

AN

# INAUGURAL DISSERTATION

ON

*Leucorrhœa*

SUBMITTED TO THE

PRESIDENT, BOARD OF TRUSTEES, AND MEDICAL FACULTY

OF THE

## UNIVERSITY OF NASHVILLE,



FOR THE DEGREE OF

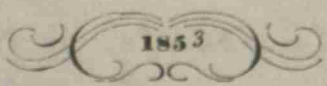
### DOCTOR OF MEDICINE.

BY

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OF

*Memphis*



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## Leucorrhœa

This term literally signifies a white discharge, though the discharge assumes gonorrhœal, whether it originates from the mucous membrane lining the vagina or from the os tincæ or cervix uteri. This discharge may consist of natural mucus, of white mucus, of a transparent orropy mucus, or it may be of a purulent nature. It is not unfrequently mingled with a sanguineous discharge - especially in the advanced stage of the disease. During its insipient period the discharge is very white and often presents a glistening appearance, but as it advances and penetrates deeper and deeper into the genital organs, the inflammation being generally seated

in the os and cervix uteri, the discharge which escapes from the mouth of the vagina becomes more and more yellow and purulent and of a thicker and moreropy consistency. Almost any one who has not paid particular attention to this subject would be surprised to see the vast numbers who are suffering from its effects. Especially does it prevail among that class of females who are necessarily exposed to the extreme and sudden changes of weather, so characteristic of this climate, and who cannot or will not protect themselves during their catamenial periods. But few females are aware of the ease with which they may at this period contract a disease that will prey upon their systems and even accompany them to their graves. It is a fact I think, to be

lamented, that this disease in its early stage is looked upon, not only by the community generally, but by a great ~~many~~ physicians, as being of but little or no importance.

Taken in its forming stage, it is very easily cured, but most generally when a physician is consulted, he will find that his patient has been labouring under the disease for five ten or fifteen years. By this time her constitution is a wreck and the disease has probably advanced to prolapsus uteri, granulation and ulceration of the cervix, dilatation of the os tince &c. At this advanced stage it is no trifling matter to effect a cure. I do most conscientiously believe that it is the duty of every physician to warn his female patients of the great danger to which they are exposed in suffering this disease to make its

inroads upon them unmalicious for so long a period; by thus acting, he would give a virtual testimony of the influence of philanthropic principles. If he treats the disease in its forming stage he can cure it in a very short time, but if he does not commence his treatment until the disease has progressed for years, it will require months to eradicate it from the system.

Causes I consider cold the great and principal cause. Prior to the period of menstruation the uterus is perfectly dormant, but at that important period, it becomes more vitalized, there is a determination of blood to its parts, a new life and action is set up and it is at that period more or less congested. According to the regular time assigned to the menstrual period it lasts about six days, sometimes

more at others less. The determination of blood to the organ generally commences three days before the menstrual discharge shows itself, which will continue two or three days; it will then be a short time before the uterus is entirely relieved of its congestion. The menstrual period will in some females last half as long again as the time which I have specified, whilst in others it will not exceed one or two days, but as a general rule it is six days from its commencement to its cessation, and as it is common for females to menstruate once a month you will readily perceive that the uterus is in a greater or less degree congested for nearly one third of the time. The congestion which I have mentioned is of course natural, but this menstrual discharge is liable to be increased, diminished or entirely arrested, which

will in a greater or less degree change the natural congestion into an abnormal state.

I believe ~~where~~ cold is more likely to produce this change than any other one thing, and every one knows that a female is more susceptible of cold at this period than at any other. A woman takes cold during her menstrual period there is a great excitement and irritation about the uterus, the cold at once produces its effects upon this organ, arrests this discharge which is absolutely necessary to maintain the health of the individual, and which is now clogged up in the folds of the vagina and uterine vessels and sets up an undue amount of irritation, which terminates in inflammation to a greater or less extent. This inflammation is generally very slight at first, but is increased at every return of the menses, it is

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sometimes by the efforts of nature arrested and subdued before the return of another catamenial period, but in this effort she most generally fails and this disease is suffered to progress year after year. The first attack is always more or less acute, but soon assumes a chronic form, unless remedial agents are used to arrest it, and hence Leucorrhoea may and does exist in virgins as well as in married females. Sexual intercourse is another cause of this malady. Some females are naturally of such a tender and delicate formation that coition although it may be carried to a very limited extent, will produce extreme irritation, and the cause being kept up will terminate in inflammation of the parts exposed, consequently it is of very frequent occurrence in newly married females and often produces sterility.



