

**Observations on diseases of the uterus : in which are included, remarks on moles, polypi, and prolapsus ; as also on schirrous and cancerous affections of that organ, with the characteristic and distinguishing marks of those diseases which resemble, and are sometimes mistaken for pregnancy / by G. Rees, M.D.**

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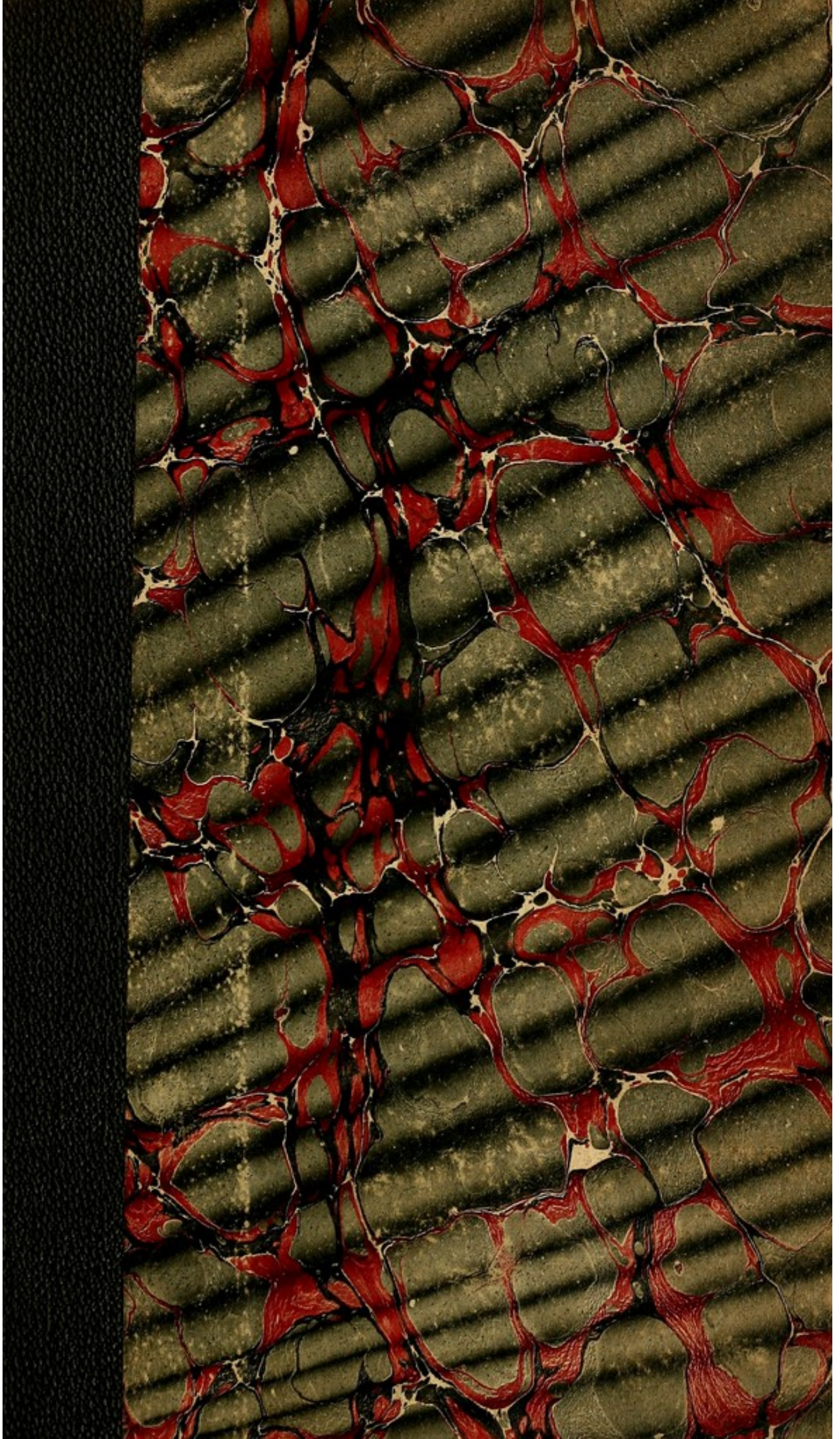
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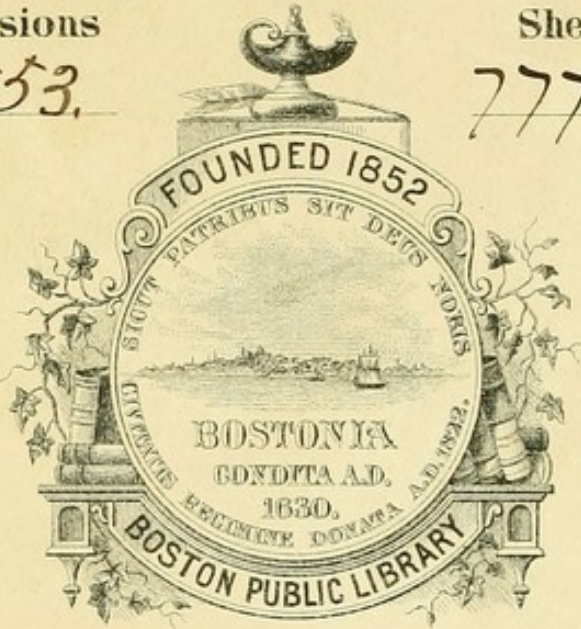
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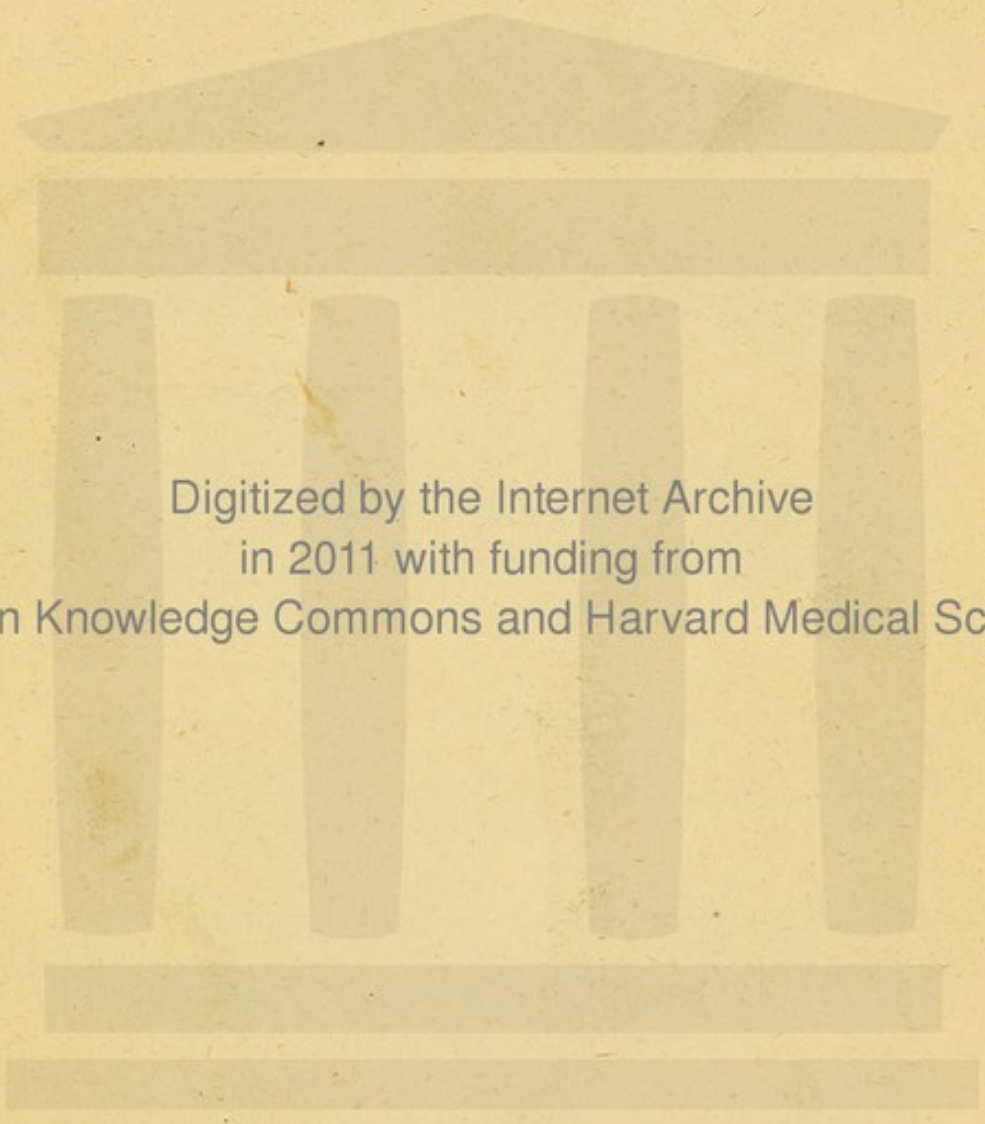
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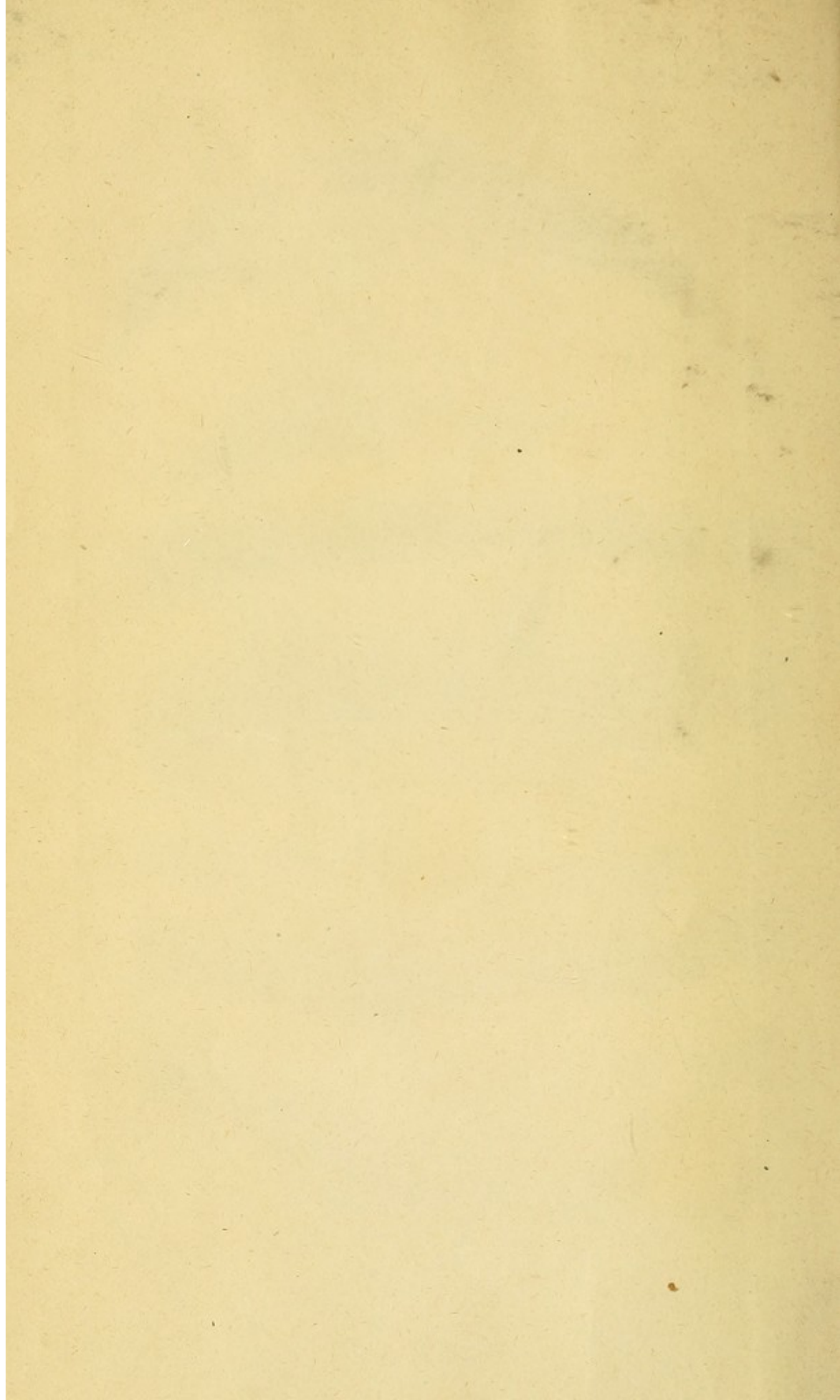
Walter Channing M.D.  
Mar 18 1856





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OBSERVATIONS

ON

DISEASES OF THE UTERUS:

IN WHICH ARE INCLUDED,

REMARKS

ON

MOLES, POLYPI, and PROLAPSUS:

AS ALSO ON

*Schirrous and Cancerous Affections of that Organ.*

WITH

*The characteristic and distinguishing Marks of those Diseases which resemble, and are sometimes mistaken for Pregnancy.*

---

BY G. REES, M. D.

HONORARY MEMBER OF THE PHYSICAL SOCIETIES OF GUY'S AND BARTHOLOMEW'S HOSPITALS, AND FORMERLY PHYSICIAN TO THE LEICESTER-STREET DISPENSARY FOR FEMALE PATIENTS UNDER THE PATRONAGE OF HER ROYAL HIGHNESS THE DUCHESS OF YORK.

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1805?



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W. Channing -

Mich 15, 1856



TO

*DOCTOR THYNNE.*

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As diseases of the Uterus are not only formidable but frequent, every attempt, however insignificant, to facilitate their removal or obviate their occurrence will, it is presumed, be deemed laudable. This consideration is an inducement which prevails on me to dedicate the following sheets to one, whose  
celebrity



celebrity in this department of medicine is universally acknowledged. The association of superior talents with unexampled liberality, qualify you in an especial manner to detect faults, and to extenuate them; and if these motives had not prompted me to select your name, I should have been anxious to embrace the opportunity of assuring you how much I am your obliged friend,

and obedient

humble servant,

*GEORGE REES.*



## P R E F A C E.

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WHOEVER is interested in the investigation of those complaints which form the subject of the following sheets, will readily acknowledge the insufficiency of our present information. Perhaps it will not be presumptuous to insinuate, that no cases more frequently baffle the efforts of practitioners, than uterine diseases. This imperfection originates partly in that pernicious modesty by which some women sacrifice their health to their prejudices, and partly from the obscurity which has hitherto enveloped the subject. The author, however, is inclined to hope it may be in his power to lessen the consequences which ensue from each of these sources, as he trusts what he has delivered will be sufficiently intelligible and conclusive to point out the necessity of an early attention to these disorders, and to persuade the practitioner to afford manual assistance when



when the opportunity presents; for I think we are authorized to infer that many cases have proved fatal, from negative misconduct. I would illustrate this assertion by alluding to dropfy of the uterus. This disease is confidently stated by some experienced practitioners to be an imaginary case; for, say they, the os uteri being a ready and effectual outlet, it can never happen but by an obliteration of its aperture: hence then it must be an extensive hydatid, or an assemblage of hydatids, or it must originate from some præternatural formation. Now as the very essence of dropfy, if I may use the expression, consists in an increase of that interstitial fluid with which all membranous surfaces are moistened, the cavity of the uterus might without any infringement of the animal œconomy be supposed susceptible of the same effect, provided such a cause should exist as would prevent the extrication of the fluid. In the cases which I have brought forward is exemplified the possibility of this event; in that selected from Bonetus, a small excrescence at the mouth of the womb prevented the escape of the water, which  
amounted



amounted to upwards of seventy pints. Now is it unreasonable, or unfair, to conclude that relief might here have been administered by removing the obstruction, and the life of the patient been prolonged? These reflections may familiarise our minds with similar occurrences, and afford profitable hints for future practice. On the subject of Moles, though I have not attempted regular classification, I have offered such distinctions as I deem essentially necessary, and have endeavoured to give this hitherto indefinable expression some certain signification. With regard to schirrus of the womb, my principal object has been to propagate an opinion which I believe to be correct, that it has not *in general* a disposition to cancer; that as the uterus from *being loosely situated in a cavity*, has no substantial support; it is peculiarly liable to induration and enlargement, which may probably be removed by suitable remedies.



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## OBSERVATIONS, &c.

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**I**N treating on diseases of the uterus, it will be proper in the first place to give a concise anatomical description of the parts to which we may have occasion to refer; for though the structure of these parts has been well described by several authors, the reader ought not to be under the necessity of having recourse to another work, in order to understand what is advanced in this. I shall therefore take the liberty of saying so much with regard to the uterus and its appendages, as may serve to interpret the subsequent pages.

The uterus is situated in the cavity of the pelvis, between the bladder and rectum; the fundus uteri being the upper part, and situated a little obliquely with regard to the axis of the pelvis.



