

## **Sleep in its relations to diseases of the skin / by L. Duncan Bulkley.**

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### **Publication/Creation**

[New York] : [publisher not identified], 1895.

### **Persistent URL**

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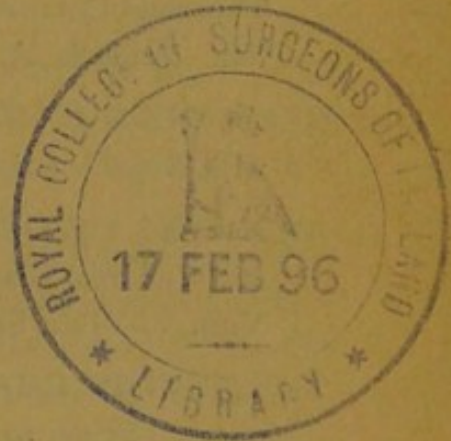
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*J. L. Bulkley M.D.*

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SLEEP  
IN ITS RELATIONS  
TO  
DISEASES OF THE SKIN.

BY  
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FROM  
THE MEDICAL RECORD,  
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BY THE SAME AUTHOR.

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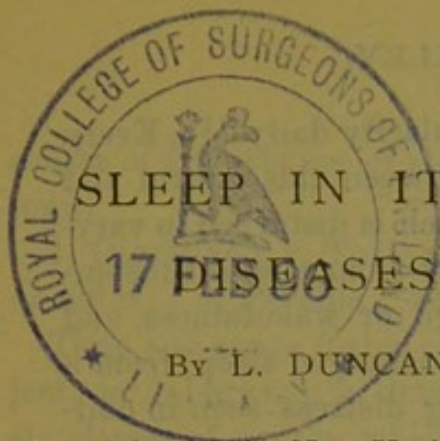
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# SLEEP IN ITS RELATIONS TO 17 DISEASES OF THE SKIN.

By L. DUNCAN BULKLEY, A.M., M.D.

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To those who look upon affections of the skin as wholly or largely local affairs, dependent upon extraneous influences, whether parasitic or other, the discussion of the topic here proposed will probably seem unnecessary, and some of the statements unsound. But to those who take the broadest view of dermatology, and regard the aggregation of symptoms to which are given the names of different diseases as only the expression of various forms of disordered tissue-action, influenced by every element which conduces to perfect or imperfect nutrition and innervation, the subject is fraught with the greatest interest, and is one of a most practical character.

Sleep is undoubtedly one of nature's sweet restorers, and yet in the literature of dermatology, both in text-books, monographs, and journal articles, I can find hardly an allusion to the subject, and I do not know of its having been referred to in any society discussions on dermatological subjects, except in the briefest and most superficial manner.

On the other hand, with me it is one of the most important elements to consider in connection with many diseases of the skin, and for twenty-five years I have made notes in regard to this element in large numbers of my patients; so important do I consider it that on my printed paper for recording cases the word "sleep" appears twice, once in connection with the "previous history of the patient," and again in recording the condition of the patient at the time of first observation; record in regard to sleep also is commonly made, in very many patients, at each subsequent visit.

It is not necessary at the present time, even if I were able, to discuss the nature of sleep or the causes that produce it in the healthy individual. Every one recognizes "that natural condition of restful unconsciousness into which the system

falls normally with more or less regularity daily."<sup>1</sup> Every one also recognizes the difference between this restful and perfectly refreshing sleep and that which is disturbed in varying degrees; the disturbance may vary from a slight insomnia to a more or less well-marked vigil or wakefulness, and there may be also various degrees of deranged sleep, from a not unpleasant dream to the agonizing distress seen in children or others starting up with "night terrors," also the varying degrees of sleep-talking, sleep-walking, etc.

Normal, healthy sleep is certainly one of the elements of health of the body and all its tissues, whereas disturbed or deranged sleep is a contributing factor to many diseased conditions of various structures of the body. As already remarked, the relations between sleep and diseases of the skin have not hitherto received the attention of dermatologists, but is it not quite reasonable that the state or condition in which more than one-third of the human life is spent must have something to do with the nutrition and innervation of the skin as well as of other organs? We all know how readily the expression of the face and the tone of the tissues will show the results of continued loss of sleep, while the fresh, vigorous tone of the skin of the person in perfect health, with perfect sleep, is equally well recognized by everyone.

