

Observations upon the new opinions of John Hunter in his late treatise on the venereal disease.

Contributors

Foot, Jesse, 1744-1826.
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Publication/Creation

London : T. Beckett, 1786-87.

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OBSERVATIONS

UPON THE

NEW OPINIONS

OF

JOHN HUNTER,

IN HIS LATE TREATISE

ON THE

VENEREAL DISEASE,

Ending with the Subject of Gonorrhœa, and
Second Part of his Work.

TO BE CONTINUED.

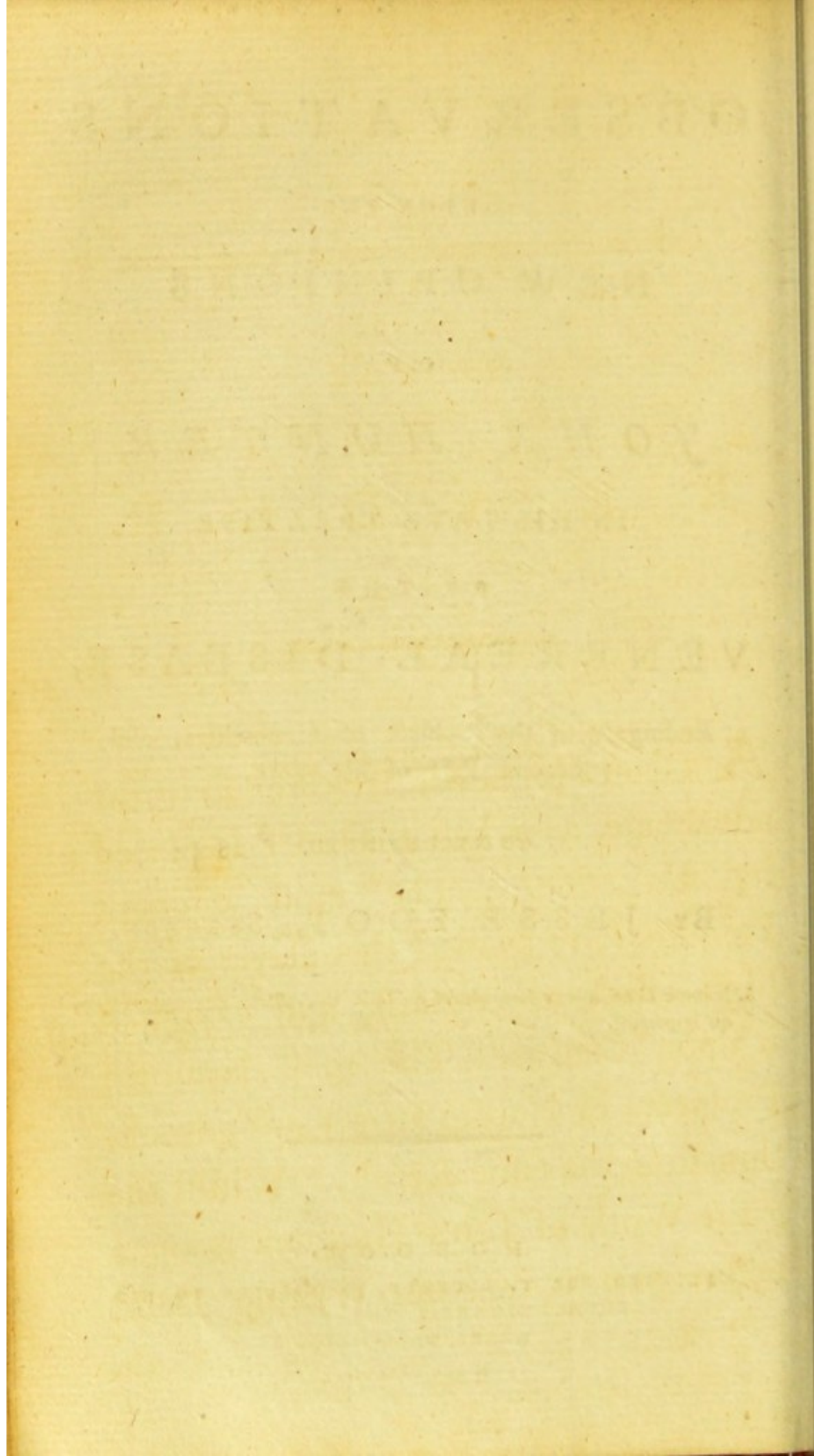
By JESSÉ FOOT, SURGEON.

L'homme aime mieux être admiré qu'utile, merveilleux que vrai, difficile
qu'important. ABBE FONTANA, Tom. II. P. 63.

L O N D O N :

PRINTED FOR T. BECKETT, BOOKSELLER TO HIS
ROYAL HIGHNESS THE PRINCE OF
WALES, PALL-MALL.

M DCC LXXXVI.



TO THE
R E A D E R.

A Giant is never seen to so great advantage, as when a Dwarf is placed by his side. The most eminent Painters have availed themselves of the high effect of contrast, and expressed it upon Canvas. The most beautiful Prospects in Nature attract our admiration from the same Result. Whilst the great Work of JOHN HUNTER is open before you upon your Writing Desk,
I do

do me the honour to take this in your
Hand.

To those who have not already
purchased that great Work, I have to
observe, that I have faithfully given,
as far as I have already gone, the Ma-
terial Text of the Original upon which
my Comment is formed.

And to all my Readers I promise, to
persist in my Review of the whole of
his Treatise at my first leisure Hours.

*Dean Street, Sobo, }
June 9th, 1786. }*

OBSER.

(8)

OBSERVATIONS, &c:

IT is the duty of every professional man to combat such opinions in science, as are either not founded in truth, or would be pernicious in practice. Speculative innovations which tend more to bewilder than to inform, and which are proposed merely to obtain a name are doubtless worthy of reprehension.

I therefore shall assert my right of offering to the public my objections to the new opinions of John Hunter in his late Treatise on the Venereal Disease. Because I cannot permit, as an individual in the profession of Surgery, that doctrines I find extravagant should pass at least without remark, or that they should be received without my protest.

Throughout my objections, I wish to be understood, that it is the theory of the Professor that stands in my way, and not the Professor himself. No intention can be further from me than personal attack. If I sting his theory, I mean to leave the man harmless.

I consider myself in the situation of a counsel at the bar, in a cause at issue, who, after he has heard, with attentive patience, the case of his opponent, rises with an humble hope, but with a diffidence that alarms him, to rescue established principles from unaccountable innovations, and to protect truth from the violence of perversion. The Professor has had my patient reading; and the attention I have paid was arrested by the most implicit submission; for although I have only the honour of his acquaintance, as we have met in the way of our profession, although, unfortunately, when I have had recourse to surgical aid, the Professor has not been always the person whose opinion I have invoked; yet who is there among us that delights in theory or practice, but must know the eminent situation he stands in? who can talk of Anatomical Improvements, where his name is not mentioned with honour? who has not

heard

heard of his experimental excellence? who does not applaud him to the very Echo for his knowledge in Comparative Anatomy? I wish my panegyrick could go further, but here it must stop.

Along time since we have heard of this elaborate work. A work, as it was formerly announced in the public prints*, that was to set criticism at defiance, and so exalted, in points of improvement, above others, as to throw them at the most humble distance. The prophecy that was foretold, is at length come to light, and the Professor is to be the instrument in Venereal Redemption; his production has scattered our fears to to the wind. The Venereal Disease will no longer be dreadful.

Considering myself now in full possession of the attention of my readers, I shall proceed with my objections; but not without begging their patience, which I do the more chearfully, as I know that they feel towards the Professor as I do, not the least wearied out by unintelligible abstruseness, or

* Vide paragraphs in the Spring 1785.

contrary assertions. But at the same time, it may be right to remark, that the length of the Professor's work, however we may be delighted with his talents, was not absolutely necessary; since, notwithstanding the clearness of his head, and his extensive judgment, he has devoted many of its pages to mortifying confessions of ineffectual research.

Nullum numen abest si sit prudentia, said Juvenal. But how came the Professor so much off his guard, as not to retain that propitious guardian in his service? Was there not one of his friends at his elbow, to put him in mind of such necessary precaution? No one to lay before him the danger of embarking as an author? No one to tell him that the highest point of honour is the pinnacle of danger, from which he may topple with precipitation? The opportunities in his early life that Dr. Hunter's dissecting room afforded would have made a dunce useful; how then could they fail to make the Professor a proficient?—Why did he mistake education for genius, why the mechanism of Anatomy for Chirurgical superiority?

I hope

I hope the Professor will take this in good part, and that he is disposed to put on as chearful a countenance as I am—As his theory goes only to sympathy in pain, I wish to be indulged to sympathise with him in pleasure.

The professor complains that his opinions have made their way to the world under other names. I wish to know who they are that entertain them. My reason may be better guessed, than told. But let us proceed to examine the Professor's budget of new opinions beginning with his *Introduction*.

I. *On Sympathy.*

This he tells us is one of his *new opinions*, and explains it as applicable to those affections from Venereal Poison which have been hitherto understood to be inflammation in any particular part, arising from the translation of Venereal poison to that part.

The Professor tells us, “ that the swelling
 “ of the Testicle in consequence of a go-
 “ norrhœa

“ norrhœa is produced from partial sympathy ; and that the symptomatic fever is an
 “ universal sympathy arising from the partial
 “ one. A hectic fever is an universal sympathy
 “ with a local disease which the constitution
 “ is not able to overcome. This takes
 “ place oftener and in greater degree in
 “ the *Lues Venerea*, than in any other form
 “ of the disease.” He goes on to subdivide
 his sympathies, through which I shall not follow
 him : I shall content myself with carrying
 along with me the spirit of his theory, and,
 by applying it to practice as he applies it, examine
 how far his arguments hold, and what the
 advantages are, that may be derived from
 this new arrangement ; whether the particular
 distinctions which he makes be in terms
 only ; whether they be evident improvements
 worthy of general adoption ; or whether they
 be not in many instances calculated to mis-
 lead.

II. *Of Diseas'd Actions being incompatible with each other.*

III. *Of the Powers of different Parts of the Body from situation, from structure.*

IV. *Parts susceptible of Diseases.*

V. *Inflammation.*

VI. *Mortification.*

All this is compressed within eight pages, and I thank the professor for this brief. I shall not fail of availing myself of this generous advantage, whenever he brings either of these leading principles into play: I shall watch how they are applied, applaud them when I can, condemn them when I must; being nevertheless dispos'd where I find them perfectly innocent not to rouse them into action at all.

Part. I. Chap. I. Page 9.

Of the Venereal Poison.

The Venereal Disease, the Professor calls
“ a morbid poison to distinguish it from other
“ poisons, animal, vegetable, and mineral.”

I call it an animal poison peculiar to man.
To call it by any other name would be admitting
that all other animal poisons were possessed of
the same properties. Now as they all differ
in their action and effect, I see no reason for
calling this a “ *morbid*” and not an animal
poison.

I. *Of the first Origin of the Poison.*

The Professor shrinks from the enquiry, in-
to the origin of the Venereal Disease, and
refers us to Astruc, and to an anonymous au-
thor. The fact is, and my readers shall be
told it, that the authors who flourished at the
first appearance of this disease in Europe, have
described the first symptoms, not conformable

to

to the theory of the Professor, as I shall show hereafter.

The first Author that can be traced I believe on this Disease, was Nicolaus Leonicensus of Vicentia, *Anno* 1497. And no less than thirty-three authors wrote on the same Disease after him, to the time of Johannes Baptista Montanus of Verona. Now all these thirty-three authors say not a word about a gonorrhœa, or any other disease of the Urethra. Johannes Baptista Montanus first observed and cured a gonorrhœa *Anno* 1550.

The above account must be true, for who can suppose that thirty-three authors, eager as they were at that time, to describe this new disease in all its conditions, would have been silent upon so important a symptom as gonorrhœa, if any such had then existed? The Venetian Collection furnishes us with this information.

Of the origin of the Venereal Disease also my readers may find much information and argument in No. 357 and 365 of the Philosophic Transactions.

Page 14, &c. *Of the Poison being the same in Gonorrhœa and in Chancre.*

The Professor in this section, enquires into the manner by which the Venereal Disease was communicated to the inhabitants of the Islands in the south seas.

