



FIG. 1.

Right hand supinated before operation (hand resting on the ulnar side).

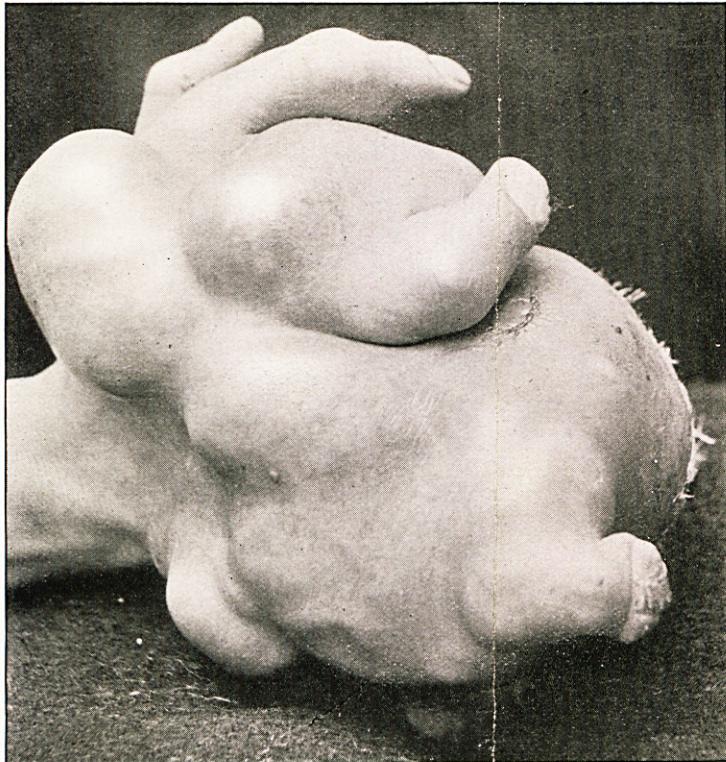


FIG. 3.

Right hand pronated before operation (hand resting on the ulnar side).



FIG. 2.



FIG. 4.



FIG. 5.
Right hand supinated before operation.



FIG. 7.
Right hand pronated before operation.

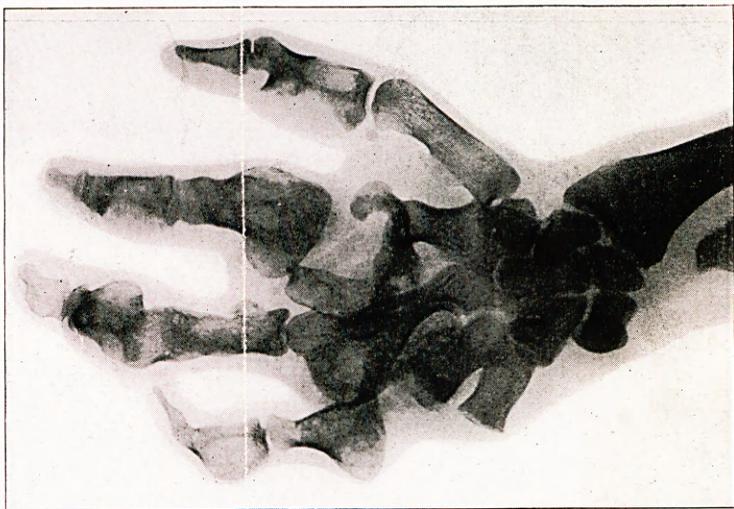


FIG. 6.
Right hand supinated after operation

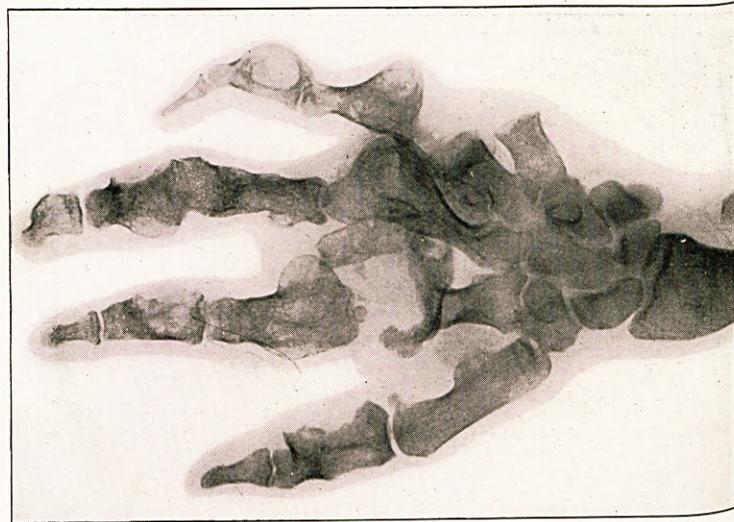


FIG. 8.
Right hand pronated after operation.

