

ECZEMA ERYTHEMATOSUM FACIEI

The face of adults is the most common site of eczema erythematosum. It begins as a diffuse hyperemia accompanied by more or less burning and itching. The condition may be limited at first to one region, as the forehead or eyelids, but usually sooner or later the disease extends over the greater part of the face, and sometimes down the neck. The scalp is rarely invaded and in men the bearded region is often spared. The redness becomes more marked and where the integument is loose, as below the eyes, the edematous swelling is often quite conspicuous. Later when the condition has become more chronic and there is infiltration and actual thickening of the derma the natural creases and wrinkles are deepened and the skin is thrown into prominent folds. A fine desquamation begins after a few days and lasts throughout the course of the disease. The skin feels harsh and dry. It is rather unusual for the other primary lesions of eczema to develop or for the erythematous lesion to change its type, though occasionaly in the folds of the neck it will assume a moist character. The excoriations caused by scratching and rubbing alter its appearance. The course of the disease is usually chronic; exacerbations of acute symptoms occur at times spontaneously, or from the use of soap and water, or as the result of exposure to heat, cold or wind, or the indulgence in rich food and alcohol. DIAG-

NOSIS: Erythematous eczema in this region is not infrequently mistaken for erysipelas, but the latter disease is to be distinguished by its acute onset with fever and other constitutional symptoms, by its throbbing and burning, rather than itching, and the absence of excoriations and scratch marks, by its sharply defined elevated border and smooth, shining, crimson red surface, and its rapid spread. TREATMENT: The patient should avoid all things which are likely to produce facial congestion. In the more acute stages it is well to employ a lotion containing in four ounces, two drachms each of calamine and zinc oxid and one drachm of boric acid. If the itching is troublesome one per cent of carbolic acid may be added. The lotion should be dabbed on freely several times a day or kept constantly applied on compresses. Subacute cases often improve more rapidly under treatment with a paste made up of two drachms each of starch and zinc oxide and four drachms of vaseline. When there is much infiltration a few minims of oil of cade may be added to the ounce of ointment, and the quantity very gradually and cautiously increased, though great care must be taken not to cause irritation, and it is to be remembered that on the bearded region even mild tar preparations will sometimes provoke pustulation.