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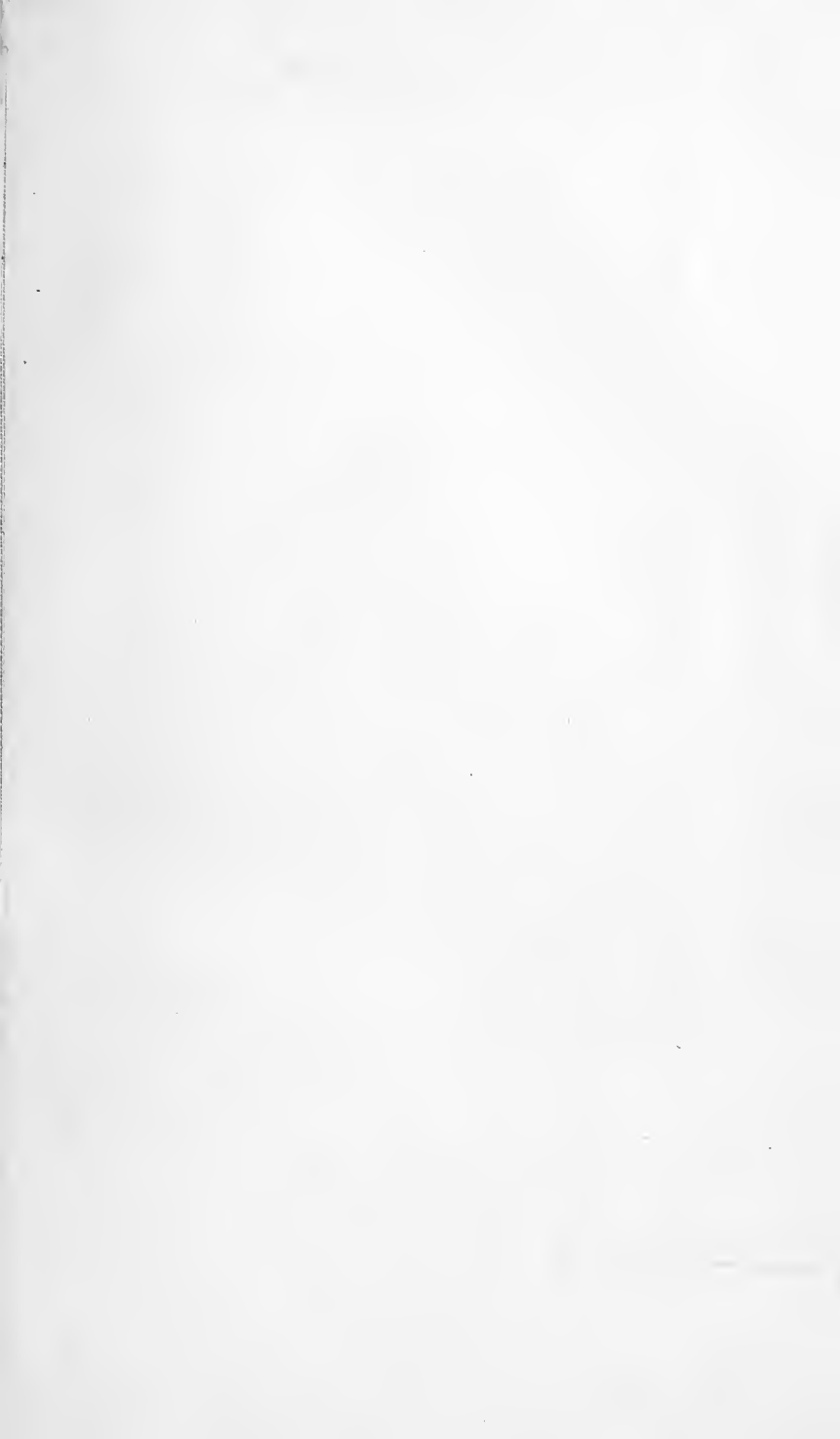
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PRACTICAL OBSERVATIONS
ON
VENEREAL COMPLAINTS.

(Price Four Shillings *sewed.*)



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PRACTICAL OBSERVATIONS
ON
VENEREAL COMPLAINTS.

BY
F. S W E D I A U R, M. D.

THE THIRD EDITION,
CORRECTED AND ENLARGED.

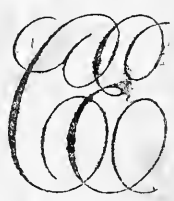
TO WHICH ARE ADDED,

An ACCOUNT of a NEW VENEREAL DISEASE
which has lately appeared in CANADA;

AND A

PHARMACOPOEIA SYPHILITICA.

— Scientiæ veros fines cogitent; nec eam aut animi causa petant, aut ad contentionem, aut ut alios despiciant, aut ad commodum, aut ad famam, aut ad potentiam aut hujusmodi inferiora; sed ad meritum, et usus vitæ, eamque in charitate perficiant, et regnent.
Baco de Verul. Prof. ad nov. organ.



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17.V

P R E F A C E.

THE intention, when I first published this small Treatise, was to offer to the public in a concise, but at the same time perspicuous manner, my own observations and discoveries, together with those lately made by the first medical men in different parts of Europe, in that particular branch of medical science so interesting to mankind in general. I did not think proper at that time to enlarge the book with any thing that did not immediately relate to the improvement of real knowledge, either about the nature or cure of these dreadful complaints, with which I had myself the misfortune to be repeatedly affected. The result of those observations
was

was thus dear-bought experience to me; but for this very reason perhaps the more useful to my readers. The second edition was printed off without any material alteration. In this third, I have added several new observations, leading to the improvement of the history, nature, and cure of those complaints. Whatever has been derived from other sources, I thought it honourable and proper to acknowledge. I scorn the man who attributes to himself what he owes to others.—The Pharmacopœia Syphilitica, I hope, will not be unacceptable to young practitioners.

F. SWEDIAUR.

PORT-SETON, near Edinburgh, }
Dec. 8. 1787. }

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PRACTICAL OBSERVATIONS
ON
VENEREAL COMPLAINTS.

Ad recte medendum omnino opus est, ut remedia, non solum generi, sed speciei cuique, et sæpe etiam varietatibus quibusdam, apprime sint accommodata. CULLEN; *Synop. Nos. Method.*

CHAP. I.

Observations on the Venereal Infection, and the different Appearances of Syphilitic Complaints in general.

WE say, in the common language, a person is poxed, injured, or infected with the venereal disease, pox, or bad distemper*, when the venereal poison has been received into, or is diffused through, the system, and there produces its peculiar effects. These effects or symptoms are ulcers of the mouth, fauces; spots, tetters, and ulcers of the skin; pains, A swelling

* In Latin, this disease is called *lues venerea*, *morbus Gallicus*, or *syphilis*. Whether the name *syphilis* is derived from *ovis*, *porcus*, and *φιλία*, *amor* (*amor porcinus*), or whether it owes its origin to some other derivation, is uncertain. In French it is called *la maladie venerienne*, *la verole*, *la grande verole*: in German, *die Lustseuche*, *die Franzosen*.

swelling, and caries of the bones, &c. But as long as the effects of the poison are *local*, and confined to or near the genitals, the disorder is not called Syphilis, Lues Venerea, or Pox; but distinguished by some peculiar name, according to its different seat or appearance; such as Clap, Shanker, Bubo, &c.

Concerning the nature of the venereal poison, we know no more than we do about that of the small-pox or any other contagion; we know only that it produces peculiar effects, which yield to a peculiar mode of treatment. It affects, like the scrophula, the lymphatic system and the bones. Monkeys die sometimes during cold weather in England of the scrophula, but they are never affected with the syphilis; and the rest of animals seem, as far as we know, to be as little susceptible of being affected by the venereal poison as the monkeys. *Baydford*, however, thinks they may be infected, but mentions no authority for his opinion. *M. de Pauw** likewise mentions, without naming his source, that dogs are liable to be affected with the venereal disease in Peru, but not in North America.

The smallest particle of this poison is sufficient to bring on the most violent disorder over the whole body. It seems to spread and diffuse itself by a kind of fermentation and assimilation of matter; and, like other contagions, it requires some time, after being applied to the human body, before it produces that effect. It is not known whether it has different degrees of
acrimony

* See *Recherches philosophiques sur les Americains.*

acrimony and volatility, or whether it is always the same in its nature, varying only with regard to the particular part to which it is applied, or according to the different habit and constitution, or particular idiosyncrasy, of the person who receives the infection. We know that mercury possesses a certain and specific power of destroying the venereal virus: but we are quite uncertain whether it acts by its sedative, astringent, or evacuant quality; or if not perhaps rather by a chemical elective attraction, whereby both substances uniting with one another, are changed into a third, which is no more hurtful, but has some new properties entirely distinct from those which any of them had before they were united.

The variolous miasma, we know, produces its effects in about twenty or twenty-four days after the infection is received from the atmosphere, and eight or ten days if by inoculation; but the venereal virus seems to keep no particular period. At some times, and perhaps in particular persons, it requires a longer time to produce its effects than at other times, or in other persons. I have seen shankers arise in the space of twelve hours, nay in a still shorter time, indeed I might say in a few minutes, after an impure coition; whereas, in most cases, they make their appearance only in as many days. The generality of men feel the first symptoms of a clap between the second and fifth day after an impure coitus; but there are instances where they do not appear till after as many weeks or months. About ten

who was seized with a violent discharge from the glans (*Blennorrhagia balani*), along with a phymosis, but without any shankers, four weeks after coition; and during all the interval, he felt not the least symptom of the disease. Some years ago, a gentleman went out from London in seemingly perfect health to the East Indies; but on his arrival in that hot climate, after a voyage of four months, a violent clap broke out before he went on shore, though he could have received no infection during the voyage, as there was not a woman on board.

There are instances which render it probable that the virus may lie four, five, or six weeks, and perhaps longer, on the surface of the genitals before it is absorbed; and were it not then to produce a shanker, might probably not be absorbed at all. We see daily examples, where common women communicate the infection to different men in the space of several weeks, while they themselves have not the least syphilitic symptom, local or universal; the poison lying all that time in the vagina harmless, and generally without being absorbed.

How long the venereal virus may lurk in the body itself, after it has been absorbed into the mass of blood, before it produces any sensible effects, is a matter of equal uncertainty. There is scarce a practitioner who has not observed instances of its remaining harmless for weeks, or even months, in the body. I had access to observe a case, where, after lying dormant for half a year, it broke out with unequivocal symptoms. But the following instance, if to be depended

depended upon, is still more extraordinary. Some years ago, I was consulted by a gentleman about a sore throat, which I declared to be venereal. My patient was astonished; and assured me, that for nine years past he had not had the least venereal complaint, nor had he any reason to believe he had since received any infection: but at that time he had been in the East Indies, where he was affected with a violent clap. On his return to Europe, being to appearance in perfect health, he married, and continued perfectly free of any such complaint ever since. By a mercurial course, however, the complaint for which he applied to me was completely removed*.

With regard to its effects, the venereal poison follows no constant rule: for though in general it affects first the throat or skin before it produces any symptoms in the bones, we see in many instances the bones affected without any symptom in the throat or skin before or after. In some persons it more particularly attacks the throat, where it produces ulcerations; while in others it exerts its virulence on the skin or bones. Whilst the greatest part of mankind are thus easily affected by this poison, there are some few who seem to be altogether unsusceptible of the infection, and run every risk without suffering in the smallest degree; just as some are never infected with the variolous contagion,

A 3 though

* This, and similar other cases, however, lead me rather to suspect that an absorption of the venereal poison may perhaps sometimes take place without any previous external local affection of the genitals.

though they go into infected places, and expose themselves to inoculation or every hazard by which the disease is generally communicated. Some persons are more liable to be infected than others seemingly of the same habit; nay, the very same person seems to be more liable to be infected at one time than at another; and those who have been once infected seem to be more liable to catch the infection a second time than those who never were infected before with the disease. The climate, season, age, state of health, idiosyncrasy, are perhaps, as in other diseases, the necessary predisposing causes. The same difference is observable in the progress made by the disease after the patient is infected. In some the progress is slow, and the disease appears scarce to gain any ground; while in others it advances with the utmost rapidity, and speedily produces the most terrible symptoms.

At what time this dreadful malady (the very idea of which poisons the source of our most happy moments) was first known among mankind in general, or in Europe in particular, is a matter I cannot pretend to decide. Thus much we may affirm from the accounts transmitted to us by ancient writers, that the lues, with its horrid and fatal symptoms, such as we find it first described by medical and other writers towards the end of the fifteenth century, had been unknown among our Greek or Roman ancestors, though undoubtedly as licentious as their barbarous or refined posterity. Local complaints of the genitals, indeed, very much like our present venereal complaints of those

those parts in both sexes, were known and accurately delineated by many of the ancient writers: Such are the different complaints described by AETIUS as well as those related by PAULUS OF ÆGINA, and more especially the *corroding ulcers of the prepuce and glans*; the *discharge of thin sanious matter from the penis*; the *mortification and cancer of the penis*; the *phagedænic ulcer of the same*; the *warts of the prepuce and glans*; *condylomata ad anum*; the *swelled testicles arising without external contusion*; all mentioned and exactly described by CELSUS*. But none of these we find any where marked as contagious, as propagated by coition, or as producing symptoms like those we now observe produced by the venereal virus when absorbed and diffused through the system; which, if they had ever happened, there is great reason to believe we would have been informed of by the medical, satirical, or historical writers of those times; who were very careful and sagacious observers, and otherwise far from giving us very favourable accounts of the chastity of the Roman ladies.

Though, however, these local complaints, so much resembling our present venereal ones, were not marked or observed to be contagious and propagated by coition at so early a period, they were a few centuries after, a long while before the lues broke out, experienced and observed to be so, by several successive writers; and that those diseases were the very same with our present local venereal complaints, every unprejudiced

* L. vi. cap. xviii. De obscenarum partium vitiiis.

prejudiced reader may convince himself, by perusing those ancient writers; an history of which has been lately collected and published by one of the most learned and ingenious physicians * in Europe, whatever *Friend, Astruc*, or other modern writers may say to the contrary.

Besides the law given in the manuscript statutes, *De disciplina Lupanaris publici Avenionensis* (Avignon), made in the year 1347 †, by Queen Joanna I. we find *Lanfrancus*, and more especially *Salicetus*, in the XIII. century, mentioning *pustules, ulcers, cancer of the glans penis, arising post coitum cum fœda muliere*. In the XIV. century, we find in *Gordon, Arnoldus de Villanova*, and particularly *Guido de Chauliac*, one of the first surgeons who wrote in the middle of that century, *excoriations, burnings, corrosive, and putrid ulcers*; mentioned as arising *propter decubitum cum muliere fœda*: and

Becket

* Dr HENSLER *Geschichte der Lustseuche* (History of the Lues Venerea), Vol. I. Altona, 1783; where he added, by way of a supplement, excerpts of the different authors in their original Latin language.

† After other regulations, the law proceeds thus: “Jubet Regina Sabbato quolibet a Bayliua una cum chirurgo a confusibus proposito, mulieres meritorias singulas lustrari; quocunque in lupanari prostant. Et si qua scortatione ægritudinem ullam contraxerit, a cæteris seponi ut seorsim habitet, ne sui copiam facere possit; ut morbi præcaveantur qui a juvenibus possent concipi.”—*The Queen further orders, that every one of the women kept in that bawdy-house should be visited every Saturday by the mother-abbess, together with a surgeon appointed by the magistrates for this purpose; and if there be any who have contracted some disease by scortation, the same should be separated from the rest, and be shut up in a private room, so that she may not lie with any man; in order to avoid by these means the disorders which might be communicated by her to young men.*

Becket * says, " In an old MS. I have by me, " written about 1390, is a receipt for *brenning of the pyntyl*, yat men clepe ye *Apegalle*. *Galle* being an old English word for a *running sore*. " They who know the etymology of the word " *apron*, cannot be ignorant of this. " And in " another MS. written about fifty years after, " is a receipt for *burning* in that part *by a wo-* " *man.*" He likewise adduces two remarkable passages from English statutes about bawdy-houses: One of 1163 says, no steward to keep any woman that hath *the perilous infirmity of burning*. And that of 1430, written upon vellum, which was preserved in the court of the bishop of Winchester, begins thus: " Here begynne " the ordinances, rules, and customs, as well for " the *salvation of mannes life*, as for to aschewe " many mischiefs and inconvenients," &c: there is a law, with a penalty of a hundred shillings (a great sum for the time), if any steward keeps women in his house *habentes nefandam infirmitatem*; or, as it is afterwards translated, having any sickness of *brenning*. I could adduce a number of similar instances, but I think it unnecessary to enlarge any further upon this subject here; I rather refer my curious readers to Dr *Hensler's* book, where they will find a complete evidence from historical facts.—But to fix the precise year or time when that dreadful epidemical disorder, with horrid exulcerations and monstrous excrescences on the skin, with

an

* See Philosoph. Transactions, Vol. XXX. p. 839, &c. and Vol. XXXI.

an intolerably stinking ichorous discharge from the same, swelling and caries of the bones, tormenting the patients with the most excruciating pains, called at the times the Gallic Disease (*morbus Gallicus*), and which soon after obtained the more proper name of Venereal Disease (*lues venerea, syphilis*), first appeared in Europe, is difficult and perhaps impossible exactly to determine: so much is certain, that this new disease broke out towards the end of the fifteenth century, between the years 1484 and 1494; and from the several writers of those times, and the critical inquiries made by the late Dr *Sanchez**, and more particularly by the last mentioned ingenious Dr *Henfler*, it is highly probable that this disease had really existed in Europe several years before *Columbus* first returned from the Caribbee islands.

It is, at least, undoubtedly wrong in us, to conclude that the disease was brought to Europe from the West Indies, because it appeared and became epidemic here at the time when *Columbus* returned from his first voyage 1493: or to say, that, because it had been epidemic there, it was brought from thence to us. I think it might be equally reasonable to allege, that it was brought into different parts of the globe by the same cause, at the same time. However, so far down as to the middle of the sixteenth century, this disease was unknown altogether in South-

* See Dissertation sur l'origine de la maladie venerienne, and Examen historique sur l'apparition de la maladie venerienne en Europe.

South-west America; and in some parts of North America, it was not yet known of late. Curious and remarkable it is, that the first twenty years after the appearance of this new and peculiar disease, it was ascribed to a pestilential temperature of the air; and nobody, neither physician, or any other person, had the least idea or suspicion of its being ever communicated by coition, or in the least connected with any discharge from the urethra or ulcers of the genitals.

Indeed no mention is made by any of the earlier writers on the venereal disease, of the genitals being any way ever affected; and the disease was at that period looked upon as a kind of plague (*Pestis, Morbus Pestilentialis*). Only, in the beginning of the sixteenth century, *Pinctor, Torella,* and *Almenar,* first mention, that the venereal disease begins in the genitals, and from thence is spread and disseminated; which, however, was at the time denied by others to be always the case.

Was this new cutaneous disease really a different disease at the time? and was it only afterwards, by being united or blended with the virus that produced blennorrhagias and ulcers of the genitals long before, that it transformed itself, if I might say so, into our present syphilis? Were the local diseases of the genitals of former ages, and the cutaneous epidemic plague of the fifteenth century, two different diseases?

Whether the venereal poison can be absorbed into the system, without a previous excoriation or ulceration of the genitals, or some other parts of the surface of the body, was, as I mentioned

tioned in the former editions of this book, still a matter of doubt. Several cases, however, which occurred to me and to others, render it highly probable, if not certain, that the poison really is now and then absorbed, without any previous excoriation or ulceration whatsoever, and thus produces buboes and other venereal symptoms in the body.

It has been asserted by the earliest and even by some late writers, that it may be caught by lying in the same bed or living in the same room with or after an infected person *. What may have been the case at the commencement of this disease, I cannot say; but, from the most accurate observations and experiments I have made upon the subject, I have never been able to confirm this to be the case in our times. Nor do we ever see nurses infected in the Lock Hospital,

* The disease, in its origin, must have been very contagious indeed, or, at least, been suspected to be so; because, in the year 1529, in November, when Cardinal Wolsey, King Henry VIIIth's prime minister, was accused, amongst other articles of charge brought against him by the House of Lords, the very remarkable one is, his whispering in the King's ear, knowing himself to be affected with venereal distempers. See *Hume's Hist.* Vol. IV. p. 451, note C.

Schellig, a German physician, the earliest writer on this disease, who wrote in the year 1494 or 1495, says, that the poison is very subtle, and easily proves contagious, not only by the air, breath, or habitation in the same room, but also by the cloaths which had been worn by infected people.

The Sibbens in Scotland is now-a-days caught, not only by lying in bed with, but also on the slightest touching of the person affected. But this disorder seems to be a disease composed of the itch and the lues; and may therefore be easily communicated by the touch.

tal, where they live night and day with patients in all stages of the distemper. The fact seems to be, that patients in our times are apt to impose upon themselves, or upon physicians and surgeons, with regard to this matter; and the above opinion easily gains ground among the vulgar, especially in countries where people are more influenced by prejudices, superstition, fervile situation in life, or other circumstances. Hence we sometimes hear the most ridiculous accounts given in those countries, by friars and common soldiers, of the manner by which they came to this disorder: Such as piles, gravel, colics, contusions, fevers, little-houses, lying in suspected beds, or lying in a bed with a suspected person, retention of the semen, coitus with a woman in menstruation, the use of cyder, bad wine or beer, &c.

Another question, which I am equally unable to decide, is, Whether the venereal poison ever infects any fluid of our body besides the mucous and lymphatic system. Hence I am in doubt, whether the venereal poison in an infected woman ever affects the milk; and consequently whether the infection can thus be conveyed to the infant by the milk alone, without any venereal ulcers on or about the nipples. It is equally a matter of uncertainty to me, whether the venereal disease is ever conveyed from an infected father or mother, by coition, to the fœtus, provided their genitals are sound: or, whether a child is ever affected with venereal symptoms in the uterus of an infected mother. Such infected infants as came under my own observation,

tion, or that of my friends, whose practice affords them frequent opportunities of seeing new-born infants, seemed rather to militate against the opinion. Neither I myself, nor any of them, have ever been able to observe ulcers or other symptoms of a venereal kind upon new-born children; and such as make their appearance four, six, eight, or more days afterwards, on the genitals, anus, lips, mouth, &c. may rather be supposed to arise by infection during the passage from ulcers in the vagina of the mother; the skin of the infant being then nearly in as tender a state as the glans penis or the labia; and this is perhaps the time when an absorption of the venereal poison might easier take place without a previous excoriation or ulceration of the skin.

All the ways, therefore, by which we see, in our days, the venereal poison communicated from an unhealthy to an healthy person, may be reduced to the following heads:

1. *By the coition of an healthy person with another who is infected with venereal symptoms of the genitals.*

2. *By the coition of an healthy person with another apparently healthy, in whose genitals the poison lies concealed, without having yet produced any bad symptoms.* Thus, a woman who has perhaps received the infection from a man two or three days before, may, during that time, infect, and often does infect, the man or men who have to do with her afterwards, without having any symptom of the disease visible upon herself; and, *vice versa*, a man may infect a woman in the

same manner. Such instances occur in practice every day.

3. *By sucking.* In this case, the nipples of the wet nurse may be infected by venereal ulcers in the mouth of the child; or, *vice versa*, the nipples of the nurse being infected, will occasion venereal ulcers in the child's nose, mouth, or lips. I have mentioned above, that I was uncertain, whether the venereal poison was ever propagated by means of the milk from the breast.

4. *By exposing to the contact of the venereal poison any part of the surface of the body,* by kissing, touching, &c. especially if the parts so exposed have been previously excoriated, wounded, or ulcerated, by any cause whatever. In this manner we frequently see venereal ulcers arise in the scrotum and thighs; and there are some well-attested instances where the infection took place in the fingers of midwives or surgeons. I have likewise seen several instances of venereal ulcers in the nostrils, eye-lids, and lips, of persons who had touched their own genitals, or those of others, affected at the time with local venereal complaints, and then rubbed their nostrils, &c. with the fingers, without previously washing the hands.

We had a few years ago here in London, a melancholy example of a young lady, who, after having drawn a decayed tooth, and replaced it with one taken immediately from a young woman apparently in perfect health, was soon after affected with an ulcer in the mouth. The sore manifested symptoms of a venereal nature: but such was its obstinacy, that it resisted the
 most

most powerful mercurial remedies, terminating at last in a caries of the maxilla, with a most shocking erosion of the mouth and face; by which the unhappy patient was destroyed: during all this, however, we are informed, not the smallest venereal symptom was perceived in the woman from whom the sound tooth was procured.

5. *By wounding any part of the body with a lancet or knife infected with the venereal virus.* In this instance there is a similarity between the venereal poison and that of the small-pox. We have several examples of the latter being produced by bleeding with a lancet which had been previously employed for the purpose of inoculation, or of opening variolous pustules; without being properly cleaned afterwards. In Moravia, in the year 1577, a number of persons who, being assembled in a house for bathing, had themselves, according to the custom of that time, scarified by the barber, were all of them infected with the venereal disease, and treated accordingly. *Krato* the physician, and *Jordan* who gave a description of this distemper, are both of opinion that it was communicated by means of the scarifying instrument. And *Van Swieten* relates several instances where the lues was communicated by a similar carelessness in cleaning the instrument used in bleeding or scarification.

No branch of the medical art has, as far as my knowledge extends, received so many valuable improvements from modern practice as the treatment of the different venereal complaints. These

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improvements, I venture to say, were principally made, because medical men themselves were as much subject to these complaints as any other person; and I believe, that, amongst the various diseases to which mankind are subject, there is none of which the cure is now more easy and certain than the venereal disease, if properly and judiciously treated: but if, on the other side, neglected, or unskilfully treated, we see it often not only extremely obstinate, but sometimes incurable and fatal; and it is a well-known truth, that many persons have their constitution broken, and suffer more by the preposterous treatment than by the disease itself. Yet there is scarce any disease in which more people pretend to skill than in this; and among the whole herd of quacks, there is hardly one who does not pretend to some superior knowledge, or to the possession of some particular nostrum, which he sets forth as the best and most infallible remedy for this disorder in all its various stages. Thus, with consummate impudence, they impose on such patients as have the misfortune to fall into their hands, and who, sooner or later, generally suffer severely for their credulity; whereas it is beyond doubt, that the cure of this distemper in all its various stages, requires not only a great degree of judgment in the choice and dose of the medicines, but likewise such an exact knowledge of the constitution of the patient, as is not to be obtained but by attentive experience and judicious observation. Hence more than common abilities are often requisite perfectly and radically to cure a confirmed lues;

or venereal complaints which have been preposterously treated. The great number of unfortunate victims to ignorance and rapacity, which we daily see, are but so many confirmations of the truth of this assertion.

From the most authentic accounts, it cannot be doubted that venereal complaints were formerly much more dreadful, violent, and even not unfrequently fatal. This is generally imputed to the more malignant nature of the poison at that time; and it is imagined that it afterwards grew more mild. This may indeed be true in some respects; though, on the other side, I have seen the disease, with all its different symptoms, in a number of instances, as violent and inveterate as ever described by any author of the sixteenth or seventeenth century. We see, however, in general, those dreadful complaints now by far not so often in Europe. This may indeed be partly owing to the venereal poison having grown milder by its diffusion through mankind; but greatly, I think, to the improvements made in the treatment of this disease, and more especially to the enlightened principles of humanity spreading all over Europe, and happily succeeding the barbarous superstition and cruelty of former times. We no longer abhor or expose those poor unhappy wretches on the dunghill, or let them die, as the Kalmucks do their brethren and children affected with the small-pox, without giving them the least assistance: both sexes, being in our times less exposed to the prejudice of others, apply sooner for relief, and obtain it more easily from more humane

mane and better instructed physicians and surgeons; and I am persuaded it is owing principally to this; that the disease is not only less frequent, but in all its different symptoms less violent, in London, than in any other capital in Europe. People of the lower class have not only so many places where they obtain advice and medicines from unprejudiced and skilful persons for nothing; but those of the female-sex, who would perhaps be detained by shame from applying to such a place; easily find some benevolent person who will give them money to support themselves during their miserable situation; and as easily a medical man, who will undertake to cure them without expecting any remuneration whatsoever. I know this is no where the case on the continent of Europe: besides, the generality of their physicians and surgeons, not having the advantage of such a liberal education, have not seldom more confined notions of morality, and often but a very superficial knowledge of this disease. Our physicians and surgeons, do not think themselves authorised to reproach their venereal patients with their misery in a rude and inhuman manner; nor are they so infatuated with superstition, as to believe, and look upon themselves as the chosen instruments of heaven, to punish those poor creatures for those imaginary crimes; rather than to relieve them, as I have a thousand times heard even in several great capitals on different parts of the continent. Our magistrates and police do not force these wretches into a prison, or into an hospital not very different from a pri-

son; but they are satisfied to put in their way all possible means to procure relief for themselves. In other countries, where government pursues a different plan, where poor venereal patients have no place of resort, where they are exposed to die of hunger during the cure, or where they are even intimidated from applying in time; in those countries I have frequently seen the disorder in its most horrid stages, and such as are almost unknown in this country. In short, let a person make the tour of Europe, and only take notice of the venereal patients, as well those who are confined in hospitals, as those who live or die unnoticed, under the most horrid symptoms of this disease, *in their private abodes*; and he will, in my opinion, be able to form as solid a judgment of the comparative progress of enlightened principles of governments in different countries, from these observations, as from any other inquiry whatsoever. He will be astonished to find at this day such a difference between the several governments with regard to barbarity and humanity, as I found with respect to science and learning, not many years ago, between two modern universities; I mean *Goettingen* in Hanover, and *Louvain* in the Netherlands. In the former, every institution seems calculated to inculcate upon the minds of young men every kind of useful knowledge, and the most liberal principles of philanthropy; whereas, in the latter, every thing seems to conspire to keep the youth in superstition and ignorance, and to engrave in their hearts all the principles of intolerance and hatred of *true* learning

learning of every kind, for which we now so justly blame our forefathers.

I have at least hitherto found, in my different travels, the frequency and violence of venereal complaints in different countries, to be exactly in proportion to the degree in which knowledge and liberal principles are disseminated among the different nations. From these observations, I am led to believe, that if a judicious plan, with proper regulations and precautions, was adopted by any government, in whatever climate, all the violent symptoms of the venereal disease would not only be rendered uncommon, but the disease itself might be, if not entirely eradicated, at least greatly diminished in its frequency: But such a plan, though easily conceived and executed, seems not yet adapted to the taste of the present age, but rather calculated for our humane, less prejudiced, and more enlightened posterity.

C H A P. II.

ON the BLENNORRHAGIA OF CLAP.

THE *Clap** is a local inflammation, attended with the discharge of a *puriform* matter from the lacunæ or mucous glands of the urethra in men, and from those of the labia or vagina in women; accompanied with a frequent desire of making water, occasioning a scalding, or pricking and burning pain, during the time of its passage;

* This disease occurs in the Latin authors under the different denominations of *Gonorrhœa*, *G. Virulenta*, *G. Venerea*, *Fluxus Albus Malignus*. The name *Gonorrhœa* is derived from the Greek γεννη, *genitura*, *semen*, and ρευ, *fluo*, i. e. *fluxus seminis*; which is a very improper name for the disorder in question, because it conveys an erroneous idea. The name *Gonorrhœa* implies a discharge of semen, which never takes place in this disorder. If a Greek name is to be retained, I would call it *Bleonorragia*, from βλενω, *mucus*, and ρευ, *fluo*, i. e. *Mucifluxus (activus)*; and thus distinguish it both from real *gonorrhœas* and from *gleets*; to which latter I would give the name *Bleonorrhœa*, *Mucifluxus (passivus)*, i. e. without phlogistic symptoms. In English, the disease is commonly called a *Clap*, from the old French word *clapiers*; which were public shops, kept and inhabited by single prostitutes, and generally confined to a particular quarter of the town, as we see still to-day in several of the great towns in Italy; in German, a *Tripper*, from dripping; and in French, a *Chaude-pisse*, from the heat and scalding in making water: names derived from the principal symptoms of the disease. See the *Nosological Table* of this disease at the end of the following chapter.

passage; which may arise from any acrid stimulus, but more especially and generally from the venereal poison applied to those parts.

This distemper, we may observe, 1. Is a local inflammation; and therefore, like all those of the same kind, does but seldom affect the whole system.

2. The discharge, though the matter has a purulent appearance, is not a real *pus*, much less *semen*, as some patients fancy. The matter discharged is nothing else but merely the mucus of the urethra or vagina secreted in a larger quantity than usual, and changed in its colour and consistence by the stimulus applied to these parts; like the mucous discharge from the nose or lungs in a coryza, or cough from cold, where the mucus assumes nearly the same purulent appearance: for which reason I gave it the new, but I hope proper, name *puriform*.—It is an erroneous notion, that this discharge arises always from an ulcer in the urethra. In ninety-nine out of an hundred claps, perhaps there is no such thing as an ulcer; but the disease is merely a superficial erysipelatous inflammation of the internal membrane of the urethra, like that above-mentioned of the mucous membrane of the nose or lungs from cold*.

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* This has been hitherto rather supposed, than proved by any direct fact. Anatomists, examining the urethra of men who had laboured during their lifetime repeatedly under claps, found, after death, no cicatrix in the urethra; and thence the conclusion was drawn, that those discharges were generally not accompanied with an ulceration. This, however, would prove little or nothing; because we see daily, that shankers on the prepuce or glans, though
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For in this last case, though the discharge has much the appearance of purulent matter, we know that it does not proceed from an ulcer in the nose or lungs. Thus we may easily account for the quantity of the matter discharged; and have no reason to be surpris'd that so large an excretion as is frequently observed in violent claps, should so little affect the constitution: while if an equal quantity of semen, or real pus, was discharged, we should find the constitution and strength of our patients materially injured; which, however, is hardly ever the case, even in the most virulent clap.

3. I have said, that the discharge, though most generally arising from the venereal virus, may proceed from any stimulus sufficiently strong applied to the urethra. To discuss this latter subject more fully, I shall consider it under the three following heads.

I. I am of opinion, that claps, " arising from
" an *external* cause, are actually excited by
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sometimes pretty deep, go off, and are a short time after so obliterated, as not to leave the least mark of a former ulcer or cicatrification behind. To conclude thence that there has never been any ulcer, because in such a cadaver we find no cicatrification on the prepuce or glans, would in this case be evidently wrong. But what anatomists have hitherto only supposed, is now made evident by an observation of my friend Dr *Stoll*, professor of the practice of physic at Vienna. He dissected a man who died in his hospital while labouring under a virulent clap. On opening the urethra carefully, he found its internal surface preternaturally red; two of the lymphatics white and enlarged; and the puriform matter oozing out from the internal membrane, especially at the lacuna, where the seat of the disorder was, without the least appearance of an ulceration or excoriation.

the stimulus applied to the cavity of the "urethra itself;" and that consequently, in coition, the virulent mucus of the vagina is driven, or, if I might so say, pumped or forced into the urethra, and not, as some writers have imagined, absorbed by the lymphatics of the glans penis, and thence deposited at the lacuna under the frænum.—If such an absorption actually took place, we should every day observe virulent runnings originally seated low down in the urethra, as well as under the frænum; whereas this is seldom or never the case. The seat of these runnings is always originally in the lacuna Morgagni, under the frænum; and those which are found to have their seat at the curvatura penis, or lower down in the urethra, are not so at the commencement of the disease, or arise from an internal cause. What has been said of the impossibility of such an immediate application of the virus to the inside of the urethra, because its orifice is closely shut up during erection, and therefore admits not of any such introduction, appears to me only to be reasoning from an ill-grounded theory*.

II. I shall prove, both from well-established principles, and from practical observations, "that claps not only may, but most frequently

* What is said here relates only to those claps which arise from a cause externally applied. But though venereal blennorrhagias do generally arise from an external cause, it is highly probable to me, that they may sometimes be excited by the venereal or any other acrid matter deposited from the mass.

“ quently do, arise from the same venereal poison which, applied to other parts of the body, produces shankers, or other symptoms of the lues.”—It has of late been asserted, even by some physicians of eminence, that the poison which produces a clap is different from that which produces the lues; and several specious arguments have been brought in favour of this paradoxical opinion. This dispute concerning the nature of claps, leads me into a discussion the more agreeable, as it is of considerable importance in practice; and as experiments and observations will, I think, enable me to prove not only the contrary, but perfectly to reconcile the different opinions, and thus set the matter in a clear light, and free it from that obscurity in which it has been hitherto involved. I enter therefore into the discussion of this subject with the consideration of the different reasons alleged for that favourite doctrine.

First, It is said, That *the poison which produces the clap does never, like that of shankers, produce any venereal symptoms in the mass, or the lues itself.* To this I reply, that though a lues is seldom produced by a blennorrhagia, yet we are by no means to look upon this as universally true. The reason why claps do not, like shankers, constantly produce the lues, is, that most of them, if not ill treated, excite only a superficial inflammation in the internal membrane of the urethra, without any ulceration. Hence absorption cannot easily take place, the poison being out of the course of the circulation. But I have seen claps, through in-
judicious

judicious treatment, or where the disease had been originally accompanied with an ulcer of the urethra, followed by the most unequivocal symptoms of the lues itself. The reason why the venereal poison indeed, when applied to the urethra, does not so frequently produce ulcers as when applied to the glans; prepuce, and other external parts, is, that the internal membrane of the urethra is defended by a large quantity of mucus, the secretion of which is moreover augmented, sometimes to a surprising degree, by the present stimulus. As long as this mucus is secreted in such abundance, the poison is enveloped, the urethra defended, and thus the formation of ulcers effectually prevented: but if, either from the violence of the irritation, or from any other cause, this secretion is diminished, or if by improper injections the mucus be washed away while some of the poison remains; I am of opinion, from more than twenty instances which occurred to me, that in nine such cases out of ten, an excoriation or ulceration of the urethra, and subsequent pox, will be as certainly the consequence, as from venereal ulcers in any other part of the body. If there was the same quantity of mucus between the prepuce and the glans, as there is in the cavity of the urethra, we should as seldom see ulcers there as we do in the urethra in cases of simple blennorrhagia. We observe, that when the poison meets there with a large quantity of mucus, as is sometimes the case, it then produces no ulcers, but only a great secretion of puriform mucus, which is commonly called a

gonorrhœa

gonorrhœa spuria, but which with more propriety may be termed a *Blennorrhagia balani*, i. e. an active discharge from the glans or corona glandis. The reason why this kind of running is less frequent than those from the urethra, appears to me to be, the small quantity of mucus which in most people is secreted in these parts; whence the virus, not being sufficiently diluted, commonly produces these erosions, or venereal ulcers, called shankers.—This likewise receives a considerable confirmation from the well-known fact, that women very seldom have shankers in the vagina, though very frequently in the labia pudendi and nymphæ. The mere want of a sufficient quantity of mucus on the latter, accounts, in my opinion, sufficiently for this effect.

Secondly, They maintain, That *the poison of the clap never produces shankers, and that the poison of shankers never produces a clap.*—In confirmation of this assertion, it has been said, that a person who has shankers will never communicate any other complaint but shankers, and that a person who has a clap cannot communicate any thing but a clap. I will not deny that this is frequently the case; but repeated and attentive observation authorises me to say, that, like too many other medical writers, they have drawn a general conclusion from a few observations favourable to their own preconceived opinion. For in many cases where I had occasion to examine both parties, I have been convinced, that shankers were communicated by a person affected with a simple clap; and, *vice versa*, that a virulent clap had been
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the consequence of an infection from a person having simple shankers only. But there is a more striking proof than this, which has not been taken notice of, viz. if a patient afflicted with a venereal running does not take care to keep the prepuce and glans perfectly clean, shankers will very often be produced; the cause of which may evidently be traced to the matter of the clap. This is one of the principal reasons why, in cases of blennorrhagia, we insist so much on the parts being kept clean; experience having taught us, that shankers frequently arise from negligence in this particular, even sometimes after the running has considerably abated. For the same reason, I constantly order those patients to keep their hands clean; having seen repeated instances of venereal ulcers in the nose and eye-lids being the consequence of this neglect. But besides this, will any man of the medical profession doubt, that matter taken from a shanker, and applied to the urethra, would not produce a clap? This is an experiment which I certainly should not venture to try on myself. I must conclude, therefore, that though the writers who have assigned this second reason, may be right in a few cases which fell under their own observation, they are wrong in deducing a general rule from a few facts; as I myself would be, in concluding from several contrary instances which I have observed, that a clap always communicates shankers, and shankers always a clap. Some cases of this kind I have seen, as already mentioned, where,

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in the fourth or fifth week of an ill-treated clap, or from a neglect of external cleanliness, shankers have been produced in places that had been perfectly well before: but this surely would be a very slender reason for asserting that such is always the case. These shankers arising from the matter of a clap, were, to my observation, constantly as virulent and infectious as original ones; and, like these, when left to themselves, produced the same pernicious symptoms in the body; and if a person who has such ulcers was to believe that they are not venereal, nor capable of bringing on the lues, because they so plainly originated from the matter of a clap, he certainly would find himself most disagreeably mistaken.

Thirdly, The last, and in their opinion the most unanswerable, reason for believing that the virus of a clap and of a confirmed lues are materially different, is, as they say, *That mercury never contributes to, or accelerates, the cure of a clap; but that, on the contrary, every blennorrhagia may be certainly cured without mercury, and without any danger of leaving the lues behind.*—To this I reply, That it is indeed a certain and authenticated fact, that a great many claps may be, and are, cured without mercury. I have seen many instances, where water, drunk for a considerable time, has cured the clap fully as well as any medicine whatever. Nature is very often able to effect a cure in acute distempers, if we would allow her to proceed undisturbed in her operations. Nature, when irritated by the poison, will excite a
greater

greater secretion of mucus than usual, in the same manner as the lachrymal gland pours out a larger quantity of water when a grain of sand falls into the eye. This larger quantity of mucus answers the purpose of diluting the poison as effectually as any medicine artificially injected. Besides, the poison is, by this means not only diluted, but carried off in part by the running; and the modern practice of curing claps, by injecting sweet oil, or other mucilaginous liquors, into the urethra, does nothing but assist nature in this salutary work.

But though I allow that claps may generally be cured without mercury, yet repeated experience has shown me, that it is not always possible to accomplish a cure in such an agreeable manner. In those cases where the blennorrhagia is of a milder kind, without any ulcer or excoriation in the urethra, it may certainly be radically cured without using a grain of mercury: and though mercury should be given in such cases internally, it cannot have the least effect; not because the disease does not proceed from a venereal poison, but because it lies out of the reach of the circulation.

To what is further alleged, that mercury never shows any power in accelerating the cure of a blennorrhagia, I reply, That they not only confound the runnings which arise from the venereal virus, with those which are occasioned by other causes; but that they do not make a proper distinction between the internal use of mercury and the topical application of it. I readily allow, that mercury given internally cannot

not cure simple claps, as the cause of the disease lies out of its reach. But the same consequence cannot be drawn concerning its topical application. I am indeed perfectly convinced, not only that mucilaginous injections, combined with mild mercurial preparations, contribute to the cure, but that they are the safest, speediest, and best of all methods for that purpose: though I do not deny, that in simple claps mercury applied in this way does not always produce beneficial effects; which, however, is often owing, I think, to the use of improper medicines or injections.

It must also be observed, that in this dispute, the contending parties seem to have entirely overlooked the distinction between the simple venereal blennorrhagia and that combined with an ulceration of the urethra: and of such importance is it to attend to this distinction, that daily experience shows us, that runnings of the latter kind are not only cured more safely and expeditiously by the use of mercury, but that they are very often, if not always, totally incurable without it; and that the gleet remaining after these claps, though they obstinately resist all other remedies, yet frequently very readily yield to the use of mercury, either externally or internally applied. I can even affirm with certainty, that a gleet of this latter kind, of any standing, can never be radically cured without it.

I now proceed to examine the last part of this objection, viz. That a clap never leaves a lues behind. This they have, no doubt, very frequently

frequently observed; but here they fall into the same mistake as formerly, by not distinguishing simple claps from those accompanied with an ulceration of the urethra. Indeed it must be allowed, that an absorption cannot easily take place in simple blennorrhagias: though I confess it to be yet a matter of doubt with me, whether even in this case an absorption and consequent lues do not *sometimes* happen; at least we have not a sufficient number of observations to determine this point with certainty.

But whatever may be the case in simple blennorrhagias, it is certain, that when the disease is accompanied with an ulcer of the urethra, the parts are then disposed to an absorption of the virus. In these circumstances, I never met with a single case where this absorption did not take place; and, if early recourse was not had to mercury, the lues most certainly was the consequence. I have also met with several instances, where, from the accidental wounding of a small blood-vessel in the urethra by the unskilful application of the syringe or catheter, the virus of a simple clap has been absorbed, and produced unequivocal venereal symptoms in the system; which, notwithstanding their origin, yielded very readily to mercury. We may therefore assuredly conclude, that there are some claps which cannot be cured without mercury; though there are others which may be removed without the use of that remedy, and without any bad consequence ensuing. An account of some instances which came under

my observation, will set this matter in a clearer light.

A young man of about twenty-three years of age, in perfect health, happened to be infected with a simple blennorrhagia, without any other venereal symptom. The running had been injudiciously stopped; the consequence of which was a total suppression of urine. A surgeon was called; and the patient being unable to bear any longer the pain from the distention of the bladder, recourse was had to the catheter. But on approaching the neck of the bladder, a great resistance was found, which prevented the instrument from being further introduced, tho' every possible method was tried. After waiting a little while, a second attempt was made, but without success. As the pain increased, and from the accumulation of urine there was great danger of a rupture of the bladder, a passage for the catheter was at last forced with as little violence as possible; which was succeeded by some drops of blood from the urethra, and followed by a large discharge of urine. By proper treatment the patient recovered in a few days from this dreadful symptom; the running came on again; and, in a short time after, he was, as we imagined, thoroughly cured. But soon after, although there had not been the least appearance of a shanker throughout the whole course of the disease, an exostosis, with a violent pain about the middle of the sternum, made its appearance. Mercury was administered; in a few days the patient found himself better, and in five weeks was perfectly cured.—Now from

an attentive consideration of this case, I would ask any unprejudiced person, Whether it is not reasonable to suppose, that by forcing the catheter some vessel had been wounded, in consequence of which the absorption took place; that the patient was from that moment infected, and afterwards cured in the same manner as if he had received the infection from a shanker*.

A gentleman of about forty years of age, who formerly had laboured under different claps within these last five or six years, got one, which he found, as he said, rather mild, without much pain in making water, and hardly any pain in erection the first five or six days; when, after violent exercise, he felt the whole urethra, and more especially the neck of the bladder, much irritated; for which, however, he took nothing but a mercurial purgative, and rubbed into the perinæum some mercurial ointment every day. These symptoms, together with the running, were nearly gone in eight days time, leaving only a little soreness in the perinæum behind. But the complaint for which he now

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* The different period of time at which the venereal disease and the blennorrhagia first appeared, has also been urged as an argument for the difference between the virus of the one and that of the other. But it is absurd to oppose uncertainty to uncertainty: we are, I think, as ignorant of the precise period when the lues first appeared, as we are of that of the clap. It has been asserted, that the inhabitants of the South-sea Islands, though afflicted with the lues, are yet free from the blennorrhagia. But Captain KING, who made the late voyage round the world with Captain Cook, assured me that this was false, and that he himself had seen many of them with the matter dripping from their urethra.

consulted me was a pain in the xyphoid cartilage, so violent indeed that he even could not bear the touch. I advised him to rub in some more mercurial ointment into the perinæum for two days. When I saw him again, the pain was not milder; but it had left its former place, and occupied now the middle of the sternum, which troubled him much, especially last night. I administered him a course of mercury; by the use of which this complaint disappeared in a short time after.

