

**A practical treatise on the gonorrhoea, and on the superior efficacy of the cure by injection / By Peter Clare.**

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*Clare's*

T R E A T I S E

O N T H E

G O N O R R H O E A,

A N D

C U R E B Y I N J E C T I O N.

[Price One Shilling.]

PRAC TICAL TREATISE

ON THE

GONORRHOEA,

AND ON THE

SUPERIOR EFFICACY

OF THE

CURE BY INJECTION.



PETER CLARE, SURGEON.

“Non Verbis Sed Rebus.”

THE FIFTH EDITION.

*Handwritten:* 1831  
LONDON  
PRINTED FOR THE AUTHOR, N<sup>o</sup>. 2, CHANCERY LANE,  
AND FOR T. CADELL, IN THE STRAND.  
M, DCC, LXXXIX.

6

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ADVERTISEMENT.

THE frequent enquiries made after this little Treatise, constitute the principal motives for its republication. The mode of curing the first stage of venereal infection, by topical means, is now become too obviously preferable to require any comment, or to be enforced by any other arguments, than those which arise from the experience of persons, who have submitted themselves to this plan of cure. Still, however, there remain some, who, equally blind to demonstration, and deaf to argument, are disposed to tread in the  
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obsolete steps of their predecessors, and are content to employ methods the most irrational, and circuitous, in the treatment of a Gonorrhœa. To such, perhaps, the consideration of the subsequent pages may be of use. The reader will find no material alteration in the present edition, farther than in the retrenching a part which did not *directly belong* to the subject, and the alteration of some few exceptionable passages. In addition to other matter, it has been thought expedient to annex a concise view of the formulæ for different injections; that practitioners may be enabled to select such as best suit the ideas they entertain on the subject.

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F R E A T I S E

OF THE

GONORRHOEA

A Gonorrhoea is an inflammation of the  
 membrane of the urethra, from the  
 discharge of a purulent matter, which  
 is attended with pain and itching in  
 the part, and the urine is rendered  
 turbid and bloody. It is attended  
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 glands.

A

T R E A T I S E

O N T H E

G O N O R R H O E A, &c.

**A** Gonorrhœa is an inflammation, and suppurative discharge, from the urethra in men, and the vagina in women. The part principally affected by it in men, is the *penis*, which consists of three parts; two *corpora cavernosa*, lying on each side, and a third, situated underneath, called *corpus spongiosum urethræ*. This consists of the bulb and membranous part, is continued on to the bladder, and terminates, at the other extremity, in the *corona*, or *glans penis*.

The *urethra*, which is the immediate seat of this disease, has three glands, discovered by *Cowper*, and called *mucous glands*,

B

glands, from the tenacity of the liquor which they secrete. There are two, (or rather one) about the size of a nutmeg, placed near the neck of the bladder, between the *vesiculæ seminales*, and penis, and under the *ossa pubis*. These separate a limpid glutinous humour, which is carried into the urethra, by several ducts, that enter near those of the *prostatæ*.

The two first of *Cowper's* glands are about the bigness of a French bean, of a depressed, oval figure, and yellowish colour, like the *prostatæ*; being placed on each side the bulb of the urethra, a little above it. Their excretory ducts arise from the internal surface, next the inner membrane of the urethra, into which they open a little lower, by two distinct orifices, just below the curvature of the *ossa pubis* in perinæo, where they discharge a transparent viscous liquor.

The

The third mucous gland is small, conglobate, and yellowish, like the former, but somewhat less, situated above the angle of the flexure of the urethra, under the ossa pubis, in the perinæum. It has two excretory ducts, which enter the urethra obliquely, a quarter of an inch below the two former, and discharges a similar liquor, both in colour and consistence.

The seat of the Gonorrhœa in women, is principally the *vagina*, which is affected with a discharge like that of the urethra in men. It lies between the bladder and *intestinum rectum*, and has *rugæ*, under which are small glands, whose excretory ducts are called *lacunæ*. These glands separate a mucilaginous, slimy liquor, to lubricate the vagina, and are the seat of the Gonorrhœa in this sex, as the glands of the urethra are in the male. The meatus urinarius being a very short passage, and not always partaking of the

inflammation, the heat and scalding is consequently much less than in men.

