

**A practical treatise on tinea capitis contagiosa and its cure : with an attempt to distinguish this disease from other affections of the scalp: and a plan for the arrangement of cutaneous appearances, according to their origin and treatment; including an enquiry into the nature and cure of fungi haematodes and naevi materni. The whole exemplified by cases / by W. Cooke.**

### **Contributors**

Cooke, William, 1778-1857.  
Physical Society (Guy's Hospital)  
King's College London

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KING'S COLLEGE LONDON

A  
PRACTICAL TREATISE  
ON  
TINEA CAPITIS CONTAGIOSA,  
&c. &c. &c.

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Norbury, Printer, Brentford.

ANATOMICAL TABLES

OF

THE BONES OF THE HUMAN BODY

BY

WILLIAM BISHOP

Mr. Rip



del.

H. Cooper

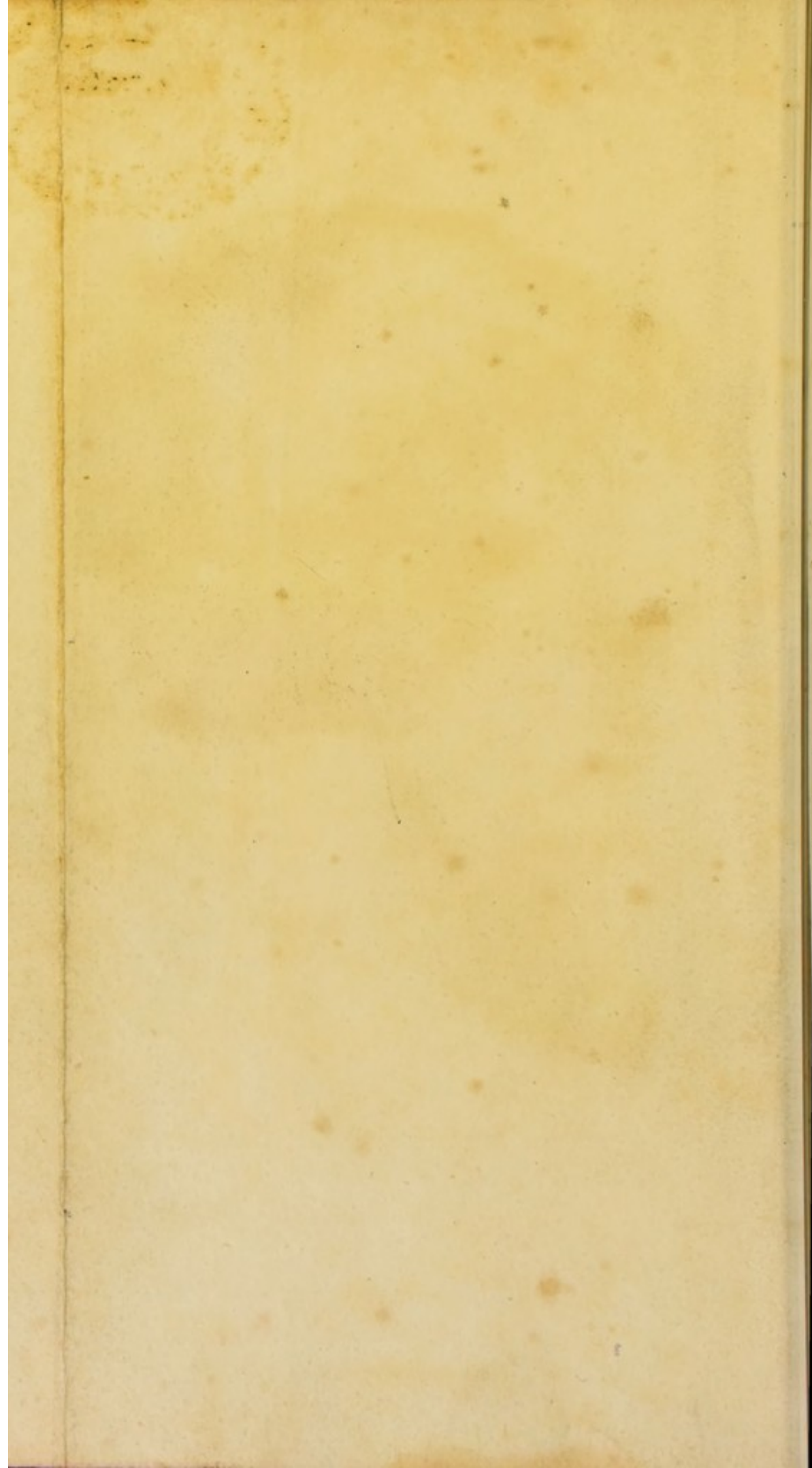
Plates are designed to represent the appearance of the Scalp occasioned by *Tinea capitis contagiosa*, taken from sketches made after the cure had been accomplished by the use of the Nitrico-oxyd Oil which was applied only five times before the disease was arrested.

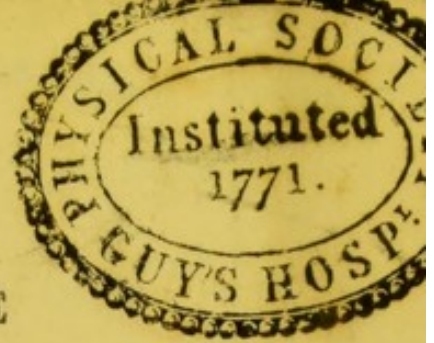
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H. Cooper sculp.







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WITH AN ATTEMPT TO DISTINGUISH  
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FROM OTHER  
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AND A PLAN FOR THE ARRANGEMENT OF  
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ACCORDING TO THEIR  
ORIGIN AND TREATMENT ;  
INCLUDING AN ENQUIRY INTO THE  
NATURE AND CURE OF  
*Fungi Hæmatodes and Nævi Materni.*  
THE WHOLE EXEMPLIFIED BY CASES.

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By W. COOKE, SURGEON.

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*" Est quòdam prodire tenus, si non datur ultra."*

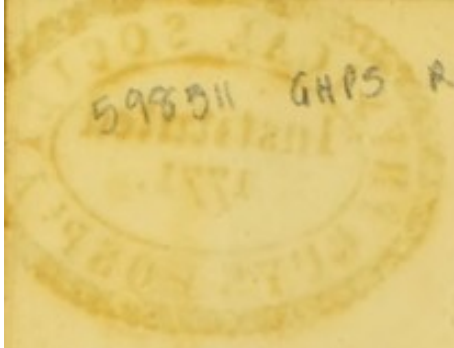
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PHYSICAL THERAPY

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TO

MATTHEW BAILLIE, M. D.

F. R. S. LOND. AND EDIN.

FELLOW OF THE ROYAL COLLEGE OF  
PHYSICIANS, &c. &c. &c.

DEAR SIR,

ALLOW me to inscribe to  
you the following pages.

In making this request, I am  
influenced by personal esteem and gra-  
titude, as well as by the conviction, that  
the public, highly estimating your pro-  
fessional talents and integrity, will be  
induced to receive more favourably a work  
which is sanctioned by your patronage.

That mankind may long enjoy the benefit of your professional skill, and individuals the honour of your private friendship, is the sincere wish of

Your obliged,

and faithful servant,

BRENTFORD,  
MARCH 1, 1810.

W. COOKE.

ERRATA.

Page 24, line 16,	for <i>lamen</i>	read <i>lamina.</i>
— 29, — 6,	— <i>ditto</i>	— <i>ditto.</i>
— 44, — 9,	— <i>sores</i>	— <i>sordes.</i>
— 98, — 7,	— <i>Currie</i>	— <i>Cwry.</i>
— 191, — 18,	— <i>syphilis</i>	— <i>typhus.</i>
— 215, — 12,	— <i>caliminaris</i>	— <i>calaminaris.</i>

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ERRATA

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A

PRACTICAL TREATISE

ON

T I N E A, &c.

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**M**Y attention has been drawn to the consideration of this subject, from a desire of establishing some discriminating character to a disease, which is frequently occurring, to the great perplexity of the practitioner, as well as to the anxiety of the friends of the patient.

Youth is subject to no complaint, that so often checks its progress in education, or draws down more undeserved reproach upon those to whose care they are intrusted, than ringworm.

B



It may have the appearance of arrogance in me, to lay before the public the result of my own practice, at a time when its attention has been so much attracted by Dr. Willan's late splendid and elaborate treatise on cutaneous diseases; more particularly, when I consider the distinguished approbation which the very outline of his plan for their arrangement and description experienced, on being presented to the medical society of London.

However highly I estimate the sanction of so eminently respectable an Institution, I feel that the duty I owe to society is paramount to every private consideration; more especially, as the arrangement Dr. Willan has adopted for cutaneous diseases, and the plan of cure he has suggested, do not appear to me of utility in practice. The cases of eruptions on the scalp and skin, that have fallen under my own immediate care, having led me to draw different conclusions from those

which he has deduced from apparently the same facts, I venture to state freely my opinions, and the grounds upon which they have been formed.

In doing this, I am fully aware that I may expose myself to censure; but, as some difficulties must be inevitably encountered in publishing observations upon so extensive and important a subject as the affections of the skin, I am ready to hazard the consequence, in the hope, that should I not succeed to the extent of my undertaking, the cases which I shall lay before the public, and the opinions that I have stated, may induce others, who have more time and more ability, to pay attention to this interesting subject.

In the following pages I shall chiefly endeavour to establish a mark\* by which

\* "The improvement of physic, in my opinion, depends upon collecting as genuine and as natural a description, or history of disease, as can be procured, and laying down a fixed and complete method of cure."

we may be able to know *tinea capitis contagiosa*, as well as to shew that those infinite varieties of scurfy appearances on the scalp, which have generally been termed spurious tinea, are not diseases\*, but merely the effects of a disordered or imperfect action of some part of the system, or of an acrimonious state of the blood.

I profess no new theory respecting *tinea capitis contagiosa*, or ringworm of the head, but shall attempt, to point out the seat of this disease†, to define its character, and then men-

\* “Hic affectus quoad valetudinis statim, nihil mali indicat, aut ominatur, et quamvis, in apparentiâ non nihil turpitudinis refert, id, tamen compensatur quatenus ita maculosos puriori constitutione præditos significat.”

Willis de affectibus cutaneis.

† “Neque enim, cum dolor intus incidit, scire, quid doleat, eum, qui, quâ parte quodque viscus intestinumve sit, non cognoverit: neque curari id, quod ægrum est, posse ab eo, qui, quid sit, ignorat. Aptiusque extrinsecus imponi remedia, compertis interiorum et sedibus, et figuris, cognitâque eorum magnitudine.”

Celsus de Medicinâ.

tion those preparations which have speedily and permanently eradicated it;— at the same time, I shall have occasion frequently to shew, in what particulars *tinea* differs from those common scurfy affections of the scalp or skin, which have been mistaken, by the majority of ancient as well as modern authors for scald head.

Presuming that a part of the common integument is the seat of *tinea*, I shall first notice the different lamina of which the skin is composed, and the attachment of the cellular membrane to it.

Anatomists have described the skin as consisting of cuticle, rete mucosum, and cutis\*; to which the cellular membrane adheres.

The hairs originate from bulbous roots on the inside of the cutis, which

\* “The common integument is composed of three parts, viz. cuticle, rete mucosum, and cutis.”

M. S. Notes of Mr. Cline's Lectures.

are surrounded by their involving or secreting capsules‡. These capsules are supplied by vessels that ramify in the cellular membrane.

The hairs are continued through the cutis, rete mucosum, and cuticle, which last dips down to the cutis, forming a

‡ "Hair originates from bulbous roots on the internal surface of the cutis, and is continued through the cuticle, which adheres very firmly to it."

M. S. Notes of Mr. Cline's Lectures.

"The hairs arise by roots or bulbs, which are situated in the cellular substance under the skin. The bulbs are of various shapes in different parts of the body, and have blood vessels dispersed upon them for their nourishment; each bulb has two membranes or capsules."

Fyfe's System of Anatomy.

"The hair grows from a bulbous root, seated in the cellular membrane. This bulb is vascular, and has connection, by vessels, with the cellular texture. It consists of a double membrane; the outer is a kind of capsule, which surrounds the other, and stops at the pore in the skin, and does not form part of the hair."

C. Bell's Anatomy.

"The root of the hairs is covered by a strong white membrane, which is connected with the skin and cellular membrane."

WINSLOW.

sheath to the hair, which it embraces firmly, and the hairs cannot be separated without considerable force, when their capsules are in a healthy state.

As this account of the integuments and of the hair, is universally admitted to be correct, I may be allowed to infer from analogy, that a *separation of the hair, accompanied with inflammation\**, is a proof of absorption having taken place in its involving and secreting capsule†.

The terms alopecia, area, defluvium capillorum, ophiasis, tinea, porrigo, achor, cerion, crusta lactea, scald head, teigne, datre, &c. have been at different times applied to very opposite affections. Dr. Underwood speaks of two kinds of

\* "Ex putridine humor albus oriatur et causa est canitie."

Ex Anatomia Bartholini.

† "Absorption removes the alveolar processes when the teeth fall out, as also the fangs of the shedding teeth, which allows them to drop out."

Hunter on Ulceration.

tinea; Celsus of two kinds of area; Turner of three sorts of tinea. Sennertus calls this disease *tinea capillorum*. Dr. Willan makes use of the terms porrigo, scald-head, or honey-comb scab; and psoriasis and pityriasis, for a complaint that sometimes terminates in the true porrigo.

But tinea, or ringworm of the head, appears to be a term now used to express a contagious disease of the scalp; in which the hairs fall off, and which is sometimes accompanied with ulceration.

As this separation of the hairs of the scalp has been considered by the generality of medical practitioners as necessary to constitute ringworm of the head; and as it is intended, in the present work to be established as the characteristic symptom of *tinea capitis contagiosa*; I have been induced thus particularly, and circumstantially to dwell on its explanation: and I flatter myself with the hope of being able to demonstrate satisfactorily, that the

hairs of the scalp separate in no other disease of the head\*.

It may perhaps here be objected, that the hair frequently falls off † after acute and protracted disorders; but to this objection a very conclusive and unequivocal reply presents itself, viz. that *inflammation* has never been known to accompany *this baldness*, for which reason it cannot be termed disease, but the effect of former excessive action, occasioning *pro tempore* a weakness in the secreting capsule of the hair.

\* “ Si vero aliquando glandulæ adsunt, absque pilis, ex nimia copia humoris hic pilorum defectus oritur, vel per lymphatica vasa humiditas superflua expurgatur, &c. “ Cutis in qua pili generabantur, esse debet moderate sicca, ne pilus caudâ suâ seu radice excidat,” nec non moderatè sicca, laxa, et rara, ut ne penetrare pilus possit.”

Anatomia Bartholini, lib. iii. de pilis.

‡ “ Pili, qui post morbum fere fluunt.”

CELSUS.

“ Quibuscunque tabe laborantibus capilli de capite defluxerint.”

HIPPOCRATES.



*Tinea capitis contagiosa*\* I offer as a term for the following morbid appearance, namely, a slightly raised scurfy patch, suddenly attacking the scalp, accompanied with itching, and a separation of the hairs;—it generally commences in the form of a ring, in the centre of which the hairs at first remain, till the disease gradually spreads, when baldness succeeds, with occasional ulceration of parts of the scalp, denuding the pericranium; in which state it has been commonly known by the appellation of scald-head.

Celsus mentions two kinds of this disease§, but it is evident, from his own

\* “*Tinea* provenit ex salibus mineralibus cum humore carnis, et cutis liquore permixtis postmodum expulsionem transeuntibus in crustas. Si crustæ nascuntur in capite, cum capillorum fluxu, vel aliàs, sudoremque non libenter emittunt, et crustæ cadentes die tertio rursus enascuntur *tineam* esse dicas.”

Paracelsus de apostematibus.

§ “Arearum quoque duo genera sunt, commune utrique est quod emortua summa pellicula, pili primum extenuantur deinde excidunt: ac si ictus is locus est, sanguis exit li-

words, and comparing them with a former quotation from this author, de porriginē, that he has been describing two distinct appearances, the one what I call *tinea capitis contagiosa*, and the other what he has termed porrigo, and which I have seen so frequently accompany dentition, and other disordered action in children.

The words "*illud vix unquam sine curatione finitur*," strongly designate *tinea*, and "*hoc fere in infantibus, et hoc per se sæpe finitur*," pointedly allude to the affection of the scalp and skin so common in infancy, and which frequently subsides

quidus, et mali odoris: increscitque utrumque in aliis celeritur, in aliis tardè. Pejus est, quod densam cutem et subpinguem; et ex toto *glabram* fecit. Sed ea quæ ἀλωπεκία nominatur sub quâlibet figurâ dilatatur. Fit est in capillo, et barbâ. Id vero quod a serpentis similitudine Οφιασίς appellatur, incipit ab occipitio; duorum digitorum latitudine non excedit, ad aures duobus capitibus serpit: quibusdam etiam ad frontem donec ac duo capita in priorem partem committant. *Illud vitium in quâlibet ætate est, hoc fere in infantibus. Illud vix unquam sine curatione finitur; hoc per se sæpè finitur.*"

Celsus de areis.

when the disordered action of the gums, or of the digestive organs ceases.

This author in his chapter de porrigine clearly describes the affection of the scalp to which I allude\*.

The definition of tinea by Segarus§ I have introduced in this place, as it seems more applicable to the porrigo of Celsus.

\* "Porrigo autem est, ubi inter pilos quædam quasi squamulæ surgunt, cæque à cute resolvuntur; et interdum madent, multo sæpius siccæ sunt. Idque evenit modo sine ulcere modo ex ulcerato loco. Huic quoque modo malo odore, modo nullo accedente. Fereque id in capillo fit, rarius in barbâ, aliquando etiam in supercilio. Ac neque, sine aliquo corporis vitio nascitur, neque ex toto inutile est. Nam bene integro capite, non exit; ubi aliquid in eo vitium est, non incommodum est summam cutem potius subinde corrumpi quam id quod nocet in aliam partem magis necessarium verti."

Celsus de porrigine.

§ "Incipit à pustulis vel phlycthænis capitis aut faciei diversi-coloribus, quæ ruptæ in crustas humidæ vel siccæ abeunt corymbosæ, videtur nimirum esse scabies, et nihil aliud."

SEGARUS.

"Porrigo resolutio cutis in tenues squamulas deciduas."

VOGELIUS.

Segarus has evidently run into the same error as some of the modern writers upon this subject, who consider this scurfy affection of the scalp the scabies capitis.

Dr. Willan in this instance appears to have too implicitly followed the ancient definitions; and, instead of separating these distinct appearances, he has continued in the old opinion, that the scurfy and eruptive affection of the head would ultimately become scald head.

*Tinea* has been defined in general terms by several authors, but not sufficiently minute and particular to characterize this disease\*.

Cullen's definition certainly falls short in this point; I have referred to it in the

\* "Crustæ flavæ, vel grisæ, ulcerosæ, per caput dispersæ."

SAUVAGE.

"Pustulæ capillitii siccæ, eschara albo-flavescentia, pilisque abbreviatis erectis, bulbosa-radicatis."

LINNÆUS.

notes§, though I do not think it expressive of the disease.

In Dr. Underwood's useful work on the diseases of children, an accurate account of *tinea* is given†. But in speaking of the *common tinea*, and a *spurious kind of scald head*, he says, that it is more difficult of cure, but it requires only patience in the use of one or more of the above remedies, viz. hellebore, &c. such

§ "In cute capillata ad radices capillorum ulcuscola humorem in crustam albam friabilem abeuntem, fundentia."  
Cullen's Synopsis.

† "Tinea or scald head is indeed highly infectious, especially among children, at schools, where they exchange hats. It is a mere complaint of the skin, and most successfully treated by topical applications. It is seated in the little glands at the roots of the hair, which become ulcerated. I have seldom given any other internal medicine than lime-water, or a decoction of the woods, and a few purges at the decline of the disease."

Dr. Underwood's Treatise, vol. 2.

Here Dr. Underwood becomes confused in his treatment, at one time considering *tinea* a local, and at another time a constitutional disease. "At its commencement," he says, "it may be frequently cured by mustard, nitrated ointment, tobacco, tar, hellebore, or other depilatories."

as he recommends for the cure of *common tinea*.

He then concludes his remarks upon *spurious tinea* in the following words,—  
 “ In this complaint particularly it may be useful to open an issue, or fix a seton in the nape of the neck ;” from which observation, as well as from others in the course of his chapter upon this subject, I am induced to conclude that what he has termed *spurious tinea* was that affection of the scalp which has been before alluded to.

Again he says, “ Should the difficulty of cure consist in getting out the hair entirely, or destroying the diseased gland at its root, the calx viva may be had recourse to.” In *tinea* I have never found a difficulty in getting out the hairs entirely, they have always come away easily in the cases that I have met with, and require no caustic, or depilatory solely for that purpose.

Dr. Underwood has mentioned in another place, that "hellebore mixed with the unguentum picis should be rubbed forcibly upon the head, if the mustard does not succeed;" from which direction it might be imagined that he had been influenced in his mode of cure by Pliny, who recommends depilatories\*.

From the quotation which I have given from Pliny, it is evident that he (deeming it necessary to destroy the hair in the cure of alopecia) recommends for that purpose the very substance which is looked upon, even at the present moment, as so

\* "Psilothrum est thynni sanguis, &c. Castoreo quoque cum melle pro psilothro usi, pluribus diebus reperiuntur. In omni autem psilothro vellendi prius sunt pili."

Plinii Naturalis Historia.

"Alopecias replet hippocampinus cinis nitro et adipe suillo mixtus, aut sincerus ex aceto. Præparat cutem sepiarum mistæ farinæ medicamentis. Cutem replet et muris marini cinis cum oleo aut melius cum pice liquida, &c. Capitis ulceribus medetur muricum vel purpurarum testæ cinis, &c. Cyprii vero, qui et donax vocatur, cortex medetur alopeciis ustus et ulceribus veteratis, &c."

De alopecia.

essential a compound, both by the chemist, in his various experiments, as well as by the physician and surgeon in their curative means, viz. *volatile alkali*.

No author has described *tinea* in terms more applicable, or illustrative of the definition which I have given of this disease, than Vogelius\*.

It is true that he has not specified it as a contagious disease; but from the words *serpens*, and *pilis abbreviatis*, it is natural to conclude that he has been describing *tinea capitis contagiosa*.

He has arranged *tinea* under the sixth order of the class *vitia, vel mutationes in superficie corporis conspicuæ*.

This order contains two genera, the latter of which he has distinguished by the term *exulcerationes*, which includes his definition of *tinea*.

\* "*Tinea* ulcus capitis, quod densissimam, durissimam, aridissimamque crustam facit, serpens, pilis abbreviatis."

Vogelii definitiones generum morborum.



It is remarkable that Segarus and Vogelius should so materially vary in their definitions of *tinea*; the former considering it as contagious et *scabies capitis*, the latter not only making no allusion to its being infectious, but viewing it as a disease solely of the head.

Paracelsus has written more fully upon affections of the skin than any other of the ancient authors. His works unquestionably contain many valuable hints upon this subject: indeed mercurial, arsenical, sulphuric, alkaline, and saline applications, together with the hot-bath, seemed to constitute his "*fons et origo curandi*." From him we have derived almost all our present useful applications in affections of the skin.—He has mentioned an infinite variety of them, and though he possessed the means of curing the diseases of the skin, he has sometimes failed from not having sufficiently distinguished affections from diseases.

When speaking of alopecia he does not mention the separation or falling off of the hair, and recommends for its cure, "*picem et aquas corrosivas.*" Quidam tonsores (ait) auferunt pilos et cutem. From which direction, I conclude that he has misapplied the term alopecia, and in consequence of this misapplication, has been incorrect in his mode of cure. For in true alopecia neither mechanical or chemical depilatories are necessary. I have given his definition of *tinea*, in support of my own opinion upon that disease, though I do not approve the mode of cure which he recommends.

Indeed, though he seems from many passages in his writings to have been fully aware of the necessity of a thorough knowledge of morbid anatomy, to enable a practitioner to treat disease correctly, he has not carried his theory into practice on affections of the skin.

“ De signâ alopeciae (ait) si cutis in capite post fricationes emittat sanguinem postmodum crustas, deinceps flavam aquam, et extenditur pro crinium terminis in cervicem usque, mox ad hanc ubi pervenerit, alopeciam esse dicas.” In this account of alopecia he has very accurately described the affection of the scalp arising from dentition; as the following passage indirectly proves. — “ Et quamvis hoc remedio repellatur alopecia, nihilominus perfecta cura non est; nam hac ratione pulsam inde post annos duos rediisse vidi.” I do not mean to say that alopecia might not have returned after so short an interval, but I think that the relapse was more likely to have been induced by some irritation in the habit.

This chapter upon alopecia concludes in a very remarkable manner.—He says, that others are accustomed to use corrosive and irritating applications, of which, in consequence of their eroding the

neck, he disapproves. However, he acknowledges that after the head had been anointed with these applications for nine successive days with great care, — “eo temporis spatio plurimum humiditatis atrahitur in spissam crustam concretæ, quæ post eos dies nonem decidit, cutisque sub- tus nudatur pulcherrima.”

From his caution accompanying the application of the remedy, viz. “sed quia plurimum urit, olivarum oleo desuper illito absque intermissione dolores isti mitigandi sunt:” I am induced to think that the affection of the scalp was not situated in the secreting capsule of the hair (constituting his alopecia, or *tinea capitis contagiosa*,) but that its seat was in the vessels of the cutis, and that his application was intended to act in the moderate and gentle manner in which we use the solution of the muriate of quicksilver, &c. in the scurfy and eruptive appearances of the head.

