may, our task will never be finished, for not once in a hundred years, as the fable runs, but every day and all day long the process goes on—a daily death, a daily renewal, as in our bodies' growth, a death of error, a development of truth.

AN ADDRESS

DELIVERED AT THE OPENING OF

THE DERMATOLOGICAL SECTION.

By ERASMUS WILSON, F.R.S.,

President of the Royal College of Surgeons; President of the Section.

MY BRETHREN,—The Council of the Dermatological Section of this great Medical Congress, offers you a hearty welcome. We assemble to-day as a part of a great International body, for intercommunion of friendship, of information and of thought; and just as the Congress, taken as a whole, has for its main purpose to diminish pain and suffering, and to promote the health of the people, so we, in our department have met to co-operate with a similar intention. The important object now stated, we hope to arrive at, partly by means of the new ideas, which you, our foreign brethren, are about to sow amongst us, and partly by a judicial re-investigation and exposition of the principles which we, at present, adopt for the diagnosis and treatment of cutaneous disease.

The bias of the British medical mind is strongly in favour of those studies which lead directly to the cure of disease; and whilst we recognise fully the advantages and necessity of pathological research in every variety, the conclusion which we seek most ardently to attain, is—the means of restoring our patients most certainly and most readily to a state of health.

As a groundwork of our operations, in this respect, we aim at the regulation of the general functions of the economy—of those all important forces, the functions of digestion, of assimilation, and of nutrition: for experience daily proves to us, that when such regularity is obtained, many of the diseases which we are called upon to treat, yield to the ordinary processes of nature, and return to a state of health without further delay. And this we regard as the true significance of constitutional treatment; by means of which every known disease of the skin may be ameliorated, and in most instances cured. But, whilst we thus place constitutional medicine on a pedestal, as deserving the highest consideration of the practitioner, we by no means disregard the value of topical medicine. We have to contend with local lesions, and with local pain; and for the relief of these we seek for remedies which shall be, at once, the most convenient and the most effectual. In one case, a purge will relieve the patient; but the addition of a soothing local application will be requisite for his cure. In another case, a local application alone will accomplish a great deal, but the addition of a constitutional remedy will assist and facilitate the cure. But, before we can answer the question: What is the best constitutional, and what is the best local remedy? we must have made up our minds as to the *cause* of the disease, and as to the precise *method*, by which we shall attempt the removal of that cause. Our treatment must not be haphazard or simply routine, but must be directed according to a fixed intention. Under such circumstances, the treatment of the disease itself is of comparatively secondary importance. Let us remove the cause and the disease will be cured spontaneously. Our patient may be a sufferer from eczema: but, our patient at the same time, is a victim to dyspepsia. In such a case it becomes our duty to effect the treatment of the dyspepsia first, and the chances are, that when the dyspepsia is alleviated, the eczema will be well nigh cured.

In another case, the eczema may be associated with more or less irritability of the nervous system, without any leading dyspeptic symptoms; and in this instance our remedies should be directed towards the soothing and quieting of the nerve centres and nerves; and, both constitutional and local treatment should be invested with a sedative character. If there were any suspicion of impurity of blood in the first instance, there can be none in the second; the first may be regarded as, in some sort, a blood-disease; the second as a nerve-disease. But, in both, the local treatment would be essentially the same, the difference between them being a difference, not of disease but of cause.

Now, what we should endeavour to establish in these cases is not

only a principle of treatment, but also the material of treatment. In the neurotic case, arsenic will be found a most useful, and probably an essential remedy; in the other or assimilative case, arsenic would be utterly worthless.

If all cutaneous diseases depended on the presence of a poison in the blood, as in the instance of syphilis, the elimination of the poison would be the aim of our treatment in every case, and the results would be as satisfactory as we know them to be in syphilitic affections. But in other cutaneous diseases it becomes necessary to settle in our minds whether we have to deal with a disease taking its origin in disturbance of the digestive functions, or whether it be neurotic to a greater or less degree; whilst it must like wise be admitted that in certain cases, particularly those of long duration, both causes are apt to prevail.

For therapeutical purposes all diseases of the skin might be assembled, if we except syphilis and diseases proceeding from local causes, under three heads, namely: diseases depending on disorder of digestion and assimilation; diseases depending on disorder of innervation; and diseases of nutrition. As an example of the first kind we might take eczema, with its multitudinous manifestations. As an example of the second we should have pruritus and prurigo; and as examples of the third, papilloma and fibrosis. But we cannot fail to recognise the fact that, practically, there is a greater or less blending of the whole. The pruritus of eczema belongs to disordered innervation: and, aberration of nutrition may be accompanied with symptoms which appertain to both the others. Thus, in the lepra of Willan, the psoriasis of modern schools, we have a disease which is due to altered nutrition of the skin from defective organisation of that structure. But as the nerve-power or life-power of the skin is insufficient to restrain abnormal function, so—capillary congestion constitutes a part of the disease; and, the hypertrophous growth of papillæ and excessive production of morbid epidermis must be regarded as a passive nutritive change or passive growth. In ichthyosis, with a starved condition of the skin as far as nutrition is concerned, we have an excessive papillary growth, an excessive accumulation in the shape of altered epidermis. But still more interesting illustrations of abnormal nutrition are evinced by excess or defect of pigment; by the substitution of a lowly for a more highly organised tissue, as in fibrosis, and by the exuberant proliferation of cell-tissue of low organisation which is met with in the instances of tinea, of favus, and of epithelioma.

If I were called upon to summarise the diseases of the skin such as they exist most commonly in this country: I should begin with eczema, as occurring at all ages and in every condition of life; tinea might follow next as a disorder of childhood; then the acne of youth; and next, the so-called acne rosacea of the adult, which latter is actually a form of eczema. The lepra of Willan is not very common; neither is scrofula in its cutaneous forms. Looking to the cause of these diseases, we find, mal-assimilation and nerve-irritability; aberration of nutrition and defective nutrition. And, therapeutically, our most reliable remedies are—mild purgatives with tonics in the diseases of dyspeptic origin; nutritive tonics; and especially, arsenic as a nutritive tonic, and in that sense a direct nerve-tonic.

What I have now said is intended to open up to the minds of my hearers a picture of the broad field in which we all mutually labour; to point out that many portions of that field admit of independent exploration; and to show that starting from the line of our existing knowledge there yet remains very much to investigate:—singly, for the perfection of the parts; and collectively for the perfection of the whole. This is the field of Dermatological culture and research; and with this brief introduction I now call you to the work of our section.

Once more, Brethren, we bid you welcome as friends and fellow-workers.

CALCUTTA.—Dr. Macleod's report for the first quarter of the present year shows an unusually low temperature, and a high barometric pressure. The mortality from fever shows a marked decline; but the deaths from cholera, although below the mean, were higher than in either of the two preceding years. Diarrhoea and dysentery exhibited a slight excess over the decennial mean, but the quarterly total was considerably below that of 1876, 1878, and 1879. Small-pox was fatal in 74 cases only. A decided improvement is shown in vaccination; and, notwithstanding the difficulties caused by the general prevalence of measles, 4,321 operations were performed during the quarter. A considerable and increasing attendance at the vaccination-stations shows that the value of vaccination is being gradually recognised amongst the natives; but still better results may be looked for when the new law arrangements have come into efficient working order. A considerable improvement, too, is noted in the registration of births, the number registered having exceeded the decennial mean by 530.