

Chancre of the Lip Probably Acquired Through the Use of a "Rouge Stick."*

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ON December 18th, 1896, I was called to see an unmarried girl, twenty years of age, who was suffering from a sore on the left side of the vermillion border of the lower lip, which she had first noticed about one week before. The lesion was covered by a brown, flat, depressed scab; but a raw surface extended down a short distance on the inner side of the lip, and there abruptly ended. The right sub-maxillary lymphatic nodule was very much swollen, hard, and somewhat painful. This was the only subcutaneous node which was demonstrable, and, except the lesion on the lip, there was no eruption of the skin, or in the mouth, and the hair did not show a tendency to fall out.

The appearance of the sore, as well as the marked enlargement of a neighbouring lymphatic nodule instantly raised the suspicion that it was a chancre. The closest questioning could only elicit that she had had a "cold-sore," which a druggist had touched with a stick of silver-nitrate. This cauterization had, however, taken place only about a week before I saw her, so that it was clearly not at that time that the infection had occurred.

The gravity of the question involved was explained to the patient, as was also the necessity of making an accurate diagnosis even at the expense of great personal discomfort. A positive diagnosis was not made until January 30th, 1897, forty three days after she first came under observation. At that time the sore was very large and painful, and projected out from the lower lip in the characteristic dish-form, with rolled edges and with a great deal of firm induration in the surrounding tissues. The enlarged lymphatic node under the right side of the lower jaw had decreased in size, but the anterior and posterior cervical lymphatic nodules on both sides were now demonstrable, and there was a well-marked roseolar eruption upon the chest and abdomen. There were also mucous patches upon both tonsils. There was pain and tenderness over the inner aspect of the upper third of both shin bones.

She was given mercury and chalk tablets internally, and unguentum

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