This enquiry he introduces to prove that the poison is the same in gonorrhœa and chancre. I shall be glad to be informed by the Professor who ever doubted but that it was the same? I entirely agree with him that it is. But if he imagines that his appeal to the relation, given us by Wallis and Cook, confirms it, I totally differ from him. Nothing that either Wallis or Cook has said upon the subject, can give authority to the Professor to draw such a conclusion. Wallis proves that he did not introduce the disease there*. Cook found it there, but makes no mention of gonorrhœa, chancre, or bubo. “He presumed,

* Hawksworth's Voyages, Octavo Edition, Vol. I.
P. 323, 324.

“ that they had found a specific for it, as he
 “ saw some on whom the disease had made a
 “ great progress. And one who went away
 “ infected, returned after a short time in per-
 “ fect health.” Again he says, “ But some
 “ had fallen victims to its rage, abandoned by
 “ their nearest relations, their hair and their
 “ nails fell off, and their flesh rotted from
 “ their bones *.” He says again in his last
 voyage, particularly describing their condi-
 tions. “ Broad ulcers with thick white edges
 “ that were shocking to look at. And yet he
 “ met with some that seemed to be cured of
 “ it, and others in a fair way of being
 “ cured; but this was not effected with-
 “ out the loss of the nose, or the best part of
 “ it †.”

Afterwards he tells us, “ that the disease is
 “ now almost universal; for this they seem
 “ to have no effectual remedy. They allow
 “ that in a few cases, nature, without the
 “ assistance of a physician, exterminates the
 “ poison, and perfect recovery is produced;

* Hawksworth's Voyages, Octavo Edition, Vol. III.
p. 82, 83.

† Cook's Northern Voyage, Vol. I. p. 382. Dublin
Edition.

“ they also say if a man is infected with it,
 “ he will often communicate it to others in
 “ the same house by feeding out of the same
 “ utensils or handling them *”.

The Professor asserts that Cook has described the disease to be in “ every form †,” as he has given us no reference, I shall be glad to know in what part of his voyage he has made such a declaration.

Now how do these reports apply at all to the purpose in point, and for which the Professor designs them? It appears that the Venereal symptoms mentioned by Cook, are symptoms of the confirmed Lues Venerea; and as Cook says nothing of gonorrhœa, the conclusions of the Professor can be only presumptive, which may as well be formed out of a dream, as from this appeal.

To prove that gonorrhœa and chancre arise from the same poison, he has made a voyage to the South Seas. As I said before, no one ever doubted the fact. But no such inference

* Cook's Voyage, Vol. II, p. 148. Dublin Edition.

† Vide Page 14.

is to be drawn from any of the accounts of the state of the disease, as it was found in the islands of the South Seas. Not a word is said of gonorrhœa, and it is at least worthy of remark, and I hope my readers will particularly attend to it, that this silence concerning a gonorrhœa in thirty-three of the authors, when it was originally imported into Europe, proves it more than probable, that gonorrhœa, and chancre may arise out of lues venerea, as well as lues venerea out of gonorrhœa and chancre: or how came gonorrhœa to be noticed fifty-three years after all other symptoms?

What had, I should be glad to know, the imperfect description of a disease in general given by men unacquainted with nice venereal distinctions to do with the Professor's case in point, or what was there in the disease on the other side of the equator, that could not be better compared at home?

Page 17. *Of the Causes of the Poisonous Quality. Fermentation. Action.*

The Professor examines very abstrusely into the cause, and the action of Venereal Poison. As it is too obvious that a specific irritation belongs to venereal virus, I shall say no more upon the subject here, but wait to see if he applies his theoretic ideas to more practical success.

Page 23. *Of the different Forms of the Disease.*

The Professor says, the Venereal Disease affects the body two ways, local and constitutional. The local are gonorrhœa and chancre, the constitutional, blotches, ulcers, thickened periosteum and bones. There is also an intermediate way, which he says is the bubo. All these are more violent or favourable, rapid or slow in some than in others.

Page 26. *Of the Lues Venerea being
the Cause of other Diseases.*

The Professor observes, that the lues venerea rouses into action, scrofula, cancer, and other diseases, where there is a predisposing cause in the constitution; and with much modesty concludes, “ that it is impossible to
“ take notice of every variety of symptoms;
“ but that if his general principles be just,
“ they will help to explain most of the singularities of the disease.”

If the Professor had throughout his work measured the truth of his new opinions by the uniformity they should have produced, if his above observation had been his rule of right, we should have had no occasion to remark the contrary effects, and all have received profit, where we have met with disappointment.

Page 29. *Of Gonorrhœa.*

At length we are arrived at the immediate subject of gonorrhœa, and I congratulate my readers upon it ; for upon this theme, ingenious as the Professor is allowed to be, I think he will not have the opportunity of flourishing beyond all comparison.

He tells us, and very properly, “ that
 “ when an irritating matter of any kind is
 “ applied to a secreting surface, it encreases
 “ that secretion.” But he tells us also, but
 not with the same propriety, “ that this ir-
 “ ritating matter changes the secretion, which
 “ in the present disease is pus.”

The Professor says, that “ until about the
 “ year 1753, it was generally supposed that
 “ the matter from the Urethra in a gonorrhœa
 “ arose from an ulcer or ulcers in that pas-
 “ sage ; but from observation it was then
 “ proved that this was not the case.” I be-
 lieve with the Professor, that it is now uni-
 versally understood that ulcers in the Urethra
 do not prevail at least in a recent gonorrhœa ;

or in other words, that the discharge, called by the Professor pus, is not produced from ulcers. This last observation of the Professor has afforded him an opportunity of furnishing us with the historick fountain from whence he drew this wonderful store of information.

A little before the above date, Dr. Hunter upon opening the thorax of a child, found in the cavity a large quantity of pus loose; with the surfaces of the lungs and plura furred over with a more solid substance similar to coagulable lymph; on removing this from those surfaces they were found entire. Mr. Sharp was present, who soon after published his Critical Enquiry, in which he introduced what the Professor calls this fact, “that matter may be formed without the breach of substance.” The Professor proceeds further to elucidate this subject, but as I think rather out of humour and somewhat off his guard, I shall drop it, having here already set down what is necessary for my purpose, and proceed to examine whether the discharge from the Urethra in a gonorrhœa be pus, or increased mucus from irritation? For here I mean to make a considerable stand against

the Professor, and to call to my aid every authority that I can.

Whoever has considered what was the cause of pus, uniformly agrees that it must arise necessarily out of a solution of the parts where that pus was formed. Now as no ulcer is found in a recent gonorrhœa, as no destruction of the parts are offered in Vindication of so uncommon an assertion, that the discharge from the urethra is pus; why has the Professor so roundly given this secreted fluid the unqualified appellation of pus? The definition of the word will not admit its application here, and the definition of the discharge proves that fact. A gonorrhœa may appear in six hours after infection, or it may be six weeks, so the Professor admits; but no person ever felt irritation in the urethra without looking for, and expecting at the same time to see discharge. The former is seldom present unattended by the latter.

Does our observation upon this, answer to the idea of pus? If without any infectious impu-
tation, what the professor calls a simple gonorrhœa makes its appearance, and if, it has followed almost immediate connection, here

more discharge is instantaneously produced from less irritation and no virus—What was the process to form this pus? Where is the loss of substance? From whence does such a deluge of fluid draw its source? Where was the previous inflammation? The fever? No, says he, “when an irritating matter of any kind is applied to a secreting surface, it increases that secretion and changes it from its natural state (whatever that be) to some other which in the present disease is pus.” but in the simple gonorrhœa, unfortunately for the Professor, no irritating matter was applied that either he, or I know of, for I will take upon myself to answer for him in this instance, yet the discharge appears to be the same; for who at sight can make the distinction?

If the Professor had expressed himself somewhat after the following manner, for I would not differ with him about the mere word, “Irritation upon the secreting surface of the urethra may produce discharge without breach of substance; this ought to be called increased mucus from an irritating cause; but as I shall be often under the necessity of using this compound expression, and as I am at a loss for a word that expresses its full

“ meaning, I shall use the word pus ; but at the
 “ same time, I beg to be understood, that the
 “ word pus, is not to be conceived in this in-
 “ stance in its general, but in the abstracted sense
 “ that I have now given to it by this explana-
 “ tion.” This would have satisfied me, but no-
 thing less shall satisfy me ; I shall continue to re-
 fuse my consent to the Professor’s opinion, and
 although I pretend to no uncommon sagacity,
 although I have not made mankind my study
 with that zealous and unremitting ardour that
 the pious anchorite performs his duties in reli-
 gion, yet I know why the Professor persists to
 call this secreted fluid pus ; and my readers shall
 know it, because Mr. Pott says it is not pus. I
 shall content myself with flinging the weight
 of his authority into my scale, and then leave
 it to my readers to determine which of us kicks
 the beam.

“ These two fluids, pus and mucus, which
 “ have been so frequently confounded together,
 “ do really differ so widely from each other in
 “ their nature, constitution, sources, purposes,
 “ and effects, that to distinguish them proper-
 “ ly, and to point out the true character of
 “ each, seems to be a matter of much import-
 “ ance :

ance: it would carry me too wide from my present purpose to attempt it in this place, and therefore I shall only just mention what may serve merely to illustrate that.

“ If I conceive rightly of this affair, mucus, considered in a general sense, is the effect of a natural secretion made by glands, membranes, or other bodies appointed for that purpose, and is so far from being originally the consequence of disease, that, in a due quantity, it is absolutely necessary for several very important purposes, in the animal œconomy; which purposes, when this fluid is deficient, must be ill-executed, and some kind of disease or defect follow: whoever will reflect upon the uses of it in the intestines, joints, sheaths, or capsulæ of the tendons, in the sinuses of the skull serving the purposes of speech, in the cavity of the nose, where the olfactory nerves do their duty, in the prostate gland, larynx, trachea, urethra, and vagina, will be easily convinced of the truth of this assertion, both with regard to its natural uses in a healthy state and proper quantity, and the share it frequently has in the production of diseases, when it is either vitiated or redundant.

“ Pus,

“ Pus, or matter, is certainly no natural
 “ secretion; supperation, though it is an act
 “ of nature when some parts of the body have
 “ been forcibly divided from each other, is
 “ nevertheless to be regarded as the effect of
 “ violence and destruction, at least of division;
 “ for, without entering minutely into the
 “ origin or nature of it, I believe I may ven-
 “ ture to affirm, that the dissolution of some
 “ of the solid particles of broken cappillary
 “ vessels, and a mixture of some part of the
 “ juices which should circulate through them,
 “ make a necessary part of its production;
 “ however constant its appearance may be in
 “ the progress toward healing a wound, or
 “ sore, yet it never is produced, even in the
 “ smallest quantity, without some degree of
 “ erosion, some breach in the natural structure
 “ of the parts; and when such breach is heal-
 “ ed the discharge necessarily ceases.

“ On the contrary, mucus may by irrita-
 “ tion, relaxation, or defluxion, on its secre-
 “ ting or containing parts or organs, be in-
 “ creased to a quantity far beyond what is
 “ necessary or useful, and produce thereby a
 “ disease in parts where there is not the least
 “ degree of solution of continuity, as in the
 “ cases

“ cases of tenesmus stone in the bladder, fluor
 “ albus, and simple gleet from the urethra ;
 “ as also in that kind of defluxion on the nose
 “ and fauces, producing a catarrh, and in the
 “ immediate effect of all sternutatories.

“ Other differences between the nature and
 “ properties of the two fluids might be men-
 “ tioned; but if these already cited are just,
 “ they will be sufficient to evince the impro-
 “ priety of confounding them together, either
 “ with regard to theory or practice.

“ Nor is this mistake of discoloured mucus
 “ for matter confined to the lachrymal sac
 “ only ; the two circumstances of pain, and
 “ yellow colour, having in almost all times
 “ produced the same misconception in the
 “ virulent gonorrhœa of both sexes : this has
 “ been called pus, and being said to proceed
 “ from ulcerations in the urethra and vagina,
 “ though the repeated testimony of those who
 “ have, immediately after death, examined
 “ the parts of persons so diseased, has often
 “ been produced to the contrary, and though
 “ the discharge itself, when properly examined
 “ will always prove the contrary: inflamma-
 “ tion and irritation of the membranous linings
 of

“ of the urethra, and vagina, will fully ac-
 “ count for all the appearances in this disease
 “ in which there is neither matter, nor ulcer,
 “ nor abscess: whoever will attend to the dis-
 “ charge made from a purulent ulcer, will
 “ find it widely different from that which
 “ issues from either of the above parts in the
 “ gonorrhœa.” *

So much for this question, which I cannot quit without expressing my grateful thanks to the author, whose opinion I have just borrowed, for the great information I have received from his works in surgery. His lively imagination, deep penetration, enlightened understanding, and great experience have raised him above my panegyrick; his skill in surgery will be long remembered; “ he has not only lengthened but gladdened life” †.

