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BOOK

ON

STRICTURE, FISTULA,

PILES, IMPOTENCE;

DISEASES OF THE GENITO-URINARY ORGANS; DEFORMITIES OF THE EYES, NOSE, AND FACE.

BY

HENRY A. DANIELS, M.D.,

SOMETIME TEACHER OF ANATOMY AND SURGERY IN SEVERAL MEDICAL SCHOOLS; AUTHOR OF A TREATISE ON THE FIFTH PAIR OF NERVES, AND NUMEROUS WORKS ON ANATOMY AND SURGERY.

144 LEXINGTON AVENUE,

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the Southern District of New York.

PREFACE.

This little book was first published in 1863 and is intended to give a clear idea of the nature of a class of diseases that are extremely prevalent. It has been unnecessary to alter the text, excepting that the article "Impotence" has been enlarged.

The Author's practice in cases of Stricture, Fistula, and in diseases of the Genito-Urinary organs, is very extensive. He has brought before him every imaginable complication, and this has given him a knowledge of the best method of treatment, and a precision in the use of instruments and appliances which none but an expert with a like large field of experience can hope to obtain.

144 LEXINGTON AVE., NEW YORK.

1869.

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SURGICAL DISEASES.

MULTITUDES perish prematurely, or suffer for years, in consequence of neglecting slight deformities, swellings, or ulcers, which, although they may give little or no pain, do nevertheless often lead to deplorable results; therefore it is thought a public benefit may result from making some plain statements in reference to ailments which require surgical treatment. It is a common but very erroneous opinion that surgical interference must necessarily be accompanied with great pain and danger to life. The fact is, that in the hands of a skillful surgeon, the cases are rare which require any thing more than a very small amount of heroism to bear. In cases where the patient is of a very nervous temperament, a slight inhalation of ether or other anæsthetic will render him insensible to pain during the very few moments of the

operation. In the majority of surgical operations there is a lessening of pain from the use of instruments, especially such as are required for strictured passages, displacement of various organs, the application of topical remedies, and the adaptation of the various kinds of mechanical support, and the like.

Surgery is a science based on physiological law, and an art founded on anatomical knowledge, and experience in the use of proper instruments and remedies, hence its practice is not uncertain. The success of a surgical operation can be predicted with great confidence if properly performed, provided the vital status is not too much impaired by extraneous or unforeseen circumstances, such as great loss of blood or nervous depression from some terrible injury, or exhaustion from some wasting or malignant disease.

The writer's labor as a practical anatomist during many years, and his experience in surgical diseases, authorize him, he hopes, to speak and act with authority in the premises.

OF TUMORS IN GENERAL.

A tumor is a preternatural eminence existing in any part of the body; when ex-

ternal, it is more or less a deformity; very often painful, and inconvenient, especially when large. Sometimes after remaining inactive for years, they suddenly become malignant and prove speedily fatal. A tumor may be transient, as when caused by effusion or inflation; these the skillful surgeon will remove by promoting their absorption, or will otherwise cause them to disappear without violence.

PERMANENT TUMORS may be caused by the impaction of a foreign substance, by some unnatural growth of parts or organs, deposits of water or blood, of calcareous and other matter; by hernia, and by the dilation of large vessels, as aneurisms. They may be of all sizes, from a small wart to a mass equaling in size the whole body; they may be cancerous or otherwise extremely dangerous. When there exists the slightest doubt as to their true character, an honorable, conscientious, and experienced surgeon should be promptly consulted. Many, very many cases are on record, where incalculable mischief has been done by ignorant interference. In July, 1859, the writer was called upon by a distinguished physician of Philadelphia to examine a tumor on the back

of a lady, extending from the neck to the loins, forming a most unsightly hump. It was at once pronounced an encysted tumor, and its immediate removal advised, not only on account of the deformity, but because it was on the point of ulcerating, which event would have given rise to a most offensive discharge, that might have continued for a lifetime. Although nursing a child at the time, the lady consented to an operation, which the writer performed, without administering ether, and with but little pain. The tumor weighed four pounds. The patient never kept her bed, and resumed her usual active duties within a fortnight, well pleased with being rid of a superfluous burden with but really a slight inconvenience.

