

found of very great service in connection with many other inflammatory skin affections.

The first thought that occurs to us in this connection is that there is far more danger of erring in the way of doing too much for eczema than in doing too little. In many, many cases which have come to me the disease has been immeasurably irritated and often prolonged by the severity of the treatment which had been employed.

The skin is a very delicate organ, readily taking on inflammation with even moderate irritation, and when the eczematous habit or condition is present the inflammation steadily tends to increase, unless the proper protection and soothing treatment is given. The cases of eczema which require a stimulating treatment are infinitely less frequent than those requiring protective and soothing measures. While chronic patches of old eczema will sometimes bear quite powerful irritants, even in these cases the surface requires afterwards to be protected and soothed.

The itching of eczema, as is well known, will often be terrific, and frequently stronger and stronger applications will be made in hopes of allaying the intense pruritus; -but care must always be exercised in this, for the measures which check the itching will often prove very irritating to the skin tissue. Acute infantile eczema may be taken as a type of this. The little ones will suffer immensely, and tear and rub the surface in their vain efforts to secure relief, and oftentimes applications will be made which only increase the difficulty, and the disease will thus try greatly the patience of physician and friends. But great caution must be exercised not to stimulate the delicate skin too greatly in the efforts to give relief. As will be seen later, true relief is to be obtained rather by internal measures, dietary, hygienic, and medicinal. Acute eczema of the face and hands and in the folds of the body in adults is also commonly accompanied by most intense itching, and will be often unduly stimulated in the effort to get relief. In very chronic conditions it is very desirable to begin with very mild stimulants and anti-pruritics, and to watch the effects, increasing the strength gradually, according to their effect on the skin.

In regard to the general matter of applications to the skin in eczema, it may be stated that there is no one remedy which is found to be universally applicable, and even one well acquainted with this branch will be occasionally greatly disappointed in regard to the action of remedies on which he had previously relied. Almost the only exception to this is the zinc ointment, now so universally used, which, if rightly made, rarely does harm, even if it does not very often do much good. Here let me utter a word of caution against the many new remedies and plans or measures which are proposed from time to time in current literature. It is far wiser to have a few good remedies and to understand their use well, than to be trying time and again such as are recommended by others, often with the very slightest experience.

To be successful in the treatment of eczema one must certainly study the patient carefully and adapt the treatment to the condition found. It would be amusing, if it was not so sad, to see the number of instances coming to the specialist in which arsenic has been used; indeed, it may be safely said that every one who has had eczema for any length of time has certainly taken this remedy from one or more physicians, without avail. It is the exception with me to find it otherwise.

While arsenic undoubtedly has somewhat of a control over the nutrition of the skin, and is certainly valuable in certain cases of skin affections, I have very little faith in its powers over eczema. It often does enter into tonic prescriptions; but alone I