

The hyperaemias or congestions of the skin met with in the hysterical may be active or passive. The active forms of hyperaemia are either a morbid blushing or a fugaceous erythema, which might be classified as erythema fugax of the books. This form of erythema is characterised by transient erythematous patches and occasionally by reddish papules appearing after emotional disturbances and also, though rarely, after exertion. These lesions are usually on the face or neck, but may extend to other parts of the body. The patients are hysterical, or suffer from exophthalmic goitre, traumatic neuroses, neurasthenia, or other forms of vasomotor disturbances.

Urticaria is disease that occurs in persons with a peculiar irritability of the nervous system. This susceptibility may run through several generations. Without this predisposition of the nervous system the usual exciting causes would fail to call forth the trouble. The hysterical state is usually found in persons who are subject to urticaria.

Oedemas of the skin may occur in the neurotic. They may be white, pink, red, or blue. In some instances the oedemas may be transient, in others assume a very chronic course. In Quincke's disease each lesion is transient, but as these come in successive crops, the disease may be quite chronic.

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CHORIONEPITHELIOMA.

The first article in the issue is by Dr. F. A. L. Lockhart on the above subject. It is a very exhaustive and valuable contribution to the literature of this subject.

He commences his paper by stating that the placenta is formed by the trophoblastic cells of the embryo penetrating into the maternal tissues, and so preparing that way for the villi to follow. These trophoblastic cells are found lying in the mucous membrane and muscular wall of the uterus. These cells, the syncytium and Langhan's cells, are found between the first and tenth week of pregnancy. They may persist throughout pregnancy and be found in the puerperal uterus. They may form a new growth, the deciduoma malignum of Sanger or, as it is now universally called, Chorionepithelioma. The growth is extremely malignant and follows conception or in connection with teratomata. It is marked by its appearance during the puerperal state, rapid growth, haemorrhages, metastases by the blood vessels, and the presence of cellular elements not found in any other tumor.

The disease has been recognized only for the past 14 years or so. Prior to that date cases were called carcinoma of the uterus. Sanger