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# HOMŒOPATHY

AS APPLIED TO THE

# DISEASES OF FEMALES

96674

AND THE

## MOST IMPORTANT DISEASES

OF

# EARLY CHILDHOOD.

BY

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"Multi Medici, qui rerum quæ manifesté conspiciuntur, causas reddere nequentes, eas esse omnino negant."—GALEN, *De locis affectis.*

"Multum adhuc restat operis, multumque restabit; nec ulli nato, post mille secula, præcludetur occasio aliquid adhuc adjiciendi."—SENECA.

J. E. ADLARD, PRINTER, BARTHOLOMEW CLOSE.

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# PREFACE.

With extreme diffidence the author has ventured upon the publication of the following work, which embraces a series of diseases of the greatest interest and importance, to which justice could scarcely be done in a much larger volume; but he was induced to attempt this practical treatise upon the Homœopathic treatment of Pregnancy, Labour, and the Puerperal State, and the various derangements and accidents to which they are liable, in conjunction with the Functional and Organic Diseases of the Womb, because it appeared to him that, as the progress of Homœopathy is undeniably rapid, and its study daily becoming more extended, especially since the establishment of two Hospitals in the Metropolis, and of one in Manchester, a great hiatus would be found to exist in this department of Practical Medicine; at least, it was an exigency which, some years back, pressed itself upon his own mind, when first studying and testing the novel and startling doctrines of Hahnemann.

This work is intended to answer the twofold purpose of a Manual for the Homœopathic student and Volume of Reference for the experienced practitioner, who would refresh his memory in respect of the remedies which are most in correspondence with the symptomatology of the diseases treated of.

The author, in attempting this difficult task, has felt deeply the necessity of compressing his observations respecting the

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diseases and their symptoms into as concise a form as possible, in accordance with the scope and intention of the work; and is therefore sensible of the limited nature of the physiological and pathological observations which accompany it.

On this point, however, he is somewhat relieved by the consideration, that so many excellent Treatises have been written on the diseases to which he refers, the pathological accounts of which leave so little to be desired, and with which all medical practitioners are supposed to be acquainted, that a simple account of what is known of each disease,—its mode of invasion, course, and termination, its consequences and pathological conditions, is all that is necessary to give opportunity for an exposition, in a convenient manual, of the Homœopathic treatment.

The author has also to acknowledge, generally, the use he has made of the labours of others in preparing his work. He has diligently compared his own experience with theirs; and whilst he refers with gratitude and pleasure to the light thrown upon these diseases by the writings of Gooch, Clarke, Churchill, Montgomery, Burns, Simpson, Bennett, Ashwell, and others, he is compelled to avow what experience has proved to him,—namely, that the Homœopathic Treatment has an immense superiority over the severe, local applications, in all the Diseases of the Womb. The next grand improvement in the management of these diseases is undoubtedly that introduced by Dr. Simpson of Edinburgh, in the treatment of certain kinds of displacement of that organ.

The portions of the work devoted to Pregnancy, and the Diseases of Childhood, are written with the view of being also useful to mothers, who, having been accustomed to Homœopathic treatment, and made sensible of its value, find themselves out of the reach of a practitioner of that school. A

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detailed exposition of the Symptoms of Pregnancy has been omitted, because it would involve only a physiological analysis, and have no therapeutical bearing.

The Obstetric Art being divided into three parts, viz., Manual, Instrumental, and Medical, has obtained only a partial consideration. The first two divisions are not here touched upon, because they have been so fully and elaborately treated of in the various manuals devoted to that subject; and have been, and continue to be, ably taught from the academical chairs established for that purpose. It has not been thought necessary to recapitulate in this work what has been so perfectly studied and so frequently published, the more especially as it admits of little change, and does not affect the medical treatment.

The author has, therefore, confined himself to the third division, which pertains to the Medical Management, and has included whatever relates to the moral and physical well-being of the pregnant female.

In treating of the Pregnant State, the several conditions of Abortion, Hæmorrhage, Labour, &c., come under consideration, and, as a natural consequence, the Treatment of the Infant. And, seeing that it would be incomplete, if the diseases to which women are most liable during the puerperal state were omitted, Mania, Convulsions, Puerperal Fever, &c., are arranged under that division.

The period of Infancy is usually considered to terminate at two years of age. During that period the eruptive and other diseases, especially those connected with Dentition, are liable to occur, although, in the majority of instances, they may perhaps happen after; but as that portion of Childhood is not exempt from such diseases, the work would be deficient if it did not also include them. Some of the most important and common have, therefore, been added, which,

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although they attack children of all ages, not unfrequently prevail during the first two years.

The author has also consulted the works of Hahnemann, Jahr, Laurie, Bœnninghausen, Hartmann, Croserio, Teste, and others.

In recording the application of the remedies to the several forms of Disease, he has carefully compared the characteristic symptoms of the remedy with those of the disease, and given the special indications. In some instances, it has been only necessary to refer to the names of the medicines, either because the sympathetic symptoms of the disease are vague and uncertain, or so similar to those attendant upon other diseases of an analogous character, as to render the repetition useless or tiresome.

Again, it not unfrequently happens, that a single symptom affords the clue to the selection of a particular remedy, whose curative effect confirms the propriety of the choice. This usually depends upon an idiosyncrasy in the individual which has exalted the sympathetic symptom into a commanding influence over the rest. As these examples are not a part of the natural history of the disease, but rather of that of the individual, it is scarcely possible to present so complete a list of the remedies, as should include every peculiarity of this kind. The practitioner must therefore consult Bœnninghausen's Manual of Therapeutics, with Jahr's, in order to select the most appropriate medicine. A list of the remedies most approved, from their relations with the disease, or "*ab usu in morbis,*" is also added in many instances which may assist the memory of the more experienced practitioner.

It is presumed that a certain insight into the mode of applying the remedies has been attained by the student of Homœopathy before he can advantageously use this work;

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all detail on that head, whether as descriptive of the remedies themselves, or of their application, has therefore been omitted.

With these prefatory observations, the author commits his work to the public, with the earnest and sincere hope that those members of the profession who are still blinded by prejudice, or whose analytic tone of mind is opposed to the reception of a curative fact, the *modus operandi* of which cannot be palpably demonstrated, and stand aghast at the very threshold of Homœopathy, awed by the simplicity of nature, which is its characteristic, may ere long find the scales fall from their eyes, and be able to see the many blessings which this method of cure is capable of conferring upon humanity.

But he exhorts inquirers, whether of the Homœopathic or Allopathic school, not to neglect the study of the *Materia Medica pura*, and to use this volume, if it should be thought worthy, only as a guide to that admirable compendium of the pathogenetic relations of remedies.

12, Wyndham Place, Bryanstone Square, **W**;
*June* 16, 1851.

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# PREFACE TO THE SECOND EDITION.

THE call for a Second Edition of this work affords a further example of the increasing interest which is accruing to the subject of Homœopathy, and testifies to the wide diffusion of the practice of that law of healing, and of that therapeutic axiom embodied in the phrase "*similia similibus curantur.*"

The steady and continuous glare of that light which was evoked by Hahnemann, will ere long most assuredly chase away the mists of prejudice through which the reformed medicine is viewed by the profession and the public; and if hitherto this great medical truth may have suffered a partial eclipse, all who have become acquainted with it know full well that, ultimately, it must prevail, and take the place of the present uncertain, indefinite, and injurious régime.

The object of this work is to fan the flame which Hahnemann lighted, and to concentrate more positively upon one most important class of disorders much that is diffused through the Homœopathic literature.

*February*, 1857.

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# INTRODUCTION.

Homœopathy being no longer a novelty, and having survived the contempt which is ever cast upon medical innovations, it may seem undignified, as well as unnecessary, to meet the assailants of that method with the language of defence; because such language on the part of its advocates would imply a weakly or incomplete development of those principles which they believe to be true, and, therefore, worthy of universal acceptation. But it should be remembered, that science is a plant of gradual though immortal growth. Homœopathy is now an established branch of medical science, the discovery of which marked an epoch in medical progress, and associated with Hahnemann the glories of a pure and imperishable renown. Like that of almost every other great discovery, its adoption has not been commensurate with its importance,—an unfortunate fact, we admit, but far from discouraging to the Homœopathist, who knows that science, in perfect analogy with the civilization of which it is the outward and visible sign, must have its infancy before it can arrive at maturity, and pass from the one to the other state by almost inperceptible degrees. That the Homœopathic law was known to the ancients, we have conclusive evidence.[1] It was enunciated by Democritus, and recognised by Hippocrates; and therefore, although the genius of Hahnemann elucidated

[1] Homœopathy and the Ancients; 'Brit. Journal of Homœopathy,' No. xxxiii.



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and applied the principle *similia similibus curantur*, and proved it to be the expression of a general law in medicine, the principle existed just as much as that of gravitation did before its discovery by Newton. Had the discovery of Homœopathy been shrouded in the mystery of Charlatanism, and imposed upon the world heralded by advertisements obviously intended to delude the ignorant and entrap the unwary, or paraded with pretensions, the value of which could not be proved, it might well have provoked the scorn and contempt of the learned, the benevolent and the privileged. Homœopathists appeal not to argument or theory alone, but to that practical observation by which they are anxious, and ever have been anxious that their method should be tried. That the all-important principle of Homœopathy should be scouted, rejected *in toto*, and treated with insult by the so-called scientific part of a profession that deems itself liberal and enlightened, is truly lamentable, and may be quoted as an edifying example of those deflections of the human intellect which result from educational bias.

Has Homœopathy any of the characteristics of Charlatanism? Does faith in the principle—*similia similibus curantur*—involve contradiction or absurdity? Is such faith confined to a few minds? Are there no works in which the truths of Homœopathy are made patent to the world, so that he who wills may study and appreciate? Are the *powerful* (!) arguments dealt out against those truths the efforts of enlightened individuals, who have examined the Hahnemannic method of cure, and put it to the test in a fair and legitimate spirit, with sufficient knowledge of the principles involved,—or do they proceed from that wilfully blind class who will not condescend to make themselves acquainted with "the German conceit," as it has been called, which they think proper to abuse?

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The medicine of Hahnemann is the medicine of experience, and the logic of his disciples is the logic of facts :—Homœopathy is no abstraction of the closet—no chimerical hypothesis—no fanciful influence of metaphysical agencies. By inexact writers it is called an *invention* and a *system* ;—but it is neither an invention nor a system, but a *discovery* and a *method*. For all practical purposes Hahnemann was the discoverer of that heterodox truth *similia similibus curantur;* to him, also, we are indebted for a method of cure at which the tyro laughs, and the accomplished physician launches his sarcasms, but which experience has shown to be both simple and efficient.

Dishonest men, loud in their deprecation of a science of which they have just enough knowledge to misunderstand it, often commit themselves most egregiously in their statements concerning Homœopathy. Their excessive anxiety to confound the disciples of Hahnemann makes them regardless of such trifling matters as sense and consistency.

For some time past these opponents have seriously set themselves to the task of proving that dangerous *poisons* are used in the globules administered by Homœopathists, in utter obliviousness of their own oft-repeated declaration, that Homœopathic doses are doses of *nothing*. How can they reconcile these two assertions? Would it not be far better to confess their entire ignorance of those principles, in opposing which they contradict themselves. Poisons indeed ! What are Calomel, Corrosive Sublimate, Arsenic, Digitalis, Prussic Acid, Laudanum, &c., which the Allopaths so freely prescribe, and in poisonous doses too?—Are not all the most valuable medicines potent poisons? We know that poisons are most liberally dealt out by the old school of medicine, but we do not know that infinitesimal doses of those poisons when prescribed upon the admirable principle of *similia*

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*similibus curantur*, ever did or ever can produce the terrible results ascribed to them by these imaginative defenders of allopathy.

It is in Homœopathic therapeutics alone that we obtain any positive and accurate knowledge of the capacity of medicines to affect the different organs of the animal economy, as well as the special structures of which those organs are composed. From the same source we derive experience as to the mode in which medicinal substances influence individual and associated organs. Moreover, we have in Homœopathic therapeutics proofs of the temperaments in which different remedies develop their peculiar action;—for example, on referring to the pathogenetic properties of Pulsatilla, we find that it has been proved to exert its action particularly upon the venous system and the mucous membranes, producing increased excretions,—on the fibrous tissues of the joints and fasciæ,—on the nervous system, disturbing the general sensibility,—on the skin and stomach in their separate or associated functions,—on the brain and nerves, producing wakefulness, fever, delirium, dreams, a form of intermittent fever, also fever of a typhoid character, attended with nervousness, irregular circulation, the peculiar irregularities and perturbations of the nervous system which often accompany pregnancy, affections of the senses, toothache, catarrhal affections of different organs, congestions of the viscera, diarrhœa, disorders of the pelvic organs, especially of the female, and during pregnancy, menstrual difficulties, suppression of the uterine and mammary secretions, hæmoptysis, biliary disorders, nervous debility, and dropsical effusions.

In this Category we possess a mirror of the remedy, positive and unchangeable, which no theory can subvert, no experiments contradict. In this mirror we have reflected

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the pathological condition, the morbid effects, and the express features of various diseases. Here is a chart, which directs us in the track of morbid action so often manifested in the animal economy; and, if the pathogenesis of *Pulsatilla* be taken up by the student of any disease, for which it is the remedy, and he should compare the symptoms developed by both, the least that can happen will be that it will excite in his mind a feeling of astonishment. If he were told that this correspondence indicates *Pulsatilla* to be the required remedy, he would naturally inquire what proof there is, that, because its morbid action is shown uniformly to occupy a certain track in the healthy body, it is the remedy which ought to cure similar effects produced by other causes? What evidence can there be but that of putting it to the test? The possibility of such being a fact first startled the mind of Hahnemann, when he found that Bark, taken in a healthy state of the body, produced the kind of ague for which it was well known to be a cure. He then put this great idea to the test; and having verified it by experience in thousands of cases, and the test being daily repeated in Europe, Asia, Africa, and America, let those who glory in the title of "legitimate" as opposed to philosophical medicine also put it to the trial, and thus complete the link, which, to their intelligence, is wanting, in the chain of evidence. But, in so doing, let sound philosophy prevail. If a remedy, such as *Pulsatilla*, is found to produce symptoms so closely resembling a certain disease, as to lead to the inference that it might be a curative agent as regards that disease, in putting it to the test, would it not be a natural supposition, that, if a dose were given powerful enough to produce any of the ascertained pathogenetic effects, an increase, and not a diminution of the symptoms ought to be expected? and, consequently, would it not be wise to administer a small

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portion only of such dose, in order *fairly* to test its curative efficacy? Here, then, is the whole theory of Homœopathic infinitesimals, exemplified in practice. And, if this small dose of such specific remedy should be found sufficient to produce a slight reaction in the organism, a curative effect is the result:—just as when a burnt finger is held at a certain distance from the fire, the pain and inflammation are sooner removed—though at first rendered more acute—than if it be plunged into cold water. What can be plainer than this? The action is pathologically and physiologically in harmony with the laws of nature: that is to say, in correspondence with, or having a clear relation to, the existing morbid state.

Disease is often only a derangement of the function of an organ,—an excess, or deficiency of the dynamic vital powers, or, in other words, *of the moving powers of life*.

Functional disease, long continued, induces organic disease, and may be either acute or chronic.

Altered nutrition, (a most important *function*,) combined with other functional irregularities, may be the cause of the worst form of organic disease; so that we come at last to impairment of the moving powers of life, as the "fons et origo" of disease. Where, then, is the *sound physiology* which can sneer at Homœopathy, and apply powerful disease-producing remedies to a *healthy* organ, in one part of the body, in order to cure a disease existing in an organ at a distant part? Is the probably healthy liver to be punished, because the kidneys have failed in their function,—or is a muco-gastritis to be engendered, in order to get rid of a cutaneous eruption,—or is a Dysentery to be relieved—a feat the performance of which I have witnessed—at the expense of caries of the bones?

Yet this is Allopathy. By a violent revulsive action

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upon one organ, or set of organs, it attempts the relief of others, forgetting that the end cannot be attained, without diminishing the vitality, or deteriorating the tissues of the organ which is attacked by the pseudo-remedy.

Again, an organ under the influence of disease is rendered sensitive and irritable, so that a small, fractional dose will affect it, when the remedy is selected in accordance with its proved relation to that organ; while a large and potent dose, whose action is directed to a *distant* organ, will not affect it. Let us illustrate this. Light is the appropriate stimulus to the eye; but, if that organ be affected with ophthalmia, can it bear the same amount of light as when its healthy condition was unimpaired? or will not a single pencil of light aggravate the symptoms?

If the auditory nerve be inflamed, or affected with a morbid sensibility, do not the ordinary wavelets of air, which are the natural vehicles of sound, strike upon the ear like the roaring of the sea?

What would be more absurd than to cause the eye to weep, by the application of a morbid stimulus, because the organ of hearing was affected, or to drum the latter to deafness, because the former was diseased.

If it be said, there is no correlative action between the eye and the ear,—no correspondence of function from which we might infer that the one would be relieved at the expense of the other,—we ask, where is the greater correspondence between the liver and the mucous membrane of the intestines? or between that organ and an erysipelatous leg? And yet, under the old system, the unfortunate Liver is made out to be an universal disturber of the peace, in the animal economy, who can only be kept in order by perpetual chastisement with calomel. This would be very amusing if it were not often followed by such direful results;

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or, as a great opponent of Homœopathy has said, "*if safety, life, and health, were not the stakes.*[1]"

Caries of bones is the not unfrequent consequence of dosing delicate scrofulous children with calomel and grey powder, according to the rules of what is termed "legitimate medicine."

The professional mind has lately run riot in chemical philosophy, under the guidance of some clever but unpractical physicians. Because it is demonstrable that acid secretions at times superabound *in* the body, and that an acid is neutralized by an alkali *out* of the body, it has been considered a curative indication—in the treatment of diseases in which the former condition prevails—for the administration of alkalies. But the acid secretion is only the effect of a perverted function. The imperfect organic vital action, which allowed of the formation of an excess of acid, is *the* disease which ought to be attacked. The cause, and not the effect, should be dealt with. As well might we attempt to interrupt the current of electricity passing along the wire to the positive side of a galvanic battery, by adding an alkali to the water in which its extremity was immersed, as to cure a dyspepsia by the administration of carbonate of soda. But we have been taunted by one, who, though he has done good service in experimental physiology, sometimes writes with greater vehemence than wisdom, on what he is pleased to call the "disguised nothingness of Homœopathy."

If we object that our *Aconite* has a benign influence over the vascular and nervous systems, such as no bloodletting can have,—and that *Bryonia* can be satisfactorily shown so to reduce the heart's action as to render acute pleurisy a most tractable disease,—then it is charged upon us, as a heavy crime, that we use poisonous agents under the guise of

[1] Observations in Medicine, by Dr. M. Hall. Vide Preface.

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homœopathy; on the other hand, should we declare that a hitherto unknown and inert substance, has been proved to possess a most happy power in certain chronic affections—as, for instance, *Sepia* in diseases of the womb—then it is that we imagine a virtue which does not exist, and delude ourselves and our patients, by descanting upon effects which are attributable to the *vis medicatrix naturæ*. Nevertheless, *we* know these things to be facts, and are content to bear the obloquy. "*Magna est veritas et prevalebit.*"

One of the gravest errors, in the practice of the old school of medicine, is committed in the exhibition of purgatives in the puerperal state; yet, strange to say, it is here where they declare the necessity of this *opprobrium therapeuticum* to be the most absolute.

It is unfortunately not uncommon for a woman to be attacked, on the fourth or fifth day after delivery, with inflammation of the bowels, immediately after the exhibition of the *usual* purgative,—whether this be senna and salts or simply castor oil. The patient is bled and purged still more, to overcome the resistance which the inflammatory condition of the muscular coat of the intestine offers to the passage of the alvine contents. The result is too frequently fatal in from twenty-four to forty-eight hours. After death, inflammation and mortification of the coats of the intestine are traced, with, now and then, a collection of feculent matter impacted in the tube, at the seat of the disease. This is held up, with wonderful gravity, as a climax of proof that purgatives are imperative; but *we* reason differently. The truth is, that fæces will occasionally become impacted in some part of the intestinal canal, during pregnancy, in spite of purgatives, in consequence of a loss of tonicity or contractile power in the gut,—induced by pressure of the gravid uterus, or by some other cause. When delivery has taken place, the

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gut does not necessarily recover its normal condition immediately; this depends upon the extent of the local paralysis. As nothing is done (allopathically) to remedy this condition by medicine,—partly because it is not recognised, and partly because there are no allopathic means applicable to this purpose,—the condition continues until disturbed by the *absolutely necessary* purgative on the third day. This paralysed portion of the intestine, then, with its impacted scybala, is isolated, and resembles, as far as the action of purgatives is concerned, any inert tube or channel. They pass along it, but fail to excite its contractions, and the scybala therefore remain. But this is not all; although the purgative does not always excite the normal contractions of the temporarily paralysed portion of the canal, it does excite, irritate, and inflame that portion in immediate proximity, and the inflammation directly involves the portion whose vitality is already impaired; mortification of this part is the consequence,—all of which is most unjustly laid to the presence of scybala, which had lain there, probably for weeks, without exciting inflammation or even irritation.

It may be asked, how does Homœopathy propose to remedy this? We answer, by a rational and physiological view of the actions of remedies, and of the organs upon which they operate.

Homœopathy shuns remedies administered in doses capable of exciting disease.

Homœopathy manifests the real virtues of medicines, by proving in the healthy individual, upon what organs and tissues they are capable of exerting specific action.

Homœopathy selects, in pursuing the curative intention, such remedies as are known to act upon *the* organ or tissue which is under morbid influence, and to develop in *that* symptoms similar to the disease. For example, *Nux vomica*

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is known to act upon the nerves of sensation and motion, in particular, and to paralyse muscular action, by exhausting the irritability. This is part of its general action. Its particular action, among other developments, operates upon the intestinal canal, in promoting venous congestion, and diminishing peristaltic action.

*Veratrum* is another remedy, whose property is to diminish irritability, and to induce a paralytic state of parts of the muscular system. Now, we take these two remedies as illustrative of the point in question. In the puerperal state, the Homœopathist, instead of applying an irritating drug to the sensitive intestine, administers, probably,—if relief from the bowels should not occur naturally,—a dose of *Nux vomica*, one property of which is to act upon the irritability, and, therefore, the peristaltic action of the intestinal canal. If paralysis, or torpor of an isolated portion has taken place, and impacted fæces exist, it elicits and arouses the normal irritability of the part, which, if not actually extinct, (and we need hardly say that this is never the case at the period to which we refer,) responds to the harmonic touch, and vibrates into life and action at once. A large dose would augment the paralysis, but the infinitesimal just excites reaction; gradual propulsion of these *fomites morbi* is the result, and the peristaltic action is restored, without the dangerous consequences, which almost inevitably result from the use of purgatives. Again, if from deranged nervous influence, or congestive torpor, the rectum is at any time so paralysed that it allows of an enormous dilatation from accumulated fæces, which purgative medicine cannot expel, the Homœopathist administers *Veratrum*, whose pathogenetic property is to paralyse the muscular tissue, generally or locally; and the infinitesimal dose soon elicits the responsive action, because it operates upon the nervous filaments of the muscular tissue of the

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part, and makes them vibrate with harmonious action, arousing the irritability of the same fibrils, whereas, in a large quantity, it would have extinguished it.

Thus it is that Homœopathy, by being able to trace the exact course of the operation of a remedy, throughout the several organs and tissues of the body, is capable of applying it upon the precise spot, organ, or tissue, whose morbid condition requires its influence.

If the remedy were given in a large dose, it would not only morbidly affect a more extensive sphere, but would aggravate the part already excited by disease; but, when administered in a minute dose,—and the exact quantity required can only be determined by experience,—it silently elicits, in the precise organ or tissue, a medicinal reaction, which takes the place of that which is morbid, and soon leads to health.

In describing the diseases of the Uterus and its associated organs, for the purpose of drawing attention to the more successful and less severe treatment by Homœopathic remedies, it is presumed, that the practitioner is acquainted with the diagnostic signs, offered by their anatomical relations, as well as their pathological characters, in order that he may detect the presence of the several forms of ulceration, and distinguish carefully between a malignant and a non-malignant growth.

It might, at first, be supposed unimportant to the practitioner of Homœopathy, whose choice of remedies is guided solely by the symptoms manifested externally, whether there existed any special form of dyscrasia in the constitution of his patient, to which the symptoms were referable, but it is not so. On the contrary, it is equally important to the Homœopath as to the Allopath:—for I am not aware that the latter has ever professed to have discovered a power that will

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eradicate the cancerous diathesis; and we know that the course of the most malignant diseases is greatly mitigated, and that life is prolonged by the Homœopathic treatment.

The prognosis of a case, then, will be greatly assisted by a correct pathological observation, and not seldom will the choice of a remedy be influenced by it; for, as in the case of ulcer in other parts, the application of our remedies is guided in some measure by the objective symptoms,—or the kind of ulcer:—whether it be deep and excavated, clear or foul on the surface, surrounded by active, healthy inflammation, or by that of a phagedenic and destructive character, with the appearance of a low degree of vitality; whether the discharge from it is serous, ichorous, sanious, or purulent; whether it is of an offensive odour or not; if the granulations are florid and vigorous, or redundant and expanded; if the latter are irritable and painful, or torpid and without sensation; if they bleed on contact, or not:—so is it with the organic diseases which affect the womb; observation is absolutely necessary to identify their character; and a knowledge of pathology cannot be dispensed with, to guide and correct our observation,—more particularly, as, in these diseases, the subjective or sympathetic symptoms afford us so little assistance in discriminating the different structural lesions.

The same *modus probandi* is also attainable; the same *argument holds good with respect to internal diseases*, whose actual pathological state has been verified by dissection, and so compared with the corresponding symptoms. But, as regards the host of ailments and diseases which occur in every variety of form and in every combination of diversified temperament, no such accuracy can result from pathological inquiry or hypothesis. How often has it not happened, that a certain train of symptoms has been manifested, bearing all the marks of an inflammatory condition, which has been

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proved to be purely the result of excessive nervous irritation? How proved? By the effects of the remedies administered empirically;—proved, too, in this way, by the most sagacious of our profession. Had these cases been treated in strict reference to the symptoms,—in their relation with the *supposed* pathological condition of the internal organs,—bleeding, blistering and poly-pharmacy would have been in accordance with the legitimate practice, and, perhaps, death the legitimate conclusion; but by deviating from the course of exclusive pathological diagnosis, a more fortunate result has been obtained. No one, I apprehend, would be bold enough to argue, that such was a pure example of true pathological induction. If so, I would ask, where are the delineations of morbid anatomy on which such pathological theories of nervous irritation are founded?

A more careful analysis of symptoms developing themselves in the nervous, vascular, and lymphatic systems, as well as in the muscular, fibrous, and cellular tissues:—or, a more perfect combination of causes and effects, as exemplified in the objective and subjective symptoms, can scarcely be found, than that which Hahnemann and his followers have given to the world; and, in studying them, we find, not only the expression of diseases uniform in their general characteristics and effects, but likewise their diversified character, as manifested in various constitutions and temperaments.

It is this which brings Homœopathy so much nearer to perfection in the healing art, than anything which is to be found in Allopathy, and enables it to defy the regimental routine which distinguishes the latter mode of treatment. Amongst the writers on diseases of the uterus, there are two, who seem to attribute the origin of those general symptoms, and the delicacy of health from which females suffer so much and so long, and which are not connected either with ulcer-

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ation or malignant disease, to different causes. Dr. Simpson has discovered the frequency of displacement of the organ, in the unimpregnated state, and the relief, by reposition, of those distressing symptoms which so often paralyse the energies of women, and render their lives miserable.

Dr. Bennett has traced the same functional and sympathetic derangements, to inflammation of the os and cervix, and directs the cure by local depletion and cauterization.

It appears to me, that these morbid conditions are, generally, combined in the inverse order to that indicated by Dr. Bennett; but, it is a question which, with great candour, he has described "as very difficult to unravel;" and, in the face of his learning and experience, I would hesitate, to advance a contrary opinion, but for that of Dr. Simpson, whose experience must be equally great. The frequent occurrence of inflammation of the os and cervix, in unmarried women, is not so easily accounted for, unless it be a result of general uterine congestion, or chronic metritis, with subsequent displacement. Congestive hypertrophy of the whole or part of the body of the uterus which has been thus produced, is aggravated by the venous engorgement which takes place at every monthly period; and these patients, therefore, usually complain of feeling worse just before, and better just after the catamenial flow; and by repeated distension of the venous capillaries above, chronic inflammation is set up and perpetuated in the os and cervix, which are the most dependent parts, and such inflammation is materially aggravated, if not induced by displacements of the organ.

So that, in the first place, we may have hypertrophy or engorgement, of the whole or part of the *body* of the uterus; in the second, dislocation, such as anti- or retro-version; and, in the third, chronic congestion or inflammation of the *os and cervix*.

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The Homœopathic treatment of these diseases, may, nevertheless, be as lightly thought of as was the more humane method of tying the arteries with delicate ligatures after surgical operations, in the time of Ambrose Paré.[1] Up to the close of the sixteenth century, there were no means of arresting the bleeding, consequent upon the division of the blood-vessels, in amputations of the limbs, &c., but by the immediate application of the actual cautery (*red hot iron*). This great improvement (the ligature) which added so much to the safety of the patient, and so greatly diminished his sufferings, was new and an innovation upon the established practice, and was, therefore, regarded as an insult to the intellect of those eminent men, who had hitherto been satisfied with the knowledge which they possessed. The College of Physicians of Paris attacked Paré as a subverter of the "legitimate" practice, and attempted, by the authority of the French Parliament, to suppress the publicatcn and dissemination of his observations; and it was a century before this new method—which is now the custom of the day,—was allowed to be taught in the schools of medicine and surgery. Such is the fate of medical and surgical, as well as of other great discoveries. We cannot, therefore, expect better things for Homœopathy, even in this enlightened age. For my own part then, I would rather possess the truth with the few, than be in error with the multitude.

[1] Vide Cooper's Dict. of Pract. Surgery, art. Amputation.

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# HOMŒOPATHY

AS APPLIED TO THE

# DISEASES PECULIAR TO FEMALES.

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## PRELIMINARY OBSERVATIONS.

Diseases of the Womb are divided into Functional and Organic. The former comprise those which are connected with disorders of Menstruation, as well as of the pregnant and parturient states. The latter include all diseases which are associated with change of structure, whether of a simple or malignant character. The function of menstruation is generally more or less disturbed during the progress of organic disease; but this does not always happen, for although a natural correspondence exists between regularity of function and the healthy condition of the organ, very serious disease sometimes becomes developed, and increases without any material alteration in the performance of that function.

The same holds good with respect to another of the proper functions of the uterus, namely, Pregnancy. It may proceed uninterruptedly to the full term, in spite of an amount of organic disease which is sufficient to destroy life, and which may prove fatal, as soon as delivery is accomplished.

Inflammation of the substance of the uterus, of its os or cervix, may likewise coexist with tolerable perfection of functional action, so that although organic disease and menstrual irregularity in some measure depend one upon



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the other, their separate existence is sufficiently obvious to distinguish them in connection with uterine pathology.

In accordance with this natural division, I shall notice, in separate parts, the subjects to which I have limited myself in this volume.

Part I—will include the function of Menstruation, with those deviations from its normal condition, which are incompatible with health.

Part II.—Pregnancy, and the Parturient State, with the morbid affections to which they are liable.

Part III.—The Puerperal State, or that immediately succeeding delivery, with the diseases incident thereto.

Part IV.—Organic Diseases of the Uterus and Ovaries.

Part V.—The Management of the Infant and the Diseases of Childhood.

In this way the Homœopathic Treatment of the most important diseases peculiar to women will be brought under review, together with the management of Pregnancy, Labour, and the Infant; and it will be my endeavour to render a correct image of these diseases with as much conciseness as possible, in order that the morbid conditions and symptoms may be compared with the therapeutic indications afforded by the remedies.

According to the calculations of Dr. Lever, the functional diseases of the uterus occur in the proportion of 65·2 per cent.; the organic in that of 34·7 per cent.:—or rather more than one half as many of the one as of the other. But the power of control which medicine possesses over the former is so much greater than over the latter, that the interest pertaining to any medical inquiry necessarily preponderates in favour of organic disease.

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# PART I.

## DISEASES OF THE WOMB, &c.

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### MENSTRUATION.

THE function which occupies a peculiar and important place in the female economy, and is marked by a periodical monthly discharge of sanguineous fluid from the vagina, is termed *menstruation*, and the secretion itself *catamenia*, or *menses*.

This fluid is eliminated from the uterine vessels, and is generally considered to be a secretion; but its mode of appearance is more like an exudation upon the surface of the lining membrane of the uterus, since an injection, sent into the arteries of the uterus, also, readily transudes through the lining membrane. Its first appearance is indicative of the attainment of puberty, when womanhood is established and the female is capable of conception; whereas, its disappearance marks the conclusion of this faculty. At first the discharge is pale-red; but after a few returns of the monthly period, it assumes a darker and more sanguinolent character.

