

becoming widows, and others, on the contrary, are cured of it. A subsequent marriage will also have totally opposite effects on persons of different temperaments and constitutions.

The state of the mind and feelings, as already shown, is of paramount importance, and must be particularly attended to. A disappointment in love will often cause derangements of this kind, while its happy progress, and true return, will as frequently cure them, when all other means fail.

Those cases which arise from the natural passages being closed, have already been spoken of, in a previous chapter, and their treatment described. I merely refer to them again, for the purpose of pointing out how necessary it is to know if any such difficulties exist, before resorting to medical treatment, or recommending marriage. I read a case in a medical work lately, of a lady who consulted an eminent physician to know why she was barren. She had *never menstruated*, but had been married some time. Most likely she had been treated for the suppression, *medically*, and her friends thought, as it did not succeed, that marriage would effect a cure. On making the requisite examination, it was discovered that there was actually *no womb*, though all the other parts were perfect! The grief and disappointment to all parties may be imagined, and one is forcibly impressed, by so lamentable an occurrence, with the impropriety, if not *criminality*, of allowing marriage to take place under such circumstances, before a proper investigation had been made. Another case in point also is that of mine, referred to when treating of narrowness of the vagina. And I have had another, since commencing this work, of a very curious kind. The lady had never menstruated, though she was very sick, and had enlargement of the abdomen, every month. All kinds of medicines had been given to her, but they only increased the distress. She was then advised to marry, and assured that she would be better. She did so, but was no better. Her friends then brought her to me to have the galvanism, or congener applied. I told them, however, that I could not use either, till I knew that no physical impediments existed, which I strongly suspected there did. Investigation proved this to be the case; about three-fourths of the distance up the vagina there was a membrane, similar to the hymen, completely closing the passage, like the parchment on the top of a drum. This obstruction prevented the escape of the menses, and had also made other difficulties, which could not be overcome, and which occasioned the more distress because they were not understood. I chose a time, midway between the two monthly periods, and, after carefully reducing all inflammation in the parts, punctured the membrane with a small lancet, introduced through a speculum. About a quarter of a pint of blackish fluid, like thick coffee-grounds escaped, and in rushing out, widened the puncture considerably. A few days after I widened it still more with a bougie, and continued to do so, till it was as wide as the rest of the passage. She remained alone till the next period, when the menses appeared quite regular, and without distress. The other difficulties were also removed, and she is now a happy mother.

I could mention numerous instances of a like kind, occurring in my own practice, both in married and single, of which I have notes, with full particulars.

DYSMENORRHEA, OR PAINFUL MENSTRUATION.

There are many cases met with in which the menses occur with regularity, and in sufficient quantity, but accompanied by severe suffering—most usually in the

form of pains in the back, groins, abdomen, and thighs, with a kind of grinding contraction of the womb, burning heat in the parts, and pruritus. Sickness at the stomach, vomiting, shuddering fits, cramps in the limbs, and severe headache are also frequently experienced, and various hysterical symptoms, such as choking in the throat, yawning, restlessness, irritability of temper, and sudden prostration of the strength.

These sufferings may either commence with the discharge, or begin several days before, and may continue some time after it has ceased. Very frequently in these cases the discharge is small in quantity, and escapes by drops, as if with difficulty, and at other times it is chiefly composed of clots, or membranes, or fleshy threads. Sometimes, however, it flows perfectly free, and is quite natural in appearance.

Both married and single are liable to dysmenorrhœa, though it is more frequent in the single. It frequently disappears after marriage, but not always, though it usually does after childbirth. Pregnancy, however, is not so likely to occur with this disease; the same conditions that cause the pains being also likely to prevent conception.

The causes of dysmenorrhœa are not well ascertained. It is found, however, most frequently in those of a nervous or bilious temperament, and in those who are easily susceptible of great excitement. It is probably very often connected with some imperfect development of the parts, and with various diseases of them, such as chronic inflammation of the womb, ovaries or tubes. It may also result from obstinate constipation, dyspepsia, mental disturbances, and particularly from certain excesses. It most usually begins immediately after, or with the first menstrual flow, and when established is pretty constant in its appearance, though sometimes it will remit for a few periods.

The treatment of this troublesome disease is by no means agreed upon, for very seldom are two different cases benefited by the same. The first step is of course to ascertain if it result from some other derangement, which it so frequently does, and then remove that. Irritability, or chronic inflammation of the womb, being a very frequent cause, great relief is often obtained by warm hip baths and enemas, with warm injections of poppy-heads, and starch and laudanum. Hot diluent drinks should also be freely used, and warm purgatives, like the compound aloetic pill—in short, the same treatment that was recommended for metritis. Taking an emetic of antimonial wine, just when it is commencing, will relieve some, and a dose of aloetic pills for two days before will prevent it in others. The acetate of ammonia, commonly called *mindererus' spirit*, will very often give immediate ease; twenty drops of this may be given in a glass of water, and if no relief is obtained, twenty more may be given in half an hour. It should not be given beyond the third dose, however, because it has a tendency to check the flow, and for that reason, in fact, it is better not to be given at all, if other means will succeed. Various medical preparations are in use for the same purpose, none of which are serviceable in all cases. The following recipe is, perhaps, as generally useful as any:—Camphor, one scruple, with just sufficient spirits of wine to dissolve it; gum arabic, one drachm; cinnamon water, one ounce. Sweeten it to taste, and drink half of it when the pain commences, and the remainder in two hours after, if necessary. Or the patient may procure a quarter of an ounce of gum camphor, and make it into pills of the usual size, two of which may be taken when the pain begins, and two each hour after if necessary, till six are taken. This is as often useful as any elaborate prescription.