In the unimpregnated state of the adult subject this organ is about three inches in its longest diameter, and two inches from side to side, and its comparison with an inverted flask conveys a good idea of its shape and situation.

The substance is firm and compact, being composed of nerves, blood-vessels, lymphatics, and muscular fibres, closely and strongly connected by cellular substance.

The muscularity of this organ has been frequently doubted, since it has not always been possible to demonstrate the existence of muscular fibres; but the œconomy of the part, and the efforts it is capable of making in the expulsion of any thing from its cavity, is a sufficient evidence of its possessing muscularity; besides that, Ruyfch and other anatomists have shewn, in the most satisfactory manner, their existence and arrangement.

The cavity of the unimpregnated uterus is very inconsiderable, because its sides approximate closely to each other. It corresponds in shape with the exterior appearances, forming an irregular triangle, and has three openings.

One



One from the inferior portion of the uterus, denominated the os uteri, the two others from the angles of the fundus uteri, forming the shortest side of the triangle. In the natural state the opening of the os uteri will scarcely admit a probe to pass, and the superior orifices, which are the openings of the fallopian tubes, can only be perforated by the size of a hog's bristle.

Yet, notwithstanding these very limited dimensions, the cavity is always preserved perfect and entire.

That portion of the uterus which is between the inferior opening and the wide part of its cavity, is called the cervix; it is lined by a reflexion of the same membrane that covers the vagina, is continued likewise over the whole interior surface of the uterus, and passes a little way up the fallopian tubes, leaving their orifices unobliterated. In the cervix uteri are seen several small perforations, and small glandular corpuscles; the former are with great reason supposed to secrete the menstrual discharge, as in women who have died at this period, a small quantity of coloured  
 B 2 fluid



fluid has been observed to exude through them.

The glandular structure likewise answers an important purpose in secreting a mucus to close the entrance after impregnation has been accomplished; for it is to be considered as highly essential that the entrance to the cavity should be free and unobstructed previous to conception, and that it should be closed when that process is completed.

From the two openings already mentioned as situated at the fundus of the uterus, commence the tubæ fallopianæ, which are two in number, and extend along the broad ligaments to the edge of the pelvis, where their extremities become jagged and irregular, and are loosely situated near two bodies called the ovaria; these are two whitish oblong substances near the sides of the fundus uteri, to which they are fixed by a kind of short round ligament\*, and inclosed in a duplicature of  
of

\* It was universally supposed by the ancient writers that the ovaria of the female corresponded in structure and function with the testicles of the male, a supposition that



of the ligamenta lata. The posterior part of the uterus is covered by a reflexion of Peritonæum, which after passing over its fundus, is continued to the bladder anteriorly, and the rectum behind: in passing to the rectum it dips down, leaving a cavity or depression, in which, sometimes, though rarely, the intestines have become strangulated†.

This membrane likewise by its duplicatures, forms the ligamenta lata, arising from the sides of the uterus, and extending to the neighbouring lateral parts of the pelvis, which it divides into two cavities, forming a membranous septum: the laminæ of these duplicatures are united by cellular membranes, and contain the fallopian tubes, ligamenta rotunda, &c.

that was strengthened by the existence of this short round ligament, which they considered as a tube conducting the semen secreted by the ovarium into the uterus. This egregious mistake is now no longer entertained by the more accurate anatomists of the present age.

† Elythrocele Vogel. cccc ij. Hernia in Vagina Uteri eminens.

*Vide Dr. DENMAN'S Midwifery.*

The



The ligamenta rotunda arise from the sides of the fundus uteri, and after passing through this investiture of the peritonæum, descend through the abdominal rings, and terminate in the substance of the mons veneris.

These ligaments are so attached to the uterus, as to allow even in the virgin state considerable motion upwards and downwards, and favors the expansion and elevation of the uterus in time of pregnancy. By this peculiarity of structure, many advantages are procured for the pregnant woman, but these are likewise counterbalanced by several inconveniences to which the same circumstances render them liable.

From what has already been said with regard to the anatomy of those parts, it appears, that the uterus, though by its situation admirably well protected from injury, is not well secured or supported. This might at first appear an imperfection of nature, but we are to recollect that the uterus is particularly appropriated for the habitation of the foetus; it is therefore adapted to *its* use and necessities, and not for the advantage of the parent. It is even



even proved to be an organ not at all necessary to life, as it has frequently been removed, and the patient has survived the deprivation\*. No one,

\* The uterus is an organ which is not absolutely necessary to life, since many animals have been known to live after it has been taken out.

*Dr. WHITE'S Treatise on the Management of Lying-in-Women, p. 458.*

————— Sin vero putrescat, excindendus est uterus, auferendo e corpore mulieris, neque deterreamini ubi necessitas urget.

*Hieron. Mercur. de Morb. Mulier.*

Mulieres, excisso utero, sanas supervixisse testatus est Nicolaus Florentinus.

*Ætius, lib. 16, cap. 76.*

Cum remeare in suum locum uterus non potest ita ut aliquando corrumpat, et nisi abscindatur totum corpus corrumpatur—————abscindi autem posse absque vitæ dispendio docet Rouffet. de partu Cæsar.

*PAULI ZACCHÆI Quæst. Medico-legal. p. 778.*

These quotations serve to shew that the ancients did not consider the removal of the uterus incompatible with the future existence of the woman. A more modern writer than



one, it is true, at present thinks of such an operation, which for several reasons would be equally dangerous and desperate; but the possibility of the event is a proof of the validity of the assertion, that it is an organ not necessary to life.

Before we finish this anatomical description, it will be necessary to say a few words relative to some other parts in connexion or in the vi-

than either of the three last mentioned (Dr. Turner) gives us a remarkable history of a case in which an operation of this kind was performed without fatal consequences. His words are these, "An elderly woman, whose intellects were deranged, under a fit of melancholy, was pondering how to free herself from this inconvenience (alluding to a procidentia uteri, which she had in a considerable degree) and unknown to any person of the family, taking her opportunity, first putting herself in a suitable posture, with one hand she draws down the prolapsed body, whilst with her husband's razor in the other, got it as were by stealth, she excised all within her reach, then putting a clout up to the parts, she got into bed." After detailing the progress of her cure, he adds, "She now gets out of bed, takes her nourishment and rest, the discharge from the wound being inconsiderable, and the same bidding fair for the healing suddenly."

*Vide* TURNER'S *Surgery*, Vol. II.

cinity



cinity of the uterus, the mouth of which terminates in that large canal the vagina. This part varies very much with respect to its dimensions, according to the general size of the subject, or the distension it may have undergone in consequence of child-bearing; it is however in all subjects very loosely attached by surrounding cellular substance, and hence, when any causes produce a prolapsus, or bearing-down of the uterus, this part likewise soon yields to the pressure.

The entrance to the vagina is narrowed in the virgin-state by means of a membranous expansion called the hymen, which leaves an opening in its center for the menstrual discharge. This part is subject to great alteration and variety; in some women it is slight and easily ruptured, but in others so firm and compact, as to make very considerable resistance, and proves an obstacle sometimes to the completion of the connubial rites. It varies likewise with regard to the diameter of the perforation, being sometimes very small, and even in some instances completely obliterated.

From the circumstance above stated, namely



the firmness of this membrane, the opinion has principally originated, that impregnation can take place without the introduction of the semen masculinum into the uterus. As the other parts which are generally included in the female organs of generation are not at present interesting in this treatise, I shall omit the consideration of their structure; and proceed therefore to enquire into those affections to which the uterus is more frequently liable, as from this circumstance arise the principal part of female complaints; an alteration in its structure or situation, or an interruption to the regularity of its functions, give rise to a multitude of symptoms, which it is our business to understand and relieve.

Authors who have written on this subject have not, in my opinion, been sufficiently attentive to the peculiar circumstances appertaining to the structure and economy of the uterus, which would not only explain the theory of diseases, but point out more forcibly the cautions by which we might obviate their frequency. Let us therefore consider the womb.

As



*As a spongy\* vascular substance, loosely situated in a cavity, and capable by its peculiar structure of undergoing considerable enlargement and expansion.*

To shew the inconveniences to which it is liable as a *spongy vascular substance*, we need only for a moment consider how the circulation is carried on in the other parts of the body.

*The heart* is the grand main spring of vascular action ; it throws forward the blood with a considerable degree of force ; but this force, great as it is said to be by some mathematical physicians who have attempted the calculation, is not sufficient to distribute the blood through the finer arterial ramifications.

It is thrown forward, therefore, by a contraction of the arteries themselves, similar and synchronous with the motions of the heart ;

\* I am very well aware that the term *spongy* is exceptionable, but perhaps there is no word which will better describe the texture of the uterus, which is principally a compages of vessels somewhat loosely connected by cellular membrane. If I were to plead by precedent for the adoption of the term, I need only mention the corpus *spongiosum* penis, which is received by general assent, though it is not more applicable or appropriate.



hence all stagnation and accumulation in these vessels are prevented. But it is not so with regard to the return of blood through the veins, they do not possess the same contractile power, and it might be difficult to conceive, *a priori*, how the return of blood should be effected as it is, in a direction contrary to its own gravity, which is the case with respect to the lower extremities.

This is facilitated by the interposition of valves, whereby the regressive motion of the blood is prevented, and more especially by the action of the muscles contiguous to the vessels.

This needs no proof, as it would be ridiculous to prove what nobody doubts. The swelling of the lower extremities when a person stands a considerable length of time without walking; the increased impetus with which the blood rushes through the orifice of a vein when tied up by clenching the fist, are palpable evidences; and yet, notwithstanding this, provision is made for the prevention of accumulation, obstruction and fulness very frequently occur when there is debility in the system.



The uterus, therefore, as being a body which is extremely vascular, is in an especial manner liable to the same causes: from being situated loofely in a cavity, it has not that support which the blood-veffels in the extremities receive, neither has it that muscular action produced by exercise, whereby its circulation can be quickened. It is vascular, but it is spungy; and though the term *spungy* may not be elegant or perfectly correct, it will convey that idea which will serve to explain its appearance. Hence it is natural to expect it would be liable to induration and enlargement, and that it is, is too frequently testified by examples. However, as we have attempted analogy in one instance, let us have recourse to it in another.

Having mentioned a fwelling in the lower extremities as a proof of insufficient action in the veffels, let us consider when this is most obvious, and it will be readily answered: when the system begins to flag, then venous plethora is most prevalent; hence it is the effect of debility and relaxation.

So with respect to the uterus, when the  
veffels



vessels are weakened, they are more liable to distension; and thus it is, that persons of a weak scrophulous habit, who lead a sedentary life, are most disposed to such infirmities.

As a part of the body subject to the same general causes, this organ is liable to be affected by schirrus, &c. arising from debility; but it has certain peculiarities attached to it by which these causes are increased; for it is not only in its structure extremely vascular, but there is a determination of blood to this organ more than is necessary for its purpose, and which is thrown out of the vessels in greater or smaller quantities proportionate to the wants or superfluities of the system, and according as the vessels are more or less disposed to favor the evacuation.

This peculiarity with regard to the functions of this organ is evidently intended by nature as a provision for the nutriment of the fœtus in utero, since it commences at that period of life when the female is susceptible of impregnation, and discontinues when advanced age has subdued the passion and propensity to sexual intercourse.

Now,



Now, in order that these alterations which take place with regard to the secretory functions of the uterus may be perfectly salutary and harmless to the constitution, it becomes necessary that the discharge should be perfectly correspondent with the resources of the system; thus, for instance, if the vessels of the womb do not readily transmit the blood through their orifices, when there is as great a determination of it from the whole habit as it has ever been accustomed to receive; the evident consequence must be an enlargement and an increase of bulk, which will lay the foundation of future disease.

But let us pursue the idea still further, and we shall see how satisfactorily it will account for the various affections to which women are disposed.

In the first place, with regard to the commencement of the menstrual discharge, it is universally understood that women are much more liable to suffer inconvenience from the first than from any subsequent periods, because the uterine vessels not having yet been called upon to perform this office, do not immediately



diately comply with the demands of the system.

A knowledge of this principle is therefore of the first consequence with regard to the practice which is requisite; hence the use of emmenagogues, cathartics, deobstruents, &c. become either useful or hurtful, according to the intention with which they are prescribed.

When we discover by appearances that the constitution is well prepared, that the appetite is good, the pulse full, the countenance florid, &c. and that there is much pain attendant at this period in the back, loins, &c. with some degree of fever, the impediment then evidently resides in the uterus itself, and must be removed, not by administering chalybeates and tonics, but by favouring the opening of the uterine vessels by bleeding, fomentations, the steam of warm water, and such other remedies as are calculated to produce that effect.

When, however, the reverse of this is the case; when, instead of these indications of general plethora, there is an universal languor  
and



and lassitude in the habit, a pale inanimate countenance, a disinclination to any exercise, and a considerable fatigue when any exercise is attempted, with a shortness of breath in consequence of motion, and a coldness of the extremities, “ it needs no ghost to tell us” whence the symptoms originate.

It does not come, however, exactly within the design or limits of this publication to enter on an inquiry into the method of relieving these symptoms.

The diseases consequent on irregular menstruation are sufficiently numerous and important to furnish matter for a voluminous publication.

What has been adduced was intended to shew the balance which subsisted between the constitution and this organ, and in consistency with this intention I shall proceed to shew how some are more or less disposed to disease.

But to substantiate still further the opinion, that the menstrual discharge is regulated by the plethoric state of the system, it will only be necessary to mention the wonderful resources which nature has provided when the regu-



lar outlet (the uterus) becomes obstructed; a bleeding at the nose every month is by no means uncommon, corresponding and answering in effect the purpose of menstruation; others have the same discharge from the mouth, again it is very often observable with respect to those who have had ulcers on the legs or other parts of the body, that the surface of the fore has at those periods regularly been the seat of menstruation.

These facts, though they are sufficient to support my observations, are still not so remarkable as many which might be brought forward.

It has not only been observable with regard to the facts already stated, but in some instances it has been discharged from the extremities of the fingers \*, and even from the hairs of the head.

\* Sed quod majorem infert admirationem id sane est quod nos jam ter vidimus, videlicet, per minimum manus digitum et per annularem sinistrae manus singulis mensibus sanguinem profundi non copiosum in religiosa quadam scemina cui natura menstruam purgationem per uterum denegaverat.—*Vide LUDOV. MERCAT. Lib. 1. Cap. 7.*

Cognovimus etiam aliam, cui uno quoque mense sanguis licet modicus, per majorem oculi sinistri angulum fluebat.

*Idem.*



These cases shew how great must have been the impediment to uterine secretion, ere these phænomena could have taken place.

Many authors have asserted, that this secretion from the vessels of the uterus was not at all dependant on constitutional fulness, because a person has been bled just at the time when menstruation was about to commence, and the loss of blood from the arm has not prevented the natural evacuation; but surely this reasoning can never impose on the rational practitioner, its insufficiency will be obvious if we only for a moment consider that the accumulation has been gradually forming from the time it last ceased, to the time it was again expected to appear; hence the vessels of the uterus were already distended, and unless a person could have drawn blood immediately from the part, one would not, *a priori*, expect such an effect as was deemed necessary by the advocates of this opinion, to prove constitutional plethora. But to return to the part which I proposed next to consider and to shew how women are more or less disposed to diseases.

It is well known to every person that the



absolute quantity of blood lost at the period of menstruation is extremely different in different individuals, owing to the difference of custom, constitution, and climate. The effect of custom points out some important circumstances to our consideration; for instance, suppose a woman educated, as many of our modern women are, with all possible care, tenderness, and luxury, not exposed to the inclemency and vicissitudes of season, but kept up in warm carpeted rooms, sleeping on soft beds, drinking warm liquors, and eating high-seasoned aliments, the unavoidable consequence must be a delicate and relaxed habit; hence the menstrual discharge will commence at a much earlier period, and be more considerable than it would in the same individual educated under different circumstances. The atonic or relaxed state of the vessels of the uterus being such as not to form a sufficient resistance to the blood which it receives, the discharge is considerable; and having continued for a certain length of time, becomes habitual, so far as to be necessary to the health of the individual.

I cannot help making a remark here, which  
may



may be deemed somewhat digressive from the present part of this treatise, but which being of the utmost importance to women, will bring with it an apology.

I allude to the great inconveniences entailed on themselves by this culpable indulgence, more especially in the characters of a mother, and a wife. The principal, by far the principal foundation of miscarriage lies here, though I have already asserted that the intention of nature in rendering women liable to this monthly inconvenience was to provide for the child in utero, it must be remembered that for a considerable time after impregnation it is too small to require so much for its support and expenditure, as most women are accustomed to secrete; the uterus, therefore, is in a state of plethora, and unless some resistance can be given by the vessels of that organ, a discharge as usual will take place, and inevitably render the patient abortive.