It must not be inferred that all tumors are to be removed by the knife. Many can be got rid of by absorption, some by tapping, and others, as aneurisms, by tying a string around a blood-vessel.

DEFORMITIES OF THE FACE.

Sometimes persons are born with a want of the features, with deformities in the skin, such

as "mother's mark," (aneurism by anastomosis,) moles, and the like. Deformities may arise after birth from disease or injury, such as pitting from small-pox, scars from scrofulous abscess, burns, scalds, cuts and fistula; then, again, there is a loss or deformity of features by disease or violence.

MOTHER'S MARK,

When small, or of a form which facilitates removal, should be removed as soon as possible in infants and young children, in order to prevent increase in size.

BURNS.

When the skin has been destroyed by a burn, the wound contracts during the process of repair, and draws the adjacent skin with it, pulling down the side of the mouth or eyelids, or exposing more or less of the mucous membrane of the lower eyelid, which, by dust lodging on it, and by the constant change of temperature, causes a permanent irritation to be set up, endangering vision.

In extensive burns about the neck, the skin contracts so much that the lower jaw is drawn

down to the extent of preventing the mouth from completely closing, causing a hideous appearance, while the constant dribbling of saliva from the corners of the mouth is an incessant and mortifying annoyance. Here defects, large and small, can be remedied by proper operative procedure. Moles, hair, dis colorations of the skin, and other unsightly appearances can be removed without danger or suffering, scarcely leaving the slightest trace of their previous existence; and yet there are multitudes of parents who, under the impression that these things can not be remedied, allow their children to grow up with these blemishes, which in too many cases are a life-long martyrdom, owing to the constantly growing sensitiveness in relation to them. Such a result is greatly to be deplored, and many a heart-ache may be prevented as to a promising son or daughter, if different and more truthful views in regard to such things can be disseminated.

FISTULAS.

A fistula is an ulcerated channel extending under a surface; hence it may exist in any

part of the body. It is sometimes caused in the face by a stoppage of the ducts which convey the saliva from the glands or springs from which it comes; or by some disease in the gland itself; or from an unhealed wound or dead bone. In any case, the cause of the mischief should be ferreted out and the proper remedy promptly applied.

Very often after the healing of an abscess, there remains an unsightly puckering of the skin. In almost all such cases a portion of the surplus skin can be removed with great nicety.

DEFORMITIES OF THE EYE.

One of the most common of these is "Strabismus," or squint. It is a want of uniformity in the position and motion of the eyes. The radical cause is the contraction of one of the muscles which move the eyeball. A cure is effected by a division of the tendon of the muscle. The operation is simple, safe and effective, without in any way involving the eye itself or endangering the sight.

The eyelid may be inverted, and the eyelash being in contact with the surface of the

eye, inflammation arises, ending in opacity and blindness unless the defect is remedied; or the eyelid may be everted, turned outwards, and come in contact with foreign matter which will damage the sight. Sometimes small tumors are found in the eyelids; these can be easily and promptly removed, with the most perfect safety.

FISTULA LACHRYMALIS

Is caused by a stoppage of the canal which conveys the tears from the eye to the nose, hence the water overflows and runs down the cheek, causing considerable discomfort and inconvenience, and sometimes inducing irritation and ulceration; this defect can be perfectly remedied.

When an eye is lost or very much deformed, it can be safely removed and an artificial one substituted, which will give the outward appearance of a good eye.

THE NOSE

May be lost or deformed by internal and external tumors; of the latter variety nasal tumors or polypi are the most common; these fill up the nostril, impede breathing and speak-

ing, and are a source of incessant annoyance; they are readily taken away, and the sense of relief is instantaneous and most agreeable. Sometimes a part, or even the whole of the nose may be wanting or lost by disease, accident, or otherwise. In such cases repairs are made from the adjacent living skin, and a new nose of natural flesh and blood can be supplied; in rare cases, where there is a grievous disfigurement of the face, the misfortune can be remedied in whole or in part by means of skin taken from the arm, and with comparatively little suffering.