Laudanum is very generally taken internally, but should always be avoided, if possible, on account of the uncomfortable feeling it produces afterward. The best way is to use it as an injection, or enema, which does all the good without any subsequent evil. Hot poultices, or fomentations, are often serviceable over the womb, or a small blister on the loins. Very often, however, all medical treatment is useless, and some other plan must be resorted to.

Dr. Mackintosh supposed the difficulty was owing to a stricture of the passage in the neck of the womb, and he therefore proposed to introduce a bougie to dilate it. This has been frequently done, and with occasional success. The operation itself is comparatively easy; a small bougie being introduced first, and larger ones in succession, as far as required. In most young persons, however, this cannot be done, and in all cases it is objectionable. Fortunately other means are known, much more certain, and less repugnant to the feelings.

Galvanism is here again our surest dependence. Its effects are, in fact, sometimes as astonishing as they are gratifying. The application is seldom needed in any other way than externally, as in suppression, and it usually relieves in a few minutes, if not instantly! Dr. Mackintosh was quite right when he supposed the difficulty often owing to a stricture, but most generally it is merely a temporary *spasmodic* one, which is apt to return directly the bougie is withdrawn, but which the galvanism effectually relieves.

It is necessary to state, however, that the length of time necessary to administer the galvanism is uncertain, and that it may exert little or no influence in preventing the difficulty at the next period. My usual plan is to apply it till the pain is fully abated, then in about five minutes withdraw it and await the result, but keep the instrument ready. In many cases there is no return, but in others it has to be continued, more or less, for some hours, or even during the whole period. I then recommence its use about two or three days before the next turn, and continue it up to the time. In this way a cure is effected as often, if not oftener, than by medicines, particularly if proper attention be paid to the general health, and to the removal of other diseases. I have also occasionally advised the use of a small galvanic bougie, which the patient can apply herself, and with the happiest results.

One of the most obstinate cases of this disease I ever saw, came under my notice in Philadelphia. The patient, a highly respectable married lady, had suffered from it for many years. Her general health was very good, constitution sound, and her periods perfectly regular, though the quantity was frequently small. She had never been a mother. Every means that could be suggested had been tried in her case, without the slightest good, and the most eminent physicians had abandoned it as hopeless. The only relief attained was by laudanum, which was taken till it literally stupefied her. The distress usually commenced nearly a week before the period, with drowsiness, languor, and weakness in the limbs, followed by qualms at the stomach. For the first day of the flow she seldom suffered much more, but on the second the spasm commenced, with the most agonizing pain in the womb, and loins, and with vomiting and chills. This would continue more or less for that and the following day, during which time she was confined to her bed, and groaning with pain, so that sleep was impossible. When the attack was over, she would be left so weak, and her nerves so shattered, that it took her a week to recover, and thus one-half of her life was spent in misery, and the other half in dread of it. A strong dose of laudanum would somewhat relieve her, and force sleep, but left her much

worse after—it merely made her insensible. During all this time she was excessively irritable, and unhappy in her disposition; but fortunately, those around her knew the cause, and acted accordingly. Having heard one of my lectures, she sent for me to ask my advice, remarking, when she first saw me, that she had *no hope from medicine*, having taken it for years, almost like her daily food! I at once suggested the galvanism, but certainly with no flattering prospect of success. At the next period it was accordingly applied, immediately the pain began, instead of taking laudanum, and to the great joy of all, it eased the pain almost immediately. It was found necessary, however, to continue it more or less during the whole day and night, for immediately it was withdrawn the pain returned. In this way she lay in tolerable ease, while the battery was playing upon her, which it has often done almost through a whole night's sleep. We were disappointed, however, in our expectations of a permanent cure, for at each succeeding period the same symptoms returned, though they were always relieved by the same means. The galvanism supplied the place of the laudanum, and with none of its injurious effects, so that she was not troubled so long before, nor after. In fact, she often remained quite well up to the time of the attack, and rose immediately it was over as well as before. Her general health became better, her strength increased, and she became much stouter. In this way she has kept on for about two years under my notice, sometimes being a little worse, and at others suffering scarcely at all. I mention this case, because it shows how much *relief* may be obtained by galvanism, even in the worst cases. I have no doubt but that a resort to it in time would have effected a cure.

I tried the bougie in this case also, but it did no good whatever, neither did the emetic, nor baths. It is probable that if she becomes a mother, the difficulty will disappear; and the treatment, when she was first attacked, ought to have been directed with a view to bringing about that event.

