

**Observations on the treatment of the venereal disease, without mercury /  
by G.J. Guthrie.**

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TREATMENT OF VENEREAL  
DISEASE WITHOUT MERCURY

G. J. GUTHRIE

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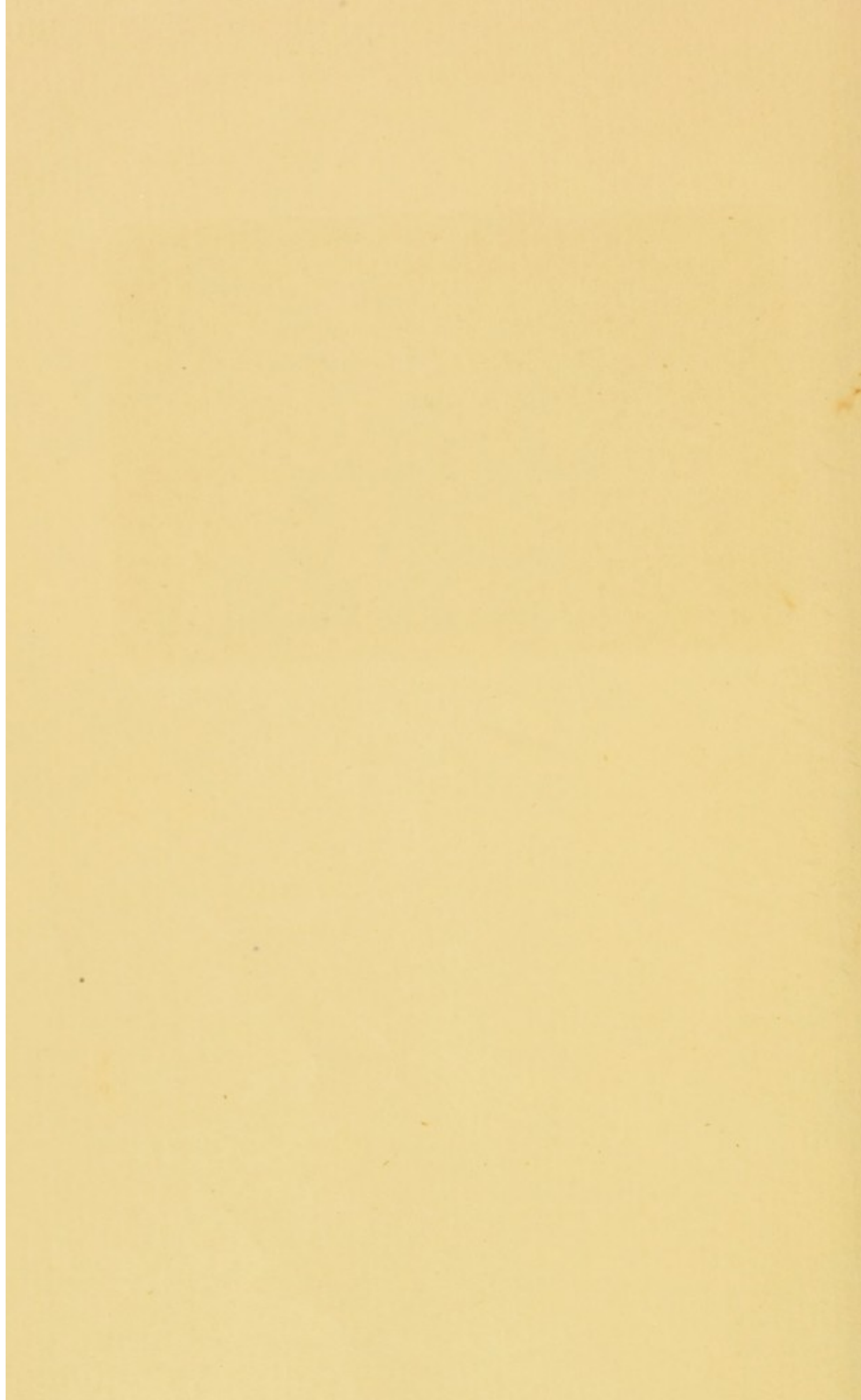
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and other circumstances, therefore, which might be mentioned, I have been induced to consider chemical remedies as palliatives only, and to explain their acknowledged good effects even in this way, rather upon their general than their chemical operation; but this opinion, as well as the others advanced above, I submit to the medical world with the greatest deference.



*OBSERVATIONS*  
ON THE  
TREATMENT  
OF THE  
VENEREAL DISEASE,  
WITHOUT MERCURY.

By G. J. GUTHRIE, Esq.

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WESTMINSTER INFIRMARY FOR DISEASES OF THE EYE,  
LECTURER ON SURGERY, &c.

