research work as such being undertaken, and even had more money been available it considered that it was better to ally itself with such organisations as the British Empire Cancer Campaign and the American Society for the Control of Cancer, through which the results of research work are available. On the formation of the Union the Trust became a member of the International Union against Cancer. It is very desirable that the attitude of the Trust in regard to research be not misunderstood. It considers that such funds as are available to it are better expended in treatment, although it does encourage those who are responsible for the carrying out of such treatment, as well as private Practitioners to carry out and record work which may be of value in solving the problems of causation and treatment of cancer. The Trust has provided funds either by gift or loan to assist men going abroad for special work and experience in clinics in Great Britain, and the Continent. At the commencement of its work, the Trust considered that its duties were mainly -

1. To provide suitable means of treatment.

2. To educate the people in the signs and symptoms of the disease, and particularly to the fact that by early diagnosis, and treatment, it may be cured.

3. To provide means whereby patients could be brought to treatment centres.

(1) - While the desirability of a Central Hospital was and still is fully realised it is not practicable under present conditions to treat all caseswhich may occur among asparse population in such a large area as Queensland in one Centre. The Trust therefore decided to make available a supply of radium and other treatment facilities to certain centrally situated Hospitals, providing the bodies controlling them would accept the responsibility and would arrange for Medical Officers to be trained in radium treatment, as well as for Sisters to attend for training at Clinics which had already been established in Brisbane. The expense of training these Sisters is borne by the Trust.

The Hospitals concerned were those at Cairns, Townsville, Mackay and Rockhampton. Townsville is regarded as the main Centre, having been provided with about one hundred and twentyfive milligrammes of radium, a special cancer ward being furnished at the expense of the Trust, and arrangements made for an annual allowance towards clerical and other expenditure. The idea is that cases which cannot be treated at Cairns with the radium there, should be sent on to Townsville for examination and treatment if suitable, together with all those from the main Western line, which goes as far as Mount Isa, and cases from the Gulf and northern parts of the State. In the same way those which cannot be treated at Mackay or Rockhampton, which covers the western part should be sent to Brisbane, while those from the South and southwest come to Brisbane also. A number of diathermy machines were made available to country hospitals. In many instances if the supply of radium is insufficient it may be augmented at Cairns from Townsville, and at Mackay and Rockhampton from Brisbane, while additional supplies can also be sent to Townsville. Deep Therapy treatment is available by a private Practitioner at Cairns, the fees for necessitous cases being paid by the Trust.

In Brisbane the Brisbane and South Coast Hospital Board established a radium department on receipt of a supply loaned by the Commonwealth Government. In addition the Trust has loaned radium from its supply to the Board. At the commencement of operations the Trust offered to make available Deep X Ray therapy machines for use both by the Brisbane and South Coast Hospital Board and the Mater Misericordiae Hospital. The Hospitals Board found itself unable to take advantage of this Offer, so that for ten years all deep therapy cases have been treated at the Trust's Clinic, the expense of transportation from the Hospital being borne by the Trust. The Hospital Board is at present installing a Deep Therapy Plant. Following the offer of a Plant the Mater Misericordiae Hospital agreed to make accommodation available, but not to accept the responsibility of providing treatment. The Trust therefore established its main Clinic at this Hospital, where it provides all forms of treatment, including that by a Chaoul Machine which was presented to it by Lord Austin. The Trust is granted the use of beds in the Hospital together with the Operating Theatre, these being made available to its Honorary Medical Officers. Comparatively recently in conjunction with the Hospital Board and the Queensland University a radon plant has been installed and Dr. H.C. Webster appointed as Physicist. The Trust paid 50% of the cost of the installation of the plant, while Dr. Webster's salary is paid in equal parts by the three bodies concerned. The University have made available accommodation, and have given most generous assistance in every way. Previously to the establishment of a plant radon was obtained from the Cancer

Research Committee of the University of Sydney by the Trust for the use of the State.

(2) Educational and publicity work has been carried out by giving public addresses, distributing pamphlets, displaying posters, using the Press and the Wireless. I am sending you copies of leaflets which have been prepared, from which you will notice they have been addressed to various sections including Dentists, Hairdressers Nurses, Business men, Clergymen, Country Women, etc. It is interesting to know that the one address to Hairdressers had very valuable results. I am also sending you a copy of Advertising in the Cancer Campaign, which indicates the lines on which the Trust has worked. The visists which have been paid annually by a representative of the Trust, generally one of the Medical Committee, together with myself, to Centres where radium has been made available, and to various parts of the State have been very valuable both from the Educational and Publicity aspect, and in letting the public know the use which is being made of the money which was subscribed.

(3) An arrangement has been made by the State Government whereby the Trust is empowered to issue rail warrants for necessitous cases, the cost being paid equally by the Government and the Trust. In addition funds are provided for travelling and lodging expenses where necessary.

I think this will give you some indication of the way in which we have tried to organise the Cancer control work in Queensland. The Trust started with about £50,000 which after the provision of the plant, and carrying on its work, has at present been reduced to about £18,000. All work by Medical Men has been entirely honorary. The Trust realise that without this it would not have been possible to carry on. Its only source of income at present apart from interest is from the hire of radium to approved Private Practitioners, and from donations made by patients to the Clinic.

The system of case recording which has been instituted in Victoria, which was explained to us by Dr. Clarke is at present impracticable here. It is a wonderful system and we hope that at a future date it may be possible to adopt something of that nature.

I think that a good deal of the information which I have tried to give you here has been previously supplied to the Secretary of the Anti-cancer campaign, both before the formation of that body and after. During the holding of the Cancer Conference in Melbourne, I suggested that publicity and education receive more attention than it was doing then; because from a business point of view if from no other, it is useless to provide the most efficient means of treatment, unless people are told when and how to take advantage of it.

If there is any further information I can give, please let me know.

Yours truly,

Secretary.