During the time I was treating this, I had another similar case in a young unmarried lady. The symptoms were almost precisely the same, and so severe that for two or three days she was compelled to leave her employment, and go to bed. Medicines or baths did her no good whatever. The first application of the battery, however, gave instant relief, and after continuing it for about half an hour, the symptoms did not return. It was afterward applied just before the period, and invariably *prevented* the attack. Eventually, in about six months, its continued use seemed to wear the disease out, so that it returned no more.

Like all other remedies, of course, it will sometimes fail, and it did so in one instance, which I mention for instruction. It was that of a young lady whose occupation was *teaching*. She was intellectual, of a nervous temperament, and very industrious, and I have no doubt but that it was her incessant mental occupation that kept up the disease, for she was remarkably well in every other respect. Indeed, in many other such cases I have known rest, and quiet of mind, with cheerful out-door occupation, effect a perfect cure alone.

At the present time, I have quite a number of patients under treatment by galvanism, for this disease, and in the great majority of them, it is effecting the most beneficial results.

I knew one lady who got tired of the warm bath and hot teas she had been using for so long a time, and who plunged in despair into a *cold bath*! To her surprise it gave her *immediate relief*, and she ever afterward resorted to it. I have known others

again, who found ease in dashes of cold water, cold injections, and even ice, or wet wrappers upon the abdomen. The shower-bath is also frequently beneficial, begun immediately after one period and continued till the next. In short, there are many means of giving relief, but a cure is generally difficult, and sometimes impossible, except through some of the changes in life we have referred to, or by a continual judicious *alterative* treatment.

Many poor seamstresses and waiters in stores suffer from this disease to a great extent, their occupation making all treatment useless, and their circumstances compelling them to continue it.

The whole difficulty, as already remarked, is often caused by the formation of membranes and clots, which irritate in passing away. I have known some of them as large as the hand.

Dr. Ryan gives us the following account of these cases, as most usually seen:

"The woman experiences severe pain the first day of menstruation, and suffers as severely as if in labor, or by abortion. She often experiences relief by the expulsion of one or many membranous substances from the womb. These membranes are somewhat like the skin of a gooseberry, and are smooth on each surface, thus differing from the decidua. The membrane is so like the covering of the infant in the early months of pregnancy, that a lady, who was a patient of Dr. Hamilton's, thought she miscarried ten times a year, for three years. Denman and Dewees were of opinion that a female, thus affected, could not have children; but Morgagni asserts the contrary, as also Hamilton and Burns. If one healthy period without pain occurs, even at an interval of seven years, conception may take place. Hamilton described cases of pregnancy under these circumstances, and I myself have frequently known pain attend menstruation for months after marriage, and conception take place. I attended with Mr. Bradford, of Fleet Street, a patient aged twenty-three, who labored under dysmenorrhœa since the occurrence of the evacuation in her fourteenth year, and still she was pregnant. She never passed any membranous shreds. I know another lady, aged twenty-one, who always suffered severe pain during menstruation, which was much increased by marriage. She is pregnant, however. She never discharged portions of membrane."

PROFUSE MENSTRUATION, OR FLOODING.

This disorder is usually spoken of as occurring in two forms: *Menorrhagia*, when there is merely a large quantity of the menses themselves; and *metrorrhagia*, when the discharge occurs at any other times than the menstrual period.

In menorrhagia, or profuse menstruation, the quantity may be large, and yet come in the usual time, or it may be many days or even weeks in coming, so that in some cases there is only a few days between the termination of one period and the beginning of another. Sometimes there is actually no cessation at all, the flow being incessant, while at other times the separate periods will be short, but close together.

It is very difficult to decide when there is profuse menstruation, the quantity secreted by different females varying so much. Each one, in fact, appears to have a quantity peculiar to herself, depending on some peculiarities in her constitution. Thus, one will never have more than a mere show, while another will discharge half a pint, or a pint, and yet both enjoy excellent health. The only means we have of judging is, by observing the general health. If this suffers, and the patient is weak

and nervous, with no other apparent cause to make her so, we may reasonably conclude that the discharge is too great.

Thin, delicate females generally lose more than those who are full and robust, and in some the quantity varies much at the different seasons and turns of life.

The causes of menorrhagia are, debility, or plethora, various uterine diseases, and derangements of the other organs.

The treatment must of course depend on what we consider to be the exciting cause, and on the condition of the patient. The only general directions that can be given are, to rest, and particularly to lie much on the back, with the pelvis elevated. Those of a strong constitution, and full habit, should also live on a low diet, drink freely of lemonade, or tamarind tea, keep the bowels open, and use the cold shower-bath. Those, on the contrary, who are weak should use a nourishing diet, with good wine, take warm salt-water baths, and ride out much in the fresh air.

When this treatment does not succeed, the same means may be adopted that will be pointed out presently for metrorrhagia, but we should never be in a hurry in resorting to medication, for it is seldom needed, and frequently injurious.