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*Read June 24, 1817.*

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**T**HERE are no diseases to which the male sex is so very obnoxious as those of the sexual organs, and there are none which have more occupied the attention of surgeons; yet there is not a subject in surgery of equal importance, on which less has been written since the time of Mr. Hunter. We find that those who have had the greatest opportunities of acquiring knowledge, have for the most part refrained from communicating to the public the results of their observations; and that this has arisen rather from the difficulty of the subject than from its being so thoroughly understood as to re-

quire no comment, will be immediately acknowledged by every one of discernment and experience. In offering a few observations on the treatment of diseases acquired through promiscuous intercourse, I wish I could think they would elucidate a subject beset with so many difficulties ; but the more I consider in which way this may be accomplished, the greater I find the obstacles to be surmounted, except I could at once adopt the opinions of a French anonymous, but very ingenious author \*, “ that there is not, nor ever was such a disease ;” but to this opinion there are equally insurmountable facts to be opposed. Certain however we may be in this subject of intricacies, that the venereal disease has, within these few years, totally altered in many of those properties and effects, which are called specific ; or that the greater part of the opinions which have been commonly entertained are erroneous.

In offering these remarks, I beg to be considered as merely giving a few slight sketches of opinions and facts which may be hereafter confirmed, filled up, or even abandoned, as circumstances and further observations may render necessary, and I shall confine myself as much as possible to facts, and enter as little into the consideration of opinions, that are well known and usually entertained.

\* Sur la non-existence de la Maladie Vénérienne. Paris, 1811.

On the continent in general, little attention is paid to the appearance of primary sores : if a man have had a suspicious connexion, followed by ulcers on the glans penis, or prepuce, or even a gonorrhœa, he is at once declared to be infected with the venereal disease ; but this does not lead in general in Italy, or in the south of Europe, to the exhibition of mercury or any other specific. In France, and particularly in Paris, the contrary is the general practice : the patient is placed on the use of the oxymuriate of mercury, and after taking about thirty-two *portions*, in half doses, twice in the day, which generally occupy the same number of days, he is considered free from disease, and this will in most cases be true in all kind of sores which have originated from sexual intercourse ; but if the ulcers should not heal in this period, or secondary symptoms supervene, he frequently continues the medicine for an unlimited time. In doing this, the Parisian surgeons are however acquainted with a fact, which has, until very lately, been denied in England, viz. that every kind of ulcer is curable by common means, and M. Cullerier, the first surgeon in the Venereal Hospital at Paris, demonstrates the possibility of doing so every year to his class ; but, after the ulcers have healed, he puts each patient through the usual course, to prevent secondary symptoms.

Lagneau \*, the latest French author who has

\* Exposé des Symptomes de la Maladie Vénérienne à Paris, 1815.

written on the venereal disease, although he acknowledges gonorrhœa may have a different origin, still endeavours to prove the identity of gonorrhœa and chancres in the greater number of cases as syphilitic affections, from the circumstance of several females having been infected by the same man with both complaints, and the same occurring in several males from communication with one woman, and he inculcates in consequence the propriety of treating them by mercurial preparations. In Great Britain, they are usually considered as distinct diseases; but in whatever way we are disposed to view the subject, it is hardly possible to reconcile the different facts which have been adduced, without admitting that ulcers will arise on the penis from the matter of gonorrhœa; that gonorrhœa will in turn be caused by the matter of these same ulcers, and that both occur in consequence of promiscuous or uncleanly intercourse. That many of the ulcers produced in this manner will occasionally assume every character of chancre, and cannot be distinguished from it, I am perfectly satisfied of, from repeated observation; but I am equally as certain that a gonorrhœa in men, with the worst appearances and symptoms, can, and often does, arise from irritating causes common to parts free from any specific disease or poison, is not distinguishable from one that has arisen from promiscuous intercourse, and that both complaints are curable in the same way and without mercury. It may be asked, can gonorrhœa, or the ulcers resulting from the matter of

gonorrhœa, produce symptoms of constitutiona derangement? The evidence of authors is at variance on this subject, and I am inclined to believe, as a general rule, that they do not; although I am by no means disposed to affirm, that they cannot, under particular circumstances of constitution, produce such symptoms; but in allowing that they do sometimes follow, I am much inclined to believe, that they become serious only in consequence of the improper exhibition of mercury; and it is from the cases that have made me allow, that secondary symptoms, such as inflammation and ulceration of the tonsils, and eruptions on the skin, do follow gonorrhœa, that I have also drawn this inference.

In the British empire, surgeons, so far from confounding these complaints, have on the contrary been long accustomed to make distinctions between the different kinds of ulcers, to which the sexual organs are liable. Mr. Hunter endeavoured to point out the ulcer which he supposed to possess specific qualities, and to be the cause of what are called the secondary symptoms of syphilis; and since his time the characters he has given have been supposed to be truly diagnostic and infallible signs of a disease that required a course of mercury for its cure. His opinion has indeed so far regulated the conduct of practitioners in general, that the greater or lesser resemblance of sores to the assemblage of appearances he has described,

has decided whether a course of mercury was or was not necessary. It having been taken for granted that mercury was the only cure, that a sore possessing these characters must contaminate the habit generally unless it were prevented by the exhibition of the appropriate remedy, and that it could not be cured without it. That this was, indeed I believe, is the opinion of the most eminent surgeons in the empire, will not be denied, and I am acquainted with *none* of whose opinions records are preserved, either in their writings or by their pupils, with the exception of Mr. Abernethy, who do not allow, even if they do not support this doctrine.

