

Practical observations on the more obstinate and inveterate venereal complaints / by F. Swediar M.D.

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PRACTICAL OBSERVATIONS
ON THE MORE
OBSTINATE AND INVETERATE
VENEREAL COMPLAINTS.

By J. SWEDIAËR, M.D.

—SI QUID NOVISTI RECTIUS ISTIS,
CANDIDUS IMPERTI; SI NON, HIS UTERE MECUM.
HORATIUS.

BRISTOL ROYAL INFIRMARY

BRISTOL ROYAL INFIRMARY.

L O N D O N:

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and C. ELLIOT, Edinburgh.

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ADVERTISEMENT.

BEING a foreigner, it will not be expected that the author could write the language with elegance or strict propriety. Respect for his readers induced him to endeavour to get this defect supplied by another hand; but he had the misfortune to be disappointed in this particular, and disappointed in a way that did not admit of his getting it remedied. He is made, however, to believe, that the work will be sufficiently intelligible; and if so, he relies upon the candour of the public for overlooking some trifling inaccuracies of style.

LONDON, Dec. 1. 1783.

Newman Street.

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PRACTICAL OBSERVATIONS
O N
VENEREAL COMPLAINTS.

Ad recte medendum omnino opus est, ut remedia, non solum generi, sed speciei
cuique, et sæpe etiam varietatibus quibusdam, apprime sint accommodata.
CULLEN, *Synop. Nos. Method.*

C H A P. I.

*Observations on Venereal Infection, and the different
appearances of Syphilitic Complaints in general.*

WE say that a person is poxed, injured,
or infected with the venereal disease,
or syphilis*, when the venereal poison
has been received into the system, and there pro-
duces its peculiar effects. These effects or symp-
toms are ulcers of the mouth, fauces, and skin,
cutaneous eruptions, tetters, pains and swelling
of the bones, &c. But as long as the effects of the
A poison

* Whether the name *Syphilis* is derived from *ovis*, *porcus*,
and *philis*, *amor*, as if you would say, *amor porcinus*; or whe-
ther it owes its origin to some other derivation, is uncertain.
In French it is called *La maladie venerienne*, *La verole*, or
Grande verole; in German, *Lustseuche*; in Latin, *Lues ve-
nerica*.

poison are confined to the genitals, the disorder is not called a syphilis, lues venerea, or pox ; but distinguished by some particular names, according to its different appearances ; such as a gonorrhœa, chancre, bubo, &c.

Concerning the nature of the venereal poison, we know nothing more than we do about that of the small-pox, or any other contagion ; we know only that it produces such and such effects, which yield to a particular mode of treatment. Like other contagions, it requires some time after being applied to the human body, before it produces that *fermentation* (if I may be allowed the expression) which brings on the disorder. It is not known whether the poison has different degrees of acrimony and volatility, or whether it is always the same in its nature, varying only with regard to the particular part to which it is applied, or according to the different habit and constitution, or particular *idiosyncrasy*, of the person who receives the infection. We know that mercury possesses a certain and specific power of destroying the venereal virus : but we are quite uncertain, whether it acts by its sedative, astringent, or evacuant quality ; or if not rather by a chemical elective attraction, whereby both substances uniting with one another, are changed into a third, which is no more hurtful, but has some new properties, entirely distinct from those of the two former.

The variolous contagion, we know, produces its effects in about twenty or twenty-four days after the infection is received from the atmosphere, and eight or ten days if by inoculation. But with
regard

regard to the venereal virus, we are less acquainted with the period. At some times, and perhaps in particular persons, it requires a longer time to produce its effects, than at other times, or in other persons. I have seen chancres arise in the space of twelve hours, nay in a still shorter time, indeed I might say a few minutes, after impure coition; whereas in others they make their appearance only in as many days. The generality of men feel the first symptoms of a gonorrhœa on the second, third, or fifth day after an impure coitus; but there are cases where they are not observed till after as many weeks or months. About ten years ago, I was consulted by a person in whom a violent discharge from the glans, along with a phymosis, but without any chancres, took place four weeks after infection; though, during all that interval, he felt not the least symptom of the disease. Some years ago a young man went out in seemingly perfect health to the East Indies; but on his arrival in that hot climate, after a voyage of four months, a violent gonorrhœa broke out before he went on shore, though he could have received no infection during the voyage, as there was not a woman on board.

How long the venereal poison may lurk in the body itself, after it has been absorbed into the mass, before it produces any sensible effects, is a matter of equal uncertainty. There is scarce a practitioner who has not observed instances of its remaining harmless for weeks, or even months, in the body. I have had access to observe a case, where, after lying dormant for half a year, it

broke out with unequivocal symptoms. But the following instance is still more extraordinary. Some years ago I was consulted by a gentleman about a sore throat, which I declared to be venereal. My patient was astonished, and assured me, that for nine years past he had not had the least venereal complaint, nor had any reason to believe he had since received any infection. But at that time he had been in the East Indies, where he laboured under a virulent gonorrhœa. On his return to Europe, being to appearance in perfect health, he married, and continued perfectly free of any such complaint ever since. By a mercurial course, however, the complaint for which he applied to me was completely removed.

In some persons the venereal poison more particularly attacks the throat, where it produces ulcerations; while in others it exerts its virulence on the skin or bones. Whilst the greatest part of mankind are thus easily affected by this poison, there are some few who seem to be altogether unsusceptible of the contagion, and run every risk without suffering in the smallest degree; just as some cannot be infected with the variolous contagion, though they go into infected places, and expose themselves to every hazard by which the disease is generally communicated. Some are more liable to be infected than others seemingly of the same habit; and those who have been once infected are more liable to catch the contagion a second time, than those who never were infected before with the disease. The same difference is observable in the progress made by the disease after the patient

tient is infected. In some the progress is slow, and the disease appears scarce to gain any ground; while in others it advances with the utmost rapidity, and soon produces the most terrible symptoms.

At what time this dreadful malady, the very idea of which poisons the source of happiness, was first known among mankind, is a matter I cannot pretend to decide. Even the time of its first appearance in Europe, and whence it was imported thither, is uncertain. Thus much we may venture to affirm, that we have no authentic proofs of its having existed among the ancient Greeks and Romans; though these undoubtedly were as licentious as their posterity, whether barbarous or refined. Some distempers are mentioned by ancient writers, which might seem to intimate the existence of the venereal distemper from the earliest antiquity. Such are, perhaps, the *discharge* mentioned in the book of Leviticus, the disease of Job, and that related in the Psalms of David; the *corroding ulcers of the prepuce and glans*, the *discharge of thin sanious matter from the penis*, the *mortification and cancer of the penis*, the *phagedænic ulcer of the same*, the *warts of the prepuce and glands*, *condylomata ad anum*, the *swelled testicles arising without external contusion*, all mentioned by Celsus, l. vi. cap. xviii. *De obscænarum partium vitiis*, and described as obstinate diseases, and hardly curable without the hot iron. But whether these have been modifications of our more modern syphilitic complaints, or disorders of a quite different nature,

nature, is what I cannot take upon me to determine.

That the venereal disorder, however, did really exist in Europe before the return of Columbus from his first voyage to the Caribbee islands in 1493, is not only probable, for the reasons alleged by Dr Sanchez, in his *Dissertation sur l'origine de la maladie venerienne*, and in his *Examen historique sur l'apparition de la maladie venerienne en Europe*; but confirmed to me, though contrary to the opinion of Dr Astruc, by the 4th law given in the manuscript statutes, *De disciplina Lupanaris publici Avenionensis* (Avignon), made in the year 1347, by Queen Joanna I. After other regulations, the law proceeds thus: “Jubet Regina
 “Sabbato quilibet a Bayliva una cum chirurgo a
 “consulibus proposito, mulieres meritorias singu-
 “las lustrari; quotcunque in lupanari prostant.
 “Et si qua scortatione ægritudinem ullam con-
 “traxerit, a cæteris seponi ut seorsim habitet, ne
 “sui copiam facere possit; ut morbi præcaveantur
 “qui a juvenibus possent concipi.” Which may be thus translated: “The Queen further orders, that
 “every one of the women kept in that bawdy-house
 “should be visited every Saturday by the mother
 “abbess, together with a surgeon appointed by the
 “magistrates for this purpose; and if there be any
 “who have contracted some disease by *scortation*,
 “the same should be separated from the rest, and
 “be shut up in a private room, so that she may not
 “lie with any man, in order to avoid by these means
 “the disorders which might be communicated by
 “her to young men.” See Astruc *De morb. vener.*

p. 34. But all this will be made very soon still more probable from the light thrown on the subject by the learned and ingenious Dr *Hensler*, from old authentic manuscripts discovered by him.

It is a question, whether the venereal poison can be absorbed into the system, without a previous affection of the genitals or some other parts of the surface of the body; and indeed this is with me still a matter of doubt. Though I have for fifteen years examined all the cases which fell under my inspection, with a view to determine this question, I have not met with one well-authenticated fact which could determine me to take the affirmative. I have never seen a single person affected with this disease for the *first* time, without some previous appearance, either of a running, or a venereal ulcer, in some part or other of the body, especially of the genitals; though indeed I have met with several instances where the patient had imagined himself radically cured of such complaints long before. In some cases, I have, on a close examination, discovered very small venereal ulcers, where the patient himself knew nothing of them; in others, where the patients have asserted, that they were infected without any previous disease of the surface, they have, on a strict inquiry, confessed that they had either had chancres, or ulcers of a doubtful nature, on the thigh, scrotum, &c. or even the pox itself, one, two, or more years before, though they had long imagined themselves perfectly and radically cured. I have indeed been told by some eminent physicians, that buboes sometimes arise without any previous run-

ning or ulceration; but as no such case ever fell under my inspection, I must still remain in uncertainty.

It has been asserted, even by some late writers, that this disease may be caught by lying in the same bed with or after an infected person. But this, from the most accurate observations and experiments I have made upon the subject, I have never been able to confirm. Nor do we ever see nurses infected in the Lock Hospital, where they live night and day with patients in all stages of the distemper. The fact seems to be, that patients are apt to impose upon themselves, or upon physicians and surgeons, with regard to this matter; and the above opinion easily gains ground among the vulgar, especially in countries where superstition is more prevalent, or where they are more influenced by their servile situation in life, or other circumstances. Hence we sometimes hear the most ridiculous accounts given in those countries, by friars and soldiers, of the manner in which they were infected with this disease.

Another question, which I am equally unable to decide, is, Whether the venereal poison ever infects any fluid of our body besides the mucus and lymphatic system? Hence I am in doubt, whether the venereal poison in an infected woman ever affects the milk, and consequently whether the infection can thus be conveyed to the infant by the milk alone, without any venereal ulcers on or about the nipples. It is equally a matter of uncertainty to me, whether the venereal disease is ever conveyed from an infected father or
mother,

mother, by coition, to the future foetus, provided their genitals are sound; or, whether a child is ever infected in the uterus of a diseased mother. Such infected infants as came under my observation, and that of my friends, whose practice affords them frequent opportunities of seeing new-born infants, seemed rather to militate against the opinion. Neither I myself, nor any of my friends, have been able to observe ulcers of a venereal kind upon children when first born; and such as make their appearance four, six, eight, or more days afterwards, on the genitals, anus, lips, mouth, &c. or the discharge like a gonorrhœa, which sometimes takes place in them, may probably be supposed to arise by infection, during the passage, from ulcers in the vagina of the mother, the skin of the infant being then nearly as tender as those parts which are not covered with the cuticle in adults; and this is perhaps the only time when an absorption of the venereal poison might take place without a previous excoriation or ulcer of the skin.

All the ways, therefore, by which the venereal poison may be communicated from an unhealthy to an healthy person, may be reduced to the following heads.

1. The most frequent method is, by the coition of an healthy person with another who is infected, either with a venereal gonorrhœa, or venereal ulcers of the genitals.

2. By the coition of an healthy person with another apparently healthy, in whose genitals the poison lies concealed, without having yet produced
any

any bad symptoms. Thus, a woman who has perhaps received an infection from a man two or three days before, may, during that time, infect, and often does infect, another man, without having any symptom of the disease visible upon herself; and, *vice versa*, a man may infect a woman in the same manner.

3. By sucking. In this case, the nipples of the wet nurse may be infected by venereal ulcers in the mouth of the child; or, *vice versa*, the nipples of the nurse being infected, will occasion venereal ulcers in the child's nose, mouth, or lips.

4. By exposing to the contact of the venereal poison any part of the body either covered with the cuticle or not, by kissing, touching, &c. especially if the parts so exposed have been previously excoriated, wounded, or ulcerated, by any cause whatever. In this manner, we frequently see venereal ulcers arise in the scrotum and thighs; and there are some well-attested instances where the infection took place in the hands of midwives or surgeons. I have likewise seen venereal ulcers produced in the nostrils, eye-lids, and lips, of persons who had touched the genitals either of themselves or others affected with the gonorrhœa or venereal ulcers, and then rubbed their nostrils, &c. with their fingers, without previously washing their hands.

5. By wounding any part of the body with a lancet or knife infected with the venereal virus. In this there is a similarity between the venereal poison and that of the small-pox. We have several examples of the latter being produced by bleed-
ing

ing with a lancet which had been previously employed for the purpose of inoculation, or of opening variolous pustules, without being properly cleaned afterwards; and Van Swieten relates several instances where the lues was communicated by a similar carelessness in cleaning the instrument used in bleeding or scarification. We had last year a melancholy example here of a young lady, who having drawn a decayed tooth, and replaced it with one taken immediately from a young woman apparently in health, was soon after affected with an ulcer of the mouth. The sore manifested itself to be of a venereal nature: but such was its obstinacy, that it resisted even the most powerful mercurial remedies, terminating at last in a caries of the maxilla, with a most shocking erosion of the mouth and face, by which the unhappy patient was destroyed; and all this without the smallest disorder being perceived in the woman from whom the sound tooth was procured.

No branch of the medical art has, to my knowledge, received so many valuable improvements from modern practice as the treatment of the different venereal complaints; and I believe, that, amongst the various diseases to which mankind are subject, there is none of which the cure is now more easy and certain than the venereal disease, if properly and judiciously treated; but when neglected, or unskilfully treated, it is often rendered obstinate, and sometimes nearly incurable: and it is a well-known truth, that many people suffer more, and have their constitution broken, by preposterous treatment in this disease, than perhaps
by

by the disease itself, if they had applied nothing at all. Yet there is scarce any disease whatever in which more people pretend to skill than this; and, amongst the whole herd of quacks, there is scarce one who does not pretend to some superior knowledge, or to the possession of some particular nostrum, which he sets forth as an infallible remedy for this disorder in all its various stages. Thus, with consummate impudence, he imposes on such patients as have the misfortune to fall into his hands, and who sooner or later are generally sure to suffer severely for their credulity. It is, however, certain, that to be able to cure this distemper in all its various stages, requires not only a great degree of judgment in the choice and dose of the medicines, but likewise such a thorough knowledge of the constitution of the patient, as is not to be obtained but by a long experience and judicious observation. Hence more than common abilities are often requisite perfectly and radically to cure a confirmed lues, or venereal complaints which have been preposterously treated. The great number of unfortunate victims to ignorance and rapacity, which we daily observe, are but so many confirmations of the truth of this assertion.

From the most authentic accounts, it cannot be doubted that venereal complaints were formerly much more violent, dreadful, and even not unfrequently fatal. This is generally imputed to the more malignant nature of the poison at that time; and it is imagined that afterwards it grew more mild. But this seems to me to be destitute of any solid foundation. I have seen the disease, and all
its

its different shapes, not in ten or twenty, but in hundreds of instances, as violent and inveterate as ever described by any author of the 16th or 17th century. All that can be said is, that we see those dreadful complaints now more seldom in Europe in general. This, I think, is not owing to the difference of climate, as some might imagine; but to the improvements made in the treatment of this disease, and more especially to the enlightened principles of humanity spreading all over Europe, and happily succeeding the barbarous superstition and cruelty of former times. We no longer abhor or expose those poor unhappy wretches on the dung-hill, or let them die, as the Kalmucks do their brethren and children affected with the small-pox, without giving them the least assistance: both sexes, being in our times less exposed to the prejudice of others, apply sooner for relief, and get the same easier by more humane and better instructed persons; and I am persuaded it is owing principally to this, that the disease is not only less frequent, but in all its different symptoms less violent, in this capital, than in any other in Europe. People of the lower class have not only so many hospitals or dispensaries, where they get advice and medicines from unprejudiced, instructed persons, for nothing; but those of the female sex, who would be perhaps detained by shame from applying to such a place, find easily a gentleman who gives them money to support them during their miserable situation, and as easily a medical man who cures them without expecting any remuneration whatsoever. I know this is nowhere

where the case abroad; besides, the generality of physicians and surgeons, not having the advantage of such a liberal education, have more confined notions, and often but a very superficial knowledge of this disease. Our physicians and surgeons do not think themselves authorised to reproach their venereal patients with their misery in a rude and inhuman manner, or to let these poor creatures suffer, in order to please God Almighty, as instruments of his vengeance, or think themselves appointed by Heaven to punish rather than relieve them, as I have a thousand times heard even in great capitals in different parts of the continent. Our magistrates and police do not force these wretches into a prison, or into an hospital, not much different from a prison, but put in their way all possible means to procure relief for themselves. In other countries, where government pursues a different plan, where patients have no place of resort, where they are exposed to die of hunger during the cure, or where they are even intimidated from applying in time, in those countries I have frequently seen the disorder in its most horrid stages, almost unknown in this country. In short, let a person make the tour of Europe, and only take notice of the venereal patients, as well those who are confined in hospitals, as those who live or die unnoticed, under the most horrid symptoms of this disease, in their private abodes; and he will be able to form as solid a judgment of the comparative progress of enlightened principles of governments in different countries, from these observations, as from any other inquiry whatsoever. He will

will be astonished to find at this day such a difference between the several governments with regard to barbarity and humanity, as I found with respect to science, not many years ago, between two modern universities ; I mean *Gottingen* and *Louvain*. In the one, every institution is calculated to inculcate upon the minds of young men every kind of useful knowledge, and the most liberal principles of philanthropy ; whereas, in the other, every thing seems to conspire to keep the youth in superstition and ignorance, and to engrave in their hearts all the principles of intolerance, and hatred of true learning of every kind, for which we now so justly blame our forefathers.

I have at least hitherto found the frequency and the violence of venereal complaints in different countries, to be exactly in proportion to the degree in which learning is encouraged by government, and liberal principles disseminated among the people. From these observations, I am convinced, that if a judicious plan, with proper regulations and precautions, was adopted by any government, in whatever climate, all the violent symptoms of the venereal disease would not only be rendered uncommon, but the disease itself might be, if not entirely eradicated, at least its frequency greatly diminished ; but such a plan, though easily conceived and executed, seems not yet adapted to the taste of the present age, but perhaps rather calculated for our humane and more enlightened posterity.

C H A P. II.

Of the VIRULENT GONORRHOEA.

THE *virulent Gonorrhœa* *, or *Clap*, is a local inflammation, attended with the discharge of a puriform matter from the urethra in men, and from the vagina in women; accompanied with a frequent desire of making water, which occasions a scalding, or pricking and burning pain, during the time of its passage; and arising from any stimulus applied to those parts, provided it be sufficiently strong. Sometimes, by the violence of the irritation, the secretion of mucus seems to be

* The name *Gonorrhœa* is derived from the Greek γονη, *genitura*, *semen*, and ῥέω, *fluo*, i. e. *fluxus seminis*; which is a very improper name for the disorder in question, because it conveys an erroneous idea. The name *Gonorrhœa* implies a discharge of semen, which never takes place in this disorder. If a Greek name is to be retained, I would call it *Blennorrhagia*, from βλεννη, *mucus*, and ῥέω, *fluo*, i. e. *Mucifluxus (activus)*; and thus distinguish it both from real *gonorrhœas*, and from *gleets*, to which latter I would give the name *Blenorrhœa*, *Mucifluxus (passivus)*, i. e. without phlogistic symptoms. In English, the disease is commonly called a *Clap*, from clapping; in German, a *Tripper*, from dripping; and in French, a *Chau-de-pisse*, from the heat and scalding in making water: names derived from the principal symptoms of the disease. See the *Nosological Table* of this disease at the end of the following chapter.

totally suspended, or at least considerably diminished, so that no discharge, or only a very small one, takes place, tho' the other symptoms rage with the utmost violence. In this case, the disease has obtained the very improper name of *gonorrhœa sicca*, as if we were to say, *fluxus seminis sine fluxu*. Another symptom is a violent pain during erection, from the tension of the frænum, which has obtained the peculiar name of *Ghordeè*; but as these distinctions denote only the violence of some particular symptom, there is no occasion for retaining them.

This distemper, we may observe, 1. Is a local inflammation; and therefore, like all others of the same kind, does but seldom affect the whole system. 2. The discharge, though the matter has a purulent appearance, is not a real *pus*, much less *semen*, as some patients fancy. The matter discharged is nothing else but merely the mucus of the urethra or vagina secreted in a larger quantity than usual, and changed in its colour and consistence by the stimulus applied to the parts; like the mucous discharge from the nose or lungs in a coryza, or cough from cold, where the mucus assumes nearly the same appearance. It is an erroneous notion, that this discharge arises always from an ulcer in the urethra. In ninety-nine out of an hundred gonorrhœas, perhaps, there is no such thing as an ulcer; but the disease is merely a superficial inflammation of the internal membrane of the urethra, like that above mentioned of the mucous membrane of the nose or lungs

B

from

from cold *. For in this last case, though the discharge has much the appearance of purulent matter, we know that it never proceeds from an ulcer in the nose or lungs. Thus we may easily account for the quantity of the matter discharged; and have no reason to be surpris'd, that so large an excretion as is frequently observed in violent gonorrhœas, should so little affect the constitution: while if an equal quantity of semen, or real pus, was discharged, we would find the constitution and strength of our patients materially injured; which is, however, but seldom the case, even in the most virulent gonorrhœas. 3. I have said, that the discharge may proceed from any stimulus of

* This has been hitherto rather supposed, than proved by any direct fact. Anatomists examining the urethra of men who had laboured during their lifetime repeatedly under gonorrhœas, found, after death, no cicatrix in the urethra; and thence the conclusion was drawn, that gonorrhœas were generally not accompanied with an ulceration. This, however, would, in my opinion, prove little or nothing; as we see daily, that chancres on the prepuce or glans, though sometimes pretty deep, go off, and are a short time after so obliterated, that not the least mark of a former ulcer or cicatrification is to be seen. To conclude thence, that there has never been any ulcer, because in such a cadaver we find no cicatrification on the prepuce or glans, would in this case be evidently wrong. But what anatomists have hitherto only supposed, is now made evident by my friend Dr *Stoll*, Professor of the Practice of Physic at Vienna. He had two years ago the instructive opportunity of dissecting a man who died in his hospital, while labouring under a virulent gonorrhœa. On opening the urethra carefully, he found its internal surface preternaturally red; two of the lymphatics preternaturally white and enlarged; and the puriform matter oozing out from the internal membrane, especially at the lacuna, where the seat of the disorder was, without the least appearance of an ulceration or excoriation.

of sufficient power, applied to the parts. To discuss this latter subject more fully, I shall consider it under the three following heads.

I. I am of opinion, that virulent gonorrhœas, “ arising from an *external* cause, are actually excited by the stimulus applied to the cavity of the urethra itself;” and that consequently, in coition, the virulent mucus of the vagina is driven, or, if I might say so, forced into the urethra, and not, as some writers have imagined, absorbed by the lymphatics of the glans penis, and thence deposited at the lacuna under the frænum.—If such an absorption actually took place, we would every day observe virulent runnings seated low down in the urethra, as well as under the frænum; whereas this is seldom or never the case. The seat of these gonorrhœas is always originally in the lacuna under the frænum; and those which are found to have their seat at the curvatura penis, or lower down in the urethra, are not so at the commencement of the disease, or arise from an internal cause. What has been said of the impossibility of such an immediate application of the virus to the inside of the urethra, because its orifice is closely shut up during erection, and therefore admits not of any such introduction, appears to me only to be reasoning from an ill-grounded theory*.

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II.

* What is said here relates only to these gonorrhœas which arise from a cause externally applied. But though venereal gonorrhœas do generally arise from an external cause, it is highly probable to me, that they may sometimes be excited by the poison deposited from the mass, as we see not unfrequently with regard to chancres.

II. I shall prove, both from well-established principles, and from practical observations, “that
“gonorrhœas not only may, but most frequently
“do, arise from the same venereal poison which,
“applied to other parts of the body, produces
“chancres, or other symptoms of the lues.”—
It has of late been asserted, even by some physicians of eminence, that the poison which produces a gonorrhœa is different from that which produces the lues; and several specious arguments have been brought in favour of this paradoxical opinion. This dispute concerning the nature of gonorrhœas, leads me into a discussion the more agreeable, as it is of considerable importance in practice, and as experiments and observations will, I think, enable me to prove not only the contrary, but perfectly to reconcile the different opinions, and thus set the matter in a clear light, and free it from that obscurity in which it has been hitherto involved. I enter therefore into the discussion of this subject with the consideration of the different reasons alleged for that favourite doctrine.

First, It is said, That *the poison which produces the gonorrhœa does never, like that of chancres, produce any venereal symptoms in the mass, or the lues itself.* To this I reply, that though a lues is seldom produced by a gonorrhœa, yet we are by no means to look upon this as universally true. The reason why gonorrhœas do not, like chancres, constantly produce the lues, is, that most of them, if not ill treated, excite only a superficial inflammation in the internal membrane of

of the urethra, without any ulceration. Hence absorption cannot easily take place, the poison being out of the course of the circulation. But I have seen gonorrhœas, through injudicious treatment, or where the disease had been originally accompanied with an ulcer of the urethra, followed by the most unequivocal symptoms of the lues itself. The reason why the venereal poison indeed, when applied to the urethra, does not so frequently produce ulcers as when applied to the glans, prepuce, and other external parts, is, that the internal membrane of the urethra is defended by a large quantity of mucus, the secretion of which is moreover augmented, sometimes to a surprising degree, by the present stimulus. As long as this mucus is secreted in such abundance, the poison is enveloped, the urethra defended, and thus the formation of ulcers effectually prevented; but if, either from the violence of the irritation, or from any other cause, this secretion is diminished, or if by improper injections the mucus be washed away while some of the poison remains, I am of opinion, from more than twenty instances which occurred to me, that, in nine such cases out of ten, an excoriation or ulceration of the urethra, and subsequent pox, will be as certainly the consequence, as from venereal ulcers in any other part of the body. If there was the same quantity of mucus between the prepuce and the glans, as there is in the cavity of the urethra, we would as seldom see ulcers there as we see in the urethra in cases of simple gonorrhœa. We observe, that when the poison meets there with a large quantity

of mucus, as is sometimes the case, it then produces no ulcers, but only a great secretion of puriform mucus, which is called a *gonorrhœa spuria*, but might with more propriety be termed a *Blenorrhagia balani, i. e.* an active discharge from the glans or corona glandis. The reason why this kind of running is less frequent than those from the urethra, appears to me to be, the small quantity of mucus which in most people is secreted in these parts; whence the virus, not being sufficiently diluted, commonly produces these erosions, or venereal ulcers, called chancres.—This likewise receives a considerable confirmation from the well-known fact, that women very seldom have chancres in the vagina, though very frequently in the labia pudendi and nymphæ. The mere want of a sufficient quantity of mucus on the latter, accounts, in my opinion, sufficiently for this effect.

Secondly, They maintain, that *the poison of the gonorrhœa never produces chancres, and that the poison of chancres never produces a gonorrhœa.*—In confirmation of this assertion it has been said, that a person who has chancres will never communicate any other complaint but chancres, and that a person who has a gonorrhœa cannot communicate any thing but a gonorrhœa. I will not deny that this is frequently the case; but repeated and attentive observation authorises me to say, that, like too many other medical writers, they have drawn a general conclusion from a few observations favourable to their own preconceived opinion. For in many cases where I had occasion to examine both parties, I have been convinced, that chancres
were

were communicated by a person affected with a simple virulent gonorrhœa; and, *vice versa*, that a virulent gonorrhœa had been the consequence of an infection from a person having simple chancres only. But there is a more striking proof than this, which has not been taken notice of, viz. if a patient afflicted with a venereal running does not take care to keep the prepuce and glans perfectly clean, chancres will very often be produced, the cause of which may evidently be traced to the matter of the gonorrhœa. This is one of the principal reasons why in cases of gonorrhœa we insist so much on the parts being kept clean; experience having taught us, that chancres frequently arise from negligence in this particular, even sometimes after the running has considerably abated. For the same reason, I constantly order these patients to keep their hands clean; having seen repeated instances of venereal ulcers in the nose and eye-lids being the consequence of this neglect. But besides this, will any man of the medical profession doubt, that matter taken from a chancre, and applied to the urethra, would not produce a gonorrhœa? This is an experiment which I certainly should not venture to try on myself. I must conclude, therefore, that though the writers who have assigned this second reason may be right in a few cases which fell under their own observation, they are wrong in deducing a general rule from a few facts; as I myself would be, in concluding from several contrary instances which I have observed, that a gonorrhœa always communicates chancres, and chancres always a gonorrhœa.—Some

cases of this kind I have seen, as already mentioned, where, in the fourth or fifth week of an ill-treated gonorrhœa, or from a neglect of external cleanliness, chancres have been produced in places that had been perfectly well before: but this surely would be a very slender reason for asserting, that such is always the case. These chancres arising from the matter of a gonorrhœa, were, to my observation, constantly as virulent and infectious as original ones; and, like these, when left to themselves, produced the same pernicious symptoms in the body; and if a person who has such ulcers was to believe that they are not venereal, nor capable of bringing on the lues, because they so plainly originated from the matter of a gonorrhœa, he certainly would find himself most disagreeably mistaken.

Thirdly, The last, and, in their opinion, the most unanswerable reason for believing that the virus of a gonorrhœa, and of a confirmed lues, are materially different, is, as they say, that *mercury never contributes to, or accelerates the cure of a gonorrhœa; but that, on the contrary, every gonorrhœa may be certainly cured without mercury, and without any danger of leaving the lues behind.*—— To this I reply, that it is indeed a certain and authenticated fact, that a great many gonorrhœas may be, and are, cured without mercury. I have seen many instances, where water, drunk for a considerable time, has cured the gonorrhœa fully as well as any medicine whatever. Nature is very often able to effect a cure in acute distempers, if we would allow her to proceed undisturbed in her operations.

operations. Nature, when irritated by the poison, will excite a greater secretion of mucus than usual, in the same manner as the lacrymal gland pours out a larger quantity of water when a grain of sand falls into the eye. This larger quantity of mucus answers the purpose of diluting the poison as effectually as any medicine artificially injected. Besides, the poison is by this means, not only diluted, but carried off in part by the running; and the modern practice of curing gonorrhœas, by injecting sweet oil, or other mucilaginous liquors, into the urethra, does nothing but assist Nature in this salutary work.

But though I allow that gonorrhœas may generally be cured without mercury, yet repeated experience has shown me, that it is not always possible to accomplish a cure in such an agreeable manner. In those cases where the gonorrhœa is of a milder kind, without any ulcer or excoriation in the urethra, it may certainly and radically be cured without using a grain of mercury: and though mercury should be given in such cases internally, it cannot have the least effect; not because the disease does not proceed from a venereal poison, but because it lies out of the reach of the circulation.

To what is further alleged, that mercury never shows any power in accelerating the cure of a gonorrhœa, I reply, That they not only confound the runnings which arise from the venereal virus, with those which are occasioned by other causes; but that they do not make a proper distinction between the internal use of mercury and the topical application

application of it. I readily allow, that mercury given internally cannot cure simple gonorrhœas, as the cause of the disease lies out of its reach. But the same consequence cannot be drawn concerning its topical application. I am indeed perfectly convinced, not only that mucilaginous injections, combined with mild mercurial preparations, contribute to the cure, but that they are the safest, speediest, and best of all methods for that purpose: though I do not deny, that in simple gonorrhœas mercury applied in this way does not always produce beneficial effects; which, however, is often owing, I think, to the use of improper preparations.

It must also be observed, that in this dispute the contending parties seem to have entirely overlooked the distinction between the simple venereal gonorrhœa, and that combined with an ulceration of the urethra: and of such importance is it to attend to this distinction, that daily experience shows us, that runnings of the latter kind are not only cured more safely and expeditiously by the use of mercury, but that they are very often, if not always, totally incurable without it; and that the gleets remaining after these gonorrhœas, tho' they obstinately resist all other remedies, yet frequently very readily yield to the use of mercury, either externally or internally applied. I can even affirm with certainty, that a gleet of this latter kind, of any standing, can never be radically cured without it.

I now proceed to examine the last part of this objection, viz. That a gonorrhœa never leaves a lues behind.

behind. This they have, no doubt, very frequently observed; but they here fall into the same mistake as formerly, by not distinguishing simple gonorrhœas from those accompanied with an ulceration of the urethra. Indeed it must be allowed, that an absorption cannot easily take place in simple gonorrhœas: though I confess it to be yet a matter of doubt with me, whether even in this case an absorption and consequent lues do not *sometimes* happen: at least we have not a sufficient number of observations to determine this point with certainty.

But whatever may be the case in simple gonorrhœas, it is certain, that, when the disease is accompanied with an ulcer of the urethra, the parts are then disposed to an absorption of the virus. In these circumstances, I never met with a single patient in whom this absorption did not take place; and, if early recourse was not had to mercury, the lues most certainly was the consequence. I have also met with several instances, where, from the accidental wounding of a small blood-vessel in the urethra by the unskilful application of the syringe or catheter, the virus of a simple gonorrhœa has been absorbed, and produced unequivocal venereal symptoms in the system, which, notwithstanding their origin, yielded very readily to mercury. We may therefore assuredly conclude, that there are some gonorrhœas which cannot be cured without mercury; though there are others which may be removed, without the use of that remedy, and without any bad consequence ensuing. An account

count of some instances which came under my observation, will set this matter in a clearer light.

