

found similar histological changes to those above described. There was dilatation of the mouths of the follicles, the enlarged space was filled with a horny mass, there were prolongations of the rete into the corium, the glandular structures were not implicated in the process, and the so-called psorosperms were present. These peculiar bodies escaped Dr. Bowen's special notice until after Darier's description, just as they escaped, much to my regret, my notice in a case observed by me about eight years ago, although they were plentiful in some of the sections. Dr. Bowen was not satisfied, however, that the psorosperms were ever intra-epithelial in his sections, and furthermore he found that the horny plugs were not made up, as Darier states, of simply refracting granules but of corneous cells, the result of a hyperkeratosis. "Microscopically, sections cut parallel with the long axis of the horny plug showed the round psorosperm-like cells at the base of the concretion, and they could be traced upward some distance, gradually becoming flattened and fused together, until in the firm, hard, upper portion the mass is composed almost entirely of lamellæ having much the appearance of broad bands of fibrous tissue, arranged in bundles running vertically and obliquely and containing small elongated nuclei." As the bodies in question are said, when situated in the granular layer, to contain granules characteristic of this layer of the epidermis, and show the same reaction to staining agents when in the stratum corneum as do the tissue cells of the part, Dr. Bowen thinks they must undergo at least a partial keratosis, a change not to be expected of an animal parasite.

In the *Journal of Cutaneous and Venereal Diseases* for 1886, Dr. Morrow, of New York, described a rare case of cutaneous disease under the title of keratosis follicularis, and this case has been referred to by Dr. White in his article as presenting many features in common with his cases. As I made a most careful microscopical examination of some of the lesions in this case and failed to find any psorosperms or signs of special activity of the rete or of inflammation of the corium, I will briefly refer to the clinical characters that were present. The eruption occupied the entire follicular apparatus of the skin, with the exception

of the face, palms, and soles. The ducts of the sebaceous glands projected above the general surface and filled with a comedo-like substance, which in some cases formed projecting plugs from one-quarter to half an inch in length. This material, when pressed out, was hard and dry in the outer portion and softer within the follicle. Removal of the plug left the duct dilated and projecting. None of the follicles showed evidence of irritative action or signs of inflammation, differing in this respect very greatly from the cases described by Darier. Microscopical examination showed a hyperkeratosis of the follicular orifice and a comedo-like collection of material in the central part of the lesions.

I have had one case of this condition under treatment or observation during the last seven years. He was first a patient of Dr. Ludwig Weiss, of New York, and has been seen by all the New York dermatologists, who regarded the case as an example of lichen ruber of Hebra when shown before the Dermatological Society about seven years ago. That was before Darier described his cases. Last year Dr. Lustgarten saw him and recognized the affection as analogous to those described by Darier and White; and hence if there is such an entity as psorospermiosis follicularis cutis, this case should be regarded as Dr. Lustgarten's case of that disease. With this statement I will now give a short history of the eruption as observed during a severe stage of the disease. M. L., male, æt. 49 years, was in good health until he entered the United States army during the civil war. The eruption appeared after he had been about one year in the service, the lesions forming upon the forehead and sternum and consisting of small dark-red papules. Since that time the eruption has never disappeared, although varying greatly as regards objective and subjective symptoms at different periods. The eruption gradually extended, so that at present it occupies the greater portion of the body. As already stated, the eruption commenced as dark-red, elevated papules, which after a time, owing to increase in the number of lesions within a given area, gave a rough, rasp-like feel to the fingers, and presented many of the characters of lichen ruber of Hebra, and was diagnosed as such by all the dermatologists who observed the case. Whether any of Hebra's cases would be diag-