But it is largely in the direction of the symptomatic character of disturbed sleep that this feature is of practical importance in dermatology. Normal sleep depends upon the perfect functioning of all the parts of the system, so that the periodical rest occurs in a natural manner; conversely, disturbance in the performance of the function of various portions of the body may lead to an imperfect sleep.

Illustrations of this are, of course, familiar to all; such are the restlessness in sleep with vivid dreams, and unrefreshing sleep dependent upon digestive disorders; the insomnia accompanying diseases of the heart and blood-vessels, that due to excessive use or abuse of tea, coffee, and tobacco; the wakefulness following excessive brain-work, grief, emotion, etc., and that due to cutaneous influences, as itching, pain, burning, etc.

For convenience of consideration we may arrange the

<sup>1</sup>Foster: Illus. Encyclop. Medical Dict.

causes of disturbance of sleep under six main classes, as follows:

1, Digestive ; 2, Toxic ; 3, Circulatory ; 4, Nervous (direct or reflex) ; 5, Psychic ; and 6, Cutaneous.

Time and space forbid my entering here fully into the subject, or elaborating in detail the features belonging to these six classes of causes, which exhibit themselves more or less frequently in disturbed sleep in many patients with diseases of the skin ; some of them will appear later in our consideration of the matter in hand.

We may now study our subject somewhat more in detail and will consider: 1, Disturbances of sleep preceding or causing diseases of the skin ; 2, Disturbances of sleep accompanying or caused by diseases of the skin ; and 3, Means of removing disturbances of sleep in connection with diseases of the skin.

**1. Disturbances of Sleep Preceding or Causing Diseases of the Skin.**—In speaking of disturbances of sleep preceding or causing diseases of the skin I do not wish to be misunderstood. It is not claimed that the disturbances of sleep which shall be spoken of are often the direct causative agents which induce diseases in the skin, nor that their removal will necessarily be followed by recovery from the skin trouble. I only assert that for many years I have so constantly observed the concurrence of, and relations between the two, in very many patients, that, to my mind, the former should be observed, regarded, studied, and more or less treated from their basic stand-point, in order to obtain the very best results in the treatment of the latter.

In endeavoring to learn the exact character of the sleep of patients some considerable care will often be necessary. In questioning in regard to sleep the common and hasty answer will frequently be that the sleep is "all right," or "very good," or even "too good," when a careful cross-questioning will very often elicit the fact that this is far from being the case. Many are forgetful ; many become so accustomed to the character of sleep which they have had, that they do not appreciate that it can be otherwise ; and I have found large numbers of persons who, for many years at least, have not had at the right times and under the right conditions that "natural condition of restful unconsciousness" which consti-

tutes perfectly normal, healthy sleep. Many will have drowsiness during the day or evening, and insomnia or unrefreshing sleep at night. Many will have long periods of vigil or wakefulness on retiring, or will awaken frequently, or very early in the morning, with inability to further sleep. In some the sleep will be heavy, "like a log," and troubled or not with vivid and annoying dreams; in others the sleep may seem fairly good, but is wholly unrefreshing in character, and the patient will be as tired in the morning as on retiring, or even more so; and patient inquiry will often discover many other aberrations from healthy, restful sleep. These may depend upon any one or more of the six principal causes already mentioned, or perhaps others.

Now, while these conditions exist, and they could be amplified very much more, perfect nutrition and innervation do not and cannot exist, and the skin tissues, even if restored to a comparatively normal state, by either external or internal measures, will readily yield again and become diseased. It is the failure to properly recognize and treat these and other derangements of the system which has led in some measure to the recognized obstinacy of skin diseases; and the dermatologist can never practise his branch in the highest and best manner unless he is thoroughly competent in general medicine, and skilled to recognize and treat the functional and other disturbances of the system which have so much to do with the vigor and health of the individual and all the tissues.

In a not inconsiderable number of cases of eczema I have known the eruption to first appear after a period of sleeplessness, which in different cases, had occurred from quiet different causes; and time and again I have known fresh attacks of eruption to come on, apparently from the same cause. How far this element of imperfect sleep has to do with the causation of other skin diseases I cannot tell positively at the present time. It is hoped that others will observe the matter closely and report their experience.

