

A MORNING WITH MR. MALCOLM MORRIS AT ST. MARY'S HOSPITAL.

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The time spent in the out-patient department of any of the great London hospitals is always interesting and generally very instructive, but a recent morning with Mr. Malcolm Morris in the skin department of St. Mary's was especially so. During the course of a couple of hours seven or eight cases of quite rare occurrence or peculiar interest presented themselves. These, in the hands of this celebrated dermatologist and teacher, were so skillfully handled and their peculiar characteristics and distinctions so clearly brought out, that it could not but occur to me that a brief mention of them might be of some interest to the readers of the NEWS.

(1.) *Rickets, Lupus Erythematosus and General Syphilide.*—This was the first case of surpassing interest that came in. The patient was a man about thirty years of age, married, who came for treatment of an extensive inflammatory process involving nearly the whole of the right side of the face, nose, neck, extending downward to the upper border of the clavicle. He stated that he had suffered with it since the age of seven, that it was subject to exacerbations, being worse after prolonged exposure to the weather, and that at the present time it had assumed so angry a condition that it had forced him to seek relief.

At a glance there could be no doubt as to the diagnosis, more especially as lupus seems to be an extremely common disease in this country, being much more noticeable in this respect than in the United States. This case, however, presented some peculiarities. A raw and "weeping" surface pervaded the whole lesion, which gave it a somewhat eczematous appearance, as often seen in many manifestations of the latter protean disease. This, not escaping the eye of the acute observer in charge, caused further enquiries to be made, which elicited the admission that he had a "rash" all over his body. Stripped, the patient exhibited a mixed and symmetrical eruption, with adenitis of the neck and groins so perfectly characteristic that it did not require the presence of a half-healed chancre on the penis to demonstrate at once the