The effects of the establishment of menstruation upon the general system are very characteristic. The mind, as well as the body, acquires a rapid development. The perceptions are sharpened, the tastes chastened, the pursuits more elevated; the manners are more reserved; at the same time, the form assumes a plumpness and proportion, which give elegance and grace to the general figure, and the nascent feelings of womanhood make the carriage more erect.

When the discharge appears at *the ordinary periods*, in the *usual quantity*, and of a *proper quality*, a female is said to be "*regular*."

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The ordinary period for its recurrence is once in twenty-eight days, and its duration occupies from three to eight days, the average being about five days. Many women, however, menstruate about every three weeks, others every five.

The quantity of discharge varies with the constitution of the individual, and with the climate; but in temperate regions, from four to eight ounces is about the usual loss during each period, although some women habitually lose double this quantity. It is at its height ordinarily on the third day; after which it gradually declines, changing colour towards the last.

The character or quality of the fluid differs in many respects from blood. In the first place it does not coagulate, and is not separable into two portions, as fibrin and serum, when left to stand, for it contains no fibrin: it has a peculiar, faint odour, *sui generis*: it does not readily decompose, is thin and of a dark-red, venous colour.

In some women menstruation is always attended with more or less pain, and sympathetic disturbance; coagula also appear in the discharge; and, if in great excess, the red particles of the blood, and blood itself may pass as in menorrhagia.

The age at which the function commences in temperate climates is between twelve and fifteen years. In hot climates it begins much earlier; as a general rule, the sooner the discharge commences, the earlier it ceases.

The period of decline is, in this country, commonly between forty and fifty: this is called "the turn or change of life," and is preceded by irregularity and occasional interruption.

The symptoms which precede and accompany the first menstruation are manifested in a trifling, almost unobserved, derangement of system, in some cases, whilst in others they are more distinctly pronounced. A certain degree of languor and lassitude, apathy and indifference, fatigue after exertion, variable spirits, a dark circle around the eyes, colics and affections of the stomach and bowels, pain about the back and pelvis, and some hysterical symptoms are ob-

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served; or it may be ushered in by febrile excitement, with headache and flushings of the face.

When the flow takes place, the symptoms are relieved; but the girl still complains of weakness, and is pale. Should there be a want of vigour in the system generally, or in the uterine nerves in particular, several efforts of this kind may be made by the system without the appearance of the menses, or with a white discharge only. This, however, may be remedied by a little care, and by nourishing diet. Without this care, the white discharge may become an established disease, constituting leucorrhœa. Regularity in the return of each catamenial period would seem to be more important than the quantity or quality.

It is arrested during pregnancy and lactation, as a general rule, although sometimes women are found to menstruate during the greater portion of the period of pregnancy and whilst suckling; but the milk is always deteriorated, and does not nourish the child so perfectly.

During the existence of menstruation, the system of the female is more irritable than at other times, so that all exposure to sudden or irregular checks of transpiration should be avoided, as well as every kind of mental or corporeal agitation, otherwise the process may be impeded, and hysterical or other troublesome affections excited.

It has been observed by Dr. Butler Lane, that irritation of the bowels, producing diarrhœa, is with the great majority of women a concomitant of menstruation, whilst, in a few cases, constipation attends its periodical establishment, and, in a fewer still, there is no variation from their usual condition. He argues from this a correspondence of action between the uterus and liver, a physiological hepatico-uterine relation, by which the functions of the two organs often become subservient one to the other,—or, in other words, diminution of the normal secretion in the one is often dependent upon excess of it in the other. With this brief review of the function of menstruation, we will pass on to the consideration of the derangements to which it is subject.

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# THE DISORDERS OF MENSTRUATION.

The derangements of the function of menstruation have been divided into three classes; viz., amenorrhœa, dysmenorrhœa, and menorrhagia.

1. Amenorrhœa, or an absence of the menstrual flow, is also usually divided into *emansio mensium*, the retention, or where the secretion has never taken place; and *suppressio mensium*, the suppression, where the secretion has appeared, but has been checked or obstructed by external or internal morbid influences.

The former of these must not be confounded with a mere delay of the menses, as the difference of age at which the change may occur, the greater or less development of the body, and the state of health in other respects, will indicate the fact of protracted or impeded function.

*The retention of the menses* may depend upon malformation of the sexual organs, a deficiency of the ovaria, imperfect development of the uterus itself, or a special want of energy therein. On the other hand, the uterus may be originally endowed with a normal amount of vital power, which may be exhausted in consequence of an impairment of the general assimilating and nutritive functions, and the debility occasioned thereby, which may equally retard the appearance of the catamenia. Retention of the menses beyond the period indicated naturally in the individual, by the development of the other parts of the system, is attended by two classes of symptoms.

First, the *Entonic* form, is distinguished by an active state of the nervous and circulatory organs, with determination of blood to the head, causing headache and giddiness, drowsiness, flushing of the face, a full pulse, palpitation, weight in the loins, constipation, and occurs usually in robust girls. This is readily relieved by

*Aconitum*, 6.

Three globules mixed in a wineglassful of water. A tea-

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spoonful to be given every three or four hours. Should the symptoms be only partially relieved,

*Belladonna*, 30,

may be used in the same way. If, after the employment of these means, there should continue a confined state of the bowels, with stitches in the sides of the chest, irritability of temper, and occasional vertigo,

*Bryonia*, 30,

should be given in like manner.

*Nux v.*, *Op.*; *Plat.*, *Puls.*, *Cham.*, *Con.*, *Cocc.*, *Magn. m.*, *Lyc.*, *Phos.*, *Sab.*, *Sep.*, *Sulph.*, *Ver.*, will also assist in removing the obstruction.

The hygienic rules will consist of the use of the warm hip or foot bath, active exercise in the open air, when the acute symptoms are removed, a light and unstimulating diet, abstaining from wine, beer, and meat, until the excitement is subdued; clothing the body in a manner suitable to the season; taking special care to avoid exposure to wet, or getting the feet damp, and a general adherence to the homœopathic regimen.

Secondly, the *Atonic* form, in which the failure of the uterine organs in their attempts to establish the periodical function, instead of producing that powerful reaction in the organism which has just been described, results in a torpor of these organs (which are exhausted for a time of their vital energy) in which remote organs slowly but extensively sympathise.

In the early stage of this form of amenorrhœa, when the sexual development of the system generally is complete, and yet medical aid is required, some of the following remedies will afford the greatest assistance.

*Puls.*, *Caust.*, *Calc.*, *Graph.*, *Ars.*, *Chin.*, *Con.*, *Nux v.*, *Cupr.*, *Natr. m.*, *Kali c.*, *Lach.*, *Iod.*, *Sep.*, *Sulph.* It is well to begin the treatment with a few doses of *Sulphur*.

The symptoms which are gradually evolved, under these circumstances, more frequently occur in fair and delicate girls, with lymphatic temperaments, and become merged in those of chlorosis.

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*Suppressio mensium* may be sudden; the effect of getting the feet wet during the catamenial flow, or of some mental or moral shock, or of the invasion of an acute disease; in which cases it usually assumes an acute form, and is followed by more or less febrile action in the system; headache, thirst, a hot skin, and quick pulse prevail; various local inflammations or congestions may result, as of the brain, lungs, intestinal canal, or the uterus itself. Attacks of hysteria, simulating inflammation, may occur; neuralgia, or mania; also derangements of the organs of sense, as amblyopia, or of the voice, as aphonia, &c.

*Treatment.*—In the first place it is well to administer a remedy antidotal to the exciting cause, and afterwards some other adapted to the condition of the symptoms.

The remedies chiefly indicated under the circumstances related above are:—first, as to the cause, *Dulc.*, *Nux Mosc.*, *Puls.*, *Cham.*, *Ign.*, *Coff.*, *Lyc.*, *Acon.*, *Bry.*, *Hyos.*, *Opi.*, *Coloc.*, &c.

*Dulc.*—if the suppression should have been the result of getting the feet wet.

*N. mosc.* or *Puls.*—if from a chill.

*Acon.* or *Lyc.*, should any sudden fright, or emotion be the cause.

*Bry.*, *Cham.* or *Coloc.*—if preceded by a fit of passion.

*Coff.* or *Op.*—if by excessive joy.

*Ign.*, *Hyoscy.*, *Phos. ac.*, *Helleb.*—if caused by dissappointed love.

*Acon.*, *Bell.*, *Col.*, *Ignat.*, *Platina*, *Puls.*, *Staph.*—if from mental mortification, or contradiction.

Secondly, the treatment of the relative and combined derangements, which emanate from or are associated with the suppression of the catamenia, must, after the attention has been directed to the exciting cause, be effected by remedies applicable to the peculiar states which may be found to exist; bearing in mind that the arrest of the uterine function is the most important indication in the choice of the remedy.

When the attack is ushered in by febrile symptoms, *Aconitum* should be given, followed, if necessary, by *Belladonna*, which will relieve the symptoms appertaining to local

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inflammation. The same remedies will be applicable, if symptoms of mental alienation exhibit themselves, with the help also of *Sep.*, *Con.*, *Lyc.*, *Magn. m.*, *Sil.*, *Natr. m.*

Inflammatory or Congestive Affections of the Brain, must have their symptoms compared with those of *Acon.*, *Bry.*, *Bell.*, *Calc.*, *Cupr.*, *Ferr.*, *Op.* :—

Of the Chest,—*Acon.*, *Bry.*, *Bell.*, *Iod.*, *Kal. c.*, *Puls.*, *Merc.*, *Phos.* :—

Of the Stomach and Intestinal Canal,—*Ars.*, *Bry.*, *Calc.*, *Chin.*, *Ferr.*, *Lyc.*, *Merc.*, *Puls.*, *Sulph* :—

Of the Uterus or Ovaries,—*Acon.*, *Bry.*, *Bell.*, *Cham.*, *Canth.*, *Lach.*, *Merc.*, *Nat. m.*, *Nux v.*, *Puls.*, *Sep.*

Should the consequence of the sudden suppression be reflected in the nervous system more particularly, and produce hysterical symptoms or severe neuralgic pains, it is of the greatest importance to distinguish accurately between that form of local disturbance of the ganglionic system and inflammation, which often requires the nicest discrimination, although in Homœopathy there is not such danger to be apprehended from the treatment which may depend on this or that diagnosis, as there would be under the old system of medicine; nevertheless, the prognosis will be materially affected by it. I have witnessed under allopathic treatment the most dangerous results from bleeding and leeching patients, under these circumstances; and this is one of the instances in which our system pre-eminently surpasses the old; a circumstance which becomes more especially apparent when we consider that the chain of morbid actions we are now alluding to, is developed usually in the most delicate and susceptible individuals.

*Ign.*, *Cocc.*, *Coff.*, *Calc.*, *Caust.*, *Chin.*, *Con.*, *Cupr.*, *Graph.*, *Lyc.*, *Natr. m.*, *Nux m.*, *Op.*, *Puls.*, *Sep.*, *Sul.*, *Ver.*, are the principal remedies which must be carefully compared with the symptoms, and will generally be found successful in the various disturbances of the nervous system under this form of disease.

Sudden suppression of the menses may also terminate in chlorosis, when the treatment detailed under that head will be appropriate. Chronic suppression of the menses may

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exist as the sequel of an acute attack; or may arise from the gradual impairment of the health, from organic disease, or congestion of the uterus, ovaries, etc.; or it may occur as the termination of the function. It is also liable to be associated with epilepsy, mental derangements, chorea, dropsy, &c. When it is dependent on simple congestion of the vessels of the uterus, and its associated organs, the cure is more readily effected, than where it results from a marked debility of those organs. When it occurs in young women of an irritable and delicate fibre, various functional and sympathetic disturbances spring up, all of which have to be taken into consideration in selecting the remedies with a view to a restoration of the secretion, and it is in these cases more especially that a prolonged antipsoric treatment is imperative.

The ordinary relief of chronic suppression of the menses, is to be attempted by some of the following remedies, chosen in accordance with the general moral and physical condition of the patient, as manifested in the symptoms.

In plethoric individuals:—*Acon.*, *Bell.*, *Bry.*, *Nux v.*, *Op.*, *Plat.*, *Sab.*, *Sul.*

In irritable, debilitated, or cachectic individuals:—*Amm. m.*, *Ars.*, *Chin.*, *Cocc.*, *Con.*, *Cupr. m.*, *Graph.*, *Ignat.*, *Iod.*, *Lyc.*, *Natr. m.*, *Puls.*, *Sep.*, *Sul.*, *Sil.*, *Val.*

When the menses are feeble, but not entirely suppressed: —*Caust.*, *Calc.*, *Con.*, *Graph.*, *Kali*, *Lyc.*, *Magn.*, *Natr. m.*, *Phos.*, *Puls.*, *Sil.*, *Sul.*, *Ver.*, *Zinc.*

In the more complicated forms alluded to above, reference must be made to some of the following:—

*Acon.*, *Ars.*, *Bry.*, *Calc.*, *Caust.*, *Chin.*, *Cocc.*, *Con.*, *Cup.*, *Dig.*, *Ferr.*, *Graph.*, *Hyos.*, *Iod.*, *Kali c.*, *Lyc.*, *Merc.*, *Mez.*, *Natr. m.*, *Nitr. ac.*, *Nux m.*, *Op.*, *Puls.*, *Sab.*, *Sep.*, *Sil.*, *Sul.*, *Ver.*, *Val.*, *Zinc.*

If the symptoms of suppression occur in conjunction with a scanty flow of the menses only, the following are the most useful:—*Graph.*, *Con.*, *Kali*, *Natr. m.*, *Phos.*, *Puls.*, *Sul.*, *Lyc.*, *Magn.*, *Sili.*, *Ver.*, or *Zinc.*

*Cocculus*,—if violent abdominal spasms happen at the time when the menses should make their appearance, especi-

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ally if attended with pressure on the chest, oppression of breathing, anxiety, moaning, excessive weakness, inability to speak loud, relaxed state of the muscles of the extremities, tottering gait, convulsive movements, weak pulse.

*Cuprum metal.* or *acet.*—The *Metallicum* is generally considered the best. It is analogous to the former remedy, and is applicable where there are spasms in the abdomen, of a severe character, extending to the chest; or if there be loathing, retching, vomiting, cramp, and contractions of the extremities, epileptic spasms, &c.

*Causticum* is useful where hysterical spasms prevail, with pinching pain in the sacrum and spasms in the abdomen, with yellowish, earthy complexion.

*Pulsatilla,*—when spasms occur in consequence of delay of the menstrual discharge.

*Cicuta, Terebinthina, Zincum,*—if, together with suppression of the menses, there be swelling of the breasts.

*Calcarea Carb.,*—when there is great general fulness along with the suppression.

*Graphites,*—if there be roughness of the voice, cephalalgia, œdema of the feet, chilliness, heavy, contractive pains in the small of the back.

*Natrum mur.,*—if there be a scanty flow at protracted intervals, with sadness.

*Strontiana* is said to be useful when the menses are delayed and the discharge is first serous and afterwards lumpy.

I need scarcely say, that all local applications, such as stimulating injections, leeches to the parts, &c., are highly injurious, or useless, for the disorder can only be remedied by general and constitutional means.

Vicarious menstruation is that abnormal condition of the system when, in connection with a scanty flow or entire suppression of the menses, there is a periodical appearance of blood or bloody serum at other outlets. It is recorded to have taken place from the nostrils, eyes, ears, gums, lungs, stomach, anus, bladder, nipples, the ends of the fingers and toes, from different joints, from the axillæ, from the stump of an amputated limb, from ulcers, from varicose tumours, and from the surface of the skin generally.

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The most extended portions of the mucous membrane are, however, most frequently the seat of the discharge. It appears to be sometimes blood, at other times it has the character of the catamenial fluid, being dark-coloured, thin, and not coagulable. The repetition of this discharge may appear at the regular period, or it may intermit; and it does not appear that any serious result follows, even when delicate organs are the seat of it. Sooner or later the uterus resumes its functions, and the attack ceases.

I have under my care a young lady who is subject to the oozing of spots of blood from the upper surface of all the toes a few days prior to each return of the catamenia, which are always very scanty.

Also a young woman, married, but who has never been pregnant, in whom there is great irregularity in the return of the periods, which varies from three to five weeks, who finds at first serum, and then blood, ooze out of the right nipple during the interval: this I witnessed myself, and cured it by means of *Lycopodium*. Another patient, who has had hæmoptysis for a year or two, with suppression of the catamenia, had, previous to the occurrence of the spitting of blood, an oozing of that fluid from the scalp, just above the forehead; this was repeated two or three times, and so alarmed the friends of the patient that they ran off with her to a medical practitioner at the time when the blood was trickling down her forehead. In most of these cases *Ferrum* is the Homœopathic remedy.

There sometimes occurs, in the place of the menstrual discharge, a vicarious leucorrhœa, which is periodical and coexistent with a menstrual effort; it consists of a flow of colourless, transparent mucus, and occurs, usually, in delicate, susceptible girls, or in women who have become weak and exhausted from hæmorrhages, or long suckling. It does not affect the health, and is therefore only to be considered as an imperfect action of the organs, to be remedied by generous and plain diet, change of air, and medicines which tend to restore healthy sanguification. *Calc.*, *Ferrum*, and *China* are the principal, to which may be added *Borax*, *Magn.*, *Graphites*, and *Phosphorus*.

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# CHLOROSIS, OR GREEN-SICKNESS.

Chlorosis is a disease intimately connected with a state of anæmia, or want of blood, and is characterised by a dull complexion, the skin having a dingy, dirty-white, or greenish hue, whence the name of green-sickness, and by an universal and decided debility of the whole frame, with a torpor of particular organs.

There is not only general weakness of the muscular system, but weariness and langour of body, with listlessness of mind, and childish caprice: dull headache, dullness of the eyes, puffiness of the eyelids, flaccid state of the skin, which is wanting in warmth, as in colour, prevail. The patients are very sensitive to a low temperature, chills, and crave for warmth; the extremities are cold, the lips and tongue partake of the same exsanguine character, and are pale and blanched, the latter is often covered with a thick, tenacious mucus. The pulse is small and weak; often, but not always, quick: it is easily fluttered, and palpitation readily induced; the veins appear half empty and of a pale rose colour; the respiration is oppressed; there is a sort of half sighing, general *malaise*, difficulty of breathing, not from obstruction but from nervous exhaustion, and throbbing of the carotids. Along with the palpitation of the heart there is arterial murmur, or *bruit-de-soufflet*, characteristic symptoms of the disease which are the last to disappear, and which reappear on the least impairment of health afterwards. The appetite is diminished, the patient loathes food, or is sick after eating, or much troubled with flatulence and gastrodynia. Often there is a desire for indigestible substances, particularly chalk, magnesia, or even cinders. The bowels are costive, and often not relieved for several days in succession, or if they are, the stools are dark and offensive. The catamenia, if not already suppressed, will soon cease to flow; the abdomen is generally tumid, but very variable in size. The hands and feet frequently swell at night, and the eyelids, if not the whole face, are puffy in the morning. The urine is scanty, but usually clear. Whilst the strength

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and the flesh fail, other symptoms may be added; such as acute pains, headache, with throbbing and a sense of fulness, intolerance of light and sound; paroxysms of dyspnœa and hysteria also occur, and sometimes a cough ending in consumption; or the patient may be affected with a general dropsy. It is satisfactory, however, to know, that many of these fearfully foreboding symptoms, dependent rather upon sympathetic irritation than upon actual organic disease, are capable of being removed, and are amenable to homœopathic treatment.

Chlorosis, then, may precede or accompany the establishment of the menstrual function, or it may occur at any time during its progress, in connection with a suppression, a diminution, or even an *excess* of the secretion itself, or of some vicarious discharge which may have taken its place.

If the disease make its appearance before the age of pubescence, menstruation does not become established at the proper time. If, however, the menses had already appeared before the disease set in, they then become irregular as regards time, duration, and quantity: sometimes a mere appearance of the discharge takes place, either alone, or in the form of coloured mucus, lasting for a day, or a day and a half; and occurring at intervals of four, five, or six weeks. At other times, a vicarious leucorrhœa takes the place of the ordinary discharge, showing a local effort which augments the general debility.

The predisposing causes of chlorosis are to be found amongst all classes of society, either in the vitiating habits of social life, where these have been of a sedentary and indolent nature, in the frequenting of hot and crowded rooms, or excessive indulgence in warm bathing, in the use of soft beds, too much sleep, tight-lacing, &c.; or, in the humbler classes, the constant inhalation of an impure atmosphere, with close and sedentary employment; the abuse of diluents, acid drinks, or spirituous liquors in early life; poor living, or over fatigue; in fact, anything that impairs the vigour of the nervous energy which regulates and sustains the faculty of nutrition, the imperfection of which is the mainspring of chlorosis.

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The exciting causes are most commonly the depressing passions and affections; unrequited love, "the hope deferred that maketh the heart sick;" the reading of exciting novels, sudden mental and moral shocks, introverted feelings, sudden suppression of the menses at the age of puberty, getting the feet wet during the flow, excessive menstruation, &c.

The disease may show itself all at once from a sudden but deep impression made upon the nervous system, or it may be gradually developed; in the former case it may be connected with an abrupt arrest of the catamenial flow; in the latter, with a gradual and partial suppression, during which, from some unusual fatigue or sudden emotion, the disease becomes at once completely established.

It happens more frequently in spring and autumn than in summer and winter; relapses occur in those seasons, as damp and cold weather favours the disease.

Recovery takes place gradually; the face loses its pale or unhealthy hue; the lips and tongue become red; the pulse is fuller; the temperature of the body equable; the spirits more cheerful; and the feeling of strength which the patient now enjoys, are sure signs of recovery. The menses become gradually established and regular, and it is important to protect the body well against the ill effects of damp and cold weather. When the disease becomes inveterate from neglect, improper treatment, or the continued operation of its causes, it becomes dangerous from the morbid complications and associations which are manifested. Anæmia is one of the immediate accompaniments of the chlorotic state, nutrition and sanguification being from the first to the last impaired, owing to the unhealthy tone of the digestive organs, causing an insufficient quantity of healthy chyle to be supplied to the blood, and the imperfect sanguification of that which is supplied. Hysteria, swelling of the glands, neuralgia, chronic cutaneous eruptions, hæmatemesis, and melæna; diseases of the heart or of the lungs; dilatation of the right ventricle, or phthisis; disorganisation of the spleen by atrophy or induration, either of which may lead to dropsy, congestions of the liver, hæmorrhoids, melan-

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choly, idiocy, and nymphomania, are amongst the secondary diseases which accompany, or remain after, a neglected chlorosis. Although chlorosis does not often prove *directly* fatal, it may do so indirectly through any of the secondary diseases which result in the course of its disturbing influence upon the various organs of the body.

*Treatment.*—The first step is to remove, or counteract, the mental or moral causes, as far as possible. A proper regulation of the diet must be enjoined. Avoidance of everything that can relax or enfeeble the mind or body must be rigidly adhered to, such as sleeping too long, or lying upon feather beds, or under too much clothing; late hours; hot and crowded rooms; the exciting or depressing passions; novel reading; rich and highly seasoned food and drink, &c.

"Hæmorrhages and profuse menstruation should be treated with the remedies recommended under the several heads in question; and if debility remain, from whatever cause, *China* should be administered. If the os tincæ or the vagina be closed, a surgical operation will be necessary; after which it will appear, whether such a mechanical difficulty was the only cause of the chlorosis."

"The slow and gradual development of the disease shows its more than ordinary hold in the deep recesses of the organism, and the greatest care is therefore required to remove it. All stimulants, wine, brandy, spices, &c., should be abjured."

*Pulsatilla.*—At the commencement of the disease, when the menses are feeble or retarded, the complexion pale, and the muscles flabby.

*Cocculus.*—Particularly when the patient complains of spasms deep in the abdomen, with irregular menstruation.

*Nux vomica.*—If the patient be of a vehement, passionate temperament; the menses frequently appearing, but flowing irregularly; if there be symptoms of gastric derangement, vomiting, and constipation: or if the patient has indulged in coffee or tea; to the latter circumstance *Pulsatilla* and *Ignatia* are likewise adapted.

*China.*—Œdematous swelling of single limbs, particularly of the feet; puffiness of the eyelids; distension of the abdo-

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men, costiveness; acute pains; drawing, tension, or creeping in the abdomen; bad digestion, sour eructations, morbid cravings, and depraved appetite.

*Arsenicum*—if the above symptoms are accompanied by trembling, frequent fainting, and extreme debility.

*Conium*. Entire suppression of the menses, great sensitiveness of the external and internal pudendum every four weeks; constant, dry heat of the body without thirst, anxious dreams, and feeling of heaviness in the limbs; whining mood, restlessness, anxious care about everything, stitching in the region of the liver, which sometimes continues several days and weakens the body very much.

*Phosphorus*—the menses not being entirely suppressed, but appearing irregularly; nausea, sour vomiting; oppression of the breathing; vertigo, and erethism of the system.

*Natrum mur.* — frequent, ineffectual indications of the appearance of the menses, accompanied with great sadness, oppression, and anxiety, fainting spells, coldness of the pelvis, and internal heat; heat in the face, weight in the abdomen, teasing toothache, frequent burning, and cutting in the groins.

*Plumbum* has been greatly lauded by Dr. Winter as a remedy in chlorosis. He traces the resemblance between its pathogenetic symptoms, or, as he calls them, the lead cachexia, and those of the disease. He considers that it favours the action of iron, and that its action is rather upon the vegetative system and the venous blood, while the relation of iron is stronger towards the vitality of the blood, and especially to the arterial. Hence the lead must precede the iron, when the chlorosis takes place in early life; but when it results from great loss of blood, the iron must be exhibited first.

The cases of chlorosis in which the lead was used were marked by orthopnœa, constipation, œdema of the feet, and unusual muscular debility.

*Sulphur* is an important remedy in chlorosis. It may be alternated with *Pulsatilla*.

*Sepia* exhibits many general indications for chlorosis, and comprises, moreover, various morbid conditions of the sexual organs under its pathogenesy; as, for instance, a painful press-



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ing in the inner pelvis from above downwards, occasionally accompanied with discharge of mucus, sometimes of a jerking, darting in the vagina from below upwards, or of a stitch in the vagina, with occasional discharge of single drops of blood. If no blood be discharged, the patient complains, at particular periods, of aching pain in the abdomen, swelling in the pudendum, or even discharge of mucus.

*Belladonna* and *Platina* should be carefully compared with *Sepia*.

*Borax* will sometimes succeed when the disease has resulted from a sudden check of the catamenia, a remedy being first given in accordance with the exciting cause.

*Nitric acid*, *Lycopodium*, and *Graphites* deserve consideration. *Ferrum* is the best remedy for inveterate cases of chlorosis, "and it should be continued," says Hartmann, "until every vestige of arterial murmur has disappeared; but it must be given in massive doses. *Calc.*, *Dig.*, *Helleb.*, *Kali*, *Spig.*, *Val.*, *Carb. v.*, *Caust.*, *Phosph. ac.*, *Sabina*, *Sulph. ac.*, *Zinc.*, are also amongst the remedies sometimes useful in chlorosis.

## LEUCORRHŒA.

In the natural and healthy condition of the female organs, the lining membrane of the fallopian tubes, uterus and vagina, is lubricated by a thin, transparent, glairy fluid, for the double purpose of obviating the effects of friction, and of preserving the channels free and smooth, and void of the risk of adhesion. There is also that regulated balance between absorption and secretion which prevents an accumulation of the latter; but, when, from accidental causes operating either directly upon the organs themselves, or by remote sympathy through other organs, this secretion is augmented and the healthy absorbent action overpowered, the secretion becomes a source of great discomfort to the female, and is then called *leucorrhœa*, or *fluor albus*, which, if not remedied, sooner or later affects her general health. The secretion is first simply increased in quantity, but soon

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changes to a milky character, and, under these circumstances, may depend upon a relaxed condition of the exhalents of the mucous surface, as a consequence of deranged health. But it may become purulent, from aggravated morbid action in the glands about the os and cervix uteri, or of some part of the vaginal passage,—just as the character of the secretion is changed under a catarrh of the bronchial mucous membrane. It is sometimes observed to be clear, colourless, and viscid, resembling the white of an egg; it is usually found to exude from the cavity of the uterus, and may be only an increase of the natural secretion of that part; but under a sub-inflammatory condition of the membrane, it is found to be yellow, or thick, opaque, and jelly-like; it is more ropy and tenacious than the other kinds. The character of the secretion which comes from the cervical canal is not very evident; first, because the secretions from the cavity of the uterus necessarily pass along it; and, secondly, because inflammation of the cervical canal is seldom observed without some morbid action of contiguous structures; but the copious secretion which is poured out during labour by the mucous glands or follicles of that part, and the extensive secretory surface afforded by the palmæ plicatæ, render it probable that some forms of leucorrhœa have their origin in that structure.

When erosion, ulceration, or other more grave morbid condition of the uterus or its neck co-exists, the discharge is found occasionally to be streaked with blood, ichorous or watery, and may be serous, green, dark or sanguineous, or purulent and fetid. It is often greenish, brownish, or exhibits a yellow tinge. Another appearance presented by it is that of a white or cream colour, or resembles starch diffused in water; this was first noticed by Sir C. M. Clarke, and described by him as pathognomonic of inflammation of the cervix uteri. It is sometimes homogeneous; at others the pearly white portion of the discharge is imperfectly mixed with the clear transparent viscid mucus with which it has come in contact, and is then stringy or ropy. The one seems to come from the exterior of the cervix, while the other, or clear gelatinous portion, has descended from

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within the cavity. I think it may be concluded that when the discharge is thin, copious, and milky, or puriform, it generally proceeds from the lacunæ of the vagina; when it is pearly or starch-white or thick, yellowish, or fetid, or streaked with blood, it comes from the glandular apparatus about the os or cervix; and when it is viscid, or like jelly, either translucent or opaque, its origin is the cavity of the uterus or the cervical canal.

Leucorrhœa often commences as an inflammatory affection of the vagina, attended with local heat, painful micturition, excoriation and irritation of the external parts, and general febrile disturbance, which soon subsides, the disease passing into the chronic form. The vaginal lining is the most common source, especially early in life.

Leucorrhœa is more general than any of the affections peculiar to the sex, and not unfrequently commences before menstruation, especially when that is retarded, and is one of the symptoms in amenorrhœa.

It may exist in connection with a robust and plethoric, or with a relaxed and debilitated state of the system.

It has been supposed to depend often upon irritation of the spinal marrow at the origin of the sacral nerves, and this is very probable, more especially in those cases which occur at the early periods of menstruation. As well as occasionally preceding that function, it sometimes takes the place of it, where there has been obstruction, the leucorrhœa becoming more abundant at the monthly period, and attended with pain in the back. Of this vicarious leucorrhœa, notice has been taken at page 19.

With regard to the local symptoms associated with leucorrhœa, there may be morbid heat of the vagina, with tenderness of the os and cervix, or even of the body of the uterus, enlargement of the mucous glands or follicles, the os uteri feeling soft and tumid, occasionally patulous, and often bathed in discharge. There is often painful or difficult micturition, irritation of the bladder or rectum, a sense of burning in the vagina, and the external parts become heated and excoriated by the acrid, corrosive nature of the discharge. This is not unfrequent in young women, and is generally

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the result of an inflammatory condition of the os and cervix; but erosion and ulceration are not necessarily existing when leucorrhœa is present. The os and cervix may exhibit a pale crimson or slightly red appearance. In many instances the augmented secretion is confined to the muciparous glands at the entrance of the vagina, which will yield to the simple means of ablutions of the parts, or a dose or two of *Calcarea*, unless these glands are much enlarged from sympathy with some serious structural disease of the uterus itself. In all severe and chronic cases, where there is any doubt or obscurity, an examination should be made with the speculum, as the only means of deciding upon the seat and origin of the affection. The discharge may possibly come from the glands which have been found at the fundus uteri; and it has been observed that when this is the case, the secretion is acid and reddens litmus, whereas that which proceeds from the os and cervix is alkaline. In order to ascertain this fact, an instrument has been used by Dr. Mitchell, of Dublin, to facilitate the observation, so constructed as to admit of the litmus paper being applied within the cervix uteri. But its use is neither required nor justified in Homœopathy.

The constitutional symptoms which attend upon leucorrhœa are at first so slight as scarcely to attract any attention; indeed so common is the disorder, that women have got into the habit of regarding it as almost a natural state of things, which often leads to the permanent establishment of the disease; but when, from morbid activity of any of the exciting or predisposing causes, there is excessive and altered secretion, constitutional symptoms are more or less manifested by febrile movements, &c., in conjunction with those which are of local origin.

When the disease becomes chronic and aggravated, paleness of countenance, partial emaciation, indigestion, constipation, languor and debility occur, suspension of menstruation, chlorosis and phthisis, ensuing as occasional adjuncts, the constant and abundant discharge breaking up the general health, and often inducing sterility. The symptomatic leucorrhœa dependent on some organic lesion exhibits constitutional

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symptoms referable to the morbid condition of the organs, whether it be a displacement or other structural disease.