**2. Disturbances of Sleep Accompanying or Caused by Diseases of the Skin.**—The first disturbance, which will occur to every one, is that arising from itching. As all know, this is often a most distressing feature in many cases. From earliest infant life to extreme old age one afflicted

with eczema may have sleep largely interrupted by itching; indeed the nocturnal sufferings of these patients will often far exceed those of the day, and after a night of real agony, with only snatches of broken sleep, the patient enters on the day wholly unrefreshed.

The reasons for the greater distress from itching during the night, in many skin disorders, seem to be numerous: 1. The exhaustion of the nervous system by the activity of the day renders it more liable to disturbances, until the loss of nervous energy has been restored by sleep. 2. During sleep there is a certain withdrawal of the general nervous control of the system, which allows special irritations to assert themselves; this is observed also in relation to other disorders of the system, as in asthma, in certain neuralgias, in urinary and bladder affections, etc. 3. During the condition of somnolence there is also an absence of self-control, which leads the patient, perhaps unconsciously at first, to scratch and rub, even for a slight pruritus, and thus to excite an already irritated skin to an increased erethism and to the development of new lesions, requiring fresh scratching. 4. Just as the brain is especially excited at night by the products of faulty metabolism, resulting from digestive disorders, and even the nerve elements of the healthy skin suffer a like irritation during the period of sleep (manifested by restlessness and even burning and moderate itching), in like manner patches of diseased skin are especially irritated at night by the circulation of imperfectly elaborated blood. 5. Finally, the warmth of the bed favors a congestion of the skin, which congestion, pressing upon nerve elements already in a state of irritation, excites them to renewed activity.

I have known cases where complete nervous exhaustion has thus occurred, and remember vividly a lady who, having tried an infinity of remedies to get relief, had finally been given chloroform repeatedly by her husband for this purpose, with disastrously prostrating effects.

Other diseases—urticaria, pruritus, dermatitis herpetiformis, etc.—will often act in the same manner, and the resources of the physician will frequently be taxed to the uttermost in meeting this element of the case. In some instances, as in zoster, dermatalgia, and syphilis, the sleep will be broken by pain, which, indeed, may be also a formidable obstacle to overcome; various ulcerative affections and also

bullous eruptions, as pemphigus, may in like manner interfere with sleep.

But, as mentioned in the preceding section, it is necessary to recognize certain other less marked disturbances of sleep, which will not infrequently be found accompanying some diseases of the skin, if indeed they are not caused by the conditions which lead up to the latter: for, as already mentioned, we should not, in a study like the present, consider these diseases of the skin as entities, but only as expressions of a disordered physical state, the changes in the skin taking various forms, which we for convenience designate by different names of diseases.

In a not inconsiderable proportion of my cases of acne, in private practice, I find, on close questioning, that disorders of the sleep are very common; and continually, as the case progresses to a cure, I find the character of the sleep change for the better. Many a patient has told me, during treatment, that for the first time in years the sleep had been of the natural refreshing character of health. The same is true, though to a somewhat lesser extent, in psoriasis and in other diseases, and also in eczema, even when the disturbance has not been from the itching, but only from the general systemic derangement.

The form of the sleep disorder in these cases has varied greatly. At times it has been vigil on retiring, in others an early wakefulness, perhaps even toward morning, say after three o'clock; in many patients it has been only a disturbed character of sleep, with frequent dreams, of a pleasant or terrifying nature; or again, simply a restlessness at night, with a total want of refreshment in the morning, etc.

As I said before, I do not claim that all these sleep derangements are directly causative of or caused by the particular skin disorder present, but do believe that they are elements which go to make up the complex state finally exhibited by an eruption on the surface, and that unless they are more or less rectified, permanent good cannot be done.

In closing this section of our discussion mention should be made of the restlessness in sleep belonging to the eruptive fevers, and also of that accompanying some other conditions, as jaundice, glycosuria, and chronic kidney disease, where a dry and itchy skin prevents sleep.

3. Means of Removing Disturbances of Sleep in Connection with Diseases of the Skin.—To rightly understand and apply the correct principles and measures of treatment with success, that is, in the generality of cases, it is necessary, first, to keep well in mind the nature of physiological sleep, and the causes which disturb it, as already alluded to; and second, to study the individual case, in reference to the existing conditions antagonistic to sleep. Routine prescribing may occasionally give relief, but far oftener does harm. A vast weight of responsibility rests on those who in times past and present have vaunted this or that new soporific, which has too often been employed with but little thought, except to heed the enticing claims put forth by those who manufacture and push it for commercial purposes.

