range of buildings, used as an armoury. In a sanitary point of view, this high wall and circular building are detrimental; but the building itself being very high, and all the wards up stairs at a considerable elevation, the ill effects of this arrangement are not so objectionable. It is, in fact, an imposing old building, and in summer makes an excellent hospital. The supply of water is pretty good, but the quality of it is not what it should be.

Rations and Diet. These are good. The former are duly inspected by the officers; the men mess together; have three meals; and recruits soon become stout and robust. The hospital diets, under the control of the medical officer, are good, and varied as required. The meat is of good quality, and, for hospital diets, a little higher price is allowed to be given for it. The effect of the men's messing together is very beneficial, and teaches them orderly habits.

Duty and Employment. The duty is moderate and very regular, and by no means so severe as to prove prejudicial to the health of the men.

Internal Economy. No canteen exists; hence intemperance is checked, but by no means prevented, as one-half the regiment is billeted out, and consequently, in a large seaport town like Hull, the men are much exposed to temptation.

Crimes and Punishment. Crimes and punishment, for the number of men, are below the average; and, on the whole, their conduct has been exemplary, and the men are popular with the residents. Desertions were not frequent, and generally amongst the recruits who were attested, but did not join when the regiment was embodied. Three or four were branded with letter D. The propriety of this may be fairly questioned in a militia regiment.

Exercise, etc. The barrack-yard and ramparts afford space for exercise and amusement. Cricket, football, quoits, racket, and other games, are encouraged, in which the officers join (the "doctor" not the least active of the party).

Means of Ablution. Supply of water good, but very hard. The lavatory is tolerable, but the floor is stone instead of wood, and not sufficiently large for the number of men stationed here (about 700). In the summer, bathing is allowed in the river, under superintendence. I may add here, that one of the great advantages of the public service is the acquiring of habits of cleanliness, and appreciating the comfort of personal ablution, which so many of the working classes are in the habit of neglecting. Ignorance about the importance and luxury of personal cleanliness is much to be regretted. By weekly inspection of all the men by the surgeon, cleanliness of the skin is insisted upon, and disease early detected. Public lavatories in large towns might be established, I think, with great advantage, as well as cheap coffee-houses or restaurants, for the work-people to dine together with something like comfort.

Vaccination. The state of vaccination is satisfactory, and no case of small-pox has occurred since embodiment.

Note. One case of small-pox was admitted after this report was written, at the end of the military medical year, March 31st, and just before the regiment returned to Leeds for disembodiment.

Ocular Diseases. Ocular diseases have been below the average. We have had a few cases of gonorrhoeal ophthalmia and syphilitic iritis.

General Treatment. Syphilis and gonorrhoea have prevailed, especially on first coming to this station; but they gradually diminished. Mercury is never given in large quantities, or for any length of time. Mild salivation has been required in a few inveterate cases of syphilis. A large quantity of copaiba has been consumed; about thirty pounds during the year. A few cases of gonorrhoeal rheumatism have proved very tedious.

Post Mortem. As we have only had one death in the regiment, these inspections have happily not been frequent.

In the solitary fatal case, disease of the heart and calcareous degeneration of the aortic semilunar valves were found. The preparation was sent to the museum of the Leeds School of Medicine, to which I am attached as one of the anatomical teachers.

Phthisis. No cases, except a Royal Artilleryman found in hospital on joining the station; and he was invalided, and sent to Woolwich. A few cases of incipient pulmonary disease have been discharged the service.

I have made this abstract because it was a novelty to me to draw up a regimental sick report, having never seen one in print or elsewhere, though thousands must be deposited in the archives of the Medical Department; and it will serve to elucidate the nature of the medical duties of the service. The reports published by inspecting medical officers, such as the very interesting and valuable ones by Dr. Hall from the recent seat of war, must be founded on the respective regimental medical reports. In writing this paper, I do not presume to address experienced line surgeons, but my brother civil practitioners.

I have next to venture upon a few remarks on the hospital regulations of the service.

[To be continued.]

[ERRATUM. In Mr. Ikin's paper in the last number of the JOURNAL, p. 1054, col. 2, line 14 from bottom, the words "one-fourth were passed as fit", should be "one-fourth were rejected as unfit".]

ON MEDICAL EVIDENCE.

By J. G. DAVEY, M.D., Northwoods, Bristol.

