

ACNE VULGARIS.

The Influence of Marriage,
Pregnancy and Childbirth.

Thesis submitted for the Degree of

Doctor of Medicine

By

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PART 1.

INTRODUCTION.

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The aim of this thesis is to show the effect of marriage, pregnancy and childbearing on acne vulgaris in young women, on the basis of a follow-up of over 800 cases, who have attended the Western Infirmary Skin Department between 1942 and 1952.

This investigation was undertaken with these important considerations in mind:

1) Very little on this subject has been previously published, as will be seen in the historical review. In over 80 papers studied, reference to the effects of marriage could only be found 10 times and to the effect of pregnancy 10 times, though many authors have speculated and worked on the effect of puberty and hormonal imbalance on the condition.

2) There was a wealth of material to draw upon as can be seen from the addendum, but, it will be shown however how extremely difficult it is to obtain the co-operation of a large number of/
of/

of former patients in giving relevant information.

3) It was considered timely to bring present day knowledge on the subject up-to-date and to stimulate further investigation mainly in the hormonal therapy of this common and often extremely distressing condition.

CHAPTER 1.

Historical review
of relevant past literature.

Historical review of relevant past literature.

It was just over one hundred years ago that Erasmus Wilson (London 1847) first used the term *acne vulgaris* to describe the condition under discussion. *Acne*, *acme* or *ionthos* was quoted by Aëtius (543 A.D.) who collected the medical writings of his predecessors, as the names the Greeks used for this disease, because it occurred at puberty, the acme of development and because the *ionthos*, the lanugo hair or first beard was mainly affected. Celsus between B.C. and A.D. called the eruption *varus*, from the Latin *varius*, presenting a varied appearance. He spoke of it as follows:-

"Pene ineptiae sunt curare varos" which freely translated means that it is almost folly, or not worth while to try to treat or cure *acne* and this may be a clue to the fact that the condition was surprisingly not mentioned by Hippocrates. He may not have considered it a disease, though this must remain conjectural.

Cassius (100 A.D.) inquired why the condition/

condition occurred in the prime of youth and strength and supposed that the noblest and best elaborated nutritive fluids were directed to the regions affected and there stagnated and accumulated.

Galen (130-200 A.D.) described it under the name of vari also saying that the Greeks called it ionthos, its papules consisted of the thickened fluids of the body.

There was no reference to acne in the writings of the mediaeval physicians, not until the 16th century was it described again by Gorraeus of Paris (1578).

A passage by Sennert, who lived in the following century is quoted by Sauvages (1768) who described acne under the heading psydracia and wrote: "Psydracia, acne Aetii, acne, vari Sennerti, ionthos graecis, gallice Bourgeons, psydraciis connata sunt tubercula faciei, vari dicta, ait Sennertus". Sauvages added that these "tubercula" were ascribed to thickness of the nutritive fluids. They often lasted until adult age and then disappeared.

Lorry/

Lorry (Paris 1777) discussed the changes in nomenclature which the disease had undergone and insisted that it did not affect the general system, but that the indiscriminate use of caustics for the treatment of vari might cause some of them to develop into cancers.

Joseph Jacobus Plenck (Vienna 1783) in his *Doctrina de Morbis cutaneis* appeared not to be acquainted with the name acne but again called the condition *ionthos* or *vari* and by the German name *Finne*. He wrote: "Juventibus victu crasso utentibus et spermaticis sunt familiares vari, circa adolescentiam evanescere solent". Then followed a few sentences on local treatment with herbal lotions and salt water, the use of saline purgatives; at the end of the short chapter he made his much quoted statement "Matrimonium varos curat".

Thomas Bateman (London 1817) published "Delineations of cutaneous diseases, exhibiting the appearances of the principal genera and species in the classification of Dr. Willan". He made the terms *varus* and *acne* interchangeable and distinguished A/

A. Simplex, A. punctata, A. indurata and A. rosacea, closely following Willan's description. Bateman did, however, draw a true distinction between the first three types of Willan's species and Acne rosacea and appeared to be the first author to do so. Erasmus Wilson (1847) who grouped A. Simplex, punctata and indurata under the name acne vulgaris, separated A. rosacea from them as a separate species. While Bateman deduced that acne was due to drinking cold water when the body was heated or to emotions and disorders of the digestion, Wilson believed it to arise from a certain sluggishness of the nerves and want of activity in the skin.

A.T. Thomson (London 1850) accepted the division in A. simplex (A. vulgaris of Wilson) and A. rosacea. He remarked that it was most often observed in persons of a certain character of skin, lax, pale and cool to touch and also in those of a strumous diathesis. All these English writers as well as Hunt (1847) and Green (1836) represented acne as a disease consisting of the inflammation of the follicles of the skin or more strictly of its sebaceous/

sebaceous glands.

Baron Alibert (Paris 1837) preferred to bring the ancient name of varus into use again and while describing anatomical characteristics thoroughly he subdivided the condition into six species, but his teachings found few disciples in France or elsewhere.

Biett and his followers Cazenave and Schedel (Paris 1847) described *A. simplex* and *A. indurata*, *A. punctata* and *A. sebacea* denoting inflammations of the sebaceous glands and an abnormality of secretion. The later French authors, (Gilbert 1840, Devergie 1854, Rochert 1860, Bazin and Duchesne-Duparc 1859) added little of importance to Biett's doctrines; they did, however, give the condition a great variety of new names: *A. acuminata*, *globulosa*, *variolide*, *ombilique*, *Acne sans et avec hypertrophie des follicules*, *A. tuberculide*, *A. hypertrophic*. Only P. Rayer (Paris 1835) gave a correct description of acne rather than manufacturing new species of it. German writers like Joseph Frank (1843), C.H. Fuchs (1840) V.H. Riecke (1841) offered only superficial descriptions. Frank described acne as *psudracia a plethora/*

plethora and stated that it arose in young people who lived chastely or after first connection.

G. Brender (1831) in his "Ausführliche Abhandlung über Acne" gave his observations made in Paris and Lyons and divided the eruption into A.

juvenilis, A. virilis and A. senilis, identifying these three species with Willan's classification

A. simplex, A. indurata and A. rosacea.

Gustav Simon alone (1851) declared himself against all further subdivisions of this disease, explained its anatomy and stated that "in each pimple where no pus can be discerned under the epidermis, there is yet always a point of suppuration deep in the corium, which may be evacuated by a puncture".

(Hebra 1868, Blackburn 1951).

In his text-book "On Diseases of the Skin" Ferdinand Hebra, Professor of Dermatology at the University of Vienna (translated by C. Hilton Fagge and P.H. Pye-Smith, 1868) described acne in detail, subdividing it into acne vulgaris= comedones only, A. punctata=comedones and small red papules, A. pustulosa= where larger papules and nodules/

nodules contained either a comedo and more or less pus, *A. hordeolaris*= when the lesions assumed the shape of a grain of barley or oats and *A. indurata*, when the lesions appeared to be only solid protuberances. Virchow (1863) who mentioned acne in his tumours formed by retention was quoted here. Hebra further discussed the aetiology and admitted that no one had yet succeeded in discovering the exciting causes of acne. Plenck, who considered "victus crassus", fatty foods, spermatozoa and Bateman who declared that drinking water when the body was heated, strong emotions and disorders of the digestion, and Wilson who favoured morbid innervation and a certain torpidity in the skin as aetiological factors are mentioned again. Biett considered certain trades especially injurious "in which the head must be kept bent and at the same time exposed to a high temperature". Wilson laid the blame in some cases on drinking cold water when the body was heated - in others on the abuse of irritating washes and cosmetics, while Brender thought smoking tobacco was the cause. Rayer said that/

that acne occurred among youths who practiced onanism; Alibert among persons who devoted themselves "aux combinations speculatives" who gambled all night, or who lived in constant anxiety; while Fuchs said it accompanied gout. From his own observations Hebra confirmed that acne did not often occur before puberty, either sex might suffer from it after the age of fourteen. It most frequently occurred between the ages of 18 and 24. Cases could be found in all climates and among all nations, at every season of the year, in diverse occupations - in the rich as in the poor. Hebra found that neither spicy foods nor excess alcohol were a cause of the disease.

The circumstance that acne appears most often about puberty when changes in the system accompany sexual development was probably the origin of the opinion that a certain alternation existed between the evolution of acne and the exercise of generative function. But the results of unprejudiced observation did not at all support this view. "I cannot therefore" Hebra wrote, "agree with Plenck's dictum 'Matrimonium varos curat', but would/

would rather say 'tempus varos curat' for in the course of time the inflammation on the sebaceous glands and hairfollicles, which occurs mostly about puberty, will reach its end and that just as surely with bachelors and vestals as with married people". It was often connected with disordered menstruation and disappeared when this function became normal. This, Hebra considered a coincidence. An interesting observation was made here of a Professor Rigler who wrote to Hebra from Constantinople (1852) stating that, while acne disseminata was very wide-spread in the East, he very rarely saw acne in eunuchs. This author noted the association of tar applied externally and iodine given internally with the production of acneiform eruptions.

L. Sabouraud (1897) added his observations, mainly from a bacteriologist view-point. He considered secondarily infected comedones to be the basic lesions of acne.

M.S. Pembrey (1910) in a detailed treatise on the physiology of the skin wrote that menstruation was/

was frequently associated with disturbed activity of the sebaceous glands and that acne often disappeared in both sexes after marriage.

"These facts would suggest that the secretion of the sebaceous glands is influenced by products absorbed by the blood from other organs of the body".

In 1912 M. Audébert stated that it was common knowledge that close connection existed between the appearance of acne and the good or bad functioning of the genital system. Acne was worse at puberty and in women with irregular menstruation. As pregnancy regulated ovarian function it should have a beneficial influence on acne. He then described a case where each pregnancy in a woman of 26 brought about a marked aggravation of her acne. He refers to the paucity of information thus "les rapports qui existent entre la puérpéralité et l'acné ont été peu étudiés jusqu'à présent".

A. Strickler (1917) gave a list of aetiological factors (acne bacillus, colon bacillus and its toxins, staphylococci, increase in thyroid gland/

gland activity, cosmetics, puberty, seborrhoea, anaemia, gastro-intestinal upset, nervousness and pelvic disease). He then commented on Plenck's dictum "Matrimonium varos curat" and Hebra's modification "Tempus varos curat" and remarked that the truth seemed to lie between these two extremes. Statistics seemed to prove that acne vulgaris was more common in unmarried people but most observers did not think married life had anything to do with it. He did consider, however, that a more normal sex life and better hygiene reflected favourably on the organism as a whole. Married individuals were less likely to consult the physician in a mild case of acne.

F. Luithlen (1921) again mentioned puberty changes in circulation and secretion of the glands of the skin coinciding with the development of the gonads. Spontaneous healing of acne occurred in both sexes when this period of transition was concluded. In women this regression often took place only when the genital tract/

tract was fully developed, sometimes only with gravidity. Acne was rarely seen in persons after the age of 25 with normal sexual development and without dysfunction of the genital system.

L. Hollander (1921) considered an endocrine aetiology probable and quoted Joseph Zeisler (1916) as saying that when normal sexual relations were established as in the marital state, acne disappeared, a normal endocrine balance being established.

B. Bloch (1931) examined 2055 boys and 2136 girls between the ages of 6 and 18 and found true acne vulgaris in 8% of the girls and 20% of the boys, while 64% of both boys and girls were found to have some comedones. Severe cases were more frequent among the boys. Bloch considered acne a hormonal disease, certainly conditioned by the endocrine glands, but almost a physiological manifestation of the organism at the time of puberty. At 19 every fifth girl and every second boy examined suffered from acne.

T. Rosenthal and T. Neustaedter (1935) were/

were the first authors to mention a definite deficiency in the secretion of follicle-ripening hormone as being a possible direct or indirect factor in one type of acne vulgaris. A possible though remote explanation of the mechanism of X-ray therapy might be that the pituitary gland was affected by relatively low dosage of irradiation and induced a normal ovarian response. They postulated an abnormality of formation or utilization of sex hormone, possibly a lack of oestrogens, or other basic fault.

N.T. van Studdiford (1935) quoted Jackson (1892) as saying that youth was the greatest predisposing factor. The author had "frequently observed the curative effect of marriage in women". He gave 15 g of orchic extract to 9 female patients, 7 improved. Then he treated 15 female patients with an oestrogenic substance for 7 days premenstrually - of these eleven improved. In 1937 H. Vignes in his book "Maladies des femmes enceintes" stated that acne vulgaris present before pregnancy might disappear/

disappear or might get worse. In some cases acne only appeared during pregnancy and recurred during each subsequent gravidity. Acne was improved in women with menstrual irregularities who were given follicular extract, while luteal extract improved the dysmenorrhoea, but made the acne worse. Additional cause for the exacerbation of acne during pregnancy might be the increased intake of carbohydrates with increased appetite.

Matras (1938) stated that acne was often exacerbated before menstruation and vanished completely during pregnancy.

I.D. Riley (1939) observed that he had only seen two cases where acne was still present after marriage and presumed that it must be associated with an abnormal sex life.

J.H. Stokes and T.H. Sternberg (1939) again mentioned puberty and endocrine factors in the aetiology of acne and gave a list of 104 cases with apparent cases of relapse and exacerbation, among which diet, menstruation, seborrhoea of the scalp and fatigue are most prominent. One case relapsed/

relapsed on marriage and another after parturition.

In 1939 U.J. Wile, F.B. Barney and J.T. Bradbury published the first paper about the alteration of urinary excretion of free oestrogen in young women with acne vulgaris (average 7.7 rat units per day in normal subjects, 4.1 rat units in women with severe acne). The average daily output of androgen was found to be greater in young men and women with acne (57 capon units) as compared with 44 capon units in normal subjects. The ratio of daily excretion of androgen: oestrogen = 8.9 in normal men and 2.7 in normal women, while in men with acne the ratio was 17.8 and in women with acne vulgaris 4.7. They suggest a complex imbalance of both factors as a cause for acne vulgaris.

T. Cornbleet and B. Barnes (1939) in complete contrast found lower than normal androgen excretion in acne patients and treated them with testosterone propionate by injection with very good results. (100% cure).

In a much quoted paper C.H. Lawrence and N.T. Werthessen (1940) gave their findings of/

of a significant decrease of oestrogen excretion by women with acne vulgaris, but no significant change in the excretion of androgens. They considered that the restoration of a normal androgen:oestrogen ratio should be aimed at in the treatment of acne vulgaris. Their figures are:

Normal androgen:oestrogen ratio: $\frac{\text{Androgen}}{\text{oestrogen equivalent}}$
= 2.46 in women.

In female acne patients the ratio rose to 6.67.

H.Jausion in 1941 postulated an indubitable correlation between acne and tuberculous allergy and also stated that acne on the chin of women was more marked during menstruation, dysmenorrhoea, pregnancy and pelvic infection.

E. Lipman Cohen (1941) in what must surely be the most extensive review of the literature on endocrine influences in acne to that date extracted some 400 papers, concluding that there was a definite connection with endocrine disorders (tumours of the adrenal cortex, arrhenoblastoma). Acne also occurred during administration of androgens and was absent in thyroid disease and diabetes/

diabetes. Abnormally large numbers of acne patients suffered from ovarian disorders. He considered the appearance of acne vulgaris at puberty and its exacerbation with the menses a proof of an endocrine aetiology, the changes in the circulating hormones being possibly quantitative. But, he wrote, the result of treatment with endocrines was confused, as there were no control series.

J.B. Hamilton (1941) reviewed aetiological factors and considered an inherent or acquired sensitivity of the pilo-sebaceous apparatus important, this provided the soil upon which secretagogues like androgens, as well as other factors (irritants or infection) acted. He confirmed the finding of higher urinary androgens in men with acne, while both blood and urine levels of oestrogens were low in women with acne.

H. Jausion (1942) wrote that there were often disastrous failures in hormone therapy in acne patients, the condition often being aggravated by both testosterone propionate and folliculine. N.E. Aronstam (1943) stated that at puberty all glands/

glands, secretory, excretory and incretory run riot, leading to an increased flow of sebum in acne patients. This was aggravated by the mis-use of cosmetics, which also thwarted the natural absorption of ultra-violet light, and favoured the development of micro-organisms.

J. Goldzieher (1947) found that in 67% of male patients between 15-18 years old the condition subsided when maturity was reached. In women acne vulgaris was worst during the lutein phase. Pregnancy had a conspicuous effect on acne, the lesions subsiding either completely during gestation or in exceptional cases becoming aggravated. The condition often persisted throughout the child bearing age. There was an increase in the Androgen:Oestrogen ratio in all acne patients, medication with testosterone might bring on acne vulgaris.

H.W. Barber (1948) described the influence of androgens upon the stratum corneum and the sebaceous glands. They stimulate keratinization of surface epithelium and of the pilosebaceous follicles and increase the activity of the/
the/

the sebaceous glands. Oestrogens he found to exert a contrary effect. The androgen:oestrogen ratio as well as the degree of sensitivity of the different tissues to hormonal influences were important factors in individual variations in signs and symptoms due to stimulation by sex hormones.

In the Year Book of Dermatology for 1949 M.B. Sulzberger and R.L. Baer considered the improvement of acne on marriage an old fairy tale. Masturbation did not cause acne vulgaris, nor make it worse. There was no proof, they wrote, that sexual intercourse improved acne vulgaris, but the condition tended to clear spontaneously at 20-25 years of age.

W.H. Goeckerman (1950) considered oestrogen therapy beneficial in acne patients.

In the same year S.C. Way and G.C. Andrews in a paper on hormones and acne gave their results of treatment with progesterone, testosterone and oestradiol in women with acne, the average age of the patients being 23.37 years - the average duration/

duration of the disease 4.62 years.

95% improved on progesterone,

44% improved on testosterone, and only

7% improved on oestradiol.

They explained the improvement of acne occasionally seen in pregnancy by the fact that the placenta assumed an endocrine function and elaborated oestrogenic and progestational hormones as well as its specific hormone: chorionic gonadotrophin. An imbalance must exist in persons suffering from acne, an excess in one and a deficiency of the other varying from time to time. They considered, however, that the value of sex hormones in the treatment of acne vulgaris was clearly demonstrated. Progesterone was considered by these authors more effective than oestrogen, as it had a regulating effect on oestrogen secretion; it was also slightly androgenic and the sterols of the progesterone type could be converted into androsterone (Green, Burrill, Thomson 1940, Endocr. 27 : 469)

In a symposium on acne vulgaris in Australia in 1951, John Belisario read a paper listing 14 different aetiologic factors, among them/

them psychosomatic influences and stated there that he had known patients whose acne improved on marriage and others whose acne did not. Some developed acne after happy marriages, others after unhappy ones. The evidence for or against the effect of sexual relations was suggestive only, not conclusive. During this same symposium C.R.B. Blackburn considered that it seemed to be putting the cart before the horse to relate fluctuations in severity of acne to sexual activity. The presence of the condition might well cause worry and depression leading to altered sex function. Alternatively, psychological disturbances of a degree sufficient to turn "acne liability" into acne vulgaris would be likely to disturb sex functions or even be based on it. There was, he concluded, a close connection between the endocrine glands, the psyche and acne vulgaris - all influenced each other.

H.G. Wolff, Th. Lorenz and D.T. Graham (1951) found that facial sebum fluctuated quantitatively in association with certain specific types of emotional stress in acne patients; it was/

was through this mechanism that "nervous" and psycho-neurogenous factors operated in acne vulgaris.

T.N. McGregor (1951) discussed the effects of the sex hormones on the skin, androgens stimulated the growth of epidermal structures in certain regions of the body, including the face; they promoted the development and increase in size of hair follicles and sebaceous glands. Oestrogens had a general inhibitory effect on growth of the epidermis in men and women and decreased the number and size of sebaceous glands. Androgens, oestrogens and progestogens all favoured tissue hydration, due to salt and water retention. Male hormones also led to vaso-dilation in the skin vessels thus increasing the blood flow in the capillary bed, while oestrogens not only increased the capillary blood flow but also increased capillary permeability. At puberty when the normal androgen:oestrogen ratio was disturbed there was a predisposition to comedo-formation and also through changes in the pH of the skin altered skin physiology, rendering the skin more vulnerable to the normal bacterial flora.

M.B. Sulzberger and V.H. Witten (1951)
stress/

stress that acne must not be taken lightly, as the young person's social and economic future might be ruined; the adolescent feeling insecure and unwanted and his skin condition leading to psychological and emotional damage and conflicts with his parents.

F. Blumenthal (1953) wrote that the old wives tale that sexual continence had an influence on improving or worsening acne vulgaris had probably finally been proved wrong. The influence of puberty, an innersecretory influence, was undoubted.

In 1954 B.A. Newman and F.F. Feldman suggested that adult acne in patients over 20 years of age with pre-menstrual exacerbation was due to corpus luteum dysfunction giving rise to a progesterone deficiency. Treatment with progesterone gave excellent results except in patients whose acne had started before the age of 20. Progesterone was, however, always accompanied by oestrogen, its direct action was therefore difficult to evaluate.