A young man of about twenty-three years of age, in perfect health, happened to be infected with a simple gonorrhœa, without any other venereal symptom. The running had been injudiciously stopped; the consequence of which was, a total suppression of urine. A surgeon was called; and the patient being unable to bear any longer the pain from the distention of the bladder, recourse was had to the catheter. But on approaching the neck of the bladder, a great resistance was found, which prevented the instrument from being further introduced, though every possible method was tried. After waiting a little while, a second attempt was made, but without success. As the pain increased, and from the accumulation of urine there was great danger of a rupture of the bladder, a passage for the catheter was at last forced with as little violence as possible; which was succeeded by some drops of blood from the urethra, and followed by a large discharge of urine. By proper treatment, the patient recovered in a few days from this dreadful symptom; the gonorrhœa came on again; and, in a short time after, he was thoroughly cured, as we imagined. But soon after, although there had not been the least appearance of a chancre throughout the whole course of the disease, an exostosis, with a violent pain about the middle of the sternum, made its appearance. Mercury was administered; in a few days the patient found himself better, and in five weeks was perfectly cured.—Now, from an attentive consideration

deration of this case, I would ask any unprejudiced person, Whether it is not reasonable to suppose, that by forcing in the catheter some vessel had been wounded, in consequence of which the absorption took place; that the patient was from that moment infected, and afterwards cured in the same manner as if he had received the infection from a chancre *.

A gentleman of about forty years of age, who formerly had laboured under different gonorrhœas till within these last five or six years, got a clap; which he found, as he said, rather mild, without much pain in making water, and hardly any pain in erection the first five or six days; when, after violent exercise, he felt the whole urethra, but especially the neck of the bladder, more irritated; for which, however, he took nothing but a mercurial physic, and rubbed into the perinæum some mercurial ointment every day. These symptoms were nearly gone in eight days, leaving only a little foreness in the perinæum. But the complaint for which he now consulted me was a pain in the
xyphoid

* The different period of time at which the venereal disease and the gonorrhœa first appeared, has also been urged as an argument for the difference between the virus of the gonorrhœa and that of the syphilis. But it is absurd to oppose uncertainty to uncertainty: we are, I think, as ignorant of the precise period when the lues first appeared, as we are of that of the gonorrhœa.—It has been asserted, that the inhabitants of the South-Sea islands, though afflicted with the lues, are yet free from the gonorrhœa. But Captain KING, who succeeded Captain CLERK in the late voyage round the world, assured me that this was false, and that he himself had seen many of them with the matter dripping from their urethra.

xiphoid cartilage, so violent indeed, that he even could not bear the touch. I advised him to rub in some more mercurial ointment into the perinæum for a couple of days: when I saw him again, the pain was not milder, but had left its former place, and occupied now the middle of the sternum, which troubled him especially last night. I ordered him to take mercury internally; by the use of which, this complaint in a short time after disappeared.—See also the Case related p. 4.

Thus far I have answered the arguments which were adduced to prove, that the gonorrhœa is never of a venereal nature, or, in other words, that it never proceeds from a poison of the same nature with the lues. But though I have shown that this doctrine is exceptionable, yet I am far from maintaining that all gonorrhœas arise from the venereal virus. On the contrary,

III. I am convinced, from experiments made on myself, and from observations made upon others, “that gonorrhœas are sometimes produced from other acrimonies, or stimuli, applied to the urethra, with nearly the same symptoms as we observe in a venereal gonorrhœa;” nay, I am now even inclined to believe, that such gonorrhœas may sometimes be propagated as well as venereal ones. Whether the gonorrhœas, of which we have an account in some ancient writers, were of that nature, I am unable to determine; and therefore forbear to enter upon the subject. I shall only just observe, that the gonorrhœas, I am here speaking of, are very different from the flux of real semen, or from the flux.

flux of mucus from the prostate gland. These latter complaints, arising chiefly from a weakness of the excretories of these parts, occasioned by an abuse of venery, and especially by masturbation, do not come within my present plan.

I proceed, therefore, to the main point, viz. to prove, that local inflammations of the urethra, accompanied with the running called generally Gonorrhœa, are not always of a venereal nature, neither in men nor women. This idea first occurred to me from having frequently observed in stone-horses a kind of running of a greenish yellow matter from the urethra. This running, which arises from causes still unknown to me, I have seen last only for a few days, and then go off spontaneously. The same, and that more frequently, I have observed in dogs, without perceiving that they seemed to suffer much pain from it; and though indeed they continued to lick the part almost constantly, they were never affected with any ulcer of the mouth. I have besides, for these many years past, been consulted, by a variety of patients, for runnings very similar to venereal gonorrhœas, but often so mild in their symptoms, and so short in their duration, that I began to doubt of their venereal nature. I have seen married people, who lived together in the most perfect harmony and friendship, where the one was affected with such a discharge for several days, without communicating the least symptom to the other. With some of them I have been most intimately acquainted; and convinced without a doubt, that they were faithfully
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attached to each other; and that therefore the disease must have been owing to some other cause.

All these observations taken together, led me to believe, that some kinds of running might perhaps owe their origin, not to the venereal poison, but to some different cause, either external or internal. I began to suspect, that a discharge might be produced by any stimulus applied to the urethra, whether venereal or not, provided it be sufficiently acrid to excite an inflammation and consequent preternatural secretion of mucus from the urethra; just as coryzas, accompanied with a large preternaturally coloured secretion from the mucous membrane of the nose, arise from other causes. Having revolved these ideas in my mind for several years, I determined at last to make an experiment upon myself, which should either confirm the theory I had laid down or entirely overthrow it. With this view, I took six ounces of water, and dropped into it as much of caustic volatile alkali, as gave the mixture a very sharp fiery taste. This liquor I injected into the urethra, compressing the canal with the fingers of my other hand below the frænum, that it might be prevented from going further, and thus be applied to the very part which is generally the seat of the venereal gonorrhœa. The moment it touched the inside of the urethra, I felt such an unsupportable pain, that I could not retain it for a single second; but withdrew the syringe much against my will, almost at the instant of injection, and the injected liquor ran out. But though the pain continued very severe for half an

a quarter of an hour, I resolved to make a second trial. It occasioned a more severe pain than I ever remember to have felt in my life before, yet I retained it for very near the space of a minute; when the pain became so excruciating, that I could bear it no longer, and therefore withdrew the syringe. I instantly felt a strong desire to make water; but having taken this precaution before I made the experiment, I suppressed the inclination. I lay down on my sofa, and waited the event with patience; but so violent was the pain, that it was near an hour before I was able to move. I then amused myself with reading during the remainder of the afternoon, eat my dinner as usual, but went early to bed. I was now obliged to make water, which I had not done since the time of injecting the liquor. When the urine came to the place to which the injection had been applied, I felt a very severe pain, but less violent than what I expected. Having slept well during the night, I examined the part as soon as I awaked next morning, and found a pretty large discharge of puriform matter, of the same greenish-yellow colour with that in virulent gonorrhœas. The pain in making water was now greatly increased, and the following night my rest was interrupted by painful involuntary erections. The morning after, the discharge was much more plentiful, nearly of the same colour, only perhaps a little more greenish; the pain in making water, however, was now so violent, that I resolved to mitigate it by injecting some lukewarm oil of almonds.

By this it was greatly abated; the running continued five days, the pain all the while growing remarkably less in the part affected. But I now observed very distinctly a new inflammation taking place lower down in the urethra, where I had felt nothing before, and where none of the injection had touched. This new inflammation began, as it seemed to me, at the very border of the former, extending itself lower down in the urethra; and was followed by a copious discharge, attended with the same symptoms as before, and continued for six days; at the end of which, all the symptoms were greatly abated. But now, to my surprise, I felt distinctly the symptoms of a third inflammation taking place, extending from the border of the former about the caput gallinaginis to the very neck of the bladder, and attended by an ardor urinæ, and copious discharge like the preceding. At this I was seriously alarmed; for I had constantly injected the warm oil of almonds three times a-day. I perceived that the inflammation first excited by the caustic alkali was most evidently communicated from one part of the urethra to the other; whence I was afraid that an inflammation of the whole internal surface of the bladder might at length ensue, and be attended perhaps with dangerous consequences. In this situation I continued betwixt hope and fear for about seven or eight days; when I found at last, to my great satisfaction, this inflammation gradually abate, together with the discharge, without passing the limits of the urethra; and I was perfectly freed from every symptom of these three
distinct

distinct gonorrhœas, as I might call them, at the end of the sixth week.

From this experiment upon myself, together with the above-mentioned observations, and from a very curious observation, since related in a dissertation published by Dr Oettinger of Tubingen, where a discharge from the urethra, apparently similar to that of a virulent gonorrhœa, was produced by the internal use of olive oil, which had been wrung out of red Turkish yarn, on which it had been poured before, the reader may judge, whether acrimonious substances, of a different kind from the venereal virus, such as cancerous ichor, or perhaps other stimuli applied to the urethra, may not sometimes produce the same symptoms as the caustic did in my experiment, and the oil in Dr Oettinger's observation. I certainly believe, that runnings similar to a gonorrhœa from the venereal virus, are sometimes produced from other causes, only perhaps with milder symptoms, and of shorter continuance; tho' on myself I could not perceive any difference in the colour, consistence, or other circumstances. And I now look upon the following facts as thoroughly established, viz. 1. That gonorrhœas frequently arise from the same venereal poison applied to the inside of the urethra, which, when applied to the glans, prepuce, &c. produces chancres, or when absorbed into the system, produces the lues; and, 2. That there are gonorrhœas which owe their origin either to acrimonious substances introduced into the urethra *ab extra*, or perhaps some-

times to a more violent mechanical stimulus arising during coition, or from some other causes hitherto unknown to us. Hence I divide the *Blennorrhagias*, at least into two species essentially distinct from each other, viz. that arising from the venereal virus, which I call *Blennorrhagia syphilitica*; and into that arising from other acrid substances, to which I give the name of *Blennorrhagia ab acri, aut stimulo mechanico*. By attending to this difference our practice must be regulated as long as we are not thoroughly acquainted with the nature of other causes. It is owing to the neglect or ignorance of this distinction, that we hear quacks daily extolling the pre-eminence of their nostrums or secret injections for curing the gonorrhœa in a few days, while patients sometimes complain of being kept by the most experienced physicians for weeks together, though affected with what they imagine to be the same complaint.

The running which a gentleman of my acquaintance got some years ago, notwithstanding, as he said, he made use of the best preventative of all, was undoubtedly not from a venereal cause; and he may be equally well affected in time to come with the same complaint, though he now thinks himself safe, by what he calls, doubling his precaution.

The simple *syphilitic Blennorrhagia* ought further to be distinguished from the *complicated*, or that accompanied with an ulcer in the urethra; the latter admits no radical cure without the internal use of mercury, whereas the former seldom or never requires it.

To

To the ignorance or neglect of the distinction between syphilitic gonorrhœas and those arising from other stimuli, we are likewise to ascribe the great difference among practitioners with regard to the mode of treatment. Some advise astringents, while others are lavish in their praises of emollients. Hence, even some practitioners of eminence, having observed that astringent injections were of service in some cases of gonorrhœa, even in the stage of inflammation, recommend the same to every patient affected with that complaint, but by no means with the same success. For, besides violent pains in the whole course of the urethra, swelled testicles, an acute suppression of urine, &c. which are the frequent effects of these injections, if the disease is of a syphilitic nature, and especially in its inflammatory stage, strictures in the urethra, of the most troublesome and obstinate nature, are often the consequence. By overlooking this necessary distinction, which applies to men as well as to women, the health of the patient is not only endangered, but the happiness of married people has been destroyed, and the friendship betwixt the two sexes has been frequently broken without reason. I have certainly seen more than one instance of this kind.

I shall only add here one remark more. It is by most people imagined, and several medical writers have even publicly asserted, that the *malignity*, as they call it, or the virulence, of a gonorrhœa, is always in proportion to the colour of the matter discharged, and that as soon as this colour changes into a whiter one their discharge is no

more infectious. But this appears to me by far too general a conclusion; for in some persons I have seen the matter retain its original sulphur colour to the very last day. The more certain signs of the abatement of the virulence of the disease are, the cessation of the ardor urinæ, and a capability of retaining the water as when in health; the matter becoming less, and of a thicker consistence, so that it grows ropy, and may be drawn into threads between the fingers; and the absence of pain or titillation during erections. The only certain signs, however, of a radical cure of the gonorrhœa, and of a perfect security of not being able to communicate the infection, are, the entire cessation of the running, erections, and excretion of semen, without any kind of pain, titillation, or heat in the urethra: and we may assure our patients, that though, in general, the change of the greenish-yellow colour into a white one is not an unfavourable sign of the disease growing better, it is by no means a certain one of the venereal virus being entirely eliminated.

Having thus finished my considerations about the nature and the different kinds of gonorrhœas, we now proceed to

The Method of Cure.

Here I must take notice of what I have established before, that every kind of virulent gonorrhœa, or *Blennorrhagia*, is a local inflammation, excited by a peculiar poison or stimulus. If this
poison

poison be venereal, the following indications will naturally present themselves for all syphilitic Blennorrhagias, viz.

1. To remove, or to destroy if possible, the nature of the poison.

2. To defend the tender parts from its virulence.

3. To allay the irritation occasioned by it.

Oleous or mucilaginous injections, combined with opium and the mildest mercurial preparation, seem to answer all these different purposes*.

The internal use of the solutio Arabica, the emulsio amygdalina, or any other mucilaginous drink, taken largely, (with an anodyne draught at night according to circumstances), is always useful, and for patients who have an aversion to injections, absolutely necessary.

If symptoms of an inflammatory fever appear, bleeding may sometimes be useful; but, in general, more service will be derived from topical evacuations of blood, and from emollient and sedative fomentations and poultices. On the other hand, when the patient is of a weak and irritable habit of body, the discharge very thin and copious, attended with violent pain and quick pulse,

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* If we meet with patients who are prejudiced against the use of injections, and wish to be treated by internal medicines, we ought to acquaint them, that the disease may be cured equally well without any topical application; but that it will then require, perhaps, a little longer time, and the observance of a more exact regimen.

pulse, I have found the Peruvian bark, given internally, according to circumstances, with or without opium, more useful than the whole tribe of antiphlogistics; but opium given in emollient glysters is sometimes particularly useful in such cases. By the use of this medicine, the frequent painful erections are also much mitigated; but their return ought, as much as possible, to be prevented, by tying the penis down, lying on a matrafs on the side, and not in a warm feather-bed on the back. If the erection is attended with a strangulation of the glans, the treatment laid down under the article *Paraphymosis* will be necessary.

In order to prevent the more violent symptoms of gonorrhœa, the patient ought, during its inflammatory state, to use as little exercise as possible, to wear a suspensorium scroti from the beginning of the disease, and to keep the part affected as much as possible from the cold air. The suspensorium scroti, or truss-bag, may perhaps seem superfluous: but being so little troublesome when well applied, and so well calculated to prevent a swelling of the testicles, I never neglect to recommend it, especially to those who have once laboured under this latter disease.

— With respect to the regimen to be observed in gonorrhœas, much exercise, external cold, high living, and drinking spirituous liquors, ought, in general, carefully to be avoided by all patients; but especially by those of a phlogistic habit of body, as they generally suffer more, and for a longer time, from this disease, than others.

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Such patients should confine themselves to a low diet, more of the vegetable than of the animal kind; they should eat no supper, and drink nothing but cooling mucilaginous liquid; whereas those of a different constitution are not to be restrained so much.

Neutral salts have been formerly recommended, to cool the blood, and to promote the secretion of urine, by which it was thought to mitigate the inflammation, and assist nature in the expulsion of the virus. But I have constantly found that they are hurtful. They increase the secretion of urine, render it sharper, and thus augment the irritation, without producing any of the good effects ascribed to them.

A prejudice in favour of purging in gonorrhœas has also long prevailed. For this purpose, some have used the mild, and others the more drastic kinds of purgatives; but calomel, especially, has been recommended to be given every two or three days. Neither of these medicines I have seen do any good, but frequently much harm. Besides their tendency to promote the absorption of the poison into the system, like improper injections, they often give rise to swelled testicles, diseases of the prostate gland, suppression of urine, ulcers of the urethra or bladder, &c. However, though purging is always improper, the body ought to be kept open, so that the patient may have a stool regularly; and I have no doubt that it is partly owing to this improvement of our practice that we now so seldom observe symptoms of the lues, or ulcers of the bladder, following a gonorrhœa.

Thus

Thus far with regard to the more general run of the disorder; but venereal gonorrhœas are not always so simple. Sometimes the poison seems to be of a more exalted acrimony, or rather meets with constitutions of a more irritable nature; or the symptoms are frequently exasperated by improper treatment, or by neglect of the above-mentioned rules. In this case, the patient feels a more violent heat and pain in making water, accompanied with a tension of the urethra along its whole length; a perpetual desire of making water, without being able to pass more than a few scalding drops at a time; frequent erections, with most exquisite shooting pains throughout the whole length of the urethra, but more especially at the frænum. Sometimes streaks of blood, or real blood, are discharged with the urine; and evident marks of an ulceration of the urethra make their appearance. In this case, besides the above-mentioned remedies, the use of mercurial fumigations or frictions on the perinæum, and inside of the thighs, I have found to be one of the most efficacious remedies.

The same treatment will prove serviceable, if, by any cause whatsoever, the discharge of the venereal gonorrhœa, during its inflammatory stage, be suppressed or stopped, either by acrid or astringent injections, or even by the most proper injections applied in an improper manner, by drastic or repeated mild purges, by the premature use of turpentine or balsamics, by violent exercise, and especially by catching cold
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in the part affected. The virus seems to leave its natural seat under the frænum, to settle lower down, where the excretory ducts of the feminal vessels and prostate gland open into the urethra, and produces a swelling in one or both testicles; or, if the virus has been driven still lower down to the neck of the bladder, the patient has a continual desire to make water, without being able to pass any, or only a few drops at a time. He is then often unable to stand upright for a quarter of an hour; and a total suppression of urine is in this case frequently the consequence. In all these different places, the poison generally produces only a superficial inflammation; though not unfrequently also, by its virulence, or want of a sufficient quantity of mucus to dilute it, an excoriation and ulceration in the urethra takes place, which then never fails to end in an obstinate gleet, and to be followed by a general infection of the mass.

In speaking of the dreadful consequences of a suppressed or stopped venereal gonorrhœa, I must not omit to mention a disease, perhaps the most melancholy of all venereal complaints whatever, I mean a violent kind of inflammation in one or both eyes, frequently accompanied with a discharge of puriform matter, entirely similar in colour and consistence to that of a gonorrhœa, and generally terminating in perfect blindness; and in other cases, instead of an ophthalmy, a more or less perfect deafness. Though I am by no means able to account for the origin of those complaints suddenly following
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the suppression of gonorrhœas, especially from severe cold, (for I have never observed them but in very severe climates and seasons), to which the patient had been previously exposed, I am convinced of the fact. I shall speak of it more fully below, under the head of Venereal Ophthalmy.

The only remark I have to make here is, that all these complaints from retropulsed venereal gonorrhœas, being very often of so unhappy consequences, an honest man ought not to mind the opinion of others, but be guided in his conduct by justice and conscience, and do every thing that possibly may be done to cure or relieve his patient. I therefore mention here, that I have tried, in four cases of swelled testicles and suppression of urine, arising from a retropulsed gonorrhœa, the inoculation of the venereal poison, by means of a bougie, with unexpected success. This being the case, I find myself bound not to conceal it, though I may possibly be blamed for it. We are consulted for giving relief; and consequently fulfil our duty at least, by offering a remedy, which the patient has always in his power to accept or to refuse.

C H A P. III.

O n G L E E T S.

A Continued running after the inflammatory symptoms of a gonorrhœa have for some time disappeared, is commonly called a *Gleet*, or *Gonorrhœa inveterata* or *benigna*; a name merely relative to the former, which is called *Gonorrhœa maligna* or *virulenta*.

Gleets arise chiefly from two causes: 1st, From simple relaxation of the mouths of the vessels, which had been irritated, inflamed, and thereby lost somewhat of their contractile power; or, 2^{dly}, From an ulceration, or an erosion in some part of the urethra. To the former I gave, with more propriety I think, the name *Blennorrhœa simplex*, and the latter I called *Blennorrhœa complicata*. See the Nosological Table at the end of this chapter.

In the former kind, after the inflammation and irritation occasioned by the gonorrhœa have subsided, the vessels, from whence that discharge proceeded, continue to pour out either matter of the same puriform appearance, or only a clear kind of mucus, in a preternatural quantity. Sometimes a gleet begins to appear after coition, exercise, or free living, though the discharge from the preceding gonorrhœa had entirely disappeared some days or weeks before.

Gleets

Gleets of this kind are for the most part only a local complaint, the simple remains of a gonorrhœa not perfectly cured; but those of the second kind may be considered as the remains of a very violent or complicated gonorrhœa, generally accompanied with an infection of the body.

Hence it appears, that the nature and seat of gleets may be as various as those of gonorrhœas; but according to the place where they are situated, the time they have continued, and the cause by which they are produced, the method of cure must be different, and becomes more or less difficult and complicated.

Those gleets are most easily cured which have their seat in the urethra under the frænum: those originating from ulcers of the urethra, and which have continued for some time, are much more obstinate; and those arising from erosions of the excretory ducts of the seminal vesicles, or prostate gland, or from ulcers of the bladder, are the most stubborn of any. In general, the further back gleets are situated in the urethra, the more apt they are to produce a difficulty in making water, or strictures and suppression of urine; and the more difficult, in general, proves their cure.

I have always found those gleets which succeed a simple gonorrhœa to be merely a local disease, and to owe their existence solely to a relaxation of the small vessels after the inflammation has subsided. But such gleets as arise after a violent or ill-treated gonorrhœa, are generally accompanied with an excoriation or ulceration of the urethra.

thra. In this case, the venereal poison has been generally absorbed, and the mass is of consequence more or less infected.

As it is of the utmost importance, tho' sometimes extremely difficult, to ascertain these points, I shall endeavour to enumerate the most remarkable symptoms by which it may be known whether there is any ulceration in the urethra. They are shortly as follow : 1. Streaks of blood in the mucus, or real blood discharged, during the inflammatory stage of the gonorrhœa, as above mentioned ; but more especially after the violence of the inflammation has abated. 2. Real purulent, or thin ichorous matter, discharged in a greater or lesser quantity from the urethra. 3. A pain confined to one part of the urethra ; but felt more particularly upon introducing the catheter, or pressing on the urethra externally. 4. An acute pain in one particular place of the urethra, felt especially in passing the last drop of urine, or the emission of semen.—Though all these pretty plainly indicate an ulcer, its existence will be much more confirmed, if the preceding symptoms of inflammation have been very high, if the patient has been improperly treated, or even, as I have sometimes seen, if the urethra has been wounded by a mismanagement of the syringe, or a rude application of the catheter, during the inflammatory state.

By not attending to these marks, which sufficiently point out the existence of an ulcer in the urethra, we will be often disappointed in the cure.

cure. Whenever, therefore, we are consulted about gleans, our first business should be, to examine whether they arise merely from relaxation, or from an ulceration of the urethra; and in this latter case, whether it is an universal or only a local disease. If an ulcer has taken place, in order to form a proper prognosis, it will be necessary to ascertain the place of that ulceration in the urethra.

When the disease is merely local, it may be cured either by topical astringent applications, or by internal corroborating or balsamic remedies, or by the union of both. The best topical remedies I have found are injections made of white vitriol dissolved in water, and mixed occasionally with some grains of calx of lead or bolus Armena; or injections prepared with calomel suspended in water, or in some mucilaginous fluid; or a solution of blue vitriol, of alum, or of verdigrise; each of which may in certain circumstances be useful. Of the internal remedies recommended for the same purpose, I shall speak hereafter.

If the disease is universal, i. e. accompanied with an infection of the whole system, as is most generally the case where there is an ulceration of the urethra, we must, besides topical remedies, have recourse to those appropriated to the cure of the lues itself. In this case, it is impossible to cure the gleet till we have first purified the mass. After this is done, or while it is yet doing, I have found a solution of sublimate and litharge in vinegar, diluted with a sufficient quantity

tity of water, and injected two or three times a-day, a most excellent remedy.

With regard to injections in general, I shall make two material observations, the neglect of which may sometimes occasion our being disappointed in a cure, even though the best remedies are used. The syringe made use of for this purpose should have a short but wide pipe, just as large that its orifice goes into the orifice of the urethra, and the piston ought to apply close to the sides of the tube. If the whole pipe of the syringe be much smaller than the orifice of the urethra, it is attended with two considerable disadvantages: the first is, that with a small pipe, especially if not perfectly smooth, the patient easily wounds the inside of the urethra, thereby rendering himself liable to an ulceration of the part, and consequent absorption of the poison. The second is, that the liquid injected, instead of going into the cavity of the urethra, will, in proportion as the patient presses the piston, run out sideways through the orifice of the urethra. If the piston itself does not apply closely to the sides of the syringe, even if the pipe is sufficiently large, so that it perfectly closes the orifice of the urethra, the liquor will still regurgitate between the piston and syringe, instead of going into the urethra; and thus the patient may imagine that he has injected the liquor properly, when perhaps very little has entered. But though the syringe be properly made, and at the same time the most careful instructions be given, the patient does very often perform the operation in
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such an aukward manner, that no good effect follows.

The syringe being properly made, should be applied closely and exactly to the orifice of the urethra; so that, by the conic form of its pipe, all passage may be denied to the liquid betwixt it and the sides of the urethra. If the disorder lies in the usual original seat of gonorrhœas, viz. just under the frænum, the patient should, with one hand, compress the urethra at the first curvature of the penis, where the scrotum begins, while he holds and manages the syringē with the fingers of the other. The piston, which should always go close, but easy, ought then to be pressed softly and slowly, till he feels the urethra gently dilated, and thus keep the liquid injected for a minute or two in the urethra, repeating the same operation three or four times. By a rash or longer-continued pressure of the piston, the irritation produced thereby in the urethra often does more harm than the injection can do good.

By attending to these directions, a double advantage is obtained. The liquid is properly applied to the part affected, at the same time that no danger is incurred of driving some of the venereal poison lower down the urethra along with the injected liquid; but this precaution is unnecessary, if the seat of the disorder is lower down.

With respect to the liquid itself, it should always, in cases of virulent gonorrhœa, be made lukewarm; but in gleets this is not necessary. In gonorrhœas, if the liquid is too cold or too warm,

warm, it may easily hurt the patient, either by retropelling the matter, or increasing the inflammation. In many instances also the liquid ought to be well shaken before it is injected: it may easily be made warm, by putting a tea-cup half full in a basin of hot water. In all cases, before any injection is applied, the patient should attempt to make water.

The other observation I have to make is, that young men labouring under gleet, after having for some time made use of injections, and finding themselves considerably better, will grow careless in the application, and even sometimes neglect the injection altogether for a day or half a day. The consequence of this is sometimes disagreeable: and I have seen several instances, where, by neglecting to use the injection for a single day, the running has been greatly augmented, as if it had been a fresh gleet; and the relapse being more obstinate than the original disease, the patients have been obliged to continue the injections for more weeks, than perhaps it would have required days to cure the distemper, had they continued the use of them without interruption.

In general, in order to prevent any danger of a relapse, I order my patients to apply the injections three, four, or, according to circumstances, six times a-day during the disease, and to continue the same regularly for ten or twelve days after the running has entirely ceased.—Syringes of a different kind are required for women, if we wish to see any good effects produced by the in-

jections administered to them, as I shall mention below, under the *article of Venereal Ulcers*.

Besides injections, bougies will often be of great service in gleet, especially where the ulcer has its seat in the lower part of the urethra. They may be used either alone, or in conjunction with proper injections. They should be kept in, for the first three or four days, only for a quarter or half an hour at a time, until the patient is accustomed to them so that he can bear them longer; and then they may be kept in for several hours in the morning and evening, or during the whole day and night. It must be left entirely to the judgment of the physician to determine, whether the bougies to be employed should be of an irritating or sedative quality; the circumstances of the case will point out whether those of the former or latter kind are necessary. It must, however, be remembered, that before the application of bougies, as well as injections, the patient ought always to attempt to make water, in order to give time to the remedy to produce its effects on the part affected. If the application of the bougie produces, as I have sometimes observed, a tension and pain in the spermatic cord, or a swelling of the testicle, its use must be omitted for a few days. This effect I have sometimes also found to be produced by the use of too large a bougie, and to be removed by changing it for a smaller one; in general, small bougies should be preferred to large ones in the beginning.

Should we be disappointed in our expectations
of

of a cure, either by the use of bougies, or injections of the above-mentioned kind, it will be proper to inject such liquids as may excite an irritation and inflammation in the urethra, especially in the affected part. These have often been attended with success after the best astringents have failed. For this purpose, we may use an injection made with sublimite and litharge, or a simple solution of sublimite in water, or a large dose of calomel suspended in some mucilaginous liquor.

It has been observed by Dr Cullen, that obstinate gleet has sometimes been cured by violent and long continued exercise on horseback; such as a journey from Edinburgh to London: and it is probable that this cure is produced by exciting an inflammation in the parts, as the injections just now recommended are apt to do. Gleet has sometimes been cured by coition; which may be accounted for on the same principles: but this is a remedy which can never be recommended by the honest practitioner; because gleet is often infectious, and the venereal disease would by these means certainly be communicated to a healthy woman; or, if she was not healthy, the man would not only run the risk of getting a fresh gonorrhœa, but even the lues itself, if his gleet was owing to an ulcer in the urethra.

Besides the above-mentioned remedies, some others may be applied in gleet of the more obstinate kind, such as the tinctura cantharidum internally, or injections of oil of turpentine, of infusion of galls, &c. and I have been informed

by a friend, that he once saw a desperate gleet cured by injecting the tincture of ipecacuanha, and some other cases where a small electrical shock through the urethra produced a cure. I can say nothing with regard to the effects of these remedies, having never had occasion to try them. I mention them only because we are sometimes at a loss for medicines in very obstinate complaints of this kind.

Bathing in cold water has also been recommended in obstinate gleets, and I have seen it sometimes produce very good effects; but, in two or three cases, I have seen it as certainly increase the running. The same effect has been also observed by others. Sea-bathing is very beneficial; as likewise washing the genital parts with cold water, either by itself or mixed with vinegar.

There are three kinds of *internal* remedies made use of in gleets; each of which may be used, either alone, or combined, as circumstances may require, with or without the local applications above mentioned. These are,

1. *A course of mercurials.* This is always necessary where the disease arises from an ulcer of the urethra, especially of a long standing, or where a general infection has taken place. In such cases, pills made of turpentine and mercury are often very proper.

2. *Balsamics.* Of these the most commonly used is the balsamum copaiba. Of this the patient may take from fifty to one hundred drops in a draught of cold water, once a-day at noon, or twice a-day, evening and morning. Immediately after the balsam, from twenty to fifty drops

drops of elixir vitrioli acidum should be taken, in the same quantity of water, to render the former less disagreeable to the stomach. Half a drachm of pure turpentine, or a drachm of balsamum traumaticum, often answers the purpose of the copaiba extremely well. I knew a case, where a very large quantity of copaiba balsam was swallowed at once by a young man, who was thereby radically cured of a most inveterate and obstinate gleet.

3. *Corroborants.* Among these the Peruvian bark in powder, or infused in red wine, or, which is sometimes better, infused in lime water, together with or without some other powerful astringent, will sometimes prove effectual when all other remedies have failed. After all, however, our utmost endeavours to cure an inveterate gleet will sometimes be in vain; and there have been instances where Nature herself has effected a cure in time, after the unsuccessful and most tedious exhibition of the most powerful remedies.

Obstinate gleets sometimes originate, as mentioned above, from a singular cause, of which we have some examples in anatomical collections. This is, when two ulcers of the urethra happen to be nearly opposite to each other. In this case, some parts of them will inosculate with each other, producing a kind of bands across the urethra, with a small ulceration below. Thus not only a most obstinate running, baffling all medicines, is produced; but a difficulty of making water frequently takes place, and an impossibility of

making it but in a very small stream, or not at all. The only remedy in this case, if we have some reason for suspecting this cause, is the surgical operation; though in some cases, where the bands are not too strong, they might perhaps be broke, by applying a probe or catheter. Whether or not the following case of a very troublesome and obstinate gleet belongs to this class, I leave my readers to judge.

