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EDITORS AND PROPRIETORS:

A. H. WRIGHT, B.A., M.B., M.R.C.S. England.

J. E. GRAHAM, M.D., L.R.C.P. London.

W. H. B. AIKINS, M.D., L.R.C.P. London.

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Literary Communications may be addressed to any of the Editors. All Exchanges and Business Communications should be addressed to DR. W. H. B. AIKINS, 40 Queen Street East.

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ACUTE CIRCUMSCRIBED CUTANEOUS
EDEMA.

BY J. E. GRAHAM, M.D.

(Read before Toronto Medical Society, Dec. 18th, 1884.)

Three or four years ago a patient came under my observation presenting the following history:

C. M., aged 27, merchant, was healthy and strong up to five years ago, when he noticed swelling of the hands and feet, accompanied by pain and redness. The swollen condition produced weakness and stiffness of the fingers and toes. In about a week's time the swelling disappeared, and with it the other unpleasant symptoms. In two or three weeks he had a second attack, which lasted about the same time as the first. Since that time he has had repeated attacks at intervals of a few weeks. Latterly the swelling has lasted longer, and has frequently extended to other parts of the body. The arms, legs, and scrotum have been swollen at various times. The scrotum has often swollen to three or four times its normal size. He has also noticed that the slightest injury will produce the swelling. If, for instance, he catches a ball, the hand in an hour or so will become so swollen that he can scarcely move the fingers. In the same way, the pressure of a tight band around the wrist will cause an attack. During the last few months they have differed somewhat from their former character. They do not last more than three or four days in one

place, but when they disappear in one part of the body they appear in another. The largest patch which has ever existed in one place extended from the wrist to the elbow. A number of patches exist often on different parts of the body at the same time. The condition is not influenced by the seasons.

The disease has become of so formidable a character that the patient has to give up his business. If he happens to strike anything, or runs against a hard substance, a swelling follows.

Present condition: On the right hand there is a very considerable swelling. The wrist and back of the hand are swollen and puffy. The hand is double the ordinary size. There is a patch on the left wrist, which the patient expects to extend over the whole hand. There is a slight elevation of temperature, and the pulse is somewhat increased in frequency. The arm was examined, but no striking abnormality was found.

Having never seen or heard of a similar case, I scarcely knew what line of treatment to adopt. Turkish baths were recommended, and alkali with belladonna were tried for a time. Ergot was afterwards prescribed. None of the remedies appeared to have any lasting effect, and the patient passed out of observation after five or six weeks' treatment.

The history was not then published, as no such case had ever come under my notice. It was thought that the diseased condition was allied to urticaria and the cause might exist in a rheumatic diathesis.