

AN
INAUGURAL DISSERTATION
ON

Dysmenorrhœa.

SUBMITTED TO THE
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OF
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This Paper is Dedicated

To

Rev. John M. Watson M.D.

As a tribute of respect & attachment.

By the People.

Dysmenorrhœa.

Before entering upon the investigation of this subject I wish to take a cursory notice of Menstruation as it occurs naturally, and physiologically.

Menstruation, is so denominated from its periodicity, although this name is applied to this evacuation in every form in which we find it, whether it be a physiological or pathological discharge.

This function of the Uterus may be precocious, by an undue development of the Organ and its appendages; but as a general rule we anticipate its appearance by marks of puberty, which are visible to a critical observer.

In this Climate the greatest number of females begin to menstruate about the ages of fifteen, and sixteen years, as shown by the statistical tables of different writers on this subject. But, whether, it make its appearance earlier, or later, or within the time designated, so it be in accordance with the laws of physiology, assisted by the plastic powers of Nature, one of the grandest objects in the world is accomplished, that of setting in order the Organs of reproduction in the female.

The menstrual evacuation follows puberty and, as a general rule, unless arrested by congenital or accidental causes. This monthly elimination is no doubt a consequence of Ovarian influence, and in proportion to the developement of these bodies, we have this function established. We might take in connexion with this view, of the subject, the Constitution, the climate, the manners, and the indulgencies and privations of life.

It is believed, and taught, that this function of the Uterus is established much earlier in Southern regions, than it is here; and that it is proportionably delayed in the boreal regions of the north. Now whether this be true or not, I hold to the opinion that the developement or non-developement of the Ovaries, has more to do in establishing this function, than all the regions on the face of the Globe.

It is recorded, that in Japan & China Medicinal means are used at the early age of eight years, to excite the Uterine system to this function, and that a failure augurs a want of adaptiveness, to consummate the matrimonial rites.

We are informed, that in Lapland and, other boreal regions; that the Menstrual periods are prolonged, and the discharge quite small; while in the torrid regions, the return of this period is hastened, and the discharge very profuse. But, nevertheless, if it be in accordance with the genius of the Country, all things being considered; I suppose the inconveniences are about the same.

Without being tedious, it will suffice my present purpose to speak of things as they occur to my observation in this delightful region that I occupy; for here I expect to figure upon the stage, until I have ^{at length} ended my professional career: and therefore I wish to adapt my further remarks more particularly to things as I here find them connected with my subject.

We know, that the Vagina, the Uterus, the Fallopian tubes, and the Ovaria, in the aggregate, form the Sexual Canal; and the Machinery, by the means of which a series of functions are performed essentially necessary for their own preservation, and the propagation of the human Species.

Whenever the Uterus performs this function in a regular physiological sense, it is conclusive evidence, that it is duly qualified, and every way competent, to perform another, and equally important function; that of receiving, retaining, and sustaining the human ovum until it shall have arrived at the full period of fetal life; and then by its own inherent powers, expels it from its cavity, upon the stage of human action to exist independently.

Many changes in the female constitution is produced at this auspicious time. & their first Menstruation is attended, with something peculiarly novel in itself to them, and if they should be uninformed, and unprepared for this event, it is more than likely they may commit some error unwittingly, that may ultimately prove a serious affair. But should this event be anticipated, and all goes on well we may expect a different state of things entirely conducive to health.

When this discharge is once established upon healthy principles, it is faithful to recur again at regular periods, unless arrested by a Pathological or Physiologic state existing.

But, let this evacuation occur when it may, so it be after the full development of the Uterine system, we discover the charms of the female increase considerably. Her general contour becomes most exquisitely beautiful. Her limbs are exceedingly graceful and symmetrical. The complexion is much improved, the expression of her countenance is more animated, the attitudes are more graceful and becoming, the mind more vivid and intelligent, the conversation more agreeable and chaste; the voice sweeter and more harmonious; and in fact every sense, and every part undergoes a change directly, calculated to captivate and set on fire those innate principles of love and admiration which exist in the bosoms of the opposite sex.

The charms of innocence and love are delineated by the smiles and blushes which alternately play upon her damask cheek. Her ruby lips express by sweet intonations the purity of her virgin heart. She is endowed with a fascinating and seducing attraction, a magic and inviting charm. She is credulous and confiding yet she is reserved in her deportment. This is

timid as the fawn, gentle as the lamb, and as lovely as an angel. But this beauty and attraction in the female is not the end, but the means, Nature employs to carry on the great work of reproduction.

Beauty, so ardently sought after, and so fervently desired, would be of little avail to those females, who are so ambitious of it, could we imagine that in them existed a conformation, or a disease, which would render them physically unable to accomplish the high prerogative imposed upon them by God Himself, that of replenishing the earth, and multiplying the human species.

