Diseases and HOMOEOPATHY THERAPEUTICS of the SKIN



DISEASES AND THERAPEUTICS OF THE SKIN

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PREFACE

In the preparation of this little work we have endeavored to present this very difficult subject in as clear and as concise a manner as possible, leaving out all unnecessary detail that might in any way confuse or burden the mind of the busy practitioner or student of dermatology. It is our wish to make it one of practical use to the busy practitioner as well as a text-book for the student who wishes to receive a practical knowledge of this subject, avoiding as much as possible the unnecessary task of reading voluminous works written by noted specialists upon the subject. The history, pathology and pathological anatomy has been dealt with briefly, partially owing to the present uncertain knowledge on these subjects, and partially to the differences of opinion held by the homœopathic physician and our colleague of the regular school. We also have endeavored to make the therapeutic part as strong as possible, limited as we are by lack of space in a work of this size, hoping later on to materially strengthen it by a repertory wholly confined to the subject. The homocopathics of diseases of the skin have by no means been forgotten, as we feel that Homeopathy can be as fully and as ably demonstrated through the law of similia, by the homœopathic physician in the dermatological field, as has been in the past in any other department of medicine. We feel greatly indebted to the many strong and able writers upon this subject, such as Drs. Morrow, Fox, Shoemaker, Hyde and others, whose valuable assistance has aided much in the production of the work.

PREFACE TO THE FIRST INDIAN EDITION

The reprinting of Dr. Allen's DISEASES AND THERA-PEUTICS OF THE SKIN gives to the Homœopathic practitioner something he has sorely needed, something his homœopathic brethren have had for many years; a book which gives the description, etiology, diagnosis and treatment according to the law of similars. The readers will know how to keep a good skin. That Skin's diseases are for the most part diseases of the constitution and not diseases of the cutaneous surface alone, has been clearly proved in this book. We hope it will be welcome information to the profession.

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CLASSIFICATION—HÆMORRHAGES

Cutaneous hæmorrhages into the cutis may take place in many ways. There are two forms to be especially considered: The idiopathic and the symptomatic; those occurring from the effects of injuries are known as idiopathic, and those occurring from the effects of internal diseases symptomatic. The hæmorrhage may occur by external injury to a bloodvessel itself, or the blood may escape through the capillary walls into the skin. Four special lesions are recognised: Vibices, petechia, ecchymosis, ecchymomata. The first mentioned occurs in narrow lines or streaks: the second in small spots differing in form and size from that of a pin-head to that of a dime, frequently seen in typhoid fever and other eruptive diseases of an inflammatory nature; the third form is where the hæmorrhage is more extensive and copious, appearing in large patches; the fourth is where it occurs in tumors or elevated patches. The idiopathic hæmorrhage is the result of injuries induced by wounds, bruises, contusions or from insect bites and stings; may also be the result of certain drugs.

The symptomatic arises from systemic disturbances alone, such as small-pox, typhoid fever, also other forms of fever; from urticaria, pemphigus, rheumatism, and gouty states of the system, even certain forms of hysteria has been known to be followed with some form of purpura. Hæmorrhagic diseases are not so much a disease of the skin as they are due to diseases of the bloodvessels, directly as in external injuries, or indirectly to systemic

disturbances. Hæmorrhages of the skin have occurred occasionally through the medium of perspiration (bloody sweat), also in vicarious menstruation. The pathological changes due to hæmorrhages into the skin are all classified under what is known as *purpura*, and more especially those forms due to symptomatic causes, which may appear in one or more of the lesions mentioned.

PURPURA (Purple Spots)

Three forms of purpura present themselves for consideration: Purpura simplex, purpura rheumatica, and purpura hæmorrhagica.

pura hæmorrhagica.

Purpura Simplex—Purpura simplex may be defined as a slightly elevated purple spot or patch upon the skin, differing in form and size, and which does not disappear upon pressure.