Sleep is, always has been, and probably always will be, a great mystery. While we undoubtedly know considerable in regard to the conditions of the brain during sleep, and the experiments and observations of many prove very conclusively that the brain is in a condition of anæmia during sleep, it is not known whether that anæmia is a primary condition, or whether it is secondary to changes in the brain cells, induced by a "periodic exhaustion of intra-ganglionic energy."

Fortunately, however, it is not necessary practically to fully understand the exact order of precedence of the causative elements of sleep; for we do know positively that agencies can cause insomnia which operate in either of two directions, namely, by furnishing stimulus to the nerve cells, reflex or otherwise, or by causing excitement to the cerebral circulation.

A most interesting experiment by Chapin, cited by Long Fox,<sup>1</sup> demonstrates the latter perfectly. He applied amyl nitrite, which promotes the circulation of the brain, very carefully to the nostrils of a number of patients who were sound asleep, and in every case they awoke promptly; this was repeated on several evenings on different patients with a uniform result. As a counter experiment he applied bisulphide of carbon and oil of peppermint to other patients, not a third of whom were roused; showing that the results were from the action of the amyl nitrite on the circulation, and

<sup>1</sup> Long Fox: *The Influence of the Sympathetic on Disease*, p. 217. London, 1885.

not simply from the odor, or from his presence near the bed, etc. All recognize, of course, that stimulus to the brain cells, as by light, sound, severe pain, or itching, brings consciousness, and also that intense mental activity prevents sleep.

The disturbance of sleep by reflex action from other parts of the system, and by the irritating effects of the products of imperfect assimilation and dis-assimilation are more or less commonly recognized, even by the laity. The child who tosses in sleep will often be rightly thought to have intestinal worms, or will be suffering from undigested substances; and all degrees of restlessness and deranged sleep will be noticed from the latter cause, even up to violent manifestations of "nightmare" and "night horrors."

All recognize the perturbed sleep after partaking of heavy or indigestible substances, especially late at night, and also that associated with many forms of chronic indigestion. Now it is just these conditions which so frequently exist in those suffering from many diseases of the skin, and which often play an important part in the ill health which leads up to them; and it is these which it is often of the greatest importance to consider and treat, if the best results would be obtained in the skin lesions.

I am convinced that often when itching exists, and seems to be the cause which prevents or disturbs sleep, the real cause, in part at least, will be found elsewhere, and that the patient will sleep well if that is removed, even in spite of some itching. I will therefore consider this last section of our subject under the six main classes of the causes of disturbance of sleep already mentioned, namely, 1, Digestive; 2, Toxic; 3, Circulatory; 4, Nervous (direct or reflex); 5, Psychic; and 6, Cutaneous.

1. *Digestive*.—The subject of the disturbances of sleep by digestive derangements is so great that it can be hardly more than touched upon at the present time. But, on the other hand, it is one of the most important points to consider in connection with many diseases of the skin, and must not be passed by with a single question. Not only should remedies be given to correct the digestive disorders, but accurate directions should be given as to diet; for, with modern life, the temptations to error in eating and drinking are so great that few escape some digestive disorder, and with many this

affects sleep; indeed, sometimes sleep disturbance will be about its only marked symptom. Late eating at night, and that generally of indigestible substances, is a fertile cause of sleep disorder; on the other hand, long abstinence from food will also frequently interfere with sleep. In this latter case, if patients are awake four or five hours after finishing supper, say until midnight, a warm drink, such as pure milk alone, or a very weak broth of meat extract, or a thin gruel, will commonly secure perfect sleep.

It will often, however, be quite difficult to determine exactly the dietary error at the bottom of the sleeplessness, but it can be accomplished by patient investigation. Sometimes constipation will be the cause of deranged sleep, and all must have noticed how much better and more refreshing sleep is apt to be after a free purgation, when this has been needed.

2. *Toxic*.—Toxic disturbances of the sleep are much more common than is supposed. These include not only the effects of the excessive use of coffee, tea, and tobacco, but also other disturbing elements, such as quinine and some other drugs. The toxic character of many of the products of gout will also prevent or derange sleep and should always be taken into consideration. This is, of course, closely connected with the preceding section, and much care should be given in these cases in securing the most perfect metabolism possible; this is to be accomplished by various means, including diet, hygiene, exercise, and remedies affecting the chylo-poietic viscera. Hypnotics should be rarely resorted to.