M./

M.I. Dubovyi (1955) found an increase in 17-ketosteroid excretion through the skin oils and in the urine in female acne patients and a decrease in urinary oestrogen elimination.

R. Aron-Brunetière has published many papers on hormones and acne alone and in collaboration with A. Tzanck and I. Kohen (1951, 1953, 1954a, 1954b, 1955, 1959). He found no dysfunction of the thyroid gland, but vaginal cytology in acne patients was found to show total or subtotal hypofolliculinic characteristics. An increased androgen:oestrogen ratio was "not the whole story". The formula should read

androgen + progesterone This would explain
oestrogen

the pre-menstrual exacerbation of acne and also the often observed aggravation during the early weeks of pregnancy. He postulated that the disequilibrium of androgen + progesterone might oestrogen

be due to a parallel disequilibrium of the hypothalamo-pituitary mechanism responsible for the secretion of sex hormones. He reported several series of patients treated with hormonal preparations/

preparations by the oral, buccal and vaginal routes, by injections and with implants. Results were "disappointing" with oral oestrogens and progesterone, and with injections of serum-gonadotrophin, "good" with implants of the same hormone and "excellent" with the same hormone by the vaginal and buccal route.

A. Jarrett (1955 and 1959) investigated the influence of stilboestrol, testosterone and progesterone medication on the surface sebum and on acne vulgaris. 3 mg. of stilboestrol daily caused a significant decrease of surface sebum of the back, fore-head and naso-labial folds and had a beneficial influence on acne. The condition relapsed, however, when medication was stopped. It was possible that oestrogens induced some qualitative changes in the sebum, possibly a decrease in viscosity. Testosterone increased the activity of sebaceous glands and aggravated acne, while progesterone according to this author had no effect on the sebaceous glands or on acne, he did not consider this hormone responsible for the pre-menstrual exacerbations.

In/

In direct contrast to this paper is a publication by I. Zeligman and L.F. Hubener (1959) who produced acne experimentally by administration of progesterone in six women, aged 21-43 without acne by giving 50 mg. daily for twelve weeks. Five women aged 18-41 were given the same dose for ten days only before the expected onset of menstruation. Ten out of the eleven patients developed mild to moderate acne vulgaris, which disappeared or diminished six weeks after administration of the hormone. Biopsy revealed a 70% increase in size of the sebaceous glands in the women who had had the hormone premenstrually, 20% increase in size in the other cases.

F. Kalz (1958) wrote that the concept of a disturbance of the androgen:oestrogen ratio would have to be reconsidered in the light of recent findings demonstrating the interconversion of androgens and oestrogens in the liver and probably also in the ovaries and the testes. She postulated a pituitary sebaceous gland trophic factor/

factor independent of gonadotrophic properties of the hormone of the anterior pituitary gland. Progesterone might inhibit the pituitary sebaceous gland trophic hormone and therefore be of therapeutic value in acne.

C. Mopper and J.R. Rogin (1959) stated that acne accounted for more facial scarring in U.S.A. than the total of all scars from other causes, including trauma. Large doses of oestrogens were needed to counteract the large surplus of androgens. Payne was quoted as saying that pregnancy had a beneficial influence although at times the lesions of acne became aggravated, suggesting an association between acne and an optional androgen:oestrogen ratio.

Boughton, McKenna, Wheatley and Wormald (1959) analysed the fatty acid composition of the surface skin fats in normal subject and in patients with acne and failed to find any significant difference. In a pregnant patient with acne, whose skin condition had markedly improved with pregnancy, no significant alteration could be found in the surface lipids of the skin. They also considered that/

that the deleterious action of chocolate and pork fat was not due to an alteration of the sebum composition by these fats.

CHAPTER 2.

Material and Methods.

Methods and Material.

The material for this investigation was chosen from the patients records of the Skin Department on the Western Infirmary, Glasgow. These records cover the years 1942-1952. The choice of this decade is entirely arbitrary, but was influenced by certain considerations. On January 1953, the records office of the Western Infirmary introduced a new system of filing information on all patients in one individual case folder, irrespective of which department the patient was attending. Access to these case sheets in the numbers required for such a large survey would have been difficult, in view of the fact that it was necessary to keep the case sheets for a considerable time. This it was felt would have inconvenienced not only the hospital record office but also other clinical departments, which the patient might be attending. Until January 1953, the skin department had case cards for all patients attending there and it was from these cards that the material was chosen.

It/

It is usually the case that marriage implies a change of address as well as a change of name, the patients parents may have moved house, or either or both may have died. In addition the recent development of overspill townships has led to a greater migration of the population, mainly of social classes III, IV and V who form the bulk of the clinical material in the survey. All these facts made it desirable that the time interval between the last attendance and the follow-up investigation should not be too long. On the other hand, as many of the patients attended in their early "teens" an interval of a certain number of years was necessary to allow for the incidence of marriage and the possibility of pregnancy and childbirth.

In the decade chosen the system of record taking was a card index system, the patients being registered alphabetically and with a serial number for each letter of the alphabet. On the front of the card were noted the patient's name, address, occupation, age and date of first attendance/

attendance. The consultant of other senior dermatologist filled in the diagnosis, gave a short history and concise description of the type and location of the condition. The back of the card was reserved for treatment and progress notes. See Specimen Card Page 38.

Usually the patient had attended for some time prior to marriage and had undergone treatment which was of a routine type, varying somewhat with the type of acne and including a fat restricted diet, and local cleansing, anti-septic, astringent and peeling lotions, ointments or pastes. Ultra-violet light therapy was used in many instances, X-ray therapy only very rarely. If the patient was referred to a special U.V.L. clinic or the X-ray department, one entry only will be found on the skin case card, as both these clinics have their own record system.

The cards chosen for the survey were taken serially, i.e. all female patients who had attended for treatment of acne vulgaris; there was no other choice or rejection.

In/

In this way 827 cards were collected.

Next a questionnaire was drafted (see specimen on page 39) and together with a pre-paid envelope was posted to these 827 addresses. The case cards were numbered from 1 to 827 and the corresponding number put on each questionnaire before posting it to a patient's address.

Of the 827 people written to:

315 replied.

266 forms were returned by the Post Office marked "Unknown at this address" or "Gone Away".

246 patients did not reply.

In view of the high proportion of patients who had not replied to the questionnaire, but to whom it appeared that the letter had been delivered, a second series of questionnaires was sent, together with an explanatory note and requesting a reply. (See Specimen on page 40)

246 letters were sent to those who appeared to have ignored the original request.

72 patients replied.

52 letters were returned by the
Post Office marked "Unknown at
this Address" or "Gone Away".

122 patients did not reply.

After completing these two series of letters it was found that there was a total of 397 replies, fewer than it had been hoped to obtain at the onset of the survey. It was therefore decided to visit as many as possible of the defaulting patients personally and thus obtain the required information. During last summer 96 homes in the Glasgow area were visited, namely all patients out of the 122 who had not replied to the second questionnaire and who lived in the city of Glasgow. The earliest visits were made between 11 a.m. and 2 p.m. but it soon became obvious that too many people were out working and not at home at that time. The visits were therefore restricted to between 6 p.m. and 9 p.m.

Of 96 patients visited -

25 patients had moved to unknown
addresses or gone abroad.

At/

At 11 "houses" there was nobody at home and a form together with an explanatory note and pre-paid envelope was put through the letter box.

At 60 addresses a questionnaire etc. was left either with a relative or in a few cases was filled in with the help of the patient.

A few patients when questioned refused to co-operate, others obviously did not think the matter important enough, or were not interested enough, even after a personal visit, to reply, because only 28 forms were completed after the visits.

To summarize then:

A total of 1073 questionnaires were sent out.

96 patients were visited

1169 total number of forms sent or delivered.

415 forms were completed.

343 patients were unknown at their former addresses or had "Gone Away".

411 did not reply.

The afore-mentioned Summary shows how much time and effort were required to get a sufficient number of replies to the questionnaires. It had been hoped to achieve a series of 500 cases, but this was not realized.

SPECIMEN 1.

SPECIMEN 11.

UNIVERSITY OF GLASGOW

McCall Anderson Memorial Lecturer:
Jas. Sommerville

Department of Dermatology
Anderson College Building
Dumbarton Road
Glasgow, W.1.

February, 1959.

Dear

You attended the Western Infirmary skin department for treatment of acne several years ago. An investigation is being made for Dr. Sommerville into the influences of age and other factors in this condition and I should appreciate your help in answering the following questions:-

- 1). Did you improve as a result of treatment?
Yes. No.
- 2). If so, at what age?
- 3). Was there any scarring left? Yes. No.
- 4). If you are married did you notice any improvement or worsening of the condition after marriage?
Improved. Worse. No difference.
- 5). If you have been pregnant was your acne influenced by this?
Improved. Worse. No difference.
- 6). If improved, did this happen in early, late or mid pregnancy?
Early. Late. Middle.
- 7). Was the condition better or worse after baby was born?
Better. Worse.
- 8). Did you breast feed baby? Yes. No.

PLEASE STRIKE OUT WHICH DOES NOT APPLY.

I hope you have no objection to helping us in this survey.

Dr. Maria A. Ratzer,
Registrar.

SPECIMEN 11.

UNIVERSITY

McCall Anderson Memorial Lecturer:
Jas. Sommerville

Dear

You attended the Western Inf
acne several years ago. An investiga
into the influences of age and other f
appreciate your help in answering the

- 1). Did you improve as a result of
Yes.
- 2). If so, at what age?
- 3). Was there any scarring left?

Questionnaire sent out to Patients.

SPECIMEN 111.

Dear Miss

You may remember that I wrote to you last year, enclosing a questionnaire about the results of the treatment of acne, for which you attended this Infirmary some time ago. As I am carrying out a statistical survey of these results it is most important that I should have as many answers as possible.

Could you therefore please be good enough to fill in the enclosed form and return it to me? I hope you do not mind my writing to you again, I should be most grateful for your help.

Yours sincerely,

Dr. Maria A. Ratzler,
Registrar.

CHAPTER 3.

SURVEY RESULTS.

SURVEY RESULTS.

Question No.1 Did you improve as a result of treatment?

On 415 questionnaires 400 patients answered the first question.

TABLE 1. Improvement on treatment.

	No.	%
Improved	271	67.75
Not Improved	129	32.25
TOTAL	400	100

Question No.2 If so, at what age?

From the whole series of 415 patients the stated average age of improvement of treated acne vulgaris was 21.89 years.

Question No.3 Was there any scarring left?

Out of a total of 272 married patients 259 replied, of 143 unmarried patients 136 replied to the third question.

TABLE 11. Relation of marriage and scarring.

	MARRIED.		UNMARRIED	
	No.	%	No.	%
Scarring	95	36.7	67	49.2
No Scarring	164	63.3	69	50.8
TOTAL	259	100	136	100

Question No.4 If you are married did you notice any improvement or worsening of the condition after marriage?

Out of a total of 272 cases 249 replied to this question.

TABLE 111. Effect of marriage on acne vulgaris.

	Total	Improved		No Difference		Worse	
		No.	%	No.	%	No.	%
Married patients.	249	108	43.4	132	53	9	3.6

Question No.5 If you have been pregnant was your acne influenced by this?

Of the 272 married patients 194 had had one or more pregnancies. 191 replied to the question.

TABLE 1V. Effect of pregnancy on acne vulgaris.

	Total	Improved		No Difference		Worse	
		No.	%	No.	%	No.	%
Pregnant Patients.	191	110	57.5	71	37.1	10	5.4

Question No.6 If improved, did this happen in early, late or mid pregnancy?

Out of 110 cases who improved during pregnancy, 102 replied to Question No.6

TABLE V. Improvement during pregnancy.

TOTAL	Early		Mid		Late.	
	No.	%	No.	%	No.	%
102	57	56	33	32.3	12	11.7

Question No.7 Was the condition better or worse after baby was born?

Of the 194 patients who had become pregnant 149 replied to question No.7.

TABLE V1. Effect of child-birth on acne vulgaris.

	Total	Improved		No Difference		Worse	
		No.	%	No.	%	No.	%
		After Parturition	149	112	75	19	13

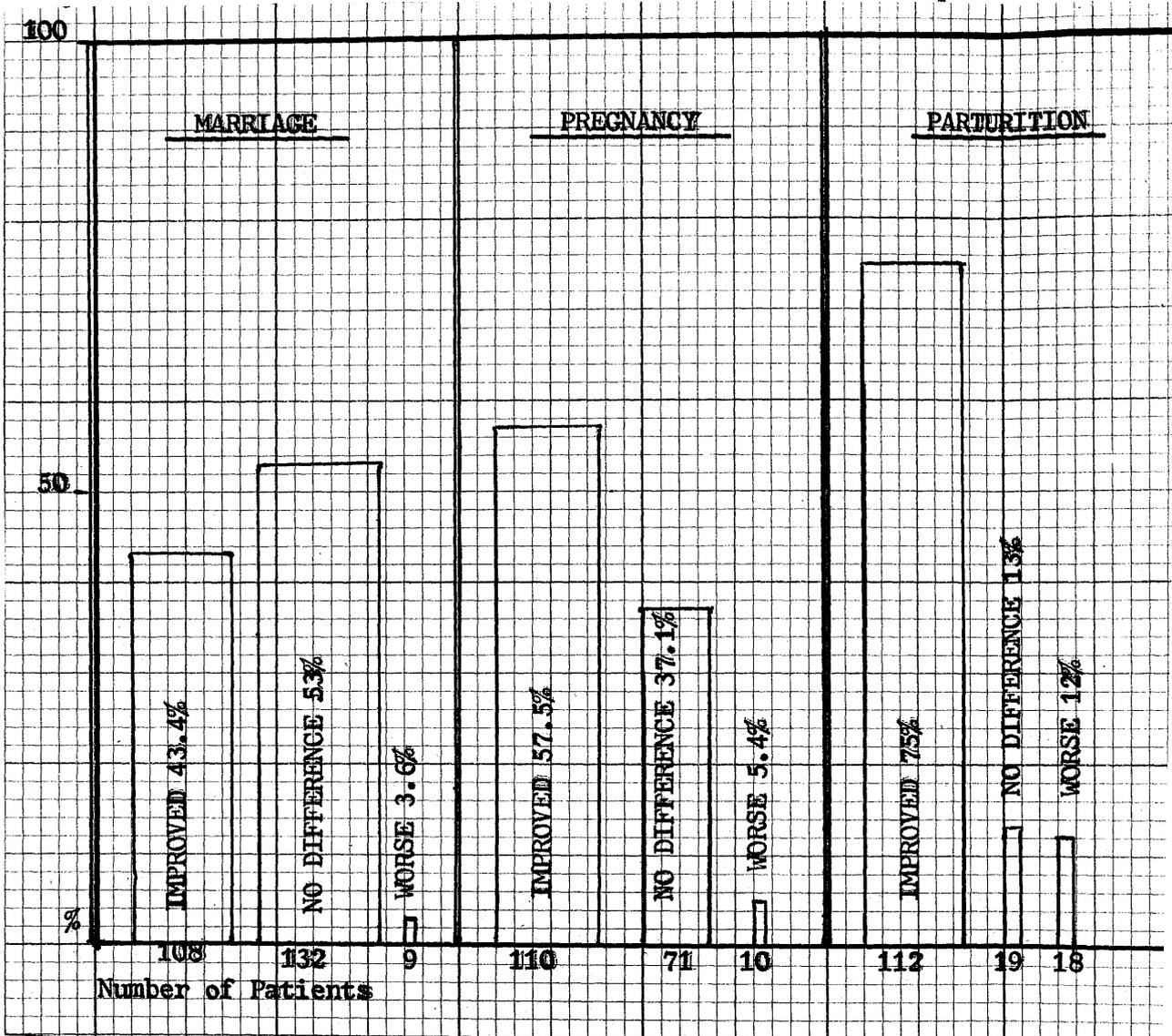
Question No.8 Did you breast feed baby?

149 patients replied to this question.

TABLE V11. Effect of lactation on acne vulgaris.

	Total	Improved		No Difference		Worse	
		No.	%	No.	%	No.	%
		Breast Feeding.	76	58	76.3	8	10.6
No Breast Feeding	73	54	73.9	11	15.2	8	10.9

TABLE V111



Diagrammatic Summary of Tables 111., 1V. and V1.

CHAPTER 4.

DISCUSSION.

DISCUSSION.

The incidence of acne vulgaris at the Western Infirmary clinics over the past eight years was an average 6.2% of all new dermatological cases seen. Numerically this amounted, with slight variations, to about 300 new cases in one hospital in one year. When it is remembered that these are all patients who, before attending a specialist, had been treated by their own practitioners and that most of them will therefore be rather severely affected - the magnitude of the problem of acne generally can be clearly seen. Bloch (1931) stated that at the age of 19 every fifth girl and every second boy examined by him was found to be suffering from acne. Many adolescents do not seek medical advice for often quite a severe degree of acne and therefore never get the undoubted benefit of early treatment.

Question 1. asked the patients to state whether or not they had improved on the treatment given at the Infirmary. This question was asked not to find the value of any particular form of treatment, but to make sure of a base line from which improvement or relapse could be judged. Table 1 shows that 67.75% of the patients thought they had improved - the remaining 32.25% thought that they had not benefited by the treatment. The patients' own estimation of their clinical progress does not always agree with that of the specialist. On many of the case cards the last entry read: "clear, virtually clear, or improved", while the patient stated in her reply that she did not consider the condition improved. Acne vulgaris tends to fluctuate and this may well account for this diversity of opinion between the dermatologist and the patient. Many young women also wrote in their separate notes that they had stopped attending the department either because of a temporary improvement in the condition or because of the loss of working hours involved. Some also became impatient because progress appeared to them too slow. The loss of working hours is a very real problem/

problem particularly in the ultra-violet light clinic, which patients, so being treated, are asked to attend once a fortnight, often having to travel long distances and losing one half day or even longer off their work. Few employers are willing to give their mainly junior staff the necessary time off for regular attendance. The above figures show the efficacy of this treatment which was used in the majority of cases (67%). It might be suggested that these clinics should either be run after working hours or that more of this kind of treatment should be made available in out-lying districts, suburbs, new towns and on industrial estates where a large number of young people are employed. The difficulty lies in adequate staffing of these clinics; the control of this treatment could not be left to a non-medical person, as each patient reacts differently to exposure to ultra-violet rays. A dose producing mild erythema in one patient may give rise to a severe burning reaction in another.

As this question, as well as questions (2) and (3) does not deal directly with the actual subject of the thesis, it is only discussed very briefly.

Question 2. The patients were asked to give the age at which they thought their acne had improved. This was done to see whether the presence of acne might in any way delay the event of early marriage.

From the whole series of 415 patients the stated age of improvement of acne was 21.89 years.

Figures given by Sulzberger and Baer (1949) denoted that the condition tended to clear spontaneously between 20-25 years of age. Hebra (1868) gave the peak of incidence as occurring between 18 and 24. Way and Andrews (1950) in a series of patients whom they investigated and treated found the average age to be 23.7 years.

In this series here in Glasgow the average age of improvement appears to be rather younger than other authors have found. It must be taken into consideration that these patients had been treated by the Skin department and that this age is therefore not that of spontaneous resolution. Possibly in those cases in which a number of years had elapsed between the patient's attendance and the filling in of the questionnaire, the patient's memory/

memory concerning the final improvement of their skin eruption may be somewhat vague. The knowledge, however, that early specialist treatment shortens the duration of this condition could be valuable in reassuring female patients, particularly girls of marriageable age.

Question 3. asked whether or not there was any scarring left and was raised to see if scarring affected a girl's chance of getting married.

The disfiguring scarring which so often results is one of the main reasons why acne should be treated early and with all the means at our disposal. As Mopper and Rogin (1959) found, the scarring following upon acne vulgaris was the commonest cause of facial scarring in the U.S.A., more cases suffered from it than from all other causes, including trauma.

As can be seen in Table 11 an appreciably higher percentage of girls with unscarred faces were married, possibly an expected result, but one, as far as could be found, not mentioned in the literature. The degree of scarring varied and was described by the patients from "very slight" to "reminiscent of chicken-pox".

The possibility of residual scarring on the face stresses again the social and economic significance of acne vulgaris mentioned by several authors. (Sulzberger and Witten, 1957, Marshall 1941/

1941). Both the patients and those about her are markedly affected by the presence of the stigmata of acne, be they active lesions or disfiguring scars, not only the young person's happiness in marriage may be jeopardized, but also her ability to find and hold down a job. Marshall (1941) interviewed employers and found that they were not inclined to engage people with acne or any other noticeable skin disease, as others would be repelled by it. The effect of this attitude on any sensitive or self-conscious young persons could be disastrous.

Question 4. In this the patients were asked whether or not they had noted any improvement or worsening of their skin condition after marriage.

The replies are summarized on Table 111.

Seven patients were married when they first attended, (Cases No.68,235,237,292,364, 575, 587) but only one, No.292 had had two children before the outbreak of acne at 27 years of age.

