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Enthetic Diseases

(The Young Man's Peril).

BY

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ASSOCIATION; WITNESS BEFORE THE SELECT COM-
MITTEES OF THE HOUSE OF COMMONS ON
"DEATH CERTIFICATION," "REGISTRATION
OF MIDWIVES," AND EVIDENCE LAID
BEFORE THE ROYAL COMMISSION ON
THE CARE AND CONTROL OF
THE FEEBLE-MINDED.

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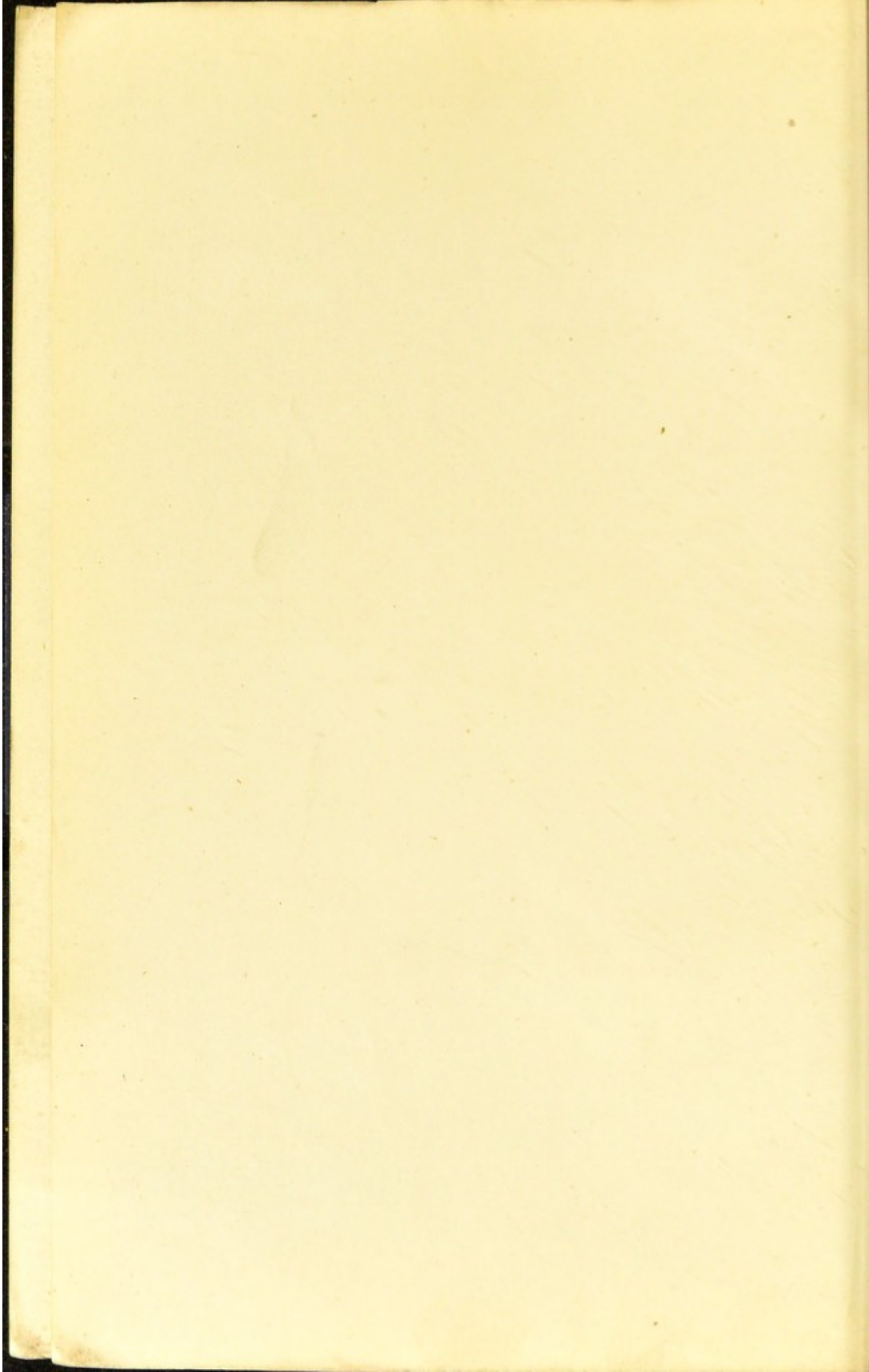
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PREFACE.

IT requires some courage to stimulate one to publish this pamphlet! If I did not think it would do some good I would not bring it out. It is my hope that it will eventually be placed in the hands of every soldier, sailor, and those about to engage in life's battles. One has seen too much disease caused by ignorance, and has found so many fathers and guardians of young men so destitute of that courage which should have, at least, shown them how necessary it is that proper warning be given to their sons, that I am encouraged to express my views upon the grave subject of enthetic disease. It is my opinion that when a young man is launched on the slippery fields of life he should be given a chart, upon which are marked, with very large red marks, all the shoals, rocks, and sandbanks which may ruin his life, his wife's life, and his children's lives. I have tried to produce a chart upon which is shown two very dangerous whirlpools. I know there are some well-meaning people, but people who are evidently more concerned with theories than with facts, who will blame me. When the public are educated up to a true conception of the deplorable conditions now existing, I feel certain the better portion will at least agree that I have tried to tackle a subject which many would like to have tackled, but that they are afraid of adverse criticism, and perhaps very defamatory denunciations! If I

come in for more than the ordinary share of calumny, well and good! No good cause was ever yet started by a majority, and it is sometimes more honourable to belong to the *minority* of thinkers. The person who is always bothered by trying to answer the questions, "What will my neighbour *think?*" and "What will my neighbour *say?*" and "What will my neighbour *do?*"—questions which, unfortunately, the average physician must put to himself—will never be a pioneer of thought or of action. He will be what the Americans contemptuously call "a mugwump," and whom we sometimes designate "trimmer" and "nonentity."

In dealing with this question of enthetic diseases—diseases which have killed and are killing, and maiming, and causing thousands of cases to come under the Workmen's Compensation and other Acts—I have endeavoured to keep clear of three marked social diseases—hypocrisy, insincerity, and smug respectability.

78 HARTINGTON ROAD,
LIVERPOOL,
January 1908.

CHAPTER I.

THERE is no doubt that venereal diseases are too prevalent in our mercantile marine, army, navy and elsewhere, and that they act a major part in rendering soldiers, sailors, firemen, and many others incapable of performing their duties. No full statistics can yet be produced to show the wide extent of the mischief, but the experience of hospitals, masters, and physicians leads one to believe that the conditions are so prevalent and dangerous that urgent measures must soon be taken to lessen the ravages of these diseases. One dominant reason for taking care of one's health is the action of the Employers' Liability Act. It is not in one's power to know whether Mr. Joseph Chamberlain, M.P., when he introduced this Bill, had it in his mind that this Act would *compel* men to keep themselves physically and mentally healthy; but this Act is really a Public Health Act. The Shipping Federation—as well as many private firms—is now carrying out, by means of its medical examiners, a strict and searching examination of the crews of sailing vessels and steamships, all those who are found defective being rejected. Here is a case where “it pays” men to be extremely careful of their actions.