Metrorrhagia.—This term includes all those hæmorrhages, or discharges of blood from the uterus, not connected with menstruation, pregnancy, or gestation. These occur at almost every period, having been found in females past the turn of life, and also in children, from a few years old, down to a few months or even days! They are more frequent, however, during the prolific period, and with the married than the single. The causes that produce them are various. Among the predisposing ones may be mentioned all those that produce metritis, or leucorrhœa; such as cold, improper diet, violent emotions, excesses, and debility, or a too great fullness of the system. Also too frequent child-bearing, and marriage, particularly if that take place at an improper time, or when there exists some physical impediment!

Among the exciting causes of metrorrhagia may be enumerated violent exercise, particularly hard riding on horseback, or in a jolting carriage, lifting, straining, coughing, and blows upon the abdomen. It may also be brought on by other diseases, particularly by inflammation of the uterine organs, or others, and by constipation, or diarrhœa. It often follows from fever or other debilitating diseases, and from long-continued grief, severe study, or exhausting labor. Irritation of the breasts, especially by the child during nursing, will frequently cause flooding, and continue it in spite of any treatment.

There are many nervous females in whom flooding will occur from the slightest mental agitation, and many others in whom every little deviation from health is followed by the same results.

The bleeding produced by polypi, tumors and ulcers, or by the different displacements of the uterine organs, or by violence, is not properly a disease in itself, but merely a symptom, and usually stops immediately the cause is removed.

Sometimes the discharge will be small at first, and gradually increase; and sometimes it will occur very frequently, while at others weeks or months may intervene between the attacks. In some persons it is almost constant, and in others it comes at regular periods, like the menses. The quantity is of course equally variable, from a few drops to a full stream, or sufficient to cause fainting, and even death, in a short time. In these cases, however, it is most usually brought on suddenly, by some violence or strong emotion, and may then be fatal before assistance can be rendered. I have known a female lose a full quart of blood in this way in less than an hour.

Occasionally a flooding is preceded by pains in the uterus, like those of dysmenorrhœa, and by a sensation of fullness, heat, and weight in the pelvis. The breasts also swell, the pulse quickens, and a general lassitude pervades the system. The face becomes pale, the skin creeps, the feet and hands become cold, and frequently there is pruritus of the external parts. These symptoms are usually modified by the first rush of blood; but if this be too great, or too long continued, the patient complains of a sinking in the stomach, her lips lose their color, her eyes become dim and her hearing dull, she breathes with difficulty, her pulse almost stops, and at last fainting or convulsions terminate the fatal scene.

In those cases where the discharge is great, and frequently renewed, a new train of symptoms sets in. The patient's strength is completely prostrated, her digestion becomes imperfect, her appetite disappears, the skin becomes of a sickly dead white color, and a black, puffy circle surrounds the eyes. In a short time the limbs swell and fill with water, the abdomen also becomes dropsical, dull pains are felt in the stomach, and various nervous diseases supervene. This state of things may continue for a long time, or may be suddenly terminated by convulsions and death.

In regard to the treatment of metrorrhagia or flooding, it must be remarked that, in most cases, it results from some other primary disease, the removal of which is the first and most indispensable requisite for success. A careful study must therefore be made of the patient's constitution and habits, with a view to this desirable result.

To arrest the bleeding, the female must lie on her back, on a mattress, with the pelvis elevated, she must be very lightly covered, kept perfectly quiet, both in body and mind, and breathe pure cool air. The feet and hands, however, should be made warm. Her diet must consist of barley-water, rice, milk, jelly, or very ripe fruit, and she may drink abundantly of lemonade, tamarind tea and ice-water, and eat oranges, cherries, and other ripe acid fruits. In obstinate cases a tea may be given, made of two ounces of comfrey root, or one ounce of rhatany root, boiled in a pint of water, and sweetened. The bowels may also be relaxed, with about three drachms of cream of tartar, and, if they are very costive, which is usually the case, enemas must be given of thin starch and castor oil.

If in spite of all these means the bleeding still continue, or the patient begins to be exhausted from it, injections may be used, of alum-water, ice-water, vinegar and water, or white-oak bark with thirty or forty drops of laudanum to the injection, which should be retained some time. A few drops of laudanum may also be used in the comfrey or rhatany tea, before mentioned; or thirty drops may be added to an enema. The root of the common black currant, and of the ground blackberry, or dewberry, also make an excellent tea to arrest flooding. A handful of each of these, boiled in two quarts of water for twenty minutes, makes perhaps the best preparation for this purpose that could be given. It may be sweetened to taste, and the patient may drink half a teacupful every quarter of an hour. Cold wet towels may also be laid on the abdomen and under the loins, and, if nothing else stops the flow, and she be rapidly sinking, a cold hip-bath may also be tried.

The great dependence of most practitioners, however, in these cases, is upon *bleeding*, and *opium*. Some advise the blood to be taken from the arm, others from the feet, or hands, or by leeches to the temples, between the shoulders, or inside of the arms. The theory being that a new direction is thus given to the sanguine discharge, which leaves the uterus to fly to the wound. Though the philosophy of this

may not be very evident to all persons, yet there is no doubt but the practice is sometimes beneficial; I think myself, however, that the same good may be usually effected by other means.

