

useless, and sometimes toxic, materials may be speedily removed to make away for that which will better and more vigorously assist in tissue-building and force-production.

This subject, including as it does the consideration of general and special hygiene, as well as mechanical, chemical and medicinal aids to digestion, respiration, circulation and excretion, simple and complex, must be indicated; but it cannot be properly studied in a paper which has already overrun its limits.

Yet one more word must be added, even at the risk of occupying too much space. Experience has demonstrated the utter futility of all measures designed to destroy the bacillus tuberculosis. A moment's reflection must convince us that even could we destroy every bacillus in the lungs, we would gain nothing; for the patient has only to open his mouth, to be invaded by a new host. So that whether we follow the opinion of the majority, and assign to this microbe supreme ætiological importance, or whether we are content to remain a minority which can at least boast among its numbers the most cultured and philosophical mind among medical men of the century, the experience of every physician and of every patient is in accord upon the all-important point that the secret of treatment is not microbicide, but NUTRITION.—*Dietetic Gazette*.

* THE CAUSE AND TREATMENT OF INFANTILE ECZEMA.

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Infantile eczema is one of the most common diseases of early life. It is always a distressing and frequently an obstinate affection, remaining for weeks or months; but, as a rule, it is much more amenable to treatment than eczema in adults. It may occur at any period during infancy, but it is most frequently observed during the first six months of infantile life, at the time of weaning, and during the process of dentition.

It may appear in a variety of forms. In some cases it is characterized by the development of a veritable number of erythematous spots, or blotches upon the face, scalp, and other portions of the body. In others the eruption is purely papular; in still others it consists solely of vesicles situated upon a reddened inflamed base, or both lesions may be intermingled. The pustular variety is characterized by the formation of pustules of various sizes, either alone or comingled with vesicles, papules and vesico-papules. The disease may involve any or all portions of the integument; but it most frequently attacks the face, scalp, neck, chest, buttocks, and the upper and lower extremities. It pursues a variable course. The papular and erythematous forms usually disappear by resolution, but

they may pass imperceptibly into the chronic squamous stage of the disease. The surface then presents a dull red infiltrated appearance, and is covered with a number of minute epidermic scales.

The vesicular and pustular varieties rarely temperate in resolution. As a rule, the vesicles and pustules burst within a few days after their development, exposing a raw weeping, bleeding surface, from which a sero purulent fluid exudes, and dries into large, firm, yellowish crusts. When the scalp is the seat of the eruption, the hairs are matted together by the exudation, and the entire scalp becomes covered with yellowish masses, forming the condition known as crustalactea. As the disease progresses the irritation increases, so that the inclination to scratch the parts becomes almost irresistible, and patients tear the surface with their finger-nails even while asleep. This, of course, increases the exudation and enlarges the diseased area. After an interval of several weeks the morbid action may cease, spontaneous repair take place, and these crusts drop off, disclosing a healthy but somewhat reddened surface. Usually however, unless appropriate treatment be instituted, the disease passes into the chronic stage, and remains for months or years with occasional periods of amelioration and exacerbation.

Infantile eczema is due practically to one of four causes: 1. Insufficient or improper food. 2. Imperfect assimilation. 3. Deficient excretion. 4. External irritation.

Insufficient or Improper Food.—This is one of the most frequent existing causes of the disease. If the mother's milk is scanty in quantity, or poor in quality, or altered in character by pregnancy, passion, menstruation, anxiety or disease, the nutrition of the child will suffer, and eczematous or other eruptions speedily appear. If the child is handfed, and given unsuitable and indigestible articles of food, or, if the cow's milk upon which it is nourished is so diluted with water as to be deprived of its value, the same result will follow.

Imperfect Assimilation.—This is another potent factor in the production of the disease. The food may be perfect in all respects, but if owing to disturbances of the digestive tract a considerable portion of it is either rejected by vomiting, or hurried out through the intestinal canal before digestion and assimilation are complete, the blood will become thin, the nervous system will suffer, and various cutaneous eruptions appear.

Deficient Excretion.—Deficient excretion is not as frequently chargeable with the development of infantile eczema, as it is with many other cutaneous disorders, but many stubborn cases spontaneously disappear when the normal functions of the various excretory organs are re-established.

External Irritation.—This is frequently the unsuspected cause of numerous cases of infantile eczema. Among the common sources of irritation may be mentioned woollen or flannel clothing,

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