The Present Amount of Venereal Disease.

The Annual Reports of the Medical Departments of the Army and Navy present us with statistics which appal the thinking man and woman. The following table gives us an insight into this sad question, and shows the actual conditions in the Army and Navy. For purposes of comparison

I have taken the years 1901 and 1905. During 1901, of 100,811 army troops stationed in the United Kingdom, there were—

1,936	admissions into hospital for primary syphilis.
988	„ „ „ soft chancre.
1,907	„ „ „ secondary syphilis.
5,794	„ „ „ gonorrhœa.

That is, 10,625 admissions in twelve months.

Of the British Army in India, of 60,838 white troops there were—

2,021	admissions into hospitals for primary syphilis.
3,921	„ „ „ soft chancre.
3,544	„ „ „ secondary syphilis.
7,303	„ „ „ gonorrhœa.

That is, 16,789 admissions in twelve months.

Of white troops stationed at fifteen stations abroad, there were admitted to hospital—

655	for	-	-	-	primary syphilis.
1,488	„	-	-	-	soft chancre.
842	„	-	-	-	secondary syphilis.
3,258	„	-	-	-	gonorrhœa.

Or 6,243 admissions.

In the Royal Navy, with 98,410 men afloat, there were—

3,293	persons treated for	-	-	primary syphilis.
2,110	„ „	-	-	secondary syphilis.
5,790	„ „	-	-	gonorrhœa.

Or 11,163 persons.

It is to be noted that the term “cases,” or “admissions,” does not mean “persons” in the Army returns. The Army figures do not include officers, but the Navy’s do. No coloured troops are included; nor are the very many complications of venereal diseases, such as stricture, inflammation of the bladder or kidneys, nerve diseases causing paralysis, or

tertiary syphilitic diseases. Broadly speaking, we may calculate, therefore, that at the very least 44,850 persons were admitted into hospital in the Army and Navy during twelve months. This is a deplorable condition of affairs; one likely to sap the strength of men and of our nation.

The following statistics are for the year 1905. Of 118,224 troops stationed in the United Kingdom,

3,234	were admitted for	primary and secondary syphilis.
1,955	„ „	soft chancre.
5,504	„ „	gonorrhœa.
	Total	- - 10,693.

Of the 70,994 white troops stationed in India,

2,535	were admitted for	- syphilis (prim. and sec.).
3,090	„ „	- soft chancre.
5,332	„ „	- gonorrhœa.
	Total	- 10,957.

In the Royal Navy, with 111,020 men, there were—

2,729	cases of	- - -	primary syphilis.
2,703	- - -	- - -	secondary „
1,174	- - -	- - -	soft chancre.
6,884	- - -	- - -	gonorrhœa.
	Total	-	13,490.

CHAPTER II.

THE FINANCIAL LOSS DUE TO VENEREAL DISEASES.

WHAT is the loss to the taxpayer by these diseases? The Director-General of the Medical Department of the Navy reports to the Admiralty for 1905 that the average number of

men sick *daily* was 3,365·53, or 30·31 per 1000 men; and that the total days of sickness in hospital and on board ship were 1,228,419. 2,653 persons were invalided, and of this number 1,719 were finally invalided from the service. It must be noticed that this sick rate is due to *all* diseases in the Navy, and not alone to venereal diseases. Still, recollecting the large total of venereal diseases, these must cause a major proportion of the sickness and invaliding and deaths.

The Director-General of the Army Medical Department to the Army Council for 1905 states, that of 240,075 British troops at home and abroad, 141,849 were admitted into hospital; 1,306 died, 2,825 were sent home as invalids, 3,700 were discharged as invalids, while 8,574 men were constantly sick. Each *sick* soldier was sick for 13·20 days, while the average duration of each case of sickness was 22·48 days. He says—"The principal causes of admission (to hospital) during the year were venereal diseases, diseases of the digestive system, injuries, malarial diseases, diseases of the skin and of the respiratory system." It is rather staggering to know that if this country had to go to war on any one day, 8,574 of her soldiers and 3,365 of her sailors could not be counted upon to fight, owing to sickness. How many more would be in poor fighting trim owing to their incubating or only recovering from disease?

The loss to the Army, Navy, and mercantile marine due to venereal disease is almost incalculable. Dr. S. Stritch, who is connected with the Army, has lately stated that the loss to the nation from venereal diseases alone, and occurring only in the Army, Navy, and Government departments, amounts to £7,000,000 yearly. If this be true—and no practical person doubts it—then the loss to the mercantile marine alone must be not less than £3,000,000 per annum. During the year 1904 no less than 257,000 men were employed in the British mercantile marine, a much greater number than the total employed in the Navy and Army.

CHAPTER III.

THE EFFECTS OF VENEREAL DISEASES UPON WOMEN
AND INFANTS.

BUT it is not only among the men that the suffering and loss takes place. Wives and children suffer, and other innocent persons. According to the annual report of the Registrar-General for England and Wales, and for the ten years 1896 to 1905, the number who died from syphilis alone was—

Males, 9,833; Females, 6,084.

As showing the terrible influence of those dreadful diseases *upon infants*, it is to be noted that of the above, 7,075 males and 5,996 females were *under* five years of age. No wonder Dr. Fournier has said: "Syphilis is the essential murderer of those young in years; it is the veritable tomb of infants; it is the cause of their death before birth, at the moment of birth, after birth, within the first week of birth, or it may await the first year. Syphilis, alcoholism, and tuberculosis constitute the triad of the contemporaries."

If, again, we wish for another illustration of the action of syphilis upon young children, we can study this from the registered deaths due to premature birth—that is, infants born before full time. In the ten years 1896 to 1905, 104,297 male infants and 81,297 female infants died because they had been born before their time. Had 104,297 boys been saved we should not hear so much about the difficulty of obtaining British sailors for British ships. But because a large number of us are so hypocritical,—specialists in

hypocrisy—because we permit ourselves to be cowed and unmanned by Mrs. Grundy & Co., because the average Britisher falsely contends that venereal diseases do not exist simply because the whole subject is tabooed, because we refuse to recognize the mere existence of these fell diseases, because of our canting hypocrisy we allow these diseases to be spread broadcast, to kill many thousands, to weaken the health and strength of many thousands, and to make many innocent suffer. Such insane action is not for the good of the British race, and if we do not put a check to our hypocrisy and cant we shall suffer even more severely than we do now.

