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Milton, J. L. 1820-
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Publication/Creation

London : Robert Hardwicke, 1866.

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THE TREATMENT

OF

LUPUS.

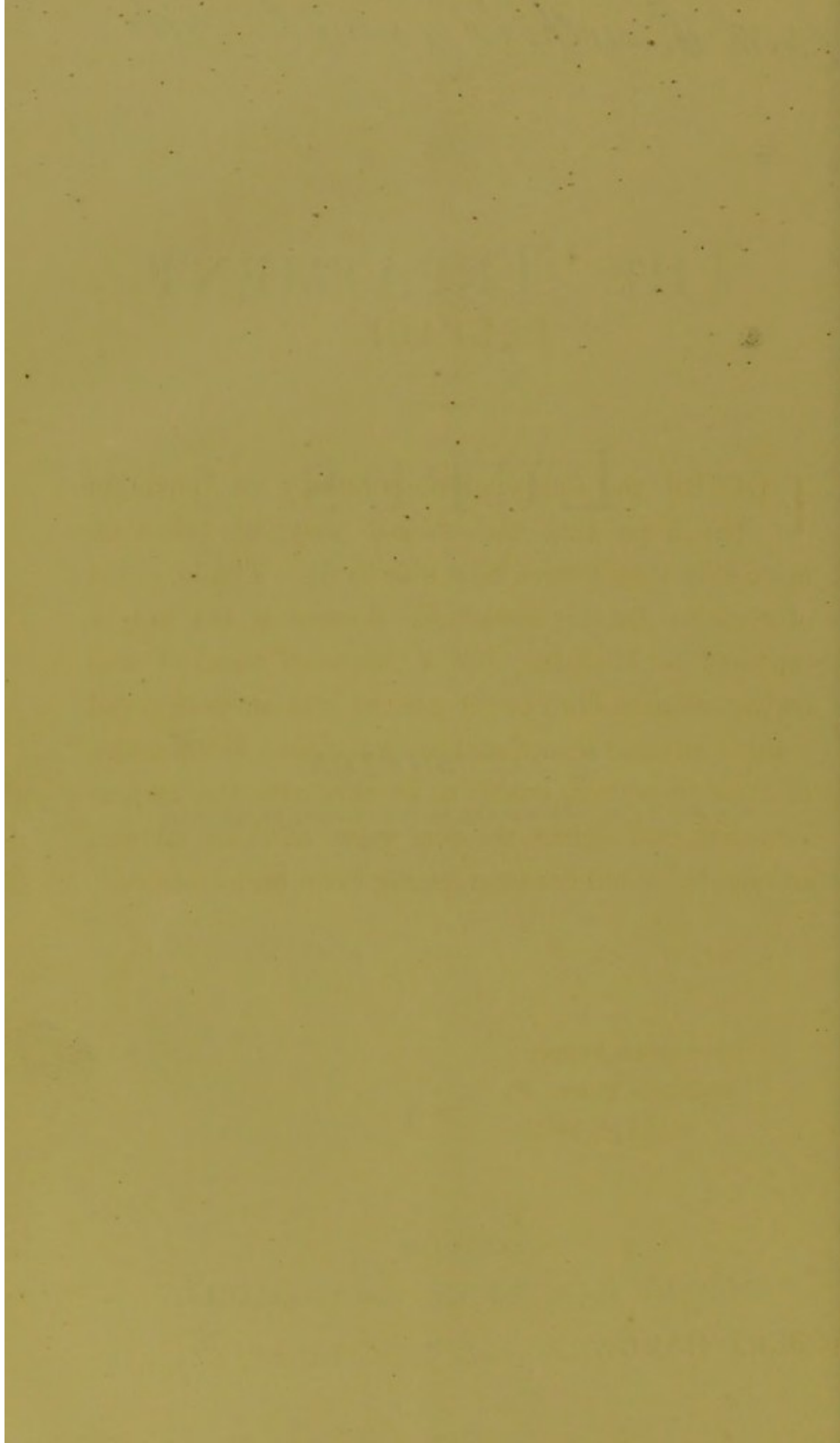
By J. L. MILTON,

SURGEON TO ST. JOHN'S HOSPITAL FOR DISEASES OF THE SKIN.

LONDON:

ROBERT HARDWICKE, 192, PICCADILLY.

1866.

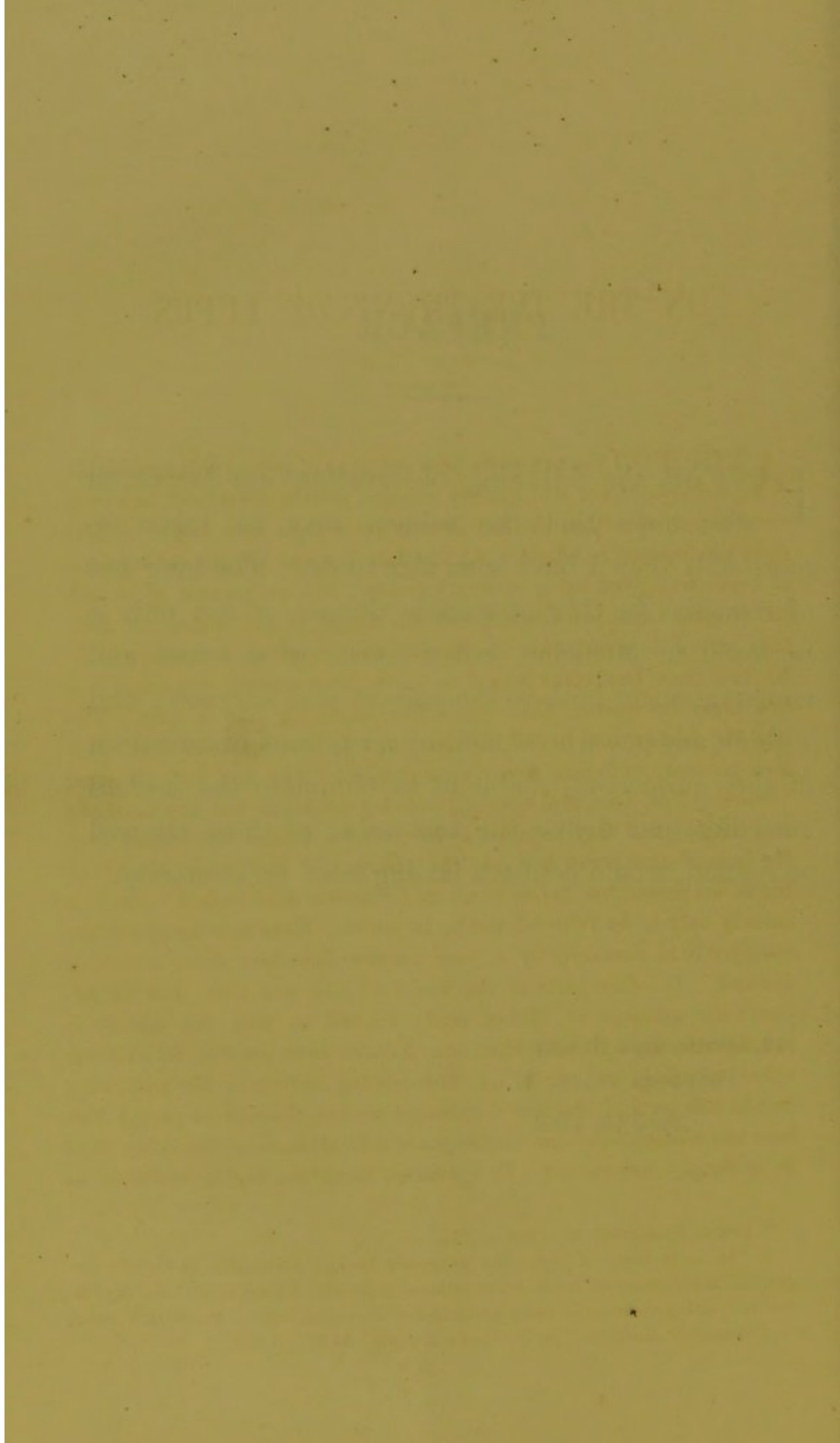


PREFACE.

