DIFFUSE LIPOMA AND ANIMALS:

PUBIC LIPOMATA IN MAN, AND NUCHAL LIPOMATA IN MAN AND ANIMALS.

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THE publication in THE LANCET of my paper describing a case of huge accumulation of fat on the pubes¹ has been the means of bringing me the narrative of another example of the same thing.

So far as I am aware, these two are the first that have been yet described, but as they are exactly alike we may consider that they substantiate the statement that the well-known nuchal lipomata have their representatives in the pubic region. It is not improbable that there are not a few examples of them, as for the most part they are easily concealed and patients will not be inclined to disclose them.

In my case the fat masses were so large (see the illustration in the previous paper) that they completely concealed the penis and greatly interfered with both its functions. In the

second case my informant states that the condition was very inconvenient in micturition. Both of the patients had large accumulations of fat on the nape of the neck—the ordinary and well-known diffuse lipoma peculiar to that region. We may, I think, consider the point established that the fat which undergoes hypertrophy is that which is normally present around the roots of the large sexual hairs in the regions named.

In the human subject no very conspicuous hairs are present in the back of the neck, but the region is that on which in the

lower animals mane is produced, and it will be remembered that I have shown that in the case of asses these fat growths are met with in that position. I now introduce an illustration of one of them which was accidentally omitted in my former paper. Although the hairs of the mane have been for the most part suppressed in the human subject, we may suppose that the subcutaneous fat still retains its proclivity to growth. In a few individuals some slight representation of a mane is actually present in men. I do not doubt that these nuchal lipomata in asses are fairly common and need only to be looked for. They offer an interesting opportunity for observing the effect of diet, beer, &c.

Do they ever occur in females? In what other animals are they met with?

The case to which I have referred has been communicated to me by Dr. Horace Colman of Broughty Ferry, who has kindly added to my obligation by supplying the following particulars. The patient was a man aged 55 when Dr. Colman first saw him. He was the subject of phthisis, but was still somewhat fat. Subsequently the general body-fat entirely disappeared, and he died from phthisis, very much wasted, about two years later. He had been in the habit of drinking whisky very freely. The special fatty masses which were the in-

Doukey with nuchal lipoma. The mane is seen to be dragged down to the left by a large growth of fat about its roots. The animal was a well-fed gelding of middle age. The lipoma had been growing for two or three years (from an original photograph).

teresting feature in his case diminished much as his emaciation progressed, and became more conspicuous from the disappearance of the body-fat. They were, however, in reality much smaller. Those on the nape of the neck were of enormous size; and the others were, as Dr. Colman states, exactly like those figured in my previous paper in THE LANCET, and entailed similar inconveniences. The course of the phthisis occupied three years, but the end was hastened by two attacks of cerebral hæmorrhage. Dr. Byrom Bramwell had seen the patient in consultation.

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¹ THE LANCET, March 25th, 1911, p. 800.

A CASE OF THROMBOSIS OF THE
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THE patient, a man, aged 25 years, was admitted to Charing Cross Hospital in November, 1909, under the care of Dr. F. W. Mott, complaining that for about 11 months he had suffered from throbbing pains and swelling of the head and neck. The swelling of the neck had increased so that a 16½-inch collar was now too tight, whereas before he had worn a 15-inch one. He had been subject to paroxysmal attacks of suffocation, with straining cough and retching, which used to come on at night-time, waking him from sleep. He used to sleep alone and could not say how long the attacks lasted, but thought that he had had about eight or nine attacks during this time. They would pass off and leave him almost collapsed. He could associate them with no causative factor. During this time the swelling of the face

and blueness were noticed by his friends. The condition was also felt and observed to be worse in the morning or after lying down. The patient stated that he had always been healthy and strong until 1906, when he had gonorrhœa, which lasted about eight weeks. Previously to this he had passed the medical examination to the artillery service, in which he subsequently served for three years. He had never had either a sore, a rash, or a bubo up to that time. In 1908 he had an illness which his medical attendant called meningitis, in which he suffered from throbbing pains in the head and the spine, with swelling of the right leg. For this he was sent to the infirmary, where he remained for six weeks. The medical officer at the infirmary did not agree with the previous diagnosis. (I have not been able to find any record of his case in the neighbouring infirmaries.) In June, 1909, the patient saw a medical man for the present symptoms, and this practitioner advised attendance at the London Hospital. Through the courtesy of Dr. Lewis A. Smith and Dr. C. E. Zundel I am able to give the exact condition in which he presented himself there. He gave his history much as given above and denied syphilis. He appeared puffy about the face and neck with prominent veins on his forehead. There was a pustulo-papular eruption on the chest, the arms, and the face; also distended veins were to be seen