Here are some authenticated statistics which show the evil effects of syphilis *upon babies and children*. Of 85 syphilitic mothers, 58 infants died and 27 survived. Of 165 syphilitic mothers, 145 died and 20 survived. Of 28 syphilitic mothers, 27 infants died and 1 survived. Of 414 syphilitic wives having 260 children, 141 of these died within one month after birth. When both parents have syphilis, of every 100 babies born, 68 per cent. die. Therefore it follows that if parents wish all their infants to be killed by disease, the worst plan will be to contract syphilis and to give it to their children. Truly a flattering comment upon our twentieth century of civilization, Christianity, and refinement!

CHAPTER IV.

THE EVIL RESULTS OF GONORRHŒA.

SOME years ago it was held that syphilis worked more evil results than gonorrhœa. This opinion has now been given up. Syphilis often kills the children. Now we find that

gonorrhœa often *prevents conception*. In other words, if a husband wishes to make himself and his wife sterile, he had better contract gonorrhœa, or give it to his wife, refusing any treatment.

I have often been asked—Why do respectable women suffer so strong a feeling of disgust towards females who act as prostitutes? This question can be answered by asking a few other questions. Is prostitution a respectable calling for a woman to follow? No. Is prostitution a calling which is likely to heighten the general tone of womanhood? No. Does it elevate woman generally in the opinion of men? No. Is it likely a mother of sons—whose great aim is to keep them healthy and pure—will look with kindly feeling towards those females who strive to debauch her sons? No. Is it likely that the mother of daughters will wish these to mix with or look at these prostitutes? No. Is it likely that unmarried women will look forward with any feeling of content to be married to men who have led a life of prostitution? No. Is it likely a woman will consider it a trivial matter if she is inoculated with a horrible blood poison by a husband suffering from venereal disease? No. Is it likely the wife will appreciate being made a chronic invalid by such blood-poisoning? No. Is it likely she will enjoy losing her life by such blood-poisoning? No. Is it likely she will think it a good thing to be made the victim of repeated miscarriages, and nothing but dead babies? No. Will she care to see her babies, one after another, drooping and dying from inherited syphilis? No. Lastly, to reverse the case—What would *men* say if they were called upon to marry female prostitutes? And how would they like their children to be brought up by such wives, so befouling the highest and best thing in life—motherhood? It is well to look at all life pictures and questions from both sides; and before doing so, to clear our minds of cant and smug hypocrisy. Some individuals are too busy in promulgating

—and practically trying to prove the truth of—the doctrine that “every woman is at heart a whore.” Let us take good care that women do not value themselves at the low estimate placed upon them by some males. If they do, it will then be as difficult to obtain moral women as it is difficult to meet moral men; and the result will be the outcome of the action of men. Then, they will not be honestly able to complain if they obtain that which they have sown—and asked for.

As bearing upon the effects of gonorrhœa *on the eyes of children*, in New York in one year, of 1,941 mothers with gonorrhœa, 265 of their babies suffered from that virulent eye disease—gonorrhœal ophthalmia. It is said that in Switzerland, one in every five cases of blindness is due to this cause. In 1901 there were 32,823 blind in the United Kingdom. Again, of the above 1,941 cases, 218 of the female children suffered from vaginal gonorrhœa. Dr. Spaeth found that of 90 per cent. of the female children who had gonorrhœa their mothers suffered from similar discharges. In Posen, 236 children contracted gonorrhœa by bathing in a public bath, the water of which had been infected by a woman who bathed in it while suffering from gonorrhœa. One cannot issue too strong a warning against using the same soap, washing in the same basin, using the same bath or the same towel as that used by any person suffering from a discharge from the eyes. The neglect of such advice may mean the infecting of many innocent persons, the rendering blind of many, and the throwing of such out of work, and their support by the overburdened ratepayers.

The Effects of Gonorrhœa upon Women.

It has been calculated that 75 per cent. of the male population have suffered, or do suffer, from gonorrhœa:

syphilis attacking 5 to 18 per cent. Noeggerath states that in New York city of every 1000 married men 800 have or have had gonorrhœa. Some years ago a "Committee of Seven" was appointed in New York to inquire into the prevalence and effect of venereal disease, and reported that about 30 per cent. of all venereal infections in women treated *in private practice* in New York city had been communicated by their husbands. Fournier states that in France 5 per cent. of the syphilitic wives had been infected during marriage. Morrow states that of all the married women treated at hospital 70 per cent. had been infected by their husbands. It is well known to educated physicians that a very large proportion of diseases of the womb and of the tissues near the womb are caused by gonorrhœa. Dr. Humiston has stated that 90 per cent. are so due; Price, 95 per cent.; and Pozzi, 75 per cent. I have found, by a careful inquiry, that at least 2000 women have had their womb and ovaries removed during one year alone, in the hospitals of the United Kingdom. How many have been removed in private practice I cannot state; perhaps 2000 more. Now, if gonorrhœa practically unsexes 4000 women each year in this country, and renders them so that they cannot conceive, it is easy to understand why our birth-rate is falling; and this is one cause of the decline in the birth-rate which no other person has thought of considering. It is, however, a matter of national importance.

Sterility due to Gonorrhœa.

The sterility of the prostitute class is notorious. A *post-mortem* examination of their insides readily explains the why and wherefore.

Dr. Noeggerath—whose original statement was at first laughed at by the ignorant, and by the semi-educated portion of those who should have known better—stated that of

every 100 sterile women 50 were sterile because they had suffered from gonorrhœa. Neisser places it at 45 per cent., Kehren at 45 per cent., Kammerer 85 per cent., Grunderwald 53 per cent., and Chrolack at 40 per cent. Ascher found that in 227 sterile wives, 121 had their sterility due to gonorrhœa.

The foregoing statistics refer to sterility in the woman. At one time men generally blamed the woman as being the guilty person! Now, however, we find that a considerable number of sterile marriages are due to the husbands. The complications of male gonorrhœa are gleet, stricture, inflammation of the bladder, prostate, and kidneys, inflammation of the testes and tubes which convey the fertilizing fluid from the testes to outside, and tubes. Of late years another disease has been noted—gonorrhœal rheumatism. This complaint is caused by the poison being absorbed into the system and so poisoning the blood, etc. It is generally due to neglect to obtain proper treatment. Generally, after inflammation of the testes, and especially if untreated, sterility follows. It has been calculated that in 90 sterile marriages due to gonorrhœal inflammation of the testes, 59 had fertilizing fluid which showed either an absence of the spermatozoon, or that it was weak, although present. (Azoospermia and oligospermia.) It may be instructive to here state that the spermatozoa can be readily detected when a little of the fertilizing fluid is placed under the microscope. And I think it would give good results, and prevent the occurrence of many sterile marriages, if those men who have suffered from gonorrhœa would have their fertilizing fluid examined before marriage, the parents of the bride being informed of the result. Also, it is of practical importance to know that in 1879 Neisser discovered the germ, or micro-organism—the gonococcus—which causes gonorrhœa, and that when it is discovered in the pus this is absolute proof. Generally six months is required for the complete

cure of gonorrhœa. Some 3 per cent. are incurable; while Morrow states that he knew of one case which remained infective for six years.