Thus far I have answered the arguments which were adduced to prove that the clap is never of a venereal nature; or, in other words, that it never proceeds from a poison of the same nature with the lues. But though I have shown that this doctrine is exceptionable, yet I am far from maintaining, that all claps arise from the venereal virus. On the contrary,

III. I am convinced, from experiments made on myself, and from observations made upon others, “ *that blennorrhagias sometimes arise from other acrimonies, or stimuli, applied to the urethra, with nearly the same symptoms as we observe in a venereal one;*” nay, I am now even inclined to believe, that such claps may sometimes be propagated as well as venereal ones. Whether the gonorrhœas, of which we have an account in some ancient writers, were of that nature, I am unable to determine; and therefore forbear to enter upon the subject. I shall only just observe, that the blennorrhagias I am here speaking of, are very different from the flux of venereal semen, or from the flux of mucus from the
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prostate gland. These latter complaints, arising chiefly from a weakness of the excretories of these parts, occasioned by an abuse of venery, and especially by manustupration, do not come within my present plan.

I proceed, therefore, to the main point, viz. to prove, that local inflammations of the urethra, accompanied with a running, commonly called Gonorrhœa, are not always, either in men or women, of a venereal nature. This idea first occurred to me from having frequently observed in stone-horses a kind of running of a greenish yellow matter from the urethra. This running, which arises from causes still unknown to me, I have seen last only for a few days, and then go off spontaneously. The same, and that more frequently, I have observed in dogs, without perceiving that they seemed to suffer much pain from it; and though indeed they continued to lick the part almost constantly, they were never affected with any ulcer of the mouth. I have besides, for these many years past, been consulted, by a variety of patients, for runnings very much similar to venereal blennorrhagias, but often so mild in their symptoms, and so short in their duration, that I began to doubt of their venereal nature. I have seen married people, who lived together in the most perfect harmony and friendship, where the one was affected with such a discharge for several days, without communicating the least symptom to the other. With some of them I have been most intimately acquainted; and convinced beyond any doubt, that they were faithfully at-

tached to each other; and that therefore the disease must have been owing to some other cause.

All these observations taken together, led me to believe, that some kinds of these runnings might perhaps owe their origin, not to the venereal poison, but to some different cause, either external or internal. I began to suspect, that a discharge might be produced by any stimulus applied to the urethra, whether venereal or not, provided it was sufficiently acrid to excite an inflammation, and consequent preternatural secretion of mucus from the urethra; just as coryzas, accompanied with a large preternaturally coloured secretion from the mucous membrane of the nose, arise from other causes. Having revolved these ideas in my mind for several years, I determined at last to try an experiment upon myself, which should either confirm the theory I had laid down, or entirely overthrow it. With this view, I took six ounces of water, and dropped into it as much of caustic volatile alkali as gave the mixture a very sharp fiery taste. This liquor I injected into the urethra, compressing the canal with the fingers of my other hand below the frænum, that it might be prevented from going further, and thus be applied to the very part which is generally the seat of the clap. The moment it touched the inside of the urethra, I felt such an insupportable pain, that I could not retain it for a single second; but withdrew the syringe, much against my will, almost at the instant of the injection, and the injected liquor ran out. But though the
pain

pain continued very severe for half a quarter of an hour, I resolv'd to make a second trial. It occasioned a more severe pain than I ever remember to have felt in my life before, yet I retained it for very near the space of a minute; when the pain became so excruciating that I could bear it no longer, and therefore withdrew the syringe. I instantly felt a strong desire to make water; but having taken this precaution before I made the experiment, I suppress'd the inclination. I lay down on my sofa, and waited the event with patience; but so violent was the pain, that it was near an hour before I was able to move. I then amused myself with reading during the remainder of the afternoon, eat my dinner as usual, but went early to bed. I was now oblig'd to make water, which I had not done since the time of injecting the liquor. When the urine came to the place to which the injection had been apply'd, I felt a very severe pain, but less violent than what I expected. Having slept well during the night, I examin'd the part as soon as I awak'd next morning, and found a pretty large discharge of puriform matter, of the same greenish-yellow colour with that in virulent claps. The pain in making water was now greatly increased, and the following night my rest was interrupted by painful involuntary erections. The morning after, the discharge was much more plentiful, nearly of the same colour, only perhaps a little more greenish; the pain in making water, however, was now so violent, that I resolv'd to mitigate it by injecting some lukewarm oil of almonds,

monds. By this it was greatly abated; the running continued five days, the pain all the while growing remarkably less in the part affected. But I now observed very distinctly a new inflammation taking place, lower down in the urethra, where I had felt nothing before, and where none of the injection had touched. This new inflammation began, as it seemed to me, at the very border of the former, extending itself lower down in the urethra; and was followed by a copious discharge, attended with the same symptoms as before, and continued for six days; at the end of which all the symptoms were greatly abated. But now, to my surprise, I felt distinctly the symptoms of a third inflammation taking place, extending from the border of the former about the caput gallinaginis to the very neck of the bladder, and attended by an ardor urinæ, and copious discharge like the preceding. At this I was seriously alarmed; for I had constantly injected the warm oil of almonds three times a-day. I perceived that the inflammation first excited by the caustic alkali was most evidently communicated from one part of the urethra to the other; whence I was afraid, that an inflammation of the whole internal surface of the bladder might at length ensue, and be attended perhaps with dangerous consequences. In this situation I continued betwixt hope and fear for about seven or eight days; when I found at last, to my great satisfaction, this inflammation gradually abate, together with the discharge, without passing the limits of the urethra; and I was perfectly freed from every symptom

tom of these three distinct blennorrhagias, as I might call them, at the end of the sixth week.

I since have seen several convincing instances of blennorrhagias, accompanied with a discharge of yellow-greenish matter and ardor urinæ, which undoubtedly were not venereal, because they disappeared in three, four, or eight days time without any remedy, and without leaving any symptom behind.

A particular friend of mine, a physician, being radically and perfectly cured of venereal complaints which he was formerly affected with, married, and enjoyed for three or four years a perfect state of health; when one morning he found himself affected with a running similar to that above mentioned. He lived, as may be easily imagined, for several days in the greatest agitation of mind, having no other person to suspect but his wife; with whom he at last insisted upon ocular demonstration. He found her so as she told him, perfectly healthy, which composed his mind; but to his great surprise, four or five days after, the running stopped, and he was perfectly well. The same accident, with the same symptoms, happened to him afterwards in the course of many years marriage with the same woman several times, always lasting from two to three, or five days, and constantly then disappearing of itself.

From this experiment upon myself, together with the several observations mentioned, and from a very curious case related in a dissertation published by Dr Oettinger of Tubingen, where a discharge from the urethra, apparently

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ly fimilar to that of a virulent clap, was produced by the internal ufe of olive oil, which had been wrung out of red Turkish yarn, on which it had been poured fome days before, the reader may judge, whether acrimonious fubftances, of a different kind from the venereal virus, fuch as cancerous ichor, or perhaps other ftimuli, applied to the urethra, may not fometimes produce the fame fymptoms as the cauftic did in my experiment, and the oil in Dr Oettinger's obfervation. I certainly believe, that runnings fimilar to a clap excited by the venereal virus, are fometimes produced from other caufes, only perhaps with milder fymptoms, and of fhorter continuance; though on myfelf I could not perceive any difference either in the colour and confiftence of the matter, or other circumftances. And I now look upon the following facts as thoroughly eftablifhed. viz. 1. That blennorrhagias frequently arife from the fame venereal poifon applied to the infide of the urethra, which, when applied to the glans, prepuce, &c. produces fhankers; or when abforbed into the fyftem, produces the lues: and, 2. That there are blennorrhagias which owe their origin either to acrimonious fubftances introduced into the urethra *ab extra*, or perhaps fometimes to a more violent mechanical ftimulus arifing during coition, or from fome other caufes hitherto unknown to us. Hence I divide the *blennorrhagia* at leaft into two fpecies, essentially diftinct from each other, viz. that arifing from the venereal virus, which I call *blennorrhagia fypbilitica*; and into that arifing from other acrid fubftances, to which I give the name

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Blennorrhagia ab acri, aut stimulo mechanico. By attending to this difference, our practice must be regulated as long as we are not thoroughly acquainted with the nature of other causes. It is owing to the neglect or ignorance of this distinction, that we hear quacks daily extolling the pre-eminence of their nostrums or secret injections for curing the clap in a few days, while patients sometimes complain of being kept by the most experienced physicians for weeks together, though affected with what they imagine to be the same complaint.

The running which a gentleman of my acquaintance got some years ago, notwithstanding, as he said, he made use of the best preventative of all, was undoubtedly not from a venereal cause; and he may be equally affected in time to come with the same complaint, though he now thinks himself safe, by what he calls *doubling* his precaution.

These facts, which I do not recollect of having been ascertained by any writer before or after my publication, seem to me to be of importance to mankind in general. By a proper and due consideration of these facts, the happiness of many married or unmarried couples will be for the future not so easily shaken or disturbed by imaginary and groundless suspicions; and many people will be preserved from falling a prey to ignorant practitioners, who, following the common routine of treating all claps by a course of mercurials, not only plague the patient with a heap of useless or hurtful

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drugs,

drugs, but thereby often lay the foundation to a number of very disagreeable complaints.

To the ignorance or neglect of this distinction between *Blennorrhagias* excited by the venereal poison, and those arising from other stimuli, we are likewise to ascribe the great difference among practitioners with regard to the mode of treatment. Some advise astringents, while others are lavish in their praises of emollients. Hence, even some practitioners of eminence, having observed that astringent injections had been of service in some cases, even in the stage of inflammation, recommend them to every patient affected with that complaint, but by no means with the same success in all cases. For, besides violent pains in the whole course of the urethra, swelled testicles, an acute suppression of urine, &c. which are the frequent effects of these injections, if the disease is of a syphilitic nature, and especially in its inflammatory stage; strictures in the urethra of the most troublesome and obstinate kind are often the consequence. By overlooking this necessary distinction, which applies to men as well as to women, the state of the patient is sometimes not only endangered, but the happiness of married people, and the friendship betwixt the two sexes, without just cause, frequently destroyed. I have certainly seen more than one instance of this kind.

The *simple syphilitic Blennorrhagia* ought further to be distinguished from the *complicated*, or that accompanied with an ulcer in the urethra: the latter

latter admits no radical cure without the internal use of mercury; whereas the former seldom or never requires it.

Sometimes, by the violence of the irritation, the secretion of mucus seems to be totally suspended, or at least considerably diminished, so that no discharge, or only a very small one, takes place though the other symptoms rage with the utmost violence. In this case, the disease has obtained the very improper name of *gonorrhœa sicca*, as if we were to say, *fluxus seminis sine fluxu*. Another symptom is a violent pain during erection, from the tension of the frænum, which has obtained the peculiar name of *Chordée*; but as these distinctions denote only the violence of some particular symptom, there is no occasion for retaining them.

I shall only add here one remark more. It is by most people imagined, and several medical writers have even publicly asserted, that the malignity, as they call it, or the virulence, of a clap, is always in proportion to the colour of the matter discharged; and that as soon as this colour changes into a whiter one, the discharge is no more infectious. But this appears to me by far too general a conclusion: for in some persons I have seen the matter retain its original brimstone colour to the very last day. The more certain signs of the abatement of the virulence of the disease are, the cessation of the ardor urinæ, and a capability of retaining the water as when in health; the matter becoming less, and of a thicker consistence, so that it grows ropy, and may be drawn into threads

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between the fingers; and the absence of pain or titillation during erections. The only certain signs, however, of a radical cure of this disease, and of a perfect security of not being able to communicate the infection, are, the entire cefation of the running; erections and excretion of semen without any kind of pain, titillation, or heat in the urethra: And though in general we may assure our patient, that the change of the greenish yellow colour to a white one is not an unfavourable sign of the disease growing better, he ought to be cautioned, that it is by no means a certain one of the venereal virus being entirely eliminated.

Having thus finished my considerations about the nature and the different kinds of blennorrhagias, we now proceed to

The Method of Cure.

HERE we must take notice of what has been established before, that every kind of clap or blennorrhagia, is a local inflammation with a mucous discharge, excited by a peculiar poison, acrid matter, or stimulus. Hence the following indications will naturally present themselves for all the different kinds of blennorrhagias, viz.

1. To remove the acrid matter or poison.
2. To defend the tender parts from its virulence or irritating nature.
3. To allay the irritation occasioned by the virus; or, if possible, to change its nature.

The first point nature provides sufficiently for;

for; and there remains little to do for the physician, but only not to disturb nature in this salutary attempt.

The second and third points will be most effectually answered by lukewarm oily or mucilaginous injections *, together with the internal use of some mucilaginous drink; or (what is perhaps preferable) by the sole internal use of the solutio Arabica, emulsio amygdalina, infusum of hemp-seed or malva, &c. cold or lukewarm, taken in as large quantities as the patient can bear without loading the stomach, with an anodyne draught at night, according to circumstances. These remedies are always useful; and for patients who have an aversion to injections, absolutely necessary.

If symptoms of an inflammatory fever appear, bleeding may sometimes be useful; but in general, more service will be derived from topical evacuations by means of leeches, and from emollient and sedative fomentations and poultices. The poultices are to be applied in the manner mentioned hereafter under the article *Phymosis*.—On the other hand, when the patient is of a weak and irritable habit of body, the discharge very thin and copious, attended with violent pain and a quick pulse, I have found the Peruvian bark, given in-

* If we meet with patients who are prejudiced against the use of injections, and wish to be treated by internal medicines, we ought to acquaint them, that the disease may be cured equally well without any topical application; but that it will then require, perhaps, a little longer time; and the observance of a more exact regimen.

internally, according to circumstances, with or without opium, more useful than the whole tribe of antiphlogistics; and opium given in emollient glysters is sometimes particularly useful in such cases. By the use of this medicine, the frequent painful erections are also much mitigated; but their return ought, as much as possible, to be prevented, by tying the penis down, lying on a matrafs on the side, and not in a warm feather-bed on the back. If the erection be attended with a strangulation of the glans, the treatment laid down under the article *Paraphymosis* will be necessary.

In order to avoid the more violent symptoms of this disease, the patient ought, during its inflammatory state, to use as little exercise as possible, to wear a suspensorium scroti from the beginning of the disease, and to keep the part affected as much as possible from the cold air. The suspensorium scroti, or truss-bag, may perhaps seem superfluous: but being so little troublesome when well applied, and so well calculated to prevent a swelling of the testicles, I never neglect to recommend it, especially to those who have once laboured under this latter disease. To prevent any of the disagreeable consequences of a clap, such as painful erections, chordee, paraphymosis, swelling of the testicles, or complaints of the inferior parts of the urethra, the best method perhaps would be to wear a proper bandage or bag round the penis united to the truss-bag; by means of which the penis might lie, if I may use the expression, like in a case or shell, defended at the same time

against all external injuries, such as cold, friction in walking; and may be constantly kept clean by renewing lint frequently; the best means to prevent shankers; and likewise to avoid dirty linen: When the patient is obliged to make water, there is a hole left at the end of this case, and he has nothing to do but to loosen the straps or to draw the ring of it backwards, and to take out the lint forwards.

With respect to the regimen to be observed during claps, exercise, external cold, high living, drinking spirituous liquors, and especially the frequent touching the part affected, ought carefully to be avoided by all patients; but especially by those of a phlogistic habit of body, as they generally suffer more, and for a longer time, from this disease than others. Such patients should confine themselves to a low diet, rather of the farinaceous than of the animal kind; they should eat no supper, and drink nothing but cooling mucilaginous liquids; whereas those of a different constitution are not to be restrained so much.

Neutral salts have been formerly recommended to cool the blood, and to promote the secretion of urine, by which it was thought to mitigate the inflammation, and assist nature in the expulsion of the virus. But I have constantly found them to be hurtful. They increase the secretion of urine, render it sharper, and thus augment the irritation, without producing any of the good effects ascribed to them. However, in some cases, the *pulvis ad Blennorrhagiam* mentioned below, may have its good effects.

A prejudice in favour of purging in claps has also long prevailed. For this purpose, some have used the mild, and others the more drastic, kinds of purgatives; and calomel especially has been recommended to be given every two or three days. Neither of these medicines I ever saw do any good, but frequently much harm. Besides their tendency to promote the absorption of the poison into the system, like improper injections, they often give rise to swelled testicles, diseases of the prostate gland, suppression of urine, ulcers of the urethra or bladder, &c. However, though purging is always improper, the body ought to be kept open, so that the patient may have a stool regularly, which is best effected by the *mixtura laxans* or *pilulæ laxantes*; and I have no doubt that it is partly owing to this improvement of our practice, that we now so seldom observe symptoms of the lues, or ulcers of the bladder, following a clap.

Thus far with regard to the more general run of the disorder; but venereal Blennorrhagias are not always so simple. Sometimes the poison seems to be of a more exalted acrimony, or rather meets with constitutions of a more irritable nature; or, as is frequently the case, the symptoms are exasperated by improper treatment, or by neglecting the above-mentioned rules. In these circumstances, the patient feels a more violent heat and pain in making water, accompanied with a tension of the urethra along its whole length; a perpetual desire of making water, without being able to pass more than a few scalding drops at a time; frequent erections,
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with most exquisite shooting pains throughout the whole length of the urethra, but more especially at the frænum. Sometimes streaks of blood, or real blood, are discharged with the urine; and evident marks of an ulceration of the urethra make their appearance. In this case, besides the above-mentioned remedies, the use of mercurial fumigations or frictions on the perinæum, and inside of the thighs, I have found to be one of the most efficacious remedies.

The same treatment will prove serviceable, if, by any cause whatsoever, the discharge of the venereal Blennorrhagia, during its inflammatory stage, be suppressed or stopped, either by acrid or astringent injections, or even by the most proper injections applied in an improper manner, by drastic or repeated mild purges, by the premature use of turpentine or balsamics, by violent exercise, and especially by catching cold in the part affected. The virus, in these circumstances, seems to leave its natural seat, the lacuna Morgagni under the frænum, and to settle lower down, where the excretory ducts of the feminal vessels and prostate gland open into the urethra, and there excites a swelling in one or both testicles; or, if it has been driven still lower down, to the neck of the bladder, the patient has a continual desire to make water, without being able to pass any, or only a few drops at a time. He is then often unable to stand upright for a quarter of an hour; and a total suppression of urine is in this case frequently the consequence. In all these different

places, the poison generally produces only a superficial inflammation; though not unfrequently also, by its virulence, or want of a sufficient quantity of mucus to dilute it, an excoriation and ulceration in the urethra, which then never fails to end in an obstinate gleet, and to be followed by a general infection of the mass.

In speaking of the dreadful consequences of a suppressed or stopped venereal Blennorrhagia, I must not omit to mention a disease, perhaps the most melancholy of all venereal complaints whatever; I mean, that kind of inflammation in one or both eyes, frequently accompanied with a discharge of puriform matter, entirely similar in colour and consistence to that of a clap, and generally terminating in perfect blindness; or in other cases, instead of an ophthalmia, a more or less perfect deafness. Though I am not able to account for the origin of those complaints suddenly following the suppression of a clap, especially from severe cold (for I have never observed them but in very cold climates and seasons), to which the patient had been previously exposed, I am convinced of the fact, and shall speak of it more fully hereafter, under the head of *Venereal Ophthalmia*.

The only remark more I have to make here is, that all these complaints from repelled venereal Blennorrhagias, being often attended with such dreadful consequences, a medical man of character ought not to mind the opinion of others, but be guided in his conduct by justice
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and conscience, and do every thing that possibly may be done to cure or relieve his patient labouring under these unhappy circumstances. I therefore have tried, in four cases of swelled testicles and suppression of urine, arising from a retropulsed clap, the inoculation of the venereal poison, by means of a bougie previously applied for about half an hour to a person afflicted with a clap, and then introduced into the urethra, with unexpected success. This I do not recommend from fancy, as has been said by a late writer: it is not my custom, as the reader may judge from the whole tenor of this work, to indulge in fanciful theories; which I think hurtful both to the patient and to the young practitioner. The method proposed has been tried many years ago in one of the first military hospitals in Europe with constant success, and has been since confirmed by Dr *Lange* in a treatise on Ophthalmia. Was I less cautious in drawing conclusions, and more ignorant of the observations made by other medical writers, I might probably be easily induced to swell my book by useless and fanciful theories into a large quarto.—We are consulted for giving relief; and consequently fulfil our duty, at least, by offering a remedy, which the patient has always in his power to accept or refuse.

C H A P. III.

O N the BLENNORRHOEA, OR GLEET.

BY the name *Gleet** we commonly understand a continued running or discharge after the inflammatory symptoms of a clap have for some time disappeared. A *Gleet* or *Blennorrhœa*, however, is properly, a preternatural discharge of puriform or limpid mucous matter, or of real pus, from the urethra in men, and from the orifice of the vagina in women, without pain, heat of urine, or any other symptom of inflammation.

Gleets arise chiefly from two causes: 1st, From simple relaxation of the mouths of the vessels, which had been irritated, inflamed, and thereby lost somewhat of their contractile power; or, 2^{dly}, From an ulceration, or an erosion in some part of the urethra. The former may, with
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* This disease, which occurs in the Latin authors under the different denominations of *Gonorrhœa benigna*, *G. non virulenta*, *G. inveterata*; *Leucorrhœa*, *Fluor albus*, *Fluor albus benignus*, I gave the more proper name *Blennorrhœa*, as if you were to say, *Fluxus mucii* (*passivus*), or a discharge of mucus without any phlogistic symptoms: which name distinguishes it as well from the clap, to which I gave above the name *Blennorrhagia*, (*Fluxus mucii activus*), or a discharge of mucus with symptoms of inflammation, as from the real discharge of semen; which disease alone is properly called *Gonorrhœa*.

more propriety I think, be called *Blennorrhœa simplex*, and the latter *Blennorrhœa complicata*. See the Nosological Table.

In the former kind, after the inflammation and irritation occasioned by the acrid matter have subsided, the vessels, from which that discharge proceeded, continue to pour out either matter of the same puriform appearance, or only a clear kind of mucus, but somewhat thicker, in a preternatural quantity.—Sometimes a gleet begins to appear after coition, exercise, or free living, though the discharge from the preceding clap had entirely disappeared some days or weeks before.

Gleets of this kind are for the most part only a local complaint, the simple remains of a clap not perfectly cured; but those of the second kind may be considered as the remains of a very violent or complicated and ill-treated or neglected clap, and are generally accompanied with an infection of the mass.

Hence it appears, that the nature and seat of gleets may be as various as those of claps; but according to the place where they are situated, the time they have continued, and the cause by which they are produced, the method of cure must be different, and becomes more or less difficult and complicated.

Those gleets are most easily cured which have their seat in the urethra under the frænum, in the lacuna mucosa Morgagni: those originating from ulcers of the urethra, and which have continued for some time, are much more obstinate; and those arising from erosions of the excretory

ducts of the feminal vesicles, or from a diseased prostate gland, or from ulcers of the bladder, are the most stubborn of any. In general, the further back in the urethra gleet is situated, the more apt they are to produce a difficulty in making water, or strictures and suppression of urine; and the more difficult, in general, is the cure.

I have always found those gleet which succeed a simple clap to be merely a local disease, and to owe their existence solely to a relaxation of the small vessels after the inflammation has subsided, exactly similar to the discharge of thick puriform mucus after the inflammatory symptoms of a coryza or catarrhus are gone off. But such gleet as arise after violent, ill-treated, or neglected claps, are often accompanied with an excoriation or ulceration of the urethra. In this case, generally the venereal poison has been absorbed, and the mass is of consequence more or less infected.

As it is of the utmost importance, though sometimes extremely difficult, to ascertain these points, I shall endeavour to enumerate the most remarkable symptoms by which it may be known whether there is any ulceration in the urethra. They are shortly as follow: 1. Streaks of blood in the mucus, or real blood discharged, during the inflammatory stage of the clap, as above mentioned, but more especially when continuing after the violence of the inflammation has abated. 2. Real pus, or a thin ichorous matter, discharged in a greater or lesser quantity from the urethra: 3. A pain confined to
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one part of the urethra ; but felt more particularly upon introducing the catheter, or pressing on the urethra externally. 4. An acute pain in one particular place of the urethra, felt especially in passing the last drop of urine, or in the emission of semen.—Though all these symptoms pretty plainly indicate an ulcer, its existence will be much more confirmed, if the preceding symptoms of inflammation have been very high ; if the patient has neglected or hurt himself, or has been improperly treated ; or even, as I have sometimes seen, if the urethra has been wounded by a mismanagement of the syringe, or a rude application of the catheter, during the inflammatory state.

By not attending to these marks, which sufficiently point out the existence of an ulcer in the urethra, we shall be often disappointed in the cure. Whenever, therefore, we are consulted about gleet, our first business ought to be, to examine whether they arise merely from relaxation, or from an ulceration in the urethra ; and in this latter case, whether the disease is universal or only local. If there is an ulcer, it will be necessary, in order to form a proper prognosis, to ascertain the place of that ulceration in the urethra.

When the disease is merely local, it may be cured either by external topical applications, or by internal remedies, or by both united. The best topical remedies I have found, are injections made of a solution of verdegris in volatile alkali, or of white vitriol dissolved in water, and mixed occasionally with some grains of sugar

gar of lead; or of a solution of blue vitriol or alum; each of which may in certain circumstances be useful. In many cases, I have found a large dose of calomel, prepared according to Mr Scheele's process, suspended in a small quantity of simple water or any mucilaginous fluid, injected five or six times a-day, preferable to any other remedy. *See the Formulas.* Of the internal remedies for the same purpose, I shall speak hereafter.

If the disease be universal, viz. accompanied with an infection of the system, as is almost always the case where there is an ulceration of the urethra, we must, besides topical remedies, have recourse to those appropriated to the cure of the lues itself. In this case, it is impossible to cure the gleet till we have purified the mass. After this is done, or while it is yet doing, I have found a solution of sublimate and litharge in vinegar, or a solution of verdegris in volatile alkali, diluted with a sufficient quantity of water, and injected two or three times a-day, a most excellent remedy.

With regard to injections in general, in Blennorrhagias as well as Blennorrhœas, I must make two material observations; the neglect of which may sometimes occasion our being disappointed in the cure, even though the best remedies are used. The syringe made use of for this purpose should have a short but wide pipe, just so large that its orifice may go into the orifice of the urethra, but not further; and the piston ought to apply close to the sides of the tube. If the pipe of the syringe be smaller than
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the orifice of the urethra, it is always attended with two considerable disadvantages. The first is, that with a small pipe, especially if not perfectly smooth, the patient easily hurts or wounds the inside of the urethra; and thereby renders himself liable to an ulceration of that part, and consequent absorption of the poison. The second is, that the liquid injected, instead of going into the cavity of the urethra, will, in proportion as the patient presses the piston, run out sideways through the orifice of the urethra. If the piston itself does not apply closely to the sides of the syringe, even if the pipe be sufficiently large, so that it perfectly closes the orifice of the urethra, the liquor will regurgitate between the piston and syringe, instead of going into the urethra; and thus the patient may imagine that he has injected the liquor properly, when perhaps little or nothing has entered the urethra. But though the syringe be properly made, and at the same time the most careful instructions be given, patients do often perform the operation in such an awkward manner, that no good effect is obtained.

The syringe, properly made, should be applied closely and exactly to the orifice of the urethra; so that, by the conic form of its pipe, all passage may be denied to the liquid betwixt it and the sides of the urethra. If the seat of the disorder be in the usual place of claps, viz. in the mucous lacuna, just under the frænum, the patient should, with one hand, compress the urethra at the first curvature of the penis, where the scrotum begins; while he holds and mana-

ges the syringe with the fingers of the other. The piston, which should always fit close, but slide easily, ought then to be pressed very slowly and gently, till he feels the urethra gently distended; and thus keep the liquid injected for a minute or two in the urethra, repeating the same operation three or four times. By a rash or longer-continued pressure of the piston, the irritation thereby produced in the urethra often will do more harm than the injection does good.

By attending to these directions, a double advantage is obtained. The liquid is properly applied to the part affected, the urethra not violently distended, and at the same time no danger is incurred of driving some of the poisonous matter lower down the urethra along with the injected liquor; but if the seat of the disorder be lower down, the precaution of compressing the urethra behind is superfluous.

With respect to the liquid itself, it should always, in cases of claps, be made lukewarm; but in gleet this is unnecessary. In the former, if the liquid be too cold or too warm, it may easily hurt the patient, either by driving back the matter, or increasing the inflammation. In many instances also the liquid ought to be well shaken before it is injected. It may easily be made warm, by putting a tea-cup full into a basin of hot water. At all times, before any injection is applied, the patient should attempt to make water.

The other observation I have to make is, that young men labouring under gleet, after ha-
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ving for some time used injections, and finding themselves considerably better, frequently grow careless in the application, and even sometimes neglect the injection altogether for a day or half a day. The consequence of this neglect is sometimes very disagreeable. For I have seen several instances, where, by a neglect of this kind for a single day, the running has the day after so much increased, as if it had been a fresh gleet; and the relapse being more obstinate than the original disease, the patients were thereby obliged to continue the injections for more weeks than they would perhaps have required days to cure the distemper, had they continued the use of them without interruption. In general, in order to prevent any danger of a relapse, I order my patients to apply the injections three, four, or, according to circumstances, six times a-day during the disease, and to continue the same regularly for ten or twelve days after the running has entirely ceased.

Syringes of a different kind are required for women, if we wish to see any good effects produced by the injections administered to them, as I shall mention below, under the article of *Venerereal Ulcers*.

Besides injections, bougies will be often of great service, nay, absolutely necessary for curing the gleet, especially when there is an ulcer in the lower part of the urethra. They may be used either alone, or in conjunction with proper injections. They should be kept in, for the first three or four days, only for a quarter or half an hour at a time, until

until the patient be accustomed to them, so that he can bear them longer; and then they may be kept in for several hours in the morning and evening, or during the whole day and night. It must be left entirely to the judgment of the practitioner to determine whether the bougies to be employed should be perfectly simple or of an irritating or sedative quality; the circumstances of the case will point out whether those of the former or latter kind are necessary. It ought, however, to be remembered, that before the application of bougies, as well as injections, the patient ought always to attempt to make water, in order to give the remedy time to produce its effects on the part affected. If the application of the bougie produces, as I have sometimes observed, a tension and pain in the spermatic cord, or a swelling of the testicle, it ought to be discontinued for a few days. This effect I have sometimes also found to be produced by the use of too large a bougie, and to be removed by changing it for a smaller one. In general, small bougies should be preferred to large ones in the beginning. See Formulas, article *Cerei medicati*.

Should we be disappointed in our expectations of a cure, either by the use of bougies or injections of the above-mentioned kind, it will be proper to inject such liquids as may excite an irritation and inflammation in the urethra, especially in the part affected. These have often been attended with success after the best astringents have failed. For this purpose, we may use
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the *injectio ad Blennorrhœam. 3tia* made stronger, or a simple solution of sublimate in water, or a large dose of calomel suspended in water.

It has been observed by Dr *Cullen*, that obstinate gleet has sometimes been cured by violent and long-continued exercise on horseback; such as a journey from Edinburgh to London: and it is probable that this cure is produced by exciting an inflammation in the parts, as the injections just now recommended are apt to do. Gleet has sometimes been cured by coition; which may be accounted for on the same principles: but this is a remedy which can never be recommended by any practitioner; because gleet is often infectious, and the venereal disease is by these means certainly communicated to an healthy woman; or, if she be not healthy, the man would not only run the risk of getting a fresh clap, but even the lues itself, if his gleet was owing to an ulcer in the urethra.

Besides the above-mentioned remedies, some others may be tried in gleet of the more obstinate kind; such as the *tinctura cantharidum* internally, or injections made with oil of turpentine, or with a decoction of tormentilla, or an infusion of galls; a blister to the part affected, or to the perinæum. Mr *Birch* has found gentle electrical strokes passed through the part affected in some cases effectually to produce a cure; and I have been informed by a friend, that he once saw a desperate gleet cured by injecting the tincture of ipecacuanha. I can, however,

ever, say nothing with regard to the effects of these remedies, having never had occasion to try them. I mention them only, because we may be sometimes at a loss for medicines in very obstinate complaints of this kind.

Bathing in cold water has also been recommended in obstinate gleans, and I have seen sometimes very good effects from it; but, in two or three cases, it rather increased the running. The same has also been observed by others.—Sea-bathing is very beneficial; as likewise washing the genital parts with cold water, by itself or mixed with vinegar.

There are three kinds of *internal* remedies made use of in gleans; each of which may be used, either alone or joined, as circumstances may require, with the local applications above-mentioned. These are,

1. *A course of mercurials.* This is always necessary where the disease arises from an ulcer of the urethra, especially of a long standing, or where a general infection has taken place. In such cases, pills made of turpentine and mercury are often very proper.

2. *Balsamics.* Such as balsamus Canadensis, Tolutanus, Peruvianus, copaivæ, e mecha, olibanum, terebinthina, or the aqua picea. Of these the most commonly used is the copaiva balsam; of which the patient may take from fifty to an hundred drops in a draught of cold water once a-day at noon, or twice a-day morning and evening. Immediately after the balsam, from twenty to fifty drops of Mynsicht's elixir of vitriol should be taken, in the same quantity of
water,

water, to render the former less disagreeable to the stomach. Half a drachm of pure turpentine, or a drachm of balsamum traumaticum, often answers the same purpose as the copaiva balsam. I knew an instance, where a very large quantity, from one to two ounces, of copaiva balsam was swallowed at once by a young man, who was thereby radically cured of a most inveterate and obstinate gleet.

3. *Corroborants.* Among these the tormentilla root, in powder or extract, the Peruvian bark in powder, or infused in red wine, or, which is sometimes better, infused in lime-water, united according to circumstances, with iron, balsamics, or some other powerful astringent, such as resina kino, resina draconis, &c. will sometimes prove effectual when all other remedies have failed. After all, however, our utmost endeavours to cure an inveterate gleet will sometimes be in vain; and there have been instances where Nature has effected a cure in time, after the unsuccessful and tedious exhibition of the most powerful remedies.

Obstinate gleets sometimes originate, as mentioned above, from a singular cause; of which we have some examples in anatomical collections. This is, when two ulcers of the urethra happen to be nearly opposite to each other. In this case, some parts of them will inosculate with each other, producing a kind of bands across the urethra, with a small ulceration below. Thus not only a most obstinate running, baffling all medicines, is produced; but a difficulty of making water frequently takes place, and an impossibility

possibility of making it but in a very small stream, or not at all. The only remedy in this case, if we have some reason for suspecting this cause, is the chirurgical operation; though in some cases, where the bands are not too strong, they might perhaps be broke by applying a probe or catheter. Whether or not the following case of a very troublesome and obstinate gleet belongs to this class, I leave my readers to judge.

Some years ago I was consulted by a nobleman concerning a gleet, with which he had been affected for about ten years, and for which he had consulted the physicians and surgeons in several countries. Sometimes it stopped for several days; then it came on again of itself, especially after riding on horseback or coition. At such times he always felt some uneasiness, and the next day a little running, which went off till the same cause was repeated; which rendered him very uneasy, especially as he intended to marry. Upon examining the patient, I found the disorder seated down in the urethra, about the place called the *Caput gallinaginis*. Every internal and external remedy that I knew of was applied without effecting a radical cure. I took the disease to be a callous ulceration; and, on this supposition, applied bougies for eight or ten weeks without the least effect. Being obliged to continue my travels, I left him very little the better for what I had done; at the same time advising him, as he intended to go to Paris, to consult there whomsoever he could expect any benefit from. The result,

as he afterwards informed me by letter, was as follows. “ After my arrival at Paris, I consulted, according to your advice, all the medical men of eminence in that city, who rendered me more uneasy about my disorder than I had ever been before, by their different opinions of the cause, nature, and cure of it. Some advised me to a new mercurial course; others prescribed different internal and external medicines. I showed them all the prescriptions successively tried by you; they seemed rather astonished, that none of them, after a fair trial, had succeeded. However, some new injections and internal remedies were ordered, rather I think to satisfy me for my money, than in hopes of doing me any real service; indeed I was for three or four months entirely in the same condition as when I first came to Paris. But, surprising it may seem to you! the last person whom I consulted upon recommendation, seemed to me the most ignorant I had applied to. He said he was obliged to examine the passage of the urethra with a catheter, in order to ascertain the place, &c. He accordingly applied it. It went in as usual very readily, till it came to the seat of the disorder, where it met with the same obstacle it had always done, which I had before told him of. Notwithstanding this, he endeavoured to push it further. I told him it gave me excessive pain: but he pressed it imprudently on, and it went through; upon which some blood immediately run out of the urethra. This, as it seemed, much

E 2. frightened.

“ frightened him: he asked my pardon, withdrew his instrument, took his fee, and departed; but left me much dissatisfied for employing him. I expected I should be worse the next day, and suffer much from his unskilful conduct: but quite the reverse; I have been free from any disorder these two months past. I ride on horseback, and enjoy a woman, without finding any ill effects from them; and therefore think myself radically cured. The friendship I owe you, for the trouble you took on my account, obliges me to state to you this particular case; which may be of use to you, and which you perhaps can better account for than those I have since consulted.”

Gleets, arising from deep and large erosions of the mouths of the seminal ducts, or excretories of the prostate gland, as also those which originate from a diseased prostate gland, or from ulcers of the bladder, are often incurable.

In all inveterate and obstinate gleets, which have their seat low down in the urethra, we should carefully examine the prostate gland; for to a disease of this part they frequently owe their origin. If the gland shall be found preternaturally swelled and hard after a mercurial course, repeated blisters applied to the perinæum, with large doses of the inspissated juice of conium maculatum, or a decoction of meze-reum, I have seen in some instances attended with success where all other remedies had failed.

Of the treatment of gleets combined with strictures,

strictures, viz. with more or less difficulty in making water, I must refer to the chapter on *Ischury*.

Gleets which arise either from a weakness, relaxation, or sometimes perhaps from too great an irritability of the ducts of the seminal vessels, are properly called by the name of *Gonorrhœa (fluxus seminis)*. In these cases, a real semen is discharged, sometimes without erection or any sensation of pleasure: and is either continually dripping off, or evacuated at times by debilitating nocturnal or diurnal pollutions. Sometimes it is discharged only on going to stool, when the hard fæces, during their passage in the rectum, press on the seminal vesicles and prostate gland, and thus force the relaxed orifices of their excretory ducts. This disorder, however, does not arise from any venereal infection, and but seldom from the abuse of venery. The most general cause of it is manustupration, and therefore comes not within my plan at present. It requires a most prudent and careful treatment; otherwise the patient will fall a victim to that kind of consumption which we call with Hippocrates *Tabes dorsalis*.

NOSOLOGICAL TABLE, illustrating the two preceding Chapters.

Clas. *Locales.*

Ord. *Phlogoses, or Mucifluxus.*

Genus, **BLENNORHAGIA.** *Anglis, Clap; Germanis, Tripper; Gallis, Chaude-pisse; Italis, Gonorrhœa.*

Character in Viris. Titillatio, præcipue in urethræ parte anteriore in lacuna Morgagni sub frænulo; subsequente post biduum aut quatrimum, phlogosi locali, cum ardore et dolore in mingendo; accedente stillicidio materiei purulentæ vel puriformis ex urethra; corpore cavernoso urethræ præternaturaliter turgescente, plerumque cum erectionibus membri virilis solito frequentioribus, dolorificis.

In Fœminis. Titillatio ad orificium vaginæ externum; subsequente post biduum aut quatrimum dolore, rubore et tumore præternaturali, præcipue (ad rapham) prope commissuram labiorum vulvæ inferiorem; accedente ardore et dolore ejusdem partis in mingendo; cum stillicidio materiei puriformis ex vulva.

Gonorrhœa

----- virulenta

----- maligna

----- venerea

Fluor albus veneris, f. malignus

Leucorrhœa venerea

} auctorum.

Variat

Variat ratione sedis.

Blennorrhagia balani
 _____ urethralis
 _____ vesicalis
 _____ labialis
 _____ vaginalis
 _____ uterina
 _____ nasalis

Materia fuente:

ex glande,
 ex urethra,
 e vesica,
 e labiis vulvæ,
 e vagina,
 ex utero,
 e naribus.

Species sunt,

Blennorrhagia syphilitica,
 α. Simplex,
 β. Complicata, f. ulcerosa.
 Blennorrhagia a manuſtupratione.
 _____ ab acri externe applicato.
 _____ a ſtimulo interne applicato.
 _____ arthritica.
 _____ a calculo veſicæ.
 _____ a cancro uteri aut vaginæ.

Sequela Blennorrhagiæ eſt,

BLENNORRHOEA. *Anglis*, Gleet; *Germanis*, Nachtripper, weiſſer Fluſ; *Gallis*, Gonorrhée inveterée.

Character. Stillicidium humoris puriformis, aut mucii limpidi, ex urethra in viris, ex orificio vaginæ in ſœminis, præternaturalis, ſine libidine aut dyſuria.

Gonorrhœa benigna
 _____ inveterata
 Fluor albus benignus
 Leucorrhœa

} auctorum.

Variat ratione ſedis ut Blennorrhagia.

Species practico notatu necessariæ sunt,

In viris: Blennorrhœa simplex, a relaxatione vasorum.

————— complicata:

α. Cum ulcere urethræ;

β. Cum ulcere aut scirrho, prostata.

In fœminis: Blennorrhœa a relaxatione aut debilitate vasorum uteri aut vaginæ.

————— ex Blennorrhagia prægressa.

————— ex diætâ laute et vita sedentaria.

————— a manuſtupratione.

————— ab ulcere aut cancro uteri vel vaginæ.

Sequelæ Blennorrhagiæ ſyphiliticæ retropulſæ ſunt :

Tumor teſticulorum.

Iſchuria urethralis.

Bubo?

Ophthalmia.

Dyſecœa.

Fluxis puriformis ex oculis,

————— ex auribus,

————— e naribus.

Syphilis.

Genus, GONORRHOEA.

Character. Excretio feminis aut mucî prostatae præternaturalis, potissimum sine erectione et libidine; accedente dolore lumborum et atrophia.

Gonorrhœa vera

Pollutio nocturna debilitans

Excretio feminis involuntaria

} auctorum.

Species sunt :

Gonorrhœa a debilitate aut relaxatione vasorum.

————— ab ulcere aut erosione ductuum excretoriorum prostatae et vesicularum feminalium.

————— a nimia irritabilitate, potissimum per manuſtuprationem inducta.

C H A P. IV.

On the Venereal Swelling of the Testicles.

WHEN a Clap has been treated either by improper medicines, or the patient labouring under it uses violent exercise, or especially if he catches cold in the part affected, by exposing it to a stream of cold air, or by washing it with cold water, one and sometimes both testicles begin to swell, often to an enormous size, attended with all the symptoms of a local inflammation; to which an irritation of the whole system and violent fever not unfrequently succeed. This disease is called a Swelled Testicle, and by some writers, though very improperly, *Hernia humoralis*.

Previous to the swelling, the running of the clap partly or entirely ceases; but, sometimes, this will only happen, at least to an observable degree, a day or two after the swelling has actually taken place.

That the swelling and symptoms of this inflammation are produced, in this case, merely by the irritation of the poison lodged lower down in the urethra, at the place where the excretory ducts of the seminal vesicles open, and not (as was formerly supposed) from an absorption and transposition of the poison to the testicle

cle itself, is now generally admitted; and will perhaps be more evident from the observations which I shall lay down upon the nature and seat of this disorder, and from the new method of treatment which I found the most successful for this complaint.

There is another species of this disorder mentioned by some writers, viz. an inflammation of the testicle, arising from the venereal poison being deposited there from the mass. This kind of disease never came under my observation, and I therefore can say nothing about it. We are also told, that a swelled testicle arises sometimes from venereal ulcers of the glans being dried up: but neither do I recollect to have observed any case of this kind; though I have seen a patient, who, two years ago, was affected with a swelled testicle, which being improperly treated, brought on a fistula in ano. This was operated, and nearly healed up, when a swelling of the testicle appeared again; for which I was consulted. I succeeded in dispersing the swelling, by bringing on a running from the urethra, and in completing the cure by a course of internal remedies.

It has been hitherto the general opinion, that the testicle itself is always the seat of this disorder. But, upon a more close attention and inquiry, I found,

First, That the testicle itself is never swelled, or in the least affected, in the beginning of this complaint; and that the only part affected and swelled is the epididymis; of which every patient may easily convince himself by a careful examination.

nation. I said, the testicle is never in the least affected in the beginning, or for the first five or six days; and if it becomes affected afterwards, it is entirely owing to a preposterous treatment. *2dly*, I have constantly observed, that the fever which frequently attends this complaint, especially in irritable constitutions, is never a primary disorder, but only concomitant to, or the consequence of, this local irritation; and that for this reason, by the method mentioned hereafter, it is almost generally in the power of the physician, if he be called in time, to prevent any fever from taking place in this complaint.

In what manner this swelling of the epididymis and spermatic cord is produced, is difficult to explain. Some think it is owing to sympathy; others, to a certain quantity of poison absorbed and deposited to the testicle; and others, to the inflammation slowly extending downwards to the neck of the bladder, and thus obstructing the course of the semen. If it were owing to sympathy, why does the swelling never happen as long as the discharge of a clap goes regularly on, though the symptoms of inflammation and irritation run ever so high? The second cause ascribed is a mere supposition, neither founded on facts nor anatomical observations. The third seems to be the most reasonable; though it must be observed, that if the extended inflammation was the only true cause of this swelling, it would seem that every patient who has a diseased prostate, or an inflammation at the neck of the bladder, should also be affected with a swelling of the testicles; which,

which, however, is generally not the case. It appears, therefore, most probable to me, that this disease is owing to the venereal poison being retropulsed from its original seat, in the lacuna Morgagni under the frænum, lower down the urethra, where, by its acrimony, it irritates the excretory ducts of the feminal vessels; whereby the secretion of the semen is increased, but its excretion prevented, on account of the excretory ducts being irritated, contracted, and swelled: hence an accumulation of seed, first in the vas deferens, then in the epididymis, and at last in the testicle itself. Hence, from this *distention* of the spermatic vessels, not from any real inflammation of those parts, a pain comes on, which, for this very reason, is always, we observe, obtuse, never acute; and hence we often see the patient suddenly relieved by a spontaneous pollution. But if the same cause continues, the epididymis, and the testicle itself, will become thereby affected; and its inflammation, if the poison irritating the excretory ducts of the feminal vessels be not removed, will end in a suppuration or obstinate hardness of the parts.

From the cause assigned, we clearly conceive how it happens, that, after the swelling of one testicle is gone, the other is sometimes attacked; and that, after a suppression of urine from a retropulsed clap is removed, sometimes a swelling of the testicle comes on. It is owing to the transposition or change of place of the poison. It will further appear, from the nature of this disorder, why a man who has been once affected with

with a swelled testicle, is so easily affected with the same disorder a second time.

