The President (Dr. H. Radcliffe Crocker) said he had had several cases of the condition, and the nails were very markedly affected; in several they were completely destroyed. At present he had in hospital a woman who suffered from melancholia. She had her fingers severely affected, also the hands, groins, and toes. She continued to have pustules, very much as in this case, over the rest of the body. They were completely exfoliated and raw. She was now being treated with vaccine injections, and he thought she was slowly improving. The cases he had known had begun in the extremities and extended thence. He had cured many of the finger-end cases by soaking them with lead lotion for ten minutes twice a day, and then doing them up with simple ointment.

**Case of Multiple Telangiectases.**

By H. G. Adamson, M.D.

M. D., aged 28, unmarried, presented numerous telangiectatic patches on the cheeks, the sides of the neck, and the uppermost part of the chest. The patches were mainly of the type of nævus araneus, but there were also many small net-like patches of dilated vessels. On the front of the sternum was a deep purple, raised nævoid swelling the size of a millet-seed, and two similar swellings on the back. There were similar “stellate” patches of dilated vessels on the mucous membrane of the mouth and lips, a vascular patch on the right iris, and a crusted wart-like tumour on the left eyelid, which bleeds profusely if the crust is disturbed. The telangiectases had been present only seven months. There had been no hæmorrhages from mucous membranes, and there was no family history of telangiectases. There was a marked tendency to varicosity of the veins of the legs and thighs. There was some slight swelling of the right lobe of the thyroid. No visceral disease had been discovered.

**Case of Urticaria Pigmentosa.**

By J. L. Bunch, M.D.

The patient was a girl, aged 10, in whom the lesions had first begun to show themselves about three months previously. Pinkish and brownish patches were first noticed on the back and chest, accompanied by
slight itching, and these patches have gradually increased in number and size, no lesion after it had once appeared disappearing. The pigmented patches are now brownish in tint, not raised above the surface, irregularly distributed over the chest and abdomen, and more closely conglomerated on the back, more especially over the area situated between and below the angles of the scapulae, varying in size from a pea to a small hazel-nut. Some of the lesions are very slightly and others not erectile on gentle rubbing, and there is very little factitious urticaria. Some of the lesions, on the shoulder more particularly, show white atrophic scarring, which might be the result of scratch marks. The fact that the face and hands are entirely free from these lesions makes the diagnosis of lentigines improbable. Moreover, the patient has been and is working for an examination and has been leading anything but an out-of-door life. The lesions differ from those shown by Dr. Bunch at the March meeting—also in a girl, aged 10—in that they are flatter and yours erectile, and the duration of the pigmented patches is shorter.

The diagnosis of urticaria pigmentosa was confirmed by Dr. GRAHAM LITTLE, Dr. A. WHITFIELD, and others.

Case for Diagnosis.

By G. W. DAWSON, F.R.C.S.I.

The patient was a healthy-looking married woman, aged 37, with an eruption limited to the cheeks, upper lip, the forearms, and back of the hands. It began four months previously, after a burn on the right forearm. The eruption was entirely erythematous; violaceous in colour on the forearms, but more of a brownish colour on the face, and scaling slightly. The colour and the division of the eruption by the natural lines of the skin, the presence of a white spot on the buccal mucous membrane, and the severe burning and itching, suggested lichen planus. A biopsy was made, and found to be typical of the latter disease.

Most of the members, including the President, considered it a case of lichen planus erythematous. The exhibitor thought there was a great resemblance between it and lichen variegatus, but the President pointed out that there was no arrangement in lines as seen in that disease.