REPORT ON INEFFICIENCY CAUSED BY PUSTULAR SKIN ERUPTIONS AND THEIR ASSOCIATION WITH THE REGULATION FLANNEL SHIRT.

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As medical officer to the 2nd Battalion Royal Welsh Fusiliers, I have been greatly impressed by the number of men rendered temporarily inefficient and requiring admission to hospital on account of boils and pustular skin infections, the result of scratching or chafing prickly heat. I have strong reasons for believing that the regulation flannel shirt is largely responsible for the condition.

(1) To anyone doubting the efficacy of the regulation flannel shirt to produce irritation, so severe that scratching is a natural concomitant, and any tendency to prickly heat greatly aggravated, I would recommend the personal experiment of wearing such a shirt whilst taking exercise in an atmospheric temperature over 100° F., as has constantly been the duty of every soldier in Agra recently.

(2) During constant inspections I have not detected any but very mild cases of prickly heat amongst the Band, who have been wearing cotton shirts, whereas quite one-third of the men of every other company have prickly heat, with or without pustular eruptions, in varying degrees of severity.

(3) The men themselves unanimously testify that the flannel shirt is “too hot for this weather, brings out the prickly heat, and makes the itching worse.” They tell me that while on guard duty is the worst time, as they are obliged to wear the flannel shirt for so long.

Reasons for Regarding Prickly Heat as a more than Trivial Complaint.—If the trouble was confined to the condition of miliaria sudamina or so-called prickly heat alone, the matter would be one of inconvenience only; but when men are filling the hospital beds with different degrees of general pustular skin eruptions and abscesses, with involvement of lymphatic glands and pyrexia in some cases, all directly attributable to scratching and infection of their already inflamed skins with pyogenic organisms, surely steps should be taken to do away with the cause of the primary affection; and if it be the regulation shirt let it be replaced during the hot season by a less irritating garment, i.e., canvas or cotton.

One knows from experience in certain London dermatological
departments that in the treatment and prevention of sudaminal inflammatory skin diseases, attention to the kind of material worn next the skin in such cases is of prior importance, and to allow an irritating flannel next the skin would be severely criticised as bad treatment. Why not apply this generally accepted knowledge? To quote more exact data, there have recently been in the wards here over twenty cases of furunculosis requiring constant attention and local treatment, such as opening numerous boils and abscesses and treatment with pure phenol, &c., as well as numerous cases attending daily. The cases are often protracted and tend to recur. In many of these doubtless the treatment should have been cultivation of the pyogenic organisms from the special case, and subsequent inoculation with the sera obtained from the correct strain; but unfortunately there are no facilities for obtaining such sera or of making the necessary estimation of opsonic indices.

One had to rely upon such measures as the wearing and constant changing of cotton shirts, cutting and cleansing of the finger nails (which is an important point often overlooked), diurnal lysol, baths, local treatment with fomentations and strong solutions of perchloride of mercury, preventing excessive sweating as far as possible by keeping the wards cool with themantidotes and tatties, &c. Cases often get well rapidly, but require readmission for recurrence.

The provision of new cotton or canvas shirts will be met with objection. I have been assured that the men will get "chills," from lying under punkahs in sweat-saturated shirts. My reply is that the men do not lie about in sweaty shirts, but change into short pants and vest as soon as they reach their barrack rooms, many of them wearing pants and shoes only, and so far I have not been able to trace any bad effects to this practice.

Against the question of expense in providing new shirts for hot weather in the plains should be balanced the undesirable waste and expense of keeping men inefficient in hospital owing to lack of proper prophylaxis.

In conclusion, the severity and protracted nature of many of the cases had only to be witnessed to impress one with the need of prevention, especially so when the chief aggravating cause seemed clear, viz., the shirts. During the past three hot months in Agra (May to July) there have been more men rendered temporarily unfit from boils, secondary to prickly heat, than from any other complaint. This fact in itself testifies to the importance of the subject.