But all theoretical reasonings are of little use, if they do not lead us to establish a more rational and effectual method of cure than has been before practised. When I therefore *first* observed, That this disease is not *originally* an inflammation of the testicle, as has been hitherto generally supposed; but a swelling of the epididymis, as I have found to be the case in all my patients: *Secondly*, That the applications, otherwise very useful in topical inflammations, such as poultices, fomentations, &c. were in this case of no use at all; nay, sometimes even hurtful, as I have experienced in myself: *Thirdly*, That this swelling is brought on, by whatever cause, which stops the running of a clap; and most generally by catching cold, or cold applications to the penis, by violent exercise, or by astringent injections: *Fourthly*, That a swelling of the same kind is sometimes brought on by the simple application of a larger bougie, and cured without any other remedy than by leaving off the use of the bougie—I was led, in consequence of the above observations, to conclude, that the disease was brought on, not only by the venereal poison, but by any other stimulus applied to and irritating the mouths of the excretory ducts of the seminal vessels in the urethra; and that therefore a new method of cure, altogether different from the old one, might be attended with better success: and I was so happy as to find the same, after I had occasion to try it, first on myself,

myself, and afterwards on other patients, answer my most sanguine expectations:

Method of Cure:

THE physician's first intention should be to prevent the disease altogether; and if this should be found impossible, to cure it in the most safe and speedy manner. To prevent a swelled testicle, every thing that is apt to bring on a stopping of the running, or a retropulsion of the clap, ought to be carefully avoided. Such are acrid astringent injections, washing the penis with cold water, or exposing it to the cold air; as, for example, making water in a street where a cold wind blows; violent exercise of any kind; the preposterous use of balsamics, internally or externally; purging medicines: Which points carefully attended to, together with the wearing of a bag-truss, from the beginning of any clap whatever, have effectually screened my patients from this disorder; so that none of them who complied with the rules just mentioned was ever affected with this disease.

But we generally find our patients not so compliant, or we are called in to such, who having been treated without any attention to those rules, are actually affected with the swelling. Those require our compassion, and the immediate application of every means possible to relieve them.

The cause of the disorder, as said above, being an irritation of the mouths of the excretory ducts of the seminal vessels, from the venereal poison having taken its seat at the caput gallinaginis, the most effectual relief we can give

to our patient will be, first to allay the irritation, and then to recal the poison to its former original seat, that is, re-establish the running; both which points to attain, I found the following method most efficacious.

If the pulse be accelerated, full, and strong, the patient is to be bled immediately; and a good quantity of blood is to be taken from him; regard, however, being had to his constitution, and other circumstances. If there be no irritation in the system, or only a moderate degree of it, bleeding is unnecessary (and this will be nearly always the case, if we are called in soon after the commencement of the disorder); being convinced, from repeated observations, that the fever in this complaint is never an original disease, but brought on merely in consequence of the irritation of those delicate parts.

To the swelling a common poultice of bread and milk, with some oil, and, according to circumstances, a little sugar of lead, has been recommended by most writers: but having seen so little effect from this application, I have not for many years past made use of it. Instead of a poultice, I order first a glyster, to evacuate the fæces, if the patient had not a natural stool; and then I advise him, if his situation will allow of it, to sit for half an hour in a warm emollient bath. If he cannot have that convenience, he is to be placed in a perforated chair, upon the steam of hot water, for the same length of time; previously suspending his testicles. From thence he is to be carried to bed, and a dry bag-truss to be immediately applied,

plied, in order to keep the testicles constantly suspended, as their hanging down produces or contributes to their irritation and swelling. A warm poultice may then be also applied to the penis, in order to recal the running again; or, in other words, to determine the retropulsed matter from its new seat to come back to the old one. But what I found principally to be relied on is, to administer a full dose of opium, or, according to circumstances, a glyster, made of equal quantities of linseed-oil and barley-water, with forty or sixty drops of laudanum, to be injected, and occasionally repeated. He is to keep in bed and observe a low diet, drink nothing but barley-water, a decoction of figs and barley, or an emulsion of almonds.

To this method of treating swelled testicles by opium, I was led, as I mentioned above, many years ago by a severe case of my own; and I have seen afterwards so good and speedy effects from it, that I since constantly made use of it. I have had many instances, where, by these means, the swelling and pain of the testicle were removed, and the running brought back, in the space of twenty-four or forty-eight hours; and in those cases where it had not that effect so soon, it always greatly relieved the patient, and prevented a fever. In all more obstinate cases, I constantly observed, that the symptoms of irritation and the swelling did never quit the patient till the running of the clap came on again; but the moment this latter took place, the patient found himself relieved of the pain of the testicle, and the swelling gradually

dually disappeared. To assist Nature in its beneficial efforts, the opium internally, or in an emollient glyster, is to be repeated every twenty-four hours; the parts to be exposed twice or three times a-day, for a quarter or half an hour; to the steam of hot water or milk; warm poultices to be constantly applied to the penis; and the accumulation of fæces in the rectum to be prevented by a common glyster occasionally repeated. By proceeding thus; we shall generally have the satisfaction to cure, in a few days, a disease, which, by a different method of treatment, require so many weeks; and after all sometimes ends in a suppuration of the testicle, which often leaves a troublesome scirrhusity behind. Of late we have been told, that fomentations with cold water or ice, renewed every quarter or half an hour, answered beyond expectation in discussing a recent swelling of the testicle; and in other cases, the repeated cold application of a solution of sugar of lead in water has produced the same happy effects.

If the symptoms of the swelling is dangerous or obstinate, more efficacious means to re-establish the running the sooner might likewise be tried; and applied as mentioned above. The re-established clap ought to be treated afterwards in the common manner; taking great care to give no occasion to a new retropulsion; which, it is to be remarked, in such cases easily takes place a second time.

If the swelling has been treated improperly, it frequently happens that the symptoms of irritation disappear, but leave a hard swelling of one

or both testicles behind; and the disease is then commonly called a *Scirrhus Testicle*. In all those cases I constantly found the epididymis very hard and much swelled. In some, however, the testicle itself was likewise evidently affected, accompanied sometimes with a sensation of a painful pressure, but more frequently without any pain at all. Mercury rubbed in externally into the perinæum and scrotum twice a-day, with the constant application of a warm poultice made of the root of *atropa mandragora* L. is, in that case, the most useful remedy. An emetic has been sometimes found effectual. The decoction of the bark of the root of *daphne mezereum* internally, and a poultice of it externally, has lately been much recommended; but in several patients to whom I have given that decoction, I observed it made them so sick that they found it impossible to bear it on the stomach, and even its external use requires some caution on account of its acrid quality. Electricity has been found useful in several cases by Mr *Birch* in London. Van Swieten once told me, that he had given, for an indolent chronic induration of the testicles, lapides cancrorum, an ounce in a pint of good Austrian wine or old hock, taking three or four table-spoonfuls every morning and evening, with good success. I once tried this remedy, and it answered extremely well. After Van Swieten's death, I met a patient who told me, that he had been cured by him of an hard swelled testicle, though not from a venereal cause, by the same remedy; and that he had been perfectly well ever since. An ointment

ointment made of one drachm of camphor to an ounce of simple ointment applied to the scrotum, and in other cases the application of the volatile liniment by means of a feather, have proved successful in several instances. Hemlock internally and externally has been likewise recommended; but upon what ground, I am uncertain. Mr Acrell, one of the first surgeons in Denmark, has found the root of the *ononis spinosa* - L. given internally, answer extremely well in several cases. He boils half an ounce of this root with a pint and a half of water to one pint, sweetens it with syrup of camomile, and gives a table-spoonful of it every three hours. The wearing of a truss-bag is at the same time always necessary. It is, however, to be observed, that we shall sometimes be disappointed by all these remedies; and that the hard swelling, of several months or years standing, will not go off, except we have recourse to the inoculation of a new clap.

A *cancer of the testicle* requires extirpation; but whenever a testicle is cancerous, or in its structure diseased, we ought always carefully to examine whether the lymphatics of the spermatic cord are not at the same time affected; in this case, the kidney of the same side, to which those lymphatic vessels go, being generally diseased, the excision of the testicle proves an useless operation, and will only expose, by its fatal consequences, the surgeon's reputation.

We are told by some writers on this subject, that a venereal inflammation of the testicles frequently terminates in a suppuration. This may sometimes be the case, but never happened to

any of my patients. I am therefore inclined to believe, that, if it happens, it more frequently proceeds from a bad treatment, than from any other cause. But perhaps that species of venereal testicles which, we are told, arises from a tainted mass (if it ever exists), is probably, having its seat in the testicle itself, more apt to end in suppuration, than that arising from a suppressed clap, which, as we have seen above, very seldom affects the testicle. One particular case, which I saw eight years ago, though not venereal, deserves, perhaps, to be mentioned here.

A young man of twenty years of age, afflicted with scrophulous swellings about his neck, was advised by a physician to make use of the decoctum lignorum. Following this advice for some weeks, he was affected with a cough, which, in a fortnight after, ended in an hæmoptysis. Though he now left off the decoction, and made use of several other medicines prescribed to him, the cough continued for many months, accompanied with spitting of blood, or mucus streaked with blood occasionally. Being consulted, I gave it as my opinion, that his lungs were affected with scrophulous tubercles, for which I knew no remedy; and desired him to consult the first men of the profession in the place. Though the remedies ordered by them did not in the least alter his cough, he was in other respects tolerably well, eat with appetite, and slept with ease. One day he came to me, and complained of a painful swelling on both sides of the inguina, but more so on the one than

on the other. Upon examining, I found the spermatic cord very much enlarged. I asked him, whether he had made free with the sex? He declared upon his honour, he had never lain with a woman in his life, for fear of being poxed; but said, he had had the same complaint several times before, and felt it always whenever he was in company with young women who strongly excited desire; that it grew sometimes extremely painful, insomuch that he avoided such occasions as much as possible. Having been in such a situation the day before, the same pain came on; but had continued so much longer than usual, that it induced him to apply to me for assistance. I advised him to apply cold water to the parts; which cured him of his complaint in a few days. Thus much I thought to premise to what follows.

Some months after, he complained to me that one of his testicles had become very hard without any apparent cause. Upon interrogating him about the use of women, he repeated the same thing he had done before; but confessed that he had frequently masturbated himself, without knowing that such a practice could produce any disorder. I prescribed hemlock, and all the resolvents the *Materia Medica* affords, both internally and externally, but without any effect: the testicle grew painful, and daily larger; and at last burst, and a small quantity of purulent matter was discharged. On my return to town, after an absence of some months, he told me, that during that time a small discharge had continued; and that several fibres like

white threads came away from the ulcer every day. Upon examination, I found the whole testicle reduced to a very small size, and the ulcer nearly closed up, and in a few weeks it was quite healed. His cough continued during all this time; but he appeared not to be more emaciated than when he first applied to me. Every three or four months, when the tickling of the cough seemed to increase, and he was afraid of a spitting of blood, he was bled by his own advice. The spermatic cords were quite natural. The same month of the following year, the other testicle became affected just as the former had been. A surgeon of eminence, who had treated the patient with me the preceding year, was now called in during my absence; and though every thing was done for him which in my opinion could have been done, when I returned back to town, the complaint still continued, and had now lasted for ten weeks. At the expiration of the seventh week the testicle burst; and whole pieces of the spermatic vessels of the testicle were every day discharged from the opening; and in three months the testicle was reduced, like the other, to the size of a small hazel-nut. There was no swelling in the spermatic cords; and the patient told me, he had strictly followed my advice, and avoided, for these two years, his bad custom above mentioned. The cough continued; but by degrees reduced him so low, that he died two years after.

The physician who attended him last, informed me, that, on opening the body, he
found

found a vomica in one of the lungs, and many large hard tumours or tubercles on both; but he had not examined the testicles. From what cause the disease of the testicles arose, whether from a scrophulous complaint, or from masturbation, I do not pretend to say: but I relate the case only as a very particular and remarkable one; which shows, that there may sometimes happen a suppuration of the testicles even with the greatest care and most judicious treatment.

C H A P. V.

*Of the Inflammation and Induration of the
PROSTATE GLAND.*

I HAVE nothing in particular to say on the inflammation of the prostate gland, except when it arises from a suppressed Blennorrhagia. In that case, we should use every means possible to restore the running, particularly those recommended for swelled testicles arising from the same cause; because, if this inflammation terminates in suppuration, whether the abscess breaks into the urethra, bladder, intestinum rectum, or perinæum, it is always attended with very disagreeable consequences. The symptoms of an inflammation or swelling of this gland are known from the pain and difficulty in making water; besides, if we should be doubtful whence they proceed, the finger will almost always clearly tell us. If a suppuration has already taken place, we have only to observe, that mercury internally and externally will be necessary, and afterwards proper injections; the compositions of which are not peculiar, and are to be left to the judgment of the practitioner.

In the induration or scirrhusity of this gland, the remedies recommended for indurated testicles or buboes are to be made use of; but especially blisters, repeatedly applied to the perinæum, and internally the hemlock in large doses.

If

If a total suppression of urine is to be dreaded from the scirrhus swelling of the prostate, as is always sooner or later the case, every means possible ought to be tried to bring on a suppuration of the gland, in order to prevent still more disagreeable consequences. There is, however, to my knowledge, hardly any disorder which baffles more the skill of the physician than a fungous excrescence or scirrhus swelling of this gland, whether from a venereal or any other cause. The root of the *atropa mandragora*, or the *daphne mezereum* in a poultice, and repeated blisters, or a seton applied to the perinæum, are the only external medicines, besides those just before mentioned, from which we may expect any relief. Internally, a course of mercurials, the *pulsatilla nigricans*, and the hemlock, have been recommended; but I have never seen any good effect from any of them.

C H A P. VI.

On the VENEREAL ISCHURY and
STRICTURES.

A TOTAL suppression of urine, occasioned either by the remains of a former syphilitic complaint, or of a present venereal virus affecting the urethra, or neck of the bladder, we call a *Venereal Ischury*; and a partial suppression, or a difficulty of making water in a continued and natural stream, attended with pain, and a frequent desire to make water, arising from the same cause, is commonly, though not always properly, called a *Stricture*.

When I say, that the name *Stricture*, which has been given to the latter complaint, is often a very improper appellation, it is because a partial suppression of urine, as well as a total one, may arise from different causes; among which a stricture or constriction of one particular part of the urethra is only perhaps the most common one.

The different causes by which either a partial or total venereal suppression of urine is produced, are, 1st, An inflammation or spasmodic contraction of the neck of the bladder, from a recent retropulsed clap. 2^{dly}, A chronic constriction or narrowness of one particular part of the urethra, from a thickened and hardened portion of its substance, properly called a *Stricture*. 3^{dly}, A compression of the
neck

neck of the bladder or urethra, producing a partial or total abolition of its cavity, by a preternatural swelling of the prostate or of any other gland of the urethra. *4thly*, A prominent cicatrix of a preceding ulcer, or a fungous excrescence in some part of the urethra, commonly known by the name of *Caruncle*.

As upon the perfect knowledge of these causes the radical cure of the disease entirely depends, we shall consider them more minutely.

Whenever the running of a clap is stopped by any cause whatever, the virus seems to go lower down the urethra, and to excite there a similar irritation and inflammation, as it did in its former place. If it fixes its place at the caput gallinaginis, and there irritates the mouths of the excretory ducts of the seminal vesicles, it produces, as we have observed in the foregoing chapter, a swelling of the epididymis, or what is commonly called a *swelled testicle*. If it goes still lower down the urethra, and settles at the neck of the bladder, it will, in this circumstance, not produce a swelled testicle, but an irritation, spasmodic contraction, or inflammation of the neck of the bladder, with a total or partial suppression of urine. The poison in that case, if the complaint be properly treated, will produce no other disease than a suppression of urine for a few days only: after which it will leave that place; and, on going more forwards into the urethra, bring on either a swelled testicle, or, if it returns to the same place which it originally occupied, reproduce the running, with the common symptoms of a clap, and so
by

by degrees go off at last, without leaving any bad symptom behind.

But this so much wished-for circumstance does not always happen. The poison lodged in the neck of the bladder will sometimes produce, besides a variety of very disagreeable symptoms, an ulceration in that place, or in some other part of the urethra. Though the discharge arising from such an ulcer be, by degrees, partly or entirely stopped, and the ulcer itself healed, we often observe either a coarctation of the urethra remaining at the place where the ulcer was, or the cicatrix of the ulcer forming a kind of knot or protuberance into the passage. Sometimes also the ulcers, on healing, will form large granulations, or preternatural excrescences, which afterwards produce the same effect as a prominent cicatrix, under the name of *Caruncles* (which complaint, however, never occurred to me in practice); or the prostate gland, or any of the glands of the urethra itself, form a fungous excrescence, protruding into the urethra, or neck of the bladder, and thereby produce an angustation, or a total abolition of the cavity of the passage. Anatomical dissections have also discovered to us lately, that two ulcers of the urethra in opposite directions, or a single large one, will sometimes, in some place, grow together by bands crossing the cavity of the urethra; and whilst the lower part of the ulceration remains open, and continues the discharge mentioned in the chapter on Gleets, the upper parts grown together diminish or abolish

the

the cavity of the urethra, and thereby prevent the free passage of the urine.

In some of these cases the patient, especially by living sober and quiet, is able to make water pretty freely, though he wants a long time for doing it. But, on committing the least excess in eating and drinking, or by taking too much exercise, the disease grows evidently worse, the urine is discharged in drops only, or in a small and interrupted stream, exciting great pain, anxiety, and uneasiness; or the passage is stopped entirely, and thus endangers the life of the sufferer. The urine, in these cases, sometimes, as I have seen, forces its way into the rectum, and is evacuated by the anus; or it produces in the urethra, behind the coarctation, a dilatation, erosion, sinuses, or a fistula, through which it afterwards constantly discharges.

The further back in the urethra this disease has its seat, the more troublesome, in general, is the cure, and the more danger awaits the patient. The more inveterate or complicated all these species of the disorder are, the more difficult is their removal.—Those arising from a callous or contracted ulcer of the urethra, are more easily cured than those arising from a protuberant cicatrix or from caruncles. That kind of ischury which owes its origin to a retropulsion of a recent clap, I have observed to be removed easier and sooner than all others; that arising from a scirrhous prostate is often, though not always, incurable; but for an ischury arising from a fungous excrescence of the prostate, the art has no remedy.

Method of Treatment.

THE first thing, if we are called to a patient affected with a venereal suppression of urine, is, to inquire: whether it arises from a retropulsion of a recent clap, or from old complaints within the urethra. Our chief aim, in both cases, being to remove the ischury, we ought to examine, whether the disease is still merely local, or whether there is a general irritation of the system. If the pulse be quick and hard, bleeding is necessary. The quantity of blood to be taken is regulated by the state of the pulse and constitution of the patient. A man of a strong habit, or of a plethoric constitution, will bear the loss of a pound; whereas half that quantity taken, will operate sufficiently, and have the same effect, upon a delicate and tender habit. It ought, however, to be observed, that, in such cases, the patient will reap more benefit from one copious bleeding, than from two or three small ones successively made one after the other.

This being done; or when the system is not affected, the bladder, if much distended, ought to be evacuated, and the catheter applied for that purpose. Its application, however, in those circumstances, is often very difficult, and sometimes utterly impossible. This is certainly frequently owing to the cause of the disorder; but much depends upon the skilful management of the surgeon.

In order to facilitate the introduction of the catheter, (after the patient has been bled, which, if necessary, should always precede), I have experienced the following management to be useful. The catheter being anointed with sweet oil, is to be introduced gently. As soon as we meet with any obstacle, care ought to be taken not to force it, but to wait a little, and then try to push it on again gently; because this obstacle seems sometimes to arise only from a momentaneous spasm of the urethra, excited by the mechanical irritation of the catheter itself; which, if we discontinue pushing, frequently will go off in a few minutes, and the catheter is then easily introduced further: whereas if we go on pushing, in that case the spasm grows more violent, and renders the introduction often utterly impossible. It is owing, probably, to this spasm that we see sometimes that one surgeon is able to introduce it, while another, though by no means of inferior skill and talents, had before tried it in vain. If the obstacle be at the caput gallinaginis, or further back, we may very often remove it by introducing a finger in the anus, and thus assisting the catheter. I have seen instances where the introduction of the catheter proved impossible as long as the patient was lying in bed; whereas it went in very readily on the patient's sitting on the edge of the bedstead, his feet hanging down. I have also observed where a large catheter was easily introduced, after a smaller one had been repeatedly tried without success.

I have been perhaps too full in enumerating all these circumstances. But I am confident; that, by a careful attention to one or the other of these points, we may not only often spare our patients a great deal of pain, but, what is perhaps more material, prevent a lues taking place; which easily happens when, by a rude treatment, the urethra has been wounded. I certainly have experienced in myself the most evident symptoms of the lues in the mass from such a cause. I had an ischury from a simple clap; the discharge of which was stopped by a bad treatment. The surgeon, who was otherwise a very skilful man, on introducing the catheter, found a great resistance at the neck of the bladder, at the same time that I felt a great deal of pain. After trying it two or three times to get through, he at last pushed a little harder, whereupon some drops of blood were discharged from the urethra, and the moment after, (the catheter having passed the obstacle), an abundant flow of urine. I recovered in a few days from the ischury; and a few weeks after, the clap which had returned was likewise cured: but to my astonishment, a short time after, I felt a swelling and violent pain in the sternum; which was radically cured by a course of mercury.

If the coarctation of the urethra be so strait as to refuse, even under the just-mentioned precautions, any catheter whatsoever, an application of a *small catgut* will sometimes succeed, and prove highly beneficial.

If the danger is not so great, viz. the bladder

not very much distended, consequently the *immediate* discharge of urine not so pressing, and the introduction of the catheter proves very difficult, some other means to procure a discharge of urine ought to be tried; of which I have found the following the most efficacious and useful. A common glyster, mixed with some honey or lenitive electuary, should be administered, in order to evacuate the fæces, and thereby to prevent the constant stimulus which their accumulation is apt to excite. As soon as the fæces are evacuated, a glyster of equal quantities of barley-water and linseed oil, with a full dose of the tinctura Thebaica, should be administered, and occasionally repeated. Every kind of medicine or food apt to go through the urinary passages, should be carefully avoided; and, for the same reason, the patient should not drink even more of barley-water, or of the solution of gum arabic, than is necessary to quench his thirst. He should likewise, according to circumstances, be put into a warm bath, tempered with milk or a decoction of bran, for half an hour or an hour, and the same be repeated four or five hours after; or, what I have found often very serviceable, he should be set upon a perforated chair, and expose his private parts to the steam of hot water mixed with vinegar. If he be restless and feverish, bleeding will sometimes be proper, and a full dose of laudanum should be administered to him in the evening. The judicious application of these remedies I have seen sometimes answer in the most desperate circumstances.

I saw once, in a suppression of urine, where there was no catheter at hand, that a roasted onion, applied to the perinæum, by the advice of an old woman, had the effect, so that two hours after the application the urine flowed plentifully: and, in another case, the life of an eminent physician in the army was saved by covering the glans penis with the fresh pellicle of an egg found between the shell and albumen. As soon as the pellicle, growing dry, began to contract, the urine began to flow plentifully; but on applying it the second time, two days after, when the suppression of urine unexpectedly returned, it proved, as the person who recommended it foretold us, inefficacious, and the patient died. Perhaps the volatile liniment, or a blister, applied to the perinæum, would produce the same effect, with more certainty, and quicker, than the remedies did in the two cases related.

If we have been so happy as to evacuate the bladder, either by the application of the catheter, or by such other means as have been now mentioned, our next care will be, to prevent a fresh accumulation of urine, and to remove as soon as possible the cause of the suppression. The first will be effected by continuing the same remedies, and especially (as has been recommended by some writers) by leaving the catheter within the urethra. This, however, none of the patients, whom I have hitherto treated, were able to comply with. They suffered so much from keeping the common catheters applied, whether

whether made of silver or steel, flexible or inflexible, as made them conceive, that the pain which would arise from a repeated application of the catheter, or from a fresh accumulation of urine in the bladder, could not possibly be greater; and therefore withdrew the catheter, though they were very desirous to have retained it if they had found it possible. To guard against this inconvenience, I could never find out a remedy, till I tried the catheters invented by Mr *Theben*, first surgeon in the army of the king of Prussia. They are made of a golden wire covered with a solution of caoutchouc (elastic resin). Their application is not only, in many instances, easier than that of the common catheters, or of hollow bougies of any kind; but also, in all instances in which I tried them, I found the patients could keep them applied, after the urine was discharged, with much less inconvenience. They are therefore, in those cases, much preferable to any other. But if we have none of these catheters at hand, which must be the case as long as they are so difficult to be got, and so high in price *, we must listen to the patient's sufferings, withdraw the catheter as soon as it becomes too troublesome, and have recourse immediately to such remedies as will tend to prevent the return of the suppression.

To such as are in possession of any of those

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elastic

* Both these inconveniences are now remedied by the catheters made of the same substance by Mr Bernard at Paris.

elastic catheters, the following rules, to be observed in their application, may perhaps be acceptable.

The elastic catheter, after being anointed with sweet oil, is introduced in the common manner. The surgeon, as usual, gently draws with one hand the urethra towards him, and holding the catheter with the fingers of the other, always at the distance of an inch or two from the glans, gradually introduces it; whilst this is performing, the catheter generally enters the bladder, without any particular direction from the hand of the operator. If any resistance be found, the rules mentioned above are to be observed, to facilitate the introduction; but if the resistance be at the neck of the bladder, there is nothing more to be done, than gently pushing the instrument forward, at the same time turning it from the right to the left; for by turning it in the opposite direction, the spiral windings of the gold-wire of Mr Theden's catheter would be separated. If the surgeon finds the obstacle greater, he should, as I said above, stop the introduction till the contraction or spasm of the sphincter vesicæ and the resistance ceases which happens for the most part in a very short time, when he is enabled to go through the passage easily.—This catheter is introduced, like a common one, according to circumstances with or without a probe. After remaining in the urethra for some time, on being extracted, it is generally very soft, and therefore unfit for being used again until it has been cleansed and dried, and put for a little time in a cold

cold place; which operation restores it to its former firm texture. The method of cleansing it is, to wash the outside with water, and likewise the cavity with the same applied by rinsing. For cleansing and drying its inside, a long needle with a silk thread will be most fit. When about to be used, and found to be too stiff, it may be softened by keeping it a little in the hand, dipping it in warm water, or holding it near the fire-side.

But if all our endeavours to introduce any catheter or catgut have proved unsuccessful, and the danger of a rupture of the bladder, from its distention, be imminent, the urine must be at all events discharged. This should, therefore, not be deferred too long; and may be done, according to the seat of the disorder, either by an incision into the urethra behind the stricture or seat of the stoppage; or if that seat be in the neck of the bladder, and the incision and introduction of the trocar in that place perhaps be found too difficult for the surgeon, the bladder may be safely tapped through the anus, as first proposed by Mr *Fleurant*, or an incision may be made above the symphysis pubis, and the bladder be tapped in this place under the peritonæum; both which operations are neither difficult nor painful, and either of them becomes necessary to save the life of the patient.

These are the means generally useful to give relief to the patient, in all cases of *ischuria urethralis*.

But, to cure that disorder radically, its cause, as I have said above, ought to be removed; which is

effected, according to the nature of the complaint, by different methods.

If the ischury proceeds from a recent repulsion of a venereal Blennorrhagia, the running or clap must be recalled. For this purpose, besides the general remedies before mentioned, the steam of hot water, alone or mixed with vinegar, or the volatile liniment applied to the perinæum, I have seen and experienced besides the inoculation of the clap, to be the most efficacious remedies to remove the venereal poison from the neck of the bladder, and bring on the running afresh. I recommend the suspension of the testicles during the application of the steam; because I have seen instances where the poison, leaving the neck of the bladder, instead of returning to its original seat under the frænum, settled at the caput gallinaginis, and thereby produced a swelling of the testicle; which I have never observed since I took the above precaution. In the mean time, the patient should keep quietly in bed, and warm poultices should be constantly applied to the genital parts, as the accumulation of fæces be carefully avoided by means of glysters. Emetics are, occasionally, as useful in this case as they are in swelled testicles; and the internal use of opiates produces, in many instances, a speedy effect. As soon as the venereal poison, on leaving the neck of the bladder, occupies again its original place, the running is re-established, and then to be cured as claps in general are; only the patient ought to take the greatest care to avoid

avoid all the causes which are apt to bring on a similar retropulsion; because we see daily, that such a retropulsion, after having once taken place, is easily brought on a second time, even on the slightest occasions.

I must, moreover, observe, that in such a case, after the ischury is removed, I always found the internal use of mercury necessary for a radical cure; having seen several instances where the absorption of the virus took place during the suppression, and excited afterwards evident symptoms of its presence in the mass, though the local complaint of the genitals was perfectly cured.

If the suppression arises from a chronic complaint of the urethra, such as from a stricture accompanied with an ulcer, or an erosion of the excretory ducts of the prostate gland or seminal vesicles, this cause we must endeavour to remove according to the rules laid down under the articles *Gleets* and *Venereal Ulcers*.

If the stricture arises from a simple constriction of one particular place of the urethra, without any ulceration, our care must be to dilate this coarctation, which owes its origin either to an ulcer healed up, by which the whole circumference of the urethra in that place is lessened; or to a prominent cicatrix or callosity, occasioned by a previous ulcer. This is most effectually obtained by a long-continued use of bougies, beginning with smaller ones, and going on gradually until the patient be able to bear those of the largest size. The bougie he is to keep applied in the beginning for a quarter or half an hour,

and afterwards, if he can bear it, for several hours, morning and evening. If a bougie of elastic resin be at hand, this precaution is hardly ever necessary, as they, growing soft and flesh-like in the urethra, produce little or no uneasiness. But as this kind of coarctation or stricture is sometimes so very small that it does not even admit the smallest bougie, the application of a small catgut is an excellent invention*. The catgut once introduced, and left for some time in the urethra, begins to swell, by which means the coarctated passage insensibly enlarges; so that sometimes, on withdrawing it the first time, the patient is able to make water with unexpected ease; and the next time a larger may be easily introduced, and have the same good effect. If by these means we have by degrees dilated the urethra so far as to admit the largest catgut, a bougie may be introduced; the use of which is to be continued for several weeks or months, even after the patient is perfectly cured and able to make water in one large continued natural stream.

If the coarctation does not even admit of a catgut, and the seat of the disorder is at a place which we can come at, an incision into the urethra behind the coarctation is, as I have said above, most advisable: by these means the
urine

* The usefulness of this application has been much enforced and confirmed in practice by Mr J. FOOT. See *Critical Inquiry into the Treatment of the Diseases of the Urethra*; where the author has given us, besides, a number of useful remarks on those complaints.

urine will be discharged through the incision, whenever necessary, and the return of the suppression thereby effectually prevented. We may afterwards easily dilate the wound, passing the knife through the coarctation; and then introduce a bougie; which the patient is to wear until the stricture be removed, the whole wound be healed up, and thus the complaint be radically cured. The same method will be also sometimes necessary, if the urine accumulated behind the coarctation has forced its way either through the intestinum rectum (in which case the patient will void his urine with the fæces through the anus), or by a fistulous opening through the perinæum. But, in these cases, it will be in general necessary to let him go through a course of mercurials before we proceed to the operation of the fistula; otherwise we shall find ourselves very often disappointed in curing this latter. If he should not have strength enough to undergo such a course, as is frequently the case, he is to be prepared by proper diet and medicines. On performing this latter operation, an incision must likewise be made through the stricture, the original cause and seat of the disorder; and the patient is to wear a bougie during the cure, and for some time afterwards.

If the ischury arises from excrescences or caruncles, as they are commonly called, or from invincible coarctations, the incision of the urethra at the place where the seat of the disorder lies, and the cutting out of those extraneous bodies, has been proposed; but I have never
yet

yet heard of any case where this operation had been performed.

In a scirrhoty or hard swelling of the prostate, or a fungous excrescence of the same gland, all the remedies recommended above for resolving such a swelling ought to be tried; and if they fail, we should rather endeavour to bring the gland to a suppuration by irritating applications, than to let a disorder increase which so frequently proves fatal.

If a swelling of any of the smaller glands of the urethra should be the cause of the ischury, and the most powerful resolvents should prove ineffectual, it will be proper to advise the patient rather to have the extirpation of the tumour performed, than to live in the constant anxiety about the dreadful consequences of this complaint?

C H A P. VII.

On VENEREAL ULCERS.

AN ulcer arising in any part of the body from a venereal cause is called a *venereal ulcer*; but if on the genitals, it is more commonly called a *shanker*, from the French word *chancre*; a name adapted to express its corroding nature.

Venereal ulcers owe their origin either to a *primary* or to a *secondary infection*; viz. to the venereal virus either originally applied, or deposited from a tainted mass to the surface of the body. Both kinds may arise on any part of the body; but they appear more frequently upon parts which are covered with a very thin cuticle; such as the glans penis, the inside of the prepuce, the urethra; the labia pudendi, nymphæ; the lips, mouth, nipples, &c. Of venereal ulcers arising in any internal part of the body, we have not yet, as far as I know, any authentic observation.

Though venereal ulcers, as I have just now observed, do generally and most frequently appear only on parts which are covered with a very thin cuticle, especially on the glans, prepuce, fauces, &c. yet we not unfrequently meet with cases where they affect parts covered with thicker cuticle; as the penis, scrotum, thighs, &c. There are likewise several instances where
 surgeons,

surgeons, performing operations, or persons assisting in the delivery of women, had the misfortune of being affected with venereal ulcers in their hands or arms. In all cases of this last kind, the poison seemed to me universally to operate more powerfully than when originally applied to the parts covered with a thin cuticle, or when deposited from a tainted mass. I know now a midwife, who, having been infected in this manner several years ago, still suffers from the disease; and we have another instance of an eminent male-practitioner in the same art, who, by delivering an infected woman, was affected with ulcers in his hand; and to this present time still labours under the consequences, tho' it is now three years since he received the infection.—I know a gentleman who, wounding his finger by accident with a penknife, and exposing the same, without thinking or suspecting any bad consequence, the very same night got the infection; whereby the wound was changed in two days to a very bad venereal ulcer, accompanied with a painful and obstinate swelling of the whole arm, together with a bubo under the arm-pit, and other symptoms of a general infection.

Though I have attended with the greatest care to all cases of this kind which fell under my observation, I could never discover, in the constitution of the patients, any particular cause of such violent symptoms. In two instances, the patients before and afterwards had venereal ulcers in places covered with a thin cuticle, and the poison there produced the common symptoms

symptoms only. It seems therefore probable to me, that, in order to produce primary venereal ulcers upon a place covered with a thick cuticle, the virus must either be extremely acrid in its nature, or produce more violent effects on account of its being applied to a part which has no mucus to dilute the same, or to defend itself from its acrimony. At least, we very seldom observe such violent and obstinate effects in primary venereal ulcers upon parts covered only with a thin cuticle, or in secondary ones arising upon any part of the surface of the body. This is owing most probably, in the former case, to the poison meeting with a quantity of mucus to dilute it, and in the latter to its having been diluted, or having undergone some change by its previous mixture with the mass.

Venereal ulcers, arising from a primary infection, are either *local* or *universal*; viz. the venereal virus having been applied to the part, and, by its stimulus, produced an irritation and subsequent erosion, is confined still to that part only; or it has been at the same time absorbed into the mass, and thereby infected the whole system. This distinction is useful and necessary in practice; because ulcers of the latter kind, like those arising from a secondary infection, can never be radically cured without a course of mercury; whereas the former may be cured by simple local applications.

But here I must take notice of another material circumstance and distinction, which is of the greatest importance in practice, and to which writers on this subject seem to have hitherto paid

paid little or no attention. Ulcers arising on the genitals are now-a-days generally, sometimes even after the slightest examination, pronounced to be venereal, and treated as such; whereas it is a matter of fact, confirmed by daily experience, that ulcers, both of the fauces and genitals, may in our days, as well as in those of *Celsus*, arise, and do actually arise, from acrimonies or miasmata, which have nothing in common with the venereal virus. This is a point of the utmost consequence in practice to the physician as well as to the patient. However, by not paying proper attention to it, I have not only seen many times the character of innocent persons brought into question, but patients reduced, by a preposterous treatment, to a most miserable situation.

I have further not unfrequently observed the most dreadful consequences, when ulcers of the mouth and fauces, occasioned by the use of mercury itself, especially under a salivation, are mistaken for venereal ones, or when ulcers of the genitals or other parts of the body are confounded with venereal ones, which, though at first really venereal, during a mercurial course assume a different appearance, and thus seem to have entirely changed their venereal nature. Instead of healing, to which point they seemed to approach, they now prove not only obstinate, but yielding a thin ichorous discharge, grow worse and worse under the continuation of the same remedy, and spread further and further.—To show the importance of these distinctions more evidently, I shall subjoin an account

count of a few cases relating to that subject; but elucidate this point more fully hereafter, under the head *On Venereal Complaints incurable by Mercury*.

A gentleman, twenty-one years of age, of a strong plethoric constitution, consulted me some time ago about a shanker, as he called it, on the glans penis, with which he had been afflicted these eight or nine months past. He had consulted, at the time he got it first, an eminent surgeon at Dublin; who prescribed a course of mercurials, which produced a slight salivation. But the ulcer not healing, mercurial fumigations were applied for some time to the part affected; by which the ulcer seemed to grow less, and had assumed a better appearance, but had not healed. He was therefore advised to a second mercurial course, with a different preparation of mercury, internally as well as externally; but, under this course, the ulcer, instead of healing, grew from day to day larger, deeper, and in every respect worse. In that condition he came to London, and consulted me. Upon examining the part affected, I found a large deep ulcer on the glans, with hard and prominent borders, extremely sensible to the least touch. Its basis appeared reddish and pretty clean; but the discharge seemed to be of an acrid corrosive nature; by which, indeed, half the glans was already consumed. I told him that I had seen several ulcers of this kind before; that it was not of a venereal nature; and that mercury, according to my observation, was, in that kind of ulcers, the most unfit remedy; that

that I would undertake to cure him, but that the cure would require at least two or three months time. Upon which he left me, promising he would call the next day and put himself under my care. He did not; and I heard no more of him till four months after, when he sent for me. At the time I saw him first, his complexion had been lively and fresh; but was now of such a sickly and cachectic appearance, that I hardly knew him. His account was shortly as follows: That, having been dissatisfied with my first opinion upon his case, and with the advice I gave him, he, at the desire of a friend, had thought proper to consult an eminent surgeon in town; who, after a close examination, had pronounced his ulcer to be venereal, and had assured him that nothing but mercury could cure him; adding, that he had not taken enough of mercury, nor the preparation which was deemed the best in those cases; and that, far from two or three months being required for curing him, his prescriptions would effect a radical cure in three or four weeks time: That, upon these assurances, he had immediately submitted to this new mercurial course, which brought on a gentle salivation; but with so little effect, that though the ulcer seemed to grow remarkably better during the first three or four weeks, it afterwards, instead of healing, had corroded the rest of the glans with part of the urethra. Whereupon another surgeon was called in consultation, who advised the amputation of the part affected; but the former refusing, and the latter not being willing, to perform it,

he had resolved to drop their advice altogether, and to hear mine once more. On examination, I found the remaining portion of the penis swelled to a monstrous size, the prepuce forming a perfect phymosis over the extremity, and the urine discharging through three or four different holes. I advised him therefore to have the prepuce slit up, in order to see the state of the ulceration, and to clean the ulcer, or to apply such medicines as should be thought proper. Internally I prescribed him some strengthening medicines. He used these latter for eight or ten days; but the operation he put off from day to day; when he was advised by one of his friends to consult another physician, who, by means of a decoction of hemlock and ginseng root, promised to do something more for him than hitherto had been done. This decoction he took for a short time with very little effect, the corrosion creeping on further and further. At last another physician, an acquaintance of mine, was consulted; who insisted upon the same strengthening course of medicines which I had formerly prescribed, recommending at the same time a nourishing diet, the enjoyment of country air, and bathing in the sea; by which means this young man is now re-established with the loss of more than half of his penis; which, had he followed the advice I gave him when he first consulted me, would have been without doubt wholly preserved.

The following observations occur to me upon this case. I think it extremely improper to administer a course of mercurials for a local vene-

real ulcer; which was the case with this gentleman when he first applied to the surgeon at Dublin. A second course and salivation with mercurial fumigations were still more improper. Advising him a third course of mercurials, after the two former were found useless, was not only very injudicious, but extremely hurtful; because it rendered him for ever unable for propagation, to the great sorrow of his family. The prescription of strengthening medicines, given to him by the last physician whom he consulted, with a nourishing diet, country air, and sea-bathing, was the most judicious, and the only one to save his life, which was at the time in the most imminent danger. And I am firmly persuaded, that the patient, who was forced to follow this latter advice only by the sense of his sufferings, would never have experienced any of all his miseries, had he followed my advice in the beginning.

I was consulted in another case, where ulcers of the throat arising during a mercurial course, being taken for venereal ones, and treated accordingly, by the continued internal use of mercury, became so bad, that both the tonsils, together with the velum pendulum, were almost entirely consumed, and the patient reduced to a most miserable situation; when only by leaving off the mercury, and by the administration of a quite different course of medicines, he recovered. And Mr *Brambilla* gives us an account of a patient, who under a course of mercury being affected with ulcers of the fauces, which having been mistaken by the surgeon for venereal

venereal ones, not only lost his velum by the continued use of mercury, but had a caries maxillæ brought on, which proved fatal to him. The same author also observes, that inflammatory tumors, or ulcers growing gangrenous, are constantly rendered worse by the internal or external use of mercury, though they had evidently been originally venereal. I myself have seen many instances, where patients affected with venereal ulcers, united with a scorbutic habit of body, by the imprudent use of mercury, were not only reduced to a most wretched condition, but even brought to death. Mr. *Fabre*, in the Supplement to his Observations on the Venereal Disease, relates likewise several cases, where ulcers, though evidently arising from a venereal cause, by a long-continued use of internal and external mercurials, and repeated salivations, were not only not cured, but brought to a state, which afterwards yielding to no other medicines whatever, proved fatal to the patient. Whence, I think, it will appear to be of the utmost consequence in practice, that we should bestow the greatest attention in distinguishing,

1st, *Local venereal ulcers from universal ones;* viz. from those united with, or arising from, a tainted mass.

2dly, *Simple universal venereal ulcers from complicated ones;* viz. such as are combined with symptoms of scorbutus, scrophula, &c.

3dly, *Ulcers of the genitals, mouth, fauces, &c.* resembling venereal ones, but arising originally from other causes: For example, brought on by

the acrimony of the saliva during the internal use of mercurials or mercurial fumigations, from real venereal ones. And, principally,

Atbly, Ulcers of the mouth, nose, genitals, groins, &c. which, though seemingly or evidently brought on originally by a venereal cause, have now, as it were, changed their nature, at least so far, that mercury has no further any good effect upon them, but rather the contrary.

The characters by which those different kinds of ulcers may be distinguished are not easily described; a careful inquiry into the history of the disease, inspection, and practical knowledge, are to be our best guides. An attention to the following points, however, may assist us in forming a proper judgment.

Venereal ulcers are, in general, pretty easily distinguished by their hard margin or borders, by the lardaceous crust which their basis is covered with, and by the præternatural redness of the skin all round the ulceration; which will be rendered more probable, if the patient is conscious that he has previously exposed himself to the infection. As there may, however, arise ulcers in the genitals, of a different, or sometimes perhaps of a nearly similar appearance, from other causes, as has been long ago taken notice of by several of the most ancient medical writers, and confirmed in many instances by my own observation, we should be extremely cautious, and never form a rash judgment about the nature of such ulcers, nor pronounce them to be venereal, before we are perfectly sure of it. By following a contrary method, we may not only
hurt

hurt the reputation of an honest person, and disturb friendship, and sometimes matrimonial happiness, as I formerly mentioned with respect to Blennorrhagias; but do material harm to the patient, by administering improper medicines. Ulcers which are not of a venereal nature, may be distinguished from venereal ones,

1st, By their different appearance.

2^{dly}, By their either arising only, or growing worse, during the use of mercury.

3^{dly}, By their having been unsuccessfully treated with mercury before.

4^{thly}, By their exquisite sensibility.

5^{thly}, By the relaxed state of the whole body, or by the flabby relaxed appearance, with an ichorous discharge from the affected part.

6^{thly}, By symptoms of other disorders, either alone, or accompanied with venereal ones.

Method of Cure.

It has been the opinion of several eminent medical writers, to treat all real venereal ulcers or shankers in the same manner, viz. by internal mercurials only; and never to make use of any external application. Several specious reasons have been alleged for such a treatment; which, however, seem to me nowise satisfactory. It is said, that shankers are signs of the presence of the venereal poison in the body; and if, therefore, they disappear by the simple internal use of mercury, we are sure that the medicine has penetrated into the mass, and that

the poison is thereby totally eradicated. To this I answer, That recent venereal ulcers, brought on by an original infection, are by no means such symptoms as has been asserted. On the contrary, they are in that case only a local disease, which requires no internal, but merely local, remedies; and if no topical application is made use of in time, they very often spread amazingly, the poison is absorbed, and produces either buboes or other venereal symptoms in the mass. I undoubtedly allow, that if venereal ulcers are of some standing, the mass will then be in consequence infected; in which case, as well as when they arise from a secondary or universal infection, they are certainly what has been asserted of them, unequivocal signs of the presence of the poison in the mass. Then, indeed, I perfectly coincide with the opinion, that they may be treated only by the internal use of mercury, without any external application; because, if they disappear by the internal use of mercury alone, without having applied any external remedy, we are sure that we have eradicated the poison from the mass, and cut off the evil by the root. But even in this case, if they affect the genitals or the extremities, the poison is often apt to excite a violent inflammation, phymosis, mortification, &c. or it is absorbed and carried to the lymphatic glands, where it occasions buboes, before the mercury has had time to produce its effects, and to destroy the poison on the part affected.

These are the reasons why I always choose to apply immediately to all venereal ulcers the
 most

most effectual remedies for removing them; because I think there is nobody acquainted with the nature of this disorder, who would not prefer being affected with a real pox to a mortification of the penis, or to a bubo. As to what has been said and observed by some, that a bubo very often appears after shankers have been healed up by external applications, and that consequently those very remedies which are recommended to avoid buboes not unfrequently bring them on, I readily admit the fact; but I am very far from believing the consequence drawn from it, *viz.* that external remedies applied to a venereal ulcer, ever promote the absorption of the virus. It happens, in that case, what we see happen every day, without any external application whatever, or what we must daily be afraid of, as long as there is the least appearance of a venereal ulcer. What they ascribe in that case to the medicines externally applied, I would rather ascribe to their application being too long delayed, or to their not being sufficiently efficacious. In all cases, therefore, where I have reason to apprehend any bad effects, I think it not only proper but necessary to apply to all venereal ulcers, whether of a primary or secondary infection, the most efficacious local remedies, in order to remove them as speedily as possible: with this difference only, that I consider ulcers arising from a recent original infection as merely local, and think they may be safely cured by topical applications alone, without the internal use of mercury; whereas those arising from a tainted mass, re-

quire always, at the same time, a course of mercury. This last method I likewise think necessary in venereal ulcers of some days standing, though arising from an original infection; there being always the greatest probability that some of the poison has been absorbed into the mass during that time. External applications alone will never have any permanent effect in those cases; because, if we are even able to destroy the poison in the affected part, and to consolidate the ulcer, it will soon break out again on the same or some other part of the body, as long as there remains the least particle of it subsisting in the mass.

The best remedy, as well for preventing as for curing recent shankers, I find, after repeated trials, to be spirit of wine, rum, and, still better, Hungary water, or lavender spirit*.

The other external remedies recommended for curing venereal ulcers are, *Cautistics*, *Mercurials*, and *Astringents*.