Although it was supposed that a chancre was the true syphilitic ulcer, when possessing the properties I have mentioned, it was allowed, and the oldest records of surgery confirm the fact, that many other kinds of ulcers arise from promiscuous intercourse, which do not require mercury for their cure. Attempts were then made to distinguish these also; and Mr. Abernethy, Mr. Carmichael, and others, have been very successful in their endeavours. But the matter did not rest here; reference was not made alone to primary ulcers; the different secondary symptoms were also considered, and attempts again made to distinguish those resulting from each particular kind of ulcer. In this manner several diseases, supposed to depend upon different poisons, have been described, which, if they did

actually exist, would be much more dangerous than syphilis itself, which all agree in thinking curable by mercury properly exhibited, whilst the other complaints are, at the same stage of the disorder, aggravated by its exhibition.

In consequence of these opinions, it became desirable to ascertain, at an early period, whether an ulcer was a chancre or not; and many surgeons prided themselves on their peculiar talent in distinguishing those ulcers, which absolutely required the use of mercury for their cure, from those that did not; but the value of this prescience will be more duly estimated, now that it has been ascertained that every sore, of whatever description it may be, will heal without its use, provided sufficient time be granted, the constitution be good, the patient regular in his mode of living, and that attention be paid to cleanliness and simple dressing, and to keep the patient in a state of quietude.

During the last eighteen months in the York Hospital Chelsea, Mr. Dease, Dr. Arthur, Dr. Gordon and myself have been in the habit of treating all cases of ulcers on the penis, whatever form or appearance they might have, by simple mild means, that is, by dry lint, or ointments or lotions for the most part not containing mercury, in order to obviate the objection that might be made to the application of it in any form; and of near one hundred cases which have been treated in this

manner, all the ulcers healed without the use of mercury; and among them there were of course many of every description, from the common ulcer, without excavation or induration, to the solitary ulcer possessing the true characteristics of chancre. Since Mr. Rose of the Guards began to treat his people without mercury, and the practice was adopted at the York Hospital, it has been followed at several of the hospital stations, at Dover, Chatham, and Edinburgh, and in different regiments at home and abroad, especially the 57th and the staff corps of cavalry in France. From these hospitals I have seen the reports of near 400 cases more, which have been treated with the same result as far as regards the cure of primary ulcers; each ulcer appears to have run a certain course, which, as to extent, was much the same as in one of the same appearance where mercury was supposed to be necessary; and at an indefinite period of time, to have taken on a healing action, and in the greater number of instances, skinned over rapidly, leaving a mark or depression shewing a loss of substance. With us, where the ulcer had the characteristic appearances of chancre, dry lint alone was generally applied to it; where these signs were less prominent, a variety of applications were used; but there were a great number of sores both raised and excavated, on which no application made the least favourable impression for many weeks. They did, however, yield at last to simple means, after remaining for a considerable time



nearly in the same state, several of them having become sores of a large size previous to, or in the first days after their admission. If they were ulcers without any very marked appearance, and did not amend in the first fortnight or three weeks, they generally remained for five or seven weeks longer; and the only difference, in this respect, between them and the raised ulcer of the prepuce was, that this often remained for a longer period, and that ulcers, possessing the true characters of chancre, required in general a still longer period for their cure, that is, from six, eight, to ten, twenty, and even in one case twenty-six weeks, healing up and ulcerating again on a hardened base. Those that required the greatest length of time had nothing particular in their appearance that could lead us to distinguish them from others of the same kind that were healed in a shorter period; neither were any of these ulcers followed by a greater number of buboes, nor did they suppurate more frequently than in the same number of cases treated by mercury; on the contrary, the ulcers were not so frequently, on the average, followed by them, neither did they so often suppurate; but this may also be attributed to the anti-phlogistic means employed both generally and locally for their relief.

The fact then of the possibility of curing every kind of ulcer on the genitals without mercury seems to be fully established; but the question of

time is very important, for I have every reason to be certain from former experience, that almost all these protracted cases would have been cured in one half or even one third of the time, if a moderate course of mercury had been resorted to after common applications had been found to fail; and I have reason to think, from the treatment of other cases, that the duration of many of them might also have been shortened by the regular exhibition of cathartic medicines combined with sudorifics.

The great question however is, were these people, whose ulcers were healed under this treatment, more liable to secondary symptoms than if they had been treated by mercury? According to the opinions commonly entertained, there ought not to be a doubt on the subject; but these opinions have been formed rather on what it was supposed must follow, than on what has been actually observed to follow. From the nature of the service, it has not been possible for us to trace with sufficient exactness the whole of the persons that have been treated in the York hospital, although many remained for several months under observation; but of the whole treated, only six cases have been noticed in which symptoms strongly resembling those of syphilis made their appearance, although it is possible slighter ones not requiring medical assistance may have occurred. Of these six cases, two had ulcerated throats, combined with eruptions. In one, the papular eruption

appeared before two ulcers, one a raised ulcer of the prepuce, the other a chancre on the corona glandis, had healed; one had a syphilitic leprous eruption, and being a private patient was cured by mercury and the decoct. sarsaparillæ. Another of the same description was cured without either of these remedies.—Five of the six, then, were cured by simple means, such as cathartics, antimonial, sarsaparilla, and the warm bath, and one by the assistance of mercury.