CHAPTER V.

ALCOHOL AND VENEREAL DISEASE.

DR. HOREL states that of 100 persons infected with venereal disease, 76 per cent. were infected when under the influence of alcohol, and Langstein states that of 169 men infected, 18 were drunk, 55 intoxicated, and 48·3 per cent. were showing symptoms of alcoholism. Poor humanity is a mixture of good and evil desires. Sometimes his will-power, or power to restrain the evil desires, and his self-control are stronger than the evil in him. In such a case he is the victor and "comes out top." But if he take alcohol in too large doses, this drug weakens his will-power for good to such an extent that it is partly paralyzed, and the prostitute—public or private—"does the rest." From time immemorial the male and female *roué* have known full well the power of alcohol to weaken will-power, self-control, self-respect, and all those high agencies which spell manhood; in fact, to weaken all those powers which allow us to belong to the class of higher humanity.

CHAPTER VI.

INSANITY AND VENEREAL DISEASES.

A REFERENCE to the annual report of the Commissioners in Lunacy for England and Wales shows the average number of males and females admitted into the asylums each year

where the cause of insanity was due to venereal diseases. This yearly average amounted to 467 males and 92 females. Intemperance was the cause of insanity in 2,349 males and 998 females. Sexual intemperance had caused 88 males and 50 females to become insane. It is now held that one of the chief causes of general paralysis of the insane is syphilis, some placing it as a cause in from 25 to 40 per cent. During 1905 in the asylums of England and Wales 9,475 persons died, and of this total 1,644 died from general paralysis. Could we induce the hospital authorities to state the *true* cause of death in all cases, we would soon obtain accurate and reliable statistics; but the hospital managers contend that if the subscribing public knew that a large amount of the disease treated was due to venereal diseases and abuse of alcohol they would withhold their subscriptions. Hence their suspicious silence!

CHAPTER VII.

THE REMEDY.

IT is still alleged that venereal diseases have existed from the earliest times, and that they will continue to exist until the end of time. I would suggest that they will continue only so long as males and females prefer disease to good health; so long as vice is preferred to virtue; so long as males and females are so temporarily or permanently obsessed that the moral laws, right thinking, and right living are to them a thing to be scoffed and laughed at.

Can Men and Women be Sexually Continent?

This is a question to which, in many cases, an affirmative answer can be given. It is one which has given rise to much

argument. The pessimist, who looks upon the black side of everything, when asked his opinion as to the abolition of prostitution, replies, "As it was in the beginning, is now, and ever shall be," and then sneaks off to do—nothing. But life is something better than a mere negation, and the sneerer is not worth much.

Some contend that prostitution is a necessary evil. Such logic—if it can be accurately termed logic—will not stand criticism; that is, *honest* criticism. No father, nor mother, nor brother—worthy of the name—will subscribe to this contention. But if they do agree to support it, then they cannot object if *their* daughters and sisters become prostitutes, and so supply that desire which they say exists, and which must be gratified. This is *the* test of all beliefs. If some uphold the necessity for sexual vice, then they must subscribe to it, and so supply the market or demand. Theirs, no doubt, is a low-grade standard; but they must support it.

A story is told of a man who said to a younger fellow, "Go and have a woman." The latter replied, "My dear friend, I have just called to see if *your* daughter is at present disengaged." Needless to say she was not disengaged, and that the father did not repeat his advice to any others. But, as I have said, the true test of a belief—a real belief in anything—is the willingness of the alleged believer to subscribe—in this case his daughters—to it. Naturally, it follows that if one prescribes some *other man's daughters*, he is a contemptible coward and blackguard; and so are the many who support "the necessary evil" theory.

Even polygamy among the married is dying out. It has practically died out among the Jews; it is dying out among the Mohammedans; while it is not "catching on" in America and in the Mormon State. In connection with the question of polygamy, those who use it as an argument in favour of sexual incontinency are really ignorant of the reason why

some tribes established it ; or, at least, why some men established it—for there are not a few primitive tribes who permit only one husband to one wife, and we know that with the higher ape, gorilla, eagle, swan, lovebird, and others these mate and have only one wife during their whole life. The primitive reasons for polygamy are two: first, to speedily increase the population; and, second, to protect the wife when pregnant and suckling. To-day we see that in primitive and progressive nations it was and is very important to have a large population. This is well exemplified by the Israelitish and the British races, which can be found almost everywhere. As regards the second reason, we know that the female in all animal life will refuse any intercourse to the male while she is pregnant, after confinement, or when suckling. Even at the early time when man made his sexual laws, he saw that a certain proportion of men would not allow their wives the same rights and privileges as the so-called "lower" animal males allowed—and to their immense credit still allow—to their females; consequently, he introduced the custom of plurality *of wives* for the husbands (not a plurality of women for men *not* husbands, be it noted). In this respect early man made a mistake—a mistake which has burdened this world with a tremendous social difficulty. Early lawgivers should have taught man sexual continence. Instead of doing so, they legislated for the wrong instead of for the right. Some primitive peoples recognized this, and therefore they introduced another plan—that is, they provided that when the wife was pregnant and suckling, *she* (not the man) was to select a female from the tribe who would be for a time only the concubine of the husband. I think this was also a mistake, and I think our actions of to-day hold it to be a social error.

Should we set up a double standard of morals—one, a low one, for men, and the other, a high one, for women? I think not. I am no advocate of the double standard of

morality. I shall be no partisan of that portion of society which holds that the man who has "sown his wild oats" is more respectable than a woman who has sown *her* "wild oats"; which contends that such a man shall be admitted into respectable society, while the woman is to be labelled "prostitute," and consigned to outer darkness; that this man is a "good catch" for a daughter, while the woman is "not fit for decent society," or that the "reformed rake" makes the best husband.

If people say "boys will be boys," and that they *must* sow their "wild oats," then I contend that their theory will not bear honest scrutiny. The "wild oats" theory fills our hospitals, our lunatic asylums, our prisons and homes for incurables. The "wild oats" shibboleth stamps the mark of degeneracy on the offspring and ruins the health of many mothers. It affects to the third and fourth generation. Therefore the "wild oats" theory is a lie, and will not bear the light of facts. Neither will the "boys will be boys" dogma. We could get just as much help out of the saying, "Idiots will be idiots, lunatics will be lunatics, thieves will be thieves, dogs will be dogs." It is a dangerous theory to advocate that a course of debauchery is a good training, and one likely to bring out good qualities in either sex. As well may we advocate a course of any other kind of vice in order to bring out alleged good qualities. Yet this is what these pseudo-advisers of "wild oats" preach. Many years ago—some 5000 or more—a great Sociologist said, "Whatsoever a man soweth that shall he also reap"; and if any man or woman think that a course of sexual or other immorality is a good moral training, and one likely to bring out the highest qualities of manhood and womanhood, then I am sorry indeed for the youth so cursed as to come under their blighting and devastating influences.

