The Relation of Diseases of the Skin to General Conditions

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The modern division of the practice of medicine and surgery into many specialties has been a natural and legitimate sequence to the marvelous development of the science and the art of healing which has been made in late years. The sum total of medical knowledge in various lines has now become so great and extended that few if any can hope to compass and apply it to all satisfactorily in a lifetime; and the development of specialization in the medical profession...has both contributed to this development and has facilitated the practical application of knowledge and experience along many lines. The advances which have been made in connection with medicine and surgery, largely by specialization of work, compare favorably with those obtained in other lines of human activity, even in this age of steam and electricity.

But, on the other hand, all thoughtful men must recognize that in this minute subdivision of thought and practice, and in the enormous aggregation of medical knowledge there is a lack of coordination in its practical application which at times results disadvantageously to the patient....

This is especially apt to be the case in connection with diseases of the skin, and yet in almost no branch of medicine is the error more serious; and the error has unfortunately spread from the specialist to the general practitioner, until lesions on the skin are now too often regarded as special and local affairs, quite unconnected with disorders of the general system.

The reasons for the neglect of internal conditions of the system in the practice of dermatology are not difficult to discover. Much of the work in this branch has, of late years, been done by those who have devoted themselves to it exclusively, almost from their first graduation; they have had little or no practical experience in general medicine, and as their interest and study has been largely concentrated on the lesions visible on the skin, other broader relations of medicine have naturally become less distinct....

It must be granted, however, that clinical experience often seems to give considerable support to the errors thus begun. For undoubtedly, very much can often be accomplished by correct and proper local treatment, and the cessation of this or that eruption under local applications does often seem to warrant belief in their great efficacy. On the other hand there is certainly often danger of error in this judgment. For it is possible, and indeed probable that very frequently the local or other exciting cause which produced the eruption has passed away, and thus the local lesion which was left yields readily to local treatment while the general systemic condition which predisposed thereto still remains; the skin then readily succumbs to a renewed irritant and the eruption recurs again and again, until the conditions of system at the bottom of it are removed....

But in certain instances, as in herpes zoster, the eruption is quite self-limited, and so naturally ceases under any proper local application. How readily could a perfectly ignorant person be deceived on seeing the rash of scarlet fever, measles, chicken pox or variola cease after local treatment; the same error could occur in regard to eruptions excited by certain drugs, as quinin, belladonna, copaiba, etc., after the administration had been suspended....

I can not more forcibly illustrate my conception of the relations between local pathology and general causes than by reference to some facts in nature....

All are familiar with the growth of moss, both upon dead and dying trees and upon those in poor damp ground, and shut in from sunlight, and how it disappears when the best conditions of life are secured; the mistletoe on the oak flourishes in the mist and dying trees and upon those in poor damp ground, and shut in from sunlight, and how it disappears when the best conditions of life are secured; the mistletoe on the oak flourishes in the mist and on the highest branches, where vitality is least.

Illustrations could be multiplied indefinitely to show the resisting power of health over the germs of disease, and yet the principle seems to be applied very little in diseases of the skin. They seem to be regarded on all sides as something peculiar and distinct from other maladies and subject to different pathologic laws. My plea is that the specialist and general practitioner should look at them more as other diseases are considered, namely as being largely evidences of lowered vitality and connected with faulty metabolic processes in the system. Time and space forbid me to develop the matter to its fullest extent. But this I do urge: That the patient should be studied in all aspects and treated more on the broad principles of general medicine than simply by the various local measures at the time in vogue....

JAMA 1897;28(23):1067-1072.