In none of these cases were the bones affected; it is but proper, however, to remark, that several cases were admitted during this period, in which a few mercurial pills had been taken, and the mouth not been affected, and in which the primary symptoms were followed by eruptions both papular and scaly, by ulcers in the throat, by nodes, and in one case by inflammation of the periosteum covering the bones of the nose, and ulceration of the septum nasi, although mercury was resorted to for its cure; but these cases as well as many others of disease in which mercury had been frequently or irregularly used, although cured, are not included in these observations, as the exhibition of even a small quantity of it in the first instance, might be supposed by some to have a certain degree of influence on the symptoms which subsequently appeared. Mr. M<sup>c</sup>Leod in the hospital at Dover, out of fifty cases treated without mercury which he has been able to keep in view, has not

had a larger proportion of secondary cases than I have. Staff-surgeon Murray, and Mr. Evans of the 57th regiment, and Mr. Brown of the staff corps of cavalry, have been equally successful in France. In the course of twelve months they treated 134 cases, and the proportion of secondary symptoms to the whole number has been under a tenth, and of the same description as my own. In Edinburgh, the result has, in 200 cases, been the same; indeed it has been so generally uniform as far as I am acquainted, that we cannot doubt that the proportion of secondary cases of syphilis is infinitely less than is commonly supposed; but it is in all probability something greater than the preceding remarks would point out, from the cause I have assigned. It appears singular that in the secondary cases, the symptoms should all have been of a mild nature, in two instances only affecting the bones. Some of my friends, of great talents and experience, have been induced from this to suppose, that the greater severity of symptoms, which are frequently met with, have been caused by the exhibition of mercury in the first instance, which aggravated the constitutional disease. I am rather disposed to attribute their mildness to the antiphlogistic means resorted to, on the secondary symptoms first shewing themselves; because the situations I have filled have afforded me many opportunities of seeing persons suffering from the primary and secondary symptoms at the same time, where they had not taken any medicine to miti-

gate or impede the progress of the disease, and these were apparently running through their several stages until checked by mercury.

If we refer to Dr. Fergusson's Paper on the Venereal Disease, in the Fourth Volume of the Transactions of the Society, we shall find it stated, that in many cases in which the Portuguese certainly gave no mercury for the cure of primary symptoms, the secondary ones run their usual course even to the loss of the bones of the nose; and I am very willing to confirm a remark he once made to me, that there were more people to be met with in the town of Lisbon who had suffered that mutilation, than in any other he has seen of the same size; we cannot then doubt that secondary symptoms of the most serious nature will occasionally follow in particular constitutions.

The Portuguese, in treating all cases of ulcers without mercury, did only what we have been lately doing, and with nearly the same success, suffering considerable delay in the cure of the primary ulcers, and meeting with few cases of secondary symptoms in proportion to the total number treated. It ought, however, to be remarked, that ulcers of a mild character are much more prevalent in Lisbon than in London, because the lower classes of people, and especially females, have an abhorrence of cold water applied to the sexual organs. But independently of this, Dr. Fergusson

supposed they did not suffer from secondary symptoms, as they ought to have done according to the ideas we then entertained, because the venereal disease was mitigated by reason of a general and inadequately resisted diffusion of it among them, in consequence of their simple mode of treating it. There is not, however, any more solid foundation for this opinion, which has I am aware made a strong impression on many persons in England, than there is for that which is commonly entertained that the disease is more virulent in Portugal than in Great Britain. On this point I can also only agree with Dr. Fergusson to a certain extent. I do not think the disease which the troops contracted in Portugal, was in the slightest degree more violent than the same kind of complaint at home, neither do I place the least reliance on what has been said by others about a distemper called the Black Lion of Portugal, which I do not believe exists; but I perfectly coincide with him in opinion that the change from the climate of Great Britain to that of Portugal in the summer, with the different mode of life, does act most powerfully on our northern constitutions, and disposes strongly to inflammatory affections. It is this that rendered the same kind of wounds more dangerous to the British soldiers than to the natives, and it was to this disposition, increased by the greatest irregularity of conduct, and often by intemperance, a vice the natives are not addicted to, that we were indebted for the mutilations

which ensued from the venereal disease. If the persons affected had been managed in the manner he has informed us he treated his friend after the battle of Vimiera, the result would have been, and was in many instances very different; but in many cases of this kind, from the strong tendency to gangrene, which is great in constitutions of this description in warm climates, mercury, bark and wine were unfortunately resorted to, instead of bleeding and the most vigorous antiphlogistic treatment, and the part affected was destroyed; but I have seen the same thing happen in several hospitals both civil and military even in England. I write on this subject with confidence, because I was with the army during the whole war in the Peninsula, and had for several months together the superintendence of the hospitals in Lisbon, at a later period than Dr. Fergusson alludes to, and when this disease was one object of my particular attention.