Speaking of continence, the late Dr. Sir J. Paget said—"Many of your patients will ask you about sexual inter-

course, and some will expect you to prescribe fornication. I would just as soon prescribe theft or lying, or anything else that God has forbidden. If men will practise fornication or uncleanness it must be of their own choice, and on their sole responsibility."

Dr. Sir W. Gower said—"The opinions that—on pseudo-physiological grounds—suggest or permit incontinence are absolutely false. Trace them to their ultimate basis and they are groundless. They rest only on sensory delusions—one of the many illustrations of a maxim I have often to enforce on various sufferers—"there are no liars like our own sensations."

Dr. Sir G. Humphrey said—"There are no organs so much under control as those of generation. Their functions are neither directly or indirectly in the least essential to life, scarcely even to the well-being of the body; indeed,—which is more remarkable and unusual—they are scarcely essential to the maintenance of the structure of the organs themselves, in perfect integrity."

Dr. Acton, speaking of irritability and sexual intercourse, said—"When I listen to this complaint, I have little doubt of the confession that is to follow; a confession that at once explains the symptoms! Of course, in such cases I am prepared to learn that the self-prescribing remedy has been most effective—that sexual intercourse has enabled the student at once to recommence his labours, the poet his verses, and the faded imagination of the painter to resume its fervour and its brilliancy; while the writer, who for days has not been able to construct two phrases that he considered readable, has found himself, after relief of the seminal vessels, in a condition to dictate his best performances! Still, no such symptoms, however feelingly described, should ever induce a medical man even to seem to sanction his patients continuing the fatal remedy which is only perpetuating the disease."

What a grand thing is the sovereignty of the mind over

the body—the will-power to control body power, the supremacy of the moral over the physical. W. E. Henley, the poet, who suffered terrible pain for many months before he died, was able to write—

“It matters not how straight the gate,
How charged with punishment the scroll:
I am *the master* of my Fate,
I am *the captain* of my Soul.”

What a pity it is that man and woman have not been made after the plan of flowers—in which there are no sexual disorders, and where the fertilizing agent is carried from one to the other by the wind, by bees or flies, or by gravitation. I think and hope that in the higher and grander evolution of man and woman this will eventually take place; that sexual intercourse will not be necessary for impregnation. Taking it that man's life on this earth is one of immeasurably slow evolution, occupying millions and millions of years, and that different thinkers at different evolutionary periods have described the *then existing* conditions, and pointed to a future higher type of life, we must recognize that the great Sociologist—Christ, in his teachings, and Buddha, and Zoroaster gave a great forward movement to the gradual evolution of a higher and a better life here; and a backward movement to the low idea that woman was meant by God to be a sexual toy. Let us always recognize this: that if we agree to the existence of a female prostitute, we must also agree to the presence of the *male* prostitute.

It is most instructive to note that lately Lord Kitchener has issued a Memorandum (published by the White Cross League) to his troops in India. In it he says—“Every man can, by self-control, restrain the indulgence of these imprudent and reckless impulses that so often lead men astray, and he who thus resists is a better soldier and a better man than the

man of weak will who will allow his bodily appetites to rule him, and has not the strength of character to resist temptation and to refuse to follow any bad example he may see before him."

As regards the causation of females taking to a life of prostitution, I have put forward the view elsewhere¹ that a large proportion of these are mental degenerates—that is, idiots, imbeciles, feeble-minded, epileptics, lunatics, sexual perverts, chronic inebriates, chronic criminals, or chronic vagrants. This is borne out by the statement of Mrs. Ruspini, Secretary to the Church Penitentiary Association, who passed 79,000 prostitutes under her care, and of whom 30 per cent. were feeble-minded. The police also know a good many who make enough money to "booze" with, to shirk an honest day's work—degenerates in whom the criminal, inebriate, kleptomaniac, or erotic are so strongly developed as to swamp all virtue, and to kill every wish to be self-respecting citizens. These form a stratum of degenerate humanity who have sunk to the lowest depths; a class whom one would wish to pass over in silence, but that honest thinkers know that they have been created by the misdeeds of men and women—some great law of nature having been violated. They are a phase of social wreckage which we must consider, if we wish to obtain a real cure. Those who refuse to consider them are moral cowards; and those who content themselves with calling them foul names, debase themselves to as low a level as those sexual degenerates. Medical and social science tell us that we must get at *the causes* of degeneracy, and fearlessly search for the causes. These degenerates, these derelicts, these foul sores of society are deserving of study, and just as much so as are those suffering from some loathsome disease, such as smallpox, leprosy, venereal disease, or itch. As it is the duty of the

¹ *Race Culture; or, Race Suicide?*

nightsoils-man to enter and to clean out sewers and refuse heaps, so it is, unhappily, the solemn duty of physicians to survey these poor products of diseased humanity—this scum of our civilization and Christianity. If we would but recognize that most sexual crimes are but the outcome of mental and physical disease, or ignorance of the laws of health, we would soon stand upon a firm, honest, and trusty foundation.

CHAPTER VIII.

WOULD REGISTRATION OF PROSTITUTES LESSEN VENEREAL DISEASES?

SOME Continental nations have what can be truly termed a damnable law, which allows any female to go to the police-office to register herself as a public prostitute. She is then given a book with her photo in it, and is subject to periodic examinations by an official physician. Should she be under age, her father or mother must make a statement to the police, to the effect that they have tried their best to persuade their daughter *not* to be a prostitute, but that she insists upon being one. In 1864, 1866, and 1869, the British Parliament passed an Act authorizing the police to arrest any woman, to take her before a magistrate, to have her sent to hospital for examination, and if found diseased, to be detained for treatment—provided the police could prove to the satisfaction of a magistrate that she was “a common prostitute.” This was a terrible power to put in the hands of policeman and magistrate. It is little wonder that this disgraceful Act was repealed in 1886.¹

¹ Dr. B. Nevins was the chief instrument in having this law repealed.

