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ORIGINAL COMMUNICATIONS.

ON IRRITABLE UTERUS.

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A PAINFUL condition of the uterus, when not occasioned by displacement, inflammation, or any appreciable organic disease, constitutes the *hysteralgia* of some authors, and the *irritable uterus* of Dr. Gooch. It is met with in practice in various degrees of intensity, from slight uneasiness to a disease characterized by the most excruciating suffering. In its severest forms it is comparatively seldom met with; but, otherwise, it cannot be regarded as an unusual disease. Although it would essentially appear to consist in a mere lesion of innervation, and to be a very simple and remediable disorder, it is often found to be the reverse; and in some instances has baffled the resources and the ingenuity of the most experienced physicians. I propose, in the present communication, to draw attention to some facts which have come under my observation in relation to this disease, and to submit such inferences as appear to me to be deducible from them.

The slighter forms of this malady are characterized by pain in the uterine region, increased by standing or walking, and somewhat relieved by lying down. The pain extends, or rather radiates from the uterus to the groins, hips, thighs, and loins. A sensation of bearing down of the womb is often felt; there is frequently leucorrhœa and sometimes dysmenorrhœa. On a digital examination, the uterus is found to be extremely sensitive to the touch, but it is neither displaced, nor perceptibly diseased. The constitutional derangement attending this uneasiness is seldom of a febrile character; on the contrary, the general health is for the most part depressed, the circulation is languid, the pulse feeble, and the condition of the nervous system is that of weakness and irritability. The digestive organs, so far as I have observed, are seldom unaffected; they are generally in an irritable and disordered condition, and their secretions are either faulty or deficient. On inquiry into the antecedent circumstances of the patient, it

will often be found that she has suffered from severe mental affliction, trouble, or uneasiness, or has experienced some sudden fright or emotion, or else that she has undergone physical privation or fatigue; and that, as a consequence of these, spinal irritation and anæmia, in various degrees, have resulted. This latter condition is an almost constant concomitant, as well as antecedent of the malady; and, judging from the history of the cases which I have collected, would appear to be its principal predisposing cause.

The more severe form of this disease has been very graphically described by Dr. Gooch. He remarks that a patient, suffering from irritable uterus, complains of pain in the lowest part of the abdomen along the brim of the pelvis, and often also in the loins. The pain is worse when she is up and taking exercise, and less when she is at rest in the horizontal posture. If the uterus is examined, it is found to be exquisitely tender. As soon as the finger reaches, and is pressed against, the uterus, it gives exquisite pain; this tenderness, however, varies, at different times, according to the degree of pain which has been latterly experienced. The neck and body of the uterus feel slightly swollen; but this condition also exists in different degrees; sometimes being sufficiently manifest, sometimes scarcely or not at all perceptible. Excepting, however, this tenderness, and the occasional swelling, or rather tension, the uterus feels perfectly natural in structure. There is no evidence of scirrhus in the neck; the orifice is not misshapen, nor are its edges indurated. The circulation is but little disturbed; the pulse is soft, and not much quicker than is natural, but it is easily quickened by the slightest emotion. In a few instances, however, there has been a greater and more permanent excitement of the general circulation. The degree in which the health has been reduced has been different in different cases. A patient who was originally delicate, who has suffered long, and has used much depletory treatment, has been, as might reasonably be expected, the most reduced. She has grown thin, pale, weak, and nervous. Menstruation often continues regular, but sometimes diminishes or ceases altogether. The functions of the stomach and bowels are not more interrupted than might be expected from the loss of air and exercise; the appetite is not good, and the bowels require aperients; yet nothing more surely occasions a paroxysm of pain than an active purgative. Such are the leading symptoms of this distressing complaint. To embody them in one view, let the reader imagine to himself a young or middle-aged woman, somewhat reduced in flesh and health, almost living on her sofa for months or even years, suffering from a constant pain in the uterus, which renders her unable to sit up, or to take exercise;—the uterus, on examination, unchanged in structure, but exquisitely tender, even in the recumbent posture; always in pain, but more or less frequently subject to great aggravations.

With regard to the pathology of these cases, Dr. Gooch observes, that the causes, to which this disease has been attributed, are generally considerable bodily exertion at times when the uterus is in a susceptible state; but he remarks, that the patients had previously manifested signs of a predisposition to it. They were all sensitive in body and mind, and many of them had previously been subject to painful menstruation. As to its proximate nature, he is satisfied by stating

that it consists in a morbid condition of the uterine nerves, attended by pain, and sometimes vascular fulness; and he likens it to the irritable breast, the irritable testis, and the painful condition of the joints which is sometimes met with in hysterical females. He does not venture to explain its pathology any farther.

A consideration of the cases of this disease which have come under my notice, appears to me to justify the following conclusions:—

First. That, in the majority of instances, irritable uterus is rather a sympathetic than an idiopathic disease of that organ.

Secondly. That it is sympathetic of irritative disorder of various organs with which the uterus has intimate relations, the irritation of which is reflected, either partially or entirely, upon the uterine ganglia and nerves.

Thirdly. That, whilst such reflected irritation is its immediate cause, it is remotely dependent upon a defective condition of the blood, which would appear to operate by producing a morbidly irritable state of the nervous system generally, and of the uterine ganglia and nerves in particular.

In support of these views I shall quote the following cases.