In the *spurious tinea*, for which affection Dr. Underwood has proposed the calx viva, I am at a loss to conceive how so irritating an application could ever be recommended. Indeed, if the seat of what has been called *spurious tinea* be in the vascular membrane of the cutis, I cannot account for its utility, unless it be considerably reduced. The calx viva must aggravate all the symptoms of this affection, and tend much to protract its termination.

It is probable, that this author has been misled from having used a misnomer; for experience proves that there is no difficulty in separating the hairs from the scalp in *tinea*, as they fall off *suâ sponte*.

I beg leave to refer the reader to Dr. Underwood's opinion on the mode of curing *tinea*, in support of what I shall hereafter propose.

Dr. Heberden, in his commentaries, says that "porrigo, or scald head, begins

with little spots of a branny scurf, which itch and grow bald; these gradually become larger and more numerous, till they cover the whole head, the skin of which will be sometimes so deeply affected with humour as to be full of moist scabs."—Here we have a most accurate description of *tinea capitis contagiosa*, and if this valuable and eminent physician had pointed out a plan of cure as simple and conclusive as his definition of the disease, it would have been highly intrusive, and altogether superfluous in me, to have troubled the public with these observations. He then says, that "a cough has immediately ceased upon the appearance of scald head, and that on its retreat the breathing has proved short and laborious."—This is considering *tinea* as a symptom, or a constitutional affection, and has led me to suppose that Dr. Heberden in this instance misapplied terms; for how an affection of the lungs could be

dependent upon the appearance and existence of *tinea*, is a problem too difficult for me to solve.

I must request the attention of my reader to this common affection of the vascular membrane of the cutis, which I am fully persuaded is the cause of the daily alarm that exists in private families as well as in schools.

That this membrane of the cutis is in all probability the seat of what has been called *spurious tinea* I will endeavour to point out in the course of these sheets. I shall likewise have occasion frequently to notice the nature and functions of this lamina with the view of elucidating the probable situation of most of the cutaneous affections of the human frame.

From a careful examination of the manner in which the hairs arise from the inner side of the cutis, I have long thought, that the arteries of the cellular membrane give off, in their distribution,

small branches to the secreting and involving capsule of the roots of the hair.— I am further strengthened in this opinion by observing that considerable inflammation may exist for many months in the vessels of the cutis, without interfering in any degree with the stability of the hair.

It may also be observed that the rapid growth of the hair on the mons veneris, at puberty, is invariably accompanied by a locally increased quantity of cellular membrane, which occasions an evident prominence of that part, and can only be accounted for upon the supposition of an increase of vascularity in the secreting vessels of the hair, and adipose substance; for no alteration is observed in the cutis, or cuticle, immediately covering the mons veneris.

Here it may be inferred, *à priori*, as highly probable that the arteries of the cellular membrane supply the secreting capsule of the hair.



If this be admitted, we shall not be at a loss to account for the hairs remaining firmly attached to their origin, in the confluent small pox, rubeola, and in the violent affections of the cutis arising from dentition.

In the *lepra* and *alphos* of the Greeks, we find no account that gives us the least idea of the separation of the hair in these formidable and scaly affections.

After acute disease, where great prostration of strength and debility has been induced, a wasting of the cellular membrane, accompanied with partial baldness, has often been known to take place.

The natural inference from this circumstance would be, that there was an imperfect, or undue action in the arteries of the cellular membrane, rendering them incapable of secreting adeps or hair.

The cuticle is frequently thrown off after excessive constitutional inflammation, without any interference with the hair,

as is observable in rubeola, scarlatina, &c\*. This commonly takes place when there is an imperfect action in the cutis, as well as when there is an increased action of its vessels.

From these observations I conclude that the vessels which form cuticle, and those which supply the secreting capsule of the bulb of the hair, are not the same.

In making use of the term vascular membrane, it should be understood that I include the rete mucosum‡, which I consider as a production, or rather a con-

\* “ Sæpe tamen præter naturam instar exuviarum serpentis deponitur, et in febribus ardentibus variolisque contingit.— In podagricis observavit, in tertianâ intermittente, aliisque. In demortuis candela, vel ferventi aquâ separatur: in vivis phænigmis.”

Bartholinus de cuticulâ.

‡ “ But beneath the rete mucosum and in the surface of the cutis vera, a soft vascular membrane has been discovered by injecting the skin. It was first demonstrated in subjects who had died of small pox, and it is so much strengthened by other inflammatory actions of the skin, as to be capable of demonstration.”

C. Bell's Anatomy.

tinuation of the vascular membrane of the cutis; for the vessels, as demonstrated by injection, are evidently continued on to the rete mucosum, which in its turn forms cuticle.

Whenever this membrane is inflamed, the cuticle being transparent, a redness is instantly seen under it.

It is this membrane which is inflamed on the application of a blister, and may be clearly distinguished to be crowded with vessels after separating the cuticle.

That cuticle is insensible and inorganic has been the opinion of the ancient as well as modern anatomists§.—

§ “Cuticula est vitæ sensusque expers tenuis, densa, exsanguis è vaporibus oleosis, crassis et viscidis à frigiditate externâ condensatis ad tegendam cutem: in morbis diuturnis, et tabe sæpe cresscit. Incisa vel dilacerata non emittit sanguinem non rubet, &c.”

Bartholinus, lib. i.

“Cuticle is inorganic, no vessels or nerves having been traced into it. It dips into cavities situated externally. It is produced by the vascular membrane of the cutis. Its regeneration is very quick. The cuticle frequently peels off after fevers, and is reproduced when the inflammatory action

Daily experience confirms this fact too strongly to leave a doubt remaining upon the subject.

From this view of the cuticle no one will imagine that the separation of this lamina of the integument arises from a morbid change in itself, as no disease can take place in an inorganized part; therefore the epithet morbid, when attached to cuticle is incorrect, and tends only to mislead the judgment in enquiries respecting affections of the skin.

ceases. This death or decay of the cuticle is supposed to depend upon an interrupted or peculiar action of the secreting vessels. Its structure is well adapted to its uses, for in giving an insensible covering to a sensible part, it by that means defends the cutis."

M. S. Notes of Mr. Cline's Lectures.

"Cuticle is a thin transparent membrane, adhering to the skin by small filaments. It forms the processes which line passages by which the cutis is perforated. It is formed by a condensation of the rete mucosum, or by the extremity of excretory vessels. The cuticle serves to protect the sensible parts under it, and to regulate the proportion of the fluids thrown out, or taken in by the surface of the skin; particularly to prevent a too great degree of evaporation."

Fyfe's Anatomy.

It follows then, that the membrane which is situated immediately under the cuticle, is its secreting membrane, and must be supposed to be interrupted in one of its natural functions when cuticle is thrown off.

It is this membrane which (by means of the rete mucosum) influences the colour of the complexion†, and probably is the common seat of almost every cutaneous affection. It is supposed likewise to form a soft bed for the papillæ of the cutis.

C. Bell's opinion coincides with the ideas I have entertained of the functions of the vascular membrane||.

† "Nigridinem autem cuticulæ in æthiopibus à subjecto mucoso, et reticulari corpore accersit."

MALPIGHIVS.

|| "I should rather think that this is a vascular surface not changeable, nor losing its vascularity to be thrown off in form of rete mucosum; but in itself the organized surface which is to form the rete mucosum, and which excretion does in succession become cuticle."

C. Bell's Anatomy.

If, from what has been said on the different lamina of the skin, and the origin of the hair, I am allowed to conclude that the membrana vascularis is the real secreting vascular surface of the cutis, forming cuticle, and supplying the papillæ and sebaceous glands; and that vessels of the cellular membrane support the secreting capsule of the hairs (not having any direct communication with the vessels of the cutis) I may with some degree of confidence maintain that the seat of *tinea capitis contagiosa* is essentially different from the seat of all the variety of cutaneous affections to which the skin is subject.

I consider the scurfy patch on the skin\*, which Dr. Underwood calls *spu-*

\* When this affection appears upon any other part of the body it is not considered of importance,—why then this great alarm when it is found on the scalp? It is true that *tinea capitis contagiosa* is a disease peculiar to the head (though some authors have seen it on the eyebrows as well), and that it is of easy communication; but the seat of this disease I

*rious tinea*, and which creates so much alarm when it is found in the scalp (from its being frequently confounded with *tinea capitis contagiosa*), to be simply that affection to which children of fair complexions and light-coloured hair are particularly subject. It appears in the form of an irregular ring, occasionally in patches, and sometimes covering the whole head, accompanied with itching, soreness, and separation of the cuticle, which falls off in small flakes: a serous exhalation ex-coriating the adjacent parts, will sometimes attend this appearance. The hair never separates in this affection, neither is it in my opinion contagious\*,

have endeavoured to prove is in the secreting membrane of the hair, and not in the vessels of the cutis vera. When the scalp is affected, the reason of the cuticle being so rapidly thrown off is in consequence of its great attachment round the hair, which in its growth carries with it the imperfectly formed cuticle, from the vessels of the rete mucosum.

\* "There seems to be very little if any contagion in cutaneous disorders, if we except the itch and scald-head; many morbid appearances of the skin are judged to be proofs

for I have known it to remain stationary for twelve months and longer on the scalp, without spreading, except when irritated by stimulating applications. — Several cases of this kind are given at the end of this treatise.

It is supposed to arise from dentition†, or a disordered state of the stomach and bowels; and when this is the case, very little internal medicine, beyond an occasional dose of calomel, is necessary.— Lancing the gums must chiefly be de-

of a diseased constitution, rather than merely local disorders of the part which is afflicted with them; yet in some instances a hurt of the skin by a bruise or a burn has been the cause of a general mischief; so that in consequence of such an accident a clear habit of body has in advanced age of life shewn all the marks of what is vulgarly called a scorbutic, or even a strumous taint." Vide case iv.

Heberden's Commentaries, ch. 23, de cutis vitiis.

† "Infantium gingivis dentitionibusque multum confert delphini cum melle dentium cinis, et si ipso dente gingivæ tanguntur. Idem affectus et caniculæ dentis. *Ulceræ* veroque *in auribus*, aut ullâ corporis parte fiant, cancrorum fluvii atilium succus cum farinâ hordeaceâ sanat."

C. Plinii Historiâ naturali.



pended upon, taking care that the affection is not checked by external cold.

An acrimonious state of the blood, or an imperfect action in the secreting vessels of the cutis, will produce this scurfy state of the scalp; when this is the cause, abstinence from salted provisions, and giving encouragement to the exhalants§, are generally sufficient in a short time to mitigate this affection. When these means do not succeed, a lotion made of any of the mineral acids has been found beneficial‡, by improving the state of the cutis.

§ “In slight cutaneous disorders, warm bathing will sometimes clear the skin for a little while, but can hardly be considered as a cure.—When this happens, the weak solution of the argenti nitras, or hydrargyrus muriatus is a good application.”

Heberden's Commentaries.

‡ “Muricum, vel conchyliorum testæ cinis maculas in facie vel capite purgat cum melle illitus, cutemque erugat, extenditque, septenis diebus illitur ita ut octavo candido ovorum foveantur, &c. *Ithyocolla* erugat cutem, extenditque, in aquâ decocta horis quatuor, dein contusa, collecta,

A weak solution of the argenti nitras makes an efficacious wash\* in affections of this kind, when of long standing.

Mr. Home, of Sackville-street, favoured me with the relation of a case that had yielded to this application, in the course of a fortnight, without any internal medicine.

Mr. Fox has recommended this solution to be used in the scurvy of the gums;

et subacta ad liquorem usque mellis; ita præparata in vase novo conditur, et in usu quatuor drachmis ejus, binæ sulphuris, et anchusæ totidem, octo fumæ argenteæ, &c. Medetur et lentigine cæterisque vitiis cinis ex ossibus sepiarum. Idem et carnes excrementes tollit, et humida ulcera."

C. Plinii Historiâ naturali.

Volatile alkali, sulphur, and quicksilver, as well as isinglass and honey, were used by Pliny for affections of the skin in his time.

\* "With regard to external remedies, it is a useful general rule to employ acrid washes, and unguents, where the affected skin is accompanied with itching; but where it is attended with soreness and pain, to use mild ones. A warm bath, either in the form of a fomentation or vapour is the general and best remedy. A lotion of white hellebore, or corrosive sublimate will answer the intention best where an itching of the skin attends the affection."

HEBERDEN.

he says,—“this remedy appears to communicate a new action to the gums, and they generally get well in a short time.”

It may be necessary here to observe that this solution should *not give pain*, as I have remarked that when it does the affection is rather increased by it than benefited. Using at first a very weak solution, and gradually strengthening it, will be found the safest and most advantageous mode of proceeding, taking care that only a sensation of itching or tingling be produced.

The infinite variety of these affections, as well as of the susceptibility of different skins, renders it impossible to mention any particular formula. I have never found the following give pain, where ulceration had not taken place,—

℞ Argenti nitratis ℥iv.  
Aquæ distillatæ f.ʒviii. M. f. Lotio.

The light should be excluded from this lotion.

Dr. Underwood in his chapter on red gum says, that "The state of the skin, and the bowels have a peculiar consent, and on this account infants whose first passages have been frequently disordered, are always benefited by eruptions on the skin, and in such cases peculiar care is necessary to guard against their being repelled, as well as to invite their return."

What observations can carry with them more plain sense or practical utility than these?

Again, "Infants," he observes, "are liable to various kinds of rashes, both in the month and till the period of teething is over."—In short, he seems to think, that the *crusta lactea*, and all the varieties of cutaneous affections, that are not dependent upon specific contagion, arise from dentition, or a disordered state of the *prima via*.

We are taught by experience to consider these symptoms always beneficial to

those children whose bowels have been disordered;—we establish this as a practical fact in infantile complaints, and it should be as strongly impressed on our minds when we are attending adults, in whom we often see similar cutaneous affections, indicative only of some internal disease†.

This author in pointed terms recommends a similar plan of treatment in each, modifying it according to circumstances. The tepid bath, aperient and occasional absorbent medicines, with strict injunctions to avoid external cold, constitute his *ratio medendi*.

As this treatment is equally applicable and serviceable to each variety of cutaneous affections, and is consistent with reason and common sense, what benefit

† “Several of these (cutaneous) maladies are hereditary, and even when they are not derived from the parents, may still be the effects of a general disorder of the body, rather than merely local, and belonging only to the skin.”

can accrue to the patient by considering them as separate diseases, when almost all writers agree (as I conclude from their mode of treatment) that the following terms, *roseola*, *psoriasis*, *urticaria*, &c. (intended to designate different diseases,) in fact are applied only to express the effects, variously modified, of a disordered action, or morbid structure of some internal part?

I have frequently noticed this scurfy and eruptive affection appearing upon the forehead and face of those whose minds have been absorbed in study, or dejected by distress, and have witnessed its subsiding after the mind had returned to its natural tranquillity§.

§ "Neque solius corporis in morbis sanandis rationalem semper habendum esse, sed menti quoque interdum esse subveniendum, quippe in qua sæpe hæret fons et origo mali.—Leges vero harum rerum generales, et modum quo mens corpus afficit, et ab eo afficitur vicissim, nec noverim ipse, nec quenquam hactenus novisse crediderim."

Gregory's conspectus, page 18.

Surely then there can be no necessity for retaining these numerous titles, much less for enlarging our list of diseases †, as more already exist than we possess the means of curing\*. Yet we crowd mere symptoms into our morbid arrangements, as if we were desirous of strewing fresh difficulties in the path of professional science.

This scurfy and eruptive appearance, which has so frequently been taken for *tinea capitis contagiosa*, I have presumed originates in the vascular membrane of the cutis, and that it is evidently distinct from *tinea*, with respect to its seat, and its nature.

Sydenham has called this affection the dry scurf of the head, which sometimes,

† "For the practice of physic chiefly consists in being able to discover the true curative indications."

SYDENHAM.

\* "Quippe quia tot existant morbi quorum natura et causæ prorsus lateant."

Dr. Gregory's conspectus.

he says, continues through life. Dr. Heberden was likewise of this opinion§.

The term psoriasis has been adopted by Dr. Willan, for this appearance on the skin;—indeed he has described many varieties, with the medical treatment proper for each, conceiving (I admit) that advantage might arise in practice from distinguishing them by different titles. In

§ “A branny scurf in various parts of the skin, and particularly in the head, has infested some through their whole lives.”

Heberden's Commentaries.

“Exhibit the common purging potion, and afterwards anoint the whole head with the following liniment, rubbing it in well, and then cover it with a bladder:—

Take Oil of bitter almonds,  
Bay leaves,  
Ashes of southernwood, of each  $\bar{z}$ i.  
M. f. Linimentum.

The head should be shaved in the first place, and then the scales rubbed off every morning by degrees, as they grow loose.”

Sydenham on scurfy eruptions of the head.

That vegetable alkali gives considerable relief in this affection, and sometimes completely dissipates it, my own experience has proved.



doing this he has adopted in many instances the arrangement of former writers.

Under this head of psoriasis, Dr. Willan describes many varieties, which he considers the most striking and important.

From his own account it appears that irritating applications invariably did harm, and that mild treatment and the warm bath uniformly afforded relief. In one place, however, he observes, that he has seen some very obstinate cases of lepra, alphas, and psoriasis completely cured by the proper use of the waters of Harrowgate.

“Præcipitated, or tartarised iron,” he says, “are perhaps occasionally useful in removing certain states of the constitution, with which scaly tetter seems to be connected.”

From this remark, it seems as if a momentary ray of light had broken in upon his mind, though not of sufficient

splendour to exhibit such a view of the subject as would have shewn him that all the varieties of psoriasis, were only affections arising from "certain states of the constitution."

In the scaly tetter of infants, antimonials, warm bathing, and mild applications, with calomel as a purge, were found serviceable; in short, in the psoriasis scrotalis, palmaris, inveterata, &c. &c. the steam of warm water, oiled silk with a mild defensative ointment, produced the most relief, after various internal medicines had been found ineffectual.

When this affection, viz. scaly tetter, attacks the head, Dr. Willan has called it pityriasis capitis. He quotes a passage from Rhazes\* which is applicable to the present point, and strongly supports my

\* "*Furfura removentur continuo abradendo caput, et singulis noctibus inunguendo, et postero mane in multâ aquâ calida abluendo in balneo.*"

Rhazes de re medicâ.

opinion and my usual practice in this appearance of the scalp.

The mode of treatment adopted by Rhazes has apparently the same object in view, viz. to soothe and quiet the skin.

The passage of Dr. Willan which immediately succeeds his reference to Rhazes, is very remarkable,—“ If scales, intermixed with *sordēs* be permitted to cover the scalp for a length of time, pustules containing an acrimonious lymph are formed under the incrustation, and the true porrigo often supervenes.”

By means of this sentence, we are indirectly introduced to Dr. Willan's opinion of *tinea capitis contagiosa*, or scald-head, from which I am under the necessity of differing, being influenced by the cases which have occurred repeatedly to me in practice. Vide cases No. V. and VI.

Avicenna, from his mode of cure in these affections of the skin, affords us much useful information. Though I

have already been induced to make larger quotations from this discriminating author than I had at first intended, yet his observations are of too much practical importance to be suppressed in this place §.

Dr. Willan's fifth order, including porrigo, &c. I believe has not yet appeared before the public, but probably ere these observations leave the press, the world may be favoured with a more particular treatise on "scald-head, or the honey-comb scab."

§ "Utatur cibo humido, et balneis temperatis proprie, quiete, et tranquillitate, et assiduitate inunctionis capitis cum oleis humectativis, et emusione lactis super caput; quia humor assendens fuerit grossus. In eâ affectione autem, quæ facta est ex humiditate nitrosa salsa propter nitrositatem, et salsedinem, oportet ut acceptio omnis acuti, et salsi alienetur, et cibetur eam habens piscibus petrosis, et carnibus subtilibus cum pauco sale, et evacuetur cum pilulis purgantibus, et assidue fiat inunctio capitis cum oleis suavibus et tepidis. Quumque hæc species accidit in ætate senii, ejus cura est prava. Oportet ut eam habens utatur embrocha ex aquâ tepidâ, in quâ cocta sunt hordeum, et chamœmilla, et matricariæ minoris, et non aliud omni nocte; facit enim bene dormire. Sufficit autem, ut laboret, et exercitetur, et balneetur, &c."

Avicenna de affectibus cutaneis.

He has already asserted, in his remarks on pityriasis, that if this affection be neglected, it will terminate in true porrigo; therefore, from his own words, I conclude that our opinions upon *tinea* differ in every point of view.

After a careful perusal of that part of his work on this subject which has already appeared, I cannot allow that he has added much to our treatment of affections of the skin, or that the practitioner has received that assistance from his arduous undertaking, which might have been expected from so systematic a treatise.

I have been favoured with a cursory view of a French work, entitled "*Description des maladies de la peau, par J. L. Alibert,*" which far exceeds Dr. Willan's treatise, in splendour as well as expence. This author seems to use the terms — "*Teigne muqueuse, flaveuse, granuliè, furfuracèe,*" &c. &c. for the scurfy affections of the scalp. He has

likewise the following names, “*datre furfuracèe, volante, arrondèe, squameuse, humide orbiculaire, centrifuge, lichenoide,*” &c. signifying varieties only of the dry or scaly tetter of Dr. Willan.

His plates of the “*plique solitaire, dupubis, multiforme,*” &c. are, I should suppose, accurate descriptions of the *trichoma* or *plica pilonica*; but in what degree they will be useful in practice I leave the professional world to decide.

The seat of *tinea capitis contagiosa*, I have endeavoured to shew is so different from the situation of the other scurfy and eruptive affections of the scalp, as well as its characteristic symptoms and modes of cure\*, that I can never admit, without stronger evidence than Dr. Willan has adduced, that any other affection of the

\* “Τὰ περιμαθάρ᾽ ἔλκεα, κακὴθεα.”

scalp has the slightest connection, either directly or indirectly with this disease.

A quotation is made by Dr. Willan from Avicenna, in support of his opinion respecting true porrigo supervening to pityriasis, but, according to my construction of it, it is not clear that Avicenna meant scald-head\*.

In the course of my practice I have seen several cases in which ulceration of parts of the scalp had taken place, and had exposed the pericranium, in consequence of long continued and excessive action of the vessels of the cutis, arising from dentition. Vide case No. VI.

These cases are, in my opinion, very interesting and instructive; they demonstrate that these dreadful affections of the head subsided on the appearance of the

\* "Pejor pervenit ad ulcera, et ad corrumpendum origines capillorum."

teeth, and that scald-head did not supervene.

If Dr. Willan means by the scald-head, the scabby affection of the scalp accompanying dentition, not attended with falling off of the hairs, nor in any degree contagious, we differ only in our application of terms.

One of the cases did much credit to the judgment of Dr. Underwood, who was decidedly of opinion that the affection was not scald-head, in opposition to the sentence that had been passed upon this complaint by one of the most popular practitioners of that day. On the scalp being shewn to this gentleman, he said to the mother,—“that disease is scald-head, and if it gets into the ears it will kill him.” Distressed with this idea of her child’s danger, she sought comfort and assistance from the milder treatment of Dr. Underwood, who assured her that there was no danger, and that the ap-

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pearance would subside when the teeth were cut;—in a short time the case terminated agreeably to the prognosis of Dr. Underwood.—Although parts of the scalp had been destroyed by ulceration, the hairs were never separated from the head, as in *tinea*.

At the commencement of Dr. Willan's account of pityriasis, he says, that he thought it necessary to distinguish pityriasis capitis from the porrigo of the Latins, though he afterwards seems to have altered his opinion, as he observes that true porrigo often supervenes.

He then denominates another variety, according to the Greek authors, viz. pityriasis versicolor, which I cannot distinguish, by his account, from pityriasis capitis\*.

\* “ It chiefly affects the breasts and arms of women, and differs from the natural skin in colour; the scales are small and slightly rough, which soon fall off, but are constantly succeeded by others. It is not in itself a disorder of any serious consequence.

“ I cannot speak favourably of my success in the medical treatment of this pityriasis; acids, alkalies, mercurials, anti-

I must here remark that I have always found the treatment recommended in the latter part of the foregoing note produce relief in both varieties. A tepid bath evidently brought on the first alleviation of their symptoms, and the only alteration made in the treatment of the pityriasis capitis was the application of soap and an alkaline lotion to the head.

I have no doubt that this lotion was beneficial in what Dr. Willan calls pityriasis capitis, having frequently found it necessary to make use of the same, as well as a wash of diluted nitric, or muriatic acid to the scalp, in this scaly affection.

It is this appearance on the head which excites so much uneasiness, and which, in my opinion, arises from a weak

monials, &c. under whatever form, seemed to produce no beneficial effect. Some advantage, however, was derived from using first a warm bath of sea water, and afterwards bathing in the open sea, and in some instances the complaint was by this means wholly cured."

Dr. Willan on pityriasis versicolor.

and imperfect action of the vessels which secrete the cuticle. It sometimes, after having existed for ten or twelve months, defies the use of internal medicine; its continuance is neither checked by the use of the nitric ointment, muriatic acid, or even the oiled silk cap; but has been known to yield in the course of a short time to a weak solution of the argenti nitras†, hel-  
lebore||, or galls.

