Identical structures were seen within the cytoplasm of the dendritic clear cells of the epidermis; they were thought to be characteristic normal organelles of these cells.

Additional studies will have to be carried out to try to reconcile the presence of these structures in the Langerhans cells of normal epidermis and in the pathological cells of histiocytosis X.

Renal Changes in Henoch-Schönlein Purpura.

E. F. GLASGOW (The Children's Hospital, Birmingham). The light microscopical changes in Henoch-Schönlein purpura are variable, depending on the severity of the disease and the time of biopsy. Percutaneous biopsies from 9 children between the ages of 3 and 13 years were examined by both light and electron microscopy and the latter appearances were similarly variable.

In capillary loops which appeared normal with light microscopy there was some thickening of the basement membrane, with fusion of foot processes if proteinuria was present. In adjacent areas of focal sclerosis there was marked accumulation around the mesangial cells of basement membrane-type material which was continuous with the basement membrane of the loop. Scattered through this material were discrete stellate islands of mesangial cytoplasm which was indistinguish-

able from endothelial cytoplasm where they were contiguous.

In more severely affected glomeruli, the endothelial cells additionally demonstrated hyperplasia with increased amounts of cytoplasm and absence of fenestrations. Frequently endothelial cells situated at the mesangial pole showed an appearance suggestive of phagocytosis within their cytoplasm.

In addition to thickening, the basement membrane presented a scalloped appearance on its endothelial surface and it was not observed to be ruptured. Podocytes occasionally showed hyperplasia in addition to fusion of foot processes. In glomeruli showing more complete sclerosis, characteristic collagen fibrils were recognized in the urinary space and within the obliterated capillary loops. Such fibrils were not observed in isolated focal areas of sclerosis.

Demonstrations

Demonstrations included the following: chromosomal abnormalities, lipoidoses of bone-marrow, the histology of the thymus in stress and infection, autoimmune thyroiditis, hemilateral degeneration of the liver, interstitial emphysema in the early perinatal period, morbus Bournville, congenital toxoplasmosis, and normal and abnormal fetuses.