CLINICAL NOTES.

A CASE OF THE IMPETIGO OF DUHRING.

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UNDER this name Duhring has described a rare form of pyoderma, which he believes to be the true form of Impetigo, and, indeed, the only affection to which it is proper to apply this term. Some dermatologists, with wide experience, are unable to admit that this affection is anything more than a form of that contagious impetigo described and named by Tilbury Fox in 1862.

On November 15th, 1894, I saw the following case, in consultation with Dr. C——. The patient, aged 3 years, was the child of wealthy parents, living under the best of circumstances. The eruption was preceded by smart fever and much lassitude. The temperature quickly fell, and when the patient appeared to be convalescent a small crop of pustules was noticed on the face and neck. There was an interval, after which fresh pustules appeared on the chest. There was no further rise of temperature with the appearance of each fresh crop. When I saw the patient there were about a dozen pustules scattered widely over the whole body. One of the pustules had formed just half an hour before my arrival; it was, as Duhring describes it, distinctly and completely pustular. In this short time it had attained a size of rather more than a sixteenth of an inch. It was surrounded by a red areola; this red areola surrounded all the pustules which had not fully matured, but disappeared when maturity was reached. The older pustules were semi-globular in shape, the size of a split pea up to that of a small finger-nail, distinctly elevated, surrounded by a red zone; the colour was yellowish, with specks of white. The walls of the pustules were dense; in fact, their hardness or induration was such as I have never felt in any pustules except in those of small-pox. None of the pustules were umbilicated, but they became flatter as they matured. The walls did not rupture, and there was no free exudation, the pustule

gradually drying up into a scab. There are features in this case which seem to me to distinguish it from contagious impetigo. There was no evidence that this affection was contagious; there were two other children in the house, but neither of them have caught the disease up to this date. The lesion was pustular from its origin. The induration was second in degree only to that of small-pox pustules. There was no free exudation and irregular scabbing. The universal distribution of the lesions, with wide intervening spaces of healthy skin. On the other hand, the lesions of contagious impetigo are more superficial in their seats of development, have thinner walls, and sooner or later rupture and discharge their purulent contents. In the vast majority of cases contagious impetigo occurs in the poor and ill-fed, and those who are not well acquainted with cleanliness. On the other hand, Duhring's impetigo is usually met with in well-nourished and healthy subjects, and in those in the gentler walks of life. I regret that the circumstances of the case would not allow me to apply any experimental test, for after all it is to the laboratory that we must go for a solution of the question.

A CASE OF MYCOSIS FUNGOIDES.

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THE patient was sent to me from North Wales by her medical attendant. She was 45 years of age, in comfortable circumstances, and had lost her mother and sister from phthisis. She had never been in a tropical country, and had never suffered from any serious illness before. As to the history of her present trouble, the patient can give but a vague account. Her story was practically this, that some four or five years ago a moist pruritic eruption appeared on the left arm, remained a few months and then disappeared spontaneously. The eruption continued to reappear at intervals, and was confined to one or more of the extremities. Little exact information can be obtained about the features of these early eruptions, except that they were very rebellious to treatment and disappeared sometimes spontaneously. During the last twelve months the entire cutaneous surface has become affected. The first tumour started about two or three weeks before her admission to the Royal Infirmary, and grew with astonishing rapidity. At the time of her