From this cause, likewise, namely the fullness which is in the habit, arise those symptoms which are incident to the early months, as sickness and vomiting, loss of appetite,

want



want of sleep, restlessness, &c. which are most effectually relieved by bleeding, and most effectually prevented by cold-bathing, the use of which, and the advantages of it in preventing abortion, I shall presently consider; but as I wish every assertion that is at all questionable might receive some proof, I shall make a short comment on the preceding remark, that a discharge from the uterus inevitably renders the patient abortive.

It was for a considerable length of time a matter of doubt and dispute from whence the discharge proceeded, which constitutes the menses; the question, however, has been decided, since it has been seen in women who have been executed at this time, and examined immediately after death, and in those who have been so fortunate as to survive a retroversion of the womb, coming from the internal surface of that organ.

Now as immediately after impregnation the mouth of the womb becomes closed, and the cavity of its neck so completely obliterated as to prevent the ingress or egress of any fluid, this evacuation must be effectually prevented;  
and



and yet there are most decided testimonies to prove that women have menstruated two or three times, or oftener, after they have conceived; nay, indeed, we can even with truth assert, that women have been known never to have menstruated but at this time; still these circumstances are no contradiction to the truth that women inevitably miscarry when the uterine vessels are too weak to retain their contents; for in the instance already alluded to, and several such instances I have known myself, where women have had the same periodical discharge: this has proceeded from the passage leading to the uterus, from the vessels of the vagina, and by no means from the surface of the uterus itself, the orifice of which continues perfectly closed.

Admitting therefore what I think is sufficiently proved, that the most common cause of miscarriage is a weakness of the uterine vessels, the utility of the cold bath as a preventive will at once appear obvious, and the principal circumstance with regard to its administration is the time at which it is had recourse to; from a neglect of attention to this



it is highly probable cold-bathing has by some been deemed dangerous. This remark was first pointed out by Dr. Hunter, and afterwards more particularly insisted on by Dr. White of Manchester; the former of these gentlemen says, that “ although women usually  
 “ miscarry at eleven or twelve weeks, the  
 “ fœtus has generally been blighted or remo-  
 “ ved out of the circulation at seven or eight weeks.” This fact, says Dr. White, suggests an essential remark concerning bathing, that if it be not begun before the term at which the uterine fruit is generally blighted, no good can be expected from it in preventing miscarriage, and therefore it is certainly adviseable to begin and continue it previous and subsequent to conception, in order to derive that benefit which may be expected from the remedy; for it is unquestionably more to be depended on than any other remedy whatsoever. To this I can bear testimony from my own experience, but in order to obtain the sanction of much higher authority, I shall take the liberty of selecting a few lines from the gentleman already mentioned, Dr. White:—“ I can now  
 “ confirm



“ confirm the efficacy of the preventive reme-  
 “ dy from ample experience, in a great num-  
 “ ber of different constitutions ; so efficacious  
 “ indeed it has proved, that I have not known  
 “ a single instance of its failure, except where  
 “ the patient has received some violent injury.  
 “ This was the case of a lady who miscarried  
 “ in consequence of a fall down stairs, but  
 “ returning afterwards to the use of the bath,  
 “ she conceived again, and continuing the  
 “ bathing the whole period of gestation, be-  
 “ came the happy mother of a fine child,  
 “ though she had before met with frequent  
 “ disappointments.”—*Vide* p. 363.

Dr. White, however satisfied with the *ef-*  
*fect*, has not given an explanation of the *prin-*  
*ci**ple* on which the benefit depends, nor is it  
 so essential ; but as some might be more recon-  
 ciled to the practice by this circumstance, I  
 shall just state what I conceive its sensible ef-  
 fects.

From the well-conducted experiments of  
 many ingenious men, it appears that more  
 matter is thrown off by the perspiratory vessels  
 on the surface of the skin, than from the bow-



els or kidneys, or any other outlets ; now the quantity which passes off in this manner must depend on the vigorous action of the extreme vessels. In weak languid habits this is very defective, the surface of the body is cold, the vessels are weak, and as there is no active exercise made use of to alter this condition, if the digestive powers are unimpaired, plethora must be the consequence: by means of the cold-bath this action on the surface of the skin is increased, and by encouraging a more active secretion, it must lessen the quantum of circulating fluids: not that cold itself is a stimulant, as it is frequently stated to be, certainly not; cold is to all intents and purposes sedative, directly sedative. It is owing to the body coming into a temperature warmer than the bath in which it was immersed that the universal glow succeeds, and thus the reaction of the system is more powerful; nor is the reaction *altogether* owing to this cause, for the same effect ensues when the blood is driven on to the heart by fear, in which case a greater action becomes necessary to transmit the blood thrown in upon it by the constriction of the vessels:



vessels: this increased action of the heart, throwing the blood with more vigor to the surface, brings on perspiration.

This explanation of the effects of cold-bathing will, I trust, be productive of some practical benefit, as it will shew why persons of debilitated habits should not at first bathe too frequently; for the increased excitement thus produced, if too frequently repeated, will exhaust rather than recruit the strength.

Having made a digression so far as to point out the bad effects of too much indulgence, and the advantages of cold-bathing in remedying the inconveniences thus incurred; I shall return to consider the diseases to which the uterus is liable, *as a vascular body*.

I have stated in a preceding page, that though some women, in consequence of their mode of living secrete a larger portion of blood than others, yet that after a time being habitual it becomes essential; and therefore they should be careful not to expose themselves to such causes as are likely to interrupt the regular and usual discharge of this function.



When by any means this happens, or when there is, from the want of proper tone in the vessels of the part, an interruption to the free circulation of blood through its vessels, then is produced that state which I now proceed to consider.

*Do this fancy over it fact*

### A SCHIRRUS of the UTERUS.

THE term schirrus has been too generally applied to tumors of different descriptions, which is an unfortunate circumstance, since we are from custom led to associate the idea of *cancer* with this word schirrus: the reason is very apparent, since the most ordinary state of the part preceding cancerous ulceration is a schirrous or peculiar induration.

I have great reason to believe, from the opportunities I have had of gaining experience in these complaints, that the uterus, though undoubtedly liable to cancer as well as other parts of the body, is by no means so frequently so as has been imagined; for as it is exceedingly difficult to determine, even in parts  
subject



subject to our inspection, whether \* it is the malignant schirrus or not; so must the difficulty be considerably greater where from situation this advantage is lost: it is on this account, probably, that when the uterus is affected with disease, whose symptoms are only equivocal marks of cancer, it is immediately considered to be affected with that complaint; whereas, in a great number of instances, the disease is purely of a scrophulous nature, and therefore in general *curable*.

I venture to make this assertion,

First. From the peculiar functions of this viscus, which having at all times a considerable quantity of blood determined to, and not always being capable of carrying that forward, it must naturally be peculiarly disposed to enlargement and **induration**.

Secondly. When nature produces a revolution in the female constitution, such an alteration, and the interruption of a habit that has

\* *Vide* Mr. Pearson's Observations on Cancerous Complaints, who has considered the subject with great judgment and accuracy.



continued twenty or thirty years, must likewise be conducive to the same effect.

Thirdly. Because the characters of the *exquisite scirrhus* do not so often exist in the part as one might expect from the frequency with which it is said to be attacked by cancer; and

Fourthly, and lastly. From its being frequently cured by remedies which are not only insufficient to the cure of cancer, but by which that disease is considerably aggravated.

All glandular parts are more complex in their structure than other parts of the body; their vessels are not only more numerous but more convoluted, which is absolutely necessary to the accomplishment of those purposes for which they were intended. Now as it is evident that the more complicated the process the greater the danger of its being interrupted, so on this account these parts are much more frequently the seat of disease than any other parts of the animal body.

If the uterus itself is not a gland, which it would perhaps not be impossible to prove, still it so far partakes of the properties of a  
gland



gland as just now enumerated, as to be liable to similar infirmities.

In a scrophulous constitution where we know the whole vascular system is weak and relaxed, is it not likely the uterus would correspond with the constitutional character; or rather, is it not impossible almost it should be otherwise, and if so be more liable to those affections dependant on what has been denominated a scrophulous habit?

To insist on this I am sure would be unnecessary, as whoever considers it must see the truth of the observation.

Let us therefore proceed to what is more important, the distinguishing symptoms of Schirrus, as the forerunner of cancer, commonly called *exquisite schirrus*, and that state of induration which I have stated to be connected with a scrophulous habit, and is therefore a more tractable complaint.

An induration of any part of the womb not cancerous may be known, first, by the circumstances which have preceded its appearance.

If a person has had a difficult labour, or  
has



has caught cold during menstruation, this will probably occasion an increase of size, but it is not necessarily liable to cancer.

Again:—A prolapsus uteri having continued for some time, in some degree produces a stricture on the vessels of the womb, and is the very frequent cause of scrophulous induration; and here I must not omit to state that the general appearances characteristic of scrophula will have some share in forming our opinion.

Another circumstance of considerable validity is the degree of bulk acquired by the part; for instance,

When cancers take place in the lip, the whole lip does not become swelled and augmented, but one particular portion of it losing its natural softness and compressibility, becomes remarkably hard and tense, and so compacted in its texture as to intercept all circulation through it.

From this character we judge of its malignant tendency; so with regard to the uterus, if the os uteri only, which must be discovered per tactum; if this, I say only, or if a part of the os uteri is found to be *hard, remarkably hard,*



*hard*, without the womb itself being increased in bulk, we may suspect, even previous to the accession of more alarming symptoms, that the event will ultimately prove destructive; so, on the contrary, when on the patient's first complaining of uneasiness there is such an increase of size, which is very commonly the case, that the uterus can be felt thro' the abdominal muscles, large and ponderous, this, with the preceding character will justify our assurance that it does not proceed from cancer.

There is another method which is occasionally in our power, and I don't know that this has been taken notice of by authors.

When a woman is pregnant, at the commencement of labour, we find the os uteri not only not dilated, but firm, thickened, and scirrhus; if this is merely an enlargement arising from congestion, the gradual expulsive efforts will overcome it, and the delivery be completed without injury; but if it is the true exquisite scirrhus, the os uteri will be probably torn, as has happened in several instances.

The most unequivocal diagnostic, however, by which we can be governed is the effect of



mercurial remedies ; these, when administered to cancerous patients, never fail to heighten their misfortunes and accelerate their dissolution : but under the state of disease just mentioned, are more salutary and certain than any other article of the materia medica : however the administration of this remedy will come more properly under the next section, the

*Cure of SCHIRRUS.*

I wish first of all to premise, as a preservative to my own reputation, that under this head, I mean only to consider that species which I have admitted under the term *scrophula*.

I do not pretend, or would I wish it by any means to be supposed that I pretend, to cure that inveterate and unconquerable malady, *cancer*, but *believing*, as I sincerely do, that this term is often improperly applied to affections of the uterus, I would in many instances undertake to cure those complaints to which that character has been affixed.

The *curable* schirrus, then, as I would specify



cify it, is evinced by a sense of weight and fulness generally, or bearing down, with some interruption to the discharge of urine; a tenesmus, or inclination to stool, when no fœces are discharged; and a fulness with a perceptible hardness above the pubis.

These symptoms, though not fully conclusive, are sufficient for our purpose; for though it may with justice be asserted that this does not clearly discriminate between schirrus and polypus, yet whenever they exist they are sufficient to rouse our attention, and to prevail on the patient to submit to the only accurate test, the test of examination *per tactum*.

I would recommend this with more earnestness, since it is an unfortunate circumstance attendant on this complaint, that it advances to a considerable stage before it is discovered, or before it excites any inconvenience whereby we might be led to discover it.

If this publication, therefore, should ever fall into the hands of females who may unfortunately become the subject of this disease, and indeed I would make the same observation to those who may attend them, whenever there



is this sensation present, a bearing down into the vagina more than usual, immediate attention and investigation become necessary.

I had an opportunity very lately of observing this in a lady in New-street, to whom I was sent for in haste: on my arrival enquiring into her complaints, she told me she had been very well till a day before, when from being exposed to cold she had brought on a violent pain in her bowels, and had a considerable pain at the bottom of the belly when pressed upon; her bowels were perfectly relaxed.

As this symptom, pain to the touch, was of some consequence, I put my hand on the abdomen to examine it, and could evidently discover, though I was able to make only a slight pressure, that there was an enlargement of the uterus. I immediately recommended the application of a dozen leeches, to be succeeded by a blister, and ordered her likewise some febrifuge medicines; by this means the symptoms were considerably relieved, but not removed.

The next day, therefore, I prescribed warm fomentations, with the use of a large clyster  
composed



composed of infus. lini.  $\zeta$ xiv. tinct. opii.  $\zeta$ ij. This acting as a fomentation gave considerable relief, and the inflammatory symptoms were almost subdued.

As she complained of a bearing down, I was permitted to examine her per vaginam, and found the os uteri considerably thickened, at the same time that I could evidently discover by external examination, that the uterus itself was enlarged.

I then interrogated her more closely with respect to the progress of other symptoms, for I suspected this disease must have been gradually encreasing for several months. She acknowledged, on recollection, having felt some unusual sensations, such as a weight at the part, and a difficulty of making water, with an urgent inclination to go to stool, without much actual necessity; but these not interfering with her usual domestic occupations, she had advanced so far without deeming it of consequence.

I now recommended the use of the volatile liniment with mercurial ointment, and mild aperient



aperient medicines, by which means she was perfectly recovered.

Having adduced this case in order to shew the importance of attending to the first symptoms originating from this source, it will likewise serve in a great measure to point out the method of treatment.

When this enlargement is accompanied, as in the preceding case, with inflammation, it must be treated by the common remedies which such a state requires, taking care to keep the patient in an horizontal posture constantly, which is of the utmost consequence, for as the uterus when enlarged must in the upright posture of the body rest upon the bones of the pubis, the pressure of such a hard body must aggravate the inflammation. A punctual observance of this advice is an essential step towards the cure, because that part of the bones which is called the *brim of the pelvis* in some persons proves the remote cause of the disease: the edge or brim being so acute as to keep up a constant irritation on the uterus; under such cases it is obvious little benefit can be derived  
from



from other remedies, unless this circumstance be attended to.

Another thing to be observed, is, not to administer any cathartic remedy, whose action is particularly directed to the lower intestines; hence all aloetic medicines must be avoided. Jalap and rhubarb are likewise on the same principle exceptionable; calomel is by far the best, and should be given in such large doses, as to act as a purgative.

The use of leeches likewise is adviseable, which is of service in two ways, not merely by lessening inflammation, but by preventing that deposition which must otherwise be removed by the more gradual process of absorption.

Having by this means and a strict attention to the antiphlogistic diet conquered the inflammatory stage, we must use mercury in a different manner: the unguentum mercuriale fortius should be rubbed in every night to the quantity of a drachm on the abdomen, taking care that the friction be continued till the whole is absorbed. This should be repeated every night till a slight salivation is produced,  
which



which should be continued for some weeks, under which the patient will experience evident amendment. The mercury, though the principal agent, is not the only remedy in this case, as the friction on the part is of no insignificant utility. At the same time, or in conjunction with the same remedies, the volatile liniment applied to the abdomen will be found highly beneficial; a pure healthy atmosphere is here also exceedingly essential, and the bowels should be kept moderately open. It not unfrequently happens that the inflammatory stage passes off not by resolution but by suppuration, an abscess is formed, and matter is discharged from the vagina in considerable quantity; this will still corroborate our opinion with regard to the nature of the disease.

X The matter of cancer, when a part affected with that disease becomes ulcerated, is at first small and inconsiderable: it is not the substance of the tumor itself resolved and concocted into pus, which having made an outlet proves at once a crisis to the symptoms; it is an ulceration on the surface and not in the substance, and as this surface becomes more enlarged



larged and the matter more corrosive, the discharge is daily augmented ; but with regard to the other species of schirrus, when an abscess is formed, the discharge at first is abundant, and gradually diminishes in quantity if properly treated.

When this is the case a certain modification of the treatment becomes necessary. We have not the same object in view ; what was to have been attempted by abortion will now most probably be effected by suppuration, and we must support the patient under the process by bark and tonics ; but the principal remedy, and what is not generally sufficiently esteemed or relied on, is, the use of detergent injections administered not merely to the os uteri, but thrown into the cavity of that organ, as recommended by Dr. Wallace Johnson.

It is of the greatest consequence that the matter should not be suffered to lodge, as it will, however mild and innoxious, become foetid and acrimonious ; and on this account I place little dependence on the foetor of the discharge as an indication of cancer. Do not the lochia when retained soon become highly



putrid and offensive? under puerperal fevers, is not this very remarkable? and yet who thinks of cancer then? I am surpris'd, therefore, when I hear this symptom mentioned as a sign of one particular disease, which is common to several.—With regard to

### CANCER *of the* WOMB,

I wish I could contradict by my own experience the term so universally applied to it, *opprobrium medicorum*; but all that can be attempted, I am afraid, will only prove palliative.

