

However, in dealing with a difficult lesion of this kind, anything which helps is of advantage.

*Small Chronic Patches of Eczema and Psoriasis.*—Here radium acts in the same way as it does in the case of lichenification, only the results are generally more satisfactory, depending on the amount of infiltration and the length of time the patch has been present. It is, as a rule, only used in small patches, as it is difficult to cover an extensive area unless one's supply of radium is large. The same remarks apply to localized patches of pruritus.

*Lupus.*—The use of radium in lupus is not very great, and when it is used it must be in large doses sufficient to destroy completely the affected area. It has no selective action for lupus tissue like that seen in *nævi*, keloid and rodent ulcer, so that with the large doses which one has to use the effect is not in any way superior, and very often inferior to other methods of treatment.

*Lupus Erythematosus.*—The only type of erythematosus for which radium is of use is that known as the fixed type. This is a condition which is extremely resistant to treatment in the ordinary way, which spreads very slowly with a raised infiltrated edge. Here the best one can hope for is to produce a firm scar, and therefore radium, which will remove the injected venules which are present in this condition, and the infiltration, is of great use.

*Rodent Ulcer.*—Rodent ulcer is in all probability the most satisfactory skin condition to treat with radium. Where the diagnosis is made early the results are uniformly good. In those cases, however, in which either bone or cartilage has become adherent to the skin, that is to say, where the rodent is beginning to penetrate downwards, the outlook is not so good; but, of course, this prognosis applies to all forms of treatment under these conditions, not only radium, and in all probability the results even here are better with radium than anything else. Owing to the fact that rodent ulcer occurs in the vast majority of cases on the face, and more especially in the parts around the eye, operative treatment is generally difficult without producing some form of distortion of the lid and ectropion. The most common situation of all is on the side of the nose near the inner canthus of the eye, and Dr. Sequeira has shown that the right side is far more common than the left, possibly due to the fact that most people are right-handed and more likely to rub that side than the other. The question of wearing glasses is also of importance, although many rodents occur in this situation in people who have never worn glasses. As mentioned above, radium has selective action for rodent tissue,

and it is quite possible to remove a lesion without causing any destruction of any of the surrounding skin or subcutaneous tissue. However, in dealing with a serious condition like rodent, it is, as a rule, advisable to go beyond this mark and give a dose sufficient to prevent any recurrence; therefore one generally applies a fairly large dose. Supposing, for example, that one has 25 mg. of radium, that is to say, an applicator costing about £400, one would treat an ordinary rodent as follows: one would cover the applicator with two layers of thin aluminium foil, and then with a layer of gutta-percha, and apply the radium, holding it firmly over the rodent ulcer for one hour on two consecutive days, that is to say, a total of two hours. At the end of a fortnight the reaction would begin to show, and the area would become red and inflamed, and perhaps exude a little serum; a very hard, conical-shaped scab not unlike that of *rupia* gradually forms, which is extremely adherent to its base. At the end of the second fortnight that would fall off, leaving a healed smooth area; this, as a rule, again inflames, and one gets what is known as a secondary reaction, which is frequently more marked than the first. This runs precisely the same course, and the scab falls off, leaving a firm, smooth scar, which is red to start with, but gradually becomes white. In some cases of rodent, recurrence takes place, generally about two years or more after the treatment. It is important that they should be seen early as soon as there is the slightest sign of re-growth, and be treated again. They react just as well to treatment, as a rule, on the second occasion as on the first, and as many of the subjects are elderly people, if one can keep the rodent in abeyance by treatment every two years, that is by no means a bad result.

*Paget's disease of the nipple*, which may be looked upon either as a malignant disease from the beginning, or as a forerunner of malignancy, reacts satisfactorily to radium. Captain Pinch relates a case of Paget's disease of the umbilicus in which the patient had a patent urachus, and operative treatment being inadvisable, a good result was obtained from radium. When the condition is on the nipple, however, and the patient will submit to an operation, there is no question that surgical treatment at the present time is preferable.

*Sarcoma.*—Radium has a curative effect on sarcoma cutis and subcutaneous nodules, but as it only removes the individual lesion temporarily, and it is impossible to treat all the nodules in most cases, nothing in the way of a permanent result should be anticipated. With regard to carcinoma of the deeper organs the

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