

The Maritime Medical News,

A JOURNAL OF MEDICINE, SURGERY AND OBSTETRICS.

VOL. I.

NOVEMBER, 1889.

No. 7.

CONTENTS.

ORIGINAL COMMUNICATIONS :	PAGE	CORRESPONDENCE :	PAGE
Notes of some unusual cases of Disease, including primarily, the skin covering the mammary gland. By D. McN. Parker, M. D.	131	Sanitation in Charlottetown	142
Malignant Keloid. By A.C. Page, M. D.	134	EDITORIAL :	
Two cases of Hip-joint Disease. By Geo. G. Melvin, M. D.	134	Strychnine poisoning in St. John	143
Acute Diffuse Mastoid Osteitis; Trephining. By C. A. McQueen, M. D., M. R., C. S.	136	Disinfecting agents	144
HOSPITAL PRACTICE :		Maritime Medical Association	144
Charlottetown Hospital.—Amputations at Hip Joint.....	137	Provincial Medical Boards	145
St. John Public Hospital.—Bullet wound in the chest.	138	P. E. I. Medical Association	145
SOCIETY PROCEEDINGS :		Halifax Medical College	145
Canadian Medical Association Meeting at Banff.	138	REVIEWS AND BOOK NOTICES	146
St. John Medical Society.	141	NOTES AND COMMENTS.	146
Halifax Branch, B. M. A.	147	PAMPHLETS RECEIVED	148
P. E. I. Medical Association	141	PERSONALS	148

NOTES OF SOME UNUSUAL CASES OF DISEASE, INVOLVING PRIMARILY, THE SKIN COVERING THE MAMMARY GLAND.

BY D. MCN. PARKER, M. D., *Halifax, N. S.*

MANY years ago I met with a case of mammary skin disease possessing rare characteristics, which interested me at the time and gave me some trouble to know where to place it, pathologically. It exhibited some of the prominent external features of Idiopathic Cheloid, and had a general resemblance in its early stages to the two cases of this disease to which I shall presently call your attention. A few years later I met with a second case commencing much in the same way, with very similar conditions and symptoms. In both superficial ulceration was present; peculiar in appearance, erratic, and slow in its progress.

In the last case this ulcerative process spread itself over a larger area of skin than that covering the gland, and was occasionally attended by troublesome hemorrhages. I have no notes of these cases, and my memory does not sufficiently serve me to enable me to enter into minute details, but I recollect that the only work in which I could find anything approaching a correct representation of their anatomical characters was "Paget's Surgical Pathology." The article which deals with the subject is more accurately descriptive of the appearance and progress of the first than of the second case.

I now quote the paragraph in full; it occurs in the chapter relating to cancer of the breast. "A second series of hard cancers, deviating from the usual forms, consists of cases in which the nipple and the skin or other tissues of the mammary gland are peculiarly affected." I omit his statement relating to the nipple, and give you the words he uses in connection with the skin. "In other cases we find the skin over and about the mammary gland exceedingly affected. In a wide and constantly, though slowly, widening area, the integument becomes hard, thick, brawny, and almost inflexible. The surface of the skin is generally florid or dusky with congestion of blood; and the orifices of the

follicles appear enlarged, as if one saw it magnified—it looks like leather. The portion thus affected has an irregular outline, beyond which, cord like offshoots, or isolated cancerous tubercles are sometimes seen, like those which are common as secondary formations. The mammary gland itself in such cases may be the seat of any form of hard cancer; but I think that at last it generally suffers atrophy, becoming whether cancerous or not, more and more thin and dry, while the skin contracts and is drawn tightly on the bony walls of the chest, and then becomes firmly fixed to them."

In connection with these two cases I have only to add that I declined to operate and both died after prolonged illnesses. My impression is that at the period of death they were from 40 to 45 years of age.

The cases now about to be the subject of remark differ materially from those just referred to. These also, are rare, and as I do not find this special form of disease included in our medical nomenclature I shall take the liberty to designate it for the time being with a name, which will at once suggest its anatomical character, nature, and termination, viz., *Malignant Cheloid*. The variety of cheloid with which we are most familiar, is the Cicatricial or Traumatic, which frequently follows burns, scalds, certain eruptions, and local strumous affections. It is, however, to the more rare variety, the *Idiopathic or Spontaneous*, that I would now ask your attention for a few minutes. This very interesting skin disease has but seldom crossed my path, and I have had but limited opportunities of studying it clinically, consequently I hesitate to take ground which seems to be opposed to the teaching of several recognized authorities. But, being persuaded that there is a type of the disease which, beyond all doubt is malignant, I deem it my duty to give expression to that opinion. The profession generally appear to have been impressed with the belief that it is comparatively unimportant, and is exempt from danger. Distinguished dermatologists and others assume this attitude in relation to the question. For example Erasmus Wilson says: "Cheloid rarely gives rise to much inconvenience, or attains any considerable magnitude, and when left to itself progresses very slowly, or