A young girl of this city was introduced to me, in November, 1862; she had lost her nose through an injury; there was no ulceration, the wound having entirely healed. I restored the organ by building it up from the adjacent skin; the parts healed rapidly, without any unfavorable symptom, she following her usual domestic avocations from the time of the operation.

In November last I restored the tip of the nose of a soldier. A few days later I was consulted by the mother of a young lady for a deformity of the nose of rather a singular character. From a blow received at

school, causing inflammation, a portion of the nasal bones came away, resulting in a sinking in of the bridge of the nose, with the tip projecting preternaturally. The daughter was extremely anxious to have an aquiline nose. By the use of an instrument devised and made to meet the case, the patient was rewarded by the angle of the profile of her nose being very much reduced.

The mucous membrane of the nose is often diseased, and a most offensive discharge, accompanied by disgusting odor, is the consequence. Some portion of this discharge is continually being removed by the patient, but another portion becomes lodged in the cavities of the cheek-bone and forehead, causing destructive ulceration and death of the contiguous bone. The parts can only be properly cleansed and made healthy, by direct applications to the diseased structure. Catarrh, and the poisonous effects of certain drugs, are the most common excitants of this malady. Some of my most grateful patients have been those who, in a measure, have been restored to society by being cured of this disease.

THE EAR

May be congenitally wanting or deformed. A lady recently presented herself to me who was born with but the right ear; the site, however, of the left was marked by a small fleshy prominence on which an artificial ear could be easily attached. Portions of the organ may be destroyed and the lobe may be cleft by the violent tearing out of an ear-ring; in this case the edges can be vivified and the parts united without leaving a visible scar. Polypi may grow at the entrance of the ear and impair hearing; they should be carefully removed as soon as discovered. Inflammation may be diffused from the nose and throat into the middle ear, and deafness result. This is a common sequel to catarrh. In these cases I have been fortunate in restoring the sense, and stopping destructive inflammation of the drum and aural cavities.

NOTE.—The reader should bear in mind that in all operations, where a wound is made, "surgical repair" is necessary to a perfect cure; this is a process by which lymph, or the fibrous portion of the blood, is thrown out, wakes into life, and becomes a part of the living body, and by this means all divided or fractured parts are repaired and become united, and cavities are filled up or obliterated.

THE MOUTH.

The appearance of the mouth is often spoiled by enlargement of the gums, and morbid growths having their seat in the mucous membrane lining the oral cavity—such as "ranula," a tumor that forms under the tongue. The tongue may be bound down in infancy by a small fold of mucous membrane which interferes with the child's sucking; it can be instantly remedied by snipping the part with a pair of scissors, care being taken not to wound the lingual artery; occasionally the tongue is more closely adherent to the lower jaw. Whilst residing in Philadelphia, I had to make a considerable deep incision under the tongue of a young girl, for the purpose of giving her greater freedom of articulation, an arrangement, it is hoped, that may ever be satisfactory to all parties.

HARELIP

Is a congenital fissure of the upper lip—the fissure may be single, direct in the middle line, or there may be one each side of the nose. Conservative surgery has very much

improved on the old operation for remedying this deformity, and it is advisable that the defect should be remedied early after birth. It is not an uncommon thing to see persons who have been operated on by inexperienced persons to still retain a very noticeable cleft; this is caused by the unnecessary removal of a portion of the lip; the disfigurement can be removed by a slight plastic operation.

ANAL AND RECTAL DISEASES.

Operations in these cases are comparatively painless and very transient; the aggravating symptoms generally subsiding from the commencement of the treatment. Sometimes it is necessary to divide a bridge of skin or flesh, or remove a slight impediment with the knife; but when this is done, the affair is really so small as hardly to cause a murmur from the most timid. Children may be born with a closed or imperforate anus; the defect is often slight and easily remedied; sometimes it is of so grave a character that a skillful surgeon should be called without an hour's delay.

