tumoral-looking mass, that was as big as the kidney. The average weight of these masses was 18.8 ± 2.8 g while the ovarian weight of the controls was 26.3 ± 2.20 mg. These tumoral-looking masses could be solid or cystic, but more often showed a combination of these features. The cysts contained a transparent liquid. The masses were well

In most animals a hypertrophy of renal arteries and veins was found. The kidneys had some irregularities in the place where the graft had taken place, but we were unable to find evidence of surviving pituitary tissue there in the histological study. The uterus and vagina had a macroscopic appearance similar to that of normal female controls.

The ovarian masses were fixed in 15% formalin and prepared for histological study with hematoxylin eosin. The solid masses consisted of cellular cords included in a massive fibrosis. The cells were dense with a xanthomatous aspect that reminded us of luteinized theca cells. There were also cellular groups around a central cavity, as if they were follicles deformed by the fibrosis (figures 1 and 2).

Besides the cysts filled with transparent liquid, other cystic cavities were filled with pus, as shown histologically. We interpreted these macro- and microscopical findings as a large bilateral cystic hyperplasia and hypertrophy of both ovaries. It was found in all the 8 pituitary-grafted animals which survived until the end of the experiment and in none of the controls. Out of the 8 animals which survived, 6 had

been found to be clearly hyperprolactinemic in the measurement made 2.5 months after the graft. Unfortunately, no prolactin assay was done at the autopsy.

These striking ovarian changes may perhaps be due to changes in the gonadotrophin or prolactin secretion. Further histological and hormonal studies should be made in order to clarify this point.

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