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AN ANALYSIS OF FIVE THOUSAND CASES OF SKIN DISEASE,
WITH REMARKS UPON SOME OF THE PRINCIPAL GROUPS AND CASES.

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FIRST PAPER.

THESE cases are taken from the records of the out-patient department for skin diseases of the Massachusetts General Hospital, and they include, in consecutive order, all the cases which have been treated there during the past six years. The value of such analyses, incomplete they necessarily are in many respects, is still great, as they yield valuable information concerning the ætiological relations of many cutaneous diseases, and furnish the data for comparing the prevalence of these affections in various countries. The publication of similar reports, even when consisting of mere lists, in the principal cities of the Old World and our own by competent dermatologists, has established the fact of remarkable variation in the occurrence of certain affections, for which as yet no satisfactory explanation has been discovered. Other cutaneous diseases seem to be under the action of a law which works alike among all classes and nations; while on the other hand local influences of climate and customs are found to be productive of distinct types of affections of the skin. These questions of geographical and race influence should form one of the most important subjects of discussion at the dermatological section of the coming centennial international medical congress at Philadelphia.

The establishment of special departments for skin diseases in connection with the dispensaries of the large hospitals of our great cities during the past few years has made the collection of such data possible, but has done very little besides this for the advance of the study of dermatology. We still lack the opportunities of hospital accommodation for this class of patients, which is so essential for the complete study and treatment of these affections. The dermatologist in charge sees, and can show for a moment to the student, great numbers of cases, it may be, in a year, but the faculty of a snap diagnosis thus taught and ac-

quired is but a small part of the subject. A knowledge of the natural progress of disease and of the modifications affected in it by treatment can be acquired only by daily observation of individual cases under the complete control of the teacher. This is the knowledge which makes the understanding and successful treatment of skin diseases possible, and it can be acquired only by the establishment of wards for their exclusive care. Without them the dermatologist of America is deprived of advantages for self-improvement and instructing which his foreign brethren have long been provided with; our students must seek abroad the means of perfecting themselves which are denied them at home; and the pitiable subjects of these distressing affections must suffer from such unequal distribution of hospital charity.

The class of cases presenting themselves for treatment at the skin department of the Massachusetts General Hospital, represented below, is different in some respects from that found in some other dispensaries, as it is drawn from a wider district, patients coming to it from a large portion of New England. The relative preponderance of foreigners over natives is thereby considerably reduced, and the proportion of serious over trivial affections correspondingly increased, as the number of the latter seeking relief from a distance is naturally small. The nature of the cases, however, is as diverse as is usually presented in such lists, representing, as they do, such various relations of life; for it is by no means the poor alone who avail themselves of the gratuitous advice of the department. Most notable differences, however, will be discovered in the character of the diseases by comparing the list below with those drawn from the private case-book of the dermatologist; the extremes being, on the one hand, the representatives of poverty and filth, on the other of luxury and the refinement of bodily care. But no one without the experience derived from the study of both classes can form an intelligent opinion of the nature of the cutaneous diseases of any community.

There is a most necessary preliminary question to be settled in the preparation of an analysis of this sort, that, namely, of nomenclature and classification. Such a necessity is the great misfortune of dermatology, for until it has a fixed language of terms which can be universally understood and used, there can be no greater chance of establishing it upon a stable and working basis than there was of erecting the structure of Babel. Nearly every dermatologist feels at liberty to invent new and change old names, and some are not satisfied long even with those of their own creation. Titles to be understood, should be written not only with the author's initial after them, as those in zoölogy and botany, but with the date of issue as well. A large part of a lecture to students on any of the common affections of the skin must be wasted in attempting to explain and reconcile such differences of nomenclature as occur even in their common text-books on the subject. It is hard to say whose is

the whole fault of such confusion ; it certainly is not inherent in dermatology itself. One reason for it, no doubt, is the constant attempt of individual authors to correct it by substituting a system of their own invention as a panacea. Such efforts are worse than useless, for they only add a new element of discord for future elimination. There is but one way, as it seems to me, out of the maze ; that is, the establishment of an international committee on the subject, to be appointed by a congress of dermatologists from all parts of Europe and America, who by mutual concessions shall agree upon a system of nomenclature and classification, which shall be adopted and left inviolate by individual writers, and altered only at future sessions of the congress, to which all proposed changes and additions shall be referred. Such a plan should not be impracticable, at least so far as concerns nomenclature, and in view of the universal dissatisfaction with the present state of affairs, would, I believe, be eagerly entertained. This question, too, certainly should receive the earnest consideration of the committee having in charge the organization of the section of dermatology of the centennial congress.