Foreign bodies sometimes obstruct the passage along the track of the lower bowel, such as fish-bones, chicken-bones, melon or grape-seed, and the like, or they may be introduced from below. The proper remedy is to dilate the bowel, and withdraw the obstruction with appropriate appliances.

PILES OR HEMORRHOIDS

Are tumors which grow near the anus, and constitute a disease of greater frequency than perhaps any other; these tumors vary so much in character and the urgency of the symptoms to which they give rise, as to require division into two distinct varieties: the first, External Piles, are found at the margin of the anus, covered half with skin and half with mucous membrane; they are oblong ridges of skin or round hard tumors; these are commonly called blind piles, because they do not bleed, and are external to the sphincter ani muscle, the muscle that closes the rectal orifice.

Internal Piles are generally firm tumors, varying in size from that of a pea to that of a walnut, of a pale or reddish-brown color

when indolent, but dark or bright red when congested or inflamed. They generally cause great inconvenience by protruding at each motion, and are exceedingly liable to bleed from straining and pressure.

CAUSES.—The predisposing causes are any circumstances that produce fullness and pressure of the abdominal vessels, or impede the return of blood from the veins of the rectum. When the bowels are evacuated, more or less of the lining membrane of the anus is everted and distended by the resistance which is then opposed to its venous circulation. Constipation, by rendering the expulsive efforts more continued and laborious, must increase this effect and tend to produce permanent enlargement of the protruded part. Constipation usually depends on errors of diet or regimen, particularly redundant nourishment, and deficient exercise, and other causes that derange the healthy action of the digestive organs, such as mental excitement and annoyance whilst eating. The disease being once established will promote its own increase by impeding evacuation of the bowels, and from the pain as well as hemorrhage attending it, disordering not only the healthy action of

the digestive organs, but the whole system. Pregnancy, enlargement of the liver, abdominal tumors, and tight stays will, by opposing a free circulation in the large veins, favor the production of piles, and they may also be excited and aggravated by large doses of aperient medicines, and worms. Piles may be either indolent or inflamed; while they remain indolent they merely produce the inconveniences that necessarily result from their bulk and situation, and pain from getting within the gripe of the sphincter. When *inflamed*, they are exceedingly painful and give rise to heat, itching, fullness and tension about the anus, with a sensation as if there were a foreign body in the rectum. These symptoms may, in violent cases, be complicated with irritation of the bladder, frequency of micturition and pain in the back extending down the thighs. All the symptoms of dysentery are simulated by piles. In women they cause aching in the back and uterine irritation, with discharge. The symptoms which attend internal piles may be divided into three sorts, namely, painful sensations, protrusion of the tumor, and hemorrhage. Some patients complain of these symptoms

equally; others complain of them singly, but in general they are all present, though one may so predominate from its severity as to call particular attention to it. The painful sensations are either in the seat of the disease itself or in the urinary organs, which have a strong sympathy with the rectum. The protrusion is often extremely painful, and from the fact of its soiling the linen with blood and discharge, is a constant source of vexation.

The bleeding which proceeds from internal hemorrhoids is the most alarming symptom attending the disease; the blood may either ooze from the surface or be expelled in jets, and in quantities varying from a few drops to several ounces. When this bleeding becomes habitual it weakens the constitution, the countenance pales, the lips lose their vermilion color, the action of the heart will be greatly affected, and with incidental complications, the patient at last dies from exhaustion. Ulceration of the parts also is greatly to be feared, for purulent matter may be absorbed into the system and give rise to pulmonary trouble, or disease in any organ or part in which it may be deposited. The del-

icacy of females often incites them to conceal their being afflicted with this disease, but in any case where there is a suspicion as to its existence, it is the duty of the surgeon to insist upon a most thorough examination of the bowel before he gives an opinion in the case.

The person afflicted can do little toward alleviating his suffering further than attention to diet and the keeping of the parts clean.