I OFFER the following observations on Lupus, in the hope that the subject may be taken up more fully than I have been able to do. The long list of remedies for this intractable disease is not only a reproach to Medicine, but a source of mischief and embarrassment both to the patient and surgeon ; and I think any one who would, by a rigorous examination of their properties, enable us to eliminate the useless remedies, and define the real value of those allowed to remain, would confer a lasting boon on humanity.

19, DEVONSHIRE STREET,
PORTLAND PLACE, W.

April 10, 1866.



ON THE TREATMENT OF LUPUS.

ALTHOUGH the prospects held out to us of curing this formidable complaint are still gloomy enough, yet the treatment has been more improved within the last twenty years than men might at first sight be disposed to admit. At the date I speak of, the eating form of lupus was given up as utterly hopeless; the very name of it, *noli me tangere*, breathed despair, and all means of aid, sharp or mild, only served to exasperate its fearful and dreaded inveteracy. In Rayer's time treatment seems to have been utterly powerless: of five cases he quotes, only one offers anything like a cure. The late Mr. Liston used to tell his class that he had over and over again seen patients suffering from lupus exedens "who had lost all their features; lips, nose, and eyes; (!) nothing remained but the brainpan and tongue, and they required to be fed by a funnel introduced over the base of this organ and into the pharynx,"* and when Mr. Hunt began his researches, lupus in all its forms was still looked upon as a malady only to be relieved, not to be cured. Even now many writers consider it as removed by a very narrow boundary from incurable diseases. In other parts of the world we now and then find an enthusiastic admirer of Hebra ready to tell us that the disease is manageable enough, and that our failures here are due, like all our other mistakes, to our blind, unreasoning deference for tradition; but in this part of the world opinions resolve themselves pretty well into two classes,—the one, that lupus is difficult to cure; the other, that it is simply incurable.† It appeared, therefore, highly desirable to

* *Lancet*, September 21, 1844, p. 775.

† "In every form of lupus the prognosis, though favourable as regards the general health, must be more or less unfavourable with respect to the local disease, the latter being regarded by many as altogether incurable."—"A Practical Treatise on Diseases of the Skin," by J. Moore Neligan, M.D., p. 332.

see if a further improvement could not be effected, and I trust I shall be able to show that some improvement has been attained.

I am not going to dwell upon the pathology of lupus; what little is known of it gives us but a very imperfect guide to treatment, if indeed it can be said to yield any guide at all. Dr. Hillier's work* contains a most carefully drawn up and correct account of this part of the subject, and to his work I refer the reader. I have only to observe that lupus, as a rule, seems to attack either strong or scrofulous persons, and as I have always found tonic treatment most injurious to such patients, I am not surprised at its failing in lupus; that it may assail any temperament; that it is more common in country than in townspeople, and that it has no connection whatever with syphilis in the parent.

The high state of health which accompanies so many of these patients is something extraordinary. I took twenty-five cases at St. John's exactly as they entered. Of these, one was a poor delicate child who seemed to have been sadly neglected; another was a woman who had often been ailing and far from well, but who had never suffered from any serious illness in her life. Two boys had suffered from swollen glands in the neck,—in one a gland had suppurated, the other laboured under angular curvature of the spine; they were both reported to have had excellent health, but they were not well made; the face in both was broad, the cheek-bones large, and the muscles were relaxed and not in any way well developed. One woman could not certainly be described as unhealthy, neither could she have been set down as quite the opposite. The other twenty were remarkably well; some of them expressed their surprise that they should suffer in this way while they were totally free from any complaint, and certainly it would strike any one as singular, that people who might in every other respect have stood for models of robust constitution, who lived an active, temperate life, most of it in the country, should be afflicted with such an intractable and loathsome malady.†

I propose in this paper to follow the divisions of Copland, who distinguishes the superficial form beginning without the real tubercle,

* "Handbook of Skin Diseases," p. 197.

† The reader familiar with the literature of this disease will observe that this experience is quite opposed to that of Copland and some other writers, who consider lupus intimately connected with a scrofulous taint, chronic disorder of the digestive organs, hysteria, and derangement of the catamenia.

from the two tubercular forms—the creeping and eating lupus. I adopt it, not because this or any other division, based on such descriptions as we at present possess, can be perfect, indeed both the eating and creeping forms of lupus are certainly not tubercular in some cases, but because it offers, to my thinking, a convenient practical arrangement.

The descriptions given of lupus afford a startling proof of the inability of any writer, however lucid his style may be, to portray some diseases of the skin. Were a person unacquainted with medicine to read the accounts of different authors, he might well think that, but for the name, he was going through descriptions of different diseases. For instance, the superficial form described by Copland I take to be the same as that described by Mr. Wilson under the name of erythematous, yet the points in common are so few as to be well-nigh lost in the host of symptoms which do not accord with each other.

To the forms of lupus spoken of above should, I think, be added a variety occasionally seen in children, mostly I believe scrofulous. It much resembles the lupus non exedens simplex of Rayer,* and the lupus with hypertrophy of Copland, and stands perhaps midway between the creeping and erythematous forms. It begins with very soft tubercles, which spread but do not ulcerate; as the tubercles widen, they become moist on the surface or are covered with loose soft scales. Like the erythematous form, it generally spreads very, very slowly: I have seen it remain almost stationary for years. Sometimes its boundaries narrow and the sore shrinks in all directions, sometimes it only heals in one part to spread in another: as it heals, indelible white cicatrices are left. I have only seen it on the breast, leg, and cheek, the latter being its most frequent seat.

Many cases of sycosis should also, I think, be classed as lupus. I allude to those which attack the upper part of the surface covered by the whiskers and moustache, and not unfrequently the skin adjoining. The disease shows itself in a slow growth of small hard tubercles, red, or of the same colour as the skin. They are extremely slow both in their growth and their decay: at times they become covered with very small, thin, dirty, greenish scales, and when they melt away they leave little pits behind. Sometimes the tubercles scarcely rise above the level of the skin; in some persons

* "Theoretical and Practical Treatise," by P. Rayer, M.D., p. 674.

we even see them represented by a fiery red margin of irregular shape, in the centre of which is seen the white puckered scar left by the disease,—a true creeping lupus on a site covered by hair. This disease is often called sycosis, but I see nothing that separates it from lupus.

It is scarcely possible for any person to form a positive or even a very reliable opinion as to the merits of all the remedies laid down for lupus. They are too numerous for that : Dr. Neligan says they are almost too many to tell by name. I will, therefore, take them *en masse*, and I believe I am scarcely going too far when I say that, with scarcely an exception, they may be resolved into two great classes,—those of doubtful value, and those of no value at all.