Page 31. *Of the Time between the Ap-
 plication and Effect.*

The Professor examines into the different distances in time, for gonorrhœa to make its

* Vide Pott on Fistula Lacrymalis, p. 313.

† Johnson.

appearance after infection; and, in order that there may be scope enough, he grants a latitude from six hours to six weeks. This I think is allowing a generous come off, both for the patient as well as for his surgeon; and it is also well calculated to make the position unexceptionable to the opinion of every man who thinks for himself. How true it is, that the effect is sometimes six weeks after the application I will not contend, I cannot help my doubts. But I never have yet heard of or seen, as he has, that the inflammatory state took place before the discharge for a considerable time. The Professor would have cause to exult, if it were the case; for upon that principle alone his theory is built. If the inflammatory state did take place for a considerable time before the suppurative, that would be a satisfactory reason for his calling the discharge pus. But with his leave in such an instance only.

Page 32. *Of the Difficulty of distinguishing the virulent from the simple Gonorrhœa.*

This section is so replete with positions of all sorts, and of all times, so cramed with dis-

E

charges

charges that may be produced from every possible cause, without a single clew to aid us in distinguishing one sort from another, that it seems to be written for the purpose of confounding all distinctions. And I certainly should have passed it over, had there not been found in it, such materials as clearly assure me, that the Professor's singularities have not even system for their basis.

I congratulate my readers that we recognise here the old word virus, as I feared that the Professor had banished it out of his venereal vocabulary. Through all his distinctions of simple, and virulent gonorrhœa, I cannot follow him. A simple gonorrhœa, and here we agree, may or may not fall to the lot of a man who never had any venereal complaint, or any chance of infection.

But, there is a sentence in this curious section that perhaps may excite the curiosity of my readers, and be worth my observation, “ In
 “ this complaint a discharge, and even pain,
 “ attacks the urethra, and strange sensations
 “ are every now and then felt in these parts,
 “ which is either a return of the symptoms of
 “ the venereal disease without virus, may arise,
 “ as

“ as it were spontaneously, or may be a consequence of some other disease.” I shall not dispute with the Professor upon grammar for many delicate reasons ; and I do assure him, I will never wilfully misconstrue any of his ideas ; I would not accept of a triumph upon any such ground. If I can understand his true meaning, it is all I desire. As the quotation is before us it may not be improper to ask the Professor, If he calls the discharge without virus, pus also ?

Page 34. *Of the Common final Intention of Suppuration not answering in the present Disease.*

In other words, the discharge from the Urethra being increased secretion, and not suppuration, it cannot be reconciled to the doctrine of suppuration. The Professor says, “ that general irritation upon secreting surfaces endeavour to produce their own destruction like a mote in the eye, which by increasing the secretion of tears is itself washed away.” This observation is very

pretty, very obvious, and shrewd. But suppose the Professor as an experimental philosopher, was, instead of the mote, to apply gonorrhœal discharge to the eye, would that be so readily washed away? I have seen two consequences from two accidental applications of gonorrhœal discharge to the eye: The one was attended by me, and the Professor himself was called in to be consulted upon it*. The other was attended by me, and Mr. Pott was called in and consulted upon it. One eye was totally lost, and the other was with difficulty saved.

Suppose a person to be attacked with a cold, and a great discharge is produced from the nose; Is the irritation in this instance got rid of after the same ingenious manner? What is it that produces that irritation? How long is the nasal membrane irritated before the increased secretion appears? Does the Professor call this increased secretion pus, in all its conditions, either when thin and diaphanous like gum and water, or when like an usual secretion only in increased quantity?

* Vide my Critical Enquiry, fourth Edition, page 71.
Case XI.

The Professor says, “ that the Venereal Disease is not kept up by the pus which is formed, but like many other specific diseases, by the specific quality of the inflammation itself.” The Professor and I do not differ much in this opinion: It is a specific irritation that produceth an increased secretion; which secretion will be both in quality and quantity, generally in proportion to the influence of the specific stimulus on the surface of the Urethra. The secreted mucus must therefore be considered as a symptom and not the cause.

At length we are approaching to one of those new opinions of the Professor, the right of which he is welcome to assert, and so may his friends, until they are tired out in the same manner, that he says the specific irritation tires out the parts on which it acts.

“ As the living principle in many diseases is not capable of continuing the same action; it also loses this power in the present, when the disease is in the form of a gonorrhœa, and the effect is at last stopped, the irritation ceasing gradually. This cessation will vary according to circumstances;

“ ces;

“ces; for if the irritated parts are in a state
 “very susceptible of such irritation, in all
 “probability their actions will be more vio-
 “lent and continued longer; but in all cases
 “the difference must arise from the differ-
 “ence in the constitution, and not from any
 “difference in the poison itself.

“The circumstance of the disease ceasing
 “spontaneously, only happens when it at-
 “tacks a secreting surface, and when a se-
 “cretion of pus is produced; for when it at-
 “tacks a non-secreting surface, and produces
 “its effects there, that is an ulcer; the parts
 “so affected are capable of continuing the
 “disease, or this mode of action for ever, as
 “will be taken notice of when we shall here-
 “after consider chancre. But this difference
 “between spontaneous and non-spontaneous
 “cure, seems to depend more on the differ-
 “ence in the two modes of action, than in
 “the difference in the two surfaces; for when
 “the disease produces an ulcer on a secreting
 “surface, which it often does from the con-
 “stitution, as on the tonsils, it has no dispo-
 “sition to cure itself; nor in the Urethra, in
 “a recent case, if ulcers are formed there,
 “ would

“ would they heal more readily than when
 “ formed any where else.

“ The common practice proves these facts ;
 “ we every day see gonorrhœa cured by the
 “ most ignorant ; but in chancre, or the lues
 “ venerea, more skill is necessary : The rea-
 “ son is obvious, gonorrhœa cures itself,
 “ whilst the other forms of the disease re-
 “ require the assistance of art.

“ It sometimes happens that the parts
 “ which become irritated first, get well,
 “ while another part of the same surface re-
 “ ceives the irritation, which continues the
 “ disease, as happens when it shifts from the
 “ glans to the urethra.”

“ From this circumstance of all gonor-
 “ rhœas ceasing without medical help.” &c.
 &c.

I trust that my readers will not attribute
 any quotations that I make to a desire of tres-
 passing on their patience, or of swelling this
 pamphlet. Nor am I ambitious, however
 highly I respect the talents of the Professor
 in general, of idly ingrafting into my humble
 performance

performance what so particularly belongs here to him. But that the Professor may not have a wrong construction put upon his meaning by me, it is as necessary to my character, and to his own, as to the cause of truth.

I have therefore laid the above before my readers that they may judge for themselves, both as to the new opinions and to the language that conveys them.

These assertions of the Professor, that gonorrhœa cures itself, and that all gonorrhœas cease without medical help, are perhaps the broadest, and the boldest that ever were offered by man, from the earliest writer on this subject, down to the present hour. It is here publicly announced as a general position without any exception whatever, that all gonorrhœas cease without medical help; that gonorrhœa cures itself. He has qualified these assertions with nothing like an exception; for if ulcers were formed in the urethra, the disease would be no longer gonorrhœa; it would require medical help; it cannot therefore answer at all to his definition of gonorrhœa; to this he agrees, as he says, “ till
 “ the year 1753, it was generally supposed,
 “ that

“ that matter in the urethra in a gonorrhœa
 “ arose from ulcer or ulcers in that pas-
 “ sage ; but from observation, it was then
 “ proved, that this was not the case *” This
 therefore cannot even by the Professor be con-
 strued into an exception.

The Professor “ doubts very much the pro-
 “ bability of a person getting a fresh gonor-
 “ rhœa while he has that disease ; or of en-
 “ creasing the same by the application of fresh
 “ matter” I will defy him to prove that the
 gonorrhœa cannot be continued by the appli-
 cation of fresh matter as he calls it ; but the
 Professor has with much modesty asserted his
 doubts upon the subject : At all events, I am
 confident, that as long as the urethra is sus-
 ceptible of irritation, so long will it be cap-
 able of being acted upon by fresh infection.
 That the secreting surfaces may part in some
 measure with their irritability I believe is very
 true. The taking of snuff begins with pain
 mixed with pleasure ; its continuance affords
 pleasure only by gently stimulating the sur-
 face ; the edge of irritability in the nasal
 membrane is blunted but not destroyed. The

* Page 29.

repetition of snuff gives pleasure to the end of life, and the secretion is encreased by every fresh application.

Let the Professor stand forth, and declare, that gonorrhœa is not continued by fresh connection with venereal subjects, for this is his opinion ; but unfortunately for him the cases he has produced in this chapter do not prove all that he wishes, they tend rather to contradict his innovation ; they only prove that the irritability of a fresh subject is greater than the irritability of one in the constant habit of promiscuous venery.

But supposing these cases produced by the Professor had gone further ; such would not be the sort of proof that could so far be relied upon, as to destroy one theory for the purpose of setting up another ; the declarations of the ladies upon this question are governed by their natural propensity to innocence ; they approve so much of purity and modesty, that they assume these virtues, when they no longer have them. Their assertions are sometimes found to be faulty. The moral truth of this I believe will be felt by most of my readers.

I shall here match two paragraphs of the Professor.

He says, “ that gonorrhœa may be cured
 “ while there is a chancre, and *vice versa*.
 “ Now, if fresh venereal matter was capable
 “ of keeping up the disease, no gonorrhœa
 “ could ever get well while there is this
 “ supply of venereal matter.”

In page 17, he says, “ I have seen cases
 “ where a gonorrhœa came on, and in a few
 “ days in some, and in others many weeks,
 “ a chancre has appeared; and I have
 “ also seen cases where a chancre has come
 “ first, and in the course of its cure a running
 “ and pain of making water have suc-
 “ ceeded*. It may be supposed that the
 “ two diseases arose from the original infec-
 “ tion, and only appeared at different times,
 “ and their not occurring oftner together
 “ would almost induce us to believe it was so,
 “ since the matter is the same in both, and

* Here is inflammation after running.

“ therefore capable of producing either the
 “ one or the other †.”

To explain the theory of his first paragraph, the Professor appeals to the Abbé Fontana's Experiments, an author that I hold in the highest admiration. The Abbé says, that the viper cannot be affected by his own poison. Is this applicable to gonorrhœa not producing chancre? or *vice versa*? The poison of a viper is organised by, and originates from himself: It is only poisonous when applied to another; to the viper himself it is no poison: But the venereal disease is a poison, that the individual who infects another, has received, and already felt the effects of it, either as in chancre or gonorrhœa, or both in the first instance; or the one out of the other. He has received the infection, and he can impart it, still retaining the disease in all its force. Is it not true, if the disease be not counteracted by remedy, that a gonorrhœa alone in the first

† How admirably the latter part of the second paragraph is fitted to the same reasoning in the swelled testicle! Why did not the Professor also presume, that, because a swelled testicle does not occur oftner, it arises from the original infection.

instance

instance can produce phymosis, paraphymosis, chancre, bubo, swelled testicle, affections of the bladder, chordé? still a longer train of symptoms?

This fact the Professor knows as well as I do, and he will prove to us that he knows it hereafter.

It is impossible for him to illustrate the first paragraph by the second, or *vice versa*. To illustrate the first, he produces a most outrageous, unfuitable comparison in the viper; and the second borrows all its illustration from the rarity of the circumstance.

But the Professor is deficient in the very essence of that which constitutes a successful skeptick. For where is that halcyon smoothness in language to charm us! where the dissembling and persuasive argument that assimilates illusion to truth!

Page 41. *Of the Seat of the Disease
in both Sexes.*

The Profeffor fays, “ that the difeafe fel-
“ dom attacks the orifice of the urethra with-
“ out paffing fome way along the canal.”
The reason of this muft be very obvious.
If the whole glans be fmear’d with the in-
fectious virus, the fecreting furface will be the
firft irritated, and if the perfon infected be
cleanly, perhaps the only part put into action
at all will be that which is out of his reach
to prevent.

