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SYPHILIS CIRCINATA

SYPHILIS SECUNDARIA. Syphilis circinata.

Synonyms: Syphilis circinaria; Syphiloderma annulare.

As a rule syphilitic papules are lenticular and persist in that shape without tendency to assume any other, but occasionally crescentic or annular lesions are seen, most commonly in the neighborhood of the naso-labial folds or about the mouth and on the forehead, less frequently upon the neck and trunk. The ordinary round and oval papules are nearly always to be found in one of their favorite locations at the same time. The diameter of a circinate patch is from one-eighth to one inch. The smaller rings gradually spread peripherally and two or more may coalesce to form gyrate patterns. The ridge is of variable height and width, sometimes broad as though formed by the aggregation of many small papules, more often it is quite narrow. The

whole lesion may have the appearance of a broad papule whose central portion has failed to develop as rapidly as the periphery, or the enclosed area of skin may be of normal color and unelevated. Rarely a new papule or ring develops within an older one. The lesion is usually scaleless, or at most only slightly scaly. This form of eruption is rather exceptional in the white race but is not at all uncommon in the negro. Its period of evolution and its duration are those of the ordinary papular rash.

DIAGNOSIS: The association of other syphilitic symptoms usually makes the diagnosis easy. *Ringworm* is a brighter red, more rapidly progressive and more scaly, and often minute vesicles are to be seen at its outer edge; moreover the mycelium and spores of the trichophyton are usually easily found in a microscopic examination of the scales.