Among the remedies of doubtful value I would put the salts of barium, antimony, and soda ; cod-liver oil ; most of those preparations of iodine, mercury, and potass, which are not absolutely useless, particularly alterative doses of mercury, or combinations of it with iodine, or iodine and arsenic, as in Donovan's solution. Were I to rely upon my own observations, I should not accord the honour of even a doubtful value to the salts of barium, antimony, and soda,—I would at once set them down as useless ; but I retain them because I presume authors would not continue to recommend them* unless they had some ground for doing so. As to the others, when I say that they are of doubtful value, I do not mean as to the cures said to have been made with them, but that we cannot really rely upon any of them, or any combination of them. For instance, were half a dozen cases of lupus put before a surgeon, he could not say that with these means he could cure so many and relieve so many cases. Cod-liver oil, iodine, and arsenic are three of the most powerful and reliable of these remedies ; yet I believe no one, except it be M. Lemery, looks upon cod-liver oil as a specific in any given proportion of cases. M. Devergie, his own colleague, who has yet great faith in the oil, says M. Lemery has overestimated its effects. Mr. Hunt even finds that arsenic alone often fails in the creeping form of lupus, and M. Devergie says that treatment with iodine and iodide of potassium,* aided by the use of Vienna and Canquoin paste, *did not cure one out of twenty-six patients on whom it was tried for three months !*

The remedies of no value at all I hold to be steel, quinine, mineral acids, bitters, opium, wine and beer, change of air and sea-bathing.

* "Treatment of Diseases of the Skin," by Dr. William Frazer, p. 30.

I am well aware that a widely different opinion is held ; some writers—Dr. Copland amongst the number—looking upon good food, wine, beer, and change of air as indispensable. I wish it to be distinctly understood that I do not dispute the power such means may have over the general health ; on the contrary, I am free to admit that, judiciously given, they may do good. A mineral acid and bitter will clean the tongue and get up an appetite ; wine, beer, and spirits may renovate the strength when failing ; change of air and scene may do away with some of the irksomeness that always accompanies a long and tedious complaint ; but it is not often that even such reasons can be given. These patients are mostly strong, in good health, and frequently living in the country or by the sea-side. Dr. Copland says,* a pure, mild, and dry air is requisite to a cure. I am at a loss to know where such an air is to be found in England ; and most certainly, were such a condition absolutely necessary, ninety-nine patients out of every hundred must go uncured.

The external remedies again I would, with few exceptions, divide into two classes,—the useless and the hurtful. Under the head of useless I would include most of those not strong enough to give pain, while nearly all those strong enough to give pain might safely be classed as hurtful. Some persons may consider this going too far ; I can only reply that I see no other inference to be drawn. That lupus is occasionally arrested, and in a few rare cases cured by the free use of Vienna paste, chloride of zinc, nitrate of mercury, &c., I at once admit, because the fact has been stated on such excellent authority, though for my own part I have never been able to effect a cure with such remedies. I have destroyed all the diseased surface, as I thought, three times in succession with chloride of zinc, and yet the disease has returned. Still worse, I have seen several cases of relapse after what must have appeared to the surgeon a perfect removal. Lupus† is a very common disease, yet we find extremely few cures by such means recorded. When we see such a long list of caustics and such very vague statements about their real power over the disease ; when an author tells us that chloride of zinc may be used, and should it fail, then Vienna paste may be tried, or pâte de Canquoin, or dried sulphate of zinc, &c. &c., it is enough to make one hesitate about taking their remedial powers for granted, even in the hands of those accustomed to use them. Such phrases admit of

* "Dictionary of Practical Medicine," vol. ii. p. 792.

† See also *Dublin Journal of Medical Science*, September, 1840, p. 98.

almost any meaning we like to give. Were a writer to say that out of twenty cases of a particular kind of lupus, and in a certain stage, so many would very likely be cured, and most likely all would be relieved, by using a particular caustic, we should be dealing with something that approached to tangible results; but with the exception of Mr. Hunt and one or two others, writers do not express themselves with this kind of precision.

Again, the dreadful pain caustics occasion is a great drawback to their employment. In a strong, healthy, resolute person, it is perhaps not such a very serious matter to cauterize one or two ulcers, though that is bad enough. But when the disease extends over a large surface, when there are several ulcers, or when the patient is a child or very sensitive to pain, the suffering caused by a powerful caustic is perfectly frightful, and must ever limit their use to a very narrow circle. Indeed I have often found that merely painting a small patch with strong solution of nitrate of silver produced such pain for hours that the patients would not allow it to be repeated.

When we analyze the treatment adopted by the most successful practitioners, we find that mercury, iodine, and arsenic, enter more or less into the prescriptions of all. Mr. Hunt* has almost unbounded faith in the virtues of arsenic against the eating form of lupus. He speaks of one case of twenty-four years' standing checked in two months by the use of this mineral, and of another of six years' duration, which also yielded. In the creeping form, however, this remedy was less efficacious, and out of seven cases not one was perfectly cured by it. Mr. Wilson gives Donovan's solution along with cod-liver oil, exchanging the solution sometimes for Fowler's or De Valangin's, which are prescribed along with the protoioduret of mercury, but he speaks guardedly of the hopes to be entertained from the employment of these remedies. "The prognosis," he says, "is uncertain and unsatisfactory, the disease being always tedious, and resisting often the best-planned treatment."† Dr. Willshire‡ speaks of superficial lupus, which had lasted fourteen years, getting rapidly and thoroughly well under the use of arsenic and cod-liver oil. Mr. Startin§ relies upon small and

* *Medical Times and Gazette*, 1851, vol. i. p. 120.

† "On Diseases of the Skin," 1863, p. 342.

‡ *Lancet*, 1859, vol. ii. p. 186.

§ *Medical Times and Gazette*, 1858, vol. ii. p. 237.

long-continued doses of mercury, either in the shape of calomel and opium, or the mercury mixture recommended by him ; he also gives cod-liver oil. In the paper describing this treatment, an attempt is made to explain the great success of mercury in this complaint, by supposing there may have been a syphilitic taint, a point to which I shall presently revert. Dr. Anthony Todd Thompson, who used to be very successful in the treatment of lupus, relied upon iodine, arsenic, and biniodide of mercury, with the occasional use of cod-liver oil and quinine. When he began the treatment, if there was anæmia he gave the patient cod-liver oil for ten or fourteen days, with iodide of iron ; he then ordered an alterative treatment with biniodide of arsenic ; and when this could not be borne, he gave the liquor potassæ arsenitis. He found conium very useful, and often touched the edges of the ulcers with nitric acid or a solution of nitrate of silver, two or three drachms to an ounce. If pale, unhealthy, fungous granulations sprang up, he employed ointment of the iodide of sulphur, or a very weak ointment of the biniodide of arsenic, or of either of the iodides of mercury. Four cases of the eating form of lupus are recorded in his work,* in which the above treatment was adopted with perfect success. Two of these were indeed cured very quickly, one in twenty-eight, the other in thirty-four days, and though one is only reported cured at the end of half a year, yet as the mean time is only eighty days for each case, the treatment must be regarded as unusually successful ; indeed, I do not understand lupus being even affected by internal means in four weeks.

These cases afford as strong evidence as I could wish to bring forward, of the difficulty there is in getting at the exact state of the case in such matters. Dr. Thompson's practice would naturally afford many instances of lupus ; he was a most successful practitioner and an earnest truthful man ; not less so his editor, Dr. Parkes ; yet all we have to guide us is a brief analysis of four cases, none of them of any great severity or calculated to give us any idea of the usual proportion of cures to failures, the only statistical results worth knowing. Till we have evidence of this kind, men will always be able to draw from our written records almost any meaning they like, and gloom, hope, or despair will predominate according to the convictions of the reader, not the strict facts of the case.

* *Monthly Journal*, February, 1850, p. 149. Also Braithwaite's "Retrospect," vol. xxi. p. 189.

Dr. Copland * enumerates the oil of Dippel, arsenic, mercury, and iodine, as if they were clearly the remedies to be preferred, and quotes the testimony of Byron, Graves, Carmichael, and others in favour of Donovan's solution, even in cases "which had withstood iodine, arsenic, and mercury, when separately or otherwise employed than in the form of an iodide of arsenic and mercury;" evidence quite opposed to that of Mr. Startin and Mr. Hunt, not very strongly borne out by Mr. Wilson's gloomy prognosis, and certainly at variance with what I have seen.