On further scrutiny of the patients' replies together with the additional notes and letters many of them wrote, it was realized that under the heading: "No difference", many patients appeared to mean that there had been no recurrence of their skin condition on marriage, though this must remain presumptive only, comparing the dates of attendance on the case card with the dates of "improvement" on the questionnaire. To elucidate the point made the following cases are quoted: Case No. 567 improved at 17, case No.761 at 16, they had no family. Case No.569 improved at 18. Case No.525 at 18-20, No.275 at 19, No.272 at 19-20, No.255 at 19½, No.85 at 20. All these patients wrote/

wrote that there had not been any difference in the Skin condition on marriage, and where applicable during pregnancy and after parturition, meaning presumably that their acne had not relapsed. Case No. 105 wrote that she improved at 23. Her age at first attendance was 25 on the case card, there was "no difference" after marriage, but the condition became worse after pregnancy. Case No. 343 improved at 22, her age at first attendance was given as 23. She noticed "no difference" after marriage or pregnancy.

If one deducts these eleven cases from the total of 132 patients who noted no difference in their skin condition on marriage, the percentage becomes 48.6% of cases where no change occurred. If, on the other hand, on the presumption that "no difference" in the above 11 cases meant that improvement was maintained and they are added to the number who noted improvement, 119 cases would be improved or 47.7% of the total number of married patients. (c.f. Table 111.)

In any case the difference in the percentages between the patients who thought they had/

had noted improvement on marriage and those who had not noted any difference cannot be taken as significant. The results of this survey are obviously not in complete agreement with Plenck's dictum: "Matrimonium varos curat" (1789) and Zeisler's assertion (1916) that acne disappeared on marriage. Other authors were more careful in their statements; thus Pembrey (1910) wrote that the condition often disappeared on marrying. Riley (1939) considered it very rare after marriage and van Studdiford (1935) frequently observed the curative effect of marriage, while Sutton (1941) had sometimes seen the condition disappear after marriage and re-appear after divorce, particularly accompanied by neurotic excoriations. Whereas no actual figures could be extracted from this survey to confirm Hebra's contention that "Tempus varos curat" the impression is gained that some agreement may exist with Strickler's (1917) comment that the truth probably lies between Plenck's and Hebra's statements - "these two extremes" as Strickler called them. He thought that better hygiene and a more normal sexual/

sexual life would reflect favourably on the organism as a whole and also that a married person would be less likely to consult a physician for treatment of acne. Blackburn (1951) considered that it seemed rather to be putting the cart before the horse to relate the fluctuations in severity in acne vulgaris with sexual activity. The presence of acne might well cause worry and depression and this in turn might lead to altered sex function. Alternatively he thought that psychological disturbances of a degree sufficient to turn "acne liability" into acne would be likely to disturb sex function or even be based on it. He concluded therefore that the endocrines, the psyche and acne are related and influence each other.

This series shows that 43.3% of women improved after marriage, while 53% noted no influence on their acne. While a normal sex life may have an influence on the hormonal activity of the gonads in the male, it has, as far as could be found not been investigated whether there is any definite/

definite influence on the sex hormones in the female. No references to this were found in an extensive search in textbooks of endocrinology and gynaecology.

Only nine patients in the survey stated that their acne had become worse after marriage. (Cases 164, 216, 401, 472, 520, 634, 735, 753, 777) Three patients (164, 735 and 777) had noted either pre-menstrual (735) aggravation or exacerbation during their monthly periods, while case No. 643 showed no relationship to catamenia. Case No. 753 was worse in winter and after improving initially on local antibiotic therapy became a frank acne excoriée, a variant in which "nervous" factors lead to picking and scratching of the lesions. She wrote a long and rather unhappy letter complaining about the lack of interest in her condition by her own doctor and fearing that she might "crack up". Patient No. 472 stated that her skin condition had deteriorated after marriage, improved early in pregnancy, and become worse again after parturition. She had an operation "to stop her periods" at the age of 30, ("Radium and radio-therapy/

therapy"), and had remained free from acne only since then. The remaining three patients (216, 401, 520) gave no further explanation apart from stating that their acne was worse after marriage - No.216 writing that pregnancy and parturition had made no difference to her skin condition. Nos. 401 and 520 had no family.

It is, of course, not possible to draw any definite conclusions from such a small number of cases but some of the facts appear to be of interest. Four of the nine patients wrote additional notes or letters, or almost 45%. In the total survey only 94 out of 415 patients found it necessary to give additional information, 20.2% of all patients. This would show greater pre-occupation with their skin condition on the part of this small group of women, according to the clinical description on first attendance two (Nos. 472 and 753) were noted to have a "mild degree" of acne - in five patients the condition was described as "moderate" (Nos. 164, 643, 735, 777) while No. 401 was suffering from a "fair degree" of acne. For the remaining two cases (Nos/

(Nos. 216 and 520) no further details were given. None of them then seems to have been suffering from a severe degree of the condition, it may on the other hand be the fact of aggravation after marriage - contrary to popular belief - which produced a certain degree of over-anxiousness about the state of their skin in these patients. Both No. 777 and No. 753 mentioned the fact that they had noted that nervous strain had an adverse effect on their skin. Jeffcoate (1957) stated that the nervous and physical reserves of some women were limited and that they could only tolerate a relatively easy and sheltered life. "The stresses of marriage", he continued, "the task of conducting a home, the status imposed by the husband's position may be enough to cause a breakdown". This refers to otherwise healthy women, without a distressing and usually only too obvious skin condition. It is therefore not surprising that the adjustments and changes necessary in any marriage should impose a more severe strain upon the psyche of some acne sufferers and lead to a relapse.

Wolff/

Wolff, Lorenz and Graham (1951) found a quantitative fluctuation of facial surface sebum in association with certain specific types of emotional stress in patients with acne vulgaris, and considered this to be the mechanism through which nervous and psycho-neurogenous factors operated in acne. Aron-Brunetière (1953) postulated a probable disequilibrium of the hypothalamo-pituitary mechanism, which was responsible for the secretion of sex hormones and lead to a disequilibrium of the androgen+progesterone ratio. Thelma Warshaw oestrogen (1958) discussed the increased nerve impulses to the hypothalamus stimulating the anterior pituitary to liberate ACTH and leading to an increased secretion of sebaceous material. She considered this to be due either to the pituitary growth hormone or to "sebotrophin", a pituitary sebaceous gland trophic factor.

The physiological and psychological changes brought about by married life evidently are capable of evoking a variable response in a condition of such diverse aetiology as acne. It would/

would appear that improvement and exacerbation depend on the interplay of multiple factors, dietary, hygienic, endocrine and psycho-neurogenous, it would appear impossible to hold any one influence solely responsible.

Finally it can be concluded that marriage has an undeniable influence on the course of acne vulgaris. While 43.4% in the series improved, 53% noted no difference and only 3.6% complained of a definite deterioration following matrimony. The widely held belief of a universally beneficial influence of marriage on this complaint, while certainly true in a considerable percentage of women, has not been confirmed by this survey.

Questions 5 and 6. If you have been pregnant was your acne influenced by this? If improved, did this happen in early, late or mid pregnancy? The replies to these questions are tabulated in Tables IV and V.

The point made in the last section, namely that a number of patients wrote that their skin condition had not changed on becoming pregnant must be considered valid in this context also, namely their acne had cleared and not recurred during pregnancy. Case No. 742 improved after marriage. She wrote that there was "no difference" during pregnancy and after the birth of the baby. Cases No. 42, 46, 94, 89, 118, 144, 154, 203, 206, 323, 335, 338, 354, 366, 389, 405 and 742 all filled in the questionnaire in this way. Case No. 144 had gone to New York and married there. Her doctor told her that her acne was due to the emotional upset of leaving home. She remained clear apart from a little scarring since. Case No. 206's skin condition had gradually improved after she married at the age of 22. She stressed the fact that she was very happily married and "had/

"had a much calmer out-look". Case No. 153 noted no improvement on treatment, no change on marrying, becoming pregnant, or after the birth of the baby. Case No. 212 makes an interesting observation, namely that eight months after the birth of her first baby she "contracted sarcoidosis", the acne disappeared completely during the treatment she received for sarcoidosis. Case No. 452's acne cleared after emigrating to Australia and sun-bathing and recurred on her return to Britain. No. 603 noted no difference on becoming pregnant. She had a miscarriage after six months. 203 had two miscarriages, her acne had improved on marriage and pregnancy had made no difference to her skin. Case No. 46 considered that her acne "just improved as she got older" -- pregnancy had not altered it in any way. Patient No. 468 was not married, her pregnancy made no difference to her skin condition. Case No. 164 wrote that her skin was always bad during her monthly periods and worse during her pregnancy "when her periods should have been". Two other cases whose condition had deteriorated on marriage stated that pregnancy made/

made "no difference" - (Nos. 216 and 735).

Cases No. 68, 105, 240, 418, 476, 648, 632, 688, 693 and 788 thought that their acne had been adversely influenced by pregnancy. Three of the patients wrote explanatory notes. No. 632 had a miscarriage at $4\frac{1}{2}$ months and thought this might have had some bearing on her skin condition. No. 688's acne deteriorated late during pregnancy and she was told by her doctor that she would lose the hearing in her right ear through this disease. No. 788 wrote a long letter from New Delhi. She had prickly heat constantly together with boils and styes while residing in the South of India in a very humid and hot climate. (The sudaminous type of acne here described by the patient was often seen during the last war, particularly in the Middle East). This happened while she was pregnant. Her skin cleared on returning home, but troubled her again when returning to India. She concluded that her eruption appeared to be due to "nerves" to a great extent and had also improved since she started taking lime juice, watching her diet and cleansing her skin more thoroughly.

Case/

Case No.693, though she only wrote that her acne had deteriorated during pregnancy, had been, according to her case notes, attending a physician "for nerves". She also had dandruff and was constipated. She first attended the skin department at the age of 34, her acne had been present since the age of 14. Case No. 418 was still at 30 years of age suffering from pre-menstrual exacerbations of her acne. She appeared to be helped by iron tablets. Her acne was worse during mid-pregnancy. Case No. 68 stated that she was worse during gravidity, but cleared "in Aberdeen, by an ointment similar to Quinolol". The remaining four patients gave no further information. All appeared only mildly affected on their first attendance.

Three patients did not reply to questions 5,6,7 and 8. The patient's mother replied to form No. 371. Her daughter now lived in Australia and had two children. Form No. 319 was also filled in by the patient's mother who wrote that her daughter's skin had cleared during the long sea voyage to Singapore and she, the patient/

patient, had three daughters. No. 542 only stated that her acne was better after child-birth.

No reply was given to questions 5, 6 and 7.

To summarize:

68 patients improved both on marriage and pregnancy.

2 (Nos. 33, 234) improved when married, noted no difference on pregnancy.

No. 234 wrote "improvement maintained".

1 (No. 429) noted no difference on marriage, became worse during pregnancy.

4 patients who had deteriorated after marriage, improved during pregnancy (Nos. 472, 634, 753, 777)

1 Case No. 540 improved after marriage, but was worse during two pregnancies.

34 noted no difference on marriage, but improved on becoming pregnant.

Few patients in this group, who had improved both on marrying and during pregnancy found it necessary to send explanatory notes.

No. 143 complained of persistent scarring which necessitated rather heavy make-up. Four patients

Nos/

(Nos. 135, 170, 427 and 704) still complained of pre-menstrual exacerbation. One patient No. 704 also mentioned that nervous tension aggravated her skin, while Case No. 170 has an active duodenal ulcer and is awaiting gastrectomy. No. 738, who now lives in Montreal noticed aggravation after eating nuts. No. 626 commented on her exceptional freedom from "spots" during both pregnancies. Case No. 802 stressed the importance of vigorous cleansing of the skin and "the use of proper make-up for skin sufferers", she uses chloromycetin cream occasionally.

34 patients noted no difference in their skin condition on marriage, but stated that improvement became noticeable during pregnancy. Case No. 241 stated that her acne disappeared during pregnancy and her skin became "wonderfully clear and fine textured". No. 112's facial acne had improved during pregnancy and "over the years". Her back was "still as bad as ever". Case No. 232. The patient stressed that the following factors aggravated her skin condition: Poor health, nervous disposition, worry and dandruff. Case No. 180/

180 still had pre-menstrual exacerbation of her acne. In a three page long letter Case No.10 explained that the treatment with ultra-violet light and diet dried her skin and made her lose weight. She treated herself with various ointments and homeopathic remedies without success. No difference was noted on marriage, but her skin cleared completely during her pregnancy. She was told not to take liquids with her food and was given "hormone tablets" to be taken one week before her periods. On this treatment her acne cleared and had remained so for two years.

The earliest reference to pregnancy in connection with acne vulgaris was in Audébert's paper (1912) in which he wrote: "En régularissant le fonctionnement des ovaires la grossesse doit donc exercer une influence heureuse sur l'acné". He then described a case where, contrary to the above statement, marked aggravation of acne was seen in two pregnancies in a woman of 26. He went on to say "Les rapports qui existent entre la puérpéralité et l'acné ont été peu étudiés jusqu'à présent". This still holds good to-day. Some/

Some authors only mentioned that the skin condition may improve occasionally during pregnancy (Luithlen 1921, Matra 1938, Way and Andrews 1950, Boughton, McKenna, Wheatley and Wormald, 1959) while others stated that pregnancy may occasionally lead to improvement or an exacerbation of the condition may be observed. (Vignes 1937, Payne, quoted by Mopper and Rogin, 1959, Goldzieher 1947, Aron-Brunetiere 1953) Vignes also mentioned that the exacerbations might be due to an increase in appetite and increased ingestion of carbohydrates.

From the present series it can be seen that between the percentage of patients whose acne improved after marriage (43.4%) and the percentage improved after pregnancy (57.5%) there is a marked difference. A far greater number noted that their skin improved when they became pregnant.

As was mentioned in the last section it has not been possible to find any reference to hormonal changes in the female after marriage. Much work has, however, been done on the hormonal control/

control and variations during pregnancy.

After fertilization of the ovum the corpus luteum continues to develop and secrete progesterone and oestradiol, this is responsible for the maintenance of the decidual endometrium of pregnancy. The removal of the ovaries early in pregnancy causes abortion. If they are removed after three months pregnancy continues, because the chorionic villi secrete oestrogen and progesterone. Chorionic gonadotrophin is formed in the placenta and maintains the corpus luteum during the first three months, as the secretion of pituitary gonadotrophins is inhibited. At 2 - 3 months the escape of chorionic gonadotrophins into the blood and urine declines, the corpus luteum becomes inactive and its functions are taken over by the placenta. Progesterone secretion rises and increases throughout pregnancy and ceases suddenly just before parturition. At the end of the second and third month secretion of oestradiol increases gradually and continues to rise during the rest of pregnancy. The concentration of oestrogen in the blood reaches a maximum/

maximum at parturition and rapidly decreases after expulsion of the placenta. Its excretory product oestriol and oestrone may be recovered from the urine in relatively large quantities. Virtually all oestrogen excreted in the urine up to and at the time of labour is conjugated with glucuronic acid and inactivated. (Spence 1953).

This variation in sex hormones is bound to have a marked influence on the skin and the pilo-sebaceous apparatus. Aron-Brunetiere (1953) thought that the exacerbation of acne often seen by him during the early weeks of pregnancy was due to an increase in progesterone. It has since been found that progesterone excretion only begins to rise steadily after the first 30-40 days of gestation. It cannot, therefore, be blamed for any aggravation that may have been observed. It is unlikely that the initial rise of chorionic gonadotrophins should be the cause for this change; they have been proved the most beneficial of all hormones in the treatment of acne vulgaris by the same author. (1954). The most probable explanation would be the low level of oestrogen and progesterone at/
at/

at the early stages of gestation, combined with a slight rise in corticosteroids. The delicate balance of progesterone+oestrogens becomes androgens

disturbed and adversely affects the patients pilo-sebaceous system.

This early pregnancy exacerbation did not happen frequently in this series. Only 10 patients or 5.4% noted an exacerbation of their condition in pregnancy. One thought this took place early in pregnancy, (No. 688). Two patients observed this during mid-pregnancy (Nos. 105 and 418). The others did not answer question No.6.

More than half of all patients who had become pregnant noticed an improvement in their skin condition during gestation (57.5%). Of these 56% improved early. 32.3% improved during mid-pregnancy and 11.7% late during gestation. Two patients were "not sure" and six did not fill in that part of the questionnaire.

In the first three months of gestation there is a sharp rise in gonadotrophin secretion which falls as rapidly and continues at a constant rather low level until parturition. At the same time/

time a slow rise of oestrogens and progesterone may be observed which begins at about six weeks and continues steadily until parturition. The marked increase of these hormones, gonadotrophins oestrogens and progesterone, all exercise a beneficial influence on the skin metabolism, increasing capillary blood supply by vasodilatation and suppressing the activity of the pilo-sebaceous apparatus. Tissue hydration due to oestrogen and progesterone also improves the texture of the skin during pregnancy. Androgen secretion during pregnancy has been shown by Hain (1938) to increase slightly toward the end of gestation, but was at all times below the level for the non-pregnant woman.

The alteration in a woman's whole outlook and emotional status during pregnancy, whether one postulates this to be due to hormonal influences directly or to psychological, possibly hypothalamic reactions; also reflects in the skin, "that mirror of the soul". Jeffcoate (1957) found depression, irritability, emotional instability and apathy common/

common in early pregnancy. Middle pregnancy is characterized by a feeling of well-being - the woman is full of energy. She then becomes and remains more placid, quietly happy and proud in the fulfilment of her allotted purpose.

In these last two paragraphs factors are described, both endocrine and psychological, which all have a beneficial influence on the skin as a whole and on acne vulgaris in particular. The high percentage of acne cases improved by pregnancy stresses the importance of endocrinological and psychological factors. In a normal pregnancy in a happily married young woman all influences would appear to be on the "credit side" and act together in many cases to bring about a final resolution of this troublesome affliction.

Question 7. Was the condition better or worse after baby was born?

Question 8. Did you breast feed baby?

The replies to these questions are summarized in Table VI (question 7) and Table VII. (Question 8).

Only one patient in this group No.135 wrote that her skin remained free from blemishes for three months after parturition. She could not feed her baby due to anaemia. None of the other patients made any reference in their notes and letters to the post-partum period in connection with their acne.

As can be seen in Table VI. the number of patients who noted an improvement in their acne after the birth of their babies is appreciably larger than in either of the previous groups. Neither marriage nor pregnancy appear to have such a beneficial influence on the patient's skin condition as parturition.

It is shown on Table VII. that lactation seems to make no difference to the improvement or aggravation of the skin; an almost identical number of/
of/

of patients noted improvement or worsening of their acne, irrespective of whether they breast fed their babies or not.

The small number of author's who wrote about acne in mature women (Goldzieher 1947, Zeisler quoted by Hollander 1921 and Luithlen 1921) made no specific mention of child bearing but only referred to maturity, establishment of a normal endocrine balance in the marital state and the cure of acne with normal function of the genital apparatus. Audébert's patient's acne became worse during pregnancy and improved after parturition.

The marked beneficial influence of child bearing on acne vulgaris in a much higher percentage of cases than in the previously discussed groups would appear to be due to several factors. An analogy between dysmenorrhoea with its multiple and varied aetiology, e.g. obstructive, muscular, vascular, allergic, nervous, constitutional, psychological and last, but by no means least, hormonal disturbances (Baird 1950), and acne vulgaris can be drawn here. Both conditions are more common in adolescents, have a very varied aetiology and both are in many cases finally improved/

improved by childbirth.

The hormonal imbalance, be it quantitative or qualitative, must be considered to range high, if not first, in the list of aetiological factors of acne vulgaris and it is this which parturition would seem to correct in a majority of patients. Age has always been cited as important in this condition; is it only because the time taken for a young woman's endocrines to become ideally balanced varies individually and in some cases this ideal balance is only achieved after child-bearing? The result of this survey would strengthen this hypothesis and relegate the multiple other aetiological factors to a place of lesser importance, at least as far as young women are concerned.

It is tempting to qualify Plenck's dictum to: "Non matrimonium sed infantes varos in feminas curant".

CHAPTER 5.

SUMMARY.

SUMMARY.

1). It is difficult, time consuming, and in many cases impossible to get the co-operation of a large group of patients in a large industrial town, where movement of population is bound to be great, particularly in the 15-25 age group. Many of the questionnaires, though very simply worded were inadequately filled in. 827 addresses were collected, over 1100 letters were sent out and almost 100 homes visited personally, yet only 415 forms were finally collected.

2). The treatment given by a skin department, where only relatively stubborn and rather severely affected cases are treated would seem to shorten the duration of acne vulgaris, an important consideration in reassuring young women of marriageable age. See Table 1.

3). Disfiguring scarring would appear to lessen a girl's chance of marriage. See Table 11.

4). Marriage has an undeniable influence on the course of acne vulgaris. 43.4% in the series improved, 53%, however, noted no change in their skin/

skin condition, only 3.6% deteriorated following matrimony. The widely held belief of a universally beneficial influence of marriage on this complaint, while certainly true in a considerable percentage of women, has not been confirmed by this survey. See Table III.