The application of caustics has been of late warmly recommended in recent venereal ulcers, so as to touch them once every twelve or twenty-four hours with the lapis infernalis, till sloughs falling off successively, the basis of the ulcer becomes red and pure. This practice is undoubtedly sometimes proper; but there are constitutions which will not bear any acrid application

* The use of this efficacious remedy was first communicated to me by Dr Nooth, physician in London; the same who is the inventor of the ingenious apparatus now generally in use for impregnating water with aerial acid.

plication whatsoever, especially that of caustics. I have seen instances where, in such irritable or in scorbutic constitutions, very bad symptoms followed; and in one case, a mortification of the part was the consequence of such an application. In these subjects, the internal use of Peruvian bark with external astringents, or occasionally a mercurial lotion, will be more serviceable.

Among the mercurials, the red precipitate sprinkled upon them every morning and evening, answers very well, as long as the ulcer is covered with the white lardaceous crust. The mercurial ointment in this case is of little or no use; but whenever the bottom of the ulcer assumes a cleaner appearance, then the simple mercurial ointment, or calomel in powder, or suspended in lime-water, or, according to circumstances, the sublimate with lime-water, or a diluted solution of mercury in nitrous acid, are serviceable. In cases more obstinate, the fumigations with cinnaber prove sometimes very efficacious.

If the mercurial applications produce no effect, or are judged to be improper, the external use of astringents answers often extremely well; such as a decoction of the tormentilla root, or of the Peruvian bark, or an infusion of the latter in lime-water.—In other cases, the aqua vitriolica camphorata, a solution of blue vitriol, or the viride æris dissolved in oil, will be more useful. The same astringents will also sometimes answer our expectations in ulcers of an atonic or relaxed appearance, yielding an acrid ichorous discharge.

Against

Against obstinate venereal ulcers opium has been lately found very useful, given internally, beginning with one grain, and thus daily increasing with a grain till the patient takes at last fifteen grains. It deserves to be remarked, that opium in those large doses never produces costiveness. This method was first discovered and recommended by Dr *Nooth*, at the time first physician and inspector of all the military hospitals of the army in America, and has since been published without mentioning his name.

If venereal ulcers resist the means just now recommended, the internal and external use of strengthening medicines, a full diet, the use of wine, country air, and sea-bathing, as mentioned above, will often prove effectual when all other remedies have failed.—Of other medicines recommended for inveterate venereal ulcers, I shall speak hereafter under the article of *Venereal Complaints incurable by Mercury*.

I have said nothing about the venereal ulcers of the nose, eyes, face, &c. because they require the same treatment as those of the genitals, and may be easily avoided, by taking care that the patient affected with a clap or shanker on the genitals, after having touched the part affected, always carefully cleanses his fingers.

Ulcers of the uterus or vagina, accompanied with an acrid ichorous discharge, are not always, as is generally imagined, cancerous, but not unfrequently venereal; and may then often be cured by proper injections and a course of mercury. I have seen several women, who thought themselves, from the pain and ichorous dif-

discharge tinged with blood, affected with a cancer of the uterus (believing in that point the judgment of their attendants), radically cured by the internal use of powerful, strengthening, and absorbent medicines, and by injections made of a solution of sublimated or calomel in lime-water, alone or mixed with the tincture of mastic, or, according to circumstances, with the infusion of Peruvian bark in lime-water.

But we shall find ourselves much mistaken if we expect any good effect in this case, as well as in the fluor albus or menorrhagia; from injections, as they are commonly used. If we wish to see any effect from them, they must be applied to the part affected; and therefore not thrown in the common manner into the vagina, in expectation that they will of themselves, by these means, reach the seat of the disorder, or the cavity of the uterus. A proper syringe of a particular form and size, calculated to prevent the matter injected from escaping and running out at the sides, must be introduced, and, in some cases, as high as possible into the vagina, or, if possible, into the orifice of the uterus itself; the patient lying a little declined, and her knees bent: and in this situation the injection is to be applied, either by herself or by an assistant, three or four times successively, keeping the syringe always in for some minutes, and repeating the same operation six or eight times a-day.—A syringe made of a bottle of elastic resin, with a thicker and longer pipe than common, will answer for the above purpose extremely well, and will effectually remove

move the prejudices hitherto so justly entertained of the inefficacy of injections in females.

For *cancerous ulcers* of the genitals as well as of other parts of the body, the *Materia Medica* has, to my knowledge, if we perhaps except caustics, nothing to afford; and all the medicines hitherto recommended for curing cancers, appear to be deceptions of the inventors themselves or of the public. Surgery alone can radically cure cancers, if applied in time; and no honest physician will ever recommend uncertain remedies, lest, by temporizing, he should for ever lose the moment where he could have applied a certain one; I mean the extirpation not too late deferred where it can take place.

ON VENEREAL FISTULAS.

IN treating of venereal ulcers, we must say a word about venereal fistulas, which are nothing but venereal ulcers penetrating deep into the cellular membrane and adjacent parts, with a small callous orifice, and callous inside. Their seat is mostly in the urethra, groins, perinæum, anus, &c. but sometimes also in the lachrymal sac of the eye.

If there be an abscess formed in the perinæum, this, like other abscesses in those parts, should be very soon opened, in order to avoid fistulas, &c. Pus is soon formed in those parts; and the application of an emollient poultice for a few hours, will often readily soften the preceding hardness, and render it fit for opening.

Besides the internal administration of mercury,

ry, the injections above recommended ought to be tried; if they do not succeed, the chirurgical operation ought to be performed. We should, however, never attempt this latter before we have carefully eradicated the venereal virus from the tainted mass. From the neglect of this point, we see daily, that such patients undergo two or three times the operation, without being the better for it: the fistula remains as obstinate as it was before; or, healing in one place, it soon breaks out in another. If the fistula heals quick and perfectly after the operation, it is a certain sign that the patient has been radically cured of the lues.

The fistula lachrymalis, arising from the venereal virus lodged in the lachrymal sac, yields very often a yellow-greenish discharge, resembling that oozing out of the urethra in a clap. Whether it ever arises from a suppressed or retropulsed clap, I cannot positively say; but it owes its origin frequently to the venereal poison deposited from a tainted mass, and requires internal and external mercurials.

The virus oozing out from venereal ulcers and fistulas, is sometimes of a very corrosive nature; they should therefore be dressed with a piece of soft sponge every twelve or twenty-four hours; and the surrounding surface of the skin should be carefully defended, by anointing it with the white cerate, or saturnine liniment.

C H A P. VIII.

Of the PHYMOSIS.

THIS disease, in which the prepuce is so swelled and straitened that it cannot be drawn back over the glans, has been called *Phymosis*, from the Greek $\phi\iota\mu\omega\varsigma$, *præcludo*; *obturo*; and might perhaps in our language be more properly called a *coarctation* or *stricture of the prepuce*.

To this disorder are especially subject those men who from nature have the glans covered with a more strait prepuce, or have too short or too strait a frænum; all those whose religion orders circumcision are free from it.

The phymosis arises, in our days, generally from venereal ulcers in the inside of the prepuce, or from the *Blennorrhagia balani* (a clap of the glans), commonly called *gonorrhœa spuria*, producing a violent swelling and inflammation of the prepuce and discharge from the glans.

It has been recommended, in a violent phymosis, to slit up the prepuce; which is certainly sometimes necessary: But where surgical operations can be avoided, we ought to avoid them. This operation has been advised principally either to prevent the spreading of shankers, which are frequently the cause of the phymosis; or to avoid buboes; or, what is still more material,

material, to prevent a concretion of the glans with the prepuce. Those who, in curing shankers, trust entirely to the internal use of mercurials, will hardly insist upon this operation. As to the danger of their producing buboes by an absorption of the poison, I allow the apprehension to be perfectly just; but I cannot admit that an incision would prove a preventative. A fresh wound, by exposing a new and larger surface to the absorption of the virus, must, in my opinion, rather increase the danger. I think it, therefore, more proper to obviate those bad consequences by proper injections, and by introducing, if possible, some fine lint once or twice a-day with a probe between the prepuce and glans. However, if this should be impracticable, or livid spots should appear through the prepuce, immediate recourse to the operation ought to be had, lest a more dreadful evil, a mortification, should ensue.

Venereal ulcers, with a phymosis, corrode very often the glans, the urethra, and corpus cavernosum of the penis; and thus produce now and then a violent hæmorrhagy, which requires proper injections, or the application of the lapis infernalis. If the hæmorrhagy arises from an erosion of the vessels, or their want of power to contract themselves, styptics or oil of turpentine; if from too great an irritability of the vessels, a solution of opium in water should be injected.—The formation of pus which is confined, renders the incision necessary.

In order to ascertain whether there is a venereal ulcer between the prepuce and glans, I introduce

roduce a probe, with some lint affixed to it. Then, turning it round the whole glans, the patient generally feels pain, if there be any ulcer, as soon as the probe with the lint touches it; and upon withdrawing it, a part of it will be stained with purulent or puriform matter; whereas, if there is but a simple discharge from the glans without any ulceration, the whole of the lint will be stained with the same equally. In either case, if the inflammation and swelling be violent, leeches, or, according to circumstances, a poultice made of bread and water, mixed with some vinegar of lead, ought to be applied to the part affected, and three or four times a-day a diluted solution of mercury in nitrous acid; or the sublimate or calomel suspended in lime-water; or, according to circumstances, Plenck's solution of mercury with gum arabic, between the prepuce and glans, should be injected in such a manner, that the interstice between them is filled and a little distended with the injection. If there be any ulcer, some lint dipped in the same liquids may be applied to it, by means of a probe, once or twice a-day. Mercurial fumigations are in this case often useful. I think there is never any danger of a concretion of the parts as long as the ulcers remain venereal; and meanwhile their nature is changed, the phymosis is also generally removed. A course of mercury ought in such cases never to be omitted. But, as I have observed before, the incision of the prepuce ought to be immediately performed, if the symptoms of the inflammation be very high; if there appear any danger of mortification; or

if we have reason to suspect, beneath, an ulceration of a bad or perhaps cancerous nature.

In phymosis, we see the prepuce often increase to an enormous size, forming rugged condylomatous excrescences. This, I have observed, has misled practitioners to propose, or actually to perform, the amputation of the penis, in the idea of being cancerous. I have cured several of these cases, and therefore think it highly imprudent hardly ever to propose or perform that operation; especially as those swellings frequently disappear in a few weeks time, under a mercurial course and proper external applications.

C H A P. IX.

Of the PARAPHYMOSIS.

PARAPHYMOSIS, a word derived from the Greek Παρά, *de*, and φρεσις, *præclusio, obturamentum*, signifying the opposite of phymosis, is a disease where the prepuce, being drawn behind the glans, is so contracted there, that it cannot be brought again forwards over the glans; and would for this reason, in my opinion, be more properly named a *strangulation of the glans*.

Men who from nature have a strait prepuce are most subject to this disorder; which arises when the prepuce has been drawn back at a time when the size of the glans, either from venereal ulcers, or in a violent clap, is preternaturally enlarged.

I have little to add to what has been said on this subject by Celsus, and some modern writers.

It is a dangerous complaint, and requires the most speedy relief. I have seen an instance where a gangrene of the glans was the consequence of such a strangulation, before the surgeon could come to give assistance. We ought therefore, without delay, apply those means which

which may bring the prepuce forwards as quick as possible.

The most effectual remedy is, to apply to the swelled glans the aqua plumbata (commonly called *Goulard's water*), carefully avoiding to touch the prepuce with the same; by which means the glans is so powerfully contracted, that the prepuce may be generally pretty easily brought over it forwards, and thus the complaint is effectually removed. Or if this solution be not at hand, cold water may be sprinkled repeatedly upon the part, in the mean time gently pressing the swelled glans with the fingers dipped repeatedly in cold water, so as to squeeze out, if possible, all the blood extravasated in its cavernous substance. By these means, the turgescency of the corpus cavernosum glandis will be most efficaciously diminished; and by skilful management, gently pressing the glans backwards, whilst we endeavour with the fingers of the other hand to bring the prepuce over it forwards, we shall very often succeed, and relieve the patient from imminent danger. Ice, or water rendered by art as cold as ice, may perhaps be useful to the operator in accomplishing this desirable effect. But if the disease be accompanied with a clap, we ought to be cautious with regard to the application of cold, lest we might bring on a worse complaint, by retropulsion, than the disease for which cold is applied. If we should not be able to reduce it, and the symptoms be violent, we should not defer the operation, but make an incision in the prepuce or frænum; an operation by no means

dangerous, but absolutely necessary to prevent the most disagreeable of all consequences of venereal complaints, a mortification of the glans penis. If there are venereal ulcers in one side, I prefer always to make the incision of the frænum or prepuce on the other side; in order to secure the wound, as well as possible, from the poison, and to prevent its absorption by the lymphatics of the fresh wound.

CHAP.

C H A P. X.

On VENEREAL BUBOES.

A SWELLING of any of the lymphatic glands of the body is called a *Bubo*; and if such a swelling be occasioned by the venereal poison, we then call it a *Venereal Bubo*. The latter only comes within the plan of this treatise.

Though buboes may arise in any part of the body where lymphatic glands are situated, yet we have no authentic observation of their ever existing any where except in the lymphatic glands of the groin, arm-pit, or extremities; and even of these, the latter are much less frequent than the former.

Venereal buboes arise from two causes, essentially different from one-another. This difference has hitherto, in general, not been attended to with that accuracy which the importance of the subject seems to require.

Buboes have hitherto been supposed to arise always from the venereal virus absorbed by the lymphatics, and carried to the gland; but this is not always the case. Swellings of one or more of the inguinal glands frequently owe their origin to the poison lodged on the surface of the glans or urethra, irritating there the mouths

of the lymphatics, without being absorbed by them. These vessels being irritated, produce a swelling in the nearest lymphatic gland they go to. In the one case, the cause of the bubo lies in the gland itself, in the other without it; so that we may properly distinguish them, by calling the former an *idiopathic*, and the latter a *sympathic*, bubo.

This distinction, founded on facts, is necessary to regulate the method of cure. But the distinction of buboes into *primary* and *secondary*, viz. such as arise from an original infection, and those which are supposed to owe their origin to the poison deposited from the mass into the gland, seems to be of no practical use whatever.

Idiopathic venereal buboes, as we have observed, owe their origin to the venereal poison absorbed and lodged in the gland. This absorption frequently takes place after the virus has by its acrimony produced some slight excoriation or ulceration in the surface of the glans, prepuce, urethra, penis, scrotum; or extremities. Whether a bubo ever arises, as has been hitherto generally asserted, from the venereal virus being deposited from the mass into the gland, as pestilential buboes seem to arise in the plague, is not yet perfectly ascertained. But that buboes may sometimes, though seldom, arise from an immediate absorption of the venereal virus, without any previous excoriation or ulcer on the surface of the genitals or neighbouring parts, seems to me highly probable from several authentic observations; though this opinion has
been

been controverted by some modern writers.— About twelve years ago, three soldiers came into a military hospital in one week, all affected with a bubo from the same woman. They had all been in perfect health a few days before; neither had any of them, on being carefully examined, any appearance of a clap, or the least excoriation in the genitals or thighs. Whether this immediate absorption is owing to a torpid and less irritable habit of body, or to the greater subtilty or less irritating nature of the venereal virus in some cases, I cannot pretend to ascertain. But to this immediate absorption it is perhaps owing, that we are not always able to avoid a bubo, or perhaps even the lues itself; though by using preventatives, we may most effectually prevent claps and original shankers.

That idiopathic buboes arise from an absorption of the venereal poison from ulcers of the genitals or urethra, daily experience shows; but that they likewise arise from venereal ulcers in any part of the upper or lower extremities, is not so general. I shall therefore adduce a few examples by way of illustration.

Some years ago, I had the misfortune of being affected with a shanker. Being then on a journey, I took some mercurial pills; by the use of which the ulcer was cured in about ten days. I then discontinued the pills, and felt no complaint till six months after, when I was one night awaked by a violent itching at my right elbow. Next night the itching returned; and the third morning, upon examining the spot, I found it covered with a thick yellow

scurf like a tetter. As I had no medicines with me, I was obliged to defer applying some medicine; when, two days after, I perceived a swelling under my arm-pit; which, in three days more, increased to such a degree, that I was obliged to keep the arm a considerable way out from my side. By the application of the mercurial ointment to the tetter twice every four and twenty hours, the tumor was in a few days dissolved, and the disease, by a course of mercury, perfectly cured some weeks after.

A short time after, I was consulted by a gentleman who had undergone a mercurial course about fifteen months before, for a venereal complaint, of which he imagined himself perfectly cured. Some weeks before he applied to me, he began to feel a pain in the middle of the sternum, which he took to be rheumatic. On this supposition, he rubbed the part affected with a piece of flannel, morning and evening. Thus the pain in the sternum was removed; but, the second morning after, the great toe of the left foot, and that next to it, were in like manner affected. This pain being removed by friction with flannel as before, returned to the sternum; from which being driven by a similar friction, it again returned to the foot. He now began to imagine, that his complaint was of a gouty nature; but having occasion to go abroad that day, he bathed his foot in warm water, and pared a corn which he had upon one of the affected toes, in order to walk the more easily. In performing this operation, by cutting too deep he wounded himself. The next day, on
examining

examining the part, he found a little suppuration had taken place; he therefore covered the fore with a piece of clean linen. The second evening he felt a slight pain in the groin, which he then disregarded; but in a few days after, when one of the glands swelled to the bigness of a pigeon's egg, he asked my advice. I informed him, that he had not been radically cured of his former disorder, and that the present symptoms were a consequence of it; that the pain both of the sternum and of the toes had been venereal; and that from the wound of the toe, and succeeding suppuration, the poison had been absorbed by the lymphatics, and carried to the first gland they met; which in this case was one of the lower lymphatic glands of the groin. The ulcer of the toe still continued, but was very small, and discharged a little matter resembling pus. I applied a mercurial plaster upon it, and discussed the bubo by a course of mercurial frictions applied to the thigh.

Some years ago, an eminent accoucheur in London, as I mentioned in the first chapter, was called to deliver a woman, who, unknown to him, was affected with shankers. Ulcers on his hand, and a swelling of the lymphatic gland of the fore-arm, which proved very obstinate, were the dreadful consequences.

Sympathic venereal buboes, as I have already mentioned, owe their origin, not to the venereal poison absorbed, but to an irritation of the mouths of the neighbouring lymphatic vessels. This species of bubo we frequently meet with in simple venereal Blennorrhagias; or, where
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one of the glands is idiopathically affected, we sometimes see two or three contiguous thereto swelled by sympathy. In this case, however, only that which is really infected continues to increase in bulk; while the others remain in the same state, and at last disappear without any further consequences.

Sympathic buboes go off spontaneously, as soon as the irritating cause in the neighbourhood is removed; and it is only this kind of buboes which quacks, with their pretended nostrums, seem to remove sometimes in a few days; while, on the other hand, we frequently hear patients complaining of intelligent physicians, for not having been sufficiently expeditious in curing their bubo, or not having done it without suppuration, though they had formerly been radically cured by a quack, by the simple application of a mercurial ointment or plaster to the part affected. If such patients, however, were acquainted with the difference between the true nature of their present and former complaint, they would easily see, that, in the former case, the cure was not to be attributed to the ointment or plaster applied, but merely to the nature of the disease; whereas, in the present situation, perhaps great skill and attention is requisite, either to discuss the bubo or to cure it, after the attempt of discussing it has proved ineffectual.

Having thus established the essential distinction betwixt Idiopathic and Sympathic buboes, I should now proceed to speak of the method of treating them; but, previous to this, it will be
useful

useful to take notice of some prejudices prevailing among a number of patients, concerning the nature and cure of this complaint.

Many people, especially the inhabitants of the more southerly parts of Europe, think it dangerous to resolve or discuss a venereal bubo. This prejudice arises from an opinion, that the virus is by this means repelled and absorbed into the mass, where it afterwards occasions a general infection: whereas, if the bubo were cured by suppuration, they imagine that no infection of the mass was to be apprehended; but that, on the contrary, even in case any poison should have been absorbed during the suppuration of the bubo, the virus lodged in the gland would thus not only be carried off, but the whole mass would thereby be purified. Hence they imagine, that the abscess formed by the suppuration of a bubo, is a kind of channel for cleansing the body entirely from all the venereal poison. As this opinion, however, is not only altogether erroneous, but may prove hurtful to the patient, at least by depriving him of an advantage which he might otherwise have enjoyed, I shall make two observations on this subject. *First*, That, by the modern improved practice of applying mercurial frictions, the discussion of a bubo cannot possibly occasion any such thing as a repulsion of the venereal virus into the mass; that, on the contrary, the virus lodged in the gland itself is thereby effectually destroyed. And, *secondly*, That though the virus should have been actually repelled from the gland into the mass, such a repulsion would

would still be preferable to the method of curing the bubo by suppuration.

But in order to set this matter in the clearest light, I must have recourse to the anatomical discoveries which have been made about the lymphatic system; and I shall then consider what will be the consequence of mercurial frictions applied in the manner to be mentioned hereafter.

We know, from the observations of Professor Monro, and those of the late Dr W. Hunter, and particularly from Mr Hewson's plates*, that the lymphatic or absorbent vessels begin every where on the surface of the body, with the smallest ramifications; that, in going upwards from the lower extremities, they unite into larger branches, which terminate in the inguinal glands, pouring into them the liquid which they have absorbed at their extremities. This liquid, which in a natural state is nothing but mild lymph more or less diluted with water, which has been absorbed by their extremities, after being poured into the inguinal glands, is again absorbed by other lymphatic vessels, which carry the same to the abdomen, and thence through the thoracic duct into the mass. Let us now suppose that some of the venereal poison has been absorbed by the lymphatic vessels of the genital parts, or the lower extremities,

* This, as well as the anatomy of the whole lymphatic system, and the diseases depending thereon, are now more fully illustrated by the accurate and beautiful plates of Mr CRUIKSHANK, MASCAGNI, and HAASE.

tremities; and that consequently it has been carried along with the lymph into one or more of the inguinal glands. The poison thus brought into the gland will either be absorbed again by the opposite absorbent vessels, in which case it is carried into the mass; or, what more frequently happens, it will, by its acrimony, excite an irritation in the gland, and thereby not only prevent its own absorption, but produce an inflammation and swelling of the gland. In those circumstances, the most eligible thing, both for the patient and physician, would be, if possible, to destroy and eradicate the poison lodged in the gland. For this purpose, we know mercury is a specific; but the question is, how to bring it into the gland affected? Formerly practitioners, from a defect of anatomical knowledge, imagined they could introduce the mercury into the gland, by rubbing the mercurial ointment upon the gland itself. But so far was this from having the intended effect, that buboes treated in such a manner generally grew more inflamed, suppurated, and even sometimes mortified. By such an application, no mercury is introduced into the affected gland; or, if it happens now and then, it is merely by chance; for we know, that the lymphatics arising from the skin immediately over the gland, do not take their course into the substance of the gland, but proceed obliquely upwards to the abdomen. Hence the bad or good effects produced in that case are not to be ascribed to the mercury, but rather to the mechanical irritation occasioned by the friction, and would probably have taken

place, if any other ointment had been employed. But if, instead of rubbing the mercurial ointment upon the gland itself, the same be rubbed into the thigh or leg of the side affected, we are to expect, according to the discoveries of the course of the lymphatic vessels, that the mercury will be absorbed by their extremities, and from thence be conveyed to the affected gland; where, meeting with the venereal poison, it will most effectually exert its specific power against it. That this really happens, appears from the successful practice of this method. For if the mercurial frictions have been applied upon the proper place, and in time, before the inflammation has gone to too great a length, we find, that, in a great number of buboes, the poison is thereby destroyed, or at least so changed in its nature, that it now is rendered incapable of irritating the gland any further. Nor do we observe, that the virus thus changed, and then absorbed along with the mercury, ever afterwards produces any venereal symptoms in the mass.

But let us even suppose that the mercury has not destroyed the poison lodged in the gland, but has driven it into the blood, as those patients commonly believe. What will be the consequence? The same, undoubtedly, as when a victorious hero dislodges and chases a flying enemy before him. The very same remedy which drove the poison from the gland into the mass, will pursue it there also; and either expel it altogether, or render it, one

way or other, harmless and inoffensive to the body.

To elucidate this matter still further, I shall answer a question which I have heard frequently proposed, viz. Why does the method of rubbing mercury into the extremity not always succeed in discussing the bubo? For the solution of this question, we must have again recourse to anatomy. Dissections and injections show, that there are two series of lymphatic glands in the groin, called the upper and lower inguinal glands. In most people there is a communication between these two orders of glands: in this case, the lymphatic vessels of the inferior glands communicate with the superior ones; whence again others arise, which take their course through the abdomen into the thoracic duct. But in other persons there is no such communication; the lymphatic vessels of the inferior inguinal glands proceed directly to the abdomen, without insculating with the superior ones. Now, the venereal virus being absorbed by the lymphatics of the genitals, is generally carried to the superior inguinal glands, where it produces the bubo. Wherever therefore the inferior inguinal glands have the above-mentioned communication with the superior ones, the mercury rubbed into the inside of the thigh or leg will be absorbed, carried to the inferior, and from thence to the superior inguinal glands, where it will produce the desired effect. But, on the other hand, where no communication of this kind takes place, the mercury is carried from the extremity to the inferior inguinal glands,

glands, and from thence to the abdomen, without ever reaching the affected gland; on which, of consequence, it can produce no effect.—The same will likewise happen where the inflammation of the bubo is gone too far, or where a scirrhusity is formed in the gland. Mercury in these cases can have little or no access to the gland; or though it could, would be little able to change the nature which the disease has now assumed.

But let us even go further, and suppose, that the method of treatment just recommended has not been followed; but that, instead of it, the irritating matter has been blunted, and the absorption of the poison from the gland has been effected by other sedative or discutient applications. What will be the consequence? I answer, instead of a bubo, the patient will probably be affected with a disease of the whole system; which, if recent, may be easily and radically cured in a few weeks time, without any bad consequence remaining; whereas the complaint with which he was affected before, is sometimes not only very dangerous, and at other times extremely obstinate, but always of a very tedious nature. Besides, even when the suppuration is of the best kind, which, however, is far from being always the case, the poison, before or after the abscess is formed, instead of being entirely evacuated, is, if not constantly, at least very frequently, absorbed into the system. Thus the disorder which the patient so much dreaded is really produced; for the cure of which he will

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at last be obliged to have recourse to mercury, the remedy he was formerly so much afraid of.

Let us now proceed to the method of cure.

Method of Cure.

FROM the observations laid down, it appears, that every unprejudiced practitioner, in any case of an idiopathic bubo, should always attempt to discuss it as soon as possible, by any method whatever, provided the inflammation has not risen to too great an height, or signs of suppuration have already made their appearance.

The most effectual method of discussing tumours of this kind, is, as I have already mentioned, by mercurial frictions applied to the inside of the thigh or leg of the affected side, if the bubo happens to be inguinal; or to the arm, if the bubo be under the arm-pit. Occasionally also, in the former case, frictions may be used to the perinæum or scrotum. But as the success of these frictions is limited to a few days, they ought to be made not only with due care and attention, but, if circumstances permit, be repeated twice a-day. Venesection or purges, together with cold topical applications, will, occasionally, greatly contribute to the intended effect.

Mr *Birch* found, in repeated instances, that gentle electrical shocks, passed through the thigh and gland affected, greatly assist the mercury in discussing the bubo; and, in some cases, produce that effect, without any mercurial friction, even in buboes much advanced.

To the gland itself I never apply any thing but a mercurial plaster; and from this I expect nothing towards the accomplishment of the cure, but make use of it only to keep the patient's mind easy. In obstinate cases also, I would advise the application of dry cupping glasses to the swelled gland, which has been attended with success in the Edinburgh Infirmary. Repeated vomits, with applications of cold water to the part affected, have been likewise recommended as useful for the discussion of a bubo; but I have never had occasion to try either of these remedies. The volatile liniment, rubbed into, and round about, the bubo for eight or ten minutes, once or twice a-day, has been found very effectual to this purpose, in several instances, by Dr *Nooth*.

During the whole time that we attempt the resolution of a bubo, the patient ought to abstain from exercise, and confine himself to a very low diet; as a contrary regimen might greatly tend to increase the inflammation. With regard to mercurial frictions on the gland itself, I have already given my reasons for disapproving of them. Indeed most of the idiopathic buboes which I have seen treated, either in this way or by other irritating remedies, have inflamed and suppurated, though the application was made with a view to prevent this disagreeable circumstance; and there are now but very few practitioners, let their knowledge of the recent discoveries concerning the lymphatic system be ever so confined, who would trust to this application for producing a discussion.

When

When I say that a local irritation of the gland will rather be followed by an inflammation and suppuration than a resolution, I purposely mention the idiopathic venereal bubo; for sympathetic buboes do certainly, as I have observed, frequently disappear after the use of mercurial frictions applied upon the gland itself. We ought not, however, even in this case, to ascribe the resolution to the mercurial frictions, poultices, &c. which have been applied, but to the simple operation of nature; because sympathetic buboes will always go off by themselves without any application whatever. For their removal, as I have already observed, nothing more is requisite than to abate or remove the stimulus from the mouths of the lymphatics or neighbouring glands. This fact is sufficient, I think, to convince us of the importance of distinguishing in practice the idiopathic buboes, or such as owe their origin to the venereal virus absorbed from shankers of the genitals or extremities, from sympathetic ones, arising from the mere irritation of the lymphatic vessels, and generally accompanying simple claps, swelled testicles, &c. without the appearance of any venereal ulcer.

Thus far with regard to the treatment of venereal buboes by resolution, I now come to speak of those that are either too far gone to admit of a resolution, or that resist it on some other account.

That a bubo will not admit of a resolution, we know by the tumour continuing to increase in size, and becoming red and painful after the

proper application of the mercurial frictions or other resolvents have been made use of for four or five days. As soon as we see these our attempts to procure a resolution frustrated, we must endeavour to bring on a mild and speedy suppuration. Here, however, we shall often meet with great difficulty, buboes being so essentially different from one another, that the treatment which will bring the one kind to a mild suppuration, if applied to the other, will not only occasion very dangerous consequences, but even prove fatal to the patient.

They may, as far as I can judge, be brought most properly under the following three different heads.

In the *first*, all the symptoms of a real inflammation run very high, sometimes even to mortification; in the *second*, the same symptoms seem to arise from too great an irritability of the body; whereas, in the *third*, the most irritating medicines are hardly able to raise the inflammation to such a pitch as is necessary for bringing on a suppuration. In the *first* or true inflammatory bubo, our intention must be to moderate the inflammatory symptoms; in the *second*, to allay the irritability; and in the *third*, to stimulate and excite.

In the *first* kind, therefore, when the patient is otherwise of a healthy, strong, and vigorous constitution, the inflammation high, the pain severe, and accompanied with an inflammatory fever; bleeding, sometimes even repeated as circumstances require, will be necessary. Leech-

es, however, or, in want of them, scarification of the part affected, are often preferable to general bleedings. In other respects, rest, a low diet, cooling drink, an antiphlogistic purge, the warm bath, and an emollient poultice applied constantly warm to the gland, and changed when it grows cool, are the means to be insisted upon in this species of bubo.

In the *second* kind, the symptoms of inflammation seem to run likewise very high, but merely from too great an irritability of the system. This we may easily distinguish from the former, by the weaker, smoother, and more frequent pulse; as also by the constitution of the patient. In such circumstances, general evacuations, instead of being of service, I constantly observed to be prejudicial. On the contrary, a fuller diet; opium every night or every other night, and the Peruvian bark through the day, ought to be given; and to the external emollient are here properly joined some sedative applications. It was, probably, in a case of this kind, that Mr *Brambilla* saw a bubo prove gangrenous and fatal, after a course of calomel along with a strong decoction of the woods was administered to the patient. I must, upon this occasion, make the general remark, that mercury should never be administered either internally or externally, during the inflammatory state of a bubo, or any other venereal complaint, unless we have some very urgent reason. During that state, I have never seen any good, but frequently very bad effects resulting from

its use, and more especially when rubbed into the part affected.

The *third* kind of buboes, essentially different from the two former, we frequently meet in patients of a relaxed, debilitated, cachectic, or scorbutic habit of body. When this is the case, the tumour of the gland, though red and inflamed, rises very little and very slowly; the patient feels but little pain; no fever attends; or, if any, it is rather of the low kind, and the pulse is weak, accompanied with a depression of spirits.—In such cases, we must endeavour either to discuss the swelling, or to bring the bubo to suppuration. The former we obtain by repeated purgings or emetics; and lately, a poultice made of the root of the *Atropa Mandragora* has been recommended for that purpose, and by others a poultice made of the root of *Daphne Mezereum*. They both deserve to be tried in obstinate hard swellings of this kind; but their acrid nature should keep us carefully upon our guard. For the latter, the administration of mercury, internally as well as upon the part affected, will sometimes be useful and even necessary; but evacuations of any kind are always hurtful: a full diet with wine, an infusion of Peruvian bark in wine, or some other strengthening and aromatic medicines, together with local applications more or less stimulant, such as the common plaster with gums, a poultice made of onions roasted or boiled in oil, will be most proper.

If symptoms of the sea-scurvy prevail, mercury ought never to be made use of; but the patient should,

should, besides the use of wine and Peruvian bark, &c. eat oranges and other ripe fruit, or make use of the juice of antiscorbutic herbs, or a decoction of malt, and take moderate exercise in free open air every day.

When by any of the above-mentioned means, the bubo is at last brought to suppuration, and an abscess is formed, most writers advise the artificial opening of the abscess with the lancet or caustic; but this I think should almost always be rather left to nature. I have found, that nature, left to herself, scarce ever fails to make an opening in due time; whereas artificial openings are often made before the abscess is fully formed and ripe. I have besides observed another advantage from this practice, viz. that the abscess opened by nature generally heals much easier; whereas that opened by an incision, or the application of a caustic, we see not unfrequently followed by disagreeable consequences. The cure is thereby often rendered extremely tedious and troublesome, and always a visible cicatrix left behind; which last we ought to make an essential point carefully to avoid, especially in women, for reasons sufficiently obvious. If the operation be left to nature, the abscess will generally not burst till there is a complete suppuration of the gland; and the cicatrix in a short time after, for the most part, entirely disappear, or remain scarcely visible.

There are, however, some cases in which it may be proper to assist nature, and either make a dilatation of the opening, or make an artificial opening altogether. If buboes, notwith-

standing the means above-mentioned, remain inflamed and hard, without either coming to a resolution or suppuration, a small bit of the lunar caustic, about the size of a pea, may be advantageously applied to the middle of the bubo, for about two, or at most three hours, the eschar afterwards to be anointed with a little of the strong blue ointment, and the whole covered with a warm-emollient poultice. This method, first proposed by Mr *Plenck*, I have since several times followed with success.

Here I must add, that, in several instances, I have observed the common method of applying a large caustic on the bubo for ten or twelve hours, in order to bring it to suppuration, attended with very bad consequences. The event, in two cases, was a mortification, and in others a large ichorous ulcer, which in one instance seemed to assume a cancerous appearance, and at last proved fatal to the patient. This I have never seen happen from the application of a small piece of the caustic as above mentioned.

When the abscess has been opened either by nature or art, it is called an *exulcerated Bubo*; in which the same distinctions ought to be carefully observed as laid down above, when I spoke of inflamed buboes.

Many writers advise in this case, to administer mercury internally and externally, and thus treat the ulcer as a venereal one. This practice may be undoubtedly very good in some cases; but in others, a mercurial course will prove hurtful, and often give rise to very dangerous consequences.

No general method, I think, can be laid down for

for the treatment of an exulcerated bubo; but the practitioner ought to be entirely directed by the nature of the disease, and the constitution of the patient, as mentioned above. If the patient be vigorous, without fever, the pus mild and of a good consistence, no external application to the fore seems necessary; and if anything is to be applied, a continuation of the same poultice which was applied before the abscess burst, will certainly forward the cure more than any thing else. If the abscess assumes the nature of a venereal ulcer, a course of mercury may be proper; but with regard to topical applications of mercury, in those cases, we should be highly cautious lest we bring on a complaint, of which I have seen several melancholy instances.

But if, under the administration of our medicines, whatever they be, the abscess, instead of healing, either remains in the same state, or assumes a relaxed and flabby appearance, and the discharge grows copious, thin, and ichorous, and, at the same time, the health of the patient, instead of growing better, gradually grows worse and worse; a different treatment will be necessary. If mercury had been administered and has produced some sensible effects in the mass, we should not obstinately insist to ascribe the present symptoms to the inefficacy of the mercurial preparation we have made use of, and consequently have recourse to another: we rather ought to take the hint given by nature, and not persist any longer in the use of a remedy from which no good effect had followed.

ed.—Mercury is a poison for those patients; and so is likewise the hospital air. A decoction of the Peruvian bark in milk, a decoction of sarsaparilla with antimony, the powder of sarsaparilla with milk (if the patient bears milk), a full diet, wine, an infusion of the bark in wine, with the free use of country air, and gentle exercise, are the medicines required. To the ulcer, an injection with the aqua vitriolica camphorata, or, according to circumstances, a fomentation with the Peruvian bark repeated twice or three times a-day, is the necessary application; and the sore should be covered with fine lint or a piece of soft sponge, that the matter may freely discharge. The dressings may be kept on by a piece of adhesive plaster spread on linen. To prevent excoriations on the thigh from the acrid discharge of such ulcers, the application of a little white cerate to the surrounding parts will be necessary*.

The following case may serve as an illustration of what I have just now asserted. An ulcerated bubo was, according to the common course of practice, treated as a venereal ulcer, by the internal and external use of mercury. The patient by this method, after eight weeks time, was so much reduced, and the ulcer had assumed so bad an appearance, that it was
thought

* Mr FOOT has ingeniously applied to this kind of exulcerated bubo, commonly called phagedenic bubo, the same method, which effectually answers in ulcers of the legs of the same kind, with the same success; viz. a vitriolic solution with the strait bandage.

thought proper to have the advice of another physician. Being consulted, I found upon examination the flabby relaxed *atonic* appearance of the ulcer which I mentioned above. I told the physician and surgeon, who hitherto had treated the patient, that I thought the continuation of mercury improper; and that the internal and external use of strengthening medicines, and a full diet with wine, were now the only proper remedies. They both thought my advice unseasonable; and that it was more proper to continue the use of mercury, only with a different preparation. However, after a good deal of conversation, I prevailed on them to try only for eight or ten days what I had proposed; and the patient finding himself the better for the course he began, continued the same for about six weeks, when he was perfectly recovered.

A similar case occurred some time ago to a friend of mine in London, who gave the same advice to a patient that had been treated for a long time with mercurials, and the patient found the same benefit from the change. A remarkable circumstance which happened with this latter patient, I must take notice of. Under the course of mercurials he suffered violent sweats every night; for which he put on every morning a clean shirt made of new linen; all these shirts, about a dozen in number, after having been once or twice washed with other linen in the common manner, grew so tender, that they seemed to be perfectly rotten.

If, after a suppuration has taken place and

the abscess been opened, part of the gland should still remain swelled and hard, repeated purges, with the continued use of the medicines recommended above for indurated buboes, will effectually remove this disorder.

The *sinuses* or *fistulas*, which are sometimes apt to arise after such ulcers, are for the most part easily prevented, as well by proper injections as by a suitable posture of the patient when in bed, and by a gentle, but careful, pressure, squeezing out the matter all round, every morning and evening.—If fistulas or sinuses have been formed from an ulcerated bubo, and refuse to yield to the injections mentioned, the knife must be employed. These complaints, however, seldom or never occur, if the surgeon, in order to give a free discharge to the matter, be attentive to the posture of the patient, dilate the opening in time if necessary, and the patient comply exactly with his directions.

Buboes grow now and then *gangrenous* from a high degree of inflammation; but more frequently after they have been improperly opened, especially in irritable habits or in scorbutic patients. The foul air of hospitals proves often fatal to such patients, and retards likewise very much the cure of all exulcerated buboes. Mercury increases the mortification. The Peruvian bark, or in some circumstances large doses of opium internally; and the same bark, or the arnica root in powder, or camphor dissolved in vinegar, are the most effectual remedies externally.

Hemlock, both internally and externally applied, has been strongly recommended for *cancerous*

vous as well as scirrhus buboes : but I never saw it effect a radical cure where there was a real cancer ; though there is nothing to hinder its being tried : but in such cases, the only method that I know for avoiding death, or at least a most miserable life, is the total excision of the cancerous gland, if practicable ; and this, if we wish to save our patient, should not be too long deferred.

Having thus finished the treatment of topical venereal complaints, I now proceed to those arising from an universal infection, or, as it is commonly called, a *confirmed pox*.

C H A P.

C H A P. XI

On the SYPHILIS or Venereal Disease in particular.

HAVING premised some necessary observations concerning the venereal infection, the nature of the virus, and the different appearances of syphilitic complaints in general, in the beginning of this treatise, I now enter, in particular, into the consideration of the nature, symptoms, and cure of the syphilis or venereal disease, commonly called a *confirmed lues* or *pox*.

The effects or symptoms which the venereal virus is apt to produce when absorbed into the mass, are, now a-days, shortly as follow.

1. *In the eyes*: The most violent inflammation, with a discharge of puriform matter (from a retropulsed clap), ending generally in perfect blindness; or an ophthalmia of a more chronic kind (from the venereal virus deposited from the mass), affecting the eye itself, or the eye-lids; and sometimes also producing the fistula lachrymalis.

2. *In the ears*: Tingling in the ears; deafness, with or without a puriform discharge, either from a retropulsed clap, or from the venereal virus affecting the ear, or the orifice of the Eustachian tube in the fauces.

3. *In the nose*: Ulcers in the nostrils; an ulceration of the mucous membrane of the nose, with a caries of the bones, especially of the septum; whence the disfiguration of the nose, which we see now and then in people walking in the streets; or a discharge of fetid ichor, known by the name of *ozæna sypilitica*.

4. *In the mouth and throat*: Ulcers, caries of the ossa palatina or antrum maxillare, erosion of the velum, &c. sore throat, coryza, paraphonia.

5. *In or about the genital parts*, it produces, or proves a perpetual source of, excoriations, ulcers, fistulas, gleet, warts, condylomata. Whether claps, swelled testicles, or buboes, ever arise from the poison being deposited to those parts from the mass, is with me, for want of authenticated facts, still a matter of doubt.

6. *In the skin*: Copper-coloured spots, scurf, tetter, scabs, especially on the margin of the scalp, or in the beard; a scald head, or tinea; and when the disease is very inveterate, and somewhat degenerated, it sometimes, though seldom, produces a kind of leprosy over the whole surface of the body; a corruption of the nails, and ulcers of the most obstinate kind in different parts of the body.

7. *In the bones*: Either the most excruciating pains and swellings, commonly called *tophi*, *exostoses*, &c. especially troublesome at night when the patient grows warm in bed; an ulceration in their external, or a corruption of their internal substance, diseases known by the name of *caries* and *spina ventosa*. The bones most liable to be affected by this disease, are those which

are not covered with muscles, as the tibia, the radius, the elbow, the processus coracoideus, sternum, the os frontis, and other bones of the head, &c.

8. Sometimes the venereal poison will produce effects, the nature of which is so concealed, that they seem rather arising from some other cause. Such are pains in several parts of the body, resembling those of the rheumatic kind; pains in the articulations, resembling the gout; asthma; nervous or hectic fevers; consumptions of the lungs, or simple emaciation without any apparent vice in any viscus of the body.—These symptoms have, among physicians, obtained the name of *morbi venerei larvati*. It is, however, to be observed, that many of these symptoms are not unfrequently owing to the improper administration, and consequent bad effects, of mercury.

9. Sometimes the lues is really combined with other disorders; such as the sea-scurvy, intermittent fevers, consumptions, &c. These are called *morbi venerei complicati*, and deserve the utmost attention of the practitioner; because the success of the cure will often in a great measure depend on the accurate knowledge and distinction of these complaints.

The specific remedy now generally applied for all kinds of venereal disorders, is Mercury in its different preparations. Though there are perhaps remedies of the vegetable kingdom as powerful as mercury, to cure the venereal disease in all its stages, yet being either unknown or difficult to be got, they are now generally neglected.

nèglected. Mercury is made use of, not only on account of its specific power against this disorder, but because it is a remedy which is cheap, easily to be got, and quick and certain in its effects; in the same manner, though we are able to cure agues by other remedies, we employ now-a-days seldom any thing else but the Peruvian bark.

Several hypotheses have been advanced to explain the manner in which mercury produces those powerful effects. None of them seems to be founded on real facts; all of them are therefore little satisfactory. Some say mercury acts by its metallic weight; others, by its astringent quality; and others, again, by its power of promoting all kinds of excretions, &c. If those writers had only considered, that sometimes two or three grains of mercury brought into the mass, make the most violent venereal symptoms disappear, I think they would have never had recourse to such explications. Perhaps, if there was an opinion to be advanced about this matter, chemistry could afford us a more reasonable and satisfactory theory; by supposing, that mercury has a peculiar attractive power, or what is commonly called a *chemical affinity*, to the venereal poison; by means of which, wherever it meets with that poison, it readily unites, and forms a kind of compound with it, which then has no longer any of the qualities which either of the substances had before the union; and therefore the effect produced by the poison must, in the moment that union takes place, unavoidably cease, and the patient find himself

either relieved, or, if the poison has been saturated with a sufficient quantity of mercury, radically cured. By this theory we would perhaps be more able, not only to account for a few grains of mercury relieving sometimes the most excruciating venereal pains of the bones, but also why mercury taken internally removes venereal ulcers, without any external application, &c. It would further seem probable from these effects, that mercury has a greater chemical attraction to the venereal poison than it has to any acid; and that, given in any of its saline preparations, wherever it meets with that poison, it leaves immediately the acid with which it was combined, and unites with the poison*. I could support this opinion, perhaps, if I added, that mercury cures the venereal disease the easier and sooner the more minutely it is divided; that, in order to produce the desired effect, it is always necessary that it be absorbed into the mass; but that it never cures the venereal complaints though absorbed into the mass, if not carried in sufficient quantity to the place or part affected. In this manner we could perhaps easier explain why it often cures the venereal disorder without any sensible increase of any of the different secretions or excretions of the body; and why, if it produces purging, im-

moderate

* It is a very remarkable circumstance, which one day or other may serve to clear up this theory, that mercury has the greatest affinity to, or, as I should say with more propriety, that of all known acids, that of the animal fat (*acidum sebi*) has the greatest attraction to mercury.

moderate sweating, or salivation, it very often leaves the venereal disease uncured behind. But though we could thus resolve all these different questions in a more satisfactory manner, I must confess, that this theory is as little as the former founded on any real fact, but on mere conjecture; and therefore, as long as it remains in this state, it is equally useless as all other hypotheses in the practice of physic, where it may be sufficient for us to know the specific remedy to cure the disorder, without being acquainted how it produces its effects; though such a knowledge, could it be attained, would lead undoubtedly to great improvements in the practice of physic.

Method of Cure.

IF the patient be strong enough to bear the immediate use of mercury, I begin generally by giving him a purgative; and the next day I let him bathe in a warm bath, made of a decoction of bran, or of simple soft water. In this bath, the warmth of which should be determined by the agreeable feeling of the patient, he ought to sit for half an hour or an hour's time; during the latter end of which time, he should be rubbed gently all over with a flesh-brush or a piece of flannel. Coming out of the bath, he may take a glass of good wine, if his circumstances will admit of it, and then go to bed. By these means the skin will be well cleansed, and be better fitted for transmitting the perspiration.

