
The case I have the honour to put before you is one of congenital bullous eruption. I have preferred to give it this description inasmuch as it does not seem perfectly certain to what class of infantile bullous eruption it should be most correctly placed, and the main interest of its consideration centres round the question of its etiology.

Before describing the case I would like to make a few remarks on the subject of bullæ occurring on the infant.

The cases seem to me to arrange themselves generally into two great classes. Pemphigus neonatorum I take as one. It is described by Radcliffe Crocker as occurring sporadically in unhealthy dwellings, and endemic in certain hospitals and in the practice of particular midwives.

The bullæ make their appearance a variable time after birth; the fluid contained in them is clear; they make little preference in their choice of locality, and patients tend to recovery.

Tilbury Fox (3rd Ed., p. 212) has, however, described severe and fatal cases.

* Read before the Medical Section of the Royal Academy of Medicine in Ireland, on Friday, March 9, 1900.
Malcolm Morris, in his book on "Diseases of the Skin," p. 144, describes the affection in the following words:—

"The so-called pemphigus neonatorum is an affection met with in newborn infants, characterised by the eruption of bullæ on the thighs, buttocks, face, and other parts, accompanied by greater or less constitutional disturbance. The children are free from syphilitic taint, and are often well nourished."

"The affection is not, as a rule, of any gravity, but occasionally it assumes a malignant type, the contents of the bullæ being dark and fetid, and gangrenous ulceration taking place with constitutional symptoms of great severity, causing death in 10 or 12 days" (Tilbury Fox).

An interesting case is recorded by Dr. Jones Greer in the British Medical Journal, Vol. I., 1894, p. 1241, of a child on whose chest, buttocks and neck appeared bullæ on the third or fourth day after birth. Death supervened on the eighth day, after a similar eruption had appeared on its mother's chest, buttocks, and face. The mother died seventeen days after the appearance of the rash, death being ascribed to pneumonia. There was neither history nor sign of syphilis.

Of the occurrence of pemphigus neonatorum in epidemic form, and associated with the practices of a midwife, Dr. Jukorsky, of St. Petersburg, gives an interesting record, which has been epitomised in the British Journal of Dermatology, 1891, p. 368. It concerns an epidemic in summer amongst infants of the poorer class. Twelve infants were affected, and they had all been delivered by the same midwife, who was of slovenly habits. The first two victims were not seen by the reporter. The blebs appeared first and most markedly on the upper part of the body, head, and face, but, even in the fatal cases, never appeared on the soles of the feet. The conjunctiva and oral mucous membrane were affected in some cases. The disease spread to brothers, sisters, and mothers.

The second class I take to be the pemphigoid eruption of hereditary syphilis. Crocker says infants are often born dead, others are born alive with it. The hands and feet are the situations on which the bullæ first and principally