The causes of leucorrhœa are:—cold and moisture, frequent excitement resulting in debility, excessive indulgence, frequent pregnancies, abortions, hæmorrhages, protracted lactation, irritation of a pessary or of injudicious local applications, prolapsus uteri, polypi, or other tumours of the uterus or vagina, ascarides or hæmorrhoidal affections, congestions of the os and cervix, scrofulous taint of constitution.

*Treatment.*—In order properly to fulfil the curative indications, it will be well to bear in mind the characteristics which mark the three forms of the disease which have been alluded to, namely:

1. The acute and mild conditions of the simple form.
2. The aggravated or chronic.
3. The symptomatic.

Here, instead of applying stimulating injections, which so often augment the evil, or cauterizing the vagina, or operating violently upon the stomach or bowels, we have in Homœopathy much more simple and efficient means, by which we can remove or limit the discharge. The hygienic rules to be adopted, with a view to aid the action of the medicines, consist for the most part in observing a simple, nutritious, unstimulating diet, regulated in its quantity and quality, by the extent of the inflammatory symptoms present. The patient should not be exposed to cold or damp, or to endure fatigue, or to much standing, and should avoid too much excitement, late hours, and hot rooms.

The remedies calculated to relieve the different kinds of leucorrhœa, are:—

In the more simple form,—*Alum.*, *Amm. c.*, *Bor.*, *Baryt. c.*, *Calc.*, *Con.*, *Graph.*, *Kreos.*, *Lyc.*, *Merc.*, *Puls.*, *Sep.*, *Sulph.*;

In the acute,—*Acon.*, *Amm. c.*, *Borax*, *Calc. c.*, *Carbo v.*, *Con.*, *Kali c.*, *Lyc.*, *Phos.*, *Puls.*, *Plat.*, *Sab.*, *Sep.*, *Sil.*, *Sulph. ac.*;

In the aggravated and chronic form,—*Alum.*, *Amm. c.*, *Ars.*, *Carb. a.*, *Carb. v.*, *Caus.*, *Canth.*, *Chin.*, *Cham.*, *Con.*, *Ign.*, *Kali c.*, *Kreos.*, *Lach.*, *Lyc.*, *Merc.*, *Mez.*, *Magn. c.*,

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*Natr. m., Nitr. ac., Phos., Puls., Ruta, Sep., Sil., Sul., Sulph. ac., Stan., Zinc.*;

In the symptomatic,—*Alum., Amm. c., Ars., Amb., Calc., Caps., Carb. veg., Cham., Chin., Con., Graph., Kali, Kreos., Lyc., Mag. c., Merc., Mez., Natr., Natr. m., Nit. ac., Nux v., Phos., Puls., Sass., Sab., Sep., Stann., Tart., Thuja, Zinc.*:

When fetid,—*Chin., Kreos., Natr., Nit. ac., Nux v., Sabina, Sep.*

The following from Bœnninghausen gives a more succinct arrangement of the remedies applicable in leucorrhœa:—

*In general*:—Acon., Alum., Ambr., Amm., Amm. m., Anac., Ant. cr., Ant. tart., *Ars.*, Bar., Bell., *Bor.*, Bov., Bry., Calc., Cann., *Canth.*, *Carb. an.*, Carb. v., Caust., *Cham.*, Chin., Cocc., Coff., Con., Dros., Ferr., Graph., Guiac., Hep., Ign., *Iod.*, *Kali*, Kreos., Lyc., *Magn.*, Magn. m., Mang., Merc., *Mezer.*, Mur. ac., *Natr.*, *Natr. m.*, *Nitr. ac.*, Nitr., N. mosc., N. vom., Petr., Phosph., *Ph. ac.*, Plat., Plumb., Puls., Ran. bulb., *Ruta*, Sabina, Sass., Scill., Sec. corn., Seneg., Sep., Sil., *Stann.*, Stront., Sulph., *Sulph. ac.*, Thuja, Viol. tr., Vit., Zinc.

Yellow colour:—*Acon.*, Alum., Ars., Bov., *Carb. an.*, *Carb. v.*, *Cham.*, Kali, Kreos., Lyc., Natr., *N. vom.*, Ph. ac., Sabina, Sep., Sulph.

Brown:—*Amm. mur.*, Nit. ac.

Green:—*Bov.*, Carb. v., *Merc.*, Puls., Sep.

Fetid odour:—Chin., Kreos., *Natr.*, Nitr. ac., N. vom., Sabina, Sep.

Watery nature:—*Amm.*, Ant. cr., Ant. t., Carb. an., Carb. v., Cham., Chin., Graph., Kreos., Magn., Magn. m., Merc., Mez., Nitr., *Puls.*, *Sep.*, Sil., Sulph.

Thick:—Ambr., *Ars.*, Bov., *Carb. v.*, Magn. m., *Natr.*, *Natr. m.*, Puls., Sabina, Sep., *Zinc.*

Milky:—Amm., Calc., *Carb. v.*, Con., *Ferr.*, Graph., Kreos., Lyc., Natr. m., Phos., Puls., Sabina, Sep., Sil., *Sulph.*, Sulph. ac.

Purulent:—Calc., *Chin.*, Cocc., Ign., *Kreos.*, Merc., Sabina, *Sep.*

Mucous:—Alum., Ambr., *Amm. m.*, Ars., Bell., Bor., *Bov.*, Bry., Calc., Canth., Carb. an., Carb. v., Cocc., Con., Ferr.,

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Graph., Guiac., *Kreos.*, Magn., Merc., Mezer., *Natr. m.*, *Nitr.*, *Nitr. ac.*, *N. vom.*, Petr., Phos., Plumb., *Puls.*, *Sabina*, Sass., Seneg., Sep., Stann., Sulph., Sulph. ac., Thuja, *Zinc.*

Bloody:—Alum., Ant. t., *Ars.*, Canth., Carb. v., Chin., Cocc., Con., Kreos., *Lyc.*, Magn. m., Nitr. ac., *Sep.*, *Sil.*, *Sulph. ac.*

Viscous:—Acon., Amm. m., Bor., *Bov.*, *Mez.*, Phos., Ph. ac., *Sabina*, Stann.

With burning:—*Amm.*, Ars., Bor., Calc., *Canth.*, *Carb. an.*, Con., *Kali*, Kreos., Puls., *Sulph. ac.*

Itchiness:—Alum., Anac., Ars., Calc., Chin., Ferr., Kali, Kreos., Merc., Phos. ac., *Sabina*, *Sep.*

Corrosive:—Alum., *Amm.*, *Anac.*, Ant. cr., Ars., Bov., Calc., Cann., Canth., Carb. an., Carb. v., *Cham.*, Chin., Con., Ferr., Hep., *Ign.*, Iod., Kali, *Kreos.*, *Lyc.*, Magn., Magn. m., Merc., Mez., *Natr. m.*, Nitr. ac., Phosph., Ph. ac., *Puls.*, *Ranun. bulb.*, *Ruta*, Sep., Sil., *Sulph.*, *Sulph. ac.*, Thuja.

## DYSMENORRHŒA.

Menstruation is sometimes attended with difficulty and pain of a distressing kind, which is referred to the lower part of the abdomen, or the back, and often causes the person to remain in bed, where she rolls about in agony, and is troubled with nausea, or sickness, loss of appetite, diarrhœa, and chilliness. This state is, however, seldom attended with febrile excitement. Painful menstruation occurs at all ages, from the first establishment of the function to its cessation, but it may be cured by treatment. It happens to the married as well as the single, and is not unfrequently a cause of sterility; on the other hand, it is often cured by pregnancy. The pain sometimes begins only an hour or two before the flow; at others it is troublesome for a day or two previously, and is relieved by the discharge. The menses may commence regularly, and continue for a few days, either diminishing after the first day or ceasing abruptly, and all the while being accompanied by a great deal of suffering. Small clots or shreddy membranaceous matters escape along with the discharge, which is usually scanty,

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although in some few instances it is excessive. In some sanguine and plethoric subjects the formation of a mass taking the shape of the uterine cavity occurs, which consists of a membrane appearing, upon superficial observation, not unlike the decidua of pregnancy, inclosing a coagulum; this is expelled with a good deal of pain. It has been called spurious abortion, and often leads to painful suspicions, from the supposition that pregnancy existed. Dr. Simpson considers it to be a separation of the lining membrane of the womb, analogous to what takes place from the intestinal canal, from the circumstance of its being perforated with holes which correspond to the mucous follicles of the uterine surface. When an individual is subject to this deviation from the healthy function, she is apt to have a recurrence of it, either monthly or at occasional intervals, and the period is then attended with febrile symptoms, with sympathetic distension of the breasts, and expulsive (forcing) pains.

Dysmenorrhœa has been distinguished by the pathological states which accompany it into the neuralgic, the inflammatory, and the mechanical forms.

*Neuralgic Dysmenorrhœa* occurs at all ages, but is said to be most frequent after the thirtieth year. It is chiefly met with in subjects of a nervous, irritable temperament: it sometimes lasts only for the first day or two of the catamenial flow, when, after the escape of a small clot, the discharge becomes free, and relief is obtained. At other times the whole period is one of continued suffering.

The symptoms which prevail in these cases, and which must direct the choice of remedies, are:—sharp, lancinating or dragging pains in the uterus and vagina, extending into the iliac regions; lumbar pain running down the sacrum into the groins and thighs; pains of expulsion (forcing) like labour pains, during the emission of the discharge; sympathetic pains in the breasts; there is nervous, but little vascular excitement; irregularity of the bowels, at one time constipation, at another the reverse; capricious and small appetite; loathing of the food; pallor of countenance; coldness of the extremities; emaciation; loss of physical strength; leucorrhœa; the menstrual discharge is often paler than is

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natural, is occasionally mixed with small clots and shreds, and occurs either scantily and slowly, or in sudden, slight jets.

*Inflammatory* or *Congestive Dysmenorrhœa*.—The subjects in whom this form of dysmenorrhœa is developed are the robust and plethoric, with dark hair, florid complexion, turgid constitution, and in whom the sanguineous or the melancholic temperament prevails. The period is usually preceded by symptoms of restlessness, feverish heat, with rigors, flushing of the face, and headache, intolerance of light and sound, and sometimes delirium: as the function commences, weariness and aching of the limbs, weight in the loins, hot skin, full and quick pulse, are added, together with bearing-down pains, cutting and contractive pains in the abdomen, violent expulsive (forcing) efforts like those of labour, which, however, are not subject to remission, until —after a paroxysm of great suffering—a small clot, or a portion of membranous substance, is passed. Sometimes the discharge is profuse as well as painful, and mingled with several small coagula; but more generally it is scanty, when the difficulty of emission is very great: or the more inflammatory symptoms may be absent, and the period be accompanied by symptoms of passive congestion of the uterus and its appendages, such as weight and pain in the loins and pelvis, as if the parts were dropping through, constipation, and frequent micturition; aching of the thighs, an incapability of maintaining long the upright posture, &c. Intense paroxysms of pain occur, as though something were contained in the uterus, and must escape: these are temporarily relieved by the passage of a small clot; but full relief is not obtained until the catamenial period has passed over. The flow is generally sluggish, and the discharge dark. The pulse is rather weak and quick; there is often a cool and perspirable skin. There are, frequently, pain and swelling of the breasts, and uterine leucorrhœa during the interval. The constitution is not often much affected by the severe attacks, unless they continue unmitigated for a considerable period.

*Mechanical Dysmenorrhœa*.—Painful or difficult men-

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struation may occur from a narrowing of the cervical canal of the uterus in some part of its course. This stricture has been relieved by the use of bougies, or the sound, but the dysmenorrhœa has not always been cured in consequence.

The painful operations which have been had recourse to in these cases, for the purpose of dilating the cervical canal by means of the uterine sound, have frequently done more harm than good, and are to be greatly reprobated as general applications; they should at any rate be omitted until all other means fail, and then only employed in urgent cases.

The principal remedies which are suggested by their correspondence with the symptoms manifested in these varieties of dysmenorrhœa, and with the general condition of those subject to them, are,—*Coffea, Cham., Cocc., Crocus, Graph., Phos., Puls., Sep., Sulph.*, and *Am. carb.*

*Coffea* will be found serviceable when the subjoined symptoms prevail:—great nervous excitability; headache; continuous pinching pain in the iliac regions; dartings in the sides of the abdomen; pains like those of labour; loathing of food; colic, with coldness and stiffness; pressure on the bladder; frequent desire to pass water, &c., with increased menstrual discharge.

*Chamomilla,* when the symptoms are as follow:—sympathetic swelling of the breasts, with intolerable labour-like pain, incisive pains in the sides of the abdomen, during the flow of the menses, which are profuse or lumpy, with relaxed bowels.

*Crocus,* when, previous to the appearance of the menses, bearing-down pain in the groin, sharp lancinations in the abdomen, colic, &c., occur as the predominant symptoms.

*Cocculus,* when the discharge is irregular, fitful, scanty, and attended with uterine spasms and pressing pain in the groins; or with copious discharge of coagulated blood, followed by hæmorrhoids, and painful efforts; shivering over the mammæ; gastric disturbances, and bilious vomiting, with aversion to food; constipation.

*Graphites.*—Scanty and thin discharge, with violent pain in the back, attended with morning sickness; chilliness; colic; constipation previous to the catamenia, diarrhœa

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after; much rumbling in the intestines, with a burning and bearing-down pain; distension after a meal, with nausea; heartburn and water-brash; dull headache.

*Phosphorus.*—When the menses occur too early and are scanty, or too profuse and continue too long, being attended with pains in the back and abdomen; cutting in the abdomen, with pain in the back and vomiting, colic, chilliness, with cold hands and feet; dull headache, stitches in the mammæ; constipation; feeling in the back and limbs as if bruised and broken; sour eructations and vomiting; sick feeling towards evening; great weakness with blue margins round the eyes, and anxiety after the menses.

*Pulsatilla.*—In a retarded state of the catamenia, the discharge being black, with coagulated blood, or pale and serous, with colic; abdominal spasms; sacral pains; tenesmus of the rectum and bladder; gastric disturbance, nausea, and qualmishness; megrim, vertigo, shiverings, pallor, tearfulness, anguish, sadness, and melancholy.

*Sepia.*—Menses premature and scanty; pressing down of the uterus, with colic; violent colic just before the menses, with faintishness; shuddering all over the body; burning and frequent stitches in the vagina; disturbed sleep owing to the feeling of tearing in the back; chilliness and heat, thirst and painful constriction in the chest; contractive pain in the vagina; violent stitches from the pudendum to the umbilicus; costiveness, headache, toothache, and leucorrhœa.

*Sulphur*,—when the catamenia appear too early and are too profuse, the discharge being thick and black, with burning in the vagina. During the menses, cutting and contractive pain in the hypogastrium, violent pain in the small of the back, and colic, with bloatedness, the flow being *scanty*. Violent pain in the abdomen, with heat, chilliness, and a sort of epilepsy. Aversion to meat, dyspeptic symptoms, flatulence, constipation.

*Ammon. carb.*,—when the catamenia are premature, abundant, and preceded by griping, colic, and want of appetite; when the discharge is blackish, in clots, and passes off with spasmodic pain in the abdomen, with constipation and tenesmus, paleness of face, sadness, and toothache;

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violent tearing in the abdomen and vagina; intense pain in the small of the back, and great coldness.

*Belladonna* is applicable to the treatment of cases characterised by the following symptoms and conditions: congestive enlargement of the uterus, or prolapse of that organ; menstrual spasms shortly before the catamenia, with drawing labour-like pains from the small of the back to the thighs and calves, extending to the umbilicus, with pressure downwards. Vascular excitement, turgid countenance, with cold extremities, &c.

*Bryonia* is especially useful in treating the inflammatory or congestive variety; the symptoms are as follows:—chilliness, congestion of the head, and cough, bleeding at the nose, and leucorrhœa.

*Calcarea* is to be preferred when indicated by such conditions and symptoms as follow:—in delicate, scrofulous, full, and irritable subjects more particularly:—a too frequent and too copious flow of the catamenia, with vertigo when stooping, or rush of blood to the head, and heat in the head, with toothache; aching and burning soreness of the organs, leucorrhœa; griping and spasmodic pain in the back; violent colic; anorexia, nausea, &c. This remedy is especially suitable to the lymphatic and venous plethoric constitution.

*Ignatia*,—in the neuralgic form of dysmenorrhœa, when the menses are scanty, and the blood is dark; when coagula are passed; or there are uterine spasms and lancinations, contractive colic, palpitation of the heart, languor unto fainting; or uterine spasms relieved by pressure and the recumbent posture.

*Nux vomica* is appropriate for the treatment of subjects of an irritability of temper, in whom the menses appear too early, but are scanty and attended with uterine spasms; a griping and digging, with coagula; burning heat of the vagina; faintings on the appearance of the menses in the morning, preceded by spasmodic movements in the abdomen, and succeeded by languor and chilliness; cold hands; constipation; frequent desire to pass water; yellowish leucorrhœa during the intervals.

*Platina* is most useful for the treatment of individuals

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who are subject to nervous and vascular erethism; it may also often be used with advantage in alternation with *Belladonna* when the menses are profuse and attended with cutting, pressing, labour-like pains in the abdomen, small of the back, and thighs; the discharge being dark, with lumps or pieces intermingled; constipation, and frequent micturition, anorexia, restlessness, and tears.

*Secale*, when the menstrual discharge is too frequent and continues too long, attended by tearing and cutting colic, coldness of the extremities, cold perspiration, great weakness, small pulse.

## MENORRHAGIA.

When the menstrual discharge recurs too frequently, or too copiously, or if it be in excess at periods when it is usually absent, as during gestation and suckling, menorrhagia is considered to exist; but it must be borne in mind, that climate or constitutional idiosyncrasy may determine an excess, without the general health becoming thereby affected. Three varieties of menorrhagia are met with in practice. In the *first*, the discharge is normal in character, but the quantity, or the frequency of recurrence, is greatly increased; or in some cases both the quantity and the frequency are subject to these deviations from the normal condition. In the *second*, the discharge is great, and is accompanied by pure blood: in neither of these forms is there any change in the body or neck of the womb perceptible to the touch. In the *third* variety, there is, in addition to the great augmentation of the discharge and the appearance of blood and coagula, also a perceptible change in the size and position of the uterus.

Married women are more liable to menorrhagia than single; and it is rare for these, if otherwise healthy, to have uterine hæmorrhage.

Leucorrhœa is rarely absent in these cases during the intervals of menstruation.

The *first* variety of menorrhagia, although the simplest form, is the most rarely met with, and from the imperceptible

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tible degrees by which it undermines the health, is, perhaps, the least often paid attention to. It occurs either by violent and sudden gushes from the vagina, stopping and recurring during the whole menstrual period, or the usual free discharge may continue uninterrupted for one, two, or three weeks; or again it may, after lasting for the ordinary time of four or five days, return before the proper period, and be repeated every two or three weeks, *leucorrhœa* succeeding and continuing during the whole interval between the periods.

The effects of this irregularity and excess of function soon become apparent. Exhaustion, languor, indisposition to exertion, weakness across the loins and hips, and at the lower part of the abdomen, nervous headaches, throbbing of the temples, tinnitus aurium and giddiness, chilliness of the surface and extremities, palpitation of the heart, and all the symptoms of confirmed anæmia, followed, if not relieved, by the distressing and serious disorders of the various organs and functions of the body necessarily consequent upon that condition; such as mental hebetude, or morbid irritability, or even epilepsy; derangements of the stomach and bowels, diarrhœa, anasarca, and various nervous symptoms. An examination per vaginam discloses nothing but the os uteri, perhaps, slightly open.

The causes of this derangement are, chiefly, frequent childbearing and miscarriages, over-suckling, cold, mental emotion, and sexual excess.

The *second* variety, characterised by the discharge of blood, in addition to the usual menstrual secretion, and accompanied by the expulsion of coagula, generally occurs in married women and those of leuco-phlegmatic temperament. This form is of a more acute kind, and may occur in the robust or the delicate. The discharge is more profuse from the beginning, and induces disturbance of the general health more rapidly, and therefore sooner attracts attention.

When it occurs in the robust and plethoric, it is attended by an active state of the heart and arterial system, or, at times, by febrile symptoms, the menstrual flow being preceded by a sense of weight and tension in the region of the

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uterus, a fulness and throbbing within the pelvis, the external parts being often tumid and painful. The following manifestations also occur: swelling and tenderness of the breasts, and headache; violent pain in the womb, loins, and thighs; burning heat in the pelvis; quick and hard pulse. The discharge often comes on in violent gushes, with relief when febrile symptoms are present; or a sudden profuseness takes place sufficient to cause fainting, and accompanied by large masses of coagula. This continues several days, at the end of which time the patient is weak and exhausted. A few repetitions of these attacks will impair the health, and reduce the patient to a state of anæmia; or, if the morbid condition be kept up by an injudicious use of stimulants, during the interval, with the intention of quickly regaining the lost ground of health, a passive form of menorrhagia is induced, and all the evil consequences referable to anæmia may be incurred. When this form occurs in delicate and hysterical, or scrofulous females, the concomitant symptoms are more of a nervous than of an inflammatory character. In the place of such symptoms as the congestive headache, throbbing pulse, and general excitement, the case is usually characterised by the following manifestations:—tendency to spasmodic affections, contractive pain in the uterine region, the discharge coming away by gushes, quick and irritable pulse, chilliness, faintness, pallid and anxious countenance, sleeplessness, &c.

The *third* variety occurs generally in the middle and later periods of life, and is either connected with climacteric cessation of the menstrual function, or may lead to the inference that disease of the uterus itself exists. It is not peculiar to any one temperament. The discharge is more profuse than in the other varieties, and the effects, if possible, are more severe. It continues for a long period, at times in alarming excess, and is often preceded and followed by a watery, or leucorrhœal discharge. During the attack, which sometimes lasts throughout the whole period of the ordinary interval, or occasionally even for several months in succession,—interrupted only by temporary intermissions from time to time, during which the aqueous or leucorrhœal discharge takes its

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place, and becomes slightly or offensively odorous,—the patient may complain of pressure, or aching, or lancinating pain in the uterus, weight and pain in the uterine and lumbar regions, faintness and exhaustion, dysuria, loss of appetite, nausea, constipation or diarrhœa,—further characterised, if the complaint be of long duration, by a sunken, cadaverous, careworn countenance, quick and weak pulse, coldness of the extremities, and œdema.

In these cases the uterus is found enlarged, with the os more or less patulous, lower down than usual in the pelvis, and tilted back towards the sacrum; the cervix as well as the body of the uterus is swollen, and tender to the touch.

The danger in all these varieties is dependent upon the state of anæmia induced by the drain upon the system; and the prognosis must therefore be guided by the effects already produced; unless, as in cases of the last kind, in addition to the state of the uterus described above, there exists serious organic or malignant disease.

*Treatment.*—If any of the above causes, which have been enumerated as productive of this complaint, continue to exist, they must be removed as a preliminary step to the medical treatment; after which some of the medicines from the annexed list, chosen in relation to the symptoms of the individual, will be found most efficacious in correcting the tendency to the disorder, and arresting the immediate attack. The recumbent posture with light clothing, and as much fresh air as the season or the circumstances of the patient will admit, a tolerably cool apartment, and a hard bed or couch, must be prescribed. In the interval, everything which can add to the fortifying of the system generally,—change of air, light, nutritious diet, salt water baths, sponging with salt water over the loins and lower part of the abdomen, and an avoidance of pregnancy for a time, must be adopted.

In the *first* variety, the following medicines are particularly applicable to the treatment:—*Belladonna, Bryonia, Calcarea, Ignatia, Natr. mur., Nux v., Phosphorus, Sabina, Secale, Sepia, Lauro-cer.* In the *second*,—*Acon., Bell., Bryon., Calc., Cham., China, Crocus, Ferr., Hyosc., Ignatia,*



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*Iodium, Ipecac., Kreos., Magn. m., Nux v., Phosph., Platina, Puls., Sec., Sep., Sab., Sulph.*, or *Carbo veg., Ratanhia, Ruta, Veratr.* In the *third*,—*Acon., Arsen., Arn., Bell., Cham., Calc., China, Carb. veg., Crocus, Ferr., Iod., Ipec., Kreos., Phosph., Puls., Secale, Sep., Sabin., Sulph., Veratr.*

Besides the treatment which may be requisite during the attack, when every effort must be made, by a careful selection of remedies homœopathic to the individual case, to arrest the catamenial excess, it is important to proceed during the interval with such antipsoric treatment as shall restore the system to a healthy balance, and so regulate the functions that the return of the menses at the future periods shall be normal. This course may be commenced immediately after the cessation of the superabundant flow, or so soon as the constitution shall have rallied from its effects, or on the first day after the cessation of the menses. The plan most likely to effect this, is that adopted by Dr. Hartmann, which is to administer, first, a dose of *Nux vomica* of the 6th or 9th dilution, in the evening; and, thirty-six hours after that, a dose of *Cinchona* of the 6th or 3d dilution. On the evening of the fourth day, that is, thirty-six hours after the foregoing dose of *Cinchona*, a second administration of *Nux v.*, followed as before by *Cinchona*, after a similar interval. After this, *Tinct. sulph.* of the 6th or 3d dilution, and, two days later, *Calc. carb.*, continuing the administration of these two alternately until the return of the catamenial period. The result of this treatment is most satisfactory, as even in cases of long standing there is steady improvement in the general health, and the regular return and course of the subsequent menstrual periods.

A brief outline of the symptoms and conditions which more especially indicate the medicines chiefly applicable to the treatment of this complaint will perhaps suffice here, leaving the reader to study the rest, by accurate investigation of their respective pathogenetic properties, for the treatment of rarer cases, as they may present themselves.

*Aconite, Belladonna*, and *Bryonia* are applicable to cases in which there is arterial excitement or great irritability.

*Belladonna* corresponds to a discharge of dark and partly

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bright-red blood; constant pressure in the vagina, as if the uterus would prolapse; pains in the back, as if it would break, &c.

*Chamomilla* is to be preferred when the discharge of blood is dark, blackish, and coagulated, and occurs in gushes, with pressure in the uterus like labour pains, frequent desire to pass water, and drawing or tearing pains in the thighs and legs; quarrelsome humour, fainting fits, coldness of the extremities, paleness of the face, thirst.

Excessive menstruation is said to be frequently caused by the abuse of Chamomile tea, in which case its effects should be neutralised by the administration of *Nux v.*, *Ignatia*, or *China*. According to the particular constitution and temperament of the patient and the circumstances of the case, *Coffea cruda* may be employed to remove great nervous sensibility.

*China* is useful when the discharge is black and clotted, occurring at intervals, with pressure at the uterus and jerking movements of the body, proceeding from depletion rather than spasm, and with painful tension of the abdomen; or when, from great loss of blood in the most serious cases, the subjoined symptoms and conditions characterise the case: sense of weight of the head, vertigo, dullness of sensibility, syncope, coma, the patient being cold and blue: it may be given, also, after the attack has passed over, or in the interval of the catamenia, as part of the constitutional treatment.

*Calcarea* is very useful when the menses are too profuse or too frequent in their recurrence, when the patient exhibits a scrofulous diathesis; but Hahnemann says, it is never given with benefit when there is a deficiency of the catamenia. It is, however, more advantageous when given during the interval, in order to correct that condition of the system on which the abnormal state of the function often depends, and in which cases it may be given alone, or in alternation with *Cinch.*, *Nux v.*, and *Sulphur*.

*Crocus* is a very excellent remedy in cases of hæmorrhage from the uterus. Its employment is indicated by the escape of black, lumpy, viscid blood, increased by the least movement, with cutting pains, deep in the abdomen, extending

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to the small of the back: its characteristic symptom is *the sensation of something alive in the abdomen in the form of a ball,* when the hæmorrhage is active; it is suitable in attacks of menorrhagia, which have arisen from dancing or taking stimulating drinks when the catamenia were present; or when palpitation, anxiety and melancholy, jerking and creeping in the limbs, thirst, heavy dreams, and starting on going to sleep, prevail.

*Hyoscyamus.*—One of the primary effects of this drug is uterine hæmorrhage. It is indicated when the subjoined symptoms characterise the case:—profuse menses, accompanied by delirium, the blood being bright-red; or spasms, interrupted by jerks or startings of single limbs, followed by rigidity of the joints; or preceded by hysteric pain or hysterical laughter, attended with spasmodic pains and trembling of the hands and feet; difficult micturition, with pressing; fainting fits, with convulsive movements; or restlessness, the body being hot, with swelling of the veins, a full and quick pulse, dulluess of the senses, obscuration of sight, delirium.

*Ferrum* is applicable when the blood is at times fluid, at others black and lumpy, with labour pains in the abdomen and groins, great vascular excitement and a hot, red face, the pulse being hard and full. (*China* is said to be useful, sometimes, after *Ferrum.*)

*Ignatia* may be given when the menses come away in lumps of coagulated blood, with a crampy pain in the uterus like labour pain, and with a tendency to spasms.

*Ipecacuanha* is indicated when there is much weakness and the hæmorrhage is of a passive character, with a cutting pain at the umbilicus, a pressing towards the uterus and anus, with coldness, shivering, paleness of face, and heat within the head, the discharge being bright-red.

*Kreosotum* corresponds with the following state:—discharge of a large quantity of dark blood, followed for some days by the discharge of a bloody ichor with a pungent odour; corrosive itching and smarting of the parts; then the menorrhagia recommences, consisting of coagulated pieces of blood, accompanied with buzzing, and pressing in the head from within outwards.

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*Lauro-cerasus* is sometimes useful when there is a profuse discharge of liquid blood, with pain, hysteria, and nightly tearing in the vertex.

*Platina* is most beneficial when the patient is of a haughty temper and irritable, the discharge consisting of dark, thick, but uncoagulated blood, and when the following symptoms prevail:—pressive pain, extending from the small of the back to the groins; forcing outwards through the organs, great excitability of these parts, with sensitiveness.

*Pulsatilla*, although so important a remedy in amenorrhœa, is nevertheless very useful at times in menorrhagia, when the blood is thick and black, or pale and watery, and flows by fits and starts; or when it is profuse, especially at the critical age, and when the following symptoms occur:—headache, noise in the ears, sadness and melancholy, or when there is irritation of the nerves.

*Sabina* corresponds to the discharge of black, deep-coloured, clotted blood, with labour-like pain in the lumbar vertebræ and uterine region; or to paroxysmal discharges of bright-red blood, particularly during motion; or again it is appropriate for the treatment of women who have frequently suffered from abortion, and are at the time of life when menstruation ceases.

A patulous state of the os uteri is an indication for the use of *Sabina*.

*Thlapsi Bursa Pastoris*.—Dr. Lange has observed the greatest benefit to result from the use of this plant in menorrhagia occurring in persons of a relaxed constitution. It entirely cured the disposition to excessive discharge at the periods.

*Secale* is, as might be supposed, a valuable agent in menorrhagia; it is indicated in the congestive form, when the menses are profuse, especially at the climacteric period,—in weak, cachectic, and exhausted individuals, with cold extremities, pale face, small pulse, and with apprehensiveness, and despondency. It should be used at a low attenuation.

*Sepia* is very serviceable when the menorrhagia accompanies induration of the os and cervix uteri, with transient shootings and spasmodic colic.

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*Veratrum*, in cases in which menstruation occurs too early, is too profuse, and attended with diarrhœa; or more especially when buzzing in the ears, bleeding at the nose, pain in all the limbs, and great thirst prevail.

## MENSTRUAL CLIMACTERIC.

MENSTRUAL CLIMACTERIC, or the period of cessation of the menses, varies in different women from the age of 35 to that of between 60 and 70 years, but the average period is from 40 to 50. This event, which is called "the turn or change of life," is marked by a variable state of the catamenia as to quantity and frequency, for a longer or shorter period previous to their total cessation. It is sometimes effected in a few months, whilst in other instances, and more generally, it occupies two years or even longer.

At this critical period, women are apt to suffer, especially where a predisposition to disease exists, from derangements of the nervous, vascular, or digestive organs, owing to the altered condition of this one important function. Nervous irritation of the brain, or increased action with venous congestions of one or more of the important organs, takes place; morbid affections of the secretory functions of the liver, skin, and mucous membrane, and development of malignant action, are more likely to take place at this period, especially if there had previously existed any morbid condition of the uterus, or breast. It is important, therefore, that the earliest deviations from health, at this time, should be promptly submitted to medical care. When there is no tendency to local disease, it is very common for women, after the menses cease, to become corpulent, and sometimes they enjoy better health than formerly.

Swellings of the abdomen, sickness, loathing of food, palpitation, flutterings in the abdomen occur at this time, which are often mistaken for pregnancy. The patient, anxious, perhaps, for the first or the last time, to become a mother, and finding herself enlarged about the abdomen, at the same time that she passes over the periods without a return of the

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catamenia, imagines that she must be with child, and consults her accoucheur. She complains of a weightiness of the breasts, especially when she first rises in the morning; they are increased in volume and firmness, but there is no difference in the areola, nor is there any moisture from the glands surrounding the nipple; at times, however, these are somewhat enlarged; she has an obscure feeling of motion below the umbilicus, dependent upon flatulence; there is nausea—but not actual retching—on rising, from the existence of some dyspeptic symptoms, or she may possibly have bilious vomiting at times; she may complain of spitting of blood, an evidence of the congestion that has taken place in the lungs, on the arrest of the menstrual secretion. In such a case it is highly important accurately to distinguish the symptoms present from those of pregnancy, so as not to be deceived by the often very accurate description which the fond imagination of the patient will trace.