The Profeffor fays, “ the fecretion of pus
“ with fo little inflammation (in the begin-
“ ning of gonorrhœa) is perhaps owing to thefe
“ parts being naturally in a ftate of fecretion ;
“ therefore the tranfition from a healthy to a
“ difeafed fecretion is more eafily produced.”
I thank the Profeffor for his nearer approach
to the general idea of encreafed fecretion in this
instance

instance than in any before. The professor fat out with telling us “ of the discovery of matter being formed by inflammation without ulceration *.” The assertion is now softened down to a transition from a healthy to a diseased secretion with an inflammation, that is so moderate that it can “ hardly be called so.” This is a compromise that I did hardly expect, after all that has been pledged; was the Professor aware of it? or was it inserted by accident?

Page 43. *Of the most Common Symptoms, and their Order of Appearance.*

Here, he says, with the same singularities in grammar and theory, † “ the effects of inflammation is next observable, and soon after a running appears. There is often no pain, till some time after the appearance of the discharge and other symptoms.” I do not mean to oppose the Professor’s enumeration

* Page 29.

† Page 44.

of the symptoms, they must be described as they naturally offer. I therefore only stop to beg from him an explanation of what appears to me now a mystery; as in the former part of this quotation, inflammation comes before running, so in the latter, pain (that is inflammation) comes after running.

Ignorant and dark as our understandings are, we look up to the only illumined source of all venereal knowledge, with anxious expectation, to know if pus really comes before inflammation, or inflammation before pus?

Page 46. *Of the Discharge.*

It has never yet, I believe, been doubted by the thinking part of the profession, but that the venereal disease is to be propagated only by infection conveyed in some substantial form or other. The interval of time between the infection being received, and the appearance of a gonorrhœa, may perhaps be filled up with cohabitation without harm, and with pleasure

pleasure unallayed by after ill consequences.

But the Professor has carried this idea to such a length, that if it be followed into practice, cannot in its effects prove otherwise than vicious. “ I could even allow a man
 “ who has a gonorrhœa to have connection
 “ with a sound woman, if he took care to
 “ clear all the parts of any matter, by first
 “ syringing the urethra, making water, and
 “ washing the glans*.” The Professor has asserted, and with truth, in another part of his work, “ that no man can will an erection :” How then can he answer for the man, that he will have compleated his connection, before that additional infecting mucus will be secreted ? This advice from the Professor is the more wanton, because it is unprofitable. The husband who follows it, will be an unfeeling fool. The innocent wife would have cause to exclaim against both. “ This may be sport to you, but it is
 “ death to me.”

* Page 12.

The Professor meets the general opinion of the nature of the discharge much nearer, when he comes to describe it as it is in reality, than when he attempts to paint it from his own prolifick imagination. He is too modest to call it pus; he calls it discharge; and, as if he had felt some compunction already for the crime of imposing a wrong sense, on what was before understood in a right one, he as much as says, that if the discharge be not pus, “ it is the natural slimy discharge from the glands, and the natural exhaling fluid of the urethra, which is intended for moistening that surface, and which appears to be of the same kind with that which lubricates cavities in general, become less transparent, and both these secretions becoming gradually thicker, assume more and more the quality of pus.” In other words, it looks like pus, but it is only encreased mucus. I can readily conceive, that if we lived in the days of enchantment, and the charm was so well worked up as to oblige the Professor to speak his mind, we should hear from him an exclamation somewhat to the following purpose. Why would not Mr. Pott agree to call this discharge pus, especially as my brother, and I, had dictated that it should be so called; did not Mr. Sharp believe us,
and

and propagate our doctrine? And would not Mr. Gataker have rivaled us in our claim? How mortifying is it at last that the novelty is ridiculous! that it cannot after all be acknowledged as pus! That however I have claimed, as successor to my brother, the honour of the discovery, a more solid opinion proves at length that my theory was founded upon a false precipitate decision, and that what I call pus deceives me, because it assumes the appearance of pus! “Do you
 “ see yonder cloud, that’s almost in the shape
 “ of a camel?—Methinks it is like an ouzel
 “ —It is black like an ouzel.”

Page 49. *Of the Chordé.*

The Professor says, “that the chordé as
 “ in the adhesive inflammation †, unites the
 “ cells together, destroys the power of dis-
 “ tension of the corpus spongiosum urethræ,
 “ and makes it unequal in this respect to the
 “ corpora cavernosa penis, and therefore a

* One of his new opinions.

“ curvature on that side takes place in the
 “ time of erection.”

I see no reason why there should be an appeal to adhesive inflammation to explain chordé, nor do I think that such appeal is applicable. To fly from causes that we know, to those we doubt, would be making a surrender of our senses before necessity calls for it.

Inflammation in common being generally understood, I shall undertake to define what a chordé is under the favour of that aid only.

Parts when inflamed thicken and lose the power of action they enjoyed before they were attacked by inflammation. The component parts of the corpus spongiosum urethræ being, in consequence of inflammation, already stretched in their reticular directions have no power to yield to further distension. And when the corpora cavernosa penis in erection naturally extend, being in a state of perfect health, the inflamed corpus spongiosum urethræ cannot favour the disposition; therefore the pain of chordé is felt whilst the acting
 power

power in the one, is antagonising the suspended power in the other.

Page 50. *Of the Manner in which the Inflammation attacks the Urethra.*

The Professor and I agree, that the infection applied to the lips of the urethra creeps along to the inner surface; and indeed there is no other way for it. To prove this, as if there was a difficulty, the Professor applies a case of a man and a wall*. Every day would have afforded him opportunity of better proof of a man and a woman.

But the Professor has exchanged almost through this treatise his own certain ground of experimental solid proof, for the hearsay gossip of others. A strange tale to prove a fact, is not half so important, as a plain true relation founded upon common usage. I have known a person, who, examining a girl just as he was about to enjoy her, and finding that

* A gentleman caught a gonorrhœa by a bit of plaster, from a necessary, sticking to the point of the penis.

she was injured, declined the embrace; the same fingers he felt her with, were afterwards employed in handling the penis; in three days he was attacked with a virulent gonorrhœa. But this, although a better proof than that brought by the Professor, is not the best proof. The true manner of proving the case, and the way that the Abbé Fontana would have gone about it, would have been to charge a finger with gonorrhœal infection, and apply it to the lips of the penis of a sound person. The veracity of a second person, and the episodical trash of a piece of a wall would be here out of the question.

I come now to a singular opinion of the Professor, “ When the disease attacks the
 “ urethra, it seldom extends further than an
 “ inch or two inches at most within the ori-
 “ fice, which distance appears to be truly
 “ specific, and what I have called the specific
 “ extent of inflammation.” I will not be at the trouble of answering this—it is not worthy of an answer. I will refer the position to every man who has had a gonorrhœa, and when I appeal to others feelings, I think I am acquitting myself upon this self-evident question, with more candour as to my own. But
 this

this artful overstrained assertion was meant for the better introducing one of our Professor's new opinions.

The symptoms usually attending a gonorrhœa of irritation of all the neighbouring parts, have naturally given the Professor the long wished for opportunity of attributing the affections of scrotum, testicles, perinæum, anus, hips, and glands of the groin to Sympathy; but of the glands of the groin only, when they do not come to suppuration; “when, says he, “they inflame from the absorption of matter, they in general suppurate.”

“When the bladder is affected it becomes
 “more susceptible of every kind of irritation.
 “The urethra, and even the kidneys, some-
 “times sympathise, when the bladder is
 “much inflamed, or under considerable de-
 “gree of irritation.” This may justly be
 called confusion, more or worse confounded;
 for we first of all find irritation, then sympa-
 thy, and then irritation again; according to
 the Professor's law of specific extent of in-
 flammation, there was no more virus lodged
 on the neck of the bladder, than on the
 kidneys.

kidnies. Then why not call both irritation, or both sympathy?

After all the ostentatious embellishment of new opinions, in the introduction to this great work, and after all the usurpation of this mere word, sympathy; in what, either in definition or application, is it preferable to the word irritation?

I trust that I shall make it appear to my readers, that the word sympathy, is not only absurd in every appropriation where the word irritation would have been equally misplaced, but also, that the word itself, in its true simple meaning, is not so apposite as the word irritation.

Where a symptom is the effect of irritation, and has always been understood as the effect of irritation in a gonorrhœa, there sympathy may, although not with as much propriety or energy, be substituted; and the exchange would be so harmless as not to be worthy of a contest. I will venture to assert, that, let the Professor carry his influence of sympathy as far as he will in accounting for the most singular symptoms that the animal
frame

do really sympathise. When Mrs. Siddons, in some distressful scene in tragedy, has fascinated and worked upon the passions of the audience, I have seen one lady fall into fits, she has echoed the shriek of the empassioned actresses, another and another have caught it from the first, and like an electric shock it has been felt through the whole circle.

Page 54. *Swelled Testicle.*

If the Professor had for the sake of being singular only introduced the word sympathy for irritation, I should, after what has already been said, have dropped the subject without making any further comment upon it. For no man can be more disposed to let the Professor off, where he has erred from accidental or venial faults, than I am. But when his new opinions are persisted in, and with all their mischievous errors, are brought forward into practice; when such bold inconsistencies are obtruded upon us, and the only choice before us is, the alternative of defending the right by resisting the wrong; I shall no longer consider myself as a careless spectator,

but as a centinel upon the watch, as bound to oppose opinions injurious in their effects, and which, if I rejected, would be dishonourable in me; for silence would be deemed acquiescence, and the mischief would steal into practice by imperceptible gradations.

The Professor we find now mounted on the hobby-horse, that we had only before seen capering before us. But I flatter myself, that he can only gain the plate, by being suffered to walk over the course. He asserts that the swelling of the testicle is not owing to venereal infection, but to sympathy only.

“ From what I have said of its nature
 “ when it arises from a venereal cause, which
 “ was, that it is owing to sympathy only;
 “ and from what I shall now say, that it is
 “ never affected with the venereal disease,
 “ either local or constitutional, as far as my
 “ observation goes, we must infer that such
 “ suspicions are always ill-founded. This
 “ perhaps is an inference to which few will
 “ subscribe.”

The only true method to describe a disease is to set down the symptoms in the order that

they offer in common, and if an exception should arise now and then out of the common order, that exception should also be noticed, but in so clear and distinct a manner, as that it might always be known as an exception, and never confounded with the common order.

It is a melancholy reflection, that when men, from whatever cause, have gained a reputation with the public, they should sport with their understanding, as well as their safety. I should be sorry to charge the Professor with having done so; but why did he not at once state the manner of the swelled testicle coming on, as it does, I will venture to assert, nineteen times out of twenty, and reasoned upon the most probable cause of this usual attack? Instead of which, he has introduced this prevailing observation, as if it might or might not have been left out of his chapter, and as if it did not weigh a feather in informing us of what nature a swelling of the testicle is, that arises out of venereal infection. As the appearance I allude to so universally prevails, it ought to be considered as most worthy of our investigation, and not what might happen from extraordinary causes.

But

But so plain a truth would not favour our Professor's singularity ; it would not have given him the opportunity of sporting his new opinion. He must distort truth, for the sake of new theory. He creates a disease, and then builds a system upon it.

I will now lay before my readers this general observation of the coming on of the swelled testicle, which he had too much modesty to omit, although he has but barely remarked it.

“ As singular a circumstance as any respecting the swelling of the testicle is, that it does not always come on when the inflammation in the urethra is at the height. I think it oftener happens when the irritation in the urethra is going off, and sometimes even after it has entirely ceased, and when the patient conceives himself to be quite well.”

This is all the notice that the Professor takes of what he calls this “ singular circumstance ;” and the reason is very obvious to me, why he did not venture to enlarge upon it ; because, when he asserts that the swelled testicle

testicle arises from sympathy, he is too cunning and too guarded not to know, that when the swelled testicle comes on after irritation has intirely ceased, and when the patient conceives himself quite well, there is nothing for the testicle to sympathise with. I earnestly request the attention of my readers to this fact: and I now call upon the Professor to declare in such a state of the urethra, what has the swelled testicle to sympathise with? when there is no pain, no inflammation, no irritation in the urethra to provoke a sympathy in any other part: Is it possible that this shadow of the Professor should exist without a substance? But what will he say, when I tell him that this which he calls a “singular circumstance,” is the most general and common manner of the attack of the swelled testicle. I do assert that it is, and I leave it to my readers to determine between us from what has fallen within their own observation.