In want of such a key at present, however, what plan shall be followed in the registration of the cases to be published below, that the names employed may convey to readers everywhere the exact nature of the cases? Evidently one which is already clearly understood and most widely distributed. In selecting, therefore, as best adapted for such purpose, the system of Professor Hebra, I shall succeed in informing every dermatologist who may chance to see them of the character of the affections contained in the following lists, even if I do not wholly agree with that distinguished teacher as to the proper position and name of some of them. Such exceptions will, however, be more appropriately considered in subsequent papers upon some of the principal groups and remarkable cases tabulated below. It will be understood, therefore, that the diseases arranged alphabetically, for convenience' sake, in Table I. are mainly those described by Hebra under the titles there used ; and that in Table II. they are grouped in accordance with his system of classification.

That the sum of these diseases therein enumerated will be found somewhat larger than the number of patients given, is explained by the fact that some of them were affected by two or more of the diseases at one time.

The sex and nationality of the patients were as follows : Men, 1414 ; women, 1678 ; children under fourteen years, 1908 ; of native stock, 1885 ; of foreign stock, 3115.

TABLE I. — DISEASES ARRANGED ALPHABETICALLY.

Abscess	6	Melasma	1
Acne	348	Milium	3
Alopecia	13	Molluscum contagiosum	9
Alopecia areata	17	Molluscum fibrosum	2
Ambustio	7	Morbilli	1
Bromidrosis	1	Musquito poisoning	53
Chloasma	16	Nails, disease of	5
Comedo	3	Nævus vascularis	18
Condyloma	2	Pemphigus	15
Cornu cutaneum	1	Pernio	7
Dermatitis	34	Phtheiriasis capitis	216
Ecthyma	55	Phtheiriasis corporis	48
Eczema	2242	Phtheiriasis pubis	7
Elephantiasis Arabum	5	Pruritus	50
Epithelioma	25	Psoriasis	152
Erysipelas	52	Purpura	19
Erythema exudativum multi- forme	73	Rhus poisoning	20
Erythema nodosum	8	Scabies	139
Folliculitis (heat)	12	Scarlatina	1
Furunculosis	65	Scleroderma	4
Herpes	28	Scrofuloderma	27
Herpes zoster	73	Sebaceous cyst	2
Hirsuties	1	Seborrhœa	55
Hyperæsthesia	2	Syphiloderma	327
Hyperidrosis	5	Tinea favosa	17
Hypertrophied scars	3	Tinea tonsurans	180
Ichthyosis	5	Tinea versicolor	81
Impetigo	19	Tyloma	2
Keloid	11	Ulcer	309
Lentigo	1	Urticaria	132
Leprosy	1	Varicella	22
Leucoderma	1	Varix	2
Lupus	11	Verruca	14
Lupus erythematosus	6	Xeroderma	13
Maculæ atrophicæ	1	Xanthoma	2
		Imperfect diagnosis	108

TABLE II. — DISEASES ARRANGED UNDER HEBRA'S CLASSES.

Class I. Hyperæmiæ.

Class II. Anæmiæ.

Class III. Disorders of the glands, 91.

Sebaceous Glands: Seborrhœa, 55; xeroderma, 13; molluscum contagiosum, 9; milium, 3; comedo, 3; sebaceous cyst, 2.

Sweat Glands: Hyperidrosis, 5; bromidrosis, 1.

Class IV. Exudative diseases, 3561.

Varicella, 22; measles, 1; scarlatina, 1; erythema exudativum multiforme, 73; erythema nodosum, 8; urticaria, 132; dermatitis calorica, 26; dermatitis traumatica, 2; dermatitis venenata, 73; dermatitis erythematosæ, 86; dermatitis phlegmonosa, 71; herpes, 101; pemphigus, 15; psoriasis, 152; eczema, 2242; scabies 139; acne, 348; impetigo, 19; ecthyma, 55.

Class V. Hæmorrhages, 19.

Purpura, 19.

Class VI. Hypertrophies, 40.

Pigment: Lentigo, 1; chloasma, 16; melasma, 1.

Keratosis: Tyloma, 2; ichthyosis, 5; verruca, 14; cornu, 1; condyloma, 2; hirsuties, 1; scleroderma, 4; elephantiasis Arabum, 5.

Class VII. Atrophies, 37.

Leucoderma, 1; maculæ atrophicæ, 1; alopecia, 30; atrophy of nails, 5.

Class VIII. Benign new growths, 38.

Keloid, 11; hypertrophied scars, 3; molluscum fibrosum, 2; xanthoma, 2; nævus vascularis, 18; varix, 2.

Class IX. Malignant new growths, 70.

Lupus erythematosus, 6; lupus vulgaris, 11; scrofuloderma, 27; leprosy, 1; epithelioma, 25.

Class X. Ulcerations, 309.

Ulcers (non-syphilitic), 309.

Class XI. Neuroses, 52.

Pruritus, 50; hyperæsthesia, 2.

Class XII. Parasitic, 549.

Vegetable: Tinea tonsurans, 180; tinea versicolor, 81; tinea favosa 17.

Animal: Phtheiriasis capitis, 216; phtheiriasis corporis, 48; phtheiriasis pubis, 7.

Cutaneous syphilides. Acquired, 264; congenital, 63.

Uncertain diagnosis, 108.