Registration of prostitutes, and their periodic medical examination can never be of much real value. For prostitution and venereal diseases are words meaning the same thing. It is impossible—absolutely impossible—for the one to exist without the other. Eventually every prostitute—male and female—becomes infected. Morrow, in his work *Social Diseases and Marriage*, says that in St. Petersburg 83 out of every 100 prostitutes are suffering from syphilis. In Berlin 50 per cent. of prostitutes suffer constantly, and it is estimated that 150,000 persons in that city suffer from syphilis. In New York there are 200,000 persons syphilitics, and in Paris the rate is very high. Clandestine prostitutes or “privateers” are generally more filthy than the public prostitute. Some years ago it was calculated that there were at least 15,000 prostitutes in New York; in Paris, of 30,000 only 4000 are registered; in Berlin, of 50,000 only 3,063 are registered. These statistics show that it is impossible to register *all* the prostitutes. These 95,000 have a greater power of spreading diseases than 1,000,000 smallpox cases, properly treated. It is not difficult, therefore, to believe that the mere State registration of prostitutes will work for any good. It would only increase immorality, as it would tend to make the ignorant believe that registration supplies them with clean companions.

In Vienna there are about 25,000 prostitutes under supervision, and the police surgeons state that each prostitute is infected at least three times each year. Examination does not seem to give good results, although they are examined twice each week. Lectures are given upon the grave dangers of venereal disease to students when about to leave the schools, while working-men’s clubs have a similar course of lectures.

The grinning skeleton whose true motto is Vice with disease, whispers—“There are no prostitutes in London.” More truthful inquirers fix the number at about 80,000.

The reasons for opposing registration and *medical examination* are:—

1. It is impossible to register all, or the major portion of prostitutes.

2. Registration increases the number of clandestine prostitutes, and by so doing,

3. Introduces venereal diseases into private families, and increases illegitimacy.

4. Hinders males from obtaining treatment, as the female prostitutes are given legal power to inform the police regarding any male who infects them. He therefore becomes a walking cesspool of filth and infection, and a danger to the public health.

5. Registration has given rise to blackmailing of prostitutes by the police.

6. It is impossible for an honest physician to state whether, at a particular examination, the prostitute has or has not syphilis or gonorrhœa, and for the following reasons:—

(a) It takes about six weeks for syphilis to “breed” in the system before showing any outward symptoms; all this time the person is capable of infecting. Gonorrhœa may take three or more days to show itself. No outward signs or symptoms, therefore, are present to guide the physician.

(b) Owing to the fact that the physician examines the prostitutes upon a certain day each week, they “clean themselves up” when suffering from gonorrhœa, so presenting a non-diseased appearance.

(c) It is not unusual to substitute a “clean” for a diseased prostitute for medical examination. It is almost impossible to state when the period of infection is over.

(d) A prostitute may obtain a “clean” certificate on, say, Friday, and may be infected by a male on

Saturday, and thus go on infecting all comers until the next Friday. Therefore, if any of these "ladies of the brothel" come along with their health card duly signed and dated by the physician (their photo enclosed) and present it, let no one be such an utter idiot as to depend upon it. If he do, then perhaps the later stage of the story will be told by the suffering mother and children.

- (e) No physician of any refinement can take any interest in such unpleasant, disgusting, and dangerous work. He may also be infected at any time, and so injure his own health, that of his wife, family, and other patients.

I think the above indisputable facts show that registration and medical examination can in no way allow us to truly promise any person—no matter how we protect prostitution—that they can come in contact with prostitution without contracting venereal disease.

CHAPTER IX.

WHAT MEASURES CAN WE ADOPT?

I THINK we should adopt the following rules, and supply each young man with a copy of them:—

1. Sexual intercourse is not necessary for the mental or physical well-being of man or woman.
2. Sexual intercourse has for its sole purpose the begetting of healthy offspring.
3. That any person who advises any male or female to have extra-marital intercourse be fined and imprisoned for not more than ten years.

4. That if any person following such advice contracts venereal disease, the adviser shall be subject to a further penalty of five years' imprisonment.

5. That it shall be illegal for any person to become engaged to be married, or to be joined in marriage, while suffering from uncured venereal disease.

6. That if any person suffering from venereal disease infect any other person or persons, such infecting person shall be fined and imprisoned for five years.

7. That it be illegal for any man or woman to have extra-marital intercourse with any female or male under the age of twenty-five; a penalty of five years' imprisonment for breaking such to be imposed.

8. That it be illegal for any person to employ as a wet nurse any woman who is free from venereal disease to suckle or nurse a syphilitic infant.

9. That each medical practitioner when called upon to treat any communicable or infective venereal disease, either in a male or female, shall forthwith notify the fact to the local Medical Officer of Health. Provided that if the medical practitioner knows that the infected person has sufficient money to put himself or herself under proper treatment and for a sufficient period, he need not so notify, so long as such patient remains under treatment, and is not a danger to the public health. Such notification to be treated as strictly confidential. (One, after examining the lower class of males, frequently finds they deny that they suffer from any venereal disease, even when its presence is pointed out to them! And again, a large number refuse to go to a hospital for free treatment, even when they are given a note to the hospital staff. Such persons are walking masses of putridity and a grave and fearful danger to the public health and public safety. It is with such debauchés one must recall the sad fact that these are of the class who believe that if they give their disease to a *clean* woman or child they will be cured).

10. When any person is unable to pay for proper medical treatment of any venereal disease, he or she shall receive free treatment at the cost of the local municipal authority.

11. Any physician guilty of any breach relating to notification shall be fined £50, or imprisoned for one year.

12. It shall be the duty of every person suffering from venereal disease, and knowing of the existence of the same, to forthwith place himself or herself under medical treatment, either privately or at a public hospital.

13. No prostitute shall be permitted to appear upon the public streets or parks, or at any theatre or other public place.

In connection with this part I would like to suggest that the presence in a city or town of a well-managed museum of anatomy—that is, a place where there are models and pictures showing venereal diseases—works for good. If every father or guardian of a boy would take the latter to such a place before he is launched on the “sea of life,” many catastrophes and untold evils would not occur. Not a few young medical students have been “pulled up” in time by a visit to a lock hospital and an inspection of its inmates—perhaps seen a few days before at some common hall or street dressed in gaudy grandeur; but now——! Those quack “museums of anatomy” which unfortunately exist in many large towns, and which decoy neurotic boys and men into them with the sole purpose of frightening them and extracting money from them, should be compelled to close. It is recorded that the fathers in the State of Sparta made their slaves drunk, so that their sons should be witnesses of their debauchery and disgusted with intoxication.

In England it is illegal for any person suffering from an *infectious* disease to wilfully expose himself or herself, under a penalty of £5. So says the Public Health Act, 1875, Section 126. Why not apply this to contagious venereal diseases?

By the Lepers Act of India, 1898, persons suffering from

leprosy are notified to the health authority and isolated. If leprosy, why not venereal diseases?

By the Notification of *Infectious* Diseases Act, England, every person is compelled to notify to the health authority every case of *infectious* disease brought under their notice. Why not also contagious disease?