If he be plethoric, or accustomed to bleeding, venesection may be proper and useful, previous to his beginning the use of mercury.

With regard to the several mercurial preparations made use of for the cure of venereal complaints, I shall speak hereafter. What we should first observe most carefully and attentively, is, whether the mercurial course we began agrees with the patient; and if it does not agree, without hesitation change it. Those patients who will not bear frictions, bear sometimes very readily the internal use of mild or more acrid preparations of mercury, and *vice versa*; others, who will not bear mercury internally, will bear the frictions, or sometimes not bear one mercurial preparation, while they bear another very readily. Some will take it more easily in pills, others in powder, or dissolved in some liquid. To those whose constitution, circumstances, or choice, are against mercurial frictions, we may give Plenck's solution of mercury in gum arabic, made into pills; or mercury triturated, and formed into pills with the extract of liquorice. These preparations agree with most stomachs, even such as sometimes can bear no other mercurial preparation. In other cases, calomel prepared by precipitation according to Mr *Scheele's* invention, or the hydragyrum nitratum cinereum (*pulvis mercurii cinereus*) of the new Edinburgh Pharmacopœia, are the mildest and perhaps most suitable preparations for those stomachs which are not able to bear any of the more acrid saline mercurial preparations. Mercury rubbed down with sugar-candy, or calcined mercury

mercury mixed with opium, may sometimes, according to circumstances, be more advantageous; but, as I have mentioned before, great judgment and attention are required in administering those medicines, as well as with regard to diet, bathing, &c. about which it is impossible to enter into a minute detail of every particular circumstance. The following rules, however, besides those to be mentioned below under the head of *Mercurial Preparations*, may serve as general ones.

The patient whom we undertake to cure of the lues, must have sufficient strength to bear the use of mercury; and neither be affected with any nervous, hectic, or inflammatory fever, nor with sea-scurvy, cancerous complaints, or gangrenous ulcers. In all these cases, I have constantly observed mercury not only prove hurtful, but in some instances, where its use was insisted upon, even fatal to the patient. These disorders, if possible, should therefore be previously removed; or if the venereal symptoms prevail so much, that they render the immediate use of mercury indispensably necessary, proper medicines ought to be conjoined with mercury.

For restoring a proper degree of strength and vigour, an healthful country air is one of the first requisites; then asses or cows milk, as it comes from the animal; or, what in some instances I have found far better for patients in easy circumstances, a strong healthy country wet-nurse, whom the patient may suck himself; or if he finds this disagreeable (or perhaps dan-

gerous), the breast of the woman may be drawn with a proper instrument, and the patient should drink the milk immediately after: this milk is the greatest strengthener I know of for debilitated patients. His diet may otherwise consist of light puddings; tender meat of middle-aged animals of all kinds, especially roasted, not too fat; and at dinner, if he likes good strong beer (or porter), he may drink it; otherwise a few glasses of good and genuine Spanish or Hungarian wine will be useful. Moderate exercise of any kind, and occasionally frictions of the whole body, will greatly assist the above regimen. As for medicines, if their use should be absolutely necessary, or if the patient desire any, small doses of the best Peruvian bark, finely powdered in substance, or mixed with cinnamon water or genuine old hock, I have found excellent. If the patient be very low, iron dissolved in vitriolic æther, I have found superior to any other medicine. The cold bath will be sometimes useful, but at other times I have seen it prove rather hurtful. This, with cheerful company, and avoiding venery or nocturnal pollutions, will greatly contribute to recover the strength necessary for enabling the patient to bear the use of mercury. I shall, however, make one remark more here, which, as far as I know, has not been taken notice of by any former writer on this subject, viz. that weakness, low-spiritedness, and anaphrodisia, are sometimes the immediate effects of the venereal virus lurking in the body; and, in that case, I have observed mercury to be the best strengthener. I have seen
people

people in that state gain so much strength in eight or ten days, from the internal use of mercury, that they found themselves most agreeably surpris'd.

During the use of mercury, a mixed diet of vegetables and animals, as the most natural to mankind in general, is proper; avoiding fat, hard, indegestible food. Acids will sometimes cause a griping or purging under a course of mercury: where that happens, they should be avoided. At table, the moderate use of wine cannot be hurtful. As to porter, or any other kind of beer, it does not agree with all stomachs under a mercurial course; where it does, I see no reason why it may not be moderately indulged, and I never saw in those circumstances any harm from it. But what I principally insist upon is, that the patient should go early to bed every day; as indulging sleep seems rather serviceable during a mercurial course. Moderate exercise on foot, in a chaise, or on horseback, in a warm and dry day, I found always more useful than confinement to a room; but if the weather be moist or very cold, it will be safer to stay at home. Night air is particularly dangerous; for it is in general cold and damp, and should be therefore, by every patient under a mercurial course, most carefully avoided. I have known several instances, where venereal patients, during the use of mercury, through inattention to this single point, have ruined their health and constitution for years, or even for life. Where the patient's business or circumstances of life absolutely oblige him to go out in very cold or

damp weather, he should never do it without having on warm cloaths, a flannel or callicoe waistcoat under his shirt, and a pair of good warm woollen stockings.

Thus we proceed with the use of mercury, if no peculiar symptoms prevent it; and at the same time, order the patient to bathe once or twice a-week in a warm bath, if his constitution be strong enough: weak and relaxed habits will not admit of this. But whenever he perceives a nauseous taste like copper in the mouth, stinking breath, swelling of the gums, the teeth feeling as if they were set on edge, a larger secretion of saliva or spitting than common, mercury should be immediately left off for some days; a warm bath and frictions with the flesh-brush to be used in some cases; a gentle physic to be taken and occasionally repeated; and cold moist air in those circumstances to be most carefully avoided. If under the use of mercury symptoms of a general irritation appear, it ought to be left off for some days, and a dose of opium to be given in its stead: but if symptoms of an inflammatory diathesis prevail, bleeding will be necessary. Thus we continue with the use of mercury, as I said, till the virus is wholly eradicated, which will generally be in twenty-five or thirty days, if the disease has not been of long standing, and the symptoms have not been very severe; but if the disease be inveterate, and the skin or bones severely affected, ten or twelve weeks will be sometimes necessary to produce a complete and radical cure.

Another

Another circumstance to be attended to during a mercurial course is, that such patients should be previously told of the effects of mercury on gold, such as rings, watches, &c. By not attending to this particular, disagreeable discoveries may sometimes be made, which female patients especially have great reason carefully to avoid.

To know whether the lues is radically exterminated, is a nice point of practical judgment; and if I say, that, from a carelessness on the part of the patient, or from want of knowledge on the part of the practitioner with regard to this point, a great many patients are unhappy, and sufferers, I advance nothing but what we see daily confirmed. If we were in possession of a remedy, which, having the power of rendering the least particle of the venereal virus, concealed in the body, active, and thus enable us to discover its presence, in like manner, as the loadstone discovers the presence of iron, there would be nothing necessary, but to administer that remedy the moment we think the patient had taken mercury enough. I have made some experiments on this subject; but the number of facts are not yet sufficient to enable me to form a conclusion.

As soon as the mercury affects the mouth of the patient, we are sure of the most essential point, viz. of its having entered the mass, which, as was observed above, is a point absolutely necessary for eradicating the poison. The disappearing of internal venereal symptoms, and more so that of the external ones, is another,

ther, not unequivocal sign, that the mercury has exerted its action upon the venereal virus. If venereal ulcers which arose from an infected mass begin to mend or heal, if pains or tophuses of the bones begin to disappear, &c. under the use of mercury, we are sure of its having entered the mass, and removed the effects of the venereal poison; but we are not yet sure of its having eradicated entirely all the poison present in the body. For this reason, we ought to continue the same use of mercury for a fortnight or three weeks, after all the venereal symptoms have entirely disappeared; and then we may generally be pretty confident that our patient is radically cured of the disorder.—I have observed in several patients who bore the internal use of mercury extremely well, as long as the disease took place; whereas, on the moment the poison was eradicated, they began to nauseate it; which proved to be the standard of their being radically cured.

But we are to observe, that though the venereal poison has been perfectly eradicated, and the venereal disease consequently radically cured, there are many instances where exostoses, knots, or swellings of the bones, owing their origin to the venereal poison, continue, however, all the life through, without any bad consequences. A caries of the bones will often remain, till nature herself, or assisted by art, has made the exfoliation. Venereal excrescences remaining after a mercurial course, are to be looked upon as local complaints, and to be removed by local remedies. It has been a general

neral observation, and I have seen it confirmed in several instances, that the venereal disease yields easier to a proper treatment in warm and dry climates or seasons, than in cold and damp ones. This is the reason that has rendered Montpellier so famous for curing the most obstinate and confirmed lues. This is likewise the reason that people, who are not cured of venereal complaints at Petersburg or Stockholm, &c. are sometimes cured when they go to Italy or Portugal; and for the same reason they sometimes will bear mercury there without the least inconvenience, till they are perfectly cured, when they could scarcely bear a few grains of it in cold or wet countries without falling into an immediate salivation. I have seen several striking instances of this kind: and it does not arise from some peculiar balsamic particles of the air in the south of France, Italy, or Portugal; nor from any particular or superior skill of the physicians at Montpellier, above those of London, Stockholm, &c. as the patients often wrongly imagine; but merely because the atmosphere in those climates is dry and warm, and not unfrequently because the formerly neglectful patient becomes now more careful, and pays a more exact attention to the advice of his physician or surgeon.—A skilful physician, however, will be able to put his patient, in any country whatsoever, in a situation which he finds necessary for curing this complaint, by producing for some weeks or months an artificial climate, by means of flannel, as adequate and effectual for him as the natural warm climate of Montpellier, Naples, or Lisbon.

C H A P. XII.

On the NEW VENEREAL DISEASE which of late made its Appearance in CANADA.

A NEW disease broke out some time ago in Canada, especially in St Paul's Bay; whence it has been called *Le Mal de la Baye de St Paul* (the disease of St Paul's Bay). This disease has made a rapid progress within these few years among the inhabitants of Canada. The parents transmit it to their children. It is communicated by eating, drinking, &c. If it once enters into a family, rarely any one escapes catching it. Some habits seem to absorb the poison; and then sometimes it remains concealed or quiet for years, and breaks out at last with all the symptoms of the third stage. The patients often dragging out a miserable existence to old age, lose by degrees eyes, nose, cheeks, velum pendulum, and the whole basis of the skull, &c. They call it *Mal Anglois* (the English disease), because they think the English brought it first amongst them. In several places, however, they give it different names. At St Paul's Bay the people call it *la Maladie des Eboulements*; in the neighbourhood of Boucherville, it is called *Lustu Crue*; and at Berthier and Sorel, *la Maladie*

de Chicot. The name of *Vilain mal*, *mauvais mal*, and *gros mal*, are common in many parishes. Where it is of more modern date, they call it *la maladie Allemande* (the German disease), as if it had been brought to them by the German troops; but the name *mal Anglois* is the most frequently used. There were, in the year 1785, five thousand eight hundred and one persons discovered to be infected with it, besides many who concealed it; but it was at that time still unknown among all the neighbouring Indian tribes.

It first manifests itself generally by little ulcers on the lips, tongue, and inside of the mouth; *rarely in the genitals*. These little ulcers are of a very corrosive nature, and were observed in many children to have nearly destroyed the tongue. They first appear in the form of little pustules, filled with a whitish purulent matter; the poison of which is so infective, that it communicates by eating with the same spoon, by drinking out of the same mug, by smoking tobacco with the same pipe; nay, it is even observed, that it is communicated by linen, cloth, &c.

This poison being absorbed from the ulcers, or, as it often happens, originally absorbed without any external symptoms whatever, breaks out afterwards either in large ulcers, or manifests itself by violent nocturnal pains of the bones. The ulcers breaking out in the skin or mouth, diminish the pain of the bones. These symptoms are often accompanied with buboes under the arm-pit, in the throat or groin; which

which sometimes inflame and suppurate, at other times remain hard and indolent. Some patients feel pains in different parts of the body, which increase during the night-time, or when they take some violent exercise. This is the second stage of the disorder.

In the third stage, tetters, itching crusts, or ulcers, appear coming and going in different parts of the body. The bones of the nose, palatum, cranium, clavicula, tibia, arm, and hand, grow carious, or tophi appear in several of these bones. At last, pains of the breast, cough, loss of appetite, sight, hearing, smell, and falling off of the hair, close the scene before death.— Sometimes all these symptoms appear at the very beginning of the disease.

The patients drag the disease now and then along for eighteen or nineteen years. One patient, who had this disorder twelve months upon him, besides being affected with many ulcers and tophuses, lost at last by the same the calf of one of his legs.

There are some habits which seem not to be susceptible of this disease, at least they are capable of resisting the infection many years; but in general both sexes, and all ages, are subject to it.

In the second, and especially in the third, stage, the disease is highly infectious.

There are many instances where it has been for years in the constitution without giving any signs of its presence.

A vulgar opinion prevails amongst many, that it affects, like the small-pox, but once the
same

same person; but this has been found to be ill-grounded by several accurate observations.

There are some persons with whom the disease proved fatal, by bringing on a mortification of the toes. Mr *Bowman* observed two cases; one where a little boy lost by the disease both feet, the stumps remaining; and another where the leg fell off by the knee. Both patients recovered.

After some days use of medicines, the symptoms often grow worse, but afterwards disappear.

The bed-clothes, as well as other clothes and linen, are to be well washed in soap-ley, before they are again made use of.

Coitus is very infecting, and ought to be avoided during the cure.

Children form a large proportion of the infected. There are examples where Mr *Bowman* saw the constitution of some children get the better of the disease without any medicine; as is evident from the instance of J. Simar, now nineteen years of age, who had the disease when one year old, and never took any medicines for it, nor was suckled by his mother when she took medicines. Some children seemed to be cured of the disease by the medicines which the mother infected had taken formerly, though she herself was not perfectly cured by them.

There is hardly any application that ignorance or superstition, influenced by necessity, could suggest, which had not been made use of by the Canadians for the cure of this disease.

The dock and burdock roots, sarsaparilla, and
spruce

spruce, have been generally made use of, and with some appearance of success. Most success, however, has been observed from a decoction of the bark of the branches of the hemlock-spruce (a tree so called on account of the resemblance of its smell with hemlock). And Mr *Bowman* observed afterwards, that it greatly forwarded the cure, though none was found to be cured radically without mercury. The same bark he found answer very well, instead of the Peruvian bark for strengthening the constitution. Children were cured by sucking the mother to whom mercury was administered.

Purified mercury, simply divided and joined with anodynes, seemed to answer best.

Sublimate and iarsaparilla were greatly praised, but have not answered in the advanced stages of the disease.—In adults, however, the solution of corrosive sublimate with the decoction of the bark of hemlock-spruce, had very good effects.

Mr *Bowman*, to whom we owe the best account of this disease, found it necessary to continue the mercury three weeks after all symptoms disappeared. He observed, that those patients who made use of the milk diet during the cure, were soonest re-established. He cured many of the worst cases.

Government, by the humane representation from Governor *Hamilton*, thought proper to appoint and send out in 1786, six surgeons, to cure and administer medicines *gratis* to every person afflicted with this new disorder; in order

to eradicate, or at least mitigate, this evil, with which whole families were infected.

The most remarkable in this new disease is, 1. That it seldom affects the genitals; and, 2dly, That it is contagious, or at least communicated without immediate contact or coition.

These two curious circumstances appear to me highly interesting, because they seem to elucidate several passages of the earliest writers on the lues; who all agree, that the disease, when it first appeared, and a good while after, has been propagated without immediate contact or coition; and in none of the authors who wrote the first twenty years after the venereal disease appeared, I find any mention made of the genitals being affected.

The disease called the *Sibbens*, which several years ago was very general, especially in Galloway and Airshire, but has now become much less common, is, on account of its mode of propagation, as well as on account of its symptoms and cure, so very similar to this new disease of Canada, that I think it is to be referred to this head.

M

CHAP.

C H A P. XIII.

On MERCURIAL PREPARATIONS in general.

BEFORE I enter into the consideration of the different mercurial preparations, the reader will perhaps be pleased to see a synoptical view of all the preparations of mercury hitherto known. I therefore subjoin the following Table:

TABLE of all the different MERCURIAL PREPARATIONS hitherto known †.

I. PREPARATIONS where the Mercury is simply purified.

* Hydrargyrum purificatum.

Syn. Mercurius crudus purificatus *officinarum*.

Argentum vivum purificatum. *Pharm. London.*

Anglis, Quicksilver, rude purified mercury; *Germanis*,

Reines queckfilber; *Gallis*, Mercure pure.

II. PREPARATIONS in which the Mercury is only divided.

I. By

† Those marked *, are most in use.

1. By gums or mucilages; such as gum arabic, tragacanth, &c.

* Hydrargyrum gummofum.

Mercurius gummofus of *Plenck* (the inventor).

2. By refins or balsams; such as turpentine, balsamum copaiva, &c.

* Hydrargyrum terebinthinatum, &c.

3. By fuet or vegetable oils; such as hog's lard, goose-fat, or butter of cocoa nuts.

* Hydrargyrum unguinosum.

* Unguentum hydrargyri.

4. By calcareous earth; such as chalk, chelæ cancrorum, &c.

Mercurius alkalifatus.

III. PREPARATIONS where the Mercury is calcined by heat and air.

* Hydrargyrum calcinatum.

Syn. Mercurius calcinatus.

Mercurius præcipitatus per se.

IV. PREPARATIONS where the Mercury is partly divided and partly dissolved.

1. By sugar-candy, or saccharine compositions; such as conferva rosarum, cynosbati, &c.

* Saccharum hydrargyratum.

2. By honey.

* Mel hydrargyratum.

3. Mercury combined with sulphur, (flowers of brimstone).

* Hydrargyrum sulphuratum.

a. By simple trituration or fusion.

* Hydrargyrum sulphuratum nigrum.

Syn. Æthiops mineralis.

b. By sublimation.

* Hydrargyrum sulphuratum rubrum.

Syn. Cinnabaris factitia, seu artificialis.

4. Mercury combined with sulphur of antimony.

a. By simple trituration.

* Sulphur antimonii hydrargyrum nigrum.

Syn. Æthiops antimonialis.

b. By sublimation.

* Sulphur antimonii hydrargyrum rubrum.

Syn. Cinnabaris antimonii.

5. Mercury combined with sulphur by precipitation.

See below the *Preparations with the Vitriolic acid.*

V. PREPARATIONS where the mercury is reduced to the form of a metallic salt or calx, by acids: Such as,

1. Acid of fuet. 2. Acid of common salt. 3. Acid of sugar. 4. Acid of amber. 5. Acid of arsenic. 6. Acid of wood-forrel. 7. Acid of phosphorus. 8. Acid of vitriol. 9. Acid of sugar of milk. 10. Acid of tartar. 11. Acid of citron or lemon. 12. Acid of nitre. 13. Acid of fluor mineral. 14. Acid of vinegar. 15. Acid of borax. 16. Acid of Berlin blue. 17. Acid of molybdæna. 18. Acid of tungstone. 19. Aërial acid.

1. Mercury combined with acid of fuet (acidum febi.)

Hydrargyrum febinum.

2. Mer-

2. Mercury combined with the muriatic acid; or acid of common salt.

* a. Hydrargyrum muriatum.

* Hydrargyrum muriatum fortius

{ By sublimation,
or
By precipitation.

Syn. Mercurius sublimatus corrosivus.
Mercurius sublimatus albus.
Mercurius corrosivus albus.

* Hydrargyrum muriatum mitius.

{ By Sublimation,
or
By precipitation.

Syn. Mercurius dulcis.
Mercurius dulcis sublimatus.
Calomel feu calomelas.

Aquila alba.

Panacea mercurialis.

Mercurius dulcis lunaris of *Schroeder*.

Mercurius dulcis precipitatus of *Scheele* (the inventor), or calx hydrargyri muriata.

Preparations of muriated quick-silver by means of different precipitations.

a. From its solution in muriatic acid by vegetable alkali.
Mercurius præcipitatus albus.

b. From its solution in muriatic acid by mineral alkali.
Mercurius præcipitatus albus.

c. From its solution in muriatic acid by volatile alkali.
Mercurius præcipitatus albus.

d. From its solution in muriatic acid by copper.
Mercurius præcipitatus viridis.

e. *Dr Ward's white drop*, or mercury precipitated from its solution in nitrous acid, and redissolved by sal ammoniac.

3. With the acid of sugar.

Hydrargyrum saccharatum. *Bergman*.

4. With the succinous acid; or acid of amber.

Hydrargyrum succinatum. *Bergman*.

5. With the acid of arsenic.

Hydrargyrum arsenicatum.

6. With the acid of wood-forrel, (*oxalis acetosella* Linnæi).

Hydrargyrum oxalinum. *Bergman.*

7. With the phosphoric acid.

Hydrargyrum phosphoratum. *Bergman.*

By precipitation from its solution in the nitrous acid by recent urine.

Rosa mineralis.

8. With the vitriolic acid.

* a. Hydrargyrum vitriolatum.

Syn. Vitriolum mercurii.

Oleum mercurii.

* b. Hydrargyrum vitriolatum flavum.

Syn. Turpethum minerale.

Mercurius emeticus flavus.

Mercurius flavus.

Mercurius præcipitatus luteus.

Turpethum nigrum.

* c. Mercury precipitated from its solution in nitrous acid by hepar sulphuris or hepar calcis.

Mercurius præcipitatus niger.

9. With the acid of sugar of milk.

10. With the acid of tartar.

a. Hydrargyrum tartarifatum. *Bergman.*

b. With purified tartar, commonly called *cream of tartar*, viz. *veg. alkali supersaturated with the acid of tartar.*

* Tartarus Hydrargyratus.

Terre feuilletée mercurielle of *Dr Pressavin*, (the inventor.)

c. Mercury precipitated from its solution in nitrous acid by the acid of tartar.

* Calx Hydrargyri tartarifata flava; vulgo, Pulvis Constantinus.

d. Mercury precipitated from its solution in muriatic and tartarous acid by fixed vegetable alkali.

* Calx hydrargyri tartarifata alba; vulgo, Pulvis argenteus.

11. With

11. With the acid of citron; or lemon.

Hydrargyrum citratum. *Bergman.*

12. With the acid of nitre.

* Hydrargyrum nitratum.

A. Simply dissolved.

* Acidum nitri hydrargyratum.

Syn. Solutio mercurii.

B. Evaporated and calcined by fire.

* Calx hydrargyri nitrati rubra.

Syn. Mercurius corrosivus ruber.

Mercurius præcipitatus ruber.

Pulvis principis.

Mercurius corallinus.

Mercurius tricolor.

Panacea mercurii.

Arcanum corallinum.

Panacea mercurii rubra.

C. Precipitated from its solution in nitrous acid.

a. By volatile alkali.

* Hydrargyrum nitratum cinereum.

Syn. Pulvis mercurii cinereus. *Pharm. Edin.*

Turpethum album.

Mercurius præcipitatus dulcis.

b. By vinous volatile alkali, (spiritus falis ammoniaci vinosus).

Turpethum nigrum.

Mercurius præcipitatus niger.

c. By fixt vegetable alkali.

Mercurius præcipitatus fuscus. *Wurtz.*

d. By copper.

Mercurius præcipitatus viridis.

13. With the acid of fluor or spar, (fluor mineralis.)

Hydrargyrum fluoratum. *Bergman.*

14. With the acid of vinegar.

Hydrargarum acetatum. *Bergman.*

15. With the acid of borax.

Hydrargyrum boraxatum. *Bergman.*

16. With the acid of Berlin blue.
17. With the acid of Molybdæna,
18. With the acid of Tungstone.
19. With the aërial acid, or fixt air.
Hydrargyrum aëratum. *Bergman.*

A Number of the different mercurial preparations mentioned in the foregoing table, have been recommended at different times, by different chemists and practitioners, for curing the venereal disease. We shall confine ourselves to the consideration of those marked with an asterisk, and principally employed now, having either maintained their reputation from their first introduction into practice, or having been discovered in our times, and possessing such qualities as will intitle them to the same predicament.

They are shortly as follow :

Mercury in its crude state rubbed down, or, as it is commonly called, *extinguished* or *killed*, with fat or oils, with gum arabic, turpentine, extract of liquorice or conserve of roses, &c.—In a more dissolved state triturated with sugar-candy, a preparation which I called *saccharum hydrargyratum*.—United with sulphur under the name of *cinnabar*, for fumigations.—The metal calcined by itself, and thence called *hydrargyrum calcinatum*.

Mercury dissolved by different acids, and united with them into a metallic salt, or precipitated from them in the form of a more or less acrid calx. Such as,

With

With the muriatic acid: The corrosive sublimate, which I gave in the table the more adequate name of *hydrargyrum muriatum fortius*, in order to distinguish it as well from calomel or mercurius dulcis, which I called *hydrargyrum muriatum mitius*; as from the mercurius dulcis prepared by precipitation, according to the invention of Mr Scheele, which may be called with propriety *calx hydrargyri muriata Scheelii*, or *hydrargyrum muriatum mitius præcipitatum*.

With the acid of vitriol: The turpeth mineral, mercurius emeticus, or præcipitatus flavus, called more properly *hydrargyrum vitriolatum*.

With the acid of tartar: The *hydrargyrum tartarifatum*, which ought to be distinguished from what I call the *Tartarus hydrargyratus*, or *terre feuilletée mercurielle* of Dr Preßavin of Paris; which latter is a combination of mercury with purified tartar (commonly called *cream of tartar*); whereas the former is a compound metallic salt made of mercury and the pure acid of tartar.

With the acid of nitre: The *hydrargyrum nitratum*, either in a liquid simple solution, which I called *acidum nitri hydrargyratum*, or in a more solid or compound form, as in the *hydrargyrum nitratum rubrum*, commonly, though very improperly, called *red precipitate*; or in the *syrup of Bellet*. The *pulvis mercurii cinereus* of the new Edinburgh Pharmacopœia; where the mercury dissolved in nitrous acid is precipitated by volatile alkali; however not quite deprived of the acid, and therefore more properly called *hydrargyrum nitratum cinereum*. Dr Ward's white drop, where

where the mercury dissolved in the same acid is precipitated and redissolved by means of sal ammoniac, belongs rather to the preparations of mercury made by means of the muriatic acid. And lastly,

With the acid of vinegar: *Hydrargyrum acetatum*, known under the name of *Keyser's pills*, or *troches*; where the mercury, after having undergone a long-continued trituration, is thereby united with this acid.

All these different preparations are applied in various forms; such as powders, pills, boluses, solutions, lotions, injections, ointments, &c. some of them for external, others for internal use; for which, I must refer the reader to the *Pharmacopœia Syphilitica* annexed at the end of this Treatise. In general, it is to be observed, that all dry mercurial preparations are the safer and better the finer they are levigated.

C H A P. XIV.

*On MERCURIAL PREPARATIONS in particular.*I. *On CRUDE MERCURY, the MERCURIAL OINTMENT, and on MERCURIAL FRICTIONS.*

OF all the different methods hitherto discovered for curing the venereal disease, that by mercurial frictions is perhaps the most efficacious, as well as the safest and mildest. The application of mercury in this way, however, as indeed the use of mercurials in general, requires often considerable skill and attention on the part of the practitioner, as well as a very strict compliance and observation of regimen on that of the patient, in order to produce the desired effect in the speediest manner.

Such is the difference of constitutions, that some persons will be more affected by a few frictions than others, seemingly in the very same circumstances, by twenty or thirty: and if more mercury is rubbed in, with a view to increase its effect, instead of benefiting the patient, we often run the risk of bringing on very disagreeable symptoms; such as vertigo, feverish heat, salivation, trembling of the extremities, or chronic violent pains in the articulations.

When frictions have their proper effect, the
use

use of them is not attended with any bad symptom; the patient is easily cured without suffering much in the time, or without finding himself much weakened afterwards. Most people have their symptoms in some measure relieved by four or six frictions; though sometimes fourteen or fifteen are required to produce this effect.

The mercury employed for this purpose ought to be very pure; and as practitioners cannot be assured of the purity of that which is sold in the shops, they ought to purify it themselves. Most of our mercury comes from Idria, and passes through the hands of the Dutch, by whom it is, not unfrequently, adulterated with heterogeneous substances, without any diminution of its fluidity or metallic splendor. But no physician who has the safety of his patients at heart, ought ever to employ quicksilver, either externally or internally, without being certain of its being perfectly pure; for, by making use of the metal in an impure state, he may not only be disappointed in the effects he expected, but may do a real harm to the patient. This being the case, the reader, I hope, will excuse the following remarks upon the Adulteration and Purification of Mercury.

Quicksilver is found in mines, either native, in which state it is called *mercurius virgineus*; or mineralised, when it obtains the name of ore, from which it is afterwards separated by distillation.

The ores of mercury are of different kinds and forms. The native cinnabar, however, is the

the kind which generally contains the greatest quantity of quicksilver. But though many recommend the native cinnabar as a remedy to be employed in practice, it is a matter of fact, that it is often mixed with arsenic or other heterogeneous particles. It is, therefore, running a risk to employ native cinnabar, especially for internal use; and though it is sometimes more beautiful in its colour than the artificial, we may always depend with more safety upon the latter, if properly prepared.

The mercury being in the cinnabar, or other ores of mercury, generally mineralised by sulphur, or at least concealed under it, the process to separate it from the sulphur consists herein, that a substance be united with mercurial ores which has a greater affinity with the sulphur than with the mercury: Such substances, for example, are alkaline salts, calcareous earth, iron, scoria ferri, &c. If, therefore, one or other of the just mentioned substances (of which, however, the cheapest is generally chosen) be mixed with the ore of mercury, and exposed to distillation, this substance will unite with the sulphur, and the quicksilver, being thereby set at liberty will go over into the receiver in its liquid metallic state, in the form of vapours.

A bad custom has, alas! arisen from interested motives, viz. to adulterate mercury with lead, with which it readily unites. This adulteration is accomplished the more easily by the medium of some bismuth; because the amalgam thus produced is much more fluid, and retains much better the metallic silvery splendor of mercury.

It is thence evident, that the colour and splendor of quicksilver are not always certain characteristics of its purity; and the purification of mercury, by pressing it through a leather bag, is by no means to be depended upon; because the amalgam made of quicksilver, lead, and bismuth, is often so perfect, that though even the fourth part of the whole mass consists of lead and bismuth, very little, however, of these heterogeneous substances will remain behind in the leather bag.

The only sure means, therefore, to purify quicksilver is distillation. For which purpose, some think iron vessels are best fitted, iron being the only metal with which the mercury refuses to unite, and there being no fear that iron vessels are destroyed by the process as there is with regard to those made of glass. To make use of iron vessels is the more advisable, because the mercury expands very much during the operation, by which means glass-vessels are easily broken. The higher the mercury is driven before it descends again, the better it is, because by these means the particles of lead cannot so easily be carried with it. The vessel for this operation may be an iron pot, with a long iron neck like the barrel of a musket. But in order to condense the better and easier the mercury rising in the form of vapours, the end of that tube, bended downwards, should be one or two inches deep immersed in vinegar. All the mercury is, by this method, not only obtained without loss, and the operator is exposed to no danger, but the mercury will also be perfectly

freed and purified from all particles of lead and bismuth which might possibly have gone over with it, they being soluble, and the quicksilver insoluble, in vinegar.

The characters of pure quicksilver are, 1. That, when poured upon wood, it forms globules, which always retain a spherical form, and never are drawn into length, forming a line like a thread. 2. That its surface is not covered with a cuticle, but shining. 3. That when rubbed with water, the water grows thereby not blackish or foul. 4. That vinegar rubbed or digested with it, does not acquire from it a sweet taste. 5. That put in an iron spoon over the fire, it evaporates entirely, without leaving any thing behind.

The mercurial ointment is generally prepared by rubbing, or, as it is commonly called, *killing*, or extinguishing the mercury with hog's-lard and turpentine. The preparation of the ointment in this manner is very exceptionable. It generally soon produces in many persons, whose skin is tender, pustules of an inflammatory kind, very painful, which prevent the continuation of the frictions.—A more proper method therefore of preparing the mercurial ointment for this purpose, is by triturating the purified metal with fresh hog's-lard, repeatedly washed and cleaned previously for several days with pure water, without the addition of any turpentine. The trituration ought to be continued for two hours, even after all the globules of mercury have disappeared, in order to be certain of the most perfect division. It should then be put by in a cold place,

place, not only to avoid its growing rancid, but also to prevent its melting, which would produce a separation and subsequent precipitation of the metal from the hog's-lard to the bottom of the vessel.

But, notwithstanding this precaution, we often meet with patients whose skin seems to be so extremely irritable, that they cannot bear the application of the ointment, even when prepared according to the method just mentioned. The great propensity of the hog's-lard to grow rancid, especially in hot seasons or warm climates, contributes greatly to occasion this troublesome effect. In such circumstances, it will be proper either to mix with the above ointment a small quantity of the ointment of liquorice recently prepared, or to prepare it entirely of mercury and the butyraceous oil obtained from coconuts by boiling them in water; or to make use, instead of the ointment, of quicksilver rubbed down with the mucilage of gum arabic. Thus, indeed, the process is rendered perhaps a little more troublesome and expensive; but the practitioner who wishes to render the cure easy and agreeable to his patient, will readily submit to inconveniences of this kind.

By this method we may effectually prevent the pruritus or pustules proceeding from the application of the common mercurial ointment, especially if, at the same time, the place where the ointment is to be rubbed in, be previously shaved, and too harsh rubbing with the hand be avoided. For such pustules sometimes seem to originate from the hair being violently moved in

in opposite directions, which, by these means, will be easily avoided.

The principal objects, after the application of mercurial frictions has been fixed upon, ought to be, *1st*, To dispose the place, which the ointment is to be rubbed in, to the ready absorption of the mercury; and, *2^{dly}*, At the same time, to dispose the surface of the body to transmit the metal as speedily as possible through its pores, after it has produced the desired effects in the system; and thus to prevent salivating, purging, or its settling in the bones or any of the cavities of the body. For this purpose, it will be always advisable to prescribe, before we begin the frictions, a purgative, and to order the patient to sit in a warm bath made with soft water, and of about 86 degrees of Fahrenheit's thermometer, for the space of half an hour or an hour. After he has been in it for a quarter of an hour, he must be rubbed all over with a flesh-brush, or a piece of flannel and soap, to clean the skin, and adapt it the better to the purposes above mentioned. This is to be done, if no particular circumstance forbids, the day before, or the very day when we begin the frictions; and to be repeated once or twice a-week afterwards during the whole course of the frictions.

The same evening, or the day after, having made use of the warm bath, the patient should begin the friction, rubbing into the outside or inside of his thigh or leg, before he goes to bed, a drachm of the mercurial ointment prepared as above directed. The friction is to be performed by the fire-side in winter, and the rubbing ought

to be made gently, and continued for half an hour or an hour, till the whole be rubbed in. The part is then to be covered with a piece of linen fastened with a bandage; or the patient is to put on a pair of drawers, or a pair of stockings if the friction has been made on the leg. The same bandage, &c. may serve for the whole time, or at least for several days, being applied only to keep the shirts and bed-linen from being sullied and growing black from the ointment.— Before each new operation, the grease and blackness ought to be well cleansed or washed off with soap and warm water.

The friction itself is best made by the patient with his own hand; but to fat people, or to the female sex, this operation may prove tiresome: in which case a servant should be instructed how to do it, putting on a glove made of a soft hog's bladder or oil-skin. I would not advise any person to perform this operation for another without putting on such a glove, because I have seen instances of a salivation being brought on in the assistant, from rubbing in the mercurial ointment with his naked hand. Besides, we cannot be certain how much ointment is rubbed into the patient, when part of it is absorbed into the servant's hand.

After the first friction, we are to observe attentively whether the mercury occasions any irregular motion in the body: if it does so, it ought to be omitted for two days, and the patient to observe the same regimen, to be well cloathed, and to keep within doors, especially in a cold season.

If after two days, the patient should perceive no disagreeable symptoms, the second friction is to be made in the same manner as the first. The next day he must leave it off again; and if he then finds no ill effects, the frictions ought to be continued hereafter every day, either morning or evening, without intermission, unless some accident intervene. The place of rubbing, however, must be changed every day, or every other day, in order to avoid irritating the skin, and pustules rising upon it. If, after five or six frictions, we find that the patient has no fever, diarrhœa, salivation, or immoderate sweating, and that he will thus bear the mercury, we may rub in two drachms of the ointment at every friction, especially if the symptoms be obstinate.

In this situation, if the weather be warm, or indeed unless it be severely cold and damp, the patient may go out every day during the frictions, provided he be warmly cloathed, and avoid the cold wind, and especially the night air. But he ought carefully to guard against checking perspiration; and therefore, if the weather be cold, windy, or moist, he should rather keep at home in a moderate warm room, and shun as much as possible every inconvenience from cold. In a severe season he should constantly wear flannel stockings and a flannel waistcoat, according to circumstances, either over or under the shirt.

During all this time, however, he should if possible use the warm bath, as already directed, once or twice a-week; proceeding in this man-

ner until his health be perfectly re-established: which will be after thirty or thirty-five frictions, if the soft parts only have been affected; but if the disease has been confirmed, or of a long standing, so that the bones are affected, fifty, sixty, or seventy frictions will be absolutely necessary to procure a perfect and radical cure; though this, no doubt, will vary according to the constitution of the patient.

It must here be remarked, as an observation of great consequence both to the physician and patient, that the cessation of the symptoms is never to be looked upon as a sign of a radical cure. This we ought to tell our patients in the beginning, especially to those of the female sex, that to alleviate the pain or abate the symptoms of the disorder, and to destroy and eradicate the venereal poison from the body, are two things widely different. The former may often be accomplished in three or four days by a very few frictions; whereas the latter will sometimes require as many months. The same thing will undoubtedly happen in this respect when we leave off the frictions as soon as the symptoms disappear, as when we leave off the Peruvian bark in agues as soon as the fever is gone: the fever soon returns again, although perhaps with a different type; but by continuing the bark a little longer, we are sure of rendering the cure perfect, and need not to be in the least afraid of a relapse.

We must, therefore, for the safety of our patients, continue the use of mercury for two or three

three weeks, or at least ten days, after the syphilitic symptoms have perfectly disappeared; but it is here where the practitioner must give proof of his judgment and experience.

When the patient, during the frictions, or any other course of mercury, feels his gums begin to swell, his breath to smell disagreeably, his throat to become painful in the inside, or when he is obliged to spit oftener than usual, the use of mercury is immediately to be left off till these symptoms disappear, and then he may go on with it again. But, in general, I think it eligible to go on with the frictions, if the patient can otherwise bear them, pretty briskly, until the mouth be a little affected; because thus we are certain that the frictions have had their proper effect, and that the mercury has been absorbed into the system.

The generality of patients, as has been already mentioned, find some relief after a few frictions; but there are some, especially those who have the bones affected with tophus, caries, &c. who feel no remission of the symptoms till after fifteen or twenty frictions; and sometimes, in this state of the disease, seventeen ounces of mercurial ointment will be requisite to produce a perfect cure.

In all such cases, we must endeavour to make the mercury go off by perspiration; but profuse sweating ought, on the other side, not to be encouraged, lest it should weaken the patient, or bring on a consumption, especially in such as are cachectic, or of a thin habit of body. Where

we find the body naturally disposed to falivation, we ought to be very cautious how we proceed. In this case the patient should, especially in bad weather, keep carefully within doors, in a room moderately warm, without being too much covered, particularly on his head or neck. The proper temperature of the room in winter is to be betwixt 70 and 75 degrees of Fahrenheit's thermometer. But in fine dry weather, I would rather advise him to go abroad; for I have found, in many instances, that the enjoying of pure free air contributes rather to prevent a falivation. In warm seasons or climates such precautions are unnecessary. If the patient be weak, the Peruvian bark may be given, at the same time, with advantage, from a scruple to a drachm, in milk or wine, according to circumstances, every morning and evening.

By this method I have generally succeeded in preventing the above mentioned bad effects of the mercury, as profuse sweats, falivation, and its running off by stool: in all these cases, the mercury, though absorbed in the two former cases into the system, seems to run off by the salivary glands as fast as it is taken, without performing those salutary effects in the body, which are absolutely necessary to destroy the venereal poison, and to produce a radical cure. In the latter case, when a diarrhœa is occasioned by the mercury given internally, its absorption from the intestines into the mass is thereby prevented, and it can have little or no effect against the disease. I have seen several venereal patients
treated

treated in this manner, who, after taking mercury for six or eight weeks, which kept them all that time in a continual diarrhœa, were, with regard to their original disease, nearly in the same state at the end of this course as they had been at the beginning of it,

II. On MERCURIAL FUMIGATIONS.

I HAVE little to say on this subject. *Mercurial Fumigations*, though now a-days no more in use for curing the lues, prove often a most effectual remedy for curing local venereal complaints. The artificial cinnabar is for this purpose to be put upon live coals, and the rising smoak to be conveyed by means of a proper funnel to the part affected.

III. Of SALINE and other MERCURIAL PREPARATIONS.

THE *hydrargyrum gummofum*, (or *mercurius gummofus*), is a mild mercurial preparation, in which the crude metal is divided by means of gum arabic. Mr Plenck, the inventor of this preparation, first prescribed it diluted with water, in the form of a mixture; but this form being found inconvenient on account of the mercury not remaining properly suspended, he proposed, some time ago, to form it into

pills. He, for this purpose, orders two drachms of well purified quicksilver to be triturated with three drachms of powdered gum arabic, and a sufficient quantity of conserve of hips, in a marble mortar, till the mercury has disappeared; then continuing the trituration for an hour longer, the mass to be mixed with half an ounce of crumb of white bread, and so to be formed into pills of three grains each, of which the patient is to take six every morning and evening. This form is undoubtedly less exceptionable, but still liable to another inconvenience; which is, that these pills, like all those made with crumb of bread, when kept for a length of time, grow so hard, that they frequently pass the stomach undissolved, and are evacuated by stool in the same globular form they were taken. This objection, indeed, cannot be made, if they are prepared fresh every second or third day; and, in that case, they will be found a very valuable acquisition for our Pharmacopœa Syphilitica.—A bolus made from five to ten grains of quicksilver, with a sufficient quantity of the conserve of roses, or confectio cardiaca, or, what is more preferable, with the extract of liquorice, will, according to circumstances, serve for the same purpose.

Mercury divided by means of some balsam, would be a very acceptable and useful medicine in different cases. An attempt of the kind has been made in the pilulæ ex hydrargyro terebinthinato, where one ounce of quicksilver is united with a drachm and a half of turpentine; but
besides

besides that the division is extremely tedious, which indeed may be obviated by adding some drops of the oil of turpentine, this composition is, like all the saline mercurial preparations, very apt to excite griping and purging. This effect may be partly owing to the quality of turpentine; the best sort should therefore be chosen for this purpose, and, according to circumstances, instead of the turpentine, the balsam of Gilead, or balsamum Canadense, formed into a proper consistence by means of the species aromaticæ, or some other vegetable powder, might be tried; and thus a pill or bolus of five or seven grains be given every evening.

The *saccharum hydrargyrum*, or quicksilver triturated with twice or three times its weight of sugar-candy, is, in many instances, a most excellent medicine, as well for internal as external use. Its dose internally is from four to eight grains a-day, in the form of powders, pills, or troches.

The *hydrargyrum calcinatum*, or calcined mercury, I have constantly found to be apt to excite gripings. This may, in some respect, be avoided, by mixing half a grain of it with a grain of opium, to be taken every night or every second night in the form of a pill.

The *hydrargyrum acetatum*, known by the name of Keyser's pills or troches, has of late made a great noise in France. It has been recommended as the safest and best medicine for curing venereal complaints, even of the most obstinate and inveterate kind, without ever occasioning a salivation, or producing any of those bad symptoms

toms which sometimes attend the use of other mercurials. Time and experience, however, have shown that this remedy sometimes proves ineffectual in removing the complaints, and in many instances produces the bad symptoms attending other mercurials. Mercury, indeed, as long as it retains its nature, certainly will salivate or purge, if given imprudently, or if the patients do not take proper care of themselves. Besides, among a variety of patients, some will certainly be met with where this medicine proves not so efficacious as has been pretended. For every physician who has had some practice in venereal complaints, must have met with cases where one mercurial preparation has produced little or no effect, whilst another, tried afterwards, succeeded beyond expectation. These cases we are not able to account for; nor do we as yet know the nature of the human body sufficiently to foresee them *à priori*. Keyser's pills are a saline mercurial preparation, where the mercury is first divided by a long continued trituration, and then dissolved in vinegar. Hence, like all other mercurial preparations, it may sometimes produce very good effects, and perfectly cure the disease; whilst, in other instances, it may prove less useful or even hurtful. And this is probably the reason why this preparation is now mostly neglected, though there have been since two methods discovered to prepare it easier, cheaper, and better, by precipitation.

The *hydrargyrum tartarifatum*, we call a combination of mercury with simple acid of tartar, in order to distinguish it from the *Tartarus hydrargyratus*,

drargyratus, an invention of Dr Pressavin at Paris, who gave it the name of *terre feuilletée mercurielle*. This latter preparation being a combination of mercury with purified tartar, or cream of tartar, which is a middle salt compound of vegetable alkali, supersaturated with the acid of tartar. Both these preparations are nearly of a similar nature with the former, though perhaps, in some respects, preferable to it.

The *hydrargyrum nitratum*, or mercury united with nitrous acid, has been employed in different forms and preparations internally and externally. For external use the solution diluted with water has been made use of as a wash, and is a very good medicine for shankers, &c. The same solution made with one ounce of quicksilver to three ounces of nitrous acid, and while yet warm united with a pound of hog's-lard by a careful trituration, yields, under the name of *unguentum citrinum*, one of the most efficacious remedies I know of for obstinate syphilitic complaints of the skin. The red precipitate, or *hydrargyrum nitratum rubrum*, prepared from the same solution, exposed to fire till it acquires the colour mentioned, is of a corrosive nature, and therefore employed only in powder sprinkled upon venereal ulcers as a escharotic. For internal use the *hydrargyrum nitratum* has been commonly given from half a grain to a grain, in a quart of any of the decoctions.—But the *hydrargyrum nitratum cinereum*, in the new Edinburgh Pharmacopœa, called by its inventor (Dr Black) *pulvis mercurii cinereus*, is one of the mildest of the saline mercurial preparations, and may be

be given to the dose of a grain every evening, and occasionally also every morning.—The following is the method of preparing it: Quick-silver, diluted acid of nitre, of each equal quantities in weight. After the mercury is dissolved, the solution is to be diluted with pure water, and as much liquid volatile alkali (*spiritus salis ammoniaci*) to be dropped into it as is sufficient for depriving the mercury of the acid: afterwards the grey powder is to be washed with pure water and dried.—The syrup of Bellet (commonly called *vegetable syrup*), a celebrated composition, the ingredients of which are kept secret, is, as I was informed by a person of authority in France, mercury precipitated from its solution in the acid of nitre by fixed vegetable alkali, and the precipitate afterwards dissolved in vitriolic ether mixed with some agreeable syrup.