This lotion should be applied by means of a camel's-hair pencil, and in such a manner that it may find its way to the bottom of the cuticular sheath of the hair; not with a view of acting upon the roots of the hair, but that the lotion may universally reach the vessels of the cutis,

† “ Incipiatur à razione capitis prius, deinde liniatur caput nitro, sinape, pipere, aceto forti, sale euphorbio, et lapide ægyptiaco, quoniam est vehementis juvamenti.”

AVICENNA.

|| “ Inungat autem caput gallis, et argenti flore, adipe que suillo.”

HIPPOCRATES.

and produce a change in their action. It is not necessary that this application should act as a caustic, and coagulate the surface, but only that it should excite a slight sensation in the skin. The head should be kept closely shaved, and the lotion applied every night and morning, taking care that it does not excite much inflammation\*. Vide Case VII.

I hope that I shall not be thought tedious in my examination of the opinions of others on this subject; being fully convinced, that a thorough investigation of the nice‡ or apparent shades of difference in cutaneous affections, is absolutely

\* "Capite raso, tunc lavetur caput cum aquâ calidâ, et alternis noctibus cum aquâ gallæ, et lapide ægyptiaco."

AVICENNA.

‡ "The best mode of obtaining and increasing professional knowledge is to pay that strict attention to cases, which enables us to note those nice shades of difference which distinguish diseases from each other, and also to form some regular arrangement of them; so that, ultimately, we may be able to discover their natural series and order."

Abernethy on the disorders of health.

necessary to afford a clear and comprehensive view of their nature.

I have endeavoured to separate *cause* from *effect*, which are too often confounded, and have spared no pains in acquiring as much collateral information upon this subject (in addition to my own experience) as was in my power to obtain; and, I trust, that the manner of treatment here recommended in *tinea*, as well as in other cutaneous affections, will be found simple, specific, and effectual.

From a desire of bringing under one view as much practical information as I could collect, it became necessary to have frequent reference to ancient as well as modern authors. Those who are still in practice I beg to assure, (however I may differ from them in opinion on the subject of my present work,) that I have not been actuated in any degree by a spirit of censure, or of detraction, but

have animadverted upon their works with the sole object of deducing principles which might ultimately be beneficial to society\*.

In investigating the definitions, and modes of cure adopted by writers upon cutaneous complaints, I am led to believe that the diseases of the skin are few, though its affections are numerous; and after a dispassionate enquiry into the psoriasis and pityriasis of Dr. Willan, I conclude, from his own statement, that after various medicines, internal as well as external, had been used, the benefit which each variety received, depended upon the plan of treatment I have for some years practised, at the commencement of all affec-

\* "Quocirca medicum et decet et oportet, non modo remedia novisse quæ adversus certos morbos prodesse soleant, sed horum quoque morborum naturam et causas, et remediorum vires, et administrationem, et modum quo contra morbos prosunt, intellexisse quo melius sciat idoneam singulis agrotantibus medendi rationem accommodare, &c."

Gregory's conspectus.

tions of the skin (viewing them as symptoms), whether they arose from morbid structure, or disordered action.

I have hitherto seen no reason to relinquish this practice ; on the contrary, daily experience, as well as communication with professional men, tend to strengthen me in the conviction, that in all these affections we are most effectually assisting nature in her own curative operations, by administering such external applications as tend to soothe and relax the vessels of the skin\*, and such internal means as allay irritation and give a more natural and perfect action to the system†.

\* “Aqua calida papulas rubicundas attenuat, ac mollit. Calor enim has solvit, cutem mollit, extenuat, dolorem eximit, capitis gravitatem solvit. His omnibus calida aqua amica est.”

HIPPOCRATES.

† “*Vis naturæ medicatrix* hac sola ad multos morbos sanandos sufficit, in omnibus fere juvat: quin et medicamenta sua natura optima, tantum solummodo valent quantum

The use of the oiled-silk cap\*, when the scalp is affected with eruptions from dentition, or other disordered action, is the most convenient and successful application.

It is equally beneficial in the scurfy affection of the head§, as well as in that which is accompanied with a serous discharge, and with pustules. It encourages exhalation†, and consequently relieves the vessels of the cutis, which are either

*hujus vires insitas excitent, dirigant, gubernent. Medicina enim neque prodest, neque repugnante natura quicquam proficit."*

Dr. Gregory's conspectus.

\* "His omnibus utile est, digerere id, quod vel præcordia onerat, vel fauces strangulat, vel in aliquo membro nocet."

Celsus de medicina.

§ "Deraso capite utrem circum frontem deligare oportet, aquâ plenum calidissimâ."

Hippocrates de morbis à capite orientibus.

† "Fereque adhibetur, ubi summam cutem relaxari, evocarique corruptum humorem, et habitum corporis mutari expedit."

Celsus de balneo tepido.



inflamed, or carrying on an imperfect action.

Case the VIIIth, which the reader will find at the end of this treatise, is a marked instance of the utility of the cap, and affords at the same time a favorable opportunity of remarking the difference between *tinea*, and this extensive sore, occasioned solely by an irritable state of the gums.

Ointment is seldom needful in these cases, where the oiled-silk cap has been used. If any be thought necessary it should consist of spermaceti, and a small proportion of fresh oil of almonds; and if the head were shaved it would admit of the liniment being more conveniently applied.

When soreness appears behind the ears\*, the oiled-silk cap should be applied in such a manner as to include them,

\* "A moisture behind the ears of children is a very common affection;—this, whether from neglect of keeping the part clean, or from the abundance and sharpness of the

whereby much relief will be procured in this troublesome and irritating affection.

But previous to the use of the cap or ointment, when the affection arises from teething, the gums should be freely lanced, which will frequently render other means unnecessary.

I cannot use language more expressive of my ideas upon this subject than by quoting the words of Mr. Fox, who, in his very useful and scientific treatise on the teeth, speaking of dentition, says, "Nature operates in a very salutary manner for the relief of children, by occasioning an increase in the secretion of saliva, which diminishes the action of the vessels. In some, the skin is more particularly affected, a little fever arises which is soon followed by some kind of eruption.—There are several appearances seen upon the

humour, will sometimes spread over the whole head and face."

Heberden's commentaries.

skin during childhood, and which are the consequence of irritation.”

During dentition he first mentions the rash called the red-gum, which appears upon the skin of infants soon after their birth, and may be considered beneficial; “for the blood being carried to the skin takes off every improper determination to important parts, and prevents more serious disease. Sometimes pustules form, and terminate in scabs.

“There are other eruptions which form very extensive and unpleasant scabs; they break out upon the corners of the mouth, and on the neck. Sometimes they begin upon the forehead, and spread over part of the scalp, thus forming large loose scabs which drop off, but are soon succeeded by others. These scabs, however, leave no scar, and are to be considered only troublesome and not dangerous\*.”

\* “Τα πλατῆα ἔξανθήματα ἔ πάνυ τικνησμώδεα.”

If the scabs should extend over the head, he recommends the use of the oiled-silk cap; this, he observes, prevents evaporation, and the scabs do not dry and become troublesome.

In recommending the oiled-silk cap, which I had used for many years previous to my perusal of Mr. Fox's work, I considered, that the advantages arising from it were not solely "its preventing evaporation," but that it acted as a perpetual vapour bath, encouraging exhalation from the vessels of the cutis\*.

From experience I can recommend it as a most safe and advantageous application, in every kind and stage of cutaneous affections.

Many children are subject to an inflammation behind the ears, this may

\* "Sudorem copiosissimum, in multis morbis, medici, à naturâ ipsâ edocti, arte eliciunt, cum insigni sæpe ægrotantium commodo."

Gregory's conspectus.

always be regarded as salutary, since from its contiguity to the teeth it tends to divert the inflammation.

Mr. Fox, after having accurately described other symptoms of irritation, observes, that opening the gums ought always to be had recourse to in the first instance.

As the effects of dentition are no further connected with my present subject, I refer the reader for more particular information to the work itself.

Eruptions sometimes appear on the heads and skin of weakly children, when shedding their temporary set of teeth§.

This complaint is frequently the source of great uneasiness in schools as well as families, it being considered ringworm of the head, and contagious. But, I

§ "Acria quædam in cutem delata, veluti in febribus quas eruptio super cutem comitatur, aut morbo regio, aut demum varii ipsius morbi, scabies, &c. eundem affectum edunt."

Gregory's conspectus.

have seldom been deceived in my prognosis, namely, that when the irritation of the gums ceased, the eruption would subside.

My plan of relief is the same as I recommended during the dentition of infants.

A scurfy state of the scalp occurring at the same time, or in succession, in schools and nurseries, has frequently given rise to the idea of its being a contagious disease. Indeed as practitioners have not yet agreed on any precise definition or mode of treatment of *tinea*, society cannot expect to receive that information and decision which the importance of the subject requires.

From repeated opportunities of seeing these cases in children, and from a patient attention to their progress and termination, I am fully convinced that they are not contagious, as they have invariably subsided without any course of medicine, and without communicating the affection.

Several cases illustrative of this appearance are given at the end of this treatise.

This scurfy state of the scalp, in my opinion, depends more frequently upon an acrimonious state of the blood, or upon some peculiar constitutional action, imparting the same to the vessels forming cuticle, than is generally imagined\*.

I have seen it take place in the children of the rich as well as the poor,—in public seminaries and schools of industry; and have uniformly known it relieved by a change of diet§, using calomel as a pur-

\* “ A victus genere, varietates non leves oriuntur. Sic qui victu ex carnibus pro maxima cibi parte utuntur, et epulis lautioribus, et liquoribus generosis indulgent, robustiores fere sunt aquæ potoribus, iisque qui frugibus solis vescuntur; sed sæpe minus sani, ad nimiam sanguinis abundantiam, et inflammationes, et putredinem procliviores.”

Gregory's conspectus.

§ “ Superest ergo ut mannâ, succo fructuum, et omnibus uti, quæ resolvunt cum lenitate; et oportet ut cibi isti sint boni chymi et parva quantitas eorum, non fiat ex ipsis repletio. Et si materiæ cholericæ fuerint grossæ, et fuerint imbibitæ in tunicis stomachi, ita utneque vomitu expellantur, necessarium erit evacuare cum scammonio.

gative, and with the judicious application of the oiled-silk cap, a mild ointment, or the mineral lotion.

A farinaceous and vegetable diet should be substituted for animal food§, in those instances where an acrimonious state of the blood is suspected; fermented liquors should, upon the same principle, be avoided, and milk and rennet-whey taken as the common beverage. All kinds

*Curatio autem est, ut evacuetur corpus, si humor in eo fuerit communicans; deinde administretur cibi minoratio, et ejus subtiliatio."*

Avicenna, lib. 3, tract. 2, chap. ii.

§ "Qui ergo medicus esse volet, id opus habet, ut primò signaturam tartari sciat, postea signaturam medicinæ quoque teneat. Et hic processus studiosè attendendus est. Hoc enim ordine, et methodo tartarus omnis in universo corpore invaditur, et expellitur. Medicinâ, et potione ad ejus expulsionem satis validâ, et robustâ.

"In hac siccitate capitis principium curæ ejus est—uti cibis humectativis, boni chymi, et propriè multi nutrimenti, sicut vitellus ovi, et sicut jus gallorum, vel pullorum pinguium, tunc liniatur caput oleis laudatis, sicut oleum amygdalinum, &c."

PARACELSUS.



of ripe and acidulated fruits may be freely used; to which may be added moderate exercise and air.

If a lax state of the system be considered the cause of this affection, tender animal food may be allowed, with a course of tonics, in addition to the other means for the recovery of health‡.

Microscopic inspection, as well as general observation, induce me to consider the scaly tetter of Dr. Willan, or the scurfy patch so frequently seen on the heads of children, to depend upon disordered action of the secreting vessels of the cuticle, which I conceive to be the true arteries of the skin; and I am inclined to think that this extremely-fine layer of vessels is the seat of the variolous pustule,

‡ “Naturales vero corporis actiones appellant, per quas spiritum trahimus, et emittimus, cibum potionemque et assumimus, et concoquimus itemque, per quas eadem hæc in omnes membrorum partes digerunt.”

Celsus, lib. i.

and of almost all other cutaneous affections, whether local or constitutional.

It is inflamed in rubeola, scarlatina, &c. it gives colour by means of the rete mucosum to the complexion, distinguishes the exterior of different nations, and appears to be one of the great inlets, as well as outlets, to the human frame.

That affections of the skin arise from acrimony in the blood, may be presumed from the scurfy state of the skin of sailors, who have lived upon salted provisions for any considerable period\*.

\* “ Porro autem etiam de cibus illis attendite, qui non ab elementis sumuntur, hoc est, de carnibus, quâ ratione nimirum illi tartarei sint, et hominem tartarosum facere possint. Ex illis (carnibus) quæ tartara nascuntur, omnium durissimè, et difficillimè curantur, doleresque gignunt acutissimos. Cum primis autem ipsorum sanguis admodum tartarosus est. Nam tartaream istam naturam, ac materiam cum potu, et cibo assumunt. Dolores, enim, quidam ab illis cientur, qui tolli, ac adimi nequeunt, nisi tartarus penitus omnis sublatus est. Quanquam non nulli etiam paroxysmi sint, qui leniri, et mitigari possint. Quod autem mixtum est, adimi non potest. Sed quod ad curationem tartarorum omnium morborum attinet, scitote eam prefici balneo, et

That the blood contains saline as well as alkaline matter, may fairly be concluded from the volatile alkali remaining after the combustion of human bone, and from the analysis of the teeth, and the various calculi that are found in the gall bladder, kidneys, &c†.

potione. Fas ergo est cibum ac potum certam contra tartarum medicinam habere: ut vero nutrimenta medicina fiant, danda ægro omnia sunt, quæ appetit, ac desiderat. Curæ autem processus consistet in regimine primum, postea in balneo."

PARACELSUS.

† "The blood has a peculiar taste, being saltish, and of a peculiar flavour; we can always distinguish by the taste when there is blood in the mouth. There are some properties discoverable in the blood which would incline us to believe that particular parts of the blood are employed to compose particular solid parts, which are found to possess properties similar to different parts of the blood.

"The blood can receive and retain extraneous matter, capable of destroying the solids, by stimulating to action so as to destroy them.

"Extraneous matter in the blood is capable of altering the chemical properties of the solids in those who work in lead, as is evident in the following case of fatal paralysis:—

"On examination after death, the muscles, particularly those of the arms, had lost their natural colour; but instead of being ligamentous and semi-transparent, as happens in

The experiments that were made on the blood by Mr. John Hunter and Dr. Hewson, prove that its component parts vary considerably, and that its relative proportions depend very much upon diet, as well as diseased action.

From Dr. Hewson's remarks, arising from a long series of accurate experiments, I do not think it can be considered as straining facts, to attempt to make the result of those experiments serviceable in an endeavour to account for the cutaneous affections accompanying inflammatory action, as well as for those states of the skin peculiar to men and animals, who have been confined to the use of stimulating and acrid food§.

common paralysis, they were opaque, resembling exactly, in appearance, parts steeped in a solution of Goulard's extract.

“From this case it appears the lead had been evidently carried along with the blood, even into the muscles themselves.”

Hunter on the blood.

§ “When blood is drawn from the arm of a person under illness, it separates into two parts, crassamentum and

The coagulated lymph is supposed, by physicians as well as surgeons, to have a great share in the cause of many diseases.

The scurvy in sailors strongly shews the effect of salted provisions upon the skin and constitution\*, and the scaly

serum;—from this circumstance the following conclusion is made:—that the less the quantity of serum is in proportion to the crassamentum, bleeding, diluting liquors, and a low diet are the more necessary,—whilst in some dropsies and other diseases, where the serum is in great, and the crassamentum is in small proportion, bleeding and diluting would be extremely improper. The opaque buff which forms the inflammatory crust, and is lying upon the crassamentum, is the coagulable lymph, which is firm in its texture. It is this lymph which is thrown out upon inflamed surfaces forming adhesion, and many other morbid appearances.”

Experiments on the blood, vide vol. lx. *Philos. Trans.*

\* “Præsertim si multum salis cum cibo assumptum fuerit, et parum aquæ, vel alius potus, in promptu fuerit, qui salem dilueret primo, et tandem e corpore elueret. Quod mali genus socii navales satis superque experiri solent, quum plures menses solo comœatu nautico vivendum est.—Huic autem corruptioni corporis si qua revera sit, quæ sponte supervenit, natura idoneum remedium suggerit; cibum nempè recentem, ex frugibus imprimis comparatum, accessentem, et aere mephitico plenum, quem corpori impertiat.”

Gregory's *conspêctus*,

and itching complaint on the hides of animals that have been highly fed and pampered, evince the irritating and acrimonious nature of their food||.

An alteration in the manner of living in the sailor, and change of food in animals, with regular exercise and air, will alone be sufficient, generally speaking, to dissipate these affections†.

|| "In animalibus, sive terrestria illa sint, sive aquatica tartarum nullum peregrinum gignitur, sed tantum tartarum cruoris."

PARACELSUS.

† "Et ex eis quæ ad hoc juvant; aqua calida, et deambulatio parva, et dimissio ciborum inflativorum, et vaporosorum tardæ digestionis, juvant valde ei, qui vult ut ejus soda recedat, et non revertatur ad eum.

"Cibi acetosi conveniunt illis patientibus hanc sodam, quæ est propter communitatem stomachi, quia cibus ille est de genere eorum, quæ præparant os stomachi, et confortant ipsum, et prohibent effusionem materierum ad ipsum."

Avicenna, lib. 3, tract. 2, chap. 10.

"In omni vero pustularum curatione primum est, multum ambulare atque exerceri; si quid ista prohibet, gestari; secundum est, cibum minuere; abstinere ab omnibus acribus, et extenuantibus. Præter hæc is, qui robustus est, si pustulæ minutæ sunt, desudare in balneo debet. Ulcera vero ex pustulis facta tollit spuma argenti, &c."

Celsus de medicinâ.

As these circumstances are within the notice of every one, namely that these scurfy appearances before-mentioned, depend upon the use of a peculiar diet and food‡, why may we not from analogy infer that a similar affection arising on the heads and skin of children, may depend upon the nature of the substances that they eat?

Pregnant women are very subject to what has been termed the prickly heat, or an universal itching over the skin, sometimes accompanied with an erysipelatous inflammation§. From the state

‡ “Cibi etiam potusque quibus utimur sæpe corrumpuntur, rebusque interdum inquinantur sanitati et vitæ infestissimis; iidem vero, quamvis sua natura optimi, nimia copia sumpti, serius vel ocys corpori nocebunt.

“Nonnullis tamen morbis opportunius facit: partim fortasse ob majorem densitatem aut acrimoniam humorum, magis vero propter insignem solidarum partium vim et robur, auctum que ideo humorum impetum; quo fit ut febres quædam, et inflammationes facilius, et vehementius incumbant.”

Gregory's conspectus.

§ “Hæc multas febres, et inflammationes fere omnes, et aliquando sanguinis profluvia, et febres quas eruptio super

of the blood during pregnancy I think we may venture to account for this affection of the skin; and presume, from its containing more coagulated lymph during this period, than in the usual state of health, that the capillary exhalents of the skin are in a state of temporary irritation\*.

That the serum exhaled from the vessels of the scalp during dentition is of an acrimonious nature†, I conclude from its

*cutem comitatur, interdum corporis plenitudinem, aut dolorem, multasque irrationes, comitatur. Neque semper morbosa habenda est talis crusta, quippe quæ sanissimis aliquando contingat; veluti feminis, donec uterum gerunt, à primis etiam mensibus, &c."*

Gregory's conspectus.

“Ερυσίπελας ἔξωθεν μὲν ἴσῳ τρέπεσθαι, οὐκ ἀγαθόν: ἔσωθεν μὲν ἔξω, ἀγαθόν.”

HIPPOCRATES.

\* “Acrimoniam quoque ipsius sanguis multi medici crediderunt pulsum frequentiore reddere.

“Pulsus nimis frequentes observantur partim fortasse ob debilitatem, partim ob humorum acrimoniam.”

Gregory's conspectus medicinæ theoreticæ.

† “Excrementum halituosum, et tenue, quod expirat. Tenue quidem sed majus solidum, aqueum, ut sunt ichores,



excoriating the skin over which it passes; this effect cannot be said to arise from contagion, but from the vessels of the cutis becoming increased in their action and incapable of forming permanent cuticle, which being thrown off, leaves the vascular membrane of the skin naked and tender.

I have frequently noticed the points of the fingers of nurses, who have had the care of children with eruptions behind their ears, studded with whitlows, which were produced, I conceive, by the irritating nature of the discharge.

These effects cannot surely be adduced as proofs of local contagion, when we reflect that the excoriation of the skin, as well as the pustules on the points of the

*humores serosi, qui acrimoniâ et acerbitate potius impedirent generationem cuticulæ; aut natam eroderent.—Absque cuticula maderet cutis, et exsudaret humor cum dolore, ut in intertrigine et phænigmis. Efficiens ergo causa remota vel interna est, calor internus, vaporem protrudens ad superficiem corporis.”*

Bartholinus de excremento cutis.

fingers, subside *sua sponte*, and without the aid of any application, which they would not do if they were local and contagious diseases, according to my definition and mode of cure of *tinea*, *scabies*, &c||.

It would be a very arduous undertaking to attempt to account for the existence of the uric calculi, &c. which are found in the human bladder, upon any other grounds than supposing that the predisposition, as well as the various qualities of which they are composed, had their prior existence in the blood\*.

|| " Multa noxia è corpore ejiciuntur, et, quæ nulla ars attingere potuisset mala, sine ope externa sua sponte evanescent."

Gregory's conspectus med. theor.

\* " Continet quoque sanguis, præter aquam, multum salem varii generis, qualis in urinâ reperitur. Quin et princeps qui sanguini inest sal peculiaris naturæ est, à communibus salibus, quos vel herbæ vel fossilia corpora habent, haud parum diversus. Pro parte sua alcalina, alcali volatile, pro acida, acidum phosphori, habet."

Gregory's conspectus.

In this idea I am supported by the means which the physician employs in his treatment of calculous affections†.

If he discover that the calculus contains phosphate of lime, which may be known by its colour and form, the mu-

† “Hoc modo varia genera tartarorum ab hominibus excreta reperiuntur: quæ si postea exsiccentur, et coagulentur, regionis illius naturam proditur, ex quo tartari illud genus natum est. Si resolutum tartarum per vesicam egreditur, et liquor ille in suam coagulationem deducitur; tunc evidente patit quodnam genus tartarum hoc lutosum, sed coagulatum peperit. Quod si vero sibi ipsi non constet, hoc est, ipsius rei probum, seu examen justum non intelligat; idoneum certè et convenientem ægro regimen præscribere, et quæ vitare debeat, constituere minimè poterit. Hoc solum enim ægro vitandum est, quod in illo examine prodit, ac in conspectu datum est. Id enim ceu nocens removendum est; ita diæta ex cibis, et potibus illis præstituenda, quæ eandem cum illo naturam non habent. Per eam (alchymiam) invenitur, quid in unoquoque corpore jaceat absconditum sit. Debet enim accuratâ per-vestigatione eosque penetrare medicus, ut tartarum non in genere tantum, sed in *quâlibet* insuper *specie* quoque cibi ac potus, in quibus latet, cognoscat, qualis is nimirum et cujusve naturæ sit, quamvis duritiam, quam formam, quam proprietatem et essentiam habeat; si ergo medicus conservationem ab istis tartareis morbis præscribere velit, stomachum primo eo redegit, ut omnia, quæ in ipsum ingrediuntur consumat.”

Paracelsus de morbis tartareis.

riatic acid is administered; if the calculus be shining and red, it is supposed to contain the lithic acid, and natron is exhibited.

These separate medicines are not given with the expectation of their acting as solvents, it being well known from physiological enquiries, that they are conveyed into the general circulation by means of the absorbent vessels; but they are prescribed with the intention of producing that alteration in the component parts of the blood which may unfit it for the formation of any particular calculi§.

§ “ Hisce itaque abundè satis indicatum est, qualè nam tartarum in homine sit, undè et quomodo in hominem ingreditur nempè cum cibo, et potu, et quod in ventriculo primo cum corruptione separari debeat. Scire autem debetis, quod in istiusmodi generationibus tartari et fæcis mistum est, id si à suo elemento non consumitur, tum fæx et tartarum remanent, hoc est, in suis elementis eundem finem adipisci possunt, quam aqua in elemento aquæ sorbetur; hoc si non fiat, tunc spiritus salis in materiam lapideam tartaream irrui, et eam in tartarum transformat.”

Paracelsus de morbis tartareis.

From these observations I think we may conclude that there are various appearances on the skin which arise from an acrimonious state of the blood‡, as well as from disordered action; and that their subsiding generally without any external or internal specific remedy, is an additional proof that they are not contagious.

Avicenna *de dispositionibus palpebrarum*, mentions an affection of the eyebrows similar to *tinea capitis contagiosa*; indeed, from his mode of cure, I should almost conclude it to be the same\*: but

‡ “What has been termed a scorbutic constitution is no more than a constitution very susceptible of an action producing eruptions on the skin whenever an immediate cause shall take place, and there are some parts of the body more susceptible of this than others, in which, therefore, a slighter immediate cause is sufficient to excite the action.”

HUNTER.

\* “Silac quidem est grossities in palpebris, proveniens à materiâ grossa male dispositionis, nitrosâ, propter quam rubeæ fuint palpebræ, et cadunt pili palpebrarum, et adducit ulcerationem partium, in quibus fixi sunt pili. Ex medicamentis autem, quæ ponenda sunt in eâ, est ut sumatur æris usti, et piperis certam quantitatem, et administrentur in ex-

I have never observed this disease myself, nor have I ever met with any practitioner who has seen it.