3. *Circulatory*.—Not only in marked disease of the heart, in aneurism, and in atheroma may there be derangement of sleep, but this is apt to happen frequently where no gross lesions of the heart or blood-vessels exist, but where there is only heart-weakness and functional disturbance of the circulation. This may manifest itself in many ways. With an excited circulation, often evidenced by throbbing in the head, the warm bath, or even a foot-bath on retiring, will so withdraw the blood current from the brain that the symptom will no longer cause annoyance. Recently a patient of mine with lichen planus, who was very actively engaged as a lawyer, under great and prolonged excitement connected with some recent public trials, obtained sweet and refreshing sleep in this way for many nights in succession. In some cases one of the bromides, with a trace of aconite, will give entire relief. In some cases, on the other hand,

where there is heart weakness and a general weak tonicity of the blood-vessels, digitalin, given before meals, and at bedtime, will act better than anything else, as I have repeatedly witnessed.

Another form of deranged circulation will be manifested in cold and clammy hands and feet, which are continually observed in skin patients, and which often prevent sleep long after retiring. Digitalin will often remove this, as will also the appropriate treatment for the anæmia causing it; relief is obtained, likewise, by plunging the members alternately into basins of hot and cold water, and by other measures which readily suggest themselves.

4. *Nervous*.—Nervous (direct or reflex) causes of the derangement of sleep in patients with diseases of the skin are numerous, and will often require some care in their discovery and removal. In many a case the skin lesion will be but one of the signs of a general breakdown which has come from excessive or injudicious use of the brain, and the insomnia which has resulted has in turn contributed much to the further debility of tissue; in some instances it has come from overwork, or from social or other dissipation, with restricted hours of sleep. These cases often require very delicate handling, by all means tending to restore exhausted brain cells; it is worse than useless to give the so-called sedative remedies, and even bromide of potassium will sooner or later increase instead of diminish the trouble we seek to remove. Good and proper feeding, with nerve tonics, and friction of the surface, such as a thorough rubbing of the body and limbs with a Turkish towel at night, after a brisk sponge with tepid water, or even a cold pack, etc., will often restore the nervous vitality and permit of sleep. In some cases digitalis, by restoring tone to the overstrained and relaxed capillaries of the brain will be of much service, as may also ergot.

If the sleep disturbance is caused by reflex nervous irritation, whether it be by intestinal worms, uterine, bladder, throat, or other disease, these will require attention before the sleep can be of the refreshing character which leads to a perfect restoration to health.

When the sleep of patients with diseases of the skin is disturbed by extraneous influences, as noise, light, heat, cold, etc., these matters should be looked into and rectified, if possible; and pain from any cause, disturbing sleep, should also

be relieved, if practicable, for the reasons already mentioned.

5. *Psychic*.—Psychic disturbances of sleep are not at all uncommon, and will often have to be met in treating diseases of the skin. Mental cares, whether of business, domestic, or social character, may all at times act as powerful depressants, and by interfering with perfect sleep hinder the cure of skin lesions. In addition to general rules, and the endeavor to free the mind from the disturbing load, these cases will often receive the greatest benefit from the judicious use of proper hypnotic remedies for a short period. I well remember the case of a young lady, much afflicted with acne, who had been utterly sleepless for some little time, owing to an unfortunate love affair. A few full doses of a mild hypnotic insured prolonged and refreshing sleep, after which the preceding troubles vanished under the appropriate treatment.

6. *Cutaneous*.—Before speaking of the relief of sleep disturbed by pain, itching, and burning in the skin, I wish to make a single cautionary remark, namely: It is an error to suppose in every instance where the patient complains that the sleep is disturbed by these causes that this is wholly the case. In many, many instances, some of the other elements which we have considered are really at the bottom of the sleep disturbance, and when the patient is thus deprived of sleep the pain or itching asserts itself, and then forms an additional cause of wakefulness. A single illustration will suffice to recall others. How often do we find that those who are called upon to empty the bladder at night are, when thus aroused, distressed and then kept awake by the itching which is induced by the exposure of the surface to the air after warmth in bed. The same occurs when some are awakened by troublesome dreams, by palpitation, by indigestion, or perhaps by a laryngeal cough, of gouty origin, it may be. Now the careful and proper attention given to these, and their removal by appropriate measures, will often be of the very greatest importance in securing rest in sleep for those afflicted with diseases of the skin. And if this refreshing sleep is obtained, then with the resulting gain to the nervous system the very pain or itching will be less annoying, and so will be more easily controlled.