I shall now take notice of a preparation of mercury, first recommended by the celebrated Baron Van Swieten. This preparation is the corrosive sublimate (*mercurius sublimatus corrosivus*); or, as I would rather call it in the more accurate language of chemistry, the *hydrargyrum muriatum fortius*. Some years ago this medicine engaged the attention of all Europe. By some it was recommended as a most excellent and efficacious remedy for the most inveterate complaints, and worst stages of the venereal disease. It was particularly praised against eruptions of the skin, and venereal affections of the bones; while others exclaimed against it as being frequently

quently productive of the worst effects in the system, without hardly ever radically curing the distemper. Both parties seem to have gone too far in praising as well as blaming. I have seen cases where this medicine perfectly cured the most inveterate and obstinate complaints; while in others, I found it produced effects of the worst consequence; such as a total derangement and pains in the stomach, griping, purging, headach, fever, anxiety, oppression of the breast, and even spitting of blood, without curing, or even appearing to have the least effect on the disease. But, in general, I have observed that this medicine very soon mitigates the most troublesome symptoms of the venereal disease, without effecting a radical cure, even after having been given for a very considerable time; and I am apt to think now, that its great reputation arose at first from this property of frequently alleviating so speedily and remarkably the most troublesome venereal symptoms.

Upon the whole, though it is certain that there are some constitutions which will never bear this violent medicine without danger, yet, from such observations as I have been able to make, it seems probable, that the bad effects attributed to the corrosive sublimate have sometimes arisen either from its improper preparation, from an immoderate dose, from a delicate constitution of the patient, or otherwise from a defect of practical judgment in the physician or surgeon. Therefore, although I never like to employ violent medicines where I am able to effect a cure with mild ones; yet it must be allowed,

lowed, that, in practice, cases will sometimes occur attended with such symptoms as require the use of the most powerful medicines, if for no other purpose but for a speedy temporary relief. In these cases, it will sometimes be highly advisable to have recourse to the sublimate; though it is probable to me, that such cases are much less frequent than it is commonly thought. But at any rate, the constitution of the patient ought to be well considered before we have recourse to this medicine. If he be of a strong habit of body, and his lungs healthy, we may safely try the sublimate, using the necessary precautions with regard to its dose and manner of exhibition; but I would never recommend it where the patient is of a weak, delicate, and irritable habit of body, or if he has a small chest, has had formerly an hæmoptysis, or any pulmonary complaint; for these persons I have always observed to suffer from the use of the sublimate. Some indeed, who were apparently of a strong constitution, I have seen equally affected by this remedy; for which reason I think it always necessary to be cautious in the use of it. We ought never to begin with more than a quarter or at most half a grain a-day, dissolved in milk, barley-water, or a decoction of sarsaparilla. When given in this manner, if the patient is a proper subject for this medicine, it will not readily produce any bad or at least any dangerous consequences; the less so when administered in a warm season, or in a hot climate. In using the sublimate, it ought besides always to be remembered, that we can never be

too careful with regard to its choice; and that with the utmost care and attention to the preparation of the sublimate, it is hardly ever possible to obtain it always of the same degree of strength, even by following the very same process*. In all cases therefore the patient should be ordered to leave it off immediately whenever he felt any of the above mentioned bad symptoms. Sometimes it also occurs in the shops adulterated with arsenic, which may be discovered when mixed with lime-water: in which case it will produce a black colour; whereas, if genuine, it yields with the same an orange-coloured precipitate, to which we gave the name *lotio syphilitica flava*, if one drachm of sublimate is added to one pound of lime-water. Its texture besides, if genuine, ought to be of a radiated appearance; whereas the same, if adulterated, has rather a granulated one.

The *hydrargyrum muriatum mitius*, or perhaps still more properly the *calx hydrargyri muriata*, commonly called *calomel*, *mercurius dulcis*, *mercurius sublimatus dulcis*, *panacea mercurialis*, *aquila alba*, &c. is a milder preparation than corrosive sublimate, but still an acrid one, and thus very apt to produce gripings, and to run off by stool.

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Besides,

* All these inconveniences are now remedied by a recent discovery of my friend the ingenious Dr BERTHOLET at Paris; who by a new and easy way obtains it always of the same strength and quality, by adding dephlogisticated muriatic acid to a solution of mercury in nitrous acid, and instantly crystals precipitate, which are composed of mercury and muriatic acid, and which I therefore gave in the table the name of *Hydrargyrum muriatum*, instead of the *precipitatum* of Dr Bertholet.

Besides, as its manner of acting depends very much on the accuracy of its preparation, and other circumstances which we are not masters of, its efficacy in curing the lues is not much to be depended upon. Indeed calomel is in different countries, in different shops in the same country, nay even in the same shops at different times, a very different medicine. On this account, though it cannot be denied that many have been cured of the venereal disease by this medicine, I never made use of it internally but for a mercurial purge, till of late, when Mr *Scheele*, by a new method of preparing it *via humida*, has greatly removed all the objections this medicine was formerly liable to. As it will perhaps be agreeable to some of my readers to be more exactly acquainted with this process, I shall subjoin it here.

“ Half a pound of quicksilver, and the same quantity of pure aquafortis, are to be put into a small vessel with a long neck, the mouth of which is to be covered with paper. The vessel is then to be placed in a warm sand-bath; and after a few hours, when the acid affords no signs of its acting any longer on the quicksilver, the fire is to be increased to such a degree that the solution may nearly boil. This heat is to be continued for three or four hours, taking care to move the vessel from time to time; and at last the solution is to be suffered to boil gently for about a quarter of an hour. In the mean while we are to dissolve four ounces and a half of fine common salt in six or eight pints of water. This solution is to be poured boiling into a glass-ves-

fel, in which the above mentioned solution of quicksilver is to be mixed with it gradually, and in a boiling state also, taking care to keep the mixture in constant motion. When the precipitate is settled, the clear liquor is to be drained from it; after which it is to be repeatedly washed with hot water till it ceases to impart any taste to the water. The precipitate obtained by this method is to be filtered, and afterwards dried by a gentle heat.

“ It might be supposed, that when the nitrous acid ceases to effervesce with the mercury, it is saturated with it; but this is far from being the case; the acid, when the heat is increased, being still able to dissolve a considerable quantity of it; with this difference, however, that the quicksilver at the beginning of the process is calcined by the acid, but afterwards is dissolved by it in a metallic form. In proof of this we may observe, that not only more elastic vapour arises, but also that by adding either fixed or volatile caustic alkali we obtain a black precipitate; whereas, when the solution contains only calcined quicksilver, the precipitate becomes yellow by such an addition. If this black precipitate is gently distilled, it rises in the form of quicksilver, leaving a yellow powder, which is in fact that part of the mercury that in the beginning of the operation was calcined by the nitrous acid.

“ The boiling of the solution for about a quarter of an hour is necessary, in order to keep the *hydrargyrum nitratum* in a dissolved state, it being much disposed to crystallize; in general,

some of the mercury remains undissolved; but it is always better to take too much than too little of it, because the more metallic substance the solution contains, the more mercurius dulcis will be obtained.

“ It is necessary to pour the mercurial solution into the solution of salt by a little at a time, and cautiously, so that no part of the undissolved quicksilver may pass along with it. Two ounces of common salt are sufficient to precipitate all the mercury; but then it may easily happen that some superfluous mercurius corrosivus attaches itself to this precipitate, which the water alone is incapable of separating completely. This is undoubtedly the reason why mercurius præcipitatus albus is always corrosive. I have found that common salt possesses the same quality as sal ammoniac, viz. that of making the solution of corrosive sublimate in water easy. I therefore employ four ounces and a half of common salt in order to get the mercurius corrosivus entirely separated.

“ If we consider the manner in which mercurius dulcis is obtained in the dry way, by sublimation, we shall not find it difficult to give the rationale of this new process.

“ Mercurius corrosivus albus is a middle salt, consisting, as is well known, of marine acid combined with calx of mercury. This salt is capable of dissolving a good deal of quicksilver in a metallic form; but for this purpose the most minute particles of each must be reciprocally mixed. This happens, when by means of heat they are both converted into vapour. The same thing

thing occurs in the above mentioned process. The solution first spoken of contains the calx mercurii and quicksilver divided into the most minute particles. If to this solution we add marine acid, or (to save expence) common salt, the marine acid will unite with the calx of mercury, and the result of this union will be a true mercurius corrosivus albus; and as the solution contains quicksilver in its metallic state, this will immediately attract as much of the mercurius corrosivus as is necessary to saturate it, and by this means a real mercurius dulcis will be produced, which, from its being insoluble, will be immediately precipitated.

“The following facts are proofs that this precipitate is a good mercurius dulcis. *1st*, It is entirely tasteless. *2^{dly}*, I have sublimed it, and examined what ascended in the beginning; and which ought to have been corrosive, if the precipitate had contained any thing of that nature, it being well known that mercurius corrosivus ascends sooner than mercurius dulcis; whereas, through the whole of the sublimation, what arose was a pure mercurius dulcis, exactly like that which is obtained in the common manner. *3^{dly}*, I have mixed this precipitate with one fourth part of quicksilver and sublimed it, upon a supposition that if it contained too much mercurius corrosivus it would be able to unite with more quicksilver; but so far was this from being the case, that the quicksilver was not diminished in weight by the experiment. *4^{thly}*, It is known that caustic alkalis and lime-water, give mercurius dulcis a black colour. The same thing

happened with mine. The black colour is no other than quicksilver divided into very fine particles.

“ That the process I have been describing is more advantageous than that which is usually adopted, I cannot doubt; because, in the first place, this mercurius dulcis can be prepared with less difficulty, with less expence, and without employing corrosive sublimate. *2dly*, As there can be no danger of its being in any degree corrosive, provided it be sufficiently edulcorated, it may always be given with safety. *3dly*, The operator is not exposed to that noxious dust which in the old method arises during the trituration of the corrosive sublimate and quicksilver. *4thly*, This is much finer than the common mercurius dulcis, it being impossible to make the latter equal to it in this respect, however long it may be trituated.”

Calomel thus prepared will prove safe and excellent, not only for internal, but especially for external use, either in powder, or suspended in simple water or some mucilaginous solution; occasionally also a drachm of it may be mixed with four ounces of lime-water, under the name of *lotio syphilitica nigra*, to distinguish it from the *lotio syphilitica flava* made with corrosive sublimate and lime-water. Calomel, when well prepared, must give the lime-water a black colour, as corrosive sublimate does a yellow. Calomel, thus prepared, may likewise, occasionally, be usefully applied in the manner recommended by the late Mr *Clare*, who recommended to rub it into the gums or inside of the cheek, from two to three grains

grains every morning and evening. It would be by far the easiest method of administering mercury to those patients who cannot bear mercurial preparations upon their stomach, and dislike to make use of the mercurial frictions. It labours, however, under a material objection, that it soon produces a ptyalism.

Dr *Ward's white drop*, being a solution of mercury in nitrous acid, precipitated and redissolved by sal ammoniac, comes likewise under this head, and proves, in some cases, a valuable medicine.

The *hydrargyrum vitriolatum*, or *calx hydrargyri vitriolata*, commonly called *turpeth mineral*, or *mercurius emeticus flavus*, is a medicine now very little used, except by those who think a mercurial vomit preferable to one of emetic tartar or ipecacuanha, for curing a swelled testicle arising from a venereal cause. Some instances, however, I have seen, where this medicine, given daily in very small doses, effectually removed most obstinate venereal complaints of the skin.

I come lastly to speak of a medicine, which, some time ago, and even yet, is made use of by many for the cure of the lues; I mean *Plummer's powder or pills*; which, properly speaking, are not a mercurial preparation, but a mechanical mixture of mercurius dulcis and sulphur of antimony. I have already observed, that mercurius dulcis, when prepared by sublimation, is a very different medicine in different countries and places; that it is therefore a medicine not to be depended upon: for this reason, I never would advise any practitioner, as well for his

own satisfaction as that of his patient, to trust to Plummer's pills for curing the venereal disease. Plummer has compounded the calomel with sulphur of antimony, probably for the purpose which still seems to be expected by those who make use of this composition, viz. by means of the sulphur to prevent salivation, and to direct the mercury to the skin. This seems especially to be the design in cutaneous eruptions of the venereal kind. But though this medicine may sometimes be effectual in removing cutaneous disorders, I must, from my own experience, as well as from that of several other unprejudiced practitioners, pronounce it to be a very improper one for curing a confirmed lues. Repeated instances indeed have come under my observation, where these pills having been taken for a considerable time, have removed the symptoms for a time, without effecting a radical cure; which is to me a sufficient reason for thinking it an unsafe medicine, and consequently that no practitioner ought to put confidence in it for the cure of the lues, when he has safer medicines for this purpose at his command.

Whether crude mercury boiled with simple water communicates to it something of its qualities, and with what success such a decoction might be administered for curing venereal complaints, I am not able to say. I have seen this decoction given to children affected with worms in different parts of the continent: and I know of a dog in London who was radically cured of a most obstinate mange, for which a variety of medicines had been tried in vain, from the use of this decoction for his common drink.

C H A P XV.

On PTYALISM, *or* SALIVATION.

IT has been a matter of controversy, whether a confirmed lues may be radically cured without salivation; and though there is now hardly any medical man who doubts of the possibility of a perfect cure without it, there are still many who employ salivation, not only for the cure of the lues, but, in some countries, for that of the clap also. This mode of treatment, in the former case, is still very much in vogue, in private practice as well as in hospitals, especially in France: in other countries, it is almost entirely confined to hospitals.

How far this practice of salivating venereal patients is justifiable, shall be the subject of my present inquiry.

It has been the opinion of Dr *Friend*, and many ancient as well as several modern writers, that a salivation is not only necessary to effect a radical cure of the lues, but even that the greater the salivation, the more certain and effectual will be the cure of the lues, especially when the bones are affected.

I must confess, I have always experienced the

direct contrary of this assertion. Amongst a great many patients of different ages and constitutions, in different climates, who have been under my care, I have not only not found one who required salivation, but I have, on the contrary, constantly observed, that the greater the salivation, the less certain and effectual was the cure of the lues. This is so true, that even the modern advocates for salivation unanimously confess, that a strong salivation is hurtful, and that only a gentle one should be raised. Could I allow this to be right, I would observe, that to stop, or even to moderate, a salivation once begun, is in many cases more easily said than accomplished. This is often entirely out of our power; and it is yet one of the great desiderata in medicine, to know a specific remedy that will produce such an effect. This is so little in our power, that I have seen more than once patients carried off by salivation (their strength being totally exhausted), before it could be lessened or stopt by any remedy whatsoever. Others who did not sink entirely under it, remained languid from the evacuation, for months and even years; and several I have seen die, on a consumption brought on by such a course. Besides, a salivation is not only very troublesome to the patient, by spitting day and night, and by filling the room with a very disagreeable smell; but frequently also produces painful ulcers in the mouth, fauces, &c. which, if not taken care of in time, or being mistaken for venereal ones, by continuing the use of mercury, become more dangerous than the venereal disease itself.

It may seem surprising, therefore, how such a dangerous method of attempting the cure of the venereal disease as that by salivation should still be retained and practised in some hospitals. The three following reasons, indeed, I have heard alleged. 1. To confine the patients with a clap or lues to the room, and to prevent them from getting a fresh infection before they are cured of the first. 2. To get rid of such poor patients in a month or five weeks, in order to take others in their place into the hospital, who are treated and sent away in the same manner. 3. Because many of the lower class of people have an unhappy prejudice in favour of this method, and imagine they cannot be radically cured without what they call a good and continued salivation. These reasons, however, appear to me wholly insufficient. To prevent the patients from getting a fresh infection, better means might be easily followed. With regard to the second point, I think it more reasonable and more humane to cure a smaller number of patients radically without salivation, even though a longer time should be taken up for the cure, than to relieve the complaints of a great number in a shorter time by such an uncertain, troublesome, and sometimes dangerous method. We may add to this, that experience daily shows, that a number of those patients who seem to be cured by the cessation of the symptoms during a salivation, very frequently return in a short time after to the hospital with the same symptoms they were affected with before, or find themselves obliged to seek assistance somewhere else,

elfe, at the same time that they solemnly protest against their having exposed themselves to a new infection. The third reason alleged in favour of salivation is the worst of all. I am of opinion, that no person of integrity, who practises medicine, should ever comply with the prejudices of his patients when they may be hurtful to them, or when he knows that by a contrary method he is able to cure them with greater certainty and safety. Besides, it will be an easy matter for a physician or surgeon, who knows how to gain the confidence of his patient, to convince him of the folly of such prejudices. Salivation, therefore, being, in my opinion, an exceptionable method of cure in any circumstances whatever, I think it, in all cases, most prudent to avoid it; or, if it should have taken place, to moderate and remove it as speedily as possible.

The method of preventing a salivation I have laid down above, when speaking on mercurial frictions. The means to be used for this purpose are shortly the following. 1. A careful administration of mercury both as to its preparation and dose. 2. The avoiding cold or damp air, especially at night. 3. The use of warm cloaths; or, in a cold damp season or climate, the constant wearing of flannel next the skin. 4. The repeated use of warm baths, and the internal use of diaphoretic or diuretic decoctions along with the mercury. 5. The avoiding too hot rooms and confined air. 6. Covering the neck and head but very slightly day or night. 7. Taking a dose of gentle cooling physic, and

intermitting the use of the mercury as soon as the breath and teeth begin to be affected. 8. If the patient be not of a phlogistic habit of body, a free diet, with the moderate use of wine, is to be ordered, rather than a low one. Smoking tobacco should also be avoided, during a course of mercurials, by those who are accustomed to it.

It is likewise to be observed, that, in general, a salivation will take place more readily under the use of acrid mercurial preparations, and in a cold and damp season or climate; that some constitutions are more disposed to it than others; and that particularly those who have previously taken mercury, are often ready to fall into a salivation by using the smallest dose, though perhaps in the former disease they felt no such effect from the use of it.

A variety of medicines given separately, or combined with mercury, have been recommended for preventing it from affecting the mouth, as well as for checking a salivation after it has taken place. The principal of these are sulphur, sulphur of antimony, camphor, the Peruvian bark, and iron. By a careful attention, however, to the foregoing rules, I think it is in general not very difficult to avoid a salivation, without having recourse to any of these medicines; especially as I have seen some of them repeatedly applied without success. With regard to the latter point, viz. the abating and removing a salivation when once begun, I found it most always a very difficult matter: the following method, however, with an exact observance
of

of the rules above mentioned, will frequently be attended with success.

As soon as the patient feels his mouth affected, he ought to leave off the use of mercury, and keep within doors, in a moderately warm room, if the season be cold. If his strength and constitution will allow, we may administer him a gentle laxative; but we ought to be careful about prescribing purgatives, because they will often bring on a diarrhœa, which we shall find sometimes great difficulty to stop, and which may prove dangerous in its consequences. If his strength will bear it, he should likewise, for four or five days, be placed every evening in a warm bath, rubbing his body during that time with a flesh-brush or piece of flannel; and when he comes out of the bath, he is to dress himself again immediately in flannel-cloaths. If phlogistic symptoms occur, bleeding may be necessary; the patient is to be confined to a low diet, and drink barley-water or any other mucilaginous decoction; but if his strength be very much reduced, a good nourishing diet, together with the use of wine, an infusion of Peruvian bark, or guassia wood in wine or cinnamon-water, with some preparation of iron, and the free country air, are certainly more proper. If the air be dry, he should not confine himself to his room, but go abroad a little, unless it be very cold. When the salivary ducts are very much relaxed, the mouth not very painful, and the spitting continues undiminished, an astringent gargle may, with proper precautions, be prescribed. It may be made of the decoction of Peruvian bark, of *tormentilla erecta*,

erecta, or of the *cortex salicis albæ*, in red wine or in water; to which, according to circumstances, may be added some tincture of gum-lac or of myrrh and honey of roses. Common sulphur has now and then a very good effect for relieving a salivation. The sulphur of antimony has been recommended in such cases as a diaphoretic. An eminent physician has recommended for this purpose the *aurum fulminans*, given every day from three to five grains, as a very efficacious medicine; but having never had occasion to try this remedy myself, I am unable to say whether this advice is founded on experience, or only on a theory derived from the chemical affinity or attraction between mercury and gold. In an obstinate ptyalism, a blister, seton, or issue, in the neck, together with the internal use of purified sulphur and camphor, and the volatile liniment applied to the throat, sometimes proves serviceable; and in desperate cases, we might also try the effect of repeatedly pouring cold water over the head and face, letting the patient sit in the mean time with the rest of the body immersed in a warm bath.

C H A P. XVI.

*On particular VENEREAL COMPLAINTS,
which require a peculiar Method of Cure.*

I. On the VENEREAL OPHTHALMIA.

THERE are two distinct species of venereal ophthalmia. The one seems to be more of a chronic kind, comes on gradually, and arises from a tainted mass. The other is the most acute, violent, and dangerous of any ophthalmia I know of: it comes on suddenly, and owes its origin, as far as I have been able to observe, to a sudden retropulsion of a recent venereal clap.—I have seen three instances of this dreadful disorder, every one of which proved fatal to the sight of the sufferer. In two cases, both eyes were affected with blindness; in the third, one was affected immediately, and several years after the sight of the other was likewise lost, without any other apparent cause. All old practitioners with whom I have conversed about this dreadful complaint, and who have observed it several times in their practice, were of opinion that it always originated from a retropulsed recent clap, by way of metastasis. In the three cases which I just mentioned, the disease was certainly

ly accompanied with a suppression of the clap: but whether that suppression was the cause of the ophthalmia, I was not able to determine with certainty; and am much less capable to account for such a metastasis: though great connection subsists between the eyes and the parts of generation.

But whatever may be the cause of these ophthalmies, the fact is this. In the three instances which came under my observation, the disease arose in a cold climate in winter, after the patient, affected with a recent clap, had been exposed to violent cold in the open air. None of them had ever had any complaint in the eyes before. The discharge from the urethra was evidently diminished or abolished. In the meanwhile, a discharge of a puriform matter of a yellowish green colour, resembling that of a clap, took place from the eyes, with the most excruciating pain, which was rendered insupportable on the least application of light. The same matter which ran out of the eyes, seemed, as far as I was able to see by forcing up the eye-lid, to be extravasated in the whole anterior chamber of the eye, and, as it were, infiltrated between the lamellas of the cornea transparent. All remedies which were applied proved ineffectual, and perpetual blindness was the consequence.

As cases of this kind may be instructive, I shall transcribe one of them from my Medical Journal. The patient, a young man of a strong dark complexion, of twenty-nine years of age, a captain in the army, was ordered on
guard

guard in the month of January, whilst he was afflicted with a recent, violent clap. Unfortunately the day was excessively cold, and he was by duty much exposed to the open air all day and the evening: in the night he found himself at once afflicted in both eyes with the most excruciating pain, and intolerance of the smallest degree of light; to which next day followed a discharge of puriform matter from both eyes. Upon inspection, the albuginea was everywhere highly inflamed, and very much swelled. The physician who was called, applied, besides the common remedies, such as bleedings, purgatives, &c. a fomentation of hemlock. On the third day, upon a closer examination, the cornea was found entirely opaque, and an hypopyon formed; no ulceration appeared. The use of hemlock was ordered to be continued. Some days after, the inflammation and running abated; but the cornea remained opaque, seemed to be very much thickened, and the patient remained perfectly blind. In this patient, I clearly saw the arteries of the cornea transparen, coming from the albuginea, inflamed, and so filled with red blood, as if injected like an anatomical preparation, even till the fifth week of the disorder.

In none of the three cases which I had access to observe, any remedy was applied by the practitioners to restore the running of the clap; nor was there an incision made into the cornea to discharge the extravasated matter: The only two remedies from which I would expect any efficacious relief in such an ophthalmy, besides

the general and topical evacuations by purgatives, leeches, blisters, &c. with the internal and external use of mercury.

I was once inclined to believe, that this kind of ophthalmia does perhaps arise from uncleanness, when the patient affected with a clap, or shankers in the genitals, touching those parts, and afterwards, without washing the hands, touches his eyes. I have certainly seen ophthalmies, and venereal ulcers of the eye-lids, nostrils, lips, more than once arising from such carelessness: but in these cases I have never observed an inflammation but in one eye, and it was always far from being so violent as the kind just mentioned; and, like ophthalmies arising from a tainted mass, gave way to the topical application of the blue ointment; which, together with the internal use of mercury, is indeed the sovereign remedy for several ophthalmies.

The chronic venereal ophthalmies arising from a tainted mass, prove in many cases extremely obstinate for many weeks and months. They require besides a very low diet, a regular mercurial course, especially with sublimate if the patient can bear it; repeated purgings; and in some cases, especially if the eye-lid be the part affected, the external use of the mercurial ointment, or what is, according to the observations of Dr *Cullen*, more preferable, the citrine ointment rubbed down with double the quantity of hog's lard, in order to render it less acrid. Laudanum dropped into the affected eye gives sometimes the most evident relief. Bathing the eye with a weak solution of sublimate, or with the

lac hydrargyrum four or six times a-day is likewise serviceable.

II. On VENEREAL DEAFNESS.

I HAVE seen several instances where deafness, with a violent pain of the ear, was brought on by venereal ulcers affecting the orifice of the Eustachian tube in the fauces; and I have met with one instance, where a perfect deafness was the consequence of a stopped discharge of a clap by the internal use of turpentine. The patient had had no shankers, nor any other venereal complaint ever before.

III. On VENEREAL SORE THROAT.

VENEREAL sore throats, as well as venereal ulcers of the mouth and fauces, should, as I mentioned above, be carefully distinguished from scorbutic ones, or from those originating from the saliva rendered acrid by mercury; and more especially from those which, though really venereal in their origin, have now changed their nature, and acquired a character entirely different from the original disease, as by continuing the use of mercury, the patient may be materially, and perhaps irrecoverably, hurt. Practical judgment must be our only sure guide in that case. Deep ulcers covered with a white lardaceous crust, and confined by a hard elevated border, with a strong redness round about them,

them, will, I think, seldom mislead if they are treated as venereal. Venereal ulcers in the throat are sometimes seated so low down, and sidwards, that we cannot easily discover them at first sight, and thence we are sometimes led to mistake the nature of the disorder. An account of the following cases may perhaps be useful to young practitioners.

A gentleman of a strong plethoric constitution, fifty-five years of age, was affected with a sore throat and fever. The physician, after examining his throat and pulse, ordered bleeding, with an antiphlogistic gargle and purge; when the disease not abating eight days after, another practitioner was called, who repeated bleeding, purging, and ordered a different gargle, from the use of which the patient found himself better. At the expiration of seven weeks, when he felt, as he expressed himself, the disease was not quite gone, I was consulted. After the former prescriptions were shown to me, I examined his throat; and though I could not discover any ulcer, told him I suspected a venereal cause; which he hardly would agree to, telling me that he had had no venereal complaint these many years past, and that since that time he had enjoyed the most perfect state of health. I desired to examine his throat once more; which he readily complied with, though he was one of those persons who with the greatest difficulty can let their throat be examined: with a wax taper in one hand, and depressing the root of the tongue by means of a large spatula as much as possible with the other, I discovered very low

down on the right side, a deep but small venereal ulcer, which had escaped my sight at first, and would now have done so, had I not examined the throat with such peculiar care. Upon mentioning to him the evident cause of his disorder, my advice was complied with; and after the internal use of mercury for eight days, his fore throat was perfectly gone, and by continuing it a month longer, a radical cure was obtained.

The other patient was a lady of rank. She had but first felt a slight difficulty in swallowing within a few days, which being frosty she ascribed it to a cold. I immediately, upon inspection, discovered the cause of the disorder; and as women have always a right to the greatest delicacy and secrecy of a physician, without asking her any questions, I ordered her to keep her throat warm, and promised to send her some medicine which would relieve her in a few days; and the same was afterwards, under another form and pretence, ordered to be continued for a few weeks longer, till I thought her perfectly safe.

Last summer, I was consulted at Paris by a young gentleman of about twenty-eight years of age, about a sore throat for which he had taken advice and medicines already, for the space of three weeks, without any relief. I told him, that, from the very appearance of his face and eyes, I suspected quite a different cause of his disorder than he had hitherto imagined; which indeed was most evidently confirmed by a large venereal ulcer; which upon inspection, I found seated very low
down

down behind the velum. He then gave me the following account. That he had been affected with a violent clap two years ago when he was at Venice, which for a particular reason he had wished to be removed or stopped as soon as possible; that, for this purpose, he was recommended by a friend of his to a surgeon in that place, who was in possession of an injection which had that infallible effect. That this surgeon complied with his desire, though with reluctance; and foretold him, that some time after being cured thus hastily, by his injection, the venereal disease would break out in some other part of the body; assuring him that he had seen the same effect, from the same remedy, happen in several other patients who applied to him in the same manner he did. That he neglected this caution; that the running was perfectly stopped in 48 hours; and that he had never thought more about it, having been perfectly free from venereal as well as any other complaints ever since. This case was to me a very instructive one. First, it shows how long the venereal poison lies sometimes concealed in the mass, without producing any sensible effects: And, secondly, it evidently confirms what I have asserted above, that the poison which produces a clap, may be, and is most frequently, the very same with that of the syphilis; and that, if absorbed into the mass, it therefore produces the same effects. But, lastly, it also shows, which I could not have expected *à priori*, that a recent clap may sometimes be stopped or repelled, without producing

swelled testicles, ischury, strictures, or any other immediate effects in the mass.

Venereal ulcers of the throat require sometimes, besides a course of mercury, topical applications; such as injections or gargles made of a solution of sublimate mixed, according to circumstances, with the tincture of mastich, &c. But if the ulcers are owing to the acrimony of the saliva, they ought to be kept constantly clean, and mercury should be discontinued. If they arise neither from the one or the other of the causes just mentioned, but are of that peculiar nature described above under the head of *Venereal Ulcers*, they require, instead of mercury, the internal and external use of opium. Powerful tonics, internally as well as externally, in a gargle, have been found very useful in such cases.

IV. ON VENEREAL COMPLAINTS OF THE SKIN.

CUTANEOUS disorders of a venereal nature, such as venereal tetter, venereal scald-head, venereal leprosy, &c. are often very obstinate. It is in these complaints properly, where the solution of sublimate, given internally, proves now and then excellent; and I think I have observed, that it often effectually removes the disease of the skin without removing radically the lues: This at least I assert with regard to colder climates; as to warmer climates, I know certainly many patients who have been radically cured of the syphilis by the sublimate alone.

Besides the internal use of the sublimate, warm
baths

baths made with a decoction of bran, in every gallon of which half a drachm of sublimate is to be dissolved, gently rubbing at the same time the affected part, have sometimes proved to me very useful. For more confirmed venereal complaints of the skin, the topical application of the solution of the sublimate, the citrine ointment sometimes alone and sometimes with the addition of the saturnine, have succeeded in tetter, tinea, &c. where all other remedies proved ineffectual. The decoctum Lusitanicum, the decoction of the stipites dulcamaræ, of the mezezeum root, and especially that of the lobelia siphilitica, deserve, for these as well as other obstinate and inveterate venereal complaints, in my opinion, a much greater attention than is usually paid to them. I have seen a most obstinate and inveterate disease of the skin of a venereal nature cured by a solution of turpeth mineral in small doses, where all other remedies failed. Some physicians pretend to have seen great success also from arsenic; but I never tried this latter.—The decoctum siphiliticum roborans is in many cases a sovereign medicine. The infusum ledi palustris has proved very effectual in many cases of leprosy in Sweden: but it ought to be observed as a general rule, that without the use of warm emollient baths, or vapour-baths, all these medicines will often fail in producing the desired effect.

V. On VENEREAL EXCRESCENCES.

VENEREAL excrescences on the surface of the skin, known by the different names, *warts*, *tubercles*, *condylomata*, *ficus*, *marisca*, &c. arise either from an original infection, in which case we consider them as a local disease, and prescribe local remedies; or they originate from a tainted mass, which indeed is more frequently the case, and then a full mercurial course will make them disappear sometimes without any external application. But frequently external remedies are likewise requisite. Caustics have been recommended for that purpose: they are now and then employed with success; but in some cases I have seen them productive of bad effects. Excision has been likewise recommended, and is sometimes necessary; but I have seen several instances where, after these excrescences had been cut out repeatedly (even after a full course of mercurials), they grew again and again, sometimes to a larger size than they had formerly. To prevent this regeneration, several remedies have been proposed; of which, in all obstinate cases that have come under my observation, I have observed only two or three which were successfully employed after the mass had been previously perfectly purified. The one consists in mercurial fumigations, the other in the application of the *juniperus sabina* L. either by itself in the form of a powder, or mixed with red precipitate in the form of an oint-

ointment; and the third is the liquor *ad condylomata* lately proposed by Mr *Plenck*. I have applied it once or twice a-day with a hair pencil in several cases with very good effect. In cases where a great number of small warts had sprung up about the genitals, the solution of sublimate in simple water or lime-water I have observed sometimes to succeed perfectly well. If warts have a small basis, and are but few in number, the best remedy is a ligature made tighter every day. I have seen a man with several hundred little warts upon the part of the chin where the beard grows, and understood his disease to be owing to an ill-treated lues.

VI. ON VENEREAL WEAKNESS, OR IMPOTENCY.

THIS complaint, though not dangerous, is very alarming, and renders the mind of the patient extremely uneasy. I have repeatedly observed it; but in a particular manner in one patient, who several months before had been affected with a violent clap; of which at last he was cured, after having undergone a tedious and very improper treatment. The only remaining symptom was now a total inability and want of desire of venery, which rendered him extremely low-spirited. On consulting me, I judged the complaint to proceed from the venereal poison lurking in the body, and prescribed him a mercurial course, and afterwards some tonic medicines, with two tea-spoonfuls of Hoffman's anodyne liquor morning and evening.

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He was likewise ordered to wash the scrotum and spermatic cord twice a-day, with a table-spoonful of the same liquor mixed with some water: in three weeks time he had sufficient reason to be as high-spirited as ever.

VII. On VENEREAL PAINS, SPASMS, &c.

FIXED or wandering pains arising in different parts of the body, are generally ascribed, by all patients who were formerly affected with the lues, to the remains of the venereal poison in the mass. This is indeed sometimes the case; but it ought to be observed, that those pains, so generally ascribed to the venereal poison, are often owing to very different causes; which, if not properly distinguished, we shall find ourselves frequently disappointed in the effects of the remedies prescribed.

Pains similar to venereal ones are often the effects of the improper use of mercury. These cases ought to be carefully distinguished in practice; because, if the venereal disease has not been radically cured, and the pains arise from a half-cured lues, the use of mercury will be necessary to complete the cure (though the patient will often be of a contrary opinion, considering the length of time and quantity of mercury he has already taken); whereas, if the venereal virus has been radically cured, the use of mercury will prove evidently hurtful. I know patients who, having made use of mercury repeatedly in their younger days for several venereal com-

complaints, find themselves now, whenever they take the least quantity of mercury, constantly affected with the most violent rheumatic pains in different parts of the body. Authors who have mentioned this latter disease generally ascribe it to the mercury lodged in the bones; nay, there are even examples recorded in medical history, where mercury had been found, after the death of such patients, collected in globules in different parts of the body, especially in the bones and their cavities. Whatever credit may be given to those assertions, it is certain that we may generally, and sometimes pretty easily, cure those patients by a proper regimen, warm baths, and by administering at the same time internally proper tonic medicines, either alone or united with antimonials. But if those pains, instead of being of the chronic kind, arise from a sudden check of perspiration during a mercurial course, the use of tonic medicines would be improper. In several desperate cases of this kind, where the body seemed as if it was affected with a general spasm or tetanus, I have found, besides the warm bath, especially the vapour-bath, the sulphur of antimony, united with the extract of hemlock, a most efficacious remedy, given to the quantity of fifteen grains of each a-day.—Dover's powder, with a proper regimen, proves sometimes in this case, as well as in rheumatism, a very serviceable medicine.

VIII. *On VENEREAL COMPLAINTS of the BONES.*

THE bones are seldom affected by the venereal poison; but in a confirmed or neglected lues. I have seen, however, one instance where the patient, being affected with a shanker on the glans, was attacked the fifth day after with a considerable swelling in the lower part of the ulna.—In these cases, the longer the disease is neglected, the more difficult and tedious is the cure; and of all others the caries, or ulceration of the external surface, and the corruption of the internal cavity of the bones, are the most disagreeable and tedious.

In all cases of ulcerated bones we ought to remember, that they cannot be cured until the poison be totally eradicated from the mass. Topical applications seem to have very little effect; though the essential oil of saffrafras has been recommended by some. Mr *Plenck* recommends a lotion composed of essentia mastichina, corrosive sublimate, and honey of roses. Besides this, he directs the internal use of the Peruvian bark, and mercury mixed with asafœtida, together with a decoction of sarsaparilla, united with mezereum and cicuta: by these, he says, that he cured several persons of the disorders just mentioned.

Venereal exostoses and topi, especially those in the middle of the tibia, sternum, and bones of the head, will sometimes, especially at night, give the most excruciating pain. In these cases,

I have observed no good effect from any topical application whatever. Mercury, blisters, or an incision, have been recommended for this purpose; but the saline mercurial preparations are the medicines most to be depended upon, together with the decoctions of the woods, especially the decoctum mezerei, the *æthiops antimonialis* of Huxham; according to circumstances, opium in large doses, may be likewise tried in obstinate cases.

Of the extraordinary fragility of the bones mentioned by some writers as proceeding from a venereal cause, I have never seen an instance; though it may not be improper to mention one case which, I think, may be referred to this head: A man broke his tibia by a fall; but after the best treatment of the fracture, and twelve weeks confinement, upon examination it was found, that no callus was formed, and the broken bone remained nearly as loose as at first. After a close inquiry and consultation, the venereal poison was suspected, and a course of mercury prescribed; which succeeded so well, that in a few months after the patient was perfectly cured.

C H A P. XVII.

*On Complicated VENEREAL COMPLAINTS,
and such as have been suspected to be of the
Syphilitic Kind.*

TO this class belong syphilitic complaints, joined with sea-scurvy, psora, leprosy, rheumatism, gout, and scrophula.

The disease called the *Sibbens* in Scotland, was supposed by some to be a complication of the venereal disease with the itch; but I have referred it under the syphilis, especially as its symptoms are so nearly related to the new venereal disease of Canada. See Chap. XII.

Syphilis with *sea-scurvy* requires the use of antiscorbutic and strengthening diet or medicines, previous to the use of mercury.

Syphilis with *leprosy* requires warm baths, the decoctum syphiliticum roborans, or the decoctum corticis ulmi with antimonials.

Syphilis with *rheumatism* is best relieved by warm baths, the vapour-bath, together with the use of the flesh-brush, and the internal use of the decoctum lignorum, especially the decoction of guaiac and æthiops antimonialis of *Huxham*.

Syphilis with *scrophula* is relieved by sea-ba-

thing and sea-water taken internally. Hemlock united with the Peruvian bark have been found successful in some cases. In places where the patient has no access to the sea, we may prepare artificial sea-water compounded of the same constituent parts as sea-water, by mixing to five pints of water two ounces and 433 grains of pure common salt, 380 grains of magnesia, muriata, and 45 grains of *terra calcarea vitriolata* or gypsum.

The *Yaws* is only a local excrescence or external cutaneous disease, entirely different from the lues; the cure of which is often performed by nature, without any internal or external medicine, but may be, according to the observations of Dr *Nooth*, accelerated by lint dipped into a solution of blue vitriol in water, frequently applied to the parts.

Whether the *Mal de Siam*, the *Variola Amboinensis*, and a disease nearly similar to this latter described lately by Dr *Schotte*, to which the negroes at Senagambia are subject, belong to the head of syphilitic complaints, I am uncertain.

C H A P XVIII.

On VENEREAL COMPLAINTS disguised, such as Consumption, Rheumatism, Fevers, &c.

SOME persons formerly affected with venereal complaints, of which they have been apparently cured several months, nay sometimes several years, grow emaciated, begin to cough, and are affected with hectic fever, and other symptoms which accompany a consumption, or a phthisis pulmonalis. These complaints are often mistaken and ascribed to some other cause, and medicines ordered for the most part without any success. Sometimes, likewise, the disorder arises from the profligate use or too large quantities of mercury. I have seen several instances where a hectic fever with cough, and sometimes even with a puriform expectoration, far from owing its origin to an ulceration of the lungs, arose from a latent venereal poison, without any other venereal symptom in the body. The same has been observed by others; and Mr Brambilla relates a case, which shows such a striking instance of the

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kind

kind, that I shall transcribe it here. An electuary, he says, was prescribed for a consumptive man, who was in a desperate situation. By a mistake of the apothecary, the electuary was given to a venereal patient to rub himself with, and the mercurial ointment, instead of the electuary, was sent to the consumptive patient to take it internally. The consumptive man, knowing nothing of the mistake, took a quantity of the ointment, about the bigness of a nutmeg, two or three times a-day, and was effectually cured of his disorder, to the no small surprize of his physician, who learned by chance from the apothecary the mistake that had happened. This mistake was certainly a very happy one for the patient; and though it might be doubted whether the consumption proceeded from a venereal cause, it proves however evidently that it yielded to mercury. I had several patients of this kind who was radically cured of consumption by administering to them nothing but a course of mercury.—The sarsaparilla in powder, from half an ounce to an ounce in a day, has been found useful in several cases of this kind.

Agues, or intermittent fevers, have also been observed by Dr Wherlhof and others, either to be produced by the venereal virus, or concomitant with the venereal disease; and mercury, combined with the bark, has been given with success in those cases. Perhaps some of the fevers cured by Dr Lyson, with calomel, have been of the same kind.

Flying *rheumatic pains*, violent *headachs*, and
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pain

pain in the hip, sometimes originate from this source. The warm bath, with some saline preparations of mercury, with the decoction of the *stipites dulcamaræ*, I have seen cure disorders of this kind, which resisted every other medicine. Mercury, with the decoction of *daphne mezereum*, or of *daphne laureola*, L. has also been recommended as a very efficacious medicine for those complaints.

CHAP.

C H A P. XIX.

On VENEREAL COMPLAINTS *incurable by*
MERCURY.

I HAVE already spoken so fully concerning the nature and cure of these complaints under the different heads of *Veneréal ulcers, Exulcerated Buboes, Veneréal Sore Throat, Diseases of the Skin, Veneréal Pains*, and especially in the chapter where I considered the reasons why some venereal complaints do not yield to mercury, that very little remains to be added here.

I must only observe, that I have found most, if not all, of these complaints admit of great relief, or even of a radical cure; and that the great point for accomplishing this desirable end, lies less in these complaints themselves, than in an exact knowledge of their nature. This certainly requires sometimes more practical sagacity than is generally imagined. The great object is, to distinguish exactly; *first*, whether those runnings, ulcers, cutaneous eruptions, pains, &c. are really of a venereal nature; I mean, whether they owe their origin really to the venereal poison, or rather to some other cause widely different; or *secondly*, whether they are the effects of mercury; or, what is perhaps

of the greatest consequence, *thirdly*, whether, from having been originally owing to the venereal virus, they now, by time or other circumstances with which we are not yet sufficiently acquainted, have changed their nature. In which case, instead of yielding to the power of mercury, they seem to be not only in every degree exacerbated by that remedy; but likewise, if its use be imprudently insisted on, will at last prove fatal to the patient. In proof of this, I have adduced, under the above mentioned heads, several striking, and, as I think, convincing instances. And those of my readers who are particularly interested in this subject may find a good many more in *Mr Fabre's Supplement to his Treatise on the Venereal Disease*. I now proceed to the consideration of those medicines which I have hitherto found most efficacious in removing these dreadful and obstinate complaints.

To distinguish complaints arising from mercury from real venereal ones, great judgment is often required. I have seen patients who complained of rheumatic pains, pains of the bones, headachs, spasms in different parts, and trembling of the extremities, &c. owing, as they thought, to the enormous quantity of mercury they had taken; whom, however, after a careful inquiry, I have effectually cured by giving them more mercury; because I found that the obstinacy of their present complaints, though really venereal, was owing to an improper preparation of mercury made use of, or to a proper preparation improperly administered; which being evacuated by stool, salivation, or immoderate

derate sweats as fast as it was given, thereby, though taken for a great length of time and in considerable quantities, could never exert its proper effect upon the poison lodged in the body.

Diseases are often incurable by mercury, on account of their mistaken nature. I have observed above, that claps, ulcers, and buboes, may, and do often, arise from a cause very different from the venereal; and that, in this case, they are not unfrequently mistaken by superficial practitioners for venereal complaints, where there never was as much as a shadow of any syphilitic poison in the case. It is, therefore, no wonder, that they find, in such instances, all the mercurial preparations, tried often one after the other, prove, if not hurtful or fatal, at least perfectly useless to the patient. I have mentioned under the different heads, how those complaints are to be distinguished and treated; and therefore find it superfluous to repeat any thing further about them.

There are diseases which arise from ill-treated claps or gleet, and prove obstinate and incurable till we bring on a running. In those cases, where the disease is not of a venereal nature, but owing, as is not unfrequent, to the effects of mercury, instead of following the general routine of practice, to give new mercurial preparations, after two or more of them have been already tried in vain, we must endeavour to counteract and destroy those effects. This is most effectually done by the internal use of purified sulphur, commonly called flowers of sulphur, and by

repeated warm baths, and flannel drefs, taking at the fame time proper care to keep up the vigour and ftrength of the body by a good nourifhing diet, wine, and ftrengthening medicines, if required. The fulphur of antimony with the refin of guaicum along with the warm bath, will, in thefe instances, be efpecially ufeful, where the fymptoms have been brought on by catching cold.

Thofe complaints which are neither owing to the venereal virus nor to the effects of mercury, but which, though originally venereal in the beginning, having by time, by the ufe of mercury, and other circumftances, changed their nature, refift now the one as well as the other of the methods juft before recommended. In thefe cafes, it is often beft to leave off for a time all medicines whatever: change the low diet for an invigorating and ftrengthening one, and the confined air of a town-room for the healthy country air, efpecially at the fea-fide. If medicines are to be given, the tonics or ftrengthening ones are thofe from which we have moft to expect. Under this clafs I principally reckon antimonials, and more efpecially, in the cafes alluded to, chalybeates. But, when fpeaking of the ufe of thofe medicines, I would not be underftood to prefcribe them in the quantity of a few grains as ufually given, but in much larger dofes. The preparations I generally make ufe of are, the crude antimony, the æthiops martialis, and more efpecially a tincture made of iron and vitriolic ether. Of thefe I adminifter fuch dofes as the conftitution of the patient will bear, either

ther alone or united, according to circumstances, with the decoctions of sarsaparilla, the Peruvian bark, or walnuts. The sulphur of antimony, united with the extract of hemlock, will be sometimes very serviceable, alone or with a decoction of sarsaparilla with the mezereum root, and the use of warm baths. Sometimes the cold bath, and especially bathing in the sea, will greatly contribute to the effect of the above medicines.

From the decoctum Lusitanicum I have seen, in several instances, evident good effects. But of all the remedies hitherto recommended for venereal complaints incurable by mercury, I have seen none equal to a decoction made use of by Dr *Paullini*, physician at Laybach in Carniola. With this decoction, the most malignant and obstinate ulcers, cutaneous disorders, tophus, caries, pains of the bones and other parts of the body, arising from a venereal cause, which resisted the power of all other medicines prescribed by different physicians in different climates, have been effectually cured; and, what is still more remarkable, for the most part, in a very short space of time. It is, however, much to be regretted that this remedy cannot become of more general use, nobody having been hitherto able to prevail upon him to make it public.

C H A P XX.

Of the Reasons why certain VENEREAL COMPLAINTS do not yield to MERCURY.

THE reasons practical observations have suggested to me why mercury sometimes fails in curing venereal complaints, depend on the following causes; viz. 1. On mercury and its preparations. 2. On the method of exhibiting the same, internally as well as externally. 3. On the greater or less irritability or constitutional strength of the patient, or some faults committed by the same. 4. On the nature of the disease itself.—I shall treat of them in order.