I do not then think Mr. Carmichael's opinion, as to the secondary symptoms peculiar to the phagedænic and sloughing ulcer, receives any support from what occurred to the troops in Portugal; because it did not appear that either of them following sexual intercourse were dependent on the cause which produced the ulcer. Where many men have had intercourse with the same woman, they have not all had the same complaint, although one of the ulcers so originating has become phage-

dænic or sloughed; neither has the same woman herself suffered from this distemper; indeed the nature of an ulcer of either kind must, after a short time, effectually prevent any intercourse, and we often find, that their peculiar characters only appeared after the ulcer has existed for several days. I firmly believe also, that in the greater number of cases of sloughing ulcer, where mercury is not given, no secondary symptoms would appear: and in those cases in which they did appear, I apprehend they would be equally dependent on the state of the constitution, both as to the mode of cure and their destructive characters. In other words my observations lead me to conclude, that these ulcers do not depend upon a specific poison, but on the state of the constitution under particular excitement, and that when secondary symptoms do occur, they are not dependent on the state of the ulcer; although I am ready to admit, that in a constitution where an ulcer will rapidly become phagedænic, the secondary symptoms, when they do occur, may be different to a certain extent from those that follow more simple ulcers, in a healthier habit of body.

An officer, in the years 1800 and 1801, suffered severely from almost all the secondary symptoms of syphilis, such as sore throat, eruptions, and nodes, and recovered under the care of the late Mr. Rush. In the year 1808, he landed with his regiment in Portugal. In April 1809, he con-



tracted, for the third time, an ulcer on the penis, but being obliged to move with his corps he found, at the end of the fourth day's march, that it was inflamed, red, painful, and swelled to thrice its natural size, altogether threatening the loss of the part: but from which misfortune he was saved by perfect quietude, and the most vigorous antiphlogistic measures. Whilst the army were in the lines in front of Lisbon, he again contracted an ulcer, which he concealed, until the increase of the disease obliged him to apply for advice, when he was ordered down to Lisbon. The penis was now in the same state as in April 1809, but instead of resorting to the same means of cure, he rode 40 miles into Lisbon without any delay; the consequence was, the penis sloughed. He underwent several courses of mercury, but the ulceration of the penis could not be induced to heal, his health decayed, his throat became sore, and a swelling took place on the back of the hand and on the foot. He was sent to England, but in vain. He lost by ulceration the remainder of the penis, with part of the hand and foot, and at last died from ulceration of the throat, worn out by disease. His military friends said that he died of the Black Lion of Portugal; but it was clearly from the improper treatment in the first instance of a simple disease, that these dreadful consequences were induced; and I have no doubt they would have been brought on at the former period, if he had been treated in the same manner.

Having made these remarks upon the cure of diseases contracted by promiscuous intercourse, without mercury, and shewn that they depend upon the state of the constitution for any peculiar malignancy, I may be permitted to revert to a former period when the same class of people were cured of the same diseases by mercury: that is, between the years 1801 and 1809, when surgeon of the 29th regiment, and I rely much on the knowledge acquired in this period, because the regimental surgeon possesses advantages as to ascertaining facts which are not to be met with in any other walk in life. The persons affected are completely under his controul, he can do what he pleases with them without restraint, and he has them under his observation for a number of years, certain that they cannot have a change of opinion, and act contrary to his wishes. In the period to which I have alluded, a great number of persons afflicted with this disease came under my care, they nearly all underwent a moderate course of mercury, provided the ulcers did not assume a healing appearance at the end of a fortnight or three weeks, and I very seldom had a case of secondary syphilis, not even in those who were occasionally from under my inspection. I am not aware of having ever discharged or lost a man in consequence of it, and the worst case I recollect is now a coal-heaver in London, having been discharged the service, on account of a fracture of the arm, and a wound of the scrotum at the battle of Roliça.

Later observation has proved, that a great number of these patients would not have had secondary symptoms, if mercury had not been exhibited ; it cannot then be supposed that the mercury prevented their occurrence ; but if it be not satisfactory on this point, it goes a great way to prove what is almost as interesting, viz. that mercury properly exhibited is not the cause of all the evil which in many cases is attributed to it ; for if it were, these people must have given proofs of it, as every case which did not yield to simple means in the course of a fortnight or three weeks, was put upon the use of mercury. If indeed a moderate course of mercury, nay a few pills, could produce all the symptoms which are frequently supposed to arise from it, there are few of us who have lived in warm climates, where nearly all have taken it irregularly for one disease or other incidental to them, that would not be living proofs of it, while the contrary is well known to be the fact. Whether an insufficient course of mercury is more productive of secondary symptoms than no mercury at all I cannot say ; but it appears to me, that it is only where mercury is persisted in after it has evidently ceased to do good, when it disagrees with the constitution, or when it is exhibited at an improper period, or very irregularly, the patient being exposed to wet and cold, that it produces those symptoms usually supposed to depend upon it. The fact I have stated as to the non-occurrence of secondary symptoms in regimental hospitals, where