In those cases where the discharge is chronic, we must first endeavor to increase the patient's strength. Her diet should be nourishing, but not stimulating, and she may use a little good old wine, with Peruvian bark, or other bitters. The compound mixture, or aromatic tincture of iron, already mentioned, may also be given, and occasionally some of the comfrey, or rhatany tea, or that of the black currant roots. She should also use the cold shower bath every morning, ride out gently into the fresh air very frequently, and go to the sea-side; in short, do anything that will promote the general health.

The ergot of rye has also been used, in long-continued cases, and savin, but their action is violent and sometimes dangerous.

It is not always prudent to check a profuse uterine hæmorrhage too suddenly, for it is sometimes a salutary effort of nature to relieve herself from some greater evil. We ought rather to promote the general health, and let it gradually cease itself. An issue may be established, inside the thigh, if any bad effects result from the stoppage.

After the flow is stopped, great care must be exercised to prevent its return. A light diet should be adopted, all stimulants avoided, and before each menstrual period careful rest should be observed. Excitement should be particularly guarded against, especially of a certain kind, warm clothing should be worn, and late hours avoided.

In those severe cases, when the gush of blood is almost instantaneous, and so great as to endanger life in a very short time, we may employ, temporarily, mechanical means to prevent it. The best of which, and the most readily prepared, is called the *tampon* or *plug*. It may be made of linen rag, cotton, or sponge, in the form of a ball, and introduced into the vagina like a pessary. It should be large enough to completely fill up the passage, but must not be introduced more than about two inches, for fear of irritating and inflaming the mouth of the womb, which is then very sensitive.

A very good way to make the plug is, to cut out round pieces of soft linen cloth, then pass a stout thread through the middle of each and press them close together, till the mass is an inch thick. The string is convenient for pulling it out again, and should always be attached to every one. A small bag filled with tan, or ashes, or sawdust soaked in alum-water, is also very excellent. These plugs should not be withdrawn in a hurry, unless severe symptoms supervene, and when they are removed, care must be taken not to disturb or irritate the parts. If the danger be imminent, and there be not time, or means to prepare a tampon, the lips and vulva should be firmly pressed together with the hand, till other means can be procured.

CHLOROSIS, OR GREEN SICKNESS.

This is a name given to a peculiar disease usually characterized by a pale greenish color of the face, which is also swollen and puffy, and by general debility and derangement of most of the functions. It has also been called *white jaundice*, *white fever*, and *morbus virgineus*.

Great doubt and uncertainty prevails as to the nature of this disease, and its

origin. Thus some suppose it to originate in the digestive, some in the assimilative, and some in the uterine organs, while others attribute it to debility of the nervous system, and others again to an imperfect state of the blood. It cannot be owing, however, merely to derangement of the digestive or uterine functions, because, in some cases, both these functions are perfectly performed, though not usually. An imperfect state of the blood, on the contrary, *always exists* in this disease, and is probably produced by nervous debility and derangements, which may therefore be regarded as the primary cause.

The singular alteration in the composition of the blood, in this disease, is very remarkable, and a knowledge of it is highly important, as an index to proper medication and nutrition. If we take *one thousand parts* of the blood of a healthy woman, and analyze it, we shall find, after allowing for loss, the solid materials to be about *one hundred and fifty parts*, iron *eight parts*, and water *seven hundred and sixty parts*. But if we take a thousand parts of the blood of a chlorotic patient, the solid materials will only be about *one hundred parts*, iron but *four parts*, and water *eight hundred and fifty parts!* From this it is evident that in chlorosis the blood is more watery, and contains less solid matter, and iron, than in the healthy state. This deficiency of the solid parts explains the wasting and flabbiness of the muscles, while the increase of water explains the puffy or dropsical state of various parts. The use of iron in the blood is not yet ascertained, but that it is necessary there can be no doubt, nor can there be any question as to its deficiency causing many diseases. The quantity naturally existing in the human body is much greater than usually supposed. The wife of an eminent man in France now wears a ring, made of the iron extracted from her husband's blood, which he lost during a lengthy sickness. It has even been proposed, on the death of any great man, to make a medal of the iron from his blood, and thus perpetuate a remembrance of him, instead of raising a monument.

It is supposed that this deficiency of solid materials in the blood, is owing to insufficient nervous power in the vessels that form the blood; but be that as it may, we find, as will be seen farther on, that using a diet which contains much of these solids, namely, fibrin and albumen, and taking iron internally, are the only means of curing chlorosis.

This disease is found chiefly in young unmarried women, though occasionally met with in the married, in the pregnant, in those that have borne children, in those past the change of life, and in children, and in some rare instances, even in men. It is, however, more especially a female disease, and in the great majority of cases, is attended by obstinate and peculiar uterine derangement.

The supposed *causes* of chlorosis are both numerous and various. Perhaps the most frequent are, precocious puberty, growing too fast, a feeble constitution, scrofula, menstrual derangement, melancholy, and mental excitement, and especially *certain vicious habits*. Late marriage, or widowhood, should also be mentioned, and disappointment in love! In addition to all these, there are also undoubtedly many general causes, such as cold, damp, and dark dwelling-places, bad air, insufficient or improper food, and a sedentary, luxurious, or indolent mode of life. Drinking vinegar, and eating green fruits, are also specially alluded to by some authors.