We may dismiss very briefly the subject of pain as a disturber of sleep in connection with diseases of the skin. This

should always be attended to, and special methods will suggest themselves to all. The pain from syphilitic lesions will generally yield more or less promptly to very actively pushed specific medication suitable to the special stage of the disease or character of the lesion present ; but opium or morphia may occasionally be needed. I have also repeatedly found the very greatest, indeed perfect relief to osteocopic and neuralgic pains in syphilis, from antifebrin, in about five-grain doses, given every hour or two, with hot water, and a little whiskey if there seems to be any depression.

In the distressing pain often accompanying or following herpes zoster, especially in elderly persons, galvanism will prove very valuable, and I recall a patient who, having previously had distressing nights from ophthalmic zoster, would drop off to sleep while galvanism was being applied. Antifebrin is also extremely serviceable, and will secure sleep even when the pain has previously produced great wakefulness; it must be used freely, however, to be of great service, and needs to be watched.

Itching as a cause of sleep disturbance is unfortunately too well known to everyone, and all are familiar with the difficulties often attending its relief. Proper internal and local treatment, of course, play the most important part in securing sleep under these conditions; but I will not attempt to develop this subject, which could alone occupy our entire time. A few words, however, may not be out of place in regard to some of the details connected with the latter, which are sometimes overlooked.

Patients generally understand very little in regard to modes of making applications to the skin, and very explicit directions are often necessary to secure the desired result. The same application used in a right and a wrong way may produce very different results. This is strikingly illustrated in connection with eczema of the scrotum. With the exactly proper application of hot water, followed immediately by the perfect adjustment of an ointment of tar and zinc, spread on lint, closely applied and kept firmly in position, we may often get perfect rest at night, when a previous application, wrongly made, has been followed by great insomnia. I have frequently seen sound sleep secured in infants, with the most severe and general eczema, by a proper dressing, firmly bound on only to the parts which were most li-

able to be scratched, when a former dressing, quite proper in itself, but loosely and wrongly applied, had given no results.

In some instances the exposure of the body to the cool air, on undressing at night, will excite so much pruritus that sleep is prevented; much of this can be prevented by avoiding this exposure, the patient going to bed with the underclothing on, making an application beneath the clothing; in the morning a general dressing of the affected parts can be made, if desired, and fresh underclothing put on. Also in regard to taking baths, whether medicated or not, errors may occur which will result in the sleep being disturbed or altogether prevented. Sometimes baths will be taken so hot as to excite the circulation, and prevent sleep; in the process of drying the skin after them, patients may also so stimulate the surface with towels that subsequent applications do not suffice to allay the irritation, which then prevents sleep. In a word, regard must always be had for sleep in giving directions for treatment of skin patients, for, as stated before, a restless or sleepless night will often operate so disadvantageously to the patient that much of the good effect of treatment may be lost.

In the matter of the administration of internal remedies to secure sleep in patients disturbed by itching, there is need of the exercise of much discretion; they are often *needlessly* given, they not infrequently prove *useless*, and are sometimes *harmful*. From what has preceded the needlessness of hypnotics in many cases has been abundantly shown. Their uselessness is seen where the irritation from the skin is very great; for they rarely serve to secure sleep until the irritating is in a large measure removed. Their harmfulness frequently appears in the attempt to substitute them for the proper measures of relief, general or local, or to press stronger and stronger remedies, even to the great depression of the nervous system.

But, on the other hand, by the judicious use of these we can occasionally accomplish very much both for the comfort of the patient and for the cure of the disease. The first point to remember, which is often forgotten by the profession, is the utter futility of prescribing preparations of opium to secure sleep, when it is disturbed by itching; the skin irritation is commonly so aggravated thereby that the narcotic effect

of the drug is largely nullified, and if sleep or stupor is secured by a large dosage, it is of the most unrefreshing nature, and the scratching during sleep, which commonly occurs, will often greatly aggravate the disease.

