

2·1 days only, dermatitis being so slight and clearing up so rapidly when the causative agent was removed, that it was not considered necessary to keep the men in hospital after the cure of the scabies.

Combining the two sets of figures, thirty-one cases have been in hospital for an average of 2·96 days.

Dermatitis due to treatment was absent, probably owing to the mode of application, which is by smearing on the skin and not by rubbing in.

The actual time of treatment is now reduced to twenty-four hours. Cases usually arrive in the afternoon, receive their first bath and application of the special ointment; go to bed and receive their second bath and ointment on the following morning, return to bed till tea-time and have a final bath in time for the evening discharge from hospital. No relapses have occurred during the period.

The preparation of the special ointment—Marcussen's prescription—is carried out successfully at the hospital dispensary.

There is no doubt that the method of treatment of scabies is more efficient, less irritating and quicker than any other form tried up to the present.

From clinical observation of these thirty-one cases, it would appear to be possible to treat the disease in the Army by detaining the men in hospital for twenty-four hours.

(Signed) A. T. FROST,
Major, R.A.M.C.

January 16, 1924.

These reports are published as a matter of general interest.

This treatment was brought to the notice of the Director of Hygiene by Major G. S. Parkinson, D.S.O., who had used it with marked success in Gibraltar where he held the appointment of Deputy Assistant Director of Hygiene, and since the results of further trials carried out under the orders of the Director of Hygiene proved satisfactory, it has now been adopted as the standard method of treatment for scabies in the British Army.

Two points of importance should be noted: (1) Excess alkalinity must be avoided in the preparation of the ointment; (2) the ointment should be smeared on the skin and not rubbed in.

THE TREATMENT OF RINGWORM BY ROBERTSON'S METHOD.

BY CAPTAIN R. A. MANSELL, M.B.E.
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THIS method of treating ringworm was described by Dr. James Robertson, M.B., D.P.H., Assistant Medical Officer of Health and Medical Officer of Schools, Blackburn, in the *British Medical Journal* for June 16, 1923, and has been used for the treatment of children of soldiers at Preston during the past half year with uniformly successful results.

The method was brought to my notice by Major J. E. Hoar, R.A.M.C., who first used it here, and who suggested the writing of this note.

Not the least of the advantages of this method is the substitution of a feeling of cheerful confidence in place of the previous pessimism, almost amounting to dismay, with which one was wont to regard the occurrence of ringworm. The period of treatment is short; the amount of time required is only a quarter of an hour a day, and the prospects of a rapid and complete cure appear to be 100 per cent.

The treatment is performed as follows:—

The hair of the whole head is cut as short as possible, and, if necessary, the areas affected are shaved. The scalp is then thoroughly washed with ether soap and dried. The following lotion is applied by means of a small pad of wool on a probe or forceps: calomel five grains, tincture iodi mitis one drachm, the mixture being stirred thoroughly with a glass rod until a brick-red precipitate is formed. Unless there is some special indication for treating only one portion of the scalp, it is best to decide to treat the whole, and for this purpose—as there is frequently some degree of reaction, more especially over active ringworm patches—the scalp is divided into six areas, one of which is treated with the lotion each day.

The lotion should be gently daubed on and not rubbed in, and it must be freshly prepared for each application. If it is applied at all roughly considerable pain and erythema—even blistering—of the part is apt to result. Care must be taken that the lotion does not run down from the scalp on to the skin of the face or neck.

The parts of the scalp which have not been treated with lotion are then well massaged with unguent. hydrarg. ammon., and the whole scalp is covered with clean lint and a bandage, or, better still, the parents are asked to provide three or four closely-fitting linen skull caps which can be easily washed and disinfected and are worn day and night.

The following day, when the covering is removed, those parts of the scalp which were not treated with the lotion on the previous day are carefully washed with ether soap, and the second area is treated with the lotion; the ointment is applied and the head covered as before; and so on, day by day, till the six areas have been treated.

If there is any marked or painful reaction to the lotion, the application of a mixture of three parts of olive oil and one part of castor oil usually clears it up very rapidly; and if the use of ether soap causes undue smarting, a freely lathering soap—such as “lux”—has been found to be quite efficacious.

After the head has been thus treated in areas with the lotion, the whole scalp may be given one final treatment all over in severe cases, but in ordinarily mild cases this has not been found to be necessary.

Then follows a week at least of thorough shampooing of the head every morning with ether soap if it can be tolerated, followed by the rubbing in of the oil mixture described above. This is persisted in until all the scales

and scurf have separated and the scalp is left in a clean and healthy condition.

This latter part of the treatment can be carried out, as a rule, in the patient's home, with occasional inspections to ensure that it is being properly done; but, in view of the fact that painful reaction may occur as the result of the application of the lotion, it would seem advisable that this should always be carried out by a medical officer.

Very few cases require more than one course of treatment in this way, provided that it is carefully and thoroughly carried out in the first instance; the average number of days needed to effect a cure has been about that noted by the originator of the treatment, i.e., just over a fortnight.

The essential points for success appear to be:—

- (1) Very close cutting, or shaving, of the hair all over the head.
- (2) General treatment of the whole scalp, even though only a small part of it appears to be infected.
- (3) Maintenance of continual cleanliness and the application of an oil dressing to facilitate the separation of scurf and scales.
- (4) Inspection of the whole of the affected family and their treatment, if necessary, to ensure that there is no risk from such sources of the patient becoming re-infected.
- (5) Disinfection of articles of clothing and bedding which may carry or retain the spores of the disease both during and at the end of the treatment.

Echoes of the Past.

LETTER TO THE RIGHT HONOURABLE THE SECRETARY
AT WAR ON THE MEDICAL DEPARTMENT OF THE
ARMY.¹

FROM SIR GEORGE BALLINGALL.

Regius Professor of Military Surgery in the University of Edinburgh.

UNIVERSITY OF EDINBURGH, DECEMBER 30, 1854.

SIR,—The attentive ear which you have readily given to many suggestions tending to the comfort, the health and efficiency of the soldier, encourages me to submit to your consideration the following observations on the Medical Department of the Army. If any apology is necessary for this intrusion, I trust it will be found in the interest which I naturally take in my old pupils, of whom some sixteen hundred have entered the class of Military Surgery during the thirty years that it has been under my tuition, and in a vivid recollection of what took place at the commencement, and particularly at the termination of the last war. There are few, if any, Medical Officers now in the Army who can speak from experience of the sanguine expecta-

¹ From an old book kindly lent by Dr. George Ballingall of St. Leonards-on-Sea.

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The Treatment of Ringworm by Robertson's Method

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