The *symptoms* are so peculiar, and characteristic, that chlorosis is more distinctly marked than almost any other disease we have mentioned. At the commencement the patient is dull, listless, and melancholy; she is disinclined to any motion, and

sighs or weeps, without knowing what for. The face swells, the eyes become heavy and languishing, with a black puffy circle around them. The hands and feet are cold and pale, like the lips; the breathing is difficult, the appetite capricious, and the digestion imperfect. The bowels are usually costive, and the evacuations like white clay. The heart frequently palpitates on the slightest exertion, or mental emotion, and a constant inclination is felt for sleep, or to remain perfectly inactive. On using the stethoscope, the heart, and some of the large arteries, are found to have peculiar sounds, different from those in health, and the blood when drawn is pale and thin. The ankles also swell, as in dropsy, but when the finger is pressed upon them the mark does not remain, as it does in that disease.

If the disease progresses unchecked, all these symptoms become worse. The patient feels the most unaccountable likings, or disgusts, and exhibits the most depraved tastes. Some will eat charcoal, chalk, plaster from the walls, dirt, ashes, and even flies, spiders, and other insects. Some will have no appetite at all for food, while others will eat so ravenously, that they can never satisfy themselves. Pain at the stomach is usually felt after eating, or vomiting occurs, and the tongue is, in most cases, swelled and coated with mucus. Flying pains are also felt in the neck, shoulders, arms, and down the spine. The urine becomes pale and scanty, and the bowels subject at intervals to a watery diarrhoea.

Leucorrhœa is a common attendant upon chlorosis, and is generally accompanied by amenorrhœa, though sometimes there will be more or less flooding. The patient is often worse at the menstrual period, suffering pains like those of dysmenorrhœa, with great depression of spirits, or even partial delirium. The discharge is found to be very thin and light colored, and when left on the napkin, it divides into two distinct parts, one rather sticky, like starch, and the other watery. When dry, it is nearly colorless.

In addition to all these, the most troublesome nervous symptoms arise. The patient either becomes irritable, passionate, and revengeful, or else completely cast down, so that in her despair, she thinks of suicide, or wishes for death. She is either sleepless, or disturbed by horrible dreams; her head aches, her sight is dim, her limbs tremble, and she experiences a constant ringing, or buzzing in the ears. Sometimes there is frequent toothache, and occasionally twitching of the limbs, and of the muscles of the face.

Finally, this state of things becomes worse and worse. Constant pain is felt in the back of the head and upper part of the spine. The abdomen swells and hardens, the skin looks quite green, the difficulty of breathing becomes greater, the diarrhoea is more constant, fever sets in, and the whole system seems rapidly to waste, as if *it melted away!* The last stages are frequently marked by general dropsy, pinching up of the features, and blueness of the lips. There is seldom any shock, or struggle even at death; but the sufferer seems to gradually sink and die from mere debility and marasmus.

The duration of this disease is altogether uncertain. It is seldom fatal itself, though it may lead to fatal results by bringing on other diseases, or it may gradually wear the patient out, by exhausting her strength. Fortunately, there are few diseases more certainly curable than this. Under proper treatment it seldom lasts longer than a month or two, and very frequently can be cured in a week. I have even seen a patient who was drooping like a tender flower in the sun, and too weak to stand, visibly improve in *two days!*

The *treatment* must be first commenced by removing all causes that may be thought likely to continue, or bring on, the chlorosis, particularly all other diseases. The patient must then be placed in a warm and dry situation, where she can breathe pure air. Her clothing should also be warm, and her body well rubbed every morning after a shower bath. Flannel, worn next the skin, has frequently a very excellent effect, and should always be adopted, unless the other means mentioned keep the surface of the body quite warm without it. The diet should consist of eggs, roast meats, rice, tapioca, sago, and milk. Ripe fruits may also be used, and celery is excellent. *Good wine* may also be used with advantage, and, as a general drink, lemonade, or tamarind tea. All articles that are found not to sit well on the stomach, or that are indigestible, should be carefully avoided. Unripe fruit, salads, and pastry, are generally unwholesome. The object of this kind of diet it will be seen is twofold; first, to gently stimulate the flagging energies, and restore the failing strength; and, secondly, to supply those solid materials, namely, albumen and fibrine, of which, as we have before shown, the blood in chlorosis is deficient.

Exercise in the open air is indispensable, but the manner of it must depend on the patient's strength and habits. If she can walk, so much the better, but if too weak for that, or if it distress her, she should ride—either on horseback, which is most desirable, or in an open carriage. Rowing in a boat, and sea-bathing are also very good. It is very desirable, however, let her exercise as she may, that it should be done in company with others, so that there may be the additional stimulus of emulation, and the excitement of conversation. In fact, cheerful associates, and pleasing mental occupation, are highly important. Traveling may also be recommended, both on account of the change of air, and of scene. All causes that tend to either excite, or depress the mind, should be most carefully avoided, and also all reading that calls forth the sensibilities too strongly. Corsets should not be worn, nor should the patient sit up late at night, nor lie too late in the morning.