Some years ago I was consulted by a nobleman concerning a gleet, with which he had been affected for about ten years, and for which he had consulted the physicians and surgeons in several countries. Sometimes it stopped for several days; then came on again of itself, especially after riding on horseback, or coition. At such times he always felt some uneasiness, and the next day a little running, which went off, till the same cause was repeated; which rendered him very uneasy, especially as he intended to marry. Upon examining the patient, I found the disorder seated down in the urethra, about the place called by anatomists the *Caput gallinaginis*. Every internal and external remedy, that I knew of, was applied, without effecting a radical cure. I took the disease to be a callous ulceration; and, on this supposition, he wore bougies for eight or ten weeks without the least effect. Being obliged to continue my travels, I left him very little better for what I had done; at the same time advising him, as he intended to go to Paris, to consult there whoever he could expect any benefit from. The result, as he afterwards informed me

ne by letter, was as follows. “ After my arrival at Paris, I consulted, according to your advice, all the medical men of eminence in that city, who rendered me more uneasy about my disorder than I had ever been before, by their different opinions of the cause, nature, and cure of it. Some advised me to a new mercurial course; others prescribed different internal and external medicines. I showed them all the prescriptions successively tried by you; they seemed rather astonished, that none of them, after a fair trial, had succeeded. However, some new injections and internal remedies were ordered, rather I think to satisfy me for my money, than in hopes of doing me any real service; indeed I was for three or four months entirely in the same condition as when I first came to Paris. But, surprising it may seem to you! the last person whom I consulted upon recommendation, seemed to me the most ignorant I had applied to: he said he was obliged to examine the passage of the urethra with a catheter, in order to ascertain the place, &c. He accordingly applied it; it went in as usual very readily, till it came to the seat of the disorder, where it met with the same obstacle it had always done, which I had before told him of; notwithstanding this, he endeavoured to push it further. I told him it gave me excessive pain: but he pressed it imprudently on, and it went through; upon which some blood immediately run out of the urethra. This, as it seemed, much frightened
“ him :

“ him: he asked my pardon, withdrew his instru-
“ ment, took his fee, and departed ; but left me
“ much dissatisfied for employing him. I ex-
“ pected I should be worse the next day, and
“ suffer much from his unskilful conduct: but,
“ quite the reverse, I have been free from my
“ disorder these two months past; I ride on
“ horseback, and enjoy a woman, without find-
“ ing any ill effects from them; and therefore
“ think myself radically cured. The friendship
“ I owe you, for the trouble you took on my
“ account, obliges me to state to you this parti-
“ cular case, which may be of use to you, and
“ which you perhaps can better account for than
“ those I have since consulted.”

Gleets arising from deep and large erosions of the mouths of the feminal ducts, or excretories of the prostate gland, as also those which originate from ulcers of the bladder, are very often incurable; or if they do admit of a cure, a particular consideration of the nature and treatment of such cases would exceed the limits of this treatise.

In all inveterate and obstinate gleets, which have their seat low down in the urethra, we should carefully examine the prostate gland; for to a disease of this part they frequently owe their origin. If the gland shall be found preternaturally swelled and hard after a mercurial course, repeated blisters applied to the perinæum, with large doses of the inspissated juice of *conium maculatum*, *Lin.* I have seen in some instances attended with success where all other remedies had failed.

Of the treatment of gleans combined with strictures, viz. with more or less difficulty in making water, I must refer to the Chapter on *Ischury*.

Gleans which arise either from a weakness, relaxation, or sometimes perhaps from too great an irritability, of the ducts above mentioned, are properly called by the name of *Gonorrhœa* (*fluxus seminis*). In these cases, a real semen is discharged, sometimes without erection, or any sensation of pleasure; and is either continually dripping off, or is evacuated at times by debilitating nocturnal or diurnal pollutions. Sometimes it is discharged only on going to stool, when the hard fæces, during their passage in the rectum, press on the seminal vesicles and prostate gland, and thus force the relaxed orifices of their excretory ducts. This disorder, however, does not arise from any venereal infection, and but seldom from the abuse of venery. Its most general cause is masturbation, and therefore comes not within my plan at present. It requires a most prudent and careful treatment; otherwise the patient will fall a victim to that kind of consumption which we call, with Hippocrates, *Tabes dorsalis*. Whether the disorder mentioned in the Old Testament, was a gonorrhœa of this kind, or of a different nature, I dare not, as I have already observed, take upon me to determine.

NOSOLOGICAL TABLE, illustrating the two preceding Chapters.

Clas. *Locales.*

Ord. *Phlogosēs.*

Genus, BLENNORRHAGIA. *Anglis*, Clap.
Germanis, Tripper: *Gallis*, Chaude-pisse: *Italis*, Gonorrhœa.

Character in Viris. Titillatio præcipue in urethræ parte anteriore sub frænulo; subsequente post biduum aut quatrimum, phlogosi locali, cum ardore et dolore in mingendo; accedente stillicidio materiei puriformis ex urethra; corpore cavernoso urethræ præternaturaliter turgescente, plerumque cum erectionibus membri virilis solito frequentioribus dolorificis.

In Fæminis. Titillatio ad orificium vaginæ externum subsequente post biduum aut quatrimum dolore rubore et tumore præternaturali præcipue (ad rapham) prope commissuram labiorum vulvæ inferiorum; accedente ardore et dolore ejusdem partis in mingendo; cum stillicidio materiei puriformis ex vulva.

Gonorrhœa,	}	auctorum.
Gonorrhœa virulenta		
Gonorrhœa maligna		
Gonorrhœa venerea		
Fluor albus venereus, f. malignus		
Leucorrhœa venerea		

Varia

Variat ratione sedis.

Blennorrhagia balani, f. gonorrhœa	Materia fluente,
spuria	
urethralis	
vesicalis	
labialis	
vaginalis	
uterina	
nasalis	

ex glande.
ex urethra.
e vesica.
e labiis vulvæ.
e vagina.
ex utero.
e naribus.

Species sunt,

Blennorrhagia syphilitica,

α. Simplex.

β. Complicata, f. ulcerosa.

γ. An a viru syphilitico e massa deposito?

Blennorrhagia ab acri externo applicato.

Blennorrhagia a stimulo interno applicato.

Blennorrhagia a causa ignota.

Sequela Blennorrhagiæ est,

BLENNORRHOEA. *Anglis*, Gleet: *Germanis*, Nach-
tripper: *Gallis*, Gonorrhée inveterée.

Character. Stillicidium humoris puriformis, aut muci
limpidi, ex urethra in viris, ex orificio vaginæ in
fæminis præternaturalis, sine libidine aut dysuria.

Gonorrhœa benigna

Gonorrhœa inveterata

Fluor albus benignus

Leucorrhœa

auctorum.

Variat ratione sedis ut Blennorrhagia.

Species practico notatu necessariæ sunt,

Blennorrhœa simplex, a relaxatione vasorum.

Blennorrhœa complicata,

α. cum ulcere,

β. cum scirrho prostatico.

Sequela

Sequelæ Blennorrhagiæ syphiliticæ retropulsæ
sunt :

Tumor testiculorum.

Ischuria urethralis.

Ophthalmia.

Dysfecœa.

Fluxus puriformis ex oculis.

_____ ex auribus.

_____ e naribus.

Syphilis.

Genus : GONORRHOEA.

Character. Excretio feminis aut muci prostaticæ præternaturalis, cum vel sine erectione et libidine; accedente dolore lumborum et atrophia.

Gonorrhœa

Pollutio nocturna debilitans

Excretio feminis involuntaria

} auctorum.

Species sunt :

Gonorrhœa a relaxatione vasorum.

Gonorrhœa ab ulcere aut erosione ductuum excretoriorum prostaticæ et vesiculorum feminalium.

Gonorrhœa a nimia irritabilitate, potissimum per masturbationem induc[t]a.

C H A P. IV.

On the Venereal Swelling of the Testicles.

WHEN a Clap has been treated either by improper medicines, or the patient labouring under it uses too violent exercise, or especially if he catches cold in the part affected, by exposing it to a stream of air, or by washing it with cold water, one and sometimes both testicles begin to swell, often to an enormous size, attended with all the symptoms of a local inflammation; to which an irritation of the whole mass, and a violent fever, not unfrequently succeed. This disease is called a *Swelled Testicle*, and sometimes, though very improperly, a *Hernia humoralis*.

Previous to the swelling, the running of the clap partly or entirely ceases; but sometimes this will only happen, at least to an observable degree, a day or two after the swelling has actually appeared.

That the swelling and symptoms of this inflammation are produced, in that case, merely by the irritation of the poison lodged lower down in the urethra, at the place where the excretory ducts of the seminal vesicles open, and not (as was supposed formerly, for want of anatomical knowledge of the course of the lymphatics) from
an

an absorption of the poison, and transposition of the gonorrhœa to the testicle itself, is now generally admitted; and will perhaps be more evident from the observations which I shall lay down upon the nature and seat of this disorder, and from the method of treatment which I found the most successful for this complaint.

Hitherto it has been the general opinion, that the testicle itself is always the seat of this disorder. But, upon a more close attention and inquiry, I find, *first*, That the testicle itself is never swelled, or in the least affected, in the beginning of this complaint; but that the only affected and swelled part is the epididymis, which every man may easily convince himself of by a careful examination. I said, the testicle is never in the least affected in the beginning, or for the first five or six days; and if it becomes affected afterwards, it is merely owing to the preposterous treatment. *2dly*, I have constantly observed, that the fever which frequently attends this complaint, especially in irritable constitutions, is never a primary disorder, but only concomitant to, or the consequence of, this local irritation; and that, for this reason, by the method mentioned hereafter, it is almost generally in the power of the physician, if called upon in time, to prevent any fever taking place.

In what manner this swelling of the epididymis is produced by the irritation of the venereal poison, retropulsed to the lower part of the urethra, I think unnecessary here to explain: but we see clearly, from the cause assigned, how it happens,

happens, that, after the swelling of one testicle is gone, the other is sometimes attacked; and that, after a suppression of urine from a retro-pulsed gonorrhœa, is removed, sometimes a swelling of the testicles arises. This is owing to the transposition or change of place of the poison. It will further appear, from the nature of this disorder, why a man who has been once affected with a swelled testicle is so easily affected with the same disorder a second time. But in order to establish a more rational and effectual method of cure of that complaint, than has been hitherto practised, I must observe, that this swelling is owing to the irritation of the poison transposed to a different place in the urethra, and not to the testicle itself; and, secondly, that it is not an inflammation of the testicle, as has been hitherto generally believed, but only a swelling of the epididymis. This I have found to be the case in all my patients; and saw it particularly confirmed in two cases where a swelling of the same kind was brought on by the simple application of a larger bougie, and cured without any other remedy than by leaving off the use of the bougie; which shows besides, that any irritation of the mouths of the excretory ducts of the seminal vesicles may bring on this disease *.

Having mentioned these observations about the nature and rise of a complaint which is sometimes attended with very disagreeable consequences, I shall first lay down such rules as I found by

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* There is another species of this disorder mentioned by some

experience the most successful to avoid it; and then proceed to the observations I made, to cure it when it has taken place.

To avoid a swelling of this kind, every thing that is apt to bring on a retropulsion of the clap ought to be carefully avoided. Such are, acrid astrigent injections, washing the penis with cold water, &c. or exposing it to the cold air, as for example, making water in a street where a cold wind blows; violent exercise of any kind; the preposterous use of balsamics, internally or externally; repeated purges, or venery; which points attended to carefully, together with the wearing of a bag-truss, from the beginning of any clap whatever, have effectually screened my patients from this disorder. Not one of them who complied with the rules just mentioned ever was affected with this disease.

But we generally find our patients not so compliable, or we are called in to such, who
having

some writers, viz. an inflammation of the testicle, arising from some of the venereal poison being deposited there from the mass. This kind of disease never came under my observation and I therefore can say nothing about it. We are also told that a swelled testicle arises sometimes from venereal ulcers of the glans being dried up: but neither do I recollect to have observed any case of this kind; though I have seen a patient, who, two years ago, was affected with a swelled testicle which being improperly treated, brought on a fistula in ano. This was operated, and nearly healed up, when a swelling of the testicle appeared again; for which I was consulted. I succeeded to disperse the swelling, by bringing on a running from the urethra, and to complete the cure by a course of internal remedies.

having been treated without any attention to those rules, are already affected with the swelling. Those require our compassion, and the immediate application of every means possible to relieve them.

The cause of the disorder, as said above, being an irritation of the mouths of the excretory ducts of the seminal vesicles, from the venereal poison having taken its seat at the caput gallinaginis, our endeavours, in order to do something effectually for our patient, must be, first to allay the irritation, and then to recall the poison to its former original seat, that is, re-establish the running; both which to obtain, I found the following method the most efficacious.

If the pulse be accelerated, full, and strong, he is to be bled immediately; and a good quantity of blood is to be taken from him; regard, however, to be had to his constitution, and other circumstances. If there be no irritation in the system, or only a moderate degree of it, bleeding is unnecessary, (and this will be nearly always the case, if we are called in soon at the commencement of the disorder); being convinced, from repeated observation, that a fever in this complaint is never an original disease, but brought on only in consequence of the irritation of those delicate parts.

To the swelling a common poultice of bread and milk, with a little oil, or, according to circumstances, sugar of lead, has been recommended by most writers: but having seen so little effect from this application, I have not for many years

past made use of it. Instead of a poultice, I order first a glyster to be applied, to evacuate the fæces, if the patient had not a natural stool; and then I advise him, if his situation will allow of it, to sit for half an hour in a warm emollient bath. If he cannot have that convenience, I place him in a perforated chair, upon the steam of hot water, for the same length of time; previously suspending his testicles. From thence he is to be carried to bed, and a dry bag-truss is immediately applied, in order to keep the testicles constantly suspended, as their hanging down produces or contributes to their irritation. A warm poultice may be also applied to the penis, in order to bring on the running again; or, in other words, to determine the retropulsed matter from its new seat to come back to the old one. But what I found principally to be relied on is, to administer a full dose of opium, or, according to circumstances, a glyster, made of equal quantities of lint-feed oil and barley-water, with a full dose of laudanum, to be injected, and occasionally repeated. He must keep a low diet, drink nothing but barley-water, or an emulsion of almonds.

To this method of treating swelled testicles by opium, which to my knowledge is new, I was led, about ten years ago, by a singular circumstance of a particular friend of mine, which I think unnecessary to relate; and I have since seen so good and speedy effects from it, that I now constantly make use of it. I have had many instances.

instances, where, by these means, the swelling and pain of the testicle were removed, and the running brought on, in the space of twenty-four or forty-eight hours; and in those cases where it had not that effect so soon, it always greatly relieved the patient, and prevented a fever. In all more obstinate cases, I constantly observed, that the symptoms of irritation, and the swelling, did never quit the patient, till the running of the clap came on again; but the moment this latter took place, the patient found himself relieved of the pain of the testicle, and the swelling gradually disappeared. To assist Nature in its beneficial efforts, the opium internally, or in an emollient glyster, is to be repeated every twenty-four hours; the parts to be exposed twice or three times a-day, for a quarter or half an hour, to the steam of hot water or milk; warm poultices to be constantly applied to the penis; and the accumulation of fæces in the rectum to be prevented, by a common glyster, occasionally repeated. By proceeding thus, we shall generally have the satisfaction to cure, in a few days, a disease which, by a different method of treatment, often requires many weeks to get the better of.

According to circumstances, some other more efficacious means to re-establish the running the sooner, if the symptoms of the swelling seem dangerous, might likewise be tried, and applied as mentioned above. The re-established clap ought to be treated afterwards in the common manner; taking great care to give no occasion to

a new retropulsion, which in such cases easily takes place a second time.

If the swelling has been treated improperly, it frequently happens that one or both testicles grow hard; and the disease is then commonly called a *Scirrhus Testicle*. In all those cases I constantly found the epididymis very hard and much swelled. In some, however, probably through the length of time, the testicle itself was likewise evidently affected, accompanied sometimes with a sensation of a painful pressure, but frequently without any pain at all. Mercury given internally, or rubbed in externally into the perinæum and scrotum twice a-day, with the constant application of a warm poultice made of the root of *atropa mandragora*, L. I found, in that case, a useful remedy. The cicuta, applied internally and externally, may be tried. An emetic has been sometimes found effectual. The decoction of the bark of the root of *daphne mezereum*, L. internally, and a poultice of it externally, has lately been very much recommended; but in several patients to whom I have given that decoction, I observed it made them so sick that they found it impossible to bear it on the stomach, even when I made it very weak. *Van Swieten* once told me, that he had given, for an indolent chronic induration of the testicles, lapides cancerorum, an ounce in a pint of good Austrian wine, or old hock, taking three or four table-spoonfuls every morning and evening, with good success. I once tried this remedy, and it answered extremely well. After *Van Swieten's* death, I met a patient who told

told me, that he had been cured by him of an hard swelled testicle, though not from a venereal cause, by the same remedy; and that he had been perfectly well ever since. It is, however, to be observed, that we will be sometimes disappointed by all these remedies; and that the hard swelling, of several months or years standing, will not go off, except we bring on the running.

A cancer of the testicle requires the extirpation; but whenever a testicle is cancerous, or in its structure diseased, we ought always carefully to examine whether the lymphatics of the spermatic cord are not at the same time affected; in this case, the kidney of the same side, to which those lymphatic vessels go, being generally diseased, the excision of the testicle proves an useless operation, and would only expose, by its fatal consequences, the surgeon's reputation.

We are told by some writers on this subject, that a venereal inflammation of the testicles frequently terminates in a suppuration. This may sometimes be the case; but never happened to any of my patients. I am therefore inclined to believe, that, if it happens, it more frequently proceeds from a bad treatment, than from any other cause. But perhaps that species of venereal testicles which we are told arises from a tainted mass, (if it ever exists), is more apt to end in suppuration, than that arising from a suppressed gonorrhœa, which, as we have seen above, very seldom affects the testicle itself. One particular case, which I saw eight years ago, though not venereal, deserves, perhaps, to be men-

tioned here. A young man of twenty years of age, afflicted with scrophulous swellings about his neck, was advised by a physician to make use of the decoctum lignorum; but, following this advice for some weeks, he was affected with a cough, which, in a fortnight after, ended in an hæmoptysis. Though he now left off the decoction, and made use of several other medicines prescribed to him, the cough continued for many months, accompanied with spitting of blood, or mucus streaked with blood occasionally. Being consulted, I gave it as my opinion, that his lungs were affected with scrophulous tubercles, for which I knew no remedy; and desired him to consult the first men of the profession in the place; though the remedies ordered by them did not in the least alter his cough, he was in other respects tolerably well, eat with appetite, and slept with ease. One day he came to me, and complained of a painful swelling on both sides of the inguina, but more so on one than on the other. Upon examining, I found the spermatic cord very much enlarged. I asked him, whether he had made free with the sex. He declared, upon his honour, he had never lain with a woman in his life, for fear of being poxed; but said he had had the same complaint several times before, and felt it always whenever he was in company with young women who strongly excited desire; that it grew sometimes extremely painful, insomuch that he avoided such occasions as much as possible. Having been in such a situation the day before, the same pain came on; but

but had continued so much longer than usual, that it induced him to apply to me for assistance. I advised him to apply cold water to the parts, which cured him of his complaint in a few days. Thus much I thought to premise to what follows.

Some months after, he complained to me that one of his testicles had become very hard, without any apparent cause. Upon interrogating him about the use of women, he repeated the same thing he had done before; but confessed that he had frequently masturbated himself, without knowing that such a practice could produce any disorder. I prescribed hemlock, and all the resolvers the Materia Medica affords, both internally and externally, but without any effect: the testicle grew painful, and daily larger; and at last burst, and a small quantity of purulent matter was discharged. On my return to town, after an absence of some months, he told me, that during that time a small discharge had continued; and that several fibres like white threads came away from the ulcer every day. Upon examination, I found the whole testicle reduced to a very small size, and the ulcer nearly closed up, and in a few weeks it was quite healed. His cough continued during all this time; but he appeared not to be more emaciated than when he first applied to me. Every three or four months, when the tickling of the cough seemed to increase, and he was afraid of a spitting of blood, he was bled by his own advice. The spermatic cords were quite natural. The same month of
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the following year, the other testicle became affected just as the former had been. A surgeon of eminence, who had treated the patient with me the preceding year, was called in during my absence; and though every thing was done for him which in my opinion could have been done, when I returned back to town, the complaint still continued, and had now lasted for ten weeks. At the expiration of the seventh week, the testicle burst; and now whole pieces of the spermatic vessels of the testicle were every day discharged from the opening; and in three months the testicle was reduced to the same size as the other, viz. to that of a small hazel-nut. There was no swelling in the spermatic cords; and the patient told me, he had strictly followed my advice, and avoided, for these two years, his bad custom above mentioned. The cough continued; but by degrees reduced him so low, that he died two years after.

The physician who attended him last informed me, that, on opening the body, he found a vomica in one of his lungs, and many large hard tumours or tubercles on both; but he had not examined the testicles. From what cause the disease of the testicles arose, whether from a scrophulous complaint, or from masturbation, I do not pretend to ascertain; but I relate the case only as a very particular and remarkable one, which shows, that there may sometimes happen a suppuration of the testicles even with the greatest care and most judicious treatment.

C H A P. V.

Of the Inflammation and Induration of the
PROSTATE GLAND.

I HAVE nothing in particular to say on the inflammation of the prostate gland, except when it arises from a suppressed gonorrhœa. In that case, we should use every means possible to restore the gonorrhœa, particularly those recommended for swelled testicles arising from the same cause; because, if this inflammation terminates in suppuration, whether the abscess breaks into the urethra, bladder, intestinum rectum, or perinæum, it will always be attended with very disagreeable consequences. The symptoms of an inflammation or swelling of this gland are known from the pain and difficulty of making water; besides, if we should be doubtful whence they proceed, the finger will clearly teach us. If a suppuration has already taken place, we have only to observe, that mercury internally and externally will be necessary, and afterward proper injections, the compositions of which are not particular, and must entirely be left to the judgment of the practitioner.

In the induration or scirrhusity of this gland, the remedies recommended for indurated testicles or buboes will be serviceable; but especially blisters,

sters applied repeatedly to the perinaeum, and internally the hemlock in large doses.

If a total suppression of urine is to be dreaded from the scirrhus swelling of the prostate, as is always sooner or later the case, every means possible ought to be tried to bring on a suppuration of the gland, in order to prevent still more disagreeable consequences.

CHAP.

C H A P. VI.

(On the VENEREAL ISCHURY and
STRICTURES.

A TOTAL suppression of urine, occasioned either by the remains of a former syphilitic complaint, or of a present venereal virus affecting the urethra, or neck of the bladder, we call a *Venereal Ischury*; and a partial suppression, or a difficulty of making water in a continued and natural stream, attended with pain, and a frequent desire to make water, arising from the same cause, is commonly, though not always properly, called a *Stricture*.

When I say, that the name *Stricture*, which has been given to the latter complaint, is often a very improper one, it is because a partial suppression of urine, as well as a total one, may arise from different causes, among which a stricture or constriction of one peculiar part of the urethra is only a common one.

The different causes by which either a partial or total venereal suppression of urine is produced, are, 1st, An inflammation or spasmodic contraction of the neck of the bladder, from a recent venereal gonorrhœa retropulsed. 2^{dly}, A chronic constriction or angustation of one particular part of the urethra, properly called a *Stricture*.

ture. 3dly, A compression of the neck of the bladder or urethra, producing a partial or total abolition of its cavity, by a preternatural swelling of the prostate or of any other gland of the urethra. 4thly, A prominent cicatrix of a preceding ulcer, or a fungous excrescence in some part of the urethra, commonly known by the name *Caruncle*.

As upon the perfect knowledge of these causes the radical cure of the disease entirely depends, we shall consider them more minutely.

Whenever the running of a venereal gonorrhœa is stopped by any cause whatever, the virus seems to go lower down into the urethra, and to excite there a similar irritation and inflammation, as it did in its former place. If it fixes its place at the caput gallinaginis, and irritates the mouths of the excretory ducts of the seminal vesicles, it produces, as we have observed in the foregoing chapter, a swelling of the epididymis, or what is commonly called a *swelled testicle*. If it goes still lower down the urethra, and settles at the neck of the bladder, it will, in these circumstances, not produce a swelled testicle, but an irritation, spasmodic contraction, or inflammation of the neck of the bladder, with a total or partial suppression of urine. The poison in that case, if the complaint be properly treated, will produce no other disease than a suppression of urine for a few days only: after which it will leave that place; and, on going more forwards into the urethra, bring on either a swelled testicle, or, if it returns to the same place
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which it originally occupied, reproduce the running, with the common symptoms of a clap, and so by degrees at last entirely go off, without leaving any bad symptom behind it. But this so much wished for circumstance does not always happen: the poison lodged in the neck of the bladder will sometimes produce, besides a variety of very disagreeable symptoms, an ulceration in that place, or in some other part of the urethra. Though the discharge arising from such an ulcer be, by degrees, partly or entirely stopped, and the ulcer itself healed, we often observe either a coarctation of the urethra remaining at the place where the ulcer was; or the cicatrix of the ulcer forming a kind of knot or protuberance into the passage. Sometimes also the ulcers, on healing, will form large granulations, or preternatural excrescences, which afterwards produce the same effect as a prominent cicatrix, under the name of *Caruncles*; or the prostate gland, or any of the glands of the urethra itself, ulcerated, form a fungous excrescence, protruding into the urethra, or neck of the bladder, and thereby produce an angustation, or a total abolition of the cavity of the passage. Anatomical dissections have also taught us lately, that two ulcers of the urethra in opposite directions, or a single but large one, will sometimes partly grow together by bands crossing the cavity of the urethra; and whilst the lower part of the ulceration remains open, and continues the discharge mentioned in the chapter on *Gleets*, the upper parts grown together

gether diminish or abolish the cavity of the urethra, and thereby prevent the free passage of urine.

In some of these cases the patient, especially by living sober and quiet, is able to make water pretty freely, but wants a long time in doing it. But, on committing the least excess in eating and drinking, or by taking too much exercise, the disease grows evidently worse: the urine comes from him either in drops only, or runs in a small and interrupted stream, exciting great pain and uneasiness; or the passage is entirely stopped, and thus endangers his life. The urine, in these cases, sometimes, as I have seen, forces its way into the rectum, and is evacuated by the anus; or it produces in the urethra, behind the coarctation, a dilatation, erosion, sinuses, or a fistula, through which it is afterwards constantly discharged.

The further back in the urethra this disease has its seat, the more difficult will be, in general, its cure, and the more danger awaits the patient. The more inveterate or complicated all these species of the disorder are, the more difficult is their removal. Those arising from a callous or contracted ulcer of the urethra, are more easily cured than those arising from a protuberant cicatrix or from caruncles. That kind of ischury which owes its origin to a retropulsion of a recent clap, I have observed easier and sooner to be removed than all others; that arising from a scirrhous prostate is sometimes, but not always, incurable; but for an ischury arising from a fun-
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gous excrescence in the urethra, I know of no remedy.

Method of Treatment.

THE first thing, if we are called in to a patient affected with a venereal suppression of urine, is, to inquire or search for the cause of the disorder, whether it arises from a retropulsion of a recent gonorrhœa, or from old complaints within the urethra. Our chief aim, in both cases, being to remove the ischury, we ought to examine, first, Whether the disease is still merely local, or whether there is a general irritation of the system. If the patient has a quick and hard pulse, bleeding is necessary. The quantity of blood to be taken is regulated by the state of the pulse and constitution of the patient. A man of a strong habit, or of a plethoric constitution, will bear the loss of a pound; whereas half that quantity taken, will operate sufficiently, and have the same effect, upon a delicate and more tender habit. It ought, however, to be observed, that, in such cases, the patient will reap more benefit from one copious bleeding, than from two or three small ones successively made one after the other. This being done, or when the system is not affected, the bladder, if much distended, ought to be evacuated, and the catheter applied for that purpose. Its application, however, in those circumstances, is sometimes very difficult, nay, even impossible. This is certainly often owing to the cause of the

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disorder;

disorder; but much depends upon skilful management of the surgeon.

In order to facilitate the introduction of the catheter, (after the patient has been bled, which, if necessary, should always precede), I have experienced the following management to be useful. The catheter being anointed with sweet oil, is to be introduced gently. As soon as we meet with any obstacle, care ought to be taken not to force it, but to wait a little, and then try to push it on again gently; because this obstacle seems sometimes to arise solely from a momentaneous spasm of the urethra, excited by the mechanical irritation of the catheter itself, which, if we discontinue pushing, frequently goes off in a few minutes, and the catheter is then easily introduced further; whereas if we go on pushing, in that case the spasm grows more violent, and renders the introduction often utterly impossible. It is owing, probably, to this spasm that we see sometimes that one surgeon is able to introduce it, while another, though by no means of inferior skill and capacity, had before tried it in vain. If the obstacle be at the caput gallinaginis, or higher up, we may very often remove it by introducing a finger in the anus, and thus assisting the catheter. I have seen instances where the introduction of the catheter proved impossible as long as the patient was lying in bed; whereas it went in very readily on the patient's sitting on the edge of the bedstead, his feet hanging down. I have also observed where a larger catheter was easily introduced, after a smaller one had been repeatedly tried without

without success.—I have been perhaps too full in enumerating all these circumstances: but I am confident, that, by a careful attention to one or the other of these points, we may not only often spare our patients a great deal of pain, but, what is perhaps more material, prevent a lues taking place; which easily happens when, by a rude treatment, the urethra has been wounded. I have certainly seen the most evident venereal symptoms arise in the habit from such a cause, where the patient had no other complaint before but an ichthyuria from a simple retropulsed clap. If the coarctation of the urethra be so great as to refuse, even under the just-mentioned precautions, any catheter whatsoever, an application of a small catgut will sometimes succeed, and prove highly beneficial. If the danger is not so great, viz. the bladder not very much distended, and consequently the *immediate* discharge of urine not so pressing, and the introduction of the catheter proves very difficult, some other means to procure a discharge of urine ought to be applied; of which I have found the following the most efficacious and useful. A common glyster, mixed with some honey or lenitive electuary, should be administered, in order to evacuate the fæces, and thereby to prevent the constant stimulus which their accumulation is apt to excite. As soon as the fæces are evacuated, a glyster of equal quantities of barley-water and linseed oil, with a full dose of the tinctura Thebaica, should be administered, and occasionally repeated. Every kind of medicine or food apt to go through the

urinary

urinary passages, should be carefully avoided; and, for the same reason, the patient should not drink even more of barley-water, or of the solution of gum arabic, than is necessary to quench his thirst. He should likewise, according to circumstances, be put in a warm bath, tempered with milk or decoction of bran, for half an hour or an hour, and the same be repeated four or five hours after; or, what I have found often very serviceable, he should sit upon a perforated chair, and expose his private parts to the steam of hot water mixed with vinegar. If he be restless and feverish, bleeding will sometimes be proper, and after it a full dose of laudanum should be administered to him in the evening. The judicious application of these remedies will sometimes answer in the most desperate circumstances.

I saw once, in a suppression of urine, where there was no catheter at hand, that a roasted onion, applied to the perinæum, by the advice of an old woman, had the effect, so that, two hours after the application, the urine flowed plentifully: and, in another case, the life of an eminent physician in the army was saved by covering the glans penis with the fresh pellicle of an egg found between the shell and albumen. As soon as the pellicle, growing dry, began to contract, the urine began to flow plentifully; but on applying it the second time, two days after, when the suppression of urine unexpectedly returned, it proved, as the person who recommended it foretold us, inefficacious, and the patient died. Perhaps the volatile liniment, or a blister, applied to the

the perinæum, would produce the same effect, with more certainty, and quicker, than the remedies did in the two cases related.

If we have been so happy as to evacuate the bladder either by the application of the catheter, or by such other means as have been now mentioned, our next care will be, to prevent a fresh accumulation of urine, and to remove as soon as possible the cause of the suppression. The first will be effected by continuing the same remedies, and especially (as has been recommended by some writers) by leaving the catheter within the urethra. This, however, none of the patients, whom I have hitherto treated, were able to comply with. They suffered so much from keeping the common catheters applied, whether made of silver or steel, flexible or inflexible, as made them conceive, that the pain which would arise from a repeated application of the catheter, or from a fresh accumulation of urine in the bladder, could not possibly be greater; and therefore withdrew the catheter, tho' they were very desirous to have retained it if they had found it possible. To guard against this inconvenience, I could never find out a remedy, till I tried the catheters invented by Mr Theden, first surgeon in the army of the king of Prussia. They are made of a golden wire covered with caoutchouc or elastic resin: their application is not only, in many instances, easier than that of the common catheters, or of hollow bougies of any kind; but also, in all instances in which I tried them, I found the patients could keep them applied, after the urine was discharged, with much less inconvenience.

venience. They are therefore, in those cases, much preferable to any other. But if we have none of these catheters at hand, which must be the case as long as they are so difficult to be got and so high in price *, we must listen to the patient's sufferings, withdraw the catheter as soon as it becomes too troublesome, and have recourse immediately to such remedies as will tend to prevent the return of the suppression.

To such as are in possession of any of those elastic catheters, the following rules, to be observed in their application, may perhaps be acceptable.

The elastic catheter, after being anointed with sweet oil, is introduced in the common manner. The surgeon, as usual, gently draws with one hand the urethra towards him, and holding the catheter with the fingers of the other, always at a distance of an inch or two from the glans, gradually introduces it; whilst this is performing, the catheter generally enters the bladder, without any particular direction from the hand of the operator. If any resistance be found, the rules mentioned above are to be observed, to facilitate the introduction; but if the resistance be at the neck of the bladder, there is nothing more to be done, than gently pushing the instrument forward, at the same time turning it from the right to the left; for by turning it in the opposite direction, the spiral windings of the gold-wire of Mr Theden's catheter would be separated. If the

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surgeon

* Both these inconveniences are now greatly removed by the catheters made of the same substance, by Mr Bernard at Paris.

If the surgeon finds the obstacle greater, he should, as I said above, stop the introduction till the contraction or spasm of the sphincter vesicæ, and the resistance, ceases, which happens for the most part in a very short time, when he is enabled to go through the passage easily. This catheter is introduced, like a common one, according to circumstances with or without a probe. After remaining in the urethra for some time, on being extracted, it is generally very soft, and therefore unfit for being used again until it has been cleansed and dried, and put for a little time in a cold place; which operation restores it to its former firm texture. The method of cleansing it is, to wash the outside with water, and likewise the cavity with the same applied by rinsing. For cleansing and drying its inside, a long needle with a silk thread will be most fit and adequate. When about to be used, and found to be too stiff, it may be softened by keeping it a little in the hand, or holding it near the fire.

