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# INAUGURAL DISSERTATION

ON

## *Dysmenorrhœa*

SUBMITTED TO THE

PRESIDENT, BOARD OF TRUSTEES, AND MEDICAL FACULTY  
OF THE

# University of Nashville,

FOR THE DEGREE OF

# DOCTOR OF MEDICINE.

BY

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OF

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## Dysmenorrhœa

This disease is common to our climate, and is more or less very painful, sometimes not very much so, but not unfrequently, so much so, as to give great distress, through the whole course of her menstrual life. How many ladies feel a dread of that approaching day, when they expect a return of their menstrual period.

The pains resemble in intensity, that of labour, or abortion, properly so called, for to either the case may be said to have a strong analogy; A woman who suffers with

dysmenorrhoea, is unhealthy, as to the womb, and are not likely to be fruitful, in the married bed. It is true, that dysmenorrhoea, may last for many years, in certain individuals, without material injury to their constitutions, notwithstanding the invariable returne of the pain at the menstrual term.

The pain, the evitition, the imperfect performances of the functions, and state of the tissues, that lead to it, are well calculated to excite the solicitude, both of the patient and the physician.

It usually commences, with

a slight menstrual discharge, which is pretty suddenly arrested, pain now almost instantly ensues. This described by some women, to be of a foreing, bearing down kind, returning at longer or shorter intervals until a membranous substance or small coagula, are discharged, after the expulsion of this substance, the woman enjoys ease, unless there be a fresh production, in which case it requires for its expulsion, fresh contractile exertions of the uterus. Besides the alternate or labour like pains, just mentioned, there is always

a permanent one in the back, hips, and loines, which continues, untill the alternate paines have ceased, indeed this aching pain sometimes precedes the other, and announces the discharge to be at hand.

The quantity discharged is very various, sometimes it is small, and at other times, very abundant. The degree of suffering, is not always in proportion to the quantity of substance discharged, indeed the pain would rather appear to be less, when much is discharged. The duration of the period, are also very variable.

in some it will last but  
a few hours, when it will  
require several days, for others.

It would perhaps be very  
difficult to assign all the  
remote causes. The most common  
are the application of cold  
during the flow of the menses,  
taking cold after parturition,  
and abortion, especially those  
of a rheumatic disposition,  
and it is nothing strange that  
the female suffer from rheu-  
matism at her menstrual period,  
when custom and fashion has  
caused her to clothe the  
pelvic region, and thighs,  
in such a way as to be con-  
stantly exposed to the

influence of cold and damp, applied to the lower extremities. The menstrual alterations of the reproductive organs, which allows them never to continue in one even tenor action, exposes them more particular, than other organs, to the mortific influence of cold, and damp, which are admitted to be the most provocatives of rheumatic disorders.

But there are many causes, beside rheumatic nice, which gives rise to pains in menstruation. The womb may be the seat of neuralgic sensibility of the nerves, of the tissues

when aggravated by the va-  
cular engorgement of the function,  
attendant on the monthly flow,  
and it is reasonable to believe  
that the woman will be  
relieved by a full establish-  
ment of the evacuation of  
the menses. Otherwise a woman  
may suffer pain at her crisis,  
from various heterologous  
formation to which the  
womb is not unfrequently  
found to be subject. A displaced  
womb, cannot be supposed to  
have healthful existence,  
such as retroversion, and  
prolapsed uterus, since such  
dislocations, cannot fail to  
produce distortion and

traction of the nervous fibers, which render the organ liable to suffering, under changes of its sanguine circulations, and its innervation.

A womb that is maintained in its proper attitude, and height in the pelvis, will be less likely to suffer from dysmenorrhœa, than a displaced one. If the uterus be once prolapsed, with the osuteri resting upon the floore of the pelvis, and resting there for a long time, the neck of the womb is likely to become bent, and thereby placed in the condition

of a strictureal canal, and if we have a strictureal canal of the cervix uteri, will not irritation of the body and fundus supervene, from the difficulty which must ensue, in the evacuation.

I do not pretend to say, that all the cases of strictureal ~~cases~~ cervix uteri, are caused from anteflexion or retroflexion of the neck of the womb, although those flexions and angulations, are among the frequent causes. In a number of other instances, the causes appear to be so hidden as not to be cognizable.

The married and the single women, are alike subject to it.

The treatment of dysmenorrhœa are as various as the causes, for which we would consider the treatment, temporary, and permanent. The first, consist in the administration of remedies, to relieve pain, at the commencement of the attack.

And the most efficient and certain, for this purpose by Dr. Price is Camphor, and opium, in their various preparations, and as far as my experience extends, I have witnessed very soothing effects from their use.

The ergot, also are recommended, also warm bathe, and resection. And for the permanent cure, the volatile tincture of guacum stands very high as a remedial agent, especially those of a rheumatic disposition. I have witnessed the ~~eff~~ use of this tincture in several cases, with the happiest effects, two of them since conceived and brought forth healthy children.

As a remissial agent Prof Meigs, recommend the golden sulphuret of antimony, combined with

Camphor & Opium, or morphia,  
the acetous tincture of Colc  
hicum, & magnesia with some  
distilled aromatic water.

Blue pill or calomel before  
lying down at night, and  
the colchicum mixture in  
the morning which is to consist  
three drachms acetous tincture  
Colchicum, one drachm magnesia,  
and three drachms sulphate  
of Magnesia, with four ounces  
of any aromatic distilled  
water, a wine glass full  
dose to be repeated every two or  
three hours, until the bow  
els are well evacuated.  
for it is important to keep  
the rectum free from

all irritating substances,  
such as hardened feces. we  
may relieve the rectum also  
by soothing enemata.

When we are satisfied that  
dysmenorrhoea is caused  
from a strictural canal  
of the cervix uteri. which  
we can only satisfy our  
selves, by ~~by~~ a minute  
examination. which exam-  
ination we should in all  
cases insist, after a failure  
of the other remedial ag-  
ents. Dr Mackintosh and others  
has given numerous cases of  
females in which the orifice  
of the canal of the cervix uteri  
were so small as scarcely to be

perceptible to the touch, for which he would first introduce a small bougie through the canal into the cavity of uterus, and by successive operations, every day using still larger and larger bougies, until the passage is sufficiently restored, the effects of which in most cases restores health ~~to~~<sup>(the)</sup> patient.