

larity, in a great majority of cases, is such that we cannot but look with doubt upon one where the discoloration is wholly confined to the trunk, thus losing the diagnostic contrasts of the pearly conjunctivæ and unaffected matrices of the nails with the surrounding dark hue, and the deeper stains upon the lips.

A second case is reported by M. Puech, in the same Journal for the 17th of April, 1857, which, although, very imperfect is certainly of greater weight than the last.

I quote the pertinent parts of the account. "A year and a half since, the patient remarked that his skin was becoming brown. At that time he suffered from nausea and alternate constipation and diarrhoea. In the month of August last he had dysentery, from which he recovered, but suffered a relapse in a month. He died the following January of a peritonitis consequent upon a perforation of the intestine."

The appearances noticed at the autopsy were as follow:—"The skin of the face is brown; that of the chest, abdomen, anterior and inner parts of the thighs appears as if covered with a layer of sepia. A piece of the skin preserved in alcohol has not, after three months, lost any of its color. The liver contains several collections of purulent matter. *The supra-renal capsules present not the least alteration.*"

A case where the deficiency in coexistence was the reverse of that in the preceding is related in the same journal for the 5th December, 1856, by M. Dechambre. The case was presented to the Pathological Society of London, by Dr. Ogle. The report is so limited, I give it in full. "The two capsules were disclosed, having a rounded form, and almost entirely filled with a deposit of scrofulous matter, very firm, and of a yellowish white color. The small portion free from this deposit was of a bright red hue. The spleen was large and soft, and its blood loaded with white corpuscles. These supra-renal capsules were taken from the body of a woman dead of phthisis, with scrofulous inflammation of the bladder, of one kidney and its corresponding ureter. There existed no trace, at least at the time of the autopsy, of bronzed skin."

It would be superfluous, however, to multiply quotations from accounts bearing upon this point, since most ample and carefully prepared collections of such cases have recently been made, and are readily obtainable.

In the London *Medical Times and Gazette* for the 8th of March, 1856, Mr. Jonathan Hutchinson has published a collection of twenty-seven well-authenticated cases, which collection was republished in the *American Journal of the Medical Sciences* for July, 1856.

In thirteen of these twenty-seven cases both supra-renal capsules were found seriously diseased, their structure being, in seven instances, completely destroyed. In four cases one only was diseased. In eight there was either no autopsy, or the supra-renal capsules were not examined. Of the remaining two cases, one was still progressing at the time of the report, and the other had recovered; the symptoms, in the latter, being supposed to have arisen from an acute inflammation of the capsules. In all these cases there was well-marked bronzing of the skin, as well as more or less of the other symptoms ascribed to the state of things found at the post-mortem.

Here certainly is strong evidence in favor of Dr. Addison's views. Still the amount is far too limited to decide the question. Let us look at the other side.

In the January and April numbers of the *British and Foreign Medico-Chirurgical Review* of the year 1853, George Harley, M.D., has published an article treating very fully of the probable functions and relations of the supra-renal capsules. In discussing their pathological importance, he cites some nineteen cases, the testimony of all of which is utterly opposed to the theory of a connexion between bronzed skin and capsular disease. In nine of them the supra-renal capsules were found to be either very seriously diseased, or totally destroyed, and yet no trace whatever of bronzing the skin existed. On the other hand, in seven, the bronzing was strikingly well-marked, and yet no capsular disease was found, excepting in one instance, and in that it was extremely limited in amount. In a postscript Dr. Harley adds that there are now on record fifteen well-authenticated cases of serious disorganization of the capsules unaccompanied by