

have his eruption treated. On looking him over we found that he had lesions very similar to those of erythema nodosum except for their situation. I looked on it as a rare form of erythema multiforme, and knowing it is frequently due to sepsis in some part of the body I took his temperature and discovered that he had fever and a good deal of systemic disturbance. I do not know of any case reported where anthrax has occurred with the large number of lesions which this case presented, such lesions are almost invariably single. The lesions here were much smaller than the ordinary one in anthrax which has a great deal more surrounding induration about it and resembles a carbuncle.

It is possible that in this case the septic condition may have given rise to an erythema multiforme some of the lesions of which had become infected with anthrax.

It seems hardly possible that a man could live with 20 or 30 of these malignant pustules on the body much less walk into hospital and not feel ill in the slightest degree.

F. G. FINLEY, M.D. What struck me about this case was its extremely benign character. The diagnosis depended exclusively upon the bacteriological examination, as none of the lesions corresponded with the clinical features of malignant pustule.

J. ALEX. HUTCHISON, M.D. I had the privilege of seeing this case and I feel very much like Dr. Finley felt in my surprise at the mildness of the type. The experience of many of us is probably limited to the one case of Dr. von Eberts a few years ago; it was of the single type and not such a diffuse nodular one as the present. Text-books refer to the two types and that the solitary pustule is much more serious and gives much more pronounced constitutional disturbances. This case certainly had some oedema when I saw it at a later stage of the disease, but only what one might expect if one were dealing with a local infection associated with some lymphangitis. I was also rather surprised to hear of the favourable termination. I rather expected that convalescence at least would be much more prolonged. I would like to ask if the sore on the animal's back was followed up and any effort made to take bacteriological cultures from it.

G. T. STEPHENS: The address given by the patient was visited but we were told that the horse was not there.

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The ninth regular meeting of the Society was held Friday evening, February 5th, 1909; Dr. J. Alex. Hutchison, President, in the chair.