I must refer the reader to this author's chapters *de casu pilorum, de pilis inversis et additis, &c.* in which he will find a particular account of his mode of cure in *alopecia* and *tinea*, which consists of the following various preparations, all illustrative of the treatment proposed in this treatise, viz. atramentum, piper, cauterium, gummæ pini, sal ammoniacus, cinis, &c. rubigo ferri æruginosi est ultima, quamvis dolorem faciat. Et ex eis quidè̄m, quæ sunt in *tinea* experta, est sal ammoniacus.

Turner, who has written very fully upon the falling off of the hair, scald-head, &c. mentions three kinds of *tinea*, viz. *sicca, humida, et lupinosa*; but he states his mode of cure in such confused

terioribus palpebræ, vel collyrium atramenti, &c. et fricentur ex eis palpebræ."

Avicenna, lib. 3, tract. 3, chap. 3.

terms that no practical benefit can possibly result from a perusal of his work. He observes, it is at best difficult of cure, and recommends bleeding and repeated purging, blisters and issues; likewise such medicines as he uses in the itch and children's scab.

In another part he observes, that "if the hair (whose roots are generally corrupted and give much trouble in the cure) lies in the way, they are to be drawn out by pitch-plasters, or burnt out by depilatories, viz. the calx viva, &c." For a further account of the modes of treatment adopted by this author see his work,—*"de morbis cutaneis."*

If the term *tinea capitis contagiosa* be generally accepted as fully defining the local and contagious disease of the scalp, described above, and which has been commonly called the ringworm of the head, and the epithet spurious be rejected, as it only tends to mislead us in

practice, (it having been intended to designate an affection of the skin, which I have endeavoured to shew does not resemble *tinea* in any of its essential marks) I flatter myself that considerable advantage will necessarily result from its particular application.

Having pointed out the difference between *tinea capitis contagiosa* and the other scurfy and eruptive affections of the scalp and skin so frequently occurring in children; I shall lay before the public those preparations which (as far as my own practice goes) have not failed in producing a speedy and permanent cure.

The following formula is that which I have been in the habit of using:—

R Hydrarg. nitrico-oxydi (bene leveg.) ʒij.

Ung. hydrarg. nitrico-oxydi. ʒss.

Cerat. cetacei, ʒij. M. intime et f. liniment.

Oblinatur pars affecta, omni nocte per tres, vel quartas vices.

The hydrargyri oxymurias and the common flour of mustard, in the form of



a paste, I have found equally efficacious; being well rubbed for three or four nights upon the parts affected\*. And I am induced to think that arsenic, and the antimonium tartarisatum §, — as also hellebore, bryony, sabin, and other stimulating vegetables, will answer the same purpose.

I have generally remarked, that after the third or fourth application of the ointment, the disease has been arrested; and that sufficient inflammation round the patch or ring has been excited†.

\* “ Quod si ulcuscula cava fiant, quod in alopecia, et malo mortuo frequenter accidit post usum balnei vaporei non in utiliter incarnandis illis emplastrum de gummis imponemus, vel necessarius est itaque *mercurii usus*, ipso namque adhibito adeo clarificatur, ac nobilitatur caput.”

Paracelsus de alopeciis, morbis mortuis, &c.

§ “ Arsenici præparationibus cujusve generis corrodentia ulcera, fistulæ, cava ulcera, &c. curantur namque veluti, ubi ipsud venenum adhuc est, dolores gravissimos infert, sic ubi veneni vim amisit, nullo penitus dolore affligere solet.”

PARACELsus.

† After a very confused account of alopecia, in Motherby, it is said that “ if the part does not grow red

I then withdraw the stimulus, and on the following morning direct the parts to be thoroughly washed with warm soap and water, and to remain without any further application.

A few days have usually been sufficient to satisfy me upon the success of my treatment, at which time, the simple inflammation induced by the stimulus retires, and if the disease does not extend beyond its original spot (which circumstance may be ascertained by other hairs falling off) I have always found that it has been completely eradicated.

Fresh hairs are soon seen above the cuticle\*, firmly attached to their roots, though at first soft and downy, and of a lighter colour than the original.

with friction a cure is vainly attempted; but in proportion as a redness appears readily on rubbing the part, the cure may be expected to be easily and soon effected."

\* "The best prognostic is when hairs begin to push out on the edges of the areas."

MOTHERBY.

The remarks of Dr. Motherby, in the last note strongly support my principle, and proves that *alopecia* is *tinea capitis contagiosa*, the disease so much dreaded from its infectious nature, and which never retires without remedies||; is ultimately attended with ulceration of the scalp, and constitutes the scald head in the sense I have heard it described by many practitioners of the present day.

Having repeatedly cured *tinea* in the manner and the time mentioned†, not confining myself to the use of mercurial preparations, but employing hellebore, mustard, &c. I have been induced to draw this conclusion, that mercury was not a specific in this disease, as vegetable substances had proved equally efficacious; but that its removal depended upon

|| "Nunquam sine curatione finitur."

CELSUS.

† Vide Cases I. II. and III.

encouraging simple inflammation in lieu of the morbid action\*, which was going on in the secreting membrane of the hair.

When *tinea* has been allowed to run to excess, and become scald-head, some modification in the treatment will be found necessary with respect to the ulcerated parts of the scalp.

The unguentum hydrarg. nitrico-oxyd. reduced by a third part of the ceratum cetacei, has been found the best application in this stage of *tinea*.

The same curative principle must be kept in view in this aggravated state, otherwise the patient will rapidly become a dreadful sufferer.

I am willing to hope that scald-head as thus described is a very rare disease;

\* "Some observe upon the friction or rubbing of the part with coarse cloths, if redness does not succeed, the case is irremediable; and that the sooner the redness does appear, the more hopeful and speedy the cure."

Turner on the falling off of the hair.

and if the plan of treatment I have proposed should be found permanently useful, I trust that in time we shall scarcely hear of its existence.

From the perusal of those modern publications which have touched upon this subject, as well as from the conversation of medical practitioners, I am fully aware that the opinion here given of this complaint will not meet with general concurrence; but till stronger facts are offered to me than those which are already before the public, I am surely justified in asserting the identity of *tinea* and *scald-head*.

After the review I have taken of this disease, and the various cutaneous affections which have for so many years been confounded with *tinea*; and after the numerous references I have been under the necessity of making to ancient as well as modern authors (with the view of elucidating my own opinions), I feel myself warranted in concluding, that these affec-

tions of the skin can only be considered as *symptoms*; and that no practical benefit can possibly arise from retaining the various names which have been attached to each, but that, in all probability, important and permanent good may result to society, if such an arrangement of cutaneous appearances were generally adopted as would enable practitioners to distinguish clearly between the *diseases* and the *affections* of the skin.

To this end I have ventured to propose a plan of classification according to their characteristic marks and mode of treatment, which will be found at the end of this treatise.

In concluding this subject I cannot express myself in more appropriate language than that which a late eminent author used in alluding to the indivisibility of the human frame.

“From the subjects on which we have treated many important deductions might

be drawn relative to medical practice; but this would lead us beyond the bounds we have prescribed. It may, however, be remarked, that the indivisibility of the body seems to deserve the most particular attention in the cure of diseases, as well as in the treatment of affections\*.

“ It is alone by attending to this fact that we can properly distinguish between *general* and *local disease*. It may be suspected that in many cases local remedies are employed and depended upon when the complaint is truly general, and can only be removed by producing a healthy state or organization of the whole system.”

We have daily instances of the necessity of this discriminating faculty.

\* “ Siquidem frustrà medicus morbo remedium adferre conabitur, nisi et affectum ipsum, et locum patientem cognoscat, itaque hæc magnorum in curationibus errorum radix est: hic, hic primus fons, hæc prima practicæ medicinæ origo est, proinde in hoc cognoscendo sedulo laborandum, quodcunque tandem remedium adhibere velimus, ne remedium quam affectu latius serpat.”

PARACELSUS.

A copious expectoration from the mucous membrane of the trachea, accompanied with a constant and violent cough, pain in the right side, with jaundiced skin and fever, are symptoms, generally speaking, of hepatic affection. These I have frequently seen yield to the use of the blue pill; the cough gradually subsiding as the mouth became affected, which circumstance convinced me that the lungs had no share in producing it.

That recovery from disease may be more frequently expected from a due regard to diet and general regimen than from medicine, is an acknowledged truth; but though this maxim is too much disregarded in the practice of physic, yet I anticipate a period not far distant when

§ "Naturæ enim officina amplissima est, cujus remedia quoque præstantia sunt, et auxiliaria, valdeque salutaria, nec ullâ pecuniâ venalia. Nec enim mercede datâ ægros illa sanare solet sed porrectis medicinis. Et hanc officinam deinceps doctoribus commendo."

PARACELSUS.



I may congratulate the profession in having laid aside that mystery in which it has for so many years been involved.

At present it cannot be denied that many practitioners are in the too constant habit of using medicine as a medium of remuneration. Such conduct, which is equally disgusting to the patient and disgraceful to the profession, must necessarily preclude that respect and confidence which the medical art, when liberally and skilfully practised, is entitled to receive. We now excite fear instead of respect, and are thereby the indirect cause of individuals allowing that, which was at its commencement a simple deviation from health, to become a confused and anomalous disorder, difficult of cure in proportion to its duration.

Simplicity in practice is the necessary consequence of correctness and decision in medical judgment; and individuals in

the present state of society are too well informed not to rightly appreciate such conduct in the practitioner, and are too liberal to withhold an adequate compensation, without requiring of him to administer medicine *solely* as a current merchandize.

Considering every degree of disease as a proportionate deviation from health, and that the chief art in medical practice is to remove that which obstructs, irritates, or oppresses, as well as to direct the natural powers of the animal œconomy to the recovery of their healthy actions, we shall exercise our skill with a state of mind better calculated to accomplish the objects of our professional duty, than if we were to enter the chamber of the sick with the impression that some decided plan must be immediately adopted for the removal of the disorder by the influence of medicine alone.

The celebrated Sydenham has a passage in his recapitulation, precisely applicable on this occasion, and well worthy the attention of the community at large, as well as of the profession\*. Indeed the practice of our most eminent men, together with the general advancement of knowledge, is gradually paving the way to this improvement.

\* "By means of experience and observation we may by degrees find out a way to secure the life of the patient, provided we do not hurry on too fast, which indeed I esteem to be most particularly pernicious, and to have destroyed more persons in fevers than any other thing whatsoever. Nor do I think it below me to acknowledge, with respect to the cure of fevers, that when no manifest indication pointed out to me what was to be done, I have consulted the safety of my patient, and my own reputation, most effectually, by doing nothing at all; for whilst I carefully attended to the disease, in order to cure it in the best and safest manner, the fever either went off gradually of itself, or came to such a state as shewed what medicines were to be used to remove it. But it is much to be lamented that abundance of sick persons are so ignorant, as not to know that it is sometimes as much the part of a skilful physician to do nothing at all, as, at others, to exhibit the most effectual remedies; whence they not only deprive themselves of the advantages of a fair and honourable procedure, but impute it either to negligence or ignorance."

From a due application of the healthful agents, the most important changes may be produced in the animal body.

To the operation of these agents alone can we look for the cure of all diseases of debility, which include a considerable part of the list of maladies to which human nature is subject.

In no case of general disease, (and there are few others,) can a cure be expected from medicine alone, without a due attention to diet and general regimen; but there are many cases in which the latter may remove disease without assistance from medicine.

These observations are strongly illustrated in many of the disordered actions of the system; but they are in none more forcibly verified than in the various cutaneous affections dependant upon internal causes\*.

\*“ *Leviore morbi, naturæ viribus satis tuto relinquuntur; sed nemo sanus, hydropem, vel luem veneream vel visceris cujusvis inflammationem, iisdem commiserit.* ”

Regimen, generally speaking, unassisted by medicine, will be found fully competent to dissipate, and even to enable the animal functions entirely to remove most of the scurfy and eruptive complaints of the scalp and skin, whether arising from a disproportion in the component parts of the blood, or from an interruption in any of the internal secreting organs.

Hence arise the propriety and practical utility of what is termed *vis medicatrix naturæ*, expressive of that innate power in the system which we observe at one time resisting contagion, and at another overcoming the destructive influence of disease. Under every deviation from healthy action, this power is always apparent; it may be

“His, vulnera sanantur, sanguinis fluxus compescitur, ossa diffracta coalescunt multa noxia è corpore ejiciuntur.

“Merito igitur his viribus medici confiderint, easque conantur languentes excitare, aut si plane defecerint, tum solitas earum actiones arte imitari.”

Gregory's conspectus.

said to be ever vigilant in the execution of its own particular offices, and in most cases surmounting every difficulty, at length becomes adequate to accomplish its own recovery.

The natural functions of the animal œconomy are as frequently liable to become disordered from the quantity as well as quality of food.

Medical men in all ages have remarked, in a cursory way, these common occurrences, but it is only of late years their attention has been directed to the investigation of the particular organs that become thus interrupted, and the manner in which they react upon distant parts of the system.

These effects have attracted the attention of men not immediately within the pale of the profession, and have induced them to adopt sentiments and regulations for the preservation of health,

which are not unworthy of our notice in this place.

*Horace* has expressed his remarks upon the ill consequences which the mental as well as bodily faculties experience from indulgence in those luxuries which disorder the digestive powers, in the following highly correct and poetical language:—

“ Accipe nunc, victus tenuis quæ, quantaque secum  
Afferat. In primis valeas bene; nam, variæ res  
Ut noceant homini, credas, memor illius escæ  
Quæ simplex olim tibi sederit.——

“ Dulcia se in bilem vertent, stomachoque tumultum  
Lenta feret pituita. Vides ut pallidus omnis  
Cænâ desurgat dubiâ? Quin corpus onustum  
Hesternis vitiis animum quoque prægravat unâ,  
Atque affigit humo divinæ particulam auræ.”

The chain of disorders arising from obstructed secretion of the stomach, liver, and intestines, is too intricate and extensive to admit of their being particularly mentioned in this place, though I am fully persuaded that a dispassionate and

a circumspect enquiry into their nature would afford us an interesting and instructive view of most of the distressing affections of the human frame.

The digestive organs, as well as the liver, are liable to become frequently interrupted in their functions, being too often unnaturally forced into action by the improper indulgence of the appetite; whilst other parts of the body are at rest, the saliva and gastric juice are employed in assimilating the food, the bile at the same time being occasionally poured into the duodenum for the purpose of exciting the peristaltic motion of the intestines, which pressing forward their contents, ultimately carries off the excrementitious matter, which, if allowed to remain stationary, becomes a cause of obstruction and irritation\*.

\* I cannot entirely coincide in the opinion of those physiologists, who believe that the bile is a chief agent in digestion, having long considered this hepatic secretion merely



Hence arises a variety of disordered symptoms, *delirium, paralysis, hysteria, amenorrhœa, convulsions, affections of the heart,* and perhaps *tetanus* and *mania*.

Upon this subject much light has been thrown by the persevering enquiries of Mr. Abernethy, Dr. Curry, &c. to whom the profession is indebted for many valuable and practical observations in the treatment of complaints arising from a disordered state of digestion.

Though I am willing to acknowledge that these gentlemen are entitled to our

as a specific stimulus to the muscular fibre of the intestines. — This conjecture first arose from observing that emaciation was not the necessary consequence of obstruction to this fluid into the intestines. Experiments prove that the food undergoes a complete change in the stomach, and that it enters the duodenum in the form of chyle, which (according to the natural laws of the intestinal œconomy) after having afforded nutriment in its course to the lacteal vessels, is expelled uniformly blended with the bile (with which it became incorporated in the duodenum) in the form of *fæces*. When bile is not secreted, or when its passage into the duodenum is obstructed, constipation necessarily follows, and can only be removed by the exhibition of drastic purges which excite the peristaltic motion of the intestines, in imitation of the natural effects of bile.

respect for the zeal and ingenuity displayed in the numerous cases adduced, and in the physiological reasonings upon their nature, yet, in justice to each, I cannot avoid remarking,—

“ *Palmar, qui meruit, ferat,*”

that opinions similar to those lately published upon hepatic obstructions, and their various consequences, will be found in the works of Hippocrates and Galen, but more particularly in the academical lectures of Dr. Boerhaave.

The latter author, in speaking of the functions of the liver, &c. observes, “ there are, in short, two viscera, on which almost all chronical diseases depend, namely the lungs, whence consumption and its various consequences arise; and the liver, upon which the innumerable train of slow or chronical disorders depends.”

These observations of Boerhaave were not the momentary conceptions of his imagination, as the same principles will be found in other passages of his works to be the deductions of close reasoning upon practical facts. Thus he says, alluding to the digestive organs, “any one of these viscera being obstructed, the rest partake of the disorder, whence it is that a disease in these parts has by the ancients been called *hypocondriacal*, in relation to all the viscera seated immediately below the false ribs, without any distinction of the liver, spleen, &c. Among a thousand cases of acute diseases there is hardly one perfect cure to be alledged either of a dropsy, jaundice, or splenetic disorder; and even among various chronic diseases, there is hardly one whose principal seat or cause is not in the liver; for the medicines which are destined to *open obstructions of the liver* are obliged to take a very long and circuitous course

through the lateral vessels to the heart, thence through the small arteries of the intestines and other viscera, &c."

The gall bladder is denominated by this observing author the biliary reservoir, and he considers that the peculiar office of the liver is to secrete the bile, which fluid he terms a specific and natural stimulus to the intestines. He adds, that "incorrigible obstructions are often formed in this viscus, notwithstanding all the precautions of nature, who, by means of her powers, frequently produces a crisis on the surface of the body, affording relief by exciting a slight fever and eruption."

In contagious and constitutional diseases, the increased action of the arterial system, which has been universally termed fever, is always mitigated, if not completely reduced, by the appearance of its characteristic eruption.

Viewing the skin as the universal involving membrane of the animal frame,

forming, by its continuity, variously modified, the secreting surface of every internal cavity\*; considering likewise the intimate connection of its functions with many of the most important viscera, it requires no great stretch of physiological reasoning to demonstrate the manner by which various internal disorders are produced by an interrupted state of the natural secretions of the skin‡.

\* “ The cuticle invests the whole external skin, but yet it does not terminate where the ancient anatomists have fixed the termination of the skin, as in the lips, eyebrows, &c. for the skin is still continued with little or no variation of its texture, and lines all the cavities of the mouth, ears, œsophagus, stomach, intestines, &c. whence this integument appears to be much more extensive than is commonly supposed.”

Dr. BOERHAAVE.

‡ “ A tali defectu multa profluunt mala. Concoctio quoque ciborum vitiatur, et appetitus minuitur, propter insignem inter cutem et ventriculum consensum. Subito autem suppressus sudor magis adhuc et citius nocet; non modo propter retentam materiam quam oporteret exhalare, sed propter humores ad superficiem corporis libere fluentes, inde pulsos, et in alias partes directos valida contractione vel spasmo vasis minutis cutis inductis. Hinc febres, inflam-

There are some constitutions naturally more liable to cutaneous affections than others; on what peculiarity this depends I do not feel competent to decide.

Some authors have conjectured that it has arisen from a strumous disposition. If I were to hazard an hypothesis upon this subject, it would be to suppose, (presuming *a priori* that a continuation of the skin constituted the mucous membrane of the trachea, œsophagus, &c.) that this susceptibility depended upon a peculiar state of the vascular membrane of the cutis, rendering it easily acted upon by stimuli, and readily communicating its affection either by *sympathy* or *metastasis* to the external surface of the body\*.

mationes, congestiones sanguinis abnormes, sanguinis profluvia, aliæque excretiones, urinæ et alvi imprimis auctæ vel vitiatæ."

Gregory's conspectus.

\* "Mirum inter varias secretiones observatur æquilibrium, ita ut pari fere ratione ac aliæ augmentur, aliæ minuantur, quo cautum est, ne corpus adeo facilè et subito ut

It may be stated with some degree of confidence, that those cutaneous appearances which do not arise from locally contagious diseases, or disordered action of the vessels of the skin, should never be treated *in limine* with topical applications.—Supposing them to originate in an acrimony or disproportion of the component parts of the blood, arising either from morbid virus, or from diseased structure, the practical benefit which results from considering them as symptoms, is too apparent to require any particular explanation.

I cannot conclude this imperfect essay better than in the words of Dr. Gregory:—

“Corrigenda igitur est corporis conditio quæ morbo obnoxium facit; evitandæ causæ remotæ quæ morbum excitant;

aliter fieret exhaustiatur. Hoc imprimis notabile est inter halitum cutis, et sudorem et urinam, et excretionem alvi, quamvis in aliis secretionibus idem sæpe observetur.”

Gregory's conspectus.

tollenda proxima morbi causa; et mitiganda singula ejusdem indicia quæ maximè molesta sunt. Sic morbi precaentur, sanantur, levantur.

“ Medici officium est, cognita natura et causa morbi, judicare quid mutationis requiratur, ut morbus in sanitatem mutetur. Hæc quidem est *medicina rationalis*. Est et altera, *empirica* nimirum, quæ missis hujusmodi ambagibus, sola remedia quærit, et profert, certa et definita vi prædita ad certos morbos delendos.”



## OBSERVATIONS.

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HAVING closed the account of *tinea* and its cure, as well as of the other affections of the scalp, which have been so frequently mistaken for that disease, I purpose offering to the consideration of the profession, an arrangement of cutaneous appearances, which, from my own experience, I flatter myself will be found practically beneficial.

In the formation of this system I have endeavoured to class the disorders of the skin according to their specific nature, and to the mode of treatment particularly adapted to each.

I am of opinion that every cutaneous disease and affection, however numerous

their varieties and modifications, may be included under this classification.

In saying this I do not mean to arrogate to myself the merit of forming such a complete and perfect morbid arrangement as would preclude the necessity of future improvement, as far as it concerns diseases in general, though it may ultimately tend very considerably to elucidate each variety and cause of disordered action; but it is simply my intention, in adopting this arrangement to separate the real diseases, as well as the local affections and injuries of the skin, from those cutaneous appearances which accompany constitutional and contagious fever, morbid structure, or disordered action of internal parts, and which seldom require any topical or specific remedy.

For this purpose, my plan of classification will, I trust, be found sufficiently comprehensive.

Preparatory to this attempt it may be advantageous to notice certain natural and morbid sympathies, that are taking place on various parts of the body; with the view of impressing more forcibly upon our consideration those sympathetic affections which are so frequently occurring upon the skin.

The profession has long stood in need of some regular and practical system of treatment for cutaneous disorders; and though I am fully convinced of the imperfection of many parts of that which I have now drawn up, yet I sincerely hope that the practical remarks which will be found cursorily scattered in these pages, may tend in some degree to supply the deficiency which appears in this branch of our profession, and assist in establishing a permanently systematic arrangement of them at some future period.

It has often occurred to me, when reflecting upon the connection of cause and

effect, as applicable to the diseases and affections of the human frame, that if it were possible to draw a line determining the extent of each, the practice of surgery and physic would be materially simplified:

*“ Est modus in rebus, sunt certi denique fines,  
Quos ultra citraque nequit consistere rectum.”*

The late improvements in operative surgery are to be attributed in a great measure to the influence of this principle; and although the diseases which exclusively form the province of the physician are not so easily ascertained as those which constitute the surgical department, yet I am fully convinced that by a judicious discrimination of symptoms, and a faithful relation of cases, the practice of physic may ultimately be rendered more certain and more useful.

It is chiefly by an attentive consideration of those appearances and affections which are viewed as deviations from health,

that we can ever expect to arrive at the true cause of disordered action.

A correct knowledge, therefore, of symptoms (the greater proportion of which takes place on the skin) may with propriety be considered as a necessary and essential step towards the discovery as well as the appropriate treatment of disease\*.

Impressed with this idea, and the conviction that a thorough acquaintance with the disorders of the skin would conduce more effectually to the improvement of professional science than an equal knowledge of any other distinct part of the human frame (if it were possible to view any one as insulated), an attempt at forming

\* "*Symptomata* vel morbi indicia sunt singulæ quæ in ægro præter naturam observantur res; illorum vero præcipua, evidentissima, constantissima, morbum faciunt, definiunt; alia alia producentia, prima ab ipsa morbi causa provenientia. Varia profecto et prope innumera in ægris observantur morborum signa, quorum notitia, tum ad cognoscendos, tum quoque ad sanandos vel levandos morbos medicinam facientibus imprimis utilis erit."

Dr. Gregory's conspectus.

a cutaneous arrangement upon the principles before mentioned, may possibly contribute to point out their origin and cure in an easy and comprehensive way\*.

We are taught by observation to associate certain sensations and appearances with particular internal diseases.

These may be considered as direct or indirect, arising from that sympathetic action which is so apparent in every part of the body, and which constitutes its indivisibility§.

To this principle in the animal œconomy we are indebted for our discernment of many of the most distressing and fatal maladies incident to our nature.

\* “ Ad hujusmodi autem qualitatum manifestarum corporis vitia eo magis attendere decet, quia facile observentur, et minime fallacia sint, neque æger ea medico celare possit, neque, ut rem intelligat medicus, multis (quæ sæpe admodum ingratæ sunt) opus sit interrogantibus.”

Gregory's conspectus.

§ “ Hic consensus vel *sympathia nervosa*, vocari solet; cujus scientia medico necessaria est.”

Gregory's conspectus.