By the Contagious Diseases (*Animals*) Act, England, 1878, every person knowing of the existence of any animal suffering from sheep-pox, foot-and-mouth disease, pleuro-pneumonia, or cattle plague must notify the police, a penalty of £20 for non-compliance being imposed.

These Acts, I think, point to the conclusion that we should have an Act passed providing for the compulsory *notification* of contagious venereal diseases, with power to detain any sufferer in hospital until cured. If it is necessary to notify a case of smallpox, and to detain such in hospital until a cure is effected, surely, in the face of the facts and figures which I have already given, it is equally important that *all* contagious venereal diseases be so dealt with. Or will the evil conditions be permitted to multiply until we lay aside our "don't-care-a-damn" policy? Other countries have taken action; why cannot we?

But it is questionable if any further Act of Parliament is necessary to make venereal diseases notifiable. Section 6 of the Infectious Diseases Notification Act, 1889, names the infectious diseases which are to be notified. But Section 7 further provides that any local authority may extend the Act so as to apply "to *any infectious diseases* other than a disease specially mentioned in this Act." Such order may be permanent or temporary, and it must be approved by the Local Government Board. Several local authorities have extended the Act to cholera, beri-beri, yellow fever, and consumption. Under the Employers' Liability Act several local diseases, such as woolsorters' disease (anthrax), lead poisoning, etc., must be notified to the health authority. If the Notification

Act were extended to include only port sanitary authorities and naval and military districts, nothing but lasting good would follow.

For my part, I cannot understand why those who object to notification and free treatment at hospital do object. Surely it is a public danger if these infected and infecting persons are allowed to roam about—more dangerous than lepers. Surely if men and women in employment have half their wages, or their whole wages, stopped when suffering, this, along with notification, will tend towards virtue. This country is now cursed with a school of false moralists and pseudo-sociologists. The “sacred bird of freedom” never screeches so shrilly as when any one proposes some practical constructive policy which this school *knows* to be right, but *says* it is wrong. To back up their own theory or shibboleth, they will sacrifice thousands of lives and permanently ruin the health of tens of thousands. This school of “don’t-care-a-damn” resemble the religious order in India whose religion consists in sitting still all day contemplating—their navel! They shout “Purity, and purity of life only!” and in the same breath denounce those who preach also purity of health. I often think they should be treated in a manner similar to that in which the captain of a ship acted to his crew. The ship was foundering; the crew, tired and depressed with ineffectual work, refused to work any longer. The captain took a hatchet and smashed in every one of the boats. He summoned the crew and read the service for the Burial of the Dead at Sea over them, and then told them that their one ray of hope was duty and work. People who will only preach do not help matters forward.

The notification of venereal diseases is carried out by the following countries:—

Clause 185 of the Canton of Schaffhausen (Switzerland) provides that “any person who when knowingly suffering from venereal disease has sexual connection, shall be

sentenced to imprisonment in the first degree for a period not exceeding three months." It will be noted this Act applies to both males and females.

In the Canton of Tissin it is enacted—"If prostitutes who are afflicted with venereal disease continue to act as such when suffering from venereal disease, they are punishable with seven days' imprisonment and a fine."

In Denmark, by their "Law for the Prevention of Venereal Diseases," April 10th, 1874, persons suffering from venereal disease are compelled to submit to treatment, and may be compulsorily removed to hospital. The patient after treatment may be ordered to report himself or herself for examination from time to time. By Article 181 of the Penal Code, February 10th, 1866, any person who has sexual intercourse, knowing or suspecting that he or she is infected with a venereal disease, may be imprisoned and sent to an industrial home.

In Norway, by Paragraphs 155 and 358 of the Civil Penal Code, May 22nd, 1904, it is enacted as follows—"Any person who knowingly or suspecting that he suffers from an infectious venereal disease infects or exposes to infection any person through sexual connection, shall be punished for a term not exceeding three years." "The same punishment shall be inflicted on any person who, as an accessory to any act referred to above, knows or suspects that the party committing the offence suffers from any infectious venereal disease, infects or exposes any other person to infection." Norway has also a Notification of Infectious Diseases Act of May 16th, 1860. In Norway syphilis and gonorrhœa are notifiable diseases.

Those who wish to study fully the action of the Norwegian laws will find a fuller reference to them in Chapters xvii. and xviii. of my work, *Race Culture ; or, Race Suicide ?*

As there is, for practical purposes, no difference between infectious and contagious diseases, it is probably lawful for

us in England to include venereal in our present Notification of *Infectious Diseases Act*. The Germans rightly speak of aerial and contact infection, thus making no difference between contagion and infection. It will be seen that in *both* cases the person is infected, the mere detail of *how* the infection was, or is carried being of minor importance.

Some countries, such as Austria, Argentina, and the State of Michigan, enact that if any person suffering from any venereal disease marry, such person shall be heavily fined. In England a wife can obtain a divorce if her husband gives her venereal disease. (See *Race Culture; or, Race Suicide?*)

CHAPTER X.

CAN ANY OTHER MEASURES BE TAKEN?

I THINK we may adopt further measures. In the present phase of our sexual morality, it is absolutely useless to contend that certain males and females can be sexually moral. We have very many men who are forbidden to marry, such as the majority in the Army and Navy, and other employments. For these, I feel that some special safeguards are needful. It must not be taken that I mean to make vice easy, or to encourage it. Quite the contrary, as my remarks above show.

In the German Navy, and in that of other nations, a "penny-in-the-slot" machine is placed on board each ship, and when the men are about to go on shore, by putting a halfpenny coin in the machine, they obtain a small box containing a number of little collapsible tubes, and one larger. The smaller tubes are termed "Varo," and the larger "Varo Ointment." Before intercourse, the ointment

in the larger tube is well smeared over the parts. After intercourse, the bladder is emptied and the end of one of the small tubes, with its contents, is gently pressed into the urethra (or "pipe"). This is allowed to remain in the urethra for some minutes. This "Varo" preparation is sold by T. Christy & Co., 4 Old Swan Lane, London, E.C. I have received much reliable information regarding it from this firm, to whom I here express my thanks. Many of the authorities speak highly of this preparation. One foreign report says—"If, after his visit ashore, any man is found to have contracted a venereal disease, it is assumed either that he neglected to take the Varo with him, or, taking it, he failed to use it according to directions; he is therefore punished." Its use in the German Navy has given wonderful results. On one occasion the marine staff-surgeon of H.I.M.S. *Moltke* ordered 5000 tubes. It has been shown that the venereal rate among the men of one foreign squadron was much less than when Varo was not used. It is not possible to give statistics as to the number of men who used Varo, as the supply of this was made through automatic machines in order to avoid any feeling of supervision in the men. In some ships the men receive special instruction from the surgeon as to how they should use Varo. As to the reduction of disease, Vice-Admiral von Amin states—"According to the results obtained from experiments made with Varo, this has proved effective in preventing sexual diseases, inasmuch as in the case of men who used it as prescribed no gonorrhœa occurred."

