

the left foot and slight weeping between the first and second, and third and fourth toes of the right foot. These cases were no more severe than to be classed as the one plus type, and the balance negative. It might be said here that where there has been an original deep fissuring and severe weeping with incrustation the normal process of healing results in exfoliation and sluffing of the old necrotic epidermis, causing the normal restoration of the contour of the web with new epidermis. This cycle of healing was brought about more rapidly by the daily foot bath than by the use of the machine only, but the end results were the same. No patient was diagnosed positive that showed the normal exfoliation between the toes or that had marked redness due to uncleanliness. Past history has shown me that many cases diagnosed as epidermophytosis was chiefly due to the above reasons. Any case that was doubtful, slant cultures were taken from the fissures or blebs.

General Inspection

Separate of the first selected controlled group of sixty-seven and of the twenty-five semi-controlled cases, a record was kept on two hundred and thirty-nine of the remaining total of four hundred and fourteen men examined throughout the entire period.

Due to the fact that time did not permit examining all of the men until as late as the third week, it was noticeable that more men presented minor and negative cases than during the first and second weeks. An explanation for this decrease in severity and more negative cases is that while these men remained unexamined they had used the Peda-Spray regularly. During this daily course of contact with the solution they were