

not be neglected, lest on the favorable soil a crop or succession of boils follow the first and constitute a serious complication in the weakened patient which may even lead to death.

It must be borne in mind that a single furuncle is not only the effect of the invading germs, but is also a factory for the production of germs, and the pus exuding from it loaded with virulent cocci spread upon the skin by the clothing, the dressings and the fingers of the patient or his attendant readily leads to a multiplicity of furuncles, constituting the state of furunculosis.

As to the location of boils, while a single boil may make its appearance anywhere on the skin, it is a fact that in males fully ninety per cent. of solitary boils are located on the back of the neck, and in women, who are far less prone to furuncles than men, boils are rarely found in this location, being more common on the trunk, especially about the axilla and near the breasts. In general there is much significance in the popular saying that boils come where they are most in the way; that is, they are located where the integument comes most frequently in contact with hard, external objects—the starched collar in men, the corset in women. Other favorite sites for boils are the wrists (stiff cuffs) and the buttocks and back of the thighs (hard chairs). The rôle of these external objects in producing boils is obvious; the infecting organisms reposing harmlessly at the orifice of an intact hair-follicle are forced into the follicle and the walls of the latter, damaged by contact with and pressure from the firm external object, and once within the follicular wall the furuncle is started.

I have dwelt on these general considerations of etiology and pathology because they are important for the proper understanding of the treatment. We can do little to prevent the occurrence of a boil. Cleanliness is, of course, an important factor, and indicates the regular prophylactic employment of some mildly antiseptic soap, such as synol soap or ichthyol soap in those in whom we have reason to fear the occurrence of furunculosis, such as the diabetic. But on the other hand the most cleanly people are often the victims of furunculosis, and indeed too much bathing may directly increase the probability of infection through the irritating, drying effect of soap and water on the skin. But after a boil has once begun we can generally abort it, cut short its career, by prompt measures. The little papule should be painted at once with tincture of iodine, and this application repeated twice more in 24 hours. Further applications are useless; if the boil does not manifestly subside after three applications of iodine, a further application only complicates the condition by rendering the epidermis