The radical cure of hemorrhoids can be effected in two ways, by absorption of the tumors and gradual obliteration of the veins, or at once by ligation. Under no circumstances should an internal hemorrhoid be removed by cutting, because copious bleeding would follow, and great exhaustion be the inevitable result.

Perfect relief may be relied on in the most severe cases when the patient places himself under the care of an experienced surgeon.

In July, 1862, a young woman who had only been recently married, was induced by her husband to consult me, and by his affectionate solicitations she at last consented to an examination. I found several internal tumors complicated with ulceration of the mucous membrane, and a severe vaginal dis-

charge. In a short time, without subjecting her to any pain, she was entirely cured.

In December, 1862, a physician of this city, persuaded his cousin, a gentleman from the State of Maine, to consult me. He had been suffering for many years with piles, losing a considerable quantity of blood at every stool, and was consequently emaciated, and had the characteristic sallow complexion. As it was of consequence to him that he should be delayed as short a time as possible, I operated on him by ligation the day of his arrival, and he left for his home six days afterward, cured and in perfect health, in which state he has remained ever since.

FISTULA IN ANO

Is an ulcerated canal or canals in the neighborhood of the anus. The opening may be single, double, or more; it may be in the skin or mucous membrane, or there may be a track direct from the skin to the gut; and in some cases there may be several fistulæ, either communicating with each other or solitary.

The general origin of fistula is a collection of matter formed under the integuments of the hip, near the anus, and to one side of it.

The abscess may be rapid in its formation, and accompanied with the marked symptoms of acute inflammation, heat, redness, swelling, and pain; at other times the deposit is made more slowly and insidiously, attention being first drawn to it by a sense of uneasiness in the seat, accompanied by tension and the presence of an ill-defined flat swelling, which results from the contained fluid and thickening of the surrounding tissues.

In whichever way the abscess is formed, the matter, if left to itself, must sooner or later make an outlet on the surface, according to the law that the pressure of a foreign substance produces absorption of the surrounding substance. One opening will generally be found to exist in the skin, about an inch from the anus, and another at a variable distance of one to four inches from it, on the mucous surface of the rectum. The opening in the external integument is often very small, and sometimes its existence is ascertained by pressing on the parts with the fingers, when the spirting of matters shows its exact locality; when the aperture is well defined, it exists in the form of a small, pimple-like protuberance. When a fistula has but one orifice, it is called

a Blind Fistula; but most frequently there are two, and in this condition it is called a Complete Fistula.

The process which has been described as leading to the formation of Fistula in Ano, occurs in both sexes, and at every time of life.

The symptoms of Fistula in Ano are general uneasiness about the anus, with a discharge, more or less copious, of purulent and sometimes thin and sanguineous matter, staining the linen and otherwise annoying the patient. Besides the evacuation of the fistula and special uneasiness of the part when going to stool, sensitive persons are distressed by a sense of weakness and imperfection which renders them excessively unhappy.

Fistula in Ano never heals spontaneously; being in close proximity to the muscles of the anus, it is continually disturbed by their movement; this, and the fact of its being always dilated by foreign matter, prevents its walls from uniting. All palliative treatment, further than perfect cleanliness, is worse than useless, for valuable time is lost. Drugs injure the general health, without having the slightest possible good effect on the fistula itself.

Louis XIV. suffered from Fistula in Ano, and being unwilling to undergo the operation which his medical attendants assured him was necessary, listened to various proposals for otherwise curing the disease. Instead of trying these methods on his own person, however, he collected a great number of his subjects who labored under the same infirmity, and caused the proposed experiments to be tried on them. Some he dispatched to the waters of Bareges, others to those of Bourbon, and many more he shut up in rooms provided with every thing that could be suggested for the purpose in view. At the end of the year, finding that not a single person had been cured, his majesty yielded to necessity, and permitted his surgeon, M. Felix, to do what he judged proper. The King completely recovered, and Felix, with his assistant, two physicians, and an apprentice, divided fees to the amount of $75,000, M. Felix's fee being $30,000.