In order to discover the existence of this disease, besides the symptoms enumerated above, will be found an acute shooting pain, accompanied or followed with a sensation of burning heat, the os uteri being at one period of the disease excessively painful to the touch, the discharge, which is always foetid, gradually becoming more abundant, and what is more characteristic perhaps than any other symptom, the altered state of the vagina, which

is



is of a cartilaginous substance, with irregular warty excrescences.

Under this deplorable situation, the use of opium and other narcotics will be of service in mitigating the violence of the symptoms. Opium is attended with one inconvenience, for as it is necessary to take it in large doses before it procures ease, it renders the bowels obstinately constive; this must be corrected by mild aperient medicines, but all aloeties should be avoided.

As the transition from schirrus to cancer is always accompanied with inflammation, whatever will diminish this will retard the progress of the disease.

Mr. Fearon, who was the principal advocate for this remedy, has shewn its advantages in a very forcible manner in the treatise published by him.

Hence the use of leeches to the abdomen are very beneficial, but as the quantity drawn by them is inconsiderable, it should be remembered that ten or twelve, or even more, should be applied at once. Anodyne clysters are likewise not to be omitted. The sympathy



which exists between the rectum and the uterus renders applications of this description highly advantageous, besides the tenesmus brought on by the pressure of the uterus in this part is hereby much abated.

Mr. Justamond strongly recommends a hemlock bath, which no doubt is worth trying, since the medicine itself taken inwardly is of considerable service. As to arsenical preparations, which many have been tempted to believe specific, I think they will only be found to answer this expectation when it can be immediately applied to the seat of the disease; but as this, under the present complaint is impracticable, its internal administration should be prohibited.

Since the symptoms of cancer, as I have already stated, are not always decisive, and as I have ventured still further to assert that here it was more frequently apprehended than there was real reason for, we are authorized to support our patient by the hope of a happy termination.

To shew under what discouraging circumstances this event has taken place, I shall close  
this



this part of the present treatise with the history of a case communicated some years since by Dr. Wallace Johnson ; and as it is highly interesting and proves how deceitful and uncertain are the symptoms of cancer, I shall deliver it without abridgement or alteration.

He begins his narrative by saying, “ I shall *not assert* that confirmed cancer of the uterus can be cured, especially if the patient is above forty ; but I must own that I have known cases in which the womb has been schirrous, and extremely painful, accompanied with other symptoms so much like a cancer as to have been mistaken for one : to illustrate this I shall insert the two \* following cases, allowing the reader to judge for himself.

#### “ C A S E I.

“ Mrs. West (at the Style in Kew parish) in the time of her sixth pregnancy had a discharge like the fluor albus, which continued till she was delivered. She had enjoyed a good state of health till that time without any

\* I have only selected the first, which is the most remarkable.



such complaint, and was now in the 29th year of her age; her husband was healthy, and had no complaint; the child proved so likewise, and had not the least appearance of humor upon him. After this delivery the discharge was more troublesome, and continued so during all the time of her seventh pregnancy.

“ The husband had still no complaint, and the child also was very healthy without any humor about him. After the birth of this child the discharge became a little foetid, and so very copious that her strength was greatly reduced by it. She nevertheless had the catamenia regularly, and there were no ulcers within the vagina or about the labia pudendi.

“ In a few months she had the advice of the late Dr. Smellie, who assured her that it proceeded only from a weakness of the uterus.

“ Some time after this, she sent for an old and experienced surgeon who brought a man-midwife with him, and after examination they were both of opinion that it was a weakness occasioned by her childing fast. The discharge proving still more troublesome, attended with  
pain



pain about the small of the back, and region of the pelvis, she applied to a person who professed surgery, and was by him advised to be salivated. He called to his assistance a physician, who likewise assenting, she underwent the operation by inunction at the person's house in December 1751. The salivation was kept up very copiously for above seven weeks, and her strength was thereby so much reduced that it was above six weeks more before she could be removed to her own house at only the distance of three quarters of a mile.

“ In consequence of the salivation the discharge stopped, and she felt a burning pain about the upper part of the sacrum in the region of the pelvis and womb. She had no difficulty then in discharging her urine, but was extremely costive and continued to be so: in the time of salivation she had the catamenia very freely, but not the least appearance of them ever afterwards. She soon became very uneasy, and felt in herself that the womb was larger than usual, occasioning a sensation of a bearing down on the perinæum, by which, together



gether with the violence of the pain, she could neither sit nor walk upright.

“ About six weeks after she had returned home she went to London, and had the advice of four physicians and four surgeons (belonging to one of the hospitals) one of whom was a man-midwife: *they were all of opinion that the disease was cancerous.*

“ She was ordered the use of nitrous medicines, gentle purges, and an injection, which was to be thrown up by the nurse; but finding she had no relief, they advised her to return home.

“ The pain had now increased greatly and raged with such violence that she could hardly contain herself, having never any ease or sleep neither day or night except when obtained by opium.

“ About a month being thus elapsed she applied to two other physicians as eminent in midwifery as any in London, they were also of opinion that it was *cancerous*—however they took her under care, in order to give all the assistance in their power. Clysters and gentle purgatives were ordered, an issue was made in  
each



each leg, but not discharging properly and being extremely painful they were soon dried up.

“ One of the physicians injected the uterus himself with the greatest tenderness, but the pain which she felt at each time being so extremely violent as to occasion faintings, and sometimes convulsions, he was obliged to desist and she returned home.

“ She next applied to the late Mr. Ward, who finding he could do her no good was so honorable as to tell her so, but rather too hastily added, that she had better go home to be knocked on the head by the surgeon who salivated her.

“ After this she had the advice of the physicians and surgeons of Guy’s Hospital, but her stay there was so very short, that such means as they recommended could not have time to take effect.

“ A foreign gentleman having first obtained a bond from the husband to pay him a hundred pounds if he cured her, took her next under his care: he attended her six weeks, during which time he gave her various medi-



cines, and a large syringe with directions to inject herself, but finding he gained no advantage of the disease, the case instead of being alleviated growing still worse, he resigned the bond and patient also.

“ Whilst she passed through this tragick scene, which was really more horrid than is here described, she was seen by several physicians and surgeons of great repute besides those mentioned; all enquired into the case, but none discovered means which gave relief.

“ Novemb. 22d, 1752, I was desired to see her, but when I enquired into the case I was afraid to meddle with it; however, being much importuned, I undertook to give her what relief I could.

“ Before I did any thing I waited on one of the physicians under whose care she had been, in order to be well informed of the disorder, and of the means which had been tried. The gentleman told me with the greatest candour not only the means which had been used, but that the case was judged to be *cancerous*.

“ I confess I was much discouraged, but to make good my promise I waited on her again and found her as follows. “ She



“ She was greatly emaciated, her pulse was low and quick; she said she felt a burning pain in the womb and all round it, sometimes as high as the small of the back; the uterus seemed to be as large as it usually is between the third and fourth month of gestation, and felt hard like a board. There was a little discharge which smelled foetid, and seemed to proceed from the cavity of the uterus.

“ There was also a little præternatural rising or prominency on one side of the cervix uteri, at a little distance from the orifice.

“ The pain was so extreme, that for many months she had no ease, and never slept except in short slumbers when intirely worn down by continual agony. I began the cure as follows:

No. 1. ℞ Salis Nitri purificati grana duodecim. Pulveris Chel. Cancrorum et Spermatis Ceti. Singulorum scrupulum unam, misce. fiat pulvis, sexta quaque hora, sumendus, in haustulo aquæ hordeatæ.

No. 2. ℞ Electuarii Lenitivi sesquiunciam. Pulveris Jalapii drachmas duas. Syrupi Rosarum solutivi quantum sufficit. misce. fiat Electuarium. cujus capiat quantitatem nucis Moschatæ nocte maneque, vel pro Re nata.



No. 3. ℞ Foliorum Malvæ. Artemisiæ.

Singulorum semiunciam.

Hordeatæ Perlatae uncias duas.

Coque in Aquæ fontanæ quantitate sufficiente ad uncias sex colatur. adde Adipis Anserini purificati uncias tres. misceantur, et fiat injectio pro utero.

“ One half of this injection was used in the morning and the other in the evening, the adeps being added at the time of using. Sometimes the syringe was filled with the adeps alone and injected last; it was applied to the cavity of the uterus by a syringe like that delineated in plate X. and in such manner as shall be described in the next chapter\*.

\* The manner of injecting the uterus ought to be properly understood by the person who attempts it, and should be done with a great deal of delicacy and caution; for the parts are sometimes from inflammation and disease so exquisitely sensible, that all rough management will be insupportable, and will not fail to augment the sufferings of the patient. That the applications to the cavity of the uterus itself are useful and necessary is evinced by the present case, and I do not see how a disease can be cured by local remedies, if they do not come into immediate contact with the seat of the disease. This is contrary to the advice of some respectable practitioners; Dr. Denman, particularly, who prohibits the attempt, and very possibly he might have



“ At first I could not pass the canula above a quarter of an inch within the os uteri, but in process of time, the passage through the cervix became more open, so that in a month's time about an inch and a half went readily within the orifice without giving pain, or even uneasiness.

“ This operation was continued about seven weeks. In fourteen days after it was begun the catamenia, which she had not seen the least sign of for above eleven months, appeared and continued near three days, though very little in quantity. I still persisted in using the injection, and continued it till the next return, which happened about the 28th day following. Then I desisted in order to know what nature would do by herself, and finding now that the catamenia were of a pretty good colour and quantity, that the uterus was lessened and not quite so hard nor painful as when I began, I only injected about a week longer and then left off.

have been influenced in giving this advice from a conviction of the incapacity of those who might sometimes undertake the operation.

“ During



“ During the seven weeks of this operation, especially at first, she felt such a violent pain through the whole region of the pelvis, as to make me suspect the seat of the disease to be sometimes in one part and at other times in another. The uterus pressed upon the neck of the bladder, and occasioned at times an uneasiness and difficulty in discharging the urine, and being examined by way of the rectum, it felt so very bulky and pressed so much against that intestine, as to make me conjecture that this was one reason of her being so extremely costive.

“ In short, the violence of the pain made her complaints so affecting, she often making use of this expression, viz. “ *that she had a fire within her,*” that I dreaded seeing her; but considering that the symptoms were not aggravated by the operation, that it rather alleviated them, that she was impatient for the time of my attendance, and that the cavity of the uterus felt more open, I was thereby encouraged to proceed.

“ The soft and cooling medicines were continued, an opiate was given when the pain  
was



was outrageous ; the body was kept open by the electuary, and when that failed other aperitives and emollient clysters also were given ; and moreover some of the uterine injection was sometimes thrown into the rectum.

“ She *now* could get out of bed and sit up a little, which was more than she had been able to do for several months before.

“ She sometimes complained of the pain being violent about the region of the kidneys, which made me try the following enema :

No. 4. R Terebantinæ communis semiunciam.  
Spermatis Ceti drachmas duas.  
Solve simul in Vitello ovi unius deinde adde  
Decocti communis pro Clystere uncias sex.  
misce.

“ As she thought that this gave her some relief it was continued once or twice a day, till having no effect ; thirty or forty drops of the tinctura thebaica were then added, by which she at first found considerable ease ; but this losing effect also, the tincture was increased to one drachm. Finding now that opium given in this way afforded more relief than when it was taken by the mouth, and not being certain  
but



but the continuance of the terebinthina might cause too much heat; I therefore directed the following :

No. 5. ℞ Mellis unciam dimidiam.  
Spermatis Ceti soluti drachmas duos.  
Tincturæ Thebaicæ drachmam unam.  
Aquæ Hordeatæ uncias sex.  
Misce, fiat enema pro re nata injiciendum.

“ This enema, the tinctura thebaica being at last increased to two drachms, was given at times to procure respites of ease, especially when she was exhausted by the pain, till the latter end of February 1753; at which time being well convinced she was better in every respect, I advised her to leave it off entirely.

“ She tried it, but having still a sensation of the burning pain, though not near to that degree as it had been; having enjoyed some refreshing slumber by means of the opiate, she importuned me hard for the liberty of having some of it by her: I therefore allowed her to take it in drops when she found the necessity urgent.

“ With this she went on till May, when at last taking it so freely as to an hundred and  
fifty



fifty and sometimes two hundred drops in a day and night, whereby she became continually intoxicated, I prohibited its use totally from an apprehension that it must hinder or disturb the efforts which nature seemed to be making towards a gradual recovery; for she was now manifestly in better health. She could walk and stand more upright though not quite erect; the catamenia had continued regular as to time, but were still very small in quantity, and but of short duration, which, as I imagined, was in some measure owing to the use of the opium. The uterus itself felt lessened, and not so hard, and there was no discharge.

“ The medicines beside those mentioned which were taken during this time were those of the nitrous and softest kinds; the body was kept open by gentle aperients, as the above electuary, manna, tamarinds, purging salts, &c. oleum amygdalarum dulcium being sometimes added, and when the costiveness rendered these and an enema ineffectual, aloetic pills were given; and when these failed likewise, which sometimes happened, an equal quantity



of argent : viv. being added (S A) they generally succeeded.

“ One thing I must here observe, viz. that I cannot find by my notes that she was ever bled during all this time; if she was not, experience makes me think this was an omission.

“ Having debarred her *now* from the use of opium, and she still feeling pain, which although *not* violent was yet hard to bear always, and being advised by some of her acquaintance to go to St. George’s Hospital, she accordingly went, and was admitted, and staid there about three months.

“ In a day or two after she had been taken in she was examined by one of the surgeons of the hospital, who had knowledge in midwifery, and who gave it as his opinion that he found neither disease nor any thing unusual in respect to the uterus.

“ She was now bled once or twice in a week in small quantities for some time, and then not so often. The medicines which she took were nitre, purging salts, manna, olenm amygdalarum dulcium, opium, and sometimes pills with the fœtid gums.

“ Not-



“ Notwithstanding the advantage of this very rational plan, conducted by the judgment of very experienced and skilful physicians, she returned home with nearly the same degree of pain. I thought that it appeared rather lessened, but she would not acknowledge it.

“ She continued an out-patient for some time, but finding the pain still continue, on the 26th February 1754, I was desired to attend her again.

“ I now found the uterus mostly, if not entirely, in the same state as when she went to the hospital, though the catamenia had still returned at the regular periods.

“ About six ounces of blood, which was very fizy, were now taken from the arm, and she was desired to take an aperient electuary, like that which was first prescribed.

“ On the 24th of March I ordered her the following pills :

No. 6.  $\mathcal{R}$  *Æthiopsis Antimonialis* (a *Pharmacopœia Doctoris James*) *Drachmas duas et dimidium.*

*Pulveris Rhei drachmam dimidiam, ucilaginis e Gummi Arabico quantum sufficit, misce, fiant pilulæ numero triginti quarum capiat duo omni nocte.*



“ These pills were continued to the beginning of July, during which time the body was kept open, and about once a week she took a purging draught or a dose of cathartic pills. She was also bled twice more, and the uterus was injected again during the space of about fourteen days.

“ After this she felt a violent itching within the pelvis, vagina, and labia pudendi; this pruritus being extremely troublesome, I desired her to wash the labia and syringe the vagina once or twice a day with the following lotion :

No. 7.  $\mathcal{R}$  Mercurii corrosivi sublimati.

Drachmam dimidiam.

Aquæ Calcis libram unam.

Mellis Rosarum unciam unam, misce.

“ As this gave her some relief she continued the use of it till August. In September a large issue was made by a caustic above the knee, which discharged plentifully. I also ordered the following electuary and water :

No. 8.  $\mathcal{R}$  Spongiæ ustæ unciam unam.

Salis Nitri drachmas duas.

Conservæ Rosarum rubrarum unciam Semis.

Syrupi



Syrupi simplicis quantum sufficiat, misceantur et fiat Electuarium de quo capiat quantitatem nucis Moschatæ bis de die superbibendo libram dimidiam aquæ marinæ.

“ This electuary and water were continued to the middle of November. She was now manifestly better, both in respect of health and to the abatement of pain.

“ In the latter end of January, 1755, and beginning of February, she was troubled with a difficulty in making water, for which she was blooded, and took some oily aperients.

“ The cause of this complaint became soon manifest, by a very natural enlargement of the uterus ; for the husband (with whom I had often joked) had played his part so well, that on the sixth day of June following I delivered her of a son, who is now alive, and since that time I have delivered her of five more children.

“ With respect to the uterus, I found nothing unusual, the placenta also was natural and came away easily ; the lochia were rather small in quantity, yet she recovered very well excepting that she felt a little sensation of heat  
in



in the region of the pelvis ; that continued till the birth of the next child, since which time she has felt nothing of it, and continues still in perfect health.”

Would this case give one any reason to believe Cancer is sometimes cured ? Or does it only shew the difficulty of determining when Cancer does exist ?

*On \*PRURITUS-PUDENDI MULIEBRIS.*

UNDER this term, which appears to me very appropriate to the complaint, I purpose to consider that violent itching which women frequently suffer about the parts of generation.

