

## Society Proceedings.

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### MONTREAL MEDICO-CHIRURGICAL SOCIETY.

*Stated Meeting, April 17th, 1896.*

F. G. FINLEY, M.D., FIRST VICE-PRESIDENT, IN THE CHAIR.

#### **Ichthyosis Hystrix.**

Dr. G. GORDON CAMPBELL showed a photograph of a remarkable case of this disease. The patient, a boy aged seven years, was born in Vermont, and, except for the discomfort caused by the cutaneous lesion, had always had good health. The family history was negative; one sister, three years of age, showed no tendency to xeroderma. The eruption was first noticed, three weeks after birth, as a thickening of the skin of the palms and soles; and since then, although there had been marked improvement at times, the boy had never been entirely free from it. The distribution was accurately symmetrical and the intermediate skin perfectly healthy. The palmar surfaces of the hands from the wrist to the tips of the fingers were covered with dark-green horny masses, half an inch in height, and so thickly set together that it was impossible to close the hand. Less prominent warty growths extended on to the backs of the hands, forming a bracelet around the wrist and covering the knuckles and backs of the fingers. The whole of the feet from the ankles down were covered with similar horny growths, thickest upon the soles, and rendering any movement of the instep or toes impossible, except after softening with some oily application. There were also small patches, about two inches in length and half an inch in width, running vertically at the anterior axillary lines and the groins; broad patches on the extensor surfaces of the knees and elbows; and one surrounding the anus and following the fold between the buttocks. The horny growths in these latter localities were not nearly so prominent. Owing to the apparent increase in the size of the extremities, due to the heaping up of epidermis, the condition had been mistaken for elephantiasis.

#### **Foaming Liver.**

Dr. J. G. ADAMI showed specimens of a case, a report of which will be published later.

Dr. C. F. MARTIN recalled two instances of a condition somewhat similar to that described by Dr. Adami. In one, at a *post-*