Concerning the *first* and *second* point: Since the use of mercurial ointment in frictions, the first and only method made use of in the sixteenth century, several other preparations, both for internal and external use, have been discovered and tried, with a view to cure venereal complaints which would not yield to frictions, or to remove the disease more speedily or in a more convenient manner. I shall avoid making here any reflections on the preference which either of those methods may claim over the rest; and shall here confine myself entirely to the reasons why mercurial frictions, as well as other
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preparations of mercury, sometimes prove ineffectual for removing some venereal complaints, having offered the necessary observations on these preparations before.

I have seen a variety of persons affected with gleans, shankers, pains and caries of the bones, cutaneous eruptions, herpes, ulcerations of the nose, throat, &c. condylomatous or verrucous excrescences in different parts of the body, but especially about the anus and pudenda, which seemed obstinately to resist the effects of mercury; and which, so far from being removed by a copious and disagreeable salivation, were rather increased by it, and, when removed, often returned again shortly afterwards.

After a careful inquiry, I found that the causes of this difficulty are frequently to be sought for in the medicine itself; being owing, either, *1st*, To its being badly prepared, or ill fitted for curing the disease. *2^{dly}*, To its not having been given in a sufficient quantity, or continued for a sufficient length of time. And, *3^{dly}*, To its being administered in too great a quantity, and by that means exciting a salivation, sweats, and purging, without destroying the venereal virus in the body.

The great point in curing the venereal disease by means of mercury, being to introduce such a quantity of it into the habit as shall be sufficient totally to eradicate the venereal poison, it is evident that medicines unskilfully or negligently prepared, may have the worst effects, or no effect at all. Thus, for example, if sublimate be mixed with arsenic in order to render it whiter,
and

and give it a better appearance, or if mercury be combined with substances incapable of holding it suspended, or if, when made into pills, it be not sufficiently triturated so as to be equally divided, its effects cannot be but precarious. In the latter case, one pill may contain three or more grains of mercury, and another only one grain, or perhaps none at all; and when this is the case, the latter will have no effect, while from the former, the patient may experience a violent griping, purging, &c.

Here we may observe, that a mercurial preparation is always ill fitted for the purpose, whenever it is incapable of entering into the habit, or if, when it has entered the circulation, it excites a salivation before it has destroyed the virus; for it is erroneous to believe, as I mentioned above, that by a salivation all the poison is carried off, and the disease by that means radically cured, just the contrary to this being often the case. It is true, that if a salivation is brought on, the patient will often find all his symptoms disappear, and of course be induced to think himself cured; but some months, nay sometimes only a few weeks afterwards, the complaints in many cases will return again with increased violence. I do not deny, however, but that the disease, especially if slight, may by this means be radically cured: but I maintain, from repeated observations in private as well as hospital practice, that the practitioner can never be certain of a real cure; and of course, that the cures effected by salivation are not only doubtful, but oftentimes altogether ineffectual. But

upon this subject I have already spoken more fully in the foregoing chapter.

The principal remark to be made here is, that to cure the lues well and radically, no practitioner who has the welfare of his patients at heart, and who does not choose to administer his medicines at random, will ever make use of any mercurial preparation or composition which he has not prepared himself, or at least taken care to see the same prepared by some person on whose integrity and care he can rely. The repeated disappointments I have experienced myself, and which I have seen happen to others, have rendered me scrupulously exact on this head.

We should likewise be careful not to make use of mercurials combined with medicines, which may render the former less efficacious; because they not only disappoint us, but often render the cure more tedious and precarious. I have seen repeated instances of this with Plummer's pills; and have heard the same remark made by other attentive and eminent practitioners.

We ought never to give acrid preparations of mercury when we can effect a cure with mild ones. The dreadful effects I have repeatedly been an eye-witness to, from remedies of this sort, especially from the corrosive sublimate, oblige me to inculcate this caution with the greater warmth. The constant effects of such acrid compositions, especially in delicate habits, are pains in the stomach and bowels, loss of appetite, violent gripings, diarrhoeas, and sometimes

times dangerous colics; or, if they enter into the mafs, they excite fputting of blood, convulfions, nervous fevers, and other complaints, more baneful even than the difeafe they were intended for to eradicate; or elfe they will perhaps excite a falivation, and of courfe prevent from being continued to complete the cure. If we fometimes adminifter them, as may now and then be requifite in cutaneous or deep-feated venereal complaints, we fhould carefully confider the habit of the patient; and if that appears to admit of them, begin with very fmall dofes, in order to avoid the above mentioned fymptoms, particularly the diarrhœa; for when that takes place, the mercury, inftead of entering into the mafs, will be carried off by ftool, and of courfe occafion trouble and pain to the patient, without affording him any relief. In general, therefore, we fhould be careful in the choice and adminiftration of mercurial preparations: we fhould find out, in every cafe, that preparation which feems beft to agree with the conftitution, and never infift obftinately on the ufe of a preparation or dofe which excites bad fymptoms in the body: We fhould not imitate the example of thofe quacks whofe knowledge confifts entirely in a noftrum, which they give indifcriminately to all their patients, for every kind of venereal complaint, and pronounce their patients cured as foon as the fymptoms of the diforder have difappeared; to which affertion, credit is the more readily given, as moft young men diflike to be conftained or confined to a courfe of medicines for a length of time. Thus they will

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now and then cure a patient; but in the mean time ruin the constitution of many, and commonly render the disease more obstinate and inveterate for the future. The poison indeed remains latent for weeks, months, or sometimes even for years; but then it breaks out with redoubled rage and violence, and not unfrequently produces symptoms and diseases; the nature of which, especially in women, we must only guess, and which, in that state, sometimes baffle the skill of the most able physician; for, venereal complaints, the older they are, the more obstinate they prove against the power of mercury.

I come now to the *third* point, why mercury proves unsuccessful in curing the lues, viz. on account of the constitution of the patient, &c. We sometimes meet with patients, especially among the female sex, or such as have taken mercury for former venereal complaints, whose constitution is now so irritable, that after the administration of a few grains or a few frictions, they are either affected with a nervous fever, spasms, headach, or they very readily fall into a salivation on the second or third day. In these constitutions we ought to be peculiarly careful to find out the preparation and dose best adapted to them. The Peruvian bark, or some other vegetable tonic, is here sometimes administered with mercury to great advantage. By the neglect of these precautions many patients of this kind will be sufferers for life, without ever being cured radically. There is one remark to be made here, to which in general little attention

tention has been hitherto paid. Most writers and practitioners confine their venereal patients under a mercurial course, without any distinction to a low diet, as well with regard to eating as drinking. This rule is however a very improper one when generally applied. Such a diet will be very proper for strong, vigorous constitutions; but for weak, delicate, or irritable ones, it is sometimes highly improper. A full diet, with the moderate use of wine, ought to be allowed to them; otherwise mercury will produce no effects upon the poison, though very disagreeable ones upon the constitution. The warm bath will sometimes much assist in these cases. Nature readily co-operates with mercury in some constitutions; whereas in others it does but little, or acts slowly, and with difficulty. But besides this peculiarity in the constitution, we often observe, that patients render their complaints complicated and obstinate, by attempting to cure themselves, or by applying to quacks, or unskilful persons in the art of healing. They frequently also hurt themselves by neglect of diet, or by not making use of the medicines in the manner prescribed, or by not continuing the same long enough, but leaving off as soon as the symptoms disappear, by exposing themselves imprudently to the damp and cold atmosphere, especially at night; or when they grow impatient and inconstant, going from one physician to another, or making use for some days or weeks of one medicine and then of another. By all these different circumstances, vene-

venereal complaints are often rendered extremely obstinate.

Mercury likewise sometimes fails, when the patient, by a previous large or imprudent use of mercury, can hardly bear a few grains or a few frictions without salivation: in this case, if we leave off the use of mercury, our patient will not get rid of his disorder; and if we continue it, we are sure to bring on a troublesome ptyalism, which will last sometimes for weeks or months, exposing the patient to dangerous consequences, and often leaving the principal disorder uncured. What ought to be done in these circumstances, I have hinted in several places of the foregoing chapters.

But we are, *fourthly*, by far more frequently disappointed in our expectations from mercury, by mistaking the nature of the disorder; by judging those complaints venereal which never were venereal, or which often are owing either to the effects of mercury, or to a state of the disorder; which, though originally arising from the venereal virus, has degenerated, either by time or other causes, into a disease of a quite different nature, for which mercury is not only no antidote, but a real poison. Of these complaints we have spoken already, and shall have occasion to speak further hereafter.

C H A P. XXI.

On different other REMEDIES, besides MERCURY, recommended for curing the LUES.

BESIDES the mercurial frictions, the fumigations, and the internal use of the different mercurial preparations, a variety of other medicines has been recommended, either to cure the different venereal complaints without mercury, or to assist mercury in its operation; and as there are instances where the mercury fails, or where patients by its use are exposed to disagreeable consequences, a remedy has long been sought for, which, without having any of the noxious qualities of mercury, might have all its powerful and good ones.—Most of the quack medicines, sold and praised as preparations from the vegetable kingdom for this purpose, I have been at pains to analyze, and have found them generally to be nothing but one or other mercurial preparation disguised.

Several remedies have been recommended as succedaneums for mercury for the cure of the venereal disease, which have been made use of for this purpose, we are told, with success, before or since mercury was introduced. Some, we are credibly informed, are even at this time

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actually

actually employed with the best effect, in South as well as in North-America, for curing the venereal disease radically without mercury. Such of them as I have seen made use of for the same purpose in Europe, have generally failed; and I have never seen yet one instance of a confirmed pox radically cured without mercury. Some of them, however, are worthy of our attention, and certainly deserve a fairer trial than has hitherto been bestowed on them, in order to ascertain their power, especially such as are recommended by men of knowledge and observation. The root of the *Lobelia sypilitica*, with which, as we are instructed by Dr Kalm, and afterwards more exactly by Mr Bartram*, the inhabitants of North America cure the venereal disease as effectually and radically as we do with mercury. They take a handful of the fresh, or (which he says is better) dried plant; they wash it, and boil it in a gallon and a half of water; of which decoction the patient drinks every day, if his constitution will suffer it, a quart in the beginning, gradually augmenting the dose, till he can no longer bear the purging excited by it; then he leaves it off for a day or two, and, if

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neces-

* The latter author advises the patient to take two gills of this decoction three times a-day on an empty stomach, and augment the dose according to the strength of the patient, making use of warm baths, and a proper diet at the same time. Care should be taken not to make use of the *lobelia longiflora* instead of the *lobelia sypilitica*, the former being of a much more acrid nature than the latter.—In some parts of Italy it is even now a law of government, not to make use of mercury in hospitals for curing the venereal disease.

necessary, continues it again till he finds himself perfectly well, which is for the most part in a fortnight. If there are any external disorders, they wash the affected parts with the same decoction.—If the disease is very obstinate, they mix with the lobelia, the root of the *Ranunculus abortivus*, but in a small quantity on account of its acrimony. In order to heal up the venereal ulcers, they dry the root of *Geum nivale*, and sprinkle its powder upon them. They also cure deep and putrid ulcers, by the external use of the powder of the interior bark of the *Ceanothus Americanus*. A decoction of the stipites of the *Solanum dulcamara*, or of the root of the *Daphne mezereum*, or *Daphne laureola*, and more especially the powder of *Sarsaparilla* in large doses, have been of late much recommended in obstinate venereal complaints; but how far their operation succeeds without the previous use of mercury, is not yet ascertained.

In South America, and in the West Indies, the decoction of the woods of guaiac, saffras, &c. is praised as a remedy, with which alone the most confirmed lues may be easily cured. It may be that venereal complaints are thereby removed between the tropics, and in the warmer climates of our globe; but in Europe I have never seen one case where they effected a radical cure; but sometimes rather prove hurtful, producing profuse sweats, hæmoptysis, consumptions, &c. especially in delicate and thin habits.—Several complicated prescriptions are made use of, and greatly praised, though generally

kept secret, some of which I have inserted at the end of this Treatise in the formulas.

My friend Dr *Winterl*, Professor of Botany at Buda in Hungary, discovered lately, that the inhabitants in the confines of Turkey cured themselves of the lues in all its stages by a decoction of the *Astragalus exscapus*.—The inspissated juice of the *Papaver somniferum*, known under the name of Opium, by successive increased doses from one to twelve or sixteen grains in a-day, first proposed for a trial by Dr *Nooth*, as I mentioned above, has proved very successful in the Great Military Hospital at New York. But how far all these medicines, as I said just before, do or may succeed without mercury, I am not able to decide. So much it seems to be certain, that the lues is in general much easier cured in warm climates, when properly treated, than in cold ones. A decoction of the bark of *Prunus Padus* has been lately found very efficacious, especially when joined with the use of mercury, in many violent and inveterate venereal complaints, by Dr *Biornlund* Physician in Sweden; and an account of them has been inserted in the Swedish Philosophical Transactions for 1784.

White arsenic mixed with the powder of the root and berries of the *Solanum lethate*, one grain of the former to thirty-nine grains of the latter, have been of late found very useful in obstinate phagedenic ulcers, attended with fungous flesh and callous edges, by Dr *Rush*, Professor of Chemistry at Philadelphia; he also recommends a weak solution of white arsenic in boiling water for the same purpose. And Mr

Blizard has published lately in London some Practical Observations, where he employed emetic tartar in powder, sprinkled upon phagedenic ulcers, with great success; the acrid ichorous discharge being thereby changed into mild pus, the ulcers soon put on a good appearance, and healed up.

C H A P.

C H A P. XXII.

OBSERVATIONS *on some dangerous or unhappy Prejudices generally prevailing about the* VENEREAL DISEASE.

IT is an opinion imbibed by some patients, that the venereal poison, when once absorbed into the system, can by no means be totally eradicated; consequently they believe, that a person who is once thoroughly infected, can never look upon himself as radically cured. This opinion, besides its absurdity, renders those who entertain it very unhappy. I have seen frequent instances, in the female sex especially, where such patients led a most miserable and melancholy life, notwithstanding every thing the physician could say to the contrary. The least shadow of a headach, a rheumatic pain, or the smallest pimple upon the skin, were by such patients accounted certain proofs of the poison lurking in the mass, and about to produce the most direful effects. These patients are real objects of compassion; we ought to bestow some time for inquiry, and pay the most careful attention towards them; for indeed we can hardly think of a greater degree of misery than to be perpetually haunted with such an imagination. If, there-

fore, after our most careful inquiry, we find no symptoms of a venereal kind remaining, we should endeavour to correct their prejudice, by setting before them the examples of others of their acquaintance, or, if circumstances admit, of those of our own, who have been affected as much as themselves, or perhaps much more, and who now, perhaps, after a great number of years, enjoy the most perfect state of health, are married, and have healthy and fine children.

The same attention we ought to pay to those who imagine, that if mercury is once taken for the cure of the lues, it will not so effectually cure it a second time. These prejudices are most frequently found among the women, though sometimes also men of a melancholic constitution will be influenced by them; but there is another prejudice of which I am now to speak, which is not only absurd but criminal, and deserves a most severe punishment from the magistrate wherever it can be proved. It exists only among some young men of a loose character, and dissolute and brutal manner of thinking. With these wretches it is an opinion, that the best method to get rid of a clap is coition with one or more healthy women; and in this manner I have seen venereal complaints propagated, in the course of a few days, to ten or twelve healthy persons, who had the misfortune to fall in with those wretches, or with the objects of their brutality and cruelty. The absurdity of this notion is evident to every person of common sense, who has the least knowledge
of

of the nature and seat of the disease; and where this practice arises merely from prejudice, the slightest information will be sufficient to remove it. But it is to be feared, that the cause may frequently lie deeper in the heart of these persons; and that this abominable practice proceeds from malignity, or from a mean and low disposition to revenge themselves upon innocent persons, because in their imprudence or drunkenness they themselves had become the dupes of others.

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PHARMACOPOEIA

SYPHILITICA.

So modern 'Pothecaries, taught the art
By Doctors bills, to play the Doctor's part ;
Bold in the practice of mistaken rules,
Prescribe, apply, and call their masters fools.

Garth's Dispensary.

L E C T O R I,

EN specimen Pharmacopœiæ Syphiliticæ, complectens medicamenta pleraque, si non omnia, tam simplicia quam composita, ad curandos morbos syphiliticos hodie adhibita. Nomina plantarum et præparatorum chemicorum antiqua, minus congrua, impropria, aut falsam penitus rei ideam suggerentia, confusione fertilia, genio sæculi indigna expunxi, mutavi. Cur enim Gallimachiam nominum chemicorum veterem retineas, dum exactior corporum analysi, ac nomenclatura Bergmani rei veritati magis congrua suppeditat? Cur nomina plantarum pharmaceutica vaga adhibeas, dum nomen systematicum Linnæi, ad quem pro justâ plantæ descriptione semper recurras, in promptu habes? Memoriam tyronum hoc modo æque ac tuæ parceres, et posteritati (siquidem liber tuus ab ea legi meretur) prodesse, difficultatem removendo, qua tu quidem legendo veteres præcipue, et non raro etiam recentiores, continuo premeris. Si Hippocrates, si alii post eum in medicina scriptores id observassent, id observare potuissent, sciremus hodie, quid ille sub suo Helleboro, quid alii sub plantis suis aut preparatis chemicis sæpe adeo, nec forsan immerito, laudatis intellexerint.

I. SIMPLICIA.

Ex regno Vegetabili.

ACONITUM NAEPELLUS (Herba, extractum).

Offic. *Aconitum*; Anglis, *Wolfbane*; Germanis, *Blauer Sturmhut*; Gallis, *Chaperon de Moine*.

ANEMONE PRATENSIS (Herba, extractum).

A. *Windflower*; Ge. *Windblume*; G. *Passefleurs*.

ARCTIUM LAPPÀ (Radix).

Off. *Bardana*; A. *Burdock-root*; Ge. *Klettenwurzel*; G. *Bardane*.

ASTRAGALUS EXSCAPUS (Radix).

ATROPA MANDRAGORA (Radix).

Off. *Mandragora*; A. *Mandrake*; Ge. *Alraun*; G. *Mandragore*.

BALSAMUM CANADENSE, ex PINU BALSAMEA.

A. *Canada Balsam*.

BALSAMUM COPAIVÆ, ex COPAIFERA OFFICINALI.

A. *Balsam of Copaiva*; Ge. *Copaiva Balsam*; G. *Baume Copaive*.

BALSAMUM PERUVIANUM, ex MYROXYLO BALSAMIFERA.

A. *Balsam of Peru*; Ge. *Peruvianischer Balsam*; G. *Baume de Peru*.

CANNABIS SATIVA (Semina).

A. *Hempseed*; Ge. *Hanfssaamen*; G. *Semences du Chauvre*.

CEANOTHUS AMERICANUS (Cortex interior; Radix).

A. *New Jersey Tea*; Ge. *Ceanothus*.

CINCHONA OFFICINALIS (Cortex).

Off. *Cortex Peruvianus*; A. *Peruvian Bark*; Ge. *Fieberrinde*; G. *Kinkina*.

CLEMATIS RECTA (Folia).

Off. *Flammula Jovis*; A. *Upright Lady-bower*; Ge. *Waldrebe*; G. *Clematite*.

CONIUM MACULATUM (Herba, Folia, extractum).

Off. *Cicuta*; A. *Henlock*; Ge. *Schierling*; G. *Ciguë*.

DAPHNE LAUREOLA

——— MEZEREUM

} Radix, et Cortex radicis.

Off. *Mezereum*; A. *Mezereon*; Ge. *Seidelbast*; G. *Garou*.

GEUM NIVALE (Radix).

GLYCYRRHIZA GLABRA et ECHINATA (Radix; succus inspissatus, vulgo extractum).

Off. *Liquoritia*; A. *Liquorice*; Ge. *Süßholz*; G. *Reglisse*.

GUAJACUM OFFICINALE (Lignum, Cortex, Refina).

Off. *Lignum Sanctum*; A. *Guajac*; Ge. *Franzosenholz*.

GUMMI MIMOSÆ NILOTICÆ, vel MIMOSÆ SENEGAL.

Off. *Gummi Arabicum*; A. G. *Gum Arabic*; Ge. *Arabischer Gummi*.

HYOSCIAMUS NIGER (Extractum).

A. *Black Henbane*; Ge. *Bilsenkraut*; G. *Jusquiame*.

JUGLANS REGIA (Nux cum Cortice viridi, ejusque extractum).

Off. *Nux Juglans*; A. *Walnut*; Ge. *Walnuss*.

JUNIPERUS SABINA (Folia).

Off. *Sabina*; A. *Savin*; Ge. *Sevenbaum*; G. *Sabine*.

LAURUS SASSAFRAS (Lignum, Cortex, Radix).

Off. A. Ge. G. *Sassafras*.

LEDUM PALUSTRE (Folia cum Floribus).

Off. *Rosmarinus Sylvestris*; A. *Bohemian Rosemary* or *Hilrose*.
Ge. *Wilder Rosmarin*; G. *Rosmarin Sauvage*.

LOBELIA SYPHILITICA (Radix).

MALVA ROTUNDIFOLIA (Herba, Folia).

ONONIS SPINOSA (Radix).

PAPAVER SOMNIFERUM (Succus inspissatus).

Off. A. G. *Opium*; Ge. *Mohnsaft*.

PRUNUS PADUS (Cortex).

RANUNCULUS ABORTIVUS (Radix).

SAPONARIA OFFICINALIS (Folia, Herba).

A. *Seifenwort*; Ge. *Seifenkraut*; G. *Saponaire*.

SMILAX SARSAPARILLA (Radix).

Off. A. Ge. *Sarsaparilla*; G. *Salsepareille*.

SOLANUM DULCAMARA (Stipites).

Off. *Dulcamara*; A. *Bittersweet*; Ge. *Bittersüßs*; G. *Morelle Grimpe*.

TREBINTHINA LARIGNA, EX PINU LARICE.

Off. *Terebinthina Veneta*; A. *Venetian Turpentine*; Ge. *Terpentin*; G. *Terebintine*.

TORMENTILLA ERRECTA (Radix).

A. *Septfoil*; Ge. *Birkwurzel*; G. *Tormentille*.

Ex Regno Animalii.

HIRUDO MEDICINALIS.

A. *Leeches*; Ge. *Blutigel*; G. *Sangsuë*.

LAC HUMANUM, ALIORUMQUE ANIMALIUM.

MELOE VESICATORIUS (Emplastrum, Tinctura).

Off. *Cantharis*; A. *Cantharides*; Ge. *Spanische Fliegen*; G. *Mouche Cantharide*.

Ex Regno Minerali.

ANTIMONIUM feu STIBIUM.

Antimonium Sulphuratum.

Off. *Antimonium Crudum*; A. *Antimony*; Ge. *Spießglas*; G. *Antimoine*.

Præparat. Sulphur Antimonii.

Antimonium Muriatum.

Off. *Butyrum Antimonii*; f. *Causiticum Antimoniale*.

ARGENTUM.

Præparat. Argentum Nitratum.

Off. *Lapis infernalis*, *Causiticum lunare*; A. *Lunar Causitic*; Ge. *Hellenstein*; G. *Pierre infernal*.

ARSENICUM CALCINATUM.

Off. *Arsenicum Album*; A. *White Arsenic*.

CUPRUM.

CUPRUM.

Præparat. Cuprum Acetatum.

Off. *Ærugo*; S. *Viride Æris*; A. *Verdegris*;
Ge. *Grünspan*; G. *Verd de gris*.

Cuprum Vitriolatum.

Off. *Vitriolum Cupri*; f. *Cyprinum*; f. *Cæruleum*; A. *Blue Vitriol*; Ge. *Kupfer-Vitriol*; G. *Vitriol de Cuivre*.

Aurichalcum (Pulvis).

FERRUM.

Præparat. Ferri Limatura.

Calx Ferri nigra. Off. *Æthiops Martialis*.

———— rubra. Off. *Ochra*.

Ferrum Muriatum.

Off. *Flores Salis Ammoniaci Martiales*.

Ferrum Saccharatum. Off. *Mars Saccharatus*.

Ferrum Tartarifatum.

Ferrum Vitriolatum. Off. *Vitriolum ferri, Sal Martis*.

PLUMBUM.

Præparat. Calx Plumbi; seu Plumbum Calcinatum.

Off. *Lithargyrum*; A. G. *Litharge*; Ge. *Bleyglatte*.

Plumbum Acetatum.

Off. *Saccharum Saturni*; A. *Sugar of Lead*; Ge. *Bleyzucker*.

Calx Plumbi Acetata. Off. *Cerussa*.

Acetum Plumbatum.

Off. *Acetum Saturni*; f. *Lithargyri*; f. *Extractum Saturni*; f. *Extractum Goulardi*.

ZINCUM.

Præparat. Calx Zinci.

Off. *Tutia Præparata*; f. *Lapis Calaminaris*.

Calx Zinci Sublimata; f. Zincum Calcinatum

Off. *Flores Zinci*.

Zincum

Zincum Vitriolatum.

Off. *Vitriolum Zinci*; f. *Album*; A. *Whit. Vitriol*;
Ge. *Zink-vitriol*; G. *Vitriol de Zinc*.

HYDRARGYRUM, ejusque Præparata varia, in Tabula sequenti exhibentur.

TABULA exhibens diversa, ex HYDRARGYRO PRÆPARATA et COMPOSITA, hæcenus cognita †.

I. HYDRARGYRUM SIMPLICITER PURIFICATUM.

* Hydrargyrum purificatum.

A. *Quicksilver, crude purified mercury*; Ge. *Reines quecksilber*; G. *Mercure pure*.

Syn. *Mercurius crudus purificatus officinarum*.

Argentum vivum purificatum.

II. PRÆPARATA IN QUIBUS HYDRARGYRUM SOLUMMODO DIVISUM ESSE VIDETUR.

1. Decoctum Hydrargyri, i. e. Hydrargyrum simpliciter in aqua coctum.

2. Extracto Glycyrrhizæ subactum.

3. Gummi aut mucilagine, e. g. Gummi Arabico, Tragacanthæ, &c.

* Hydrargyrum gummofum.

Syn. *Mercurius gummofus, inventore Plenck*.

COMPOSITA.

† Litteræ, quibus præparata et composita notantur, significant: O. *Officinarum*; L. *Pharmacopœa Londinensis*; S. *Pharm. Suecica*; D. *Pharm. Danica*; E. *Pharm. Edinburgensis*; B. *Dispensatorium novum Brunswicense*; E. *paup. Pharm. Edinburgensis pauperum*; T. *Pharm. Nofocomii Sti. Thomæ Londinensis*; G. *Pharm. Nofocomii Sti. Georgii Londinensis*.

COMPOSITA.

- * α . Pilulæ ex hydrargyro gummoso.
Syn. Pilulæ ex mercurio gummoso. *Plenck. Pharm. Chir.*
 - β Solutio mercurialis gummosa. *Ibid.*
 - Syn.* Mixtura mercurialis. *G.*
 - γ Potio mercurialis. *B.*
 - δ Lac mercuriale. *Plenck.*
4. Refina aut Balfamo; e. g. Terebinthina, Balfamo Copaivæ, &c.
 * Hydrargyrum terebinthinatum, &c.

COMPOSITA.

- * Pilulæ ex hydrargyro terebinthinato.
 - Pilulæ mercuriales. *L.*
 - Pilulæ mercuriales laxantes. *G.*
 - Pilulæ mercuriales sialagogæ. *D.*
 - Injectio mercurialis. *E. Paup.*
5. Pinguedine animali aut oleis unguinosis; e. g. Axungia porcina, anserina; butyro Cacao.
- * Hydrargyrum unguinosum.
 - * Unguentum hydrargyri. Vid. infra *Hydrargyrum Sebinum.*
Syn. Unguentum ex hydrargyro cœruleum. *E.*
 Unguentum mercuriale, seu unguentum Neapolitanum.

COMPOSITA.

- α Unguentum cœruleum fortius. *L.*
 - Unguentum cœruleum mitius. *L.*
 - Unguentum mercuriale. *D.*
 - β Ceratum mercuriale. *L.*
 - γ Emplastrum mercuriale. *O.*
 - Emplastrum ex hydrargyro. *E.*
 - Emplastrum ex gummi ammoniaco cum mercurio. *L.*
 - Emplastrum commune cum mercurio. *L.*
 - Emplastrum de ranis cum mercurio.
6. Terra Calcarea; e. g. Creta, Lapidibus aut Chelis Cancrorum, &c.
 Mercurius alkalifatus. *E.*
 Pulvis mercurialis. *G.*

III. PRÆPARATA IN QUIBUS HYDRARGYRUM, MEDIANTE IGNE ET LIBERO AERIS ACCESSU, IN CALCEM VERTITUR.

- * Hydrargyrum calcinatum.
Syn. Mercurius calcinatus. *L. S.*
 Mercurius præcipitatus per se. *L.*

COMPOSITA.

- * Pilulæ ex hydrargyro calcinato.
Pilulæ sypphiliticæ. *T.*
- Pilulæ ex mercurio calcinato. *G.*
- Pilulæ ex mercurio calcinato anodynæ. *G.*

IV. PRÆPARATA IN QUIBUS HYDRARGYRUM PARTIM DIVISUM, PARTIM SOLUTUM ESSE VIDETUR.

1. Saccharo, Manna, Conferva Rosarum, Cynosbati, &c.
* Saccharum hydrargyratum.

COMPOSITA.

- * Trochisci ex hydrargyro saccharato.
Bolus cœruleus. *T.*
- Bolus mercurialis. *G.*
- Syrupus Hydrargyri. *S.*
- * Mel hydrargyratum.

COMPOSITA.

- Pilulæ Æthiopicæ. *E.*
- Pilulæ mercuriales purgantes. *E. paup.*
- Pilulæ Bellosti.

3. Sulphure purificato.

- * Hydrargyrum sulphuratum.
a Trituratione aut fusione.
- * Hydrargyrum sulphuratum nigrum.
Æthiops mineralis. *O.*

COMPOSITA.

- Pulvis Æthiopicus. *G.*

b Sublimatione.

- * Hydrargyrum sulphuratum rubrum.
Cinnabaris factitia, seu artificialis. *O.*

COMPOSITA.

- Pulvis antilyssus Sinensis. *O.*

c Præcipitatione. Vid. infra *Hydrargyrum vitriolatum.*

4. Sulphure Antimonii.

- a Trituratione.
- * Sulphur antimonii hydrargyratum.
Æthiops antimonialis. *O.*

COMPOSITA.

- Pilulæ Æthiopicæ. *E. D.*

b Sublimatione.

- Sulphur antimonii hydrargyratum rubrum.
Syn. Cinnabaris antimonii. *O.*

COMPOSITA.

Bolus Cinnabarinus. G.

V. PREPARATA IN QUIBUS HYDARGYRUM MEDIANTE ACIDO
IN FORMAM SALIS AUT CALCIS MUTATUM EST.

1. Acido Sebi. 2. Acido Muriatico. 3. Acido Sacchari. 4. Acido Succini. 5. Acido Arfenici. 6. Acido Acetofellæ. 7. Acido Phosphori. 8. Acido Vitrioli. 9. Acido Sacchari Lactis. 10. Acido Tartari. 11. Acido Citri. 12. Acido Nitri. 13. Acido Fluoris immeralis. 14. Acido Aceti. 15. Acido Boracis. 16. Acido cærulei Berolinensis. 17. Acido Molybdæni. 18. Acido Tungstenico. 19. Acido aëreo.

I. *Hydrargyrum cum acido sebi combinatum.*

Hydrargyrum sebinum.

- *
- Præp.*
- Unguentum hydrargyri.

II. *Cum acido muriatico.*

- * Hydrargyrum muriatum.

- *
- Hydrargyrum muriatum fortius.*

A. Sublimatione.

- * Hydrargyrum muriatum fortius sublimatum,

Syn. Mercurius sublimatus corrosivus.

Mercurius sublimatus albus. O.

Mercurius cum sale ammoniaco sublimatus.

B. Præcipitatione.

Ex acido nitri mediante acido muriatico dephlogificato, inventore *Bertholet*.

Hydrargyrum muriatum fortius præcipitatum.

COMPOSITA.

- α Solutio sublimati spirituosa (
- Van Swieten*
-).

Syn. Solutio mercurii sublimati corrosivi. E.

Mixture mercurialis. S.

Mercurius sublimatus solutus. G.

- β * Solutio hydrargyri muriati fortioris aquosa.

Pilulæ e mercurio corrosivo albo. S.

*Dr Ward's white drop.**Syrop du Cuisinier.*

- γ * Lotio sypilitica flava, s. lotio ex hydrargyro muriato fortiori.

Syn. Aqua phagedænica. O.

Liquor mercurialis. A.

Lotio Mercurialis. T.

- δ Solutio sublimati balsamica.
- Plenck*
- .

- ε * Liquor ad condylomata.

Syn. Aqua caustica pro condylomatibus. *Plenck*.

- *
- Hydrargyrum muriatum mitius*
- ; i. e. acidum muriaticum hydrargyro superfaturatum.

A. Sublimatione.

Syn. Mercurius dulcis (sublimatione paratus). *O.*

Mercurius dulcis sublimatus. *L.*

Calomel feu calomelas. *L.*

Aquila alba.

Panacea mercurialis.

Mercurius dulcis lunaris. *Schroeder.*

B. Præcipatione.

Ex acido nitroso mediante sale communi, inventore *Scheele.*

* Hydrargyrum muriatum mitius præcipitatum.

Mercurius præcipitatus dulcis.

Calx hydrargyri muriata præcipitata.

a Ex acido muriatico mediante alkali vegetabili.

Mercurius præcipitatus albus. *L.*

b Ex acido muriatico mediante alkali minerali.

Mercurius præcipitatus albus. *A.*

c Ex acido muriatico mediante alkali volatili,

Mercurius præcipitatus albus. *E.*

d Ex acido muriatico mediante cupro.

Mercurius præcipitatus viridis. *E.*

COMPOSITA.

Bolus mercurialis. *E.*

Bolus jalappæ cum mercurio. *Ib.*

Bolus rhei cum mercurio. *Ib.*

Pilulæ calomelanos. *G.*

Pilulæ Plummeri. *E.*

Pilulæ alterantes Plummeri. *O.*

Pilula depurans. *T.*

Pulvis Plummeri. *O.*

Pilulæ mercuriales purgantes. *A.*

Pilulæ catarrhales purgantes. *D.*

Pilulæ laxantes cum mercurio. *Ib.*

Pulvis e scammonio cum mercurio. *T.*

* Lotio sypilitica nigra, lotio ex hydrargyro muriato mitiori,

Syn. Lotio mercurialis. *G.*

Unguentum e mercurio præcipitato. *L.*

Linimentum mercuriale. *E. Paup.*

III. *Cum acido sacchari.*

a Hydrargyrum saccharatum. *Bergman.*

* b Saccharum hydrargyratum, feu

Hydrargyrum saccharo cando subactum.

IV. *Cum acido succini.*

Hydrargyrum succinatum. *Bergman.*

V. *Cum acia arsenici.*Hydrargyrum arsenicatum. *Bergman.*VI. *Cum acido oxalis acetoselle.*Hydrargyrum oxalinum. *Bergman.*VII. *Cum acido phosphorico.*Hydrargyrum phosphoratum. *Bergman.*

Præcipitatione ex acido nitroso mediante urina recenti.

Rosa mineralis. *O.*VIII. *Cum acido vitriolico.*

* a Hydrargyrum vitriolatum.

Vitriolum mercurii. *O.*Oleum mercurii. *O.*

b Hydrargyrum vitriolatum flavum.

Turpethum minerale. *O.*Mercurius emeticus flavus. *L.*Mercurius flavus. *E.*Mercurius præcipitatus luteus. *D.*Turpethum nigrum. *O.*

c Hydrargyrum præcipitatum ex acido nitroso mediante hepate sulphuris aut calcis.

Mercurius præcipitatus niger. *O.*IX. *Cum acido sacchari lactis.*X. *Cum acido tartari.*a Hydrargyrum tartarifatum. *Bergman.** b Tartarus hydrargyratus; i. e. hydrargyrum cum tartaro purificato unitum. *Terre feuilletée mercurielle*, inventore *Pressavin.*

c Præcipitatione ex acido nitroso mediante acido tartari.

* Hydrargyrum tartarifatum flavum; vulgo, *Pulvis Constantinus.*

d Præcipitatione ex acido muriatico et acido tartari junctis mediante alkali vegetabili.

* Hydrargyrum tartarifatum album; vulgo, *Pulvis argenteus.*XI. *Cum acido citri.*Hydrargyrum citratum. *Bergman.*XII. *Cum acido nitroso.*

* Hydrargyrum nitratum.

a Calcinatum mediante igne.

* Hydrargyrum nitratum rubrum.

Mercurius corrosivus ruber. *L. E.*Mercurius præcipitatus ruber. *O.*Pulvis principis. *O.*Mercurius corallinus. *L.*Mercurius tricolor. *O.*Panacea mercurii. *O.*

Arcanum corallinum.
Panacea mercurii rubra. *O.*

COMPOSITA.

Balsamus mercurialis. *Plenck.*
Unguentum ophthalmicum. *St Ives.*
Balsamum ophthalmicum rubrum. *D.*
Unguentum præcipitatum. *G.*
Unguentum ad lippitudinem. *T.*
Unguentum mercuriale rubrum. *D.*
Unguentum pomatum rubrum. *D.*

* b Acidum nitri hydrargyratum; i. e. hydrargyrum in acido nitroso solutum.
Solutio mercurii. *E.*

COMPOSITA.

Unguentum citrinum. *E. S.*

* c Præcipitatione.

Ex acido nitri mediante alkali volatili.

α Hydrargyrum nitratum cinereum.

Pulvis mercurii cinereus. *E.*

Turpethum album. *O.*

β Ex acido nitroso mediante alkali volatili vinofo (spiritu falis ammoniaci vinofo).

Turpethum nigrum.

Mercurius præcipitatus niger.

γ Ex acido nitroso mediante alkali vegetabili.

Mercurius præcipitatus fuscus, inventore *Würtz.*

δ Ex acido nitroso mediante cupro.

Mercurius præcipitatus viridis. *B.*

XIII. *Cum acido fluoris mineralis.*

- Hydrargyrum fluoratum. *Bergman.*

XIV. *Cum acido aceti.*

* Hydrargyrum acetatum. *Bergman.*

COMPOSITA.

Trochisci, S. pilulæ *Keyseri.*

XV. *Cum acido boracis.*

Hydrargyrum boraxatum. *Bergman.*

XVI. *Cum acido cærulei Berolinensis.*

XVII. *Cum acido molybdænæ.*

XVIII. *Cum acido tungstenicæ.*

XIX. *Cum acido aëreo.*

Hydrargyrum aëratum. *Bergman.*

II. COMPOSITA*.

AQUA PICEA.

℞ Picis liquidæ, libras duas;

Aquæ libras octo.

In vase ligneo mixta agita baccillo ligneo: deinde per duodecim horas subfidat, pix et aqua decantetur.

AQUA PLUMBATA (vulgo Aqua Saturnina *Goulardi*).

℞ Aquæ distillatæ, libras duas;

Spiritus vini, unciam unam;

Aceti plumbati, unciam femis.

AQUA CALCIS.

℞ Calcis recenter ustæ, libram unam.

Sensim affunde aquæ libras octo.

Ebullitione, quæ inde oritur, peracta, vas agitur: deinde subfidat calx, et aqua per chartam colata in lagenis rite oclusis fervetur.

BOLUS EX HYDRARGYRO.

℞ Hydrargyri puri, grana decem.

Extracti glycyrrhizæ, scrupulum unum.

Terantur simul, donec globuli hydrargyri perfecte disparuerint.

Fiat Bolus.

BOLUS EX HYDRARGYRO CALCINATO.

℞ Hydrargyri calcinati,

Succi papaveris somniferi inspissati, ana granum unum femis.

Extracti glycyrrhizæ, quantum satis.

Misce, fiat bolus.

BOLUS

* In formulis sequentibus nomen genericum et specificum plantarum adhibitarum Linneæanum ubique retinui; ita tamen, ut dum nomen plantæ genericum et specificum ex duobus substantivis compositum est, primum ubique indeclinatum, majoris conspiciuntur causæ, reliqui.

BOLUS EX HYDRARGYRO COMPOSITUS.

℞ Hydrargyri muriati mitioris præcipitati granum unum—duo.
 Sulphuris antimonii, grana duo—quatuor.
 Succı papaveris fonniferi inspissati, granum unum.
 Confervæ cynosbati, vel
 Extracti glycyrrhizæ, quantum fatis,
 Ut fiat bolus.

CATAPLASMA DISCUTIENS.

℞ Micæ panis, quantum placet.
 Aquæ plumbatæ, quantum fatis, ut fiat cataplasma; frigide
 applicandum.

CATHETERES.

Ex argento, melius ex refina elastica variæ magnitudinis.

CEREI.

Ex refina elastica; aut ex chordis muficis ex intestinis ovium
 confectis, variæ magnitudinis.

CEREI MEDICATI.

℞ Ceræ flavæ liquefactæ, libram unam.
 Sebi phyfeteris macrocephali (vulgo sperma ceti), drachmas tres.
 Aceti plumbati, drachmas duas—unciam unam.
 Commixtis et ab igne remotis, immerge telas tenues, ex quibus
 fiant lege artis cerei,

CEREI MEDICATI (inventore *Le Dran*).

℞ Herbæ conii maculati,
 Foliorum nicotiana-tabaci,
 Summitatum florentium hyperici perforati,
 Radicis iridis Florentinæ, ana manipulum unum.
 Infunde in decocti nucum juglandis regiæ, libra una.
 Adde, herbæ anchufæ officinalis, libram unam, (N. unde color
 ruber)
 Axungię porcınæ,
 ——— ovillæ curatæ, ana libras tres.
 Mifce super ignem; dein adde
 Ceræ flavæ, libras duas.

DECOCTUM ASTRAGALI.

℞ Radicis astragali excapi, unciam semis.

Coque in aquæ fontis libra una semis ad colaturam libræ unius,
Sumat tepide mane et vespere.

DECOCTUM DULCAMARÆ.

℞ Stipitum folanum-dulcamaræ recentium, drachmam semis.

Coque in aquæ fontanæ libra una, ad colaturam libræ semis,
Sumat quotidie cum anatica portione lactis.

DECOCTUM GUAJACI.

℞ Ligni et corticis guajaci officinalis rasi, libram unam.

Infunde in aquæ fervidæ libris octo

Per viginti quatuor horas; dein lento igne coque per sex horas;
addendo, sub finem coctionis,

Spiritus vini rectificati uncias quatuor,

Radicis glycyrrhizæ uncias duas.

Cola. Sumat libram semi bis de die.

Massa a colatura residua denuo coquatur cum aquæ libris octo
per bihorium, cola,

Utatur hoc decocto secundario loco potus ordinarii.

DECOCTUM GUAJACI COMPOSITUM.

℞ Ligni et corticis guajaci officinalis, uncias sex.

Radicis laurus-sassafras, uncias quatuor.

Coque in aquæ fontanæ libris viginti quatuor

Ad libras duodecim; sub finem coctionis adde,

Radicis glycyrrhizæ, vel passularum, uncias duas.

Cola. Sumat libras duas de die.

DECOCTUM LAPPÆ.

℞ Radicis arctium-lappæ, uncias tres.

Coque in aquæ fontanæ libris tribus,

Ad colaturam librarum duarum.

Sumat de die.

DECOCTUM LOBELIÆ.

℞ Radicis lobeliæ sypiliticæ siccatæ, manipulum unum.

Coque in aquæ fontanæ libris duodecim,

Ad colaturam librarum sex vel novem.

Sumat libram semis bis de die in initio, deinde libram semis qua-
ter de die, donec vim purgantem amplius ferre non possit; tunc
desistat

defiſtat per tres aut quatuor dies, dein iterum continuet, donec curatus fuerit.

Nota. Eodem modo paratur decoctum radicis ceanothi Americani.

DECOCTUM LUSITANICUM.

℞ Radicis ſmilax-ſarſaparillæ,
Ligni laurus-ſaſſafras,
— pterocarpi fantolini (vulgo fantoli rubri),
— guajaci officinalis, ana uncias tres.
Radicis daphne-mezerei, unciam unam.
Seminum coriandri fativi, drachmas ſex—unciam unam.
Coque in aquæ fontanæ libris viginti, ad libras decem.
Sumat libram unam—tres de die.

Aliter:

℞ Radicis ſmilax-ſarſaparillæ,
Ligni pterocarpi fantolini,
— fantoli albi, ana uncias tres.
Radicis glycyrrhizæ,
— daphne-mezerei, ana unciam ſemis,
Ligni geniſtæ Canarienſis (vulgo lignum Rhodium),
— guajaci officinalis,
— laurus-ſaſſafras, ana unciam unam.
Antimonii fulphurati, uncias duas.
Miſce, et infunde in aquæ fervidæ libris decem per viginti quatuor horas, dein coque ad colaturam librarum quinque.
Sumat libram unam ſemis—libras quinque—quotidie.

DECOCTUM MEZEREI.

℞ Corticis radicis, vel Radicis, daphne-mezerei, unciam ſemis—unam.
Coque in aquæ fontanæ libris ſex, ad libras quatuor.
Sub finem coctionis adde,
Radicis glycyrrhizæ, unciam unam. Cola.
Sumat quotidie libram unam—libras quatuor, prout ventriculus ferat.
Nota. Quidam corticem radicis radici præferunt.
Ab aliis daphne-laureola daphne-mezereo præfertur.

DECOCTUM PRUNUS-PADI.

℞ Corticis prunus-padi, uncias ſex—oſto.
Coque in aquæ marinæ, vel, in ejus defectu,
Aquæ fontanæ libris ſex, ad colaturam librarum trium—quatuor.
Sumat libram ſemis quater de die.

DECOCTUM SAPONARIÆ.

- ℞ Herbæ saponariæ officinalis recentis contusæ, libram unam.
 Aquæ fontanæ, libras sedecim,
 Coque ad colaturam librarum octo.
 Bibat æger libras duas—quatuor—de die.

DECOCTUM SARSAPARILLÆ.

- ℞ Radicis smilax-sarsaparillæ, uncias tres.
 Infunde in aquæ fervidæ libris tribus, per duodecim horas.
 Dein coque ad colaturam librarum duarum.
 Sumat quotidie, si placet, cum lacte.

DECOCTUM SARSAPARILLÆ CUM MEZEREIO.

- ℞ Radicis smilax-sarsaparillæ, uncias tres.
 Corticis radicis daphne-mezerei, drachmas duas.
 Coque in aquæ fontanæ libris tribus ad libras duas.
 Sub finem coctionis, adde,
 Radicis glycyrrhizæ, unciam unam,
 Sumat quater de die, libram semis.

DECOCTUM SYPHILITICUM *Tvonis Gaukes.*

- ℞ Ligni guajaci officinalis rafi, uncias tres.
 — juniperi communis, uncias duas.
 Radicis smilax-chinæ, unciam unam.
 Hydrargyri purificati, in sacco linteo humido ligati,
 Antimonii sulphurati, in sacco separatim ligati, ana unciam
 unam.
 Infunde in aquæ fervidæ libris duodecim, per duodecim horas;
 dein coque ad libras sex.
 Sub finem coctionis, adde,
 Radicis glycyrrhizæ, uncias duas. Cola.
 Sumat uncias triginta—quadraginta, calide, quotidie per 30 ad 50
 dies.

DECOCTUM SYPHILITICUM ROBORANS.

