

taken irregularly, simply for a cathartic action, no, ultimate good results follow; but I can bear testimony very strongly to the value of this plan of treatment, and could adduce many cases where this has constituted one of the chief means of speedy and permanent cure of long standing cases of eczema of the anal and genital regions.

It is a very common custom with many to give mineral waters to these patients, with the simple direction that they keep the bowels open therewith. In my experience this is an unwise procedure, and I believe that many persons are to-day suffering from constipation and consequent eczema of the lower region because of the constant stimulation of the intestinal tract with these or other purgatives, while the cause of intestinal inactivity—sedentary habits, over indulgence at the table, etc.—has been allowed to go on unchecked. I never order mineral water to be taken for a length of time, and constantly discountenance their use.

Nor is it at all sufficient, in these cases, simply to secure an emptying of the lower bowel by means of an enema, even if employed daily. In my judgment enemata are to be used only very rarely for a definite purpose, and the habit of a dependence upon water injected to excite the intestines to contraction is worse even than to have them depend upon mineral water poured into the other end of the digestive tube. Nor will an action of the bowels secured by enema at all help an eczema of the anal or genital region, for I have seen some very bad cases of the eruption in this locality where this means of emptying the bowel was practised.

I will not here enter more largely into this subject, which is a prolific one, nor will I detail further remedies which might be of service; but I have dwelt on it thus long because the more I see of these cases the more convinced I am that imperfect liver-action and imperfect intestinal excretion are at the bottom of very many of them. As mentioned before, he will but poorly treat these cases who contents himself with prescribing in a routine manner this or that remedy, which has been proposed or vaunted, and he will but poorly manage the intestinal excretion who is satisfied with giving casual prescriptions to loosen the bowels. The physician must give definite instructions to the patient in regard to his mode of life, diet and hygiene, and must even extend it to securing that the call of nature, thought it be light, be answered promptly at a regular time each day, preferably after the morning meal.

Next to imperfect bowel-excretion I would place deficient kidney action as an element to be regarded in the cases under consideration. The urine of these patients is seldom that of health; the most varied conditions may be reported, but not all infrequently it is recognized by the patient as leaving a deposit in the chamber and staining the same. Frequent and imperative micturition is not at all uncommon, and the repeated calls to urinate at night and the itching will

often act and react on each other, rendering sleep almost impossible.

Most of these cases, therefore, require also an alkali, and I find the best results from acetate of potassa with a bitter, as in the following mixture:

R. Potass. acetatis..... 3 j.
Tinct. nucis vomic..... 3 ij.
Infus. quassiae..... 3 iv.
M. Teaspoonful after eating, in water.

This is often continued during the entire course of treatment, and frequently for some time after the complete disappearance of the eruption and cessation of all itching.

Not infrequently, however, cases of eczema of the anus and genitals will be associated with a large amount of oxaluria, and will be quickest relieved by the strong nitric acid internally, in doses of about two drops after eating. The well-known mixture of sulphate of magnesia, sulphate of iron, sulphuric acid, and infusion of orange-peel, is sometimes of much service, especially when there is a tendency to sluggishness of the bowels, which does not remain corrected with diet, etc., after a course of the pills mentioned.

In some cases the disease is largely due to simple debility, and iron and other tonics which give life and tone to the system will do the most good to the eczema, often in the way of rendering the processes of assimilation and disassimilation more perfect, whereby the liver, bowels and kidneys share the healthful activity.

These are the main internal remedies of service in this oftentimes very troublesome affection, and if the homely measures I have briefly alluded to are faithfully carried out and combined with proper local applications, they will, I am confident, secure the permanent removal of a complaint which is at this moment rendering many individuals very uncomfortable, if indeed it is not in some cases almost making life a burden.

It will be noticed, perhaps, that arsenic has not been mentioned, and yet I am positive that one-half of the general practitioners would give arsenic at the first visit to one suffering from the conditions under consideration. I will say that I had *not* purposely omitted mentioning arsenic, but that merely it had not occurred to me to speak of it because, probably, I so seldom use it for these cases. When there is a marked eczematous habit, and when, after all the above measures have been attended to, and others perhaps in the same line, if, then, there remained a tendency to the disease, I might and do employ it in connection with other remedies, but never as a curative measure at the beginning of the case, especially never in cases presenting acute symptoms. As a modifier of the nutrition of the skin, arsenic holds a high place among other medicines, but not as a controller of congestion or inflammatory action.

If internal and general measures are important in eczema of the anus and genital region, local