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# A Case of Vitiligo involving the whole Surface.

BY

### HENRY W. STELWAGON, M. D.,

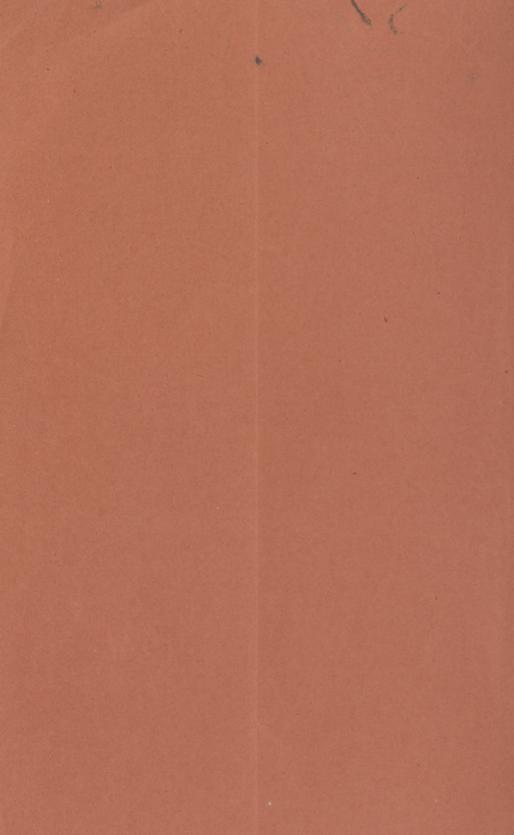
Physician to the Philadelphia Dispensary for Skin Diseases, Chief of the Skin Dispensary of the Hospital of the University of Pennsylvania, etc.



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#### A CASE OF VITILIGO INVOLVING THE WHOLE SURFACE.

#### BY HENRY W. STELWAGON, M.D.,

Physician to the Philadelphia Dispensary for Skin Diseases, Chief of the Skin Dispensary of the Hospital of the University of Pennsylvania, etc.

The patient, a male, aged 37, whose disease will be briefly sketched in this paper, came under my care in June of 1880. He is of Austrian birth, coming to this country when sixteen years old. Is of robust health, dark complexion, and always had a naturally dark skin. In 1870 or 1871 he was taken down with an attack of smallpox, from which he made a good recovery, with but a moderate degree of scarring. From the time of his arrival in this country up to ten months ago, he followed the occupation of a longshoreman.

Six months after the attack of smallpox he noticed a few small peasized pale spots on the face, to which, however, he gave but little thought, and no attention. Several months later on, spots of the same character appeared on the backs of the hands, while those on the face had become more noticeable from the fact that the surrounding adjacent skin had grown considerably darker than that on other parts of the body. As summer advanced, although there was only a slight increase in the size of the spots, yet they had become even more conspicuous from the general sun-bronzing resulting from the constant exposure which his occupation necessitated; the paleness of the spots remained unaffected. During the latter part of the summer the patches continued to grow slowly; never at a stand, although at this time, and for several years subsequently, the increase from month to month was barely perceptible.

So the disease progressed until about six months before his coming under my observation, when it began to extend much more rapidly, showing itself upon the arms, legs, and trunk, while the individual patches themselves grew much larger. There were, as usual, no subjective symptoms. Dyspepsia was the sole trouble he had during this time; this was

<sup>&</sup>lt;sup>1</sup> Read at the Eighth Annual Meeting of the American Dermatological Association, Highland Falls, New York, August 29, 1884.