SYMPTOMS—It may occur as petechia, vibices, or ecchymosis, seldom having any constitutional symptoms, and usually without any previous warning, occasionally slight malaise or chilliness. The disease generally appears suddenly, occurring in any part of the body, and in size from a mere speck to that of a split pea, and more frequently upon the extremities, usually multiple. There are no objective symptoms except a slight soreness. Wheals or vesicles may arise as a complication. The spots usually disappear within ten or twelve days.

Purpura Rheumatica—Definition.—A purpuric eruption accompanied with similar phenomena to that of acute rheumatism.

Symptoms—The premonitory symptoms are lassitude, headache, loss of appetite and general bad feeling; usually swelling of one or more of the joints, with more or less severe pain of a rheumatic character, which may be either

localized or general. This is accompanied with fever, restlessness and the general suffering as found in acute rheumatism. Frequently do we witness this condition of things, lasting from three to five days, feeling quite sure of our diagnosis to be acute rheumatism, only to find between the third and fifth day a purpuric eruption, quite general over the body, more marked upon the extremities and abdomen, with a gradual subsidence of the fever, pain and other symptoms, and within a week the patient is convalescent. The spots are generally about the size of the finger nails, and do not disappear on pressure. At first of a reddish or purplish hue, which soon changes to a yellowish or greenish tinge, due to the natural processes of the effused blood. They are gradually absorbed and disappear, the fever and pain subsiding with the appearance of the eruption. Relapses are not uncommon, however, as is sometimes seen in acute rheumatism, and are occasionally accompanied with gastro-intestinal diseases. The disease occurs in both sexes, but more frequently in women.

Pathology—Rupture of 2 capillary vessel with fibrous clots, emboli and micro-organisms found in the transudate.

Etiology—The disease occurs more frequently in the early spring, in low bottoms where there is much dampness and poor drainage. The disease occurs, I think, only in rheumatic or gouty patients, or those having a sycotic taint.

Treatment—The treatment should in general follow that similarly employed in acute rheumatism.

REMEDIES—Acon., Arn., Ars., Bell., Bry., Bapt., Rhus tox., Ruta, Rhus rad., Chloral., Ham., Lach., Mer. c., Phos., Ver. vir., Lyc., Tart. em., Crotal., Led., Kalm., Dolich., Benzo. ac., Fer. phos., Puls., Amm. c., Colins,

Phyto., Bryonia, Pulsatilla and Arsenicum are frequently indicated.

Purpura Hæmorrhagica—A severe form of purpura, accompanied with marked constitutional symptoms a purpuric eruption upon the skin and frequently hæmorrhages from internal organs.

Symptoms—Usually preceded by severe constitutional symptoms, gastric disturbances, fever and much prostration. Suddenly the hæmorrhagic spots appear upon the skin, first upon the extremities, then on other parts of the body, often to be followed by hæmorrhages from internal organs, mouth, nose, bowels and bladder, and effusions into the conjunctiva, choroid as well as into the skin. It is always considered a very dangerous disease, death frequently occurring from heart failure, anæmia, hæmorrhages and exhaustion. Several times I have noticed in leukemia small bloodvessel rupture, and ecchymotic spots appear upon the skin within a few moments. The first sensation noticed by the patient being a slight stinging pain; also, blood tumors, the size of an egg, appeared upon the abdominal wall, or upon the extremities, while at the same time the body was dotted over with purpuric spots. Purpura fulminans, although a rare disease, is the most to be dreaded of the hæmorrhagic forms, which often destrovs life in twenty-four or forty-eight hours, beginning with a severe chill, followed by a high temperature from 106, or higher, accompanied with severe rheumatic pains, delirium, coma, collapse and death within a day or two.

REMEDIES—Ham., Ars., Rhus tox., Amm. mur., Lach., Carbo veg., Mur. ac., Nit. ac., Phos., Phos. ac., Tub., Bry., Secal., Croc., Ip., Sabina, Ustila., China off., Melilot., Fer. met., Alet., Hyos., Pyro.

Indication for purpura is general. Aconite in the early