The following practical facts strongly evince the utility of a knowledge of the origin of morbid sympathies.

The first which I shall notice accompanies a chronical disease of the liver, and is known to attack the shoulder\*, affecting in some cases the right and in others the left, significant, as some have believed, of an affection of the corresponding lobe of the viscus†.

\* "When the liver is diseased the patient will be subject to occasional pain in the right hypocondrium extending to the shoulder, &c."

Dr. Saunders on the liver, p. 190.

"The chronic form of the diseased liver may be discovered by a sense of weight and numb pain in the right side, and a weight and weariness in the right arm. There is also frequently pain on the top of the shoulder."

Dr. Pemberton's treatise on abdominal viscera.

† "Dextrâ parte sub præcordiis vehemens dolor est, idemque adlatus dextrum humerumque partis ejusdem pervenit; nonnunquam manus quoque dextra torquetur."

Celsus de medicinâ, lib. 3. ch. viii.

"If that part of the organ be diseased which is more immediately contiguous to the diaphragm, it gives rise to difficult and painful respiration, dry and frequent cough, acute shooting pains in the thorax, extending to the humerus, clavicle, and scapula, chiefly of the side affected."

Dr. Saunders on the liver, p. 26.

In addition to this morbid sympathy of the shoulder, it has been repeatedly remarked that an erysipelatous eruption takes place on various parts of the skin of those persons whose hepatic system has been disordered; more particularly upon the nose, cheeks, and forehead\*.

In the case of hydro-cephalus internus, (which I had lately the honour of communicating to the medico-chirurgical society,) and which was combined with an extensive and scrophulous abscess of the liver, an erysipelatous inflammation terminating in vesicles, appeared upon the left shoulder and breast of the child a short time previous to its death. A difficulty and shortness of breathing was observed to come on, or rather precede the eruptions,

\* "On the nose also, and on the forehead, pimples are observed frequently to break out. These appearances, therefore, when they occur repeatedly, should warn us to make minute enquiry respecting the state of the liver."

Dr. Pemberton's treatise.



which symptoms suddenly subsided in the space of a fortnight.

Dr. Pemberton, in his very scientific and practical treatise on the diseases of some of the abdominal viscera, remarks, that persons with diseased livers are sometimes remarkably florid; and he seems to think that affections of the skin might possibly be considered as *pathognomonic* in chronic disorders of this viscus, from the manner in which he concludes his observations upon this subject,—“Will the colour of the skin afford us any assistance in conjecturing about the nature of chronically-diseased liver?”

The preternaturally strong pulsation of the *aorta descendens*, which has been observed to accompany obstructions in the liver, I have never seen described by any author who has written either upon hepatic or abdominal diseases.

Dr. Ainslie first communicated this peculiarity to me, in consultation upon

a case of paralysis of the right side, induced by a disordered action of the liver, in which an instructive and interesting view of hepatic affections is portrayed\*.

\* The gentleman who was the subject of this strongly marked case of hepatic obstruction was extremely temperate in his habits of life, and was remarkable for his uniformly good state of health, till the last two years, during which period his countenance had become sallow, and occasionally jaundiced, and his bowels, which were formerly regular, had been subject to constipation. He had passed his fortieth year, and had no peculiarity of constitution, excepting that of the arterial system, the pulsation of which did not exceed forty.

A few weeks previous to this paralytic attack, he had been suddenly seized with difficult respiration, and pain over the right side, extending to the same shoulder, and to the heart, which palpitated faintly; these symptoms were accompanied with a death-like coldness of the extremities, and with the sensation of immediate syncope. In this situation I found him, with an irregular fluttering pulse, not exceeding thirty-six, and gave him two grains of crude opium and a glass of strong brandy and water, which, together with heat universally applied to his body, produced, in the course of an hour, considerable relief.

About three hours from this period Dr. Ainslie, who had been sent for, saw him, and it was agreed to give a dose of calomel immediately, and that his bowels should be kept open with mild purgatives. It will be sufficient to observe, that the first evacuations, which were occasioned by the medicine, consisted of clay coloured fæces, and had the appearance of having been retained some days in the bowels;

Since this communication I have paid particular attention to the sympathetic affection of this vessel, which I have uniformly found in a greater or less degree

after which, still persevering in the same system, we had daily and evident proofs of the secretion of bile, which continued for some time to pass off in an inspissated, though not in an acrimonious state, as the patient never complained of pain or heat in voiding it. When this alteration took place in the evacuations, the pulse was observed to recover its natural standard, and the rest of the morbid symptoms to subside. His appetite was good, and he was gradually returning to his usual habits of life, but, in consequence, we suspected, of taking cold, he became instantaneously speechless, attended with a paralytic affection, entirely including the right side, which rapidly advancing, in the course of a few hours, totally deprived him of the use of his right arm and leg. His pulse was not much affected in the number of its strokes, though it was irregular every tenth beat; his countenance was highly jaundiced, his urine high coloured, tongue much furred, breath fetid, and the fæces nearly in the same state as on the former attack. On examining the right hypocondrium, a considerable fulness was distinguished, and his countenance expressed uneasiness when a forcible pressure was made along the course of the right lobe of the liver. His intellect did not appear to partake of the paralysis, as we were able to distinguish by his signs, that he comprehended every question that was put to him; neither did he give us any intimation of his suffering head-ache, deficiency of sight, or sickness.

In this alarming and highly aggravated relapse, it was determined, on Dr. Ainslie's arrival, (having succeeded to a

accompanying biliary obstruction, and am induced to consider its discovery as an important auxiliary in the chain of symptoms, arising from a suspended secretion of bile. It likewise affords us a more correct and practical view of those peculiarities in the pulse which attend retarded

certain extent on the first attack by the exhibition of purgatives, and as there was no reason to believe that the paralysis was owing to the rupture of a vessel in the brain,) that calomel should be given, and followed by keeping the bowels open by occasional doses of neutral salts.

This plan was pursued for some days with very little relief, though some slight change in his speech was noticed, which was the first favourable symptom. His tongue became clearer round the edges on the improvement of his evacuations, which afforded a demonstrative evidence of the cause of his attack. In a short time, continuing the daily use of small doses of calomel, and neutral salts, with the occasional application of blisters to the head, and mild tonics, we had the satisfaction of witnessing his articulation become nearly distinct, his tongue clear, appetite good, and the use of his right leg confirmed.

I should not have inserted this case previous to a complete recovery, had I not conceived that even in its imperfect state, it clearly demonstrated that this paralytic affection was induced by an obstruction in the hepatic system, and not by a particular state or rupture of the vessels of the brain, which may generally be considered the cause of paralysis.

venal circulation in other parts of the body.

The pulsating sensation beneath the *scrobiculum cordis*, which is frequently noticed by patients who are subject to constipation of the bowels, is unquestionably owing to the irregular action of the descending aorta. This may easily be discovered by an examination of the abdomen when the patient lies in a horizontal position; I have most readily ascertained it by pressing the hand firmly on the left side of the *umbilicus*, after the bowels have been emptied, though it may be felt faintly in an erect position in many cases of obstruction of the liver.

Although I have observed this peculiarity so evident in thin children, (particularly in those who have long suffered under enlargements of the mesenteric glands,) as to be easily detected by ocular inspection, producing a motion of the abdominal muscles, similar to that excited

in the left pectoral muscle by the preternatural action of the heart, yet I have never, at the commencement of this attack, remarked, that the pulse at the wrist has either been strengthened or accelerated beyond its natural standard, or in any degree influenced by the affection of the descending aorta.

The preternatural action of this vessel is probably occasioned by the obstruction that the venal blood meets with in its course through the liver, bowels, &c. but is not communicated in the same *ratio* through the rest of the arterial system in the incipient state of these disorders, nor can it be considered as inflammatory. This symptom I am induced to view as sympathetic, though a more correct idea might possibly be included in the term *vis à tergo*, which would be definite and explanatory of this increased action of the arterial system.

It does not, *ab initio* depend upon an accumulated quantity of blood or force in the heart, (though this organ frequently becomes influenced in its action as a secondary consequence,) but it is induced by a congestion of blood in the *aorta descendens*, which vessel is incapable of emptying itself, (owing to venal obstruction,) in an equal *ratio* to the quantity of blood it receives at each pulsation of the heart.

If we closely investigate this peculiarity of the *aorta descendens*, and accurately mark its effects on the rest of the arterial system, having first influenced the action of the heart, the enquiry may afford such a practical lesson as may enable us, in a very regular and scientific manner, to retrace to each particular source, the great variety which takes place in the pulse of those persons who suffer from visceral obstruction.

Many cases of scirrhus uteri, obstructed hepatic secretion, and mesenteric enlargements, afford instructive remarks upon the accelerated and full pulse which accompanies these disorders.

For although it has been frequently found necessary to bleed in these diseases, with the view of preventing peritoneal inflammation supervening, yet experience shews that no dependance can be placed solely upon this remedy, and that the periodical pains in cases of scirrhus uteri, or enlarged ovaria, even when the pulse exceeds a hundred, have been most successfully treated by emptying the bowels, and exhibiting occasional doses of opium.

It must not be inferred from these practical observations that the author means to establish as an axiom in the treatment of chronical diseases, that a disorder of any particular viscus may be ascertained by paying attention solely to the state of the



pulse; but it is meant to shew, that by a nice and judicious investigation into the various changes of the action of the arterial system, and by a due consideration of their peculiar morbid associations, in combination with other constitutional and local sympathies, much assistance may be afforded to our enquiries into the real seat and nature of internal disease.

The more we reflect upon the promising result of an examination into the changes that take place in the pulse, the stronger is the persuasion that the practice of physic will ultimately acquire as much benefit from a perfect knowledge of this part of the animal œconomy, as it will receive from the aid of chemical enquiries, which have already thrown so much light upon the treatment of those disorders which arise from morbid secretions.

Although the peculiar action of the arterial system, depending upon an in-

flammatory state of the blood, has been described by many authors in a tolerably accurate manner, yet I have no where met with such an account given of the accelerated and full pulse which accompanies visceral obstruction, as would assist the practitioner in discovering the particular cause of such a deviation from health.

The peculiar action of the *aorta descendens*, which has induced this digression, was considered as too important a symptom to be omitted in the cursory survey which has been taken of morbid sympathies; indeed its consequences appear of such value in general practice, and so applicable to the explanation of various disordered states of the human frame, that I have viewed it as opening an extensive and fruitful field for physiological and rational enquiries even into the changes that the component parts of the blood may undergo in different disorders.

In all probability the strong pulsation of the carotid and temporal arteries in apoplexy, of the hæmorrhoidal vessels in piles, of those of the lower extremities in a varicose state of their veins, as well as of the arteries immediately connected with the varicose *nævi materni*, may be ascribed to retarded venal circulation.

I have presumed that this *vis a tergo* of the arterial system arises from the cause here assigned, having remarked that this increased pulsation readily subsided on the jugular vein being opened in an apoplectic paroxysm. The same effect is equally evident from a rupture of the hæmorrhoidal veins, as well as of the varicose veins of the lower extremities, and of those which constitute the *nævi materni*.

That the arterial and venal system should be subject to sympathetic affections, as well as other parts of the body, is a circumstance easily accounted for by

anatomical enquiries, which demonstrate that the substance of the heart, as well as the coats of the arteries and veins are perfectly organized, that they are supported by their own *vasa vasorum*, and liable to the same natural and morbid changes as the liver, uterus, &c.

The brain is likewise subject to become disordered by a morbid state of the liver and stomach. This affection, I conjecture, may arise from nervous influence as well as local fulness of the vessels. The sympathy existing between the stomach and brain is strongly illustrated in apoplexy, hydrocephalus, concussion, &c.

Diseases of the uterus, kidneys, and intestines, as well as obstruction in the functions of the skin, excite this sympathetic action in the stomach, and vomiting is the usual associate.

When this sympathy arises from a scirrhus state of the uterus, or from an enlarged ovarium, the act of retching has

*retching* —

been supposed to alleviate the disease, not, I presume, by merely emptying the stomach, but by inducing temporary metastasis.

Nauseating doses of ipecacuanha have been found useful in morbid enlargements of the uterus; probably the benefit arising from this medicine depends upon its exciting absorption in the part affected.

In the exhibition of nauseating medicines in scirrhus affections of any of the viscera, we are imitating the efforts of nature, and assisting the indications of the *vis medicatrix naturæ*, which after all the inventions of art, will be found the most certain guide:

“Hic murus æneus esto.”

Experience convinces us that exceptions will occur to all general rules, and although uterine and hepatic disorders have been relieved by encouraging in a certain degree the sympathetic action of

the stomach, yet if we were to imitate or attempt to excite the affection which takes place in apoplexy, hydro-cephalus, and concussion of the brain, I presume we should be aggravating rather than alleviating these disorders, as the result of emetics have too clearly proved that such practice is highly dangerous and inadmissible\*.

When affections of the brain are accompanied with a jaundiced skin, and a costive habit, it has generally been remarked that the secretion of bile has been either defective or obstructed†.

\* "Generalis consensus observatur in cerebrum et totum genus nervorum, ideoque in cerebrum et universum corpus: quod profecto nil mirum, quippe cujus vis omnis à cerebro derivetur."

Dr. Gregory.

† A very interesting and strongly marked case of this nature, in which the patient was occasionally maniacal, lately came under my care, and was likewise seen by Dr. Baillie. After a fortnight's course of purgatives the mental affection entirely ceased.

The heart is likewise liable to be interrupted in its action by a disordered state of other organs, as well as various parts of the system becoming affected in consequence of morbid changes of structure taking place in its own substance or vessels.

When we consider the several important organs that receive branches from the eighth pair of nerves, or *par vagum*, and investigate its intimate and direct connection with the great sympathetic nerve, which, like the common chord in music, seems intended to harmonize every part of the body, we shall be enabled more easily to account for the heart's facility in sympathizing with other viscera.

The hurried and interrupted action of this organ, occasioned by fear or surprise, and which has been termed palpitation, can be attributed only to nervous influence. The heart, in this instance, sympathizes

with the mental affection, for palpitation can only be considered an involuntary action.

Gottlieb Walter, in his description of the par vagum, and great sympathetic nerve, observes that the former has a most appropriate name, and that it is nearly as extensive in its connection as the latter.

The knowledge of the distribution of the par vagum will explain to us many sympathies; for example, the hysterical affection of the throat, when the stomach is distended with flatus, the exciting of vomiting by tickling the throat, &c.

In addition to the affections of the heart, which arise from mental agitation, this organ is frequently observed to sympathize with the liver, stomach, and bowels\*.

\* A striking proof of a disordered liver bringing on irregular action of the heart, accompanied the paralytic affection which occurred in a case that was lately under the care of Dr. Ainslie and myself.



A sympathetic pain in the left arm, accompanied with fainting and uneasiness across the chest, have by many been considered as a decisive mark of an organic disease of the heart. Eruptions have likewise been observed to take place on the backs of persons labouring under this complaint§.

A calculus, in its passage through the ureter, occasions a pain in the testicle on the same side, with tenderness on the scrotum.

A stone in the bladder may be discovered by a pain and itching at the end of the penis.

An irritation of the membrane lining the nostrils and anus, accompanies a disease of the mucous membrane of the intestines.

§ Vide Dr. Parry's enquiry on syncope anginosa, and Dr. Heberden's paper on the same subject in the medical transactions.

An instance of ossification of the coronary artery of the heart being accompanied with eruptions on the back, occurred in the case of my late partner, Mr. Corson.

In diseases of the mesenteric glands, eruptions appear at the corners of the mouth, attended with constant irritation of the nose\*.

No part of the human frame is more frequently influenced by sympathy than the thyroid gland.

This peculiar susceptibility does not seem to depend upon the number or size of the nerves which are distributed through its substance, as anatomy has demonstrated that they are few, and small with respect to its vascularity; it is therefore more likely to arise from the direct connection which this gland has with the *par vagum*, the great sympathetic, and other cervical nerves.

\* "In this disease the lips are somewhat inclined to swell, and they are often of a deep red colour. The angles of the mouth are beset with small ulcers and sometimes the whole lip is divided by painful fissures. The skin of the whole body, but more particularly of the extremities, feels dry to the touch, and the cuticle is thrown off in scales."

Dr. Pemberton's treatise.

In this way we may account for the natural as well as morbid sympathies which exist between the thyroid gland and other organs and parts which are supplied with branches from these nerves.

I have no where found a satisfactory account of the peculiar functions and sympathies of this gland, though I am induced to believe that a knowledge of them would tend very materially to assist us in the discovery of many of the phenomena which are daily taking place both in the healthy and diseased state of the body<sup>‡</sup>.

Dr. Ainslie has communicated to me a case, in which the thyroid gland is invariably affected with a sense of fulness, and pain, when the stomach and bowels are disordered; and which subsides after a dose of rhubarb and calomel.

<sup>‡</sup> I have repeatedly seen the sudden enlargement of this gland, accompanied with a sense of stricture in the œsophagus, arise from an affection of the stomach.

That this gland is of importance to health was proved by the experiments which were made by Mr. Astley Cooper upon a dog.

This gentleman is of opinion, that when death takes place in consequence of the removal of the thyroid gland, that it is occasioned by weakness, and not by convulsions.

From anatomical research this gland appears to have a greater and more immediate connection with the nervous system than any other gland in the body, though its own particular nerves are comparatively small.

It is abundantly supplied with blood vessels, that ramify uniformly through its substance, which is cellular, and contains numerous absorbents.

Dr. Reeve, of Norwich, has lately written a very ingenious and useful paper upon the enlargement of this gland

For further information upon this subject, see Dr. Baillie's morbid anatomy, and the second fasciculus of engravings.

The affection that affords the strongest example of sympathy is that which frequently occurs in consequence of the secretion of milk being suddenly checked, and has been termed *mania lactea*.— Whether the application of cold, or stimulating food be the cause of this complaint is immaterial, as it is not supposed to depend upon an inflammatory state of the brain, and on that account cannot be attributed to metastasis. It is worthy of notice, that peritoneal inflammation has never been known to exist with *mania lactea*; and that patients generally recover from this sympathetic affection\*.

Strumous affections of the hip joint are always marked by a swelling and in-

\* Vide Dr. Denman's observations on *mania lactea*.

flammation of the integuments of the foot, as well as by a pain in the knee†.

Strictures of the urethra have been discovered by means of cutaneous eruptions§.

Mania has likewise been known to take place in consequence of repelled eruptions||.

There are various other sympathetic affections which invariably accompany particular diseases, but concluding that from these already noticed, the importance of their knowledge and use will be evident, and that from a due consideration of them, many practical axioms may be deduced, demonstrative of the nature of most of the cutaneous affections, I trust that the reference which has been made to these sympathies will not be deemed uninformative, as they may

† Vide Mr. Ford's treatise on the diseases of the hip joint.

§ Vide Mr. Home's treatise on strictures, &c.

|| Dr. Cox's practical observations on insanity.

serve to convince us of the necessity and importance of a close attention to those that are more particularly taking place on the skin.

A clear information upon this subject, points out in the most forcible manner the importance of a discriminating investigation into the nature and character of symptoms, that we may avoid treating them as distinct disorders, and be more induced to trace, by their assistance, the remote and morbid cause which occasions them.

In truth these affections ought not to be considered in any other view than as true morbid sympathies, and should be estimated by the practitioner as constituting his most certain guide in forming his *ratio medendi*, as well as wise provisions of nature intended to conduct us to the knowledge of the real seat of disease\*.

\* "Consensus quidam naturales quidam morborum sunt: scilicet, alii in sano corpore observantur, ad vitæ et sanitatis munera conducentes, vel plane necessaria; alii non nisi morbo jam existente se ostendunt, ejusque signum et pars est."

Dr. Gregory's conspectus.

I considered it necessary to take this short review of some of the most familiar and instructive affections of the human frame, preparatory to the introduction of the arrangement of cutaneous appearances; as it clearly illustrates, on comparison, the difference which I shall attempt to establish between the diseases and affections of the skin.

In shewing the necessity of acquiring a correct knowledge of this branch of our profession, it is hoped that too much digression has not been made from my present subject in dwelling upon the preceding practical facts; indeed the limits which are prescribed to the enquiries in these pages will not admit of a minute investigation into the nature and causes of those particular diseases which interrupt and derange the functions of the skin, though they will be cursorily noticed when I consider their treatment as necessary to the relief of cutaneous affections.

T



In the following arrangement I have included under the first class those appearances which arise from local and contagious diseases of the skin, viz. tinea capitis contagiosa, and scabies.

2nd. Those that are primarily local, and not contagious, and which are supposed to arise from a peculiar and disordered action of the vessels of the skin, viz. the various species of sarcomatous and encysted tumours, fungi hæmatodes, nævi materni, warts, corns, the cutaneous ulcer, and that which has been considered cancerous, or more properly phagedenic.

3d. Those that accompany and are characteristic of some constitutional and contagious disease, viz. variola, rubeola, vaccina, scarlatina, varicella, and syphilis.

4th. Those that depend upon morbid structure, disordered action of some internal organ or surface, upon an acrimonious state of the blood, or upon an increased or diminished strength in the *vis*

*vitæ*, which have been generally known under the terms lepra, elephantiasis, alphas, psoriasis, scorbutus, erysipelas, urticaria, miliaria, gutta rosea, crusta lactea, porrigo, herpes, petechiæ, carbunculus, &c. &c. to which may be added the state of the skin in gout, acute rheumatism, and jaundice.

5th. Those that are induced by external and simple stimuli, such as incised, lacerated, and contused wounds, burns, scalds, chilblains, and the bites and stings of various insects and animalculæ.

6th. Those that are excited by external and specific stimuli, viz. the bite of the mad-dog and rattle-snake.

In the above arrangement I may possibly have omitted many names that have, at various times, been attached to particular cutaneous eruptions or appearances; but believing that I have specified the chief of those that are in present use, and conceiving that no benefit will be derived

either to society, or to the profession in general, from using a multiplicity of terms, I trust that such an omission will not be construed into a fastidious rejection of any particular epithets, as it arises solely from the desire of curtailing and simplifying the cutaneous nomenclature.

Having stated my plan of classification, it will be expected that some enquiry be instituted into the treatment of those appearances which are arranged under the different heads; and although it is with considerable hesitation that such an investigation is attempted, yet I feel it necessary to offer some practical remarks upon the nature and treatment of the cutaneous diseases and affections which it includes, in explanation of the motives that induced me to enter upon an undertaking which militates so materially against those cutaneous arrangements that have hitherto appeared before the public.

In the course of these observations I purpose referring to ancient as well as modern authorities, with the intention of affording a comparative view of the relative merits and practice of each on cutaneous complaints. In the quotations from the former it will be found that most of the active and efficacious remedies that constitute the present state of practice both in surgery and physic, are deduced from their writings. Arsenic and mercury were first introduced by the ancients, and although modern practitioners, from the advantage of anatomical and physiological researches, may in some cases be better calculated to make a more appropriate and specific use of these minerals, yet we find Pliny, Hippocrates, Avicenna, and Celsus employing them in carcinoma, phagedenic ulcers, fungi, syphilis, &c.—These remedies were considered useful in most disorders, but particularly in what they called bilious. Mercury was the

great nostrum of Paracelsus, and though there are many who doubt the accounts which are handed down of the cures performed by this physician, yet its present general application and benefit, indirectly corroborate these statements.

It may here be observed, that although the practice of surgery has of late years experienced great and important improvement in the operative department, yet the medical treatment of those cutaneous and glandular affections, which have been considered strumous or cancerous, and are particularly the province of the surgeon, may be retraced to ancient authorities, which, on many occasions deserve to be estimated in proportion to our knowledge of their works. In these the practitioner will behold the useful deductions of experience, possibly not less valuable from their being found free from speculation, which too frequently allures the attention into the

paths of theory, to the neglect of the more instructive and useful lessons of practice. The writings of Hippocrates and Morgagni may truly be styled the great works of reference, both for the surgeon as well as the physician; and had the modern professional writers taken up the various subjects which they so ably handled, from the point at which they left them, much tautology and useless speculation might have been avoided.

The ancients, from their imperfect knowledge of anatomy and physiology, were, from necessity, obliged to depend solely upon their experience, and the deductions drawn from the comparative effects of various medicines in particular disorders. This circumstance has rendered their writings so instructive and valuable. In the works of many of the Greeks, as well as in those of the Latins, we find a simple and lucid statement of symptoms, and discover, in many in-

stances, as nice and discriminating enquiries into the nature of diseased action, as can be found in works of much later date.

I mean not to assert that occasional wild hypotheses do not exist in their opinions of disease, but to state, that, considering the times they lived in, fewer erroneous theories will be met with in their writings than might have been expected from their confined knowledge of anatomy and chemistry.

These eminent practitioners faithfully related the symptoms they observed, and carefully recorded the remedies they employed, relying upon their own experience, which was the more likely to be permanent and useful, as it was less confounded with speculative theories.

The faculty of discernment in former times was, from necessity, more cultivated than in the present, as professional men

had then, comparatively speaking, fewer sources of scientific and collateral information. In this respect their situation was analogous to that of a blind person, who, from his abstracted state, is obliged to place his sole reliance upon his memory, which becomes retentive in proportion to the opportunities that are afforded for its exercise.

It appears from the rich stores of scientific and practical knowledge which the ancients have handed down to us, that their industry and application were not abated by the progress which they made in the various branches of professional learning; but that their eagerness for enquiry kept pace with their actual knowledge and acquirements.

