

Selections.

THE MANAGEMENT OF ECZEMA IN INFANTS AND YOUNG CHILDREN.

Clinical Lecture delivered at the Philadelphia Polyclinic

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GENTLEMEN,—The subject of eczema in infants and its treatment is one upon which I have had occasion to write and speak many times in the course of twenty years of the practice and teaching of dermatology, and I sometimes think that the theme is a little worn. But I have still reason to believe that all practitioners are not as fully able to cope with these cases as they would like to be; and, besides this, new students and young practitioners are constantly coming forward who require to be instructed upon some of these special points, which are not much dwelt upon in the course of medical training in our colleges. And, yet, among the first cases the young practitioner encounters are those of the various diseases and ailments of childhood.

Eczema cannot be named among the more serious diseases, but still you may meet cases at any time which will try your patience and baffle your therapeutic skill, and which, by the amount of suffering and sleeplessness caused the little patient and the worry and loss of rest to the parents and attendants, will sometimes rise to the proportions of a domestic calamity.

The infantile skin being particularly susceptible to external injury and irritation, it is not uncommon to see the milder forms of eczema spring up suddenly as a result of too much soap and water, of wet diapers, of slobbering about the neck, or merely from the rubbing and chafing of irritating clothing or exposure to the rigor of winter air in taking exercise.

The erythematous form of eczema here understood is characterized by a simple redness of the skin without infiltration, moisture, or discharge of any kind. It is not apt to be mistaken for any other disease, unless under exceptional circumstances, which I will mention in a few moments.

It is very easy for this condition, occurring in the tender skin of infancy, to run into another and more serious form of eczema, ac-

companied by exudation and maceration of the cuticle, or the formation of vesicles, and for this reason it should be checked at once. As it is almost invariably due to local irritation, the cause of this must be looked for, and so far as possible done away with.

One of the commonest forms of erythematous eczema in infants is that often called intertrigo, and which is here due to the maceration of the buttocks, groins, and thighs in the urinary and fecal discharges retained in the child's napkin or diaper. When these discharges are normal they are rarely irritating, but an attack of indigestion or diarrhoea gives them an irritative character, and if the condition remains unchanged intertrigo and erythema supervene, and the condition soon goes on to the stage of moist eczema, usually beginning in the groins.

The appearance, which is at first only that of a more or less dusky redness of the skin, soon changes, and fissures occur in the folds of the groins and about the genitals and anus, the perspiratory secretion becomes rancid, and adds to the irritation and extreme discomfort, due to burning and itching, and pain on movement results.

In these cases the first thing to be done is to change the character of the alvine and urinary discharges. The feces are apt to be white and curdy, and very sour-smelling. Give minute doses of calomel and soda, sometimes adding a little rhubarb, and correct any possible errors in the infant's dietary, and you will soon find a change, not only in the character of the stools, but also in the urine. The latter, which is frequently somewhat scanty, highly colored, and acid, with occasionally some deposit of urates, becomes changed by the rectification of the intestinal disturbance.

Meantime you must protect the tender skin from the irritating fluids in which it is constantly bathed. Ointments and greasy applications will not usually suit, because they quickly become irritative. A careful cleansing of the skin with some mild soap and warm water, followed by careful drying with a soft towel and a coat of vaseline, is very effective in giving relief.

The proper soap for use in these cases is one as nearly neutral as possible. Almost all soaps used in washing infants are too alkaline. Even the finest castile soap is not satisfactory. I have lately employed a German soap invented