In these cases of suspected pregnancy, *Nux vomica* or *Pulsatilla*, *Aconitum* or *Bryonia*, according to their several indications, will generally relieve the symptoms; and as these arise, most frequently, in women of more than ordinary susceptibility, a moderate dose of the middle or higher attenuations will be found to answer best. For this purpose one drop of the tincture at the 12th dilution may be added to a wineglassful of water, and one teaspoonful of this solution given at intervals of 6, 12, and 24 hours.

The commencement of the great "change or turn of life" is sometimes manifested by a febrile state of system, in which there is a combination of the vascular and nervous irritation. The patient is affected with headache, of a hammering, beating character, with roarings or whistlings in the ears; she is extremely sensitive to sound and light, has a quick pulse, and desires to sit away from her family for quiet; she dwells upon nervous apprehensions and anxieties, everything is a care to her, she is frequently weeping without cause, and fretful or peevish and irritable, or pre-occupied with desponding ideas about herself; there is vacillation of feelings and spirits, conjoined, perhaps, with dyspeptic symptoms. Constipation is often present; some hysterical symptoms may

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occur, and the menses may be too frequent and in excess. In this state, during the prevalence of the increased vascular action, *Aconite* is the best remedy; and in consequence of the extreme sensibility of the nervous system, all the medicines should be given at a medium or high attenuation; aggravations frequently occur after the medicine. Stimulants must be rigidly avoided, as delirium or mania would readily be induced.

After *Aconite* has subdued the inflammatory irritation of the heart and arteries, *Ignatia*, *Pulsatilla*, or *Sepia* will be found useful, the latter especially, if there is any reason for supposing the existence of disease of the womb. *Chamomilla* is also useful in the earlier stage, as well as *Belladonna*.

In those instances in which nervous irritability or cerebral derangement occurs at the cessation of the menses, the most soothing and kind treatment should be adopted, abstinence from stimulating beverages enjoined, plenty of exercise in the open air, and some homœopathic remedy prescribed corresponding to the symptoms of the individual. In nervous subjects, alternate doses of *Aconite* and *Coffea*, with an occasional dose of Ignatia and Pulsatilla, are the most serviceable; but of all medicines *Aconite* is the most soothing at the climacteric period, especially when the individual is robust and plethoric, or if there be any evidence of local or general increased action.

If there be congestion of the head or abdomen, with fulness, tension, and pressure internally, attended with lumbar and sacral pains, *Belladonna* is the best remedy, in some cases followed by *Hepar. sulph.*, and *Sulphur* when indicated.

If there be burning sensation in the head, bleeding at the nose, &c., *Crocus* should be given, the administration of *Carbo veg.* being subsequently adopted to complete the cure.

If there has been menorrhagia from congestion of the uterus, and great debility has resulted, which not unfrequently predisposes the patient to the development of Carcinoma, *China* should be given, followed by *Kreosotum*, or *Conium*, *Sepia*, and *Sulphur*.

If nervous faintness and exhaustion are present, a selection should be made, in conformity with the symptoms

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which occur, from amongst the subjoined medicines :—*Coffea, Valeriana, Veratr., Viola odor., Acon., Nitri ac., Sulphur,* and especially *Kali carb.* and *Moschus.*

If dyspeptic symptoms prevail, the administration of *Nux v.*, or *Puls.*, or *Bryon.*, will be beneficial.

The falling off of the hair, when caused by the frequent congestions of the head, is best met by a few doses of *Lycopodium.*

*Lachesis* is also one of the most serviceable medicines at the climacteric period of women; when general disturbance of the excito-motory nerves exists, especially when constipation is distinguished as a prominent attendant symptom.

*Cocculus* is of use in spasmodic attacks in the hypogastrium, whether of the uterus or ovarium, with bilious vomiting or nausea.

*Ruta* is also recommended for the pains in the sacrum and os coccygis.

## HYSTERIA.

Hysteria is one of those anomalous diseases which it is very difficult to describe; it assumes such varied forms, and simulates so many affections of the different organs of the body, as not unfrequently to deceive the practitioner by its close resemblance to them. This arises from one peculiar feature of the disease, consisting in a morbid sensibility of the terminal branches of the nerves, which depends upon some kind of irritation existing at their origin, the precise condition of which has hitherto escaped the researches of the pathologist. At one time it is distinguished as a single, distinct, unmistakeable paroxysm, or succession of paroxysms of a convulsive character; at another it has a local and limited action, and appears so unconnected with other general symptoms, that any one inexperienced in close observation fails to detect its relations. It is almost peculiar to the female sex, although a few instances of it have been met with in men of an extremely irritable and susceptible organisation. It is essentially a disorder of the nervous system, characterised by extreme mobility of the nervous fibre, which

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seems to exist in a state of vibration, giving rise to irregular muscular action, morbid sensibility of the extremities of the nerves of sensation, as well as those of sense. The ganglionic and cerebro-spinal nerves are all implicated in the disease, but chiefly the latter; and when this state exists, very slight exciting causes are adequate to the development of the whole series of morbid actions, whether the causes be emotional or otherwise.

The hysteric diathesis is characterised by general irritability, debility, and morbid sensibility to impressions, emotional and physical. Irritability has been described by Abernethy as "*little more than debility excited*," which it is easy to suppose would lead to vacillation and inconstancy of symptoms. Reflection on this proposition will be of great use in practice, and would have saved many of the mischievous consequences resulting from the use of the lancet.

The hysterical paroxysm is usually ushered in by a sensation of tightness, and distension in the abdomen, generally on the left side, which passes upwards like a ball, until by degrees it reaches the throat and impedes respiration, giving to the patient the idea of a globe or ball at the upper part of the œsophagus, obstructing the passage of the air, and producing sensations of choking and suffocation. The patient then sinks down, pale and exhausted, gasps and sobs, falls into a fit of crying or laughter, uttering occasional loud shricks, something like the crowing of a cock or the barking of a dog, indicating a spasm of the muscles of respiration, with loud eructations of wind; she has convulsive movements of the limbs and trunk, during which she throws herself forcibly into a variety of attitudes, is restrained with great difficulty, loses her consciousness, becomes extatic, or has violent contractions of some of the muscles; after a while she becomes gradually restored, lying often for a long time in a tranquil, feeble state, interrupted only by deeply-drawn sighs; and then she either soon reassumes her accustomed habits, or goes off into repeated paroxysms. Hiccough is also a frequent and painful symptom. The fit is generally followed by the discharge of a quantity of limpid urine. These paroxysms are sometimes very severe, and exhibit such a

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periodical tendency as so closely to resemble true epilepsy, that it is often very difficult to distinguish in the diagnosis between the one and the other. It is, however, very rare for patients in the hysteric fit to bite the tongue and foam at the mouth, although a state of cerebral congestion is not unfrequently met with in connection with it. In epilepsy those symptoms are very common, there is a vacant look, and the fits are followed by a deep sleep. In hysteria, moreover, a state of syncope occasionally occurs, which to all appearance is of an alarming nature. The heart beats feebly, the pulse is scarcely to be felt, the respiration is hardly perceptible, and a state of collapse takes place, in which life appears to be ebbing away. It is under these circumstances that persons have been laid out and supposed to be dead. Hysteria is in some degree associated with the uterine function, nevertheless some of the most aggravated instances have occurred, where there has been no irregularity of menstruation, and even after the decline of the function altogether. It is more frequently dependent upon a state of anæmia. One of the leading characteristics of hysteria is a morbid sensibility of the surface, which leads often to the belief, when circumscribed in its extent, that inflammation exists. In these cases, however, if the hand be approached gently and imperceptibly, there will be found toleration of firm pressure—if gradually applied,—although just before, perhaps, the patient had shrunk with alarm from the least contact.

It has been said that hysteria simulates the diseases of various organs; this applies more especially to the inflammatory and spasmodic conditions.

Dr. M. Hall, in his 'Memoirs on the Diseases and Derangements of the Nervous System,' has specified the different parts, which, from their dependence upon or immediate connection with the true spinal system of nerves, are liable to be secondarily affected in this multiform disease.

1. Those parts which are supplied with excito-motory filaments from the pneumo-gastric branch or its accessory, such as :—

*a*. The pharynx,—producing dysphagia; globus hystericus;

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*b*. The larynx,—producing the irritation of croup, with apparently imminent suffocation;

*c*. The bronchial tubes and lungs,—inducing dyspnœa and cough;

*d*. The cardia and stomach,—inducing hiccough, retching, vomiting, &c.

2. Those parts which are supplied from the posterior spinal nerves, such as:—

*a*. The general surface,—inducing spasms of the diaphragm, and of the intercostal and abdominal muscles;

*b*. The sphincters of the anus, cervix vesicæ, and cervix uteri;

*c*. The Fallopian tubes, uterus, &c;

*d*. The muscular system generally,—inducing trismus, tetanus, spasmodic contractions of the hands and feet, wry neck, &c.

Thus, according to Dr. M. Hall's explanatory table, a morbid condition of the incident nerves, produced by gastric, intestinal, or uterine irritation, will induce general hysteria, as well as other spasmodic diseases.

A morbid condition of the spinal marrow itself will produce convulsions, tetanus, trismus, &c.

A morbid condition of the reflex or motor nerves will produce spasms and contractions of the muscles, spasmodic tic, &c. "The rest relates to emotion, which is the greatest part of hysteria."

A state of anæmia, or bloodlessness of the brain and spinal cord, is therefore a condition favorable to the development of the disease in its most aggravated form; and any slight cause which operates to disturb the balance of the nervous system is capable of inducing an attack, in those who possess the hysterical diathesis:—such as a chill, exposure to wet or cold, which shall excite a catarrh, or an attack of bronchitis. Under these circumstances, when the system is so fully prepared for it, a *migratory* form of hysteria is not uncommon, and assumes a painful and aggravated character; a sudden development of the disease is produced, and it transfers its seat from one organ or set of organs to another, until it has spasmodically affected almost every muscle in the body, at

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one time paralysing the muscles of the throat and windpipe, at another producing rigid contraction of the extremities. When submitting this form of the disease to treatment, it is found that if one part be relieved, another soon becomes affected; until the constitutional irritability is removed by the slow process of improving nutrition and restoring the tone of the nervous system. For although it is absolutely necessary to apply the remedies most suitable to the particular symptoms of trismus, dysphagia, eclampsia, &c. &c., as they arise, still very little influence is exerted by such means over the general hysteric constitution, the local disorder being relieved without much impression being made upon the general health. It is therefore requisite so to arrange the administration of the remedies, that the permanent cure of the hysteric disease may not be lost sight of, the difficulty of which is greatly enhanced by the repeated attacks of the local spasms, which are induced by such trifling causes, emotional or physical, and which make it appear as though no advance was being effected in the eradicative and fundamental cure of the disease.

By gradually restoring the general health, improving the functions of sanguification and assimilation, and removing, as far as possible, all exciting causes of disorder, while the local symptoms are relieved as they arise, it will be found that the attacks will become shorter and more distant as the strength improves, and the normal condition, as to quantity and quality of the blood, becomes re-established.

A remarkable instance of the migratory form of hysteria was lately to be seen in the London Homœopathic Hospital. A young girl of twenty years of age, exhibiting the anæmic and chlorotic conditions of some months' standing, caught cold, and was received into the hospital suffering from pneumonia to a moderate extent. In two or three days this inflammatory attack was subdued; but the debility connected with it, superadded to her previous anæmic condition, so depressed her, that the debility was extreme, and her countenance ghastly. An explosion of hysteria then took place; there were spasmodic contractions of the muscles of the jaw, producing perfect trismus and dysphagia, which lasted many

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days at a time, eclamptic convulsions, rigid contractions of the arms and hands, first of one side, then of the other, which also endured many days at a time; excessive tenderness of the abdominal surface (simulating peritonitis), and of the uterine region; considerable distension of a portion of the colon, which, from its being thrown into a paralytic condition, allowed the air within to distend it in the form of a large globular body, which was excessively sensitive to the touch. At another time a violent, harsh, convulsive cough came on, and lasted for a day or two, then trismus returned, the hands being clenched, and the following symptoms also occurred:—loss of vision; opisthotonos; and paralytic condition of the rectum, which allowed of the accumulation of the fæces to an enormous extent, so that artificial aid was required to remove them. This was so effectually relieved, when it occurred a second time, by *Veratrum*, as to produce a perfectly natural action. During the persistence, however, of the inertia recti, the spasmodic attacks kept off; but when evacuations occurred, they returned immediately. The remedies applied (she was a patient of Dr. Quin's) produced considerable relief to the various spasmodic symptoms as they occurred, and in some instances operated with magical effect, but still the migratory character of the disease continued for a long time, shifting its site continually; and when she was beginning to walk about the ward, she was suddenly prostrated by a renewed attack. Nevertheless she was gradually being restored by a well-directed regimen and appropriate medicines; although, until her health and strength should be sufficiently established to resist the operation of trifling disturbing causes, such attacks as have been described would reasonably have been expected to recur, from time to time, as circumstances occurred calculated to operate upon the constitutional susceptibility. Under the use of *Bell.*, *Verat.*, *Cupr.*, *Puls.*, *Nux v.*, *Ferr.*, *Coff.*, *Stramon.*, *Hyosc.*, *Ignat.*, and a few other intercurrent remedies, the intervals between the fits lengthened; and at the same time that the attacks became less frequent, she gained flesh by degrees until she finally recovered and left the hospital.

Hysteria is often imitative in its nature and origin, for it

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has happened, when other females have been in the same room or ward with a person who laboured under the disease in an intense form, that the recurrence of the fits has so agitated their nervous systems, already rendered susceptible by illness, as to induce attacks of hysteric convulsion, in one after another successively, until some remedy was adopted which operated powerfully upon their minds, through fear. Boerhaave, as related by Dr. Quin, in his Lecture upon this subject, was once troubled by a number of patients in the hospital in this way. At length, finding that as management, medical or otherwise, had not the effect of putting a stop to it, he directed some stoves to be brought into the ward, and a number of irons to be made red hot. He then, with the utmost gravity, stated that as all other remedies had failed, there was only one which, although extremely painful, was always effectual, and that was the application of the red hot iron to the arm at the commencement of the attack, leaving directions for its immediate application to the first case that should occur. This had the desired effect, and the infection ceased.

Hysteria may occur during the course of other diseases; or in the stage of convalescence upon their subsidence; or during pregnancy, when it will occasionally lead to premature delivery, or abortion; or it may occur during the progress, or at the termination of natural labour.

"Sometimes the paroxysms set in without any known cause; in other instances they are excited by emotion, cold, or dietetic transgressions; sometimes they are not very severe, and recur every week or month; as the patient grows older, the paroxysms become more frequent and more intense;" when the hysteria occurs in persons of a full habit, they generally look healthy and well.

"The mental phenomena are very characteristic. Hysteric females are capricious, their emotions and feelings are very changeable; from deep grief, they pass over to the liveliest mood; they look for pity and sympathising attention; they often affect to be sick in various ways; their eyes are humid, and half closed; their nerves sensitive, and their idiosyncrasies more strikingly developed."

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*Treatment.*—When the hysteric fit occurs, the patient is to be laid in an easy posture, a free access of cool air is to be promoted, the clothes are to be loosened, so as to remove all girths from around the body and throat, the face is to be sprinkled with cold water, or the head may be held over the side of the bed with a pan beneath, and the water poured over it from a height.

The medical treatment of hysteria must necessarily vary as infinitely as do the forms assumed by the disease. The phenomena exhibited by this malady are so evanescent, that it seems impossible positively to indicate certain remedies as appropriate for them. Nevertheless the nervous symptoms and the physical sufferings of the patient will point to some of the following.

### FOR THE HYSTERIC FIT.

*Nux moschata.*—This medicine corresponds with paroxysms of spasm and debility; or is appropriate when the following conditions occur:—fitful mood; sudden change from "grave to gay, from lively to serene;" excessive tendency to laughter; vertigo, with reeling; gradual rigidity and insensibility; enormous distension after meals, with nervous irritation of the intestinal canal; retarded catamenia, preceded by pain in the small of the back, as if a transverse piece of wood would be pressed out, with headache, languor, cardialgia, water-brash, pain in the liver; menstrual blood thick and dark; vicarious leucorrhœa in place of the menses; great languor on the least exertion.

*Belladonna* should be given in the congestive form, or when during the fit, the face is red and turgid, the veins of the neck are swollen, &c., with other symptoms of determination of blood to the head, and spasms.

*Valeriana* is appropriate when the following symptoms prevail:—tremulousness, fearfulness, palpitation of the heart; when the senses are morbidly affected, are too acute, and appreciate objects wrongly. A tickling deep in the throat with cough, accumulation of saliva, disposition to vomit, a feeling of something warm rising from the epigastric region, and arresting the breathing; sensation as if a thread were hanging down the pharynx.

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*Viola odorata* has been recommended, and is indicated in cases in which the following symptoms and conditions prevail: much weeping, without knowing why, nervousness, constant distress in the chest, painful dyspnœa, laboured and painful breathing, with anxiety, and palpitation. It may also be useful in the hysterical affection of the knee and wrist which is sometimes met with.

*Secale cornutum* is applicable to the treatment of those spasmodic convulsions which are dependent upon derangements of the uterine function; the convulsions are attended with changeful conditions of the mind and spirits, alternately laughing and crying; at times, great depression of spirits; despondency inducing thoughts of self-destruction; spasms of the bladder; retention of the urine, with violent efforts to urinate, &c.

*Aurum* is indicated when hysterical spasms occur, sometimes with tears and laughter; when morbid sensibility to pain, or religious melancholy, hypochondriacal humour, despair of oneself, oppression at the chest, almost to suffocation &c., are the predominating features; a fine eruption around the lips or the face and forehead, is also an indication for this remedy.

*Pulsatilla* is suitable to females of a fearful disposition, or if there be silent melancholy; when the nervous paroxysms are connected with disordered menstruation, and there is a disposition to be easily moved to laughter and tears, alternately, with general nervous sensibility.

*Moschus* is suitable in that form of hysteria attended with syncope, when there is diminished irritability of the muscular and vascular systems; also when convulsions of the extremities are present; or spasmodic affections of the pneumogastric nerve; general, indefinite pain of the whole body; nymphomania, great desire for brandy, or beer; or when there is a general sensation of coldness.

*Conium* is indicated by weak conditions of the body accompanied by excessive irritability, spasms, trembling of the limbs; hysteric fit with chilliness; menstrual derangements, — suppression; induration of the os uteri; leucorrhœa of an acrid nature with uterine colic; hysteric asthma; and when



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the patient is easily moved to tears, with anxiousness, headache, pulsation of the carotids, globus hystericus.

*Cocculus* has been given with success, by Hartmann, when the following symptoms and conditions prevailed: frequent, irritable cough; choking constriction in the upper part of the fauces, with dyspnœa and irritation as if cough would set in; retarded menses, which afterwards appear with abdominal spasms, anguish, oppressed breathing, spasms in the chest, nausea even unto fainting, and jactitation of the limbs. A sense of dropping or tickling in the ear, or as the rushing of water, or the amphoric sound as produced by a shell placed against the ear, are also indications for its use.

*Ignatia* may be given with success during the fits of hysteria, occurring after previous anxiety, with shrieking for help and suffocative constriction of the throat, difficult deglutition, eructation like hiccough, spasms of the upper and lower limbs, with yawning and stretching, and termination of the fits with a deep sigh; dysmenorrhœa and scanty, delaying menses; globus hystericus; alternations of laughter and tears, &c.

### PREDISPOSITION TO HYSTERIC FITS—HYSTERIC CONSTITUTION.

Amongst the medicines which are more adapted to the general hysteric disease, are the following:—

*Natrum mur.*—"The idiosyncrasies of patients," says Dr. Hartmann, "sometimes reveal the means by the employment of which the disease can be cured; I have frequently prescribed *Natr. mur.* with success, when the peculiar taste of the patient for salt was the principal curative indication." The symptoms to which it seems most applicable are:—"frequent recurrence of the paroxysms in the day time; their speedy disappearance after the occurrence of sweat; sensation, as of a plug in the throat during and between the acts of deglutition; cadaverous paleness of the face, and general debility during the paroxysms; faintings; drawing sensation from the left shoulder to the head, with pressing in the temples as if the head would burst; pain in the brain, as if sore and bruised; constant nausea, desire to lie down,

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and chilliness with heat of the face; sensation, in different parts of the body, as if they had gone to sleep; vivid, fanciful dreams during a light sleep; somnambulistic rising and walking in the room; sadness, grief, whining mood, melancholy, irresolution, great absence of mind, sudden disappearance of the headache with nausea; clavus in the left side of the head; the menses delay, and decrease more and more."

*Calcarea carb.*—when the hysteria approaches to epilepsy, and when the case is characterised by excess or too frequent recurrence of the menses, with anæmiated countenance, great nausea and loathing; faintings occasionally, constrictive spasm of the œsophagus, &c.

*Asafætida* corresponds more particularly with cases in which there is a morbid condition of the abdominal nerves, characterised by the globus hystericus; burning stitchings in the limbs at different points; restless, unrefreshing sleep, with frequent waking; nausea and fulness at the epigastrium, &c.

*Sepia.*—In persons of a sad, desponding disposition, easily excited, with sensation as of a lump in the throat; involuntary fits of laughter and weeping; sense of coldness between the shoulders, followed by coldness over the whole body, suffocative spasm in the chest for several minutes, with clonic convulsions of the right side, and twitching of the right leg and arm when held; tremor of the lower extremities; the nightly sleep is disturbed by attacks of anxiety; sudden fainting, with profuse sweats and undisturbed consciousness, without, however, being able to speak or stir, &c.

*Magnesia muriatica* is indicated when the patient readily takes cold, has frequent attacks of pain, as if bruised, throughout the whole body, fainting fits at table, with anxiety, nausea, pale face, photopsia, (green and red colours,) trembling of the whole body, relieved by eructations, uterine spasms, pain in the small of the back and leucorrhœa: these last symptoms become more violent as the menses diminish; they appear periodically, and the spasms finally extend down the thighs and upwards, involving the whole abdomen, causing a painful hardness of that part, &c.

*Nitri acidum.*—"Drawing sensation in the back, every

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day once or twice, changing to a griping in the sides, whence it passes along under the ribs to the pit of the stomach, where the patient experiences a twisting sensation, and feels relieved after eructations. This attack is most violent towards evening, particularly when the weather is changeable; the patient constantly complains of a feeling of illness and fainting, slight tremor through the whole body; sad, whining, and melancholy mood. The globus hystericus, the several symptoms of abdominal hysteria, menstrual irregularities, spasms in the chest, &c. should likewise be present."

The foregoing remedies for the hysteric constitution or disease, are most applicable when the individual and peculiar symptoms detailed under the head of each, respectively, are present, in addition to the usual characteristic symptoms of the remedy. The local forms of hysteria are referable to the different organs affected by the hysteric disease, which are characterised by morbid sensibility and irritability, with morbid actions in correlative organs and functions.

### CEPHALALGIA HYSTERICA (HYSTERIC HEADACHE).

Headache, the pain usually occupying a part of the forehead, or one half of the head, or the top, as a violent, burning sensation, is a very common form of irregular hysteria. Sometimes the pain is periodical, and is relieved by a fit of vomiting.

*Aurum* is useful in cases of this kind when further characterized by dejection of spirits, disposition to suicide, pain over the forehead, tumult in the head, roaring in the ears, with extreme sensibility to every kind of pain, &c.

*Coffea* is more especially indicated when the hysteric sensitiveness co-exists with general excitability, and the pain is as if a nail were driven into the side of the head. Menses in excess.

*Ignatia* is required for paroxysmal headache, as though a nail were pressed into the brain; frequent change of feelings; chagrin, &c.

*Platina* is appropriate for the treatment of violent, crampy pain in the anterior part of the head, at the root of nose,

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with heat and redness of the face, self-exalting and contemptuous feelings, or depression of spirits, whining, and fearfulness; generally the menses in excess.

*Opium* is more especially indicated by stertorous breathing; open mouth; distorted, open eyes; sopor.

*Antimonium cr.* is useful when there is irresistible drowsiness in the day time and evening.

*Valeriana* is more especially indicated if the pain consists of a sensation of pressure over the orbits, alternating with sticking pains.

*Belladonna* is appropriate in cases in which there is a periodical headache of a nervous character.

*Mercurius* is usefully administered for a tight, constrictive pain across the forehead, worse of an evening.

*Phosphorus* is indicated by nervous morning headaches, sometimes preceded by evening nausea.

*Hepar sulph.* is useful in megrim of females—a boring headache in the root of the nose—when a pain sets in at night, when moving the eyes, as if the forehead would be torn out.

*China* is indicated by pressive pain, sensitiveness to noise, sleeplessness, and hunger.

*Sulphur* is more especially useful when the headache is periodical, returning every eight days, of an aching, stupefying character.

*Chamomilla, Cicuta, Colocynth, Nux v., Puls., Sepia, Kali carb.*, are also, at times, of service in cases of hemicrania.

### HYSTERICAL AFFECTION OF THE SPINAL MARROW—

Is characterised by extreme tenderness of one or more points along the vertebral column, with morbid sensibility of the cutaneous surface, &c. If the pain should be attended by spasmodic contractions of the muscles, cramps in the calves, &c., *Ipecac., Cuprum,* or *Secale* may be useful.

If the pain should be attended with paralytic conditions, neuralgic affections of the thoracic and intercostal nerves, or of the nerves of the articulations, &c., *Dulcamara, Rhus tox., Plumb., Stannum, Squilla,* or *Puls., Iyn., Arsen., Mosch., Caust.*, and *Cicuta.*

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*Hysteria laryngea.*—This variety chiefly requires *Acon., Spong., Hepar.* In cases in which the voice is low and lisping, with occasional want of voice, *Bellad., Phosph., Plat., Ignat., Angust., Spong., Puls., Ant. cr.* may be enumerated as the medicines from which an appropriate selection shall be made.

*Hysteria dysphagia*—principally requires *Ignat., Bellad., Hyoscyam.*, &c.

*Hysteria pulmonalis*—(including hysteric asthma, palpitation, syncope, &c.) principally calls for *Nux v., Ars., Sulph., Lobelia, Ipec., Moschus, Sambuc., Acon., Bell., Cham., Coff., Ign., Puls., Stram., Con., Cup., Lach., Phos., Stann., Sulph.*

If there be a want of animal heat, with whining disposition, *Puls.* or *Veratr.*

*Hysteria vesicalis*—principally requires a selection from:—*Canth., Merc., Hepar, Bell., China, Mezer., Coloc., Zincum,* if there be burning pains, and from:—*Zincum, Lyc., Canth., Dulc., Sulph. ac.,* if there be stitching pains in the region of the kidneys.

*Hysteria muscularis.*—When the convulsions bear a resemblance to Tetanus, and affect the muscular system, producing symptoms of lock-jaw, or other forms of tetanic rigidity, contractions of single members, &c., the most suitable remedies to select from are:—*Cuprum, Aur., Bry., Acon., Angust., Bell., Hyoscy., Ign., Lach., Laur., N. vom., Plumb., Rhus, Sec., Stramon., Verat.,* or *Camph., Cham., Ipec., Mosch., Op., Plat., Caust., Cocc., Cic., &c.*

## HYSTERIC STATES OF THE MIND.

Sometimes the patients are affected with peculiar modes of speech during the fits, which may distinguish a remedy from amongst the following:—

For loquacity, *Ars., Bell., Hepar s.*

For a difficulty of speech, either from want of words or voice, *Cannabis, Bell., Phosph.*

For a feeble, imperceptible, heavy, stuttering speech, *Secale.*

For difficulty of speech, with jerks of the head and arms when uttering words, *Cicuta virosa, Hyoscy.*

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A melancholy mood in hysteric females requires, according to the characteristic symptoms, either *Veratr.*, *Hyosc.*, *Stram.*, *Bell.*, *Helleb.*, *Anacard.*, *Opium*, *Aur.*, or *Plat.*

Nymphomania, which sometimes occurs in this anomalous disorder of perverted actions, may be relieved by *Platina*, *Bell.*, *Chin.*, *Veratr.*, *Zinc.*, or *Gratiola*, *Con.*, *Anac.*, *Staph.*, *Aur.*, *Thuja*, *Merc.*, *Ign.*, *Nux v.*, *Hyosc.*, *&c.*

In connection with this part of the subject, a form of mania may be noticed, dependent, frequently, upon a disordered condition of the menses; but as it is not always associated with *suppression*, it may be described under the head of—

## HYSTERICAL MANIA.

Perhaps the more proper term for this peculiar derangement of the nervous system would be *menstrual* mania; but inasmuch as hysteria seldom exists with a normal state of menstruation, it partakes somewhat of its character in this, as well as in the presence of other hysterical symptoms. I have found it to occur in the single and in the married: when in the latter, generally in the absence of child-bearing; when in the former, connected with a peculiar state of mental constitution. Its characteristic features are that it is seldom permanent, but is apt to recur under similar conditions of the bodily organs. Usually there is irregular, scanty, or else suppressed menstruation; but this may be too frequent and in excess. The mind is low and desponding, with a disposition to suicide or weeping; in some cases the humour is taciturn, or in other instances loquacious. The patient imagines people are talking loud into her ear, over her shoulder; she looks sullen and suspicious, and flushed; and these symptoms are associated with headache and fits of syncope; the pulse is quick and the feet are usually cold; she has perhaps been getting corpulent; is troubled with flatulence, to a great extent, and globus hystericus; or complains of heavy weight in the loins, and of constipation. Stimulants aggravate the symptoms. The remedies most applicable to the treatment of cases of this nature are:—*Aconit.*, *Bell.*, *Aurum*, *Nux v.*, *Puls.*, *Hyosc.*, *Ign.*, *Lach.*, *&c.*

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# HYSTERALGIA; OR, IRRITABLE UTERUS.

Hysteralgia consists in a morbidly irritable state of the uterus, which is painful and tender to the touch,—either at the os and cervix, or, when the body of the organ is pressed at any part of its circumference,—independently of inflammation. It is usually unaccompanied by any functional or structural change; but the augmented sensibility, which is its characteristic feature, has been supposed, of late, occasionally to result in induration and ulceration of the cervix, although this has not been proved by a conclusive assemblage of facts. It is an extremely obstinate affection, and will exist for many years, the patient being rendered nervous, thin, and irritable, abounding in complaints, and, more frequently than not, confined to the sofa, and incapable of any exertion without an aggravation of suffering. Perhaps the most proper nomenclature of the disease would be, that of local Hysteria, or Neuralgia of the womb; but it is not always attended with general hysterical phenomena.

The symptoms which distinguish the disease are:—pain, referrible to the pelvis, with aching, dragging sensations in the back; or a tight feeling in the hypogastrium, from hip to hip, as of a cord stretched across the pelvis at the brim, extending to the groins, at times down the thighs, and often to the foot on one side. The pelvic and sacral pain is more or less constant, though worse during the monthly period; in simple Dysmenorrhœa, however, it is only urgent at that time. The pain is aggravated by movement, and relieved by the recumbent posture, but is never altogether absent, and occurs in paroxysms of more or less severity. Sitting is sometimes painful; and the vibration, caused by riding in a carriage over a rough road, or by any other jar, occasions great suffering, which lasts for hours. The bowels are sometimes affected by it, being irritable, with frequent motions, especially on first rising of a morning; or, if constipated, pain is felt on evacuation taking place; spasms, apparently in the terminal bowel, but, in reality, in the womb,

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are apt to occur immediately after a motion; and there is frequent desire to pass water, which is sometimes prevented by spasmodic stricture at the neck of the bladder. There is usually some prolapse of the organ; and sometimes the os uteri—rather tumid, short, and expanded,—is found to rest against the recto-vaginal septum, or even upon the perinæum, which will account for much of the irritability,—especially of that connected with the terminal bowel, or of that which results from vibratory movement.

The os and cervix uteri are found free from morbid vascularity, the cervical canal being generally normal, and not admitting the uterine sound through the coarctation at the ostium internum into the cavity of the womb; a glairy mucus exudes from the uterine orifice,—which is simply an excess of the ordinary secretion from the cavity of the womb,—and leucorrhœa may be present. Pressure against the walls of the uterus gives much pain, at one part, perhaps, more than at another. The pain, which is induced by an examination, often lasts for hours. The vaginal parietes are sometimes inflamed and tender. In addition to these local symptoms, those of indigestion supervene,—the appetite fails, and manifestations, such as the following, ensue: nausea, retching, distracting nervous headache, thirst, flatulent distension, irregular bowels, irritability of temper, great depression of spirits, and restless sleep, with vivid, fanciful, or horrid dreams. Thus the patient passes her time in almost constant pain, having occasional febrile symptoms superadded.

*Causes.*—Over exertion during the menstrual period, either from walking, dancing, or standing too long—moving about prematurely after delivery or miscarriage—violent concussion of the body, or the vibration caused by riding over a roughly paved road—the application of cold to the uterine region, or any sudden arrest of the menstrual functions, etc.