CASE I. Mrs. E. Nurden applied at the Paddington Free Dispensary, Sept. 20, 1850, suffering from pain in the region of the uterus, increased by standing or walking, and relieved by lying down. The pain radiated from the uterus to the groins and hips, and sometimes extended down the thighs. She had also a good deal of pain in the back and loins, and suffered much from bearing-down of the uterus. The pain varied in intensity, and was sometimes very severe. Menstruation had always been very painful. The os and cervix uteri were very sensitive to the touch, but not otherwise diseased; nor was the uterus displaced. She had suffered from these symptoms for upwards of twelve months. Previously to their accession she had not been in good health; she had been weak, and incapable of undergoing much fatigue. Her tongue had been for some time habitually furred in the morning; her appetite had been bad, her digestion attended with pain, and her bowels confined. She had had a great deal of trouble and anxiety, and was, when first seen, very weak and anæmiated. There was a loud venous bruit in the neck; her tongue was furred, and the digestive organs were disordered. The lower part of the spine was extremely tender on pressure.

The treatment which I recommended had especial reference to the abnormal condition of the blood, the disordered state of the stomach and digestive organs, and the irritable condition of the spine. I directed her to take ten grains of the ammonio-citrate of iron after each principal meal daily, and five grains of blue-pill every second night until the tongue became clean, with sufficient castor oil the following morning to insure a moderate action of the bowels.

October 22nd. She reported herself to be better: she felt stronger, the appetite was better, the tongue cleaner, and her bowels more regular. She had still, however, a great deal of uterine pain, and the lower portion of the spine continued very tender. The dose of the citrate

of iron was increased from ten to twenty grains, and she was directed to rub the lower portion of the spine with an ointment containing tartar emetic and croton oil, night and morning, until pustules were produced.

October 29th. She reported herself to be still better. The uterine pain was much less, and her general health was improved; but she had a good deal of leucorrhœa. The ammonio-citrate of iron was ordered to be discontinued; and, in its place, a draught containing fifteen drops of the diluted muriatic acid, twenty of the tincture of the sesquichloride of iron, and a drachm of the solution of bichloride of mercury, was directed to be taken three times a day.

November 26th. She was perfectly well. The medicine last prescribed, having agreed with her, had been regularly taken, and the counter-irritation, over the spine, had been also continued. The pain and irritability of the uterus was now entirely gone, as was also the leucorrhœa; her tongue was clean, and the digestive organs healthy. She stated that the counter-irritation, over the spine, gave immediate relief as regarded the uterine pain, which entirely ceased with the improvement of her general health.

REMARKS. The circumstances which I have adverted to as productive of the irritable uterus, existed in a marked manner in the present case. The patient was extremely anæmiated on admission, and had probably been so for a considerable period; she had also undergone much mental anxiety and trouble; and these circumstances sufficiently explained the occurrence of dyspepsia, and an irritable condition of the spine, which may be regarded as having been the immediate cause of the uterine derangement. They were certainly antecedent rather than consecutive to it; and the uterine pain disappeared, without any special treatment, under measures calculated to remove them.

CASE II. L. Fross, aged 36, single, applied at the Paddington Free Dispensary, November 26, 1850, suffering from much pain in the uterus, and occasional bearing down. The pain varied in intensity at different times, and occasionally was very intense; it was sometimes relieved on lying down, but was not entirely removed. She had leucorrhœa, which was increased whenever the uterine pain was very severe. Menstruation was regular, but was attended with much suffering, which at times was so great as to make her apprehensive of the existence of inflammation. These symptoms were attended, and had been preceded by general weakness, and a depressed state of the general health. The patient was now extremely anæmiated; a loud continuous bruit was heard over the jugular veins. The tongue was habitually furred, and the stomach and bowels disordered. The lower part of the spine was also tender upon pressure. She stated that she had suffered from uterine symptoms for many years, and that she had consulted several medical men without obtaining much benefit. She was a sempstress by occupation, and had led a very sedentary life. The treatment which I recommended her was principally the following: to take an alterative dose of blue-pill every second night, as long as the tongue was unpleasant on awaking in the morning; to take the muriated tincture of iron three times a day with dilute muriatic acid, and with each dose a drachm of the solution of the bichloride of

mercury; the bowels to be regulated by castor oil, and the spine to be rubbed with tartar emetic ointment, night and morning, until pustules were produced.

December 17th. She was much better. The tongue was clean, the appetite good, the bowels regular, and she felt generally stronger. The uterine pain was much less; the leucorrhœa entirely gone. She stated that the uterine uneasiness ceased as the pustules appeared over the spine. She was directed to omit the muriate of iron, and take simply twenty grains of the ammonio-citrate of iron after each principal meal daily.

January 31st, 1851. She was perfectly well, and had no uterine pain nor leucorrhœa. The tongue was clean, the appetite good, and the bowels regular. Her menstruation took place a fortnight ago with scarcely any pain.

REMARKS. This patient also was very much anæmiated; and, judging from the history of her case, had been so for some time. Again, her digestive organs were disordered, and the spine was tender upon pressure. It cannot, I think, be doubted that these conditions were consequent upon a state of mental anxiety which is almost inseparable from an occupation, which is precarious and ill-requited, and which requires late hours and a sedentary mode of life; and that upon these the uterine disorder had supervened. The treatment, therefore, was addressed to them rather than to the uterine malady; and the result proved that this view was correct. The existence of rather profuse leucorrhœa required special attention; for although it was probably a consequence of constitutional disorder, its continuance would operate unfavourably upon a patient who was evidently anæmiated. On this account the acidulated muriated tincture of iron was given in preference to any other chalybeate: and it had the effect in this, as in many other cases with which I have met, of entirely removing this symptom. The ammonio-citrate of iron was then substituted, in full doses, after each principal meal daily. The result of the treatment tends to show that, in this case, the uterine disorder was a symptomatic affection, inasmuch as it ceased, without any special treatment, on removing the constitutional derangement with which it was accompanied.

