

stimuli³. The possibility of psoriasis and dermatophytosis was excluded because there were no seasonal variations, negative Auspitz sign and scrapings. Histopathology of symmetrical progressive erythrokeratoderma is non-specific⁴. It is characterised by hyperkeratosis, parakeratosis, acanthosis and variable dermal inflammatory changes. The disease is gradually progressive but tends to regress in later life⁴. As expected topical corticosteroid and keratolytic agents have little role in the treatment of this disease.

References

1. Rook A, Wilkinson DS and Ebling FJG: Text-book of Dermatology, Blackwell Scientific Publications, Oxford, Ed. 2, 1972, p 1164.
2. Gans O and Kochs AG: Hautarzt, 2: 389, 1951. (Quoted by 1).
3. Gentler W: Derm Wschr, 136: 1257, 1952. (Quoted by 1)
4. Coles RB: Symmetrical progressive erythrokeratoderma, Brit J Derm 66: 225, 1954.

Announcements...

Dermatology Seminar at Hawaii: 1979

The University of California, San Francisco, Cleveland Clinic and Northwestern University conduct The Third Annual Dermatology Seminar at Hawaii. Starts the evening of February 12th and ends approximately noon February 17th, at the Hotel Intercontinental, Maui, Kehei, Hawaii. The speakers include several guests and the faculty of the above departments.

Enrolment is limited and made on a first come first serve basis.

For information write to the departments of dermatology, at either University of California Medical School, San Francisco, California 94143, Cleveland Clinic, Cleveland, Ohio, or Northwestern University Medical School, Chicago, Ill.