

AN  
INAUGURAL DISSERTATION.

ON

*Amemorrhoea*

SUBMITTED TO THE

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## Amenorrhoea

Each and every subject that belongs to the science of medicine, is founded upon scientific truths; truths that have been established after many long and tedious investigations. A theory when once established if it is not supported by indisputable facts, it will stand so long as the investigating mind passes by it without examining into the facts (if any) upon which it is founded; but as soon as it is submitted to the empire of reason it falls never to be raised by the scientific mind.

But among the vast number of subjects that belong to the science of medicine, none should attract more of the physicians attention than the diseases to which the peculiarities of



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The female during the menstrual period ~~is~~ subject to Diseases that she is exempt from before puberty and after the menstrual function is arrested at the decline of life. For woman during the menstrual period of her life seems to be destined to diseases that she is exempt from in the other periods of her life. And diseases that the male is not subject to at all.

In health and disease, in whatever climate she may exist, in all nations and among all tribes of people, woman is found to be under the dominion of a peculiar physiological law that causes a periodical hemorrhage from the generative organs that takes place once in every <sup>eight</sup> twenty days or in about that length of time. She is not subject to this periodical hemorrhage



in the nonpuberty state, but becomes subject to it at the period of her life when her generative organs are so developed as to be capable of generating and producing germs.

She at this period of her life comes under the dominion of the law that causes the monthly hemorrhage from the womb that she is known to be subject to during the menstrual period of her life.

As a general thing women arrive at the state of puberty at about the age of fourteen, at which time they become subject to a sanguineous discharge from the uterus. The discharge is termed the menses and <sup>the</sup> function menstruation. The menses continues to return regularly once a month until



about the time they arrive at the age of forty five, when in general they will disappear never to return again.

But according to the best physiological histories. The female in the different latitudes of the earth does not arrive at the stage of puberty at the same age. For warm climates have been found to increase the development of the generative organs and cold climates to diminish the progress of their development.

And as menstruation depends upon the state of development of the generative organs, and an equilibrium in the functions of the various organs in the system and not upon age, the female will be found to commence discharging the menstrual function in any climate whether it be warm or



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cold, when the development of the menstrual organs is fully completed, and as women climates increase and colds retard. The development of the menstrual organs we will find that the female will take on the menstrual function, the earlier the further south she lives and the farther north she lives the later she will be in arriving at the period of development so as to be capable of taking on and discharging the menstrual function.

As to the cause of menstruation we know but little. And we need not look to any other source than to woman for to find the cause of her periodicity and the law regulating it, for she possesses it and it belongs to her and her alone.



After she has passed through the period of girlhood, she then arrives at the age of puberty, when according to her nature she will take on the important function of menstruation, provided she be in health and is not the subject of some malformation of the generative organs. But if she fails to discharge the menstrual function, she then becomes the subject of disease. She may assume the menstrual function and discharge it properly for a while, and <sup>then</sup> become the subject of such derangement in the system as to cause her to fail in discharging it.

The menstrual function is subject to various diseases according to its derangement. But among the



number of diseases to which it is subject, I shall not endeavor to investigate the causes, symptoms and treatment of but one. Amenorrhoea will be the only one that I shall endeavor to treat of in my thesis.

Amenorrhoea may be divided into two classes.

1<sup>st</sup> *Emansio Mensium* - When the menses have never appeared, 2<sup>nd</sup> *Suppressio Mensium* - When they have appeared but have been suppressed by some derangement in the system.

*Emansio Mensium* - May depend upon some malformation of the generative organs, or it may be owing to some derangement in the system that prevents the performance of the menstrual



function. If the Ovaries are absent  
 The system may be otherwise tolerably well developed, but there will not be any effort at menstruation.

If the Uterus be absent and the Ovaries present, there will be an effort at menstruation every month but of course no discharge. If the Cervix Uteri, Os Uteri or Vagina be closed, or if there be an imperforate hymen there will be an effort at menstruation at each menstrual period, but no discharge without the parts give way on account of the accumulation of the menstrual fluid in the cavity of the Uterus or in the Vagina.

If the ovaries or the womb be absent, but little if anything can



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be done in the way of giving relief to the unfortunate person.

But if the failure in the menstrual function is owing to the Cervix Uteri, Os Uteri or Vagina being closed, or of an imperforate hymen, much relief may be given. In a case of malformation of the Cervix Uteri, Os Uteri, Vagina or hymen the parts should be separated by a bistoury so that the menstrual fluid can pass and be discharged. Care afterwards being taken to prevent the cut surfaces from uniting again. A piece of lint covered with some kind of cerate should be introduced in between the cut surfaces to prevent <sup>them</sup> from ~~cohering~~ together and obliterating the menstrual channel again.