Obliteration of a fistula can be effected at once by division, or gradually by ligation, if the patient is totally opposed to slight pain. Through progressive improvements the use of the knife has been at length circumscribed

within such narrow limits as hardly to deserve the serious title of an operation.

The ultimate tendency of this disease is gradually to break down the constitution; the ulceration spreads, and more vital parts are attacked; absorption of pus and morbid matter takes place, to be deposited elsewhere in the body, endangering life.

As before noticed, on account of the smallness of the mouth of a fistula, and its concealed position, it is difficult for the patient to detect it: when there is any suspicion as to its existence, he should be examined, and if his fears are correct, be cured at once, as loss of time must add to the difficulty of the case It is also important to bear in mind that no presumption of pulmonary disease should prevent an examination; on the contrary, it is still more important that it should be made. During the last year, I have operated on several business men without detaining them a day from attending to their affairs.

PROLAPSUS ANI

Is an eversion of the lower bowel and its protrusion through the anus. This is caused by a defect in the structure itself, or through violent strainings, as a result of piles, stricture or stone. The disease generally exists in children, and persons of an advanced age who suffer from a relaxed state of the sphincter ani muscle.

The size of the protruded part varies considerably, from a small ring of mucous membrane to a large mass. Some years ago there was a patient in Bellevue Hospital who had a tumor of this kind, which in form and color looked like a common flower-pot. Its size could no doubt be accounted for by the common practice of introducing different substances, such as sticks, bottles and stones into the rectum for the purpose of keeping up the gut, increasing their size as the parts expanded under the pressure, which expansion is the natural result of such a procedure, and proves that no truss having any appliance to be worn within the rectum should be made use of, though proper bandages and trusses may be of considerable service in treatment.

The more the prolapsed part comes in contact with the clothing, the greater will be the irritation. When a portion of the bowel has descended in violent straining, it soon, by friction, becomes inflamed, swollen, and very painful, through being held tightly by the grip of the muscle, the symptoms becoming aggravated at each evacuation, owing to the resistance they present. Cases have been known where, by the want of proper attention, the sufferings of the patient have become extreme, terminating even in death, or the mortification of the constricted part. Wherever the protrusion occurs, the patient should kneel down on a lounge or bed, the parts should be carefully washed, then smeared with oil, and be gently pushed inwards; if not too painful, the forefinger should be passed into the rectum, so that it may carry the protruded part with it. In most cases this operation is easily accomplished. But when the tumor has existed for many days, the coats of the bowel become so thickened and painful, that the manipulation requires to be conducted with the greatest caution.

Relapse must be guarded against, in accordance with the circumstances that gave origin to the defect. If by stone or piles, the proper treatment for those disorders will have to be enforced. If by the presence of worms, they must be expelled by appropriate medicine. But when the disease is dependent on an unhealthy condition of the membrane itself, it will have to be treated with astringents, anodynes, and attention to diet. In children, these means very often produce a permanent cure, especially when proper applications are applied to the mucous surface.

A radical cure may be made in a variety of ways, the surgeon being guided by the state of the parts and certain anatomical distinctions. In France, M. Dupuytren introduced the practice of excising a portion of the skin, but although this plan may be all that can be desired in most cases, the operation has been followed by very deplorable results, in inexperienced hands. It has now been almost entirely superseded by the use of the ligature, an eminently successful method. The plan, however, which I have found to be equally efficacious in numerous

cases, and the one which I now usually adopt where the parts exposed are of no very considerable size, is the use of powerful astringents—these give scarcely any annoyance, do not confine the patient, and are entirely reliable.

POLYPUS OF THE RECTUM

Is a growth from the mucous surface of the rectum, and resembles a pear in shape, its attachment being at its constricted portion or stalk; the symptoms attending its presence are similar to those of internal piles. It should be removed at once by tying the stalk to prevent hemorrhage and then snipping the body off. It is a rare disease; the exact nature of the difficulty can not be recognized by the patient, who generally mistakes it for piles. The surgeon will be made aware of its presence by moving it on its pedicle.

FISSURE OF THE ANUS.