As this is not an uncommon complaint, and is, during its continuance, exceedingly distressing, I am surpris'd more notice has not been taken of it by modern writers on female diseases : by many, and I may say by most, it

\* I have preferred the term *pruritus* to *prurigo*, as used by Dr. Willan, since the former conveys a more correct idea of the complaint, it being a symptomatic and not an idiopathic affection.



has been entirely overlooked, and so much has not been said by those who have deemed it worthy their consideration as could be wished. I shall therefore on this occasion epitomize what has been said by others, as well as insert the result of my own observation and experience.

There are various causes capable of producing this symptom; sometimes it proceeds from insects, which when ascertained, can easily be destroyed.

It is well known that the pubis is affected with a violent itching from that particular species of insect called by Linnæus *pediculus pubis*. Though this does not come precisely within the character of the disease, I intend to take notice of, it will be right to mention it, as it will prevent a misapplication of remedies.

This may be known by the itching being particularly confined to that part, and by the presence of the insects, which on examination by those who have seen them are easily discovered: they are not peculiar to women.

Dr. Sims has recommended a neat remedy,  
which



which I have often found effectual, calomel mixed with starch-powder and applied with a swan-down puff. Calomel by itself would be preferable. Dr. Willan orders the unguent. mercur. fort. \* but as being a more disagreeable application the former is superior.

When these remedies fail, which will seldom happen, or when reasons exist which may in some measure contra-indicate the use of mercury, the following lotion will be found an excellent substitute :

℞ Staphisagriæ contus ʒʒ  
 Foliorum Nicotianæ ʒʒ  
 Coque in aq. commun. ʒxij. ut  
 Colatur lbʒ.

This should be used cold three or four times a day.

Insects likewise give rise to this symptom in another way, which is by ascarides passing from the rectum into the vagina, and even in some instances it would seem as if insects insinuated themselves into this cavity which do not come from the rectum.

\* *Vide* Willan on Diseases of the Skin, 1st Order, p. 107.



Dr. Sims has mentioned this among the internal causes which produce this affection, and recommends mercurial and aloetic purgatives. To these I must decidedly object, since they can do little good, even when the cause is known to be of this description. Of what use can it be to act upon the bowels in order to destroy the worms in the vagina? And when this is not the case, when the irritation proceeds from another source, which I shall presently mention, they are still further objectionable.

It is a most egregious mistake to confound, as has generally been done, this itching with another affection called furor uterinus. The greek and arabian physicians neglected to make this distinction \*, and supposed it proceeded from an abundance of acrid and salt humours; this has been noticed lately, however, by more accurate observers.

\* Huic congener est alter affectus qui dicitur pruritus matricis ab arabibus dicitur priapismus—Ætius, lib. 16. Cap. 82. vocant Satyriasm, et nihil est aliud hic affectus nisi ardens desiderium scalpendi, et ardens cupiditas coitus e dolore.

HIERON. *Mercur. de Morb. Mul. lib. 4.*



Dr. Willan, who has paid great attention to eruptions of the skin, and has taken notice of this complaint, likewise has considered them different \*.

Dr. Sims has enumerated among the causes of this complaint, varices of the veins of the pubis, venereal warts, apthæ, and fungous excrescences, piles, and schirrus.

With regard to *venereal warts*, it is a very doubtful matter indeed, whether this cause alone is sufficient, for in a thousand instances of this kind where venereal warts do exist, and are both numerous and large, no itching takes place; therefore most probably it is only a contingency, and not a principle of the disease.

Neither do I believe the apthæ which are generally found are any thing more than a consequence of the disease, for in other parts of similar structure they appear and do not pro-

\* Differt furor uterinus a pruritu uteri seu pudendi, pruritus enim iste in senioribus etiam ortus sine libidine et venere appetitu esse potest, &c.

See this quotation from Sennertus in Dr. Willan's work on Diseases of the Skin, p. 103.



duce this kind of irritation: the inside of the lip and cheek, for instance, is very liable to it from the slightest irritation. When this appearance is connected with pruritus muliebris, it is evidently the effects of those efforts, which from the insupportable itchings women are compelled to have recourse to for momentary relief\*.

Fungous excrescences in the urethra are not unusually the aggravating cause. I have met with instances of this myself, and it is very useful to be acquainted with the fact, since the remedies which in other cases prove sufficient, will here be of little avail.

The introduction of a bougie being a specific, this should authorize us to have recourse to it at an early period lest we should subject our patient to unnecessary discipline, and par-

\* Professor Lorry, in the quotation selected by Dr. Willan, expresses himself with much elegance and energy on this point. *Incremento malo, pruritus enormes fiunt per paroxysmos et summe violentos et sæpe recidivos ita ut nec pudor, nec reverentia regum a scalpendo divertant.*

The classical Reader will be well pleased with the style of this elegant Author.



ticularly when the meatus urinarius is the principal spot to which the irritation is confined.

The other circumstances, as piles, varicous veins of the pubis, &c. are merely attendants on the disease, and by no means constitute the disease itself.

This disease may with propriety be divided into two species; that which occurs during pregnancy, and that which takes place at any other period.

Though many authors have noticed this circumstance, viz. that women were liable to be thus affected only during pregnancy, no one, as far as I have been able to enquire, have given an explanation of the real nature of the complaint, which I conceive to be this.

When a woman is three or four months advanced with child, the uterus then begins to emerge out of the cavity of the pelvis; by this time, therefore, it presses more against the bones of the pubis, and this occasioning an interruption to the return of blood from the mouth and cervix uteri, occasions a fulness and congestion which give rise to this symptom.



In proof of this opinion, I have remarked it to be more common in women who had partial prolapsus than in others. I have likewise observed it much more frequent where the secretion from the surface of the vagina has been diminished. For in general women have a much larger secretion of mucus from the surface of the vagina two or three months after conception than before, owing to a circumstance which has been already explained in a former part of this work, namely, there being a greater determination of blood than was necessary for the nourishment of the fœtus during this early period of its existence.

Now as it is a physiological axiom that the secretion of any part is, *cæteris paribus*, in proportion to the quantity of blood distributed to it, this increased mucus is naturally accounted for; but in some women there is not a disposition in the part to adapt itself to these circumstances, and therefore the relief which might hereby be procured is lost. As a still further confirmation of the truth of this opinion, it will be found that there is considerable swelling about the parts of generation, the  
veins



veins are really, as Dr. Sims has stated various, and frequently the hæmorrhoidal vessels partaking of the same state, as being from their locality under the influence of the same cause, piles are no unusual concomitant. Though according to this idea the cure must principally depend on such means as are calculated to diminish this plethora, there are some points of consequence to be attended to in regulating this part of our practice, for though a congestion of blood in the vessels of the parts is the principal cause of the irritation, yet this irritation having been kept up for some time, may bring on such a sensibility in the part as may render topical remedies exceedingly necessary to remove the effects of its continuance.

With regard to bleeding where particular reasons do not forbid, most assuredly the highest benefit will be obtained from opening a vein on the pubis, which may be done with the greatest facility and without any ligature being applied.

I have drawn blood in this manner by the lancet, and the stream has flowed out to a considerable distance, and continued as long as  
was



was necessary without either ligature or pressure.

Bleeding from the arm is much less beneficial, because we are robbing the constitution of what it is not in a situation to afford ; and it is another fact worthy of consideration, that women of the most delicate irritable habits are the most disposed to this affection ; and as it is merely a local accumulation, the more directly blood is drawn from the part the better. Bleeding, therefore, though it becomes absolutely necessary to procure relief, may be attended with some inconvenience as far as regards the constitution, and therefore we should take particular care to enforce such an attention to the regimen and conduct of the patient, as will prevent the expediency of its repetition.

We should therefore be careful to enjoin perfect rest in a cool situation, and an horizontal posture, which is of the utmost consequence, and all the liquids which she drinks should be cold and weak ; the best, and which some have recommended as a remedy, is com-  
mon



mon whey \* ;—small doses of nitre given two or three times a day, which will be very useful; washing the parts about the entrance of the vagina with warm water is very beneficial.

This I know is contrary to common opinion, but I must declare upon my honour that I have found by experience the eligibility of the practice. I had at first prescribed cold water, but without effect, and the same patient found great relief from using it warm.

According to the explanation I have given of the effects of cold-bathing, this will not appear so wonderful, since the glow which succeeds may increase the heat; probably the warm water, by relaxing the surface and favoring the natural secretion of mucus, obtains this preference.

Though the cause of the irritation may be removed by bleeding, the irritation itself may not immediately subside, since it is undoubtedly true, as Dr. Fordyce has observed, that

\* Serum etiam lactis acceptum per os mirifice confert quia expurgat et ducit ejusmodi humores.

HIERON. *Mercur. de pruritu Matricis, lib. iv. ch. viii.*



a disease will continue after the original cause has been removed: with this view I have applied a blister to the sacrum, and with the happiest effect. Here too topical remedies will be of service; the following I have successfully employed, and will be found equal if not superior to most.

R Cremor. Lact. ℥ij.  
 Acet. Litharg. ℥ij.  
 Opii ℥j.  
 Infus. Theæ viridis ℥vj.

M. f. Injēct. et fistul. eburn. vel plumbeo injiciatur.

This will likewise be found of great use in this symptom when not connected or governed by pregnancy; the treatment of which I shall now proceed to consider.

I must first observe with respect to leeches, which I intended to have noticed under the consideration of blood-letting, that they are not adviseable, because they draw blood in a gradual manner, and rather tend to direct a flow of blood to the parts than to deplete the vessels already distended.

The Pruritus which attends pregnancy generally ceases some time before labour com-

L

mences,



mences, and does not return after the process is completed.

When this symptom attacks patients who are not in the predicament above alluded to, it may proceed from some of the causes already enumerated; by many it has been supposed to be the effect of acrid salt humour: of this opinion were almost all the ancient writers, and there is no solid reason for doubting the supposition.

Though this is unconnected with, and ought to be distinguished from furor uterinus, it may degenerate into that evil; to obviate this circumstance, various remedies have been suggested.

Ætius among other things recommended the head to be washed with vinegar of roses, which is no contemptible prescription; for as the intellectual powers are more or less affected, whatever will strengthen the sensorium will prove beneficial.

That the brain has an amazing connection with the organ of generation, may be shewn by a variety of facts.

Many persons who have been remarkably



ably chaste, and even indifferent to venereal pleasures, have so far changed their character in consequence of mental derangement as to become uncommonly falacious.

With regard to local remedies, saturnine applications with opium and cicuta are of use.

Some have advised the back \* to be anointed with cooling unguents. Ambrose Parey recommends ægyptiacum in sea water as a lotion with which he cured a person †.

Dr. Denman prescribes burnt sponge and nitre internally, with the aqua zinci, vitriol. cum camph. as a lotion; he says he has tried the plummer's pill and a decoction of sarsaparilla, but does not mention with what effect. These various remedies will be so many resources for the practitioner to avail himself of, but a great deal will depend on his judgment in detecting the cause.

\* Præterea dorsum unguentis rosacea vel refrigerante inungere proficuum est.

LUDOV. MERCAT. *de pruritu et furore Uteri*, lib. ii. ch. x.

† Me consultore Ægyptiacum in aq. marin. aut lixivio dissolutum. —————

—————Sibi syringe exprimi et injici. curavit.

AMBROSE PAREY, ch. lxiiiij. *De Uteri Pruritu*.



The use of a blister to the sacrum may be considered as the most effectual means of counteracting the irritation.

In concluding this subject, I must mention that I have not found it any indication of schirrus, and am happy to be supported in this opinion by the respectable character I have before had occasion to mention †.

Having in a former part of this treatise proposed to consider the uterus as a spongy vascular body, loosely situated in a cavity, and having hitherto attended to those affections to which from its vascularity it is particularly liable, I proceed to some remarks on that complaint which females are subject to in consequence of its being *loosely situated in a cavity*.

#### PROLAPSUS UTERI.

A Prolapsus Uteri is brought on by an almost infinite variety of occurrences, for whatever can weaken the ligaments by which this organ is connected, will be sufficient to occa-

† Dr. Sims.



sion it; hence running, leaping, dancing, raising considerable weights, or jumping from a great height, are the frequent causes, but the most general one is injury sustained from improper management during or subsequent to delivery.

The treatment of women during labour is a much more important office than it is even considered, for many entertain an idea that when a child presents favourably, and there is no deformity or want of room, that the business is very simple and trivial.

It is true where a person has sufficient judgment and discretion not to interfere but when it is necessary, the process is as safe as it is represented; but this is not the universal character of those who practice in this department.

In the course of my own experience I have met with several women who would not have had occasion to consult me but from this injudicious treatment.

The faculty with which the os uteri is dilated, is by no means proportionate to the violence of the labour-pains; to encourage a  
woman



woman therefore to *bear down* (as it is called) when this disposition to dilate is not present, is exceedingly wrong, though at the same time exceedingly common.

In order, likewise, to accelerate the delivery, a liberal quantity of some spirituous liquor is administered; thus the expulsive efforts are increased, whilst the very same remedy, by producing an inflammatory state of the habit, rather discourages and retards the relaxation of the os uteri.

I hope I shall not be misunderstood or be considered as levying an accusation against other practitioners; the censure is principally applied to female ones, among whom I have so frequently found the practice here reprobated, that I make no apology for the freedom of the observation.

The bearing down of the uterus in labour is often the consequence of another indiscretion, which is rupturing the membranes at an improper time.

No artificial contrivance can prove an adequate substitute for the protusion of the membranes. The gradual manner in which it proceeds,



proceeds, and the soft pressure of the liquor amnii are so important for accomplishing this purpose, that the labour is inevitably tedious when these advantages are lost.

The attempt to remedy this inconvenience is followed by worse consequences, for by the effort to dilate the mouth of the womb, and the repeated application of unctuous substances, that disposition is destroyed.

I will venture to assert there is no part which an accoucheur has to perform that requires more judgment, gentleness, or discrimination, than the dilating the os uteri when the waters have prematurely discharged; and therefore I trust I shall be indulged in dwelling a little longer on the subject, although it has so often been treated on by far more eminent authors.

The pressure of the membranes do not appear to me so much calculated to dilate the mouth of the womb as to preserve its capacity when it is dilated; thus as it begins to relax, the waters fall down and prevent its recovering its situation when an additional contraction takes place.

In



In imitation therefore of the effect, should the artificial assistance be regulated, if we use a greater degree of force we counteract our own purposes; for instance, in introducing the hand into the uterus, if it is not done with great gentleness and deliberation, we stimulate the muscular fibres, and a contraction takes place. The very same reasoning will apply; too much officiousness changes the disposition in the state of the os uteri, and renders it rigid, resisting, and unyielding; and by prolonging the object we are striving to obtain, forms the foundation of that disease, Prolapsus Uteri.

But though it is a fact which I have endeavoured to substantiate, that a Prolapsus Uteri may in many instances be attributed to want of skill and attention on the part of the practitioner, I think it incumbent on me to state, for the honor of the profession, that it frequently is owing to such a combination of circumstances as are not in his province or power to relieve: thus, for instance, if a person of a delicate structure, whose habits of life have been calculated to render the whole system  
weak



weak and effeminate, should sustain violent labour-pains from the extraordinary dimensions of the child's head, the ligaments of the uterus must inevitably be weakened by this process; and if in addition to this the hæmorrhage which follows the extraction of the placenta should be profuse, the constitution will be so far debilitated as to prevent these parts speedily recovering their original tone. It is in such instances that an attention to an horizontal posture during the period of convalescence should be strenuously enforced, and in proper time the use of cold salt water to the pubis, perinæum, and lumbar region, should be resorted to; for it is the *vis tonica*, as it is called, which is inherent in all muscular fibres that retains the uterus in its situation: hence it has happened that a sudden fright has instantaneously produced this complaint in women, who have not perceived any previous tendency to it. Under the circumstances above-mentioned, the appearance of this symptom reflects no discredit on the medical attendant; the observance of rest and a proper posture will depend on the patient herself, whose inattention to



these particulars will in all probability subject her to the inconvenience arising from this cause.

The Prolapsus Uteri exists in different degrees, in some persons being only partial, that is, it does not descend to the entrance of the vagina; in other cases it is even found protruding beyond this part, drawing the vagina along with it; according to these different stages it is more or less important and afflictive; in every state it requires attention, as it is the source of several very obstinate and dangerous complaints; when it becomes considerable it is attended with a sense of weight in the part, and from its attachment to the bladder, there is much pain and interruption to the discharge of urine.

This state demands immediate relief, as it not only is an impediment to every requisite exertion, but is liable to irritation, inflammation, and excoriation, from the motion of the body, and by overstraining the ligamentous attachment by which it is retained, precludes the possibility of their ever being capable of recovering their original tone.