CASE III. Mrs. Woodger, aged 36, was seen Nov. 28th, 1850. She was suffering from violent pain in the uterus and left iliac region; she had also pain in the back, and a sensation of bearing-down, or forcing of the uterus. The pain extended to the hips, and sometimes darted down the thighs. It varied in intensity at different times, sometimes being very acute, and sometimes of a more subdued character. On a digital examination, the uterus was extremely sensitive; the slightest touch of the cervix produced great suffering; otherwise it was not perceptibly diseased, congested, or enlarged. These symptoms had been preceded, and were accompanied by a very flatulent state of the bowels, furred tongue, loss of appetite, and other symptoms of derangement of the digestive organs. The patient was also thirsty and feverish, but otherwise her general condition was that of weakness and depression. On inquiring into the history of the case, I found that she had lost her mother twelve months ago; that this had affected her very much; and that she had ever since been in

a nervous bad state of health. In July she had been confined; and, although the labour was easy and natural, and unattended by any unusual hæmorrhage, she had been seized, a fortnight afterwards, with considerable pain in the uterus, evidently of a neuralgic character, which was removed by soothing and sedative measures. The present attack was also apparently neuralgic; and it appeared to depend immediately upon disorder of the chylopoietic organs, together with spinal irritation, whilst remotely it was connected with the painful state of mind, and depression of the nervous system, which had been occasioned by the death of her mother. The indications which I proposed to fulfil, in regard to treatment, were, first, to correct the disordered condition of the stomach and bowels; secondly, to allay the morbid irritability of the nervous system; and thirdly, to remove the spinal irritation. For these purposes she was ordered three grains of calomel immediately, and afterwards the sulphate of magnesia in decoction of aloes and cinnamon-water, at intervals until the bowels were properly opened; to have a linseed-meal poultice applied over the abdomen, and a sinapism over the lower part of the spine, and to take, at bed-time, five grains of Dover's powder.

The next day the pain was lessened; the bowels had been much purged, were less flatulent, and the tongue was cleaner. There was still, however, much uterine pain, and the spine continued very tender on pressure. In consequence of this, the lower part of the spine was ordered to be rubbed with the tartar emetic ointment night and morning, until pustules appeared; and she was directed to take five grains of Dover's powder at bed-time, if in pain, or incapable of sleeping.

In the course of a few days, the spine became irritated by the ointment; and, upon this taking place, the uterine pain entirely ceased, and all that she complained of was weakness and loss of appetite. For this she was given the diluted nitro-muriatic acid, in water, three times a day before meals, and she was ordered a nutritious diet. No other treatment was required from this time. She progressively got better; her appetite improved; she got strong, and has had no return of uterine pain up to the present time.

REMARKS. The predisposing cause, in this case, appeared to be the generally depressed state of the nervous system, which was occasioned by the mental uneasiness induced by the death of the patient's mother; and to this state of mind we may, I think, attribute the spinal irritation which was so prominent a feature in the case. Nor can it be doubted that this, together with some casual derangement of the stomach and bowels, was the exciting cause of the uterine malady. The antecedent circumstances of pregnancy, parturition, and suckling, would also favour its occurrence, by weakening the constitution, and rendering the nervous system more susceptible to impression. The ready cessation, however, of the uterine disease on correcting the disorder of the digestive organs and the irritable condition of the spine, proves that it was symptomatic, and that it did not depend upon idiopathic disease of the uterus.

CASE IV. Elizabeth Morgan, aged 21, married, but having no children, applied at the Paddington Free Dispensary, suffering from ex-

treme pain in the uterus. The pain extended to the groins and hips, and was always relieved by lying down. The uterus was very sensitive to the touch, but not otherwise diseased. She complained of much pain and dragging at the back, had profuse leucorrhœa, and menstruated every three weeks, but without pain. She had suffered from these symptoms some time; but, before they commenced, she had been out of health. The tongue, for some time past, had been dry and unpleasant on awaking in the morning, although tolerably clean during the day. She had been for some time weak and low, and had undergone much anxiety and trouble. On admission, she was anæmiated and dyspeptic, and the lower part of her spine was tender. The treatment which I recommended her was very simple. I prescribed the muriated tincture of iron with diluted muriatic acid, three times a day, and with each dose a drachm of the solution of the bichloride of mercury. At the same time the lower part of the spine was to be rubbed with tartar emetic ointment, night and morning, until pustules appeared. She continued this treatment for a month, and the entry then made is the following: "Has no uterine pain or uneasiness, no leucorrhœa, and no pain in the back; tongue clean, appetite good, bowels regular." The uterine pain ceased as soon as pustules appeared over the spine, which occurred four days after the commencement of the use of the tartar emetic ointment.