The symptoms of Gonorrhœa are, first, an uneasiness about the parts of generation, with an appearance of a little whitish matter about the orifice of the urethra, a little swelling, and sometimes redness there, and a slight pungency upon the evacuation of urine. The matter soon increases in quantity, the inflammation about the end of the urethra becomes more evident, and for the most part, there is now a tension and hardness through the whole of it, a swelling of the lacunæ, and a sensation of stricture in the penis, particularly on erection. The matter still increases, flows out, and grows thinner, loses all its adhesiveness, and is of a yellow, or greenish colour. There is now always a redness about the end of the canal; often a pain from the distension of the urethra, during the evacuation of urine, and a much severer to-  
wards

wards the orifice, from its stimulus, with an increase of the redness, just after it is evacuated, The inflammation prevents the extension of the urethra in erection, so that the penis is at that time curved downwards, with great pain, which is increased if it be raised towards the belly, and the stimulus occasions it often to be erected, especially when warm in bed."

It is generally esteemed good practice, on this occasion, to give nitre in considerable quantity, a purging electuary, pill, or salts, and to take blood freely from the patient; also to direct large quantities of diluting liquors, and further to recommend a strict regimen, and abstinence from particular meats, vegetables, and strong liquors. The question is, *are such medicines and restriction necessary?* In my humble opinion, *they are not*; and they appear, upon the whole, to do *more harm than good*, as I shall endeavour to demonstrate,

strate, not only from the experience of those whose opinions cannot but have considerable weight in a matter of this kind, but also from my own observation and practice, in a great variety of instances.

Dr. Cullen remarks, "that purgatives not only inflame the rectum, but also extend their irritation to the urethra." May not chordee and priapism then, often be attributed to this cause?

Dr. Fordyce recommends "increasing the secretion a little, by such gentle purgatives as procure only two or three evacuations a day."—But who can ensure his patient two or three stools only in a day?—The intestines being once put into motion, will not accommodate themselves exactly to our wish or convenience. Happily for the patient however, even gentle purging may be dispensed with on these occasions.

He

He adds, "that *severe* purging often augments the inflammatory symptoms, brings on strangury and exulcerations, gives occasion to inflammation of the testicles, and other neighbouring parts; or it stops the running before the infection is washed off, and the Gonorrhœa either returns in a few days, or exulcerations take place."

The Doctor further observes "that long continued purging is apt to weaken the stomach and intestines, to hurt the digestion, to produce obstinate gleans, and hypochondriacal symptoms, particularly in irritable, or melancholic habits."

Many more authorities might be adduced in proof of the bad effects of a course of *purgatives* in these cases, which are generally of considerable duration, when treated in this manner. Neither are *antiphlogistic remedies* to be depended upon, farther than relates to diet, as they

some-



sometimes produce the very contrary effect to what was expected from them. Amongst the first of these, is the use of nitre. Dr. Lewis, a late writer, of no small credit, reckons *nitre* a proper medicine to give relief in stranguries, and heat of urine, proceeding either from a simple or venereal taint; and indeed there are few practitioners who have not regularly given it in the venereal *ardor urinæ*.

“This practice, however,” says Dr. Hope in his lectures on the *Materia Medica*, “I am apt to believe, has taken its rise from the name of *ardor* having always been given to the pain in evacuating the urine, during the time of a venereal inflammation of the urethra, and the name and virtues of a cooler, having always been attributed to this salt. But it is certain, that the urine passed at the time of a venereal inflammation, is no warmer than at other times, and therefore to pre-  
scribe

scribe a cooler to allay the heat of it, is  
absurd: and I am persuaded, that on a  
free and candid examination of this mat-  
ter, it will be found, that nitre has not  
the smallest power of alleviating the pain  
which is then felt; for I have given it  
in all the different stages of this disease,  
in small and in large doses; but from  
the sole use of it, in a great number of  
trials, have never been able to observe that  
it has afforded the least relief. Nor,  
when we consider the cause of that pain,  
and the effects of nitre, have we any rea-  
son to expect it; for the pain certainly  
proceeds from the acrid salts in the urine,  
stimulating the inflamed or excoriated  
urethra; and a solution of nitre applied  
to any excoriated part, always gives con-  
siderable pain. Experiments assure us,  
that on taking nitre into the stomach, the  
urine becomes impregnated with it. The  
larger therefore the doses are, the stronger  
will this impregnation be, and the greater  
stimulus added to the urine; so that we

may certainly conclude, that this salt will rather augment than diminish the pain in evacuating it." The Doctor further remarks, "that there are many weak and delicate stomachs, which cannot bear the cold it produces, and others, in whom it always creates sickness and nausea."

