

fit resulted. At another hospital he was etherized several times and the parts scraped with a sharp spoon and afterwards canterized, but this treatment had no effect in checking the spread of the disease.

When I saw him I suspected blastomycosis from his appearance, and had cultures taken, but unfortunately they were mislaid; I also removed some of the tissue, and Dr. Wyatt Johnston, who examined it, said he found yeast buds; his report is appended. The patient was

FIG. 1.



*Case 1.*

put on large doses of potassium iodide and rapidly improved. He previously had had mercurials and small doses of iodide without effect. I did not see him for nearly a month, when he came back much improved; the ulceration had ceased spreading, and in every way he was better. When last seen, in September, 1899, he was practically well.

The second case, M. D., a French Canadian, æt. seventy-two, a laborer, came to the dermatological clinic at the Montreal General Hospital May 14, 1900. He has always lived in the Province of Quebec; married, and has had children, all healthy; no history of venereal dis-