These causes appear to be capable of inducing the affection in very sensitive individuals, particularly in those who are subject to Dysmenorrhœa; and this complaint may influence the pregnant state, during the earlier months of which, great suffering from sickness and faintings may ensue

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from contact, and from the motion of the child, which causes sharp, darting pains, which are very distressing.

*Prognosis.*—The oft-observed fact, that this affection may last for years, without any appearance of organic disease, affords the best ground for anticipating its favourable termination sooner or later. It is evidently a deranged condition of the nerves which supply the uterus, and can scarcely be called either a functional, or a structural disease of the organ itself; although, for convenience, it must be ranked amongst the former.

Relapses are common after a period of presumed recovery, and may at any time be occasioned by imprudent, or excessive exercise. It occurs amongst single, as well as amongst married women, and generally ceases at the decline of the catamenia. There is likewise a form of Hysteralgia which occurs after labour, and which depends upon some sudden malposition of the uterus taking place after the expulsion of the placenta, and which occasions spasm of the organ, and exhibits features resembling those which characterise metritis; but the absence of inflammation soon becomes evident, and establishes the distinction. The same state may also occur during the earlier months of pregnancy, in consequence of exposure to some of the exciting causes. It is marked by severe pain in the lower part of the back and abdomen, sickness, faintness, frequent and feeble pulse, and is sometimes accompanied by discharges, or succeeded by the expulsion of a coagulum, but there is seldom shivering. If there is any displacement of the organ, the first thing to be done is, of course, to replace it *in situ proprio*.

*Treatment.*—When the state above described, as in connection with pregnancy, occurs, *Arnic.*, *Cham.*, *Nux v.*, *Puls.*, and *Cocc.*, are the remedies which will be found the most serviceable.

For the general treatment of the disease, independently of that condition, recourse may be had to some of the following:—*Cocc.*, *Con.*, *Ignat.*, *Magn. m.*, or, *Bell.*, *Bry.*, *Cham.*, *Caust.*, *Hyosc.*, *Natr. m.*, *Nux v.*, *Nux mos.*, *Plat.*, *Sep.*, *Stann.*

The reader may also refer to the remedies mentioned

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under the head of *Dysmenorrhœa*, with which it is so often associated.

In some cases great relief has been obtained from the use of a small, box-wood, pawn-shaped pessary, with a cup-shaped top to receive the os uteri. The support which it affords to the generally prolapsed organ, takes off the pressure from the rectum, and removes the dragging pain in the back.

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# PART II.

## PREGNANCY, PARTURITION, AND THE PUERPERAL STATE.

Pregnancy, a function indispensable for the preservation of the species, is, in the uncivilised state of the human race,[1] no doubt, free from most of the maladies of which we shall have to speak. In the unfettered exercise of the bodily organs, without the restraint of habits and dress which civilised society entails upon its members, the various functions of the body pursue a tolerably harmonious course, and derangements which, in the one case, demand the watchful care of the physician, are, in the other, rectified by the inherent vigour of the vital energy alone, the tendency of whose actions is conservative of health.

In the latter instance, pregnancy is a natural function, whose course interferes little with the general health; but in the former the contrary might be supposed to be the case, since we find it more or less resembling a disease,—the ordinary functions of the body becoming morbidly affected and

[1] In proportion as the method of living, or, to use the common expression, as the *habits* approximate more closely to the aboriginal conditions, or the state of nature, the function of pregnancy, like those, perhaps also, of digestion, exhibits more distinctly than any others, by comparison, the mischiefs which are incidental to artificial methods of living. This distinction is already strikingly evinced in the comparison between the pregnant female amongst the peasantry, and the same conditions of the sex under the more artificial circumstances of life. Amongst the rustic population, even of highly civilised countries, it is no uncommon occurrence for women to pass almost immediately from the vigorous, and, apparently, easy exercise of severe manual toil, to a regular, safe, and speedy delivery; whilst it is no more uncommon for females, under other conditions, to be ailing (if not worse) during the greater portion or the entire course of the period of utero-gestation.

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disturbed, in consequence of the changes which take place during the progress of utero-gestation. Whether this arises from the amount of innervation or nervous influence, which is directed to the uterus at this time, in correspondence with the recent development of that organ, for the purpose of sustaining the vitality of the ovum, and which deprives the other parts of the animal economy of the normal supply which is requisite for the perfect exercise of their functions,—or whether it depends upon a general excitation of the nervous system produced by those changes, we do find that, in weak and delicate individuals, the power of resistance to morbid impressions, and of adaptation to adverse influences, is impaired, whilst, in many persons of great nervous energy, or in whom the activity of the nervous function is vigorous, there is an increase of health during the same period.

The presence of a newly awakened but natural process, appears, in this case, to act upon the periphery of the nerves in a morbid constitution, precisely in the same manner in which a morbid process would act upon the sentient extremities of the nerves in a healthy organism. It produces functional derangements in remote organs, and interferes with the ordinary condition of health. It is not surprising, therefore, that any chronic disease which existed prior to the occurrence of pregnancy should be aggravated during its progress.

It becomes, then, the duty of the physician to lay down such rules of management as shall tend to diminish these evils, and thereby to add not only to the comfort of the mother during pregnancy, but materially to aid the healthy and vigorous development of the offspring.

When it is considered how great an influence the moral and physical temperament of the mother exercises upon the organisation of the child:—how passing events, if crowding with intensity upon the mind of the one, have been followed by kindred impressions, developed in the evolving organisation of the other:—how the growth of the new being is impaired, interrupted, or arrested by whatever violently impairs, interrupts, or arrests the elimination of nervous fluid in the parent:—how hereditary disease often searches every

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atom and fibril of the minute being, whose simple elements have just received the first impulse of vitality:—how morbid affections, or morbid habits, occurring during the period of utero-gestation, often become attached and convey their characteristic impression to the fœtal organs, as is witnessed in the convulsions to which those children are liable whose parents have been addicted to stimulating drinks, in the inanity which frequently follows mental perturbations,—the syphilitic and scrofulous taint,—and the smallpox, which attacks the infant in the womb:—when, moreover, we observe how often malformations and deformities of the fœtus are connected with certain mental shocks, which have been experienced by the mother, at some early period of her pregnancy, and which were at the time associated with special physical sensations, such as a constriction of the cutaneous surface, commonly called *goose-flesh*, and a feeling of horror or disgust at the object which created the impression,—it demands the utmost caution on the part of the mother to avoid all exciting emotions, and all disgusting objects, as much as possible, and to adopt every means, by frequent and regular exercise, in the open air, of invigorating the system, and of thus rendering it less liable to be affected by currents of feeling. For although the relation between cause and effect, in these instances, cannot be proved by positive demonstration, the coincidences are sufficiently frequent and clear to arrest our attention, and to call for continued observation of correlative facts. In this, as in many other instances, the popular belief is, probably, not far from the truth,—that there is a connection between powerful mental impresssions produced during pregnancy, and the interruptions of fœtal development, which are observed at birth.

These are results or consequences of what we may term involuntary causes, but there are other effects which may be less prominent,—being certainly not so alarming,—although they are scarcely less important to the moral development of the being which is destined to be a source either of comfort or of anxiety to the parent. They are such as depend upon the due and vigorous control of the Will.

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The influence of a watchful, determined, and elevated exercise of the Will, on the part of the mother, is potent to the accomplishment of more benefit than is usually supposed.

The bodily organs are more or less affected by the mode in which they are acted upon, by means of the aliment which feeds the circulation. Habits of living may so modify their conditions as to create permanent alterations in their sensibility, tendency to disease, or actual organic structure; and the extent to which these structural changes may become permanent cannot be foretold; but, for aught we know, the first serious impression which thus occurs in the economy of an individual through the careless persistence in injurious habits, may be the first impulse to the formation of hereditary disease in one or more particular organs, which, receiving a renewal of the same exciting cause, in each successive generation, ultimately becomes indelibly fixed, and assumes a constitutional and permanent character.

So is it with the mental faculties;—what the morbid influence of unwholesome or too stimulating aliment is to the body, the repeated excitement of the passions is to the mind.

Every one knows that, by a continual yielding to the slightest impulses of feeling,—as of grief, joy, love, hatred, avarice, ambition, anger, &c.,—the power of resistance is diminished, the mastery of the Will is impaired, and the habit more firmly established; the emotions, as they become less transient, are more fixed, and form part of the characteristics of the individual.

The molecular change, which silently goes on in the organisation of the brain under these circumstances, it is true, cannot be traced; but since we find insanity, which is a more complete and decided subversion of the mental faculties, to be hereditary, is it not probable that the gradual, though at first, imperceptible operation of emotions or passions uncontrolled by the exercise of volition, may be the first link in that mysterious chain of sequences, which eventuates in hereditary disease?

Habits, or trains of thought, are the silent streams which supply the nourishment either of good or evil to the mental

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faculties, and whose perpetual tide modifies and arranges the permanent characteristics, in a manner analogous to that in which the elementary constituents of the food, circulating in the blood, influence the bodily organs, and produce a temporary or permanent bias. Just as, in early life, the habit of regulating the emotions and sentiments determines the future character—so, in after life, does the same discipline exercise its influence over the character of the offspring. The irritable nerve, that frets at every emotion or contradiction, becomes, in time, permanently deranged; and thus the simplest infirmities of the mind, equally with those of the body, may, at first, be merely incidental and temporary; or, they may become periodical or recurrent, and at last constitutional and permanent. Who can say at what precise stage these may lapse into insanity, or become constitutionally impressed upon the organisation?—For as it has been so beautifully expressed by Abercrombie:—"The first volition by which the mind consciously wanders from truth, or the moral feelings go astray from virtue, may impart a morbid influence which shall perpetuate itself, and gain strength in future volitions, until the result shall be to poison the whole intellectual and moral systems."

Such permanent influences cannot fail to be revived and perpetuated in the character of the offspring. When a woman finds, during pregnancy, that any morbid feelings, to which she was liable, become exaggerated—that her mind becomes unstable or fickle—that trifles disturb her—and that she is irritable and easily vexed, her sensations being morbidly affected;—that she is oppressed with care, without any additional causes of grief or anxiety—that her senses are unnaturally acute—her limbs beset with langour and malaise—and that there is a general disposition to yield to self-indulgence, which is, perhaps, augmented by the ordinary sympathies and cares of those about her;—*then* it is her duty to reflect calmly upon her condition—to examine her feelings—to seek a higher consolation, and to fortify herself by the consideration, that the present is but a temporary condition, and, by arousing her moral energies, to provide that her will shall control every symptom of irritability or annoyance

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which may, from time to time, disturb her. By this effort she will acquire that mastery over herself, which will not only give peace and comfort to her household, but will indelibly fix its impress in the nervous organisation of her offspring.

## HYGIENIC RULES TO BE OBSERVED DURING PREGNANCY.

From the earliest period at which a woman may have reasonable grounds for believing herself to be pregnant, either in the presence of such symptoms as indicate pregnancy, or in the suspension of such other symptoms as are usually manifested from time to time, in the absence of that condition, she ought to divest herself of every part of her dress which exerts any compression upon the abdomen, and should exchange the usual firm, resisting stays, for others made with elastic webbing, with a thin yielding busk, and whalebone merely at the back. The evils which may result, both to the mother and child, from the tightening of the waist during pregnancy, are incalculable; and amongst such consequences the following may be enumerated:—miscarriage, diseases of the womb, heart, lungs, and brain; varicose veins; false positions, which render the confinement afterwards so dangerous; hydrocephalus of the infant, &c. All these derangements may be produced by an interference with the free circulation of the blood of the *vena portæ*, and of the large arterial and venous trunks of the abdomen, by the habitual compression of the ordinary description of stays. For the same reasons, the patient should wear easy, loose clothing, which in no-wise restrains the expansive movements of the abdomen, and which, moreover, is adapted to the season of the year.

The necessity of furnishing subsistence to the new life which is being developed in the womb, demands, on the part of the mother, a substantial diet, which is nourishing, and easy of digestion; since, owing to the sympathies which exist between the stomach and the uterus, the pressure and



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restraint which the digestive organs experience, by the vast increase of volume acquired by the womb, alter the relative position of these organs and impair their power, whereby digestion is often rendered slow and painful. Boiled or roasted meats, farinaceous vegetables, and the fruits of the season, perfectly ripe, in proper quantities, will constitute the best aliments, and pure water the best drink. Spices, wine, and above all, coffee, green, and sometimes even black, tea, must be rigorously proscribed. The nervous sensibility is so exalted in pregnant women, that these substances are even more injurious in that state, than under ordinary circumstances.

It is well to guard against the allowance of unwholesome articles of diet to women so situated, under the impression that their peculiar cravings, or longings, should be satisfied. On the other hand, it is better not to refuse things which are longed for, provided they be not directly hurtful to the mother or child.

Sufficient exercise in the open air is also very necessary during pregnancy; and walking (short of great fatigue) is the best. It contributes to strengthen the constitution, to preserve health, and tends very much more towards an easy labour, than the baths sometimes prescribed.

Baths should only be had recourse to for the cleanliness and comfort of the skin; but when too prolonged, or repeated too often, they induce debility, and are, consequently, hurtful to pregnant women.

It would be an offence to the intelligence and to the humanity of my readers, were I to adduce reasons against the bloodlettings heretofore recommended during the middle period of pregnancy. To bleed a woman who is pregnant is a double sin, since it is often productive of injurious consequences both to the mother and to the child.

Pregnancy operates in a sensible manner upon the moral temperament of a woman, who becomes, in consequence, very susceptible of impressions; the imagination is more vivid; and she is more subject to alarm. It is important, therefore, that she should avoid all violent emotion, as well of pleasure as of pain; that she should repress inordinate curiosity,—often

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so aggravated during this state,—especially when bearing upon subjects which may make too vivid an impression, such as the exhibition of wild animals, of feats of strength, &c., since they may be productive of as much injury to the mother as to the infant. For the same reason she should be guarded from the sight of monstrous objects, and serious wounds, as well as from the relation of terrible or alarming events.

Observation of the laws of nature points to the negative in respect of the propriety of connubial intercourse during utero-gestation; physiology also supports the opinion, and experience has demonstrated, that infractions of this rule are often followed by grave accidents, such as hæmorrhages and miscarriages; the contrary is, however, observed daily. We can only reply that wise nature is stronger to preserve than our passions to destroy; and the counsel is none the less essential which enjoins great caution, especially when the woman is of a highly nervous and susceptible temperament, and is subject to leucorrhœa, or to menstruation which is profuse, too frequent, or too prolonged, or when there is a tendency to miscarriage.

## DISORDERS OF PREGNANCY.

The extensive sympathetic relations which exist between the uterus and the other parts of the animal economy, suscitate the various disorders which occur from the first moment of pregnancy up to the period of delivery, and which are dependent upon that state. These effects vary, both in degree and in the nature and combination of the symptoms, according to the constitution of the woman and the natural or acquired irritability and sensibility of different organs. In a few cases, a salutary change is produced on the whole system, so that the person enjoys better health during pregnancy than at other times. But, in most instances, troublesome or inconvenient symptoms are excited, which are called the disorders of pregnancy; and which, in some women, proceed so far as not only to deprive them of all

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enjoyment and comfort, but even to produce considerable fear for their safety.

The uterus, which was almost a passive organ, performing a simple periodical function, to assist in preserving the general health and its own powers, acquires, after conception, an entirely new life; and such a development in all its tissues, as well as in its vital action, that it becomes the centre of most important operations and sympathies, and draws, as it were, the whole economy within its sphere. Nevertheless, in the normal state, the whole of that immense revolution in the female organism ought to be accomplished without any troubles, and without entailing a necessity for artificial and remedial interference. It too often happens, however, that this change of condition in the uterus is not effected without very severe sufferings in the organ itself, or in other organs or systems which possess the greatest amount of sympathy with it, such as the digestive apparatus, the respiratory, the circulatory, the cerebro-spinal, and ganglionic.

### DISTURBANCE CONSEQUENT UPON INCIPIENT PREGNANCY.

During the first weeks, or even the first days of pregnancy, a woman may experience morbid feelings, produced by the afflux of blood to the uterus, and the resistance which the fibres of this organ oppose to the development necessary for its new function: she is sensible of a weight in the lower portion of the belly, behind the pubes, and of a painful sense of tension, often very severe, in that region; frequent calls to pass water; lassitude in the limbs, anxiety, palpitations, and a change in the moral state. The allopathic system has only the direful resources of the lancet and the relaxing action of warm baths to oppose to these sufferings; as if the action of warm water *could* relax the tissue of the living uterus, in the same manner as when that organ is subjected to maceration after being removed from the dead body! or, as if bloodletting could withdraw the blood from its course to the uterus, whither it tends more abundantly

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for the accomplishment of the function of perfecting the growth of the new being which is being developed in its interior. The absurdity of such theories must be too apparent to need further comment. Hippocrates has said that women who bleed at the nose abort; and, from want of a better remedy, it has been advised to draw a considerable quantity of blood from a pregnant woman, without considering the necessary consequences which that abstraction of blood would entail upon the embryo, which exists and is nourished only by the blood of the mother! If bleeding be a *fault* in all diseases, and under all circumstances, it is a *crime* in disorders which result from pregnancy, because in these it tends to the destruction of the infant. We must therefore submit an imperative and invariable objection (and one which is subject to no reservation) to bloodletting, as an appliance in the medical treatment of diseases of pregnant women; and, *à fortiori*, under the conditions above mentioned, in which nature unassisted is ordinarily adequate to perform the cure.

This derangement, associated with incipient pregnancy, may, however, be characterised by symptoms of a more severe or even urgent description; and in such instances may terminate in a miscarriage, if not properly treated. The observance of a simple regimen, as described in the hygienic rules, suffices ordinarily to avert that accident; if, however, the morbid symptoms continue, we have a very efficacious remedy in the following:—

*Nux vom.*, 30.

Three globules, to be dissolved in six teaspoonfuls of water, and one teaspoonful of the solution taken every night.[1]

If the patient be of a lymphatic temperament, delicate,

[1] When the administration of medicines thus dissolved extends over a period of more than two days, (that is, when the solution would require to be preserved for such a time,) four drops of proof spirit should be added to this quantity of water. In very hot or changeable weather, this precaution should be observed with medicines kept in aqueous solution twenty-four hours. Another and preferable method, however, is, perhaps, to assume the above prescription as that conveying the requisite *proportions*, and to prepare a *fresh* solution thus every twenty-four hours.

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and with a pale, white complexion, of a very gentle and timid disposition,

*Pulsatilla*, 30,

may be given in preference to Nux vomica.

*Belladonna*, 30,

will be advisable if there should at the same time be redness and heat of the face, with a determination of blood to the head.

### FEBRILE ACTION.

Soon after the commencement of pregnancy, we often find that a moderate degree of fever is manifested by the increased heat of skin, especially of an evening; a quickened pulse; heat about the entrance of the vagina, with increased desire to pass water; a white tongue and thirst. In the latter months of pregnancy, this febrile state is often very troublesome; the pulse is permanently accelerated, but more so towards night; the skin is hot, and the woman restless; she cannot sleep, but tosses about till day-break, when she procures some short, unrefreshing slumber, occasionally accompanied with a partial perspiration. In the morning the febrile symptoms are found to have subsided, but in the afternoon they return, and the following night is spent alike uncomfortably. There is usually more emaciation than happens in pregnancy under different circumstances; and although this state will sometimes last throughout the whole period, it is astonishing how well the strength is kept up, in spite of the want of rest, and of the general uneasiness, which results apparently from the morbid increment of heat, especially about the organs of generation. This condition is best met by the administration of—

*Aconitum*, 30.

Three globules, to be dissolved in six tablespoonfuls of water, one to be taken every night,[1] in the milder cases, or every six hours in the more severe. This may be followed, if necessary, by *Pulsatilla* prescribed in the same manner.

[1] Refer to the note respecting doses at p. 85.

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These remedies will be found far more advantageous than the bleedings, and purgatives with saline medicines, usually prescribed by physicians of the old school.

## SICKNESS.

Vomiting is one of the earliest indications of pregnancy; and, with an occasional exception, troubles all women, more or less; it most commonly happens on first rising in the morning, although with some it does not occur until the afternoon. There is a sense of nausea, with inclination to vomit, which generally continues until the period of quickening, after which it decreases or goes off; but sometimes it remains during the whole period of gestation. In the earlier weeks, this nausea passes off on eating; but as pregnancy advances it continues after and even during the repast: this is followed by efforts to vomit, and then by vomiting of glairy fluid, with or without effort, and even by vomiting of the food itself, especially after breakfast. For the relief of these symptoms, which render pregnancy so painful to many women, *Nux vomica* offers in the assemblage of its primary symptoms, a certain indication: we therefore prescribe—

*Nux vomica*, 30.

Three globules, to be dissolved in a wine-glass of water; a teaspoonful to be taken two or three times a day.

The relief afforded by this is often so great and immediate, that the patient will go through the remainder of her pregnancy without much inconvenience.

*Pulsatilla* may be given in the same way in some instances, where the disposition of the individual is particularly mild and gentle.

When the vomitings are almost continual, so that even the food is in a great measure rejected, and bile, pure or mixed with glairy mucus, is expelled, we give—

*Ipecacuanha*, 6.

Three globules, dissolved in three teaspoonfuls of water, one to be taken three times a day until relief is obtained.

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In some very rare cases the vomitings resist these medicines; we then administer—

*Sepia*, 30.

Three globules, in eight teaspoonfuls of water, one to be taken every morning, especially if there occur, in the vomitings, a milky mucus, and if the patient be of a sad disposition; or if she had been subject to megrim, or to any derangement of the uterus. In the latter case, recourse may be had also to—

*Conium*,

in the same manner. This medicine succeeded very well with a lady whose case is reported by Dr. Croserio, and who was almost cured of a scirrhous state of the neck of the womb after eighteen months of treatment, when she became *enceinte*. During her former pregnancies, she continued to vomit throughout the whole period, in spite or by reason of the four or six bleedings which allopathic treatment had inflicted upon her. *Nux vomica* and *Ipecac*. had only allayed the symptoms for a time, when a dose of *Conium* completely relieved them.

*Arsenicum*, 30,

is appropriate for excessive vomiting after food, with attacks of fainting, great debility, and emaciation.

*Natr. mur.*, 30,

is sometimes successful in cases which are very obstinate and do not yield to the above, especially when a great flow of limpid mucus is regurgitated, or constantly running from the mouth, as if the patient were salivated, with crampy pain at the pit of the stomach, and tenderness; acidity; loss of taste and appetite.

*Aconitum*, 30,

is useful when the subjoined symptoms prevail:—thirst, with disinclination for food; dryness of the mouth and tongue; ptyalism, with stitches in the tongue; vomiting, with nausea, thirst, heat and perspiration, and incontinence

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of urine; scraping sensation up the throat, and rising of sweetish water into the mouth; heartburn; vomitings of mucus, or of grey, watery liquid, or of bitter, greenish bile. It is adapted to sanguine and plethoric subjects; and if the symptoms have been aggravated by chagrin or fright.

*Ferrum*, 12,

is more especially appropriate for morning vomiting of water and mucus—renewed after eating—sour and acrid vomiting; sense of repletion; vomiting at midnight; worse when lying. The other remedies, the characteristic action of which corresponds with some indications which occur in this affection, are:—*Coccul.*, *Kreos.*, *Lach.*, *Magn. m.*, *N. mosch.*, *Petrol.*, *Phosph.*, *Veratr.*

Women who are subject to vomiting should strictly observe the dietetic rules; that is to say, to live chiefly on roasted and boiled meats, eat few vegetables, and abstain from fruits. A small glass of old sound wine after dinner may be allowable or advantageous in some cases.

HEARTBURN—

often occurs very early after conception, but sometimes not until after the fourth month; it consists of a burning sensation up the throat, either alone, (in which case it depends upon the morbidly irritable state merely of the nerves of sensation,) or accompanied by the constant rising of acid fluid into the mouth, an evidence of disordered secretion; and there is sometimes also spasm of the stomach, when it is called pyrosis (water-brash). These symptoms are worse after eating; and are materially aggravated by fat or burnt articles of food, the brown of meat, raw fruit, &c. Water even sometimes turns acid, and is regurgitated immediately. Port wine and tea are particularly obnoxious.

For these symptoms we prescribe—

*Nux vomica*, 30.

Three globules, in six teaspoonfuls of water; one teaspoonful to be taken three or four times a day until relief is obtained; or *Pulsatilla* and *Sulphur* may be used in the same way.

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*Phosphoric acid* is also a very serviceable remedy in these cases.

*Ars., Bell., Calc., Kali c.* are sometimes useful.

## CRAVINGS OR LONGINGS.

It is not uncommon during gestation for the woman to have a strong desire to eat things which are hurtful in themselves, or for which, even, under other circumstances she almost entertains a repugnance. As before remarked, it is not necessary, from fear of any morbid influence upon the child, to sanction the use of articles of food which are positively injurious; on the other hand, where the desire is for any article of diet, it may safely be accorded. In most of these fantastic tastes, *Sulphur* is the best remedy; however, if there is an excessive desire for vinegar, *Arnica* should be given; if for chalk or plaister, *Acid. nitric.*; if for brandy, *Arsenic., Pulsat., Sulphur., Lachesis;* if for coal, cinders, &c., *Cocculus;* or if for common salt, *Carbo veget.*

## SPASMS OF THE STOMACH.

Towards the end of the period of pregnancy, women are apt to suffer from spasm in different parts of the abdomen, or in the flank, or at a point below the false ribs.

*Nux vomica*, 30,

given as before recommended, generally succeeds in dispersing the pains in a few days. If the patient is of a lymphatic temperament, *Pulsatilla* is to be preferred.

## CONSTIPATION.

CONSTIPATION is almost a natural consequence of pregnancy; but is more especially obnoxious to women who live in towns and lead a sedentary life. Although constipation is less injurious on the whole than a contrary state, it should be remedied, as far as possible, either by an alteration of diet, in augmenting the proportion of vegetables and fruits, or by

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drinking a glass of fresh spring water, either on going to bed or on rising in the morning, and by proper exercise; if these do not succeed in obviating the disposition, the patient should use a *lavement* enema, with a quarter of a pint of warm water every night, and solicit nature every morning. If the constipation has produced any troublesome symptoms, such as heat of the abdomen, headache, pressure at the fundament, &c.; we should give—

*Nux vomica*, 30,

two globules, and await its action four or five days. If the desired effect should not, however, ensue, we give—

*Sulphur*, 30,

three globules, dissolved in six teaspoonfuls of water; one teaspoonful to be taken every night.[1]

Or, if the constipation be very obstinate, we may give—

*Bryonia*, 30,

three globules, in four dessert-spoonfuls of water, a spoonful on first awaking in the morning, and repeated every two hours, until the desired effect is produced.

*Pulsatilla* would be indicated, if the constipation were caused by the abuse of fat and indigestible food.

Also *Lycopodium*, *Opium*, *Sulphur*.

## DIARRHŒA.

The bowels instead of being costive, may be relaxed; or the one state may alternate with the other. In all cases of continued diarrhœa, it is useful to have the surface kept warm with flannel; and sometimes a flannel roller, bound gently round the abdomen, gives great relief. Diarrhœa often induces abortion, wherefore it should not be neglected. The patient should be advised to partake only of light food, and of that in small quantities at a time. If the stools are slimy, greenish, and watery, and preceded by colicky pains, the mouth being clammy, and bitter, without thirst; and

[1] Refer to the note on the subject of the doses at p. 85.

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there are chills; and especially if the evacuations occur principally in the night,—

*Pulsatilla*, 12,

one drop of the tincture, or six globules, dissolved in a wine-glass of water; a teaspoonful to be taken every four or six hours.

*Dulcamara*, 12,

may be given, if the diarrhœa was induced by getting cold, and if there be mucous, or greenish stools, and colics.

If, besides the stools being yellow or green, or like broiled eggs, the following symptoms occur:—very bitter taste, great thirst, desire to vomit; or bilious vomitings with sharp pains in the stomach or belly, distension and escape of wind, we should give—

*Chamomilla*, 12.

If the diarrhœa has become chronic,—

*Sulphur*, 30,

(six globules, dissolved in a wine-glassful of water; a teaspoonful to be taken every night,) is useful in most cases. After this medicine,—

*Calcarea* should be given, if the diarrhœa continues, notwithstanding such previous treatment, and especially if there be hunger.

To these medicines, in cases such as have just been described, the following may also be added as of service, viz:—*Antim. crud.*, and *Lycopodium*.

## HÆMORRHOIDS.—(PILES.)

Piles are a frequent attendant upon Constipation during pregnancy, and depend partly upon the torpor of the bowels incidental to that state; but chiefly on the interruption to the venous blood in its return from the bowels, caused by the pressure of the womb, and its contents, upon the vessels of the pelvis; and when great Constipation does occur, this assists in aggravating the evil, by the mechanical pressure of the contents of the bowels. Piles consist of one or more

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small tumours at the verge of the anus. They enlarge to the size of marbles or filberts, and appear at times clustered around the part like a bunch of grapes; they are of a purplish colour, painful, hot, or burning, and tender to the touch. When they are within the bowel, and not visible, except during the act of straining, they are called *Inward Piles*, and when they protrude, *Outward Piles*. If blood escape from them, they are termed *Bleeding Piles;* if there is no discharge, they are called *Blind Piles*. Some women suffer from them during pregnancy; but at no other time. They are apt to become inflamed, either from their over-distension, from cold, or owing to errors of diet; and the patient is then attacked with paroxysms of pain, commencing with a heat and itching at the part, which increases to a burning and aching, with shooting pain up the bowel, or into the back; increased pain when the bowels are evacuated; a feeling as of frequent inclination, without the power to relieve, and heat in passing water,—or, at times, obstruction of that function. Sitting and standing are painful; the horizontal position is therefore best for patients suffering severely from this affection.

When the pain causes great inconvenience, the application of hot water, either as a fomentation, or by sitting over it, so that the parts may receive the steam, will afford considerable relief; or, sometimes a napkin, folded and moistened with *cold* water, applied as a pad, with a dry one over it,—the application being renewed, as occasion requires,—will act beneficially. Temporary relief will sometimes be obtained by applying any animal oil, or a mucilage, made by infusing quince seeds in water; but for permanent advantage, recourse must be had to some of the following medicines, according to the prevailing indications.

*Aconitum* is appropriate when the subjoined symptoms occur:—inflammatory irritation, with or without the discharge of blood, with stinging and pressure in the anus; tensive, aching, and colicky pains, with a feeling of fulness deep in the abdomen; bruised feeling in the lower part of the back, and a sense of weakness in the bowels.

*Belladonna* is particularly suitable to women, and may be

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given for hæmorrhoidal constipation, attended by violent pains in the small of the back; discharge of blood for several days; urgent tenesmus, with itching of the anus, and constrictive sensation; constant pressure and bearing down of the bowel.

*Capsicum* is most suitable where there is a tendency to irritability of the gastric and intestinal mucous membrane; blind or flowing hæmorrhoids, with burning heat and itching at the anus; or smarting, stinging pain in the anus during diarrhœa, with pain and heat during micturition.

*Chamomilla* may be given—when the varices are very painful—for blind and flowing hæmorrhoids; itching pain at the anus, with burning; urgency to stool, with diarrhœic evacuations, and fissures; and when there is anguish and heat in passing water.

*Ignatia* is more especially indicated when there are hæmorrhoidal sufferings during soft stools; pain in the anus immediately after evacuations; constrictive and smarting pain at the rectum, especially when touched, or when sitting or standing. Cutting pain high up in the rectum. Creeping as from worms; itching at the part, with discharge of blood; also when there is constipation, with ineffectual efforts, and protrusion of the hæmorrhoids.

*Nux vomica* is particularly applicable to the treatment of persons who have indulged in coffee, or stimulating drinks, or who have led a sedentary life, when there are inflamed tumours, with copious discharge of blood; or when the following symptoms and conditions prevail: spasmodic closure of the anus, with burning and stinging pains; difficulty of passing the fæces, accompanied with a constant urging to stool, bruised pain in the small of the back, on making the least movement,—and with jerking, dull stitches, in the small of the back, and ischia; painful urination: the symptoms are worse after meals, and during mental labour.

*Pulsatilla* should be given to delicate and sensitive individuals, when there are discharges of blood and mucus, or when painful swelling and pressure in the hæmorrhoidal tumours, pains in the back, and a feeling of faintness, with tendency to diarrhœa occur; smarting, sore pain of the anus; retention of urine; worse of an evening.

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*Sulphur* is a very important remedy in hæmorrhoids; it is indicated by alternate constipation and diarrhœa. Chronic constipation with piles; frequent protrusion of the bowel, and of the swellings, with burning, pricking at the anus, and dull stitches, with tenesmus, colic, pain in the small of the back: painful micturition. It may follow *Nux v.* or *Pulsatilla.*

*Lycopodium, Silicea, Cantharides, Sabina, Millefolium, Carbo veg., Arsenicum, Phosphorus, Acidum-sulph., Graphites, Ant. cr., Cup., Ac. mur., Calc. carb., Sepia, Caust., Aloes, &c.,* may also be referred to, and will be found occasionally beneficial.