The swelled testicle must be produced from irritation in the urethra, or from virus conveyed to the testicle. When a gland is irritated from pain in a contiguous part, it never happens but when that pain is at its
greatest

greatest excess, and as the pain declines, the gland naturally returns to its healthy condition. This is the case of the enlargement of the inguinal glands, which is clearly symptomatic in a gonorrhœa when at its highest state of irritation. Why is not the testicle always irritated by a gonorrhœa in such a state? or, why is it scarcely ever irritated? Why does the swelled testicle come on without gonorrhœal irritation, rather than when the urethra is irritated? Because it is incapable of being affected without the immediate action of virus. The mild symptoms of a gonorrhœa, previous to the pain of the testicle, and the attack of the epididymis first, prove that the virus has been continued from the urethra to the testicle. Did the attack of the swelled testicles alway come on while the inflammation was at the greatest height in the urethra, and, did the inflammatory symptoms in the urethra actually cease, after the pain was felt in the testicle, the swelling might be said to originate from irritation without virus, or from sympathy, if the Professor likes it better; but the fact proves the contrary. I will put one question to the Professor before I drop this subject, although I know I am anticipating the page that instructs us how
to.

to cure this unsubstantial shadow. Upon your honour, do you cure all swelled testicles arising from gonorrhœa in all its stages without mercury internally or externally applied, and pledge yourself for all after consequences whatever?

Page 57. *Of the swellings of the Glands from Sympathy*

The Professor introduces here the doctrine of absorbents, as it was taught by Dr. Hunter to whom the honour is due. Dr. Hunter's labour in the pursuit of every thing he undertook, and his vivacity and elegance, in the explanation of every subject at his anatomical lecture room, are too strongly impressed on the memory of those who heard him, and his fame is too well known in general to receive any embellishment from my pen.

“ But although we know the manner in
 “ which substances get into the circulation;
 “ and on having learned that many substances,
 “ especially poisons, in their course to the cir-
 “ culation, irritate the absorbent glands to in-
 “ flammation. We might naturally suppose
 “ such

“ such swellings accompanying complaints in
 “ the urethra attended with a discharge, to
 “ be owing to the absorption of that matter,
 “ and therefore if it be venereal discharge that
 “ they must also be venereal. But we must
 “ not be too hasty in drawing this conclusion;
 “ for we know that the glands will sometimes
 “ swell from an irritation at the origin of the
 “ lymphaticks; where no absorption could
 “ possibly have taken place.” Here the Pro-
 fessor instances, that, from a prick in the finger
 from a clean sewing needle, the lymphatick
 glands will swell, but that “ such irritation
 “ soon goes off.” This the Professor points out
 to show, that the absorbent system is as capable
 of being affected by irritation, as by the absorp-
 tion of matter. To all this, I say yes, and
 do congratulate the Professor on his return to
 plain solid argument. If, in the highest ex-
 cess of a gonorrhœa, the lymphatick glands
 swell, and the discharge of gonorrhœa continues;
 If, when the inflammation subsides, the swell-
 ing of the glands subsides also; I should not
 doubt but that such swellings were owing to
 irritation: but if, on the contrary, the swell-
 ings of the glands remain after the inflamma-
 tion and discharge from the gonorrhœa are past,
 whether they suppurate or remain in an indura-

ted state, there is all presumption to suspect absorption, and nothing less should be thought but that it had taken place. But the professor has spared me any more trouble upon the subject, for, under the influence of a kindly disposition, he agrees, that “ however there are
 “ swellings of these glands from actual absorp-
 “ tion of matter in gonorrhœa, and which
 “ consequently are truly venereal; and as it is
 “ possible to have such, they are always to be
 “ suspected.”

In the latter part of this section, the Professor tells us, that it is difficult to account for the nature of those “ sympathetic diseases:” I must confess for myself, since we have agreed that the glandular swellings may arise in gonorrhœa either from irritation, or absorption, and since we know that these swellings go down with inflammation in the urethra, when produced by irritation, and remain after all inflammation has ceased, when produced by absorption, that we know as much as we can, and enough to account for, and cure the one or the other. And that these “ sympathetic diseases,” were always clearly understood by every one in the profession, who had discernment to guide them, confidence enough not to be

be misled, and modesty enough not to nickname as “sympathetic diseases,” what were known before as affections from irritation.

Notwithstanding what I have already said might be conclusive as to the absurdity of sympathy, yet I cannot help remarking for the credit of all reputable practitioners, who have taken their directions from observation, that they never betrayed the least jealousy of the effects of swellings of the glands, when they correspond with urethral inflammation. Such have always been considered by them as the consequence of irritation, and without a new opinion, either stolen* before publication, or learnt from the Professor's work after, have been treated heretofore with security and science. I trust I shall hear no more of the unimportant vanity of sympathy, a newfangled appropriation, and equally discordant here, as the word “accommodate” was to Bardolph: this is my jocular opinion of it; but I am deceived if my readers have not found it out as soon as I, to be seriously a monstrous imposition.

* Vide Introduction to the Professor's Work.

Page 59. *Of the Diseases of the Lymphatics in a Gonorrhœa.*

The Professor does not dwell long on this subject, only to point out, “ that, when there
 “ is an excoriation or discharge from the pre-
 “ puce or glans which may be called a ve-
 “ nereal gonorrhœa of these parts, a hard
 “ chord is felt leading from the prepuce
 “ along the back of the penis, and the glands
 “ inflame.” Upon these, he remarks, “ that
 “ from the observation of the lues venerea
 “ being seldom produced from a gonorrhœa,
 “ it appears that a whole surface, or one only
 “ inflamed does not readily admit the absorp-
 “ tion of venereal poison; and therefore, al-
 “ though the venereal matter lies for many
 “ weeks in the passage, and over the whole
 “ glans, it seldom happens that any absorp-
 “ tion takes place.” Here is one of the
 many opportunities, that the Professor seizes
 to sport the valuable treasure of science,
 which he has throughout his work convinced
 us he particularly possesses. The symptoms of
 gonorrhœa are held in contempt by him, and
 he

he is eager at all times to repeat to us, that the discharge is harmless that flows from a gonorrhœa, and that his doubts of bad consequences arising from it, are all at an end. Notwithstanding there are absorbents, yet they do not absorb. Notwithstanding glands suppurate, yet they are not infected with poison. If gonorrhœa remains, there it may with innocence. If testicle swells, if fever runs high, if pain be acute, if matter be formed, I doubt, says he, that venereal poison has produced these symptoms; they cannot be venereal; they do well without mercury. And is there no probable way for venereal poison to pass into the habit? If a whole surface, or one only inflamed, will not permit it; will not wounds of any sort be passports for its admittance? for as we all know that there is such a disease as a constitutional lues venerea, tell us, if venereal poison does not pass through that channel? No; says the Professor, “ I am inclined to think that wounds are also bad absorbing surfaces, especially, when I consider, that few morbid poisons are absorbed from wounds.”

My readers will be pleased to recollect, that the Professor, in page 9, calls the venereal a morbid poison, to distinguish it from animal, vegetable, and mineral poisons. The same Professor, in a note, page 36, compares, without any pretence to analogy in that instance, the virus of a viper, and venereal virus, as, I trust, I have in my observations upon his note made it appear. That there may be comparative reasoning on the effects of all poisons upon the subjects poisoned, I readily agree; but the Professor, to establish his opinion, that wounds are bad absorbing surfaces for poisons, and especially morbid poisons, would not venture a comparative elucidation. I shall with pleasure perform that duty for him, and prove to my readers, that all animal, some vegetable, and even morbid poisons are soonest received into the habit by wounds. Does the Professor call the small pox a morbid poison? for as it may be “communicated to others, “as it is received*”, it can in his opinion be nothing else than morbid. How often does he fail in communicating the infection by wounds when he innoculates for the small pox? I only mean when the Professor is not

* Page 9:

interrupted by another action *. All animal poisons, of mad dog, rattle snake, viper, &c. &c. are infused by wounds. The duct that conveys the poison of the viper perforates the tooth that makes the wound †. The ticuna, a vegetable poison kills the animal as soon as applied to his blood ‡. Where will the Professor's new opinions lead us!

I am told by authorities that cannot be disputed, that the Professor addresses his pupils somewhat after the following manner: "Gentlemen, I observe that many of you take notes, I would advise you to burn them; for although what I deliver now is my opinion to day, in another course, I may change this opinion." A student from the country, under the Professor in the year 1786, will find himself out of all fashion on the return of his medical friend in the year 1787. Like country milleners, they must visit London every spring, for the newest mode of cutting out frippery.

* The Professor says, that no two actions can take place in the same subject at the same time.

† Abbé Fontana, Vol. I. p. 10.

‡ Abbé Fontana, Vol. II. p. 118.

May we not next year presume upon another quarto edition, by way of exposition upon this ?

Page 60. *Short Recapitulations of the Varieties of the Symptoms.*

Here the Professor has, as I knew he would, broken in upon his specific distance of an inch and half, or two inches, from the orifice that marks the specific extent of inflammation. “ Sometimes it runs, says he, (amongst his “ other recapitulations) all along the urethra “ to the bladder, and even to the kidneys, “ and spreads into the substance of the ure- “ thra producing a chordée. The Cowper’s “ glands he suspects inflame. Sometimes “ the disease appears after infection in a few “ hours, at other times in six weeks*.” In short, when he describes symptoms as they really are, he cannot but tell us what is known to happen, and what is only information to such as never sought after it before.

* Page 51.

Page 69. *Of the Cure of the Gonorrhœa.*

At length we are approaching to examine how far the Professor is disposed to keep his word, after he has asserted, “that gonorrhœa cures itself.” The touchstone of his sincerity, in such a declaration, can be only ascertained by his abandoning the disease to work its own cure, by bidding defiance to all remedies, and by pledging himself, that by leaving the gonorrhœa to itself, no ill consequences can happen from it hereafter.]

“As we have no specific medicine for
 “gonorrhœa, it is fortunate that time alone
 “will effect a cure. It is therefore very
 “reasonable to suppose, that every such in-
 “flammation gets well of itself; yet al-
 “though this appears to be nearly the truth,
 “it is worthy of consideration, whether me-
 “dicine can be of any service in this form
 “of the disease. I am inclined to believe it
 “is very seldom of any kind of use, perhaps
 “not once in ten cases; upon this idea of
 “every gonorrhœa curing itself, I gave cer-
 K “tain

“tain patients bread pills. The patients al-
 “ways got well, but some of them, I be-
 “lieve, not so soon as they would have done,
 “had the artificial methods of cure been em-
 “ployed.”

I presume that every reader of the above extract will agree with me, that, after such a declaration, nothing in future ought to be dreaded from a gonorrhœa; and for what purpose the after pages are devoted, I am at a great loss to conceive. If what the Professor advances be true, if his opinions, when once examined with candour and judgment, stand the test of general approbation; then is a gonorrhœa, a trifle indeed, and those who treat it as a matter of importance, are deluded ideots, possessed of no power of discrimination, and who have borrowed all their understanding. The Professor himself will be suspected of a prejudication, that his honour will never permit him to deserve; if, after the above quotation, the rest of his work be not engaged to confirm such new opinions. For when it is considered that society in general, and the whole profession in particular, have a stake in the concern; no time surely can then be too long to explore so interesting and
 so

so pleasing a theme; no work can be too large that explains it; and no credit too great for him that has made the discovery.

Diogenes dying, was asked by a friend, what he wished should be done with his body? Let it lie, said the philosopher, where I die. The friend replied, that the dogs would devour it. They dare not, said the philosopher, for my stick will lie by me. But you cannot use your stick after death, replied the friend, nor will you know when the dogs do devour your body. Then, said Diogenes, what signifies what will become of my body? What signifies what will become of gonorrhœa? The use of mercury, like the stick of Diogenes, is unnecessary. If all the above be true, and the Professor's quotation stands as pointed as if it had been written in Rubrick, we need no longer trouble ourselves about what can befall us from a gonorrhœa. It is a bugbear in the imagination only! Common sense will not give it a hearing!

A friend, after reading the Professor's work, humourously called him the Calvin in venerable reformation. But I beg leave to differ from my friend, the Professor may be more

aptly compared to Luther, who retained as much of the pageantry as was innocent in religion, without being idolatrous; just so has our Professor in physic, Pills being formerly given in gonorrhœa, he has kept up appearances, by giving bread pills; he might carry it further; suppose that he gave for an injection some pump water, to be thrown up by a syringe not material as to its being perfect; for, if the injection reached an inch and half, or two inches, that would be quite far enough, for these are the specific bounds of the disease.

