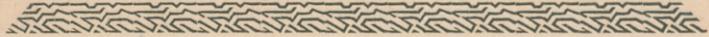


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THE TREATMENT OF ERYSIPELAS WITH STRONG ALCOHOL.

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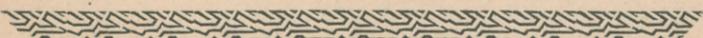
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## THE TREATMENT OF ERYSIPELAS WITH STRONG ALCOHOL.

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The great number of methods which have been recommended in the treatment of erysipelas is the best evidence of the unsatisfactory results following any particular method.

At present the treatment is usually directed toward the destruction of the streptococci of erysipelas or toward preventing their progress in the lymphatics of the skin, from the point of original infection.

The former object is accomplished in a measure by the application of antiseptic substances in the form of ointments or moist antiseptic dressings covering the area involved and the surrounding tissues to a distance of several inches.

An ointment containing from 10 to 50 per cent. of *ichthyol* is at the present time most popular.

All moist dressings must be large and frequently renewed and should be covered with an impermeable substance. They may contain any one of the many well known antiseptic substances in a solution which will neither cause poisoning by absorption nor destruction of the skin at the point of application.

An attempt has been made to destroy the streptococci by depriving the area of oxygen by covering it with rubber tissue or by painting it thickly with collodion, to which various antiseptic substances have been added in order to make it more effective.

Of the methods intended to limit the infection to its original area the most popular one consists in applying rubber adhesive straps very tightly in a circle around the infected area remaining about one and one-half inches beyond its margin. In the same way a constricting and limiting band has been formed by painting successive layers of collodion over a surface an inch wide about one and one half inches beyond the area of redness. Again a circle has been formed by making a row of hypodermic injections of 5 per cent. carbolic acid around the infected area. This, like the collodion treatment, is a very old method which has recently been revived. Other antiseptic substances have been used in a similar manner. A rim has been painted with nitrate of silver, tr. of iodine, tr. of the chloride of iron etc., similar in size and location to the bands of collodion or adhesive plaster just described. The same object has been accomplished by scarifying the surface corresponding to these limiting bands.

Five years ago Dr. Behrend of Sagan, Germany, stated that he had employed absolute alcohol in the treatment of a large number of consecutive cases of erysipelas with the result of aborting every attack completely in from 3 to 5 days. He simply scrubbed the surface very vigorously with absolute alcohol 3 or 4 times a day.

I have since used the method in nineteen successive cases with the most gratifying results.

In each instance the temperature, which had reached 105° F. in several cases, was reduced below 100° F. within 24 hours, the blush began to decrease almost immediately, the patient felt practically well after 48 hours and the severest cases were free from the disease within 5 days.

In order to illustrate the treatment I will give a short history of three of these cases. One of them came under my treatment a few hours after the blush was noticed, a second one after being ill for one week, and a third one complicated with diabetes.

**CASE I.** Mr. Wm. L. D., age 27, a medical student at Rush Medical College, who had been subject to severe recurrent attacks of facial erysipelas consulted me upon noticing the characteristic blush upon his nose, having previously recognized the peculiar stinging sensation and the stiffness of the skin. I advised him to apply strong alcohol to his nose freely with a cloth every 15 minutes during the day and to tie on a handkerchief saturated with alcohol upon retiring at night. The blush disappeared within 12 hours and in three days the skin felt quite normal. His previous attacks had never lasted less than two weeks and had invariably confined him to the house and disabled him from work.

Since receiving my advice he has twice aborted an attack in a similar manner.

**CASE II.** On March 10th 1893. I was called to attend Miss Bridget D. of 414 Elm St., Chicago. She had suffered for one week from facial erysipelas. Her physician had made various applications and had given many remedies internally but the disease progressed constantly. When called to see the patient in consultation, I found the entire face, both ears, the anterior two-thirds of the scalp and neck and the upper portion of the chest involved. The eyes were closed and the redness extended into the ears.

The patient's temperature had been about 104° F. for four days and exceeded 105° F. several times. She had vomited incessantly for two days, notwithstanding the use of various remedies.

The patient was given an ounce of castor oil in beer-foam and the entire effected surface was first thoroughly scrubbed with strong alcohol and then covered with pledgets of absorbent cotton which were saturated with strong commercial alcohol every half hour, day and night.

Vomiting ceased at once. During the first 24 hours the temperature fell from 104° F. to 99° F. The patient could take milk and other liquid food freely. The blush had almost entirely disappeared 48 hours after beginning this treatment and the patient felt quite well except for the exhaustion which resulted from the long continued high temperature.

The use of the alcohol was continued as freely as at first for four days and then it was applied every two or three hours for several days more. All the objects which had come in contact with the patient during her sickness were now disinfected in order to prevent reinfection. A non-irritating ointment was applied to make the patient more comfortable during her convalescence. She was able to sit up ten days after the beginning of the alcohol treatment.

CASE III.—Mrs. R., 186 Orchard St., Chicago, 68 years of age, had suffered severely from diabetes for more than one year, as shown by the presence of a large amount of sugar in the urine which had been examined repeatedly during the past year. On Feb. 11, 1893, she became severely ill having a chill, nausea, headache and pains throughout the body. She had been exposed to cold during a long ride, so la grippe was diagnosed and remedies prescribed accordingly.

On the following day her condition was worse, her temperature reached 103° F. and toward evening a blush was discovered in the region of the nose. This increased with extraordinary rapidity so that when I saw her on the following day it extended over the entire face, the ears and the neck. The patient was delirious and had a temperature of 104° F.

Knowing the almost hopeless condition of a patient suffering from diabetes complicated with facial erysipelas, I at once procured a competent nurse who carried out the alcohol treatment as described in the previous case. The temperature fell to 102° F. the first 24 hours, below 100° F. the second 24 hours and the redness began to subside. The patient remained delirious for two days longer, when the temperature reached the normal point. It remained within 1° of normal after this time. The alcohol treatment was continued for five days.

I have employed the same treatment for erysipelas in other parts of the body with exactly the same results.

In two cases the treatment was entrusted to friends who became careless in the use of the remedy after the first day, because the patient seemed to have recovered entirely. As a result of this inattention there was a return of the disease over a portion of the area, which subsided immediately upon again applying the alcohol thoroughly and frequently.

The antiseptic power of alcohol depends upon its ability to dehydrate tissues and to coagulate albumen. Both of these qualities are lost in a great measure if alcohol is diluted with water, hence the necessity of using strong alcohol in considerable quantity.

Alcohol does not irritate the skin and being a good solvent for the fat contained in the skin it penetrates sufficiently to prevent reproduction of streptococci.

If this remedy is carefully applied I am confident that it is of great value.

In all of my cases cathartics were administered in order to increase elimination of waste products. Recently I have treated three cases in which I applied strong alcohol during the day and 25 per cent. ichthyol ointment at night, with equally satisfactory results.