The foregoing medicines may be given once a day, or every few hours, if the suffering is severe, or once daily, for a week, according to circumstances. In obstinate cases, a dose of *Nux v.* and of *Sulphur* may be given alternately every night, or night and morning. Three globules may be dissolved in eight teaspoonfuls of water, and one teaspoonful of the solution given at each dose.[1]

## COLIC.

Spasm from flatulent distension of the bowels is apt to occur, either as a consequence of improper diet, or of cold.

*Chamomilla* will generally be sufficient to obviate this derangement, especially if there be a loose state of the bowels; but if the contrary condition prevail, recourse must be had to *Nux vomica.* If the violence of the colic prevents the patient from resting in one place, and if walking about soothes the pains of the belly, *Colocynth* should be given.

In these ailments the medicines should be given in plenty of water. Three globules may be dissolved in a wine-glass of water, and one teaspoonful of the solution given at intervals, more or less frequent, according to the violence of the pains.

## PAINS IN THE LOINS.

Pregnant women are very subject to pains in the loins. The bearing of the trunk backwards—the efforts made to

[1] Refer to the note in respect to the doses at p. 85.

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support the weight of the abdomen, and to maintain the equilibrium, and the various circumstances pertaining to this state—are sufficient to account for these sufferings.

*Nux vom.* is usually the best medicine; it will be especially efficacious if the patient experiences the greatest pains on going to bed. If the lumbago has been caused by an effort, or by fatigue, recourse may be had to *Rhus;* but *Arnica* may be preferable in the last case, if the pains are principally felt in coughing, or walking about.

## URINARY DIFFICULTIES.

The bladder is often affected in pregnancy. It is sometimes torpid in its action, allows of considerable distension before it contracts upon its contents to expel the water,—and subsequently, this contraction takes place with difficulty, owing to the tunics of the bladder being weakened by the over-distension. This state requires attention, because by the pressure of the distended bladder upon the uterus, retroversion may be occasioned.

The patient should in such case make regular efforts to pass the water; and if she fail in her endeavours, and any tumefaction, distinct from the uterus, be found above the pubes, the catheter must be used at certain intervals, until the medicine shall have restored the contractile power to the organ.

*Nux vom.* is here especially indicated, and should be given once daily, until the bladder has recovered itself, which will generally happen in about a week.

But it more frequently occurs that the bladder is morbidly irritable, especially about its neck; there are frequent calls to pass water, with pain, perhaps, during the act, or urging in the bladder, without any alteration in the colour of the urine.

*Nux vom.* is also often successful in relieving this state; or otherwise, *Pulsatilla, Cocculus, Phosph. ac.*, or *Sulphur.*

If the urine escape involuntarily, (a very troublesome and painful affection, more frequent towards the end of pregnancy, owing to the pressure from the increased volume of

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the uterus,) *Camphora* may be given; or if the patient should be feeble, very sensitive, and of a gentle and timid disposition, with habitually scanty and painful menstruation, *Pulsatilla* should be chosen. *Belladonna, Cina, Silicea,* and *Stramonium* may be tried under particular circumstances.

## JAUNDICE.

Pregnant women will sometimes be suffused with a yellow hue, during the earlier months, from some functional derangement of the liver, dependent, for the most part, on abdominal obstruction, and attended with dyspeptic symptoms, which generally increase after the appearance of the jaundice. It may be very slight, and last but a short time; or it may be deep and long-continued, and connected with considerable derangement of the stomach and bowels.

It may also occur at the end of gestation, from pressure upon the gall bladder. If it be dependent upon disease of the liver itself, (in which case it may occur at any period of pregnancy,) it is then fraught with danger. The more simple form is easily relieved by a few doses of *Mercurius* 12, or *Chamomilla* 3, or *Nux v.* 30. If it has been caused by anger or chagrin, *Cham.*, *Nux v.*, or *Lach.* and *Sulph.* may be given.

When the more severe form connected with disease of the liver co-exists with pregnancy, recourse must be had to a careful anti-psoric treatment, of which the following remedies will be the foundation: viz. *China, Merc., Acon., Calc., Arsen., Digit., Carbo veg., Nitr. ac., Puls., Bell., Nux v., Lach., Hepar s.,* &c.

## PALPITATION OF THE HEART.

Palpitation is often a very distressing symptom with pregnant women, and may occur in conjunction with symptoms of plethora; or from debility in delicate, sensitive women, in whom it is brought on by the slightest emotion; and in those who have a tendency to abortion, it sometimes occasions that event. It may occur repeatedly during the day, or only at night, on lying down, or at regular or irregular periods, at intervals of two or three days. In one lady, a patient of

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mine, the attack was most violent, and recurred every ten days, lasting about twelve hours.

In those cases in which nervous susceptibility is the cause, *Pulsatilla*, 30, suffices, ordinarily, to relieve this troublesome symptom, or *Nux vom.*, 30. *Moschus* is also suitable to this condition, especially if attended with faintness.

When dependent on a plethoric state of the system, *Aconit.*, 30, or *Bellad.*, 30, followed by *Nux v.*, will be the best.

When there is reason to suspect a more serious affection of the heart, either from the symptoms having existed for a long period, or from the presence of the physical signs peculiar to one or other of the organic diseases of that organ, *Sulphur*, 30, is the medicine which has generally afforded most relief, or else, *Arsenicum*, 30, alternated with *Aconitum*.

### SYNCOPE.

Syncope is a frequent occurrence in persons with sensitive nervous systems, and occurs at all periods of pregnancy. Sometimes this inconvenience troubles the patient from the first period of conception, without her being able to assign any other cause for it; in other instances it attends upon a weakened state of the system, either from relaxation of the bowels, or an alternation of this condition with constipation; or in consequence of sleeplessness, or intense toothache. In the absence of decided symptoms, the choice of the remedy must be directed by the constitution and moral condition of the patient. If she be feeble, melancholy, and disposed to weep upon apparently trivial provocation or even without any apparent cause, *Ignatia*, 30, should be given. If, on the contrary, she is lively, gay, and passionate,—

*Chamomilla*, 12, is to be preferred; if with this temperament she be subject to constipation, and is too sedentary in her habits, *Nux vomica*, 30.

It is advisable to give these medicines, in all cases, in a large quantity of water, by teaspoonfuls every morning,[1] to moderate the intensity of action which patients, in such cases, are prone to experience.

[1] See the note respecting doses at page 85.

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If the faintings be the result of great weakness produced by previous disease, by hæmorrhages, or by privation of nourishment, *China*, 12, should be administered, followed two days afterwards by *Sulphur*, 30; after which we must be guided by the nature of the symptoms.

Sometimes syncope, in pregnant women, is the effect of a species of plethora. *Moschus*, 12, is a useful medicine when sudden faintings occur with vertigo, or tendency to hysteria, spasms, &c., in which last case, however, the means indicated in the article devoted to the consideration of that subject must be employed; especially *Aconitum*, prescribed according to the necessity of the case.

Sometimes it is the effect of wearing the dress habitually too tight; here it is a punishment for the infraction of the hygienic laws applicable to the pregnant state. The treatment will then consist first of the removal of the exciting cause, after which *Aconite* may be given, followed by *Arnica*, 30.

There is a kind of *syncope* which is dependent *upon* some organic disease of the heart. It generally prevails in the earlier months, and sometimes proceeds to a fatal termination; it has been known also to prove fatal so late as the sixth month of pregnancy. Its connection with serious organic disease must, of course, be detected by means of physical diagnosis or mediate auscultation.

## DYSPNŒA AND OPPRESSION.

In the latter months of pregnancy, the pressure of the fundus of the uterus upon the diaphragm and the organs of digestion interferes with the functions of these organs, and induces shortness of breath, panting, difficult digestion, &c. Immediately after a substantial meal, the patient is inconvenienced by a determination of blood to the head, with redness of the face, and a sense of anxiety and suffocation.

*Nux vomica*, 30,

is the most suitable medicine for these sufferings, and it is rare that it is not followed by a prompt and complete relief.

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If the oppression is more permanent, and there be habitual redness of the face, with heaviness of the head, vertigo, anxiety, beatings at the heart, and nightmare,—

*Aconitum*, 12,

may be given;—six globules being dissolved in a wine-glassful of water, and one teaspoonful of the solution given every two or three hours, diminishing the nourishment at the same time.

In such cases these means, together with exercise in the open air, will usually suffice to dissipate the symptoms.

Should the oppression be accompanied with paleness of the countenance, or swelling, or a blueish appearance, wheezing at the chest, general weakness, impossibility of remaining in the recumbent posture, œdema of the lower extremities, regurgitation of food or of water, &c., recourse may be had to—

*Arsenicum*, 30.

Six globules, dissolved in a wine-glassful of water, one teaspoonful to be taken every three hours.

This medicine may, in some cases, be alternated with *Ipecacuanha*, especially if there be absence of thirst.

If the patient experiences pains in the chest on deep inspiration, so as to lead one to infer more active disease of the lungs, *Bryonia*, 12, or *Phosphorus*, 12, may be given in the same manner.

## SLEEPLESSNESS.

If, notwithstanding proper diet and exercise, the woman passes sleepless nights, and the sufferings that are induced thereby require medical interference, a dose of *Coffea*, 6, given at bedtime, often suffices to produce sleep, if she has not been accustomed to the use of coffee as an habitual beverage. If, on the other hand, she has been used to take coffee constantly, more benefit will be obtained from *Chamomilla*, 12. If sleep is prevented by night-mare, *Sulphur*, 30, should be given in the same manner.

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## PLETHORA—HEADACHE.

Women, in the earlier months of pregnancy, are apt to suffer from Headache, which is an alarming symptom, when it is severe, constant, and accompanied by symptoms of plethora. The head is giddy, the eye suffused, there is weight over the eyes, or within the skull; the giddiness is aggravated by stooping, or lying down; there may be drowsiness, ringing in the ears, flashes of light in the eyes, indistinct vision, and heaviness of the limbs. In some instances there is a fixed pain in one part of the back, accompanying or preceding the affection of the head. Tetanic convulsions, or coma, may follow, if these indications are not attended to.

All these symptoms are speedily relieved by—

*Aconitum*, 30.

Six globules, dissolved in eight dessert-spoonfuls of water, of which solution one dessert-spoonful should be taken every two or three hours.

If the pain and heat of the head continue after this,—

*Belladonna*, 30,

may be given in the same manner.

All headaches, however, are not attended with such severe symptoms, nor do they prognosticate such grave results; but often proceed from derangement of the digestive functions, and, in such cases, may be relieved by the exhibition of—

*Nux vomica*, 30,

given at intervals of two or three days.

*Opium* is useful when the following symptoms and conditions prevail:—vertigo on rising from a seat, with a stupid feeling in the head; imperfect sleep, fanciful dreams, visionary ideas, &c., or dull insensibility of the nervous system.

## TOOTHACHE.

This affection frequently attends upon pregnancy, and is often the earliest symptom, from the presence of which that

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state is suspected. The tooth ought never to be extracted, for abortion has been known to follow the operation. The suffering may be removed or alleviated by the same agents as are commonly applicable to the treatment of the Tooth-ache, which are as follow:—

*Coffea*, if the attacks of pain occur suddenly, and are so violent as to extort cries.

*Chamomilla*, if the suffering is most violent at night, so as to oblige the sufferer to rise from bed, or if the cheek is swollen.

*Pulsatilla*, if the pain commences towards evening, and gets worse at night, and the patient be of a gentle disposition.

*Nux vomica*, if the pain becomes aggravated to a great degree by exposure to the open air, by wine and coffee, or by mental application, and is soothed by warmth. A shooting in the teeth and gums, extending into the bones of the head and face; a sense of boring, raking, or drawing in a carious tooth, are indications for this remedy.

*Belladonna*, if, in addition to the toothache, there be determination of blood to the head.

*Sepia* is useful in the toothache of pregnancy, as well as in all other sympathetic affections of the uterus.

*Staphysagria* succeeds in a great number of cases of toothache associated with caries; wherefore it will be well to try it in all cases in which the first medicine given has not taken effect.

In toothache the remedy may be changed about every half hour, if that which has been administered should not have relieved the pain.

## SALIVATION.

This symptom sometimes occurs during the earlier months of pregnancy, and ceases about the fourth or fifth month. It scarcely requires any interference; but if it should be very troublesome, recourse may be had to a small dose of *Mercurius solubilis*.

If it be accompanied with nausea and repugnance for

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food, *Pulsatilla* may be given; if with general coldness and debility, *Veratrum*.

If, however, this symptom should continue in a troublesome degree, notwithstanding such treatment, the subjoined medicines will usually prove of service.

*Sulphur*, 30.

Three globules dissolved in six teaspoonfuls of water, of which solution one teaspoonful should be taken every night.[1]

*Natrum mur.*, if it be obstinate, and is connected with a cachectic habit, bad digestion, soreness of the mouth and tongue, and aggravation after food, with a constant craving, which is allayed by the smallest quantity.

*Arsenicum* will also be beneficial in some instances.

## PAIN AND TENSION OF THE BREASTS.

The sympathetic irritation which is set up in the breasts by pregnancy, and which determines a flow of blood to those organs for the purpose of preparing the mammary glands for the secretion of the milk, excites in them more or less uneasiness or pain: these pains often become exceedingly troublesome, very sharp and insupportable, especially with women who expose the breasts to much compression with ill-constructed stays.

When there is a pricking sensation without inflammation, administer—

*Bryonia*, 30.

Six globules, dissolved in six dessert-spoonfuls of water, of which solution one dessert-spoonful should be taken three times a day; but when there is erysipelatous redness, heat, hardness, &c.—

*Belladonna*, 30; or *Hepar sulph.*, *Trit.* 3, gr. j.

in the same manner.

The sudden abatement of the tension, and fulness of the breasts, and a diminution of size, are unfavorable circumstances, indicating either the death of the child, or a feeble action of the womb.

[1] See the note respecting doses at page 85.

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## ŒDEMA OF THE EXTREMITIES.

As gestation advances, women frequently suffer from œdematous swelling of the lower extremities; and after a time, the thighs, or even the labia pudendi, are involved in it. This is partly owing to the pressure of the uterus; but in some instances would appear to be dependent upon a peculiar weak state of the vascular system, connected with pregnancy, as it occupies the upper parts of the body also.

The first-mentioned result often occurs in those women who take little exercise, and this hygienic error is then soon remedied by a good walk; but if the swelling shall have reached the thighs so as to impede locomotion, if there be no other complications, the following may be administered.

*Bryonia*, 30.

Six globules, dissolved in six dessert-spoonfuls of water, of which solution one dessert-spoonful should be taken every night and morning.

If at the end of a week, improvement be not perceptible,

*Sulphur*, 30,

may be prescribed in the same way.

If the patient had been subject to eruptions, pimples, or other affections of the skin, which have disappeared during the pregnancy, the treatment should be commenced by the latter medicine.

Occasionally there exists an infiltration of the cellular tissue of the labium pudendi, without the more general œdema of the extremities. This happens most frequently in women who possess a superfluity of fat. It is not of any serious moment; but if it should proceed to such an extent as to interfere with walking, then either a few punctures may be made in the tumour to relieve it of the fluid, or the treatment above mentioned may be resorted to.

## MORAL IMPRESSIONS, &c.

It is very important during pregnancy to avoid all causes of alarm, such as excessive fear, anger, joy, or grief, as far

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as possible. These operate powerfully upon the aroused susceptibility of the nervous system, and affect both the mother and child in an unfavorable manner. It is not uncommon for the commencement of pregnancy to be marked by a general apprehensiveness, a morbid dread which produces trembling of the body, weakness of the limbs, loss of appetite, disturbed sleep, frightful dreams, nightmare, dissatisfaction with everybody and everything, &c., nervous irritability, melancholy; the cares of life, its ordinary duties, and the prattle of her children, can scarcely be borne by the patient, who despairs of life, and wishes herself dead. In such cases, there is no medicine which produces so satisfactory a change in the whole system, as—

*Pulsatilla*, 30.

Six globules may be dissolved in a wine-glassful of water, and a teaspoonful of this solution given two or three times a day.

But if a sudden fright should have produced anxiety, oppression at the chest, tremblings, &c.

*Opium*, 30,

must be given directly; or, if some time has elapsed since the occurrence, *Aconite*.

If the same effects have been produced by sudden joy, *Coffea*, 1, may be given; if they were the consequence of violent anger, *Chamomilla*, 3. If *Chamomilla* does not speedily relieve, *Bryonia*, 12, is then advisable. *Nux vomica* and *Colocynth* may also be useful in this case.

If the morbid impression was the effect of sudden or continued grief, *Ignatia* should be preferably selected.

## CRAMPS.

Pregnant women are often much troubled with cramps in the calves of the legs and feet, which come on in the night or day. A dose of *Veratrum*, 30, given on going to bed will often obviate this painful affection. In nervous subjects, *Nux vomica* or *Coffea*, given in the same manner

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will sometimes avail better. If these means do not succeed, the following may be advantageously selected :—

*Sulphur*, 30.

Three globules, dissolved in a wine-glassful of water, and one teaspoonful of this solution, to be taken three or four nights in succession on going to bed.[1]

## VARICES.

In addition to the dilatation of the hæmorrhoidal vessels, causing piles, the veins of the lower extremities are liable to enlargement from the pressure of the gravid uterus upon the iliac vessels and inferior cava. It generally happens, that the dilatation is greater on one side, but both may be equally affected. Sometimes the foot is quite purple, from the congestion of the minute vessels, and the veins in the thigh and leg acquire an enormous size. The recurrence of this local congestion during successive pregnancies, leaves the vessels tortuous and bunchy, with small knotty points here and there, which remain blue, and in after-life burst, and give rise to wounds and discharge of blood. A bandage equally applied from the foot upwards to the part immediately above the knee, and the removal of all ligatures, such as garters, &c., and preserving, as much as possible, the horizontal posture, are the best auxiliaries to the medical treatment,—which consists in the administration of—

*Pulsatilla*, 30.

Six globules, dissolved in a wine-glassful of water, one teaspoonful of which solution should be taken every night.[1]

This may be repeated at occasional intervals, if required.

If this medicine should not afford relief, and the patient be of an irritable temperament, *Nux vomica* may be given in the same manner; or *Lycopodium*, if the affection be accompanied by an unhealthy state of the blood, a phlegmatic constitution, or a deficiency of animal heat.

*Sulphur* is often required after either of the above remedies.

[1] Refer to the note respecting doses at p. 85.

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## PURPLE SPOTS.

In connection somewhat with venous derangement, women sometimes experience, towards the termination of pregnancy, a species of fissure or cracking of the tegumentary tissue of the abdomen, in consequence of the excessive distension of the skin at that period, in which are deposited small portions of blood which transude from the blood-vessels, and, assuming a linear or dotted form, look like purple lines or spots, which occupy the whole surface of the abdomen, and upper part of the thighs. The traces of these effusions often remain during life. The best means of preventing the occurrence of this extravasation, is not to confine the abdomen during the earlier months with stays, or to use any tight compression in order to preserve the form; because such confinement prevents the gradual and easy extension of the abdominal parietes. Light frictions, with the following embrocation, after the fifth month, will do much to obviate and disperse the evil:—

*Concentrated Tinct. of Arnica,*

one teaspoonful being added to four table-spoonfuls of oil of sweet almonds, and these being thoroughly mixed, and rubbed lightly over the bowels for a quarter of an hour, once in every five or six days. An *Arnica pomade* is made by the Homœopathic chemists, which will sometimes answer the purpose.

## COUGH.

Women are at times subject, during pregnancy, to a dry, troublesome, nervous cough, quite distinct from ordinary catarrh; and which lasts throughout the term, if it is not removed by appropriate remedies. This cough is the consequence of the afflux of blood to the chest, resulting from the compression of the large vessels of the abdomen, by the impregnated uterus. In place of the abstractions of blood, usually recommended by Allopathic practitioners, the following treatment will successfully relieve it.

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*Aconitum*, (tinct.) 6,

two drops being added to half a tumblerful of water; of which mixture a dessert-spoonful should be given every four hours. If the intensity of the cough, only, is removed by this medicine, *Nux vomica*, 12, may be given in the same manner.

If the attacks are most frequent at night, *Belladonna* will be preferable to *Nux v.* If the cough is followed by efforts at vomiting, or vomiting of glairy mucus, *Ipecac.*, 6, should be prescribed. Should it be very obstinate, and accompanied by a tickling in the throat and chest, *Conium*, 12, or *Sepia*, 12, should be administered.

When the cough becomes looser, and there is much expectoration, *Sepia* and *Pulsatilla* may be given in alternation.

## UTERINE HÆMORRHAGE.

Although the menstrual function ceases during pregnancy, it sometimes happens that a sanguineous, or sanguinolent-mucous discharge takes place at the ordinary monthly period, during the first few months. Occasionally an excess of the catamenia happens at the time of conception, and then ceases. These circumstances are of little consequence, and demand no interference; but now and then there is an issue of blood, at a time distinct from what would have been the menstrual period, and with a sudden and copious flow. This may arise from some fright or accident; or, in delicate women, it may even occur without any apparent cause. Whenever such a casualty occurs, it should receive immediate attention; as, if not arrested, it will often be followed by miscarriage, and may endanger the life of the woman. The patient should be put to bed immediately, so as to preserve the horizontal position, until the complete cessation of the discharge, and all danger of its return is past: she should also keep her mind tranquil; and those about her should take care to secure her from any bustle, or necessity for moving or exciting herself. Cold drinks and spare nourishment should be given, and the body should be kept cool—the bed-covering being light, and the temperature of the apartment moderate.—If

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the hæmorrhage should ensue, as the consequence of a muscular effort to raise or carry something, a violent exertion of the arms, a mis-step, a fall, or a blow upon the stomach or loins, we prescribe,

*Arnica*, (tinct.) 3,

two drops being added to four table-spoonfuls of water; of which mixture, one teaspoonful should be given every ten or fifteen minutes, more or less frequently, according to the urgency of the case.

If the flow of blood is copious, and continues in a uniform manner, with pains at the navel, bearing-down efforts, and pressure towards the uterus and fundament, with chills or general coldness, at the same time that there is heat towards the head and face, with considerable lassitude, and disposition to lie down, we prescribe,—

*Ipecacuanha*, (tinct.) 6,

two drops to four table-spoonfuls of water; of which mixture, one teaspoonful is to be taken every ten or fifteen minutes.

*Chamomilla* should generally be employed when, in addition to these symptoms, the pains are like those of labour, and when, after a short period, no improvement is manifested.

*Bryonia* is given when the patient loses a considerable quantity of deep-red blood, and there are, at the same time, pressive pains in the loins and head, especially about the temples.

*China* is very serviceable in the severe cases, where there are heaviness of the head, vertigo, loss of ideas, somnolence with feebleness and disposition to faint, coldness of the limbs, paleness of face, jerks about the mouth, contraction of the eyes; the countenance and hands become blue, and there are tremors of the body. Under these circumstances the danger is great; and napkins soaked in cold vinegar and water, may be applied to the genitals and lower part of the abdomen, and cold fresh air let into the apartment.

*China* is also indicated when the blood flows by jets, and there are, at the same time, pains in the womb, and in the direction of the os coccygis, with augmented discharge upon every violent return of pain. Also, when there are abdo-

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minal pains, with frequent desire to micturate, and painful tension of the lower portion of the belly. This medicine also operates beneficially in overcoming the weakness and indisposition which follow great loss of blood.

*Hyoscyamus* is indicated when there are pains like labour, with draggings in the loins and sacrum, or limbs; general heat, with accelerated or full pulse; swelling of the veins upon the hand, or iu the face; great agitation, excessive vivacity, trembling in the whole body, or stiffness of the limbs, absence of sensation, obscure vision, delirium, play of the tendons, or jerking of the limbs, alternating with rigidity of the joints.

*Belladonna* should be given when the discharge is neither very clear nor very black, and the following symptoms occur: pressure towards the genital fissure, as though the womb would force out; violent pains at the sacrum, as if it would break.

*Platina*, 6, is especially indicated when the blood is black and thick, but not coagulated and grumous; the pain in the sacrum is not as if bruised, but more of the nature of a dragging sensation from the back to the groins, and as if, by this pain, the internal parts were pressed downwards; at the same time, the genital parts being excessively tender to the touch.

*Ferrum*, 6, is required when the blood discharged is sometimes black and grumous, and sometimes liquid, the discharge being attended with pains, as of labour, ordinarily with redness of the face; after this medicine, *China* is often useful.

*Crocus* is indicated when the blood is very black, clotted, and viscid.

*Sabina* is very useful when the discharge is of a bright-red hue, occurring in jets, or even in clots, and the discharge is attended with pains extending from the loins round to the groins.

*Secale corn.* is to be selected when the blood is black and liquid, and when the discharge is especially excited by movement, or when the patient is feeble, and trembling of the limbs or cramps occur.

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In general, when the symptoms are at all urgent, the proportion of each medicine (as especially stated in the foregoing prescriptions) should be mixed in a wine-glassful of water, and a teaspoonful of the mixture given every ten minutes, (or less frequently, according to circumstances.) When the hæmorrhage shall have been arrested, the patient must keep perfectly at rest for four or five days, and then take exercise very gradually, observing all proper precautions against a renewal of the accident.

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## MISCARRIAGE.

Miscarriage, or Abortion, is the term applied to expulsion of the ovum before the sixth month; Premature Labour, to its expulsion at any intermediate period between the sixth and ninth month, the natural term of pregnancy.

But in accordance with the limited object of this work, I will not make distinctions which have no practical advantage; although some authors have described separately, the course and treatment of abortion, as it occurs in the earlier or later months. When premature labour takes place at the seventh or eighth month, its progress and treatment need not differ much from that of labour at the full time. As, however, the end to be attained is, in either case, the prevention of the premature expulsion of the ovum, the means to be used for this purpose, as well as to guard against the dangerous consequences of hæmorrhage, are similar,—although in the simple premature confinement there are fewer evils to contend with.

Abortion must be considered as a very serious accident; for it not only deprives the mother of the product of her pregnancy, and disappoints her hopes, but often places her life in jeopardy.

The causes of abortion are divided into predisposing and exciting. Among the former we may enumerate a particular fault inherent in the mother, a constitutional delicacy, evidenced in morbid irritability of the uterus; great rigidity of the fibres of the uterus, which interferes with the due ex-

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pansion of the organ, in proportion to the growth of the fœtus: a plethoric, or congestive state of the uterine vessels, from determination of blood to the pelvic organs, beyond the demands of pregnancy: hereditary, or acquired constitutional taint; relaxed condition of the neck of the womb, or atony of the uterus, from long-continued leucorrhœa; tumours of the uterus; polypi; cysts; diseases of the ovaria and contiguous parts; chronic inflammation of the uterus; dropsy; scanty or excessive menstruation; sanguine, or plethoric temperament; a disposition to hæmorrhage; hysteria; the acquired tendency to discharge the contents of the womb prematurely, from previous abortions, &c., &c.;—all causes dependent on change in the vital powers, produced by the presence of one or more of these morbid conditions in the system;—or even habitual errors of regimen, or hygiene,—such as prolonged watching; excesses of all kinds; tight garments,—especially such as exert undue compression upon the abdomen, &c.—Besides these, there are others which appertain to the fœtus itself, such as its own weakness of organisation; monstrous conformation; slender attachment of the placenta to the uterus; its position over the os uteri; shortness of the umbilical cord, hydatids, &c.

The exciting causes are very numerous. To detail all the exciting causes of abortion, would be to recite all the functions of the female, and all the hygienic or morbific agents by which she is surrounded. Thus we may enumerate, amongst the exciting causes:—acute diseases, especially those of the uterus and abdominal viscera; mechanical injuries,—such as falls and blows;—the common actions and conditions of riding in a carriage, fatigue, over-excitement, coition; mental disturbances,—such as anger, grief, and other violent emotions; medicines which operate especially upon the uterus,—such as emmenagogues, &c.:—in fact, all circumstances which directly or indirectly excite abnormal contractions of the uterus, and thereby produce expulsion of its contents;—or which determine a congestion of blood towards the uterus, or induce such an alteration of the vital force as precludes the accomplishment of its functions. From such causes operating upon the womb, the fruit falls before it is

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ripe; or, from similar causes operating upon the fœtus and its envelopes, the death of the former, or rupture of the latter, may be occasioned; so that the fœtus becomes like a foreign body, and is expelled by the conservative forces of nature.

The diagnosis of the act of abortion is not usually difficult; but nevertheless, in the early stages of pregnancy, it may be confounded with menorrhagia, especially towards the period when the faculty of conception ceases, and it is sometimes difficult to ascertain whether the expulsion of the ovum has been completed. When the contents of the uterus have been expelled, hæmorrhage ceases; previous to this, the occurrence of regular pains, together with the passage of coagula, usually distinguish it from menorrhagia.

Abortion is most frequent during the first three months of pregnancy. It is more difficult to discriminate the causes which have operated as predisponents to the accident, and to which our treatment must be directed, with a view to prevention.

Among those which have been enumerated are two, which have received particular notice: viz. rigidity of the fibres of the fundus and body of the uterus, and laxity of its neck. If from a recurrence of the accident, or from other causes, either of these conditions be found to exist, our treatment must be directed to it.

In the first instance, abortions take place early in the first pregnancies, but later and later in each succeeding one; until at last the natural epoch is reached, and a living child is borne. Under the latter of these two conditions, the reverse takes place; the period of abortion approaching nearer to the time of impregnation in each successive pregnancy.

In the one case, the liability to abort increases; in the other, it diminishes with each recurrence of pregnancy. The advantages of Homœopathy are manifest, in the greater power which it possesses to arrest the threatened miscarriage, as well as to obviate or repair the mischievous consequences of such an accident, when it cannot be prevented.

When abortion is threatened from the operation of an internal dyscrasia, it is more difficult to arrest or to prevent. Thus the ulterior accomplishment of a miscarriage, whether produced by a constitutional taint, or a degeneration of the



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tissues of the uterus, or by errors of hygiene, will admit of a more or less favorable prognostication, according to the greater or less control which can be exercised over these causes—or to the facility or difficulty of obviating or removing them. The nature and gravity of the accidental causes, will also greatly influence the nature of the prognosis.

At all times the means which Homœopathy offers for combating these causes, or at least their effects, are so potent and often certain, that the practitioner ought not to pronounce a miscarriage inevitable, except in cases in which the fœtus shall already have presented at the os uteri; he should not despair of his patient's completing the term of her pregnancy, in consequence either of an alarming hæmorrhage, the escape of the liquor amnii, or the supervention of convulsions. The death of the fœtus cannot always be recognised by any certain signs; doubtful symptoms of this accident need not, therefore, deprive him of all hope of a fortunate result.

The insertion of the placenta over the os uteri, although frequently productive of consequences fatal to the continuance of utero-gestation, by the repeated hæmorrhages which ensue, may yet be rendered less hazardous by the proper treatment of these results with *Sabina*.

The prognosis with regard to the effect of abortion itself, or of its consequences, is more favorable in the case of the Homœopathic practitioner, since he possesses means which act upon the uterus and its appendages more directly, and with greater power and certainty, than any Allopathic resources, as well in facilitating the expulsion of the ovum, when that is inevitable, as in remedying hæmorrhage, convulsions—which often prove fatal—or inflammatory or other accidents which may follow miscarriage. In general, under all circumstances, abortion induced by a sudden cause, is more serious, and more painful than that produced by a cause which has acted long upon the organism of the female previous to the misfortune, because the neck of the womb, in the latter case, is more easily relaxed and dilated for the passage of the fœtus. However, even in this case, Homœopathy can protect the women from many dangers.

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The treatment which abortion requires, has for its *primary* object the prevention; and aims *secondarily*, in cases in which it cannot be avoided, at conducting its course with less danger and pain to the mother; and, *finally*, labours to remedy or prevent the accidents which sometimes accompany or follow that evil.

In order satisfactorily to fulfil the first part of the treatment of abortion, the predisposing or occasional causes must, as far as possible, be removed. It should be ascertained, if these are incidental to faults of hygiene, whether in dress, habitation, avocation, or injurious moral causes, &c. The treatment should then tend, by suitable medicines, (which will be pointed out further on,) to remedy the dynamic effects of these causes. It then becomes necessary to investigate the patient's state of health anterior to her pregnancy, to be informed of any antecedent maladies; and to ascertain if there have been former pregnancies, or abortions, and under what circumstances; and especially the habitual state of the menstrual function. From these different indications, the nature of the patient's constitution and the dynamic causes, predisposing or occasional, may be deduced. If, in consequence of previous miscarriages, an habitual plethoric condition, or of great and general debility, an abundant leucorrhœa, habitual pain in the region of the uterus, &c., a predisposition to abort is recognised, this tendency should be combated without loss of time, by an appropriate regimen, and such medicines as are indicated by the state of the patient.

If she be plethoric, subject to a very profuse menstruation, to leucorrhœa, pains in the breasts, colics, pains in the loins, megrim, congestion of blood to the head or the chest, vertigos, &c., recourse must be had to

*Calcarea*, 30.