All this beauty, and all these attractive influences here enumerated are the result of a due performance of ^{in effecting} the Menses system, the monthly elimination as already explained. The usual and ordinary interval, between the monthly evacuations of a regular and healthy female, may with some accuracy be set down at twenty three or four days, and the duration of its sojourn, four or five days, making the interval and the duration twenty eight, days or one lunar month.

The Menses are ~~no~~ doubt an exhalation, and this is the view of the subject as entertained by the leading physiologists of the present age.

The cause and design of this discharge is measurably involved in obscurity, but we have evidenced enough, to convince us that, it subserves a most important part in eliminating something from the female organism, that is materially deleterious to her health and beauty. ~~And~~

And we may justly infer, that it imparts to the generative system a greater degree of susceptibility. And no doubt exists in my mind, but, that at the latter part of each Menstrual period, and immediately after its conclusion, when the ovule is ready for impregnation, there is an actual increase of the sexual emotion in women, yet this is disguised as far as possible, by natural Modesty and reserve.

Menstruation is as much an ovarian as a uterine function, and in the remarks I have made on Menstruation I have endeavored to keep my mind fixed on the ovaria as the essential cause of this function.

This periodical congestion if followed by a free exhalation of the Menstrual flux is denominated normal, But should it be associated with disease of the Uterus or ovaria we have other symptoms.

And this brings me now to speak more particularly of the subject of Dysmenorrhœa.

This disordered function of the Uterus and its appendages, has been long known to Medical Writers; and each one has entertained views of their own peculiar to themselves. And if I advance my own notions in regards to this distressing malady of the female sex, it will not materially alter the doctrines now taught in regard to it, for this article if found acceptable will soon be bound, and laid aside as stale trash.

Painful Menstruation is by some denominated a defective secretion, and by others a want of power to effect this secretion as they call it. I shall discard every idea of making this disorder to consist in a secretive process at all. I look upon it as an affection purely nervous. Ovarialgia might be appropriately applied to many of the symptoms of this disorder, and I have no doubt that pain in the lumbar region is in many instances decidedly ovarian and not Uterine.

Many women suffer intense pain in the lumbar region at each menstrual discharge almost amounting to an attack of Ovaritis.

Painful Menstruation may occupy a debateable ground between Physiology and Pathology. I am disposed to favor the opinion that dysmenorrhœa is residua in the ovaria, and that the Uterine pain is symptomatic of ovarian disorder. It is doubtless a fact that in dysmenorrhœa a pathological state of the Uterus is induced. But on the other hand we find pathological states of the Uterus, unaccompanied by dysmenorrhœa. I can't believe the Uterus could be sufficiently excited to perform this function, without previous ovarian excitement.

There are cases on records, where patients have suffered all the tortures of dysmenorrhœa and still the Uterus was wanting, thus plainly showing the ovarian origin of this affection. If this be a fact it thus far, goes to establish the views I have entertained on this interesting subject.

Now the pain complained of so lustily in women suffering of this disorder in the pubic region is no doubt produced by something similar to a tenismus in other parts of the system.

This bearing down pain is deep-seated, and is one of the most distressing symptoms present during the monthly evacuation. This pain is complained of, as extending from the lumbar region, to the inferior extremities.

In the healthy action of all the sphincteric muscles, we discover that pain is a stranger, and when pain arises we may anticipate a pathological state as having, or about to be set up in the system. Now if a disease of the Cervix, exists independent of Dysmenorrhoea, (as it often does) and Dysmenorrhoea take place during this state of the Cervix, we may anticipate the worst form of the disorder under consideration. In a case like this we shall have to direct our treatment more emphatically to its relief for the time; but we must not lose sight of the ovarian disease in the back ground.

I am opposed to the idea that Dysmenorrhoea is the effect of a chronic or sub-inflammation existing in the Uterus. This condition is very common, without the disease of Dysmenorrhoea existing at all.

I have but little doubt, but that the relation between Dysmenorrhœa and inflammation of the cervix, is generally one of coincidence, and not of causation; and in many cases may be a mere symptom of ovarian irritation. Wherever there is inflammation in the Cervix existing; it will certainly be kindled up at each Menstrual discharge, and cause some uterine pain.

I believe that ovarian irritation is the most fruitful source of all the different shades of Dysmenorrhœa with which the female is subject; and that the view taken of it is generally too superficial, and that is one reason why we meet with cases that appear to be of an incurable nature.

The Causes which give rise to this affection are various, but I suppose in the general that colds applied during, or directly after a regular Monthly, or an abortion, or after a regular confinement, or at any time when great excitement exists in these organs would be sufficient to produce the painful conditions of which we are here considering.

But let the origin of this disorder be what it may, the symptoms are not always exactly the same. And in fact as this affection is so often found in conjunction with other states of the Uterine system, it is evident that the symptoms will vary to correspond to those affections.

The deep seated bearing-down pain, the pain in the lower extremities, and the many ill feelings complained of in the region of the abdomen, are all the effect in many instances ~~no~~ doubt of a reflex action of the Nervous system of the Uterus acting upon the nerves in connexion with them.

