

removal. The author finally alludes to other tumors of the palate, which, though in many respects analogous to the mixed growths, present a malignant aspect, and often perforate the palate and invade the nasal fossæ and the antrum. These growths, it is stated, need further anatomical research.—*Brit. Med. Jour.*

PEMPHIGUS OF THE MOUTH.—The eruption of pemphigus sometimes occur in the mouth and on other mucous membranes. That the disease in the mouth may precede that of the skin in the ordinary form of pemphigus—the chronic—is not generally known, though this is what invariably occurs, in a rare form, pemphigus vegetans, and that the disease may remain localized to the mouth and adjacent cavities for a long time, and in some cases entirely, does not appear to be at all recognized in this country. In the *New York Medical Journal* of July 3rd Dr. Lewis H. Miller describes a case in which the mouth was affected for twenty months without the skin being involved. The patient was a man, aged 72 years, who complained of soreness in his mouth and inability to take solid food. On the roof of the mouth and on the epiglottis were patches of false membrane of considerable thickness, which, when removed, left a raw, bleeding, surface. Some decayed teeth were extracted and antiseptics used, but blebs formed on the roof of the mouth, the soft palate, the cheeks, under the tongue, and on the posterior wall of the pharynx. Bacteriological examination of the membranes gave negative results. There was neither fœtor nor salivation. Whenever the patient attempted to masticate solid food a fresh crop of blebs appeared. We consider this fact of great interest and importance. It is perfectly analogous to what may occur in pemphigus of the skin; for local injuries, and even friction or pinching, will in some cases determine the formation of a bulla at the spot. No stronger confirmation of the diagnosis of pemphigus of the mouth when the eruption on the skin is absent could be given than this production of bullæ by such trivial exciting causes. Nothing of the kind, so far as we know, occurs in any other disease. Dr. Miller quotes a number of cases in which the disease existed for long periods, in one as much as eleven years, in the mouth before the skin was affected. The rare disease, pemphigus of the conjunctiva, may be very instructively compared with pemphigus of the mouth, because in the former disease also a skin eruption may be either absent or present. The treatment is similar to that of pemphigus of the skin, though it does not appear to be very successful. In the case given arsenic seemed to produce some improvement. Opium might be tried. Mr. Hutchinson has shown it to be distinctly curative in some cases of pemphigus in which the mouth is primarily involved.—*Lancet.*