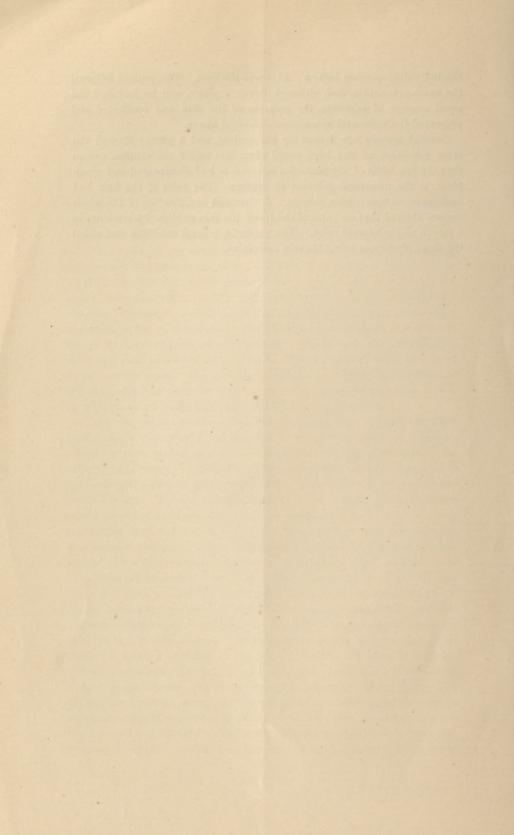


tolerably severe, and persisted throughout. In fact it had been present before the patches appeared, and still persisted. At the time of his coming under my care the disease had involved a greater portion of the whole surface. The eyes were ringed with a border at least two-thirds of an inch deep; other parts of the face were also affected. The backs of the hands were almost completely occupied with the characteristic pale patches. The forearms, the arms, legs, and thighs, as well as the feet and trunk, were likewise involved. Immediately surrounding the patches the skin was considerably pigmented, to such a degree, indeed, as may be looked upon as extraordinary even for a case of vitiligo. The pigmentation extended several inches beyond the edges of the leucodermic patches, becoming less intense as the distance from the patches increased, and gradually fading away into the normal skin. Between the pigmented borders of the patches the skin was of the natural color. The patches, as the patient stated, were extending rapidly, and many were becoming confluent and covering large areas of surface; in fact, the disease, the past six months, according to the statement made, had involved several times as much surface as the seven or eight years preceding. The hairs on the parts affected were to a great extent white or grayish. Several tufts of white hair could be seen in the scalp. The man was indifferent as regards the condition of the skin, and had been referred to me by the resident physician of the dispensary, to whom he had come for relief of his dyspepsia.

I saw the patient ten days later, in the mean time a pepsin mixture having been prescribed; the patches, even after so short an interval, seemed a trifle larger, and the excessive surrounding pigmentation remained remarkably conspicuous. The patient was not seen again until one year ago, and then only accidentally. The whole surface was an unnatural white. To one unacquainted with the patient his appearance would probably have excited no further comment than that he was just recovering from a severe illness which had produced profound anæmia. It resembled the paleness seen in the last stages of phthisis and albuminuria. To a close observer, however, the whiteness could be seen to be of a different character from that in the diseases referred to. . It was more of a dead, marble-like whiteness. There were two small patches of pigmentation on the cheeks, which were evidently traces of the confluent pigmented borders of the vitiligo spots. The man considered these the last vestiges of the disease. As large areas of the skin became white from the running together of the vitiligo patches, the islets of pigmentation-fragmentary portions of the confluent pigmented borders-were viewed as the disease, and the whiteness as returning natural skin. The patient was aware, however, that his skin was now much paler than before the disease began, and what is still more to the point, in answer to questions, stated that the skin, so far as the paleness was concerned, was uninfluenced by exposure to the sun, the same as he had noticed in regard to

the individual patches before. This was the case. The patient followed the same occupation, and, although it was summer, and he had had the usual amount of exposure, the paleness of the skin was unaffected and presented the unnatural appearance described above.

Several months ago I sent for the patient, and a glance showed the same condition as had been noted when last under observation, except that the few islets of pigmentation referred to had disappeared and given place to the unnatural paleness of vitiligo. The color of the hair had undergone no appreciable change. A thorough examination of the whole surface showed that on parts of the trunk the skin exhibited a tendency to a return of the natural color. The patient's general condition was about the same, dyspepsia being his sole complaint.





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