[Read at the Quarterly Meeting of the Bath and Bristol Branch, November 20th, 1856.]

If we will be at the trouble to look about us, and keep our senses awake to the ever varying and oft succeeding phases of medical life and experience, we shall have no difficulty in convincing ourselves that much yet remains to be done to improve the character of our profession, as well as to ameliorate the status of physicians and surgeons, and not the less to promote the interests of society at large. The liberal education and peculiar knowledge of a medical man place him of necessity far above his neighbours, of whatever calling. Acquainted with the constitution of man, and well informed of the nature of the external world; appreciating also, as he does, the nature and extent of their adaptation to each other, and of the resulting health or disease to either the individual or the masses of mankind, the medical practitioner is even now recognised as the most fitting person to have the charge of the sanitary arrangements at this time in progress in all our large towns, and the general direction of all the details connected therewith. If we are but true to ourselves, we shall not fail to improve this occasion. The physician or surgeon thus, in point of fact, holds the office of a public functionary, with duties of the most honourable and responsible character; and whilst he would, on hygienic principles, defend the body from disease and physical suffering, and so maintain health and preserve life, he would, if he were allowed, and in the capacity of a psychologist, devise means whereby to preserve the *mens sana in corpore sano*, and thus increase his claims on the public regard and sympathy.

The appointment of medical coroners, the creation of local health officers, and of medical commissioners of lunacy, etc., assure us that we, as members of the medical profession, are improving our status, and, naturally enough,

taking a foremost place among our fellow-men in all that relates to an advanced and advancing civilisation. The time may be perhaps looming in the future—but that future is not so far distant—when our profession, being duly represented in a reformed, *i.e.*, a more intellectual and less vicious legislature, shall demand to be heard in defence of its just claims on public consideration, not to say gratitude; and until then, but not much longer, shall we witness the present anomalous relative position of law and medicine, *i.e.*, of lawyers and doctors. We have already shaken off the trammels of superstition, and have substituted facts and reasoning for idle fancies and priestly sophisms: let us then pursue so commendable a course, and endeavour, through good and through evil report, to reach yet a higher stage of truth and independence.

Let us look at the position of the medical witness in our courts of law. Is the position assigned to him unobjectionable? Do his opinions and evidence receive that respect they are entitled to?

The following remarks refer to the subject of *medical evidence*, and are intended to prove that medico-legal matters have their abuses, and as such demand to be remedied. I shall endeavour, in the first place, to show that the practice now adopted of obtaining the testimony of medical men in cases of suspected lunacy, as well as in criminal matters, is throughout objectionable, and fraught with much mischief; and that the same is rather calculated to conceal the truth than bring it to the surface. This much I shall endeavour to prove to you by reference to two very celebrated cases—one that of Mrs. Catherine Cumming; the other of very recent date—I mean the trial of William Palmer for the murder of John P. Cook. It is my purpose, in the second place, to suggest for your consideration a course of proceeding by which the objections at present existing may be avoided, and the medical witnesses escape the very anomalous and unfair position given to them as a body; some of them being on the side of the prosecution, whilst others are on that of the defence—an arrangement, this, justified by custom certainly, but one calculated only, as it seems to me, to deprive them of the full force of whatever they may say, and not the less to deny to medical science its due weight and importance.

A reference to the published report of the trial, *in re Cumming*, reveals the astounding fact of so many as twenty medical men appearing to give evidence; that is to say, ten "for the petitioners", and ten in opposition, or *for Mrs. Cumming*. Now, let us stop for one moment to mark the routine observed to enlist each one of such twenty medical witnesses. Let us remember, that what the law attacks, the law defends; and that the lawyers on either side of the question are equally of the *red-tape* genus, and belong, in principle, to the Circumlocution Department. The lawyers are one and all bound down to rule and musty precedent, and from which they dare not so much as hope to escape. Well, then, both parties are on the alert, as time and circumstances are pressing; a rush is made for the best men, *i.e.*, those standing the highest in public estimation; the object being, on either side, the defeat of the opposition. Medical men are sought, not so much to give a fair and candid opinion, or to make an impartial and honest statement, as to offer that amount and kind of evidence most acceptable to the party they are called on to serve, and best calculated to accomplish the end in view. If the opinion of A or B in a given case harmonises with that which is expected of him, well and good; but if it does not so harmonise, A or B is viewed as an opponent, and other evidence is sought elsewhere—of C or D, for example. But, to be quite sure of his man, the lawyer requires from the hand of the doctor a written statement which shall not only corroborate what has been elicited by a personal interview, but which shall constitute a guide for the counsel engaged, enabling him the better to adjust and contrive his own attack or defence, as the case may be. Such is, in brief, the method by which medical witnesses are sought for and obtained—a method which, I cannot doubt, can hardly be said to be else than *ex parte*—a

method which seeks to lessen the dimensions of science to mere law, and to curtail truth of its fair proportions.