5). Pregnancy, on the other hand, has a markedly beneficial influence on acne vulgaris according to this survey. See Table IV. This is thought to be due to an increase in secretion of oestrogens, progesterone and gonadotrophins during gestation, all of which have a beneficial effect on acne by suppressing the activity of the pilosebaceous apparatus. Androgen, the hormone which stimulates sebaceous gland activity is at a lower level than normal during gestation. The psychological, possibly hypothalamic influence of pregnancy leading to a happier, better balanced outlook would all appear to bring about an amelioration and often a permanent remission of acne vulgaris.

6). The largest percentage of patients improved after the birth of their baby. See Table VI. Lactation appeared not to have further influenced/

influenced the course of events. See Table VII. An analogy can be drawn between dysmenorrhoea and acne vulgaris, both conditions of varied aetiology, commonest in adolescents and both in many instances finally cured by child-birth. It is postulated that this final cure of acne vulgaris is due to a finally established ideal hormonal balance, only achieved by the hormonal stimuli of pregnancy and parturition. Other aetiological factors would appear to be only of secondary importance. A suggestion is made to qualify Plenck's dictum "Matrimonium varos curat" to "Non matrimonium sed infantes varos in feminas curant".

7). From experience in this and other skin departments the results of hormonal therapy are often disappointing and unpredictable and may give rise to unpleasant, though rarely dangerous side-effects. More, and if at all possible, controlled trials are necessary in this field, to find a more satisfactory and safer approach to the internal and external treatment of acne vulgaris/

vulgaris with hormonal substances.

8). It is stressed that acne vulgaris must not be taken lightly, the presence of a disfiguring and usually all too obvious skin condition in a susceptible adolescent not only leads to psychological upset and trauma, but also may interfere with a young person's work and career, as well as jeopardizing a girl's chances in marriage.

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ACKNOWLEDGEMENTS.

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I/

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PART 2.

EXPLANATORY NOTES.

EXPLANATORY NOTES.

- Survey No: Each case card was numbered from 1-826.
- G.W.I. No: Western Infirmary (Glasgow) Skin Department case number.
- G.V.I: Victoria Infirmary, (Glasgow).
- Diet for Acne: Or fat-restricted diet:
Patient is given printed instructions to avoid greasy foods, stews and all forms of pig meat, such as ham, bacon, gammon, pork, pork sausages, sausage meat stuffing, spam etc. Eggs must be fried in butter or margarine. Avoid lard in cooking and baking.
Exclude cocoa and chocolate beverages.
- Cool bland Diet: Exclude pickles, spices, sauces, salad dressing, mustard, pepper, coffee and alcohol. Tea drinking to be curtailed to one cup night and morning - weak and freshly made. All food should be allowed to cool down.
- U.V.L: Ultra-violet light therapy by alpine sun lamp. Dose is varied according to patient's reaction by varying the distance (in inches ' " ') and length of/

of exposure. Erythema and superficial peeling are aimed at.

X-ray therapy:

Usual dose 75 or 100 roentgen at 85 kilovolt at weekly intervals over 11 - 17 weeks.

Zinc Sulph: Zinc sulphate in varying percentage (1/2 - 2%) in calamine lotion as an astringent local application.

Sulph. praecip:

Praecipitated Sulphur (1/2 - 5%) in Calamine lotion or Zinc paste as an antiseptic and peeling local application.

Lotio alba: Zinc. sulphate and Potassium sulphurata 2 - 6% in water, an astringent local application.

Aet.

(lat. aetas) = age or aged.

Ungt. ac. salicyl:

Acid salicyl (usually 2%) in Paraf. Mol. as a softening keratolytic application.

Eskamel Cream

(Smith, Kline & French): A proprietary preparation containing Resorcinol 2%, Sulphur 8%, hexachlorophene 0.25% in a stable, flesh-tinted greaseless base.

Quinolor cream

(Squibb):

A proprietary preparation containing 5% chlorohydroxyquinolines with 10% benzoyl peroxide.

- Valderma
and
Zambuk: Proprietary preparations (ointments)
sold without prescription and widely
advertised. Constituents unknown.
- Caladryl
lotion: Contains Benadryl (diphenhydramine
hydrochloride) 1% with camphor,
calamine and glycerine, as anti-
histamine and antipruritic.
- Ungt. Picis
Co: Contains equal parts of Ungt. picis.
Ungt. ac. salicyl., ungt. hydrarg.
nit. dil. and ungt. glyc. plumb.
subacet., used in treatment of
psoriasis.
- Ungt. emuls.
aquos.: Hydrous emulsifying ointment B.P.
consists of 30% emulsifying ointment,
69.9% water and 0.1% of chlorocresol,
an oil-in-water emulsion.
- Tabs. Bellergal (Sandoz) Laevorotatory belladonna
alkaloids with ergotamine tartrate
0.3 mg and phenobarbitone.
- Collosol
Sulphur
(Crookes): 0.1% solution of colloidal sulphur
and oral sulphur preparation. Dose.
dr. 1 t.i.d.
- C.T.: Abbreviation for "To continue
treatment as before".

CASE CARDS WITH ANNOTATIONS.

SURVEY NO. 10.

Western Infirmary No: B.423

Initials: S.B., now Mrs. G.

Age (when first seen): 19

Duration of acne (when first seen): 5 months.

Treatment and result summarized: Pine Tar Soap,
diet and U.V.L. No improvement on this
regime. See remarks.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved, early during
pregnancy.

Influence of childbirth: Much improved after
birth of baby, who was breast fed.

Further remarks: Long letter included:

Condition improved after other skin
specialist advised not to drink with meals,
but after meal was finished and prescribed
hormone tablets to be taken one week before
each monthly period. On this regime there
was complete regression of the lesions 2
years ago and no further recurrence.

SURVEY NO. 16.

Western Infirmary No: B.530

Initials: G.B.

Age (when first seen): 17

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Pine Tar Soap,

Diet for acne and U.V.L. beginning with
2 minutes at 20", gradually increasing
doses to 4 minutes at 14". Improved,
clear by aet. 28. No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 17.

Western Infirmary NO: B.545

Initials: C.B. now Mrs. R.

Age (when first seen): 16

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne,

Pine Tar Soap. U.V.L. 2 1/2 minutes at 18"
sides of face. Improved on above treatment
at aet. 18-19. No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during pregnancy.

Influence of childbirth: Further improvement after
birth of baby, who was not breast fed.

SURVEY NO. 19.

Western Infirmary No. D.311

Initials: H.D. now Mrs. W.

Age (when first seen) 20

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Pine Tar Soap,

Diet for acne, U.V.L. from $2\frac{1}{2}$ minutes at

20" gradually increased to 3 minutes at 16".

Improved at the age of 18, no scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early on
during pregnancy.

Influence of childbirth: Improved after child-
birth, baby was breast fed.

SURVEY NO. 21.

Western Infirmary No: D.387

Initials: J.D. now Mrs. H.

Age (when first seen): 16

Duration of acne (when first seen): 4 months.

Treatment and result summarized: Diet for acne,

Pine Tar Soap, U.V.L. $2\frac{1}{2}$ minutes at 20",
increased to $2\frac{1}{2}$ minutes at 12" and reduced
to $2\frac{1}{2}$ minutes at 15" over 8 months.

Improved on above treatment. No scarring
left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby, who was breast fed
for 1 month only.

SURVEY NO. 23.

Western Infirmary No. D.365

Initials: F.D.

Age (when first seen): 19

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Pine Tar Soap,

Diet for acne, U.V.L. $2\frac{1}{2}$ minutes at 18",
gradually increased to $2\frac{1}{2}$ minutes at 16"
and repeated.

Slight improvement only, condition still
coming and going, some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved late in
pregnancy.

Influence of childbirth: Improved, but only
temporarily after child birth. First baby
only breast fed.

SURVEY NO. 25.

Western Infirmary No: C.486

Initials: E.C.

Age (when first seen): 16

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne,
Pine Tar Shampoo and Soap, U.V.L. $2\frac{1}{2}$ minutes
at 18", increased gradually to 3 minutes at 14".

Further remarks: No further details known,
patient died in November 1946 in child birth.

SURVEY NO. 29.

Western Infirmary No: C.532A.

Initials: C.C., now Mrs. T.

Age (when first seen): 18

Duration of acne (when first seen): 1 year.

Treatment and result summarized: U.V.L. initial
dose not stated. Improved on above treatment
at aet. 19-20. Slight scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby, who was not breast fed.

SURVEY NO. 31.

Western Infirmary No: C.578

Initials: H.C.

Age (when first seen): 23

Duration of acne (when first seen): 4 - 5 years.

Treatment and result summarized: Diet for acne,

Pine Tar Soap. U.V.L. $2\frac{1}{2}$ minutes at 18" cheeks, gradually increased to $3\frac{1}{2}$ minutes at 16" over 2 months.

Also Lot. calaminae Spirit surgical equal parts. Improved at aet. 27. Very slight scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth of baby, who was breast fed.

SURVEY NO. 33.

Western Infirmary No: L.202

Initials: M.L. now Mrs. B.

Age (when first seen): 19

Duration of acne (when first seen): 4 months

Treatment and result summarized: Diet for acne,

Pine Tar Soap. U.V.L. $2\frac{1}{2}$ minutes at 20"

forehead. Improved on above treatment.

Some scarring left.

Influence of marriage on acne: Improved,

patient thinks mainly due to improved diet

and cleaner atmosphere in St. Louis, U.S.A.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth

of baby, who was breast fed.

SURVEY NO. 37.

Western Infirmary No: S.561

Initials: D.S.

Age (when first seen): 18

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Shampoo. U.V.L. $2\frac{1}{2}$ minutes at
18" face, chest, back. Increased to
3 minutes at 14" over next month. Improved
on above treatment at aet. 19.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby, who was not breast
fed.

SURVEY NO. 41.

Western Infirmary No: G.472

Initials: J.G. now Mrs. S.

Age (when first seen): 17

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. $2\frac{1}{2}$ minutes at 18" cheeks, gradually increased to 4 minutes at 14" and reduced to $3\frac{1}{2}$ minutes at 15" over $2\frac{1}{4}$ years. Also Zinc Sulph. 2% in Lot. calaminae.

Slight improvement on above treatment, cleared by aet. 21. Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Skin was clear before patient became pregnant.

Influence of childbirth: Baby breast fed.

SURVEY NO. 42.

Western Infirmary No: G.444

Initials: M.G.

Age (when first seen): 14

Duration of acne (when first seen): 10 months.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. $2\frac{1}{2}$ minutes at 18"
full face, increased to $2\frac{1}{2}$ minutes at 17"
and repeated for 2 months.

Lotio calaminae)
Spirit surgical) equal parts.

No improvement on above treatment, writes
the patient, clinical notes: Very well.

Cleared at aet 20, no scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: No difference, baby
not breast fed.

SURVEY NO. 46.

Western Infirmary No: H.563.

Initials: M.H. now Mrs. A.

Age (when first seen): 15.

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne,

Pine Tar Soap. U.V.L. $2\frac{1}{2}$ minutes at 20"

whole face. Increased to 4 minutes at

14" over 4 months.

No improvement on above treatment.

Slight scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth

of baby, who was breast fed for a short
time.

SURVEY NO. 51.

Western Infirmary No: B.756

Initials: M.B.

Age (when first seen): 13.

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap.

Lot calaminae)
Spirit surgical) equal parts.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference.

SURVEY NO. 52.

Western Infirmary No: B.191

Initials: M.B. now Mrs. G.

Age (when first seen): 18

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 2 minutes at 18"
increased to 3 minutes at 16" over 9 months.

Also Lotio calaminae)
Surgical spirit) equal parts of each.

Improved on above treatment, then gradual
further improvement by aet. 26.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference noted.

Baby Breast fed for 4 months.

SURVEY NO. 54.

Western Infirmary No: C.637

Initials: A.C.

Age (when first seen): 20

Duration of acne (when first seen): Several months.

Treatment and result summarized: Diet for acne.

Pine Tar Soap.

Lotio calaminae }
Surgical spirit } Equal parts of each.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed for about 2 months only.

SURVEY NO. 56.

Western Infirmary No: C.740

Initials: C.C.

Age (when first seen): 20

Duration of acne (when first seen): 2-3 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 2 minutes at 18"

Very slight improvement on above treatment
at aet 20-22. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference. 1 baby
breast fed, 2 babies were not breast fed.

Further remarks: The only time her skin was free
from acne was when her own Dr. gave her
"some green pellets". This lasted for
about one year.

SURVEY NO. 57.

Western Infirmary No: C.617

Initials: D.C. now Mrs. N.

Age (when first seen): 18

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. $2\frac{3}{4}$ minutes at 18"
cheeks. Increased to $4\frac{1}{2}$ minutes at 15"
and reduced to 3 minutes at 17" over
7 months.

"Quite cured" on above treatment at aet.18-19.

Slight scarring left.

Influence of marriage on acne: Condition had
cleared completely by the time patient
married.

SURVEY NO. 60.

Western Infirmary No: L.278

Initials: J.L. now Mrs. D.

Age (when first seen): 20

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. $2\frac{1}{2}$ minutes at 20"
sides of face. No improvement on above
treatment. No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Worse after birth of
baby who was not breast fed.

SURVEY NO. 61.

Western Infirmary No: M.712B

Initials: A.M.

Age (when first seen): 19

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Shampoo. U.V.L. 2 minutes at 20"
increased to $3\frac{1}{2}$ minutes at 14" over 3 months
and repeated. Improved on above treatment
at aet. 21. No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby, who was not breast fed.

SURVEY NO. 62.

Western Infirmary No. M.718

Initials: M.M. now Mrs. S.

Age (when first seen): 21.

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne,

Pine Tar Soap. U.V.L. $2\frac{1}{2}$ minutes at 18"

cheeks, gradually increased to $4\frac{1}{2}$ minutes

at 13" over 1 year. Also Zinc Sulph.

2% Calamine Lotion. No improvement on

above treatment. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid

pregnancy. Patient at that time also

getting injections from her own Dr. to

improve her acne.

Influence of childbirth: Further improvement

after birth of baby who was not breast fed.

SURVEY NO. 68.

Western Infirmary No. T.311

Initials: Mrs. M.T.

Age (when first seen): 26

Duration of acne (when first seen): 10 years.

Treatment and result summarized: Diet for acne.

Zinc Sulph. 2% Calamine Lotion.

No improvement on above treatment.

"Cured by Dr. Horne in Aberdeen by an ointment very similar to Quinolor".

No scarring.

Influence of marriage on acne: Was married on first attending. Had not noticed any difference.

Influence of pregnancy: Worse during pregnancy.

Influence of childbirth: Slightly better after birth of baby who was not breast fed.

SURVEY NO. 69.

Western Infirmary No. G.557

Initials: C.G. now Mrs. L.

Age (when first seen): 16.

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. $2\frac{1}{2}$ minutes at 18" cheeks gradually increased to 3 minutes at 15" over 3 months. Also Zinc Sulph. 2% Calamine Lotion.

Improved on above treatment at aet 18.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

SURVEY NO. 75.

Western Infirmary No. P.269

Initials: E.P. now Mrs. G.

Age (when first seen): 12.

Duration of acne (when first seen): A few weeks.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Resorcin 1%, Ac. Salicyl 3% Sulph. Praecip. 5% in Paraf. Mol. No improvement on above treatment. No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved late during pregnancy.

Influence of childbirth: Further improvement after birth of baby.

SURVEY NO. 85.

Western Infirmary No: C.746.

Initials: P.C.

Age (when first seen): 20.

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. $2\frac{1}{2}$ minutes at 18" both cheeks, gradually increased to 3 minutes at 14" over 8 months and repeated. Also Lot. Calaminae and Surgical Spirit, equal parts.

Then X-Ray Therapy, 9 treatments. Dose not stated. Improved on completion of treatment. Some enlarged pores left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated.

SURVEY NO. 89.

Western Infirmary No: C.873

Initials: E.C. now Mrs. J.

Age (when first seen): 20.

Duration of acne (when first seen): 5 months.

Treatment and result summarized: Resorcin 1%

Ac. Salicyl 2%. Sulph. Praecip. 5% in

Paraf. Mol. Diet for acne.

Improved on above treatment in a very

short time. No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: No change. Baby was
not breast fed.

SURVEY NO. 93.

Western Infirmary No: M.797

Initials: J.M.

Age (when first seen): 27

Duration of acne (when first seen): 6 years.

Treatment and result summarized: Diet for
acne. Pine Tar Soap. Lot. Calaminae
and Surgical spirit (equal parts).

Then U.V.L. $2\frac{1}{2}$ minutes at 18", gradually
increased to $2\frac{1}{2}$ minutes at 14" over 10
months. No improvement on above treatment.
Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved late during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

SURVEY NO. 94.

Western Infirmary No: M.775

Initials: M.M.

Age (when first seen): 18

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. $2\frac{1}{2}$ minutes at 18" cheeks, gradually increased to 3 minutes at 15" over 3 months and repeated.

Also Zinc Sulph. 2% Calamine Lotion.

No improvement on above treatment.

Improved at aet. 22. No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: No difference after birth of baby who was not breast fed.

SURVEY NO. 95

Western Infirmary No: M.856

Initials: A.M.

Age (when first seen): 20

Duration of acne (when first seen): Not stated.

Treatment and result summarized: U.V.L. 2 minutes
at 18" both cheeks, increased to 3 minutes
at 16" over 4 months. Also Zinc Sulph. 2%
Calamine lotion.

Improved on above treatment at aet 20 - 21.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth
of baby who was breast fed.

SURVEY NO. 100.

Western Infirmary No: Mc 1617

Initials: R. McG. now Mrs. K.

Age (when first seen): 16

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Shampoo. U.V.L. $2\frac{1}{2}$ minutes at
18" cheeks, increased to 3 minutes at 16"
over 6 months. Also Zinc. Sulph. 2%

Calamine Lotion. Improved on above treat-
ment at aet. 16. No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference, during
both pregnancies had "a hot and itchy rash"
late during pregnancy on arms during first
pregnancy and on legs during second pregnancy.

Influence of childbirth: No difference.

SURVEY NO. 102.

Western Infirmary No: Mc. 1564

Initials: A. McF.

Age (when first seen): 13

Duration of acne (when first seen): 9 months.

Treatment and result summarized: Diet for acne.

Lotio calaminae.)
Surgical Spirits) Equal parts.

Then Zinc. Sulph. 3% calamine lotion.

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was not breast fed.

Further remarks: Patient attributes improvement to the treatment her own Dr. gave her.

SURVEY NO. 105.

Western Infirmary No: S.811

Initials: M.S.

Age (when first seen): 25

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Lotio alba. Collosol

Sulph. 1 dr. t.i.d. Improved on above

treatment. Small red marks left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Worse during mid
pregnancy.

Influence of childbirth: Improved after birth
of baby who was not breast fed.

SURVEY NO. 107.

Western Infirmary No: R.530.

Initials: E.R. now Mrs. H.

Age (when first seen): 19

Duration of acne (when first seen): 7 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc. Sulph. 2% Calamine

Lotion. No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

SURVEY NO. 109.

Western Infirmary No: T.409

Initials: C.T.

Age (when first seen): 19

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc. Sulph. 2% Calamine

Lotion. Improved on above treatment.

Further gradual improvement at aet 23.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Marked improvement.

Influence of childbirth: Further improvement

after birth of baby who was not breast fed.

SURVEY NO. 112.

Western Infirmary No: F.385

Initials: R.F. now Mrs. F.

Age (when first seen): 19

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

Pine Tar Shampoo. Zinc Sulph. 2% Calamine
Lotion.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during
pregnancy.

Influence of childbirth: Worse after birth of
baby who was breast fed for one month only.

Further remarks: Face improved over the years.

Condition as bad as ever on the back.

SURVEY NO. 118.

Western Infirmary No: H.778

Initials: I.H.

Age (when first seen): 15

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc Sulph. 2% Calamine
Lotion.

Improved at aet 23. No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth
of baby who was breast fed.

SURVEY NO. 121.

Western Infirmary No: P.305

Initials: M.P.

Age (when first seen): 23

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

Zinc. Sulph. 2% Lotio Calaminae.

Improved on above treatment by about
aet 25. No scarring left.

Influence of marriage on acne: Clear when
married at aet 25.

Further remarks: Mother gave details. The
patient went to Canada when she married
in 1947. Her family did not send on the
Survey Questionnaire "in case her husband
thought she had had some serious illness".

SURVEY NO. 122.

Western Infirmary No: B.969

Initials: E.B.

Age (when first seen): 24

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc Sulph. 2% Calamine

Lotion. No improvement on above treatment.

No scarring left.

Influence of marriage on acne: Improved BEFORE
marriage.

Influence of pregnancy: No family.

SURVEY NO. 127.

Western Infirmary No: J.222

Initials: M.J.

Age (when first seen): 18

Duration of acne (when first seen): 6 months.

Treatment and result summarized: Pine Tar Shampoo.

Lotio Alba. No improvement on above treatment.
Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Worse after birth of
baby who was not breast fed.

SURVEY NO. 129.

Western Infirmary No: K.348

Initials: M.K. now Mrs. T.

