

it will be carried forward to their credit in the New Year.

The Editor and Sub-Editor are still ready, as heretofore, to give their services to the cause in support of which they have spent their lives.

Now that, thanks to THE BRITISH JOURNAL OF NURSING, nurses are legally organised, the future is in their own hands, and from somewhere, the women must be coming out of the shadows, who will fill our places in the future, and carry on the great traditions of THE BRITISH JOURNAL OF NURSING—the prevention of sickness, skilled care for the suffering, and justice for their devoted attendants.

ETHEL G. FENWICK.

OUR PRIZE COMPETITION.

WHAT DO YOU KNOW OF THE DIFFERENT TYPES OF PSORIASIS, AND OF THE CONSTITUTIONAL AND LOCAL TREATMENT.

We have pleasure in awarding the prize this week to Miss S. Evans, Parkside Maternity Home, Ravenscourt Park, W.1.

PRIZE PAPER.

Our teachers tell us that "Psoriasis," one of the many skin diseases, is among the subjects not yet understood, and is a problem still to be grappled with. It is, however, held to be hereditary, and may crop up at any time in an individual who has once manifested the disease, notwithstanding that previous attacks would appear to have been dealt with successfully. It is most intractable to treatment, and even when apparently cured recurs again and again. Other diseases, having a weakening effect on the general system, may be the exciting cause of an attack, and it is very necessary, in making a diagnosis, to bear this in mind. The rash should always be examined in daylight, and its situation noted; also the time at which it appears. The condition of the general health should be noted, and the nurse should inquire if the patient has been taking any drugs and also note the temperature.

Psoriasis, then, is a chronic hereditary, inflammatory skin disease, characterised by red patches of varying sizes, covered by whitish, branny scales, prone to appear upon the extensor surfaces, particularly upon the knees and elbows. They may, however, appear on all parts of the body, and are not infrequent on the face and scalp. It is usually local in character, but may resolve itself into a constitutional and febrile disease, necessitating prolonged and continuous treatment, and causing loss of employment. The underlying

cause is usually entirely unknown. It is not among the parasitic diseases.

The spring and autumn are the most common seasons for the appearance of Psoriasis. The patches are always superficial and consist of thickened epidermis, and are sometimes of a deep red colour. They may be complicated by eczema. The amount of irritation is very variable, sometimes slight, and sometimes very severe.

Treatment.—The internal use of arsenic is indicated in graduated doses until a maximum is reached. Some authorities advocate thyroid extract in doses gr. iv. Medicated baths are sometimes used, e.g., vapour and soda baths. Various ointments are used to remove the patches of the thickened epidermis, and perhaps the most successful of all is ordinary vaseline. Other suitable applications are unguentum salicylic or one containing chrysophanic acid.

The patches may be blistered with the same object in view, care being taken to blister only two or three patches at one time. In applying chrysophanic acid, care must be taken to confine the ointment to the areas involved as much as possible, as otherwise it produces a condition known as erythema in the surrounding skin, with a good deal of constitutional disturbance. If this should occur, the surrounding skin should be treated with zinc ointment. Preparations containing coal tar are also useful in this condition.

The general health must be attended to. Good, light nourishment, at regular intervals, is of the highest importance. Fresh air is most essential. Daily baths as a means of cleansing the parts affected are very necessary. Fresh fruit, and plenty of green vegetables, taken daily, help considerably with this condition. All heat-producing substances should be avoided as much as possible.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Violet Collingwood, Miss P. Thomson, Miss M. Roberts.

All the papers were short this week. We have therefore awarded the prize to Miss Evans, although it is short of the necessary number of words. The subject apparently does not lend itself to a long article, and perhaps nurses feel that they do not know a great deal about it.

QUESTION FOR NEXT WEEK.

Why is the diet of a pregnant woman specially important? What general rules in regard to it would you advise her to observe, and what precautions would you suggest to her?

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