You will remember that the question raised by Mr. Commissioner Barlow was, "Whether Mrs. Cumming was or was not an idiot, lunatic, or of unsound mind?"

I will beg your attention to the following extracts; they refer to the question of delusion, regarded as an indication of insanity; and the ability of patients to conceal the same when offered a motive for so doing, and under peculiar circumstances.

Sir F. Thesiger and Sir Alexander Morison exchanged the following questions and replies, viz:—"Q. Do you find from your experience, that persons who are labouring under what are called monomania, or delusions, are cunning enough to conceal them? A. Oh yes, to conceal them completely, sometimes.—Q. Can persons in that state at times be tutored to conceal their delusions? A. I think so. I have occasionally advised my patients in Bedlam Hospital that such and such delusions would prevent their being liberated, and that they ought to try to get rid of them. They have occasionally tried to get rid of them, and after a while they have returned. We had a remarkable instance there lately of a poor woman who destroyed herself. After a time she got rid of her delusion, so that I put her down in the convalescent list, and soon after she committed suicide.—Q. They are capable of repressing the exhibition of delusions for some time, but they will return? A. Particularly if they are spoken to, and told it injures them their talking of them." Now, you must bear in mind that both the gentlemen named (Sir F. Thesiger and Sir A. Morison) were concerned to prove that Mrs. Cumming was a "lunatic."

The following quotations from the evidence of Drs. Conolly and Winslow (who took the opposite line of conduct—that is, were interested to prove the lady of sane mind) demonstrate to you how, as I have observed, the dimensions of science may be reduced to those of mere law. Dr. Conolly is examined by Mr. James. The first question to which I would call your attention runs thus:—"Q. You have heard, I presume, that she has been seen by a great many medical men, and submitted to a great many examinations, in the course of the investigation; now, if these alleged delusions existed in her mind, could she be tutored so as in any way to conceal them? A. I think it quite impossible that she could; many patients will conceal their delusions, that is, they will not spontaneously avow them; they will learn to do that; but if you examine and touch on the delusion, with a little care and patience, one never fails to bring it out.—Q. And you have heard the gentlemen who have gone and submitted her to examination on both sides, have at once put to her the alleged delusions, and brought the mind to the topic distinctly? A. I believe, repeatedly, it has been done.—Q. Assuming the existence of a delusion as the result of a diseased mind, and the mind brought to the topic, if it is the result of disease, is it not manifest at once? A. Perfectly so.—Q. So that if you are unaware of the delusion of the patient and speak in an hospital, or elsewhere, and do not touch on the particular diseased chord, you may leave that person under the impression that they are not insane? A. Undoubtedly.—Q. But if you do touch upon the delusion you have discovered the disease; is not that so? A. Almost invariably, I should say.—Q. Then is it your decided opinion that this lady—I use the expression which has been used or insinuated—could not have been tutored so as to suppress any evidence of insanity in these conversations? A. I do not think it possible."

Let us next see what Dr. Winslow says on the subject of delusion, in reply also to Mr. James, one of the counsel for Mrs. Cumming. "Q. There was a question I omitted to ask you last evening; there has been a suggestion, or an insinuation, made about this lady being tutored. You have heard the number of examinations from one side and the other, to which this old lady has been subjected? A. Yes, I have.—Q. And you have heard, perhaps, of the medical men going with the knowledge of what are alleged to be

her delusions, and putting them distinctly to her, and hearing her answers and conversations on the subject? A. Yea.—Q. I will use the expression which has been insinuated, could she be tutored to conceal her delusions on these examinations? A. I do not think she could.—Q. For a period? A. For a short period. I do not think in Mrs. Cumming's case, she could. In cases of diseased mind, if you refer to the delusion, or touch the chord that is diseased, or out of tune, the delusion becomes generally immediately obvious." The finale of the conversation between Dr. Winslow and Mr. James, is remarkable for its boldness. "I ask you," said Mr. James, "in your opinion, could she (meaning Mrs. Cumming) be tutored to conceal her answers under any tutorage?" Dr. Winslow's reply was, "It is impossible."