Three globules, dissolved in six teaspoonfuls of water; one teaspoonful of this solution being taken every morning for a week.[1]

[1] Refer to the note respecting doses at p. 85.

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For the next week,—

*Belladonna*, 30,

should be administered in the same manner, returning again to *Calcarea* as before, but pausing one or two days between the medicines.

When abortion has appeared to depend upon atmospheric influence and to be epidemic, as for instance, during the prevalence of influenza, *Camphor* (Saturated Tincture) is very serviceable, of which one or two drops may be taken on a small lump of loaf sugar three times a day.

*Sabina* is the most generally useful medicine, when the premonitory symptoms of abortion occur, in women who have already been subject to it. It may be taken in the manner indicated for *Calcarea*, for a few days before the ordinary menstrual period, until the time has passed at which the former miscarriages took place.

*Sepia* alone, or alternated with *Pulsatilla*, may be administered in the same manner, when there is abundant leucorrhœa; when the patient is sad, melancholy, feeble, gentle, perspires readily, has frequent colics, &c.

*Sulphur* is especially indicated if the patient has been or is subject to papular eruptions, with itchings, tendency to constipation, and hæmorrhoids: it may be given in the same manner as the others; and may be alternated with *Nux vomica*, especially, if she has experienced, from the commencement of her pregnancy, a pressive pain in the uterus, and frequent desires to urinate.

*Aconite* or *Bryonia* will be found serviceable in the cases previously alluded to, as dependent on a rigid state of the uterine fibres, if that should be distinctly ascertained to exist.

By this method, seconded by an appropriate regimen, miscarriage may be prevented with greater facility and certainty than by the bloodlettings, baths, &c., recommended by the school of "legitimate" medicine.

Nor is it necessary, under any of these circumstances, to confine the patient to the sofa; gentle and moderate exercise in the open air, on foot, and so as to avoid fatigue, should be advised. The patient should not travel by coach

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or railroad, — which is apt to be exceedingly injurious, owing to the jarring communicated to the pelvis and its contents,—and she should ascend and descend the stairs with caution.

Absolute rest, by weakening the constitution, adds a fresh cause to the predisposition already existing.

A substantial nourishment should be enjoined, avoiding too much at any one time: it would be better to divide it into several small repasts, regulated by the principles laid down by Hahnemann. Abstinence from coffee is here a rigorous and absolute necessity.

Matrimonial intercourse must be avoided.

When symptoms of abortion from one or more of the causes previously enumerated are manifested, such as pains of the abdomen bearing downwards, or labour-like pains recurring with regularity, accompanied with slight sanguineous discharge, &c., the woman ought to preserve a perfect quietude, extended upon the bed, and to abstain from food and hot drinks, so as to avoid everything which can increase the movements of the abdominal viscera: the most appropriate medicine should then be sought for, to neutralise the effects of the exciting cause of the symptoms present:—for instance, if the accident has been produced by a blow on the abdomen, a fall, a struggle, or any other mechanical cause which has in any way disturbed the uterus, the following should be given:—

*Arnica*, (tinct.) 3,

two drops in a wine-glassful of water, one teaspoonful of the mixture being taken every two hours.

This should be administered as soon as possible after the accident.

If the accident has been occasioned by an effort to raise a heavy weight, by a wrench in the loins, or a false step,—

*Rhus*, (tinct.) 3,

two drops, must be given in the same manner; or, if the hæmorrhage accompanying it is more violent,—

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*Cinnamomum*, (tinct.) 0,

in the like proportions. If the symptoms have been the result of a moral emotion, the medicine most suitable to counteract the effects of such a cause, as indicated under the head of "Moral Affections," must be immediately given. When, notwithstanding this, the expulsive effort continues, a medicine operating specifically, as regards the existing symptoms, must be employed.

*Ipecacuanha* is to be given, if there has been a fearful hæmorrhage of red blood, which continues, with pains about the navel, violent pressure at the uterus and rectum, chills, great debility, pallor, and nausea.

*Sabina* should be preferably selected, if the blood is less red, a little deep-coloured, emitted in large lumps, the discharge being attended with labour-like pains in the abdomen and loins.

*Pulsatilla* is indicated when the discharge is arrested for a few minutes, to return with greater violence afterwards, and is attended with expulsive pains, and deep-coloured blood mixed with clots.

*Belladonna* exercises a very special action upon the uterus. It is particularly indicated when there are violent pains of the belly, of a tight and pressive character, with a sense of obstruction in that region, and a kind of pressure downwards to the genital parts, as if the bowels would fall through; violent pains in the loins, as if the sacrum were being broken.

*Chamomilla* is indicated when the pains are so severe as to extort cries from the patient, as if the sacrum were being divided in two, and like an urgent desire to pass water or go to stool, occurring in fits, as in labour, followed by the discharge of a deep-red or black and fetid blood with clots; weakness, loss of vision, ringing in the ears, or fainting.

*Hyoscyamus* is an excellent remedy, if the labour-like pains are accompanied by convulsive movements and stiffness of the limbs, agitation, increased vivacity, or rigidity of the muscles, with loss of sense, obscure vision, delirium, &c.

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*Ipecacuanha* may be given also in the case of convulsions, and should be chosen in preference to the medicine last named, if there be not entire loss of consciousness, and if the pains are about the navel, &c.

*Secale cornutum* must not be forgotten, when miscarriage imminently threatens; if the woman is very feeble, and of a cachectic constitution, having a wan, fearful countenance, the pulse being almost extinct, with fear of death, copious flow of black, liquid blood, and disposition to convulsive movements.

*Nux vomica* is sometimes useful when there is continued constipation, with habitually profuse and long-lasting menstruation: and also if chills in the morning prevail, with a crampy pain in the region of the uterus, followed soon by pains in the loins, passing round to the belly, and downwards to the vulva, and afterwards by the escape of some drops of blood from the vagina; the uterus is felt contracting and relaxing under the hand at each recurrence of the pains.

In the article on Metrorrhagia will be found other medicines, which may sometimes be indicated by the occurrence of such symptoms as are therein detailed.

The medicines, in the case of threatened miscarriage, may be given in the lower or medium dilutions, attenuated in a considerable quantity of water, and in small portions at a time. Besides observing the most absolute repose, the patient should avoid all agitation of mind, much speaking, and hot drinks, especially coffee and tea; the diet should be exact and rigorous, the restrictions of which may be relaxed, as the threatening indications of abortion are removed. When all the symptoms have subsided, the patient should continue the horizontal position for eight days. If she has been much enfeebled by the great loss of blood, she must have—

*China*, 12 *or* 30.

Two globules, in a teaspoonful of water. When, from the state of the os uteri, or from other symptoms, the effort of abortion has proceeded so far as to remove all hope of

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arresting it, homœopathy can then render the greatest assistance in facilitating the complete expulsion of the contents of the womb, and in a manner void of danger. For this purpose, the instructions given under the head of Labour will suffice. The treatment to be adopted in the two conditions is similar, except that in the case of Miscarriage it is more necessary to avoid any manual effort of traction, &c., with a view to expedite the termination of the abortion,—which is more unnecessary here, inasmuch as the Homœopathic remedies adapted to this state are so much more safe, efficacious, and specific.

The expulsive (forcing) efforts, during the process of abortion, in the earlier months are often much more painful than in labour at the ordinary period, and sometimes so violent and intolerable that convulsions are brought on, in nervous and excitable subjects, particularly when it has been the effect of a sudden and recent exciting cause. In these cases,—

*Coffea*, 6,

will be of great service. Six globules, dissolved in a wineglassful of water, one teaspoonful of the solution being given every ten minutes.

Another important point is not to separate the fœtus from the secundines, by division of the cord, when it shall escape first, but to allow it to exert the slight traction which results from its connection, in order to facilitate the extrusion of the whole. After the completion of the delivery, repose and quiet are necessary for a few days, more or less, according to the seriousness of the circumstances which have attended upon the miscarriage, as well as to the period of the pregnancy at which it has occurred; and the after-treatment must be managed according to the rules prescribed for the puerperal state, a dose of—

*Arnica*, 6,

being given immediately.

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### EPHELIS.

Pregnant women are often subject to yellow or dingy stains, which occur in patches over the face, around the lips, or on the forehead or cheeks: they convey no sensation, and only produce inconvenience by the disfigurement which they occasion. This development of Ephelis is essentially the same as the *pityriasis*, which happens independently of the pregnant state, and, like that, sometimes assumes the form of a saddle across the nose. The same treatment is here indicated, and will be found successful, viz.—

*Sepia*, 30.

Three globules, dissolved in a wine-glassful of water, a tea-spoonful of the solution being taken night or morning.

If this does not suffice to remove it,—

*Sulphur* and *Lycopodium*

should be given after the same manner, or the *Sepia* repeated after a week's interval.

### FALSE PAINS.

Towards the close of the term of pregnancy, women are apt to suffer from pains like small labour-pains, which come on at a certain time every day or at night, but they have no effect upon the os uteri, which remains closed. If the period of labour has not arrived, a dose of *Pulsatilla*, 12, will be sufficient to put a stop to this abnormal action; and if it has, the same remedy will change the irregular into natural and effective pains. The condition of the pregnant woman being one of extreme susceptibility to impressions, it is reasonable to suppose, that remedies, selected in accordance with their specific relation to the symptoms developed by accidental or occasional causes, during such state, would possess a greater activity than at other periods, or when this augmented sensibility of the entire organism is absent. On this account, it is highly important to abstain from the

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administration of medicines, except when there is a positive necessity, to lay them aside as soon as the results are obtained, and as a general rule to prescribe them in the higher attenuations. One exception may, however, be quoted against this suggestion, namely:—that, as in certain constitutions it sometimes happens that the higher dilutions create invariably a perturbation or general disturbance, rather than a subsidence of the symptoms, I have in those instances given the lower dilutions with considerable effect, taking care to omit them as soon as possible. For the same reason the medicine given in a single dose, instead of being divided into several, answers better.

The two following cases, illustrative of the ill-effects of the lower dilutions in somewhat large and repeated doses, during the pregnant state, are related by Dr. Croserio.

"A young woman, twenty years of age, consulted him. She was tall, strong, and well built, with black hair and eyes; she complained of heaviness of the head; a stunned sensation, especially on stooping, and on raising herself afterwards; her countenance was red, the pulse full and regular; there was no other complaint but that the menses, which were usually abundant and lasted four or five days, were delayed a week. Attributing the indisposition to a plethoric state produced by the arrest of the function, and considering the whole of the symptoms, especially the constitution of the patient, he thought that a dose of *Aconite* would put an end to the disturbance: he put *two drops of the 3d dilution* into a wine-glass of water, and directed her to take a teaspoonful of the mixture every three hours. After the tenth spoonful, a very considerable discharge of blood took place from the uterus, together with the expulsion of an ovum, containing an embryo of four or five weeks. The ill-effects of the medicine require no comment. If pregnancy had been suspected, he would have given a dose of the medicine much more attenuated, and the morbid phenomena would, most probably, have been dissipated without the adverse occurrence of hæmorrhage, which is to be found among the rest of the symptoms characteristic of the medicine.

"The second case was that of a married woman at the

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eighth month of pregnancy, who was prematurely confined at seven months in the preceding one, and for this reason was restrained to the sofa in a state of perfect quiet by her medical adviser. She consulted him for constipation, loss of appetite, with thirst, agitation, and want of sleep at night, and cramps in the calves of the legs. These symptoms sufficiently indicated *Nux vomica*. He prescribed three or four globules of the 30th dilution in a glassful of water, to be taken by teaspoonfuls, one every night on going to bed. From the first dose a favorable effect was produced; the sleep was better, and the next day the meals were taken with more relish; the medicine, notwithstanding this amelioration, having been continued, two days afterwards there supervened slight pains in the loins and pinchings in the belly: in a few days more the waters broke, and labour came on, when she was delivered of a healthy child, before the ninth month, which happily lived. If the medicine had been suspended after the first effects, as the patient was forewarned, it is probable that the accident would never have happened, for in place of the primitive effects, which are proper to *Nux vomica*, such as, '*in the morning pressing through the genital organs, with contractive cramp in the abdomen and uterus, the menses four days too soon, menorrhagia, &c.*,' the *Nux vomica* would have excited only a salutary reaction, that is to say, the re-establishment of the functions of the organs of digestion; and if she had observed the hygienic rules, her pregnancy would have continued to the natural term."

## THE PROPHYLACTIC TREATMENT APPLICABLE TO CHRONIC AND HEREDITARY DISEASES.

In order to diminish the evils which afflict humanity, and break in upon those hereditary disorders which are transmitted from parent to child, it is absolutely necessary to act upon the germ through the organism of the mother. Homœopathy alone possesses this power, for it is only by infinitesimal doses that the deeper recesses of the animal economy can be specifically operated upon, and a new direc-

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tion given to the vital processes of the reproductive organs. Allopathy, on the other hand, exhausts its influence upon the superficial tissues of the body, and, except in the cases in which the poisonous effects of mercury and other minerals are manifested, the organism is never penetrated by its remedies at all, and consequently no curative power can be exerted over the vices of the embryotic organism.

Numerous observations have been made of mothers, who, having lost their children at an early age, or having seen them afflicted with serious scrofulous affections, have submitted themselves throughout their pregnancy to the conservative prophylactic treatment, and have thereafter borne robust healthy children, whose growth was regularly and unusually progressive; and who have even been insensible to the influence of the vaccine virus, and equally unaffected by the ordinary diseases of childhood. It has been remarked, repeatedly, that very robust and continuously healthy children have been born of excessively sickly and unhealthy parents, (yet susceptible of the impression of the vaccine virus,) when the mothers had submitted to the ordinary homœopathic treatment for the indispositions which they had experienced during their pregnancy. The advantage cannot be too strongly enforced of paying the greatest attention to the constitution, and to the slightest symptoms of a pregnant woman whose health has been invaded by disorders of any peculiar or specific character, and to the administration of the medicines suitable to these circumstances, because by such means not only would the mother be relieved, but the constitution of the future infant would be ameliorated, and its robust health, in many cases secured, or at all events enhanced. It is thus that the enlarged views of the great Founder of Homœopathy can be carried out and perfected, and the human race be regenerated,—by the cure of chronic, and the obliteration in embryo of hereditary disease.

*Sulphur*, 30, and *Calcarea*, 30, should be given to the mother alternately, from time to time, at different periods of her pregnancy, and at distant intervals, (immediate treatment of intermediary acute symptoms, requiring other medicines, excepted,) in order to purify the fœtus from the psoric

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or scrofulous disposition which it may inherit from its parents, whenever any symptoms indicative of the presence of these miasms are present either in the parents or in previous children. But if there be any suspicion of the syphilitic taint, as evidenced by the present or past history of the individuals, *Mercurius solubilis* should be given in a high degree of attenuation. On the other hand, however, to administer the medicines to the mother, *without any indication* afforded by symptoms past or present, during so susceptible a period as that of pregnancy, would be to act contrary to the principle, *similia similibus curantur*, and would probably provoke the manifestation of the primary symptoms of the drug, which might have the most serious consequences, such, for example, as hæmorrhage and abortion.

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## TREATMENT DURING LABOUR.

Delivery by art would seem to be one of the results of civilisation; whether the latter is to be condemned for this appliance, (as one amongst other evils which have followed in its train,) we will not stop to inquire, but we may consider it a fortunate circumstance that art has kept pace with the necessities which the habits of civilised life have created; and at the same time that we witness the comparative simplicity with which the processes of nature are carried on and completed amongst the subordinate animals, or in savage life, we may be grateful for the succours that enable us to meet the former difficulty.

The necessity which exists for the tutored skill of the accoucheur is, however, most apparent in the two extremes of civilised society. The soft and careful training, and the luxurious habits of the affluent, expose them to disordered actions of the vascular and nervous systems during the period of labour; the privations and laborious mode of life which weigh upon the poor, dispose them to alterations of structure, and to painful or inflammatory derangements, which obstruct or complicate this otherwise natural process; but the middle class, possessing only so much of the exposure and activity

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of the latter as amounts to active exercise and healthful recreation, and no more of the conservative habits of the former than suffice for the prevention of evil, have advantages which are not to be found any where else, and although even here it sometimes happens that art is requisite to assist nature in her operations, the instances are not common, and the homœopathic practitioner can do much to prevent the necessity for manual or instrumental interference.

We pass over the details of preparation, so well known to the accoucheur, and explained in the ordinary works on Practical Midwifery, and proceed to the consideration of the different stages of labour, and of the homœopathic treatment applicable thereto. In order that the expulsion of the fœtus may take place without accident, it is necessary, *first*, that the orifice of the uterus be sufficiently open to afford free passage to its contents; *secondly*, that the contractions of the muscular fibres of the body of the uterus, aided by those of the diaphragm and abdominal muscles be sufficiently strong for the expulsion of the child; *thirdly*, that the channel through which the child has to pass does possess the necessary dimensions to afford it a free passage; *fourthly*, that the size of the child be proportioned to the capacity of the passage which it has to traverse, and that it should present those parts of its own body which offer corresponding diameters.

The opening of the orifice of the uterus is gradually effected by the action of pains which are called preparatory. The accoucheur should watch for the time when these pains assume a regular character.

When he is called upon to attend a woman who is suffering from these pains, he will assure himself as to whether or not the term of utero-gestation is completed; and if not, he should be guided by the instructions heretofore laid down in respect of False Pains, p. 121. If the history and the state of the os uteri indicate that the proper time for delivery has arrived, and the pains progress with regularity, he will, of course, let nature take her course. If the pains do not progress, he should inform himself by the touch of their nature, and if he does not feel the os uteri contract and relax during

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the pains, this will be a sign that they are false and evanescent.

He may administer a dose of *Pulsatilla* to disperse these pains if they are false, or to augment their force and regularity if they are premonitory of labour.

When, in spite of the pains being sufficiently strong and frequent, the distended membranes do not present, some deviation from the normal position of the infant may be suspected, or a shortening or twisting of the cord may exist. It is then important to ascertain by a careful examination, without risking the premature rupture of the membranes, the actual position of the child.

If a malposition be recognised, it will be prudent to administer a dose of *Pulsatilla*, before the rupture of the membranes, and without allowing the pains to proceed further. It has not unfrequently happened that an unfavorable presentation has been by this means converted into a favorable one, by the simple induction of the more natural and instinctive action of the uterus.

When the earliest pains are experienced, especially with first children, the patient is frequently seized with a certain dread or anxiety: she experiences a sort of trembling, which should not be confounded with that which is manifested at the moment when the pains become expulsive. This alarm and anxiety are usually dissipated by a calm and assured manner in the accoucheur, and in the other persons who surround the bed. All whispering or signs should be avoided, as the patient is very susceptible at this period, and is ready to imagine every kind of evil. If the symptoms continue, a dose of *Aconite*, 30, should be given.

To keep the patient marching about at this time, is not always prudent; but this must be determined by the circumstances and condition of the patient.

If, notwithstanding the continuance of the pains, the os uteri continues closed with thick, pad-like edges, a dose of *Belladonna*, 30, may be given.

If this does not alter the condition of the os uteri, and the pains still continue, a dose of *Pulsatilla* may be given, ascertaining, as far as possible, the position of the child.

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The formation of the pouch or bag of waters is subject to the same varieties; and, from like causes, the same treatment may be adopted to facilitate the process. Notwithstanding the indications which he may have discovered of the position of the child before the rupture of the membranes, the accoucheur will not fail to ascertain it with more precision after that has taken place.

When notwithstanding the administration of the remedies above named, the membranes are slow to break, the os uteri being sufficiently expanded, and the protrusion of the membranes being considerable,—the uterine efforts yet fail in producing an effect upon the descent of the child, in proportion to their severity,—then it will abridge the duration of the labour and greatly relieve the patient, to rupture the membranes.

With regard to the indications for manual or instrumental delivery, they are well known, and are treated of in other practical works upon that subject, being equally applicable as associated with Homœopathic treatment; but it may be borne in mind, that in all the positions of the head and inferior extremities of the child, the natural powers, aided by the administration of the suitable Homœopathic remedies, will generally accomplish the desired end.

### HYGIENIC TREATMENT DURING LABOUR.

During the progress of labour, which may last from one to twenty-four hours—or even longer—the woman demands care and attention, to assist her in comfortably supporting the fatigue, suffering, and anxiety, which are induced by it.

When a woman is first seized with the premonitory symptoms of labour, she should remove all strings or ties, which may bind the body or the neck; should remain in a well-aired and moderately warm apartment; abstain from all indigestible food; and preserve, as much as possible, a cheerful and composed state of mind. Gentle exercise about the room will assist the operations of nature; but during the pains she should take up a convenient position, which may favour the efforts which she is constrained to make. After the escape of the waters, if not before, she should be placed in

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the position, in which she intends to be delivered: the bed being properly prepared, she should lie on the left side, with the head and shoulders raised, and the body slightly on an inclination. During the first stage of labour, it will not be necessary to make frequent examinations; but during the other stages, it is important to watch the progress closely. The accoucheur should remove from the vicinity of his patient, every kind of odorous substance, aromatics, orange-flower water, Eau-de-Cologne, &c.

The best drinks for her will be gruel, sago, barley-water, toast-water, milk and water, a cup of weak black tea; or, if the labour is protracted, panado, beef-tea, or light vegetable soups. Light food, however, is apt at this time to turn sour, and create heartburn. All spiced gruel, cordials, stimulants, coffee, &c., should be forbidden.

## MEDICAL TREATMENT DURING LABOUR.

The condition of the mother may likewise exert some influence on the progress of the labour, by causing either a diminution or cessation of the pains; fainting, cerebral congestion, convulsions, and hæmorrhage.

When the pains are too feeble and slow, and do not augment progressively, as they ought to do, if the child presents one of the extremities at the longitudinal axis, and if the patient be in other respects well, the accoucheur need not be precipitate in administering a remedy, as in this case the medicine might induce a sudden augmentation of the uterine action, and rupture of the perinæum might possibly ensue, as the consequence. But if the waters have escaped for some length of time, and if the patient be feeble, the pains failing to increase in force or frequency, the best means to excite and render them effective is to give *Pulsatilla*, 30. Two globules, dissolved in half a wine-glass of water, will generally suffice. The effect of *Ergot of Rye* (*Secale cornutum*), is not to be compared to that of *Pulsatilla*, in the generality of cases; but is preferable in some. In about ten minutes the pains return, become strong, expulsive, and recur with successive augmentation, until the end.



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However, if the patient should be very feeble, and be troubled with cramps in the legs and feet, and if she has already had several children, *Secale cornutum*, 30, may be given ;—three globules being dissolved in a wine-glassful of water, and a teaspoonful of the solution being administered every half hour, until the pains are developed. *Secale cornutum*, given in Allopathic doses, has often been productive of serious results.

Inflammation of the uterus; rupture of the perinæum; death of the child; suicidal disposition in the mother, are amongst the ill-effects that have followed the use of that drug in the old method; but it was never known that these were some of the primitive effects of the drug.

When the pains settle principally in the back, without effectively promoting the progress of the labour, *Pulsatilla* will again be found very serviceable.

If the pains have been arrested by a moral cause, such as bad news, anger, &c., the remedy suitable to the cause must be immediately administered.

If, after having proceeded regularly for some time, the pains should be suddenly arrested, without any specific cause, and heaviness of the head, drowsiness, &c., stiffness and trembling of the limbs should ensue, we prescribe—

*Opium*, (tinct.) 6,

two drops in four table-spoonfuls of water; of which mixture a teaspoonful should be given every half hour, until the cessation of the symptoms and the return of the pains.

The pains may also be ineffectual, in consequence of the excessive nervous sensibility of the patient, the severity of whose sufferings would seem to arrest the complete development of the uterine contractions. In this case, the patient cries much, is agitated, and finds the pains insupportable.

A dose of *Coffea*, 6, will moderate this exalted sensibility, and restore the pains to their regular course. If the relief afforded by this medicine be of short duration, or if the patient has been accustomed to the use of coffee as a beverage, *Aconite* should be given. When these insupportable pains are accompanied by a constant desire to have a motion, or to pass

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water, attended with ill-humour, impatience, or disposition to grieve, we give *Nux vomica.* If the violent pains are accompanied by nervous anxiety and agitation, with shakings in the limbs, inquietude, fear, tears and despair, *Chamomilla* should be given. If these means have not produced a sensible relief at the end of an hour, *Belladonna* must be administered.

*Fainting* is an unfavorable occurrence during labour, and sometimes a very serious one, as it may indicate the occurance of an internal hæmorrhage, which is not perceptible by external discharge, and might cause the death of the mother and child. When the patient feels faint and ill, if it be the effect of inanition, nourishment must be given—such as beef-tea, or a little sound wine ;—if the disposition to faintness does not depend on this cause, *Nux vomica* is the most suitable medicine ; and this remedy will also be the more efficacious, if the patient is feeble, subject to pains in the stomach,—or has nausea, with pallor, anguish, and trembling.

*Veratrum* will be preferable when the fainting happens on the least movement, and the patient experiences anguish, dejection of spirits, or some convulsive disposition, with general coldness.

*Aconite,* 30,—three globules, dissolved in a wine-glass of water, of which solution a teaspoonful should be given every hour—is appropriate, if the faintness is attended by violent palpitations of the heart, flow of blood to the head, &c.

If the Faintness is judged to arise from internal hæmorrhage, recourse must be had either to rupture of the membranes, or to the remedies indicated under that head, which will induce more active contractions of the uterus, and terminate the labour speedily, and so prevent a recurrence of the faintness.

*Pulsatilla* and *Secale cornutum* will fulfil these indications very well, especially the latter, if the hæmorrhage has already been considerable, and continues; in this case, *two drops* of the *tincture* (30th dil.) should be mixed in a wine-glassful of water, and one teaspoonful of the mixture given every five minutes, until the complete expulsion of the contents of the uterus.

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In dangerous cases, the practitioner should be ready to terminate the delivery by the feet, if the medicines do not very speedily show some decisive action.

## OBSTACLES IN THE MATERNAL PASSAGES WHICH OPPOSE DELIVERY.

These consist in deformities of the pelvis, which narrow the diameters; or in osseous tumours, which produce the same effect; or in tumours developed in the body, the neck, or orifice of the uterus,—or in the membranes of the vagina, —or at the vulva;—and in a congenital or accidental, and morbid contraction of the vagina, or vulva.

The accoucheur ought to ascertain, as soon as possible, during pregnancy, (but especially during labour, if he has not done so before,) the state of the pelvis, and the passages through which the child has to pass; to decide whether delivery can take place naturally, or if there be any obstacles which demand the aid of artificial means, that they may be removed before or during the process of labour, or be overcome in case they cannot be removed,—or that he may be prepared to resort to ulterior measures, if such obstacles be evidently insuperable.

Malformation of the pelvis, or the existence of tumours which leave only two inches and a half of diameter, require of the accoucheur only patience and attention to sustain the expulsive powers of the mother, by the means before pointed out, since delivery may, after all, take place without instrumental interference; but if the labour should have continued thirty, or, as sometimes happens in these cases, sixty hours, and the pains begin to fail, *Secale cornutum*, 30, should be administered,—six globules being dissolved in a wine-glassful of water, and a teaspoonful of the solution given every ten minutes;—this will often re-excite the uterine contractions, and expedite the delivery. Tumours of the soft parts ought to be treated during pregnancy, if they be made known to the practitioner: during labour, he can only endeavour to remove them by manipulations suitable to the parts; and if he cannot thus accomplish his object, he should administer

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such medicines as will aid the uterine contractions to overcome the obstacle.

If that obstacle should be a vaginal hernia, a dose of *Nux vomica* will probably produce a reduction of it, and render any further treatment unnecessary.

The escape of the umbilical cord will require, likewise, the employment of *Pulsatilla*, if one cannot succeed in maintaining its reduction in *situ proprio*. When contraction of the vagina is congenital, and occurs without induration, or any other morbid organic alteration, the efforts of nature ordinarily suffice to overcome the obstacles to delivery.

If the contraction of the vagina is produced by a tumour in its parietes, or surrounding tissues, it must be remedied according to the necessity of the case, as long as possible before the period of delivery. This injunction is equally applicable to the obstacles presented by the narrowing, or contractions of the vulva.

When the hymen has continued un-ruptured, it will be destroyed by the gradual dilatations, or by an incision made before the termination of the pregnancy, in order to prevent the tearing of the membrane, which might involve that of the perinæum, during the passage of the head.

In cases of inflammation, with swelling of the vagina and vulva, the medium dilutions of *Mercurius solubilis* will avail greatly to reduce them: the dose should be repeated every four or six hours. *Thuja* is likewise very useful in these cases.

Sometimes, especially with primapari, the vulva, although it has a normal conformation, seems to offer an insurmountable obstacle to the delivery, owing to the too rapid distension demanded by the activity of the pains: this circumstance arrests the expulsive efforts, and threatens to produce convulsions. The pomade, or other greasy material, with which the parts are usually lubricated, is of no real use.

*Coffea*, 6,—three globules being dissolved in a wine-glassful of water, and a teaspoonful of the solution given every ten minutes,—will calm the pains, and give time to the tissues to yield to the distension necessary for the passage of the infant. In order, under these circumstances, to preserve the perinæum from rupture by the passage of the head, it is prudent to

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support it with the hand,--not applied directly upon the distended skin of the part,—but by endeavouring to draw, or bring together, the skin of the neighbouring parts towards the perinæum, to relax it as much as possible, and so facilitate the distension, by means of the fingers and thumb pressed upon the contiguous fold of the thighs: a pressure made upon the parts, at this moment, weakens the resistance of the fibres, and facilitates, rather than prevents, the laceration.

*The obstacles offered by the infant* to delivery are very little under the influence of medicine. False positions, if they have not been changed by the treatment advised heretofore, require manual assistance. Enlargement of the head, hydrocephalus, and other deformities, are also in the same category, if the practitioner does not consider, that the dynamic action of *Pulsatilla*, or *Secale*, will be sufficient to put nature in a condition to expel the whole.

The evils resulting from a short umbilical cord, may be obviated by the use of Homœopathic remedies. When there is reason to suppose that this cause is operating counter to the advance of the labour, as indicated by the usual signs, —such as, the undue tardiness with which the head advances during the uterine contractions, the prompt retraction which takes place the instant that the expulsive effort is passed, the sudden suspension of the contraction, just when it seems to have attained its highest degree, a dragging sensation felt about the umbilicus by the woman during the pain, and an anxiety as if the parts would be plucked out,—*Pulsatilla* should be given as heretofore pointed out, and the labour will proceed so as to prevent all accident to the mother and child.

When the child is known to be dead, particularly if it has been dead for some time, a certain degree of debility with which the mother is impressed, if not the absence of resistance on the part of the child to the expulsive efforts of the uterus, induces a protracted and tardy labour. In this case the administration of *China*, 18,—six globules being dissolved in a wine-glassful of water, and the solution being given by the teaspoonful every hour or two,—will dissipate the symptoms.

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Then, if the pains still continue inefficient, a dose of *Secale* or *Pulsatilla* may be given as before directed.

Dr. Kollenbach of Berlin has stated, that he never experienced any advantage from the use of *Pulsatilla* or *Secale*, when administered with a view to produce the expulsive contractions of the uterus during labour. This assertion of that intelligent physician can only be explained by the fact, that he administered usually from three to five drops of the mother tincture, and never exhibited either of these medicines above the third dilution. He gave five drops of the mother tincture of *Pulsatilla* to a parturient woman; she experienced after it only considerable malaise, but without any augmentation of the pains! The extreme susceptibility of the constitution of the woman at this time prevents the reaction of the remedy taking effect, when overpowered by so potent a dose; or, in other words, the vital powers being already much exhausted by the pains and other circumstances of the labour, are overpowered, so far as their reactive capabilities are concerned, by the low potency; whereas a higher dilution just ensures a gentle and adequate reaction. It may be asked, how can the extreme susceptibility of the system be reconciled with the exhausted vitality here supposed? I reply, —in the same manner in which a high degree of vascular action is reconciled with little power, as constantly occurs in febrile, nervous states of the body. It is, moreover, the predominant condition in the puerperal and suckling states.

It is well known, too, that parturient women are readily affected by the slightest odour, from the exalted state of their nervous susceptibility. It was common for a celebrated accoucheur to advise his pupils not to bear about with them odoriferous substances; because, one day, he was visiting a patient in labour, who, almost immediately after he was seated, was observed to faint away, although she had been perfectly well till that time; and he discovered that this casualty had been occasioned by the scent of a violet which he had in his button-hole. To so sensitive a condition of the system, is it not more suitable to apply remedies as attenuated as possible?

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## TREATMENT AFTER DELIVERY.

It often happens that the uterus is affected with irregular muscular contractions after the birth of the child, which either cause a disposition to hæmorrhage, or a retention of the placenta by the hour-glass contraction. This more especially takes place in nervous or irritable subjects, who have been more or less exhausted by the course of the labour. The best means to avert this disposition, is to administer the following, immediately after the child is separated :—

*Arnica,* (tinct.) 3,

two drops in four table-spoonfuls of water ; a teaspoonful of this mixture being administered every five or ten minutes. It will be found to soothe the system so satisfactorily, that the placenta is thrown off more perfectly, and the uterine contractions are effectively completed. I uniformly adopt this practice, as it cannot always be predicted when hæmorrhage will occur, and I have found it avert the evil which, in former labours, had invariably ensued. It may also be given at longer intervals during the first day, unless it be found nccessary to administer the remedies recommended for After-Pains.