If the Professor had meant this new sport of bread pills just to amuse his readers, and had episodically flung it into this part of his work, before he entered upon the more serious and important subject of the best cure for a gonorrhœa, and its supposed consequences; as a clever fellow would entertain us, by a trick with the cards, while the rest of the party were preparing for a sober game at whist, I would have joined him in the fun; but I imagine, he means to be serious in this new opinion, from what he has said in page 35, and in many other parts of his work, the substance of which is this, that irritation from
gonorrhœa

gonorrhœa spontaneously ceases by tiring itself out. But whilst the Professor sits at his ease, an inactive spectator only, can he tram-
 mel the consequences? can he insure us from
 all local and all the constitutional attacks that
 can arise from a neglected gonorrhœa?

Cases, if I were to collect them, that would fill
 as many volumes, and of as large a bulk, as the
 records of parliament, may be brought in
 as proof, that all local, and all constitutional
 venereal affections may be produced from go-
 norrhœa: It is for this reason that virulent
 gonorrhœa does not complete its own cure.
 The virus that produced the irritation in the
 urethra, after the urethra can be no longer ir-
 ritated, is capable of shifting its influence, of
 producing new effects, and of being ramified
 into all venereal symptoms that ever were
 known. This can only be prevented by re-
 medies of art. The application of these re-
 medies destroys the stimulating power of the
 virus, and puts an end to all irritation. Thus
 is the immediate attack removed, and the fu-
 ture evils guarded against and prevented.

Does not the Professor know, that by the ap-
 plication of a prophylactic, no irritation will
 ever

ever come on? that, by the same application, as soon as the irritation is perceived, the symptom will more readily give way? and that, whenever it be applied before absorption has taken place, its success is effectual? Delay, which should be always avoided as much as possible, will certainly make the cure more intricate and important. From what I have seen I have the strongest presumption to draw this conclusion, that the length of time, in the cure of a gonorrhœa, carries a very corresponding reference to the length of delay, in applying remedies of art, after the time of receiving the infection. Irritation, from many other causes, may act somewhat after the manner that the Professor states this to act. But of all irritating substances that could possibly be offered, perhaps that of gonorrhœal virus was the least to be reconciled, from the nature of its action, to this new opinion of the Professor. For this is virus of a specific quality, and only temporarily local; it cannot be said that it has no power of shifting situation, and, if suffered to remain unopposed, of acting on every part of the constitution: it always may, because it often does. Therefore, as the irritation in the urethra, that ceases spontaneously, is not the whole of the consequences

ees that we are to look to, as the disease is not final there, who will be found so hardy and conceited, as to pronounce without equivocation or subterfuge, that gonorrhœa cures itself.

I have admitted, for the sake of the argument, the case, that gonorrhœa would cure itself, that it would gradually decline till it totally disappeared; but what if that which generally happens, should follow such neglect? what would he have to answer for to the sufferer, who created the evil by the absurdity of his counsel? would it not be a subject too serious to be so sported with? would the patient be as careless in his revenge, as he was in his advice?

I observed, that irritation produced from other causes may determine in that manner which the Professor declares irritation from virus determines in the urethra. And so it may on all parts very susceptible of pain, by blunting the feeling that was before the attack more delicately tender; by reducing the sensation of real pain, or exquisite pleasure, to the neutral condition of receiving either with indifference. The first gonorrhœa is generally the
 I most

most inflammatory, the first swelled testicle, the first fever, the first corrections received by soldiers, the first effects on the eyes, by lime, and foot, of lime burners and chimney sweepers, are all most severely felt: The sensations from pleasure are in the same degree reduced as they are brought into repetition.

From these general observations, which are neither new nor uncommon, it appears, that the Professor's idea of gonorrhœa tiring of itself by the decline of irritation, is only a new opinion, or a strange opinion, when it is applied thus unhappily, where it ought not to be applied at all. I repeat it again, because here is a virus of a specific quality, and which is only temporarily local; and although it produces its first effects by irritation, yet it does not cease to act when irritation can be no longer supported. And although this specific virus may, or may not have transferred its influence, it cannot be said to be inactive, cannot be said to be extinct; for it always retains the power of quitting the local for a constitutional attack. And last of all what is more self evident, and more important than all I have hitherto said, the local consequences produced

produced by gonorrhœa uncorrected by remedy, may not, and very seldom will be at an end, till the parts on which the virus acts are destroyed, or if not destroyed, till they become so unfit for their destined functions, that the remainder of life will be a miserable entail upon the deluded subject, who fallaciously is advised to wait for his gonorrhœa to cure itself; or who fallaciously persuades himself, that there is no specific power yet known, which cures a gonorrhœa by depriving the virus of the power of action, either in the form of gonorrhœa, or any other form arising out of it. The orthodoxy of the Professor will be found to be heretical, or there is no truth in divination. Suppose a house in flames; how ridiculous it is to bring the fire engines! what an useless set of people the fire-men are! what nonsense it is to take precautions of insurance! when, if you only permit the fire to continue till the house be burnt down to the ground, the flames will not only tire themselves out, but in the end be compleatly extinguished.

Whether the Professor be right or wrong in his conjecture, that gonorrhœa was the venereal form with which the crew of the voyagers

ers infected the unfortunate inhabitants of the islands in the south seas; it must remain doubtful, until some good authority positively declares, that the disease was spread there from gonorrhœa. But, notwithstanding the Professor asserts from no other authority than his bare surmise, and that is to me poor authority indeed! yet I claim the right of convicting the Professor, by the strongest evidence that can possibly be brought into an English Court of Justice; which is, by his own confession, by what proceeds out of his own mouth; and I shall make the appeal immediately to my readers, whether I have not brought such convictions home to the Professor, or rather, in this instance, home to the Confessor; but I should not lay so great stress upon this, if it were not a matter of the first magnitude; and not because, this is the only contradictory blunder that I find throughout that part of his performance I have hitherto perused; for truth bids me tell it, that the scattered differences in opinion blaze forth every where to the eyes of the observer, as obvious, as stars are in a clear night.

“ But as we find in Cook’s last voyage,
 “ that the disease in every form is now there,
 “ and as we have no intelligence of a gonor-
 “ rhœa

“ rhœa being since introduced, we must sup-
 “ pose, that every form of the disease has
 “ been propagated from one root, which most
 “ probably was a gonorrhœa *.

“ If it is true, as is asserted in a voyage
 “ round the world, that the disease was car-
 “ ried to Otaheité; It shews that it can be
 “ long retained after all ideas of its existence
 “ have ceased: and when it is retained for
 “ such a length of time, it is most probable
 “ in the form of gonorrhœa †.

“ A young woman from the Magdalen
 “ Hospital was received into that house two
 “ years before, and continued there all that
 “ time. The moment she came out, she
 “ was picked up by one who was in waiting
 “ for her with a post chaise to carry her off
 “ immediately; she gave him a gonor-
 “ rhœa ‡.”

From whence I took the above quotations,
 there I find innumerable others, of cases that
 prove the bad effects of gonorrhœa; it is not
 material to me for what purpose the Professor

* Page 15.

† Page 40.

‡ Page 38.

brings forward these cases; for if they be true, he may apply them to elucidate one point in theory, and I may apply them to elucidate another; for all true cases being but instruments in our hands to be applied for our advantage, one may employ them to one end, and another to another end. These so far prove, that the Professor believes, and knows that gonorrhœa does not cure itself; and that gonorrhœa can commit all the disastrous mischiefs that I have attributed to it. After my readers have satisfied their information, by looking at the above picture of gonorrhœa given by the Professor, I beg that they would regard its reverse drawn by the same artist; for, *reddere personæ scit convenientia cuique**, and their own comment shall spare me from any further intrusion of my observations on this point at issue.

“ As the living principle in many diseases
 “ is not capable of containing the same
 “ action, it also loses this power in the pre-
 “ sent, when the disease is in the form of
 “ a gonorrhœa, and the effect is at last stop-
 “ ped, the irritation ceasing gradually.

* Horace,

“ The circumstance of the ceasing spon-
“ taneously, only happens when it attacks a
“ secreting surface, and when a secretion of
“ pus is produced.

“ The common practice proves those facts ;
“ we every day see gonorrhœas cured by the
“ most ignorant ; but in chancre or in the lues
“ venerea more skill is necessary : the reason
“ is obvious, gonorrhœa cures itself ; whilst
“ the other forms of the disease require the
“ assistance of art.

“ From this circumstance of all gonor-
“ rhœa ceasing without medical help, &c.
“ &c. &c.*.

“ As we have no specific medicine for go-
“ norrhœa, it is fortunate that time alone, will
“ effect a cure : it is therefore reasonable to
“ suppose, that every such inflammation gets
“ well of itself.

“ I am inclined to believe that medicine
“ can be very seldom of any kind of use.

* Page 35.

“ Upon this idea of every gonorrhœa curing itself, I gave certain patients bread pills; the patients always got well: but some of them I believe not so soon as they would have done, had the artificial methods of cure been employed*.

“ Whatever methods are used for the cure, either locally or constitutionally, it is always necessary to have in view the possibility of some of the matter being absorbed, and afterwards appearing in the form of lues venerea; to prevent which, I should be inclined to give small doses of mercury internally †.”

Thus have I brought a few of the Professor's scattered new opinions, and such as are referable to the subject before us, to a focus, and set the collection in so advantageous a light, that the variety gives a pleasing effect of each upon the other: like a variegated landscape; here are hill and dale, wood and water, lawn and heath.

It is not the first time that I have endeavoured to possess my readers with a suspicion, that

* Page 69, 70.

† Page 86.

has all along clung to my belief, that the Professor plays off his new opinions in theory, and reconciles himself to adopt our old ones in practice. This accounts for his cautious prudence, though reluctantly set down, of betraying an inclination to give a few doses of mercury. As I proceed further in this remarkable chapter, a chapter that cannot be outdone by Quivedo himself, I find that the Professor, instead of filling up the remaining pages of it, with more successful cases of bread pills, with more cases effected by constitutional dispositions without artificial aid, has already discovered an intention to abandon his new ground, and to fall into the ranks; familiarly speaking, to become one of us; to engage the enemy with the same weapons that we do; and to be subject to our discipline. I shall watch this manœuvre, and if I find it a feint, my readers shall know it. The fact is, that the Professor proceeds to treat of the different modes of cure, amongst all of which, I see no novelty, that I would stoop to pick up: All methods, that every body knows, or that every body has tried sooner or later, that have followed the old fashioned practice of curing this disease, are served up to our view, like an exhibition of pictures, and so judiciously remarked upon by the Professor,

effor, as to borrow new splendour by the fresh varnish he lays upon them.

I shall proceed to give my readers the best idea I can of the Professor's opinions, and rules to be observed, in the treatment of the gonorrhœa.

“ The first thing to be considered is, the
 “ inflammation itself, whether violent or
 “ mild, whether common or irritable; yet
 “ even when this is ascertained we have not in
 “ all cases the cure in our power.”

“ When the symptoms are violent, but of
 “ the common inflammatory kind, which is
 “ to be collected from the attending circum-
 “ stances, particularly the extent of inflamma-
 “ tion not exceeding the specific distance, the
 “ local mode of cure may be either irritating
 “ or soothing till the original violence is
 “ over. Irritation in the present case, may be
 “ attended with less danger than in the irrita-
 “ ble inflammation, and may alter the specific
 “ action, but to produce this effect it must be
 “ greater than the irritation from the original
 “ injury.”

After

“ After all, however, I believe the soothing
 “ plan is the best at the beginning.”

Here we are treated with a sublime flight of the Professor, “ irritable inflammation,” he has undertaken to explain this new opinion by a note, but, until he adds a second note to explain his first, my readers must remain in the same ignorance that I do, and be content to guess at his meaning; for like every mystery it is enveloped in dark obscurity, and hidden from the reach of vulgar understanding. As the reader may perceive from the quotations I have already given, it is impossible for me to explain to them the ideas the Professor entertains of the cure of a gonorrhœa, now he brings his new opinions into play: Nothing can be more undetermined than the system he adopts: It can hardly be called a system: The word chance is much better to call it by. All that I can collect from the above extracts is, that the irritating plan is not dangerous, and the soothing safe. But directly after, he says, “ Nothing
 “ should be done that may tend to stop the
 “ discharge.—The constitution should be
 “ altered if possible. If the constitution cannot
 “ be altered, nothing is to be done but to al-

“ low the parts to tire themselves out by a
 “ continuance of the same action.”