There are, however, remedies which often aid in quieting the pruritus, and which may be given with advantage. When not otherwise contraindicated, bromide of soda in good dose, with a fair amount of tincture of aconite, will often produce a quiescent effect which is most happy. Tincture of gelsemium, in increasing doses, given every half hour, for three doses, has acted excellently in my hands; cannabis indica, employed in the same way, is also often very efficient.

I may remark that the method of preparing three increasing doses of a remedy, and placing them under the patient's control, by the bed, before retiring, will also aid in the action desired; the expectancy of the result augments its efficiency. I direct that one dose shall be taken on getting into bed, the second half an hour later, if needed, and the third, still half an hour or an hour later. Repeatedly I have found that the third dose was left untouched, and rarely do the three doses fail of action. The patient should be instructed to have the doses ready, properly diluted, in separate glasses, so that they can be drank in bed, with as little rousing as possible, and certainly without rising to prepare or take them.

Phenacetin often proves a most valuable hypnotic in pruritic cases; three doses may be arranged in the manner above described. Antifebrin is also serviceable, but requires greater caution in its use. Sulphonal is frequently given to secure sleep under these circumstances, but in my experience it is not a very satisfactory remedy. When used thus there seems to be a later depression of the nervous system, which in the end aggravates the skin complaint. I have used trional some, but have not yet been very well satisfied with the results. Chloral has also a secondary nervous reaction which is often harmful, although in certain cases its use for a night or two will seem to so induce the sleep habit that patients can afterward do without any aid; it can often be advantageously combined with bromides. Paraldehyde will also occasionally act very favorably, and is a relatively safe remedy. Chloramide I have seldom used. Urethran has sometimes proved of very great service where the itching was not

severe, but when the latter is excessive it has little if any effect on the sleep.

In many cases, even where there has been considerable sleeplessness from itching, which local or general treatment fails to relieve sufficiently to allow of sleep, an excellent effect may be produced by a large warm drink on retiring, without the aid of any hypnotic drug. For this purpose I have made use of warm milk (not boiled), if sufficient time (at least four hours) has elapsed after eating, to allow of the stomach being perfectly empty; the milk, even to the amount of a pint, being drank pure and alone, without other food or medicament. Gruels made of wheat preparations also serve admirably well, and in many cases one of the meat extracts, such as bovox, a tablespoonful in a large tumbler of hot water, acts as a perfect hypnotic. In some instances the best addition to the hot water is a half teaspoonful of Horsford's acid phosphate.

In all these instances the action is much the same, namely, diverting blood to the stomach, and so aiding in producing the brain ischæmia necessary to sleep.

In bringing this memoir to a close I must again emphasize some of the points already mentioned:

1. Sleep is an exceedingly important factor to consider in connection with many diseases of the skin, disorders in sleep occurring both as a contributing cause and as an effect of the same.

2. The disorders of sleep occurring in patients with diseases of the skin may arise from many different conditions; the six principal causes may be classed as, *a*, digestive; *b*, toxic; *c*, circulatory; *d*, nervous (direct or reflex); *e*, psychic; and *f*, cutaneous.

3. These causes of disturbances of sleep should be searched for and relieved, because of the injury resulting from imperfect sleep in producing or aggravating many diseases of the skin.

4. In cases where the sleep disturbance is caused by the disease of the skin, the effort should be made to get relief to the insomnia by the proper internal and external treatment of the skin affection, before resorting to hypnotics; attention to details is often very necessary to secure this end.

5. Preparations of opium may be resorted to when the disturbance of sleep is caused by pain connected with the skin

disease, but these are useless or harmful when the wakefulness results from itching. Chloroform or ether are also not to be advised for this purpose.

6. Some of the newer so-called anti-neuralgic and hypnotic remedies are often of great service in quiting the general irritation and inducing sleep, and gelsemium and cannabis indica are also valuable. It is often desirable to give repeated doses, at half hour intervals, until the desired effect is produced.

4 EAST THIRTY-SEVENTH STREET.

# SYPHILIS IN THE INNOCENT (SYPHILIS INSONTIUM)

CLINICALLY AND HISTORICALLY CONSIDERED,

WITH

A PLAN FOR THE LEGAL CONTROL OF THE DISEASE.

BY

L. DUNCAN BULKLEY, A.M., M.D.

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# STYLLING THE INNOCENT

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