But if all our endeavours to introduce any catheter or catgut have proved unsuccessful, and the danger of a rupture of the bladder, from its distention, be imminent, the urine must be at all events discharged. This should, therefore, not be deferred too long; and may be done, according to the seat of the disorder, either by an incision into the urethra behind the stricture, or seat of the stoppage; or if that seat be in the neck of the bladder, and the incision and introduction of the trocar in that place perhaps be found too difficult for the surgeon, the bladder may be
tapped^d

tapped through the anus, or an incision made above the symphysis pubis, and the bladder be tapped in this place, under the peritonæum; which is not a very difficult nor painful operation, and becomes necessary to save the life of the patient.

These are the means generally useful to give relief to the patient, in all cases of *ischuria urethralis*.

But, to cure that disorder radically, its cause, as I said, ought to be removed; which is effected, according to its nature, by different methods.

If the ischury proceeds from a recent retropulsion of a venereal gonorrhœa, the running must be brought on, and the clap recalled. For this purpose, besides the general remedies before mentioned, the steam of hot water, alone or mixed with vinegar, the volatile liniment, &c. applied to the perinæum, I have seen and experienced many times to be the most efficacious remedies to remove the venereal poison from the neck of the bladder, and bring on the running afresh. I recommend the suspension of the testicles during the application of the steam; because I have seen instances where the poison, leaving the neck of the bladder, instead of returning to its original seat under the frænum, has settled at the caput gallinaginis, and thereby excited a swelling of the testicle; which I have never observed since I took the above precaution. In the mean time, the patient should keep quietly in bed, and warm poultices should be constantly applied to the genital parts, and the accumulation of the
fæces

aces be carefully avoided by glysters. Emetics are, occasionally, as useful in this case as they are in swelled testicles; and the internal use of opiates produces, in many instances, a speedy effect. As soon as the venereal poison, on leaving the neck of the bladder, occupies again its original place, the running is re-established, and then to be cured as gonorrhœas in general are; only the patient ought to take the greatest care to avoid all the causes which are apt to bring on a similar retropulsion; as we see daily, that such a retropulsion, once taken place, is easily brought on a second time, and sometimes by the slightest occasion.

I must, moreover, observe, that in such a case, after the ischury is removed, I always found the internal use of mercury necessary for a radical cure; having seen several instances where the absorption of the virus took place during the suppression, and excited afterwards evident symptoms of its presence in the mass, though the local complaint of the genitals was perfectly cured.

If the suppression arises from a chronic complaint of the urethra, such as from a stricture accompanied with an ulcer of the urethra, or an erosion of the excretory ducts of the prostate gland or the seminal vesicles, this cause must be removed according to the rules laid down under the article *Gleets* and *Venereal Ulcers*.

If the stricture arises from a simple constriction of one particular place of the urethra, without any ulceration, our endeavours must be to dilate this coarctation; which owes its origin either to an

an ulcer healed up, by which the whole circumference of the urethra is lessened; or to a prominent cicatrix or callosity, occasioned by a previous ulcer. This is most effectually obtained by a long-continued use of bougies, beginning with the smaller ones, and so going on gradually until the patient is able to bear those of the largest size. This bougie he is to keep, in the beginning, for a quarter or half an hour, and afterwards, if he can bear it, for several hours, morning and evening. If a bougie of elastic resin be at hand, this precaution is hardly ever necessary, as they, growing soft and flesh-like in the urethra, produce little or no uneasiness. But as this kind of coarctation or stricture is sometimes so very small that it does not even admit the smallest bougie, the application of a small catgut is an excellent invention. The catgut once introduced, and left for some time in the urethra, begins to swell, by which the coarctated passage insensibly enlarges; so that, upon withdrawing it the first time, the patient is sometimes able to make water with unexpected ease; and the next time a larger may be easily introduced, and have the same good effect.—If by these means we have by degrees dilated the urethra so far as to admit the largest catgut, a bougie may be introduced; the use of which is to be continued for several weeks after he is perfectly cured and able to make water in one large continued natural stream.

If the coarctation does not even admit of a catgut, and the seat of the disorder is at a place which we can come at, an incision into the urethra
behind

behind the coarctation is, as I have said above, the most advisable: by these means, the urine will be discharged through the incision, whenever necessary, and the return of the suppression thereby effectually prevented. We may afterwards easily dilate the wound, passing the knife through the coarctation; and then introduce a bougie, which the patient is to wear until the stricture is removed and the whole healed up, and thus the complaint radically cured. The same method will be also sometimes necessary if the urine accumulated behind the coarctation has forced its way either through the intestinum rectum, in which case the patient will void his urine with the fæces through the anus, or by a fistulous opening through the perinæum. But, in these cases, it will be in general necessary to let him go through a course of mercurials before we proceed to the operation of the fistula; otherwise we shall find ourselves very often disappointed in curing this latter: if he has not strength enough to undergo such a course, as is frequently the case, he is to be prepared by a proper diet and medicine. On performing this latter operation, an incision must also be made through the stricture, the original cause and seat of the disorder; and the patient is to wear a bougie during the cure, and for some time afterwards, as in the case just before mentioned.

If the ischury arises from excrescences or caruncles, as they are commonly called, it has been advised, by one of our most ingenious surgeons in London, to introduce a covered caustic
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into the urethra to the caruncle, and apply it thereto. To perform this properly, an instrument has been invented: but whether this application is attended with safety and success in practice, I have as yet had no opportunity to ascertain.—The incision of the urethra at the place where the seat of the disorder lies, and the cutting out of those extraneous bodies, has been proposed by others. But I have never yet heard of any case where this operation had been performed.

In a scirrhusity or hard swelling of the prostate, or a fungous excrescence of the same gland, all the remedies recommended for resolving such a swelling ought to be tried; and if they fail, we should endeavour to bring the gland rather to a suppuration, than to let a disorder increase which so frequently proves fatal.

If a swelling of any of the smaller glands of the urethra should prove the cause of the ischury, and the most powerful resolvents should prove ineffectual, I would advise my patient rather to have the extirpation of the tumour performed, than to live in the constant anxiety about the dreadful consequences from his complaint.

C H A P. VII.

On VENEREAL ULCERS.

AN ulcer arising in any part of the body from a venereal cause is called a *venereal ulcer*, or commonly a *shanker* (or *chancre*); a name adopted, probably, to express its corroding nature.

Venereal ulcers owe their origin either to a *primary* or to a *secondary infection*; viz. to the venereal virus originally applied, or deposited from a tainted mass on the surface of the body. Both kinds may arise on any part of the body; but they appear more frequently upon parts which are not covered with the cuticle; such as the glans penis, the inside of the prepuce, the urethra, the labia pudendi, nymphæ, lips, mouth, nipples, &c. Of internal venereal ulcers we have not yet, as far as I know, any authentic observation.

Though venereal ulcers, as I have just now observed, do generally and most frequently appear only on parts which are not covered with the cuticle, especially in the glans, prepuce, mouth, &c. yet we meet not unfrequently with cases where they affect parts covered with the cuticle; as the penis, scrotum, thigh, &c. There are likewise instances where surgeons performing some operations, or persons assisting in the delivery of women, have had the misfortune of being affected with venereal ulcers in their hands
or

or arms. In all cases of this latter kind, the poison seemed to me universally to operate more powerfully than when originally applied to the parts not covered with the cuticle, or when deposited from a tainted mass. I know a midwife, who, having been infected in this manner several years ago, still suffers from the disease; and we have another instance in this metropolis, of an eminent male practitioner in the same art, who, by delivering an infected woman, got ulcers in his hand, and at this present time still labours under the consequences, though it is now three years since he received the infection.—I know a gentleman who, wounding his finger by accident with a penknife, exposed it the same evening to infection, without suspecting any bad consequences: the wound changed in two days to a very bad venereal ulcer, accompanied with a painful and obstinate swelling of the whole arm together with a bubo under the arm-pit, and symptoms of a general infection.

Though I have with the greatest care attended to all the cases of this kind which fell under my observation, I could not discover, in the constitutions of the patients, any particular cause of such violent symptoms. In two instances, the patient before and afterwards had venereal ulcers in places not covered with the cuticle, and the poison there produced the common symptoms only. It seems therefore probable to me, that, in order to excite primary venereal ulcers upon a place covered with the cuticle, the virus must either

either be extremely acrid in its nature, or produce more violent effects on account of its being applied to parts which have no mucus to dilute it, or to defend themselves from its acrimony. We observe, at least very seldom, such violent and obstinate effects in primary venereal ulcers upon parts not covered with the cuticle, or in secondary ones arising upon any part of the surface of the body. This is owing most probably, in the former case, to the poison meeting with a quantity of mucus to dilute it, and in the latter to its having been diluted, or undergone some change by its previous mixture with the mass.

Venereal ulcers, though arising from a primary infection, are either *local* or *universal*; viz. the venereal virus having been applied to the part, and, by its stimulus, produced an irritation and subsequent erosion, is confined still to that part only; or it has been already absorbed into the mass, and thereby infects the whole body. This distinction is useful and necessary in practice; ulcers of the latter kind, like those arising from a secondary infection, never being curable without a course of medicines which purify the mass from the venereal infection; whereas the former may be cured by mere local applications.

But here I must take notice of another distinction which is of the greatest importance in practice, and to which writers on this subject seem hitherto not to have paid due attention. Ulcers arising on the genitals are, now-a-days, sometimes after the slightest examination, generally

nerally pronounced to be venereal, and treated as such: yet it is certain, and daily experience shows, that ulcers, both of the fauces and genitals, may, in our days as well as in the days of *Celsus*, arise from acrimonies or miasmata which have nothing in common with the venereal virus. However, by not attending properly to this point, I have not only seen the honour of innocent persons brought into question, but patients, by an improper treatment, reduced to a miserable situation.

But the more dreadful consequences I have observed, when ulcers of the mouth and fauces, occasioned by the use of mercury itself, especially under a salivation, are mistaken; or when ulcers are confounded with venereal ones, which at first really owed their origin to the venereal virus, but during a mercurial course assume a different appearance, and seem to have entirely changed their venereal nature: instead of healing, to which point they seemed to approach, they now prove not only obstinate, but, yielding a thin ichorous discharge, grow worse under the continuation of the same remedy, and spread further and further.—To show the importance of these distinctions more evidently, I shall subjoin an account of a few cases relating to that subject; but speak more especially about their nature below, under the head of *Venereal Complaints incurable by Mercury*.

A gentleman twenty-one years of age, of a strong plethoric constitution, consulted me some
time

time ago about a chancre, as he called it, of the glans penis, with which he had been afflicted for eight or nine months. He had consulted, at the time he got it, an eminent surgeon at Dublin, who prescribed a course of mercurials. He was salivated: but the ulcer not healing, mercurial fumigations were applied for some time to the part affected; by which the ulcer seemed to grow less, and of a better appearance, but did not heal. He was therefore advised to a second mercurial course, with different preparations of mercury internally and externally; but, under this course, the ulcus grew larger, deeper, and in every respect worse. In that condition he came to London, and consulted me. Upon examining his case, I found a large deep ulcer of the glans, with hard and prominent borders, extremely sensible upon the least touch: its basis appeared reddish and pretty clean; but the discharge seemed to be of an acrid corrosive nature, by which, indeed, half the glans was already consumed. I told him that I had seen several ulcers of this kind before; that it was not of a venereal nature; and that mercury, according to my observation, was, in that kind of ulcers, no fit remedy: that I could cure him, but that it would require at least two or three months time; upon which he left me, promising he would call the next day and put himself under the cure: he did not, and I heard no more of him till four months after, when he sent for me. His complexion was lively and fresh when I saw him first; but was now of such a sickly and cachectic appearance, that I hardly knew him.

His story was as follows: That, having been dissatisfied with my first opinion upon his case, and with the advice I gave him, he, at the desire of a friend, had thought proper to consult another person: That, after a close examination, this person had pronounced his ulcer venereal, and had assured him that nothing but mercury could cure him; that he had not taken enough of mercury, nor the preparation which was deemed best in those cases; and that, far from two or three months being required for curing him, his prescriptions would effect a radical cure in three or four weeks time: That, upon these assurances, he had immediately submitted to a new mercurial course, which had brought on a gentle salivation; but with so little effect, that though the ulcer seemed to grow remarkably better during the first three or four weeks, it afterwards, instead of healing, had corroded the rest of the glans with part of the urethra. Upon which another surgeon was called in consultation, who advising the amputation of the part affected, and the former refusing to perform it, he had resolved to drop their further advice, and to hear mine once more. I found the part very much swelled, the prepuce affected with a perfect phymosis, and the urine discharging through three or four different holes. I advised him therefore to have the prepuce cut, in order to see the state of the ulceration, to clean the ulcer, or to apply such medicines as should be thought proper. Internally I prescribed him some strengthening medicines. He used these for eight or ten days: but the operation

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he put off from day to day; when he was advised by one of his friends to consult another physician, who, by means of a decoction of hemlock and ginseng root, promised to do something more for him than hitherto had been done. This decoction he took for a short time with very little effect, the erosion going on further and further. At last another physician was consulted, who insisted upon a strengthening course of medicines, nourishing diet, the enjoyment of country air, and bathing in the sea; by which means he is now re-established, with the loss of half his penis; which, had he followed my advice from the beginning, would have been nearly wholly preserved.

I make the following observations upon this case. *First*, That I think it extremely improper to administer a course of mercurials for a local venereal ulcer; which was the case with this gentleman when he first applied to the surgeon at Dublin: That a second course and salivation with mercurial fumigations were still more improper: That advising him a third course of mercurials, after the two former were found useless, was not only very injudicious, but extremely hurtful, as it rendered him unable for propagation, to the great sorrow of his family: That the advice given by the last physician to use some strengthening medicines, with a nourishing diet, to go to the country, and to bathe in the sea, was a judicious and honest one; and that the patient, who was only brought to follow this latter advice by the sense of his sufferings, would have been

free of all this misery, had he followed my advice in the beginning.

I was consulted in another case, where ulcers of the throat arising during a mercurial course, being taken for venereal ones, and treated accordingly, by the continued internal use of mercury, became so bad, that both the tonsils, together with the velum pendulum, were near entirely consumed, and the patient reduced to a most miserable situation, when, only by leaving off the mercury, and by the administration of a quite different course of medicines, he recovered. And Mr *Brambilla* gives us an account of a patient, who under a course of mercury being affected with ulcers of the fauces, which having been mistaken by the surgeon for venereal ones, not only lost his velum by the continued use of mercury; but had a caries maxillæ brought on, which proved fatal to the patient. The same author likewise observes, that inflammatory tumours or ulcers growing gangrenous, are by the internal or external use of mercury constantly rendered worse, though they evidently owed their origin to a venereal cause. I myself have seen many instances, where patients affected with venereal ulcers, united with a scorbutic habit of body, by the imprudent use of mercury, not only were reduced to a most wretched condition, but even to death. Mr *Fabre*, in the Supplement to his Observations on the Venereal Disease, relates likewise several cases, where ulcers, though evidently arising from a venereal cause, by a long continued use of internal and external mercurials, and even repeated salivations,
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not only remained without cure, but were brought to a state, which afterwards yielding to no other medicines whatever, proved fatal. Whence I think it will evidently appear, that, in practice, we ought to bestow the greatest attention in distinguishing,

1st, *Local venereal ulcers from universal ones*; viz. from those united with, or arising from, a tainted mass.

2dly, *Simple universal venereal ulcers, from complicated ones*; viz. such as are united with symptoms of scorbutus, scrophula, &c.

3dly, *Ulcers of the genitals, mouth, fauces, &c.* arising originally from other causes; for example, brought on by the acrimony of the saliva during the internal use of mercurials, or mercurial fumigations from real venereal ones. But, principally,

4thly, *Ulcers of the mouth, nose, genitals, groins, &c.* which, though seemingly or evidently brought on by a venereal cause, have now, as it were, changed their nature, at least so far, that mercury has no further good effect upon them, but rather the contrary.

The characters, by which those different kinds of ulcers may be distinguished, are not easily described; inspection and practical knowledge must be our best guide. An attention to the following points, however, may assist us in forming a judgment.

Venereal ulcers are, in general, pretty easily distinguished by their hard margin or borders, by the lardaceous crust with which their basis is

covered, and by the preternatural redness of the skin all round the ulceration; which will be rendered more probable if the patient is conscious that he has previously exposed himself to the infection. As there may, however, arise ulcers in the genitals, of a different, or sometimes, perhaps, of a nearly similar appearance, from other causes, as has been long ago taken notice of by the most ancient medical writers, and confirmed in several instances by my own observation, we should be cautious and never form a rash judgment about the nature of such ulcers, nor pronounce them venereal before we are perfectly assured of it. By following a contrary method, we may not only hurt the reputation of an honest person, and disturb friendship, and sometimes matrimonial happiness, as I formerly mentioned with respect to gonorrhœas; but do a material harm to the patient, by administering improper medicines. Ulcers which are not of a venereal nature, may be distinguished from venereal ones,

1st, By their different appearance.

2^{dly}, By their arising only, or growing worse, during the use of mercury.

3^{dly}, By their having been unsuccessfully treated with mercury before.

4^{thly}, By their exquisite sensibility.

5^{thly}. By the relaxed state of the whole body, or by the flabby relaxed appearance with an ichorous discharge from the affected part.

6^{thly}, By symptoms of other disorders, either alone, or accompanied with venereal ones.

Method

Method of Cure.

It has been advised by several eminent medical writers, to treat all real venereal ulcers or chancres in the same manner, *viz.* by internal mercurials only, and never to make use of any external application. Several specious reasons have been alleged for such a treatment; which, however, are not satisfactory to me. They say, that chancres are signs of the presence of the venereal poison in the body; and if, therefore, they disappear by the simple internal use of mercury, we are sure that the medicine has penetrated into the mass, and that the poison is totally eradicated. To this I answer, That recent venereal ulcers brought on by an original infection, are by no means such symptoms, as has been asserted: On the contrary, they are in that case only a local disease, which requires no internal, but merely local remedies; and if no topical application is made use of in time, they very often spread amazingly, the poison is absorbed, and produces either buboes or other venereal symptoms in the mass. I undoubtedly allow, that if they are of some standing, the mass will then be in consequence infected; in which case, as well as when they arise from a secondary or universal infection, they are certainly what has been asserted of them, signs hanging out as proofs of the presence of the poison in the mass. Then, indeed, I perfectly coincide with the opinion, that they may be treated only by the internal use of mercury, with-

out any external application, because, if they disappear by the internal use of mercury alone, without having applied any external remedy, we are sure that we have eradicated the poison from the mass, and cut off the evil by the root. But if they are in the genitals, or in the extremities, the poison often excites violent inflammation, phymosis, mortification, &c. or it is absorbed and carried to the lymphatic glands, where it occasions buboes, before the mercury has had time to produce its effects and to destroy it on the part affected.

These are the reasons why I always choose to apply immediately to such ulcers, those remedies which I found the most effectual for removing them; because I think there is no patient, acquainted with the nature of the disorder, who would not prefer being affected with a real pox, to a mortification of the penis, or to a bubo. As to what has been said and observed by some, that a bubo very often appears after chancres have been healed up by external applications, and that consequently those very remedies which are recommended to avoid buboes not unfrequently bring them on, I readily admit the fact: but I am very far from believing the consequence drawn from it, *viz.* that external remedies applied to a venereal ulcer, ever promote the absorption of the virus. It happens, in that case, what we see every day happen, without the use of any external application whatsoever, or what we must daily be afraid of, as long as there is the least appearance of a venereal ulcer. What they ascribe in that case

safe to the medicines externally applied, I would rather ascribe either to their application being too long delayed, or to their not being sufficiently efficacious. In all cases, therefore, where I have reason to apprehend such bad effects, I think it not only proper but necessary to apply to all venereal ulcers, whether of a primary or secondary infection, the most efficacious local remedies, in order to remove them as speedily as possible: with this difference only, that I consider ulcers arising from a recent original infection as merely local, and think they may be safely cured by topical applications alone, without the internal use of mercury; whereas, those arising from a tainted mass require always, at the same time, a course of mercury. This last method I likewise follow in venereal ulcers of some days standing, although from an original infection; there being always the greatest probability that some of the poison has been absorbed into the mass during that time. External applications in those cases will never have any permanent effect; because, if we are even able to destroy the poison in the affected part, and to consolidate the ulcer, it will soon break out again on the same or some other part of the body, as long as there remains the least particle of it subsisting in the mass.

The external remedies recommended for this purpose are, *Mercurials*, *Astringents*, and *Caustics*.

Among the mercurials, the red precipitate sprinkled upon them every morning and evening, I found answer the best, as long as the ulcer is covered with the white lardaceous crust.

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The mercurial ointment in this case is of no use; but whenever the ulcer assumes a cleaner appearance, then the simple mercurial ointment, calomel in powder or suspended in lime-water, or, according to circumstances, the sublimate with lime-water, or a diluted solution of mercury in nitrous acid, are more serviceable. In cases more obstinate, the mercurial fumigations prove sometimes excellent.

If the mercurial applications prove ineffectual, the external use of astringents is often extremely serviceable. The Peruvian bark, aqua vitriolica camphorata, a solution of blue vitriol, or the viride æris dissolved in oil, are those commonly made use of; but from the yellow copper (aurichalcum) in powder sprinkled upon them, I know of ulcers cured which resisted the power of all other medicines. The same astringents will also sometimes answer our expectations, in ulcers of an atonic or relaxed appearance, yielding an acrid ichorous discharge.

The application of caustics has been lately recommended in recent venereal ulcers, so as to touch them every twelve or twenty-four hours with the lapis infernalis, till sloughs falling off successively, the basis of the ulcer becomes red and pure. This practice is undoubtedly sometimes proper: but there are constitutions which will not bear any acrid application whatsoever, especially that of caustics. I have seen instances where, in such irritable or in scorbutic constitutions, very bad symptoms followed; and in one case, where a mortification of the part was
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the consequence of such an application. In these subjects, the internal use of Peruvian bark with external astringents, or occasionally a mercurial lotion, will be more serviceable.

If venereal ulcers resist all the means just now recommended, the internal and external use of strengthening medicines, a full diet, the use of wine, country air, and sea-bathing, as mentioned above, will sometimes prove effectual when all other remedies have failed.

Of other medicines recommended for inveterate venereal ulcers, I shall speak hereafter under the article of *Venereal Complaints incurable by Mercury*.

I have said nothing about the venereal ulcers of the nose, eyes, face, &c. because they require the same treatment as others, and may be easily avoided, by taking care that a patient with a venereal gonorrhœa or ulcers of the genitals, after having touched the part affected, always carefully cleanses his fingers.

Ulcers of the uterus or vagina, accompanied with an acrid ichorous discharge, are not always, as is generally imagined, cancerous, but not unfrequently venereal; and may be then often cured by proper injections, and the internal use of mercury. I have seen several women, who thought themselves, from the pain and ichorous discharge tinged with blood, affected with a cancer of the uterus, believing in that point the judgment of their attendants, radically cured by the internal use of powerful, strengthening, and absorbent medicines, and by injecting a solution of sublimated calomel in lime-water, alone or mixed with the tincture of mastic, or, according

according to circumstances, the infusum corticis Peruv. in aqua calcis.

But we are mistaken if we expect any good in this case, as well as in the fluor albus or hæmorrhagy of the womb, from injections, as they are commonly used. If we wish to see any effect from them, they must be applied to the affected part; and therefore not thrown in the common manner into the vagina, in expectation that they will of themselves, by these means, reach the seat of the disorder, or the cavity of the uterus. A proper syringe, of a particular form and size, calculated to prevent the matter injected from escaping at the sides, must be introduced as high as possible into the vagina, or, if possible, into the orifice of the uterus itself; the patient lying in bed upon her back, with her breast and head a little declined, and her knees bent: and in this situation the injection is to be applied, either by herself or by an assistant, three or four times successively, keeping the syringe always in for some minutes, and repeating the same operation six or eight times a day.—A syringe made of a bottle of elastic resin, with a thicker and longer pipe than common, will answer for the above purpose extremely well, and will effectually remove the prejudices hitherto so justly entertained of the inefficacy of injections in females.

For *cancerous ulcers* of the genitals as well as of other parts of the body, the Materia Medica has, to my knowledge, nothing to afford; and all those medicines hitherto recommended for curing cancers, appear to be deceptions of the inventors themselves or of the public. Surgery alone can
radically

radically cure cancers, if applied in time; and no honest physician will ever recommend uncertain remedies, to temporise and lose in the mean time the moment where he could have applied a certain one, I mean the extirpation not too late deferred where it can take place.

ON VENEREAL FISTULAS.

IN treating of venereal ulcers, we must say a word about venereal fistulas, which are nothing but venereal ulcers deep penetrating into the cellular membrane and adjacent parts, with a small callous orifice, and callous inside. Their seat is mostly in the urethra, groins, anus, &c. but sometimes also in the lachrymal sac of the eye.

Besides the internal administration of mercury, the injections above recommended ought to be tried; if they do not succeed, the surgical operation ought to be performed. We should, however, never attempt this latter before we have carefully eradicated the venereal virus from the tainted mass. From the neglect of this point, we see daily, that such patients undergo two or three times the operation, without being the better for it: the fistula remains as obstinate as it was before; or, healing in one place, it soon breaks out in another. If the fistula heals quick and perfectly after the operation, it is a certain sign that the patient has been radically cured of the lues.

The fistula lachrymalis, arising from the venereal virus

virus lodged in the lachrymal sac, yields very often a yellow greenish discharge, resembling that oozing out of the urethra in a clap. Whether it ever arises from a suppressed or retropulsed gonorrhœa, I cannot positively say; but it owes its origin frequently to the venereal poison deposited from a tainted mass, and requires internal and external mercurials.

The virus oozing out from venereal ulcers and fistulas, is sometimes of a very corrosive nature: they should therefore be dressed with a piece of soft sponge every twelve or twenty-four hours; and the surrounding surface of the skin should be carefully defended, by anointing it with the white cerate, or saturnine liniment.

CHAP.

C H A P. VIII.

Of the PHYMOSIS.

THIS disease, in which the prepuce is so straitened on the point of the penis that it cannot be drawn back over the glans, has been called *Phymosis*, from the Greek *φίμωσις*, *præcludo*, *obturo*; and might be perhaps in our language more properly called a *coarctation* or *stricture of the prepuce*.

To this disorder are especially subject men who from nature have the glans covered with a more strait prepuce, or have too short or too straight a frænum; all those whose religion orders circumcision, are free from it.

This disorder arises, in our days, generally from venereal ulcers in the inside of the prepuce, or from the *Blennorrhagia balani*, (*gonorrhœa spuria*), producing a violent swelling and inflammation of the prepuce.

It has been recommended, if the phymosis be violent, to make an incision of the prepuce; which is certainly sometimes necessary; but, where surgical operations can be avoided, I think they ought. This operation has been advised principally either to prevent the spreading of chancres, which are frequently the cause of the phymosis; or to avoid buboes; or, what is still more material, to prevent (if there be any ulcers)

ulcers) a concretion of the glans with the prepuce. Those who, in curing chancres, trust entirely to the internal use of mercurials, will hardly insist upon this operation. As to the danger of their producing buboes by an absorption of the poison, I allow the apprehension to be perfectly just; but I cannot admit, that an incision would prove a preventative. A fresh wound, by exposing a fresh and larger surface to the absorption of the virus, must, in my opinion, rather increase the danger. I think it, therefore, more proper to obviate those bad consequences by proper injections, and by introducing some fine lint once or twice a-day with a probe between the prepuce and glans. However, if this should be impracticable, or livid spots should appear thro' the prepuce, immediate recourse to the operation ought to be had, lest a greater evil, a mortification, should ensue.

In order to ascertain whether there is a venereal ulcer between the prepuce and glans, I introduce a probe, with some lint affixed to it. Then, turning it round the whole glans, the patient generally feels pain, if there is any ulcer, as soon as the probe with the lint touches it; and upon withdrawing it, a part of it will be stained with purulent or puriform matter; whereas, if there is but a simple gonorrhœa spuria without any ulceration, the whole of the lint will be stained with the same equally. In either case, if the inflammation and swelling is violent, I apply a poultice made of bread and water mixed with some acetum lithargyrii; and inject three or four times

times a-day a diluted solution of mercury in nitrous acid, or the sublimite or calomel suspended in lime-water, or, according to circumstances, Plenck's solution of mercury with gum arabic, between the prepuce and glans, in such a manner, that the interstice between them is filled and distended with the injection. If there be any ulcer, some lint dipt in the same, may be applied to it, by means of a probe, once or twice a-day. I think there is never any danger of a concretion of the parts as long as the ulcers remain venereal; and in the mean time their nature is changed, the phymosis is also generally removed. Internal mercurials ought in such cases never to be omitted. But, as I have observed just before, the incision of the prepuce ought to be immediately performed, if the inflammation be very high; if there appears any danger of mortification; or if we have reason to suspect, beneath, an ulceration of a bad or perhaps cancerous nature.

C H A P. IX.

Of the PARAPHYMOSIS.

PARAPHYMOSIS, a word derived from the Greek *παρά* *de*, and *κλυσ* *præclusio*, *obturementum*, signifying the opposite of phymosis, is a disease where the prepuce, being drawn behind the glans, is so contracted there, that it cannot be brought again forwards over the glans; and would for this reason in my opinion, be more properly named a *strangulation of the glans*.

Men who from nature have a strait prepuce are most subject to this disorder, which arises either from venereal ulcers, or from a preternatural swelling of the glans, as is sometimes the case in violent claps. I have little to add to what has been said on the subject, by Celsus and by some modern writers.

I have seen an instance where a gangrene of the glans was the consequence of such a strangulation, before the surgeon could come to give assistance. We ought therefore to use our utmost endeavours to bring the prepuce forwards as quick as possible.

The most effectual remedy for this purpose is to sprinkle repeatedly cold water upon the part in the mean time gently pressing the swell-

ed glans with the fingers dipped repeatedly in cold water, so as to squeeze out, if possible, all the blood extravasated in its cavernous substance. By these means, the turgescency of the corpus cavernosum glandis will be most efficaciously diminished; and by skilful management, gently pressing the glans backwards, whilst we endeavour with the fingers of the other hand to bring the prepuce over it forwards, we will very often succeed, and relieve the patient from imminent danger. Ice, or water rendered by art cold as ice, may perhaps be useful to the operator in accomplishing this desirable effect; but if the disease be accompanied with a venereal gonorrhœa, we must be cautious with regard to the application of cold, lest we might bring on a worse complaint, by a retropulsion, than the disease for which cold is applied. If we are not soon able to reduce it, and the symptoms be violent, we should not defer the operation, but make an incision in the prepuce or frænum; an operation by no means dangerous, but absolutely necessary to prevent the most disagreeable of all consequences of venereal complaints, a mortification of the glans penis. If there are venereal ulcers in one side, I prefer always to make the incision of the frænum or prepuce on the other side; in order to secure the wound, as well as possible, from the poison, and to prevent its absorption by the lymphatics of the fresh wound.

C H A P. X.

On VENEREAL BUBOES.

A SWELLING of any of the lymphatic glands of the body is called a *Bubo*; and if such a swelling is occasioned by the venereal poison, we then call it a *Venereal Bubo*. The latter only comes within the plan of this treatise.

Though buboes may arise in any part of the body where lymphatic glands are situated, yet we have no authentic observation of their ever existing any where except in the lymphatic glands of the groin, under the arm-pit, or of the extremities; and even of these, the latter are much less frequent than the former.

Venereal buboes arise from two causes, essentially different from one another; this difference has in general not been attended to with that accuracy which the importance of the subject might seem to require. Buboes have hitherto been supposed to arise always from the venereal virus absorbed by the lymphatics, and by then carried to the gland; but this is not always the case. Buboes frequently owe their origin to the poison lodged on the surface of the body, irritating there the mouths of the lymphatics, without being absorbed by them. These vessels being irritated, produce a swelling in the nearest lymphatic

phatic gland they go to. In the one case the cause of the bubo lies in the gland itself, in the other without it; so that we may properly distinguish them, by calling the former an *idiopathic*, and the latter a *sympathic* bubo.

This distinction, being founded on the most evident facts, is absolutely necessary to regulate the method of cure.—But the distinction of idiopathic buboes into *primary* and *secondary*, viz. such as arise from an original infection, and those which are supposed to owe their origin to the poison deposited from the mass into the gland, seems to be of no practical use whatever.

Idiopathic venereal buboes, as we have observed, owe their origin to the venereal poison absorbed and lodged in the gland. This absorption frequently takes place after the virus has by its acrimony produced some slight excoriation or ulceration in the surface of the glans, prepuce, urethra, genital parts, or extremities. Whether a bubo ever arises, as has been hitherto generally asserted, from the venereal virus being deposited from the mass into the gland, like pestilential buboes seem to arise in the plague, is with me as yet a matter of doubt; this assertion seems hitherto rather founded on an hypothetical supposition than on real observation. But that buboes may sometimes, though seldom, arise from an immediate absorption, without any previous excoriation or ulcer in the surface of the body, is probable from several authentic observations; though this opinion has been controverted by some modern writers.—About 12 years ago, three

soldiers came into the military hospital in one week, all affected with a bubo from the same woman. They had all been in perfect health a few days before; neither had any of them the least excoriation in the genitals or thigh now, nor even any appearance of a running.—Whether this immediate absorption is owing to a torpid and less irritable habit of body, or to the greater subtlety or less irritating nature of the virus in some cases, I pretend not to ascertain. But to this immediate absorption it is perhaps owing, that we cannot always avoid a bubo, or perhaps even the lues itself, by using the best preventatives; though they may most effectually prevent gonorrhœas and original chancres.

