AN

INAUGURAL DISSERTATION,

ON

Genorrhoea

SUBMITTED TO THE

PRESIDENT, BOARD OF TRUSTEES, AND MEDICAL FACULTY

OF THE

University of Nashville,

FOR THE DEGREE OF

DOCTOR OF MEDICINE.

BY

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18

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Gonorrhoea has been noticed as a wholesome disease by successive authors, from the earliest periods in which we have any medical records; therefore it cannot be expected that I will add any intelligence to the profession, but in as concise a manner as possible. I will think together some of the oft-mentioned symptoms and treatment of this disease. Gonorrhoea consists in an active inflammation of the mucus lining membrane of the urethra, commencing in the anterior part. It generally occurs in four or five days after impure coition, but very frequently it appears in the first forty-eight hours, and in some instances not until the expiration of two or twelve days after this impure coition. At first it is very disagreeable itching sensation is felt in the urethra, passing a small distance up from the orifice, which on examination will be found a little reddened and slightly tender. After
This has continued for a short time, the mouth of
the urethra becomes very much inflamed and
swollen. There a lumpy or yellowish matter oozes
from it. The disagreeable clinging and itching increase.
and the discharge of pain causes a considerable
smelling and burning, pain in the anterior part
of the urethra. The pain now extends very quickly
outwards along the urethra; the glands penis becomes
more or less swollen, assumes a dark red color;
and very tender to the touch, and the discharge
now assumes a yellow granular color, resembling
very much diluted pus. The patient now has
frequent and painful erections which keeps
him very much especially after he has been
for some considerable time in bed; and
on passing or voiding urine is in great many
cases the pain is exceedingly burning. In so
great many instances the inflammation continues
from the mucous membrane of the urethra to the
corpus spongiosum, causing great tenderness and much
hardness of part, and particularly a very severe and
painful affection known as thrush, the uli consists
in very strong and continued erections, while from
the inflamed and unyielding condition of the corpus
spongiosum, the penis is forced into rather a curved
line or form, with the end of the penis drawn down
and the body drawn up. At this period of the disease
small portions of blood are frequently mixed with
the discharges, and very often, after the process becomes
very much inflamed, swollen, and a little excreta-
ated about the edges and in spots on the internal
part. It is not unfrequently the case that one or
more of the inguinal glands become very much
inflamed, and more or less swollen, and a
puncture over an inflamed lymphatic vessels can be
felt along on the dorsum of the penis. A number of
patient complains of a constant, and aching pain in the body, and pain of the penis, and in a few instances one or both of the testicles become tender, more or less inflamed, and very much swollen, attended very frequently with severe pain all along the course of the spermatic cord. Considerable symptoms of fever alone attends, when the inflammation is thus extended from the prepuce to the adjoining structures. Very frequently the whole canal of the prepuce becomes inflamed, causing a harassing sensation of burning vivification about the prepuce of the bladder and penis, and cutting pains in the prepuce whilst micturating water. Under these circumstances, the patient has a continual desire to make water, but owing to a very great tenderness of the prepuce of the bladder and prepuce, the patient can only void a few welding drops at a time. Whenever the testicles are much inflamed, the discharge from the
metha is always very much diminished, and in a great number of cases entirely suppressed. Frequently the engorged vessels of the mucous membrane of the urethral buds, and a quantity of pure blood arises off. It is sometime the case after an indefinite period of time, the inflammatory symptoms begin to subside. The burning, pain in voiding urine begins gradually to subside; the erections are less frequent and painful, and the mucus discharged acquires more consistence and is white and tenacious. The specific inflammation of this dis ease is first seated in the mucous membrane of the urethra, a very short distance above its orifice. From this point it frequently extends (as above stated) higher up the urethra to the neck of the bladder. It is not unfrequently the case that phrenital pain in the first instance, does not always penetrate the canal of the urethra during impure solution.
but very often is applied directly to the glands. It then causes irritation and a discharge of a very
viscid purulent matter from the sebaceous glands which are situated about the corneal glands.
However, it is more common the case if the matter that is discharged comes in contact with the
inner surface of the prepuce, from which it is discharged as thin white or yellow like fluid. These
creations not infrequently appear in the form of irregular patches, leaving spaces of sound
skin between them. At this particular stage of the disease there is more or less phimosis. In
females this disease is rarely if ever attended with the painful symptoms that attend the
disease in males. In fact, in a great many cases there is so very little pain experienced by
women from gonorrhoea, that the discharge are often regarded as mere fluid albumen.
It is to be observed that the inflammation in females very seldom ever extends to the pudenda. The orifice of the pudenda is, however, more or less irritated and in a few instances it becomes so sensible that when urine is passed off it gives much pain. The disease is most usually noticed either in the clitoris about the mouth of the vestibule, and on the symphysis within the cavity of the vagina, or at the inferior commissure of the labia. Females who are affected with this disease frequently feel a very disagreeable itching about the orifice of the vagina, and at the vulva. In very severe cases the labia and clitoris often become very much swollen and tender to the touch; and frequently there is more or less severe burning, pain felt when the urine is voided. In more severe instances of the disease, there is a continual and aching pain, felt in the bladder and sometimes both of which in a few instances become much
inflamed. These symptoms constitute an ordinary gastric