all doubtful cases were treated by mercury, is so positive, that I am certain no regimental surgeon of ability will be found to contradict it; that they did sometimes occur is true, but it was only when the troops were moving and under irregular management that they were numerous, and then only in the general hospitals, where all the stragglers and all the bad or protracted cases are collected. In the half-year ending the 24th of June, near 1400 cases of primary symptoms were treated in the army in France by mercury, and in this period only 14 cases of secondary symptoms occurred. It may be said, many cases had not time to shew themselves, but then it must be recollected that all those of the preceding half-year, which required the same length of time, are included in this number, and render the calculation as correct as any computation of the kind can be. In six regiments in one district in England, 521 cases were treated in 15 months by mercury, and ten cases of secondary symptoms appeared, so that the true average proportion will be between the two, or 1 in 75. I by no means, however, wish to be understood as supposing mercury to have a good effect on all primary sores, possessing or not possessing specific characters. I am perfectly aware of its inutility in many cases, and the two following, which have lately occurred to me, would attest the fact, if the records of surgery were not already sufficient.

A gentleman perceived, after a suspicious con-

nexion, a sore at the orifice of the urethra and two others near the frænum. For these he rubbed in mercurial ointment for five weeks, when his health deteriorating, he applied to me. I told him the two sores near the frænum would heal in a few days ; but that the sore at the orifice of the urethra being dependent on situation would not heal for four or five weeks more. As his mouth was affected, I advised him to omit the mercury, and await the result. He followed my advice, and under mild applications the sores healed.

A soldier contracted an ulcer on the prepuce, and came under my care in October, 1816. At the end of five weeks, the ulcer continuing, I put him, at his earnest entreaty, on the use of mercury ; his mouth soon became sore, but no amendment took place for several days in the ulcer. Three weeks after the mercury was left off, other sores of the same nature appeared ; but all soon healed, with the exception of one which remained stationary. The man was now satisfied mercury would not cure him, and he waited patiently the event of his treatment, until the 18th of January, when he was discharged perfectly well.

In regard to secondary symptoms, it appears that they occur after primary ulcers which have not been cured by mercury ; and that they do also occur after a well regulated course of mercury, there is no man of experience will I believe deny.

Indeed Mr. Hunter, whose accuracy in matters of fact will not be disputed, has left us through his commentator, Dr. Adams, a most interesting case of this nature, where the disease not only affected the first, but also the second order of parts, although mercury was each time properly exhibited for its cure. This case is given as explanatory of Mr. Hunter's doctrine, that if the disposition for the disease be formed, mercury cannot cure it, until it come into action; which, in plain language, means nothing more, than that the disease cannot be prevented in certain constitutions from running its own course, when it may at last be cured.

Now this part of the doctrine that the disposition cannot be cured until formed, and in action, is denied by many of Mr. Hunter's most enthusiastic admirers; but there is this difficulty on the subject, that we are perfectly uncertain, when a disposition has been formed, if such a thing do ever occur; and it is not a fair inference to conclude we have destroyed it, because it never shews itself in action; it is on the contrary more rational to suppose, that there never was a disposition formed at all. This conjecture may also be more reasonably entertained, now that we are aware the greater part of these primary ulcers, which were usually supposed to be the original cause of this disposition and action, are not followed by any such effects, except under particular circumstances, with which we are as totally unacquainted as we are

with the reasons why one man on pricking his finger in dissecting shall have a chain of abscesses to the axilla, indicating every appearance of being infected by morbid matter, whilst half a dozen others shall in no way suffer, although exposed to the same injury, precisely at the same time, and in the same way; or, why a person, although continually exposed, and under circumstances where such an effect might be reasonably expected, should, perhaps, suffer but once or twice in his life; or why, at another time, he shall suffer in the same manner from the prick of a clean needle through a leather glove, which cannot be supposed to convey any infectious matter.

If we refer to the works of Mr. Hunter, Mr. Abernethy, Mr. Carmichael, and to the recorded opinions of Mr. Pearson and others, we shall find instances of diseases arising from accidental and constitutional causes but without any kind of primary ulcers; indeed instances are not wanting of their having arisen without any sexual intercourse having ever taken place; yet these diseases so much resembled the secondary symptoms of syphilis, that it was only by the history they were supposed not to be syphilitic.

If we inquire how opinions are now formed concerning the secondary symptoms which resemble syphilis; whether from appearances or history, and what is the object of the inquiry, I believe

we shall not find a surgeon in London who values his own opinion, will venture to give one on appearances alone: all refer to history, and the object of that to both patient and surgeon is generally to ascertain whether the use of mercury is to be recommended or not. If the history be truly syphilitic according to our notions of cause and effect, mercury is ordered on the supposition of its being the only specific, although it has too frequently disappointed us. If we find, with the very same appearances or nearly so, that the patient has gone through several severe courses of mercury, it is very properly supposed not to be equal to the cure, or that the disease is mercurial, and sarsaparilla, warm bathing, &c. are substituted. If it arise from constitutional causes, and no syphilitic taint can be traced, even at the distance of half a dozen years, a mixed kind of course is generally resorted to.