In his most interesting book, *War with Disease*, Dr. Maccabe, in his lectures to soldiers—a book which he dedicated by permission to the Duke of Connaught—speaks of the good results following the washing of the parts with a weak solution of permanganate of potash in water. A few crystals carried in a little bottle and dissolved in water can be always at hand. He also refers to the experiments of two

French physicians, which go to show that an ointment composed of 10 parts of calomel to 20 parts of lanoline, when well rubbed into the parts, even when twenty hours have elapsed from the date of connection, absolutely prevents syphilitic infection. What a benefit it would be to the human race if some physician discovered a serum which would protect the person from syphilitic infection, when vaccinated with such serum. But here again some would protest and contend that such medicine would "encourage vice." But many persons contract diphtheria by being dirty and by disobeying the laws of health. Would we, for these reasons, refuse such persons the help of diphtheritic serum?

I sincerely trust the time will soon come when every ship in the British Navy, every ship in our mercantile marine, and every regiment will be provided with some such remedy as Varo and calomel ointment. Perhaps some canting hypocrites will say that my advice tends to encourage sexual immorality. I yield to no one in my desire to heighten the present moral tone; but so long as human nature is as it is, in not a few, so long as we have those whom we forbid to marry, so long as a class of females act towards men as if their sole desire is to seduce them, we shall have virtue offended and moral conduct ignored.

To those who are opposed to my suggestions I put a question. Take it that to-day there are 250,000 persons in England suffering from infective venereal disease, and therefore in the position of infecting 250,000 more. Are we to allow these people to wander about spreading their disease broadcast, thus threatening the public health and public safety? If there were 25,000—nay, even one case of small-pox would we permit the sufferer to walk about infecting others? We would not. Then let us place the treatment and the prevention of *all* infective diseases under the same system, and trust that gradually all such diseases—like the "black death," surrating sickness, and leprosy—will die out.

I appeal to all interested to see what an immense boon it would be to this nation if we could lessen even the 38,607 cases of venereal disease in the Army and Navy (in 1905) to, say, 100; if we could lessen the terrible loss in days' work in the Navy from 1,228,419 days to 200 days; if we could prevent these men who are not allowed to marry from—in after-life—infesting innocent wives and innocent children. Our lives are seldom a choice between good and evil. More often we have to select the lesser evil. If it be an evil to teach men how to avoid contracting disease, then I select the lesser evil. If those who have been made sterile by suffering; if the wives who have been infected so that they cannot attain the chief yearning of their lives—motherhood: if the 13,076 infants sent to an early grave could cry out and tell us what we should do: if those who have been driven into the asylum by venereal diseases could implore us, then I have no hesitation in stating that all these would combine to pray us to use every means—moral, religious, and medical—to do all in our power to protect the greatest number.

With enthetic diseases we must act as we do with other evils. Some 60,000 persons die each year in England and Wales from alcoholic excess. Physicians advise the public to be very temperate with alcohol, and to practice sobriety and temperance. Many persons do so, but many will not. Because these do not, that is no reason why we should fail to advise men and women on the question of intemperance. Physicians advise many not to eat too much, and so avoid dyspepsia, gout, excessive fatness, and many other complaints. Because many fall lower—very much lower—than the brute creation, this is no reason why we should not advise people generally how to act. Life is an evolution in all things. It is a pity half a million persons die in England each year. We must, however, go on advising humanity what to eat, what to drink, and how to be clothed, still keeping in view the high ideal towards which all healthy

minds should work—that is, chastity, sobriety, and continence. As our civilization and Christianity are yet a long way from Perfection, and as men and women are yet but a sad mixture of good and evil, we must—at the present stage—advise men how to act in the present, and how to aim.

Let those who object to my proposals bring about the reign of *perfect* men and women! When they succeed in doing this, then my proposals fall into disuse and will not be required. Some persons, more theoretical than practical, allege that if these proposals be adopted the present conditions of immorality will become worse. The question, stripped of all its questionable coverings, is simply this: there are some hundreds of thousands of males and females suffering from enthetic disease; they are a danger to the public health and to each individual, baby and aged—how are we to deal with them? By working up a false—very false—modesty; by cheating ourselves with the false but seductive allegation that because we hypocritically agree not to mention this painful question, it therefore does not exist? Or by honestly and fearlessly tackling it? Which?

I wish it to be understood that I am in no way pleading for the male and female prostitute. I plead for quite the other side—for those who have suffered, or may suffer, from enthetic disease, which has driven, or may drive, them into the asylum; for the infants who have been, or may be, killed; for the mothers who have been infected by husbands; for the husbands who have been infected by wives; for the many men and women rendered sterile; on behalf of the many human wrecks and derelicts, so weak that they *must* fail in life's battle—weak in mind and body, and for the many rendered blind by unnecessary suffering. As elsewhere stated, I am a strong believer in evolution, and that ultimately this evolution will, if we so act, be from evil to good. If we adopt and carry out a practical religion composed of a religion of cleanliness,

a religion of morality, and a religion of faith and hope, then mankind cannot fail. Did I not believe in this, and did I think my proposals for dealing with enthetic disease would not lessen the accursed evil, but would tend to increase it, I would not have brought them forward.

A final reference to the French Army, where a rigid system of prevention exists, tells its own tale. In 1902, this army had 485,207 men in the home and 77,185 in the foreign service. In the foreign service preventive measures were not enforced, and with devastating results:—

HOME SERVICE (FRANCE).

Syphilis	-	3,024	persons,	or	6.2	per	1000	men.
Soft chancre	-	1,071	„	„	2.2	„	„	„
Gonorrhœa	-	8,722	„	„	17.9	=	26.3	per 1000.

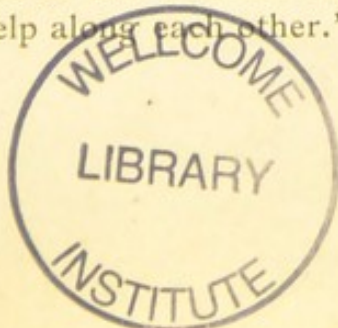
FOREIGN SERVICE.

Syphilis	-	1,219	persons,	or	15.8	per	1000	men.
Soft chancre	-	1,209	„	„	16.7	„	„	„
Gonorrhœa	-	2,986	„	„	38.7	=	71.2	per 1000.

The French statistics refer to persons, and include tertiary syphilis; the English statistics do not.

“The great thing in all military service is health, and you will agree with me that it is easier for an officer to keep men healthy than for a physician to cure them.” (LORD NELSON, March 11th, 1804.)

“If any little love of ours
 May make a life the sweeter;
 If any little care of ours
 May make another's fleeter;
 If any little help may ease
 The burden of another;
 God give us love and care and strength
 To help along each other.”



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