Age (when first seen): 18

Duration of acne (when first seen): 2 years.

Treatment and result summarized: U.V.L. 2

minutes at 18" sides of face. Increased
to 3 minutes at 17" over 3 weeks. Also
Zinc Sulph. 2% Calamine Lotion.

Improved on above treatment at aet 20.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was breast fed.

SURVEY NO. 130.

Western Infirmary No: K.349

Initials: R.K.

Age (when first seen): 17

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

U.V.L. $2\frac{1}{2}$ minutes at 18" also Zinc Sulph.

2% Calamine Lotion.

Improved on above treatment at aet 19.

No scarring left.

Influence of marriage on acne: No difference.

Condition had improved before marriage.

Influence of pregnancy: No difference.

SURVEY NO. 135.

Western Infirmary No: M.991

Initials: B M. now Mrs. B.

Age (when first seen): 16

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 2 minutes at 18"
increased to 3 minutes at 14" over 5 months.

Also Zinc Sulph 2% Calamine Lotion.

Caps. Vit.A. 4.500 I.U. 11 Q.I.D.

Tab. Dienoestrol 0.1 mg I.B.D. for first
12 days of menstrual cycle. Collosol Sulph.
Dr. I t.i.d. Sulph. praecip. 2% Past. Zinc.
increased to 4%. Attended for 5 years.

Moved to Edinburgh. No improvement on above
treatments. Some scarring left.

Influence of marriage on acne: Improved on
marriage.

Influence of pregnancy: Improved.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.
Skin remained clear for 3 months after birth,
then acne recurred.

SURVEY NO. 143

Western Infirmary No: S.991

Initials: C.S., now Mrs. L.

Age (when first seen): 18

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

U.V.L. 3 minutes at 17", increased to
4 minutes at 14" over 8 months.

Also Zinc Sulph. 2% in Lotio calaminae
then X-Ray therapy.

Slight improvement on above treatment.

Gradual further improvement around aet 22.

Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
noted after birth of baby who was breast
fed.

SURVEY NO. 144.

Western Infirmary No: S.989

Initials: C.S.

Age (when first seen): 17

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 2 minutes at 17"
increased to 3 minutes at 17" at next
visit. Also Sulph. praecip. 2% Lotic
calaminae.

Improved on above treatment. Faint
scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth
of baby who was not breast fed.

Further remarks: Lives in New York - 2 babies.

SURVEY NO. 151.

Western Infirmary No: T.432

Initials: I.T., now Mrs. C.

Age (when first seen): 19

Duration of acne (when first seen): 1 month.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 2 minutes at 18"
cheeks, increased to 4 minutes at 16" over
2 months. Also Zinc sulph. 2% in Lotic
Calaminae.

Improved on above treatment at aet 20.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was breast fed.

SURVEY NO. 152.

Western Infirmary No. W.24

Initials: M.W. now Mrs. W.

Age (when first seen): 17

Duration of acne (when first seen) 2 years.

Treatment and result summarized: Lotio alba,
boric fomenta for infected cyst, which was later
incised. Infra red therapy for induration
after incision. Improved after above treat-
ment. No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

SURVEY No. 153.

Western Infirmary No: F.456

Initials: H.F.

Age (when first seen): 21.

Duration of acne (when first seen): Some months.

Treatment and result summarized: U.V.L. 2 minutes
at 18" cheeks. Increased to 3 minutes at 17"
over 1 month. No improvement on above treat-
ment. Condition still said to be the same.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference - baby
breast fed.

SURVEY NO. 154.

Western Infirmary No: H.828

Initials: P.H.

Age (when first seen): 15.

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc Sulph. 2% Lotio:

Calaminae. Then Resorcin 1%, Ac.salicyl. 3%

Sulph. praecip. 5% in Lanoline.

Improved on above treatment at aet 15.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: No difference noted.

Baby not breast fed.

SURVEY NO. 156.

Western Infirmary No: W.660

Initials: J.W. now Mrs. McC.

Age (when first seen): 20

Duration of acne (when first seen): Not stated.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc Sulph. 2% in Lotion
Calaminae.

Improved slightly during treatment, marked
improvement at aet 22-23.

Slight scarring on chin only.

Influence of marriage on acne: No difference,
married at aet 30.

Influence of pregnancy: No difference.

Influence of childbirth: No change noted.

Baby breast fed for 6 months.

Further remarks: Oranges and porridge "affect
patient's skin, also over-anxiety and her
menstrual periods".

SURVEY NO. 160

Western Infirmary No: C.1210

Initials: E.C.

Age (when first seen): 18

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

Zinc Sulph. 2% Lotio Calaminae.

Improved on above treatment and cleared gradually by aet 21.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Cleared completely early during pregnancy.

Influence of childbirth: Remained clear.

Baby breast fed.

SURVEY NO. 161.

Western Infirmary No: B.1084

Initials: M.B.

Age (when first seen): 23

Duration of acne (when first seen): 6 years.

Treatment and result summarized: Diet for acne.

Pine Tar Shampoo. U.V.L. 2 minutes at
17" increased to 3 minutes at 15" over
2 months. Then X-Ray Therapy.

Improved on above treatment at aet 23.

Some scarring left.

Influence of marriage on acne: Improved. She
got married at the end of above course of
treatment.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was breast fed.

SURVEY NO. 162.

Western Infirmary No: B.2059.

Initials: I.B.

Age (when first seen): 18

Duration of acne (when first seen) 5 years.

Treatment and result summarized: U.V.L. 1 minute at 17". Increased to 2 minutes at 16" over 2 months. Also Zinc. Sulph. 2% in Lotic Calaminae.

No improvement on above treatment.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Further improvement after birth of baby who was not breast fed.

SURVEY NO. 163.

Western Infirmary No: B.2113

Initials: R.B.

Age (when first seen): 14

Duration of acne (when first seen): Several months.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 2 minutes at 18"
gradually increased to 4 minutes at 15" over
1 year. Also had Zinc. Sulph. 2% Calamine
Lotion and Sulph. praecip. 2% Pasta Zinc
nocte.

No improvement on above treatment.

No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 164.

Western Infirmary No: C.1174

Initials: Mrs. I.C.

Age (when first seen): 25

Duration of acne (when first seen): 10 years.

Treatment and result summarized: No benefit from "Injections". Face: Sulph. praecip. 10% Lotic calaminae. Back: U.V.L. 2½ minutes at 15".

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: Worse.

Influence of pregnancy: No difference, but condition was worse at the time when menstrual periods should have been.

Influence of childbirth: Improved after birth of baby. Could not breast feed as she developed breast abscess.

Further remarks: Patient writes that she did not keep to the diet and stopped attending U.V.L. clinic as her skin was only improved but not cured by the light therapy. Still has acne, particularly during menses.

SURVEY NO. 165.

Western Infirmary No: C.804

Initials: A.C. now Mrs. G.

Age (when first seen): 24

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Ungt. ac. salicyl. to face.

No improvement on above treatment. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth of baby.

Further remarks: Still suffers from acne though not so severely as previously.

SURVEY NO. 169

Western Infirmary No: C.1128

Initials: M.C.

Age (when first seen): 21

Duration of acne (when first seen): 7 years.

Treatment and result summarized: Diet for acne.

Zinc. Sulph. 2% Lotio Calaminae.

Cleared on above treatment at aet 21.

Influence of marriage on acne: Condition was
clear before marriage.

SURVEY NO. 170.

Western Infirmary No: M.1097

Initials: E.M.

Age (when first seen): 16

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 2 minutes at 17"
increased to 3 minutes at 15" during 1 month.
Improved "to a certain extent" on above
treatment. Further improved since aet 20.
A little scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved late during
pregnancy.

Influence of childbirth: A little better after
birth of baby who was not breast fed.

Further remarks: Has active duodenal ulcer.

Awaiting gastrectomy. Still gets blackheads.

SURVEY NO. 171.

Western Infirmary No: M.1107

Initials: E.M. now Mrs. G.

Age (when first seen): 14

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 2 minutes at 17"
increased gradually to 5 minutes at 15"
over 3 months.

Temporary improvement only on above.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

Further remarks: Patient writes that now, at
aet.26, acne is again troublesome.

SURVEY NO. 176

Western Infirmary No: R.761

Initials: C.R.

Age (when first seen): 17

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

U.V.L. 2 minutes at 17" sides of face.

Gradually increased to 5 minutes at 14"

over 3 months.

Also had Zinc Sulph. 2% in Lotio calaminae.

Improved on above treatment at aet 19.

Slight scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Worse after birth of baby who was breast fed.

SURVEY NO. 178

Western Infirmary No: R.769

Initials: M.R. now Mrs. McK.

Age (when first seen): 15

Duration of acne (when first seen): 1 week

(Erythema nodosum) Not stated for acne.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. X-Ray Chest: Negative.

Gradual improvement without treatment.

No scarring.

Influence of marriage on acne: Not stated, but appears that acne had cleared before marriage.

Further remarks: Erythema nodosum treated with rest in bed only. Still gets occasional mild acne.

SURVEY NO. 180

Western Infirmary No: G.767

Initials: M.G. now Mrs. B.

Age (when first seen): 17

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc Sulph. 2% in calamine
Lotion. Then U.V.L. 2 minutes at 18"
cheeks. Gradually increased to 3 minutes
at 16" over 18 months.

Improved on above treatment at aet 18.

Enlarged pores only.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was breast fed.

SURVEY NO. 184.

Western Infirmary No: C.1253

Initials: M.I.C.

Age (when first seen): 21

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 2 minutes at 17".

Gradually increased to 4 minutes at 14"

over 1 year. Also Zinc. Sulph. 2% in
calamine Lotion.

Improved on above treatment at aet 25

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 194

Western Infirmary No: D.772

Initials: M.D.

Age (when first seen): 21

Duration of acne (when first seen): 7 years.

Treatment and result summarized: Diet for acne.

U.V.L. probably 1 minute at 17" initially,
increased to 3 minutes at 17" over 1 month.

Improved on above treatment.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

SURVEY NO. 201.

Western Infirmary No: Mc.3048

Initials: M. McI. now Mrs. S.

Age (when first seen): 17

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Resorcin 3%, Ac.salicyl 5%.

Sulph. praecip 7% in paraf. mol. Then

U.V.L. 2 minutes at 17" sides of face.

Improved almost immediately at about 20.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference noted.

Baby not breast fed.

SURVEY NO. 203.

Western Infirmary No: Mc.2461

Initials: H. McD. now Mrs. McG.

Age (when first seen): 19

Duration of acne (when first seen): $1\frac{1}{2}$ years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc. Sulph. 2% Calamine
Lotion.

Improved gradually at aet.28

Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference. Had
two miscarriages.

Further remarks: Patient would like further
treatment for residual scarring.

SURVEY NO. 206.

Western Infirmary No: Mc.2414

Initials: M. McC. now Mrs. R.

Age (when first seen): 19

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc. Sulph. 2% Calamine
Lotion.

Patient is not sure whether there was any
improvement on above treatment.

Clinical notes: Practically clear.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: No difference after
birth of baby who was not breast fed.

Further remarks: Patient writes that "she is
very happily married and has a much calmer
out-look. Her skin is quite clear".

SURVEY NO. 209.

Western Infirmary No: S.1843

Initials: U.S.

Age (when first seen): 14

Duration of acne (when first seen): 2 years

Treatment and result summarized: Had 4x90r at

G.V.I. in 1948. Diet for acne. Pine Tar

Soap. X-Ray Therapy 3 areas 1400r in

14 treatments over 13 weeks.

Slight improvement on above treatment.

Steady improvement since aet 21.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 212

Western Infirmary No: S.1168

Initials: J.S. now Mrs. O.

Age (when first seen): 18

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Zinc. sulph. 2% Lotion calaminae.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Worse after birth of
baby who was breast fed.

Further remarks: Patient suffered from sarcoidosis
eight months after birth of child. During
treatment for sarcoidosis her acne disappeared
completely.

SURVEY NO. 216.

Western Infirmary No: R.823

Initials: M.R.

Age (when first seen): 19

Duration of acne (when first seen): 5 years.

Treatment and result summarized: U.V.L. 2
minutes at 17", increased gradually to
5 minutes at 14" over 2 months.

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: Worse.

Influence of pregnancy: No difference.

Influence of childbirth: No difference noted.

Baby breast fed.

SURVEY NO. 220.

Western Infirmary No: T.549

Initials: I.T.

Age (when first seen): 22

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

Zinc. Sulph. 2% in Lotion Calaminae.

Patient only attended once and "never took treatment" as she only "had it slightly".

No scarring.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed for 6 weeks.

SURVEY NO. 223

Western Infirmary No: W.952

Initials: L.W.

Age (when first seen): 18

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Pine Tar Soap.

U.V.L. $1\frac{1}{2}$ minutes at 18" to sides of face,
gradually increased to 4 minutes at 15"
over 11 months.

Also had Tab. Dienoestrol 0.1mg for mid
12 days of menstrual cycle.

Lotio alba. Eskamel cream.

Zinc. Sulph. 2% in lotio calaminae.

Resorcin and Sulph. praecip 1% in Calamine
lotion.

Improved gradually at aet 25.

Some scarring left.

Influence of marriage on acne: Improved after
marriage.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement after
birth of baby who was breast fed.

SURVEY NO. 224

Western Infirmary No: G.922

Initials: E.G.

Age (when first seen): 19

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 2 minutes at 17"
sides of face. Gradually increased to
3 minutes at 15" over 2 months.

Temporary improvement on above treatment.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was breast fed.

SURVEY NO. 232

Western Infirmary No. Mc.3337

Initials: M. McC.

Age (when first seen): 20

Duration of acne (when first seen): Several years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Tabs. Dienoestrol 0.1mg
for mid 15 days of menstrual cycle.

Then Zinc Sulph. 2% in Lotic Calaminae
then Lotic Alba.

No improvement on above treatment.

Improved after X-Ray Therapy at Royal
Infirmary, aet 26. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved early in
pregnancy, but she lost her baby at 6 weeks.

Further remarks: Patient writes that condition
is aggravated by poor health, nervous
disposition, worry, and dandruff.

SURVEY NO. 233

Western Infirmary No: Mc.3339

Initials: M. McC. now Mrs. S.

Age (when first seen): 23

Duration of acne (when first seen): 10 years.

Treatment and result summarized: Diet for acne.

 Tabs. Dienoestrol 0.1mg. for mid 15
 days of menstrual cycle.

 No improvement on above treatment.

 Scarring present when patient first
 attended.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

Further remarks: Had "an operation" performed
 for her acne in Toronto, Ontario.

 Condition persists, but is very mild now.

SURVEY NO. 234

Western Infirmary No: Mc.3226

Initials: H. McC.

Age (when first seen): 18

Duration of acne (when first seen): 3 months.

Treatment and result summarized: Pine Tar Soap.

Lotio alba. Then U.V.L. initial dose not stated.

Improved on above treatment at aet 20.

No scarring left.

Influence of marriage on acne: Improvement continued.

Influence of pregnancy: No difference, i.e. improvement maintained.

Influence of childbirth: Improvement maintained.
Baby not breast fed.

SURVEY NO. 235.

Western Infirmary No: W.860

Initials: Mrs. M.W.

Age (when first seen): 30

Duration of acne (when first seen): 14 years.

Treatment and result summarized: Diet for acne.

 Tabs. Bellergal night and morning. Sulph.
 praecip. $\frac{1}{2}\%$ in Lotion Calaminae. Occasional
 Eusol soaks to infected lesions.

 Very slight improvement only on above
 treatment. Considerable improvement on
 "liver injections" by own Dr. Marked
 scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

Further remarks: Patient writes that the first
 attack followed nervous upset and her
 condition has always been markedly aggravated
 by any nervous upset or "shock". (Deaths of
 relatives - 3 accidents).

 Condition still comes and goes.

SURVEY NO. 237.

Western Infirmary No: N.225

Initials: Mrs. M.N.

Age (when first seen): 26

Duration of acne (when first seen): 10 years.

Treatment and result summarized:

Diet for acne.

X-Ray Therapy 1800r in 18 treatments.

Improved on above treatment which patient writes was most successful.

Influence of marriage on acne: Not stated.

Married at time of first attendance.

SURVEY NO. 240.

Western Infirmary No: C.1399

Initials: I.C. now Mrs. T.

Age (when first seen): 27

Duration of acne (when first seen): 4-5 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc. Sulph. 2% in Lotic
Calaminae. Then U.V.L. 2 minutes at 17".

Case notes state: "perfectly well".

Patient writes "no improvement" on above
treatment.

Influence of marriage on acne: No difference.

Influence of pregnancy: Worse during pregnancy.

Influence of childbirth: Worse still after birth
of baby who was breast fed for a "short
period".

SURVEY NO. 241.

Western Infirmary No: C.1447

Initials: C.C. now Mrs. M.

Age (when first seen): 19

Duration of acne (when first seen): 11 months.

Treatment and result summarized: Diet for acne.

U.V.L. 2 minutes at 17" increased to
3 minutes at 15" over 2 months.

"Cured" on above treatment at aet 19.

No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: Acne had been clear since
aet 19, but patient noticed that the skin
became "wonderfully clear and fine textured"
during both pregnancies.

Influence of childbirth: Skin "reverted to
normal" after birth of babies. 1st baby
breast fed for 3 weeks. 2nd baby not
breast fed.

SURVEY NO. 242.

Western Infirmary No: C.1503

Initials: B.C.

Age (when first seen): 21

Duration of acne (when first seen): 4 - 5 years.

Treatment and result summarized: Ac. Salicyl 5%
Resorcin 2% in paraf. mol. to nodular areas.
Zinc. Sulph. 2% in lotio Calaminae other
areas.

No improvement on above treatment.

Improved at aet 25+

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

Further remarks: Mother gave details.

SURVEY NO. 244.

Western Infirmary No: B.1025

Initials: C.B.

Age (when first seen): 21

Duration of acne (when first seen): 6 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. X-Ray Therapy 1200r at
85 kv over 11 weeks.

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Worse after birth of
baby who was not breast fed.

SURVEY NO. 245.

Western Infirmary No: B.2289

Initials: M.B.

Age (when first seen): 21

Duration of acne (when first seen): 1 year

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc. Sulph. 2% in Lotion

Calaminae, then U.V.L. 2 minutes at 17"

Increased to 4 minutes at 15" over 2 months.

Improved on above treatment at aet 21.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth
of baby who was breast fed for one week
only.

SURVEY NO. 247

Western Infirmary No: E.164

Initials: M.E.

Age (when first seen): 17

Duration of acne (when first seen): 1 year

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 2 minutes at 17"

full face. Then Zinc sulph. 2% in lotio
calaminae.

Improved on above treatment at aet 17.

Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Worse after birth of
baby who was not breast fed.

SURVEY NO. 249.

Western Infirmary No: D.871

Initials: I.D. now Mrs. McF.

Age (when first seen): 17

Duration of acne:(when first seen): 3 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 2 minutes at 18",
gradually reduced to $1\frac{1}{2}$ minutes at 18"
over 2 months.

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved late during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was breast fed.

SURVEY NO. 253.

Western Infirmary No: K464

Initials: E.K.

Age (when first seen): 21

Duration of acne (when first seen): Not stated.

Treatment and result summarized: Diet for acne.

Pine Tar Shampoo. U.V.L. $1\frac{1}{2}$ minutes at 17" sides of face. Gradually increased to 4 minutes at 15" over 5 months.

Improved on above treatment during "early twenties".

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Worse after birth of baby who was breast fed.

SURVEY NO. 255.

Western Infirmary No: L.646

Initials: J.L.

Age (when first seen): 18

Duration of acne (when first seen): 3 weeks.

Treatment and result summarized: Ungt. hydrarg.

ammon. 2%, Tinct. Valerian dr. 1 b.d.

lldr. nocte. Then Sulph praecip 2%

Lotio Calaminae.

Improved on above treatment at aet 19½ - 20.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference.

SURVEY NO. 258

Western Infirmary No: M.1385

Initials: G.M. now Mrs. S.

Age (when first seen): 19

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

 Tabs. Dienoestrol 0.1mg for middle 15 days
of menstrual cycle. U.V.L. 2 minutes
at 18" full face.

 Gradual improvement on above and up to
aet 24, considerable improvement then.

 Still some lesions from time to time.

 Slight "bluish marks" left on chin, more
noticeable during cold weather.

Influence of marriage on acne: Slight improvement.

Influence of pregnancy: No family.

SURVEY NO. 261A

Western Infirmary No: Mc.3189

Initials: M. McP. now Mrs. B.

Age (when first seen): 21

Duration of acne (when first seen): 9 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc Sulph. 2% in Lotion
Calaminae.

Improved on above treatment at aet 22-23.

Very slight scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved.

Influence of childbirth: Further improvement
after birth of baby who was breast fed.

SURVEY NO. 272

Western Infirmary No: G.1031

Initials: R.G. now Mrs. M.

Age (when first seen): 20.

Duration of acne (when first seen): 4 years.