Now, gentlemen, I do not think that discrepancies so palpable could ever attach themselves to medical science, or opinions so much at variance with each other be attributed to medical men, and these of the very highest eminence, if the present very objectionable manner of obtaining medical evidence in cases of lunacy, and in other cases, was got rid of. I speak this in all sincerity, though with every respect for Drs. Morison, Conolly, and Winslow.

There is one other feature in the matter to which I would call attention: I mean the character of 'delusion,' so called."

Sir F. Thesiger asked Sir A. Morison: "Suppose a person has placed his affairs in the hands of an attorney, who has conducted himself with the strictest propriety and integrity, and who has from time to time received money, and rendered due and proper account of the money, which has been sanctioned by the person by whom the attorney was employed, and that person should afterwards represent, on several occasions, that the attorney had robbed her or him, I will put it, had left him penniless—had rendered no account whatever, and was rolling in luxury upon the property he had so acquired—would you consider that delusion or not? A. I would consider it delusion, certainly," said Sir A. Morison.

The same question was put by Sir F. Thesiger to Dr. Winslow, in these words: viz.—"Supposing a person had employed an attorney, and had confided her interests entirely to him—that that attorney had been in the habit of receiving money, and of attending from time to time, and performing the part of a faithful agent, and that the principal was aware of the faithful performance of duty by the agent. Supposing, without any new circumstances occurring, she was at a subsequent time to entertain the impression that the agent had robbed her of her money; that he had robbed her of everything she possessed, and left her penniless, and that he had never rendered her any account at all, should you be of opinion that that indicated a sound or an unsound state of mind? A. Those notions," replied Dr. Winslow, "are consistent with soundness of mind, particularly if occurring to a person naturally of suspicious temperament.—Q. In a suspicious mind? A. Yea.—Q. But observe, this suspicious mind has been confiding for a considerable time, and relying confidently upon the party, and then suddenly, and without any reason at all, turns round, and charges that party with having robbed and plundered her, with having rendered no account, and having enriched himself with the spoils of her fortune? A. That shows great caprice, but it is possible that such a feeling might exist apart from insanity.—Q. I put my case guardedly. I put this case. The utmost confidence is expressed from day to day, and manifested in every possible way; then there is suddenly a new idea started up that the party so trusted had been false in every respect, had plundered and left the person penniless, and was revelling in the spoils of that fortune. A. That would show great caprice and an ill-regulated mind, and a mind suspicious without reasonable foundation.—Q. Now I will put this case. Suppose he had faithfully rendered an account, and money had been paid over, and a belief had been entertained that no accounts at all had been rendered, and that

no money at all had been paid? A. The impression may have resulted from a mere failure of memory."

After this much, does it appear or not, that medical evidence may, under some circumstances, assume the external features of partisanship?

Bear in mind, if you please, that Sir A. Morrison was for the petitioner, and Dr. Winslow for Mrs. Cumming; their efforts or sympathies lay in different directions. However Dr. Conolly was with Dr. Winslow, but we find him expressing an opinion upon the question of delusion, and the circumstances under which such may be recognised as an indication of mental unsoundness—altogether dissimilar to the foregoing. The Commissioner on this occasion was the examining party; he sought, you will perceive, a demonstration of the same fact, but on grounds somewhat modified.

"Q. Suppose a person has an idea that he is going to be married to the Queen, and that he has some ground for such a belief, that is not a delusion; but suppose the mind is altogether divested of that impression at a particular period, but that a year or two afterwards the mind reverts to the same impression without any fresh justifying cause, is that any test? A. I should say there was disease of the mind there.—Q. You must account for that, I am afraid, in one of two ways; either that the mind was never, in fact, divested of the original impression, or else that there must be something like a disease; am I right in that? A. Yes.—Q. If a gentleman has an impression that he is going to marry the Queen, from having received an anonymous letter, or something of that kind, that is intelligible, and it is no delusion; but it is no test of insanity; if, on the other hand, he is perfectly satisfied that that was altogether nonsense, and then the mind having got into that state without any cause whatever, the mind reverts back to the original impression, would you say that is a test of insanity? A. I should suspect it certainly."