REMARKS. The uterine pain appeared in this case to be almost entirely a consequence of spinal irritation, which again was probably due to mental uneasiness. The disorder of the digestive organs was very trivial, and was removed by drachm doses of the solution of the bichloride of mercury. The muriated tincture of iron, in combination with dilute muriatic acid, was given in preference to any other chalybeate, on account of the existence of profuse leucorrhœa.

CASE V. Mrs. Ann Dove, aged 40, married, consulted me Jan. 1, 1851, suffering from intense and persistent pain in the uterus and right iliac region. The pain, although constant, was very much aggravated at times. She had been suffering from it for three weeks; and it supervened upon an interruption to menstruation, which was occasioned by her getting wet feet. Previously to this, however, she had not felt very well; and her digestive organs in particular had been very much deranged. The pain was attended by a frequent bearing-down sensation of the uterus, and she experienced great uterine suffering whenever the bowels acted. It was always worse when standing or walking, and better in the recumbent position. She had had profuse leucorrhœa for the last three weeks. The bowels were very flatulent and constipated, and the cæcum was especially distended. The tongue was very much furred, and the appetite bad; she was also feverish and thirsty, and had rheumatic pains in the limbs, which were generally worse at night. The coexistence of febrile disturbance with very marked derangement of the stomach and bowels, led me to direct her to take at once an emetic of ipecacuanha and squills; and, subsequently, three five-grain blue pills, with an interval of six hours between each. She was further ordered to take five grains of the sesquicarbonate of ammonia, and of the bicarbonate and nitrate of potass frequently in water.

On the next day, she was considerably better. The tongue was cleaner; and the pains were generally less in the stomach, uterus, and limbs. The emetic had produced full vomiting, and a large quantity of sour offensive matter had been thrown up. The bowels had acted twice. On the following day she was still better, and, in fact, convalescent; the uterine pain had ceased, the appetite was good, and the tongue clean.

REMARKS. This case affords a good illustration of the sympathy which reciprocally subsists between the uterus, stomach, and the constitution at large. A casual interruption of menstruation was immediately followed by great constitutional disturbance of a febrile character, in which the stomach and digestive organs were especially involved; and there is every reason to believe, that the reaction of the latter upon the uterine organs was the cause of that intense uterine pain and uneasiness which were so prominent in the case. By adopting prompt measures for the relief of the chylopoietic disorder, a rapid cessation of the uterine pain was the consequence; and this independently of any other treatment. The case so far is extremely instructive; and, indeed, is rather introduced as illustrative of the general pathology of uterine diseases, than of the form more particularly under consideration.

CASE VI. Charlotte Ward, aged 31, applied, November 5th, at the Paddington Free Dispensary, suffering from great pain and bearing down of the womb, with pain and dragging in the back; both were increased by walking or standing, and relieved on lying down. She suffered severely from leucorrhœa, and menstruated every three or four weeks, with much pain. There was a slight prolapsion of the uterus, and the organ was extremely sensitive to the touch, though not otherwise diseased. She had been suffering from uterine derangement for many years. She had had five very difficult labours, each of which had been preceded by marked disorder of the stomach and digestive organs. She had had, also, a great deal of mental anxiety. Eighteen months ago, she had been prematurely delivered of a still-born child; and the immediate cause of this was fretting and trouble. Her tongue was, and had been for some time, habitually unpleasant; the appetite was bad; and the bowels were scantily relieved. The lower part of the spine was very tender on pressure. She had been in very bad health ever since her marriage, in consequence of extreme anxiety. The first effect of this upon her constitution, was disorder of the stomach and digestive organs; and upon this uterine derangement soon supervened. She was now very weak and anæmiated, and had a distinct venous bruit in the neck. I prescribed for her ten grains of the ammonio-citrate of iron, and five of the sesquicarbonate of ammonia, in water, after each meal; also five grains of blue pill every night for three nights; and directed the lower portion of the spine to be rubbed night and morning with the tartar-emetic ointment until pustules appeared.

November 7. She felt better. The tongue was cleaner and more pleasant; the appetite better. The spine had been a good deal irritated by the ointment, and the uterine pain was much less. The leucorrhœa,

however, continued very great. She was directed to discontinue the use of the ointment; to take a blue pill every second night; and to substitute for the ammonio-citrate of iron, a mixture containing the muriated tincture of iron, with diluted muriatic acid and a solution of the bichloride of mercury.

November 18. She was much better and stronger. The tongue clean, and the bowels regular. The leucorrhœa was quite gone, and she had very little pain in the uterus. She was directed to continue the medicine.

December 3. She reported herself quite well; and was accordingly discharged, cured.

REMARKS. The principles upon which this case was treated are sufficiently clear from the narrative. The patient, prior to the commencement of uterine derangement, had been very much out of health. She had been weak and low, had been suffering from disorder of the chylopoietic organs, and had been prematurely delivered of a still-born child, doubtless the effect of weakness and general enervation. All this had been preceded by great mental uneasiness; and this would account for the irritable state of the spine, which was so apparent when the patient was first seen. It was probable, moreover, that the uterine disturbance depended upon this, together with the disorder of the digestive organs; and this view, which was suggested by the history of the case, was confirmed by the results of treatment. The remedial measures were exclusively addressed to these conditions; and, on correcting them, the uterine malady disappeared without any special treatment whatever. This case tends strongly to shew that uterine disease, however severe or long continued, is for the most part symptomatic; and that it can only be successfully dealt with, by carefully attending to those remote causes in which it has originated.

