

# 皮膚病~濕瘡

濕瘡是一種過敏性炎症皮膚病。特點是具有對稱分布，多形皮損，搔癢糜爛，反覆發作，易成慢性。相當於現代醫學的濕疹。一般可分為急性、亞急性或慢性濕瘡。

## 病因

隋代巢元方在《諸病源候論·頭面身體諸瘡候》中記載：「夫內熱外虛，則生瘡。為風濕所乘...濕熱相搏，故頭面身體皆生瘡。」在這明確提出了風、濕、熱三邪為濕瘡主要的致病因素。

## 病機

濕瘡的急性期多「濕熱」偏重，濕熱之邪，浸淫肌膚，引發濕瘡；亞急性期多與脾虛濕戀有關，常由於急性濕瘡未能及時治療，或處理不當，致病程遷延所致。慢性濕瘡可因濕熱蘊久，傷陰化燥，瘀阻經絡，血不營膚，肌膚失去濡養，致肌膚甲錯。急性和亞急性濕瘡長期不癒，或反覆發作而成慢性濕瘡，病程較長，時輕時重，可延至數月至數年，常反覆呈急性或亞急性發作。

## 臨床表現

劇烈瘙癢是濕瘡主要表現。每個階段各有特點。

### • 急性濕瘡

病變常為片狀或彌漫性，無明顯邊界。皮損為多數密集的粟粒大小的丘疹、丘疱疹，基底潮紅，由於搔抓，丘疹、丘疱疹或水疱頂端搔破後流滋、糜爛及結痂。自覺瘙癢劇烈，局部皮損灼熱感。

### • 亞急性濕瘡

自感劇烈瘙癢。皮損較急性濕瘡輕，以丘疹、結痂、鱗屑為主，僅有少量水疱及輕度糜爛。



### • 慢性濕瘡

表現為皮膚肥厚粗糙，觸之較硬，色暗紅或紫褐色，皮紋顯著或呈苔癬樣變。皮損表面常附有鱗屑伴抓痕、血痂、色素沉著，部分皮損可出現新的丘疹或水疱，抓破後有少量流滋。常易出現皸裂。

## 治療

1. 臨床上根據引起濕瘡的病因，及個體體質差異，辨證用藥。
2. 除口服方藥外，亦可用外洗方局部外洗，清熱祛濕止癢。

## 預防及調攝

1. 濕瘡患者日常應避免搔抓患處。
2. 切忌用熱水燙洗
3. 對於急性濕瘡患者，切忌接觸肥皂等刺激物。
4. 避免接觸致敏原引起濕瘡發作。
5. 忌食辛辣、牛、羊肉、蝦蟹等發物。

# Allergic Inflammatory Dermatitis ~ Shi Chuang

Shi Chuang (濕瘡) is a kind of common allergic inflammatory dermatosis. Its clinical characteristics are polymorphic skin lesions, symmetrical distribution, severe itchiness and frequent recurrences. It is divided into three phases: acute, sub-acute and chronic. It is almost equivalent to Eczema in Western Medicine.

## Aetiology

The documentary records for Shi Chuang in the book Zhu BingYuan Hou Lun (Aetiology and Pathogenesis of various disease) which is published in Sui (隋) dynasty points out that Shi Chuang is commonly caused by Wind, Damp and Heat evil\*.

## Pathogenesis

Acute phase is mainly caused by Damp and Heat evil. The evil attacks the skin and triggers the onset of dermatitis. If an acute attack fails to clear after 3-4 weeks, the disease may enter a sub-acute phase. In this phase, Damp evil is the dominant factor. Persistent accumulation of Damp and Heat evil will in turn lead to the stagnation in the meridian. Blood is not able to circulate to the skin and fails to nourish the skin. Skin becomes dry and thick. Disease goes into a chronic stage whereby there are remissions and exacerbations depending upon the triggers and the constitution of the patient.

## Clinical appearance

The cardinal feature of Shi Chuang is itch. There are different features in each phase.

### • Acute phase

It is recognized by its: redness, papules and swelling usually with an ill defined border; blistering usually with vesicles but, in fierce cases, with large blisters; weeping and crusting; and burning sensation.

### • Sub-acute phase

Itching may be more pronounced than burning sensation. The oozing dries up; the skin becomes dry, crusted and scaly.

### • Chronic phase

May show all of the above features but in general: less vesicular and exudative; more scaly, pigmented and thickened; more likely to show lichenification - dry leathery thickened state, with increased skin markings, secondary to repeated scratching or rubbing; and more likely to fissure.

## Treatment

1. Decoction is prescribed according to the pathogenic factor and the constitution of the patient.
2. Decoction as external wash to alleviate the itchiness.

## Precautions

1. Patients should avoid scratching and rubbing of the skin lesion.
2. Avoid hot bath.
3. Avoid harsh soaps, detergents and solvents.
4. Avoid environmental factors that may trigger an attack. e.g. pollens, mites
5. Be aware of any foods that may cause an outbreak and avoid those foods e.g. spicy food, beef, lamp and seafood.

\*The unfavorable climatic changes are perceived as the exogenous pathogenic factor which is called evil (邪) in Chinese Medicine Theory. There are six evils: Wind, Cold, Dampness, Dryness, Heat and Summer-heat.

