

Several interesting family histories are reported illustrating these points. Care must be taken, however, in differentiating what might be called incidental syphilis and what we may diagnose as pertinent syphilis. As an example of the former, he mentions a case of pneumonia recently seen by him. The symptoms in two other sisters and in the father were such as would suggest familial syphilis, and it was unnecessary to ask questions or make blood tests, but this, he says, was clearly incidental to her pneumonia and it did not call for therapy at that time. If her convalescence, however, was protracted, he thinks the underlying hereditary taint might become pertinent and call for treatment. While the Wassermann test is undoubtedly the most valuable laboratory test discovered, it is not to be absolutely depended on. To the important dictum "When in doubt have a Wassermann test" Stoll would add, "Make an intensive study of the family before the Wassermann."

#### OBSERVATION ON PRURITUS ANI.

Dr. Wwight H. Murray, of Syracuse, N. Y., read the sixth annual report of his original research work on pruritus ani and valvae, adding reports of 25 cases to the former series of cases, making 123, the bacteriology of which shows 95 per cent. of the cases a streptococcic infection as the etiology for these troublesome conditions. He stated that his claim, that the streptococcus fecalis is the etiology of pruritus ani, is now confirmed by many leading physicians throughout the United States, who have been investigating the subject.

He finds from the experience of this past year that far better results are obtained by the use of autogenous vaccines with more than 1,000 million dead germs to 1 c.c.

He states that not one of the cases of pruritus ani and vulvae pruritus scroti in the 123 cases have had diabetes and, as a result of this, he questions very strongly whether diabetes is ever the cause of these conditions, unless as a complication, and under such conditions there would be a general pruritic condition of the skin.

Last year, in his fifth report, he described cases of pruritus ani that did not show improvement under the administration of the autogenous, streptococcic vaccine. These cases were later found to have a staphylococcic infection as a complication and when an autogenous staphylococcus vaccine was administered with the autogenous, streptococcic vaccine improvement resulted. He has found proof of this same condition during the past year and believes that these cases show a characteristic whitish appearance of the skin spots, particularly around deep skin fissures. Abstracted from American Proctologic Society report.—*The Medical Summary*, Sept., 1916.