When



When the uterus has been replaced, and there is no other circumstance to be attended to than its being kept in a proper place, a Pessary is the instrument most generally recommended. Of these there have been a number differently constructed, but as the flat circular, or oval pessary with a perforation in its center is that which is most commonly resorted to \*, it will not be deserving of our time to point out the peculiarities or the imperfections of others; let us therefore consider how far the pessary above described is adequate to the

\* The late ingenious Dr. Aitkin, of Edinburgh, has invented and recommended an *Air-Pessary*, which he considers as possessing in a superior degree the properties so requisite in this case, smoothness, lightness, and compressibility: his description of it is as follows.

“ The Air-Pessary is formed of a small bladder or bag,  
 “ soft and air-tight, with a valve at the orifice. It is  
 “ introduced and then duly inflated by the patient by a  
 “ long flexible tube, which is immediately retired. This  
 “ instrument while it is exceedingly light, fully occupies  
 “ the vagina, and supports perfectly the uterus.

“ When it is wished to retire it, the valve is forced and  
 “ immediately it collapses.”

Since I have written the above, I have made a practical application of the *principle*, though I have changed the *materials* here recommended, and find it infinitely superior to any other contrivances.



purpose, and what circumstances justify its application.

In the introduction of this instrument it is necessary to remember it should be so large as to give a firm support to the parts above it, and the part by which it is supported principally is the perinæum; where the uterus therefore has descended considerably either to the os externum or beyond it, the above position of the instrument is an evident advantage, as it prevents the progress of the disease, and enables the individual to go about with ease and comfort, but in slighter degrees of the same affection, this remedy is of no use, or rather this instrument is no remedy; it even does harm, for it does not act in such a manner as to replace the uterus in its original situation, and by the distention of the vagina this contractile power is weakened, an increased secretion of mucus takes place, rendering it still weaker, and thus it is prevented from being reduced to that diameter which it might have been by other means.

Every one therefore, in my opinion, must deprecate the use of the instrument under such  
circum-



circumstances ; for whatever may be said of the facility of its introduction, or the ease with which it may be worn, still it is a perpetual penance to the female who submits to it, as it occasionally requires to be changed and removed, and every delicate woman must feel forcible objections to the operation.

In the case I have just described, the want of this assistance is no loss, for the complaint can almost certainly be cured without it.

Astringent injections \* applied four or five times a day, seldom or ever fail to answer our purposes, if the patient is but moderately quiet, and willing to preserve an horizontal posture a few days.

The effect of these in contracting the dimensions of the vagina, has been known to some women of no very great reputation, who have made an application of the principle to purposes more censurable ; and though the

\* *Mulieres nonnullæ hujus adstrictionis recuperandæ a partu nimis studiosæ, cum maxime adstringentibus medicamentis intemperanter usæ fuissent in tantam vulvæ angustiam lapsæ sunt, ut non potuerunt in futurum virum admittere. — Vide Bennivenii Opera.*



practice is not mentioned for imitation, it will teach us how much may be expected from the efficacy of similar agents.

There is one class of people to whom the instrument above alluded to is more necessary, I mean washerwomen; the nature of their employment renders them exceedingly liable to this misfortune. And as their exercise and position is so extremely unfavorable to them in this respect, the use of the pessary may be recommended with much less restriction.

There is another complaint to which women are likewise liable, that bears a resemblance to what I have already described.

The complaint alluded to is Polypus, which as it is easily distinguished would not have required to be mentioned at present, but from the important consequences which arise from the mistake. The presence of the os uteri in the one case and not in the other, would alone be sufficient for the purpose of discrimination to those who are accustomed to an examination of that part; besides in Polypus the surface, as well as substance, is more irregular, and generally is larger at its extremity than the base, where



where it is often supported by a slight pedicle.

The treatment of this will hereafter be considered, and therefore it will be sufficient now to observe that not unfrequently these are connected, as Polypus when considerable will from its weight necessarily tend to procure a Pro-lapsus.

Dr. Wallace Johnson lays down the following method by which we are to distinguish these two complaints. “ In case of a Polypus springing from the uterus, a finger or rather a catheter may be insinuated the whole length of the vagina, and then moved sideways quite round; if it arises from the vagina, the instrument may almost be passed as high, but the root of the polypus will prevent its going quite round. Whereas in a protusion, the vagina is so much inverted and pulled down by the uterus, as to leave no passage but only a circular sulcus about half an inch deep within the fossa magna; something is to be discovered likewise by passing the catheter into the bladder, for in a protusion this viscus is displaced, as above observed, but in case of a  
“ polypus



“ polypus its position is generally natural,  
 “ and there is no suppression of urine.”

From what has been delivered, there will be seldom much difficulty in determining the nature of the complaint.

Before I quit the subject, I must just briefly recapitulate what I have advised, that where the complaint is of considerable duration, a pessary is an instrument very eligible and essential, but in the incipient state, useless and even prejudicial.

Fluor albus is a very usual concomitant of this disease, which it has a tendency to increase, and for this pessaries are hurtful; where the use of astringent injections are at once calculated to remove both.

### Of MOLES.

Though the term *Mole* has been familiarly employed by almost every writer on female diseases, there is no word which hath been the cause of greater confusion, and is so indefinite in its signification ; every substance which has  
 been



been expelled from the uterus (except a well formed fœtus) has been classed under this general denomination. This fact alone will justify my saying something on the subject, even if there was no other reason for introducing it as a part of this dissertation. From not properly defining the term, it has probably happened that the generality of authors have considered Moles and false conceptions as synonymous \*, and similar in their source and consequences. This is an error of very considerable magnitude, since it not only misleads our understanding, but may injure in a material degree the reputation of the person who may chance to be the subject of the complaint; for women who have never had connection with a

man,

\* Si vero (inquit Avicenna) fuerit uterus frigidus semen mulieris frigidæ coagulatur, coagulatum non in fœtum *sed in molam* convertitur.

HIERON. *Mercur. de Morb. Mul.*

*Ob defectum formatricis, gigni Molam, et e defectu nasci vel propter uteri aliquod vitium vel seminis ipsius.*

AVERRHOES *Opera.*

Ex quibus evidenter constat duplicem hujus mali existere causam, alteram copiosam sanguinem ac fortasse fœculentum, crassum et omnino ineptum. quem natura ad men-



man, are undoubtedly liable to such accidents as have been classed under this appellation \*.

That this observation is correct there can be no doubt, for polypus of the uterus was considered as the same disease, and none of the old practitioners made the distinction till the time of Monf. Levret, who has written the best work as yet published on this subject; nay the term Polypus is not even mentioned by them as a disease affecting the uterus.

This remark is at least correct with regard to the works of Baptistus Montanus, Zacutus, Lusitanus, Paulus Zacchius, Felix Plastruam purgationem tanquam inutilem adservaverit copia et natura a foetus perfectione alienum; alteram vero, *vim seminis formatricem imbecilliozem.*

LUDOV. MERCAT. *de Morb. Mulier.*

\* Cum plerique doctorum hominum suspicati fuerint, imo pro certo habuerint, molam non posse absque viri concubitu gigni; contra tamen, sentientibus aliis doctissimis pariter ac praecipue auctoritatis viris.

ZACCHÆI *Quaest. legal.*

Licet forte et Virgines et viduae Molam aliquando ut dixi absque ulla pudicitiae nota gestaverint ut ex historiis patet relati per Schenck. suas *Observ. lib. 4. titul. de Molis.*

ter,



ter, Moschion, Nicolai, Rocheus, Ludovicus, Bonaciolus, Hieronymus Mercurialis, Ludovicus Mercatus, Ambrose Parey, and several others which might be here enumerated; their silence being ascribable to this, that under the description of Mole the disease polypus was often represented.

In order to make a proper distinction, we may separate these different appearances under three general divisions.

The first. Polypus—which may in some respects be considered a part of the uterus itself.

The 2nd. False Conception, by which must evidently be understood that which is the product of sexual intercourse; and,

3dly. Any other substance contained in the uterus not necessarily preceded by that operation.

Polypus will hereafter be separately considered, and therefore I shall not at present make any remarks on the subject.

With regard to False Conception, this has been in general the Mole which has been expelled, whose formation may easily be ex-



plained ; for when a woman has conceived, it sometimes happens that after she is somewhat advanced in pregnancy, the fœtus dies, and becomes withered and blighted. After a time the placenta and its appendages are thrown out of the uterus, and this has been in general the *massa carnea* of the ancients.

Under the third division are comprehended substances of different consistence and appearances ; all coagula of blood are here included, and are the most common substances of this class; but very often a calcareous concretion has been formed by the surface of the uterus\*,

\* *Extincta Hippolita, Gaza Corrigiense, doloribus uterinis diu vexata cum febre, lapis incredibilis magnitudinis, gypsæ consistentia multo nigerrimo mucore innatans, dissecto utero extractus fuit.*

*Marcell. Donat. Histor. Mirab. lib. 4. ch. 50.*

Habemus domi lapides excisos folliculo fellis, stomacho et Utero.—*Gemma Cyclogn. 1. 2. ch. 6.*

Observavimus concretos in capite, in Utero Mulieris cui disseccandæ in Scholis Medicorum publice præficimus.

*Scholiogr. ad L. 48. Holler.*

Several other Authors have bore testimony to the fact.—  
Vide Thom. a Vega, Holler inter rariora, Marsilius de Sophia, Alex. Benedict. Wierum de Præstig. &c. &c.

and



and has acquired bulk by the deposition of more matter to its surfaces.

These remarks will undoubtedly be found necessary and useful in regulating our prognostic, and directing our practice ; but the most important reason for my mentioning the subject was, to point out the distinction between the symptoms of pregnancy and those arising from other causes, which may be ascertained by the following circumstances.

In the case of a Mole, the first sensation sometimes is a lump or weight inclining occasionally to one side or the other ; whereas under pregnancy, particularly in the first child, many disagreeable symptoms take place previous to any sensible enlargement ; for as conception is an important process begun in the female constitution, it becomes sensibly influenced by it, previous to any enlargement in the capacity of the uterus.

Here then is one evident distinction ; for the inconveniences which arise from a Mole are in consequence of its size, and it is obvious that any substance of considerable bulk must be merely on the principle of mechanical irritation,  
and



and distension, influence the parts in which it is contained, as well as those which are contiguous.

Now as there are several parts of the body which have a particular sympathetic connection with the uterine system, so in consequence of its enlargement, from whatever cause, the breasts in some measure have a correspondent action and become enlarged likewise, but this we shall find will furnish us with another mark of discrimination.

2dly. When the child quickens, or to speak more correctly, when the motions of the child are so powerful as to be felt by the mother, the motion is so different from the motion of a Mole, as not to be possibly mistaken by an attentive observer. The child moves when the woman is quite still, its motions are also not confined to one part, but are felt sometimes to the left, sometimes to the right, without the woman having changed her posture or situation. This never happens in a Mole, which, though it moves from one side to another, is only in consequence of the body having inclined in the same direction; hence



hence the uterus by its weight has a degree of motion, not being strictly confined by the surrounding parts; but this, as might be expected, is a sense of weight rather than motion, and if the patient herself has any experience in child-bearing, she will be very competent to ascertain the difference.

3dly. The enlargement of the uterus is not so gradual, nor the symptoms so regular as from pregnancy. A Mole not being supplied with blood-vessels and nourishment from the uterus, does not receive that addition to its bulk which the foetus does; hence the period of time during which these symptoms has been observed will be an important distinction, for as the uterus may be distended to a certain degree without any material detriment, instances have been frequently recorded of Moles having continued for some years without any increase or alteration of size, and been ultimately expelled without danger\*.

4thly.

\* Ratum est apud practicos, molas si solæ sint, sæpe non solum plurimis mensibus, sed et plurimis annis in utero hærerent. — Vide Boneti Sepulchretum.

Vide



4thly. The feel of the abdomen will be another method of detecting the difference; the uterus is more solid, compact, and unresisting to the touch when there is a Mole than in the case of a foetus; for as a foetus must necessarily be protected by the waters in which it is contained, and as they are more in proportion to the size of the child when young than when it is further advanced, consequently the impression must be more soft and elastic than in the former instance.

5thly. With regard to the alteration of the Breasts. In pregnancy, these begin to enlarge about the third or fourth month, and continue firm and full till the period of delivery, when a still greater distension takes place; and from the great determination of blood to the part, milk is secreted; but under the influence of Moles, though at first some slight uneasiness and swelling takes place, it very soon subsides, and never amounts to any thing considerable; inasmuch that many authors have even stated it as a mark of discrimination, and

Vide quoque Hildani Opera. Geo. Hamberges. Disput. de Mola uteri. Holler in Schol. de Morb. intern. Josias Floriatus Belnensis derp. de Mola matricis Dionys. Font. de Morbis internis.



assert that there is no milk, and that the breasts are not affected at all by Moles.

All these circumstances therefore being considered, we shall not be at a loss to determine when our opinion is required, whether a woman is big in consequence of having a child, or enlarged from such other substance as comes under the denomination of Mole.

The effect of this disease on the constitution is in a great measure regulated by the size. When it is very considerable, the distension of the uterus necessarily deranges the general health, and the event terminates fatally, as from its size it cannot be expelled. This was the opinion of Hippocrates, which has been confirmed by subsequent practitioners.

However, Moles of very considerable bulk have been supported for several years. Bonetus in his valuable work called Sepulchretum, mentions an instance of one which continued for fifteen years, and was upwards of three feet in circumference. Another case is recorded in the same author of a person who had one for seventeen years, and was discovered on dissection. In this instance the Mole was



the size of two fists clenched, and the uterus itself was become thickened.

With regard to the cure of these complaints, little can be done by medicine; the object to be accomplished for the relief of the patient is to procure an evacuation of the contents of the uterus, and here artificial assistance may be to a degree serviceable.

On this part I must be allowed to lay some stress, from a firm persuasion that much more may be done than is generally attempted.

I do not hesitate to assert, that some practitioners are not sufficiently accurate in their investigations into the causes of abdominal swelling, which proceeds from such different and dissimilar sources, are so various with regard to the organ affected, so precarious in their event, and require a treatment so peculiar and distinct in one case from what it does in another, that no satisfactory plan can be pursued, till the nature and specific character of the disease are clearly understood. To enumerate every individual circumstance giving rise to abdominal swelling, would not only be digressing from my subject, but extend the publication



lication far beyond the moderate limits originally assigned to it. I shall therefore only point out those in which the uterus is concerned, and this with a view of illustrating and confirming the observation made above, *that more might be done than is generally attempted.*

The uterus becomes enlarged in consequence of an accumulation of blood in its vessels, which being connected loosely by cellular membrane, has not sufficient support to resist distension. This is one cause, and has been treated of at some length already.

Again, the uterus becomes enlarged from a quantity of water contained in it, and gradually receiving addition to it; this generally from hydatids where the water is contained in cells like a bunch of grapes, or sometimes contained in one general cyst. Air likewise has been so confined as to enlarge the cavity of the uterus.

In an infinite variety of cases, coagula of blood have been retained, and acquired firmness and solidity, and this when pregnancy or labour have not contributed to their formation.



A *Polypus* also, of which I shall presently speak more at large, has so occupied and distended the uterus and abdomen, as to give the appearance of a person far advanced in pregnancy.

I have brought these facts forward (which every practitioner knows to be true) in order to shew how much depends on a proper discrimination of the cause; for of what use would it be to administer alteratives or mercurial preparations when the enlargement proceeded from *Polypus*, or even from *Hydatids*, or some of the other causes mentioned above? The principal relief must be by gradually dilating the os uteri so as to afford an exit to the substances contained. When water merely is contained, this will prove sometimes a radical cure; and where substances not so likely to pass, constitute the tumor, it is evident they cannot be removed in any other way.

To cure a person of a mole, therefore, whatever may be the particular nature of the thing itself, this will be one object in view to favor the dilatation of the mouth of the womb; and,



2dly. Another object will be to increase that disposition in the uterus, whereby it is rendered capable of disencumbering itself of those impediments.

The first of these points can be best accomplished by the judicious introduction of the finger. All instruments are undoubtedly improper\*.—They are, *in the first place*, more formidable to the patient.

2dly. We cannot ascertain with so much exactitude the force we make use of, on which the success of our efforts materially depend; and,

3dly. We shall be much more liable to bring on inflammation by the use of these hard bodies.

\* Various contrivances have been recommended and delineated by preceding writers, which rather shew the uncouth and bold practice, than the judgment of our ancestors. The Gryphon's Talon was a name given to a three-pronged instrument contrived by Avicenna for this purpose; others have used forcipes of different structure, but which are now justly laid aside, as well as that instrument by which their operations were then facilitated, the Speculum Matricis, of which a representation is given in Ambrose Parey's works, though this might on some particular occasions be desirable.

With



With regard to the manual management, great care must be taken not to make greater exertion than can be conveniently borne, which will be very different, according as the os uteri is more or less thickened or diseased; and possibly it will only be after several efforts that we shall be able so far to dilate the mouth of the womb as to admit the finger.