At the various orifices in the body where the skin becomes thin and delicate and impinges on the mucous membrane, sensation is more than usually acute, and is very liable, when slightly inflamed, to crack and ulcerate, as

is the case with the lips. If a person passes the finger over the skin of the lower lip just as it nears the vermilion border, he will recognize the sensitiveness of the part. A similar fissure at the anus gives rise to an amount of suffering almost unendurable, especially during the act of defecation, when the parts are put on the stretch. Various applications may cure this, but sometimes it is exceedingly persistent, it is necessary that the patient should be very careful of his diet. The irritable ulceration should be fully discovered, and applications made daily to its surface until it is entirely healed and there is no longer any danger of a relapse.

ANAL EXCRESCENCES.

The secretion of the skin around the anus has, in many individuals, a remarkably irritating quality, redness and thickening, with slight ulceration, is a frequent result of it. In certain cases, if great cleanliness be not attended to, the thickening increases, and in that condition is called condyloma. In other instances warts vegetate in this region and often attain considerable size. It is impossible to keep these completely clean, owing to the hundreds of little prominent studs which

have furrows between where water can not reach, and from whence a most offensive discharge is constantly exuded. They can be got rid of by a variety of means, either by applications, the ligature, or excision. The latter method is perhaps the best, as it certainly is the quickest, but a good surgeon can almost always in this case follow the caprice of his patient.

STRICTURE OF THE RECTUM.

In this affection there is a chronic thickening and contraction of the mucous coat of the rectum, so as to form an impediment to the proper evacuation of the contents of the bowels. The complaint almost always steals on insensibly, so as not to attract attention until fully formed. The symptoms of a confirmed stricture are the frequent discharge of thin, feculent matters, owing to the copious secretion of mucus which results from the irritation of the disease. The feces passed are in small, narrow, flattened fragments tinged with blood, the patient suffering considerable pain during the expulsory effort. The remedies for this disease are aperients and injections, so as to produce daily soft,

unirritating stools, and the bougie. A bougie that is capable of passing the stricture with but slight inconvenience, should be passed once in two or three days, and be maintained in position from ten to fifteen minutes—the greatest care being taken to use the instrument with gentleness. The cure is effected by the stimulus arising from gentle pressure, producing absorption of the adventitious matter that has been thrown out, and not by the mechanical action of stretching. The rectum varies in length from seven to eight inches, and to the right side of the body it makes a curve against the bone, consequently at this point an obstruction is felt which patients and ignorant persons have mistaken for stricture, and have produced great injury and fatal results from tearing the parts during their mischievous manipulations. Like simple stricture in other parts of the body, this can be surely cured by adopting proper means; it may, however, be caused and complicated by cancer of the rectum, in which case a cure can hardly be hoped for, but much may be done to alleviate the misery of the patient.

Spasmodic stricture of the rectum is a

rare affection, unless caused by fissure and the consequent contraction of the sphincter muscle. When persistent, it generally depends on a vitiated state of the secretions, and is most frequently relieved by a regulated diet and alterative medicines and the use of injections.

PRURITUS ANI

Is an unendurable itching of the parts, commonly coming on as one is about getting warm in bed. Generally palliative measures are resorted to. It is better at once to seek competent advice from a surgeon; a perfect cure need not be expected otherwise.

In August, 1862, a gentleman applied to me for relief who had literally scratched holes in the flesh. The trouble was caused by matter lodging in some obscure little pouches of mucous membrane in the rectum. After a short course of treatment he was radically cured.

DISEASES OF THE GENITO-URINARY ORGANS.

Perhaps in the whole range of diseases those of the genito-urinary organs, both male and female, endure longest for want of proper treatment. The general practitioner and apothecary imagine they know all about these maladies, and give advice in the most unhesitating manner in cases which they have not sufficient knowledge to treat. The result is, that valuable time is lost, money is squandered, the disease burrows in the system, and both mind and body lose their vigor. It stands to reason, that, in a complex and hidden part of the body, such as these organs are, where topical applications and instruments have to be made use of, it is necessary that the professional man should be well acquainted with the structure and its condition, both in a healthy and abnormal state. These requirements can only be obtained by frequent dissections, and time for observation and reflection, such as a doctor engaged in ordinary medical business can hardly be expected to have.