It is sometimes the case that women will not bear children for several years after marriage, relieve them of this disease and they will frequently conceive immediately. Others will bear one or two children and cease to conceive for years until they are cured of Leucorrhoea, when they will begin again and bring forth several children. That it frequently produces abortion I presume no one will deny.

Leucorrhoea may exist to a limited extent prior to conception, which state will aggravate and increase the malady unless arrested by proper treatment. The disease after conception receives a great impetus on account of the increased vascularity of the genital organs. Difficult labour is another cause of this disease, owing to the continued pressure of the foetal head on the os tincæ and cervix uteri, and it not unfrequently

occasions partial lesions to the mucous membrane which terminate in inflammation.

Abortion is very often the exciting cause of Senescence on the same principle that difficult or protracted labour produces it. Any great and sudden mental excitement will exert a decided influence over the menstrual discharge, it may be entirely arrested by a powerful depression which of the mind, which exercises a great influence over the uterine organs.

Symptoms. The chief of these generally show themselves just before or after the menstrual flow; which are slight pains in the sacral and hypogastric regions passing around the hips and down the thighs; these pains are generally superseded by a few lumps of a white glary mucous secretion for several days; this secretion will show itself upon the linen of the

patient or during menstruation. If the inflammation commences upon the os or cervix uteri it will not produce any discharge until it has made considerable progress and even extended down the walls of the vagina, then the discharge will become more and more copious, this discharge strictly speaking is only a symptom and not the disease. The appearance, quantity and consistency of the discharge affords a very satisfactory evidence of the extent of the inflammation. If the discharge is of a purulent nature and of a thickropy consistency it is very conclusive evidence that the inflammation has penetrated deeply, but if it should be of a white transparent and thin appearance, the inflammation will probably be still confined to the mucous membrane of the os and cervix uteri, and to that lining the vagina. This discharge in some cases where

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disease is supposed to run its course for years assumes a yellow thick purulent nature and is often mingled with lumps of dark blood which shows that the disease has extended to ulceration. A digital examination will greatly assist in deciding the extent to which the inflammation has extended. You will generally find in its advanced stage the vagina very much relaxed and the os tince sometimes very much dilated, sufficiently so, in some cases to admit the introduction of two or three fingers. The cervix uteri is not uncommonly enlarged, and instead of presenting a smooth surface, it will often be found covered with small granules about the size of a shot or grape. The different organs of generation are sometimes very tender, especially the uterus, in some cases it is hard, whilst in others, it is relaxed and soft. When the inflammation has extended to all the genital

organs and produced a general relaxation the uterus is certain to be more or less displaced, generally retroverted in married females and prolapsed in single ones. The uterus is supported chiefly by the contraction of the surrounding organs, and not alone by the ligaments, consequently when these organs by relaxation lose their power of contraction and are no longer able to support the uterus, it must fall, and will seek for a point upon which it can rest, this is especially the case when the patient is standing or walking. In cases where the relaxation has extended to the mouth of the vagina the uterus will often protrude beyond that organ. When the uterus descends into the vagina it produces disagreeable feelings, a great pressure and bearing down in the pelvic region; when the patient attempts to walk she will feel as though a large foreign body was suspended and

her vagina, and on the eve of escaping, sometimes, it will produce such excruciating pain that she will be forced to take her bed and have the uterus replaced. In some cases the inflammation will extend to the external organs of generation and produce great tumefaction. Nor have we yet traced this inflammation to its termination; it often extends to the rectum, especially is this the case when the uterus is displaced, for when it descends either the fundus or cervix will press upon the rectum producing inflammation and very obstinate and painful constipation. This disease often extends to the bladder and urethra causing painful micturition, sometimes almost to an insupportable degree, after this, in some cases, the yellow thick matter which I have before mentioned, will flow from the urethra. A dull heavy pain is almost universally felt