The second general indication, that of increasing the expulsive efforts of the uterus, will be effected by frictions on the abdomen repeated two or three times a day with some emollient liniment. The precise form of which is not of such particular moment as the friction made use of.

The use of injections thrown into the cavity of the uterus itself, such as the following :

℞ Infus. Semen Lini. ℥vij.  
 Mel Rosar. ℥j.  
 Acid Vitriol. dilect. g. xx.  
 M. f. t.

This, or detergent injections of a similar nature should be thrown up with a proper syringe in order to stimulate the sides of the uterus, which is effected not by any peculiar property



property in the injection, but merely by its mechanical action on the inside of the uterus; by this means we shall succeed in accomplishing the removal of those substances, which, though inclosed in its cavity, do not adhere to its sides; but when this even is the case, though the same treatment will not answer every requisite purpose, it will be beneficial *quoad hoc*.

It will encourage the protrusion of it, which we may afterwards be able to complete by the application of ligature.

This leads us naturally to the consideration of that complaint called Polypus Uteri.

### *Of a POLYPUS UTERI.*

The term Polypus, though it is not exactly applicable to the disease I am about to describe, on account of its resemblance to the animal so called, yet having by general consent been admitted, we are authorized to continue it: by this is understood *a fleshy substance attached to a part to which it does not naturally belong, and deriving*



*deriving from thence its nourishment and increase, by continuation of vessels.* It is found occasionally in different cavities of the body, as the heart, the nose, the bladder, &c. but more frequently the uterus and vagina than in any other situation; and here it is produced, no doubt, more frequently than has been discovered, from its having been generally mistaken or described as a Mole, the impropriety of which term in the present instance has been productive of much negative evil.

Whoever will take the pains of perusing the writings of the ancients (and they are in many instances the most valuable repositories of medical facts) will find the truth of this observation sufficiently confirmed.

Let us then enquire into the cause of this complaint. It is exceedingly difficult to determine what constitutions are the most liable to these occurrences, and it is even probable that no general predisposition of the habit can be assigned as a reason.

The cause therefore must be searched for in some peculiar organic affection, or some local injury received by the part from which it takes  
its



its rise ; for this opinion there are sufficient grounds of probability, as I shall presently endeavour to prove.

The idea most generally entertained however is, that it is owing to a viscosity of the fluids, in consequence of which the circulation was retarded, and the constituent particles of blood were hereby collected into a degree of compactness and solidity, which being once begun, received a daily increase from the additional particles applied to it.

This supposition was first started by De Goetz, and has been maintained by succeeding writers.

De Goetz has endeavoured to support his theory by maintaining that the most important principle of which the blood was composed were the gelatinous particles, that these were the source of nourishment and growth, and that an abundance of these, by overstraining the slender tunics of the vascular system, weakened their contractile power, and occasioned the accumulation mentioned \*. Now, the

\* This is not the opinion of De Goetz *merely*, as may be seen by the following quotation. “ Dicitur autem



the very foundation on which this reasoning is erected proves its imbecility, for if this idea was correct, it should follow that these complaints have most frequently originated where the situation was most favorable for such deposition. We should find it far more commonly in the liver or the spleen, than the heart or uterus; for in the two former, these causes surely are more powerful.

Indeed one can scarcely conceive how it can be produced in the heart, which is in continual action, and where the deposition of particles could scarcely be permitted to take place; besides there is another objection to the doctrine, for Nature has been so provident as to guard against these contingencies by means of *Polypus, concrementum aliquod fibroso-membranaceum, quod a parte sanguinis gelatinosa, et terrestri productum, vaporum cavis inhæret.*

ADOLPH. ROHMER. *de Polypis. generat.*

Whoever wishes to pursue the subject more minutely, may consult the following authors.

Albinus in dissert. de Polypis, Snell. dissert. de Cordis, Polypo. Tulp. lib. 1. Observ. Med. J. N. Pechlinus, lib. 2. Malpighius dissertat. de Polypo Cord. Bergenus de Polypo. Schulzin. de præcavendis Polyporis Concretionibus.

the



the absorbing system, which would soon remove a superfluity of this kind whenever it occurred. Sometimes indeed in glandular parts congestion takes place which may seem as an objection to this proposition, but there is then an evident debility in the absorbents, they are themselves the part affected, which has not and cannot be proved to be the case in Polypus. For these and several other reasons which might be introduced, I think it is obvious the supposition of a deposition of particles is very unlikely and untenable, nor should I have dwelt so much on its improbability, but that it is the fundamental establishment of the author's conclusion.

Polypus I conceive to be occasioned by a displacement of muscular fibres from their connection with adjoining parts.

In support of this idea we have only to consider the texture and composition of parts wherein it is found.

The heart, for instance, is a muscular substance of a loose spongy texture, its fibres not being so united by cellular membrane, as the muscles in any other part of the body.



It may be considered even as a muscle sui generis, from the peculiarity of arrangement discernible in its structure, the œconomy which it possesses, the very function it has to perform, renders this necessary, as it varies considerably in the different states of contraction and dilatation.

Now as every portion of muscular fibre should in its action be synchronous with each other; if one part is weaker than the rest, it must be acted upon by the surrounding ones, by this means it is in some degree displaced, and as it is weakened by the compression, there is less chance and less power for it to regain its situation.

Here then is laid the foundation for the disease, the possibility of which is very plain, for do we not find in many instances that one part acts more powerfully than another? Does not the irregular action of the uterus, the hour-glass contraction, as it is called, bear testimony to this, and therefore is it not likely to occur in other cases?

Admitting it therefore to be so far correct, the further progress of the disease can easily be  
accounted



accounted for, one portion being displaced, the pressure produced by the adjoining fibres, by the vis tonica inherent in a muscle, must act as a stricture on the part: thus the circulation through it becomes impeded, and as we know that vessels will enlarge their capacities to a considerable degree, hence its growth and increase of bulk necessarily follow; besides, where is polypus found? In the cavities of muscular parts, where one might, *a priori*, expect it to be formed.

And with regard to polypus of the uterus in particular, the violence and distension which the part undergoes from pregnancy and labor, prevent our being surpris'd at finding such occasional displacement.

Whether this supposition be erroneous or correct is however not of the highest importance, as it does not appear from any investigation of the cause that we are enabled to prevent or anticipate the mischief.

I have asserted that Polypus is found in different cavities of the body, its presence in the uterus and vagina is the present subject of inquiry, and to these it is differently attached,  
being



being sometimes to the fundus, the sides, or the mouth of the womb; sometimes to the upper, and at other times to the lower portion of the vagina, and therefore in giving our opinion in these cases with regard to the chance or facility to the cure, there are several circumstances to be considered.

- 1st. The part to which it is attached.
- 2dly. The shape of the tumor, as whether it is a small or large pedicle, whether it is of a moderate or immense size.
- 3dly. The nature of the tumor, as whether it has an apparent tendency to cancer or not.

We shall consider each of these circumstances. When a Polypus adheres to the fundus of the womb, it is generally somewhat advanced before it is discovered, and the event of the case depends entirely on the disposition of the mouth of the womb to dilate.

It is very obvious that there is great difference in this respect in women, as every individual but slightly acquainted with midwifery must admit; for even at the times when nature intended it should open, sometimes we find it very rigid and reluctant to obey the impulse, whilst



whilst with others it is much more pliable. If there is this difference under such circumstances, much more should we expect it to occur when the above cause does not exist; hence therefore, as the os uteri does not begin to dilate, while at the same time the Polypus continues to enlarge, the bulk of the uterus must increase likewise, and having acquired certain dimensions, the probability of its expulsion becomes daily more improbable and impracticable; for having acquired a considerable bulk, it is not so well adapted to the purpose of wedging in (if I may be permitted to use so coarse an expression) to the neck of the womb, and as it becomes distended it lays the foundation of other diseases, occasioning dropsy of the uterus, &c.

The following case will serve as an instance:

### C A S E.\*

A young woman after having been delivered of a healthy living child, still suspected from

\* Vide Boneti. Sepulchretum. lib. 3. sect. xxxi.

The author adds, the uterus was so distended that it was supposed a boy of ten years of age might be easily concealed in its cavity.

the



the enlargement of the abdomen that another remained ; her size however did not diminish, and she continued for a year or two tolerably free from pain, when she again became pregnant, and was again safely delivered : however after this she daily increased in size to such an enormous bulk, that for two years previous to her death she was above three yards in circumference\*.

Various conjectures were entertained on the subject, and after her death she was opened. As soon as the abdominal muscles were divided, the uterus appeared to view so wonderfully enlarged as to fill the whole abdominal cavity, pressing forcibly on every other viscus therein contained, rendering them much smaller than natural.

On cutting into the substance of the womb, which was apparently healthy, but somewhat thickened, a large quantity of water was thrown out that had been confined by a tumor attached to the inner part of the neck of the womb, somewhat resembling the shape of an apple, and so completely occupying the neck of the

\* Tres Ulnas Bavaricas in ambitu.

womb,



womb, as effectually to prevent the egress of the fluid.

Here then is a clear illustration of what I advanced, that the retension of a Polypus was owing to the contracted state of the os uteri. There seems to have been no other interruption to the exit of the tumor.

It will not be strictly in place, perhaps, to consider what ought to have been done here, and whether the practitioner who attended in the second labor, ought or ought not to have taken that opportunity of examining what was the occasion of her previous symptoms; but we cannot help supposing, that such an occasion was very favorable; and that a ligature might have been successfully applied to the basis of the tumor.

This case, however, will furnish some other reflections. It shews to what extent the uterus may sometimes be enlarged, when that enlargement is gradually produced, and more especially when by means of a fluid. It is probable I think from many facts which have been transmitted to us likewise, that the fluid gives to the uterus a disposition to dilate, by

Q

relaxing



relaxing its fibres, as accumulations of this kind have been greater than any thing else; hence Dropsy connected with Polypus is a more dangerous event, especially when it is situated at the mouth of the womb.

Another circumstance which it would be wrong to overlook, is the freedom from pain during her illness; a most important fact this in governing our prognostic. We see here a woman, who from having been with child had a uterus much more disposed to dilate than would have been the case had she never been impregnated. Nature may be said to have been deceived, till the discovery of her error was beyond her power of recovery; had there not been this tacit submission in the uterus, had it contracted on its contents, the expulsion of this foreign body might have been effected, and thus we find the want of pain was a disaster, and her present ease proved her future destruction.

But to continue the subject of Polypus, arising from the fundus of the uterus.

This, though it may at first sight seem the most disadvantageous position, on account of  
the



the difficulty of administering instrumental assistance, is not in reality so dangerous ; for in the first place as it increases, its weight bears down towards the os tinæ ; by this means it gives to that part an inclination to dilate, whilst it draws down the fundus encouraging its contractile and expulsive efforts. This is very different from the effect of a fluid, as in the above instance ; for as that increased, it pressed against the sides of the uterus, forcing it upwards, but in this case the uterus is in some measure prevented enlarging.

Likewise as the tumor protrudes, it is more likely to become smaller at its pedicle, and then when once it has passed the os uteri, the contraction of that part proves a natural ligature, and often produces a spontaneous cure.

This effect has very often in this manner been accomplished, and even when the process has not been completed, it has so far succeeded as to render artificial help much more practicable.

As soon as the disorder has acquired this state, that is to say, as soon as the Polypus is protruded through the mouth of the womb, it



becomes a much more manageable case; it is even desirable, inasmuch as it enables us to understand by examination, what is the cause of the patient's grievances, as well as allows of a remedy almost certainly efficacious.

It now is frequently attended with irregular discharges of blood, for as the mouth of the womb interrupts the circulation, it renders the veins varicous below, and from time to time the vessels, unequal to the distension, burst and pour out a fluid; as this is not of course governed by any particular change of constitution so as to regulate its return, it shews how attentive we ought to be to every irregular discharge, and how adviseable an examination per tactum must be, where this and other phænomena indicate danger; for when a complaint of this kind occurs, very little can be accomplished by medicines. They may even do harm by determining a larger portion of blood to the parts, and occasioning an inflammatory disposition.

The cure must be effected either by the natural expulsive efforts, or by ligature, or incision; it cannot be doubted, therefore, that



a great deal will depend on early examination. How this should be done it is not here in place to mention, as every one who undertakes it is supposed familiar with the operation, only it is to be observed that in doing this we are not searching for something extra-uterum, we should therefore by gentle, yet moderate efforts gradually insinuate the finger into the os uteri, which often betrays a tendency to open that may easily be improved, and hereby discover whether there is any thing which may be thus removed. This examination is necessary for another reason, the uterus itself is very liable to induration, and gives to the feelings of the patient the same sense of weight and uneasiness, and therefore to determine with any degree of confidence the patient's situation, it is requisite to call in the aid of actual examination.

Some will possibly object to this practice from an idea that it is likely to injure the mouth of the womb, but the object is important, for if the case should prove to be polypus, the dilatation of this part becomes absolutely necessary for its extraction. Another  
 remark



remark here presents itself, it may and does happen that at the same time there is a schirrous induration of the mouth of the womb, there is a polypous excrescence within; a superficial examiner might therefore decide too hastily on the nature of his patient's situation, if on his feeling the os tinæ somewhat thickened, he should pronounce it the sole cause of her suffering, though it may justly be admitted as adding to the danger of her situation.

When we have ascertained in this manner that there is some substance preternaturally contained in the uterus, the next object is to attempt its removal, which is either to be done by ligature or incision; the former method is more safe, easy, and practicable, and is therefore universally preferred. The facility and success of this practice, as already stated, depend materially on the pedicle by which it is supported. Two essential points are to be considered, the one is not to mistake polypus for any other complaint; secondly, not to include a portion of the uterus together with it.



Polypus may possibly be mistaken for a prolapsus uteri, as this very frequently takes place ; and when treating on prolapsus uteri I endeavoured to shew in what respects this was different from Polypus, and by referring to that description, the reader will be enabled to discover the points of discrimination.

In addition to these remarks it will be right to add, on the authority of *Monf. Levret* who has written so happily on the subject, that the application of a pessary will be likewise a method of discovering the difference, for as prolapsus is a displacement of parts from their natural position, the use of this instrument when first introduced gives a very comfortable feel, and affords at least temporary relief ; but when Polypus is the part thus endeavoured to be supported, the patient's sufferings are augmented, the pressure of the instrument on the tumor itself gives great uneasiness, and by forcing upwards the parts above, the inconvenience is still greater, and the wearing of it painful ; we shall hereby be prevented, then, from that fatal error of including the uterus in a ligature, instead of the excrescence we expected.



pected. When we are operating on a Polypus proceeding from the fundus, we are still more regulated in our conduct, for we must first of all examine with a finger or probe, passing it round the base of the tumor, as high up as we can reach, and search for the os uteri, surrounding the neck, observing at the same time whether it at all adheres, and if the finger can be inserted between the one and the other. This is a very essential enquiry, as the ligature ought never to be applied, unless we can be certified of the uterus being distinct.

That most celebrated accoucheur (Dr. Hunter) at one time made a mistake of this kind, which for the benefit of posterity he was candid enough to acknowledge, and therefore it teaches us that we cannot be too circumspect when placed in a similar predicament.

It is even better to include only a part of the tumor, when we cannot mark the distinction between the one and the other, as is very difficult sometimes where the tumor arises from the os uteri, by elongating which, the tubercular and natural feel of the part is lost and seems blended with the tumor, so that it is almost



almost impossible to say precisely where the one terminates, and the other begins.

Under this state of parts, we must be governed by the distance from the attachment of the superior part of the vagina, as well as the gradual diminution of the size of the Polypus; for instance, the os uteri we know projects a little way, about half an inch into the vagina naturally, if therefore the ligature is applied half an inch lower than this, the uterus will be tolerably secure.

I purposely omit describing the instrument necessary for the performance of this operation, conceiving it insufficient to instruct the reader without he has been able to see them, and the manner of their application, as taught in the schools of anatomy.

When the Polypus arises from the vagina, the treatment for the most part is more easy, and will admit even sometimes of incision; or if it is even of a solid base, it will be much more easy to include it in a ligature by passing a needle through its centre, and thus securing the compression without danger of its slipping.



Under every operation of this kind, the principle being to obstruct the circulation and produce a mortification of the parts below, it will be necessary to twist the wire a little tighter every day, proportionably to the ulceration which has taken place.

From what has been said then it appears, that the Polypus *in* the uterus is the most dangerous occurrence, as it is uncertain whether it will protrude through the mouth of the womb or not; that its adhesion to the fundus is better than to the sides or upper part of the cervix, because it will have a great tendency in this situation to limit the expansion, and favor the opening of its mouth; that though Polypus in the cavity of the uterus frequently lays the foundation of dropsy, and thus renders the complaint more complicated, yet that when the Polypus has passed the neck of the womb, the chances of success are reversed, nature being of herself in many instances competent to the cure, and mechanical assistance being more applicable and certain.