- ℞ Antimonii sulphurati, pulverisati, et in petia ligati, uncias
 quatuor.
 Lapidis pumicis, pulverisati, et in petia separatim ligati, un-
 cias duas.
 Radicis smilax-sarsaparillæ,
 — smilax-chinæ, ana uncias duas.
 Nucum juglandis regię immaturarum, cum hilis, putaminibus,
 et cortice viridi siccatarum, Num^o quadraginta.

Concisa,

Concisa, mista, coque in aquæ fontanæ libris viginti ad libras decem.

Remanentem liquorem, per linteum colatum, quatuor lagenis inde, quæ bene clausæ, ufui ferventur.

Sumat dimidium lagenæ mane, et dimidium vespere, tepide.

Magma decocti denuo coquatur cum aqua, ut ante; quo decocto secundo abluantur loca ulceribus, aliisque cutis morbis infecta.

N. B. Hoc decoctum a quibusdam supponitur esse genuinum ita dictum *Decoctum Lusitanicum*.

DECOCTUM SYPHILITICUM ROSETTI.

℞ Antimonii sulphurati, unciam unam.

Corticis Drymi Winterani recenter pulverisati, drachmam semis.

Mixta, in mortareo marmoreo pistillo marmoreo optime inter se terantur; dein adde

Cretæ puræ, unciam semis.

Triturentur denuo per horam integram in eodem mortario, pulvis subtilis fervetur pro sequenti decocto:

℞ Radicis arctium-lappæ, uncias tres.

————— smilax-sarsaparillæ, uncias duas.

————— smilax-chinæ (*N. B.* Genuinæ orientalis, vel in ejus defectu occidentalis selectissimæ), unciam unam.

————— convolvulus-mechoacanæ, unciam semis (in lue mediocri).

————— drachmas sex (in lue vehementiori).

————— glycyrrhizæ, drachmas tres—sex.

Corticum viridum nucum juglandis regiæ, grosso modo pulverisatæ, unciam unam (in lue mediocri).

————— uncias duas—tres (in lue pessima, præcipue si simul Blennorrhœa adfit inveterata).

Seminum coriandri fativi, drachmas duas.

Incisa et mixta infundantur in aquæ fontanæ libra una semis per duodecim horas, dein coque ad libram unam; colaturæ adde,

Pulveris supra dicti, drachmas tres (in lue mediocri),

————— unciam semis (in lue vehementiori),

————— drachmas sex (in lue desperata cum topiis, ulceribus, &c.)

Sumat libram semis omni mane, et libram semis vespere, cum pulvere sequente:

℞ Radicis smilax-chinæ orientalis, subtilissime pulverisati, drachmam unam.

Ligni laurus-sassafras subtilissime pulverisati, scrupulos duos (in lue mediocri).

Ligni

Ligni laurus-sassafras subtilissime pulverisati, drachmas duas—sex
(in casu graviori, et tunc semina coriandri ex decocto præcedenti omittenda sunt).

Durante usu hujus decocti, æger ab acidis abstineat; et ante usum ejus, per triduum quotidie fumat purgans sequens:

- ℞ Hydrargyri muriati mitioris, grana decem.
 Resinæ jalappæ pineis subactæ, grana octo.
 Trochiscorum alhandal pineis subactorum, grana quatuor.
 Terebinthinæ Venetæ, quantum fatis, ut fiant pilulæ N° quindecim, pulvere glycyrrhizæ inspergendæ.
 Sumat pro dosi. (N. B. Hanc dosi nemedicamenti hujus drastici pauci ægri, precipue per triduum continuando, ferre poterunt; hinc dosis ætati et temperamento, &c. adaptanda erit, vel potius aliud purgans simplicius præscribere prestabit.)

ELECTUARIUM.

- ℞ Pulveris tragacanthæ compositi, drachmas duas.
 ——— gummi arabici, drachmas sex.
 ——— rhei, scrupulum unum.
 Conservæ florum malvæ, uncias duas.
 Syrupi althææ, quantum fatis, ut fiat electuarium.
 Sumat cochleare parvulum ter aut quater de die.

ELECTUARIUM LAXANS.

- ℞ Electuarii lenitivi,
 Alkali vegetabilis tartarisati, vulgo tartari solubilis, ana unciam unam.
 Misce, fiat electuarium.

EMULSIO AMYGDALINA.

- ℞ Amygdalarum dulcium decorticatarum, uncias duas.
 Terantur in mortario; successe addendo
 Aquæ fontanæ libras duas,
 ——— cinnamomi tenuis, uncias duas,
 Sacchari albi quantum fatis ad gratiam.

INJECTIO AD BLENNORRHAGIAM INCIPIENTEM.

- ℞ Cupri acetati, drachmam unam.
 Liquoris alkali volatilis (vulgo spiritus salis ammoniaci), quantum fatis ad solutionem.
 Guttæ quatuor hujus liquoris cum uncia una aquæ commixtæ injiciantur quater aut sexies de die.

INJECTIO AD BLENNORRHAGIAM INCIPIENTEM ALIA.

- ℞ Hydrargyri muriati fortioris, granum semis—unum.
 Plumbi acetati, grana quindecim—drachmam semis.
 Aquæ fontanæ, libras duas.
 Misce, injiciat portionem omni semihora.

INJECTIO AD BLENNORRHAGIAM.

- ℞ Olei olivarum dulcis, uncias tres.
 Injiciat ter quaterve de die portionem.

INJECTIO AD BLENNORRHAGIAM SYPHILITICAM.

- ℞ Succu papaveris fomniferi inspissati, vel
 Extracti hyosciami nigri, drachmam unam.
 Terendo adde successe
 Infusi feminum lini,
 Olei olivarum dulcis, ana uncias quatuor.
 Unguenti hydrargyri, drachmas duas—unciam semis.
 (Quidam hujus loco præferunt hydrargyri muriati mitioris
 cum pulveris e cerussa compositi drachma una, triti, grana
 quinque—octo.)
 Misce, injiciat quater de die, reddito prius lotio.

INJECTIO AD BLENNORRHOEAM PRIMA.

- ℞ Cupri acetati lævigati, unciam unam semis.
 Spiritus volatilis aromatici, Ph. Lond. uncias duas.
 Melis, drachmas duas.
 Misce; guttæ sex hujus liquoris cum aquæ tepidæ uncia una misce-
 antur, ejusque portio quater aut sexies de die injiciatur.

INJECTIO AD BLENNORRHOEAM SECUNDA.

- ℞ Hydrargyri muriati mitioris, unciam semis.
 Aquæ fontanæ, uncias octo.
 Misce agitando.

Vel,

- ℞ Hydrargyri muriati fortioris, grana quatuor.
 Aquæ fontanæ, uncias sedecim. Misce.

INJECTIO AD BLENNORRHOEAM TERTIA.

- ℞ Plumbi calcinati pulverisati, unciam unam.
 Hydrargyri muriati fortioris, drachmam semis.
 Aceti concentrati, uncias quinque.

Digere

Digere in loco calido per duodecim horas, sæpius agitata phiala;
Dein effunde liquorem per subsidentiam depuratum, qui fervetur
ufui.

Hujus liquoris drachmæ duæ—uncia femis, cum aquæ destillatæ
unciis quatuor misceantur, ejusque portio ter aut quater de die
injiciatur.

INJECTIO AD BLENNORRHOEAM QUARTA.

℞ Plumbi acetati,
Zinci vitriolati, ana grana octo.
Camphoræ pineis subactæ, grana quatuor.
Aquæ fontanæ, libram unam.
Misce, injiciatur portio sæpius de die.
Nota. Quandoque aluminis drachma femis additur.

INJECTIO AD BLENNORRHOEAM QUINTA.

℞ Hydrargyri muriati mitioris, scrupulum unum.
Olei amygdalarum, unciam unam.
Liquaminis myrrhæ, unciam femis.
Radici Tormentillæ erectæ pulverifatæ, drachmam unam.
Misce; portio hujus injiciatur ter quaterque de die.

INFUSUM CANNABIS.

℞ Seminum cannabis fativæ
Infunde in aquæ fervidæ libris quatuor. Per mediam horam,
Cola. Bibat pro potu ordinario cum sacchari quantum satis ad
gratiam.

INFUSUM LEDI PALUSTRIS.

℞ Ledi palustris, unciam femis.
Aquæ fervidæ, libram unam.
Stent per horam, cola.
Sumat libram femis ad libram unam de die.

INFUSUM MALVÆ.

℞ Foliorum malvæ rotundifoliæ, manipulos tres.
Infunde in aquæ fervidæ, libris quatuor.
Cola, pro potu ordinario cum saccharo.

LAC HYDRARGYRATUM.

- ℞ Hydrargyri purificati, drachmam unam.
 Gummi Arabici pulverifati, unciam femis.
 Mixta terantur in mortario non metallico ;
 Senfim addendo
 Syrupi papaveris albi, quantum fatis,
 Donec hydrargyrum perfecte difparuerit ; dein fenfim affunde
 Lactis vaccini bullientis, uncias octo.

LIQUOR AD CONDYLOMATA.

- ℞ Spiritus vini rectificati,
 Aceti concentrati, ana unciam unam femis.
 Hydrargyri muriati fortioris, drachmam unam.
 Aluminis,
 Camphoræ,
 Calcis plumbi acetatæ, ana drachmam femis.
 Mifce. Verrucæ aut condylomata penicillo hoc liquore madido
 femel vel bis de die tangantur.

LIQUOR STYPTICUS, feu SOLUTIO STYPTICA.

- ℞ Aluminis,
 Vitrioli cupri, ana uncias tres.
 Aquæ fontanæ, libras duas.
 Coquantur ad folutionem ; liquori filtrato adde
 Acidi vitriolici concentrati drachmam unam femis.

LOTIO PROPHYLACTICA.

- ℞ Hydrargyri muriati fortioris, drachmam unam.
 Terendo in mortario vitreo fenfim affunde
 Aquæ calcis recentis libras duas.
 Liquor in vafe claufo per fubfidentiam depuratus a fedimento flavo,
 et limpidus in lagena probe obturata, ufui fervetur.

LOTIO PROPHYLACTICA ALIA.

- ℞ Acidi nitri hydrargyrati, grana octo—duodecim.
 Aquæ deftillatæ, libram unam.

Vel,

- ℞ Hydrargyri muriati fortioris, grana decem—duodecim.
 Aquæ deftillatæ, libram unam.

Vel,

- ℞ Aquæ calcis recenter paratæ, quantum placet.

Vel,

- ℞ Alkali caustici, guttas sex.
 Aquæ destillatæ, quantum fatis,
 Ita ut mucum a lingua leniter tollat.

LOTIO SYPHILITICA FLAVA.

Eadem est ac *Lotio Prophylactica prima.*

LOTIO SYPHILITICA NIGRA.

- ℞ Hydrargyri muriati mitioris, drachmam unam.
 Aquæ calcis recentis, uncias quatuor.

LOTIO SYPHILITICA TONICA.

Vide supra *Decoctum Magmatis ex Decocto Syphilitico Roborante.*

LOTIO AD ULCERA SYPHILITICA.

- ℞ Spiritus Rosmarini, vel spiritus alius cujuscunque, quantum placet.
 Linteum carptum eodem madidum sæpius ulceri applicetur.
Nota. Idem quoque egregie servit pro lotionē prophylactica.

Vel,

- ℞ Acidi nitri hydrargyriati, grana quindecim.
 Aquæ destillatæ, libram unam.

Vel,

- ℞ Hydrargyri muriati fortioris, grana decem.
 Plumbi acetati, drachmam semis.
 Aquæ fontanæ, libram unam.
 Misce.

LOTIO AD ULCERA SYPHILITICA COMPOSITA.

- ℞ Aquæ calcis recentis, uncias duas.
 Tutæ preparatæ, grana undecim.
 Vitrioli cupri, grana tria—quatuor.
 Mellis rosacei, drachmam unam.
 Misce.

MIXTURA LAXANS.

- ℞ Gummi Arabici, unciam unam.
 Olei amygdalarum dulcis, uncias duas.
 Decocti hordei, uncias decem.
 Mannæ, unciam unam.
 Mellis, unciam semis.
 Misce, fumat cochlearia quatuor bis terve de die.

PILULÆ AD BLENNORRHOEAM.

- ℞ Cupri vitriolati, grana septem, cum semissa.
 Radicis rhei palmati, drachmam unam.
 Extracti cinchonæ officinalis, drachmas duas.
 Misce; fiant pilulæ N^o triginta.
 Sumat unam—quatuor de die.

Vel,

- ℞ Terebinthinæ coctæ, drachmas duas.
 Radicis rhei palmati pulverisati, drachmam unam.
 Misce, fiat massa dividenda in pilulas triginta sex.
 Sumat pilulas quatuor bis de die.

Nota. Quandoque adduntur limaturæ, vel calcis ferri, grana decem.

Vel,

- ℞ Gummi Arabici
 Radicis rhei palmati, ana unciam unam.
 Balsami copaivæ, quantum fatis, ut fiant pilulæ granorum quatuor.
 Sumat quatuor—sex—mane et vesperi.

PILULÆ EX HYDRARGYRO NITRATO.

- ℞ Hydrargyri nitrati cinerei, *Pb. Edin.* grana viginti quatuor.
 Tere cum extracti glycyrrhizæ quantum fatis ut fiant pilulæ N^o triginti quatuor, conspergendæ pulvere specierum aromaticarum.

PILULÆ EX HYDRARGYRO CALCINATO:

- ℞ Hydrargyri calcinati lævigati, grana octo.
 Extracti glycyrrhizæ, quantum fatis ut fiat massa dividenda in pilulas duodecim.

Nota. Quandoque adduntur massæ, extracti thebaici *Pb. Lond.* grana octo.

Sumat pilulam unam omni nocte, vel duabus noctibus continuis, intermissa tertia.

PILULÆ EX HYDRARGYRO MURIATO MITIORI.

- ℞ Hydrargyri muriati mitioris, drachmam femis.
 Succī papaveris fonniferi inspissati, grana quindecim.
 Tartari antimonialis, grana tria.
 Conservæ cynosbati, quantum fatis ut fiat massa dividenda in pilulas quindecim.
 Sumat pilulam unam omni nocte.

PILULÆ EX HYDRARGYRO VITRIOLATO.

- ℞ Hydrargyri vitriolati, grana quatuor.
 Balsami Tolutani, grana quinque.
 Succī papaveris fonniferi inspissati, granum femis.
 Misce. Fiant pilulæ duæ, quarum una vel ambæ de die fumantur.

PILULÆ EX HYDRARGYRO TEREBINTHINATO.

- ℞ Hydrargyri purificati, unciam unam.
 Terebinthinzæ optimæ, drachmam unam femis.
 Terantur simul, donec hydrargyrum perfecte disparuerit; addendo, si opus sit, guttulas aliquot olei terebinthinzæ; dein cum pulveris glycyrrhizæ, quantum fatis, fiant pilulæ octoginta.
 Sumat unam vel duas pilulas omni mane et pro re nata, etiam vespere.

PILULÆ EX HYDRARGYRO GUMMOSO.

- ℞ Hydrargyri purificati,
 Pulveris gummi Arabici, ana drachmas tres.
 Conservæ cynosbati, quantum fatis.
 Terantur in mortario vitreo vel marmoreo, donec globuli hydrargyri perfecte disparuerint; continuetur tunc trituratione adhuc per horam; dein adde
 Micæ panis albi, unciam femis.
 Subigantur bene in massam, ex qua formentur pilulæ granorum trium, pulvere magnesiæ vel glycyrrhizæ conspergendæ.
 Sumat pilulas sex omni mane et vespere.

Vel,

- ℞ Hydrargyri purificati, scrupulum unum.
 Amyli, drachmam unam.
 Formentur cum mucilaginis gummi Arabici quantum sufficit in pilulas viginti.
 Sumat duas quotidie.

PILULÆ LAXANTES.

- ℞ Aloes foccotrinæ, grana duodecim.
 Gummi gambogiæ, grana sex.
 Olei stellati anisi, guttas tres.
 Probe simul tritis adde
 Syrupi simplicis quantum satis ut fiat massa dividenda in pilu-
 las sex.
 Sumat pilulam unam vel duas vesperi.

PILULÆ PURGANTES.

- ℞ Massæ pilularum Rufi, drachmam semis.
 Resinæ jalappæ,
 Hydrargyri muriati mitioris, ana grana quatuor.
 Misce, fiant pilulæ N^o tres.
 Sumat pro dosi.

PULVIS AD BLENNORRHAGIAM.

- ℞ Nitri,
 Sacchari, ana grana quindecim.
 Camphoræ pineis subactæ, grana duo.
 Misce, fiat pulvis omni hora vel bihorio fumendus.
 * Multum a quibusdam laudatur.

Vcl,

- ℞ Gummi Arabici, scrupulum unum.
 Nitri, grana decem.
 Camphoræ pineis subactæ, granum unum—tria.
 Misce. Sumat pulverem hunc quater de die.

PULVIS SYPHILITICUS.

- ℞ Hydrargyri muriati mitioris præcipitati, grana duo.
 Sacchari, grana quindecim.
 Misce. Sumat omni nocte.

SOLUTIO GUMMOSA.

- ℞ Gummi Mimosæ niloticæ pulverifati (gummi Arabici), drach-
 mas duas.
 Solve in aquæ fervidæ, libris duabus.

SOLUTIO HYDRARGYRI MURIATI FORTIORIS.

℞ Hydrargyri muriati fortioris, grana sexaginta quatuor.
 Aquæ destillatæ, uncias quatuor.

Solutis adde

Salis ammoniaci, drachmam unani. Misce.

Sumat guttas sedecim in libra decocti farsaparillæ, vel malti, hordei, &c. omni die.

Pro re nata tinctura Thebaica additur, et dosis guttarum ad quadraginta octo gradatim augetur.

Nota. Sedecim guttæ solutionis hujus continent granum semis hydrargyri.

SYRUPUS HYDRARGYRI.

℞ Hydrargyri purificati, scrupulum unum.

Gummi Arabici, scrupulos tres.

Conservæ cynobati, quantum satis.

Tere in mortario non metallico, donec hydrargyrum penitus disparuerit; dein continuando triturationem adhuc per horam, adde

Syrupi simplicis, unciam unam semis.

Sumat mane et vespere quantum capit cochleare parvulum lignum vel eburneum.

TINCTURA FERRI.

℞ Ferri vitriolati,

Tartari purificati, ana uncias quatuor.

Aquæ fontanæ, libras sex.

Coquantur in vase ferreo sub continua agitatione, ad siccitatem fere, tunc in

Aquæ cinnamoni simplicis, unciis quatuor soluta, atque cum liquoris anodyni mineralis Hoffmanni diluta, digerantur, et filtrentur.

Vel melius,

℞ Limaturæ ferri puræ lævigatæ, unciam unam.

Acidi muriatici concentrati, quantum satis ut ferrum perfecte solvatur.

Solutio per aliquot tempus quieti exposita, filtreter; dein ex retorta vitrea in balneo arenæ destilletur ad siccitatem. Massa in retorta residua in loco humido seponatur, donec deliquefcatur. Massa deliquefcens phialæ epistomio vitreo instructæ immittatur, cique ætheris vitriolici concentrati uncia duæ addantur; tunc phiala exacte clausa probe agitetur, unde maxima pars ferri ætheri jungitur. Quamprimum æther ferro imprægnatus post brevem quietem supernatat, a liquore inferiori effunditur, et cum

cum dupla quantitate spiritus vini rectificatissimi miscetur, atque in vase vitreo exactissime obturato usui servatur.

Nota. Hæc tinctura est præparatio correctæ *Tinctura Nervine*, jure celebris, quæ diu secreta habita, nuper Imperatricis Roffiæ munificentia publici juris facta est.

TROCHISCI KEYSERI.

℞ Hydrargyri purificati, quantum placet.

Diuturna trituratione vertatur in pulverem nigrum, qui ex retorta sublimatus, longa denuo trituratione in aceto concentrato dissolvatur; addendo sub finem

Mannæ, quantum satis, ut fiant trochisci,

Nota. Tædiofo huic processui sequens præferri meretur.

TROCHISCI EX HYDRARGYRO ACETATO.

℞ Hydrargyri nitrati rubri, quantum placet.

Cum aceto destillato coquatur ad ficitatem. *Massa residua cum manna, lege artis, in trochiscos formetur,*

TROCHISCI EX SACCHARO HYDRARGYRATO.

℞ Hydrargyri purificati, unciam unam.

Sacchari candi, uncias duas.

Triturentur, donec hydrargyrum perfecte disparuerit; tunc ex massa, lege artis, fiant trochisci ponderis drachmæ dimidiæ.

VINUM ROBORANS AD BLENNORRHOEAM.

℞ Corticis cinchonæ officinalis, uncias duas.

Gallarum, drachmas duas.

Caryophyllorum aromaticorum, drachmam femis.

Pulverifata infunde in

Vini rubri libra una per biduum, sæpius agitando; liquorem per subsidentiam depuratum effunde, et massam residuam cum aquæ fontanæ, libra infunde per horam. Cola, et misce cum priori.

Sumat cochlearia quatuor majora ter quaterve de die.

VINUM TONICUM.

℞ Corticis cinchonæ officinalis subtilissime pulverifati, unciam unam femis.

Infunde in vini generosi unciiis sedecim ber biduum, sæpius agitando,

Dein effunde liquorem per subsidentiam depuratum, eique adde Olei cajeput (ex foliis melaleuca-leucadendri destillatione obtenti), cum sacchari albi, uncia una triti, guttas quadraginta octo.

Liquoris anodyni mineralis, uncias duas.

Sumat uncias duas—tres, bis terve de die.

UNGUENTUM HYDRARGYRI.

℞ Adipis suilli recentis curati, uncias duas.

Liquefiat leni calore, et dum ab igne remotus spissescere incipit, adde gradatim, triturando,

Hydrargyri purificati, uncias duas,

Continuando triturationem, postquam hydrargyrum omne disparuerit, adhuc per bihorium.

Servetur in loco frigido.

Nota. Aliquando præstat parare hoc unguentum ex anatica portione butyri cacao, vel etiam mucilaginis gummi Arabici.

UNGUENTUM EX PLUMBO ACETATO.

℞ Olei olivarum dulcis, uncias octo.

Ceræ albæ, unciam unam femis.

Plumbi acetati, lævigati, drachmas duas.

Plumbum acetatum cum portione olei trituretur; dein cera cum oleo reliquo calefacta, addatur agitando massam, donec frigeat.

UNGUENTUM SYPHILITICUM ALBUM.

℞ Hydrargyri ex acido muriatico mediante alkali vegetabili præcipitati, drachmas duas.

Axungię porcine recentis curatæ, unciam unam femis.

Misce terendo.

UNGUENTUM SYPHILITICUM CITRINUM.

Hydrargyri purificati,

Acidi nitrosi concentrati, ana unciam unam.

Digere in balneo arenæ, donec solvatur hydrargyrum; dein adde triturando

Olei olivarum dulcis, uncias quatuor.

Axungię porcine, uncias octo.

Nota. Quandoque præstat dupla quantitas axungię.

UNGUENTUM SYPHILITICUM RUBRUM.

℞ Hydrargyri nitrati rubri, drachmas duas.

Unguenti basilici, unciam unam semis.

Misce triturando.

UNGUENTUM SYPHILITICUM RESOLVENS.

℞ Unguenti hydrargyri,

_____ de arthanita, ana unciam unam.

Radiciſ atropa-mandragorę pulveriſatę, unciam unam ſemis.

Mellis quantum fatiſ,

UNGUENTUM SYPHILITICUM VIRIDE.

℞ Cupri acetati lævigati, grana duodecim.

Olei olivarum dulcis, uncias tres.

Misce terendo.

Portio linteo carpto excepta ulcere ſyphilitico applicetur.

THE UNIVERSITY OF CHICAGO

PHYSICS DEPARTMENT

PHYSICS 311

LECTURE 10

STATISTICAL MECHANICS

LECTURE 10

The course in the Department of Physics at the University of Chicago is designed to provide a thorough understanding of the principles of physics. The course is divided into two main parts: classical mechanics and quantum mechanics. The first part covers the foundations of classical mechanics, including Newton's laws, Lagrangian and Hamiltonian mechanics, and the theory of relativity. The second part covers quantum mechanics, including the wave function, the Schrödinger equation, and the uncertainty principle. The course is taught by Professor [Name], who is a leading expert in the field of physics. The course is highly regarded and is one of the most popular courses in the Department of Physics at the University of Chicago.

A
SHORT REVIEW
OF A LATE
TREATISE
ON THE
VENEREAL DISEASE

BY JOHN HUNTER.

MR FOOT, in his *Observations* upon the new opinions contained in this Treatise, has taken them up already in so masterly a manner, that there remains little to be added. However, on perusing the great book, I found several passages which deserved some further notice, in order to render young practitioners more cautious not to be deceived by specious and fallacious reasoning, supported by professorial authority, as well as to show my readers more particularly the reasons how it happens that my ideas on the nature as well as on the cure of venereal complaints (nearly of every one of them) are either different or directly opposite to those advanced by Mr John Hunter.

Mr Hunter sets out with saying, "That he
" was induced by two motives to publish his
" Treatise: First, In hopes that several new ob-
" servations contained in it will be deemed wor-
" thy of the public attention; and, in the next
" place

“ place, because he was desirous to have an opportunity of asserting his right to some *opinions* that have made their way into the world “ under other names.” Had he inverted the thesis, and said, that he sat down with the pen in his hand, to prove how many whimsical ideas and monstrous excrescences of his brain an ingenious man may think worthy of the public attention; and, secondly, How much a vain man, who is ignorant of the different writings and discoveries made by his cotemporaries of the same profession, can attribute to himself what he should have attributed to others—he would have come, I believe, pretty near the truth. This, however, must always be the case, when a man sits down and writes with the fullest persuasion, that, feeling himself possessed of some genius, all the rest of his profession have none; or because some new ideas on a particular subject occur to his mind, nobody else can have discovered, or is able to discover, any thing new upon the same subject. He must of consequence be greatly mistaken, especially if some of these new ideas or discoveries now claimed by him, have been made a long while before by others, and he having been informed of them in private conversation, had either forgot this point, or wishes to make the world believe that these discoveries were made by himself.—The author seems here to insinuate, that some discoveries of his on this subject have been published by others; but as he does not specify this kind of theft or robbery, we must defer this discussion till he has made good his charge, and points out the particular

ticular facts, experiments, and observations which he claims as his property.

Page 2. he says "The supposition of the lues
 " being combined with other diseases, appears
 " to me to be founded in ignorance; because I
 " have never seen any such cases, and because
 " they do not seem to me to be consistent with
 " the principles of diseased action in the animal
 " œconomy." As Mr H. is so liberal in charging
 others with ignorance, he will excuse me, when
 I say, that this manner of reasoning appears to
 me to be founded on ignorance and pride, and
 consequently perfectly inadmissible; especially
 as there is hardly a practitioner who has not
 seen repeatedly the contrary in his practice.
 Patients of the lower class of people are often
 affected with the itch, and at the same time
 with cutaneous venereal eruptions. In sailors
 too, it is not so rare to find blotches produced
 by the sea-scurvy united with venereal ones:
 and who has not seen scrophulous persons af-
 fected with all the symptoms of the lues vene-
 rea?

P. 11. is said, "That a woman without any
 " symptom may give the lues;" and, p. 12. "That
 " to communicate the disease, it is necessary
 " that the venereal action should first take place,
 " and that the matter should be formed in con-
 " sequence of that action; and that therefore a
 " person having the venereal irritation in any
 " form not attended with a discharge, cannot
 " communicate the disease to another." Mr
 H. in consequence of this, "allows married
 " men to cohabit with their wives as long as
 " there

“ there appear no symptoms; nay, he even would
 “ allow a man, who has a clap, to have connec-
 “ tion with a sound woman, if he took great
 “ care to clear all the parts of any matter, with-
 “ out any fear of infecting the woman.” The
 first of these propositions seems to be an open
 contradiction: And with regard to the latter, I
 fear Mr H. would not trust to make the experi-
 ment himself upon his own wife; I certainly
 would not try it upon mine.

P. 17. From the frequent appearance of shank-
 ers and gonorrhœa in the same person at the
 same time, I suspect indeed with Mr H. “ that
 “ the urethra never *sympathises* with the shanker;
 “ and that consequently the *diseased action* of the
 “ one does not destroy the *diseased action* of the
 “ other.”

P. 19. line 4. he maintains, “ That the matter
 “ of every sore or secreting surface will not be-
 “ come venereal by applying venereal matter to
 “ it.”—From my observations I am convinced
 of the contrary.

P. 20, 21. Nothing but loose theoretical rea-
 soning, unsupported by any well authenticated
 facts.

P. 29, 30, 31. He attributes the discovery “ that
 “ pus may be formed by inflammation without ul-
 “ ceration, to his brother *Dr W. Hunter* and to *Mr*
 “ *Sharp*, made 1749:” Probably, because he was
 ignorant of this discovery having been made sever-
 al years before by *Morgagni* in Italy, and *De Haen*
 at Vienna. This also easily accounts for other
 writers not mentioning *Dr Hunter* or *Mr Sharp*.

P. 31, 32. I find the assertion, “ That after the
 “ con-

“contamination the gonorrhœa is earlier in its appearance than shankers,” false, or at least too general. I have seen many times shankers appear within 12 or 24 hours after coition, and hardly ever a gonorrhœa before the second or third day. Gonorrhœas arising so late as four or six weeks after a supposed infection, with an unusual sensation before its eruption, made me of late rather believe, that these gonorrhœas arise from a formerly tainted habit, having often seen shankers arise with the same symptoms from the same cause.

P. 55. “It has been asserted, but without proof, that in cases of swelled testicles in consequence of a gonorrhœa, it is not the testicle itself that swells, but the epididymis.” The writer who first made this discovery, said *in express terms*, that this was the case *in the beginning of the disorder*; which every unprejudiced person may convince himself of by daily experience.

P. 69. He says, “I am inclined to believe, medicine is very seldom of any service in this form of the disease (gonorrhœa).” A favourite assertion of some of those gentlemen who wish to make the world believe they are more enlightened and more candid than the rest of their brethren. However, in p. 75. I find “local applications may be either internal to the urethra, external to the penis, or both; all of which will in many cases be necessary.”—— “Internal medicines seem the most likely to cure this species of disease.” And a little further on, “local applications are either in a solid or fluid form: the fluid is a temporary
“ appli-

“ application, and of short duration: the solid
 “ applications would appear to have an advan-
 “ tage over the fluid applications by their con-
 “ tinuance; but they in general irritate imme-
 “ diately, from their solidity alone, &c.” This,
 and the whole style of reasoning till the end of
 this section, if it be reasoning, is a strange kind
 of reasoning indeed! But let us see the inference
 of this reasoning, “ That solid applications are
 “ preferable to fluid ones; but that this latter
 “ irritate in general immediately, and the less
 “ use we make of them the better; though he
 “ had never seen any bad effect from them in
 “ any case.” And a moment after, he says, “ fluid
 “ applications, it appears from practice, will of-
 “ ten have almost an immediate effect upon the
 “ symptoms; and they must be used often in cases
 “ where they are found to be of service.” The
 whole, I think, needs no comment!

P. 77. We find the same strange manner of
 reasoning “ about the stopping the discharge
 “ and inflammation” continued. The following
 will serve as an example: “ When the discharge
 “ is an effect of present inflammation, it may be
 “ stopped by injections, though the inflamma-
 “ tion still continue in some degree, and may
 “ afterwards be removed without the discharge
 “ ever reappearing: but I believe, that by this
 “ practice little is gained; for the effect of the
 “ inflammation is not the disease which we wish
 “ to remove. However, we find, that the same
 “ method which stops the discharge, also removes
 “ the inflammation, although not always, and
 “ only

“only I believe when the inflammation is slight.”
And,

P. 79. “Sedative injections will always be of
“service; not by lessening the disease, but by
“lessening the diseased action, and are very
“useful in relieving the painful feelings.” I
think, if they do this, Mr H. might have allowed
ed. that they lessen the disease.

P. 80. He says “the balsams, turpentine, dis-
“solved in water.”—This, I suppose, is one of
Mr H’s discoveries in chemistry, which certainly
nobody will dispute him; for this is the
first instance, I know of, of those substances be-
ing soluble in water.—In the same page, I find
“Emollients may be used likewise externally (in
“gonorrhœa), in form of fomentation; and p.
“81, External applications, such as poultices
“and fomentations, can be of little service.”

P. 82. He recommends the mercurial oint-
ment; but observes, “that the practice rather
“arises from a kind of *practical analogy*, than
“real knowledge of its use in such cases.” And

p. 83. “When the inflammation runs along the
“ducts of the glands, in particular the mer-
“curial ointment is to be freely applied to the
“parts.”

P. 91. He recommends bleeding and purging,
fomentations and poultices, for swelled testicles,
without mentioning upon what ground or au-
thority.—I wish the patient joy of a speedy re-
covery under the use of these medicines.

P. 92. He observes, “Some have gone further,
“by recommending the introduction of vene-
“real matter into the urethra (for removing a
“swelling

“ swelling of the testicle); but this appears
 “ to be only conceit, and is founded upon a
 “ supposition that such diseases arise only from
 “ venereal irritations, &c.”—This method has
 never been recommended but in swellings of
 this kind from a venereal cause; and by no
 means upon *conceit*, as now and then, I am afraid,
 is the case with our author; but from authentic
 observations, founded on numerous experiments
 made and published about twenty years ago, in
 one of the greatest military hospitals of Europe,
 which were afterwards confirmed by Mr Plenck
 and Dr Lang. The author seems to give it like-
 wise as a new observation of his own, that
 swellings of the testicles are produced by other
 causes. This, however, has been known and
 mentioned by nearly every writer on the diseases
 of the genitals, ancient and modern, from Cel-
 sus down to the present age.

P. 111. *note*, He says: “ Many other kinds of
 “ obstructions (in the urethra) are described by
 “ authors, none of which I have ever seen; and
 “ as probably I have opened more urethras
 “ after death, where there was an obstruc-
 “ tion of the passage, than all the authors who
 “ have written on this subject, I am inclined to
 “ believe, that they wrote from imagination
 “ only.”—Allowing the principal assertion to
 be true, it would appear that Mr J. H. has read
 all the authors that have written on this sub-
 ject, which I will not now dispute; but we
 should rather expect, that a man of so great
 learning and erudition would be a little more
 modest in drawing such general conclusions.

P. 237. In speaking of the treatment of phymosis, he says, "I believe the mercury should be given sparingly." And the moment after, "I therefore do suppose, that such medicines as may be thought necessary for the constitution, should be given liberally as well as the specific."—If under the word *specific*, mercury is to be understood, and I cannot suppose any thing else, the young practitioner, who wishes to follow Mr H's advice, will be a little puzzled, I am afraid, about the dose of the remedy.

P. 248, 249. He gives us another specimen of his chemical knowledge. "In the following case", he says, "the *lixivium saponarium* produced a speedy cure;" and then proceeds, "After having tried several methods in vain, I ordered 40 drops of the *lixivium tartari* to be taken every evening in a basin of broth." Mr H. surely does not mean, that these two substances are the same: for if he was of this opinion, I would humbly suggest, that the former is *caustic* alkali, and would undoubtedly kill the patient if given in the dose he prescribes; and the latter, which is *mild* alkali, may be given without any danger.

P. 255. In the history of absorbents, no mention is made of Dr *Meckel*, who was the first writer on this subject, and who first taught publicly the doctrine about the lymphatic system and absorbents at Berlin, a good many years before Dr Will. Hunter or any other Professor in this country.

P. 293. "We never find a bubo from the absorption of matter; when there are vene-

“ real sores on the arms, &c. there are no swellings of the glands of the arm-pit”—If Mr H. by the word *we* understands himself, I cannot controvert that he has never seen any such thing; but I have seen a bubo under the arm-pit from a venereal tetter on the elbow, and a bubo in the loins from a venereal ulcer in the toe; and other practitioners have observed similar swellings from the same cause.—The reasoning throughout the whole of this page is vague, and contradicted by facts.

P. 294, 296. We find the same reasoning continued; and p. 297, he tells us modestly, that he has more knowledge and sagacity than the rest of his brethren; and pronounces ulcers not venereal, which the rest of the London surgeons declared to be venereal. And when we come to inquire, why he thought them to be not venereal, we find it is, because it appeared to him so.

P. 300, 301. Nothing but vague and false conclusions from vague and false premises.

P. 302. He says, “ that a gonorrhœa or shanker are as easily cured when the constitution is poxed either by them or previous to their appearance, as when the person is in perfect health; but the constitution cannot be cured without the shanker being cured.”—Both these propositions are groundless and contradicted by every day’s experience.

P. 307. “ The parts affected in the early stage of the disease are the skin, tonsils, nose, &c.; when in its latter state, the periosteum, fasciæ, and bones come into action.”—We find in practice, that nature does not always follow
so

so exactly the limits prescribed to her by Mr Hunter. I have seen a patient, whose ulna was swelled to an enormous size, from a chancre on the glans penis the third week after its appearance, without any other venereal symptom in the body.

P. 364. "From the above experiments it appears to be immaterial what preparation of mercury is used in the cure of this disease, provided it is of easy solution in our juices, the preparation easiest of solution being always the best."—This conclusion, drawn from a few experiments made upon himself, is very defective and inadmissible in practice: for we daily see, that the preparation of mercury, which agrees very well with one patient, disagrees with the other; and that it is consequently *very material* what preparation of mercury we use.

P. 368. The poultice made of gum guaiac and decoction of sarsaparilla with oat-meal, appears to be a very unfair trial, deserves no comparison, and consequently no conclusion can be drawn from it.

P. 374. The nature of the case related here not being ascertained, proves nothing.

P. 307, *Note*. He says, that because the ulcer of the tongue gave way to mercury, he supposed it to be venereal; whereas before, he flatly denied this inference to be just.

P. 308, 309. Is a continuation of vague hypothetical reasoning.

P. 310. He observes, "that when the lues venerea has been cured so far as only to remove the first actions, but not to eradicate the dis-

“ position in the deeper seated parts; under
 “ such circumstances of the disease, it never
 “ attacks again the external, or the parts that
 “ were first affected, but only the deeper-seated
 “ parts, which are second in order of time.”—

This proposition would make us believe, that Mr H. had seen very few patients, or that he has concealed a fact which occurs almost daily in practice, viz. that shankers, after disappearing under the use of mercury, when this is left off, appear again repeatedly on the prepuce or glans. The case mentioned in the same page shows clearly, that the venereal poison may lie concealed in the constitution for many months, contrary to his assertion.

P. 312, *note*. This is to exculpate his first wrong judgment of the case, and is as lame as the reasoning upon the case itself.

P. 313. Contrary to Mr H's opinion, we really often see the parts, which he calls first and second in order, affected at the same time; and I wonder he should not have observed this himself.—Well authenticated observations prove, though much against his theory, that the venereal poison may be in the mass, after its visible effects are cured.

P. 314. “ Mercury, prior to the action, will
 “ not remove the disposition, and of course
 “ will not hinder the action coming on after-
 “ wards. However, it is possible, and most
 “ probable, that the medicine, while it is pre-
 “ sent, will hinder the action taking place; so
 “ that no venereal complaints will take place
 “ while under the course of mercury, although
 “ the

“ the parts may be contaminated.”—This proposition is absurd, refuted by every day’s observation, and contradicted by Mr H. himself; for, if this was true, what reason could he have to give mercury internally during a clap, bubo, or shankers of the genitals?—“ The parts first in “ order are more easy cured than those of the “ second order.” This is not generally true; much depends of the time they are affected: if recent, the latter yield often as readily as the former, or even more so, if the former are old and inveterate.

P. 318. He says, “ we never find that a man “ had a shanker a twelvemonth ago, and that it “ broke out after in venereal scurfs upon the “ skin or ulcers in the throat.”—I have seen numberless instances to the contrary.

P. 331. Mr H. seems as unlucky in his mathematical calculations concerning the seat, extent of venereal complaints, or number of days required for the cure, &c. as he is in his chemical observations.

P. 333. “ This practice must be continued “ some time after all symptoms have disappeared,” &c. “ If the medicine (mercury) were “ also a cure for the disposition in the parts second in order, and could prevent their coming into action, it would be necessary to “ continue it somewhat longer on their account: “ but this is not the case; for the visible effects, “ symptoms, or appearances in the first order “ of parts, give way to the treatment, while “ the parts that have only acquired the disposition, and are still inactive, afterwards assume

“ the action and continue the disease. This de-
 “ ceives the surgeon, and leaves the ground-
 “ work for a second set of local effects in the
 “ parts second in order. But I have asserted,
 “ that what will cure an action will not cure a
 “ disposition: if so, we should push our medi-
 “ cine no further than the cure of the visible
 “ effects of the poison, and allow whatever
 “ parts may be contaminated to come into ac-
 “ tion afterwards.”—We leave this unintelli-
 gible jargon without any comment; but we
 think the quacks greatly indebted to Mr H. for
 the last precept: they may thus charge their pa-
 tients with two, three, or four different cures.
 Mr H. appears, in this case, like an acute law-
 yer, who makes out of one law-suit five, and
 we have nothing to say but to pity the poor
 client.

P. 335, 336. “ The effects of mercury on a
 “ constitution will always be as the quantity
 “ of mercury; and when the same quantity af-
 “ fects one constitution more than another, it
 “ is in the proportion of the irritability of that
 “ constitution to the powers of mercury, en-
 “ tirely independent of any particular prepara-
 “ tion, or any particular mode of giving it.”
 Mr H.’s skill in chemistry, we have before ob-
 served, is not very extensive; and we may there-
 fore overlook, when he asserts, that crude mercury
 and corrosive sublimate deserve no distinction
 as to quality or manner of administration in
 practice. However, at the end of the page, he
 says, “ that in some cases it is right to try all
 “ the different preparations of mercury; for it
 “ will

“ will sometimes happen, that one preparation
 “ will succeed when another will not.” Does
 he ascribe this likewise to the quantity of mer-
 cury?

P. 339. Mr H. warns us against a great im-
 position, as he calls it; he means the art of
 avoiding the bad or disagreeable effects of mer-
 cury; because, he says, “ I believe that we are
 “ not possessed of any means of avoiding these
 “ effects; viz. of either driving the mercury to
 “ the mouth,” &c. We are much obliged to
 any man for warning us against impositions:
 but I must beg leave to warn young practition-
 ers again the imposing language of the Profes-
 sor; and not go on harshly in pouring in large
 quantities of mercury into the constitution,
 without any precaution against salivation, sym-
 ptomatic fever, violent sweats, or gripings and
 purgings. A man like Mr H. may perhaps
 persuade his patients that those disagreeable or
 dangerous effects are not owing to his inat-
 tention or want of skill; but a young man
 who sets out in practice, will often find the
 contrary, and thereby lose his reputation.

P. 346. “ I do conceive that the recent ve-
 “ nereal sores are upon the whole more diffi-
 “ cult to cure than the constitutional ones; at
 “ least, they commonly require longer time,
 “ although not always.”—I do believe that this
 is really the case when treated in the manner
 Mr H. prescribes: but I do also humbly con-
 ceive, that Mr H.’s method of treating recent
 shankers is a bad one; and that, on the con-
 trary, recent shankers, when properly treated,

are much more easily cured than constitutional ones ; and I think, he might have ascribed here to his manner of treatment, what he has ascribed to the nature of the complaint.

P. 347. I must dissent here, as well as in most other cases, from Mr Hunter ; for I have generally observed, that mercury given to persons who had made use of it formerly, were constantly more easily affected by it in the mouth and constitution hereafter.

P. 348. He speaks of a tainted constitution, which he denied before, when speaking on the lues in general.

P. 349. “ Let me ask any one what effect
 “ eating a hearty dinner, and drinking a bottle
 “ of wine, can have over the action of mercury
 “ upon a venereal sore? Or what effect can
 “ walking in frost and snow have upon the operation of mercury, either to make it affect
 “ any part sensibly, as falling upon the glands
 “ of the mouth, or prevent its effect upon the
 “ venereal irritation? In short, I do not see
 “ why mercury should not cure the venereal
 “ disease under any mode whatever of regimen
 “ or diet.”—I am afraid, that if Mr H. does not see it, his patients will feel it ; and young practitioners, following the advice of the Professor, may expose their patients either to violent inflammatory fevers, or to the most obstinate excruciating pains, if not to an incurable palsy for life.

P. 350, 351. If the rules laid down in these pages about the different preparations of mercury be true, and the care recommended for

rendering them more safe and effectual founded in practice, it clearly shows, that the effects of mercury are not only in proportion to its quantity, as Mr H. asserted above; but that so much depends on its quality, as he says here. This, however, is one of the numerous instances of Mr H.'s practice contradicting his theoretical assertions.

P. 352. I find the following strange proposition: "If a more simple preparation was to be found out than crude mercury, it should be made use of."—What Mr H. properly means by this I do not well understand; for I cannot believe him so ignorant, as not to know that crude mercury is not a preparation, but a *simple* product of nature. But why wishing to employ a more simple mercurial preparation than the simplest of all, viz. crude mercury; especially if all the different preparations, as mentioned above (p. 135, 136.), are the same; and if their effects are only in-proportion to their quantity, and entirely independent of their quality?

P. 359. He says, "That the increased secretions in salivary glands, cutaneous vessels, interstices, arise from the constitution being loaded with mercury."—If this be owing only to the quantity of mercury, without any respect to its quality, we would ask Mr H. How it comes that two or three grains of calomel produce now and then such violent effects upon the intestinal canal? or why three or four doses of sublimate, of half a grain each, not unfrequently produce so violent sweatings or salivation? This, we apprehend, he will not maintain

tain from the constitution being loaded with mercury.

P. 360. *Note.* “ Sulphur united with any of
 “ the metals, probably destroys their solubi-
 “ lity in the juices, or at least their effects in
 “ the circulation. None of the cinnabars act
 “ either as sulphur or mercury. Crude anti-
 “ mony, which is regulus of antimony and
 “ sulphur, has no effect. Arsenic, when join-
 “ ed with sulphur, has no effect; nor has iron.”
 The first proposition of this note is a mere conjecture, unsupported by any argument or fact; the second is true; and the third, viz. that crude antimony, yellow arsenic or orpiment, and iron united with sulphur, have no effect, is totally false without foundation.

I now come to what I reserved for the last point of discussion, *the chapter on Impotence*; in which I shall only take notice of the two following propositions. Here are Mr H.'s own words: “ I think I may affirm, that the act of
 “ manufupration in itself does less harm to the
 “ constitution in general than the natural act
 “ of coition: That the natural act of coition
 “ with common women, or such as we are in-
 “ different about, does less harm to the consti-
 “ tution than where it is not so selfish, and
 “ where the affections for the woman are also
 “ concerned.”—Was this reasoning just, it would apply to prove, that our hands were made for ***; and that it would be better and more healthy to the human constitution to commit all kinds of Sodomies and bestialities.—The intention of Nature, amongst all the more perfect animals,

animals, is to throw the semen into the vagina of the female. No animal, when able to get a female, deviates from this universal law; and it is the most consummate impudence even to attempt to reason men out of it. But Mr H. seems to delight in advancing paradoxes, and in employing his mental as well as generative faculties contrary to the laws of Nature, at least he wishes to persuade us so. However, as he is married, and not, as we might expect from the principles laid down above, for the care of his own health, to an ugly beast, but to a very fine and amiable woman, this doctrine seems to me nothing more or less but a new kind of *puff of highly refined quackery*; and as the practice of the Professor in this point agrees so little with his theory, we hope, for the happiness of his venereal patients, the same will be the case with regard to the manner of treatment of their respective complaints.

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