It may be said that Mr. Hunter's supposed unerring sign of the disease in all its symptoms being progressive, never retrogressive, except mercury be used, is diagnostic of syphilis; but I do not believe this to be a fact; indeed I have already said, all these symptoms are curable without mercury; Dr. Fergusson has given proofs of it in a country where none is used, and where venereal diseases are supposed to be most prevalent; and as the same thing has been recently done in



Great Britain and France, I may be excused arguing the point, because it is simply a question of fact. I deny it; but I by no means deny, on the contrary, I affirm, that in all obstinate cases of this description, after the disease is fully formed, that is, after the inflammatory stage has passed by, mercury, so long as it produces a beneficial effect, is the remedy I would use in preference to all others; but the moment this good effect was no longer progressive, that instant I would abandon it until the remedy ceased to exert an improper influence on the constitution, when I might, under certain circumstances and when a change was necessary, resume it.

If we refer to cases of the secondary symptoms of syphilis, pseudo-syphilis, or the cachexia syphiloidea, we find that in all a degree of constitutional derangement exists, producing symptoms so much resembling each other as to render the adoption of a mode of cure dependent on the history of what has been already done; may we not then be induced to suppose that neither of these states of disease depend on a specific poison circulating in the blood, and exciting particular parts into diseased action, but on a particular irritation dependent more on the state of the constitution than on the nature of the offending cause? It is allowed by all that the secondary ulcers of syphilis, as they are called, cannot produce primary

ones; a proof that the nature of the disease is changed, and that the primary and secondary disease are two distinct things.

As the irritation of a prick in the finger, only produces abscesses and general derangement when the state of the constitution is not good; as derangement of the digestive organs alone may produce in particular cases constitutional symptoms of disease resembling syphilis; as the irritation of a transplanted tooth may do so in the same manner, so am I disposed to believe that an ulcer or syphilitic chancre produces secondary symptoms only in particular states of the constitution: but what that state may be, or in what it may differ from a state of health, would be as difficult to describe as in any of the other instances to which I have alluded.

Mr. Hunter has said, "the venereal matter, when taken into the constitution, produces an irritation which is capable of being continued independent of a continuance of absorption, and the constitution has no power of relief, therefore a lues venerea continues to increase." In adopting then the opinion of secondary symptoms occurring from a peculiar irritation in the constitution, I am not entertaining a new theory, I am only objecting to that part of the old one, which supposes the constitution is unable to recover itself under any cir-

cumstances without the aid of mercury; and I do so because I have had proof of it in many instances. But I would by no means imply that it either can or does in every instance: on the contrary, I object only to the opinion of a specific virus, absolutely requiring a specific medicine, and not to the remedy itself. Let us look upon it in the venereal disease as we regard it in other diseases, to be used only in certain cases, when it agrees with the constitution, and then with moderation and prudence, and we shall hear but seldom of the bad effects which are now so common after its exhibition.

That I may not be misunderstood in the object of this paper, I shall take the liberty of recapitulating those points on which I wish the attention to rest, as the present result of the experiment.

1. Every kind of ulcer of the genitals, of whatever form or appearance, is curable without mercury. This I consider to be established as a fact, from the observation of more than 500 cases which I am acquainted with, exclusive of those treated in the different regiments of guards, and which occurred in consequence of promiscuous intercourse.

2. Secondary symptoms, (and I exclude trifling pains, eruptions, or sore throats,) that have disappeared in a few days, have seldom followed

the cure of these ulcers without mercury, and they have upon the whole more frequently followed the raised ulcer of the prepuce than the true characteristic chancre of syphilis affecting the glans penis.

3. The secondary symptoms in the cases alluded to, amounting to one-tenth of the whole, and which were treated on the antiphlogistic plan, have hitherto been nearly confined to the first order of parts; that is, the bones have in two cases only been attacked, and they have equally been cured without mercury.

4. As great a length of time has elapsed in many of these cases without the occurrence of secondary symptoms, as is considered satisfactory where mercury has been used, viz. from six to eighteen months.

5. The primary sores were of every description, from the superficial ulcer of the prepuce and glans to the raised ulcer of the prepuce, the excavated ulcer of the glans, and the irritable and sloughing ulcer of these parts. In the inflammatory stage attended by itching, scabbing, and ulceration, they were treated for the most part by antiphlogistic and mild remedies; in the latter stage, when the ulcers were indolent, whether raised or excavated, by gentle stimulants.

6. The duration of these stages is very different, is often increased by caustic and irritating applications, and is much influenced by surgical discrimination in the local treatment.

7. The last, or indolent stage, often continues for a great length of time, especially in the excavated chancre and raised ulcer of the prepuce; and it appears to me that in these particular cases a gentle course of mercury, so as slightly to affect the gums, will materially shorten the duration of it, although in others it is occasionally of no service.

8. Although the secondary symptoms do for the most part yield to simple remedies, such as venæsection, sudorifics, the warm bath, sarsaparilla, &c. without much loss of time, that is, in the course of from one to four and six months; yet, as in the primary ulcers, a gentle course of mercury will frequently expedite, and in particular persons and states of constitutions is necessary to effect a cure; and that a repetition of it will even, in some cases, be requisite to render it permanent.