Kaufmann, *Spezielle Pathologische Anatomie*, Berlin, 1907, Auflage iv, p. 1093.

Krehl, *Pathologische Physiologie*, Leipzig, 1907, p. 554.

Monro, *Raynaud's Disease*, Glasgow, 1899, pp. 155, 169.

Osler, article on "Raynaud's Disease," *System of Medicine*, edited by Osler and M'Crae, London, 1909, vol. vi, p. 637; "Lumleian Lectures," *Lancet*, 26th March, 1910, p. 842.

Russell, W., *Arterial Hypertonus, Sclerosis, and Blood-Pressure*, Edinburgh, 1907; "Intermittent Closing of the Cerebral Arteries," *British Medical Journal*, 16th October, 1909, *et seq.*

NOTE ON A CASE OF CONGENITAL ENCHONDROMA OF THE RIGHT HAND.

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THE accompanying photographs and skiagrams illustrate a rather interesting case of congenital enchondroma of the hand—interesting on account of the size and multiplicity of the tumours, and also because a considerable degree of utility resulted, through operation, to a hand that not only was entirely useless and unsightly, but was an actual encumbrance to its possessor.

The following are the facts of the case, which, by the kind permission of Dr. Dalziel, I am allowed to publish:—

John C., æt. 23, was admitted to Ward XIX of the Western Infirmary, Glasgow, with a congenital deformity of the right hand, which had increased in proportion to the growth of the hand.

He believes that a grandfather had a similar deformity.

Examination revealed large irregular firm swellings on all the phalanges and metacarpal bones, with here and there soft areas over which superficial ulceration had occurred. The fingers were mere knobs projecting from the surface of the tumour, and the hand was quite useless.

The largest tumour was as great as a big apple, and was situated on the metacarpal of the "ring" finger.

On 19th October, 1909, Dr. Dalziel removed the fourth metacarpal bone with its large tumour, and also several smaller tumours from the phalanges. Others were scraped out.

On pathological examination, the tumours showed the

ordinary appearances of chondroma with calcified and osseous areas.

After the first operation the wounds healed well, and on 10th January, 1910, Dr. Dalziel removed some more tumours from the hand, chiefly from the thumb, forefinger, and middle metacarpal. The wounds healed by first intention, and the patient was dismissed on 31st January, 1910. On dismissal he could approximate the thumb and any of the fingers. He could flex the fingers until they touched the palm of the hand, and his grip was steadily improving.

I am responsible for the photographs showing the condition before and after operation. The skiagrams, by Dr. W. F. Somerville, radiographer to the Western Infirmary, illustrate the situation and relations of the tumours, and the condition of the bones after operation.

CORRESPONDENCE.

STUDY AND TEACHING OF INDUSTRIAL DISEASES.

To the Editors of the "Glasgow Medical Journal."

SIRS,—It seems to me very surprising and discreditable that in this great manufacturing country of ours there is no provision made for the special study and teaching of industrial diseases.

I urged the importance of the subject in a paper entitled "Lectureships on Trade Diseases," which was published in the *Glasgow Medical Journal* for May, 1900, and in a second, entitled "On the Need for a *Progressive* Study of Industrial Diseases," which was published in the *Glasgow Medical Journal* for February, 1907. These papers did not seem to evoke much interest, and they gave rise to no action.

The Italians are taking a lead in this matter. It was with mingled feelings that I read the interesting article in the *British Medical Journal* for 30th April of this year on "The Clinical Institute for the Study of the Diseases of Occupation, Milan"—admiration for the wisdom and enterprise of the Italians and regret for the apparent indifference of the British contending with each other. With your permission, I shall quote a few sentences from the article in question:—