

an appreciation of him, not an account of his life, but an outline of my personal knowledge of him. How imperfectly I have succeeded in showing up some of the characteristics that mark so strongly my old teacher—one of the greatest of men—nobody knows better than myself, but in loyalty to, in affection, yes, in love for him, I yield to none.

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**\* REMARKS ON ECZEMA WITH SPECIAL REFERENCE TO ITS ETIOLOGY.**

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There are few diseases which are more important to medical men than eczema, whether we take into consideration the frequency of its occurrence, the easiness, as a rule, of its diagnosis or the effectiveness of careful treatment. Yet after all this has been said we must acknowledge that the etiology is little understood, and as is necessary under such conditions the treatment is more or less empirical. This defect in our knowledge of eczema is not due to lack of investigation for there are few diseases which have been more closely studied. The investigations, however, have not been without value. Observations have been recorded which will in time no doubt prove of value in elucidating the problem of the disease.

In studying the disease one of the obstacles met with is the difficulty of defining what is meant by eczema. It cannot be defined by its pathological characters because one can produce by external irritants such as dyes, flour, sugar, and bichromate of potassium, dermatites indistinguishable as to their gross and microscopical appearances, from eczema. This difficulty has been recognized ever since physicians began to give special attention to the study of cutaneous affections. Bateman and Willan, who classified skin diseases according to their lesional characters (papules, vesicles, scales, etc.), restricted the name eczema to certain vesicular eruptions and included under this heading not only rashes of unknown origin, but also those caused by external irritants. For example, in their *Atlas of Cutaneous Diseases* published in 1849 there is a plate designated *eczema rubrum*

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