As to the second proposition, a great deal unquestionably depends on the size of the swelling,



swelling, for independent of the greater difficulty of fixing a ligature, the time required for it to produce its effects on a large substance, which is to be destroyed by ulceration, is such that the patient sinks under the process (however fair its progress) before it is complete.

3dly. The nature of these tumors are of different tendency, and are not unfrequently cancerous. This may be suspected to be the case, when at the same time the os uteri feels thickened and enlarged, more especially if the Polypus is of an irregular surface like a wart.

Likewise frequent hæmorrhages from it with fœtor, shew its texture is broken down by some morbid fluid.

As we cannot expect to eradicate this disease by extirpating the tumor, we can indulge little hope of a perfect recovery.



DROPSY *of the* UTERUS.

It is very remarkable that a disease which is not very uncommon, should have been so much neglected by modern writers. Dr. Denman, whose talent for description no one can deny, has said very little on this complaint, and others have been entirely silent, as if it were not an accident liable to happen; from this circumstance perhaps it may require more particular consideration, as well as from the great importance there is in accurately distinguishing each particular species of abdominal distension, and the serious consequences which may and have ensued from want of clear conception and correct evidence on this subject. It will be right, in the first place, to consider the nature and cause of this disease, and afterwards to mention those to which it bears the closest resemblance, pointing out at the same time the diagnostic symptoms, as far as I am able, peculiar to each.

It has been supposed by some practitioners that dropsy seldom took place in this organ  
but



but from an accumulation of Hydatids, as the ready outlet to the fluid from the mouth of the womb, would effectually prevent the increase of the disorder; however plausible and even just this opinion may appear, circumstances do occasionally concur to produce it,

The mouth of the womb is sometimes closed by tumors in its cervix, or above it, by a thickening and sometimes by an adhesion of its sides, and when an effusion in its cavity is produced, the disease here treated of must be the consequence.

So far then it is a very possible occurrence, inasmuch as the causes above assigned are such as are known to be not unfrequent.

It is highly probable there often exists a tendency to the complaint, and that it would be by far more common were it not for the natural outlet of the os uteri.

Fernelius knew a woman, who for some time during every period of menstruation discharged six or eight basons of water; at last, by the use of medicines, this was corrected. She became impregnated, and the child was  
very



very healthy, and she likewise continued free from relapse\*.

The cause of this complaint is sometimes such as produces dropsy in other parts of the body, as diseases of the liver, spleen, stomach, &c. but in by far the greater number of cases is solely to be ascribed to a morbid affection of the uterus itself, or at least is frequently without visceral derangement.

Miscarriages, as being attended with a greater hæmorrhage in general than natural labour, is one cause that gives rise to it. A long obstruction and interruption to the menstrual evacuation, is followed by this effect, which may very easily be conceived; for as there may hereby be occasioned a fulness of the uterine vessels, the more fluid parts will be determined in greater quantity to the exhalants. This is also the more likely, as the freedom with which the menses flow is very different in different constitutions. The rigi-

\* Vesalius has recorded the case of a person he examined, from whose uterus he removed sixty measures of water, the os uteri being completely obliterated by a tumor.

*Vide VERAC de Corp. Human Fabr. lib. v. g. p. 627.*



gidity in the vessels is sometimes such as to prove very obstinate and unmanageable, giving rise to a train of symptoms, and bidding defiance for some time to the best regulated and most judicious treatment. There may not only be a fulness in the uterus, but at the same time a constitutional plethora, determining more blood still to the uterus, and adding to the cause above alluded to. This, with several other causes capable of increasing the determination of fluid to the extreme vessels, may lay the foundation of dropsy. Sometimes nature is capable of relieving herself by her own efforts, as the uterus by contractions at the usual period of gestation, endeavours to exclude whatever may be contained within it. Various cases are upon record, where the progress of this affection has given rise to the idea of pregnancy. The same general increase of size, and likewise several attendant symptoms corresponding to that state, having concurred to strengthen the opinion, till a discharge of water has proved the fallacy of the expectation.

Hildanus relates the case of a woman who supposed herself several months advanced in pregnancy,



pregnancy, till one night in conjugal intercourse with her husband \* she felt something burst; which was followed by a great effusion of water; on which the enlargement immediately disappeared, and she remained free from any subsequent inconvenience †: but it is not the same happy termination befriends every one. Women having died from want of help from this dropsical accumulation, the following case is perhaps not inapposite to the assertion.

A woman fifty years of age, who had always been regular in menstruation till she was

\* *Ut dum noctu cum marito rem haberet, impetu quodam, &c.*

*Vide HILDANI Observat. liij.*

† Zacutus Lusitanus mentions the history of a woman, who from an obstruction of the menses for seven months, became so large, that every one thought her pregnant; at the end of eleven months, six or seven pints of water continued daily to flow away from the uterus, without any pains, excepting an itching of the belly.

*ZACUT. praxis mirabil. lib. 2. Obs. 152.*

Laurentius Joubert has recorded a similar case, where at the end of nine months the symptoms disappeared by a discharge of water.

*JOUBERT. de Urina.*

forty-



forty-five, began to find her abdomen enlarge. Supposing herself dropfical, ſhe uſed diuretic medicines, and imagined they leſſened the ſwelling; it however ſhortly returned, and increaſed, and at the end of four years ſhe expired. On diſſection, the lungs, liver, ſpleen, and other viſcera, were found perfect; the uterus was the part which occaſioned the enlargement. In the cavity of the cheſt was contained a quantity of water, which it is poſſible, by producing ſuffocation, was the immediate cauſe of her death. But an incision being made into the uterus, *upwards of ſeventy pints of water were found in it.* From the perfect ſtate of every other viſcus, this is ſuppoſed to have entirely originated in a diſeaſe of the uterus. It muſt here be added, like- wiſe, that there was a glandular enlargement in the neck of the womb, about the ſize of a hen's egg; and what is a little ſingular, the uterus adhered in ſeveral places to the peritonæum, covering the internal parietes of the abdomen.

Several other inſtances could be brought forward, but they will be unneceſſary to prove,



what is too true, that women sometimes die from this disease; for even if we say the water in the chest was the immediate cause, the swelling of the uterus, by its pressure on the vessels, must be admitted as giving birth to this\*.

In this, as well as one formerly related under the article Polypus, where water was likewise found, there was a cause fully sufficient to prevent the escape of the water; and it may be questioned whether, if such a circumstance did not exist, the efforts of nature would not be always equal to the expulsion of the contents, therefore an inattention to the patient's situation may prove no final detriment; but as we may possibly mistake it for pregnancy, or abdominal dropsy, and in consequence of this supposition have recourse to an operation to evacuate the fluid, our primary enquiries should certainly be directed to ascertain the real nature of the case.

There are several complaints, indeed, with which dropsy of the uterus may be confounded.

\* This curious Case is taken from Bonetus.



These I shall enumerate, with the characteristic symptoms whereby they may be distinguished.

1. Dropsy of the Ovarium.
2. Ascites.
3. Pregnancy.
4. Tympanitis Abdominalis vel Intestinalis.
5. Tympanitis Uteri.
6. Enlarged Mesenteric Glands.
7. Retained Menfes from imperforated Hy-men.

All these occasionally occur in practice, and some very frequently. With regard to the first, or Dropsy of the Ovarium, it differs from it, in being more slow in its formation; it likewise has this peculiarity, that at its commencement a lump may be felt on that side where the diseased ovary is situated; and, thirdly, the health of the patient will remain a long time unaffected by it. The menfes likewise continue regular, sometimes even a woman shall conceive, and be safely delivered, after the ovary has been distended with dropsy; and this process being completed, the progress of the complaint may be continued without seeming to be sensibly influenced by



such an event. To this we may add, that when ovarial dropfy is fo great as to make the abdomen quite tense, the fluctuation may be felt by a person accustomed to the examination in a much more clear and decided manner, than where the uterus intervenes.

A lady came to consult me a few weeks ago, who had an ovarial dropfy for several years, which was now so considerable as to occasion great inconvenience, the muscles being apparently ready to burst; on applying the tops of the fingers to one side, and tapping the opposite part of the belly in the gentlest manner imaginable, the fluctuation was exceedingly perceptible, and was of itself sufficient to leave no doubt where the water was contained.

From *Ascites*, it is to be distinguished by this being frequently connected with visceral disease, as obstruction of the liver, by the general health being more disturbed, by fallowness of complexion, by the thirst attendant on it, and by the breasts being unaffected; for in dropfy of the uterus, as indeed from any cause almost, by which the uterus is enlarged, the breasts begin to sympathize, and become full.

This



This does not continue long, 'tis true; they again become flaccid. As these two circumstances above stated are the most likely to be mistaken, it is the more important to remember the characters laid down.

It will scarcely be necessary to point out the symptoms peculiar to pregnancy; every worthy matron deems herself a competent judge in deciding this question. It is only to be wished that their hopes may not influence their judgement, as the disappointment must be proportioned to the force of the persuasion\*. Two things therefore may be laid down as not unworthy their recollection, the flaccidity of the breasts, and the want of colour around the nipple. I will not add the want of motion of the child, as there is great room for deception in this respect.

In distinguishing it from *Tympanitis*†, the  
elastic

\* Dr. Lowder mentioned a case in his Lectures of a Lady who was so anxious to have a child, that being examined on account of some abdominal enlargement, which she ascribed to pregnancy, and finding it was not, her disappointment brought on mental derangement.

† Under the term *Tympanitis*, I here include every species



elastic feel peculiar to the complaint is chiefly to be depended on ; swellings of this description are likewise liable to much variation of size, and as their diminution is usually accompanied with a discharge of wind, this likewise is another singular feature ; when this takes place from the uterus, which is perfectly involuntary on the part of the patient, little doubt or obscurity can afterwards continue.

cies where wind is the distending cause. The Tympanitis Intestinalis is the most ordinary species, and affects, in a certain degree, a great number of people : it has a peculiar dependance on affections of the uterus, for whenever menstruation is irregular or obstructed, these flatulent swellings ensue. This is very remarkable at that period of life when menstruation ceases. The bowels are then always more or less affected. Air is secreted in large quantities, occasioning great uneasiness. Though I have stated above, that there is a discharge of wind produced when the swelling subsides, this is not uniformly the case, the air being re-absorbed. They arise from a want of tone and energy in the stomach and bowels, and are relieved and generally cured by aromatics, bitters, and cordials. If, therefore, this is supposed to be dropical, and remedies prescribed with a view to evacuate the water, the views of the practitioner will be baffled, and the patient's complaint aggravated ; for all drastic purgatives are pernicious, and diuretics are not serviceable. The use of the Peruvian Balsam may almost be denominated a specific.



The next thing laid down as resembling the disease in question, viz. Enlarged Mesenteric Glands, do not so frequently exist in that degree as to occasion the deception. I have however seen an instance of it, where the whole abdominal cavity was filled by them. There are scarcely any limits to the distension of parts, when they once assume a disposition to enlarge. The ovaria are a sufficient proof of this, for who could suspect that two bodies so small could by any possible change of structure contain such a quantity of fluid as in many instances they are found to do? The same is the case with the Mesenteric Glands; they are not, however, very similar to dropsy of the uterus, being firm, solid, unyielding, and ponderous, by which characters they will generally be detected.

The very possibility of a mistake where the error is important, should be guarded against, and therefore I have mentioned the enlargement from the menses being retained, as constituting a species of abdominal swelling to be distinguished from Hydrops Uteri. This is not very unusual, there being a considerable  
number



number of well authenticated cases now upon record, and some few have come within my own observation. This has often been injurious to the reputation of the patient, who has been suspected of being pregnant: its principal phenomenon is the periodical return of pain and uneasiness, being correspondent with the periods of menstruation, for the discharge being prevented by the want of a natural aperture, a gradual increase of size is the consequence. There is likewise a continual sense of weight, or bearing down. These circumstances will lead us to suspect the real state of the case; and as this never happens after menstruation has been regularly effected, this will afford another presumptive proof.

When we have so far ascertained the case as to understand it is a dropfy of the uterus, we are at the same time to recollect that there is great variety with regard to the circumstances under which the disease may exist.

If the water is contained in the uterus, as it is in the abdomen under Ascites, that is to say, in one general sac, there is great probability of a natural cure, supposing the obstruction

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tion at the mouth of the womb, such as may be easily overcome. When the fluid is contained in small vesicles, the chance of this event is much less. It has been supposed by some respectable authority, that whenever water was contained in the uterus in considerable quantity, and came away without any vesicular appearances, it was only an enlarged hydatid burst.

I will not attempt to support or disprove this opinion, for the result is still the same. One hydatid so enlarged will be much more likely to burst from its distension, from the contraction of the uterus, or even from the motions of the patient, than a cluster of hydatids, where each is supported by the side of another; and this unfortunately is the most common occurrence, supposing even the water to be retained by an obstruction to the mouth of the womb. In the former case, it will be possible for the most part to give it vent, by the introduction of a catheter; no prognostic, therefore, can be given till the mouth of the womb be examined per tactum. If the os uteri is considerably thickened and

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enlarged,



enlarged, if more especially there is discovered to be a fungous or polypous excrescence, there is much less chance of our being able to remove it, for besides the impediment to its evacuation, the schirrous induration must increase the effusion, and I am inclined to believe that general dropfy of the uterus is most frequently attended with this state of parts.

There is, in my opinion, a great distinction to be made between Dropfy of the Uterus arising from hydatids, and that which does not; the latter is the effect of organic disease, the other owing merely to the accidental deposition of the *tænia hydatigena*, which animalcule naturally provides itself a watery receptacle in whatever part of the body it is found. This being a secretion of the insect itself, is not necessarily accompanied with disease, and the contraction of the uterus takes place sooner than it would do in the latter case. When hydatids are the cause, the expulsive efforts of the uterus are followed by a serous or bloody discharge, for as they are attached to the sides, their separation is usually accompanied with some degree of effusion; hence we see a patient's



tient's sufferings may be much curtailed by prudent assistance in detaching that from which nature is not fully able to extricate herself: and here it will not be necessary to wait for that dilatation of parts requisite for a foetus to pass. Therefore when a person who from an increase of bulk seems several months advanced with child, is seized with pains similar to labour, accompanied with a coloured discharge from the vagina, these having continued some time without relief, it will be adviseable to propose an examination; and if we discover the cause to be what is now under consideration, we should use gradual efforts to remove it, which if not too powerful, will not be productive of hæmorrhage.

#### *The CURE.*

The cure of Dropsy of the Uterus must consist, as in other cases, in evacuating the water, and preventing its return. In that species which I have mentioned as a general dropsy of the part, the use of diuretic medicines will prove beneficial; purgatives are not proper, as determining more fluids to



these parts. Spt. Nitri dulc. given in the quantity of a drachm three times a day, is one of the best medicines with which we are acquainted, for promoting the secretion of the kidneys. Warm frictions on the abdomen, continued for ten or fifteen minutes each time, and repeated twice or thrice a day, prove likewise advantageous; they tend to forward the circulation through the uterus, and to encourage its contractions: this is an important acquisition. I have already stated that there is a disposition in the uterus to act at the end of nine months, whether it is much distended or not, yet in many instances it has been found to exceed that term, and even to have lost that power which is inherent in it, and this is owing to the gradual manner in which the pressure is produced, or from the debility of its fibres.

To obviate this, nothing is more efficacious than the means proposed of rubbing the abdomen. Flannel moistened with spirits of wine, may be applied to the belly every night, and supported by a bandage moderately tight, which will be useful in preventing by its pressure

fure



sure the increasing expansion of the uterus. The application of salt and water is a remedy of great efficacy; it should be a strong saturated solution, and should be applied cold. The irritation of the salt upon the surface of skin, has a most invigorating and tonic effect. Nothing promotes absorption more powerfully, and as the energy of the viscera depend materially on the state of the skin, so the excitement of the extreme vessels in this case is communicated to the uterus, rendering its actions more vigorous, its fibres more tense, and its absorbents more active. If these methods prove unsuccessful, and the bulk of the patient is considerable, we should use emollient injections. Let the patient sit every night over the steam of hot water, and we must endeavour, by prudent management, to introduce a catheter into the uterus. During the whole of this discipline, there is one thing to be particularly regarded, which is, keeping the feet warm and dry. Numberless are the cases wherein, from a neglect of this attention, has originated menstrual obstruction, and the various train of evils consequent upon it. How to explain this



this is perhaps difficult ; it is not the quantity of perspirable matter checked that can sufficiently account for it, probably it is from the balance being destroyed in the circulating system. When the disease is connected with much debility, we should likewise have regard to the general health, and administer bark and chalybeates. With regard to diuretics, though I have recommended Spt. Nit. dulc. as a very useful medicine, we should be influenced by the constitution of the patient in this respect ; for instance, in cold indolent habits, medicines of the turpentine class will be preferable to the neutral saline medicines, as the kidneys may require a more powerful stimulus than is produced by the latter.

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