had him arrested. He then confessed everything, including the fact that he had been shamming, and that the miracle of cure was performed by himself. Mania is another form of disease which is often simulated, and is sometimes most difficult to detect.

The fact that skin diseases are often feigned is well recognized, and in some cases the deception is so clever that the fraud may for a long time go undiscovered, especially if the patient falls into the hands of medical men who have no sense of humor, for such are easily imposed upon.

The common forms of eruption which are simulated are the erythematous, bullous, and vesicular, for these are easily produced by irritants, such as Spanish fly, mustard, acids, etc., and repeated applications of such unguents, as pointed out by the late Dr. Hilton Fagge, give rise to appearances which differ from those we are accustomed to see as the result of the use of the same substance as a local remedial agent.

Heat and friction with the fingers are often made use of to produce lesions of the skin. According to the late Mr. Startin, tartaremetic ointment has been used successfully to simulate lupus.

Local gangrene, which has been called erythema gangrenosum, spontaneous circumscribed gangrene, etc., according to the late Dr. Tilbury Fox, is always the result of artificial production. He says repeated applications of nitric acid or Spanish fly will cause gangrene, or, first, the application of Spanish fly, and on top of this nitric acid. It is well known to surgeons that the heat produced by a rubber bottle filled with hot water will produce gangrene of the skin in patients whilst unconscious from ether.

One of the cases reported below is an example of the spontaneous gangrene, and, taking all things into consideration, although no absolute proof was forthcoming, the case is doubtless one of feigned eruption.

It goes without saying, that it is most important to have a knowledge of real disease in order to detect a simulated one. The fact that most of these feigned eruptions differ from any known skin disease, both as to their situation, symmetry, and common appearance, together with the looks, history, and general conduct of the patient, must lead any intelligent and observing practitioner to suspect the fraud. That there is no known cause for the deception, or that no benefit can accrue to the simulator, goes for nothing. To excite interest and draw attention to herself is a sufficient inducement to a hysterical woman. I am inclined to believe that, on