That idiopathic buboes arise not only from the absorption of the venereal poison from ulcers of the genitals or urethra, but likewise from venereal ulcers in any part of the upper or lower extremities, is confirmed by experience. I shall adduce a few examples by way of illustration.—A most intimate friend of mine had, some years ago, the misfortune of being affected with chancres. Being then on his travels, he took some mercurial pills; by the use of which, the ulcers were cured in about ten days. The pills were then discontinued, and he had no complaint till six months after, when he was one night awaked by a violent itching at his right elbow. Next night, the same returned; and the third morning, upon examining the spot, he found it covered with a thick yellow scurf like a tetter. As he was at that time on a journey,

journey, he delayed taking advice; thinking that his complaint might perhaps go off. But, two days after, he perceived a swelling under his arm-pit; which, in three days more, increased to such a degree, that, when he came to me, he was obliged to keep his arm a considerable way out from his side. I told him the nature of his complaint. In a few days, by proper applications, the tumour was dissolved, and my patient perfectly cured some weeks after.

Soon after, I was consulted by a gentleman who had undergone a mercurial course about fifteen months before, for a venereal complaint, of which he imagined himself perfectly cured. Some weeks before he applied to me, he began to feel a pain in the middle of the sternum, which he took to be rheumatic. On this supposition, he rubbed the part affected with a piece of flannel, morning and evening. Thus the pain in the sternum was removed; but the second morning after, the great toe of the left foot, and that next to it, were in like manner affected. This pain being removed by friction with flannel as before, returned to the sternum; from which being driven by a similar friction, it again returned to the foot. He now began to imagine that his complaint was of a gouty nature; but having occasion to go abroad that day, he bathed his foot in warm water, and pared a corn which he had upon one of the affected toes, in order to walk the more easily. In performing this operation, he cut too deep, and a few drops of blood came. Upon this he immediately desisted: but the next day, on examining

the part, he found a little suppuration had taken place; upon which, he covered the fore with a piece of clean linen.—The second evening, he felt a slight pain in the groin, which he then disregarded; but in a few days after, when one of the glands swelled to the bigness of a pigeon's egg, he asked my advice. I informed him that he not been radically cured of his former disorder, and that the present symptoms were a consequence of it; that the pain both of the sternum and of the toes was venereal; and that from the wound of the toe, and succeeding suppuration, the poison had been absorbed by the lymphatics, and carried to the first gland they met, which in this case was one of the lower lymphatic glands of the groin. The ulcer of the toe still continued, but was very small, and discharged a little matter resembling pus. I applied upon it a mercurial plaster; and cured the bubo, as well as the cause of it, by a course of mercurial frictions.

Some years ago, an eminent accoucheur in London, was called to deliver a woman, who unknown to him was affected with chancres. Ulcers on his hand, and a swelling of the lymphatic gland of the fore-arm, which proved very obstinate, were the dreadful consequences.

Sympathic venereal buboes, as I have already mentioned, owe their origin, not to the absorption of the venereal poison, but to an irritation of the mouths of the neighbouring lymphatic vessels. This species of buboes we frequently meet with in simple venereal gonorrhœas; or, where one of the glands is idiopathically affected, we sometimes see

two or three contiguous thereto, swelled by sympathy. In this case, however, only that which is really infected, continues to increase in bulk; while the others remain in the same state, and at last disappear without any increase of their swelling.

Sympathic buboes go off spontaneously, as soon as their irritating cause in the neighbourhood is removed; and it is only this kind of buboes, which quacks, with their pretended nostrums, seem to remove sometimes in a few days; while, on the other hand, we frequently hear some patients complaining of intelligent physicians, for not having been sufficiently expeditious in curing their bubo, or not having done it without suppuration, though they had formerly been radically cured by a quack, by the simple application of a mercurial ointment or plaster to the part affected. If such patients, however, were acquainted with the difference between the true nature of their present and former complaint, they would easily see, that, in the former case, the cure was not to be attributed to the ointment or plaster applied, but merely to the nature of the disease; whereas, in the latter, great skill and attention is often requisite, either to discuss a bubo, or to cure it, after the attempt to discuss it has proved ineffectual.

Having established this essential distinction betwixt Idiopathic and Sympathic buboes, I should now proceed to speak of the method of treating them; but, previous to this, I think it useful to take notice of some prejudices which are entertained by many, concerning the nature and cure of this complaint.

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By many people, especially those who inhabit the more southerly parts of Europe, it is reckoned dangerous to resolve or discuss a venereal bubo. This prejudice arises from an opinion that the virus is by this method repelled and absorbed into the mass, where it afterwards occasions a general infection: whereas, if the bubo is cured by suppuration, they imagine that no infection of the mass is to be apprehended; but that, on the contrary, even in case any poison should have been absorbed during the suppuration, not only the virus lodged in the gland is carried off, but likewise the whole mass is thereby purified. Hence they imagine that the abscess formed by the suppuration of the bubo, is a kind of channel for cleansing the body entirely from the venereal poison. As this opinion, however, is not only altogether erroneous, but may prove hurtful to the patient, at least by depriving him of an advantage which he might otherwise have enjoyed, I must make two observations on this subject. *First*, That, by the modern improved practice of applying mercurial frictions, the discussion of a bubo cannot possibly occasion any such thing as a *retropulsion* of the venereal virus into the mass; but that, on the contrary, by following this method, the virus lodged in the gland itself is effectually destroyed: and, *secondly*, That, though the virus should have been actually repelled from the gland into the mass, such a *retropulsion* would still be preferable to the method of curing the bubo by suppuration.

But in order to set this matter in the clearest light,

ght, I must have recourse to the anatomical discoveries which have been made about the lymphatic system; and then consider what must be the consequence of mercurial frictions applied in the manner to be mentioned hereafter.

We know, from the observations of Professor Alexander Monro, and those of the late Dr W. Hunter, and particularly from Mr Hewson's plates *, that the lymphatic or absorbent vessels begin every where on the surface of the body, with the smallest ramifications; that, in going upwards from the lower extremities, they unite into larger branches, which terminate in the inguinal glands, pouring into them the liquid which they have absorbed at their extremities. This liquid, which in a natural state is nothing but mild lymph more or less diluted with water, which has been absorbed from the surface of the body, after being poured into the lymphatic inguinal glands, is again absorbed by other lymphatic vessels, which carry it to the abdomen, and from thence through the thoracic duct into the mass. Let us now suppose that some of the venereal poison has been absorbed by the lymphatic vessels of the genital parts, or of the lower extremities, and that consequently it has been carried along with the lymph into one or more of the

* But this, as well as the anatomy of the whole lymphatic system, and the diseases depending thereon, will be more especially illustrated by the singularly accurate and beautiful plates executed under the direction of *Mr Sheldon*, at present lecturer of anatomy in London; which it is to be hoped he will not long withhold from the public.

the inguinal glands. The poison thus brought into the gland will either be absorbed again by the opposite absorbent vessels, in which case it is carried into the mass; or, what more frequently happens, it will, by its acrimony, excite an irritation, and thereby not only prevent its own absorption, but produce an inflammation and swelling of the gland. In these circumstances, the most eligible thing both for the patient and physician, would be, if possible, to destroy and eradicate the poison lodged in the gland. For this purpose, we know mercury is a specific; but the question is, how to bring it into the affected gland. Formerly practitioners, thro' a defect of anatomical knowledge, imagined they could introduce the mercury into the gland, by rubbing the mercurial ointment upon the gland itself. But so far was this from having the intended effect, that buboes treated in such a manner generally became more inflamed, suppurated, and even sometimes mortified. By such an application no mercury is introduced into the affected gland; or, if it happens now and then, it is merely by chance; for we know that the lymphatics arising from the skin immediately above the gland do not take their course into the substance of the gland, but proceed obliquely upwards to the abdomen. Hence the bad or good effects produced in that case are not to be ascribed to the mercury, but rather to the mechanical irritation occasioned by the frictions, and would probably have taken place had any other ointment been employed. But if, instead of rubbing the
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mercurial ointment upon the gland itself, the same be rubbed into the thigh or leg of the side affected, we are to expect, according to the discoveries of the course of the lymphatic vessels, that the mercury will be absorbed by their extremities, and from thence conveyed to the affected gland, where meeting with the venereal poison, it will most effectually exert its specific power against it. That this is really the case, appears from the successful practice of this method; for, if the mercurial frictions have been applied upon the proper place, and in time, before the inflammation has gone to too great a length, we find, that, in eight buboes out of ten, the poison is thereby either destroyed, or at least so changed in its nature, that it is now no more capable of irritating the gland any further; nor do we observe, that the virus thus changed, and then absorbed along with the mercury, does ever afterwards produce any venereal symptoms in the mass.

But let us even suppose that the mercury has not destroyed the poison lodged in the gland, but has driven it into the blood, as those patients commonly believe. What will be the consequence? The same, undoubtedly, as when a victorious hero dislodges and chases a flying enemy before him. The very same remedy which drove the poison from the gland into the mass, will pursue it there also; and either expel it altogether, or render it, one way or other, inoffensive to the body.

To elucidate this matter still further, I must answer

answer a question which I have heard frequently proposed, viz. Why does the method of rubbing mercury into the extremity not always succeed to discuss the bubo in every stage of the disorder? For the solution of this question, we must again have recourse to anatomy. From this we know, that there are two series of lymphatic glands in the groin, called the upper and lower inguinal glands. In most people there is a communication between these two orders of glands: in this case, the lymphatic vessels of the inferior glands communicate with the superior ones, whence again others arise which take their course through the abdomen into the thoracic duct. But in other persons there is no such communication; the lymphatic vessels of the inferior inguinal glands proceed directly to the abdomen, without intercommunicating with the superior ones. Now, the venereal virus being absorbed by the lymphatics of the genitals, is generally carried to the superior inguinal glands, where it produces the bubo. Whenever therefore the inferior inguinal glands have the above-mentioned communication with the superior ones, the mercury rubbed into the inside of the thigh or leg will be absorbed, carried to the inferior, and from thence to the superior inguinal glands, where it will produce the desired effect. But, on the other hand, where no communication of this kind takes place, the mercury is carried from the extremity to the inferior inguinal glands, and from thence to the abdomen, without ever reaching the affected

ected gland, on which of consequence it can produce no effect *.

But let us even go further, and suppose, that the method of treatment just recommended has not been followed; but that, instead of it, the irritating matter has been blunted, and the absorption of the poison from the gland effected by other sedative or discutient applications. What will be the consequence? I answer, instead of a bubo, the patient will be affected with a disease of the whole system; which, if recent, may be certainly and radically cured in a few weeks time, without any bad consequences remaining; whereas the complaint with which he was affected before, is sometimes very dangerous, at other times extremely obstinate, and always of a very tedious nature. Besides, even when the suppuration is of the best kind, which, however, is far from being always the case, the poison, before or after the abscess is formed, instead of being entirely evacuated, is, if not constantly, at least very frequently, absorbed into the system. Thus the disorder which the patient so much dreaded is really produced; for the cure of which he will at last be obliged to have recourse to mercury, the remedy he was formerly so much afraid of.

Let us now proceed to the method of cure.

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* The same will likewise happen where the inflammation of the bubo is gone too far, or where a scirrhusity is formed in the gland. Mercury in these cases can have little or no access to the gland; or though it could, would yet be very little able to change the nature which the disease has now assumed.

The Method of Cure.

FROM the observations laid down, it appears that every unprejudiced practitioner, in any case of an idiopathic bubo, should always attempt to discuss it as soon as possible, by any method whatever, provided the inflammation has not risen to too great an height, or signs of suppuration have already made their appearance. The most effectual method of discussing tumours of this kind is, as mentioned, by mercurial frictions applied to the inside of the thigh or leg of the affected side if the bubo happens to be inguinal, or to the arm if the bubo be under the arm-pit. Occasionally also, in the former case, frictions may be used to the perinæum or scrotum. But as the success of these frictions is limited to a few days, they ought to be made not only with due care and attention, but, if circumstances permit, be repeated twice a-day. Venesection or a purge will, occasionally, likewise contribute greatly to the intended effect.

To the gland itself I never apply any thing but a mercurial plaster; and from this I expect nothing towards the accomplishment of the cure, but make use of it only to keep the patient's mind easy. Of late a poultice made of the root of *Atropa mandragora* has been much recommended for the resolution of a bubo; and by others a poultice made of the root of *Daphne mezereum*. They certainly both deserve to be tried, either alone, especially

ially where the frictions seem to have no effect, or along with the frictions. In obstinate cases also, I would advise the application of dry cupping glasses to the swelled gland, which has been attended with success at Edinburgh. Repeated emetics, with cold applications to the part affected, have been likewise recommended as useful for the discussion of a bubo; but I have never had occasion to try either of these remedies; nor indeed the hemlock, which has been praised for this purpose both internally and externally exhibited.

During the whole time that a resolution of the bubo is attempted, the patient ought to abstain from exercise, and confine himself to a very low diet; as a contrary regimen might greatly tend to increase the inflammation. With regard to mercurial frictions on the gland itself, I have already given my reasons for disapproving of them. Indeed most of the idiopathic buboes which I have had occasion to see treated either in this way or by any other irritating remedies, have inflamed and suppurated, though the application was made with a view to prevent that disagreeable circumstance; and there are now but very few practitioners, let their knowledge be ever so little of the recent discoveries concerning the lymphatic system, that would trust to such an application for producing a discussion.

When I say that an irritation of the gland itself will rather be followed by an inflammation and suppuration than a resolution, I purposely mention an idiopathic venereal bubo; for sympathetic buboes may certainly disappear after the

use of mercurial frictions applied upon the gland itself, as I have frequently observed. We ought not, however, even in this case, to ascribe their resolution to the mercurial frictions, poultices, &c. which have been applied; but to the simple operation of nature; because sympathetic buboes will always go off by themselves without any application whatever. For their removal, as I have already observed, nothing more is requisite than to abate or remove the stimulus from the mouths of the lymphatics. This fact is sufficient, I think, to convince us of the importance of distinguishing in practice the idiopathic buboes, or such as owe their origin to the venereal virus absorbed from chancres of the genitals or extremities, from sympathetic ones, arising from the mere irritation of the lymphatic vessels, and generally accompanying simple gonorrhœas, swelled testicles, &c. without the appearance of any venereal ulcer.

Thus far with regard to the treatment of venereal buboes by resolution. I now come to treat of those that are either too far gone to admit of resolution, or that resist it on any other account.

That a bubo will not admit of resolution, we know by the tumour continuing to increase in size, and becoming red and painful after the proper application of the mercurial frictions or other resolvents had been made use of for four or five days. As soon as we observe, thus, all our attempts to procure a resolution frustrated, we are now to employ all means to bring on as mild and speedy

ceedy a suppuration as possible. Here, however, we meet with three kinds of buboes essentially different from one another, each of which requires a treatment peculiar to itself, nay diametrically opposite to that of the other. This distinction is so material, that the treatment which will bring the one kind to a mild suppuration, if applied to the other, may occasion very dangerous symptoms, and even prove fatal.

In the one, all the symptoms of inflammation run very high, sometimes even to mortification; whereas, in the other, the most irritating medicines are hardly able to raise the inflammation to such a pitch as is necessary for bringing on a suppuration. In the former, it is necessary to moderate the inflammation: in the latter, to excite and augment it. When the patient, therefore, is otherwise of a healthy, strong, and vigorous constitution; the inflammation high; the pain severe, and accompanied with an inflammatory fever; bleeding, sometimes even repeated as circumstances require, may be necessary. Leeches, however, or, in want of them, scarification of the part affected, are often preferable to general bleedings. In other respects, low diet, cooling drink, an antiphlogistic purgative, the warm bath, and an emollient poultice applied constantly warm to the gland, and changed when it grows cool, are to be insisted upon in these kinds of buboes.

In the second kind, the symptoms of inflammation seem to run very high, merely from too great an irritability. But this may be easily distinguished from the other, by the weaker, smoother,

and more frequent pulse; as also by the constitution of the patient. In such circumstances, general evacuations, instead of being of service, I observed in general to be really prejudicial: the patient, on the contrary, ought to be allowed a fuller diet; opium ought to be given every night or every other night, the Peruvian bark through the day; and to the external emollient applications, we here properly join some sedative. In a case of this kind probably it was, that Mr Brambilla saw a young man to whom a bubo proved fatal by becoming gangrenous, after a course of calomel along with a strong decoction of the woods was administered to him. I must make upon this occasion a general remark, that mercury ought never to be given either internally or externally, unless for some very particular reason, during the inflammatory state of a bubo, or any other venereal complaint. During that state, I have never seen any good, but often very bad effects resulting from it, and more especially when rubbed into the inflamed gland.

The third kind of buboes, essentially different from the two former, we meet not unfrequently in patients of relaxed, debilitated, or of a cachectic or scorbutic habit of body. When this is the case, the tumour of the gland, though it seems red and inflamed, will rise very little and slowly; the patient feels but little pain; no fever attends; or, if any, it is rather of the low kind, and the pulse is weak, with some depression of spirits.—In such cases, (that of sea-scurvy excepted) mercury will sometimes be useful and necessary, but evacuations of any kind are hurtful; a full diet with wine will

be proper; and an infusion of bark in wine or some other strengthening and aromatic medicines, together with local applications of more or less active stimulants, will be proper.

If symptoms of the sea-scurvy prevail, mercury ought never to be made use of; the patient may, besides the use of wine and Peruvian bark, &c. eat oranges and other ripe fruit, or make use of the juice of antiscorbutic herbs, and take moderate exercise in a free open air every day.

If by these means, or by any other method, the bubo is at last brought to suppuration, most writers advise the artificial opening of the abscess; but I choose rather to leave this to nature. From experience I have found, that nature, left to herself, scarce ever fails to make an opening in due time; whereas, artificial openings are often made before nature desires it, to wit, before the abscess is fully formed and ripe. I have besides observed another advantage; viz. that the abscess opened by nature generally heals much easier; whereas, that opened by an incision, or the application of a caustic, I have seen sometimes followed by disagreeable consequences, not only making the cure more tedious and troublesome, but leaving a large cicatrix behind; which last we ought always to make an essential point carefully to avoid, especially in women, for reasons sufficiently obvious. In this we will generally succeed, if the operation is left to nature. The abscess then, does generally not open, till there is thorough suppuration of the gland; and the cicatrix is in a short time after, for the most part, either scarcely visible, or entirely disappears.

There are, however, some particular cases, in which it may be proper to assist nature, either by making a dilatation of the opening, or making an artificial incision altogether. Where we meet with buboes, which, notwithstanding the means above mentioned, remain inflamed and hard, without either coming to a resolution or suppuration, besides other remedies a small bit of the lapis infernalis or common caustic, about the size of a pea, may be advantageously applied to the middle of the bubo, for about two, or at most three hours, the eschar afterwards anointed with a little of the unguentum cœruleum fortius, and the whole covered with a warm emollient poultice. This method, first proposed by Mr Plenck, I have seen several times followed with success.

Here I must add, that, in several instances, I have observed the common method of applying a large caustic on the bubo for ten or twelve hours, in order to bring it to suppuration, attended with very bad consequences. The event, in two cases, was a mortification; and in others a very large ichorous and bad ulcer, which in one instance appeared really to grow cancerous, and at last proved fatal to the patient: this, I have never seen happen from the application of the small caustic above mentioned.

In other cases, instead of the caustic, we may sometimes expect the same effect from an application of the emplastrum commune cum gummi; or from a poultice made of onions simply roasted, or boiled in oil. A suppurative liniment has also been recommended, made of equal parts of the unguen-
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trum de arthanita, the unguentum mercuriale, and the bruised mandragora root, mixed with a sufficient quantity of honey; but I never had an opportunity of trying it.

When the abscess has been opened either by nature or art, we are generally advised to administer mercury internally and externally, and thus treat the ulcer as a venereal one. This practice is generally undoubtedly very good; but in some cases mercurial frictions, or mercury given internally, will prove hurtful, nay often give rise to very dangerous symptoms.

No general method, therefore, can be laid down for the treatment of an exulcerated bubo; but the practitioner must be directed by the nature of the disease, and the constitution of the patient, as mentioned above, where I spoke of the inflammatory state of buboes. If the patient be vigorous, without fever, the pus of a good consistence and mild nature, no external application to the sore seems necessary; but a continuation of the same poultice which brought on the suppuration, will certainly forward the cure more than any thing else. If the abscess assumes the nature of a venereal ulcer, mercurial injections may be joined to the internal use of that mineral.

But there are other cases of exulcerated buboes, which have hitherto either been entirely overlooked, or not properly attended to. Sometimes the abscess, instead of healing, either remains, under the continued use of mercury, in the same state for many weeks, or assumes a relaxed and flabby appearance; the discharge is copious,

thin, and ichorous; at the same time, that the health of the patient, instead of growing better, gradually grows worse and worse. In these circumstances, a quite different treatment will be necessary. If the mercury before administered, has produced some sensible effects of its having been absorbed into the mass, we should not obstinately ascribe the present symptoms to the inefficacy of the mercurial preparation we have made use of, and consequently have recourse to another. We ought rather to take the hint given by nature, and not persist longer in the use of a remedy from which we find no good effect. Mercury is a poison for those patients: they require a full diet, wine, an infusion of the bark in wine, with a free use of the country air, and gentle exercise. For the ulcer, an injection of the aqua vitriolica camphorata, or, according to circumstances, a fomentation with the Peruvian bark repeated twice or three times a-day, is the necessary application; the fore should be covered with fine lint or a piece of soft sponge, that the matter may be freely discharged. The dressings may be kept on by a piece of adhesive plaster spread on linen. To prevent excoriations of the thigh from the acrid discharge of such ulcers, the application of a little white cerate to the surrounding parts will be sufficient.

The following case will serve as an illustration of what I have just now asserted. An exulcerated bubo was, according to the common course of practice, treated as a venereal one, by the internal and external use of mercury. The patient was by
this

this method, after eight weeks time, so much reduced, and the ulcers had so bad an appearance, that it was thought proper to have the advice of another person; when I was consulted. I found, upon examination, the flabby relaxed *atonic* appearance of the ulcer. I told the physician and surgeon, who hitherto had treated the patient, that I thought the continuation of mercury improper; that the internal and external use of strengthening medicines, and a full diet, with wine, were the only remedies. They both were of opinion, that my advice was an unreasonable one; and that the use of mercury was to be continued, only in a different preparation. However, after a good deal of conversation, I prevailed on them to try only for eight or ten days what I had proposed; and the patient finding the course agreed with him, he continued the same for about six weeks, when he was perfectly recovered.

A similar case occurred some time ago to a friend of mine in London, who gave the same advice to a patient that had been treated before for a long time in the like manner, and the patient found the same benefit of it. A remarkable circumstance I must take notice of, which happened with that latter patient: under the course of mercurials he sweated every night a great deal; he put on every morning a clean shirt, made of new linen; all these shirts, about a dozen in number, after having been once or twice washed with other linen in the common manner, grew so tender, that they seemed to be quite rotten.

If, after a suppuration has taken place, and the abscess

abscess has been opened, part of the gland should still remain swelled and hard, repeated purges, with the continued use of the above-mentioned remedies, will effectually remove that disorder.

The sinuses or fistulas which are sometimes apt to arise after such ulcers, are for the most part easily prevented, as well by proper injections, as by a suitable posture of the patient when in bed, and by a gentle, but careful pressure, squeezing out the matter all round, every morning and evening.

If fistulas or sinuses have been formed from an ulcerated bubo, and refuse to yield to the above-mentioned injections, the knife must be employed: however, they seldom or never occur, if the surgeon be attentive to the posture of the patient, dilate the opening in time if necessary, and the patient complies exactly with his directions.

Hemlock, both internally and externally applied, has been strongly recommended for cancerous as well as scirrhus buboes: but I never saw it effect a radical cure where there was a real cancer; though there is nothing to hinder its being tried: but in such cases, the only method, that I know, for avoiding death, or at least a most miserable life, is the total excision of the cancerous gland, if practicable, and that not too long deferred.

Having thus finished the treatment of topical venereal complaints, I now proceed to those arising from an universal infection, or, as it is commonly called, a *confirmed pox*.

C H A P. XI.

On the SYPHILIS, or Venereal Disease in particular.

HAVING premised some necessary observations concerning venereal infection, the nature of the virus, and the different appearances of syphilitic complaints in general, in the beginning of this treatise, I now enter into the consideration of the nature, symptoms, and cure of the syphilis or venereal disease, commonly called *confirmed lues* or *pox*, in particular.

The effects or symptoms which the venereal virus is apt to produce when absorbed into the mass, are shortly as follow.

1. *In the eyes*: The most violent of all inflammations, with a discharge of puriform matter, (from a retropulsed gonorrhœa), ending generally in perfect blindness; or an ophthalmy of a more chronic kind, of the eye itself, or of the eye-lids; and sometimes also the fistula lachrymalis.

2. *In the ears*: Deafness, with or without a puriform discharge, (from a retropulsed gonorrhœa), or from the venereal virus affecting the ear, or the orifice of the Eustachian tube in the fauces.

3. *In*

3. *In the nose.* Ulcers in the nostrils; an ulceration of the mucous membrane of the nose, with a caries of the bones, and a discharge of fetid ichor, known under the name of *ozæna*.

4. *In the mouth and throat.* Ulcers, caries of the ossa palatina or antrum maxillare, erosion of the velum, &c. sore throat, coryza, paraphonia.

5. *In or about the genital parts,* it will either produce, or what indeed is more frequently the case, it will prove, a perpetual fomes of excoriations, ulcers, fistulas, gleets, warts, condylomata, polypi. Whether the gonorrhœas, swelled testicles, or buboes, ever arise from the poison being deposited there from the mass, is with me, for want of authenticated facts, still a matter of doubt, as I mentioned above.

6. *In the skin:* Copper-coloured spots, tetters, scabs, especially on the margin of the scalp, or in the beard; a scald-head, or tinea; and when the disease is very inveterate, it sometimes, tho' seldom, produces a kind of leprosy over the whole surface of the body; a corruption of the nails, and ulcers of the most malignant kind, in different parts of the body.

7. *In the bones:* Either the most painful and excruciating swellings, commonly called *tophi*, *exostoses*, &c. especially troublesome at night when the patient grows warm in bed; or an ulceration in their external, or a corruption of their internal substance, diseases known by the name of *caries* and *spina ventosa*. The bones most liable to be affected by this disease, are those which are not covered with muscles, as the tibia, the radius, the elbow,

elbow, the proceſſus coracoideus, the ſternum, the os frontis, and other bones of the head, &c.

8. Sometimes the venereal poiſon will produce effects, the nature of which is ſo concealed, that they ſeem rather owing to ſome other cauſe. Such are pains in ſeveral parts of the body reſembling thoſe of the rheumatism; pains in the articulations reſembling the gout; white ſwelling; nervous or hectic fevers; conſumptions of the lungs, or ſimple emaciation without any apparent vice in any viſcus of the body.—Theſe ſymptoms have by phyſicians obtained the name of *morbi venerei larvati*.

9. Sometimes the lues is really combined with other diſorders, ſuch as the ſea-ſcurvy, intermittent fevers, conſumptions, &c. Theſe are called *morbi venerei complicati*, and deſerve the utmoſt attention of the practitioner; becauſe the ſucceſs of the cure will often in a great meaſure depend on the accurate knowledge and diſtinction of theſe complaints.

The ſpecific remedy now generally applied for all kinds of venereal diſorders, is mercury in its different preparations. Though there are perhaps remedies of the vegetable kingdom equally powerful as mercury to cure the venereal diſeaſe in all its ſtages, they being either unknown or difficult to be got, are neglected. Mercury is made uſe of, not only on account of its ſpecific power againſt this diſorder, but becauſe it is a remedy which is cheap, eaſily to be got, and quick and certain in its effects; in the ſame manner, though we can cure agues by other remedies,

dies, we employ now-a-days seldom any thing else but the Peruvian bark.

Several hypotheses has been advanced in order to explain the manner in which mercury produces those powerful effects. None of them are founded on real facts; all of them are therefore little satisfactory. Some say mercury acts by its metallic weight, others by its astringent quality, others by its power of promoting all kinds of excretions, and so on. If those writers had only considered, that sometimes two or three grains of mercury brought into the mass, make the most violent venereal symptoms disappear, I think they would have never had recourse to such an explication. Perhaps, if there was an opinion to be advanced about this matter, chemistry could afford us a more reasonable and satisfactory theory, by supposing that mercury has a peculiar attractive power, or what is commonly called a *chemical affinity*, to the venereal poison, by means of which, wherever it meets with that poison, it readily unites, and forms a kind of compound with it, which now has no longer any of the qualities which either of the substances had before the union; and therefore the effect produced by the poison must, in the moment that union takes place, unavoidably cease, and the patient find himself either relieved, or, if the poison has been saturated with a sufficient quantity of mercury, be radically cured. By this theory we would perhaps be more able not only to account for a few grains of mercury relieving sometimes the most excruciating venereal pains of the bones, but also why mercury

mercury taken internally removes venereal ulcers, without any external application, &c. It would further seem probable from these effects, that mercury has a greater chemical attraction to the venereal poison, than it has to any acid; and that, given in any of its saline preparations, wherever it meets with that poison, it leaves immediately the acid with which it was combined, and unites with the poison. I could support this opinion, perhaps, if I added, that mercury cures the venereal disease the easier and sooner the more minutely it is divided; that, in order to produce the desired effect, it is always necessary that it be absorbed into the mass; but that it never cures the venereal complaints though absorbed into the mass, if not carried to the place or part affected. In this manner we could perhaps easier explain why it often cures the venereal disorder without any sensible increase of any of the different secretions or excretions of the body; and why, if it produces purging, immoderate sweating, or salivation, it very often leaves the venereal disease uncured behind. But though we could thus resolve all these different questions in a more satisfactory manner, I must confess that this theory is as little as the former founded on any real fact, but on mere conjectures; and therefore, as long as not supported by real facts, equally useless as all other hypotheses in the practice of physic, where it may be sufficient for us to know the specific remedy to cure the disorder, without being acquainted how it produces its effects, though such

a knowledge, could it be attained, would lead undoubtedly to great improvements in curing those complaints *.

Method of Cure.

If the patient be strong enough to bear the immediate use of mercury, I begin generally by giving him a purgative; and the next day I let him bathe in a warm bath, made of a decoction of bran, or of simple soft water. In this bath, the warmth of which should be determined by the agreeable feeling of the patient, he ought to sit for half an hour or an hour's time; during the latter end of which time, he may be rubbed gently all over with a flesh-brush, or a piece of flannel. Coming out of the bath he may take a glass of good wine, if his circumstances will admit it, and then go to bed. By these means the skin will be well cleansed, and be better fitted for transmitting the perspiration. If he is plethoric, or accustomed to bleeding, venesection may be proper and useful, previous to his beginning the use of mercury.

With regard to the several mercurial preparations, I shall speak hereafter. We should only be careful and attentive to observe whether the mercurial course begun, agrees with the patient; and if it does not agree, without hesitation change it.

* Those of my readers who wish to be more fully instructed about the operation and use of mercury, I must refer to Dr Duncan's Observations on the subject, published at Edinburgh.

Patients who will not bear frictions, bear sometimes very readily the internal use of crude mercury or its saline preparations, and *vice versa*. Others who will not bear mercury internally, will bear the frictions, or sometimes will not bear one mercurial preparation, while they bear another. Some will bear them easier in pills, others in powder, or dissolved in some liquid. To those whose constitution circumstances or choice are against mercurial frictions, we may give Plenck's solution of mercury in gum arabic, made into pills: they agree with most stomachs, even such as sometimes can bear no other mercurial preparation; or, according to circumstances, crude mercury subdued with conserve of roses, or conserva cardiaca, the hydragyrum nitratum cinereum, or *pulvis mercurius cinerei* of the new Edinburgh Pharmacopœia, is one of the mildest and perhaps most suitable preparations for those stomachs which are not able to bear any other saline mercurial preparation. Mercury rubbed down with sugar-candy, or calcined mercury mixed with opium, may sometimes, according to circumstances, be very advantageous; but, as I have mentioned before, great judgment and attention are required in administering those medicines, as well as with regard to diet, bathing, &c. which it is impossible to enter into a minute detail of any particular circumstance. The following rules, however, besides those to be mentioned below under the head of *Mercurial Preparations*, may serve as general ones.

The patient whom we undertake to cure of the

lues, must have sufficient strength to bear the use of mercury; and neither be affected with any nervous, putrid, hectic, or inflammatory fever, nor with sea-scurvy, or cancerous complaints, or gangrenous ulcers. In all these cases, I have constantly observed mercury not only prove hurtful, but in some instances, where its use was insisted upon, even fatal to the patient. Those disorders, if possible, should therefore be previously removed; or if the venereal symptoms prevail so much, that they make the immediate use of mercury indispensably necessary, proper medicines ought to be conjoined with mercury.

For restoring a proper degree of strength and vigour, an healthful country air is one of the first requisites; then asses or cows milk as it comes from the animal; or, what in some instances I have found far better for patients in easy circumstances, a strong healthy country wet-nurse, whom the patient may suck himself; or if he finds this disagreeable, (or too dangerous), the breast of the woman may be drawn with a proper instrument, and the patient should drink the milk immediately: this milk is the greatest strengthener I know of, for debilitated patients. His diet may otherwise consist of light puddings; tender meat of middle-aged animals of all kinds, not too fat, especially roasted; and at dinner, if he likes good strong beer (or porter), he may drink it; otherwise a few glasses of good and genuine Spanish or Hungarian wine will be useful. Moderate exercise of any kind, and occasionally frictions of the whole body, will greatly assist the
above

bove regimen. As for medicines, he should in general take none; or, if their use should be absolutely necessary, or if the patient desires any, small doses of the best Peruvian bark, finely powdered in a substance, or mixed with genuine old hock, I have found excellent. If the patient be very low, a tincture made of iron dissolved in vitriolic æther, I have found superior to any other medicine. The cold bath will be sometimes useful, but at other times very improper. This, with cheerful company, and avoiding venery or nocturnal pollutions, will greatly contribute to recover the strength necessary for enabling the patient to bear the use of mercury. I shall, however, make one remark more here, which, as far as I know, has not been taken notice of by any former writer on this subject, that weakness, low-spiritedness, and anaphrodisia, are sometimes the immediate effects of the venereal virus lurking in the body, and in that case I have found mercury to be the best strengthener; I have seen people in that state gain so much strength in eight or ten days, from the internal use of mercury, that they were most agreeably surpris'd.