CASE VII. Margaret Nadauld was seen by me, October 1, 1850, suffering from very intense pain in the uterus and left iliac region. The pain was of a very excruciating character, was increased by the least pressure over the uterus, and the slightest touch of the cervix was followed by great suffering. There was, moreover, a great deal of febrile disturbance, a quick pulse, hot skin, furred tongue, thirst, and disordered bowels. The lower part of the spine was very tender; and, on pinching up the skin of the left iliac region, the patient evinced a good deal of distress. The case so far was clearly neuralgic; and, on investigating its history, there was every reason to believe that it had originated in a fright which the patient had had a few days before. She was directed to have a linseed meal poultice applied over the hypogastrium and left iliac region, and a sinapism to the lower part of the spine. One grain of calomel, and five of Dover's powder, were to be taken every four hours, until three doses had been taken; and, on the following morning, as much castor oil as would insure a full action of the bowels.

The next day, the symptoms were all abated; and, so far as the immediate attack was concerned, the patient considered herself to be convalescent. I was, however, again consulted by this patient a few weeks afterwards, on account of general bad health, and chronic uterine disease. It appeared that she had been for many years in

indifferent health, that she had been weak and nervous, and had suffered more or less frequently during this time from pain and uneasiness in the uterus, especially when walking or standing. A digital examination did not reveal any sufficient cause for the pain; the position of the womb was natural, but the cervix was extremely tender to the touch. She had had a severe labour twenty years before, and thought that the womb was then injured, as she had never been quite free from uterine uneasiness since. She suffered very much at each menstrual period, and was sometimes confined to her bed in consequence. She had no leucorrhœa. The lower part of the spine was still painful on pressure, the tongue and digestive organs were disordered, she was thin and anæmiated, and there was a loud venous murmur in the neck. She had gone through much anxiety and trouble, and for some time past had been living very low. She was ordered to take ten grains of the citrate of iron, and five of the sesquicarbonate of ammonia, in water, after each meal; to take five grains of blue pill every second night, until the tongue and digestive organs were healthier; and to rub the lower part of the spine with the tartar emetic ointment, night and morning, until pustules appeared. This treatment was continued for about a month, and she then reported herself quite well. The entry I made is the following: "Is quite free from uterine uneasiness. The ointment produced a good deal of irritation; and ever since she has been entirely free from uterine pain or bearing down." This, she says, "has not been the case for twenty years."

REMARKS. This report contains in reality the history of two distinct forms of uterine disorder; the one an attack of acute uterine irritation, attended by much constitutional disturbance and fever, and immediately occasioned by fright or severe mental agitation; the other that of a chronic form of uterine neuralgia, dependent upon derangement of the general health, anæmia, disorder of the stomach and bowels, and spinal irritation. When called upon to see the patient in the first instance, I had no previous acquaintance with her, and my attention was entirely directed to the relief of her acute sufferings. These subsided quickly, under the treatment adopted; and some weeks subsequently elapsed before I was again consulted by her. I then learnt that she had for many years suffered from chronic uterine disease, which, no doubt, had predisposed to the more acute attack for which I had previously attended her; and this is so far important, as showing that, when such predisposition exists, any occasional cause, such as sudden fright, shock, or emotion, may light up such a degree of irritative disorder and consecutive febrile disturbance, as it would be difficult otherwise to account for. The treatment in both instances was conducted upon principles which have been frequently adverted to, and therefore need not be enlarged upon.

CASE VIII. Jane Tresey, aged 26, single, applied to me for advice, suffering from pain in the uterus, back, and loins, bearing down, and at times intense suffering in the womb. She had, also, leucorrhœa; and, although menstruating regularly, had much pain at each monthly period. Her digestive organs were a good deal disordered, and she was weak and anæmiated. She had been suffering from these symptoms for a twelvemonth. She had previously been out of a situation,

and had in consequence become anxious and uneasy. This was soon followed by derangement of the digestive organs, and subsequently by uterine uneasiness and leucorrhœa. The spinal column was not examined. She was directed to take ten grains, increased to twenty, of the ammonio-citrate of iron, after each principal meal; and five grains of blue pill at bed-time, when the tongue was unpleasant on awaking in the morning. This treatment was continued for three weeks; and, in addition, she was directed to sponge the lower part of the back with cold salt and water night and morning. At the end of this time, she was better in every respect. She had no uterine pain nor leucorrhœa; the tongue was clean, the appetite good, and she felt altogether very well.

REMARKS. This was a simple case of irritable uterus, arising from disorder of the general health, not very protracted, and therefore not difficult of cure. An impoverished state of the blood, with its usual consequence, dyspepsia, appeared to have been its sole cause; and the mere exhibition of steel in full doses was sufficient to accomplish the cure. The leucorrhœa ceased with the irritability of the uterus, shewing that, if it did not depend upon it, it had at least a similarity of origin. This, in fact, will be found to be frequently the case. Irritation of the nerves of an organ is generally followed by increased secretion, either from it, or some other with which it is sympathetically allied: this indeed is a mode of relief which is often spontaneously set up by nature, and, in proportion as it takes place, are suffering and disorder alleviated. To regard it, therefore, under such circumstances, as a disease which should be immediately checked, would be unsound in principle, and fraught with danger in practice; whilst, on the other hand, the removal of its remote causes is often followed by its spontaneous cessation, as shewn in the present case.

