THE SYMPTOMS AND PATHOLOGY OF SEBORRHŒIC ECZEMA.

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IN the year 1887 Unna introduced the name seborrhæic eczema to the medical profession. He had been studying the relations of a number of diseases, such as pityriasis capitis, the seborrhœa sicca of Hebra, the seborrhœa corporis of Duhring, the lichen annulatus serpiginosus of Erasmus Wilson, as well as of certain forms of rosacea, of eczema, and of psoriasis, and had found that they were very closely allied both as regards their clinical and pathological features. He found that they were all superficial inflammations of the skin, catarrhal in nature, with an exudate which contained as a rule very little serum, but a large amount of fat. He found that the increase of fat was a result of the dermatitis, and was derived from the coil glands and not wholly from the sebaceous glands, as had been generally held. A bacteriological examination of the scales and crusts convinced him that there was invariably present in all these diseases a flasked shaped bacillus and a mulberry coccus. He found that the flask bacillus was the same as that previously isolated by Malassez, and that a pure culture of it was without effect on the skin. However, with a culture of the mulberry coccus he was able to produce an eczematous patch followed by alopecia.

These pathological relations convinced Unna that all these diseases should be classed under-one head, to which he gave the name seborrhoeic eczema.

As the symptoms of the eruption undergo considerable variation in different regions of the body, I shall first shortly describe the general symptoms and pathology of the disease taken as a whole, and then I shall give a description of the clinical features as they appear in different localities on the body.

General Symptoms.—Seborrhæic eczema is an infectious inflammation of the skin. It may occur on any part of the body, but it