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After any of the malformed parts have been divided, care should be taken to prevent inflammation arising, but if inflammation should arise, it should be subdued by both local and constitutional Antiphlogistic treatment. After the parts have been separated the menstrual fluid will generally appear at the next regular period; if it should not appear the case should be treated as a case of suppressed menstruation when no malformation exists.

In *Emasio Menstruum* the subject may be one of robust appearance of body or she may be in a pale and debilitated state of health.

The suffering of the pale and debilitated patient is less than



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that of the plethoric one. In either an attempt at menstruation may be made at each menstrual period. The effort will most frequently be accompanied by pain in the head, back, abdomen and inner parts of the thighs, with general weakness, frequently the stomach and bowels become deranged, the light affects the eyes. Sometimes the preceding symptoms are accompanied with throbbing in the head, convulsions may also occur should the patient not meet with relief.

The causes of this variety of the disease are generally found to be owing to the patient having led a sedentary life, living on gross and luxurious diet and sleeping



on soft beds in hot rooms.

The treatment will depend on the constitution of the patient, and it should vary according to the time it is administered whether it be between or during the paroxysms.

In patients of a full and plethoric habit, they should be bled, use mild purgatives and live on low diet to deplete the system; after the system has been depleted the tincture of Cautarides should be used commencing some ten or twelve days before the expected paroxysm.

When the patient is of a weak and nervous constitution, the system should be strengthened with nutritious diet, and such remedies as would



have a tendency to improve the general condition of the blood and give the strength to the patient. The preparations of iron stands at the head of the list of remedies for the improvement of the blood, iron should be used until the system has regained its strength, and then the patient should be treated the same, as the plethoric patient after the depletion of the system. If the preceding <sup>treatment</sup> should not establish the menstrual functions in a short time, the patient during the next paroxysm should drink some warm diaphoretic tea, have cloths wrung out of hot water applied to the abdomen, Vulva and inner part of the thighs. After the preceding treatment



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The menses will generally  
appear, but if they should not  
the treatment should be per-  
sisted in until relief is  
given.

### Suppressio Mensesium.

A suppression of the menses  
may depend upon some direct  
cause that suddenly arrests  
them during their flow, or  
it may be owing to some  
local cause or constitutional dis-  
ease that is slow in arresting  
them.

Among the causes that  
suddenly arrests the catamenial  
discharge, are cold caught  
during their flow, the feet being  
wet in cold water, a sudden



Shock on the system or some acute disease she becomes afflicted with at about the commencement or during the menstrual period.

The symptoms of a sudden suppression of the menstrual function are fever, thirst, hot skin increased pulse, pain in the head back, pelvis and inner portions of the thighs, with a heavy sensation in the lower portion of the abdomen, and general debility, frequently local inflammation arises in the brain, bowels and Womb, inflammation also sometimes arises in the lungs and Stomach.

The treatment will depend upon the symptoms as they are developed, and it should vary as



It is administered, whether it be between or during the paroxysm.

The main object is to subdue any inflammation that should exist, and to recall the menstrual flow.

To do this the patient should use the warm hip bath, have cloths wrung out of warm water and applied to the abdomen and genital organs, use gentle and relaxing purgatives and mild diaphoretics. If any local inflammation exists it should be subdued by general and local antiphlogistic treatment.

Should the means applied fail in recalling the menstrual effusion we should endeavor to mitigate the suffering of the patient during the paroxysm. And during the



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intermission the system should be prepared for the performance of the menstrual functions at the next regular period, when the same treatment should be used again during the paroxysm.

A chronic suppression of the menses generally depends upon some chronic disease, such as Rheumatism, Cancer or Consumption or any constitutional disease that produces much derangement in the system. A chronic suppression of the menses may be owing to general debility or excessive plethora.

When the suppression is owing to some constitutional disease, as soon as the system is relieved



of the disease it is laboring under  
The menses will generally appear.

When the suppression is owing  
to general debility, the system  
should be nourished with nutri-  
tious <sup>diets</sup> The preparations of Iron  
should be used and such other  
remedies as would have a tend-  
ency to improve the general  
health and strength of the  
patient, after which the tinc-  
ture of ~~C~~an~~t~~harides should be  
used to arouse the menstrual  
organs into action.

When the disease is owing to  
a plethoric state of the system,  
the system should be depleted, and  
after the depletion of the system  
the tincture of ~~C~~an~~t~~harides and



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Such other remedies as would  
have a tendency to arouse the  
menstrual organs into action  
and cause them to perform  
their proper functions.