in the ovarian region, generally on the left side, also, in the lumbo sacral region, and the patient will say when the uterus is prolapsed that the coccyx feels like it was doubled under or broken off, this is almost an invariable feeling. The menstrual period always affects this disease, the symptoms are apt to be greatly increased and aggravated. This period always arrests the treatment and gives the disease six or eight days the advantage, the only time to use evulsive remedies is from the cessation to the return of the menses. Very often a large portion of the increased hemorrhage originates from the diseased surface, for some females who are pregnant and at the same time suffering from this disease will waste so much that they will think they are about to miscarry, this hemorrhage often makes its appearance periodically which gives rise to the opinion that

some females menstruate during pregnancy.  
 A wrecked and destroyed constitution is almost an  
 invariable attendant on the latter stage of this  
 disease. That debility may produce Leucorrhoea is  
 an undeniable fact, though the former is very  
 seldom the cause of the latter, whilst the latter  
 frequently produces the former. Derangement of  
 the digestive apparatus is another and probably the  
 most common external or visible symptom of  
 this disease and at which no one will be sur-  
 prised when he considers the close and intimate  
 connection that exists between the stomach and  
 uterus. Indigestion is often the first alarm-  
 ing symptom, and the physician is frequently  
 requested to administer something for its relief,  
 when it is only a symptom of the true disease,  
 and if he is not particular in his examination,  
 he will be led astray, and made to believe that



it is dyspepsia. A morbid appetite is frequently set up, a great desire for all kinds of trash, whilst she has no taste for such things as she should eat, but will prefer green fruit to any thing else.

The liver is almost invariably affected and should receive special attention, the patient will often complain of a constant pain in the region of this organ and will consider it the cause of all her sufferings. The tongue is generally covered with a white slick coat, and presents a shining appearance. The patient does not enjoy much sound sleep, she will frequently pass the night without sleeping, and when she does fall asleep, she is often disturbed by unpleasant and even frightening dreams.

She will also complain of constant headache, caused by debility. There is not often much fever. The pulse is generally small, quick and

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irregular, often very feeble, indicating in most cases great debility and prostration of the powers of life. Great depression of spirits is a universal symptom in the advanced stage of the disease, the patient will imagine that she will never recover and you may apply your remedies and discover a decided improvement, but still she will not acknowledge that it is perceptible. It is very important in the treatment of all diseases, and especially in this, that you should have the entire confidence of your patient, and if you have it not, let it be one of your first objects to obtain it, in order that you may keep up her spirits, which will assist you in conquering the disease. The nervous system is always in a more or less irritable state, some times so, even to an alarming extent, any sudden noise or accident of an exciting nature

will have an extraordinary effect, sometimes producing spasms. The skin is always affected to some extent, sometimes the patient will complain of cold clammy sweats, at other times the skin will be hot and dry, at others burning sensations in the palms of the hands and soles of the feet, and perhaps in a short time she will complain of cold extremities.

Progress. Leucorrhoea sometimes invades the system very rapidly, and reduces at once the general health and constitution, and threatens to annihilate its victim. But I consider this very rare, it seems to prefer making its inroads slowly and secretly until it has permanently fastened its grasp, and undermined the health and system of its subject, before any prominent symptoms are fully developed.

It is often the case that this disease will

prey upon its unfortunate victim for a number of years before she is aware of the deep and alarming inroads which it has made upon her general system. It may be compared to a small piece of fire placed in a coal mine, which will at first produce so slight an impression, as scarcely to be perceptible, but it will continue by degrees to extend itself to the adjoining <sup>parts</sup>, inserting its roots deeper and deeper until the whole is consumed.

Prognosis. In Leucorrhoea the Prognosis is favourable under proper treatment. If the great primary causes of this general derangement, extreme debility, and nervous irritation be relieved, it will be an easy matter to alluviate and remove the malady, in fact, they frequently give way of themselves. I think there are but few diseases in which medicine has a finer effect, and

no one which offers a physician a better opportunity of displaying his skill, and winning the confidence and esteem of his patient, and her friends. Any one who expects to cure this disease in a few weeks will find himself sadly mistaken, it will sometimes require one or two years to accomplish a permanent cure.

If you suspend the treatment before the disease is thoroughly eradicated, it will be certain to return, bringing in its train all those unpleasant symptoms which formerly existed, especially, the depression of the mental faculties.