So long, only, as inquiries of the nature considered, are commenced and carried through in the manner they are, can such things be; or in other words, can medical evidence be made thus to assume so dependent and equivocal a position.

I cannot think it compatible with the character of a medical witness to be so placed that he is compelled as well to retaliate the loose badinage, or even worse, the coarse invective of a legal functionary, as to give his opinion on an abstract, and it may be a difficult question. I ask you, then, if you do not think the following extract from my own cross-examination in *re* Cumming, a very objectionable specimen of its kind; one calculated to subvert truth, and pander to the low prejudices of mankind? Mr. Sergeant Wilkins's love of mischief, and his other peculiarities as a practising barrister, some of you may have also experienced. I can see him now, as he rose from his seat to question me, his massive solid form encompassed by its silken robes, and his large and broad head surmounted with that eccentric and ancient sheep-skin—or something very like it, by which his class is recognised. To look at him is enough; the eye of the physiognomist reads, and readily too, in his large square-built frame, his massive brow, broad features, and voluminous cerebral development, the man of an iron will, large intellect, and arm, if not high resolves. I had not seen Mr. Sergeant Wilkins on any former occasion, but I took his measure—it fitted him but too well. You will not fail to perceive now entirely gratuitous and foreign to the inquiry on hand, was the course pursued by the gentleman named; but, as you are aware, truth is very like its description by an old writer—that is, it is like cork, the more you try to keep it down in water, to suppress it, so much the more does it rise to the surface, or what is the same thing, aspire to the high level which is its due.

Cross-examined by Mr. Sergeant Wilkins.—"Q. Are you a contributor to a work called the *Zoist*? A. I am.—Q. Do you believe in Mesmerism? A. I do.—Q. Do all right-thinking men believe in that? A. All those who have investigated the question; but I do not see what relation that has to the question at issue.—Q. Pray have you ever stated

that you have cured insane persons by the influence of Mesmerism? A. I have.—Q. What is your definition of a delusion? A. A belief in that which does not exist.—Q. You think that is a perfect definition of a delusion? A. No, I do not pretend to give a definition of it—else than in a general sense perhaps.—Q. For instance, I am not a right-thinking man, for I do not believe in the existence of Mesmerism? A. Because you have not had sufficient opportunities.—Q. I beg your pardon. Never mind whether I have had sufficient opportunities; I do not at all object to break a lance with you, physician as you are; but do you say that the fact of my assertion that mesmerism is nonsense, argues unsoundness of mind on my part? A. Perhaps so, to a certain degree.—Q. I am very glad I got that answer—it is what I anticipated. Then you would say, every gentleman in the room who asserts the same thing, is, to a certain degree, unsound in mind? A. His mental state is to be pitied; he does not know what is true.—Q. How the gentlemen of the jury will eat their lunch after that I do not know. Allow me to ask this," etc. etc. etc.

You will, I believe, agree with me, that such a dialogue is hardly of a kind to elicit the truth. Is it not, in an eminent degree, calculated to lessen the dignity of science, and reduce medicine to the bare dimensions of the law; the trash concocted by our forefathers, when society was in its childhood, and they, if not in their dotage, living, in point of fact, under the dominion, more or less, of their selfishness and lust.

I cannot forbear bringing to your notice yet another illustration of the manner, and not less the extent to which the lawyer and the doctor contend for the supremacy. The annexed quotation furnishes us with a very fair sample of legal *acumen*, and, I think I should add, of medical sophistry,—a sophistry, mind me, which, in the most natural way, springs out of the present very artificial mode of procuring medical evidence, and making *sides* to a question of science, as if it were a mere cricket match, or some equivalent old English pastime or raree show.