Besides the disagreeable circumstance of taking great quantities of nauseous medicines, we find there is the greatest uncertainty, as to their real effects, on the diseases they are intended to remove. A medicine of any kind, applied to blood in a baton, may visibly affect that fluid, and produce some chemical or mechanical alteration in it, yet being taken into the stomach, where it undergoes the different processes of digestion and assimilation, and from thence into the circulation, it may have a very different effect on the system from what is expected, or very likely no effect at all, owing to the alterations it has undergone.

Amongst

Amongst other medicines employed to relieve the symptoms of Gonorrhœa, are *mucilaginous medicines*, which are even said to be capable of alleviating the pain arising from a stone in the bladder, by enveloping its surface, and making it uniformly smooth, so as entirely to deprive it of its asperities, and consequently of its power of hurting the bladder.

It is difficult for one conversant with the mechanism of the human body, and the operations of medicine, to conceive, that a mucilage given by the mouth, will arrive at the bladder in that state. We are certain, indeed, that particular remedies will stimulate particular parts: *balsam of capivi*, for instance, being absorbed, is known to affect the kidneys and bladder, by the strong odour it imparts to the urine; but we do not find this, or any other medicine, except quicksilver, will pass off in the same form in which it is administered by the mouth. This

balsam is another remedy employed for the cure of Gonorrhœas, and very much esteemed for its great virtues, particularly in the latter stages of the disease. But it is so very disagreeable, on account of its oily and bitter quality, as well as its smell, that some patients are soon disgusted with it, and others will not be prevailed upon to take it. Nor should it be concealed, that this medicine, if not taken in very moderate quantities, is apt to produce bloody urine, and other alarming consequences.

We cannot therefore, upon the whole, think it strange, that patients are disposed to prefer INJECTIONS to all other means of cure. And indeed, it is evident, that patients who submit to other methods of treatment, often suffer more from the remedy, than from the disorder itself; they are often more emaciated, weak, and pallid in their looks (circumstances which frequently lead to disagreeable discoveries)

ries) from the operation of purgatives, in the space of one week, than they would have been in a month, if there had been no attempt whatever made to check the progress of the disorder.

There are many people who have not leisure to pursue these complicated plans, and who, even if they could find time, would have but little inclination to undergo so much anxiety and unnecessary trouble. Such tedious processes are very ill contrived for young persons, in active employments, who are certainly capable of being *cured by means much more easy and expeditious, and quite as effectual*, as the round-about methods we have alluded to.

With regard to *regimen*, or particular diet, it is scarcely at all necessary in the cure of the Gonorrhœa, when treated in the manner here recommended. Some have asked if the disorder is not inflam-  
matory,

matory, and if living low is not indispensable, in every complaint of this kind? It may be said in reply, that this is a *local* inflammation, which yields at once to a cooling detergent liquid, applied to the part; and whilst it is such, neither diet nor internal medicines are required to remove it.

With regard to the particular composition to be employed, I must observe, that in general I have met with the greatest success in the cure of this complaint from vitriolic injections, or those prepared from a pure salt of zinc. These are preferable to any in which mercurial powders are suspended, since there is apt to be a considerable sediment deposited, and this being conveyed into the urethra, is sometimes found to excite irritation and pain in a considerable degree.

Injections of all kinds should be applied cold, rather than warm, for cold  
braces,

braces, whilst warmth adds to the relaxation already existing.

If the injection causes any more than a slight sensation of smart or pain in the passage, it is evidently too much impregnated with active materials, and must be made weaker, as the irritation of the liquor would increase the symptoms, instead of diminishing them.

The cure is often completed in less than a fortnight, though this depends greatly on the uniform and unremitted use of the remedy, as long as the symptoms continue, and for some days after they have totally disappeared.

The great objection to this particular practice, is raised on the supposition that *injections* are apt to produce *strictures* in the urinary passage. This idea, I am certain, is not well founded, having enquired of many different people who have  
been



been troubled with *strictures*, if they had ever employed injections, or if so, whether they had cause to suspect their strictures to have resulted from that circumstance. The answer was almost invariably in the negative, which inclines me rather to think, with an author lately quoted, "That when a *Gonorrhœa continues long*, it sometimes produces a *stricture* in the part\*." Inflammation is naturally disposed to produce contraction and *stricture* in the different canals of the body, as well as in the *urethra*; and we know that the cicatrix of an ulcer corrugates the surrounding parts, and in that way forms obstructions. Hence we may conclude that many evils are attributed to *m-*

\* The same gentleman justly observes, that omitting the *injection* once or twice, will often make it fail of curing, when it would have otherwise produced that effect. He likewise remarks, that patients treated in this manner, are less liable to inflammation of the testicles, or of the glands in the groin, or to *chancres*, or *strictures*. These observations are certainly founded in fact.