During the use of mercury, a mixed diet of vegetables and animals, as the most natural to mankind, is proper; avoiding fat, hard, indigestible food. Acids will sometimes cause a griping or purging, under a course of mercury: where that happens, they should be avoided. At table, the moderate use of wine cannot be hurtful. As to porter, or any other kind of beer, it does not agree with all stomachs under a mercurial course; where it does, I see no reason why it may

not be moderately indulged, and I never saw in those circumstances any harm from it. But what I principally insist upon, is, that the patient should go early to bed: Indulging sleep is rather serviceable during a mercurial course. Moderate exercise on foot, in a chaise, or on horseback, if the air be warm and dry, I found always more useful, than to confine him to his room. But if the weather be moist or very cold, it will be safer to stay at home. Night air is particularly dangerous; for it is in general cold and damp, and should be therefore, by every patient under a mercurial course, most carefully avoided. I have known several instances, where venereal patients, during the use of mercury, through inattention to this point, have ruined their health and constitution for many years, or even for life. Where the patient's business or circumstances of life absolutely oblige him to go out in very cold or damp weather, he should never do it without being warm cloathed, and wearing a flannel or callicoe waistcoat under his shirt, and a pair of good warm woollen stockings.

Thus we proceed with the use of mercury, if no peculiar symptoms prevent it: let the patient bathe once or twice a-week in a warm bath, if his constitution is strong enough; weak and relaxed habits will not admit of this. But whenever he perceives a nauseous taste in the mouth like copper, stinking breath, swelling of the gums, the teeth feeling as if they were set on edge, a large secretion of saliva or spitting than common, mercury should be immediately left off for some days,

warm

warm bath and frictions with the flesh-brush to be used, a gentle physic to be taken and occasionally repeated, and cold air in those circumstances to be most carefully avoided. If under the use of mercury symptoms of a general irritation appear, it ought to be left off for some days, and a dose of opium to be given in its stead: but if symptoms of an inflammatory diathesis prevail, bleeding will be previously necessary. Thus we continue with the use of mercury, as I said above, till the virus is wholly eradicated, which will be in twenty-five or thirty days, if the disease has not been of long standing, and the symptoms have not been very severe; but if the disease be inveterate, and the skin or bones severely affected, ten or twelve weeks will be sometimes necessary to produce a complete and radical cure.

To know whether the lues is radically cured, is a nice point of practical judgment; and if I say, that, from a carelessness on the part of the patient, or from want of knowledge on the part of the practitioner, with regard to this point, a great many patients are unhappy, and sufferers, I advance nothing but what we see daily in practice confirmed. If we were in possession of a remedy, which, having the power of rendering the least particle of the venereal virus concealed in the body active, and thus enable us to discover its presence, like as the loadstone discovers the presence of iron, there would be nothing necessary, but to administer that remedy the moment we think the patient had taken mercury enough.

I have made some experiments on this subject; and I have great reason to believe, that the conclusion drawn from them will be satisfactory: but as I have not yet a sufficient number of authenticated facts to form such a conclusion, it would be premature in me now to say more on this subject.

As soon as the mercury affects the mouth of the patient, we are sure of the most essential point, viz. of its having entered the mass, which is absolutely necessary for eradicating the poison lodged there. The disappearing of internal venereal symptoms, and more so that of the external ones is another, not unequivocal sign, that the mercury has exerted its action upon the venereal virus. If venereal ulcers which arose from an infected mass begin to mend or heal, if pains or tophuses of the bones begin to disappear, &c. under the use of mercury, we are sure of its having removed the effects of the venereal poison; but we are not yet sure of its having eradicated entirely every particle of that poison present in the body. For this purpose, we ought to continue the same use of mercury for a fortnight or three weeks after all the venereal symptoms have entirely disappeared, and then we may be generally pretty confident that our patient is radically cured of the disorder.—I have observed in several tients who bore the internal use of mercury extremely well, as long as the disease took place; whereas, on the moment the poison was eradicated, they began to nauseate it, which proved to be the standard of their being radically cured.

But we must carefully remark, that though the
venereal

venereal poison had been perfectly eradicated from the mass, and therefore the venereal disease been radically cured, there occur many instances in practice, where exostoses, knots, or swellings of the bones, owing their origin to the venereal poison continue, however, all the life through, without any bad consequences; a caries of the bones will often remain, till nature by herself or assisted by art has made the exfoliation. Venereal excrescences remaining after a mercurial course are to be looked upon as local complaints, and to be removed by local remedies. It has been a general observation, and I have seen it confirmed in several instances, that the venereal disease yields easier to a good treatment in warm and dry climates and seasons, than in cold and damp ones. This is the real reason that has rendered Montpellier so famous for curing the most obstinate and confirmed lues. This is likewise the reason that people, who are not cured of venereal complaints at Peterburgh, or Stockholm, &c. are sometimes cured when they go to Italy or Portugal; and for the same reason, they can bear sometimes mercury there without the least inconvenience, till they are perfectly cured, when they could scarcely bear a few grains of it in cold or wet countries, without falling into an immediate salivation. I have seen several striking instances of this kind. This does not arise from peculiar balsamic particles in the air of the south of France, Italy, or Portugal; nor from any particular or superior skill of the physicians at Montpellier, above those of London, Stockholm, &c. as the patients often wrongly suppose; but merely be-

cause the atmosphere is dry and warm, and sometimes because the formerly neglectful patient becomes now more careful, and pays more exact attention to the advice of his physician and surgeon. A skilful physician, however, will be able to put his patient, in any country whatsoever, in a situation which he finds necessary for curing this complaint, by putting him for some weeks or months in an artificial climate as adequate for him as the natural warm climate of Montpellier, Naples, or Lisbon.—One other circumstance to be attended to is, that patients under a mercurial course should be told of the effects of mercury on gold; such as rings, lace, watches, &c. By not attending to this particular, disagreeable discoveries may sometimes be made, which female patients especially have reason to avoid.

C H A P. XII.

On MERCURIAL PREPARATIONS in
general.

BEFORE I enter into the consideration of the different mercurial preparations, the reader will perhaps be pleased to see a synoptical view of all those preparations and compounds of mercury hitherto invented. I therefore subjoin the following Table, where the acids which enter the saline preparations of mercury are arranged according to the table of elective attractions just now published by Sir Tobern Bergman, professor of chemistry at Upsal.

TABLE of all the different MERCURIAL
PREPARATIONS and COMPOSITIONS hi-
therto known.

I. PREPARATION where the Mercury is simply purified.

* *Hydrargyrum purificatum.*

Mercurius crudus purificatus *officinarum.*

Argentum vivum purificatum. *Pharm. Lond.*

Anglis, Quicksilver, crude purified mercury; *Germanis*, Reines quecksilber; *Gallis*, Mercure pure.

II. PRE-

II. PREPARATIONS in which the Mercury is only divided.

1. By gums or mucilages; such as gum arabic, tragacanth, &c.

* *Hydrargyrum gummosum.*

Mercurius gummosus of *Plenck* (the inventor).

COMPOSITA.

* *Pilulæ ex hydrargyro gummofo.*

Pilulæ ex mercurio gummofo. *Plenck. Pharm. Chir.*

Solutio mercurialis gummosa. *Ibid.*

Mixtura mercurialis. *Pharm. Noscom. Sti Georgii.*

Potio mercurialis. *Dispensatorii Novi Brunswicensis.*

Lac mercuriale. *Plenck.*

Syrupus hydrargyri. *Pharmac. Suec.*

2. By resins or balsams; such as turpentine, balsamum copaiva, &c.

* *Hydrargyrum terebinthinatum, &c.*

COMPOSITA.

* *Pilulæ ex hydrargyro terebinthinato.*

Pilulæ mercuriales. *L.*

Pilulæ mercuriales laxantes. *G.*

Pilulæ mercuriales sialagogæ. *Pharm. Danic.*

Injectio mercurialis. *Pharm. Edinb. pauperum.*

3. By suet or vegetable oils; such as hog's-lard, goose-fat, or butter of cocoa-nuts.

* *Hydrargyrum unguinosum.** *Unguentum hydrargyri.*

Unguentum ex hydrargyro cœruleum. *E.*

Unguentum mercuriale, seu unguentum Neapolitanum. *Pharmac. Austriaco-Provincialis.*

COMPOSITA.

α Unguentum cœruleum fortius. *L.*

Unguentum cœruleum mitius. *L.*

Unguentum mercuriale. *D.*

β Ceratum mercuriale. *L.*

Emplastrum

- 7 Emplastrum mercuriale. *O.*
- Emplastrum ex hydrargyro. *E.*
- Emplastrum ex gummi ammoniaco cum mercurio. *L.*
- Emplastrum commune cum mercurio. *L.*
- Emplastrum de ranis cum mercurio. *A.*

4. By calcareous earth; such as chalk, chelæ cancrorum, &c.

- Mercurius alkalifatus. *E.*
- Pulvis mercurialis. *G.*

III. PREPARATIONS where the Mercury is calcined by heat and air.

* *Hydrargyrum calcinatum.*

- Mercurius calcinatus. *L. S.*
- Mercurius præcipitatus per se. *L.*

COMPOSITA.

* *Pilula ex hydrargyro calcinato.*

- Pilulæ syphiliticæ. *Pharm. Nosoc. Sti Thomæ.*
- Pilulæ ex mercurio calcinato. *G.*
- Pilulæ ex mercurio calcinato anodynæ. *G.*

IV. PREPARATIONS where the mercury is partly divided and partly dissolved.

1. By sugar-candy, or saccharine compositions; such as conserva rosarum, cynosbati, &c.

* *Saccharum hydrargyratum.*

COMPOSITA.

* *Bolus ex hydrargyro saccharato.*

- Bolus cœruleus. *Th.*
- Bolus mercurialis. *G.*

2. By honey.

* *Mel hydrargyratum.*

COMPOSITA.

- Pilulæ Æthiopicæ. *E.*
- Pilulæ mercuriales purgantes. *E. Paup.*
- Pilulæ Bellosti.

3. Mercury combined with sulphur, (flowers of brimstone).

* *Hydrargyrum sulphuratum.*

a. By simple trituration or fusion.

* *Hydrargyrum sulphuratum nigrum.*

Æthiops mineralis. O.

COMPOSITA.

Pulvis Æthiopicus. G.

b. By sublimation.

* *Hydrargyrum sulphuratum rubrum.*

Cinnabaris factitia, seu artificialis. O.

COMPOSITA.

Pulvis antilyffus Sinenfis. O.

4. Mercury combined with sulphur of antimony.

a. By simple trituration.

* *Sulphur antimonii hydrargyratum nigrum.*

Æthiops antimonialis. O.

COMPOSITA.

Pilulæ Æthiopicæ. E. D.

b. By sublimation.

Sulphur antimonii hydrargyratum rubrum.

Cinnabaris antimonii. O.

COMPOSITA.

Bolus Cinnabarinus. G.

5. Mercury combined with sulphur by precipitation.

[See below under the *Preparations with the Acid of Vitriolic.*]

V. PREPARATIONS where the mercury is reduced to the form of a metallic salt or calx, by acids.

1. Acid of fuet.
2. Acid of common salt.
3. Acid of sugar.
4. Acid of amber.
5. Acid of arsenic.
6. Acid of wood-sorrel.
7. Acid of phosphorus.
8. Acid of vitriol.
9. Acid of sugar of milk.
10. Acid of tartar.

11. A-

11. Acid of citron or lemon. 12. Acid of nitre. 13. Acid of fluor mineral. 14. Acid of vinegar. 15. Acid of borax. 16. Acid of Berlin blue. 17. Aërial acid.

1. Mercury combined with acid of fuet (*acidum febi.*)

Hydrargyrum febinum.

2. Mercury combined with the muriatic acid; or acid of common salt.

* *a. Hydrargyrum muriatum.*

* *Hydrargyrum muriatum fortius* { By sublimation,
or
by precipitation

Mercurius sublimatus corrosivus. O.

Mercurius sublimatus albus. O.

Mercurius corrosivus albus. S. L.

Mercurius corrosivus via humida paratus. Monnet.

COMPOSITA:

Solutio sublimati spirituosa of Van Swieten.

Solutio mercurii sublimati corrosivi. E.

Mixtura mercurialis. S.

Mercurius sublimatus solutus. G.

* *Solutio hydrargyri saliti fortioris aquosa.*

Pilulæ e mercurio corrosivo albo. S.

* *Lotio syphilitica flava, (lotio ex hydrargyro muriato fortiori.)*

Aqua phagedænica. O.

Liquor mercurialis. A.

Lotio mercurialis. Th.

Solutio sublimati balsamica. Plenck.

* *Liquor ad condylomata.*

Aqua caustica pro condylomatibus. Plenck.

- b. *Calx hydrargyri muriata; i. e. the calx of mercury united with some muriatic acid.*

By sublimation.

* *Hydrargyrum muriatum mitius.*

Mercurius dulcis (sublimatione paratus). O.

Mercurius dulcis sublimatus. L.

Calomel seu calomelas. L.

Aquila alba.

Panacea mercurialis.

Mercurius dulcis lunaris. Schroeder.

COMPOSITA.

Bolus mercurialis. *E.*

Bolus jalappæ cum mercurio. *Ibid.*

Bolus rhei cum mercurio. *Ibid.*

Pilulæ calomelanos. *G.*

Pilulæ Plummeri. *E.*

Pilulæ alterantes Plummeri. *O.*

Pilula depurans. *Th.*

Pulvis Plummeri. *O.*

Pilulæ mercuriales purgantes. *A.*

Pilulæ catarrhales purgantes. *D.*

Pilulæ laxantes cum mercurio. *Ibid.*

Pulvis e scammonio cum mercurio. *Th.*

* *Lotio syphilitica nigra, (lotio ex hydrargyro muriato mitiori.)*

Lotio mercurialis. *G.*

By precipitation.

a. From its solution in nitrous acid by common salt.

* *Calx hydrargyri muriata Scheelii.*

Mercurius præcipitatus dulcis of *Scheele*, (the inventor).

b. From its solution in muriatic acid by vegetable alkali.

Mercurius præcipitatus albus. *L.*

c. From its solution in muriatic acid by mineral alkali.

Mercurius præcipitatus albus. *A.*

d. From its solution in muriatic acid by volatile alkali.

Mercurius præcipitatus albus. *E.*

e. From its solution in muriatic acid by copper.

Mercurius præcipitatus viridis. *E.*

COMPOSITA.

Unguentum e mercurio præcipitato. *L.*

Linimentum mercuriale. *E. Paup.*

3. With the acid of sugar.

Hydrargyrum saccharatum. *Bergman.*

4. With the acid of amber.

Hydrargyrum succinatum. *Bergman.*

5. With the acid of arsenic.

Hydrargyrum arsenicatum. *Bergman.*

6. With

6. With the acid of wood-forrel, (*oxalis acetofella* Linnæi).

Hydrargyrum oxalinum. Bergman.

7. With phosphoric acid.

Hydrargyrum phosphoratum. Bergman.

By precipitation from its solution in the nitrous acid by recent urine.

Rosa mineralis. O.

8. With the vitriolic acid.

* a *Hydrargyrum vitriolatum.*

Vitriolum mercurii. O.

Oleum mercurii. O.

b. *Calx hydrargyri vitriolata (flava).*

Turpethum minerale. O.

Mercurius emeticus flavus. L.

Mercurius flavus. E.

Mercurius præcipitatus luteus. D.

Turpethum nigrum. O.

c. Mercury precipitated from its solution in nitrous acid by *hepar sulphuris* or *hepar calcis*.

Mercurius præcipitatus niger. O.

9. With the acid of fugar of milk.

10. With the acid of tartar.

a. *Hydrargyrum tartarifatum. Bergman.*

b. With purified tartar, commonly called *cream of tartar*, (*veg. alkali supersaturated with the acid of tartar.*)

* *Tartarus hydrargyratus.*

Terre feuilletée mercurielle of Dr *Pressavin*, (the inventor.)

c. Mercury precipitated from its solution in nitrous acid by the acid of tartar.

* *Calx hydrargyri tartarifata flava; vulgo, Pulvis Constantinus.*

d. Mercury precipitated from its solution in muriatic and tartarous acid by fixed vegetable alkali.

* *Calx hydrargyri tartarifata alba; vulgo, Pulvis argenteus.*

9. With

11. With the acid of citron.

Hydrargyrum citratum. *Bergman.*

12. With the acid of nitre.

* *Hydrargyrum nitratum.*

A. Simply dissolved.

* *Acidum nitri hydrargyratum.*Solutio mercurii. *E.*

COMPOSITA.

Unguentum citrinum. *E. A. S.*

B. Evaporated and calcined by fire.

* *Hydrargyrum nitratum rubrum.*Mercurius corrosivus ruber. *L. E.*Mercurius præcipitatus ruber. *O.*Pulvis principis. *O.*Mercurius corallinus. *L.*Mercurius tricolor. *O.*Panacea mercurii. *O. O.*

Arcanum corallinum.

Panacea mercurii rubra. *O.*

COMPOSITA.

Balsamus mercurialis. *Plenck.*Unguentum ophthalmicum. *St Yves.*Balsamum ophthalmicum rubrum. *D.*Unguentum præcipitatum. *G.*Unguentum ad lippitudinem. *Th.*Unguentum mercuriale rubrum. *D.*Unguentum pomatum rubrum. *D.*

C. Precipitated from its solution in nitrous acid.

a. By volatile alkali.

* *Hydrargyrum nitratum cinereum.*Pulvis mercurii cinereus. *E.*Turpethum album. *O.*Mercurius præcipitatus dulcis. *O.*

COMPOSITA.

Dr Ward's white drops, (mercury precipitated by nitrous acid, and redissolved by sal ammoniac).

Vegetable syrup.

Syrup de *Bellet.*

b. By

b. By vinous volatile alkali, (*spiritus falis ammoniaci vinosus*).

Turpethum nigrum.

Mercurius præcipitatus niger.

c. By fixt vegetable alkali.

Mercurius præcipitatus fuscus. Wurtz.

d. By copper.

Mercurius præcipitatus viridis. B.

13. With the acid of spar, (*fluor mineralis*.)

Hydrargyrum fluoratum. Bergman.

14. With the acid of vinegar.

* *Hydrargyrum acetatum. Bergman.*

COMPOSITA.

Troches or pills of Keyser.

15. With the acid of borax.

Hydrargyrum boraxatum. Bergman.

16. With the acid of Berlin blue.

17. With the aërial acid, (*fixt air*).

Hydrargyrum aëratum. Bergman.

MOST of the different mercurial preparations mentioned in the foregoing table, have been recommended at different times, by different chemists and practitioners, for curing the venereal disease. We shall confine ourselves to the consideration of those [marked with *] principally employed now, which have either maintained their reputation from their first introduction into practice, or which were discovered in our times, and seem to possess such qualities as will entitle them to the same predicament.

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They

They are shortly as follow.

Mercury in its crude state rubbed down, or, as it is commonly called, *extinguished* or *killed*, with fat or oils, with gum arabic, turpentine, conserve of roses, &c.—In a more dissolved state, triturated with sugar-candy, which I think I properly called *saccharum hydragyrum*.—United with sulphur under the name of *cinnabar*, for fumigations.—The metal calcined by itself, and thence called *hydrargyrum calcinatum*.

Mercury dissolved by different acids, and united with them into a metallic salt, or precipitated from them in the form of a more or less acrid calx. Such,

With the muriatic acid: The corrosive sublimate, which I gave in the table the more adequate name of *hydrargyrum muriatum fortius*, in order to distinguish it as well from calomel or mercurius dulcis, which I called *hydrargyrum muriatum mitius*; as from the mercurius dulcis prepared by precipitation, according to the invention of Mr Scheele, which I named *calx hydrargyri muriata Scheelii*.

With the acid of vitriol: The turpeth mineral, or mercurius emeticus, or præcipitatus flavus, (*calx hydrargyri vitriolata*).

With the acid of tartar: The *hydrargyrum tartarifatum*, which ought to be distinguished from what I call the *Tartarus hydragyriatus*, or *terre feuilletée mercurielle* of Dr Pressavin of Paris, which is a combination of mercury with purified tartar, (*cream of tartar*).

With the acid of nitre: the *hydrargyrum nitratum*

um in a diluted simple solution, or in a more solid form, as in the *syrup de Bellet* and *unguentum citrinum*. The *pulvis mercurii cinereus* of the new Edinburgh Pharmacopœia; where the mercury dissolved in nitrous acid is precipitated by volatile alkali, however, not quite deprived of the acid, and therefore properly called *hydrargyrum nitratum cinereum*. Dr Ward's white drop, where the mercury dissolved in the same acid is precipitated and redissolved by means of sal ammoniac. The *hydrargyrum nitratum rubrum*, improperly called *red precipitate*, where the metal, after being dissolved in this acid, is exposed to a certain degree of fire, whereby it acquires the colour. And lastly,

With the acid of vinegar: *Hydrargyrum acetatum*, known under the name of *Keyser's pills* or *roches*; where the mercury, after having undergone a long-continued trituration, is thereby fitted to unite with this acid.

All these different preparations are applied in various forms, such as powders, pills, boluses, solutions, lotions, injections, ointments, &c. Some of them for external, but by far the greatest number for internal use. In general, it is to be observed, that all saline mercurial preparations are the safer and better the finer they are levigated.

C H A P. XIII.

On MERCURIAL PREPARATIONS in particular.

I. ON MERCURIAL FRICTIONS.

OF all the different methods hitherto discovered for curing the venereal disease, that by mercurial frictions is perhaps the most efficacious, as well as the safest and mildest. The application of mercury in this way, however, as indeed the use of mercurials in general, requires considerable skill and attention on the part of the practitioner, as well as a very strict compliance and observation of regimen on that of the patient, in order to produce the desired effect in the speediest manner.—Such is the difference of constitutions, that some persons will be more affected by a few frictions than others, seemingly in the very same circumstances, by twenty or thirty; and if more mercury is rubbed on the former with a view to increase the effect, instead of this, we run the risk of bringing on very disagreeable symptoms, such as salivation, vertigo, feverish heat, trembling of the extremities, and chronic violent pains in the articulations.

When

When frictions have their proper effect, the use of them is not attended with any bad symptoms; the patient is easily cured without suffering much in the time, or without finding himself much weakened afterwards.—Most people have their symptoms in some measure relieved by four or six frictions; though sometimes fourteen or fifteen are required to produce this effect.

The mercury employed for this purpose ought to be very pure; and as practitioners cannot be assured of the purity of what is sold in the shops, they ought to purify it themselves. Most of our mercury comes from Idria, and passes through the hands of the Dutch, by whom it is not unfrequently adulterated with heterogeneous substances, without any diminution of its fluidity or metallic splendor: but no physician who has the safety of his patient at heart ought ever to employ quicksilver, either externally or internally, without a certainty of its being perfectly pure; for, by making use of the metal in an impure state, he may not only be disappointed in the effects he expected, but it may prove hurtful to the patient.

This being the case, the reader, I hope, will excuse the following digression.

Remarks upon the Adulteration and Purification of Mercury.

Quicksilver is found in mines, either native, in which state it is called *mercurius virgineus*; or mi-

neralised, when it obtains the name of ores, from which ores it is afterwards separated by distillation.

The ores of mercury are of different kinds and forms. The native cinnabar, however, is the kind which contains the greatest quantity of quicksilver. Although many recommend the native cinnabar for a remedy, it is a matter of fact, that it is often impure from admixed heterogeneous particles. It is, therefore, running a risk to employ native cinnabar, especially for internal use. Though it is sometimes more beautiful in its colour than the artificial, we may always depend with more safety upon the latter, if it be only well prepared.

The mercury being in the cinnabar, or other ores of mercury, generally mineralised by sulphur, or at least concealed under it, the process to separate it from the sulphur consists herein, that a substance be united with mercurial ores which has a greater affinity with the sulphur than with mercury; such substances, for example, are alkaline salts, calcareous earth, iron, scoria ferri, &c. If, therefore, one or other of the just mentioned substances (of which, however, always the cheapest is chosen) be mixed with the ore of mercury, and exposed to distillation, this substance will unite with the sulphur, and the quicksilver, being thereby set at liberty, will go over in the form of vapours into the recipient.

A bad custom has, alas! prevailed, by some of interest, to adulterate mercury with lead, with which it readily unites. This adulteration is accomplished

complished the easier, if combined with some bismuth; because the amalgam thus produced is much more fluid, and retains much better the metallic silver-like splendor of mercury. It is thence evident, that the colour and splendor of quicksilver are not always certain characteristics of its purity; and the purification of mercury, by pressing it through a leather bag, is by no means to be depended upon, because the amalgam made of quicksilver, lead, and bismuth, is often so perfect, that though even the fourth part of the whole mass consists of lead and bismuth, very little however of those heterogeneous substances will remain behind in the leather-bag.

The only sure means to purify quicksilver is distillation; for which purpose, some think, iron vessels are best fitted, iron being the only metal whose union mercury refuses, and there being no fear that iron vessels are destroyed by the process as there is with regard to those made of glass. To make use of iron vessels is the more advisable, because the mercury expands very much during the operation, by which means glass vessels are easily broken. The higher mercury may be driven before it descends again, the better it is, because by these means the particles of lead cannot so easily be carried with it. The vessel for this operation may be an iron pot, with a long iron neck like the barrel of a musket. But in order to condense the better and easier, the mercury rising in the form of vapours, the end of that tube bended downwards, should be immersed into vinegar one or two inches deep. All the mercury is, by

this method, not only obtained without loss, and the operator is exposed to no danger, but the transcending mercury will be also perfectly freed and purified from all particles of lead and bismuth which might possibly have gone over with it, the quicksilver being indissoluble in it. The characters, therefore, of pure quicksilver, are: 1. That it forms globules when poured upon wood, which always retain a spherical form, and never are drawn into length like a thread or line. 2. That it be not covered with a cuticle, but be shining. 3. Rubbed with water, the same must thereby not become blackish or foul. 4. Vinegar rubbed or digested with it, must thereby assume no sweet taste. 5. Put in an iron spoon over the fire, it must evaporate entirely without leaving any thing behind.

The mercurial ointment is generally prepared by extinguishing, or, as it is commonly called, *killing* the mercury with hogs-lard and turpentine. The preparation of the ointment in this manner is very exceptionable. It will soon produce, in many persons whose skin is tender, pustules of an inflammatory kind, which are very painful, and prevent the continuation of the frictions.—A more proper method therefore of preparing mercurial ointment for this purpose, is by triturating the purified metal with fresh hogs-lard, repeatedly washed and cleaned for several days with pure water, without the addition of any turpentine. The trituration of the ointment must be continued for two hours, even after all the globules of mercury have disappeared, in order to be certain of the most perfect division. It must

must then be kept in a cold place, not only to avoid its growing rancid, but also to prevent its melting, which would produce a separation and subsequent precipitation of the metal from the hogs-lard to the bottom of the vessel.

But, notwithstanding this precaution, we very often meet with patients whose skin seems to be so extremely irritable, that they will not bear the application of the ointment even when prepared according to the method just mentioned. The great propensity of the hogs-lard to grow rancid, especially in hot seasons and warm climates, contributes greatly to occasion this troublesome irritability. In such circumstances it will be proper either to mix with the above ointment, a small quantity of the ointment of liquorice recently prepared, or to prepare the ointment entirely of mercury, and the butyraceous oil obtained from cocoa-nuts by boiling them in water; or to make use, instead of any ointment, of the quicksilver divided by the mucilage of gum arabic. Thus, indeed, the process is rendered more troublesome and expensive; but the practitioner who wishes to render the cure easy and agreeable to his patient, will readily submit to inconveniences of this kind.

By this method we may effectually prevent the pruritus and pustules proceeding from any of the causes abovementioned, especially if at the same time the place where the ointment is to be rubbed in be previously shaved, and too harsh rubbing with the hand in the beginning be avoided. For sometimes such pustules seem to originate from the hair being violently moved in opposite directions,

tions, which, by these means, will be easily prevented.

The principal objects, after the application of mercurial frictions has been fixed upon, ought to be, *1st*, To dispose the place into which the ointment is to be rubbed for the absorption of the mercury; and, *2^{dly}*, To dispose the surface of the body to transmit the metal through its pores, after it has produced the desired effects in the system, as speedily as possible, and thus prevent salivating, purging, or its settling in any of the cavities of the body. For these purposes, it will be always advisable to prescribe, before we begin the frictions, a purgative, and to order the patient to sit in a warm bath made of soft water, and of about 86 degrees of Fahrenheit's thermometer, for the space of half an hour or an hour. After he has been in it for a quarter of an hour, he must be rubbed all over with a flesh-brush, or a piece of flannel and soap, to clean the skin, and adapt it the better to the purposes abovementioned. This is to be done, if no particular circumstance forbids, the day before, or on the very day that the friction is begun; and to be repeated once or twice a-week afterwards, during the whole time he is using the frictions.

The same evening, or the day after, having made use of the warm bath, the patient should begin the friction, rubbing into the outside or inside of his thigh or leg, before he goes to bed, a drachm of the mercurial ointment prepared as above directed. The friction is to be performed by the fire-side in winter, and the rubbing must be
 conti-

continued gently for half an hour or an hour, till the whole be rubbed in. The part must then be covered with a piece of linen fastened with a bandage; or the patient must put on a pair of drawers, or a pair of stockings if the friction has been made on the leg. The same bandage, &c. may serve for the whole time, being applied only to keep the shirts and bed-linen from being sullied and growing black from the ointment.—Before each new operation, the grease and blackness ought to be well cleansed or washed off with soap and warm water. The friction is best made by the patient with his own hand; but to fat people or the female sex, this operation may prove tiresome, in which case a servant should be instructed how to do it, putting on a glove made of a soft hog's bladder. I would not advise any person to perform this operation for another without putting on such a glove, because I have seen instances of a salivation being brought on in some assistants by rubbing in the mercurial ointment with their naked hand. Besides, we cannot be certain how much ointment is rubbed into the patient, when part of it is absorbed into the servant's hand.

After the first friction, we must attentively observe whether the mercury occasions any irregularity in the body; and if it does, it must be omitted for two days, taking care to observe the same regimen, to be well clothed, and to keep within doors, especially in a cold season or cold climate.

If, after two days, the patient should perceive no disagreeable symptoms, the second friction must

must be made in the same manner as the first. The next day he must leave it off again; and if he then finds no ill effects from it, the frictions may be continued every day, either morning or evening, without intermission, unless some accident intervene. However, the place of rubbing must be changed every day, or every other day, in order to avoid irritating the skin, and to prevent pustules arising upon it. If, after five or six frictions, we find that the patient's constitution will bear the mercury, and that he has no fever, diarrhoea, salivation, or immoderate sweating, we may rub in at every friction two drachms of the ointment, especially if the symptoms be obstinate.

In this situation, when the weather is warm, or indeed unless it be severely cold and damp, the patient may go out every day during the frictions, provided he be warmly cloathed, and avoid the cold wind, and especially the night air. But he must carefully guard against checking perspiration; and therefore, if the weather is cold and moist, he should rather keep at home in a warm room, and shun as much as possible every inconvenience from cold. In a severe season he should wear flannel stockings and a flannel waistcoat, according to circumstances, either over or under the shirt.

During all this time, however, we must if possible use the warm bath, as already directed, once or twice a week; proceeding in this manner, until the patient's health be perfectly re-established, which will be with 30 or 35 frictions, if the soft parts only have been affected: but if
the

the disease has been confirmed, or of a long standing, so that the bones are affected, 50, 60, or 70 frictions will be absolutely necessary to make a perfect and radical cure; though this, no doubt, will vary, according to the constitution of the patient.

It must here be remarked, as an observation of great consequence both to the physician and patient, that the cessation of the symptoms is never to be looked upon as demonstrating a radical cure. This we ought to tell our patients in the beginning, especially if they be of the female sex, that to alleviate the pain or abate the symptoms of the disorder, and to destroy and eradicate entirely the venereal poison from the body, are two very different things. The former may often be accomplished in three or four days by a very few frictions; whereas the latter will sometimes require as many months. The same thing will sometimes happen in this respect when we leave off the frictions as soon as the symptoms disappear, as when we leave off the Peruvian bark in agues as soon as the fever is gone: the fever soon returns again, although perhaps with a different type; but continuing the bark for a longer time, we are sure of a perfect cure, and need not be in the least afraid of a relapse.

We must therefore for the safety of our patients continue the use of mercury as long as it is necessary; but it is here where the practitioner must give proof of his judgment and experience.

When the patient, during the frictions, or otherwise using mercury, perceives his gums begin to swell, his breath to smell disagreeably,

ably, his throat to become painful in the inside, or when he spits oftner than usual, the use of mercury is immediately to be left off, until these symptoms disappear, when we may go on with it again: but I think it eligible to go on with the frictions, if the patient can otherwise bear them, pretty briskly, until the mouth be a little affected; because thus we are certain that the frictions have had their proper effect, and that the mercury has been absorbed into the system.

The generality of patients, as has been already mentioned, find some relief after a few frictions; but there are some, especially those who have the bones affected with tophus, caries, &c. in whom no remission of the symptoms takes place till after fourteen or twenty frictions; and sometimes, in this state of the disease, seventeen ounces of mercurial ointment will be requisite to make a perfect cure.