In *very many* cases the above-mentioned general means will be quite sufficient to effect a cure; but when they are not, medication must be resorted to; and of all medical substances, *iron* is the most generally useful in this disease; in fact, it is almost a specific. The particular preparation used, is not of so much importance as giving it early, and freely. Any of the iron mixtures and pills already mentioned may be employed, or any of the following: Compound iron pills, two pills of five grains each, to be taken three times a day. Carbonate of iron pills, dose the same as the other. Syrup of iodide of iron, twenty drops twice a day, in half a tumbler of water. This is particularly useful where there is any tendency to scrofula. Tincture of the muriate of iron, ten drops three times a day, in half a tumbler of water. Sulphate of iron and subcarbonate of potash, each half an ounce. These must be rubbed separately to very fine powders, and then thoroughly mixed together, with sufficient thick mucilage of gum tragacanth to make it into a paste. This must then be divided into forty-eight boluses. One of these may be taken morning and night, for the first three days, and one *three* times a day on the second three days; on the third three days, two may be taken morning and night, and one in the middle of the day; on the fourth three days, *two three times a day*; on the fifth three days, *three three times a day*; and on the sixth three days, *four pills three times a day*. This quantity may be continued till the disease begins to disappear, after which the dose may be decreased in the same way it was increased, or, if the patient seems nearly well, it may be decreased before arriving at the largest quantity.

This is the favorite prescription of a celebrated physician, who depends on it for curing almost every case. Citrate of iron two drachms, sulphate of quinia half a drachm, water one ounce. Mix these together, and take twenty or thirty drops in half a tumbler of sweetened water, half an hour before breakfast, dinner, and supper. The sulphate of iron and gentian pills, formerly mentioned, are also excellent, and so are the iron and rhubarb pills, sold by the druggists, two of which, of five grains each, may be taken twice a day. These last have the advantage of opening the bowels, which should be particularly attended to; they may therefore be beneficially taken along with any of the other kinds occasionally. It is very desirable not to leave off taking the iron too soon, merely because there is a slight improvement, for by so doing we may cause a relapse. Rhubarb may also be used alone, if necessary, and in case that does not relieve the bowels, enemas should be resorted to.

Emetics have been employed by some physicians, in chlorosis, and drastic purgatives by others, but they are seldom either of service or needed. If *iron* be properly administered, in connection with a proper course of diet and regimen, it will scarcely ever fail, unless there be a complication with some more serious disease. Immediately after its use is begun the dull eye will brighten, the skin regain its color, the functions become healthy and regular, the nervous symptoms will become less severe, and the strength will gradually return. The philosophy of this will be evident, when we remember that iron is an essential constituent of the blood, and that in chlorosis the quantity is much smaller than usual. By giving it in medicine therefore, we simply supply artificially what has become naturally deficient.

If we have reason to suppose that the chief exciting cause is the predominance of certain feelings arising from over action of the uterine organs, it may be advisable to suggest marriage. In case that is not possible, however, the treatment must be varied, so as to reduce the uterine excitement. Cold baths, and injections, unstimulating diet, saline purgatives, and active occupation may be recommended. These *moral* causes are frequently the most active ones, and they are the most difficult to remove, because few persons understand them, or know their power, and still fewer know that they *can* and mostly *ought to be*, attacked chiefly by *physical* means!

The subjects of chlorosis are the most interesting perhaps of all that come under the physician's care. Delicate and sensitive, stricken by a disease from which they deeply suffer, but which often leaves their beauty untouched, or even heightens its attractions, they excite the liveliest emotions of pity, and the most ardent desire to render them assistance. Like many other of the affections previously described, this is, unfortunately, very general. A large portion of those now under my care, are victims to it. I am sorry to see this, but some consolation is derived from the fact that relief may confidently be expected by most of them.

When chlorosis commences just before puberty, which it often does, it frequently disappears with the appearance of the menses, and if there be indications of them, it is better to wait awhile, before commencing medication.

Chlorosis may be very easily mistaken for several other diseases, unless care be taken, particularly for *jaundice*. But no person of competent experience, and who devotes proper attention to his cases, is likely to make such an error. The peculiar state of decay and weakness, called *anemia*, or decline, has also been taken for chlorosis by inattentive persons.

HYSTERIA.

We now come to the most mysterious, confusing, and rebellious of all female diseases. Almost every woman has either experienced or seen what is called *hysterics*, and the name is so frequently given to the most opposite and discordant symptoms, that it is requisite to explain what is hysteria, and what is not; at least as far as we can.

The name hysteria is derived from the Greek word for *the womb*, it being generally considered as essentially a uterine affection. The *symptoms* of this disease comprise, if we were to enumerate them all, those of nearly every other disease under the sun. In fact, they are so numerous, so various, and so changeable, that describing them all is out of the question. We must therefore confine ourselves to a brief enumeration of the most prominent ones, and more especially of those most frequently found at the commencement.