Whether what I have now to say will show lupus to be much more curable than is generally imagined, I must leave to time. So far as the facts at present go, there is good reason, I think, to conclude that the disease *may always be relieved, and generally, if not always, cured.*

I wish it, however, to be quite clearly understood that this only applies to cases *where treatment is allowed fair play.* If patients will leave off treatment every now and then, if they will try all the remedies which friends suggest, if they object, as they often do, to take any medicine unless they are assured that it contains no mercury or arsenic, if they will be refractory about diet, and will expose themselves to agencies which aggravate the disease, the surgeon may struggle in vain; the only plan is to throw the case up. It seems a sad and strange thing, that persons undergoing such fearful disfigurement can not be brought to take the most ordinary precautions; but such is the case, and it happens so often that I have sometimes asked myself whether the peculiar disposition of the tissues which develops this complaint is not attended with some peculiar disposition of the brain.

I don't speak of cases where patients have got weary of attending for months in vain, or of suffering equally in vain the torture caused by caustics; I speak of those where the most frivolous excuses are expected to be admitted. One girl applied at St. John's Hospital with lupus of the face, which had lasted quite two years, and had destroyed a very considerable portion of the skin; *during the whole of this time she had never once applied for relief;* a woman, half of whose face was covered with lupus non exedens, refused to go on with treatment because a solution of nitrate of silver applied to it blackened the skin; a young man already fearfully mutilated by lupus exedens

* "Dictionary of Practical Medicine," vol. ii.

was sent to the hospital by his master : at the end of three or four days the restraint of hospital life so far prevailed over his desire to get well, that it was found necessary to watch him in order to prevent his tampering with his complaint, and thus getting an excuse to be sent home. Like many others, he seemed to have no idea that his appearance could raise horror or disgust among strangers. As to those who will leave off treatment just as they are getting well, I believe there is just one remedy for them—giving them up.

The remedies I have to propose are much the same as others use, arsenic, mercury, and sometimes iodine ; the difference lies in the mode of giving them ; *but this difference is just the most important feature in the whole matter*, and one to which I was led, not by any desire to introduce a novelty, *but my utter failure with ordinary methods.*

For instance, the arsenic should, I think, always be prescribed in pure simple solution, that is to say, without either mercury or iodide of potassium, and equally without that useless and sickly ingredient, the compound tincture of lavender ; but whether Fowler's or de Valangin's solution is employed, appears to me a matter of no moment. The preparation the surgeon is most accustomed to is always the most suitable. I may here state that in speaking of my own mode of treatment, I invariably refer to Fowler's solution, the liquor potassæ arsenitis of the London Pharmacopœia.

Arsenic should be given on Mr. Hunt's plan, *immediately after meals or with food*, and quite separately from other medicines. As to the dose, it must vary so much, that *only experience in the individual case in hand can determine it.* In almost every case a much larger dose will be required than in any other disease, and a *quantity must always be given sufficient to produce some disorder of the stomach.* Till this is done, arsenic seems to me powerless against the complaint. Under no circumstances, when once begun with, should it be given up. Some persons affected with lupus bear arsenic very badly at first, but this can always be overcome. I had a remarkably healthy-looking woman under my care for this disease, who for a long time could not take more than five minims of Fowler's solution daily, and she only succeeded in retaining this on her stomach by swallowing it last thing at night ; yet with care she got to take fifteen minims daily. Others, by no means more healthy or stronger-looking, seem as if they could swallow almost any quantity of it : I have given some of those patients 250, 300, and one even 400 minims of the liquor potassæ arsenitis weekly : of course these were extreme cases,

but many persons can be brought to bear easily 200 to 250 weekly. The only safe plan then, that I know of, is to begin with five-minim doses three times a day. If at the end of a few days this quantity brings on sickness or nausea, coated state of the tongue, headache, or great languor, the dose is quite large enough, and instead of being increased may possibly require to be lessened after a few days. But if nothing of this kind occurs, or if such symptoms have occurred and have been subdued, double the amount may be ordered and continued steadily for a few days to see whether any disturbance of the system sets in—if so, no further increase will be requisite for a little time at any rate, or even a reduction may again be called for ; but if not, fifteen minims three times daily may be given with the utmost confidence. With proper care, nothing is likely to ensue beyond trifling sickness.

It is to Mr. Hunt that society owes the inestimable benefit of knowing the control which arsenic exerts over the eating form of lupus. Suspecting that the benefit arising from the use of arsenical paste in this affection was really owing to the absorption of the mineral, he was led to a series of observations which convinced him that this suspicion was right, and that arsenic should be given as a medicine. Even if Mr. Hunt's claim to the priority of discovery be contested, the merit of diffusing the practice belongs solely to him ; he inquired of all the surgeons he could, as to whether or not they used arsenic for this complaint, and out of seventy-five persons who answered his inquiries on this head, not one was found who gave it internally, and only one who employed it outwardly !

When the tongue is very much coated from the action of the arsenic, an artificial toleration to a considerable extent can often be induced by giving nitric acid in some bitter infusion, a short time, such as half an hour, before each meal. It is of the greatest importance to attend to this point. With the assistance of these medicines, the tongue will become clean, the nausea will subside, and languor will give place to strength and appetite ; so that a patient to whom the very thought of the arsenic would otherwise become revolting, can persevere in the use of it.

This improvement in the health is often not a little accelerated by the use of a medicine which, *perhaps beyond all others, tends to check the progress of lupus* ; I speak of calomel. I have tried and seen others try, many preparations of mercury in this complaint, but I have never found any one of them even approach the chloride. The

patients constantly notice its powerful influence; they often volunteer the information that they have begun to mend "ever since they took the white powders," and not only do they feel better generally, but the sensation of heat, thickness, and heaviness in the part, from which many suffer, begins at once to abate. One woman under my care for lupus of the nose, told me that for two years previous to taking the powders, the nose, especially when she stooped, always felt three or four times as heavy as it did after they had been given. Another patient, a young man, who had suffered from lupus exedens for nine years, after taking calomel for rather less than three weeks, reported that the stiffness which he had felt almost from the first was decidedly better.

But there must be no mistake as to the mode of giving calomel. Used as an alterative, I never saw it do the least good; besides, when so employed, it must, sooner or later, and often within a very short time, be abandoned on account of the soreness of the mouth it brings on. *It is to be used as a purgative.* At first a small dose, as a grain for instance, may be given twice a week; if the calomel be good, this will generally suffice for the first week or two. So soon as it begins to lose its effect, the quantity should be increased, and the action of the mercury be hastened by an aperient containing magnesia: half a teaspoonful to a teaspoonful of the heavy calcined magnesia will generally answer very well.* Some persons are very easily acted on, for a long time, by a moderate dose of calomel; others, some of them persons who cannot bear arsenic, seem almost insensible to its influence. I have had strong men under my care who could not take more than one or two grains. One man, who suffered not the slightest inconvenience from 400 minims weekly of the arsenical solution, never could get beyond two grains of calomel. Yet some delicate persons require from five to ten grains, and one woman, who by mistake took a scruple weekly for more than a fortnight, not only suffered in no way, but said she felt all the better. Whatever quantity, however, may be necessary to act upon the bowels, that quantity must be given. *Purging is absolutely necessary, anything short of it I believe to be useless;* and whatever incredulity the statement may elicit, I still think facts warrant me in saying that purging is one of the best remedies against great intolerance of arsenic.

* Or a dose of the following mixture: ℞ Magnes. Sulph. ʒss; Magnes. Calc. pond. ʒiiss; Tinct. Zingib. ʒiiss; Tinct. Cardam. c. ʒss; Aq. Ment. Pip. ad ʒiv.; Pars quarta pro re nata mane sumenda.