What a forlorn hope has the Professor hung out to his patient ! a gonorrhœa may remain upon him for years ; he must be shut out from the most alluring enjoyments ; he cannot be cured ; there is no specifick in the catalogue of remedies. Irritable inflammation may come on, and then the disease becomes so unruly as to break over its specifick bounds. It is vain for him to cry out, that he is tired before the parts attacked are ; for they must be allowed
 “ to tire themselves out by a continuance of
 “ the same action.” Go, says he, to the patient, you have got a runaway horse, I can make you no bridle that will govern him ; when he gallops away with you, spur him on ; tire him and he will stop of himself ; you may coax him to stop if you can ; but if neither will avail, I say again, keep your seat, and tire him out.

I shall just lay before my readers one more extract, and then get rid of this chapter of difficulties, as soon as I can, for I may, with truth, that cannot be impeached, affirm, that Locke himself, in his essay on human understand-

standing, is not half so abstruse as the Professor is, in his essay on animal gonorrhœa. There may be more in his reason, than is dreamt of in my philosophy, but I cannot find it out, I confess my incapacity.

“ When the inflammation has considerably
 “ abated, the disease only now remaining
 “ in a mild form, it may be attacked locally,
 “ violence is still to be avoided; because it
 “ may bring back the irritation. At this pe-
 “ riod gentle astringents may be applied with
 “ a prospect of success; or if the disease has
 “ begun mildly, and there are no signs of an
 “ inflammatory disposition either of the com-
 “ mon, or irritable kind; in order to get rid of
 “ the specific mode of action quickly, an irri-
 “ tating injection may be used, which will in-
 “ crease the symptoms for a time, but when it
 “ is left off, they will often abate, or whol-
 “ ly disappear. In such a state of parts, astrin-
 “ gents may be used; for the only thing to be
 “ done, is to procure a cessation of the dis-
 “ charge, which is now the principle symp-
 “ tom.”

I am confident, that, if a man of superior talents to me, and with a stronger disposition

to satire, had taken upon him the task of proving the theory of the Professor by the test of criticism, the subject before us would have warmed him, and he would have proceeded in his triumph with more than common rapture; the brow of the Professor would have been deeply furrowed, and such an irritation would have been raised on his feelings, as would have reached my sympathy. I am only angry at his mistaking himself all this while; from his situation, we had a right to expect, that every innovation would have been clear and distinct. This is not an age for absurd theory, and the Professor's powers are not equal to charm us into a wrong persuasion. Experiment, the touchstone for truth, is the high road for the Professor. But as his friend, the Abbé Fontana says, after all, I fear that man loves better to be admired than useful; marvellous than true; difficult than important.

Page 72. *Of the different Modes of Practice---Evacuants---Astringents.*

The Professor divides the remedies commonly recommended in gonorrhœa, into two kinds, internal and local. The internal remedies are divided into evacuants and astringents. “ The evacuants are principally of the purgative or diuretic kind, every practitioner supposing that he is in possession of the best remedy; mercury, neutral salts, nitre.” The Professor has no great opinion of these remedies. “ For what idea” says he, “ can we form of irritation produced all along the intestinal canal curing a specific inflammation in the urethra ?” “ Yet” for it is impossible for the Professor to be positive in any opinion but in this new one “ there are cases where a brisk purge has even performed a cure.”

“ Astringents though often given, yet have been always condemned by those who call themselves the judicious and regular practitioners.” The Professor, “ believes that they

“ they do not in any case lessen the venereal
 “ inflammation, but certainly they often lessen
 “ the discharge.” “ As that effect however
 “ does not constitute a cure, it is not necessary
 “ to produce it.” The professor “ can con-
 “ ceive that the balsams, with something else,
 “ may help to lessen the discharge, as the in-
 “ flammation abates.”

Page 74. *Of Local Applications---different
 Kinds of Injections---irritating---Se-
 dative---Emollient---Astringent.*

“ Local applications may be either internal
 “ to the urethra, external to the pubis, or
 “ both; all of which will be in many cases
 “ necessary. The internal, or those applied to
 “ the urethra, would seem most likely to cure
 “ this species of disease, by coming immedi-
 “ ately into contact with the diseased parts;
 “ for if they have any power of action, what-
 “ ever that be, it must be in opposition to the
 “ venereal irritation; therefore we might sup-
 “ pose, that most irritations that are not ve-
 “ nereal, would tend to a cure; but certainly
 this

“ this is not the case. If on the contrary, the
 “ applications are such as quiet irritation, they
 “ must also be of service——These applica-
 “ tions may be fluid, or solid.”—“ By fluid,”
 he means “ a wash to the fore,” by solid “ a
 “ bougée” and at length, he tells us, “ that
 “ fluid applications are called injections, and
 “ which are without number; but the great
 “ variety of injections, and every venereal in-
 “ flammation getting well during their use,
 “ which was likewise observed to happen when
 “ internal medecines were given, are strong
 “ corroborating circumstances in favour of
 “ the opinion, that every such complaint
 “ will in time cure itself.”

This last observation of the Professor shall
 not escape my notice for a moment. And is
 this all the foundation he has for unqualified
 assertions, that injections do not cure a gonor-
 rhœa, but that gonorrhœa cures itself? Be-
 cause a variety of injections are given, and
 every venereal inflammation gets well during
 their use? Is this the source from whence
 the Professor draws his strong conclusion, that
 every such complaint will in time cure itself?
 The presumption may carry him further than
 he was aware of; for proof he cannot call it;

It

It is presumption arising out of a determined obstinate principle of doubting every theory but his own opinions ; for, he might also have asserted, and it would have been much more consonant to reason : That the great variety of injections given, and every inflammation getting well during their use, are strong corroborating circumstances in favour of the opinion, that they may all tend to the same end, and that the complaint yields to their specific power. Is there but one way to cure a chancre ? Does the Professor not give us hereafter to understand, that there is more than one ? I ask him this, because I do not wish to forestall the after page that will tell it. Does he not in bubo advise different means ? Does he not aid, or change the preparation of mercury in blotches on the skin ? In nodes in the bones ? In short, does he depend upon mercury solely, and in one form in the cure of all venereal cases, whete he admits of the specific power of mercury to cure them ? If, in these instances, he goes through his cure of all symptoms, and every stage of them, without calling into his aid, as new symptoms offer, other remedies, or trying mercury in other forms, I say, if he does do so, then do I yield all resistance to all his new opinions,

opinions, and upon these terms alone do I admit, that he has argued more for the honourable cause of investigating truth, than for the contemptible vanity of being singular.

But the Professor might as well have said, you can only convince me that there is a specific for gonorrhœa, as there is for chancre or constitutional venereal disease, by giving me proof that there is but one specific, that you have that specific in your possession, and that I will see the application of it, and that it shall rest with me to determine, whether it be a specific or not. This is what I call a specific in the strictest sense; if the Professor means as much, I can only say, that when he asserts that there is no specific for gonorrhœa, he calls for more proof than he requires for chancre, or constitutional venereal disease.

But immediately after this the Professor assumes such a system as I know nothing *simile aut secundum* to it. He begins to treat of the cure of a gonorrhœa according to the old opinion, whilst he is combating the doctrine by his new one. The favourite maxims inculcated by the ancients and sanctioned by the moderns, of adhering to established rules unless better can

be provided, are spurned by the Professor; he has built a new house, but will not quit the old one; he has raised up a new theory, but dares not conform a practice to it; he has built upon a sandy foundation indeed! The Professor may depend upon it, that he is erring from the rule of right when he finds fault without being able to amend. This is what my suspicions all along led me to, and I find them well founded. Does the Professor send away those unfortunate victims he devotes to be tired out by a gonorrhœa? If he does, and for conscience sake, I will be obliged to him to send them to me; for although I have a conscience also, yet I believe it is not so delicately wrought as the Professor's; I should endeavour to cure them, I should still try to prevent all evils (as he calls them) that arise from neglected gonorrhœa; notwithstanding the comfort he has held out to the contrary, which must be at least as grateful to the feelings of the unfortunate patients, as a wet blanket wrapped over them. But I am sure the Professor will not part with one of them: the pious fraud of bread pills was meant to amuse us; to detain his patients, something more, as hereafter will appear, will be attempted at least by him; and perhaps
 what

what others attempt, but I trust with more confidence and success.

“ I shall divide, says he, injections according
 “ to their particular effects upon the urethra,
 “ into four kinds; the irritating, sedative,
 “ emollient, and astringent. The specific, I be-
 “ lieve is not yet discovered, although a mer-
 “ curial injection, in some form or other, is
 “ by most people supposed to be possessed of
 “ such a power, and of course this mineral
 “ makes part of many of the injections now
 “ in use.”

His irritating injection is composed of a solution of sublimite. His sedative, of opium, saccharum saturni, advising at the same time deluting liquors. His emollient, of gum arabic, milk and water, and sweet oil. And his astringent, of the gums, as dragon's blood, the balsams, and the turpentine dissolved in water; the juices of many vegetables, as oak bark, peruvian bark, tormentil root, and perhaps all the metallic salts, as green, blue, and white vitriols; the salts of mercury, and also alum.

“ External applications, poultices and fo-
 “ mentations—when the glands of the ure-

“ thro are swelled, the application of mercurial ointment may be proper, after the inflammation has subsided. Indeed mercurial ointment is often applied when in a state of inflammation,” but he says “ he is not perfectly satisfied of the utility of such practice.”

Such is the catalogue of remedies that the Professor has made out for the gratification of our eager curiosity, and quenching our uncommon and pressing thirst for information. Such is the inexhaustible treasure from this fountain. Here are calculated remedies for all constitutions, from the rich king down to the poor beggar. But I would not wish to turn my back upon my old acquaintances ; and I hope, although I find them in company with the Professor, that I may be permitted the honour of recognising them ; for, I firmly believe, that there is not a pupil of two months standing in this city, who does not know all the remedies remarked upon by the Professor, as well as I do. That they may choose to throw aside the worse part of them, I will not deny, and perhaps they may be in the right if they did.

“ Irritating

“ Irritating injections do not agree with all
 “ inflammations arising from venereal poison ;
 “ it may be asked, in what cases are the ir-
 “ ritating injections to be used with advan-
 “ tage? This I have not been able to de-
 “ termine. Where the perinæum is very sus-
 “ ceptible of inflammation, nor where there
 “ is a tendency in the bladder to irritation ;
 “ in such cases I have not succeeded with
 “ them ; they do not only do no good, but
 “ they often do harm, for I have seen them
 “ make the inflammation spread further in
 “ the urethra, and I think I have reason to
 “ suspect that they have been the cause of
 “ abscesses in perinæo.” This last observa-
 tion the Professor qualifies with a note to ex-
 plain. “ It is however to be remarked, that
 “ this symptom is not always to be attributed
 “ to injections ; for it often happens when
 “ none are used,”

Of sedative injections—The Professor de-
 clares for “ opium, being perhaps the best
 “ sedative we have ; but even opium will not
 “ agree, or act as a sedative in all parts ; on
 “ the contrary, it often has opposite effects,
 “ producing great irritability. Saccharum sa-
 “ turni

“turni makes a good sedative astringent injection.”

Of emollient injections—he says, “they are the properest when the inflammation is very great; they are probably first useful by simply washing away the matter, and then leaving a soft application to the part.” I shall just put the Professor in mind, and bring to the recollection of my readers, that the Professor has all along persisted, that the matter could do no harm; and here is my authority for the observation: “Washing of a sore I believe unnecessary; for I imagine that matter from any sore whatever, is always such as cannot stimulate the sore into any action*.”

Of astringent injections—“They should only be used at the latter end of the disease, when it has become mild, and the parts begin to itch. But this should be according to circumstances, and if the disease began mildly, they should be used at the very beginning; for by gradually lessening the discharge without increasing the

* Page 76.

“inflammation,

“ inflammation, we compleat the cure, and
 “ prevent a continuation of the discharge,
 “ called a gleet.” I am at a loss to determine
 to which of the five words, “ But, probable,
 “ seldom, happen, and believe,” the Profes-
 sor owes the most obligation. They certainly
 are his coat of armour, which he puts on when
 he combats old opinions; but his new opi-
 nions want neither coat of mail, breast-plate,
 nor falchin; they are bold in their own na-
 kedness, are truth itself, best to be admired in
 the strongest light, and “ unadorned, adorned
 “ the most.”