## RETENTION OF THE PLACENTA.

Shortly after the expulsion of the child, the mother complains of some slight pains in the abdomen, accompanied by an expulsive effort, which is followed by the extrusion of the placenta and membranes of the ovum, (or after-birth.) This occurrence occasionally takes place at the same time with the birth of the child, the last expulsive pain detaching and expelling the secundines along with the infant. But the time usually varies from a quarter to half an hour : sometimes, however, a longer time elapses ; no pains are felt which indicate the renewed uterine contractions ; and on passing the fingers up along the cord it is traceable into the cavity of the uterus, and the placenta is not to be felt in the vagina.

In this case, traction of the cord is unadvisable; but light

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frictions of the abdomen may be practised, and if these fail to induce the requisite contractions, *Pulsatilla* should be given, as before directed. This will generally reanimate the uterus; and if the placenta is retained by any irregular contractions of the uterine walls, it will determine a more equable and perfect action of the muscular fibres.

If the patient should be very feeble, from the nature or circumstances of the preceding labour, *Secale cornutum*, 30, is to be preferred, and may be given in the same manner.

## HÆMORRHAGE AFTER DELIVERY.

This is the most dangerous accident to which a woman can be subjected after delivery. When the child is born, or during the separation of the after-birth, a small quantity of blood escapes, which varies in proportion to its slow or rapid detachment. The accoucheur should never lose sight of this discharge, to be assured that it does not exceed the proper quantity. If it be too abundant, he will seek for the cause of this casualty, in order to correct it at once by suitable means. If the hæmorrhage be produced by adherent placenta, or by inertia of the uterus, and the absence of the contractions of this organ necessary to close the mouths of the vessels which have been exposed by the partial or entire detachment of the placenta, recourse must be had to *Pulsatilla* or *Secale cornutum*. In this case, as in all those in which there is a continued loss of the fluids of the body, the dose must be repeated very frequently, (every five or ten minutes,) until the hæmorrhage diminishes, and then the intervals may be prolonged in proportion. The same remedies will be indicated, if a coagulum, being arrested, at the orifice of the womb, interferes with its due contraction, and so admits of the continued flow of blood.

Occasionally, the blood poured out by unclosed vessels is collected and retained within the uterine cavity, which continues to be additionally dilated by the augmentation of its contents, and gives rise to faintings and other symptoms indicative of danger, without any outward escape of the blood. This internal hæmorrhage is apt to be overlooked,

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until the state of the patient excites alarm. This modification of uterine hæmorrhage is also under the control of the medicines which exercise a specific action upon the muscular fibres of the uterus, and which, at the same time, correspond to the hæmorrhage; here, again, the two remedies previously mentioned, *Pulsatilla* and *Secale cornutum*, are most useful; but sometimes *Sabina*, *Belladonna*, or *Nux vomica*, may be substituted for them, if in more exact accordance with the symptoms.

Sometimes after delivery the hæmorrhage is frightful, occurs at a moment, with a continuous stream of red and liquid blood; in this case *Ipecacuanha*, 6, is the remedy best indicated, especially if the hæmorrhage is accompanied by pains in the umbilical region, with pressure in the uterus and towards the rectum, chills, heat of the head, great debility, paleness of face, and nausea.

The administration should be regulated, as follows:—

*Ipecacuanha*, (tinct.) 6,

two drops in four table-spoonfuls of water; a teaspoonful of this mixture being given every three or five minutes.

*Sabina* is likewise very useful when the blood is grumous, and the discharge is attended with pains in the belly and loins, resembling the pains of labour.

*Crocus* is indicated, here as in epistaxis, when the blood is black, viscid, and mixed with large clots; also when the woman feels movements in the belly, as if there were a ball, or something alive, and when yellow countenance, anxiety, disturbed vision, and frequent fits of fainting are manifested.

*Chamomilla* is required if the blood be of a deep-red colour, and escapes by jets, the discharge being attended with expulsive pains in the belly, violent thirst, coldness of the limbs, paleness or redness of the face alternately, or of one cheek, and attacks of fainting.

*Belladonna* will be preferable when the pains are violent, compressive, and tight; with sensation of constriction or compression in that region; and a kind of pressure at the genital parts, as if the womb would pass out, with a pain in the sacrum, as though it would break.

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*Hyoscyamus* is useful under much the same circumstances as *Ipecacuanha*. When, however, the hæmorrhage is attended by convulsive movements, and even by real convulsions; especially likewise when the subjoined symptoms occur:—great agitation, extraordinary vivacity, general trembling or stiffening of the limbs, confusion of sight, loss of sense, delirium, twitchings of the tendons, or convulsive shakings in the limbs, which alternate with a tetanic rigidity; general heat, with fulness and frequency of the pulse; swelling of the veins of the hands and face.

*Ferrum* will be successful when the woman shows symptoms of excitement of the arterial system, with headache, vertigo, red, turgid face, full and hard pulse; if the blood escapes in abundance, partly liquid, partly mixed with black clots, and the discharge is attended with pains in the loins and expulsive pains in the belly.

*China*, 18, may be given, if the loss of blood has been considerable, or does not cease on the administration of other remedies; even where the exhaustion of vital power is extreme, and there are apprehensions of a fatal result; or again when there are the following symptoms:—dizziness of the head, loss of vision, weariness, faintness, coldness of the limbs, paleness of the face, or blueish colour of the face and hands, with convulsive shocks.

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## THE PUERPERAL STATE.

The great errors which have been committed in the treatment of the diseases of pregnancy and the puerperal state, have arisen from a want of duly studying and taking into consideration the several peculiar and special conditions incident to those two states. Whilst on the one hand, they differ materially in their essential features, not only with regard to each other, but also in comparison with the ordinary diseases to which the organs are subject, apart from the parturient or puerperal condition; on the other hand, they agree in being connected with a peculiar manifestation of the nervous and vascular systems which obtains at those

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periods, and which rules and controls the character of disease. In pregnancy, if one might make the distinction, we should say that the development of the vascular system prevails most, and consequently lends the type to the diseases to which the female economy is liable during that period.

In the puerperal state, the nervous system, rendered still more susceptible by the various circumstances attending parturition, exercises a more prevalent influence over the diseases of that period.

But in the parturient state, the combined operation of the two regulates or controls any morbid operations which may be going on during its continuance.

Individual idiosyncrasy, or peculiarity of temperament, will undoubtedly exert a powerful influence over the character of disease developed during either of these important periods; but these instances are rare, and form exceptions to the rule.

It may readily be conceived, that the predominant action of the nervous system, in a delicate and irritable subject, would, under the operation of exciting causes, more easily induce neuralgiæ of various kinds in the pregnant state; in the parturient, convulsions of an hysterical or epileptic character; or, in the puerperal, intestinal irritation, mania, or melancholia; whilst in a robust, plethoric, and entonic or sanguineous subject, the same abounding influence of the vascular system would more surely determine the development of congestions or inflammations in the first; the more alarming form of cerebral convulsions in the second; and phrenitis in the third.

Nevertheless, the peculiarity which marks the puerperal state would seem to depend upon a modification of the nervous system, characterised especially by increased susceptibility to impressions, and increased mobility, closely allied to that state, which exists during morbid or protracted lactation, in fact in diminished sensorial power. The aroused susceptibility, which is thus developed throughout the entire animal economy, gives occasion to that series of morbid actions in distant and apparently dissimilar organs, which we often find to prevail in the puerperal state, and which are

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held together by the extensive sympathetic and associated relations, as by an invisible link whose existence under ordinary circumstances is so little patent to observation.

Under these circumstances, it requires no reasoning to prove, that a moderate degree of local irritation would produce a dangerous extent of vital exhaustion, as is witnessed in intestinal irritation during the puerperal state; or in the effect of suckling, when the system is not in a condition to bear it.

The converse is also observed, when a total failure of the lacteal secretion takes place, owing to a general morbid irritability of the system, which absorbs all the nervous influence, and thereby prevents the establishment of the temporary function.

"In puerperal diseases it is more especially true, that observation of the disease throws more light on its morbid anatomy, than its morbid anatomy on the nature of the disease. The symptoms illustrate the morbid appearances better than the dead morbid appearances do the living symptoms."[1]

These just remarks of Dr. Gooch can only be explicable on the ground, that the diseases to which the puerperal state is most obnoxious are diseases of the nervous system, the proximate causes of which are, to a great extent, involved in obscurity. In estimating correctly the various affections of the puerperal state, it is essential, then, to bear in mind this peculiar modification of nervous susceptibility or power by which that state is characterised, by doing which we shall avoid many of the errors of hygieue, regimen and medicine, which have too often led to fatal consequences.

The uterus, having been duly supplied with an augmentation of vascular and nervous tissue, and consequently also of energy, both of which have been subservient to the purposes of utero-gestation, becomes suddenly altered in its condition by the act of parturition. It may appear astonishing that the accumulated supply of the vascular and nervous structures, solid and fluid, which has been the work of months, should, in the brief space of an hour or two, be disposed of,

[1] Gooch on 'Diseases of Women.'

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and reduced to its former ordinary limits; but this is one of the arcana of nature, and proves "how fearfully and wonderfully we are made." The vascular supply escapes by the normal discharges from the uterus, during and after parturition, both in the actual loss of blood at the time, which in some cases is considerable, as well as in the lochia which follow. The nervous supply is exhausted, partly by the parturient efforts, to which I think it may fairly be attributed, and partly in consequence of the exhaustion caused by the hæmorrhage and lochial discharges, both the blood-vessels and nerves being for the time obliterated, by the contraction of the uterine fibres.

The immediate effect of this process is what has been denominated "the shock."

For the most part, after a labour of great difficulty, even if the patient be of a sound constitution, only a moderate perturbation of the system is produced, and two or three hours rest, especially if accompanied by sleep, is sufficient to restore the equilibrium. In other cases, however, an imperfect reaction takes place, symptoms of depression or exhaustion are manifested, or reaction occurs too forcibly, passes beyond the boundaries of health, and induces proximate and remote evils.

The susceptibility of the organism, during this condition, is very great; slight causes operate unfavorably upon it, and a strong predisposition to morbid action exists.

The form which this morbid action may take, when lit up in the system, under such circumstances, is determined by a variety of causes. *First:* the state of health of the individual prior to parturition;—*secondly:* the degree of exhaustion or inanition which has ensued upon it;—*thirdly:* the operating causes;—*fourthly:* the individual temperament;—*fifthly:* the state of the organs themselves, and of others associated by sympathetic relations with them.

1. The state of health previous to parturition may materially influence the recovery after that event. The practitioner should, therefore, take care that, as far as possible, the different functions of the body, if disordered, be restored to a tolerably healthy condition. The state of the abdominal and thoracic

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organs, of the brain, and of the nervous system, should be carefully inquired into; all congestions speedily removed, and tendencies to irregular actions, whether of the circulatory or nervous functions, watched and controlled. It is not uncommon for passive congestions, or subacute inflammations of the abdominal viscera, to exist in a dormant state during the latter periods of pregnancy, and to become developed when the reaction from the shock of parturition has taken place: in the same manner a morbid irritability of the brain and spinal marrow may be acquired during the pregnant state, and may give rise to convulsions evoked by an exhausting hæmorrhage. The uterus may undergo change during pregnancy, from subacute inflammatory action, which may induce a state of softening, and this may predispose to rupture, or hæmorrhage, or inflammation of its substance, phlebitis, peritonitis, or puerperal fever.

2. Exhaustion of the vital power, either from hæmorrhage or long-continued suffering, is often productive of present and remote effects of a dangerous character; convulsions; syncope; morbid lactation; and all the ill-effects of loss of blood.

3. It is important to avoid or remove all causes which have a tendency to excite, keep up, or to predispose to morbid action; such as the various mental emotions, the elevating or depressing passions, errors of regimen or diet, the influence of close, impure, and miasmatous air, foul exhalations, imperfect ventilation, and infectious effluvia. These, for the most part, conduce to the production of mental diseases; colics and diarrhœas,—and of the peritoneal or puerperal fevers.

4. The individual temperament,—if sanguineous and plethoric,—may dispose to the developing of phrenitis or acute mania, to inflammatory conditions of different organs, to active congestions;—if nervous or melancholic,—to melancholia, to intestinal or uterine irritation, and to passive hæmorrhages.

5. The uterus may contain within its cavity sources of irritation, which can be the exciting causes of disease; such as coagula, morbid lochia, displacement of the organ, &c. In the category of associated actions and sympathies we have

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the influence of lactation upon the puerperal state; this too is very important. If, in the ordinary state of health, the establishment of this function gives rise to little inconvenience, it is yet well known how slight a cause will disturb it; and in some instances, where a morbid state of the constitution exists, the febrile irritation which accompanies its access is fraught with dangerous consequences. A lady upon whom I was attending, and whose nervous system was unusually impressible, had a morbid pregnancy, which commenced with severe vomitings; then followed violent periodical palpitations, and, in the latter months, an attack of hysteritis. She was confined of a living child, without any casualty during or immediately after labour. Three days passed over without any appearance of the milk; in other respects she seemed to be doing perfectly well; there was no other morbid symptom. On the fourth day, however, a rush of milk occurred, which was attended with such an amount of irritation, that she was immediately attacked with pain in the abdomen, and acute inflammation of the womb set in. The approach of the milk caused a violent thrill through her frame, which was followed by rigor. The hysteritis proceeded; the milk, which was so abundant for one day, disappeared: she slowly recovered from the attack; but the heart then took up a morbid action, and dropsy terminated her life some months afterwards.

Dr. Gooch relates an analogous case, in which mania was the disease developed at the time when the lacteal secretion was expected.

There is no doubt, that in the puerperal state, as well as in the peculiar condition of system, which sometimes obtains during protracted or morbid lactation, there is a predisposition to the occurrence of mania, melancholia, and some corporeal diseases; the former, it may be inferred, more especially depends upon the proneness to ready exhaustion of the sensorial power, which prevails in these subjects, while the latter may have the same relation, with a constitutional predisposition to exhaustion of other parts of the nervous system, co-operating with some local irritation. In illustration of this, we have an interesting and instructive lesson

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afforded us in the paper published by Dr. John Clarke,[1] on the morbid influence of oysters, taken during the puerperal state, upon the brain. In all the cases related by him the convulsions occurred after delivery; and in some instances after the patient had resumed her domestic duties, in the third or fourth week. The first indication of the deleterious influence of this article of food was invariably a pain in the head of a congestive character, which did not yield to ordinary remedies. In one case death ensued, in the others recovery took place after severe treatment.

The *After Pains* may be excessive, or irregular and spasmodic, or the contractions of the uterus may be deficient; in the one case an inflammatory condition of the organ may be excited, especially if there should have been a previous febrile state of the system, or the pains may be mistaken for those of an inflammatory kind. In the other case hæmorrhage or excessive lochial discharge may result.

The lochia may be in excess or otherwise, or abnormal in quality, irritating or offensive, &c. The several secretions and excretions of the body, such as the perspiration, urine, feculent matters, milk, &c., may, from various morbid conditions, be sources of irritation. The pulse affords a tolerable indication of the normal or abnormal condition of the patient's system. It has been said by Dr. J. Clarke, and confirmed by other authorities, that whenever the pulse is above 100, the state of the patient is not one of safety; but occasionally, in very sensitive individuals, the pulse continues much accelerated and above 100, for the first ten days after delivery, owing to the excessive nervous irritability, which is sustained, until the lacteal secretion is perfectly established and the system has become accustomed to the performance of the new function. Thus it will be seen, that it is very important to observe well all the different functions of the body, both permanent and temporary, as well as the temperament and idiosyncrasy of the individual, in order fully to appreciate the influence of exciting causes upon the puerperal state.

[1] Transactions of the College of Physicians, vol. v, p. 109.



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With these preliminary, and, as regards the importance of the subject, brief and imperfect remarks, I will pass on to the consideration of the disorders of the puerperal state.

## TREATMENT OF THE PUERPERAL STATE.

It is natural to suppose, that the augmented sensibility developed during pregnancy would be materially increased, while the vital powers would, at the same time, be impaired by the fatigues, the violent pains, and anguish attending on delivery, and by the loss of blood which accompanies it. The return of the great mass of the uterus to its normal state of vacuity, the lacteal secretion, the emotions caused by the presence of a new object of affection, are all important circumstances which have been already dwelt upon, as producing a great revolution in the female economy, which renders it in a high degree sensitive to morbid impressions, and less capable of resisting their influence. This fully accounts for the more serious character of the diseases of the puerperal state, and for the greater mortality which attends them.

But happily for man- and woman-kind, Homœopathy not only operates effectually to obviate many of the evils by which the puerperal state is encompassed, but when serious disease does occur, its resources are so great, and its treatment so successful, that the prognosis is materially modified, and rendered by far more favorable.

The treatment, therefore, which is demanded for a woman in the puerperal state, may be divided into the Hygienic and the Medical.

*Hygienic Treatment.*—After delivery the patient should be left as quiet as possible, for about two hours, covered up to prevent the occurrence of chills; the abdomen being tightly encircled by a broad binder; warm napkins being applied to the genital parts; and a little warm gruel or sago being administered. During this time instructions should be given to watch the countenance, and if any change is perceptible, to ascertain the quantity of discharge that is going on.

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At the end of two hours the patient should be cautiously attended to, made dry and comfortable, and sponged with a little tepid water, to which a few drops of the Tincture of Arnica have been added; and this application should be repeated once or twice, in place of the lard or pomade, or any other of the herbaceous decoctions which are usually employed. She may then be moved up into the bed, without raising her from the supine position.

The room ought to be shaded, and silence preserved as much as possible, so that no excitement be induced. The temperature should be moderate, consistently with the season of the year, the feelings of the patient, and the disposition to chills or perspirations; good ventilation should be secured, taking care that the patient is not exposed to any draught; all scents must be removed, and a tendency to sleep encouraged, as the best of restoratives after the fatigues of labour.

The simplest nourishment should be administered for the first few days, until the excitement caused by the perfect establishment of the lacteal secretion has passed over. This may consist of gruel, panado, sago, arrow-root, bread, light broths or beef tea, (if demanded by any unusual debility of the patient,) boiled rice, &c. After the milk-fever has gone by, which is generally the third or fourth day, she may have stronger broths made from chicken, beef, mutton, or veal, with rice or vermicelli, or fish and chicken in the substantial form,—and, when the bowels have acted, such other kinds of animal food as are suitable to her condition. The administration of some plain solid food after the third day, unless counter-indicated by any special circumstances, will tend (as has already been remarked), to assist the peristaltic action of the bowels.

The diet must be a little modified, if the patient should not perform the duties of a mother, either from necessity or will; in this case the diet must be more sparing, until the milk ceases to accumulate in the breasts.

Tepid milk-and-water is the best drink for the lying-in woman when she requires anything to allay her thirst. In no condition is mental calm more necessary than in the puerperal state.

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A gentle moisture of the skin should be preserved; but abundant perspirations, if possible, avoided, or watched with care.

The horizontal posture should be maintained during eight or nine days, and a feeble or delicate woman should not walk for a month.

*Medical Treatment.* — The phenomena which demand the consideration of the accoucheur after delivery are:— *first,* the lesions suffered by the genital parts during the passage of the child;—*secondly,* the phenomena produced by the return of the parietes of the uterus to its former condition;—*thirdly,* the secretion of milk and its consequences,—if the mother does not nurse her offspring,— and the state of the breasts;—*and fourthly,* the reparation of the powers of life, which have been more or less exhausted by the fatigues and depletions which the woman has sustained.

The accidents which sometimes result from the expulsion and passage of the child, are:—Inversion of the Womb, contusion and consecutive inflammation of the Vulva, rupture of the Perinæum, Retention and Incontinence of Urine, and Hæmorrhoidal swellings.

## INVERSION OF THE WOMB.

This unfortunate accident seldom amounts to complete inversion, as the lips of the os uteri are generally dependent, even in the most severe cases; but when it occurs, it may be that the fundus only is depressed, and cannot be felt behind the pubes; or it may be inverted so as just to reach the outlet; or it may be protruded externally, forming a globular tumour, like a child's head. The vagina is drawn down, or partially inverted at the same time. The symptoms which indicate the occurrence of this accident are:—sudden and great pain after the birth of the child, accompanied with a bearing-down effort, by which a partial inversion is sometimes rendered complete; a sudden sense of weakness, pale countenance, feeble, scarcely perceptible pulse, hæmorrhage, which is sometimes profuse;—this, however, is greatest when

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the inversion is partial;—a sense of dragging at the stomach, and as if the bowels were pulled out; fainting or convulsions. Together with these symptoms, a firm fleshy mass is to be felt either within the vagina or protruding from it, whilst no uterus can be discovered in the hypogastric region.

*Causes.*—The causes of inversion of the womb are, principally:—extraction of the placenta by the hand; violent tractions of the umbilical cord; a precipitate delivery; shortness or twisting of the cord around the neck of the child, operating so as to cause a jerk of the fundus, at the moment of the child's birth; violent labour-pains, &c.

Whatever may have produced it, however, the accoucheur must proceed immediately to its reduction, by pressing the hand firmly, and steadily on the centre of the protruded or everted tumour, until it recedes, and the hand passes within the cavity; should the placenta still be adherent, it must not be removed, until after the reduction of the organ, when the uterine contractions may be excited to throw it off. If the uterus cannot be returned, it must at any rate be passed into the vagina. It is doubtful whether it can be reduced after it has been down more than four hours. If the accident has occurred some time after the delivery, and the organ be swollen and inflamed, then the symptoms must be relieved before any attempt at reduction is made. After the reduction has been effected, the woman should be kept quiet.

The following prescription is of service for simultaneous exhibition:—

*Arnica*, (tinct.) 3,

two drops added to four table-spoonfuls of water, of which mixture a teaspoonful should be administered every five minutes; and, if the placenta be not detached, the accoucheur should carefully watch for its expulsion. If this is delayed, *Pulsatilla* may be given. The patient must then be kept in a recumbent position for a month or six weeks, with the pelvis a little elevated above the trunk; and the following medicine prescribed:—

*Nux vomica*, 30,

three globules, dissolved in a wine-glassful of water, of

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which solution a teaspoonful should be taken every six hours, for eight days, if no particular symptoms should supervene to indicate the suspension or change of treatment. In cases in which the administration of another medicine becomes temporarily requisite, we may subsequently resume the exhibition of *Nux vomica*, when the symptoms which required the interposition of the other remedy shall have ceased. This plan will generally be effectual to perfect the cure and to restore the tonicity of the ligaments. If, however, after the lapse of fifteen days, the woman should feel, on rising, a certain weight in the region of the uterus, the following is to be prescribed :—

*Sepia*, 30,

six globules being dissolved in two table-spoonfuls of water, and a teaspoonful of the solution given every morning ;[1] returning after an interval of eight days to the use of *Nux vomica*, as before.

It will be proper for the patient to avoid all straining at stool ; and if the evacuations should be tardy or difficult, notwithstanding the action of the medicine, a lavement or enema of tepid water should be used every time the patient requires to pass a motion. All local supports to the vagina or uterus should be avoided.

## CONTUSION OF THE VULVA.

This accident is usually overcome without any medical aid ; nevertheless, the addition of a few drops of *Tincture of Arnica*, to the water employed to wash the parts, will facilitate the recovery, and prevent inflammation. If this should be developed by any cause, it will be successfully combated by—

*Mercurius solubilis*, 12,

two drops added to four table-spoonfuls of water, and a teaspoonful of this mixture being given every two, three, or six hours,—without any emollient, local application, which

[1] Refer to the note respecting doses at p. 85.

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ouly augments the afflux of blood to the inflamed parts. If this medicine does not entirely remove the evil,

*Thuja*, 30.

should be administered in the same manner.

*Aconite* will be indicated if the extension and activity of the inflammation should produce febrile symptoms with chills.

## LACERATION OF THE PERINÆUM.

Rupture or laceration of the Perinæum, is an accident which threatens the woman with a distressing infirmity for the rest of her days. Sometimes the laceration only extends to the verge of the anus: sometimes the septum between the rectum and vagina is torn, as well as the sphincter ani. There is considerable pain and hæmorrhage at the time, and prolapsus uteri is, in some instances, a consequence of the laceration. It may be caused by too solicitous endeavours to dilate the outlet, before the birth of the head, or by the too rapid expulsion of a large child by the natural efforts.

*Arnica* and *Calendula* are powerful means of relief in cases in which this distressing misfortune occurs.

When, therefore, the accident is recognised, the patient must be speedily attended to, the parts cleansed, and washed with dilute *Arnica* lotion, consisting of forty drops of the concentrated tincture of *Arnica* to six ounces of water.

The edges of the wound are then to be brought together, and covered with a thick and large pledget of lint dipped in the pure *Tincture of Arnica* or *Calendula*, and the union of the wound maintained by thick compresses, moistened with the weaker lotions, over which two rollers are to be crossed, which, after being fixed laterally to a broad belt—which must have been placed firmly around the pelvis, as well to afford a fixed point for the former, as to keep the pelvis immovable,—are brought down over the thighs and so bring them together, being made to cross at the perinæum, and then pass upwards to be attached to the bandage around the body above the groin of the opposite side. The patient

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must be kept perfectly still and immovable on one side, and on whichever side is most convenient to her. During the first days the dressing must be renewed frequently to facilitate the escape of the lochia; afterwards, it will be sufficient to renew them, whenever the patient desires to pass water.

The pledget of lint which is next applied to the wound should be steeped in the pure tincture, because the abundant discharge of fluids from the uterus is rapidly imbibed by it, and the action of the remedy is consequently less sensible. When the lochia are diminished the *Arnica* or *Calendula* may be diluted with equal parts of water. This dressing and these precautions ought to be continued during six weeks, that the cicatrix may have time to consolidate. It will be prudent to aid this local treatment by the administration of *Arnica*, internally, during the first week,—if no more urgent indications point to some other remedy. The patient's diet should be regulated as much as possible, so as to eat and drink little, that she may not be disturbed by the necessity to evacuate, either by the bladder or rectum.

In less serious cases of laceration of the Perinæum, however, it may not be necessary to do more than to apply a poultice, made with a diluted lotion of *Arnica* or *Calendula*, and to take measures to keep the patient's thighs as closely approximated as possible; since experience has proved that the union of the parts is readily effected.

### RETENTION OF URINE.

After a severe labour, a distressing strangury sometimes occurs, in consequence of the pressure which the head of the child exerted upon the urethra, and neck of the bladder, during its passage through the pelvis, producing contusion and inflammation of the urinary passage. Although this trouble is evidently produced by a mechanical lesion, *Arnica* is, nevertheless, not the specific remedy in such cases.

*Belladonna*, 30,

(three globules being dissolved in six teaspoonfuls of water

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and one teaspoonful of the solution given every two or three hours) will be found the most effectual.

## INCONTINENCE OF URINE.

The same cause that produced retention, will also produce incontinence of urine, if the labour has been protracted, or if much exertion has been made by the woman. A prolonged or violent pressure upon the neck of the bladder may produce paralysis, and render her incapable of holding the water.

*Arnica* will be of more benefit in this case, because, besides being adapted to the cause, it has in its pathogenesy, the involuntary discharge of urine. After this medicine, given as above, if the inconvenience has not entirely ceased, *Belladonna* may be employed; the doses being repeated at intervals of twelve hours, if it be necessary.

If the disorder should become chronic, and does not yield to these two medicines, *Sulphur* or *Sepia* should be given. These medicines may be administered in single doses, under such circumstances, and their action suffered to develope its influence fully. Thus the alternate administration of both may be conducted by administering first a single dose of the one and then of the other, at intervals of from eight to fifteen days.

## HÆMORRHOIDS AFTER LABOUR.

Sometimes this troublesome disorder shows itself after delivery, owing to the prolonged pressure of the head or the breech of the infant upon the outlet, during a protracted labour. Under these circumstances, owing to the great disturbance of the functions of the pelvic organs, the lochia become suppressed, there is difficulty in voiding urine or stool, and the severe pain and agitation which they cause deprive the patient of sleep. The most extensive development of piles I ever saw occurred after a severe labour.

Homœopathy has, in *Pulsatilla*, a most efficacious remedy for the relief of this condition.

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A small and delicate woman, two hours after a long and painful labour, with her fourth child, had a mass of hæmorrhoids of the size of the thumb, which surrounded the fundament; she had constant desire to pass water without being able to do so; the lochial discharge was arrested; sharp pains occurred which produced a feverish excitement and effectually interfered with repose; and she could not bear the least touch of the parts which were so distended.

*Pulsatilla*, 30, was prescribed to be administered thus:— a few globules to be dissolved in a wine-glassful of water and a teaspoonful of the solution to be given every two hours.

Ten minutes after the *first* spoonful, the pains were appeased, and a copious discharge of urine took place without suffering. The lochia were restored at the same time, and without repeating the dose, the swellings subsided, and the patient afterwards went on as usual.

## AFTER-PAINS.

The return of the uterus to its normal condition, can only take place by means of successive contractions of its muscular fibres, and the expulsion of the fluids which are contained within its cavity and tissues. These contractions are attended with more or less pain; they are least severe after a first labour, and are most acute in nervous and sensitive women. They usually come on very soon after delivery, and last for a day or two, being sometimes so severe as to disturb the patient's rest. The blood and other fluids which are evacuated from the cavity of the womb, after the expulsion of the placenta, constitute, what are termed, the *Lochia*.

The pains which accompany the first discharges, mixed with coagula, are termed *After-Pains;* they are felt in the belly and loins, and are sometimes severe; they seem to be necessary to ensure the speedy and safe return of the uterus to its pristine condition, and an entire absence of them may not be desirable.

*Arnica*, given immediately after delivery, is of great service. If it does not diminish or prevent after-pains, it at any rate

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diminishes the tendency to hæmorrhage, by its soothing effect upon the system at large, in a far superior manner to the *Opium* of the old school. If the pains are moderate, they may be left to nature; but if they are violent, or frequent, so as to deprive the patient of rest, *Coffea* or *Chamomilla* will soon calm them, and procure the rest so much desired.

*Coffea* will be preferable for very nervous and excitable women, to whom the pain seems insupportable, if they are sleepless, or have been used to chamomile tea.

*Chamomilla*, on the other hand, ought to be given when the woman is accustomed to coffee-drinking, if she is of a quick temperament, and is troubled with thirst.

*Nux vomica* is useful if the pains bear upon the fundament, producing a sensation as of desire to go to stool;—especially if the patient be of a quick and determined character: if, on the contrary, she is soft and gentle, with predominance of the venous constitution, *Pulsatilla* will be advisable.

## LOCHIA.

After delivery, the vessels of the uterus continue to pour out a small quantity of blood, which gradually diminishes,—the serous, or watery parts, predominating,—until they are ultimately closed by the contractions of the uterine parietes, and become retracted within its tissue. This discharge is mingled with the mucosities which escape from the mucous lining, in the progress of its return to its ordinary dimensions. The discharges thus formed and excreted, are termed the Lochia.

The character of this discharge is, in some measure, an index of the healthy or unhealthy condition of the uterus, and may be either more or less abundant than is natural, or may be altered in quality.

The quantity varies in different women, and must therefore, be considered relatively, and estimated in connection with the general state of the patient. The same amount of discharge which, occurring in a full, plethoric woman, would be consistent with a healthy recovery, in a pale and delicate,

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or weak and nervous individual, would be attended with dangerous consequences. In general, the lochia go on diminishing, with an occasional aggravation, until the third week, when they cease; or else they intermit until the period for the return of the menses, and then stop. After the first week, the colour changes to a dark or greenish hue, and is more watery, from which the discharge, at that time, has been called, the *green waters*. Occasionally, the smell is fetid; but this usually depends upon inflammatory or some other derangement of the uterus.

A sudden diminution or suppression of the Lochia, is ordinarily the symptom of some other disorder; wherefore, when such a circumstance occurs, the attention of the accoucheur should immediately be directed to the state of the uterus. But sometimes it may happen as the effect of a moral cause, or in consequence of a chill—the first impression of which has been upon the still open orifices of the vessels of the uterus. In this case, if the discharge be not restored by the appropriate remedy, the altered function becomes a source of disease in the organ, and of general reaction in the system.

The choice of the remedy will depend, then, partly on the exciting cause, and partly on the nature of the discharge, whether it be composed of almost pure blood, or whether the character of blood had almost disappeared at the time of the occurrence. If caused by a moral impression, the remedies indicated under that head may be given at once, in accordance with the specific cause which produced the change.

*Aconite*, however, is entitled to a preference, when the suppression has occurred at a period soon after delivery, and the discharges still contain blood, and when the patient experiences pains in the belly, with anxiety, and a disposition to vascular congestion in the chest, abdomen, or head.

This is also the remedy, if the suppression or diminution has been produced by a chill,—when fever, heat of the face, quickened pulse, &c., prevail.

*Chamomilla* is to be preferred, if there be diarrhœa,

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