Treatment and result summarized: X-Ray Therapy

100r weekly for 12 weeks. 1 year later

relapsed: Zinc Sulph. 2% in Lotic

Calaminae.

Improved on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference noted.

Baby not breast fed.

SURVEY NO. 275.

Western Infirmary No: G.1042

Initials: J.G.

Age (when first seen): 19

Duration of acne (when first seen): 2 years.

Treatment and result summarized: U.V.L. 1 minute
at 17". Gradually increased to 3 minutes
at 15" over 6 months.

Improved on above treatment at aet 19.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference noted.

Baby not breast fed.

SURVEY NO. 280.

Western Infirmary No: Mc.3573

Initials: M. McD. now Mrs. C.

Age (when first seen): 18

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

U.V.L. 2 minutes at 17", increased to
2 minutes at 16" over 1 month.

No improvement on above, but patient
"thinks she did not attend long enough".

Enlarged pores left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth
of baby who was breast fed for 1 month only.

Further remarks: Patient writes that she has
"a sort of rash under the skin" now.

SURVEY NO. 283.

Western Infirmary No: Mc.3498

Initials: E. McD.

Age (when first seen): 32

Duration of acne (when first seen): 14 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc Sulph. 2% in Lotion
Calaminae.

Improved on above treatment.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

Further remarks: Degree of hirsuties contra-
indicated U.V.L. therapy.

SURVEY NO. 292

Western Infirmary No: N.253A

Initials: Mrs. T.N.

Age (when first seen): 27

Duration of acne (when first seen): 5-6 weeks.

Treatment and result summarized: Diet for acne.

U.V.L. 2 minutes at 17" to cheeks.

Increased to 3 minutes at 16" over
2 months.

Then Lotio alba.

Improved on above at aet 28, immediately
after treatment.

No scarring.

Influence of marriage on acne: Was already
married when she took acne.

Influence of pregnancy: Had 2 children before
onset of acne.

SURVEY NO. 298.

Western Infirmary No: B.2062

Initials: J.B. now Mrs. S.

Age (when first seen): 17

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. initial dose not stated, gradually increased to $4\frac{1}{2}$ minutes at 16" over 4 months.

Improved on above treatment at aet 18-19.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference. Baby breast fed.

SURVEY NO. 302

Western Infirmary No: B.2498

Initials: M.B.

Age (when first seen): 23

Duration of acne (when first seen): 9 years.

Treatment and result summarized: Diet for acne.

Collosol sulphur 1 dr. t.i.d.

X-Ray Therapy. 1352r over 9 weeks to chin
only.

Improved on above treatment at aet 25.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

SURVEY NO. 303

Western Infirmary No: B.2595

Initials: J.B.

Age (when first seen): 20

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

Lotio alba.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

SURVEY NO. 307

Western Infirmary No: A501

Initials: E.A.

Age (when first seen): 27

Duration of acne (when first seen): 7 years.

Treatment and result summarized: Tabs. Vitamin

A. 50.000 I.U. Q.I.D. Zinc. Sulph. 2%

in Lotio. Calaminae.

Improved on above treatment, but condition
still comes and goes.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth
of baby who was not breast fed.

SURVEY NO. 310

Western Infirmary No: C.1769

Initials: A.C. now Mrs. C.

Age (when first seen): 19

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Diet for acne.

Lotio alba. U.V.L. 1 minute at 18"

increased to 3 minutes at 17" and reduced
to 2 minutes at 18" over 3 months.

No improvement on above treatment.

Influence of marriage on acne: Not stated.

Influence of pregnancy: No family.

Further remarks: Patient went to Canada from
1955-1957. Married in 1956. On returning
home "noticed that her skin was completely
clear".

SURVEY NO. 316

Western Infirmary No: M.1606

Initials: J.M.

Age (when first seen): 19

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Diet for acne.

Zinc. sulph. 2% in Lotion calaminae.

Pine Tar Soap.

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated.

Further remarks: Attended Stobhill Hospital
for U.V.L. 2 years ago and her condition
has been improving slowly since.

SURVEY NO. 317

Western Infirmary No: S.2168

Initials: M.S.

Age (when first seen): 19

Duration of acne (when first seen): 6 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 18" forehead and cheeks
then Eskamel cream.

Improved on above treatment.

Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

Further remarks: Also subject to angio-neurotic
oedema, due to catarrh. Treated by antral
lavage and anti-histamines.

SURVEY NO. 319

Western Infirmary No: S.2100

Initials: J.S. now Mrs. McG.

Age (when first seen): 20

Duration of acne (when first seen): $4\frac{1}{2}$ years.

Treatment and result summarized: Had X-Ray

treatment at G.V.I. total 300r.

Diet for acne. Further X-Ray Therapy

at 100r weekly up to total 1500r.

Improved on above treatment.

Some scarring left.

Influence of marriage on acne: Not stated.

Influence of pregnancy: Not stated. 3 pregnancies.

Influence of childbirth: 3 babies breast fed for
3 months each. Influence on acne not stated.

Further remarks: Mother filled in form.

Patient lives in Singapore. Skin greatly
improved during sea voyage.

SURVEY NO. 321.

Western Infirmary No: S.2409

Initials: A.S.

Age (when first seen): 19

Duration of acne (when first seen): 2-3 years.

Treatment and result summarized: Diet for acne.

Pine Tar Shampoo. U.V.L. initial dose not stated.

Improved at aet 25

Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

SURVEY NO. 322

Western Infirmary No: S.2382

Initials: F.S.

Age (when first seen): 19

Duration of acne:(when first seen): 5 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 17" full face and
back.

Improved at aet 23.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 323

Western Infirmary No: S.2301

Initials: M.S.

Age (when first seen): 20

Duration of acne (when first seen): 7 years

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Lotio alba. Then Eskamel
cream.

Improved on above treatment at aet 21

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth
of baby who was breast fed.

SURVEY NO. 330

Western Infirmary No: R.1177

Initials: M.R. now Mrs. S.

Age (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

U.V.L. initial dose not stated.

Improved at aet 23.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved late during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

SURVEY NO. 335.

Western Infirmary No: I.107

Initials: A.I. (Mrs).

Age (when first seen): 29

Duration of acne (when first seen): 10 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc Sulph. 2% in Lotic

Calaminae increased to 3% at next visit.

No improvement on above treatment.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: No difference noted.

One baby was breast fed - the other was
not breast fed.

SURVEY NO. 337

Western Infirmary No: T.815

Initials: A.T. now Mrs. H.

Age (when first seen): 21

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 17" full face.

No improvement on above, but "improved
under private treatment".

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 338

Western Infirmary No: T.807

Initials: I.T. now Mrs. F.

Age (when first seen): 20

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

U.V.L. course, initial dose not stated.

Improved on above treatment at aet 20.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: Worse after birth of
baby who was not breast fed.

SURVEY NO. 343.

Western Infirmary No: G.1109

Initials: E.G. now Mrs. S.

Age (when first seen): 23

Duration of acne (when first seen): 7 years.

Treatment and result summarized: U.V.L. 1 minute
at 17" increased to 2 minutes at 17" 2 weeks
later.

Improved on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference noted.

Baby was breast fed.

SURVEY NO. 346

Western Infirmary No: G.1183

Initials: I.G.

Age (when first seen): 18

Duration of acne (when first seen): 6 years.

Treatment and result summarized: U.V.L. 2

minutes at 18", gradually increased to
3 minutes at 13" over 2 months.

Then Sulph. praecip. 3% in Lotio
Calaminae. Then Eskamel cream and
also Lotio alba.

No improvement on above treatments.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 349

Western Infirmary No: G.1270

Initials: M.G.

Age (when first seen): 18

Duration of acne (when first seen): Not stated.

Treatment and result summarized: U.V.L. course.

Initial dose not stated.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was not breast fed.

SURVEY NO. 351

Western Infirmary No: G.1294

Initials: J.G.

Age (when first seen): 15

Duration of acne (when first seen): 18 months.

Treatment and result summarized: Diet for acne.

Zinc Sulph. 2% in Lotio Calaminae,

then Eskamel cream.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Very much improved

during mid pregnancy.

Influence of childbirth: Further improvement

after birth of baby who was not breast fed.

SURVEY NO. 353

Western Infirmary No: F.745

Initials: J.F.

Age (when first seen): 17

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Diet for acne.

U.V.L. initial dose not stated.

Improved on above treatment at aet 17 - 18.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated. Baby not
breast fed.

SURVEY NO. 354

Western Infirmary No: F.746

Initials: E.F. now Mrs. B.

Age (when first seen): 17

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

U.V.L. initial dose not stated.

Increased to 3 minutes at 15" over
next 3 months.

No improvement on above treatment.

Improved at aet 23-24.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: No difference noted.

Baby not breast fed.

SURVEY NO. 355

Western Infirmary No. F.770

Initials: M.F. now Mrs. M.

Age (when first seen): 19

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18"
sides of face.

No improvement, but patient writes that
she could not get time off her work to
attend.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference noted.

Further remarks: Patient writes that her

condition appears aggravated by worrying and
by the fact that she "picks" at the lesions.
Condition is said to be worse now than ever.
Patient has lived in Hong Kong for 3 years
and is now living in Toronto, Canada.

SURVEY NO. 360

Western Infirmary No: H.1424

Initials: E.H. now Mrs. C.

Age (when first seen): 18

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Treatment not
stated. Presumed to be Diet for acne.

U.V.L. course (Dr. W.B. McK).

Improved at aet 20.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 362

Western Infirmary No: H.1348

Initials: L.H. (Mrs)

Age (when first seen): 24

Duration of acne (when first seen): 12 - 13 years

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18"

full face. Gradually increased to 3

minutes at 16" over 3 months.

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: No difference.

Patient was married when she first attended.

Influence of pregnancy: No difference.

Influence of childbirth: No difference.

SURVEY NO. 363

Western Infirmary No: Mc.3843

Initials: S. McA. now Mrs. McG.

Age (when first seen): 23

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

Zinc. Sulph. 2% in Lotio Calaminae.

Improved on above treatment and was

"eventually cured".

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

Further remarks: Patient writes that she finds
diet the most important factor in her case.

SURVEY NO. 364

Western Infirmary No: Mc.3834

Initials: Mrs. J. McL.

Age (when first seen): 26

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Shampoo 3 times weekly. X-Ray Therapy,
dose not known.

Improved on above at aet 26.

"Open pores" only left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

Further remarks: Patient writes:

"Delighted with the results"

SURVEY NO. 366

Western Infirmary No: Mc.3812

Initials: A. McC. now Mrs. McA.

Age (when first seen): 15

Duration of acne (when first seen): 4 weeks.

Treatment and result summarized: Diet for acne.

Zinc. Sulph. 2% in Lotio. Calaminae.

Then U.V.L. 1 minute at 18" full face
gradually increased to 2 minutes at 15"
over 4 months.

Improved on above treatment at aet 17.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference noted.

Further remarks: Still gets occasional "spots"
at menses.

SURVEY NO. 368

Western Infirmary No: Mc.3997

Initials: A. McG. now Mrs. R.

Age (when first seen): 17

Duration of acne (when first seen): 6-7 weeks.

Treatment and result summarized: Diet for acne.

U.V.L. $1\frac{1}{2}$ minutes at 17" sides of face.

No improvement on treatment, but began
to improve at aet 18.

Influence of marriage on acne: Improved.

Influence of pregnancy: Acne had cleared before
she became pregnant.

SURVEY NO. 369

Western Infirmary No: Mc.3967

Initials: C. McM.

Age (when first seen): 21

Duration of acne (when first seen): 10 years.

Treatment and result summarized: U.V.L.

2 minutes at 18".

No improvement from above treatment.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved late during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was not breast fed.

SURVEY NO. 371

Western Infirmary No: Mc.3952

Initials: A. McC.

Age (when first seen): 20

Duration of acne (when first seen): 6 years.

Treatment and result summarized: Not stated.

Presumed to be U.V.L. course (Dr. A.G.F.)

Improved on treatment.

No scarring left.

Influence of marriage on acne: Not stated.

Skin quite clear now.

Further remarks: Mother filled in form. Patient went to Australia in 1952 - now has lovely skin. Treatment at G.W.I. was "marvellous". Patient has 2 babies.

SURVEY NO. 375

Western Infirmary No: Mc.3862

Initials: J. McI. now Mrs. H.

Age (when first seen): 19

Duration of acne (when first seen): $3\frac{1}{2}$ years.

Treatment and result summarized: No benefit from penicillin and sulphur applications.

Diet for acne. Pine Tar Soap. U.V.L.

1 minute at 18", gradually increased to 3 minutes at 16" over 2 months.

Improved on above treatment at aet 20.

No scarring left.

Influence of marriage on acne: Acne had cleared by the time patient married.

SURVEY NO. 377

Western Infirmary No: Mc.3871

Initials: M. McC.

Age (when first seen): 18

Duration of acne (when first seen): 3-4 years

Treatment and result summarized: Diet for acne.

U.V.L. course, initial dose not stated.

Improved during early twenties.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was not breast fed.

SURVEY NO. 382

Western Infirmary No: W.1138

Initials: J.W.

Age (when first seen): 16

Duration of acne (when first seen): 4 years.

Treatment and result summarized: No benefit
from "lotions". Diet for acne. U.V.L.
2 minutes at 17".

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 383

Western Infirmary No: P.666

Initials: Mrs. E.P. now Mrs. E.

Age (when first seen): 25

Duration of acne (when first seen): 1 year

Treatment and result summarized: Diet for acne.

Zinc. Sulph. 2% in Lotio. Calaminae.

Then U.V.L. 1 minute at 17".

Improved on above treatment at aet 25.

No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

Further remarks: Still gets occasional acne
lesions.

SURVEY NO. 388

Western Infirmary No: C.1903

Initials: A.C. now Mrs. McD.

Age (when first seen): 19

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 17"
sides of face.

No improvement.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 389

Western Infirmary No: C.1911

Initials: B.C.

Age (when first seen): 14

Duration of acne (when first seen): 7 months.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 17"

sides of face. Then Chloramphenicol 10%

Propylene Glycol. Later Zinc Sulph. 2%

Lotio Calaminae by day. Lotio calaminae

oleosa nocte, then Sulph. praecip. 2% Pasta

Zinc nocte.

Improved at aet 18

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: No difference.

Further remarks: Still gets occasional lesions

when eating "sweets".

SURVEY NO. 390

Western Infirmary No: C.2077

Initials: M.C. now Mrs. T.

Age (when first seen): 14

Duration of acne (when first seen): A few months.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18" full
face. Improved on treatment. Clear by aet.
18-19. Slight scarring left.

Influence of marriage on acne: Skin was clear
when patient married.

SURVEY NO. 395

Western Infirmary No: B.2756

Initials: M.B.

Age (when first seen): 23

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc. Sulph. 2% Lotic
Calaminae. No improvement on above treatment.
No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

SURVEY NO. 397

Western Infirmary No: B.2812

Initials: E.B.

Age (when first seen): 14

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Sulph. praecip. 2% Pasta

Zinc. nocte.

Improved at 16.

Some "open pores".

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

Further remarks: Patient states that she developed
a metal allergy and cannot wear any metal
against her skin.

SURVEY NO. 398.

Western Infirmary No: B.2820

Initials: E.B.

Age (when first seen): 23

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 17" cheeks.

Improved on above treatment at aet 23.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

SURVEY NO. 400.

Western Infirmary No: B.2913

Initials: E.B.

Age (when first seen): 21

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 18" full face. No improvement on above treatment. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: "Back to usual" states patient. Baby not breast fed.

SURVEY NO. 401.

Western Infirmary No: B.2922

Initials: M.B.

Age (when first seen): 23

Duration of acne (when first seen): 1 year +

Treatment and result summarized: Diet for acne

and urticaria. Tab. Histantin 11 4x daily

Ac. Carbol. 1% in Lotio Calaminae

No improvement on above treatment.

Influence of marriage on acne: Worse.

Influence of pregnancy: No family.

Further remarks: Patient also suffered from

urticaria when first seen.

SURVEY NO. 402

Western Infirmary No: B.2928

Initials: A.B.

Age (when first seen): 24

Duration of acne (when first seen): 1 year

Treatment and result summarized: Diet for acne.

U.V.L. course. Initial dose not stated.

Improved on above treatment at aet 24

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was breast fed.

SURVEY NO. 405

Western Infirmary No: A.535

Initials: E.A.

Age (when first seen): 20

Duration of acne (when first seen): Not stated.

Treatment and result summarized: U.V.L. 2 minutes
at 18" face and back. Gradually increased to
3 minutes at 14", and reduced to 3 minutes at
15" over 6 months.

Improved on above treatment at aet 21

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth of
baby who was breast fed.

SURVEY NO. 418

Western Infirmary No: D.1334

Initials: M.D. now Mrs. McE.

Age (when first seen): 20

Duration of acne (when first seen): 6 years.

Treatment and result summarized: Diet for acne.

Eskamel cream.

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Worse during mid
pregnancy.

Influence of childbirth: No difference. Baby
not breast fed.

Further remarks: Still pre-menstrual exacerbation.

Condition is helped by iron tablets.

SURVEY NO. 419

Western Infirmary No: D.1342

Initials: D.D.

Age (when first seen): 23

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. X-Ray Therapy 85kv 100r
weekly up to 1200r.

Improved on above treatment at aet 24

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

SURVEY NO. 427

Western Infirmary No: K.665

Initials: J.K.

Age (when first seen): 20

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 18".

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

Further remarks: Patient states that she still gets "quite a few large spots two days before her periods start".

SURVEY NO. 428

Western Infirmary No: K782

Initials: M.K.

Age (when first seen): 18

Duration of acne (when first seen): 3 months.

Treatment and result summarized: Diet for acne.

Zinc. Sulph. 2% Lotio. calaminae.

Then U.V.L. 1 minute at 18" face.

Improved on above treatment at aet 19

No scarrings left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference. Baby
breast fed.

SURVEY NO. 429

Western Infirmary No: L866

Initials: M.L. now Mrs. M.

Age (when first seen): 20

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18"

full face. Zinc. Sulph. 2% Lotion calaminae
chest and back.

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Worse early during
pregnancy.

Influence of childbirth: Improved after birth
of baby, who was breast fed.

Further remarks: Patient seen aged 30. Condition
still active and tending to become rosaceal.

SURVEY NO. 436

Western Infirmary No: M.1638

Initials: M.M. now Mrs. M.

Age (when first seen): 18

Duration of acne (when first seen): 4 years

Treatment and result summarized: Diet for acne.

Pine Tar Shampoo. U.V.L. 1 minute at 17"
gradually increased to 5 minutes at 14"
and reduced to 1 minute at 16" over 10
months.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: "Just the same". Baby
breast fed.

SURVEY NO. 437

Western Infirmary No: M.1620

Initials: E.M. now Mrs. B.

Age (when first seen): 18

Duration of acne (when first seen): 6 years

Treatment and result summarized: Diet for acne.

Pine Tar Shampoo. U.V.L. 1 minute at 18"
full face.

Improved at aet 21.

Slight scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

SURVEY NO. 446

Western Infirmary No: Mc.7141

Initials: H. McA.

Age (when first seen): 17

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc. Sulph. 2% Lotic
Calaminae.

No improvement on above treatment.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

Further remarks: Patient writes that she

"persuaded the attendant at the Corporation baths to give her an over-dose of U.V.L. to the back. Though in pain from this treatment she had it repeated 2 days later, after which the skin peeled off. She bought her own sun-ray lamp and used it every second day in spite of the fact that she becomes sick when the lamp is used for 6 minutes. Also gets sick after exposure to sunlight which brings her out in an unsightly rash. She presumes she is allergic to the sun in some way. She has not recommended her treatment to anyone as she considers it could be rather dangerous without correct supervision".

SURVEY NO. 451

Western Infirmary No: 5054/51

Initials: M.H. now Mrs. M.

Age (when first seen): 21

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Tab. Dienoestrol 0.1 mg
15 days monthly. U.V.L. 1 minute at 17"
both cheeks.

Improved on above treatment at aet 23.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was breast fed.

SURVEY NO. 452

Western Infirmary No: 5051/51

Initials: J.B. now Mrs. McK.

Age (when first seen): 19

Duration of acne (when first seen): 7 years

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18"
full face, chest and back.

Improved on above treatment at aet 20.

Slight scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated. Baby breast
fed.

Further remarks: Patient states that her acne
disappeared completely while she was living
in Australia and sun-bathing regularly.
Returned to Britain in 1956, acne again
appeared on shoulders and back.

SURVEY NO. 457.

Western Infirmary No: 4935/51

Initials: C.H.

Age (when first seen): 16

Duration of acne (when first seen): 6 months.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc. Sulph. 2% in Lotion

Calaminae. Improved on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated.

SURVEY NO. 458

Western Infirmary No: 4886/51.

Initials: J.S.

Age (when first seen): 19

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Diet for acne.

Zinc. Sulph. 2% Lotion Calaminae, then U.V.L.

1 minute at 17". Improved on above treatment

at 20. No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 463

Western Infirmary No: 1059/51

Initials: E.C.

Age (when first seen): 21

Duration of acne (when first seen): 3 months

Treatment and result summarized: Diet for acne.