*jections,*

*jections*, which in fact owe their origin to other causes\*.

It is now proved by a variety of ingenious experiments, and generally admitted, that the discharge in a *Gonorrhœa*, proceeding from the *urethra*, is not *pus*, but *mucus*. *Pus* is the matter which proceeds from wounds and ulcers, but *mucus* comes from surfaces not ulcerated, though sometimes inflamed. It is a prevailing idea with some persons, that a *Gonorrhœa* proceeds from *ulceration*, but the late Dr. *Hunter* often dissected the *urethra*

\* If the Injection should not produce the desired effect, it will be right to enquire if the urine passes freely, and whether it divides into two streams, or more; and whether it comes out twisted, like a cork screw. In these cases, it is not likely the injection should effect its purpose, being unable to pass; recourse must therefore be had to the *Bougie* to restore the passage to its natural state. If the *long duration* of this distemper produces strictures and obstructions, then what removes the disorder *quickly*, must undoubtedly prevent the above evils, instead of causing them.

in persons who died, having the *Gonorrhoea* at that time, but never discovered any *ulcer* in the passage.

*Mucus* is, in itself, an innocent, mild fluid, capable however of acquiring virulence and acrimony from morbid infection. The *Gonorrhoea* is an increased and virulent discharge from the *mucous glands* of the urinary passage. *Mucus*, when pure and uncontaminated, is transparent like the white of an egg, appears sometimes as a drop at the orifice of the urethra, is of a mucilaginous viscosity, and the use of it is, to sheath and defend the passage from the irritating salts that exist in the urine. It resembles the secretions of the eye, which naturally are supplied in small quantity; but when the lachrymal organs are stimulated by grief, dust, or any offending substances, the discharge becomes at first copious, and at length of an acrid quality\*.

When  
\* *Darwin* observes, in his experiments on pus and mucus, " That whenever the secretion of any fluid is increased,

## PURULENT MUCUS. 27

When the mucous membrane of the nose is affected by a violent cold, or other cause, we often find an extraordinary quantity of discharge from it; yet no one suspects the existence of an ulcer there; and I have often observed, that the discoloured mucus of that part bears so strong a resemblance to the virulent discharge in the Gonorrhœa, that it has often perplexed persons conversant in these matters, to distinguish the two from each other, when received on a handkerchief.

creased, there is, at the same time, an increased heat in the part." The same author observes, that "the catarrhal humour from the nostrils of some who ride in frosty weather, and the tears which run down the cheeks of those who have an obstruction of the puncta lachrymalia, are easily distinguished from others, by their abounding in ammoniacal, or muriatic salts, whence they inflame the circumjacent skin: thus in the catarrh, the upper lip becomes red and swelled, from the acrimony of the mucus, and patients complain of the saltness of its taste. The eyes and cheeks are red with the corrosive tears, and the ichor of some herpetic eruptions erodes far and wide the contiguous parts, and is pungently salt to the taste, as some patients have informed him."

Either of these fluids then, having acquired acrimony, will inflame, and sometimes slightly excoriate, irritable membranes. These excoriations generally heal of themselves, and when they do not, no one hesitates, in either case, to apply *repellent and healing medicines* to the part, without even the smallest suspicion of any bad consequence.

With large and long existing ulcers, the case is very different, there being the greatest reason to apprehend danger, from the absorption of the matter they produce, into the circulation. Writers of good credit assert, that the absorption of acrid pus into the blood, affects all the fluids, stimulates the vessels, and is capable of producing violent disorders, such as putrid fevers, &c. Impressed with such a belief, no thinking man, in this, or any age, would adopt a practice at once so irrational and hazardous. But a discharge from a secreting membrane, which

is

is merely mucous, and which has no concern with the system, or animal oeconomy, may be as safely washed away, as any other *sordes*, from the surfaces of the body.

Injection then is not only far more expeditious in producing these effects, but also appears, on a due comparison, to possess the advantage of being a more *safe, cleanly, and agreeable method of cure*, than any other that can be adopted.