Diagnosis. If all the symptoms which have been enumerated should present themselves in one case, it will be an easy matter to make out the diagnosis, but this cannot be expected, nevertheless there are always enough developed to enable the practitioner to make out a very

clear one. But if there should be doubt, after duly considering the external symptoms, and examination should be made, which will generally enable you to decide the case, but if not the speculum may be used. Then if Leucorrhoea be the cause of the derangement, you will find the walls of the vagina patent and relaxed, the os tince more or less dilated, sometimes presenting hard lumps, sometimes soft, at other times it is rough and uneven. The cervix uteri will often be covered with small granules. If any of these derangements are present, and the patient having had a mucous discharge for sometime, especially if it has assumed a purulent or yellow appearance, I would consider it satisfactory. Whenever this purulent discharge is found, there is certain to be inflammation to a considerable extent. A woman may have a thin

white mucous discharge, originating from other causes besides inflammation, being an over-secretion of the mucous membrane, but if this be the case it can be easily detected, for if there is inflammation going on sufficient to affect the system, the discharge is sure to assume a purulent nature. Leucorrhoea may be distinguished from gonorrhoea, better by circumstances, than in any other way, for instance, if a woman possessed of a character above suspicion, tells you that she has a copious discharge from the vagina, and has had it for several months or years, and you have other corroborating symptoms, you should not hesitate to declare it Leucorrhoea. But if on the other hand a female of a suspicious character or one whose husband indulges in this kind of dissipation, tells you she has a discharge from the vagina of short

duration, and the first symptoms were burning and smarting sensations, and that the discharge flowed in a gentle stream, instead of in lumps, as in Leucorrhoea, these circumstances and symptoms with others which will probably present themselves, will enable you to decide under which head the disease should be classed; though it would not be prudent in every case for the physician to express his real opinion. Generally Leucorrhoea has so fully developed itself before a physician is consulted that after making a complete examination externally and internally, it is not difficult to make a correct diagnosis.

Termination. I have no doubt but what Leucorrhoea may terminate in death, but not directly. The general derangement of the system may be carried to such an extent that the patient will sink under its influence, but



if she has not gone into any disease to which, she may be predisposed, proper treatment will soon check the inflammation in its slow, but regular progress and rally the sinking constitution, and finally restore the patient. The principal danger of this disease is in its reducing the vital powers of the patient so low and enfeebling her to such a degree, that if she has in her body the seeds of any other disease, they are sure to take root and spread; consequently, the patient is unable to withstand their effects, having a disease which has already brought her so near the brink of the grave— for instance, if she be disposed to Phthisis Pulmonalis, it will almost invariably develop itself. She is also more susceptible of any epidemic disease. Where there is a predisposition to cancer it may be developed in the uterus, though this is rare.

When the attention of the medical profession is fully directed to the devastating effects of this disease, there may be much suffering avoided and many a valuable life spared.

Treatment. Simple inflammation of the mucous membrane lining the cervix uteri and walls of the vagina unattended by hypertrophy or ulceration may be easily cured by rest, attention to the bowels, and vaginal injections of acetate of lead and decoction of red oak bark. It is surprising how long a female will permit this destroyer of health and life to make its inroads upon her system before she will apply for medical aid, and when her physician arrives, she will frequently give some other reason for having summonsed him, never suspecting that this is the cause of her illness. At this stage the disease may be arrested by

applying cups to the sacrum, leeches to the inflamed surface if necessary; then injections of acetate of lead and finally a strong solution of nitrate of silver, will generally make a complete cure. This disease sometimes penetrates the cavity of the cervix at a very early period, when this is the case, it is necessary to cauterize the cavity, though it may be cured by properly using a strong injection of nitrate of silver; it is generally the case as soon as the local symptoms give way and the discharge is checked the treatment is suspended, when it should be continued with energy as long as there is a trace of the inflammation. Balsam of copacina has a fine effect upon this disease, when there is great relaxation and a want of vital action, though it will not answer when there is much excitement about the vagina. Injections of cold water into the vagina are advantageous, admin-

istered either alone, or saturated with castile soap,  
 this cleanses the vagina, as uteri &c, and carries off  
 all secretions that may be lodged in these organs,  
 consequently medicated injections will have a better  
 effect. Astringent injections are indispensable  
 remedies, they cause the vagina to contract and  
 by so doing it holds the uterus in its proper place.  
 If the uterus is already prolapsed and you wish a  
 powerful astringent, a strong solution of alum should  
 be thrown into the vagina, three or four times a  
 day. Acetate of lead, decoction of red oak bark and  
 Balsam of copaima are preferable unless there  
 should be great relaxation of the genital organs,  
 and a prolapsed state of the uterus, in such a case,  
 alum has a quicker effect, but if there should  
 be much excitement acetate of lead is best, especi-  
 ally if it extends to the external organs. Balsam  
 and red oak vage. have a good effect when the

disease is chronic. A strong solution of nitrate of silver is the only remedy that will make a permanent cure, where the disease is of long standing. The injections above mentioned should be used first to prepare the surface to which they are applied for the reception of the nitrate of silver. About fifteen grains ~~dissolved~~ of nitrate of silver should be dissolved in an ounce of water and used every other day continuing to apply some one of the others, two or three times a day.

