the previously debilitated condition of the patient as furnishing a soil favorable for infection. Experimental inoculations practiced upon animals produced in one instance hemorrhages into the lungs, in others the characteristic picture of infection with the colon bacillus.

Mixed Sclerodermia.—H. RADCLIFFE-CROCKER (*British Journal of Dermatology*, January, 1899), at a meeting of the Dermatological Society of Great Britain and Ireland, exhibited a patient with the atrophic form of morphea upon the chest and perceptible hardening of the deltoid and triceps, especially on the left side. Improvement, to a certain extent, had occurred under treatment. The skin over the chest was much atrophied. The exhibitor regarded the case as going far to prove that superficial morphea and deep sclerodermia were only variations of the same process.

Multiple Cutaneous Lupus Following Measles.—ADAMSON (*British Journal of Dermatology*, January, 1899) reports a case of verrucose lupus, with multiple lesions, occurring in a boy three years of age, in which the eruption was said to have appeared first during an attack of measles when the patient was two years of age. The lesions appeared simultaneously, and since the first eruption there had been no new lesions, although the old ones had grown larger. The eruption consisted of raised, purplish-brown patches, from a tenth to a quarter of an inch in diameter. Many were scaly, and those upon the hands were warty. They were most abundant upon the right elbow, the right wrist and hand, on both knees, and the right ankle and foot. Later the patient was treated for post-pharyngeal abscess and hip-joint disease. There was no family history of tuberculosis.

An Affection of the Skin Due to the Demodex Folliculorum.—DEAMICIS (*British Journal of Dermatology*, January, 1899), at the annual meeting of the Italian Society of Dermatology and Syphilography, described a parasitic affection of the skin due to the demodex folliculorum, which appeared as a pigmented patch of a café-au-lait color upon the chin and lip of a woman, aged twenty-seven years. The discoloration was at first thought to be due to the microsporon furfur, but this fungus could not be found. Large numbers of demodex were present, however, and treatment directed to the removal of this organism was followed by the gradual disappearance of the pigmentation. Majocchi likewise had seen two cases in which the demodex had been found in pigmentation of the skin accompanied by slight desquamation.

Tuberculous Folliculitis.—KRACHT (*Annales de Dermatologie et de Syphilographie*, 1898, No. 12), at a seance of the Dermatological Society of Moscow, presented a youth, aged seventeen years, with an abundant eruption upon the face, the backs of the hands, the extensor surface of the forearms, the buttocks, the knees, and over the tendo Achillis. The anterior surface of the forearms was entirely, the trunk almost, free. The eruption consisted of millet-seed-sized, bright-red, umbilicated nodules, covered with a small crust. Between the lesions were numerous small cicatrices. The eruption