CASE IX. Sophia Wheeler, aged 33, applied at the Paddington Free Dispensary, suffering from pain in the uterine region, more or less constant, but liable to severe exacerbations every two or three days. She had also great pain in the back and loins, and profuse leucorrhœa. She had laboured under these symptoms for many years. On a digital examination, the cervix was found to be extremely tender, but the uterus was not prolapsed, nor presented any unnatural condition, except a little puckering and irregularity about the os. Menstruation had been regular until her late pregnancy, but had always been attended with much pain. She had been confined five months ago, and had menstruated twice since. She had six children, and had suffered much from hæmorrhage at each birth. She was never very strong, or equal to much fatigue, and for years had suffered greatly from anxiety. The tongue had been also for many years very much furred and unpleasant in the morning; her digestion bad, and her bowels confined. She was extremely weak and anæmiated; and there was a loud venous bruit in the neck. The tongue and digestive organs were very much out of order. The spinal column was morbidly tender in various parts, and she was nervous and hysterical. She was ordered the muriated tincture of iron with muriatic acid, and the solution of bichloride of mercury in infusion of serpentary, three times a day; a blue pill at bed-time occasionally, and the

tartar emetic ointment for the spine. The treatment, however, was not long continued. The patient, at the time of attending, was in so much trouble and distress, that it was useless to expect much benefit from medicine—a circumstance which I pointed out to her. She therefore discontinued her attendance; but the case is instructive, as pointing out the existence of those forms of constitutional derangement, which have been remarked to be the cause of uterine disorder.

The last case I shall quote is that of a farmer's wife, who came from a considerable distance in the country to obtain advice in London. She had been for many years a severe sufferer from uterine disease, and had been treated by many practitioners without any benefit. Whether the treatment I recommended was servicable or not, I have no means of judging, as I only saw her on the occasion of her consulting me.

CASE X. Mrs. A. H., aged 37, was seen November 16, 1850. Her symptoms were severe pain in the uterine region, more or less constant, but very much worse at times, and much pain in the lower part of the back, extending round to the uterus, and darting down the thighs. She had had this pain about nine years. It was preceded by great mental anxiety, and by a miscarriage, which was brought on by jumping off a gate, and this was followed by considerable hæmorrhage. Ever since, she had been very much out of health; she had scarcely ever been free from uterine pain, which was always increased by walking or standing. The digestive organs had been throughout disordered; the tongue habitually unpleasant of a morning, and it was now much furred at the back. The spine was altogether very tender, but more particularly its lower portion, and the skin of the left flank was morbidly sensitive to the slightest touch. There was a loud venous murmur in the neck, and the patient was weak, nervous, and much depressed. She had been under the treatment of several medical men, who had each taken a different view of her case. By one she was said to have inflammation and ulceration of the cervix uteri, and she was cauterised for a long time, and leeches were applied to the uterus, but without any benefit. On a digital examination, the cervix was exquisitely tender, so that the slightest touch gave extreme pain, but it was not otherwise diseased. On the anterior part of the uterus, there was a distinct enlargement, probably fibrous. The axis or direction of the cervix was normal, and the only perceptible lesion was the extreme sensitiveness of the organ. The patient was regular, but menstruated with great pain. She had no leucorrhœa.

The uterine symptoms having been preceded by mental anxiety and much loss of blood, the spine being very tender, the digestive organs disordered, and the blood evidently impoverished, I was led to consider these circumstances, in the absence of any appreciable disease of the uterus, as furnishing the principal indications of treatment. I recommended the patient to have the spine rubbed night and morning with the tartar emetic ointment until pustulation was produced; to take five grains of blue pill every second or third night, as long as the tongue was furred; to regulate the bowels by mild aperients; and to take the citrate of iron after each meal, increasing the dose gradually from ten to twenty grains; to live well, and to adopt such a regimen

as was calculated to improve the general health. As I have before said, I have not seen the patient since, and therefore I do not know the result of the treatment. I had a note a few days after my interview with her, informing me that the ointment had produced a very angry eruption; a circumstance which would tend to show that the blood was not only impoverished, but bad; and so far to confirm the correctness of the view which had been taken as to the sympathetic origin of the uterine affection. At all events, the coexistence of spinal irritation, irritative disorder of the digestive organs, and anæmia, with uterine disease, was very evident in this case, whatever may have been their mutual relations.

GENERAL REMARKS. Upon a general review of the preceding cases, the first inference I would venture to draw from them is, that they are affirmative of the truth of the propositions which were advanced at the commencement of this paper. In all, the uterine affection appeared to be consecutive to, or sympathetic of, constitutional derangement or irritative disorder of other organs. In none could it be regarded as dependent upon idiopathic disease of the uterus; and additional corroboration is derived from the fact, that it disappeared, in most instances, under the influence of treatment of a general rather than of a specific character.

Another inference which may be drawn from them is, that the influence of gastro-intestinal disorder and spinal irritation are very considerable in the causation of uterine derangements. In the majority of the cases reported, these coexisted, and would seem to have had a similarity of origin. In all, they were associated with anæmia, and had been preceded by much mental anxiety. How much, therefore, is due to each in the production of the uterine symptoms in these cases, it is impossible to say. Many circumstances, however, which have come to my knowledge, lead me to believe that derangements of the uterus, involving more particularly its nutritive and secretory functions, such as leucorrhœa and disorders of menstruation, have rather a gastro-intestinal origin when sympathetically induced; whilst those which affect more particularly its sensory functions, producing neuralgia, and various irritable conditions, are for the most part connected with an irritable or morbid condition of the spinal cord.