Pine Tar soap and shampoo. Eskamel cream.

Then Zinc. Sulph. 2% in Lotic Calaminae,
alternated with above.

Improved on above treatment at aet 21.

No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated. Baby breast
fed.

SURVEY NO. 464

Western Infirmary No: 936/51.

Initials: I.M.

Age (when first seen): 16½

Duration of acne (when first seen): 2 years.

Treatment and result summarized: U.V.L.

Initial dose not stated.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

SURVEY NO. 467

Western Infirmary No: 2232/51.

Initials: M.G.

Age (when first seen): 15

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Sulph. praecip. Ac. salicyl
aa 1% in Pasta Zinc. No improvement on above
treatment. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 468

Western Infirmary No: 2134/51

Initials: M.H.

Age (when first seen): 19

Duration of acne (when first seen): 7 years.

Treatment and result summarized: Diet for acne.

Eskamel cream.

Improved on above treatment at aet 20.

No scarring left.

Influence of marriage on acne: Not married.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth
of baby who was not breast fed.

SURVEY NO. 471

Western Infirmary No: 2022/51

Initials: M.B. now Mrs. R.

Age (when first seen): 26

Duration of acne (when first seen): 4 years

Treatment and result summarized: Diet for acne.

 Tabs. Dienoestrol 0.1mg daily for mid 15
 days of menstrual cycle. Eskamel cream.

 Improved on above treatment at aet 26.

 Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
 pregnancy.

Influence of childbirth: Improved further after
 birth of baby who was not breast fed.

SURVEY NO. 472

Western Infirmary No: 2007/51

Initials: Mrs. M.K.

Age (when first seen): 23

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Zinc. Sulph. 2% Calamine Lotion nocte.

Eskamel cream by day.

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: Worse.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Worse after birth of baby who was not breast fed.

Further remarks: Patient states that acne stopped only after she had an operation "to stop periods" (Radium and Radiotherapy) at Western Infirmary.

SURVEY NO. 473

Western Infirmary No: 1975/51

Initials: M.F. now Mrs. M.

Age (when first seen): 16

Duration of acne (when first seen): 3 years.

Treatment and result summarized: U.V.L. Initial
dose not stated. Improved at aet. 21
Some scarring left.

Influence of marriage on acne: Improved ++

Influence of pregnancy: No family.

Further remarks: Patient states that after
marrying she moved to South Germany and
sun bathed frequently. Improvement may
be due to this.

SURVEY NO. 474

Western Infirmary No: 1949/51

Initials: N.C.

Age (when first seen): 23

Duration of acne (when first seen) 4 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18"
lower half of face, gradually increased to
2 minutes at 12", varied to 4 minutes at
15" over 1 year.

Improved on above treatment, aet 27 apr.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

SURVEY NO. 476

Western Infirmary No: 1926/51

Initials: E.M. now Mrs. R.

Age (when first seen): 26

Duration of acne (when first seen): 10 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Eskamel cream. Improved on
above treatment at aet 26. No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: Worse.

Influence of childbirth: Improved after birth
of baby who was breast fed.

SURVEY NO. 481

Western Infirmary No: 4679/51

Initials: J.G. now Mrs. J.W.

Age (when first seen): 22

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

U.V.L. only, dose not known. Improved during
early 20's. No scarring.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid-
pregnancy.

Influence of childbirth: Baby not yet born.

SURVEY NO. 482

Western Infirmary No: 4597/51

Initials: A.M. now Mrs. T.

Age (when first seen): 13

Duration of acne (when first seen): 2 weeks.

Treatment and result summarized: Diet for acne.

Zinc Sulph. 2% in Lotio Calaminae.

Improved at about 19.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed for one week only.

Further remarks: There are still some acne lesions on the chin.

SURVEY NO. 484

Western Infirmary No: 4550/51.

Initials: M.G.

Age (when first seen): 16

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not stated.

No improvement on above treatment.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy:

Influence of childbirth: Improved further after
birth of baby who was not breast fed.

SURVEY NO. 485

Western Infirmary No: 4486/51

Initials: M. McI. now Mrs. S.

Age (when first seen) 17 years.

Duration of acne (when first seen): 3 years.

Treatment and result summarized: No benefit
from Eskamel cream. Diet for acne.

U.V.L. 1 minute at 17" full face.

Improved on above treatment at aet 20.

Slight scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

Further remarks: Patient states that she was
cured by an over-dose of U.V.L. which burned
her face to such an extent that it was
leaking. When healed, the acne disappeared.

SURVEY NO. 490

Western Infirmary No: 4413/51

Initials: U.R.

Age (when first seen): 15

Duration of acne:(when first seen): 6 years.

Treatment and result summarized: No benefit

from Eskamel cream. Diet for acne.

Zinc Sulph. 2% in Lotio. Calaminae,

then U.V.L. 1 minute at 17".

Improved on above treatment.

Slight scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Slightly worse since birth of baby who was breast fed for two months only.

SURVEY NO. 491

Western Infirmary No: 4402/51

Initials: C.H.

Age (when first seen): 21

Duration of acne (when first seen): 4 months.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 17" chin.

Improved on above treatment at aet 23

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Further improvement after childbirth. Baby was breast fed.

SURVEY NO. 500

Western Infirmary No: 4096/51

Initials: M.B.

Age (when first seen): 20

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Aggravated by

Eskamel cream. Diet for acne. Zinc

Sulph. 1% in lotio Calaminae.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference. Baby
was breast fed.

SURVEY NO. 501

Western Infirmary No: 4027/51

Initials: M.C. now Mrs. S.

Age (when first seen) 24

Duration of acne (when first seen): 1 year 3 months.

Treatment and result summarized: Diet for acne.

U.V.L. course. Initial dose not stated.

Improved on above treatment at aet 24.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Worse after birth of
third child who is a bad sleeper and causes
a lot of worry as she refuses to eat solid
food.

SURVEY NO. 502

Western Infirmary No: 4016/51

Initials: A.F. now Mrs. O.N.

Age (when first seen): 19

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Treatment not stated. Presumed to be: Diet for acne.

U.V.L. course (Dr. W.B. McK) Improved at aet 28. No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 507

Western Infirmary No: 3831/51

Initials: E.V. now Mrs. E.T.

Age (when first seen): 18

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

U.V.L. course. As improvement was not rapid enough she did not persevere.

Influence of marriage on acne: Married at 23.

Skin greatly improved.

Influence of pregnancy: No family.

Further remarks: Form not returned. Patient wrote letter instead.

SURVEY NO. 509

Western Infirmary No: 1715/51

Initials: N.B.

Age (when first seen): 18

Duration of acne (when first seen): 4 - 5 years.

Treatment and result summarized: U.V.L. 1 minute
at 17". No improvement on above treatment.
No scarring.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

SURVEY NO. 513

Western Infirmary No: 1245/51

Initials: J.M. now Mrs. F.

Age (when first seen): 18

Duration of acne (when first seen): 3 months.

Treatment and result summarized: Diet for acne.
Pine Tar Soap. U.V.L. 1 minute at 18" both
cheeks. No improvement on above treatment.
No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: When form was filled in
patient was still pregnant.

SURVEY NO. 516

Western Infirmary No: 36/51.

Initials: M.C.

Age (when first seen): 22

Duration of acne (when first seen): 6 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 18" to chin.

No improvement on above treatment. Patient states she did not finish course of light treatment. No scarring.

Influence of marriage on a cne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

SURVEY NO. 519

Western Infirmary No: 215/51

Initials: M.R. now Mrs. S.

Age (when first seen): 18

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. X-Ray Therapy. 100r,
85kv x 12 over 11 weeks. Improved on above
treatment. No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated. Baby
breast fed.

SURVEY NO. 520

Western Infirmary No: 185/51

Initials: C.G.

Age (when first seen): 23

Duration of acne (when first seen) 1 year.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 18" initially, increased
to 3 minutes at 12" over 6 months. Improved
on above treatment at aet 25-26. Some
scarring left.

Influence of marriage on acne: Worse.

Influence of pregnancy: No family.

SURVEY NO. 522

Western Infirmary No: 349/51

Initials: J. McN. now Mrs. T.

Age (when first seen): 17

Duration of acne (when first seen): Several months.

Treatment and result summarized: Diet for acne.

U.V.L. course. Initial dose not stated.

Improved to "a certain extent" in above treatment.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Worse after birth of baby who was breast fed for six weeks.

SURVEY NO. 525

Western Infirmary No: 456/51

Initials: P.J.

Age (when first seen): 20

Duration of acne (when first seen): 1 week

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 17"
cheeks. Improved on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated. Baby not
breast fed.

SURVEY NO. 530

Western Infirmary No: 550/51

Initials: Mrs. M. McC.

Age (when first seen): 21

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Diet for acne.

Sulph. praecip. $\frac{1}{2}\%$ in Lotio Calaminae.

Then Eskamel 1 part, Paraf. Mol. 3 parts.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth of
baby who was breast fed for 3 weeks.

SURVEY NO. 534.

Western Infirmary No: 671/51

Initials: E.G.

Age (when first seen): 16

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

Zinc. Sulph. 2% in Lotio Calaminae.

Improved on above treatment at aet 21-22

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Worse after birth of baby who was not breast fed.

SURVEY NO. 540

Western Infirmary No: 2628/51

Initials: Mrs. H.Q.

Age (when first seen): 26

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

Zinc Sulph. 2% in Lotion Calaminae.

Improved on above treatment, but condition comes and goes still.

Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Worse during both pregnancies.

Influence of childbirth: Improved after births of babies who were breast fed.

SURVEY NO. 541

Western Infirmary No: 2761/51

Initials: A.R.

Age (when first seen): 18

Duration of acne (when first seen): 4 years.

Treatment and result summarized: No benefit from

Eskamel cream. Diet for acne. U.V.L. 1
minute, at 18". No improvement on above
treatment. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

SURVEY NO. 542

Western Infirmary No: 2760/51

Initials: M.D. now Mrs. G.

Age (when first seen): 18

Duration of acne (when first seen): 3 weeks.

Treatment and result summarized: Diet for acne.

Sulph. 2% in Calamine Lotion.

Improved on above treatment at aet. 17

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Not stated.

Influence of childbirth: Improved after birth
of baby who was not breast fed.

SURVEY NO. 543

Western Infirmary No. 2752/51

Initials: J.R.

Age (when first seen): 13

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not stated.

Improved on above treatment. Age not stated.

No scars left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after childbirth. Baby was breast fed.

SURVEY NO. 548

Western Infirmary No: 3102/51

Initials: H.H. now Mrs. G.

Age (when first seen) 14

Duration of acne (when first seen): 6 months.

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not stated.

Later attended for Radio-therapy.

Improved on latter treatment at aet 18.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

SURVEY NO. 549

Western Infirmary No: 3178/51

Initials: A.R., now Mrs. K.

Age (when first seen): 21

Duration of acne (when first seen); 7 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 17"

Improved on above treatment at aet 22-23

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was not breast fed.

SURVEY NO. 550

Western Infirmary No: 3231/51

Initials: A.P. now Mrs. L.

Age (when first seen): 21

Duration of acne (when first seen): 7 months.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Sulph. 2% Pasta Zinc.

Then Sulph. $\frac{1}{2}$ % in Calamine Lotion.

Then stannous ox. tabs. gr11 q.i.d.

Short course of U.V.L. to furuncles on chin. (3 treatments only).

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after childbirth. Baby was breast fed.

Further remarks: Chalky lotion helped skin, but condition did not disappear until marriage.

Skin has been less greasy during pregnancies.

SURVEY NO. 551

Western Infirmary No: 3193/51

Initials: A.N. now Mrs. L.

Age (when first seen): 14

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Eskamel cream. Then U.V.L. 1 minute at 18".

Improved on above treatment at aet 16.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Patient cannot remember.

Further remarks: Condition persists slightly in spring.

SURVEY NO. 554

Western Infirmary No: 3464/51

Initials: J.L.

Age (when first seen): 27

Duration of acne (when first seen): 10 years

Treatment and result summarized: Diet for acne.

Eskamel cream. Improved on above treatment.

States on form aet 21. No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

Further remarks: Now lives in Canada.

SURVEY NO. 558

Western Infirmary No: 3515/51.

Initials: L.A.

Age (when first seen): 18

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 18". Improved on above

treatment at aet 21 approx. No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 559

Western Infirmary No: 3514/51

Initials: M.W. now Mrs. A.

Age (when first seen): 17

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

Zinc. Sulph. 2% in Lotion Calaminae. Then
U.V.L. 1 minute at 17". Improved on above
treatment at aet 21. No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth of
baby who was breast fed.

SURVEY NO. 560

Western Infirmary No: 3696/51.

Initials: E. McM.

Age (when first seen): 17

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 17" initially. Gradually
increased to 2 minutes at 12" over 8 months.
Improved on above treatment at aet 19. Some
scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

SURVEY NO. 562

Western Infirmary No. B.141

Initials: P.B.

Age (when first seen): 20

Duration of acne (when first seen): $3\frac{1}{2}$ years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 17"

initially, increased to 2 minutes at 12"

over 14 months.

Improved on above treatment at aet 22.

No scarring left.

Influence of marriage on acne: Greatly improved.

Influence of pregnancy: Skin perfect early during pregnancy.

Influence of childbirth: Remained clear. Baby not breast fed.

SURVEY NO. 564

Western Infirmary No: Mc.263

Initials: M. McP.

Age (when first seen): 24

Duration of acne (when first seen): 12 years.

Treatment and result summarized: Biopsy taken,
as condition suggested cutaneous papillo-
matosis - reported as acne vulgaris.

No further notes on treatment.

Improved at "over twenty".

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved.

Influence of childbirth: Not stated. Baby
breast fed.

Further remarks: Patient now in Canada. Mother
filled in form.

SURVEY NO. 567

Western Infirmary No: 2795/52

Initials: M.M.

Age (when first seen): 16

Duration of acne (when first seen): 4 months

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Zinc. Sulph. 2% in Lotion

Calaminae, then Eskamel cream. About 1 year

later began U.V.L. at 1 minute at 18".

Improved on above treatment at aet 17.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 569

Western Infirmary No: 2712/52

Initials: A.B.

Age (when first seen): 18

Duration of acne (when first seen): 1 month.

Treatment and result summarized: Diet for acne.

Zinc. Sulph. 2% in Lotion Calaminae. Immediate

improvement on above treatment. No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference. Baby
breast fed.

SURVEY NO. 575

Western Infirmary No: 2549/52.

Initials: Mrs. A.B.

Age (when first seen): 30

Duration of acne (when first seen): 6 months +.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Eskamel cream, then U.V.L.

1 minute at 17" face, back and chest.

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: Patient had been married 4 years before attending as an Out-patient.

Influence of pregnancy: No difference.

Influence of childbirth: No difference.

SURVEY NO. 576

Western Infirmary No: 2517/52

Initials: M. McN.

Age (when first seen): 17

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not stated. Improved on
above at aet 20. No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 578

Western Infirmary No: 2972/52

Initials: Mrs. M.B.

Age (when first seen): 22

Duration of acne (when first seen): 8 years.

Treatment and result summarized: Diet for acne.

Tabs. Dienoestrol 0.1 mg for mid 15 days of
menstrual cycle. Zinc Sulph. 2% Lotion
Calaminae. Improved on above treatment at
aet 22. No scarring left.

Influence of marriage on acne: No difference.

SURVEY NO. 579

Western Infirmary No: 2468/52

Initials: M.M. now Mrs. H.

Age (when first seen): 25

Duration of acne (when first seen): 6 months.

Treatment and result summarized: No benefit from Eskamel cream. Diet for acne. U.V.L. Initial dose not stated. Improved, age not stated, on above treatment. No scarring.

Influence of marriage on acne: No difference.

SURVEY NO. 580

Western Infirmary No: 2425/52

Initials: A. McK. now Mrs. G.

Age (when first seen): 23

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18". Eskamel cream. No improvement on above treatment. Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved late during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was not breast fed.

SURVEY NO. 581

Western Infirmary No: 2406/52

Initials: M.K. now Mrs. M.

Age (when first seen): 25

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 17" full face. Improved on
above treatment at aet 25. No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

SURVEY NO. 582

Western Infirmary No: 2364/52

Initials: R.E.

Age (when first seen): 12

Duration of acne (when first seen): 2 months.

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not stated. Improved on
above treatment at aet 15. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 583

Western Infirmary No: 2326/52

Initials: N.S. now Mrs. W.

Age (when first seen): 16

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. in "peeling" dosage. Improved on above treatment at aet 16. No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

SURVEY NO. 584

Western Infirmary No: 2288/52

Initials: Mrs. A.H.

Age (when first seen): 38

Duration of acne (when first seen): 5 years.

Clear for 2 years, worse for past 3 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Sulph. praecip. 2% Pasta Zinc nocte. Lotion hydrarg. perchlor. 1:500 aq. by day.

No improvement on above treatment. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

SURVEY NO. 585

Western Infirmary No: 2286/52

Initials: S.B., now Mrs. S. McM.

Age (when first seen): 14

Duration of acne (when first seen): 1 year

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 17". Improved on above
treatment at aet 14. No scarring left.

Influence of marriage on acne: Patient states
that she never had any further skin trouble
after aet. 14.

Further remarks: Married with 2 children.

SURVEY NO. 587

Western Infirmary No: 4195/52

Initials: Mrs. E. McK.

Age (when first seen): 23

Duration of acne (when first seen): 1 year

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not known. Course of U.V.L. "did not help". Returned 1 year later with Rosacea. Diet cool bland, Zinc Sulph. 2% Lotio Calaminae, then Sulph. 10% Resorcin $\frac{1}{2}$ % Pasta Zinc. then Ac. salicyl. 3% added to above paste and Eskamel. Condition improved at aet 26. No scarring left.

Influence of marriage on acne: Patient states that she was married nine years before she took any skin trouble.

SURVEY NO. 590

Western Infirmary No: 3993/52

Initials: M.G.

Age (when first seen): 22

Duration of acne (when first seen): 6 years.

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not stated.

Improved on above treatment at aet 23.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved late during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was not breast fed.

SURVEY NO. 593

Western Infirmary No: 3907/52

Initials: I.S.

Age (when first seen): 19

Duration of acne (when first seen): 5 months.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. X-ray therapy, 100r weekly
up to total of 1500r.

Improved on above treatment almost immediately.

No scarring left.

Influence of marriage on acne: Improved and
cleared.

Influence of pregnancy: Remained clear.

Influence of childbirth: Remained clear. Baby
still-born.

SURVEY NO. 594

Western Infirmary No: 3753/52

Initials: I.B.

Age (when first seen): 13

Duration of acne (when first seen): 1 year

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not stated.

Improved on above treatment at aet 18.

No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated. Baby not
breast fed.

SURVEY NO. 595

Western Infirmary No: 3517/52

Initials: A.B.

Age (when first seen): 16

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 18" .Then Zinc Sulph.

2% in Lotio Calaminae.

Improved on above treatment at aet 17.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

SURVEY NO. 596.

Western Infirmary No. 3502/52.

Initials: C.M.

Age (when first seen): 28

Duration of acne (when first seen): 6 years.

Treatment and result summarized: Diet for acne,
Eskamel cream. Improved on above treatment
almost immediately.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated. Baby not
breast fed.

SURVEY NO. 600.

Western Infirmary No: 3187/52

Initials: M.G.

Age (when first seen): 19

Duration of acne (when first seen): Not stated.

Treatment and result summarized: Diet for acne

U.V.L. 1 minute at 18" full face.

Improved on above treatment at aet 19.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed for about 2 months.

SURVEY NO. 601.

Western Infirmary No: 3144/52

Initials: E.R.

Age (when first seen): 20

Duration of acne (when first seen): 7 years.

Treatment and result summarized: Diet for acne,

U.V.L. 1 minute at 18" both cheeks.

Improved on above treatment.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

SURVEY NO. 603.

Western Infirmary No: 3097/52

Initials: R.C. now Mrs. C.

Age (when first seen): 12

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne,
Pine Tar Soap. Eskamel cream.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference. Miscarriage
after six months.

SURVEY NO. 604.

Western Infirmary No: 965/52

Initials: S.T.

Age (when first seen): 16

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not stated. Improved on
above treatment at aet 21. No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 606.

Western Infirmary No: 1034/52

Initials: I. McQ. now Mrs. K.

Age (when first seen): 18

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Pine Tar Shampoo.

Diet for acne. U.V.L. 1 minute at 17", sides
of face and back. No improvement on above
treatment. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 607

Western Infirmary No: 1039/52

Initials: N.B. now Mrs. R.

Age (when first seen): 25

Duration of acne (when first seen): 8 - 9 months.

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not known.

Improved on above treatment at aet 25.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated. Baby not
breast fed.

Further remarks: Condition cleared completely
on sun-ray treatment.

SURVEY NO. 613.

Western Infirmary No: 1246/52

Initials: S.R.

Age (when first seen): 20

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18" cheeks.

Improved on above treatment at aet 20-21.

Slight scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 618.