"Do you suppose," inquired Sir F. Thesiger of Dr. Winslow, "that a person who had faithfully rendered an account, and money had been paid over, and a belief had been entertained that no accounts at all had been rendered, and that no money at all had been paid; do you suppose that any one, under such circumstances, entertaining such a belief, would be competent to the management of his affairs?" The reply given is:—"A. That incompetency if the incompetency existed, might be the result of advanced age, or from careless habits of business, or from a natural indisposition to attend to the ordinary business matters of life. It need not necessarily be an incapacity arising from unsoundness of mind.—Q. But I put the case of a person. A. I think it is possible that such a condition might exist, apart from actual insanity or unsoundness of mind.—Q. Apart from a capacity to manage the affairs of life? A. No; I draw a distinction between the incapacity and natural decay, which is, in many cases, the inevitable result of old age, and the incapacity which is clearly the offspring of insanity.—Q. But I am putting it to you now—do not vary the ground. I put a distinct question, whether such a person as I have described would, in your discreet judgment, be competent to the management of his affairs? A. In the proper acceptation of the term, such an amount of incapacity would not necessarily indicate unsoundness of mind or legal incompetency to manage the business affairs of life.—Q. Would such a person be competent to the management of his affairs? *Legally speaking*, certainly.—Q. *Actually speaking*, would he? A. There are many sane persons who are incapable of managing their affairs, and who leave all their business matters to their solicitors.—Q. You are running away from my question. I have put a particular case to you, which is clear and distinct. I have put the case of a person who had received from his attorneys accounts of monies faithful and true throughout, and then believing that no accounts had been rendered, and that no money had been paid? A.

I should say that such was a strange, but not necessarily an unsound condition of mind.—Q. Would you consider such a person,—a person who had received money and accounts, and yet believed that he had not received the money, and had not received the accounts, a person capable of managing his own affairs? A. I should say that such was a strange and unnatural condition of mind, but not necessarily an unsound condition.—Q. I understand, in one sense, what a natural mind is. A. You may have such an amount of incapacity coexisting and consistent with sanity. That is what I mean.—Q. But I put a particular case to you. Dr. Winslow, I know you are a match for me, but do confine yourself to the case I put. It is a very distinct one; it is this: I ask you, in your judgment (of course appreciating your character), whether such a person is, in your judgment, competent to the management of his affairs? A. I think the world would say not. Q. What would you say; do you agree with the world, or not? A. I have seen cases of incapacity to the extent referred to by yourself, associated with perfect soundness of mind.—Q. You have told us that the world would have an opinion upon the subject; do you agree with the world, or do you differ from the world? A. I do not bow to the opinion of the world as an authority upon points of abstract science.—Q. Then you look down upon the opinion of the world? A. Certainly not. I consider the question as one of science. When I am asked whether, in a given case, there is an incapacity to manage property, my object is to ascertain whether that incapacity is the necessary result of a diseased mind, or whether it is a natural incapacity arising from old age, decay of nature, or from ignorance of the ways of the world, and a natural careless indifference to the affairs of life. That, in my opinion, is the scientific distinction.—Q. I am putting a case in which there can be no doubt about the moneys being paid and the accounts rendered, and in which the party believes that no money has been paid and that no accounts have been rendered, would you require to ascertain all the circumstances respecting a person's mind before you could come to a conclusion whether such a person was capable of managing his affairs or not? A. I think we could not take as a rule an isolated feature in a particular case, and draw safe conclusions from it. I should be very loth to say, if a case of great incapacity was established, that that incapacity was necessarily the incapacity of an unsound mind. Many men of mature age and vigour of mind are not of business habits, and are not capable of managing their property.—Q. There are circumstances which do not depend upon business habits at all. I put a plain and palpable case to you. A. I think in the case put by you the circumstances, of course, would be suspicious, but such an amount of incapacity might coexist with soundness of mind.—Q. Then you are of opinion that the case I have put to you is perfectly consistent with entire soundness of mind? A. It may be so; I have no doubt upon the point."

So much for the case of Mrs. C. Cumming, who, you will remember, was found, after an investigation of many days, to be *insane*, and that by a jury remarkable at once for its general respectability and high intelligence.

[To be continued.]

CASE OF OBSTRUCTION TO LABOUR CAUSED BY A FIBROUS BAND WITHIN THE VAGINA.

By W. Moxon, Esq., Bilston.

ABOUT 5 P.M. on the 3rd of last September, I was summoned to attend A. B., a strong healthy woman, aged 22, who had been in labour since 11 o'clock that morning. On my arrival at the residence of my patient, I ascertained that she had had two children, and that at her last confinement she was attended by a midwife. I was likewise informed that she had, after her last labour, been troubled with an offensive discharge from the vagina for several