It is the opinion of many practitioners, that the *internal* use of mercury is requisite, along with the other remedies. Hence it has been the practice, in employing injections, to prescribe alterative courses of mercury at the same time.

It is impossible to understand, upon what principle this is done; yet, if we fall in with the general opinion, and are disposed to employ gentle mercurials, we  
 24 may

may in general do so, with perfect safety to the patient.

Here probably it is better to produce a slight action on the intestines, since the *specific* effect of mercury on the system, cannot be wanting, where the abatement of inflammatory symptoms is the most immediate consideration.

It may be necessary to remark, however, that the doses employed should be so inconsiderable, as never to act in a greater degree than slightly *laxative*. Where a clap has continued long, and proved obstinate, I have known small doses of calomel, and sometimes of sublimate, exhibited for a fortnight or three weeks, prove an effectual help to the use of topical remedies.

Having in general terms recommended the cure of Gonorrhœa by injections, it will be expected of me to present the read-

er with some of the formulæ, which have been found adequate to that purpose. In attempting this, it will be impossible not to include many that have already met the public eye; though that circumstance will scarcely impeach the propriety of their appearance here. In the proportions, however, some variation will be found to exist; as I confess I have never been able to employ injections of any thing near the strength that some authors recommend.

*Formulae for Injections.*

℞ Aq. Distillat. ℥ij.

—Litharg. acetat. comp. gutt. vi.  
m. f. Inj.

℞ Aq. Fontan. ℥ij.

Tin. opii gutt. x. ad xx. m. f. Inj.

℞ Zinci vitriolat. gr. x.

Lapid. cal. ust. gr. iij.

Aq. fontan. ℥iiss m f. Inj.

℞ Aëru-



℞ *Æruginis* gr. x. ad xv.  
*Ol. amygd. dul.* ℥iv. m. f. Inj.

℞ *Hydrar. muriat.* gr.  $\frac{x}{8}$  ad  $\frac{v}{4}$   
*Aq. bullien.* ℥iv. m. f. Inj.

℞ *Hydrarg. purif.* ℥fs.  
*Mucil. G. Arab.* ℥ij.  
*Aq. fontan.* ℥ij. m. f. Inj.

℞ *Pulv. e ceruss. comp.* gr. x.  
*Zinci vitriolat.* gr. iij.  
*Aq. Rosar.* ℥ij. m. f. Inj.

℞ *Zinci vitriolat.* gr. v. ad x. ad xv.  
*Aq. flor. sambuc.* ℥ij. m. f. Inj.

℞ *Cretæ alb. ppt.* gr. xv.  
*Zinci vitriolat.* gr. ij. ad iv.  
*Pulv. G. Arabic.* ℥fs.  
*Aq. puræ* ℥iij. m. f. Inj.

℞ *Ærug. Æris* ℥fs.  
*Sp. vol. ammon.* ℥ij.

*Misce fiat solutio.*  
 ℞ Solu-

℞ Solutionis supr. parat. gutt. v.  
 Aquæ fontanæ ℥ij. m. f. Inj.

℞ Mucil. sem. cydon. ℥ij.  
 Calomel. ʒss. m. f. Inj.

In the above are included, the different classes of *emollient*, *sedative*, and *astringent* injections. The contents of each will direct their application, according as the case may require.

I have forbore to dwell on the methods to be employed, in the removal of *particular symptoms*, sometimes attendant on the Gonorrhœa. These, when they *do* arise, proceed merely from an increase of the original inflammation; and the various modes of treating inflammatory symptoms, cannot need to be enumerated here.

The early and circumspect use of INJECTION, will indeed be found to supersede the necessity of treating other eventual

tual symptoms ; and the only object is, to apply that remedy, when the infection is in its *earliest stage*, and before the action of the *venereal virus* has been sufficient to produce any very urgent effects\*.

\* “ This disorder, if taken in the beginning, may be cured with ease and safety in a few days, by means of Injection; but Quacks, and ignorant pretenders to physic, make it their business to delay the cure as long as they can, for their own lucrative views. This they give the specious pretence of safety to, and falsely persuade ignorant patients, how dangerous it is to remove the disorder in a short time ; while the greater appearance of opulence a man makes to such sort of practitioners, the longer his cure is protracted.”

BUCHAN.

CONCLUSION.

Symptoms; and the only object is  
to produce any very urgent effects\*.  
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