They properly appreciated the superiority of practical facts to ingenious theories; and prudently and wisely desisted from attempting to cure dis-



eases by any other means than those which practice and observation had substantiated as admissible, and consistent with the safety of the patient.

In taking leave of these authorities I cannot avoid remarking, although I am willing to allow them to have possessed their share of genius and talents, that the information which is found in their works may chiefly be attributed to the close and unremitting attention which they paid to their profession, and which, when properly and laudably employed, generally renders the acquirement useful and instructive. The well known passage of the Roman poet may with propriety be quoted on this occasion:—

“ Qui studet optatam cursu contingere metam,  
 Multa tulit, fecitque puer, sudavit et alsit.”

I come now to the consideration of the medical and surgical treatment of cuta-

neous appearances, and shall first cursorily notice that disease which occasions at its commencement a separation of the cuticle and of the hairs of the scalp, accompanied with a serous discharge, which forms incrustations over the diseased part. To this morbid appearance I have ventured to attach the term *tinea capitis contagiosa*, the cure of which having been fully described in the former part of this treatise renders unnecessary any further remarks upon its nature or treatment.

*Scabies* next claims our attention, and as the troublesome itching which characterizes the eruptions of this disease are so generally known, it will be superfluous to enter into a detailed account of its symptoms. Sulphur, hellebore, and mercurial preparations are equally efficacious in eradicating this disorder, and may be

considered as specific remedies in every stage of it\*.

I have omitted the disease called *plica polonica*, though from the general definition given of this formidable disorder it might, with some degree of propriety, be placed under the first class; but consi-

\* “ It may be asked, does this complaint depend upon a particular animalcula or fluid?—Analogy certainly does not afford much evidence in support of the first proposition, though it in many instances elucidates the latter; and altho’ the discovery of this point is not essential to the cure of scabies, yet a correct knowledge is as desirable upon this subject as it is upon many others under the possibility of its leading to the detection of facts which may be useful in practice. I have repeatedly, by means of microscopic examination, viewed the fluid of an itch pustule, as well as the pustule itself, but have hitherto been disappointed in my enquiries after its containing an animalcula; some natural historians have even described and classed them, together with their ova, which induces me to suspect that their existence is probable.”

Baker on the microscope.

“ Scabies vero est durior cutis, rubicunda, est qua pustulæ oriuntur, quædam humidiores, quædam sicciore:—Exit ex quibusdam sanies, fitque ex his continuata exulceratio pruriens, serpitque in quibusdam cito. Medicamentum autem ad incipientem hanc idoneum est, &c. Sulphur, ærugo, spodium, piper album, cinis, &c.”

A. Corn. Celsi medicina, lib. v.

dering the accounts which have already appeared as too indefinite and confused, I have merely alluded to it, and shall refer the reader to the history of Trichoma, in the *Encyclopædia Britannica*, and to J. L. Alibert's description des maladies de la peau.

Under the second class I shall take first into consideration the cutaneous

“ Sulphur abstergit impetigines, apostematas, et pustulas, et proprie etiam cum aceto et intro mistus propter prurimum lavatur corpus.”

Avicenna, lib. 2.

“ Argentum est bonum valde scabiei et pruritus.”

Lib. 2. tract 2.

“ Elleborus niger vel albus cum lacte super scabiem et impetiginem cum aceto, et ad excoriationem linitus valet.”

Lib. 2. tract 3.

“ Psora morbus propriè cutaneus, glandulis cutaneis insitus, antidota sulphur, mercurius et oleum tartari.”

Willis de psora, &c. sect. 3.

“ Notandum præterea etiam est, sulphur impetigines, serpigines, et vitia corporis externa pellet et radicatùs tollet, et si thesaurus præstans est, exterius tollere ea, quæ interius suum ortum habent, &c. Alumen et vitriolum pro scabie utantur, &c.”

PARACELSUS.

tumours, of which there is a great variety. Each kind of *sarcomatous*, and *encysted tumour*, which is formed originally within the common integument, may with correctness and practical utility be included under this head; presuming that the same surgical treatment is equally applicable to both.

These generally take place without pain, or inflammatory heat, though their formation depends upon a generation and enlargement of vessels\*. The definition of tumour which has lately been offered by Mr. Abernethy, is, in my opinion, clear and comprehensive, and it will be suffi-

\* "Extravasation of coagulating lymph is not peculiar to inflammation; it is separated in many diseases. It is thrown out to form tumours, &c. where inflammation does not seem to be a leading cause; and we often find the adhesive stages, as it were, degenerate into, or terminate in the formation of a cyst.

In producing adhesions, or forming tumours, it is always of the nature of the diseased solids that produce it. If the case is venereal, the new substance is of the same nature, if cancerous it is cancerous."

Hunter on the blood.

cient in this place to observe, when speaking of sarcomatous and encysted tumours, that it is meant to express those preternatural enlargements which are formed in the integument, and which are supported by their own particular vessels; and although at their commencement they are not deemed of such importance as to constitute cases of surgical assistance, yet extirpation in this state can generally be exercised with most safety and success.— In some instances these tumours remain stationary, though it more frequently happens that their increase is gradual and proportionate to their size. It has been supposed by many that these tumours, whatever variety there may be in their structure, originate from a deposit of coagulable lymph, which becomes a nucleus, or nidus, for the ramification of new vessels, which render it ultimately as completely organized as any other part of the body. When it is thrown out be-

tween surfaces it is supposed to constitute the medium of adhesions. I presume that these, as well as the sarcomatous and encysted tumours take their rise from this accidental deposit of lymph, and not from a mere continuation of the vessels to which they are attached; for to this preternatural and local action may be attributed, the growth of the various fungous excrescences and polypi; however, as it is not intended that a minute and physiological investigation should be instituted into the relative structure of the preceding tumours, I shall content myself with remarking, that the early and complete removal of them by the scalpel is advisable. This practice has been recommended and adopted by the most experienced surgeons, especially when the disease has evinced a disposition to increase; in performing which, as much surrounding skin should be included in the incision as the bulk of the tumour and the state of the integuments

require, for experience shews that if any portion of the cyst be excluded the operation will be found unsuccessful; in which case either a regeneration of the tumour takes place, or a fungous or phagedenic ulcer appears, which in general proves more difficult of cure than the original disorder. In the annals of operative surgery many cases of failure are recorded, both in the attempt at extirpating cancerous affections, as well as fungi hæmatodes, and which, I presume, may fairly be attributed to the operation being deferred to too late a period, or to a partial removal of the diseased substance.

The ancients seemed to be fully aware of the necessity of a strict observance being paid to this principle in the treatment of encysted tumours. In the writings of Celsus and Morgagni such direct and clear rules are laid down for removing them, that the former may be considered



as the founder of the present practice in this branch of surgery\*.

From the observations which have been made upon sarcomatous and encysted tumours, the removal of them by the knife may always be considered as proper and safe practice at their commencement, as well as at an advanced state, excepting when from pressure adhesions may have taken place between them and any large artery.

A particular and scientific history of the formation, growth, and nature of various tumours, will be found in the

\* "Interdum enim fit, sed raro, ut quidquid abscedit, velamento suo includatur. Id antiqui tunicam nominabant. Meges, quia tunica omnis nervosa est, dixit, non nasci sub eo vitio nervum, quo caro consumeretur, sed subjecto jam vetustiore pure callum circumdari. Quod ad curationis rationem nullo loco pertinet; quia quidquid, si tunica est, idem, si callus est, fieri debet. Neque ulla res prohibet, etiamsi callus est, tamen, quia cingit, tunicam nominari.—Necessaria vero opera scalpelli est.—Sed excidi ita debet, ut plaga ad similitudinem myrtei folii fiat, quo facilius sanescat: idque perpetuum est, ubicunque medicus et quacunque de causa cutem excidat."

works of Morgagni and Valsalva, and in the surgical observations of Mr. Abernethy.

*Fungus hæmatodes* next claims our attention, and although this disease is less frequent in its appearance, yet from its malignant and virulent nature it demands the most serious investigation.

Celsus, speaking of obscure and dangerous diseases, has a passage applicable to our present subject, — “ Sæpe vero etiam nova incidere genera morborum, in quibus nihil adhuc usus ostenderit; ut ideo necessarium sit animadvertere, unde ea cœperint; sine quo nemo mortalium reperire possit, cur hoc, quam illo, potius utatur. Et ob hæc quidem in obscuro positas causas persequuntur.”

It must not be concluded from this quotation that it is here intended to enquire into the morbid structure of *fungi hæmatodes*, as that task has already been undertaken in a late publica-

tion without much practical benefit§; and although the common cutaneous fungus has been generally and successfully removed by excision and escharotics, yet it appears, from the statement of several authors, that these means have universally failed when applied to the spongy excrescence termed hæmatodes†.

From what cause these failures have arisen the present enquiry is not instituted to detect; but leaving that question to be decided by others who are better calculated for such an undertaking, I shall content myself by first stating a few cases of fungi hæmatodes, which were radically cured by the application of the ligature, and arsenic, without the constitution of the patient suffering in any degree from their removal; and then offer a few observations upon the probable origin and nature of these excrescences,

§ Mr. Wardrop on fungus hæmatodes, or soft cancer.

† Mr. Hey's practical observations.

which possibly may lead to a more judicious treatment of them than has hitherto been suggested.

I shall now endeavour to point out the state in which the application of the above means may be attempted with the greatest prospect of success.

It should be remembered that the very nature of the arrangement under which this appearance is intended to be included, necessarily restricts my observations to such instances as have occurred upon the common integument; yet if, under these confined limits, a definite mark can be attached to *fungus hæmatodes*, and a radical cure applied in its incipient stage, it may, without presumption, be established as a practical axiom, that, under similar circumstances, the same treatment may with propriety be adopted for the same excrescence arising in any other part of the body, in which, from locality, its particular application is not precluded.

CASE I.—In the year 1805, Mr. Ambrose Burgess, of Brentford, applied to me, in consequence of a troublesome wart, as he termed it, that had appeared after the bursting of a tumour on the arch of his nose.

He could give no other history of this disorder, than that he had struck his nose with violence against a shelf, and that this swelling soon afterwards took place.

The fungus had shewn itself two days before I saw it, and was of a livid unhealthy appearance, very irritable, and bleeding on the slightest touch. It was rapidly increasing, and resembled so strikingly the fungus hæmatodes described by Mr. Hey, that I feared the consequence if it were allowed to proceed unnoticed, though at the same time I was averse to attempt the removal of it by excision.

In this situation I resolved upon the use of the ligature, trusting, that less irritation would be excited by this means, if it did not prove successful.

The fungus having a narrow peduncle, I was enabled to apply the ligature with ease, which I drew moderately tight, taking care that it should not cut the vessels, but merely impede their circulation. Very little additional pain was produced by this treatment, and the fungus, with the ligature surrounding it, fell off on the fourth day; a slight hæmorrhage ensued, which was easily suppressed by a saturated tincture of galls.

A few mornings afterwards my patient complained of a severe pain in the sore, which had not that healthy complexion that fresh granulations should have put on; and being fearful that the surface still retained the disposition to renew the fungus, I applied the *argenti nitras* freely to the wound.

On the separation of the slough, produced by the caustic, the same livid surface appeared, and was evidently disposed to increase, which was realized in the course of a few days. Dry scabs were formed upon the sore, which were easily elevated, and disclosed a malignant and phagedenic ulcer.

In this state of the complaint Mr. Astley Cooper saw him, and sprinkled the wound with arsenic, which occasioned after a short time an extensive slough; on the removal of which a second application was made, which radically cured the diseased action, and the ulcer speedily healed.

The patient lived a considerable time after this, and had no return of the complaint.

CASE II.—A gentleman who had just arrived from the West-Indies, in 1807, where he had suffered considerably from the climate, as well as from irregular

living, applied to me in consequence of a small tumour upon his leg, which he suspected might be syphilitic.

It was situated immediately over the shin bone, but did not appear to have any connection with it, and was moveable with the integument, in which it was seated.

As there was no reason from the history of the case to believe that it was a constitutional affection, I viewed it merely as a local complaint, and though from its soft and elastic nature it resembled an encysted tumour, I was not convinced that it contained a fluid.

On further enquiry I found that while walking the deck my patient had received a blow directly upon the spot, which the swelling occupied, and although he had not much pain at the time of the accident, he recollected to have felt uneasiness in the part a few days before the appearance of the tumour.



The swelling was covered by an adhesive plaster, and he was requested to call in the course of a week, at which time I saw him, and although it had evidently enlarged, he complained of no pain unless pressure was made.

About a month from my first seeing him the tumour had become double its size, the skin was inflamed, and several varicose veins were distinguished round it.

In this state half a dozen leeches were applied, and the part was kept cool with a solution of the acetate of ammonia.

By these means the inflammation was in a great degree suppressed, though no visible alteration took place in the tumour.

Feeling much relieved by rest and the sedative applications, he ventured to wear a boot, and thereby re-produced all the painful symptoms, with a rapid enlargement of the tumour, which was now more prominent, and had all the ap-

pearance of making its way through the skin, which had already cracked.

Though this swelling did not pulsate, I was averse to puncture it, and determined to wait till it assumed a more characteristic mark.

Within three days my patient requested me to see him, as he believed the tumour had burst, from the discoloration of his leg.

On examination there were strong marks of extravasated blood around the part, yet no fluid had escaped, either internally or externally, from the tumour, as it had become much larger, and was extremely painful.

I ordered a poultice to be applied, and the limb to be kept in an horizontal posture.

The veins that had appeared varicose could not now be discovered, which induced me to attribute the extravasation to a rupture of their coats.

The application of the poultice was continued for two days, after which time the ulcerated skin had given way, and on removing the dressing I was surprised to find a livid fungus, nearly the size of a raspberry, occupying the part where the tumour had been seated. A considerable quantity of blood had escaped into the poultice. This excrescence did not bleed, but was surrounded with streaks of coagulated blood, which were easily wiped away. The patient felt acute pain on my touching the fungus, which was of a spongy and loose texture, resembling a wart in the inequality of its surface, though in appearance more vascular.

As the skin had subsided round the fungus, it was evident that this substance had been formed internally, and concluding that the whole of it was in view, I intimated to my patient the necessity of endeavouring to remove it immediately.

For this purpose I proposed in the first place the ligature, assigning the reason for my preference of its use to caustic, which he was anxious should be applied.

Having over-ruled my patient's objections to the ligature, I raised up the base of the fungus, in order to ascertain its extent, in doing this venal blood flowed out very copiously, which led me to imagine that I had torn the fungus, but on a more minute investigation I could not discover that the hæmorrhage arose from its own vessels; and thought it not improbable that this fungus might originate from the cuticular coat of the vein, from which the blood had escaped previous to the ulceration of the skin, and that the hæmorrhage was still proceeding from the same vessel.

Finding that the flow of blood was likely to impede the proper application of the ligature, I inserted, under the base of the fungus, a dossil of lint, moistened

with a saturated tincture of galls, which succeeded in a short time in repressing the hæmorrhage.

On the following morning I drew a ligature moderately tight about the lowest part of the fungus. My patient did not complain of its exciting much pain, and as no blood escaped on tying the knot, I flattered myself that no vessels had been divided.

On the fourth day afterwards the fungus, which had been of a dark and putrid appearance, was easily removed with the ligature attached to it; a slight bleeding ensued, which was soon stopped by a piece of lint.

Calling to mind the former case of fungus, and believing that these cases were analogous, I resolved upon covering the surface of the sore with the oxyd of arsenic.

A very extensive erysipelalous inflammation, on the second day, appeared upon

the leg, spreading in every direction, and several deeply coloured scarlet streaks leading up to the groin, accompanied with general irritation. These symptoms continued for several days, and did not subside till a large slough was thrown off the sore, although the parts were constantly fomented with warm water, and a strict attention to the sedative plan had been enjoined both in medicine and diet.

After this event the wound was dressed with the *ceratum cetacei*, and in the course of ten days was completely healed.

The cuticle scaled off from the whole extremity, which was the only inconvenience occasioned by the arsenic.

This patient has had no return of the complaint, and it is now two years since its cure.

CASE III.—The daughter of a tradesman, in the parish of Isleworth, had a small tumour on the arm, the skin of which ulcerating, brought to view a livid

and sanguineous fungus, which bled on the slightest touch, and was very irritable. Its rapid increase alarming the parents, Mr. Stenson, who attended the family, was sent for, and considering this excrescence of the nature of the one that had been termed fungus hæmatodes, or soft cancer, he was unwilling to use the scalpel, and proposed the application of a ligature, which he was obliged to pass through the base of the fungus, forming, by this method, a fixed point, which admitted of its being drawn on each side.—After a few days the ligature and fungus came away, at which time a slight hæmorrhage took place.

Arsenic was then sprinkled on the surface to which the fungus had been attached, with the view of radically removing any morbid disposition in the part. An extensive erysipelatous inflammation soon followed, spreading to some extent up the arm, occasioning uneasiness in the axilla.

This after a few days subsided, when a considerable slough was removed, leaving a healthy looking wound which rapidly healed without any further application of the arsenic.

CASE IV.—This instance of the sanguineous excrescence occurred to a gentleman far advanced in life, and came on in the following manner.

A small tumour was first noticed in the integuments of the forehead, which was attributed to the pressure of a tight hat; this gradually increased in size and became tender, till the skin cracked, when a livid tumour was forced through the wound, the base of which appeared to bleed.

Caustic was freely and repeatedly applied for some time, and though several deep sloughs had separated, yet the fungus regenerated more rapidly after each application.

In this state arsenic was sprinkled over the fungus, which in twenty-four hours



excited an extensive erysipelatous inflammation over the forehead, and spread partially over the face. No great degree of pain accompanied this affection, though a sense of fulness was complained of. On the decline of the inflammation a large slough came away, and the sore was healed over in the usual manner\*.

I have ventured to consider the foregoing cases as instances of fungi hæmatodes, from the close analogy which they bore to those morbid excrescences which received that appellation from Mr. Hey, an eminent surgeon at Leeds.

It will be seen, by attending to the progress of them, that the parts on which the tumours or swellings first appeared had received a blow, that these gradually enlarged, became painful, and ultimately

\* The two last cases came under the care of my neighbour, Mr. Stenson, who has obligingly allowed me to publish them.—It is proper to observe that no relapse has occurred in either.

pressing upon the skin, excited ulceration, when a livid fungus was immediately disclosed, the size of which was proportionable to the swelling. In two instances flakes of coagulated blood were observed on its surface, which did not appear to have been thrown out by its own vessels, although these bled on the slightest touch. Venal hæmorrhage accompanied the protrusion of this fungus, but did not return unless its base was raised.

From this short though faithful relation of the growth and peculiarities of this wart-like excrescence, I presume it is highly probable that it arises from a laceration of some vascular membrane, the vessels of which not being in a state to produce union by the first intention, threw out a morbid granulation, which may be deemed the origin of fungus hæmatodes.

It may here be contended, in opposition to this conjecture, that the suppurative

inflammation would have preceded this granulating process, and that an abscess would have been the consequence, the surface of which, it has been said, never granulates till it has been exposed, and its contents evacuated. However, Mr. John Hunter has mentioned a case in which granulations existed in an internal part without any marks of suppuration\*.

\* "The formation of granulations, I have observed, is not wholly confined to a breach made in the solids, either by external violence and exposure, or in consequence of a breach in the solids, which had been produced by suppuration and ulceration, and afterwards exposed; for parts are capable of forming granulations, or what I suppose to be the same, new animal matter, where a breach has been made internally, and where it ought to have healed by the first intention; but the parts being baulked in that operation, often do not reach so far as suppuration, so as to produce the most common cause of granulations. This was instanced in a simple fracture of the thigh bone, that occur'd to a man who died four weeks after the accident, in consequence of a complaint in his chest." Mr. Hunter observes, "on examining the parts after death, that union had not taken place, but that, from the ends of the bones, and some parts of their surface, as well as from the inner surface of the soft parts, there was formed new flesh, similar to granulations."—Hence we find that granulations can and do arise in parts that are not exposed.

Judging from my own cases of *fungi hæmatodes* as well as from those which have been related by other authors, I am much inclined to believe that these sanguineous excrescences originate from a laceration or injury of the cuticular coat of a vein.

The probability of this conjecture becomes stronger when we reflect upon the venal hæmorrhage which has been almost universally observed to take place from the base of the fungus, (or rather from the hæmatode cyst, to use the words of Mr. Hey,) which seems to act as a temporary valve to the vein, as in many instances blood does not flow unless this be raised.

The extravasation which takes place in some cases previous to the protrusion of the fungus through the skin without diminishing the bulk of the tumour, and the instantaneous subsidence of the dilated veins around it, strengthen the

opinion I have entertained of the seat of this disease.

I mean not to insist upon this supposition as an essential point in the present discussion, as from the similarity between the cuticular coat of a vein, and other vascular membranes, it follows, that the same morbid action may take place in them from similar causes; but having been led to form these ideas from practical observation, I was anxious to state them, in the hope that, should they not prove, upon further enquiry, to be correct, they might possibly afford some assistance to others who should be desirous of entering into an investigation of this interesting subject.

This conjecture is rendered more probable by considering the experiments that have been lately made to ascertain the process employed by nature in suppressing arterial hæmorrhage\*.

\* Vide Jones on hæmorrhage.

These clearly shew, that the internal or cuticular coat of an artery may be torn, without any injury being inflicted upon the external or middle tunic. The same circumstance may happen to a vein, as anatomical demonstrations unequivocally prove, there is no difference between the internal coats of these vessels, though there is between their middle and external tunics.

Veins as well as arteries are supplied with their *vasa vasorum*, consequently endued with the same healthy actions, and subject to similar morbid changes.

Steatomatous tumours, and ossific deposits have, on dissection, been discovered attached to their coats; and though similar demonstrative evidence cannot be adduced in support of the existence of *fungi hæmatodes* in the cuticular coat of a vein, yet ocular inspection, corroborated by strong collateral circumstances, claim a considerable degree of attention, and

tend to render this conjecture not altogether visionary.

In the living body our enquiries even into the origin of the most simple deviations from healthy structure are uncertain and limited; and under the most favourable situation require the aid of physiological knowledge, before their application in practice can be deemed admissible.

An attempt to discover the texture from which fungus hæmatodes originates, can alone be undertaken, with any prospect of success, at the commencement of its growth, when the morbid embryo is first evolved, and before it imparts its own malignant nature to, or is confounded with, the surrounding substance.

Impressed with the practical utility of this remark, from observing the success of early excision in scirrhous glands, and other morbid changes, as well as from the favourable termination of those cases of fungi hæmatodes which were treated by

ligature and arsenic in their incipient state, I am very desirous to propose the removal of them as soon as their existence is ascertained.

To accomplish this object it will be necessary to point out the characteristic marks of the tumour occasioned by this fungus; and as far as my own experience extends, I should consider its sudden appearance, in consequence of a blow or sprain, its peculiar elasticity and softness, and its freedom from inflammation, pain, and pulsation, as sufficiently strong peculiarities to distinguish it from an enlarged gland, an encysted or sarcomatous tumour, and an aneurism or abscess, in which case I should venture to recommend, if its situation will admit of an operation in this state, that an incision should be made down to the tumour, taking care not to wound the fungus, which may, when exposed, be removed either by the ligature or the scalpel; for



although many fatal cases are related both of extirpation and amputation in *fungi hæmatodes*, yet the duration as well as the bulk of them was such as to have precluded any reasonable hope of success, and on that account cannot be deemed as objections to an early and judicious excision of these excrescences, which, I presume, like cancer, are not originally constitutional diseases.

Before the observations on this subject are concluded, it may be right to state, as a concise recapitulation, that *fungus hæmatodes* is viewed as a mere morbid granulation, arising from a laceration or injury of some vascular membrane; that it is primarily a local disease, but from its known virulence and fatality requires early and complete removal; and experience having established the use of the ligature and arsenic, as specific and successful in those cases that have taken place upon the skin, that a similar appli-

eration is recommended when this disease occurs in any other part of the body ; and that excision, (supposing all the surrounding morbid substance can be included,) may, from its utility in cancerous and other local affections, be safely attempted in the present disease.

Much useful information upon the nature, treatment, and consequences of fungated tumours and ulcers, will be found in the works of some of the ancients\*, as

\* “ De curâ mori et carnis ortæ et additæ, &c. “ Sumantur nitrum adustum et cinis ligni vitis: terantur cum aquâ bene, et ponantur super morum, et alias quæ ei simulantur. Et quando non valent, incidatur, et pulverizentur desuper viride æs et arsenicum, etsi fuerit deterius illo, non erit excusatio quin cauterizetur.”

Avicenna, Fen. 20.

“ De arsenico. Notandum est, vires ejus inde cognoscas, quòd aliud venenum superat. Arsenico omnia ulcera curantur carcinomata, lupi, fungi cæterique affectus cancriosi ambedentes. Primum lupi, et carcinomatis status locusque diligenter inspiciantur, quo scilicet ejus venena tendunt, &c.

“ Medicamenta corrosiva sunt varia, velut alumen ustum, vitriolum, &c. nonnulli sumunt arsenicum alii mercurium sublimatum quibus abrodere putant. *Quin caro superflua*

well as in the writings of several eminent surgeons of the present day\*.

The preternatural cutaneous appearances that have received the appellation of *nævi materni*, from their existence prior to birth, and from their being supposed to depend upon the imagination of the mother, may, for the sake of practical purposes, be divided into two kinds, one of which is produced by a local and increased vascularity of the vessels of the cutis, without occasioning any alteration in the surface of the skin, and the other by a congeries of varicose veins. In the colour of the former an infinite variety is observable, partaking of every intermediate shade, from a deep claret to a bright vermilion hue. As these continue through

*sive ulcerosa, sive sanguinolenta creverit, hoc medicamentum absque dolore eam aufert.*"

PARACELSUS.

