

2 per cent. salicylic acid. For a more local action, the pyrogallie and salicylic acids may be increased to 10 per cent. Instead of pyrogallie acid, the oxidation product, pyraloxin, may be employed. This has a similar elective, but somewhat weaker, action. Or an ointment may be used containing 5 per cent. pyrogallie acid and 5 per cent. green soap. Part of the acid will be converted into pyraloxin and the green soap will take the place of the salicylic acid. For circumscribed nodes the pyrogallol gutta-plast may be substituted.

Resorcin is considerably milder than pyrogallol, and is especially indicated for women, children, and individuals with soft skin and with mild eruptions. It is chiefly employed upon the face in the form of the *Pasta lepismatica*, which is rubbed into the skin twice daily for one to two weeks. Since the resulting resorcin crust will exercise quite some pressure upon the skin, this treatment is hardly in place where the subcutaneous fat of the face still contains many bacilli. Here the bacilli should first be destroyed by means of pyrogallie acid. If it is desired to use resorcin also upon the rest of the body, about one-third of the surface is treated like the face; in the meantime the rest of the skin is prepared by daily washings with green soap or pèrnatrol soap, which softens the superficial layers. The original surface is then covered with zinc glue, so as to exclude it from further treatment. General intoxication has never been observed, but still, hydrochloric acid should be given internally.

Concentrated carbolic acid is an excellent, almost painless, caustic for superficial nodes. For deeper nodes and recent, embolic foci, the daily injection of a 2-per-cent. solution is preferable. If this treatment lasts weeks or months, hydrochloric acid should be given internally to counteract any intoxication.

Chrysarobin does not play the same role in leprosy that it does in psoriasis, as its action is more superficial. It is therefore indicated only in the mild erythematous and pigmented, flat, and tuberculous neuroleprides. Since conjunctival irritation must be carefully avoided, it is best applied only to the lower extremities.

Sulphur, in the form of the zinc-sulphur paste, is an excellent remedy to hasten the cure of skin lesions induced by the stronger reducing agents.

Ichthyol is indicated in the following condition:

(1) Pure, with or without hydropathic applications, in the common edema and stasis of the extremities, in painful swellings of the joints, and in all vasomotor disturbances.