With regard to the iodide of potassium, I would restrict its use to cases of lupus *which are confined to the limbs*. I have never seen it exert any appreciable influence over lupus of the face, or over those ulcers on the limbs which sometimes accompany it, though I tried it in at least twenty cases, both alone and in conjunction with other medicines. Possibly it may aid in producing absorption of the tubercles and thickening, but I have not been able myself to detect any sign of such action. But when the disease assails the arm or knee, it is as nearly a specific as, I should think, any medicine can well be. It is only required in moderate doses at first, and used in this way it never disturbs the health; as its action seems to flag after a short time, the dose should be slightly raised, at least once in a fortnight. It is, perhaps, best given in some bitter infusion, like quassia, and a little before meals.

I shall be told that the cases where its influence was so marked were instances of syphilitic lupus. Some writers, indeed,* seem to think that lupus in any part, like struma, is chiefly dependent for its origin upon an inherited syphilitic taint. It may be so, but there are circumstances about both views which I don't quite understand. I have been utterly unable in some of these cases to trace any previous history of syphilis, or any symptoms of this disease. The patients, though cross-questioned, utterly denied ever having contracted syphilis; and it seems strange that persons who had no motives for concealment, who did not hesitate to say that they had frequently had gonorrhœa, should persist in asserting that they had never had a sore of any kind. In my youth syphilis was almost unknown, except by name, in many parts of the county where I lived. My master had by far the largest practice there, and yet I never saw a case of syphilis during more than four years. But lupus was not unfrequent, and scrofula in its worst forms was common enough. I have known struma break out in families where the parents had resided for twenty or thirty years on the same spot, without a shadow of suspicion attaching itself to either side, though every person about knew them, and must have known, too, if anything had been wrong.

I have now, I trust, brought forward valid grounds for not trusting to the excellent solution invented by Mr. Donovan. To sum them up, I may briefly say that it failed in my hands, that it deals in fixed

* "A Practical Treatise on Diseases of the Skin," by J. Moore Neligan, M.D., M.R.I.A., p. 330.

quantities, whereas one patient bears mercury well and another very badly—one person seems almost insensible to the action of arsenic, while another feels the first dose, and that at one time arsenic is given where it is useless, and at another iodide of potassium where it is not needed.

I regret that I must add to the list of remedies with which I failed, lemon-juice, so strongly recommended by Mr. Weeden Cooke, and of which I entertained great hopes, from reading the account of his success. I tried it fairly with several patients, not only in the doses given by Mr. Cooke, but in much larger quantities, using both the bottled and the fresh juice, squeezed from the lemons immediately before it was given. In no one instance, however, did I notice any particular effect from its employment.

With regard to outward applications, I believe that their principal value is restricted to excluding the air, and that those are the best caustics which effect this most certainly and with the least pain. Perhaps the nitrates achieve this result more certainly than any other means. When the patient can remain indoors, and does not care about the dark stains caused by it, the nitrate of silver may be used; * it is an excellent remedy either solid or in saturated solution. In the lupus of children, previously spoken of, even a very weak solution can scarcely be borne. Here it is not a bad plan to use a solution of sulphate of copper † for some little time till the sensibility has become rather deadened. The acid nitrate of mercury is a very valuable preparation, and has the advantage of not forming so dark a crust; it is peculiarly suited for small, not very sensitive ulcers and tubercles. It may be brushed with a glass brush over the part, and should be used at first diluted with water till the full strength can be borne. When applied, a basin of water should always be at hand, and so soon as ever the pain begins to be felt, the surface should be freely washed. The yellow nitrate of mercury may also be used in the form of ointment made with the lard as prepared by Mr. Squire—it is chiefly adapted to those cases where there is only slight or superficial ulceration, and to the lupoid form of sycosis; it answers very well for those patients who cannot well have anything applied which produces a visible mark.

* It was a favourite remedy with Rayer.—“Theoretical and Practical Treatise,” p. 681.

† ℞ Cupri Sulph. gr. vj. Aquæ Rosæ ℥ij.

These are the only external means in which I feel any confidence, and even these I look upon solely as so many aids to external treatment. If they are relied upon, both patient and surgeon must lay their account to the possibility, nay, even the great probability, of a relapse. Mr. Hunt, who has had a very extensive practice in these diseases, says the practice of using caustics is not only barbarous but useless,* and M. Rayer distinctly says that whatever caustic may be used it must always be repeated, often twenty or thirty times. Dr. Parkes, a most able and careful observer, entertains a very indifferent opinion of their value.† It is true that views utterly opposed to these have been held by very good surgeons. Mr. Liston, for instance, thought that local treatment was alone to be depended on, and always used the chloride of zinc unsparingly. Mr. Gay, too,‡ has seen the best results from the use of the pernitrate of mercury in lupus exedens. Professor Bennett seems to entertain a similar view. M. Cazenave thinks there is nothing like the biniodide of mercury suspended in oil; but he admits that its action is very painful. Professor Hardy also clings to the biniodide. Mr. Wilson uses caustics, though he expresses himself very guardedly. Dr. Hillier eulogizes the iodide of starch, recommended by Mr. Marshall; he says its use is almost unaccompanied by pain. Dr. Frazer says that whatever medicine be given, local treatment is still of primary importance. Dr. Danzel, of Hamburg, looks upon solution of hydrochlorate of gold as more powerful and less painful than other caustics. Still it is clear, from what he says, that its operation is most severe. He uses a solution from half a scruple to a scruple in a drachm of distilled water, and works it deep into the bed of the ulcer by means of a fish-bone or glass style.§ Hebra|| relies upon the solid nitrate of silver, freely applied, and iodized glycerine;¶ the latter being principally employed in the erythematous form. Cod-liver oil is almost his sole internal remedy.

As to the diet in lupus, all regulations bearing upon it should, I think, have special reference to three points,—the state of the health, of the digestion, and of the appetite.

* "A Guide to the Treatment of Diseases of the Skin." 1857.

† "Practical Treatise on Diseases affecting the Skin," by the late A. T. Thomson. 1850.

‡ *British Medical Journal*, 1860, Jan. 18th.

§ *Dublin Medical Press*, March 2, 1864.

|| *Wiener Spital Zeitung*, 1860. No. 6.

¶ A compound of pure iodine, iodide of potassium, and glycerine.

When the patient is in good health, and never suffers, or very rarely, from indigestion, and when the appetite is good, he may be safely trusted to eat or drink anything he likes, so long as moderation is observed. I have not the same amount of faith in the minutiae of diet which many persons profess; I think so many restrictions weary and sicken the patient; but I have seen many relapses which, on fair examination, I could only attribute to indulgence, and I have been particularly struck with the frequency of this occurrence at Christmas time among the out-patients, while in-patients, who were strictly watched over, escaped. Besides, indulgence is apt to lead to excess, and excess breaks in upon treatment.