Vide Celsus de medicina, lib. v.

Morgagni de sedibus et causis morborum, lib. ii.

\* Home's observations on cancer, &c.

life without endangering the health of the person on whom they occur, they cannot with propriety be deemed subjects of surgical assistance; and although the complexion of the latter kind of *nævi materni* frequently depends upon the colour of the former, yet from the rapidity of their growth, and the consequences that are induced upon the arteries immediately connected with them, their removal becomes an important *desideratum* in operative surgery.

Excision has been for many years universally adopted for their cure, but as this method cannot be applied in all situations, pressure, accompanied with cold applications, has lately been successfully practised and recommended in this kind of *nævi materni*, by Mr. Abernethy, in his surgical observations.

As this appearance frequently takes place on parts of the body in which neither pressure or excision can be conveniently

applied, it would be a desirable object, if some plan for the removal of them could be devised, which might be admissible in every particular situation.

The method which I am about to propose is the mere child of accident, but as a radical cure has been accomplished in two cases of varicose *nævi materni*, within my own observation, by a bursting of the vessels from external violence, I am induced to recommend it as a rational and easy mode of treatment\*.

\* One of the children who afforded me an opportunity of making this practical remark is the daughter of Mr. Marth, and is still living in Brentford. At the time of her birth a small purple speck was noticed upon the lip, which remained stationary for some time, after which it rapidly increased till it occupied nearly the whole of one side of the upper lip.—There was a preternatural degree of heat in this congeries of vessels, and the arteries on the internal part became very tortuous and large. In this stage of the *nævus*, in consequence of a fall, the vessels were ruptured, and a profuse hæmorrhage ensued, which continued for some time, till it was suppressed by the edges of the lacerated wound being brought into contact by means of adhesive plaster. On removing this dressing, it was found that union had taken place, and

It consists in making an incision or puncture the whole length of a *varicose nævus*, sufficiently deep to reach the dilated veins; the hæmorrhage which occurs may be allowed to continue till the vessels are completely emptied, when the wound may be healed by the first intention, employing as much pressure as is consistent with this natural process.

I trust the practice here proposed may answer the end for which it is intended; and I am the more sanguine in my expectations of its success, from the conviction

that the dilated state of the veins forming the tumour had subsided.

Some months have elapsed since this accident, and the only remaining appearance is a shrivelled state of the skin, the colour of which is now perfectly natural.

The other instance of a ruptured *nævus maternus* being obliterated by accidental violence, occurred in the daughter of a gentleman who resides at Isleworth. This was situated over the insertion of the deltoid muscle, and occupied a space of four inches in circumference, was of a florid colour, much raised above the surface of the skin, and accompanied with a kind of inflammatory or preternatural heat.

that less irritation and injury would be caused to the vessels by simple incision, than by laceration and contusion.

I have been silent upon the aneurismal *nævus maternus*, which has occasioned a late ingenious theory, having never seen this morbid appearance.

Mr. John Bell has called it “*an aneurism from anastomosis, consisting of small and active arteries, absorbing veins, and intermediate cells;*” however, without entering into an enquiry respecting the peculiar disease which this term is intended to define, I conclude that pulsation would sufficiently mark its nature, in which case the usual operation for aneurism would be adopted.

The treatment of the *cutaneous wart* and *corn* is too well known to require any further observations than to remark that the former is dispersed by ligature and escharotics, and the latter by removing the thickened cuticle, and avoiding pressure.

By the *cutaneous ulcer* is meant that which takes place on the lower extremities, and may with propriety be considered to arise from a local weakness of the vessels of the skin. This has been most successfully treated by the judicious application of a roller and adhesive plaster, which afford support to the limb, and diminish the diameter of the veins, which are, in most instances, varicose\*.

The *phagedenic ulcer*, which has, by some authors, been considered of a cancerous nature, comes next under our consideration; but as it is not intended to discuss the question of its similarity to cancer, I shall cursorily remark, that this appearance commences generally in the form of a scabby or horny wart, and gradually spreads in proportion to its duration, till it ultimately destroys the lips,

\* Vide Home, Baynton, and Whately on ulcers.



cheeks, or nose, which are the parts most subject to this malignant disorder.

No application has been used in these cases with more success than the oxyd of arsenic; indeed I may say, that scarcely any other mineral has been known to check the progress of this disease. The earlier this remedy is adopted the greater probability of its producing a cure.

Caustics and excision have been successively adopted for the relief of this virulent complaint; the former has repeatedly failed, though instances of the radical success of the scalpel have been recorded.

The necessity of including as much surrounding healthy substance, when excision is employed in the extirpation of this ulcer, is as great as in the removal of scirrhous glands and fungi hæmatodes.—Therefore, when the last practice is chosen, great circumspection is requisite in its execution.

The ancients, from their writings, even as far back as in the time of Pliny, used the fumæ argenteæ and arsenic, for the phagedenic or herpetic ulcer; indeed their chief dependance in cutaneous affections appears to have been in the use of these minerals\*.

\* "Fumæ argenteæ et auripigmentum carnes excrescentes et ulcera serpentia tollunt et sanant."

Plinii historiâ naturali.

"Arsenicum herpetem oris, labii, et nasi confert et abstergit."

Avicenna de curâ ulcerum.

"Primum in superficiem incipit, demum intrinsecus rodit, consumitque, &c. In facie sumit exordium cum aquosâ quâdam scabie, postea transit in corrosivam, nasi cartilagine rodit, maxillas, et labia consumit, spargitur tenuiter cum fætore. Nisi præveniatur, nasum, aures, et faciei formam à radice tollit, ac delet, ad collum, et fauces antè descendit. Si latius quàm sint confinia progrediatur, ad mortem id iudicandum est fieri.

"Crystalla realgaris cum aceto cocta his pravis ulceribus medentur, et materiam putredinis abducunt."

Paracelsus de cura noli-me-tangere, &c.

Vide Home, Fearon, and Chapman on cancer, &c.

The third class includes those cutaneous appearances which are produced by a constitutional and contagious disease, and which, with the exception of *syphilis*, require no particular treatment, as these retire, after the subsidence of the particular and specific fever which generated them.

These diseases are known under the terms *variola*, *vaccina*, *rubeola*, *varicella*, and *scarlatina*. It may be proper to observe, that after the termination of *variola* and *vaccina* occasional instances of cutaneous abscesses occur, which are most successfully treated by a strict attention being paid to the anti-phlogistic plan in diet, as well as medicine, and by such external means as encourage suppuration.

In these cases I have remarked that inflammation of the lungs has never supervened the subsidence of the eruption, on which account I have considered these abscesses, as critical and useful determinations to the surface.

The appearance of eruptions is not considered essential to the constitutional existence of *vaccina*, although the practitioner's opinion of the security of his patient under this disease is formed from the duration as well as the characteristic and specific aspect of the vaccine vesicle which is generated in consequence of inoculation.

The cutaneous affection which has been observed to occur in the second stage of *syphilis* is peculiar to this disease, and generally at first breaks out, in the form of a broad copper-coloured blotch upon the forehead, and gradually and successively appears upon the breast, limbs, &c. and if not checked, terminates in a malignant ulcer. In this respect a decided difference exists between this appearance and those accompanying variola, &c. which subside *sua sponte*.

For the removal of the syphilitic eruption, experience has established the use of a specific mineral, in the effectual exhi-

bition of which it is necessary that the mouth should be moderately affected by the action of mercury for some weeks ; not that the mere disappearance of the eruption is to be considered as a proof of the disease being eradicated, for unless other constitutional symptoms, viz. affections of the throat, nocturnal pains and local ulcers be removed, the cutaneous affection will return with increased virulence.

*Scarlatina* has from the earliest times excited the interest and attention of professional men, and still continues a theme of discussion, and even of contention, among those who prefer the dazzling speculations of theory to the instructive and un-erring lessons of experience.

If scholastic erudition be alone estimated as the requisite qualification of sound and useful practice, the acquirements of experience might be considered as almost nugatory, and the merits of the surgeon and physician would be

proportionable to their classical knowledge and attainments.

But daily practice, corroborated by the testimony of our ablest and most successful practitioners, invalidates this assumption, and establishes the pre-eminence of practical facts over the ingenious deductions of theory.

In the present remarks upon scarlatina, it is not intended to introduce a new definition or treatment of this disease, but simply to state that mode of practice which has been in the majority of cases successful, when adopted at its commencement, principally with the view of reverting to the opinions of Sydenham, Cullen, and Heberden, whose treatment both in scarlatina and <sup>typhus</sup> ~~syphilis~~, has been threatened so lately with innovation, from a too great partiality of exhibiting calomel and purgative medicines in these diseases.

The established character of this mineral, in syphilitic, hepatic, and mesenteric affections, as well as the extensive benefits of a judicious use of other aperients in a variety of complaints, are too well known to require any observations being made in this place upon their particular application; but when the former is offered, *porrectis manibus*, as a specific in typhus, and purgative medicines recommended as principally necessary for the removal of scarlatina, I thought it a duty, by a faithful statement of practical facts, to attempt, as far as the powers of an individual would extend, to resist the introduction of a system which I feel convinced from the instances already published, cannot be deemed preferable to the one so long established.

Without entering into a detailed account of the supposed causes of this contagious disease, a full and lucid relation of which may be found in several modern

publications\*, I shall briefly state that the character of scarlatina is distinguished by an increased action of the arterial system, accompanied with an efflorescence upon the skin, and a fulness, redness, and increased secretion of the tonsils.

When these symptoms occur, if the patient's habit be not sufficiently plethoric to require bleeding, the stomach and bowels should be first emptied, and a gargle of the infusum rosæ frequently used, with the view of preventing any collection of mucus upon the tonsils; diluting liquids may be taken freely, and occasional doses of such medicines as would determine to the surface. I believe the *pulvis Doctoris Jacobi* is the most effectual sudorific.

By persevering in the anti-phlogistic plan, both with respect to diet and medicine, for four or five days, and paying particular attention to the state of the throat, as well as the bowels and skin, I

\* Vide Sydenham, Cullen, Heberden, and Willan.



have rarely been disappointed in the expectation of seeing the patient convalescent by the seventh day.

It is proper to observe, that I am speaking of that stage of the disease which has been termed *benigna*, for I am well aware that, when ulcers have taken place upon the tonsils, a different system must be observed, and detergent gargles, bark, and port wine must be substituted for the former. Should the second stage have come on previous to medical assistance being called in, the stomach and bowels should even then be emptied, before the bark is administered.

I am fully convinced that if *scarlatina benigna* be treated as an inflammatory disease, the second stage, called *anginosa*, will rarely supervene; on the contrary, if tonics and stimulants be exhibited in lieu of the anti-phlogistic regimen, an ulcerated state of the tonsils will much sooner be induced, than if the

disease had been allowed to take even its natural course.

Having had repeated opportunities of judging of the efficacy of the anti-phlogistic system in incipient scarlatina, when ulceration of the tonsils had not appeared, and having witnessed the positive mischief of the opposite mode of treatment, I am justified in having established this principle in my mind, that *scarlatina* is an *inflammatory disease*, and that by adopting the treatment above stated, it terminates on the fifth or sixth day, without the second stage supervening.

Possibly the exhibition of purgative medicines at the commencement of scarlatina, might be admissible; but when we find no allusion made either to the use of diaphoretics, gargles, or blisters, in the benign or malignant state of this complaint, but that the chief dependance is placed upon *calomel*, *jalap*, and the *muriatric acid*, I am the less inclined to

forego that treatment which has been recommended by our best physicians, and which my own experience has established as sound and successful.

My objection to the treatment of scarlatina benigna and anginosa with purgatives, is increased upon finding that the very first case which appeared in a late work, and was arranged under the head of typhus, (in which disease nearly a similar plan is recommended,) was evidently dependant upon worms, if we may be allowed to judge from the author's own words, viz. "the patient's belly became regular, his pulse soft, tongue clear, appetite good, &c. after having voided two *lumbrici*\*."

—————" hæ nugæ seria ducunt  
In mala "————

If the bowels were the only outlets of the system, through which morbific or of-

\* Vide Dr. Hamilton's chapter on typhus and scarlatina, in his treatise on purgative medicines.

fending matter could be expelled, purgative medicines might chiefly be depended upon in all contagious and inflammatory diseases; but when it is recollected that the functions of the skin are so important to the preservation of health, and so essential in the removal of disease, and that nature, by her own powers, produces a critical diversion, or *metastasis*, upon the surface of the body, under various dangerous obstructions, it is reasonable to conclude that we shall be more likely to assist the *vis medicatrix* by considering the various functions and secretions of the body, than if we were to confine our attention solely to the relief of any distinct organ.

The variety of cutaneous appearances which might be comprehended under the fourth class is too extensive to admit of a specific definition or term being attached to each of them exclusively; although, for the convenience of description, such

names might be adopted with advantage, as would convey a combined idea of their probable nature and external character.

A peculiar susceptibility of the vascular membrane of the skin may in a great measure serve to explain the difference observable in those cutaneous affections which occur in various constitutions from apparently the same origin.

To this cause, I presume, may chiefly be attributed the different kinds of eruptive and scaly appearances which take place on the scalp of children during dentition.

It may be recollected that much has been said in the former part of this treatise upon the subject, and upon the practical benefit arising from considering them as symptoms; yet it will be necessary to make some remarks upon the particular organs or secretions that may be supposed to be deranged in cases of cutaneous eruptions, and to attempt to point out their relative appearance, with

the view of establishing a *pathognomonic* character to each.

I am aware that, without the aid of other symptoms, this task would be attended with insuperable difficulties in every cutaneous disorder; yet, as the states of the skin termed *scorbutic*, *petechial*, and *phlegmonous*, are generally indicative of the particular state of the blood and *vis vitæ* which occasioned them, practical observation may ultimately very materially improve our pathological knowledge in other instances of cutaneous affections.

I am the more convinced of the utility of a strict enquiry into the state of the constitution on the eruption of these appearances, from having invariably found that either irritation of the gums, indigestion, visceral obstruction, or an acrimonious state of the blood have preceded them.

In vain does the practitioner attempt to remove *carbuncle*, *petechiæ*, and a

*jaundiced state of the skin* by local applications. In opposition to all topical means these affections will continue, if the state of the constitution, or the particular obstruction that occasioned them be not improved by appropriate medicine and diet.

“Naturam expellas furcâ tamen usque recurret.”

In the class now under consideration, I have introduced many of the most ancient and familiar terms that have been adopted, and are still retained, to express the cutaneous appearances which it comprehends. These I purpose noticing nearly in the order in which they stand in the arrangement.

*Lepra, elephantiasis, alphas, psoriasis*, were names assigned by the Greeks to all the various scaly affections of the skin, which they considered dependant upon a vitiated state of the bile, and other secretions\*.

\* “Δοκει, ελεφαντίασις, αλφος, ψωρα, και τα παντα λείχνησ κατα ουτα ελκεα τικνησμωνδεα δηλωνται.”

Galeni operibus.

That such was their opinion is corroborated by the manner in which they treated those cases, namely by aperients, diluting liquors, acidulated fruits, vegetables, and the use of the tepid bath.

“Λεπρωα, λειχην, αλφος, και ελεφαντιασις υπο φλεγματί και μελαγχολιη γίνονται.”

Hippocrates prædictorum, lib. ii.

“Λειχην impetigo est, summæ cutis vitium ut ψωρα και λεπρωα cum asperitate et levi pruritu, deterius quidem pruritu, psora autem et lepra levius. Gignitur Galeno ex serosis, tenuibus, et acribus succis, cum crassis permixtis. Lepra vero asperitas est cutis profundior, cum pruritu majore, et squamis, cujus materia est humor melancholicus multus, viscosus, crassus. Ex cujus qualitate et malignitate squamæ in summa cute oriuntur, quæ peculiare sunt, cum asperitate cutis profundiore, et pruritu. Hæc ad elephantiasin aditum facit, et in quatuor genera distribuitur, sola intensione, et remissione malignitatis distincta. Vitiosa cutis macula est, et fædæ scabiæ soboles, ex malo corporis habitu excitata, et facultatis altricis errore pituitosum sanguinem, lentum et viscosum gignentis. Hæc genera, cutis fæditates, et vitia censentur potiusquam morbi. Quod etiam scripsit Hippocrates, περι παθων, μαλλον αιχος και νοσηματα ea esse censens. Cujus vero sententiam sequitur Avicenna, cum scribit de eis *affectionibus quæ morbi non sint sed potius dedecora.*”

Annotatio ex prædictis Hippocratis.



The Latins continued to use these terms\*, though they introduced the word *porrigo*, to express more particularly the scurfy affection of the scalp‡; but modern practitioners have indiscriminately attached the epithet *scorbutic* to every cutaneous appearance in which the cuticle has been elevated.

As far as my own observations have reached, I am decidedly of opinion that every cutaneous affection which is included

\* “ Lepras, elephantiasin, lichenas, lentigines, ulcera, furfures, carbunculos sulphur vivum sanat et extrahit vitia cutis.

“ Cortex ulmi in aquâ cocta alvum solvit, pituitas trahit, et lepras sedat.

“ Remedia contra morbos, qui totum corpus, et cutem occupant, sicut ignis sacer, elephantiasis, psora, &c. sunt folia mandagoræ, hyoscyami, cucumis sylvestris, cicuta, quæ, aquâ decocta, frequenter bibenda sint.”

Plinii naturalis historia.

‡ “ Capite multa porrigo, totove corpore pustulæ ortæ sunt.

“ Porrigo autem est, ubi inter pilos quædam quasi squamulæ surgunt æque à cute resolvuntur; et interdum madent, multo sæpius siccæ sunt, &c.”

Celsus de medicina.

under this class, arises from internal irritation, or constitutional debility; and although I do not presume to trace philosophically each distinct cutaneous appearance to its particular morbid or disordered origin, yet such a cursory view may be taken as will render the examination in some degree practically useful.

In all cases of cutaneous complaints, whether they occur in children or adults, it should be established as a rule of peculiar importance, to enquire into the state of the constitution.

The excessive scurfy appearance of the skin, termed *lepra*, which I conclude to be an aggravated stage of *psoriasis*, and which constitutes the *alphos* and *elephantiasis* of the Greeks, I have never known occur without a very considerable derangement of the hepatic and digestive organs.

The treatment which has been found productive of the most relief consisted in the following formula, which determined to the skin as well as to the liver, and at the same time kept the bowels in an active state:

℞ Pilul. hydrarg. g. iv.  
 Pulv. Doctoris Jacobi, g. ii.  
 m. f. pilul. omni nocte sumend.

℞ Potassæ acetatis, ℥ii.  
 quam capiat ter die in quovis idoneo vehiculo.

The pill is to be taken till the mouth becomes slightly sore, which affection is to be kept up by the occasional repetition of this medicine for some weeks.

The acetate of potash generally acts as a sufficient aperient and diuretic to render unnecessary the use of other purgatives. The dose of this medicine should be varied according to its effects.

In addition to this medical treatment the mildest ointment, when the discharge becomes virulent, is the only application

required; but should a troublesome itching attend this complaint, a lotion of nitric acid, in the proportion of two drachms to a quart of water, or a weak solution of the nitrate of quicksilver will generally allay the irritation.

A strict attention to regimen is required.—All salted meats must be avoided, and a nutritious and mild diet adopted.—The tepid bath may be used *ad libitum*.

The treatment recommended in *lepra* is with practical utility and safety applicable to *psoriasis* and *scorbutus*, proportionably modified to their particular states.

Although in these affections the liver is not generally in a morbid state, yet hepatic derangement, as well as indigestion and an acrimonious state of the blood, usually induce them; in which case the occasional use of the blue pill, with such medicines as tend to improve the particular disordered state of the constitution

upon which each depends, may be employed.

*Porrigo, crusta lactea, gutta rosea, roseola, &c.* are cutaneous affections most commonly occurring in infancy and childhood, and may be traced either to dentition, or to a disordered state of the stomach, bowels, or mesenteric glands.

Lancing the gums, the use of calomel combined with the sulphate of potash, and the warm bath, in most instances remove these scaly eruptions.

When the scalp is affected the use of the oiled-silk cap may always be applied with safety.

Mild food, acidulated drinks, and every variety of ripe fruit may be freely taken.

*Erysipelas* has been with practical utility divided into two species, the one depending upon an inflammatory *diathesis*, and the other upon a debilitated state of the system.

The former usually appears upon the head, face, and upper parts of the body, accompanied with a strong pulse, heat, thirst, and other marks of fever.

The relief which the system obtains in consequence of this eruptive affection is in proportion to the inflammation and the tumefaction of the skin. By avoiding cold, and giving such medicines as tend to excite perspiration and diminish heat, the appearance usually subsides in the course of a few days.

A great variety of symptoms occurs in this species of erysipelas, the appropriate treatment of which must depend upon the judgment of the practitioner.

When there is apprehension of the brain becoming affected from *metastasis*, the tartar emetic ointment, in the proportion of two drachms to half an ounce, may be freely rubbed upon the neck or head, which I have, in many instances known to produce the most desirable and

immediate advantage, when leeches and blisters have failed.

The other kind of erysipelas takes place upon the lower extremities more particularly, and appears in the form of broad purple patches; these are painful, and frequently terminate in vesicles.

Universal languor and debility, with an accelerated and feeble pulse, accompany this species, which is most speedily removed by a liberal use of bark and port wine.

*Urticaria*, or *nettle-rash*, arises from some constitutional irritation, and is invariably attended with an accelerated and strong pulse, and other febrile symptoms.

This eruption excites much heat and itching on the skin, and occurs in patches in various parts of the body. As it generally subsides, *sua sponte*, in the course of a few days, avoiding cold and keeping the bowels open are usually sufficient for the treatment of this appearance.

Practitioners have attached the epithet *chronic* to *urticaria*, with the view of defining an eruptive complaint, from which the former varies, appearing more in the form of *scabies*, upon the back, breast, and lower extremities. This is likewise accompanied with violent itching, but is unattended with fever; and continues upon the skin for some months, unless means to remove it be adopted.

The chronic nettle-rash has resisted various external remedies, but has given way, in the course of a fortnight to an infusion of serpentaria, made in the proportion of two drachms to a pint of water.

Dr. Baillie first recommended the use of this medicine to me in the cure of this cutaneous affection, and I have never known it fail in effectually removing it.

*Miliaria* may correctly be termed a rash; it first appears on the neck and chest, and gradually spreads over the other parts of the body.



This eruption is preceded by shivering, heat, thirst, and constitutional irritation, and can generally be traced to obstructed perspiration, though I have known instances of its arising from indigestion.

Supposing it to have proceeded from the former cause, the use of the tepid bath and James's powder will remove the appearance, and prevent its terminating in vesicles, in which state, I believe, tonics are requisite; but if indigestion occasioned it, the exhibition of an emetic and aperients has been fully adequate to the cure.

*Herpes* appears usually about the loins, in a cluster of vesicles, which are sometimes extremely painful. These spread, forming a kind of belt to the body; and remain for several days, if not suppressed by applications.

A constipated state of the bowels, accompanied with loss of appetite, and foul tongue, precede this eruption, which

should be relieved, before any local application be used. Should the vesicles continue, after the supposed cause is removed, and occasion irritation, the tartar emetic ointment, or a lotion of the oxymuriate of quicksilver will effectually destroy them.

*Petechiæ* are invariably characteristic of extreme debility of the animal powers, and accompany the typhus or putrid fever.

Bark and port wine administered in large quantities can alone be expected to improve the particular state of the constitution upon which these depend.

*Carbunculus* appears upon the skin in the form of a pustule, gradually enlarging and becoming much inflamed and painful. It seldom suppurates like other abscesses or eruptions, but ulcerates slowly and becomes a foul sore, with indurated edges, and is little inclined to heal.

A disordered and debilitated state of health exists antecedent to this cutaneous

affection, and if this be not removed by appropriate medicine and diet, it will prove a dangerous and sometimes a fatal complaint.

The state of the skin attendant upon *gout*, *acute rheumatism*, and *jaundice*, generally marks the particular disorders known by those names.

In *gout*, I am strongly inclined to believe, that the stomach is generally and principally in fault.

This organ is always disordered prior to the inflammation and swelling of the extremities; the degree of which, I have observed, is proportionate to the constitutional derangement.

No particular medicine has hitherto been found serviceable in this disorder; indeed, as it is in most instances an acquired disease, abstinence from stimulating food and fermented liquors, and strict attention to the state of the stomach and bowels, seem to be the most rational

means for securing the constitution from its attacks, and generally prove effectual.

The state of the skin, denoting rheumatic fever, continues during the course of the disorder, which is most successfully treated in the majority of cases, where the habit is not particularly plethoric, by the exhibition of bark, after the use of antimonials.

The appearance of the skin, termed jaundiced, always denotes biliary obstruction, and does not retire unless the particular cause be removed.

The cutaneous appearances which have been cursorily viewed in this class, form the most important and extensive morbid symptoms that occur in the human frame; and as few can be considered as correctly *pathognomonic*, it is proper for us to make a minute enquiry into the state of the constitution whenever they occur.

It may be established with practical utility, that no topical means should be

applied at the commencement of these appearances, but such as tend to increase perspiration, and encourage the natural functions of the skin; for presuming that each of them originated from some peculiar state of the constitution, all attempts to remove them, without ascertaining the particular organ or function which is disordered, should be considered as empirical and dangerous.