The quantity and frequency of the injections should be varied according to circumstances, of which the practitioner should use his own judgment. Some object to the use of the nitrate of silver on account of the stain which it leaves on the patient's linen, but the ingenuity of females will remedy this objection. The reason these injections, which have been mentioned, so often fail, is because

they are not properly administered, nor used sufficiently long. Attention should be paid to cleanliness, and the dress of the patient should be well adapted to the season, the body should be kept warm and comfortable. The physician should procure a glass syringe six or seven inches in length. The patient should then be placed upon her back, with the knees flexed; having prepared the solution, fill the syringe and introduce it so far that there will be no difficulty in reaching the inflamed surface, then empty the contents, using some force, so as to insure an impression; this should be repeated until half a pint has been used, of course it will not all remain, but it is necessary that it should be thrown up until it begins to flow back, then you are certain that the walls of the vagina are well washed. When the uterus is prolapsed, it should

be replaced, keep the patient in a recumbent posture for eight or ten days, first use the steam injection then proceed according to the foregoing directions; the patient should be kept perfectly quiet for fifteen or twenty minutes after using the injection. As soon as the uterus and surrounding organs are relieved it will remain in its proper location. Pepperies generally do more harm than good, though in some cases they may prove to be advantageous, if skilfully used. The treatment should be persisted in until all the local symptoms disappear and the uterus presents to the touch a perfectly healthy and natural surface, then the treatment may be suspended for a few days or a week at a time, and if the disease does not return cease to use the remedies until just after the menstrual period, then it should be used again for several days, and this should be done for four successive

periods; if by this time none of the former symptoms make their appearance, and your patient seems to be restored to health, all the constitutional symptoms having subsided, you may feel safe in pronouncing your patient cured. The patient should be very careful not to expose herself to any of the former exciting causes, for she will be liable to contract the disease again.

Local depletion. There should never be taken from the patient any more blood than what is absolutely necessary, though in some cases it is beneficial both in relieving pain and in subduing inflammation. If the patient seems to suffer much, from pain in the back and hips the extraction of a small quantity of blood will afford great and immediate relief. It would be advisable to apply ten or fifteen leeches to the sacrum,



but if these cannot be obtained in time, cups may be used. In some cases it is necessary to scarify the os uteri or to apply leeches, caution should be used not to allow them to seize hold of the inner surface.

Cauterization. It is sometimes necessary to resort to this remedy, but as a general rule a strong solution of nitrate of silver will answer, though this will be tedious and wants require more of the physician's attention. Caustic in the solid form will have a more decided and powerful effect than the solution, therefore it should not be used when there is much nervous excitement about the patient, because the operation may not be able to withstand the shock; unless the solution will not answer, the stick caustic should be applied and soon covered into the cavity, if necessary, but the physician should

resort to these remedies only when the others  
 will not answer. It is often necessary to give  
 some anodyne, small powder of morphia, pills  
 of Hyosciamus, or injections into the vagina of  
 milk and water containing fifteen or twenty drops  
 of laudanum; Hyosciamus is preferable to mor-  
 phia, because it does not check the action of the bow-  
 els. The patient will sometimes complain of a  
 dull aching in the back, especially after sitting  
 up or walking about too much, when this is the  
 case a plaster of Burgundy pitch will afford relief  
 and strengthen the patient.

A pain frequently lingers in the ovarian region,  
 which may be removed by the application of small  
 blisters.

Habits of the patient. After the patient leaves  
 her bed, she should then occupy an easy chair and  
 as soon as the heaving down sensations have

entirely subsided, she may walk about over a smooth surface, but should avoid stepping over any thing, or upon the slightest elevation; she should also be cautious in all her movements, and particularly in regard to her diet.