When the health is low, when there is exhaustion or wasting, or when the patient is very delicate, as may be the case with some two or three out of twenty, a good supply of hot, fat roast meat daily, with stout or pale ale, rum-and-milk, or brandy, may be allowed. It is not really necessary in any case to order hot fresh meat more than once a day: it is best given, I think, only for dinner, and this should be in the middle of the day, at which time, too, the stout or pale ale should be taken. Stout seems better suited for winter, and pale ale for hot weather. The rum-and-milk should be given in the morning, about two hours before the patient gets up; sometimes, when the patient is very sleepless, it may be taken as early as two or three o'clock, when it will be found a capital soother. But it is essential that no pains should be spared to procure these things of good quality, about which most persons never trouble themselves, and particularly with respect to rum-and-milk. Any fiery stuff bearing the name passes current for rum, and the abominable dilution sold for milk is accepted with equal good faith. It is this kind of apathy that throws discredit upon such means. A glass of good rum-and-milk is one of the best tonics we possess, while nasty, hot, new rum sickens the patient and brings on the worst kind of headache; and bad milk, made worse by a large addition of water, can yield no nourishment in the quantity usually taken. The milk from the famous Friern Manor dairy is as pure as any milk can well be, and may always be depended upon. The quantity must vary according to the age of the patient. Children, I think, scarcely need it. Young persons may begin with two teaspoonfuls of rum and eight or ten of milk, and the dose may be gradually increased to four times this amount. Grown-up patients may begin with two tablespoonfuls of rum and eight or ten of milk, gradually raising the quantity taken. I have frequently given them

five or six tablespoonfuls of rum daily with excellent results. Sometimes for the first week or two some degree of heaviness or headache is felt, but this need not make any difference ; in some persons it continues to the very last, but on no account should the patient give up for this reason.

Children seem to do better on pale brandy. I order it very freely for these little people, and even for infants attacked with diseases of the skin attended by great irritation or exhaustion, such as eczema, syphilis, &c. It is surprising how well *good* pale brandy agrees with them and what doses of it they will bear. They get quite fat upon it, and mothers, who were horrified at the idea of infants having two or three tablespoonfuls of brandy in a day, soon come to ask if they may go on with it, as it has agreed so well.

As regards baths, washing, exercise, &c., I would advise that a surface affected with lupus *should not on any consideration be touched with cold water* ; what is used for washing should be as hot as the skin can bear it. The only soap which seems to agree with the skin is the transparent soap made by Messrs. Pears, of Isleworth, for St. John's Hospital.* So soon as ever the part is washed and dried, it should be covered with ointment of the nitrate of mercury, so as at once and totally to exclude the air. It is often very difficult to persuade patients suffering under this complaint to enter a bath of any kind, and, therefore, the only plan is to let them have a free supply of hot water at home two or three times weekly. My experience of cold bathing and of river or sea-bathing, in lupus, is most unsatisfactory. Of the value of exercise, too, during the cure of lupus, I am far from being persuaded. It is quite certain that the disease will hold its course unchecked even when patients are breathing as pure air as can be found in England, and taking active daily exercise, and I have been repeatedly struck with the improvement that has followed when a patient has been confined to the house for a few days, and by the persistent exasperation of the disease after going out even for an hour. A lupoid surface bears the action of the air almost as badly as do the walls of an abscess, and though, *if we could effectually protect it*, exercise would of course be most desirable, yet as this is almost impracticable, the *first consideration is, I think, to keep the parts guarded against irritants in whatever form they may come.*

I now append a few cases treated on the principles I have tried to

* Sold by Mr. Priest, Parliament Street.

lay down. In order not to occupy more space than possible, they are told very shortly ; but should any of my readers feel disposed to see the cases for themselves, I shall be very happy to show them. It is obvious that such a list must, if it contain all the cases, be incomplete, as some of these always remain under treatment, and if it do not contain them all, then it is imperfect, because it is liable to the objection of the cases being picked.

CASE 1.—S. R——, a strong, compact, healthy woman, of middle age, entered May 23, 1863, with lupus of the lower part of the left thigh. It was of long standing, and had been supposed by one hospital surgeon to be due to diseased bone, but none could be found. She declined to be an in-patient on account of her family, and begged I would use no caustics, as she had suffered so much from them and all in vain. She was treated with iodide of potassium, and the sore healed ; it relapsed, owing as she thought to a bad strain. There was a ragged narrow opening which I wanted to lay open and cauterize, but she would not allow it, and left only partially cured. Two years after she came again, the disease having spread no further ; she was put under the same treatment, and this time got well. She is now again a patient, having been recently attacked with lepra.

CASE 2.—Catherine C——, aged 35, a healthy woman in every other respect, was admitted June 26, 1864, with creeping lupus, extending over nearly all the left side of the forehead. There was a large tenacious crust in the centre. No trace of tubercles, the disease seeming to spread entirely by the margin. Treated with arsenic, followed by calomel and compound jalap powder. Nearly cured in two months ; she then went to the sea-side, and returned much worse. Attended so irregularly that all medicines were discontinued, and treatment was restricted to application of acid nitrate of mercury. She was three times nearly well, and contrived each time to bring about a relapse by absenting herself and indulging in some way or other. In the progress of the disease the hairy scalp has been invaded, and the left upper eyelid nearly destroyed. Remains under treatment, if it can be called by that name. She declined to become an in-patient.

CASE 3.—Emma H——, aged 24, pale but in every respect healthy,

was admitted April 26, 1864, with creeping lupus in the form of an eruption of tubercles, scattered very thickly over the face from the lower eyelids almost to the mouth and across the whole breadth of the cheek. Some of these tubercles were undergoing a very slow absorption. The patient's account was that she had had this complaint ever since she was a baby. She was treated with only liquor arsenicalis. A perfect cure followed, there being only one slight relapse during treatment and that promptly quelled. She was seen long after, when it was found that there had been no return of the disease.

CASE 4.—Mary Ann P——, aged 28, admitted July, 1864, with lupus extending over the whole of the face and great part of the scalp. It was a shocking case of disfigurement, every part of the face being seamed with scars, and might be described as an instance of creeping lupus running at places into the more severe and destructive variety. All this mischief had been done in a year and a half. She was not strong or very healthy-looking, neither could she be called, except as regarded the disease, unhealthy. She was treated with arsenical solution, but in too small doses, as this was one of the cases in which I restricted myself to the quantities generally ordered. The arsenic was aided by calomel, and for a short time by iodide of potassium in bitters; acid nitrate of mercury and nitrate of silver were applied to the ulcers. Twice I had nearly cured her, and both times she left off attending and had a bad relapse. I could not induce her to become an in-patient, and as she was always committing some irregularity or making some mistake about the medicine, I threatened to discharge her; after which she came for some time pretty punctually, when just as I was flattering myself for the third time that I should effect a cure, she suddenly disappeared.

CASE 5.—Eliza W——, aged 43, was admitted August 1, 1864, with creeping lupus. She was a remarkably healthy-looking woman. From her statement the disease had begun quite three years previously, in the course of which time it had gradually extended over the chin and lower lip, while an offshoot had begun to creep along under the chin towards the right ear. It was purely tubercular; every time the disease spread at all, a tubercle formed and grew red, while the skin felt to her thick and stiff. None of these ulcerated, but they slowly melted away, and where they had been, the skin grew whitish and thin, looking as if it had been seared.

She was treated for some time with liquor arsenicalis and lemon-juice, but she took both very irregularly. A single dose of the arsenic always made her sick, she said, and the only way she could take it was just before going to bed. However, by dint of frightening her, I got her to persevere a little, and by the 17th of March, 1865, she was reported as almost quite well, the whole surface having turned pale, and the spot under the chin having faded. She now went into the country, took no medicine for some time, and came back much worse—in fact, as bad as ever.

The arsenic was now tried in five-minim doses twice daily ; but she could not bear it for any length of time, and it was reduced to one dose. In May iodide of potassium was begun with in very small doses, given in infusion of quassia, and a grain of calomel every third night was given. The action of this was at first very severe, but she felt very much better and lighter after it ; moreover, she was now in a short time able to bear three doses of liquor arsenicalis daily. Her appetite, too, improved. The nitrate of silver was applied very gently to the tubercles, as she was extremely sensitive to pain, and later on they were touched with the acid nitrate of mercury. By the end of October she seemed cured, and the first thing she did was to leave off treatment for a considerable time, one result of which was that she re-appeared with a tubercle in the upper part of the lower lip, almost as large as a small nut, the rapid growth of which so alarmed her that for some time she attended very regularly. The tubercle, for all else was cured, was touched twice a week with acid nitrate of mercury, and for a time the liquor arsenicalis was really taken three times a day in five-minim doses. In a little time the swelling was subdued, and it could scarcely be felt. Again she disappeared, having this time for excuse an attack of neuralgia, which certainly pulled her down a good deal. The last tubercle can just be traced by the finger, and that is all. It was touched gently with acid nitrate of mercury, and when the patient was seen about the middle of February, this too had gone.