Much satisfactory information is yet to be acquired, many experiments to be instituted, and much patient investigation to be gone through, in the comparative treatment of these diseases with and without mercury, before we can arrive at any

fair conclusion on a subject of such great importance. It appears for the reasons I have already assigned, that it is to the surgeons of regiments we are principally to look for them; and from the attention which is bestowed by Sir James M'Grigor, the Director general of the medical department of the army, to this subject, there is every reason to think that much will be done in the course of the next few years. In the mean time it is not my intention to recommend that the practice should be indiscriminately adopted in private life; but advantage may be taken of the facts I have stated on many occasions, to the essential benefit of the patients. In persons of a strumous habit, in those with whom mercury is known to disagree, in others who are supposed to labour under its effects, or of it and the disease combined, and who imprudently contract ulcers resembling chancres, and to whom a course of mercury might, according to received opinions, be highly detrimental, it must be very satisfactory to know that these ulcers will heal by simple means; and that if they be regular in their mode of life, secondary symptoms may not follow, or if they should, that there is still a probability of their being cured without the use of that remedy, which to these people may prove a greater scourge than the disease for which it is administered.

The facts I have adduced must necessarily lead

many to pay greater attention to the nature of the ulcers they continually meet with, and may induce some few to repeat the experiments for their own satisfaction: but, before the practice can become generally useful, the minds of medical men must be better satisfied of its validity, so that a hasty change of opinion may not lead to a material change of proceeding, that the efforts of one man may not be counteracted by the mere opinions of another. But I again repeat, if any one should be disposed to try the method of cure, the effects of which I have noticed, let him constantly bear in mind, that every case so treated requires as much attention and quietude on the part of the patient, and more attention and discrimination on the part of the surgeon, than when mercury is used for the cure. If any one should suppose, from what I have said, that there is no such thing as a venereal disease, that the ulcers on the penis are all common sores, requiring no more care or attention as to diet, exercise, regularity of life, cleanliness, or dressing, than an ulcer on the arm or other part of the same size, occurring from any accidental cause, he will find himself very much mistaken; and the result of his trials will be a more frequent recourse to mercury, and a longer continuance in its exhibition, than is even customary at present.

I beg it may be remarked that I have not given

an opinion on, or entered at all into many important points inseparable from a due consideration of the subject; my object has only been to state a few facts, and make some observations on them. If they had been more comprehensive, I should have had to apologize for a volume instead of a paper.



## APPENDIX I.

*Additional Observations on the Case of MRS. KERSHAW,  
By WM. GOODLAD, ESQ. &c. (See Vol. VII. p. 112.)*

THIS Society did me the honour to insert in the last Volume of its Transactions, the history of a case where the carotid artery was tied to render the removal of a tumour from the face and neck, practicable. The result of the case at the period of the communication alluded to, was perfectly satisfactory, the wound being cicatrised and the tumour shewing no inclination to return. The event, however, has not been consonant to my hopes, for in the following April, the patient imprudently exposed herself several hours to severe cold, with rain and sleet; the consequence of which was a severe attack of inflammation over the cicatrix, combined with acute rheumatism in the wrists, ancles and knees, and symptoms of inflammation in the chest.

By degrees the inflammation subsided, but effusion had taken place, a tumour formed below the ear, and others followed its course, at first small, indolent and free from pain; but as their size increased, the progress became more rapid, and the diseased action again extended over the whole of its original site, from above the ear to the clavicle.

As the disease extended, the mouth became much drawn, and the ear greatly elevated, whilst several small tumours protruded the membrane of the cheek inwards, and appeared arrested only by pressing upon the molares, which were constantly closed from the tumour occupying the ca-

vity behind the jaw. The character of the disease exactly resembled the tumour which I removed; first arising in small tubercles, which continued apparently in distinct cells, and, as they advanced, an abscess forming upon the apex of each cell. But no ulceration took place except in the cicatrix of the wound, occasioned apparently by pressure which I applied in the early stage, in the vain hope of arresting the progress of the disease.

I need not add that the health of my patient sunk under this severe malady; the swelling in the joints, cough, &c. never left her, and her life was prolonged only fifteen months by the operation: indeed if the disease had not returned, it is probable that the woman would not have resisted the ravages of the pneumonic attack; her lungs appearing, in consequence of it, extensively injured.

Judging from the result of this case, the propriety of tying the carotid artery, or, what I should prefer, commanding the current of blood through it, to remove deep seated tumours in the neck, might be doubted: yet as no part of the body is more vascular, and as many patients have been allowed to die, from an apprehension of hæmorrhage, rather than incur the danger of the extirpation of tumours thus situated; it will not I trust be questioned, but that the operation I proposed is still worthy the attention of surgeons, and is in no wise affected by the result which is now submitted to the public. The nature of the tumour, the constitutional and local actions which excite it, the powers of extension which accompany it, and its connections with the surrounding parts, are here, as elsewhere, proper objects of the surgeon's care; but when none of these considerations forbid the attempt, there can scarcely, in my opinion, be a doubt of the propriety of cutting in

the first place upon the artery, since the surgeon has thereby a tourniquet in his own fingers, sufficient to command the hæmorrhage, and is therefore enabled to remove tumours with which he dare not otherwise interfere; and especially since he is also confident that the danger of the operation cannot be at all increased by this precaution.