Such is the disposition which the Professor
 has made for the attack of a disease, that, if
 but let alone, would cure itself. But if any
 of my readers be desirous of knowing how
 and when these remedies are to be applied, he
 will be disappointed in that expectation from
 me. For, when the Professor conferred upon
 us his ideas, he ought to have furnished
 us with intellects to comprehend them.
 He tells us that the remedies do not always
 act alike, that they do good and they do harm:
 Sometimes this first, and so *vice versa*, ring all
 changes upon them, and their harmony will
 still be the same; if you regulate them by the
 scale

scale of a country dance, thus, let sedative and emollient set corners; figure in irritating; and lead down astringent; then all four hands round; right and left: This disposition may do, or it may not do; these are my adopted remedies, and I have nothing better to offer.

But to be a little more serious; when a man comes forth with a voluminous work full of innovation in theory, only, without any thing like the shadow of improvement in practice, which I protest to be the case in point, as far as I have now perused; to what good can such work tend? If the disease be not better understood, if contradictions and doubts take place of matters of fact, if the mark of cure be removed at a greater distance from us in proportion as the theory is attempted to be changed, and no new remedy preferred; where is all that advantage which is gained from true knowledge? Is it to be found in this performance of the Professor? I have heard of, and I have lived long enough to be a witness to a theory that has helped to practice, and to a practice that has helped to theory: such have been no sooner given out by their respective authors, than they flashed conviction

conviction on all, and became generally adopted in spite of mean opposition. The practice of treating putrid fore throats in a new manner was generally approved from the theory of Dr. Fothergill. The theory of treating the small pox in a new manner, was conceived from the practice of the Suttons. The giving opium in mortifications, not to mention his other valuable improvements, was introduced by Mr. Pott. Do we derive any such profitable information from the book before us? Is there any thing in the eighty-three pages that I have hitherto examined, which bids fairer to remove the dreadful symptoms of a gonorrhœa? Or has the Professor done himself credit, or treated with candour the general system already adopted, when he denies its efficacy, without being able to produce one more efficacious; when he doubts every thing, because he would not be seen to acquiesce in any thing; and when, for the sake of deviating from the path hitherto trodden, he has gone out of his way, and bewildered himself and his readers by constant errors and palpable contradictions? The result of my new opinion is, for I in my turn have a right to a new opinion, that the Professor is more at home with his knife than his

pen; that, by a perverse application of his mental endowments, he has diminished and wasted his reputation; that his anatomical comparative knowledge was a wedge of gold to him, the advantageous application of which he has neglected; and that he has, by employing his labour in expanding the leaves before us, exchanged solid wealth for feeble splendour. This ought to have been told to him in the closet, but I trust the opportunity may not be now too late.

Page 84. *Of the Treatment of the Constitution in the Cure of the Gonorrhœa.*

“ So capricious sometimes is this form of
 “ disease in its cure, that I have seen by an
 “ accidental fever coming on, the discharge
 “ stop, the pain in making water go off, and
 “ the gonorrhœa finally terminate with the
 “ fever.” As the Professor makes no remark
 upon this, it is to be presumed, that he
 conceived the whole venereal concern to be
 at an end. In the only instance, where I
 I ever

ever saw a gonorrhœa disappear in this manner, the consequence was, that the patient endured the most confirmed lues venerea that ever I have seen in all my practice. A lieutenant of a man of war was seized with the small pox, whilst a gonorrhœa was on him; he had the small pox so very bad, that it was with great difficulty he recovered: the gonorrhœa left him altogether. He went, as soon as he recovered from the small pox, to sea, was absent from England more than twelve months, and returned in a most emaciated state, with nodes upon his bones, attended with incessant pains, and a large ulcer over all the palate, fore-teeth out, and the bone was a caries. Much mercury had been given at sea to him, but to no purpose. He recovered at Dr. Kelly's at Knightsbridge, by warm bathing, milk diet, decoction of sarsaparilla, and a little mercury was given, when his constitution had been previously mended. Dr. Wright attended him with me. So much for the security of gonorrhœa curing itself. I am inclined to think, that the more a person is out of health, the more likely the venereal virus is to be absorbed. At any rate, the case above proves directly the contrary to an opinion the Professor would fix us with: "It

“ appears to me beyond a doubt, that no two
 “ actions can take place in the same constitu-
 “ tion, at the same time.” Here we find
 the Professor positive, but this is one of his
 new opinions ; perhaps he is in the right.
 We ought to be proudest of our own children ;
 and the more rickety they are, the more pa-
 ternal tenderness they require from us. Does
 the Professor pretend to say, that the virus
 was dormant whilst it was absorbing from the
 urethra into the habit ?

“ Unfortunately there are cases where no
 “ known method lessens the symptoms ; eva-
 “ cuations have produced no abatement, the
 “ strengthening plan has been as unsuccess-
 “ ful, sedatives and emollients have procured
 “ no relief ; and time alone has performed
 “ the cure.”

I am still of opinion, that much more might
 be done, than, as the Professor tells us, hath
 been done. And with all submission to his
 superiour power, I shall repeat an assertion
 that I made a few pages back, and although
 contrary to the opinion of the Professor, I

shall not shrink from the credit I stake upon it. The Professor in very pathetic strains, and with much seeming candour, finding that he can no longer guide at the helm, abandons his post, and commits his bark to the storm. And could he leave his cases to the apathetick event of time, when he had only called to his aid the above resources? All of them seem to me calculated to bring the patients to the very predicament he is about to leave them in. Let any man turn to the particular articles in the separate classes above recited, and see if he can find what he himself terms any thing like a specific in the strengthening plan, the sedative, or emollient; evacuations the Professor has no more opinion of than I have. Where was mercury all this while? Where was his irritating injection? Why did he play with the cases, and suffer them to arrive to such a desperate height? I say that a mercurial injection is a specific in the cure of a gonorrhœa, and that the cure is only made difficult and important from procrastination; by permitting the virus to extend its ill effects, and by widening the inflammatory surface. Such must always be the consequences, where the application of mercury is to wait upon the departure of inflammation;

for

for the disease must not only be protracted but aggravated, if the specific power of the virus be not destroyed. And I cannot impress this momentous concern too strongly upon the minds of my readers, that delay in the cure is the general cause of all the untoward symptoms that arise out of gonorrhœa. The sedatives, the emollients, and the astringents set down by the Professor, ought to be considered as adventitious aids selected to act under the all controuling power of mercury as slip slops to James's powder, and as varieties of adjuncts are to bark. I hope to hear no more of this milk and water system: Bread pills were bad enough.

Page 88. *Of the Treatment of occasional
Symptoms of Gonorrhœa.*

The Professor says, “ as the following
“ symptoms are only occasional consequences
“ of venereal gonorrhœa, being the effects of
“ an irritation in the urethra, and therefore
“ not venereal; they are to be treated in the
“ same manner as if they arose from any
“ other cause.”

All that I shall observe upon the above opinion, is, that these occasional consequences arise from the irritating virus on the urethra, and that what began in virulent inflammation, if permitted to continue any length of time, will end in a fixed disease on the parts, after all the virus that gave cause to it is no more. In other words, I say that these consequences will always be found in an aggravated condition, where there has been a neglect of removing the original irritation, or where a gonorrhœa is left to cure itself.

Of Bleedings from the Urethra:

These, the Professor observes, always go off in the usual time of the cure of a gonorrhœa.

Page 89. Of the Chordée.

The Professor and I have already offered to the reader our differences on this opinion; I shall not revive them here; but proceed to enumerate

enumerate the remedies he lays down for the relief of the complaint. These are bleeding in the arm ; leeches to the part ; poultices with camphire in them ; steam of hot water ; opium ; mercury ; cicuta. Electricity, he says, “ may be of service.” The efficacy of electricity I am disposed to doubt in a more general sense. From what I have seen, and from more information that I have collected out of the disinterested reports of others, I am convinced, that this sublime elementary science is more calculated to enlighten philosophick pursuits, than to restore diseased parts to a state of health. From out of ten thousand trials of electricity, if we hear of a few scattered cases where patients have done well, these are not enough to authorise us to attribute the cure to the power of electricity, or to waste the time of the patient in useless project.

Page 90. *Of the Treatment of the
Suppuration of the Glands of the
Urethra.*

These diseases of the glands the Professor instructs us to treat the same as we should a venereal ulcer. “Mercury, he believes, must be given.” I shall make no comment on this, but refer my readers to what is past.

*Of the Treatment of the Affection of
the Bladder.*

The Professor suspects, “that this symptom sometimes lays the ground-work of future irritation in that viscus, which may prove very troublesome, and even dangerous, but this is only conjecture” with him; but with me it is more than conjecture. This is one of the local evils out of many more, not to mention the evils that arise from absorption, that will most certainly succeed

from neglected gonorrhœas, or from such as are abandoned to their own cure. This is one of those symptoms whose evil consequences may be so attached to us, and so deeply rooted in us, that it cannot be shaken off; that may not only attend us, but hasten us to our end. This is such an evil as is too complex for the ignorant to cure, and too important for the vain to despise, that ought to be guarded against, and not waited for, that ought to be resisted by anticipation. For the Professor, after all his parade about the harmless simplicity of gonorrhœa, confesses that, “in spite of every attempt, the affection of the bladder often continues for a considerable time, producing other sympathies in the neighbouring parts.” The cure, he says, consists in opiate clysters, warm bath, bleeding, but with caution if it arises from sympathy—leeches to the perinæum—opiate plaster to the region of the pubis—blister to the perinæum.

Page 91. *Of the Treatment of the Swelled Testicle.*

For the cure of this the Professor instructs us to bleed; foment; poultice; to apply leeches; vomits may be thought on; opiates; mercury; but the last when hardness remains after inflammation has subsided, &c. &c. &c.

It may be a matter of some curiosity, if not of importance, to be able to distinguish whether the professor is serious in the opinion, that all gonorrhœas cease without medical help; or whether he is so only when he prescribes the most important remedies that are to be found in all the whole *Materia Medica*, for the cure of the dangerous consequences arising out of gonorrhœa. If he takes up the one serious, the other must be of course a jest. If gonorrhœa cures itself, if it needs no medical help, if the most ignorant succeed in their treatment of it, why does the Professor draw forth so powerful an array of remedies? Is it not as equally

ridiculous, as it would be in a commander in chief to lead forth a whole army to destroy a guat for giving a sting?

“ It is generally a long time before the
“ swelling of the testicle entirely subsides.
“ It is still much longer before the epidydi-
“ mis comes to its natural state, and indeed
“ often years before it returns to its natural
“ size and softness, and sometimes it never
“ does.”

The reader will be pleased to mark the counter paragraph to the above from page 58.

“ A swelled testicle, in consequence of the ra-
“ dical cure in the hydrocele, does not sub-
“ side after inflammation is gone, in as many
“ weeks, as the swelled testicle, in conse-
“ quence of its sympathy with other parts,
“ does in days; and probably the reason of
“ this is, that it arises from sympathy.”

Only let men alone who set off upon a wrong theory, and they will entangle themselves. If I were invidiously to seek for contradictions, I should despair of coming ever to a conclusion.

United with the subjects of the affection of the bladder and swelled testicle, we find the new opinion on sympathy again brought forward by the Professor; if it had not been here obtruded upon us by him, I certainly should not have provoked its revival: And as I am already too sensible, how the Professor must feel upon the occasion, I would not wish in the least to be accessory to further disgrace; and much less therefore, would I aim to make so ignominious a stain indelible, by enlarging upon the theme. I will therefore only say, in addition to what I have already said, that sympathy is a corporeal effect from a mental cause, and that such authorities as South, Lock, and Johnson define it to be, the quality of being affected by the affection of another. Yet the Professor hugs his new opinions, and hugs his new idea of sympathy, as a barren woman hugs the infant of another mother; both alike soothing the infirmities of their nature by the same false and flattering illusion.

If an expression has escaped me, that may be construed personal to the professor, I desire once for all to say, that I never can mean it;
for

for the Professor has my esteem and respect.

To resist useless and flimsy innovations, to do away empty new opinions, to penetrate into the design of contradictory assertions arising out of confused ideas where I could, and to restore truth to its original pristine vigour, ought not, and could not be done with tameness; Juvenal tells us, that in such a case, *stulta est clementia*.

I shall only stay my further observations for the present. I shall persist in them throughout the Professor's work at my first leisure hours. I have already gone through ninety-three pages, observed upon, as well as my abilities and time would permit, his general system, and gonorrhœa in particular. The task may be thought by some invidious, but I will do my duty.

F I N I S.