CASE 6.—J. G——, a powerful healthy-looking man, 38 years old, entered October 11, 1864, as out-patient, with creeping lupus on the forehead. Twenty-seven years before this he had been thrown from horseback, and had caught a bad jagged cut on the forehead, into which the dirt and gravel were deeply forced. The wound healed very slowly, and in about a year the scar which formed began to get knotty and very red. This went on spreading for about

eighteen years, at which time he had an opportunity of showing it to Sir Philip Crampton, who at once burned it with some kind of caustic and for the time healed it; but it soon broke out again, and now covers a great part of the forehead. The surface is tubercular in parts, and where not covered with scales is of a fiery red.

The liquor arsenicalis was given in doses of five minims three times a day, but he did not take it very regularly till about the middle of November, when he decidedly improved in this respect, after which a very rapid amendment took place. On the 16th of December the nitrate of silver was applied for the first time, and continued to be so till the 10th of January, when he attended for the last time, being apparently quite cured. He was strongly urged to come a little longer, but I did not see him again.

CASE 7.—Joseph P——, aged 6, was admitted as out-patient October 25, 1864, with creeping lupus on the right cheek. He was a broad-built, but not a well-formed lad; his muscles were flabby and not filled out; he had also the mark of a suppurated gland under the chin. His mother, however, said she had never known him ill. The diseased surface extended from the middle of the left ear nearly to the centre of the chin, and from behind the jaw to a considerable way over the cheek. It was raised a little above the surrounding skin and was covered in some parts with a viscid yellow serum, in others with loose moderately thick yellow crusts; the ear was greatly thickened. The disease had existed more than three years, and all that time had got steadily worse.

The boy being very refractory, it was decided, after fruitless trials extending over several months, to admit him as in-patient, and he entered April 20th, 1865. He was ordered four minims of arsenical solution three times a day and a tablespoonful of lemon-juice twice daily, a small quantity of cod-liver oil being subsequently added. At the end of a month the calomel was begun with, at first in grain doses three times a week, and this quantity was constantly increased so soon as ever the purgative action in the least abated. In five weeks from beginning with the calomel every spot was closed. A week after, during a very hot day, he contrived to get out and play till he was quite exhausted. Possibly in consequence of this there was a relapse, but it was soon checked, and by the 23rd of June his mother considered him so thoroughly cured that she wished him to leave, but she was persuaded to let him stay a month longer. When

he went out there was one little spot on the ear still red and tender. The mother said the disease began here, and every time it spread at the margin this place got worse. I parted with the boy very unwillingly, and he soon had a relapse, which again secured his regular attendance for a little while. But by the middle of August all seemed pretty firmly healed; where the surface had been red and dry, it was turning pale, and where there had been crusts, there were now only thin tiny dry scales. The young gentleman, seemingly fully impressed with the favourable nature of these symptoms, considered any further visits unnecessary, and did not make his appearance again till he was brought by his mother two months afterwards to know why he had been dismissed. Despite this interruption to the treatment, the case had progressed very satisfactorily, only one small scale the size of a pea being left; all the rest of the patch was of a pale pink, with small dead white spots scattered over it, and the ear, which had always been thick, was now reduced to its normal size. As there was an opportunity of his being sent to Margate, I advised that he should go; but the result showed how little change of air can be depended on. The disease began to break out again in February, and continued to get steadily worse till his father brought him up to London, and again placed him under treatment. He is again improving.

CASE 8.—Eliza M——, aged 36, a remarkably healthy-looking woman, was admitted March 13, 1865, as out-patient with lupus exedens of the nose and lip. It had not yet passed into ulceration, except at one spot in the left nostril, which, however, plainly revealed its nature; the rest of the disease consisted entirely of tubercles scattered over the parts spoken of. She had always enjoyed excellent health.

She was treated with arsenical solution, five drops three times a day, followed by the chloride of mercury. By a mistake she twice doubled the dose of this till a scruple was taken weekly instead of five grains; but possibly from purgatives being given at the same time, these strong doses did good rather than harm. The places were painted on an average quite once a week with solution of nitrate of silver, and afterwards with acid nitrate of mercury. The history of the case since she came under care has been one of steady though slow amendment. At first she suffered much from a feeling of great weight, thickness, and stiffness in the nose. No perceptible improvement took place in this while using the arsenic, but an almost im-

mediate change for the better was effected by the calomel. At one time there was not one tubercle remaining. The place in the left nostril which seemed so threatening still looked tender; but as touching it with acid nitrate of mercury produced no sensation, I concluded there was little to dread. Indeed the disease seemed quite cured, and for some time past she had only been taking arsenic, when, although I had so repeatedly warned her against exposing herself, she went out on a bitterly cold day, and for above an hour had the full benefit of a biting east wind. The consequence was that almost directly three or four small papulæ made their appearance. They were touched with acid nitrate of mercury, and now seem quite subsided again.

CASE 9.—Frances N——, unmarried, aged 51, healthy, except as regards the disease of the skin, was admitted as out-patient March 21, 1865, suffering under creeping lupus, which covered nearly the whole of the right side of the face, and had existed many years. She was put upon liquor arsenicalis three times a day, and a solution of nitrate of silver was applied to portions of the diseased surface. But after a few visits, I received a polite note from her, saying that this process had caused some blackness of the skin, and that she must decline any repetition of it. I have not seen her since.

CASE 10.—Sarah S——, a remarkably healthy woman from the country, was admitted April 10, 1865, as out-patient, with lupus non-exedens. The disease extended over great part of the front of the face, and consisted of broad, fiery-red patches of thickened skin, covering the nose, and reaching from the inner canthus of each eye to the corners of the mouth; one patch almost encircled the left eye, and there were two on the forehead. On the surface extending from each eye downward there was a thick, greenish-yellow adherent crust, quite an inch broad.

She was put upon lemon-juice, and ordered the solution of arsenic, five minims three times a day; also to eat as much fat meat as possible. On the 8th of May, the disease being already checked, the chloride of mercury was begun with; at first in doses of a grain, to be increased, however, each week. By the 22nd there was a remarkable improvement, only a few small scales being left where the crusts had been, and the redness having greatly diminished. Unfortunately she

lived some distance from London, and she now told me that the expense of coming up would prevent her from continuing under treatment; so I saw no more of her.

CASE 11.—Thomas D——, aged 26, a fine, powerful young fellow, applied, April 29, 1865, with lupus of the right elbow. The surface affected was as large as a man's hand, and several ulcers had eaten quite through the skin, giving the affair a rather formidable look. There was no history of syphilis whatever; the patient himself attributed it to a blow against the gunwale of a boat. His health, he stated, to be perfect in every other respect.

He was put upon iodide of potassium; five grains three times a day, the quantity to be increased every week till it reached ten grains three times a day. In a very short time he was nearly well, when unluckily he went into the country. The disease speedily relapsed, and by the time he got back to London was quite as bad as ever. The treatment was resumed, and the disease again subdued, when a fresh reason arose for his staying away, and the disease relapsed very quickly. The chloride of mercury was now added, and the sores were repeatedly touched with acid nitrate of mercury. The disease has again yielded, though slowly, owing to his very irregular attendance, and at present all is firmly healed up.

