

treatment was prescribed and no external applications were made, but directions were given against handling or otherwise interfering with the mass. When the child was next seen two weeks later, a slight decrease in size could be detected and a favorable prognosis was given.—F. M. CRANDALL, M.D., in *Archives of Pediatrics*.

Cancer Houses and Their Victims.—

Whether the present state of our knowledge will permit us to declare that cancer is directly contagious or not, we cannot ignore the fact that in certain houses it does repeatedly show itself among those who have no blood relationship between them. The following cases occurring under my own care always appeared to me as most interesting coincidences—and probably they are only such—but after reading the abstract of the Morton Lecture by Mr. Shattock, which ably disposes of the histological element, as well as the valuable contribution in the *British Medical Journal*, of June 9th, by Mr. D'Arcy Power, I resolved to communicate them to the profession:

J. K., aged 50, employed as a night watchman, occupied a house of two apartments, and for the sake of quietness always slept in a concealed bed in the room. He died of cancer of the liver.

J. L., aged 54, succeeded to the work and house, and within two years died of cancer of the bladder.

A. L., aged 60, was then appointed, and he succumbed to cancer of the stomach about eighteen months thereafter.

It should be noted:

1. That these three men were all strong, healthy, and well developed, and had no previous serious illness.

2. That there was no history of hereditary transmission.

3. That there was no relationship whatever between them.

4. That the conditions of home and work were exactly similar.

5. That in all the cases the disease ran an extremely rapid course.

The house itself was one of a row of workmen's houses, built of brick on the slope of a hill, and though somewhat damp, was otherwise clean and healthy. ALEXANDER SCOTT, M.D., in *British Medical Journal*.

Dermatitis Venenata.—Felix P., twelve years of age, came under observation in May, 1893, suffering from a cutaneous eruption, consisting of numerous discrete and confluent pin-head to split-pea sized vesicles, situated chiefly upon the face, fore-arms, and hands. There was marked itching and burning, and owing to the rupture of many of the vesicles, considerable oozing of serum with the formation of yellowish crusts, especially upon the hands and fore-arms. In the face, in addition to the vesicular lesions there was considerable œdema. The disease had appeared a few days prior to the patient's visit, and had followed a day spent in the country. A lotion containing two drachms of the fluid extract of *grindelia robusta* to the pint of water, was prescribed with directions to apply it to the affected parts three or four times a day. Under this treatment the itching and burning subsided, and the vesicles rapidly dried up. This variety of dermatitis is of frequent occurrence in the summer months, and arises usually from contact with the poison ivy, *rhus toxicodendron*, although other plants are capable of producing more or less severe inflammation of the skin. It is to be distinguished from eczema, with which it is most apt to be confounded, by its localization upon the face, hands, fore-arms and genitalia, the poison being conveyed to this last situation by the patient's fingers, and by the considerable amount of œdema which frequently attends it. A further distinguishing feature, often noticed especially in the early stages, is the tendency of the lesions to occur in streaks or lines, probably the result of contact with the branches of the ivy vine.—M. B. HARTZELL, M.D., in *Archives of Pediatrics*.

Foreign Body in the Larynx or Œsophagus.—

The mother says that this boy, four years old, was playing with a piece of wooden matchbox three days ago, and when she attempted to remove it from the child's mouth it slipped down into the throat. The child is very hoarse, has marked dyspnoea, refuses to swallow solid food, and has drank nothing but a little milk since the accident occurred. The symptoms all point to the lodgment of the foreign body either in the larynx or in the œsophagus so as to press against the larynx. If this was an adult case, we should