“Vis consilii expers mole ruit sua.”

The fifth class comprehends those appearances which are occasioned by *external* and *simple stimuli*, and require merely local applications.

The treatment of the *incised*, *lacerated*, and *contused wound*, is too well known to render it necessary to say more than that the former should be healed by the first intention, and such dressings applied to the two latter as would tend to assist nature in separating the part that is

destroyed ; after which the sore is to be treated as a simple cutaneous ulcer.

*Burns* and *scalds* have been successfully treated, when the cuticle has not been destroyed, by solutions of the plumbi acetate and the spiritus terebinthinæ. The latter has been found preferable when ulceration of the skin is likely to take place\*.

In cases of extensive cutaneous ulcers from these causes, in which the discharge is profuse, the pulvis lapidis calaminaris sprinkled over the surface, and secured with a dressing of any simple cerate, has proved a most useful and effectual remedy.

The inflammatory state of the extremities, occasioned by cold, termed *chilblains*, has been treated in various ways. It is difficult to point out any particular application as serviceable in all constitutions.

\* Vide Kentish on burns.

Spirituos embrocations probably produce the most relief. If oiled-silk be worn in the manner of a sock, and confined round the ankle previous to their commencement, it has in many instances proved a complete preventative.

*Hell Pain*

When the skin has given way, and ulcers are formed, a bread and water poultice should be applied to remove the surrounding inflammation, after which, a diluted form of the unguentum hydrargyri nitrati will frequently perfect the cure.

The cutaneous appearances induced by *insects* and *animalculæ*, are most benefited by a frequent application of a lotion composed of equal parts of tinctura opii and liquor ammoniæ acetatis.

Under the sixth head are arranged those cutaneous injuries which are inflicted either by the *bite* of a *rabid animal*, or a *poisonous reptile*.

I believe there is no instance on record, in which life has been preserved

after the real hydrophobic or poisonous symptoms had taken place in the system.

Various local as well as constitutional means have been adopted both as preventatives and cures; of the former, excision is the only one upon which any dependance can be placed, and this should be performed as soon after the accident as possible\*. In doing this a complete extirpation of the part should be made, including a portion of the surrounding integument. It has been recommended to apply escharotics to the surface of the wound thus inflicted by the scalpel, but if excision be judiciously performed, caustics will be unnecessary.

\* "The conclusion of all that we have said, and which, in a practical view, ought strongly to be inculcated, is, that *excision* ought to be performed as early after the bite as possible; yet, should this have been neglected, or impracticable at the time, it ought not to be omitted at any period between this and hydrophobia, from a supposition of its being too late."

Dr. Hamilton on hydrophobia.



With respect to internal means, experience does not offer much information upon their utility. Volatile alkali\* is in high estimation in some parts of the East-Indies, as a preventative against the bite of a snake called *cobra*, of which there are two kinds. Indeed, from the accounts which were lately communicated to me, by an officer of great respectability who resided twenty years in that country, I should be strongly induced to make a trial of this stimulus, in the treatment of a wound produced by the bite of a rattlesnake or viper, which had excited constitutional symptoms.

The mode of application consists in bathing the part bitten with the spiritus ammoniæ succinatus, and giving forty drops

\* "Volatile alkali, whether as a diaphoretic, or merely a stimulant, has likewise proved delusive. More, however, may be said for this than for several of the others, and the practitioner would do well to give it a fairer trial than what has yet been done."

Dr. Hamilton on hydrophobia.

in a glass of water to an adult every two hours, till fever is produced; a profuse perspiration generally follows, and an extensive inflammation takes place round the wound.

Upon the nature of the virus producing hydrophobia, and upon the treatment of this disease, modern enquiries have thrown but little light; indeed our knowledge of poisons in general, as well as of their peculiar operation upon the human frame, is too imperfect to expect that any rational practice can be established for their removal.

Under such limited information excision cannot be too generally recommended, either for the bite of a rabid animal or poisonous reptile†; indeed, professional

† “Serpentium quoque morsus non nimium distantem (morsu rabiosi canis) curationem desiderant et igitur imprimis super vulnus id membrum deligandum est; non tamen nimium vehementer, ne torpeat; dein venenum extrahendum est. Id cucurbitula optime facit: neque alienum est ante scalpello circa vulnus incidere, quo plus vitiati jam sanguinis extrahatur.”

Celsus de medicinâ.

men should studiously impress upon the public mind the necessity of an early application for surgical assistance, as the only certain means of preventing constitutional affection\*.

In the preceding allusions, a cursory view only has been taken of the treatment of each cutaneous disease and affection, in illustration of the practical propriety and utility of separating them into distinct classes; and it is sincerely hoped, imperfect as this sketch may appear, that the proposal for a cutaneous arrangement, and the enquiry that has been made into the nature and treatment of the various appearances which take place on the skin, may not prove altogether useless.

It has been the earnest endeavour of the author to render these pages as

\* “*Τὸ τροφῶσιαν* Græci appellant, miserrimum genus morbi; in quo simul æger et siti et aquæ metu cruciatur: quo oppressis in angusto spes est.”

Celsus de medicinâ.

well worthy the attention of medical men as his humble abilities and opportunities of information would allow. He is, however, fully conscious of the imperfect manner in which his task is executed, and therefore anxiously solicits the candour and indulgence of the profession.

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IT has been a source of much regret that I have not been permitted to publish the names of all the patients to whom the following cases relate; but the nature of cutaneous affections being generally considered as indicative of an hereditary and constitutional disease, insuperable objections have been made by some persons to my wishes, though I urged every possible argument in support of the propriety of my request.

Thus situated, I am under the necessity of presenting to the public a few of the cases, in an incomplete and perhaps unsatisfactory state. To compensate this deficiency I can only offer my own testimony of their authenticity, and add, that I shall be willing to gratify the enquiries of any professional man, and to afford a reasonable reference to any of the cases.

## CASE I.

THE eldest son of Mr. Kilsby, of Brentford, was shewn to me on the 11th of November, 1808, in consequence of a scurfy appearance of the scalp, accompanied with a slight serous discharge, which hardened into small incrustations; an itching, tenderness, and a separation of the hairs likewise attended this case.

I learned that this bald patch was rapidly enlarging, and that the children in the family with whom this boy had been spending some time, had a similar complaint.

Considering it as the contagious ringworm of the head, I directed the nitrico-oxyd ointment to be well rubbed

upon the part affected four successive nights, and the scalp to be washed with warm soap and water the fifth morning.

On the 17th of November I saw the boy a second time, and had the satisfaction to find that the disease had not extended, and that the scalp was inflamed to some distance round the original patch, which had become tender from inflammation.

According to my directions, nothing more was done; and when I examined my patient on the 9th of December the head was perfectly free from disease, and the hairs were seen shooting through the part of the scalp that had been bald, and firmly attached to their roots.

## CASE II.

A brother of the patient who was the subject of the first case, was brought to me on the 9th of December, 1808, with a similar appearance on his head, though it was much more extensive, being in several larger patches.

These children had slept together and had been using indiscriminately each others hats.

The parents asserted that this complaint had never been in their family till their eldest son returned from his visit, when they remarked it; and that the same appearance was noticed upon his brother's scalp about a fortnight afterwards.



From the above relation I determined to adopt the same treatment that was used in the first case.

In the space of twelve days I was informed that the ointment had been effectual in curing the disease.

Since which time these boys have had no return of the appearance.

## CASE III.

MASTER Bundock, of Turnham-Green, in the year 1806, was placed under my care in consequence of several scurfy and bald patches upon his scalp; a few scales adhered firmly to the cutis, which, on being separated, poured out an ichorous serum.

No satisfactory account could be given of the origin of this disease, but that it was observed on his return from school.

I directed the nitrico oxyd ointment to be applied to the parts affected in the usual manner for four nights, and to be continued according to the degree of inflammatory appearance of the patch, as

well as the parts adjacent, which I stated would probably take place in the course of that time.

This plan of treatment I found had been strictly observed, and on visiting my patient a week afterwards, fresh hairs were appearing on the parts that had been diseased, and the application seemed to have thoroughly removed the complaint.

of the parts having become inflamed and tender from the application. In the course of a week all marks of disease had disappeared, and a perfect regeneration of hair was taking place.

#### CASE IV.

I was requested to see Master \_\_\_\_\_, of Ealing, who had suddenly been attacked with a complaint on the scalp, which appeared in several patches; these itched and became bald,—a slight moisture was observed on the skin, but not in sufficient quantity to form incrustations.

I requested that this young gentleman might be separated for a few days from the family, as I considered his disease contagious, and ordered the common culinary mustard, in the form of a paste, to be well rubbed upon the patches for four nights; after which time it was washed

off, the parts having become inflamed and tender from the application.

In the course of a week all marks of disease had disappeared, and a perfect regeneration of hair was taking place.

I was afterwards informed that this patient had communicated the complaint to one or two of his associates, who were treated in a similar manner, and with the same success.

## CASE V.

IN the year 1799, an infant of Joshua Trimmer, Esq. of Norwood-Green, about four months old, had its scalp suddenly covered with a scurfy affection, which soon became ulcerated; these ulcers had thick incrustations formed over them, and occupied nearly the whole head.

A fetid and acrimonious discharge constantly passed from these sores, which in a few days extended so deep in some parts as to denude the pericranium.

The child was considerably weakened by this affection, though not decidedly ill.

In this situation Mrs. Trimmer, who happened to be in London, applied for medical assistance; but not being satisfied with the opinion that was first given her of her child's complaint, viz. that it was contagious scald-head, and that it might probably prove fatal, she consulted Dr. Underwood, who, after examining the child's gums, informed her that there was no danger in the ulcerated appearance of the scalp, that the child was cutting its teeth, and when they appeared the affection would subside.

He requested that the state of the bowels might be observed, and that the head might be kept clean by fomentations of warm water, and dressed twice a day with some mild cerate.

In the course of a fortnight the child had cut four teeth, after which the affection of the scalp became much better, the ulcers healed, and, excepting a scurfy appearance, the head was considered well.

Since the subsidence of this extensive and painful complaint, whenever the irritation of the gums comes on, timely lancing them prevents a return of the former state of the scalp.

During its continuance the hairs never came away, neither were they in any degree impeded in their growth.



## CASE VI.

IN 1807 I was sent for to Norwood, to see an infant of Mr. Joshua Trimmer's, five months old, who was cutting her front teeth. The gums were much swelled and had been in a very irritable and tender state, but were considerably better since the appearance on the head had taken place.

On examining the scalp, I found that the hair, which was unusually long, was matted together by means of a soft tenacious incrustation, which covered the whole head, forming an entire cap, and that an extremely fetid matter exuded from the edges of the scab.

The child appeared in great uneasiness, from the irritation of the head; indeed the hands were obliged to be confined in gloves to prevent her tearing her scalp.

Considering this case as a favourable one for the oiled-silk cap, I directed that it might be applied as soon as possible; and as the gums were less inflamed than they had been, and the child's health was not impaired, I omitted the use of the gum lancet, that I might be the better enabled to judge of the particular effect of the cap.

The following morning a trial of it was made, and in the course of the day, the child was evidently in less pain, and it had a better night's rest; on the second day the incrustation had become very moist, and was not so closely attached to the scalp.—The inside of the cap was damp with perspiration, which was wiped off before it was replaced.

On the third morning the oiled-silk cap was again removed, when the incrustation, that had completely incased the head, was separated from the scalp and the hair without any difficulty, leaving the latter firmly attached to its roots.

The vascular membrane was seen free from cuticle, and covered with an ichorous discharge, which was washed off with warm water and a sponge, and the cap applied as before.

Permanent cuticle was formed on the scalp in the course of a few days, and by persevering in the use of a piece of oil'd-silk whenever the child appeared to be cutting her teeth, with an occasional dose of calomel in combination with the sulphate of potash, and an early use of the gum lancet, the complaint of the scalp has never returned.

I must here remark that the children of this gentleman are remarkably healthy, suffering only during dentition.

## CASE VII.

A son of the Right Honourable Mr. ———, was placed under my care on the 16th of October, 1809, in consequence of a scurfy and eruptive affection of the scalp, which had existed in a greater or less degree for a year and a half.

It first appeared while he was at school in the country, from whence he was sent under the idea of its being of an infectious nature, as many of the young gentlemen had a similar appearance on their scalp and skin.

Several medical men had, at various times, prescribed applications and medicine for its cure, some of whom considered it

contagious ringworm and scald-head, and others viewing it as a simple and not an infectious complaint. It is sufficient to observe, that although this appearance had apparently subsided at different times, yet it occasionally re-appeared with increased violence.

A few scurfy and moist spots were observed about this young gentleman's face, and one circular patch was noticed on the forehead, half of which extended on the hairy scalp.

From this circumstance, as well as from the general history of the progress of this affection, I considered it as a complaint of the vascular membrane of the cutis, and thought that some advantage might be derived from the application of an oil'd-silk cap, as well as the use of the compound decoction of sarsaparilla.

This patient was about twelve years of age, thin, weakly, with a fair complexion and light hair; his bowels natu-

rally costive, and his gums in an irritable state, from shedding the temporary set of teeth.

The cap was worn for a fortnight, and during the first few days a crop of pustules appeared upon the scalp, which gradually subsided in the course of a week, and at the expiration of a month the head was free from eruption and scurf.

The health of this young gentleman being as good as it had been for some years, I considered that by leaving off medicine it was very probable that the cap might be worn with advantage a week longer.

The hair which had been shaved was now allowed to grow, trusting that the affection of the scalp would not return. It is necessary to remark that the bowels became more regular, and the irritation of the gums were subsiding.

As the family were leaving the country in a short time, and being myself desirous

of judging the effect of the cap in a case of long standing, I continued to visit my patient occasionally.

On the fourth day after I had seen him, the scalp was covered with an appearance similar to what I had first found upon his head, yet the hairs could not be separated in any part.

Considering the disappearance of the complaint under the use of the cap without any local application, a strong presumptive proof that it was not of a contagious nature, I recommended that the head might be kept clean with warm soap and water, and the cap re-applied, paying attention to the state of the bowels and gums.

In this state of things my patient was taken to town for the winter, and as the minds of the parents were anxious for the cure of the complaint, I proposed that the head might be shewn to some surgeon.

Mr. Home, of Sackville-Street, was named, and we met by appointment.

This gentleman gave it as his opinion that the complaint was not ringworm of the scalp, or scald head, and that it was not contagious. He recommended the head to be closely shaved, and a solution of the nitrate of quicksilver to be applied, which I have understood removed the affection for a time, but that it has since returned, owing, I believe, to an irritable state of the gums, and constipated bowels.



## CASE VIII.

MASTER W——, of Brentford-Butts, was put under my care for an affection of the scalp, in 1809.

On enquiry I learnt that his head had been scurfy and eruptive for the space of fifteen months, that he had been under the care of several medical men, who had differed in their opinion of his complaint.

At its commencement two or three patches were observed which were scurfy, these soon became bald, and rapidly spread to a considerable extent. In this state scales were formed upon them. This disease was stopped in the course of three

or four weeks by the use of a lotion of hellebore.

Soon after this lotion was left off soft downy hairs appeared upon the parts that had been bald, and the head became well.

In this state he was sent to school, where he remained for some months, when a scurfy complaint suddenly appeared upon his scalp, accompanied with a slight serous discharge and itching. A medical gentleman who attended the family saw him, who considered the complaint as infectious, and termed it tinea. The head was shaved, and the nitrico-oxyd ointment, as I am informed, was rubbed upon the head, and some internal medicines were given. This plan not succeeding, blisters were repeatedly applied, which evidently increased the symptoms.

Some weeks afterwards I was requested by his family to see him, when I observed several scaly patches on the scalp, which,

On close inspection by means of a magnifying glass, appeared to cover small ulcers, the bases of which were highly inflamed, yet the hairs were firmly attached to their roots.

The places that were originally bald, and that had been cured by a lotion of hellebore, were still covered with healthy hair, and were now free from scurf.

Viewing this affection as seated in the vascular membrane, and not contagious, I directed the head to be shaved, the oil'd-silk cap to be worn, and no medicine to be given; requesting that a light animal diet might be adopted.

These directions were complied with, and in the course of a month I had the satisfaction to find that my patient was perfectly free from the complaint, and that he was about to return to school.

Several months have elapsed since this case came under my care, and I have lately

been informed that no return has at present been observed, though a scurfy affection of the face and forehead has occasionally appeared, which retired by attention to diet, and the use of a few doses of calomel and scammony.

## CASE IX.

THE second son of the Earl of Banbury was put under my care in consequence of a scurfy and eruptive affection of the scalp, to which he had been subject for twelve months.

This young gentleman was liable to constipated bowels; his complexion was fair, and his skin delicate.

On examining his head, I observed a broad scurfy patch three inches in circumference, and several smaller places covered with incrustations.

I attempted to separate the hairs from the scalp, by using a moderate degree of

force, but could not extract them from any of the affected parts.

When the incrustations were removed I distinctly discovered several small ulcers, from which a serous discharge issued.

From these circumstances, in addition to the history that had been given me relative to this affection, viz. that the hairs had not separated from the scalp, and that the scurfy patches had been stationary, (never at any time extending beyond the space that they had at first occupied,) and that a similar appearance had taken place on the face, I considered this complaint not peculiar to the hairy scalp, but that it depended probably upon a costive and irritable habit.

Although from its duration I might have ventured on the immediate use of the solution of the nitrate of quicksilver, yet I applied the oil'd-silk cap, with the view of clearing the scalp from scurf and incrustations, directing the affected parts

to be shaved close, and administered a dose of calomel with the sulphate of potash.

On the third day I began the use of the mineral solution, which I continued for three weeks, at the expiration of which time the eruptive and ulcerated parts were completely removed, leaving only a dry scurf upon the scalp.

No relapse has yet occurred, although the state of the young gentleman's bowels has lately been constipated, and several scurfy eruptions have appeared on his face.

## CASE X.

THE second daughter of the Earl of Banbury was shewn to me at the time of my attending her brother, in consequence of a similar complaint of the scalp.

I was informed that this appearance had existed the same length of time as the one in the preceding case, and was, in every particular, nearly analogous.

Finding that the state of the digestive and hepatic functions was irregular, that her tongue was furred, and that several small scurfy patches had taken place upon the face, I attempted to improve her ge-



neral health by an occasional dose of calomel and the sulphate of potash, which materially influenced the eruptive appearance of the scalp and skin.

After this treatment I applied the mineral solution to the parts affected, which were restored in the course of three weeks to their natural state.

## CASE XI.

IN the year 1807 I was requested to see the eldest son of the Right Honourable Mr. ———, at Norwood, about twelve years of age, on whose scalp and face several scurfy spots had suddenly appeared.

On examining the head I was incapable of separating any of the hairs, and finding upon enquiry that the stomach and bowels were not duly performing their functions, I exhibited a few doses of calomel and scammony, and afterwards applied the solution of the nitrate of

quicksilver freely to the affected parts, which became well in the course of a month, without the use of any other medicine.

I have had repeated opportunities of seeing the young gentleman since this cutaneous eruption, and had the satisfaction to find that by observing the state of the bowels he has avoided any return of the complaint.

## CASE XII.

A young lady, of the name of Goldsmith, had for many months been under the care of a surgeon, for a complaint of the scalp, which was accompanied with incrustations, ulcers, and a separation of the hairs, occasioning baldness in several parts.

Steel and bark had been given during the whole of the time, and various applications used to the head, neither of which had checked the disease.

I directed the nitrico-oxyd ointment to be regularly and freely applied till inflammation was produced, which took place after the fifth day to a considerable extent.

From this time the disease ceased to spread itself, and fresh hairs, in the space of a week, were seen upon the parts that had formerly been bald.

This lady's sister and her friend, who were under the same roof, had a similar disease, and were treated in the same way with equal success.

## CASE XIII.

THE daughter of a Mr. Clarke, in Old-Brentford, had a large bald and ulcerated patch upon her scalp, which had spread to a considerable extent, accompanied with itching and a serous discharge.

The nitrico-oxyd ointment was applied in the usual manner, and in the course of ten or twelve days the appearance of fresh hairs upon the diseased parts demonstrated the complete success of the application.

## CASE XIV.

THE daughter of a Mrs. Bennett, at Hanwell, had for some months a troublesome disease of the scalp, which had resisted the effects of various applications.

The hairs were easily separated from the incrustations, and several ulcers were observable.

The nitrico-oxyd ointment was freely rubbed upon the patches for some days, which succeeded in eradicating the disease.

CASE XV.

THE foot-boy of the Rev. Mr. Raikes, of Little-Boston, Ealing, was brought to me in consequence of a complaint of the scalp, that had been stationary for six years.

It occupied a space of three inches in circumference, and was covered with hard scabs, but the hairs were firmly attached to their roots.

I directed the mineral solution, after the incrustations were removed, to be applied every morning to the part affected, which, in the course of a month, totally removed the appearance.



## CASE XVI.

THE son of a gentleman who was residing with a family in the neighbourhood of Brentford, had formerly, from his own account as well as from the appearance of the scalp, *tinea capitis contagiosa*, which disease was cured, (after many applications had been tried,) by the culinary mustard, and walnut catsup.

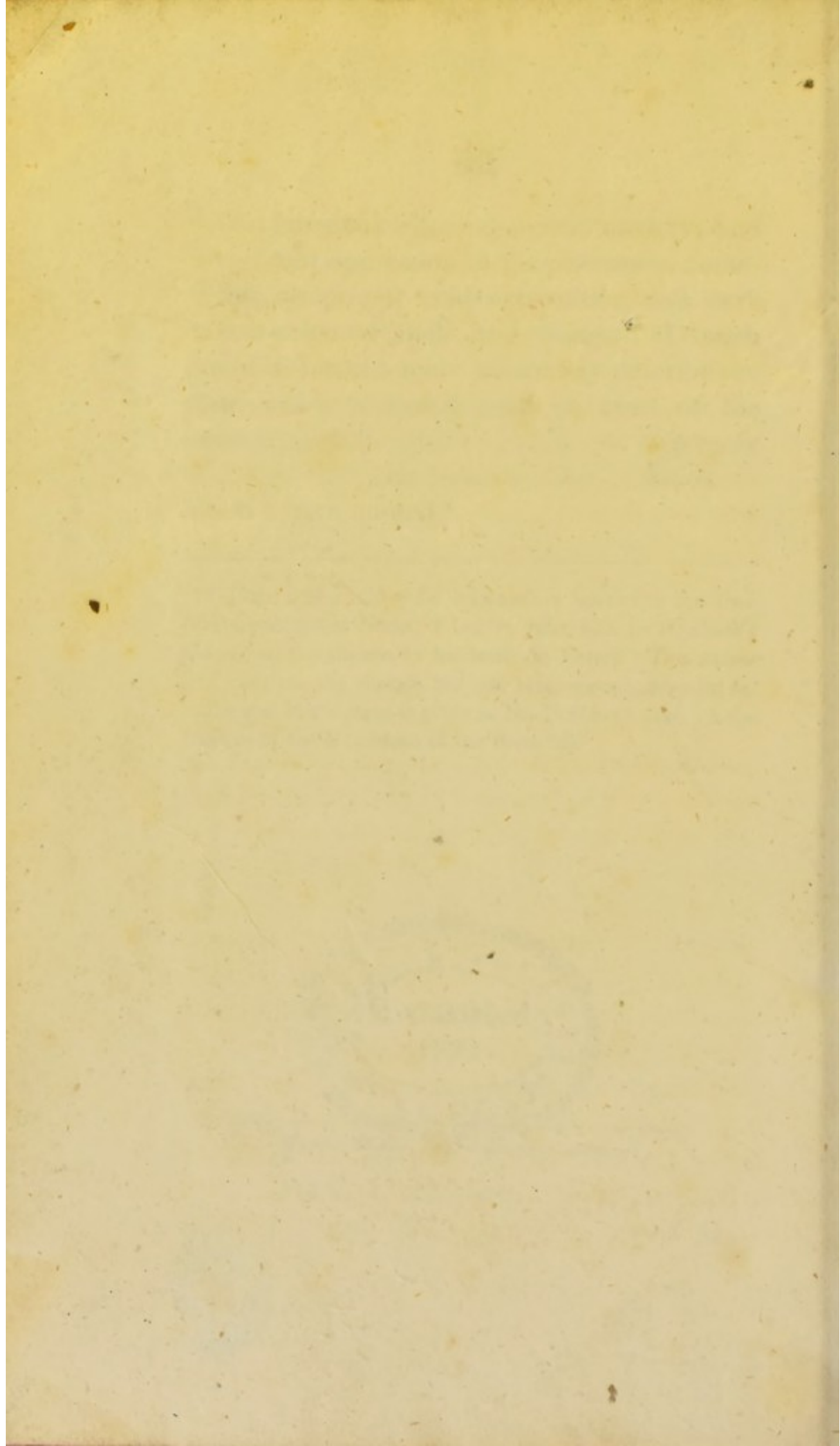
These applications had been used in a general manner to the scalp, and had induced an irritable state of the skin, which was covered with scurfy and eruptive patches.

The parents concluding that this appearance was a return of the former

complaint, renewed the application of the mustard, which aggravated the affection of the scalp, and produced several ulcers.

In this state I saw it, and finding that the hairs did not separate from the scalp, I directed a bread and water poultice to be applied, which was continued for some days, till the inflammation subsided, after which the use of the oil'd-silk cap perfectly removed the affection.

*FINIS.*



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D. H. H.