In all such cases we must endeavour to make the mercury go off by perspiration; but profuse sweating ought not to be encouraged, lest it should weaken the patient, or bring on a consumption, especially in such as are cachectic, or of a thin habit of body. Where we find the body naturally disposed to salivation, or to immoderate sweats, we ought to be very cautious how we proceed. In this case the patient should, especially in bad weather, keep within doors, in a moderate warm room, without being too much covered, particularly on his head or neck. The proper temperature of the room in winter is betwixt the 75th and 78th degrees of Fahrenheit's thermometer; but if, in this season, he should be obliged to go abroad, he ought

ought always to wear a flannel waistcoat under his shirt. But in fine dry weather, I would even advise him to go abroad; for I have found, in many instances, that the enjoying of pure free air contributes rather to prevent a salivation. In warm seasons or climates such precautions are unnecessary. If the patient be weak, the Peruvian bark may be given with advantage, from a scruple to a drachm, in milk, every morning and evening.

By these means I have generally succeeded to prevent the above mentioned bad effects of the mercury, as well as its running off by stool, a symptom to which we should always carefully attend during a mercurial course; for when a purging is occasioned by medicines of this kind, their absorption from the intestines is prevented, and they do little or nothing against the disease. I have seen several patients treated in this manner, who, after taking mercury for six or eight weeks, which kept them all that time in a continual diarrhoea, were nearly in the same state at the end of the course as they had been at the beginning. In this case it happens much the same as when, by an imprudent management, a salivation is raised; the mercury then, though absorbed into the system, seems to run off by the salivary glands, as hastily as it is given, without performing those salutary effects in the body, necessary for eradicating the venereal poison and perfecting a cure. Immoderate sweats, occasioned by mercury, seem to be productive of similar consequences.

II. On MERCURIAL FUMIGATIONS.

I HAVE little to say on this subject. *Mercurial fumigations* are now-a-days no more in use for curing the lues, but prove often a most effectual remedy against local venereal complaints. The cinnabar is for this purpose to be put upon live coals, and the rising smoke to be conveyed by means of a proper tube to the part affected.

III. Of SALINE and other MERCURIAL PREPARATIONS.

The *hydrargyrum gummosum*, (or *mercurius gummosus*), is a mild mercurial preparation, in which the crude metal is divided by means of gum arabic. Mr Plenck, the inventor of this preparation, first prescribed it diluted with water, in the form of a mixture; but this form being found inconvenient on account of the mercury not remaining properly suspended, he proposed, some time ago, to make the same into the form of pills. He for this purpose orders, of highly purified quicksilver, two drachms, to be triturated with three drachms of powdered gum arabic, and a sufficient quantity of conserve of hips, in a marble mortar, till the mercury has disappeared; then, after continuing the trituration for an hour longer, the mass to be mixed with

with half an ounce of crumb of white bread, and then to be formed into pills of three grains each, of which the patient is to take six each morning, and six every evening. This form is undoubtedly less exceptionable, but still liable to another inconvenience, which is, that these pills, like all those made with crumb of bread, when kept for a length of time, grow so hard, that they frequently pass the stomach undissolved, and are evacuated by stool in the same globular form they were taken. This objection, indeed, cannot be made to them, if they are prepared fresh every second or third day; and, in that case, they will be found a very valuable acquisition for our pharmacopœia syphilitica.—A bolus made from five to ten grains of quicksilver, extinguished by a sufficient quantity of the conserve of roses, or confectio cardiaca, &c. will, according to circumstances, serve for the same purpose.

Mercury divided by means of some balsam, would be a very acceptable and useful medicine in different cases. An attempt of the kind has been made in the *pilulæ ex hydrargyro terebinthinato*, where one ounce of quicksilver is united with a drachm and a half of turpentine: but besides that the division is extremely tedious, which indeed might be obviated by adding some drops of the oil of turpentine, this composition is, like all saline mercurial preparations, sometimes very apt to excite griping and purging. This is undoubtedly owing to the quality of turpentine; the best sort should be chosen for this purpose, and, according to circumstances, instead of the turpentine,

tine, the balsam of Gilead, or balsamum Canadense, united with some vegetable powder, might be tried; and thus a pill of five or seven grains be given every evening.

The *saccharum hydrargyrum*, or quicksilver triturated with twice or three times its weight of sugar-candy, is, in many instances, a most excellent medicine, as well for internal as external use. Its dose internally is from four to eight grains a-day, in the form of powders, pills, or troches.

The *hydrargyrum calcinatum*, or calcined mercury, I have constantly found to be apt to excite gripings. This may be in some respect avoided, by giving half a grain of it with a grain of opium every night in the form of a pill.

The *hydrargyrum acetatum*, known by the name of Keyfer's pills or troches, has of late made a great noise in France. It has been recommended as the safest and best medicine for curing venereal complaints, even of the most obstinate and inveterate kind, without ever occasioning a salivation, or producing any of those bad symptoms which sometimes attend the use of other mercurials. Time and experience, however, have shewn that this remedy sometimes proved ineffectual in removing the complaints, and in many instances produced the bad symptoms attending other mercurials. Mercury, indeed, as long as it retains its nature, certainly will salivate or purge, if given imprudently, or if the patients do not take proper care of themselves. Besides, among a variety of patients, some will certainly be met with where this medicine proves not so efficacious as
has

has been pretended. Every physician who has had some practice in venereal complaints, must have met with cases where one mercurial preparation has produced little or no effect, whilst another, tried afterwards, succeeded beyond expectation. These cases we are not able to account for; nor do we as yet know the nature of the human body sufficiently to foresee them *à priori*. Keyser's pills are a saline mercurial preparation, where the mercury is first divided by a long continued trituration, and then dissolved in vinegar. Hence, like all other mercurial preparations, it may sometimes produce very good effects, and perfectly cure the disease; whilst, in other instances, it may prove less useful, or even hurtful *.

The *hydrargyrum tartarifatum*, we call a combination of mercury with simple acid of tartar, in order to distinguish it from the *Tartarus hydrargyratus*, an invention of Dr Preßavin at Paris, who gave it the name of *terre feuilletée mercurielle*. This latter preparation being a combination of mercury with purified tartar, or cream of tartar, which is a middle salt compound of vegetable

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alkali,

* The *hydrargyrum acetatum*, prepared by mixing a solution of hydrargyrum nitratum in water, with a solution of alkali vegetabile acetatum (*sal diureticus*), is an ingenious preparation, and perhaps much better than that of Keyser. It certainly contains more mercury than his, because metals can be dissolved in acids only in proportion to the loss of their phlogiston; and in the latter preparation, the mercury is more reduced to a calx by its previous union with the nitrous acid. Hence it is more soluble in the acetous acid, as soon as the acid of nitre, disengaged from the metal by the fixed vegetable alkali, leaves the former at liberty to act upon it.

alkali, supersaturated with the acid of tartar. Both these preparations are nearly of a similar nature with the former, though perhaps, in some respects, preferable to it.

The *hydrargyrum nitratum*, or mercury united with nitrous acid, has been employed in different forms and preparations internally and externally. For external use the solution diluted with water has been made use of as a wash, and is a very good medicine for chancres, &c. The same solution made with one ounce of quicksilver to three ounces of nitrous acid, and while yet warm united with a pound of hog's lard by a careful trituration, yields, under the name of *unguentum citrinum*, one of the most efficacious remedies I know of for obstinate syphilitic complaints of the skin. The red precipitate, or *hydrargyrum nitratum rubrum*, prepared from the same solution, exposed to fire till it acquires the colour mentioned, is of a corrosive nature, and therefore employed only in powder sprinkled upon venereal ulcers as a caustic. For internal use the *hydrargyrum nitratum* has been commonly given from half a grain to a grain, in a quart of any of the decoctions.—Dr *Ward's white drop*, which gained some reputation, is nothing else but quicksilver dissolved by nitrous acid, precipitated and redissolved by means of sal ammoniac. But the *hydrargyrum nitratum cinereum*, in the new Edinburgh Pharmacopœia, called by its inventor Dr Black *pulvis mercurii cinereus*, is one of the mildest of the saline mercurial preparations, and may be given to the dose of a grain every evening, and occasionally

sionally also every morning.—The following is the method of preparing it: Quicksilver, diluted acid of nitre, of each equal quantities in weight. After the mercury is dissolved, the solution is to be diluted with pure water, and as much liquid volatile alkali (*spiritus salis ammoniaci*) to be dropped into it as is sufficient for depriving the mercury of the acid: afterwards the grey powder is to be washed with pure water and dried.—The syrup of Bellet, (commonly called *vegetable syrup*) a celebrated composition, the ingredients of which are kept secret, is, as I was informed by people of authority in France, mercury precipitated from its solution in the acid of nitre by fixed vegetable alkali, and the precipitate afterwards dissolved in vitriolic ether mixed with some agreeable syrup.

I shall now take notice of a preparation of mercury, first recommended by the celebrated Baron Van Swieten. This preparation is the corrosive sublimate, (*mercurius sublimatus corrosivus*); or, as I would rather call it in the more accurate language of chemistry, the *hydrargyrum muriatum (fortius.)* Some years ago this medicine engaged the attention of all Europe. By some it was recommended as a most excellent and efficacious remedy against the most inveterate complaints, and worst stages of the venereal disease. It was particularly recommended in eruptions on the skin, and in venereal affections of the bones; while others exclaimed against it as being frequently productive of the worst effects without ever radically curing the distemper.

Both parties seem to have gone too far in praising as well as blaming. I have seen cases where this medicine has perfectly cured the most inveterate and obstinate venereal complaints; while in others I have found it produce effects of the worst kind, such as loss of appetite, griping, purging, headach, fever, anxiety, oppression of the breast, and even spitting of blood, without curing, or even appearing to have the least effect on the disease. But in general I have frequently observed that this medicine very soon mitigates the most troublesome symptoms of the venereal disease, without effecting a radical cure, even after being applied for a very considerable time; and I am apt to think now, that its great reputation arose at first from this property of frequently alleviating so remarkably the symptoms.

Upon the whole, though it is certain that there are some constitutions which will never bear this violent medicine without danger, yet, from such observations as I have been able to make, it seems probable, that the bad effects attributed to the corrosive sublimate have sometimes arisen either from its improper preparation, from an immoderate dose, or otherwise from a defect of practical judgment in the physician or surgeon. Therefore, although I never like to employ violent remedies where I can effect a cure with mild ones; yet it must be allowed, that, in practice, cases will sometimes occur attended with such symptoms as require the use of the most powerful medicines, if for no other purpose but for a speedy temporary relief.

relief. In these cases it will sometimes be highly advisable to have recourse to the sublimate; tho' it is probable to me, that such cases are much less frequent than it is commonly thought. But at any rate, the constitution of the patient must be well considered before we have recourse to this medicine. If he be of a strong habit of body, and his lungs healthy, we may safely try the sublimate, using the necessary precautions with regard to its dose and manner of exhibition: but I would never recommend it where the patient is of a weak, delicate, and irritable habit of body, or if he has a small chest, has had formerly an hæmoptysis, or any pulmonary complaint; for these persons I have always observed to suffer from the use of the sublimate. Some indeed who were apparently of a strong constitution, I have seen equally affected by this remedy; for which reason it is always necessary to be cautious in the use of it. We ought never to begin with more than a quarter or at most half a grain a-day, dissolved in milk, barley-water, or a decoction of sarsaparilla. When given in this manner, if the patient is a proper subject for this medicine, it will not readily produce any bad or at least any dangerous consequences; the less so when administered in a warm season, or in a hot climate. In using the sublimate, it ought besides always to be remembered, that we can never be too careful with regard to its choice; and that with the utmost care and attention to the preparation of the sublimate, it is hardly ever possible to obtain it of the same degree of strength, even by follow-

ing always the very same process. In all cases therefore the patient should be ordered to leave it off immediately on perceiving any of the above-mentioned bad symptoms. Sometimes it also occurs in the shops adulterated with arsenic, which may be discovered when mixed with lime-water, in which case it will produce a black colour; whereas, if genuine, it yields with the same an orange-coloured precipitate, to which we gave the name *lotio syphilitica flava*, if one drachm of sublimate is added to one pound of lime-water. Its texture besides, if genuine, ought to be of a radiated appearance; whereas the same, if adulterated, has rather a granulated one.

The *hydrargyrum muriatum mitius*, or still more properly the *calx hydrargyri muriata*, commonly called *calomel*, *mercurius dulcis*, *mercurius sublimatus dulcis*, *panacea mercurialis*, *aquila alba*, &c. is a milder preparation than corrosive sublimate, but still an acrid one, and thus very apt to produce gripings, and to run off by stool. Besides, as its manner of acting depends very much on the accuracy of its preparation, and other circumstances which we are not master of, its efficacy in curing the lues is not much to be depended upon. Indeed calomel is in different countries, in different shops in the same country, nay even in the same shops at different times, a very different medicine. On this account, tho' it cannot be denied that many have been cured of the venereal disease by this medicine. I never make use of it internally but for a mercurial purge. However, as it may prove an excellent
remedy

remedy for external applications, and as Mr Scheele, by his new method of preparing it *via humida* lately inserted in the *Acta Stockholm.* has greatly removed all the objections it was formerly liable to, it will perhaps be agreeable to some of my readers to be more exactly acquainted with this latter process. I shall therefore insert it here.

“ Half a pound of quicksilver, and the same quantity of pure aquafortis, are to be put into a small vessel with a long neck, the mouth of which is to be covered with paper. The vessel is then to be placed in a warm sand-bath; and after a few hours, when the acid affords no signs of its acting any longer on the quicksilver, the fire is to be increased to such a degree that the solution may nearly boil. This heat is to be continued for three or four hours, taking care to move the vessel from time to time, and at last the solution is to be suffered to boil gently for about a quarter of an hour. In the mean while we are to dissolve four ounces and a half of fine common salt in six or eight pints of water. This solution is to be poured boiling into a glass vessel, in which the abovementioned solution of quicksilver is to be mixed with it, gradually, and in a boiling state also, taking care to keep the mixture in constant motion. When the precipitate is settled, the clear liquor is to be drained from it, after which it is to be repeatedly washed with hot water till it ceases to impart any taste to the water. The precipitate obtained by this method is to be filtered, and afterwards dried by a gentle heat.

“ It might be supposed, that when the nitrous acid

acid ceases to effervesce with the mercury, it is saturated with it : but this is far from being the case ; the acid, when the heat is increased, being still able to dissolve a considerable quantity of it ; with this difference, however, that the quicksilver at the beginning of the process is calcined by the acid, but afterwards is dissolved by it in a metallic form. In proof of this we may observe, that not only more elastic vapour arises, but also that by adding either fixed or volatile caustic alkali we obtain a black precipitate ; whereas, when the solution contains only calcined quicksilver, the precipitate becomes yellow by such an addition. If this black precipitate is gently distilled, it rises in the form of quicksilver, leaving a yellow powder, which is in fact that part of the mercury that in the beginning of the operation was calcined by the nitrous acid.

“ The boiling of the solution for about a quarter of an hour is necessary, in order to keep the *hydrargyrum nitratum* in a dissolved state, it being much disposed to crystallize. In general, some of the mercury remains undissolved ; but it is always better to take too much than too little of it, because the more metallic substance the solution contains, the more *mercurius dulcis* will be obtained.

“ It is necessary to pour the mercurial solution into the solution of salt by a little at a time, and cautiously, so that no part of the undissolved quicksilver may pass along with it. Two ounces of common salt are sufficient to precipitate all the mercury ; but then it may easily happen that some
superfluous

superfluous mercurius corrosivus attaches itself to this precipitate, which the water alone is incapable of separating completely. This is undoubtedly the reason why mercurius præcipitatus albus is always corrosive. I have found that common salt possesses the same quality as sal ammoniac, viz. that of dissolving a great quantity of mercurius corrosivus. I therefore employ four ounces and a half of common salt in order to get the mercurius corrosivus entirely separated.

“ If we consider the manner in which mercurius dulcis is obtained in the dry way, by sublimation, we shall not find it difficult to give the rationale of this new process.

“ Mercurius corrosivus albus is a middle salt, consisting, as is well known, of marine acid combined with calx of mercury. This salt is capable of dissolving a good deal of quicksilver in a metallic form; but for this purpose the most minute particles of each must be reciprocally mixed. This happens, when by means of heat they are both converted into vapour. The same thing occurs in the abovementioned process. The solution first spoken of contains the calx mercurii and quicksilver divided into the most minute particles. If to this solution we add marine acid, or (to save expence) common salt, the marine acid will unite with the calx of mercury, and the result of this union will be a true mercurius corrosivus albus; and as the solution contains quicksilver in its metallic state, this will immediately attract as much of the mercurius corrosivus as is necessary to saturate it, and by this means a real
mercurius

mercurius dulcis will be produced, which, from its being insoluble, will be immediately precipitated.

“ The following facts are proofs that this precipitate is a good mercurius dulcis. 1st, It is entirely tasteless. 2dly, I have sublimed it, and examined what ascended in the beginning, and which ought to have been corrosive, if the precipitate had contained any thing of that nature, it being well known that mercurius corrosivus ascends sooner than mercurius dulcis; whereas, through the whole of the sublimation, what arose was a pure mercurius dulcis, exactly like that which is obtained in the common manner. 3dly, I have mixed this precipitate with one fourth part of quicksilver and sublimed it, upon a supposition that if it contained too much mercurius corrosivus it would be able to unite with more quicksilver; but so far was this from being the case, that the quicksilver was not diminished in weight by the experiment. 4thly, It is known that caustic alkalis and lime-water give mercurius dulcis a black colour. The same thing happened with mine. The black colour is no other than quicksilver divided into very fine particles.

“ That the process I have been describing is more advantageous than that which is usually adopted, I cannot doubt; because, in the first place, this mercurius dulcis can be prepared with less difficulty, with less expence, and without employing corrosive sublimate. 2dly, As there can be no danger of its being in any degree corrosive, provided it be sufficiently edulcorated, it may always

may be given with safety. 3dly, The operator is not exposed to that noxious dust which in the old method arises during the trituration of the corrosive sublimate and quicksilver. 4thly, This is much finer than the common mercurius dulcis, being impossible to make the latter equal to it in this respect, however long it may be triturated."

Calomel thus prepared will prove excellent, not only for a purgative, but especially for external use, either in powder, or suspended in simple water or some mucilaginous solution; or occasionally, likewise, a drachm of it may be mixed with four ounces of lime-water, under the name of *lotio syphilitica nigra*, to distinguish it from the *lotio syphilitica flava* made with corrosive sublimate and lime-water. Calomel, when well prepared, must give the lime-water a black colour, as corrosive sublimate does a yellow.

The *calx hydrargyri vitriolata*, commonly called *turpeth mineral*, or *mercurius emeticus flavus*, is a medicine now very little used, except by those who think a mercurial vomit preferable to one of tartar emetic or ipecacuanha, for curing a swelled testicle arising from a venereal cause. Some instances however I have seen, where this medicine, given daily in very small doses, effectually removed most obstinate venereal complaints of the skin.

I come lastly to speak of a medicine, which, some time ago, and even yet, is made use of by many for the cure of the lues; I mean *Plummer's powder or pills*; which, properly speaking, are not a mercurial preparation, but a mechanical mixture

ture of mercurius dulcis, and sulphur of antimony. I have already observed, that mercurius dulcis, when prepared by sublimation, is a very different medicine in different countries and places; that it is therefore a medicine not to be depended upon: for this reason, I never would advise any person, as well for his own satisfaction as that of his patient, to trust to Plummer's pills for curing the venereal disease. Plummer has compounded the calomel with sulphur of antimony, probably for the purpose which still seems to be expected by those who make use of this composition, viz. by means of the sulphur to prevent salivation, and to direct the mercury to the skin. This seems especially to be the design in cutaneous eruptions of the venereal kind. But though this medicine may sometimes be effectual in removing cutaneous disorders, I must, from my own experience, as well as from that of several other unprejudiced practitioners, pronounce it a very improper one for curing a confirmed lues. Repeated instances indeed have come under my observation, where these pills having been taken for a considerable time, have removed the symptoms for a time, without effecting a radical cure; which are to me sufficient reasons for thinking it an unsafe medicine, and consequently that no practitioner ought to put confidence in it for the cure of the lues, when he has a safer one in his hands.

Whether crude mercury boiled with simple water communicates to it something of its qualities, and with what success such a decoction might be

be administered for curing venereal complaints, I am not able to say. I have seen this decoction given to children affected with worms, in different parts of the continent; with what effect, I had no opportunity to ascertain: but I know of a dog in London who was radically cured of a most obstinate scab, for which a variety of medicines had been tried in vain, from the use of this decoction for his common drink.

IV. *On PTYALISM or SALIVATION.*

IT has been a matter of controversy, whether confirmed lues may be radically cured without salivation; and though there is now hardly any medical man who doubts of the possibility of a perfect cure without it, there are still many who employ salivation, not only for the cure of the lues, but, in some countries, for that of the Gonorrhœa also. This mode of treatment, in the former case, is still very much in vogue, in private practice as well as in hospitals, especially in France: in other countries, it is almost entirely confined to hospitals alone.

How far this practice of salivating such patients is justifiable, in the former as well as in the latter case, shall be the matter of my present inquiry.

It has been the opinion of many, and publicly asserted by Dr Freind, and even by several late writers, that a salivation is not only necessary to effect a radical cure, but also that the greater the salivation,

salivation, the more certain and effectual will be the cure of the lues, especially when the bones are affected.

I must confess, I have always experienced the direct contrary. Amongst a great many patients of different ages, constitutions, and climates, who have been under my care, I have not only not found one who required salivation, but I have, on the contrary, constantly observed, that the greater the salivation, the less certain and effectual was the cure of the lues. This is so true, that even the modern advocates for salivation unanimously confess, that a strong salivation is hurtful, and that only a gentle one should be raised. Could I allow this to be right, I would observe, that to stop, or even moderate, a salivation once begun, is in many cases more easily said than accomplished. This is often entirely out of our power; and it is yet one of the great desiderata in medicine, to know a specific remedy that will produce such an effect. This is so little in our power, that I have seen more than once patients carried off by salivation, (their strength being totally exhausted) before it could be lessened or stopped by any remedy whatsoever. Others who did not sink entirely under it, remained languid from the evacuation, for months and even years, and several I have seen die in a consumption brought on by such a course. Besides, a salivation is not only very troublesome to the patient, by spitting day and night, and by filling the room with a very disagreeable smell; but frequently also produces painful ulcers in the mouth, fauces, &c. which,

which, if not taken care of in time, or being mistaken for venereal ones, by continuing the use of mercury, become more dangerous than the venereal disease itself.

It may seem surprising, therefore, how such a dangerous method of attempting the cure of the venereal disease as that by salivation should still be retained and practised in some hospitals. The three following reasons, indeed, I have heard alleged. 1. To confine the patients with the gonorrhœa or lues to the room, and to prevent them from getting a fresh infection before they are cured of the first. 2. To get rid of such poor patients in a month or five weeks, in order to take others in their place into the hospital, who are treated and sent away in the same manner. 3. Because many of the lower class of people have an unhappy prejudice in favour of this method, and imagine they cannot be radically cured without what they call a good and continued salivation. To me, however, these reasons appear wholly insufficient. To prevent the patients from getting a fresh infection, better means might be easily found out. With regard to the second point, I think it more reasonable and more humane to cure a smaller number of patients radically without salivation, even though a longer time should be taken up in the cure, than to relieve the complaints of a great number in a shorter time by such an uncertain, troublesome, and sometimes dangerous method. We may add to this, that experience daily shows, that a number of those patients who seem to be cured by the ces-

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fation of the symptoms during salivation, very frequently return in a short time to the hospital with the same symptoms they were affected with before, or find themselves obliged to seek assistance somewhere else, at the same time that they solemnly protest against their having received a new infection. The third reason alleged in favour of salivation is the worst of all. I am of opinion, that no person of integrity, who practises medicine, should ever comply with the prejudices of his patients when they may be hurtful to them, or when he knows that by a contrary method he is able to cure them with greater certainty and safety. Besides, it will be an easy matter for a physician or surgeon, who knows how to gain the confidence of his patient, to convince him of the folly of such prejudices. Salivation, therefore, being, in my opinion, an exceptionable method of cure in any circumstances whatever, I think it, in all cases, most prudent to avoid it, or, if present, to moderate and remove it as quickly and speedily as possible.

The method of preventing a salivation I have laid down above, when speaking on mercurial frictions. The means to be used for this purpose are shortly the following. 1. A careful administration of mercury both as to its preparation and dose. 2. The avoiding cold or damp air, especially at night. 3. The use of warm cloaths; or, in a cold damp season or climate, the constant wearing of flannel next the skin. 4. The repeated use of warm baths, and the internal use of diaphoretic or diuretic decoctions along with the

the mercury. 5. The avoiding too hot rooms and confined air. 6. Covering the neck and head but very slightly day or night. 7. Taking a dose of gentle cooling phyfic, and intermitting the use of the mercury as soon as the breath and teeth begin to be affected. 8. If the patient is not of a phlogistic habit of body, a free diet, with the moderate use of wine, is to be ordered, rather than a low one. Smoking tobacco should also be avoided, during a course of mercurials, by those who are accustomed to it.

It is also to be observed, that, in general, a salivation will take place more readily under the use of acrid mercurial preparations, and in a cold and damp season or climate; that some constitutions are more disposed to it than others; and that particularly those who have previously taken mercury are often ready to fall into a salivation by using the smallest dose, though perhaps in the former disease they felt no such effect from the use of it.

A variety of medicines given separately, or combined with the mercury, have been likewise recommended for preventing it from affecting the mouth, as well as for checking a salivation after it has taken place. The principal of these are sulphur, sulphur of antimony, camphire, the Peruvian bark, and iron. By a careful attention, however, to the foregoing rules, I think it is in general not very difficult to avoid a salivation, without having recourse to any of these remedies; especially as I have seen some of them repeatedly applied by others without success. With regard to the latter point, viz. the abating and removing

a salivation when once begun, it is sometimes a very difficult matter: the following method, however, with an exact observance of the rules above mentioned, will frequently be attended with success.

As soon as the patient feels his mouth affected, he ought to leave off the use of mercury, and keep within doors, in a moderately warm room, if the season be cold. If his strength and constitution will allow, we may administer him a gentle laxative; but should be careful about prescribing purgatives, because they often will bring on a diarrhoea, which we shall find sometimes great difficulty to stop, and which may prove dangerous in its consequences. If he can bear it, he should also, for four or five days, be placed every evening in a warm bath, rubbing his body in the mean time with a flesh-brush or piece of flannel; and when he comes out of the bath, he must again dress himself immediately in flannel cloaths. If phlogistic symptoms occur, he should be confined to a low diet, and drink barley-water or any other mucilaginous decoction; but if his strength is very much reduced, a good nourishing diet, together with the use of wine, an infusion of Peruvian bark in wine or cinnamon-water, and the free country-air, are certainly more proper. When the salivary ducts are very much relaxed, and the spitting continues undiminished, an astringent gargle may, with proper precautions, be prescribed. It may be made of the decoction of Peruvian bark, or of the *cortex salicis albæ*, in red wine or in water; to which, according to circum-

circumstances, may be added some tincture of gum-lac or of myrrh. If the air is dry, he should not confine himself to his room, but go abroad a little, unless it be very cold. Common sulphur may also be given occasionally, either alone or joined with some cooling purgatives. The sulphur of antimony has been recommended in such cases as a diaphoretic. An eminent physician has recommended for this purpose the *aurum fulminans*, given every day from three to five grains, as a very efficacious medicine; but as I have never had occasion to try this remedy myself, I am unable to say whether his advice is founded on experience, or only on a theory derived from the chemical affinity or attraction between mercury and gold. In an obstinate ptyalism, a blister, seton, or issue, in the neck, or the volatile liniment applied to the throat, sometimes prove serviceable; and in desperate cases we might also try the effect of repeatedly pouring cold water over the head and face, letting the patient sit in the mean time with the rest of the body immersed in a warm bath.

C H A P. XIV.

Of the Reasons why certain VENEREAL COMPLAINTS do not yield to MERCURY.

TH E reasons practical observations have suggested to me why mercury sometimes fails in curing venereal complaints, depend on the following causes; viz. 1. On mercury and its preparations. 2. On the method of exhibiting them, internally as well as externally. 3. On the greater or less irritability or constitutional strength of the patient, or some faults committed by the same. 4. On the nature of the disease itself.—I shall treat of them in order.

Since the use of mercurial ointment in frictions, the first and only method made use of in the sixteenth century, several other preparations, both for internal and external use, have been discovered and tried, with a view to cure venereal complaints which would not yield to frictions, or to remove the disease more speedily or in a more convenient manner. I shall avoid making here any reflections on the preference either of those methods claims over the rest; and shall confine myself entirely to the reasons why mercurial frictions, as well as other preparations of mercury, sometimes prove ineffectual for removing
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some venereal complaints, having offered some observations on these preparations before.

I have seen a variety of persons affected with gleets, chancres, pains and caries of the bones, cutaneous eruptions, herpes, ulcerations of the nose, throat, &c. condylomatous or verrucous excrescences in different parts of the body, but especially about the anus and pudenda, which seemed obstinately to resist the effects of mercury; and which, so far from being removed after a copious and disagreeable salivation, were rather increased by it, and, when removed, often returned again shortly afterwards.

After a careful inquiry, I found that the causes of this difficulty were very often to be sought for in the medicine itself; being owing, either, 1. To its being badly prepared, or ill fitted for curing the disease. 2. To its not being given in sufficient quantity, or continued for a sufficient length of time. 3. To its being administered in too great a quantity, and by that means exciting a salivation, sweats, and purging, without destroying the venereal virus in the body; or, lastly, To its being mixed with other substances, so as to render it inefficacious.

The great point in curing the venereal disease by mercury, being to introduce such a quantity of it into the habit as shall be sufficient totally to eradicate the venereal poison, it is evident that medicines unskilfully or negligently prepared, may have the worst effects. Thus, for example, if sublimite is mixed with arsenic in order to

render it whiter, and to give it a better appearance, or if mercury is combined with substances incapable of holding it suspended, or if, when made into pills, it is not sufficiently triturated so as to be equally divided, its effects cannot but be precarious. In the latter case one pill may contain three or more grains of mercury; and another only one grain, or perhaps none at all; and when this is the case, the latter will have no effect, while from the former the patient may experience a violent griping and purging.

Here we may observe, that a mercurial preparation is always ill fitted for the purpose, whenever it is incapable of entering into the habit, or if, when it has entered the circulation, it excites a salivation before it has destroyed the virus; for it is erroneous to believe that by salivation all the poison is carried off, and the disease by that means radically cured, just the contrary to this being the case. It is true, that if a salivation is brought on, the patient will often find all his symptoms disappear, and of course be induced to think himself cured; but some months, and sometimes only a few weeks afterwards, the complaints will, in many cases, return again with increased violence. I do not deny, however, but that the disease, especially if slight, may by this means be radically cured: but I maintain, from repeated observations in private as well as hospital practice, that the practitioner can never be certain of the real cure; and of course that the cures effected by salivation are not only doubtful, but oftentimes altogether ineffectual.

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But upon this subject I had occasion to treat more fully in the foregoing chapter *Of mercurial preparations in particular*, and under the head of *Salivation*.

The principal remark to be made here is, that to cure our patients well and radically, no practitioner who has their welfare at heart, and who does not administer his medicines at random, will ever make use of any mercurial preparation or composition which he has not prepared himself, or at least taken care to see prepared by some one on whose integrity and care he can rely. The repeated disappointments I have experienced myself, and which I have seen happen to others, have rendered me scrupulously exact on this head.

We should likewise be careful not to make use of mercurials combined with other medicines, because they not only disappoint us, but often render the cure more tedious and precarious. I have seen repeated instances of this with Plummer's pills; and have heard the same remark made by others, who were attentive and eminent practitioners.

We ought never to give acrid preparations of mercury, when we can effect a cure with mild ones. The dreadful effects I have repeatedly been an eye-witness to from remedies of this sort, especially from the corrosive sublimate, oblige me to inculcate this caution with the greater warmth. The constant effects of such acrid compositions, especially in delicate habits, are pains in the stomach and bowels, loss of appetite, violent grippings,

pings, diarrhœas, and sometimes dangerous colics; or, if they enter into the circulation, they will excite spitting of blood, convulsions, nervous fevers, and other complaints, more baneful even than that they were intended to eradicate; or else they will perhaps excite a salivation, and of course prevent them from being continued to complete the cure. If we sometimes administer them, as may now and then be requisite in cutaneous or deep-seated venereal complaints, we should carefully consider the habit of the patient; and if that will admit of them, should begin with very small doses, in order to avoid the above-mentioned symptoms, particularly the diarrhoea; for when that takes place, the mercury, instead of entering into the mass, will be carried off by stool, and of course occasion trouble and pain to the patient, without affording him any relief. In general, therefore, we should be careful in the choice and administration of mercurial preparations: we should find out, in every case, that preparation which seems best to agree with the constitution, and never insist obstinately on the use of a preparation or dose which excites bad symptoms in the body: we should not imitate the example of those quacks whose knowledge consists entirely in a nostrum, which they give indiscriminately to all their patients, for every kind of venereal complaint, and pronounce their patients cured as soon as the symptoms of the disorder have disappeared; to which assertion, credit is the more readily given, as most young men dislike to be confined for any length of time. Thus
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they will now and then cure a patient; but, in the mean time, ruin the constitution of many, and commonly render the disease more obstinate and inveterate for the future. The poison indeed remains latent for weeks, months, or sometimes even for years; but then it breaks out with redoubled rage and violence, and not unfrequently produces symptoms and diseases, the nature of which, especially in women, we must only guess at, and which, in that state, sometimes baffle the skill of the most able physician; for venereal complaints, the older they are, the more obstinate they prove against the power of mercury.