I might go on at greater length to adduce argument to sustain me in the position I have taken in regard to this affection, but I deem it unnecessary for the present. I am pushed for time to compose this article and must close it shortly or the door will be closed against me. I will now give the treatment of this affection, as it accords with my experience and the views I entertain relative to this disease, hoping I may find them to meet the views of others.

In the treatment of this affection we cannot always direct our remedies directly to the origin of the disease, but as in many other affections we have to operate through other channels, than those which appear to be the most direct. We must at all times meet symptoms as they arise, and combat disease in many cases by acting upon parts apparently remote from the scene of morbid action.

Acting upon this principle we would in the first place remove as far as possible all the lesions that exist wherever we could find them, in the contiguous organs. And in doing this we would in the first instance apply the remedies for this purpose. In the use of means to remove the inflammation or engorgement existing in the Cervix, Uteri or the Mucous Membrane of the organ itself. I would use local bleeding externally and internally, that is to say I would cup the spine in the lumbar region. I would if compatible, Scarify the Uterine neck, and if necessary Cauterize the same. I would also apply over the ovarian region Leeches, so as to reduce as much as possible the ovarian excitement.

I would also use other local applications

as indicated in the further treatment of this disorder, such as Blistering and Gustulation.

In the use of Purgatives I should select those only that would assist in restoring properly the secretions of the system to a normal state. And on this part of the treatment the Practitioner must exercise his own judgment, for the rules laid down in the books are not always safe to follow, or at least they are not effective in restoring health: and that which is beneficial to one patient may be obnoxious to another.

I do not think it safe or a reliable practice to use too much Purgative medicine in this disease or any thing else that will lessen the vital forces too much. Vomiting I should hardly ever recommend. I am probably too much opposed to emesis in a general way, but still I use emetics whenever my judgment approves them.

I always prescribe for existing emergencies, and if I am called to see a patient laboring under considerable pain I give an Anodyne and other directions to meet the existing state of the patient at the time.

After prescribing to such the case as I find, if I am further consulted I give the directions in the interval of the paroxysms for the effect of removing the exciting cause. The means used for temporary relief, are not indicated in effecting a permanent cure. The means I have already enumerated, may be greatly assisted by watching the indications of nature, and taking advantage of every favorable phenomenon that arises during the treatment.

It is said that females do not propagate during this affection; another proof of imperfect ovulation. I contend it is this condition of the ovaries that prevents conception. And as this is in connexion with the treatment it will not be out of place here to notice again the further pathological conditions existing in the Uterus, and appendages.

I have known this disease cured and then the female to remain unfruitful. And I have known the Uterus to be diseased, and the female to conceive. And it is taught and it may be believed, that conception cures this affection. This I do not believe. I am of opinion the pathological condition of the ovaries has to be removed first.

If the Uterus be diseased, and the ovaries be in a healthy physiological state it is my belief that impregnation and Conception may occur. We find that females laboring under Prolapsus sometimes conceive. If the ovaries were the seat of disease this could not occur. but under these circumstances the ovulation is perfect and conception is the result of copulation. I have only considered this as a prophylactic means as entertained by writers on this subject. wh. that I believe in the healthy fecundation of an ovule as long as this disease exists.

Ferruginous preparations are greatly indicated in this affection, and have a considerable influence in restoring the general health of the system as also to act directly upon the disordered functioning of the Uterus & appendages.

There may be some choice in these preparations, but as a general rule I use the Carbonate or the Muriate all the time. I sometimes combine with the Carbonate a small portion of Quinine to aid its tonic principle.

Frequently add Laudanum to the Muriate to prevent its griping.

The Iodide of Potash in aqueous solution is an excellent alterative in this affection and more especially after the patient has been using various Preparations of Mercurials. We frequently find the stomach and other important organs sympathizing with this affection of the Uterine system. We must then use such remedies as the nature of the case will admit of; Dyspeptic symptoms certainly demand our attention, but we must never lose sight of the original disease.

The Liver and Kidneys may also at times become implicated in this disease, and at such times if we were called in unexpectedly and unacquainted, with the original affection we might entirely overlook it and treat the patient irrespective of the disease that mostly Mercurials our attention.

In this as in all other diseases we should investigate closely, both the patient and the symptoms and then read, and reflect profoundly before we hazard an opinion, or injure the patient by an impolitic and rash practice. Many a fine Constitution has been ruined by rashness & bigotry.

I have no doubt but that travelling would also greatly assist in removing this disordered state of the organs concerned in this affection, especially if all the exciting means were withdrawn that are occasionally indulged in at home, and which are so injurious to delicate health. The exciting passion should be avoided as much as possible. Anxiety should be dislodged from the mind, and every jealous sentiment should be banished.

Gentlemen I have concluded my subject. I hope you will give me a favourable reception in the Green room, and a cheerful admittance in your Faculty. And I shall ever remain your obliged Student.