In some cases, the attack, or *hysterical fit*, comes on suddenly, but more frequently it is preceded for several days, by more or less derangement of the general health. The female suffers from headache, cramps, palpitation of the heart, numbness of the limbs, coldness of the hands and feet, rush of blood to the head, and redness of the face, with yawning and restless anxiety. She becomes dejected, or melancholy, and will sigh, or burst into tears, and then as suddenly laugh in the most immoderate manner, and without any apparent reason for it.

When the fit really commences, she feels in some part of the abdomen a sensation as if a large round ball, or globe, was moving about; which, after appearing to roll in various directions, generally rises, on the left side, up to the chest and throat, and seems to stop up the passage, so that the patient appears to choke, and is in mortal fear of suffocation. During its progress, this ball seems to distress every organ it passes, and to leave a most oppressive sensation of weight in the chest. In severe cases this is followed by fainting, after which she may either slowly recover, or may have other fits in rapid succession. There may be, however, merely slight convulsions, followed by partial loss of sight or hearing, and confusion of the mind. Sometimes the convulsions will be so violent that two or three men can scarcely hold her, and if not prevented she may seriously injure herself. The body will occasionally twist or bend in various ways, the teeth clench, the eyeballs roll, the nostrils distend, and saliva work from the mouth, nearly as in epilepsy. The head is usually thrown back, in long-continued attacks, and the female tears at her throat, owing to its constriction. The cheeks and nose are most frequently cold and white, though sometimes the center of the cheek will be red, as in fever. In many cases the abdomen swells, and very often there is a severe stitch in the side. Partial or complete loss of consciousness, or delirium, may occur either during the attack, or subsequently, though some females are perfectly sensible the whole time. The senses are in some cases rendered remarkably acute, so that the patient will hear the slightest whisper, or smell the faintest odor, and see everything that is going on, even though her eyes seem closed. This peculiarity has caused many to be suspected of imposition, by those not acquainted with the disease. This suspicion has also been strengthened by another circumstance: the patient nearly always tells whether she is going to have another attack or not, and is seldom or never wrong. This foreknowledge, however, is simply the result of her sensations, and need excite neither wonder nor uncharitable distrust.

When the violence of the fit is passed, there is generally observed a singular rumbling of wind in the abdomen, and great quantities of it are discharged by the mouth from the stomach. Vomiting may also ensue, or confused palpitation of the heart, with labored breathing and twitching of the muscles. A severe, fixed pain in the head is also frequently felt in one particular spot, with ringing in the ears and bright sparks float before the eyes. Generally, the sufferer utters most piercing cries, so peculiar that they can never be mistaken by those who have once heard them, and so frightful that few can help feeling alarmed at them. In fact, there are few exhibitions of human suffering more likely to appall and excite consternation than an *hysterical fit*, especially among those to whom it is new. Fortunately, all these symptoms are not observed in every case, for some patients will remain, between the attacks, in a partial stupor, or sleep, during which they will smile and appear quite happy. It has been supposed, in fact, by some that this dreamy, hysterical state is the real mesmeric sleep, or *somnambulism*.

The final cessation of the attack is often denoted by sighing, sobbing, and crying, or immoderate laughter, similar to what is usually observed at the commencement. This is followed by a gradual subsiding of the more violent symptoms, and by moaning, or deep sighs, after which the heart beats more quietly, the breathing becomes regular, and a gentle heat, with perspiration, appears on the surface. It should also be particularly mentioned that there is nearly always felt a most pressing desire to urinate, and if this be impossible, the pain and anxiety thus excited may bring on another fit. This should be remembered by those who may be with such cases. Another remarkable circumstance may also be mentioned; immediately the patient recovers, an abundant mucus secretion flows from the vagina, though previously it was unusually dry and constricted. This is a proof how much the uterus sympathizes in this disease. I have known this take place to such an extent as to lead to the belief that the urine had escaped involuntarily. A temporary loss of voice may also take place, but it need occasion no special alarm.

When all is over, there seldom remains anything more than a general weakness, with mental dejection, and occasionally dullness of memory, with a disposition to day-dream, though some will complain of soreness in the limbs, and a sensation as if the head had been struck with violent blows.

The above-mentioned symptoms may either be all observed in any attack, or only a few of them, and they are exhibited so irregularly that anything like a classification of them into stages is out of the question. Their intensity may also be very great, or so slight as to excite no apprehension. Occasionally there are other symptoms added, such as hiccough, or a tendency to bite, as in hydrophobia, and sometimes others of a still more unusual character! The attacks may all be over in a few minutes, or they may last hours, days, or weeks, and sometimes will become periodical. It is difficult to say when a patient is cured of them, since they may return at intervals of six months or a year. There may also be only one fit at a time, or several, and they may either decrease in violence, or the last one be as bad as the first. The effects on the appearance of the patient are also various; thus some will even become more full of flesh, and look better, while others will fade and become thin. This last is more frequently the case, especially with those who have had much leucorrhœa. Many will have a very jaded and dejected look, and become melancholy and apprehensive.

As the patient advances in life the disease usually decreases; but if it do not,