Western Infirmary No: 1802/52

Initials: G.M. now Mrs. C.

Age (when first seen): 17

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 17" both

cheeks, chest and back. Improved on above

treatment at aet 19. No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

SURVEY NO. 622

Western Infirmary No: 2086/52

Initials: M.E.

Age (when first seen): 23

Duration of acne (when first seen): 3 months.

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not known. Improved on
above treatment at aet 23. No scarring.

Influence of marriage on acne: Condition had
cleared before marriage.

SURVEY NO. 619

Western Infirmary No: 1876/52

Initials: I.B.

Age (when first seen): 15.

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Had had Eskamel
cream and "sulph. ointments". Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18". No
improvement on above treatment.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Further improvement after
birth of baby who was breast fed.

SURVEY NO. 626

Western Infirmary No: Mc.303

Initials: S. McD., now Mrs. F.

Age (when first seen): 30

Duration of acne (when first seen): 16 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Sulph. praecip. 2% Pasta

Zinc nocte. Zinc Sulph. 2% calamine lotion

by day.

Improved on above treatment during early 30's.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of babies who were breast fed.

Further remarks: Patient states that during her two pregnancies she was completely clear of acne, but still gets "occasional spot" now.

SURVEY NO. 632.

Western Infirmary No: 4955/52

Initials: J.S. now Mrs. M.

Age (when first seen): 17

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Diet for acne.

Pine tar soap and shampoo. U.V.L. 1 minute
at 18".

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: Gradual improvement.

Influence of pregnancy: Worse. Had miscarriage
at 4½ months.

SURVEY NO. 634.

Western Infirmary No: 4888/52

Initials: F.C. Mrs.

Age (when first seen): 23

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not known.

No improvement on above treatment.

Influence of marriage on acne: Worse.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

SURVEY NO. 636.

Western Infirmary No: 4857/52.

Initials: P.O.B. now Mrs. L.

Age (when first seen): 21

Duration of acne (when first seen): 6 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18" full
face. Improved on above treatment at aet 21.

No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Worse after birth of
baby who was breast fed.

SURVEY NO. 638.

Western Infirmary No: 4784/52

Initials: B.L.

Age (when first seen): 21

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not known.

Improved on above treatment during early 20's.

No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

SURVEY NO. 639.

Western Infirmary No: 5636/52

Initials: J.P.

Age (when first seen): 18

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

Eskamel cream. Improved on above treatment
at aet 19.

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

SURVEY NO. 643

Western Infirmary No. 5532/52

Initials: J.G.

Age (when first seen): 17

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 17".

Improved on above treatment at aet 19

No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

Further remarks: Also had pityriasis capitis, which was treated with Pine Tar Shampoo and Ac. Salicyl.)

Thymol.) aa 2% Ol. Rapi.

SURVEY NO. 644

Western Infirmary No: 5486/52

Initials: C.M.

Age (when first seen): 16

Duration of acne (when first seen): 2 months.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 17" full face.

No improvement on above treatment.

Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was not breast fed.

SURVEY NO. 647

Western Infirmary No: 5420/52

Initials: E.B., now Mrs. B.

Age (when first seen): 22

Duration of acne (when first seen): 5 years

Treatment and result summarized: Diet for acne.

U.V.L. Initial dose not known.

Improved on above treatment at aet 22.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved late during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

SURVEY NO. 648

Western Infirmary No: 5410/52

Initials: L.D. now Mrs. N.

Age (when first seen): 12

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 18" full face. No improvement on above treatment. Slight scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 655

Western Infirmary No: 5262/52

Initials: A.F.

Age (when first seen): 19

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Eskamel cream for back and chest. U.V.L. 1 minute at 18" sides of face. Improved on above treatment at aet 21. No scarring.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was not breast fed.

SURVEY NO. 656

Western Infirmary No: 5261/52

Initials: A.P. now Mrs. A.R.

Age (when first seen): 17

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 17".

Improved on above treatment at aet 19-20.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth
of baby who was breast fed.

SURVEY NO. 657.

Western Infirmary No: 5250/52

Initials: E.W.

Age (when first seen): 22

Duration of acne (when first seen): 7 years,
worse for past 6 months.

Treatment and result summarized: Diet for acne.

Sulph. praecip. $\frac{1}{2}\%$ Lotio Calaminae.

Then U.V.L. 1 minute at 17" cheeks.

Improved on above treatment at aet 21-22.

Slight scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated. Baby not
breast fed.

SURVEY NO. 664

Western Infirmary No: 4749/52

Initials: M.B.

Age (when first seen): 15

Duration of acne (when first seen): 6 weeks

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Sulph. praecip. 2% Pasta
Zinc nocte.

Improved at aet. 17.

No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated. Baby not
breast fed.

SURVEY NO. 688

Western Infirmary No: 828/52

Initials: C. McK. Now Mrs. F.

Age (when first seen): 18

Duration of acne (when first seen): 2 months.

Treatment and result summarized: Diet for acne.

Ichthyol calamine liniment, as there was superimposed medicament reaction. Settled but flared on Calamine cream. Sulph. praecip $\frac{1}{2}\%$ in Lot. calaminae then zinc sulph. 2% in Lot. calaminae. Then Eskamel cream. No improvement on above treatment. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Worse during late pregnancy.

Influence of childbirth: No difference. Baby not breast fed.

Further remarks: Patient was told by own Dr. that she is "going to lose the hearing of her right ear through this disease".

SURVEY NO. 690

Western Infirmary No: 722/52

Initials: L.H., now married.

Age (when first seen): 20

Duration of acne (when first seen): 18 months.

Treatment and result summarized: Treated with
lotions and "Eskamel" before attending G.W.I.

Diet for acne. U.V.L. Dose not known.

No improvement with treatment. No scarring.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was breast fed.

SURVEY NO. 692

Western Infirmary No: 711/52

Initials: W.W.

Age (when first seen): 25

Duration of acne (when first seen): 11 years.

Treatment and result summarized: Diet for acne.

Lotio alba. U.V.L. contra-indicated because
of previous tubercular chest infection.

No improvement on above treatment.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

SURVEY NO. 693

Western Infirmary No: 710/52

Initials: Mrs. R.B.

Age (when first seen): 34

Duration of acne (when first seen): 20 years.

Treatment and result summarized: Had benefited from U.V.L. some years ago. Diet for acne. Tabs. Calcii Sulph. gr. 1 t.i.d. Pine Tar Soap and Shampoo. U.V.L. 1 minute at 18" full face gradually increased to 1 minute at 12". Improvement on above treatment at aet. 34. Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Worse.

Influence of childbirth: Improved after birth of baby who was not breast fed.

Further remarks: Also had some pityriasis capitis treated with Ac. salicyl.)
Thymol.) aa 2% in Ol. rapi.

Attending physician for "nerves".

SURVEY NO. 695

Western Infirmary No: 613/52

Initials: E.G. now Mrs. D.

Age (when first seen): 30

Duration of acne (when first seen): $1\frac{1}{2}$ years.

Treatment and result summarized: Cool bland diet and diet for urticaria. Cool fine clothing. Menthol $\frac{1}{4}\%$ in Calamine cream. Improved at aet. 32.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No difference. Baby not breast fed.

Further remarks: Initial diagnosis acne axcoriee.

SURVEY NO. 699

Western Infirmary No: 412/52

Initials: M.P., now Mrs. W.

Age (when first seen): 17

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap and Shampoo. Eskamel.

Improved on above treatment at aet. 20.

Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

SURVEY NO. 704

Western Infirmary No: 387/52

Initials: C.I.

Age (when first seen): 36

Duration of acne (when first seen): 22 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 17"

sides of face and neck.

Some improvement at aet. 27, but recurred.

Slight scarring.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during whole pregnancy.

Influence of childbirth: Further improvement after birth of baby. Could not be breast fed because of "cyst".

Further remarks: States that condition was worse before her periods and when she worried. Her husband "disliked pimples". Now widowed.

SURVEY NO. 705

Western Infirmary No: 386/52

Initials: E.L.

Age (when first seen): 18

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Eskamel cream. No improvement
on above treatment. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement after
birth of baby who was not breast fed.

SURVEY NO. 708

Western Infirmary No: 199/52

Initials: E.D.

Age (when first seen): 18

Duration of acne (when first seen): Not stated.

Treatment and result summarized: U.V.L. course.

Dose not stated.

No improvement. No scarring.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

SURVEY NO. 712

Western Infirmary No: 124/52

Initials: A.F.

Age (when first seen): 16

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18"
cheeks and forehead - increased to 1
minute at 17". No improvement on above
treatment. No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

SURVEY NO. 716

Western Infirmary No: 71/52

Initials: C.F.

Age (when first seen): 18

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 18". No improvement

on above treatment. No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Improved after birth
of baby who was breast fed.

SURVEY NO. 725

Western Infirmary No: 280/52

Initials: M.R., now Mrs. M.

Age (when first seen): 20

Duration of acne (when first seen): $3\frac{1}{2}$ years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18".

No improvement. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No family.

SURVEY NO. 728

Western Infirmary No: 2/53

Initials: E.B., now Mrs. R.

Age (when first seen): 20

Duration of acne (when first seen): 7½ years.

Treatment and result summarized: Diet for acne.

Chloramphenicol 10% in Propylene Glycol.

U.V.L. 1 minute at 17" both cheeks.

Temporary improvement on above treatment
at about 20. No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

Further remarks: Resided in the tropics 1955
and 1956. Marked improvement then "due to
exposure to continual sunshine".

SURVEY NO. 731.

Western Infirmary No: 70/53

Initials: D.C. now Mrs. M.

Age (when first seen): 23

Duration of acne (when first seen): 8 years.

Treatment and result summarized: Some improvement
on Eskamel and Diet. Diet for acne. Pine
Tar Soap. U.V.L. 1 minute at 17".

No improvement on above treatment.

Influence of marriage on acne: Slight improvement.

Influence of pregnancy: Very much improved during
mid pregnancy.

Influence of childbirth: Further improvement after
birth of baby who was not breast fed.

Further remarks: Patient now lives in Southampton
and has had little trouble with her skin
since moving to the South.

SURVEY NO. 733

Western Infirmary No: 137/53

Initials: E.C., now Mrs. D.

Age (when first seen): 19

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

Eskamel. No improvement. Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: 5 miscarriages. No family.

SURVEY NO. 735

Western Infirmary No: 254/53

Initials: E. McF.

Age (when first seen): 26

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18".

Improved on above treatment at aet. 26.

No scarring.

Influence of marriage on acne: Worse.

Influence of pregnancy: No difference.

Influence of childbirth: No difference. Baby not
breast fed.

SURVEY NO. 738.

Western Infirmary No: 337/53

Initials: V.K., now Mrs. B.

Age (when first seen): 21

Duration of acne (when first seen): 7 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap and Shampoo. U.V.L. 1 minute
at 18" cheeks and back. Temporary improvement
only on above. No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement after
birth of baby who was breast fed.

Further remarks: Patient now lives in Montreal,
Canada, and states in separate letter that
there has not been any recurrence since birth
of her first baby when her acne cleared.
Occasional "spot" after eating nuts.

SURVEY NO. 740

Western Infirmary No: 455/53

Initials: M.I.

Age (when first seen): 22

Duration of acne (when first seen): 7 years.

Treatment and result summarized: Some improvement
with Eskamel. U.V.L. Dose not known.

Ac. salicyl.)
Thymol) aa 2% in Ol. rapi
and Thymol Shampoo for dandruff.

Improved at aet. 23. No scarring.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement
after birth of baby who was not breast fed.

SURVEY NO. 742.

Western Infirmary No: 562/53

Initials: J.L. now Mrs. J.

Age (when first seen): 20

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Diet for acne.

U.V.L. 1 minute at 18" cheeks.

Improved at aet. 20. Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy. No difference.

Influence of childbirth: No difference. Baby
breast fed.

SURVEY NO. 749

Western Infirmary No: 689/53

Initials: E.G. now Mrs. M.

Age (when first seen): 21

Duration of acne (when first seen): 4 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 17"

initially. Improved at approx. aet 21.

Slight scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Further improvement after childbirth. Baby was not breast fed.

SURVEY NO. 752.

Western Infirmary No. 728/53

Initials: Mrs. M.L.

Age (when first seen): 31

Duration of acne (when first seen): 14 years.

Treatment and result summarized: Diet for acne.

Pine Tar Shampoo and soap. Chloramphenicol
10% Propylene Glycol. Improved, but relapsed.

3% Zinc sulph. in calamine lotion.

Ung. Aureomycin, then U.V.L. 1 minute at
18" to cheeks. Improved at aet 35.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: No change. Baby breast fed.

Further remarks: Once incidence of urticaria

factitia during treatment settled on Benadryl
caps. and Menthol calamine cream.

SURVEY NO. 753.

Western Infirmary No: 1509/53

Initials: J.B. now Mrs. G.

Age (when first seen): 19

Duration of acne (when first seen): 5 years.

Treatment and result summarized: Eskamel. Chloromycetin 10% in Propylene Glycol. Initial improvement, became "excoriee" and infected. Lot. hydrarg. perchlor 1:1000. Sulph. praecip. $\frac{1}{2}\%$ in calamine lotion then Zinc. Sulph. 2% in calamine lotion. Eskamel and Phenobarbitone next. Again excoriated ++ Aureomycin 3% cream, then Terramycin 1% cream. Some improvement at aet. 20. Scarring left.

Influence of marriage on acne: Worse.

Influence of pregnancy: Improved during mid pregnancy.

Influence of childbirth: Worse after birth of baby who was not breast fed.

Further remarks: Patient states in separate letter that condition now at aet. 25 is much worse than before. Eye-brows are falling out and skin is "raw all over". No response to local treatment. Wants to use sun-ray lamp at home as she considers the doctors cannot help her. She now lives in England and would prefer to attend the Western Infirmary again.

SURVEY NO. 759

Western Infirmary No: 1278/53

Initials: C.T.

Age (when first seen): 29

Duration of acne (when first seen): 9 months.

Treatment and result summarized: Diet for acne.

U.V.L. Course. Dose not known. No scarring.

Influence of marriage on acne: Patient was married
before treatment was begun.

SURVEY NO. 760

Western Infirmary No: 1237/53

Initials: A.R., now Mrs. S.

Age (when first seen): 20

Duration of acne (when first seen): 11 months.

Treatment and result summarized: Diet for acne.

Zinc sulph. 1% in Calamine lotion. U.V.L.
contra-indicated, patient attending chest
clinic - known TB case. Improvement on above
treatment at aet. 19. No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 761

Western Infirmary No: 1212/53

Initials: M.M.

Age (when first seen): 15

Duration of acne (when first seen): "Several years".

Treatment and result summarized: Diet for acne.

U.V.L. course. Dose not known.

Improvement on above treatment at aet. 16.

Some scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: No difference.

Influence of childbirth: Not stated. Baby not
breast fed.

SURVEY NO. 767

Western Infirmary No: 1070/53

Initials: C.R. now Mrs. W.

Age (when first seen): 17

Duration of acne (when first seen): 8 months.

Treatment and result summarized: No benefit from

Eskamel and "lotions". Diet for acne.

U.V.L. 1 minute at 17" face, chest and back.

Improved on above treatment. Age not given.

No scarring left.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved late during
pregnancy.

Influence of childbirth: Further improvement after
birth of baby who was not breast fed.

Further remarks: Now lives in Connecticut, U.S.A.

SURVEY NO. 774

Western Infirmary No: 770/53

Initials: T.P.

Age (when first seen): 19

Duration of acne (when first seen): 5 years

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 18"
cheeks and forehead. No improvement on above
treatment. Some scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during
pregnancy.

Influence of childbirth: Further improvement after
birth of baby who was not breast fed.

SURVEY NO. 768

Western Infirmary No: 1021/53

Initials: J. McB.

Age (when first seen): 21

Duration of acne (when first seen): 8 years.

Treatment and result summarized: Had had "lotions
and creams" without benefit. Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 17".

Improved at aet 23. No scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during mid
pregnancy.

Influence of childbirth: Further improvement after
birth of baby who was not breast fed.

SURVEY NO. 777

Western Infirmary No: 1729/53

Initials: Mrs. M.G.

Age (when first seen): 32, but had attended here
10 years ago (no record).

Duration of acne (when first seen): Since "teens".

Treatment and result summarized: Diet for acne.

Pine Tar Shampoo. Eskamel. States that previous
treatment had resulted in improvement at aet.26,
but condition recurred again at aet.30 approx.
Eskamel irritated and was stopped.

Influence of marriage on acne: Worse.

Influence of pregnancy: Improved. Not sure whether
early or late during pregnancy.

Influence of childbirth: Further improvement after
childbirth. Baby was not breast fed.

Further remarks: Patient also had Erythema perstans
on thigh and was treated with Pulv. Glucose
internally and Caladryl lotion. Noted exacerbation
of acne during menstruation and when she is upset.

SURVEY NO. 780

Western Infirmary No: 1550/53

Initials: L.S.

Age (when first seen): 17

Duration of acne (when first seen): 3 years.

Treatment and result summarized: Diet for acne.

Eskamel. Improved at aet. 18.

Slight scarring left.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was not breast fed.

SURVEY NO. 788

Western Infirmary No: 2034/53

Initials: J.C. now Mrs. S.

Age (when first seen): 23

Duration of acne (when first seen): 10 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap and Shampoo. U.V.L. 1 minute at 17". Improved at aet. 25. See note.

No scarring.

Influence of marriage on acne: Improved.

Influence of pregnancy: Worse. Had prickly heat, boils and styes throughout pregnancy.

Influence of childbirth: Worse. Still suffering from prickly heat, boils and styes.

Further remarks: On marriage went to live in the South of India. Climate very hot and humid. As well as prickly heat, boils and styes she had recurrent herpes simplex of the face. Skin cleared completely on returning to Scotland. When returning to New Delhi slight recurrence of prickly heat, boils and herpes simplex, but skin cleared completely after some time there. Patient attributes this to taking lime juice, "Watching her diet". (No details given) and thorough cleansing of the skin. Also attributes her skin eruptions to "nerves".

SURVEY NO. 802

Western Infirmary No: 5043/53

Initials: C.C. now Mrs. H.

Age (when first seen): 18

Duration of acne (when first seen): 1 year.

Treatment and result summarized: Zinc. Sulph. 2%
in Lot. Calaminae, then Chloramphenicol 10% in
Propylene Glycol then Lotio alba. Then Eskamel.
Condition remained active. No improvement on
above treatment. No scarring.

Influence of marriage on acne: Improved.

Influence of pregnancy: Improved during late pregnancy.

Influence of childbirth: Further improvement after
birth of baby who was breast fed.

Further remarks: Chest X-ray on first visit, as
patient stated she had lost 1 stone in weight.

Chest X-ray: Clear. U.V.L. therapy had been with-
held because of possibility of tubercular infection
at first. Patient lives at Rothesay and U.V.L. was
therefore not given here. Patient states in reply
to questionnaire that she finds Chloromycetin cream
most useful now, as well as the use of "proper"
soap and "special make-up" for skin sufferers and
stresses the importance of removing all make-up
thoroughly.

SURVEY NO. 809

Western Infirmary No: 5159/53

Initials: S. McG. now Mrs. G.

Age (when first seen): 21

Duration of acne (when first seen): 6 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. Chloramphenicol 10% in

Propylene Glycol. Then U.V.L. 1 minute at 17".

Improved on above treatment at aet 23.

No scarring.

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

SURVEY NO. 815

Western Infirmary No: 5482/53

Initials: M.S., now Mrs. W.

Age (when first seen): 26

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. Dose not known. Improved with above

at aet. 25. No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: No family.

SURVEY NO. 816

Western Infirmary No: 5732/53

Initials: M.C., now married.

Age (when first seen): 19

Duration of acne (when first seen): 8 months.

Treatment and result summarized: Diet for acne.

Chloramphenicol 10% in Propylene Glycol.

Ac. salicyl.)

Sulph. praecip.) aa. 2% in Ol rapi. to scalp.

Improved at aet. 19

Influence of marriage on acne: Improved.

Influence of pregnancy: No family.

Further remarks: Had had U.V.L. and Eskamel

before coming to G.W.I. without success.

Also has a fair amount of dandruff.

SURVEY NO. 825

Western Infirmary No: 5504/53

Initials: E.C., now Mrs. McL.

Age (when first seen): 20

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

U.V.L. dose not known. Improved at aet. 21.

No scarring.

Influence of marriage on acne: No difference.

Influence of pregnancy: Improved early during pregnancy.

Influence of childbirth: Further improvement after birth of baby who was breast fed.

Further remarks: One incident of urticaria during treatment, also history of this during childhood, cleared on anti-histamines (Actidil).

SURVEY NO. 826

Western Infirmary No: 4538/53

Initials: H.I.D.

Age (when first seen): 20

Duration of acne (when first seen): 2 years.

Treatment and result summarized: Diet for acne.

Pine Tar Soap. U.V.L. 1 minute at 17" sides
of face. Improved at aet. 22. No scarring.

Influence of marriage on acne: Condition disappeared.

Influence of pregnancy. No family.