CASE 12.—Mary Ann C——, aged 37, admitted as in-patient April 28, 1865, with very extensive lupus exedens. She was a weakly, delicate-looking person, very respectably connected, and attributed her complaint to grief at the great reverse of position which she had gone through. There were quite twenty tubercles scattered over the face and scalp, some of which had run, while others were running, into extensive suppuration. On the forehead was one with widely-everted edges, which seemed to extend from the root of the nose almost to the hair. There was an immense crust on the scalp; when it was removed nearly a teacupful of matter poured out, with such an offensive smell that both her sister and the matron were made sick by it. She was so weak that she could not walk across the room without assistance, yet she had been almost fed upon cod-liver oil and tonics. She had had scarcely any sleep, she said, for several months.

A large glass of rum-and-milk was given at three o'clock every morning, this being the time when the sleeplessness was at its

worst, and three glasses of wine were given daily, with a pint of stout at dinner ; but for some days it seemed certain that she would sink, especially as she had two sharp attacks of English cholera. At last she got so far round that I could begin with arsenic and calomel, while iodide of potassium in small doses was given in bitter infusion just before meals. Lemon-juice was also given, but I did not observe any particular effect from it. The ulcers were touched first with solution of nitrate of silver and later on with the solid nitrate. By the 10th of July all the places had skinned firmly over, her appetite had become good, her tongue clean, her health upon the whole in a fair state, and her strength was returning. On the 29th of August she left the hospital, having been for some time quite cured, everything in the shape of tubercles being gone and only the stains remaining. Her head was now shaved, but, except the numerous scars, no trace of the disease was visible. The ulcer on the forehead left very little deformity. She attended again in January last ; there had been no relapse whatever. The case was seen by several medical men.

CASE 13.—Leonard W——, aged 60, a strong healthy-looking man, applied as out-patient with eating lupus, extending, taking the diseased and healed parts together, from considerably above the elbow to half-way to the hand. There was a large portion where the disease was in an active state, and in many parts it had pierced deep among the muscles. I cross-questioned both him and his wife, but could not make out any history of syphilis, though he admitted having had gonorrhœa some thirty years ago. I examined his only child carefully, but found nothing to warrant suspicion. He himself attributed the disease to a bad blow on the elbow.

The case was treated with iodide of potassium, three grains three times a day in bitter infusion, the dose to be gradually raised to ten grains ; simple dressings only were ordered. The cure was rapid and seemingly lasting.

CASE 14.—James H——, a remarkably powerful, healthy young man, following an active occupation in the open air, applied as out-patient May 30, 1865. He was suffering from the lupoid sycosis which I have said should, as it seems to me, be distinctly classed with lupus. It involved the greater part of the left cheek, the upper lip, and part of the right cheek.

He was treated with five-minim doses of liquor arsenicalis, calomel, and for a short time with iodide of potassium. The case, however, progressed very slowly till the middle of November, when a steady and rapid rise was made in the dose of the arsenic, which was soon carried to above two hundred minims weekly. From this time a most decided improvement took place, and when last seen, in February, the disease had almost disappeared. For some time he had only been taking the solution of arsenic, the dose of which had been carried to two hundred and seventy minims weekly.

CASE 15.—Pearce B——, aged 27, was admitted as an out-patient July 27, 1865, with aggravated lupoid sycosis. It began as a spot on the chin, quite six years before this, during the greatest part of which time he had been under treatment. The disease had set all remedies at defiance, and was now much worse than ever. There was a large patch on each eyebrow, and a very large one on the upper part of each cheek, where the whiskers grow. These have gone on spreading and healing till cicatrices have formed which will mark him for life.

He was treated with arsenic, followed by iodide of potassium and calomel. Though he never bore the latter well, the arsenic seemed to produce no effect at all upon his health, except that he got fat under it; and it produced no effect upon the disease either, till the dose was carried to the extent of two hundred and fifty minims weekly, when a decided change for the better at once took place. About Christmas time he, of course, absented himself, and the amendment was stopped; but he soon began again, and the dose of arsenic was raised till it reached four hundred and fifty minims weekly, when it began to bring on such distension and nausea that it had to be reduced. While taking four hundred minims a week he felt perfectly well, and *he asserts that he always took the full quantity!* With the exception of one narrow line on the patch on the right cheek, the disease seems cured. I could not induce this patient to allow of any outward applications being used.

CASE 16.—Elizabeth G——, a strong, remarkably healthy woman, applied September 2, 1865, with creeping lupus extending over nearly the whole of the upper lip, lower lip, and chin. It was of more than two years' standing. She first of all put herself under the care of a surgeon, who for some time painted the surface every day with a

strong fluid; after this, finding no benefit from the operation, she went to a hospital, where she attended a year; but the disease still spread.

Liquor arsenicalis was ordered, and soon after the chloride of mercury was begun with. Very little was done in the way of outward applications, as she could not attend very regularly. Once or twice an obstinate tubercle was touched slightly with acid nitrate of mercury. She got steadily and quickly better, and when last seen, January 6, looked quite cured. She was, however, recommended to continue the medicine for some time.

CASE 17.—Louisa R——, nine years old, applied September 25, 1865, with eating lupus, which had already destroyed the septum of the nose and pierced quite through the hard palate, without affecting the outer skin, a rare form of the disease, which Rayer does not appear to have seen, as the only case he quotes is from the practice of M. Arnal. She was a pale, small-boned, underfed, wretchedly delicate creature. Iodine and iodide of iron had been given her for a long time without doing any good.

She was ordered liquor arsenicalis and cod-liver oil, and for several weeks, while in-patient, had a liberal supply of meat, pale brandy, &c. Calomel was given once or twice a week. The ulcerated surfaces inside the nose and mouth were touched with solid nitrate of silver. She improved slowly but steadily, except that a gland under the chin passed slowly into suppuration; but as there is a good deal of diseased bone, most likely a considerable time will elapse before any very great improvement takes place.

CASE 18.—Roger B——, aged 18, was admitted an in-patient January 7, 1866, with lupus exedens, which had existed more than nine years, and had already destroyed the tip of the nose and the lips, the mouth being now so contracted that only the tip of the tongue could be protruded. The whole of the nose, upper lip, and great part of the cheeks were of a deep coppery red, while still further, scattered spots of red showed that the disease was making progress. I could not, however, detect anything like a tubercle. There were thick adherent crusts on the nose and mouth, except where, from the eroded surface of the lips a viscid fluid poured out. There were several lymphatic glands under the chin, enlarged almost to the size

of a walnut,* and there was a very marked angular curvature of the spine.

Arsenical solution, five minims three times a day, was at once ordered, and after a short time calomel was added. As he suffered severe pain, even from using a solution of nitrate of silver, a scruple to an ounce, outward applications were almost entirely restricted to the dilute ointment of the nitrate of mercury. Liberal diet was allowed, and three ounces of lemon-juice daily were given. For quite five weeks he mended steadily; the crusts fell off, and the skin of the upper lip grew quite pale, when he unfortunately caught a very bad cold, followed by a severe hacking cough, with loss of flesh and appetite. All medicines, except a sedative to check the cough, and quinine dissolved in sulphuric acid, were at once given up; he was ordered rum-and-milk and stout daily, but up to the present time the chest affection and weakness have continued to look very menacing, while the disease of the skin has shown a tendency to relapse.

I regret to say that sufficiently full notes were not taken of the remainder of the twenty-five cases selected. One, a case of lupus of the arm, recovered completely under the iodide of potassium; another patient, suffering under lupus of the forehead, is just well under the influence of arsenic and acid nitrate of mercury. The others either lived at a distance or only attended once or twice, so that treatment had no chance.

* I cannot agree with Dr. Neligan that the glands in the vicinity of lupus always remain unaffected.