I come now to the third point, why mercury fails sometimes in curing the lues, viz. on account of the constitution of the patient. We sometimes meet with patients, especially among the female sex, or such as have taken mercury for former venereal complaints, whose constitution is now so irritable, that, after the administration of a few grains or frictions, they are either affected with a nervous fever, spasms, headach, or they very readily fall into a salivation, on the second or third day. In these constitutions we ought to be peculiarly careful to find out the preparation and dose best adapted to them. The Peruvian bark, or some other vegetable tonic, is here sometimes administered with mercury to great advantage. If we neglect these precautions, indeed, many patients of this kind will be sufferers for life, without ever being cured radically. There is one remark to be made here,
to

to which in general little attention has been hitherto paid. Most writers and practitioners confine their venereal patients under a mercurial course, without any distinction, to a low diet, as well with regard to eating as drinking. This rule is however a very improper one, when generally applied. Such a diet will be very proper for strong, vigorous constitutions; but, for weak, delicate, or irritable ones, it will sometimes be extremely improper. A full diet, with the moderate use of wine, ought to be allowed them; otherwise mercury will produce no effects upon the poison, though very disagreeable ones upon the constitution. The warm bath will sometimes much assist in these cases. Nature readily co-operates with mercury in some constitutions; whereas in others it does but little, or acts slowly, and with difficulty. But besides this peculiarity in the constitution, we often observe, that patients render their complaints complicated and obstinate, by attempting to cure themselves, or by applying to quacks or unskilful persons in the art of healing. They frequently also hurt themselves by neglect of diet, or by not making use of the medicines in the manner prescribed, or by not continuing the same long enough, but leaving off as soon as the symptoms disappear, by exposing themselves imprudently to the damp and cold atmosphere, especially at night, or by becoming impatient and growing inconstant, going from one physician to another, making use, for some days or weeks, of one medicine, and then of another. By all these different circumstances

stances, venereal complaints are sometimes rendered extremely obstinate.

On account of the disorder itself, mercury sometimes fails, when the patient, by a previous large or imprudent use of mercury, can hardly bear a few grains or a few frictions without salivation: in this case, if we leave off the use of mercury, our patient will not get rid of his disorder; and if we continue it, we are sure to bring on a troublesome ptyalism, which will last sometimes for weeks or months, exposing the patient to dangerous consequences, and often leaving the principal disorder uncured. What may be done in these circumstances, I have hinted in several places of the foregoing chapters. But we are by far more frequently disappointed in our expectations from mercury, by mistaking the nature of the disorder; by judging those complaints venereal, which often are owing either to the effects of mercury, or to a state of the disorder, which, though originally arising from the venereal virus, has degenerated either by time or other causes into a disease of a quite different nature, for which mercury is not only no antidote, but a real poison. Of these complaints we have spoken already, and shall speak further hereafter.

C H A P. XV.

On other REMEDIES recommended for curing the LUES.

BESIDES the mercurial frictions, the fumigations, and the internal use of the different mercurial preparations, a variety of other medicines has been recommended, either to cure the different venereal complaints without mercury, or to assist mercury in its operation; and as there are many instances of the mercury failing, or exposing the patients to disagreeable consequences, a remedy has been sought for, which, without having any of the noxious qualities of mercury, might have all its powerful and good ones. Most of the quack medicines, sold and praised as preparations from the vegetable kingdom for this purpose, I have been at pains to analyse, and have found them to be nothing but one or other mercurial preparation disguised. Several other remedies have been recommended as succedaneums for mercury, for the cure of the venereal disease, which, we are told, had been made use of for this purpose with success, before mercury was employed; and are, we are credibly informed, made use of even at this time, without any mercurial, with the best effect, in South as well as in North

North America, for curing the venereal disease radically. Such of them as I have seen made use of for the same purpose in Europe, have, in every instance at least that came under my inspection, never been attended with the desired effect; and I have never seen one instance of a confirmed pox cured by them. Some of them, however, are worthy our attention, and certainly deserve a fairer trial than has hitherto been made to ascertain their power, especially such as are recommended by men of knowledge and observation. The root of the *Lobelia syphilitica*, with which, as we are instructed by Dr Kalm, and afterwards more exactly by Mr Bartram *, the inhabitants of North America cure the venereal disease as effectually and radically as we do with mercury. They take a handful of the fresh, or (which he says is better) dried plant; they wash it, and boil it in a gallon and a half of water; of which decoction the patient drinks every day, if his constitution will suffer it, a quart in the beginning, gradually augmenting the dose, till he can no longer bear the purging excited by it; then he leaves it off for a day
or

* The latter author advises the patient to take two gills of this decoction three times a-day, on an empty stomach, and augment the dose according to the strength of the patient, making use of warm baths, and a proper diet at the same time. Care should be taken not to make use of the *lobelia longiflora*, instead of the *lobelia syphilitica*, the former being of a much more acrid nature than the latter.—In some parts of Italy it is even now a law of government, not to make use of mercury in hospitals for curing the venereal disease.

or two, and, if necessary, continues it again till he finds himself perfectly well, which is for the most part in a fortnight. If there are any external disorders, they wash the affected parts with the same decoction.—If the disease is very obstinate, they mix with the lobelia, the root of the *Ranunculus abortivus*, but in a small quantity on account of its acrimony. In order to heal up the venereal ulcers, they dry the root of *Geum nivale*, and sprinkle its powder upon them. They also cure deep and putrid ulcers, by insper-sion of the interior bark of the *Ceanothus Americanus*. A decoction of the stipites of the *Solanum dulcamara*, and likewise the root of the *Daphne mezereum* and sarsaparilla, have been of late much recommended in obstinate venereal complaints either in substance or in a decoction; but how far their operation succeeds without the previous use of mercury, is not yet ascertained.

In South America, and in the West Indies, a decoction of the woods of guaiac, sassafras, &c. is praised as a remedy, with which alone the most confirmed lues may be easily cured. It may be that they remove venereal complaints between the tropics, and in the warmer climates of our globe; but in Europe I have seen them sometimes prove hurtful, producing profuse sweats, hæmoptysis, consumptions, &c. in delicate and thin habits, and I never saw any one case where they effected a radical cure.—The following complicated prescription, we have been told, is made use of with great success in Brazil and Portugal, and in other countries, under the
name

name of the *Decoctum Lusitanicum*, or Lisbon diet-drink. R. *Rad. Sarsaparillæ, Santali albi et rubri*, of each three ounces; *Glycirrhizæ, Mezerei*, of each half an ounce; *ligni Rhodii, Guajaci, Sassafras*, of each one ounce; *Crude Antimony* five ounces: ten pounds of boiling water is to be poured upon these, and remain for twenty-four hours, then to be boiled to five pounds. Of this, strained off, the patient ought to take from three pints to two quarts a-day. But how far all these medicines, as I have said before, act without mercury, is yet very uncertain. The disease is certainly easier cured in warm climates, when well treated, than in cold ones. As to the remedies which we every day see recommended by quacks, and pretenders to secrets, as not consisting of mercury, and curing the venereal disease radically, they are, for the most part, as I have mentioned before, some mercurial preparation disguised; and I think it fortunate enough for the patients if they prove only useless to him.

C H A P. XVI.

*On particular VENEREAL COMPLAINTS,
which require a peculiar Method of Cure.*

I. On the VENEREAL OPHTHALMIA.

THERE are two distinct species of venereal ophthalmia. The one seems to be rather of a chronic kind, comes on gradually, and arises from a tainted mass. The other is the most acute, violent, and dangerous of any ophthalmia I know of: it comes on suddenly, and owes its origin, as far as I have been able to observe, to a sudden retropulsion of a recent venereal gonorrhœa: see *Venereal Gonorrhœa*.

I have seen three instances of this dreadful disorder, of which every one proved fatal to the sight of the sufferer. In two cases, both eyes were affected with blindness; in the third, one was affected immediately, but several years afterwards the sight of the other also was lost, and as it seemed without any apparent cause. All old practitioners with whom I have conversed about this dreadful complaint, and who have observed the same several times in their practice, were of opinion that it originated from a retropulsed recent gonorrhœa, by way of metastasis. In those three cases which I just mentioned, the disease was certainly accompanied
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with a suppression of the clap: but whether that suppression was the cause of the ophthalmia, I was not able to determine with certainty; and am much less capable to account for such a metastasis, though we know that a very great connection subsists between the eyes and the parts of generation.

But whatever may be the cause of these ophthalmies, the fact is this: In the three instances which came under my observation, the disease arose in a cold climate in winter, after the patients affected with a recent clap, were exposed to violent cold in the open air. None of them had ever had any complaint in the eyes before. The discharge from the urethra was evidently diminished or abolished. In the mean while a discharge of a puriform matter of a yellowish green colour, resembling that of a clap, took place from the eyes, with the most excruciating pains, which were rendered unsupportable on the least application of light. The same matter which ran out of the eyes, seemed, as far as it was possible to see by forcing up the eyelid, to be extravasated in the whole anterior chamber of the eye, and, as it were, infiltrated between the lamellas of the cornea transparent. All remedies which were applied proved ineffectual, and perpetual blindness was the consequence.

As cases of this kind may be instructive, I shall transcribe one of them from my Medical Journal. The patient, a young man of a strong dark complexion, of twenty-nine years of age, a captain in the army, was ordered on guard in the month of January, whilst he was afflicted with a violent gonorrhœa. Unfortunately the day was excessively cold,

cold, and he was by duty much exposed to the open air all day and the evening: in the night he found himself at once afflicted in both eyes with the most excruciating pain, and intolerance of the smallest degree of light; which were accompanied next day with a discharge of puriform matter from both eyes. Upon inspection, the albuginea was inflamed, and very much swelled. The physician who was called, applied, besides the common remedies, such as bleedings, purgatives, &c. a fomentation of hemlock. On the third day, upon a closer examination, the cornea was found entirely opaque, and an hypopyon formed; no ulceration appeared. The use of hemlock was ordered to be continued. Some days after, the inflammation and running abated; but the cornea remained opaque, seemed to be very much thickened, and the patient remained perfectly blind. In this patient, I clearly saw the arteries of the cornea transparens, coming from the albuginea, inflamed, and so filled with red blood, as if injected like an anatomical preparation, even so far back as in the fifth week of the disorder.

In none of these three cases were remedies applied by the practitioners to restore the running of the clap, nor was there an incision made into the cornea to discharge the extravasated matter: The only two remedies from which I would expect any efficacious relief in such an ophthalmy, besides the general and topical evacuations by purgatives, leeches, blisters, &c. with the internal and external use of mercury.

I was once inclined to believe, that this kind
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of ophthalmia does perhaps arise from uncleanness, when the patient affected with a clap, or chancres in the genitals, touches those parts, and afterwards, without washing the hands immediately, touches his eyes. I have certainly seen ophthalmies, and venereal ulcers of the eye-lids, nostrils, lips, more than once arising from such carelessness: but in those cases I have never observed an inflammation but in one eye, and it never was so violent as the kind just mentioned; but rather, like the ophthalmies arising from a tainted mass, gave way to the topical application of the blue ointment, which, together with the internal use of mercury, is indeed the sovereign remedy in some ophthalmies.

The chronic venereal ophthalmies arising from a tainted mass, prove in many cases extremely obstinate for weeks and months. They require a regular mercurial course, especially with sublimate if the patient can bear it; repeated purgings; and in some cases, especially if the eye-lid be the affected part, the external use of the mercurial ointment, or what is, according to the observations of Dr Cullen, more preferable, the citrine ointment rubbed down with double the quantity of hog's lard, in order to render it less acrid. Laudanum dropped into the affected eye gives sometimes the most evident relief. Bathing the eye with a weak solution of sublimate four or six times a-day is likewise serviceable.

II. ON VENEREAL DEAFNESS.

I HAVE seen several instances where deafness

and violent pain of the ear were brought on by venereal ulcers affecting the orifice of the Eustachian tube in the fauces. But I have met with one instance, where a perfect deafness was the consequence of a violent gonorrhœa being stopped by the internal use of turpentine. The patient had no chancres, nor any other venereal complaint.

III. ON VENEREAL SORE THROAT.

VENEREAL sore throats, as well as venereal ulcers of the mouth and fauces, should, as I mentioned above, be carefully distinguished from scorbutic ones, or from those originating from saliva rendered acrid by mercury; and more especially from those which, though really venereal in their origin, have now changed their nature, and acquired quite a different character; as we, by continuing the use of mercury, may materially, and perhaps irrecoverably, hurt the patient. Practical judgment will be the only sure guide in that case. Deep ulcers covered with a white lardaceous crust, and confined by a hard elevated border, with a strong redness round about them, will, I think, seldom mislead if they are treated as venereal. Venereal ulcers in the throat are sometimes seated so low down and side-wards, that we do not easily discover them at first sight, and thence we may sometimes be led to mistake the nature of the disorder. An account of the two following cases may perhaps be useful to some young practitioners.

A gentleman of a strong, plethoric constitution, fifty-five years of age, was affected with a sore throat and fever. The physician, after examining his throat and pulse, ordered bleeding, with an antiphlogistic gargle and purge; when the disease not abating, eight days after, another practitioner was called, who repeated bleeding, purging, and ordered a different gargle, from the use of which the patient found himself better. At the expiration of seven weeks, when he felt, as he expressed himself, the disease was not quite gone, I was consulted. After the former prescriptions were shown to me, I examined his throat; and though I could not discover any ulcer, told him I suspected a venereal cause; which he hardly would agree to, relating to me that he had no venereal complaint these many years past, and that since that time he had enjoyed the most perfect state of health. I desired to examine his throat once more; which he readily complied with, though he was one of those persons who with the greatest difficulty can let their throat be examined: with a wax candle in one hand, and depressing the root of the tongue by means of a large spatula as much as possible with the other, I discovered very low down on the right side, a deep but small venereal ulcer, which had escaped my sight at first, and would now have done so if I had not examined the throat with so peculiar a care. Upon my telling him the evident cause of his disorder, my advice was complied with; and after the internal use of mercury for eight days, his sore throat was perfectly gone, and by continuing it a month longer a radical cure obtained.

The other patient was a lady of rank. She had

but a slight difficulty in swallowing since a few days, which being frosty she ascribed it to a cold. I immediately, upon inspection, discovered the cause of the disorder; and as women have always a right to the greatest delicacy and secrecy of a physician, without asking her any questions, I ordered to keep her throat warm, and promised to send her some medicine, which would relieve her in a few days; when the same was afterwards, under another form and pretence, ordered to be continued for a few weeks longer, till I thought her perfectly safe.

Last summer, I was consulted at Paris, by a young gentleman of about 28 years of age, about a sore throat for which he had taken advice and medicines already, for the space of three weeks, without any relief. I told him, that, from the very appearance of his face and eyes, I suspected quite a different cause of his disorder than he and his attendants had hitherto imagined; which indeed was most evidently confirmed by a large venereal ulcer, which upon inspection I found seated very low down behind the velum. He then gave me the following account. That he had been affected with a violent gonorrhœa two years ago when he was at Venice, which for a particular reason he had wished to be removed or stopped as soon as possible; that, for this purpose, he was recommended by a friend of his, to a surgeon who was in possession of an injection which had that infallible effect. That this surgeon complied with his desire, tho' with reluctance; and foretold him, that some time after being cured thus hastily by his injection, the venereal disease would break out in some other

other part of the body ; assuring him that he had seen the same effect from the same remedy, happen in several other patients who applied to him in the same manner he did. That he neglected this caution ; that the running was perfectly stopped in 48 hours ; and that he had never thought more about it, having been perfectly free from venereal as well as any other disorder ever since. This case was to me a very instructive one. First, it shows how long the venereal poison lies sometimes concealed in the mass, without producing any sensible effects : And secondly, it evidently confirms what I have asserted above, that the poison of the gonorrhœa is the very same with that of the syphilis ; and that, if absorbed into the mass, it produces therefore the same effects. But, lastly, it also shows, which I could not have expected *à priori*, that a recent venereal gonorrhœa may sometimes be stopped or retropulsed, without producing swelled testicles, ischury, strictures, or other immediate effects in the mass.

Venereal ulcers of the throat require sometimes, besides a course of mercury, likewise topical applications ; such as an injection or gargle made of a solution of sublimate, mixed according to circumstances with the tincture of mastich, &c. — But if the ulcers are owing to the acrimony of the saliva, they ought to be kept constantly clean, and mercury should be discontinued. If they owe their origin neither to the one nor to the other of the causes just mentioned, but are of that peculiar nature described above under the head of *Venereal Ulcers*, they require, instead of mercury, the use
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of powerful tonic medicines externally as well internally.

IV. ON VENEREAL COMPLAINTS of the SKIN.

CUTANEOUS disorders of a venereal nature, such as venereal tetters, venereal scald-head, venereal leprosy, &c. are often very obstinate. It is in these complaints properly, where the solution of sublimite, given internally, proves often excellent; and I think I have observed, that it often effectually removes the disease of the skin, without removing radically the lues: This at least I assert with regard to colder climates; as to warmer climates, I know certainly many patients who have been radically cured of the syphilis by the sublimite alone.

Besides the internal use of the sublimite, warm baths made with a decoction of bran, in every gallon of which half a drachm of sublimite is to be dissolved, gently rubbing at the same time the affected part, have sometimes proved to me very useful. For more confirmed venereal complaints of the skin, the topical application of a solution of sublimite, the citrine ointment sometimes alone and sometimes with the addition of the saturnine, have succeeded with me in a herpes, tinea, &c. where all other remedies proved ineffectual. The decoctum Lusitanicum, the decoction of the stipites dulcamaræ, of the mezereum root, and especially that of the lobelia syphilitica, deserve, for these as well as other obstinate and inveterate venereal complaints, in my
opi-

opinion, a much greater attention than is usually paid to them. I have seen a most obstinate and inveterate disease of the skin of a venereal nature cured by a solution of turpeth mineral in small doses, where all other remedies failed. Some physicians pretend to have seen great success also from arsenic; but I never tried this latter, nor have I ever a mind to try it.

V. On VENEREAL EXCRESCENCES.

VENEREAL excrescences on the surface of the skin, known by the different names *condylomata*, *figus*, *marisca*, *warts*, *tubercles*, &c. arise either from an original infection, in which case we consider them as a local disease, and prescribe local remedies; or they originate from a tainted mass, which indeed is more frequently the case, and then a full mercurial course will make them disappear, sometimes without any external application. But frequently external remedies are likewise requisite. Caustics have been recommended for that purpose: but I never saw them produce any salutary effects; on the contrary, often very bad ones. Excision has been likewise recommended, and is sometimes necessary; but I have seen several instances when, after these excrescences had been cut out repeatedly, even after a full course of mercurials, they grew again and again, sometimes to a larger size than they were at first. To prevent this regeneration, several remedies have been proposed, of which, in all obstinate cases that

that have come under my observation, I have observed but two or three which were administered with success, after the mafs had been previously perfectly purified. The one consists in mercurial fumigations; the other in the application of pulvis *juniperi sabinæ*, L. either by itself in the form of a powder, or mixed with red precipitate in the form of an ointment. A liquor has been lately proposed by my friend Mr Plenck, which consists of spirit of wine and vinegar each an ounce and an half, corrosive sublimate one drachm, alum, camphire, and cerussa, each half a drachm, under the name *Aqua caustica pro condylomatibus*, and from which, applied twice a-day with a hair-pencil, he affirms to have seen the best effect. I have tried it several times, and found it answer extremely well. In cases where a great number of small warts had sprung up about the genitals, the solution of sublimate in simple water or lime-water I have observed sometimes to succeed perfectly well. If warts have a small basis, and are but few in number, the best remedy is a ligature made tighter every day. I have seen a man with several hundred little warts upon that part of the chin where the beard grows, and understood his disease to be owing to an ill-treated venereal complaint.

VI. On VENEREAL WEAKNESS, or IMPO-
TENCY.

THIS complaint, though not dangerous, is very alarming, and renders the mind of the patient extremely uneasy. I have repeatedly observed it; but in a particular manner in one patient, who several months before had been affected with a violent clap; of which at last he was cured, after having undergone a tedious and very improper treatment. The only remaining symptom was now a total inability and want of desire of venery, which rendered him extremely low-spirited. On consulting me, I judged the complaint to proceed from the venereal poison lurking in the body, and prescribed him a mercurial course, and afterwards some tonic medicines, with two tea-spoonfuls of Hoffman's anodoyne liquor morning and evening. He was likewise ordered to wash the scrotum and spermatic cord twice a-day with a table-spoonful of the same liquor mixed with some water: in three weeks time he had sufficient reason to be as high-spirited as ever.

VII. On VENEREAL PAINS, SPASMS, &c.

FIXED or wandering pains arising in different parts of the body, are generally ascribed, by all patients who were formerly affected with the lues, to the remains of the venereal poison in the mass. This is indeed sometimes the case; but it ought
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to be observed, that those pains, so generally ascribed to the venereal poison, are very often owing to very different causes, which, if not properly distinguished, we shall find ourselves frequently disappointed in the effects of the remedies prescribed.

Pains similar to venereal ones are often the effects of the improper use of mercury. These cases ought to be carefully distinguished in practice; because, if the venereal disease has not been radically cured, and the pains arise from a half-cured lues, the use of mercury will be necessary to complete the cure (though the patients will often be of a contrary opinion, considering the length of time, and quantity of mercury they have already taken); whereas, if the venereal virus has been radically cured, the use of mercury will prove evidently hurtful. I know patients who, having made use of mercury repeatedly in their younger days for several venereal complaints, find themselves now, whenever they take the least quantity of mercury, constantly affected with the most violent rheumatic pains in different parts of the body. Authors who have mentioned this latter disease generally ascribe it to the mercury lodged in the bones; nay, there are even examples recorded in medical history, where mercury had been found, after the death of such patients, collected in globules in different parts of the body, especially in the bones and their cavities. Whatever credit may be given or denied to those assertions, it is certain that we may generally, and

and sometimes pretty easily, cure those patients by a proper regimen, warm baths with frictions, and by administering to them at the same time internally large doses of proper tonic medicines either alone or united with antimonials. But if those pains, instead of being of the chronic kind, arise from a sudden check of perspiration during a mercurial course, the use of tonic medicines would be improper; in several desperate cases of this kind, where the body seemed as if it was affected with a general spasm or tetanus, I have found, besides the warm bath, especially the vapour-bath, the sulphur of antimony, united with the inspissated juice of the *conium maculatum*, L. known under the name of extract of hemlock, a most efficacious remedy, given to the quantity of fifteen grains of each a-day.—Dover's powder, with a proper regimen, proves sometimes in this case, as well as in rheumatism, a very serviceable medicine.

VIII. *On Venereal Complaints of the BONES.*

THE bones are seldom affected by the venereal poison, but in a confirmed or neglected lues. I have seen, however, one instance where the patient being affected with a chancre of the glans was attacked the fifth day after with a considerable swelling in the lower part of the ulna.—In these cases, the longer the disease is neglected, the more difficult and tedious is the cure; and of all others
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the caries, or ulceration of the external surface, and corruption of the internal cavity, are the most disagreeable and tedious.

In all cases of ulcerated bones we ought to remember, that they cannot be cured until the poison is totally eradicated from the mass. Topical applications seem to have very little effect: though the essential oil of *sassafras* has been recommended by some; and *Plenck* recommends a lotion compounded of *essentia mastichina*, corrosive sublimate, and honey of roses. Besides this, he directs the internal use of the Peruvian bark, and mercury mixed with *asafoetida*, together with a decoction of *sarsaparilla*, united with *mezerium* and *cicuta*: by these, he says, that he cured several persons of the disorders just mentioned.

Venereal exostoses, and especially those in the middle of the tibia, sternum, and tophuses in the bones of the head, will sometimes, especially at night, give the most excruciating pain. In these cases, I have observed no good effect from any topical application whatever. Here large and continued doses of opium, along with some of the saline mercurial preparations, are sometimes attended with the most salutary consequences; but what has been lately asserted of curing these, and other obstinate venereal complaints, by the use of opium alone, I leave to the more credulous to believe.

Of the extraordinary fragility of the bones, mentioned by some writers as proceeding from a
venereal

venereal cause, I have never seen any instance; though it may not be improper to mention one case which, I think, may be referred to this head: A man broke his tibia by a fall; but after the best treatment of the fracture, and being for twelve weeks confined, upon examination no callus was formed, and the broken bone remained nearly as loose as at first. After a close inquiry and consultation, the venereal poison was suspected, and a course of mercury prescribed; which succeeded so well, that in a few months after the patient was perfectly cured.

C H A P. XVII.

On VENEREAL COMPLAINTS disguised, such as Consumption, Rheumatism, Fevers, &c.

SOME persons who have been formerly affected with venereal complaints, of which they have been apparently cured several months, nay sometimes several years, afterwards grow emaciated, begin to cough, and are affected with a hectic fever, and other symptoms which accompany a consumption of the lungs, or a phthisis pulmonalis. These complaints are generally ascribed to some other causes, and medicines ordered for the most part without any success. Sometimes the disorder is also ascribed to the too previous use of mercury in too large quantities. But I have seen several instances where a hectic fever with cough, and sometimes even with a puriform expectoration, far from owing its origin to an ulceration of the lungs, arose from a latent venereal poison, without any other venereal symptom in the body. The same has been observed by others. Mr Brambilla, first surgeon of the present Emperor of Germany, in his treatise on the Phlegmon, relates a case, which shows such a striking instance of the kind, that I shall transcribe it here. An
electuary,

electuary, he says, was prescribed for a consumptive man, who was in a desperate situation. By a mistake of the apothecary, the electuary was given to a venereal patient to rub himself with, and the mercurial ointment, instead of the electuary, was sent to the consumptive patient to take it internally. The consumptive man, knowing nothing of the mistake, took a quantity of the ointment, about the bigness of a nutmeg, two or three times a-day, and was effectually cured of his disorder, to the no small surprise of his physician, who learned by chance from the apothecary the mistake that had happened. This mistake was certainly a very happy one for the patient; and, though it might be doubted whether the consumption proceeded from a venereal cause, proves however evidently that it yielded perfectly to mercury. I had several patients of this kind whom I perfectly cured of their consumption, by administering to them nothing but a course of mercury.

Agues, or intermittent fevers, have also been observed by Dr Werlhof and others, either to be produced by the venereal virus, or concomitant with the venereal disease; and mercury, combined with the bark, has been found useful in those cases. Perhaps some of the fevers cured by Dr Lyson, with the calomel, have been of that kind.

Flying *rheumatic pains*, violent *head-achs*, and *pain in the hip*, sometimes originate from this source. The warm bath, with some saline preparations of mercury, with the decoction of the

stipites dulcamaræ, I have seen cure disorders of this kind, which resisted every other medicine. Mercury, with the decoction of daphnemezereum, or of daphne laureola, L. has also been recommended as a very efficacious medicine for those complaints.

C H A P.

C H A P. XVIII.

VENEREAL COMPLAINTS *incurable by*
MERCURY.

I HAVE already spoken so fully concerning the nature and cure of these complaints under the different heads of *Venereal Ulcers, Exulcerated Bubbles, Venereal Sore Throat, Diseases of the Skin, Venereal Pains, Caries, &c.* that very little remains to be added here.

I must only observe, that I have found most, if not all, of these complaints admit of great relief, or even of a radical cure; and that the great point for accomplishing this desirable end, lies less in these complaints themselves, than in an exact knowledge of their nature. This certainly is sometimes a much nicer point of practical knowledge than is generally imagined. The great object is, to distinguish exactly whether those ulcers, caries, cutaneous eruptions, or pains, &c. owe their origin to a latent venereal poison, or whether they are the effects of mercury; or, what is perhaps of the greatest consequence, whether, from having been originally owing to the venereal virus, they now, by time or other circumstances with which we are not yet sufficiently acquainted, have changed their nature. In which case, instead of yielding to the power of mercury, they

they seem to be not only in every degree exacerbated by that remedy; but likewise, if its use be imprudently insisted on, will at last prove fatal to the patient. In proof of this, I have adduced, under the above-mentioned heads, several striking, and, as I think, convincing instances. And those of my readers who are particularly interested in this subject may find a good many more in Mr Fabre's Supplement to his Treatise on the Venereal Disease, printed at Paris. I now proceed to the consideration of those medicines which I have hitherto found most efficacious in removing these dreadful and obstinate complaints.

To distinguish complaints arising from mercury, great judgment is often required. I have seen patients who complained of rheumatic pains, pains of the bones, headaches, spasms in different parts, and trembling of the extremities, &c. owing, as they thought, to the enormous quantity of mercury they had taken; whom, however, I have cured, after a careful inquiry, by giving them more mercury; because I was convinced that their present complaints originated from the improper administration of mercury, where it was evacuated from the body by stool, salivation, or immoderate sweats, as fast as it was administered; and thereby, though taken for a great length of time, and in a large quantity, could never exert its proper effect upon the poison lodged in the body. As soon, therefore, as we are assured that the disease is not owing to the venereal virus, or at least will not yield to mercury, other medicines ought to be administered.

ffered. Instead of following the general routine of practice, to give new mercurial preparations, after two or more of them have been already tried in vain, we should prescribe to our patients, as I have recommended before in several places (besides a nourishing diet, country air, &c.) tonics or strengthening medicines. Under this class I principally reckon antimonials, and, more especially in the cases alluded to, chalybeates. But, when speaking of the use of those medicines, I would not be understood to prescribe them only in the quantity of a few grains a-day, but in much larger doses than they are usually given. The preparations I generally make use of are the crude antimony, or the sulphur of antimony; the *æthiops martialis*, or the *vinum chalybeatum*, and more especially a combination of iron with vitriolic ether. Of these I administer such doses as the constitution of the patient will bear, either alone, or united, according to circumstances, with the decoction of *sarsaparilla*, the Peruvian bark, or the extract of walnuts. The sulphur of antimony, united with the extract of hemlock, will be sometimes very serviceable, alone or with the use of warm baths, and a decoction of *sarsaparilla* with the *mezereum* root. Sometimes the cold bath, and especially bathing in the sea, will greatly contribute to the effect of the above medicines; and if the disease be obstinate, we should not leave untried any of those remedies recommended in Chap. XIV.

From the *decoctum Lusitanicum* I have seen, in several instances, evidently good effects. But of all the remedies hitherto recommended for venereal

real

real complaints incurable by mercury, I have seen none equal in its effects to a decoction made use of by Dr Paullini. With this decoction, the most malignant and obstinate ulcers, cutaneous disorders, tophus, caries, pains of the bones and other parts of the body, which resisted the power of all other medicines prescribed by different physicians in different climates, have been effectually cured, and, what is still more remarkable, for the most part, in a very short space of time. But it is much to be regretted that this remedy cannot become of general use, because nobody could hitherto ever prevail upon the Doctor to make it public.

C H A P.

C H A P. XIX.

OBSERVATIONS *on some dangerous or unhappy prejudices generally prevailing about the VENEREAL DISEASE.*

IT is an opinion imbibed by some patients, that the venereal poison, when once absorbed into the system, can by no means be totally eradicated; consequently they believe, that a person who is once thoroughly infected, can never look upon himself as radically cured. This opinion, besides its absurdity, renders those who entertain it very unhappy. I have seen frequent instances, in the female sex especially, where such patients led a most miserable and melancholy life, notwithstanding every thing the physician could say to the contrary. The least shadow of a head-ach, a rheumatic pain, or the smallest pimple upon the skin, were by such persons accounted certain proofs of the poison lurking in the mass, and about to produce the most direful effects. These patients are real objects of compassion: we ought to bestow some time for inquiry, and pay the most careful attention towards them; for indeed we can hardly think of a greater degree of misery than to be perpetually haunted with such an imagination.

imagination. If, therefore, after our most careful inquiry, we find no symptoms of a venereal kind remaining, we should endeavour to correct their prejudice, by setting before them the example of others of their acquaintance, or, if circumstances admit, of those of our own, who have been affected as much as themselves, or perhaps much more, and who now, perhaps, after a great number of years, enjoy the most perfect state of health, are married, and have healthy and fine children.

The same attention we ought to pay to those who imagine, that if mercury is once taken for the cure of the lues, it will not so effectually cure it a second time. These prejudices are most frequently found among the women, though sometimes also men of a melancholic constitution will be influenced by them: but there is another prejudice of which I am now to speak, which is not only absurd, but criminal, and deserves a most severe punishment from the magistrate wherever it can be proved. It exists only among some young men of a loose character, and dissolute and brutal manner of thinking. With these wretches it is an opinion, that the best method to get rid of a clap is coition with one or more healthy women; and in this manner I have seen venereal complaints propagated, in the course of a few days, to ten or twelve healthy persons, who had the misfortune to fall in with those wretches, or with the objects of their brutality and cruelty. The absurdity of this

this notion is evident to every person of common sense, who has the least knowledge of the nature and seat of the disease; and where this practice arises merely from prejudice, the slightest information will be sufficient to remove it. But it is to be feared, that the cause may frequently lie deeper in the heart of these persons; and that this abominable practice proceeds from malignity, or from a mean and low disposition to revenge themselves upon innocent persons, because in their imprudence or drunkenness they themselves had become the dupes of others.

F I N I S.

This notion is evident to every person of common sense, who has the least knowledge of the nature and extent of the disease; and where this practice is not strictly from prejudice, the slightest information will be sufficient to remove it. It is to be feared, that the cause may frequently be ascribed to the heat of the season; and that this accountable practice proceeds from malignity, or a mean and low disposition to revenge themselves upon innocent persons, because in their impudence or dishonesty they themselves had become the dupes of others.