But it is not contended, that hysteralgia is in all cases necessarily connected with either spinal irritation, or gastro-intestinal disorder. I believe them to be very frequent causes, but I have met with instances in which it existed irrespectively of either. In gouty and rheumatic subjects, considerable uterine pain, more or less of a persistent character, is often met with, doubtless of a gouty or rheumatic nature; and I believe that severe irritation of any important organ or nerve may, under certain circumstances, be reflected upon the uterus, so as to give rise to very distressing symptoms. In illustration of this, I will quote the following case, which was published by Mr. Davis in the *Lancet* of August 1, 1846, page 125.

A patient, six days after labour, was attacked with severe pain, of an intermittent character, in the region of the uterus, and during the intermissions she had pain in the face. Leeches, fomentations, etc., were applied to the abdomen, and calomel and opium were given in-

ternally, but without avail. At length, the pain in the face becoming more severe, inquiries were made, which led to the discovery that one of the dentes sapientiæ was coming up, and causing inflammation and swelling of the gum. A free incision was accordingly made in the swollen gum, and an entire cessation of the uterine pain immediately followed, without any other medicine being given.

In this case, we have an instance of uterine pain arising from a peculiar but by no means unusual cause; and it may be a question whether some of the neuralgic affections of the uterus, which occur in young females, may not depend upon it. Every one is aware of the sympathy which subsists between the nerves of the uterus and those of the teeth; and that consequently, during pregnancy, tooth-ache is a frequent occurrence. I am not, however, aware that this is considered to be reciprocal, although the present case would prove it to be so certainly. As regards many other sympathies, I have reason to believe that such is the case, and that the uterus as fully sympathises with morbid conditions of particular organs and the constitution at large, as do these with abnormal or peculiar conditions of the uterus.

In further illustration of the pathology of these affections, I have made the following analysis of thirty-seven cases, in which the uterus was in a morbidly irritable state, not in consequence of displacement or appreciable disease. In all there was marked pain and uneasiness in the region of the uterus, which varied in intensity in different instances, and in some had been of long continuance.

I. UTERINE COMPLICATIONS were observed in the following proportions.

In 3 there was no other uterine disease.

„ 15	the pain was complicated with leucorrhœa.
„ 7	„ „ „ „ leucorrhœa and dysmenorrhœa.
„ 3	„ „ „ „ leucorrhœa and amenorrhœa.
„ 1	„ „ „ „ leucorrhœa and menorrhagia.
„ 4	„ „ „ „ leucorrhœa and irregular menstruation.
„ 4	„ „ „ „ dysmenorrhœa alone.
„ 2	„ „ „ „ menorrhagia.
„ 1	„ „ „ „ fibrous enlargement of the neck of uterus.

II. ANTECEDENTS. The irritable state of the uterus had been preceded,

In 4 cases, by weakening discharges, such as profuse hæmorrhage, and protracted suckling.

„ 5	„ mental anxiety and distress.
„ 8	„ mental anxiety, with disorder of the digestive organs.
„ 2	„ sudden fright.
„ 18	„ disorder of the digestive organs.

III. CONCOMITANT AFFECTIONS.

In 18 there was well-marked anæmia, with disorder of the stomach and digestive organs.

„ 12	„ anæmia, with spinal irritation.
„ 3	„ spinal irritation.
„ 4	„ great irritability of stomach and digestive organs.

The facts, contained in the foregoing analysis, appear to me to justify the following conclusions:—

First. That, from the operation of the same causes, various and dis-

similar uterine diseases may be occasioned. Thus the principal antecedent circumstances in these cases were, for the most part, the same, and yet very different disorders were the consequence. In some, there was simply a painful condition of the uterus; in others this coexisted with leucorrhœa, amenorrhœa, dysmenorrhœa, menorrhagia, etc. The probable explanation of this is, that the operation of the different causes in question is primarily upon the nerves of the uterus, and that irregular actions, in regard to these, precede and give rise to those particular symptoms, which, in the aggregate, constitute disease as known by a given appellation.

Secondly. That, all these lesions may arise from constitutional disorder, may be perpetuated by it, and in many instances will cease on its removal. In these cases the chief circumstances which had preceded were either of an enervating or depressing nature; such as loss of blood, over-suckling, etc., or mental depression or uneasiness. The obvious effect of these would be to lower the tone of the nervous system generally, and to render it morbidly susceptible to impression. Thus it would happen in regard to the uterine ganglia and nerves, that they would be prone to irregular actions, and to participate readily in the morbid affections and conditions of other organs. If, again, the impressions leading to such abnormal actions are received from or through the medium of the ganglionic system of nerves, it is reasonable to suppose that the functions to which these are more immediately subservient, such as nutrition and secretion, would be more particularly disturbed, whilst those received from or through the medium of the cerebro-spinal system would rather give rise to painful and uneasy feelings; and thus may arise the difference in the uterine derangement which is consecutive to chylopoietic disorder and spinal irritation.