TREATMENT. In the first stage of the disease, the
atrophic or abortive treatment may be followed, if
the discharge has not become purpuric. A very weak
solution of the sulphate of silver, say from th' eighth
to the one of distilled water made with a glass syr
isput, will not infrequently and about the disease. It
should not be used more than two or three times. The
remedy acts by neutralizing the pus, and also cools
the fomites with a film that protects the villous
surface. It is my opinion that this remedy should
be used with great caution, and indeed never
applied to a patient that is of a irritable habit.
In such patients it is often followed by an
aggravation of all the symptoms. It is after the
case that the disease appears to have a tendency.
within itself to terminate spontaneously. But however, there are but few individuals who are willing to delay the use of remedies, or who are prudent enough to abstain from the use of stimulating articles of diet, and other causes that is calculated to keep up the irritable habit of the system, to gain such a favorable result, and in almost all cases either from erroneous efforts to arrest the discharge, or from an irritable habit augmented by stimulating articles of diet, the disease is not arrested by judicious treatment will degenerate into a chronic discharge from the uterus, generally called catarrh. The inflammatory stage of the disease should be treated as a local inflammatory affection, with but very little attention to the discharge from the urethra. If the patient be phlegmatic, and the pulse slow and active, blood should be freely taken.
from the arm, and the inflammatory and irri-
table state of the system reduced with the use of
aphlogistic remedies. For this we may use salic
bathes, or some baths not very hot for this pur-
pose. To relieve the burning pains produced by the
urine, we may use nitre dissolved in some me-
diaginous fluid, such as a solution of gun-soaps
or plaster of ice, the patient should use this freely.
For the painful erection and choroid, that frequ-
ently happens to the patient when he is in bed, warm
pressure great relief from the application of
warm fomentations or emollient calomel,
which is of more service than cold application
that is often recommended. Also camphor com-
ined with opium is an excellent remedy taken
just before going to bed, for relieving these
painful affections, say two gr. of the former
and two of the latter. The Camphor seems
To act here as a substitute, and its beneficial effects may be attributed to that. The roller
bandage is recommended by our eminent Professor
of surgery to be a very excellent remedy for the
painful affection of choree, and I have no
doubt of its excellence as a remedy. If bleeding
should take place from the urethra, it should
not be arrested, not unless it should be too copious
which is very seldom the case. When it is desired
to stop the hemorrhage, it can be very promptly
done by pressure on the urethra with the hand
for twenty or thirty minutes. Rod and common
die will act very beneficially in reducing the
inflammatory symptoms. There is nothing
more common than the use of astringent
injections in the inflammatory stage of the
disease, and in some cases the discharge may
be arrested in this way, but very frequently
The consequences are extremely injurious. This is a practice I think cannot be too strongly deprecated. After the local and general symp-

tomy symptoms have been reduced, and the discharge becomes thick and more prevalent, balsam copaives or some of its mixtures should be resorted to. All mixtures I believe are to give balsam copaives the preference over all other remedies in this affection. I have frequently given it after the bowels have been freely evacuated by a saline purgative with decided suc-
s. The eminent Dr. Biscoe of Bathville recom-

mends the following as a excellent mode of administers 1. Take balsam copaives palp.

cubeb, pul. gun. Arabia, syrup of hels, and car

cinnamon water each 3/ii mix and give from 3/ii to 3/i three times daily. Cubeb alone is also a very excellent remedy for this disease. They are
much more stimulating than the preceding remedy, and should be used with much caution. I almost always use this article in combination with balsam capreus according to following: Take balsam capreus, mixture of cubeb, spirits nitre each 3i. Fine opium, pul. gum triplex each 3i. distillate water yin mia and take a spoon full three times daily. The use of these remedies should be continued for five or six days after the discharge has ceased; yet it is sometimes the case that when they are discontinued as soon as the discharge is arrested it often returns in the course of six or eight days, and when this is the case, the same remedies rarely if ever have the same beneficial effect. Should the discharge continue after the use of the above named medicines, recourse should be had to astrigent injections such as the sulphate of zinc commencing with a grain...
to the ounce of water, but in proportion as the disease becomes chronic, the quantity of this may be increased to eight or ten grains to the ounce. In very obdurate cases, if first the use of the tincture of antirrhine along with astringent injections, particularly the nitrate of silver in solution, will soon effect better than any other remedy. The quantity of this article should be two grains to the ounce of water, at the commencement and gradually increased to six or six grains to the ounce. This solution should be applied by means of a glass phial every night just before going to bed. A glutinous discharge is very often dependent on the irritation of a abscess in the urethra; and when this is the case, there is nothing but the removal of the abscess that will effect a cure. This can be done by the proper use of leeches, and we may suspect the presence of an abscess when the glutinous discharge
continues the differences of all the above named means. It is proper to remark that in using injections particular care should be taken to prevent the liquid from gaping into the mouth of the bladder, which can be very promptly done by means of pressure over the posterior part of the urethra, near the margin of the anus at the time of using the injection. It is sometimes the case, in patients who are anaemic, the discharge from the mucous membrane of the urethra appears to extend from the mere part of tone, and when this is the case, I have succeeded in arresting the discharge with the use of the mucilaginous mixture of iron, one drop or two to six times a day in water. The treatment of gonorrhoea in females should be conducted in the same way.
and as the same principles, it is to be observed that the use of injections can be carried to much greater extent than in males. The diet of the patient during the whole course of the disease, should be mild and unimmitating.