11

CONCURRENT DIABETES AND EXOPHTHALMIC GOITRE.

By C. F. MARTIN, B.A., M.D.

Demonstrator of Pathology, McGill University: Assistant Physician, Royal Victoria Hospital.

The coincidence of two such maladies as diabetes and exophthalmic goitre in the same patient has already been recorded in not a few cases, and yet each newly added instance is of more than ordinary interest in view of the apparently associated features in their etiology. The subjoined report is therefore very briefly submitted, though without any effort to comment on the nature of such an association.

A French-Canadian aged 28, who was a piano maker by trade, came to the out-patient department of the Royal Victoria Hospital complaining of frequent inicturition, excessive appetite, general weakness and persistent sweating. He had been ill about one year, the weakness being an early symptom and progressive, while the micturition, sweating and increased appetite supervened some months later. To these signs were added a gradually developing tremor, great nervousness, palpitation, and dyspnæa on exertion; also gastric disturbances with occasional obstinate vomiting. During the year he had lost about twenty pounds. There was no history of diarrhæa.

He was a man of temperate habits, and except for the usual diseases of childhood he had always enjoyed good health. The family history presented no evidence of hereditary taint.

An examination of the patient showed him to be a remarkably thin young man, with small, soft muscles and moist skin. His eyeballs were markedly prominent, giving him an expression of terror and anxiety. Von Graefe's and Stellwag's signs were distinct; that of Möbius could not be definitely made out.