I am well aware that many of the cases of irritable uterus, which have come under my notice, and have been alluded to in this paper, were comparatively slight, as well as of recent occurrence, and therefore proportionately more amenable to treatment. I have, however, in no instance included under this title cases which were not attended by well marked pain and suffering in the uterus, bearing-down of the organ, and other uterine symptoms, irrespective of inflammation, displacement, or appreciable disease. In all, the general condition of the patients was that described by Dr. Gooch. They were nervous and hysterical, weak, and generally out of health; and the uterine pain appeared to be neuralgic. On the other hand, the cases which he has related were of a very confirmed and aggravated character; but, so far as I can judge from his account of them, they do not militate against the views which I have expressed, whilst the results of the treatment adopted tend rather to confirm them. In all the cases of irritable uterus which I have seen, the patients were, as I have stated, weak and enervated, depressed, and more or less anæmiated from the commencement; and treatment of the most invigorating character was, from the first, had recourse to, with the greatest benefit. Dr. Gooch's cases also appear to have been of the same description, but in which very opposite treatment had been adopted.

The first was that of a young lady who married at twenty-four, and, after her first confinement, went to a fashionable watering-place, and

there passed a winter of *laborious gaiety*; her mornings being spent in making calls, and her evenings in standing in crowded parties. *She lost her appetite, suffered much from languor, and became subject to shooting pains at the lowest part of her abdomen.* In consequence of an accession of pain, and a sense of fulness in the womb, she applied leeches, lived low, and was confined to her sofa several weeks. At the end of this time she was supposed to be well; but subsequently she had a violent relapse, attended with great pain and tenderness across the lowest part of the abdomen. From this time she appears to have been a great sufferer, and to have undergone very heroic treatment. She was bled four times in one week; blood-letting, either general or local, was afterwards repeated from time to time, and mercury was given to salivation. All this was done with very doubtful advantage, and her eventual recovery, after a protracted period of suffering, appeared to have been connected with the improvement of her general health, and a very cautious mode of living; but it is surely not too much to say that the treatment adopted, in the early stage, was calculated to impair very materially the tone of the nervous system, and to convert an ordinary neuralgic affection into one of very great severity.

The second case was that of a patient, who, when seen by Dr. Gooch, was so emaciated that he could encircle her arm by his thumb and middle finger. Her complexion was like wax; her digestive organs were very much disordered; so much so, that of every meal she brought up a portion; and her bowels never acted without medicine. Her pulse was small, weak, and quick, and easily quickened by the slightest motion. She had also profuse leucorrhœa. These circumstances surely indicated the existence of anæmia in a severe form; and yet blood-letting was one of the principal measures which had been had recourse to. Leeches had been applied, on an average, ten times a month; and if, as it is stated, the quantity of blood, drawn at each time, is estimated at two ounces, she must have lost about twenty ounces every month, and this while she was taking very little nutriment, and of that little rejecting a large portion. It is further stated, that the paleness of the blood, and the marble-colour of her face and skin, showed how the circulating fluid had been drained of its red particles. Such was her condition when she arrived in London, nearly twelve months from the commencement of her illness; and can it be a matter of surprise, after such treatment, that her nervous system generally was in a highly sensitive condition, and that the irritability of the uterus had become very great?

The third and last case mentioned is that of a young woman, who had borne four dead children, and therefore presumptively had not been very strong. Hæmorrhage had occurred after the last confinement, and was succeeded by pain in the hypogastrium and left iliac region. Her pulse is described as being small and wiry; a very common pulse, it is observed, after hæmorrhages from the uterus. The narrative informs us, that she was now bled four times in less than a week; that she lost in this time eighty ounces; that a number of leeches were applied to the hypogastrium repeatedly, and that, when seen a week afterwards, her face and lips were bloodless, her health broken, and that she had the local symptoms of irritable uterus, —it need not be added, in a very severe form.

Looking to the report of these cases generally, and their probable nature and origin, and observing the treatment respectively adopted in each, I confess I cannot feel surprised at their extreme severity. The existence of anæmia, weakness, and prostration, both antecedently to the attack, as well as concurrently with it, is conclusively shown, although the relation of these to the disease appears to have been altogether overlooked. Under such circumstances, what could have been expected from active depletion but the results which followed,—viz., increased anæmia, and a correspondingly greater irritability of the nervous system, more especially of those portions which were previously in a morbidly irritable condition?

Had the cases I have reported been treated in the same manner; had the patients to whom I have referred as suffering from irritable uterus, and who, together with this, were evidently weak, dyspeptic, and anæmiated, been bled frequently to the extent mentioned by Dr. Gooch; had they, in addition, been mercurialised, kept sedentary, and restricted in diet,—can it be doubted that their sufferings would have been proportionately increased? and that an irritable condition of an organ, otherwise slight, would have been rendered equally unmanageable and severe?

The practical conclusions, then, which I would venture to draw from the cases of this disease which I have myself seen, as well as from those reported by Dr. Gooch, are the following. In every instance of hystericalgia, or irritable uterus, it is absolutely necessary to look beyond the condition of the uterine organs for an explanation of the origin of the disease; to inquire particularly into the condition of the blood, and to ascertain how far it is either defective or excessive, or how far it is deteriorated by the prevalence of any particular diathesis, such as the gouty or rheumatic; to ascertain whether irritative disorder exists in organs which have sympathetic relations with the uterus, and to carefully investigate the condition of the brain, spinal cord, the nerves, and the nervous system generally. Such an investigation will often lead to the discovery of the causes of uterine irritability, where otherwise they would be overlooked; and will best furnish the principles upon which the treatment of the disease should be conducted.

Chester Place, Hyde Park Gardens, March 1850.