INFLAMMATION OF THE URETHRA

May take place from a variety of causes, but by far the more common is by the application of a contagious material from one individual to another. These inflammations give rise to a discharge, (gonorrhea.) In males, the discharge comes from the inside of the urethra or passage to the bladder; in females, from any part of the membrane which lines the genital parts. The infectious matter which excites the inflammation is generally communicated during unclean coïtion; but it has been proved beyond all doubt, that, under certain circumstances, it may be produced by connection with a woman whose life is irreproachable. A common clap is generally first noticed, from the third to the seventh day, by an itching at the orifice of the urethra, which, if examined, appears to be unusually red and a little swollen. Soon afterward a slight running takes place from the urethra, of a whitish fluid, and this gradually increases in quantity, while at the same time it becomes more thick, until at last thick yellow matter issues from the canal. The disease is now fully established, and gives rise

to a scalding pain during the passage of the urine. In this peculiar inflammation of the urethra, its under surface becomes hard, feels like a cord, and is very painful to the touch; the stream of urine is diminished in size from the swelling of the parts that surround the urinary passage, and blood is often discharged with it from the bursting of small inflamed blood-vessels. When the inflammation extends from the urinary passage to the spongy substance that surrounds it, a very painful affection of the genital organ, called *chordee*, is excited.

Gonorrhea is often attended with two unpleasant consequences which arise from the irritation extending to the glands in the groin or testicles. In the first, a hard, painful swelling (sympathetic bubo) appears in one of the groins; in the second case, the inflammation extends along the seminal ducts, down to the testicle, which becomes swollen and extremely painful to the touch, (swelled testicle.) When a proper attention is not paid to cleanliness during the course of gonorrhea, or the extremity of the organ is unusually irritable, the discharge is apt to produce small sores on the end of the penis, and to cause inflamma-

tion of the foreskin. If this state be neglected, the foreskin will swell to such a degree as to render it impossible to retract it, or, what is still more dangerous, when it has been drawn back, it contracts, and is like a tight cord round the glans penis, can not be pulled forward, and sometimes gives rise to mortification of the part; under these circumstances, the parts will have to be skillfully manipulated by a proper person.

The time during which an inflammation of the urethra lasts, is extremely variable, and its duration is dependent on a variety of causes, such as the general health of the patient, his habits, the comparative virulence of the infectious matter that had been absorbed, and the method adopted for its cure.

I have had persons apply to me who have suffered from the disease for years, but who have rapidly recovered under proper treatment. The constitution of others seems to have a peculiar tendency to hold to an inflammation of the mucous membrane, and in these persons the whole of the canal is generally involved down to the neck of the bladder. On inquiry, I have found that the course of treatment generally adopted has been the

use of injections and the taking copaiba and cubebs.

The injections very frequently have been of that strength as to lay the foundation of a permanent stricture; and notwithstanding they may cause this serious mischief, they are not by any means generally efficient on account of the great difficulty there is of bathing the whole of the urethra with the injection; even in the hand of the surgeon it can only, as a general thing, be pressed down the canal to a certain point, when the urethra closes, and prevents its further ingress. The use of drugs can not be spoken of with any degree of certainty as being specific; very often they impair digestion and affect the constitution in a most injurious manner, without in any way benefiting the diseased structure. What, then, may be asked, is the most reliable way of treating inflammation of the urethra? I answer, by a proper attention to the general health, and applications to the whole diseased surface of the urethra. This latter procedure I manage without giving the patient any pain; and with the most perfect assurance that it is a physical impossibility that he can incur stricture from the treatment.

STRICTURE OF THE URETHRA.

When a part of the canal or urethra which conveys the urine from the bladder out of the body is rendered narrower than it is in a natural state, in consequence of inflammation or change of structure, the disorder is called stricture. Writers on this subject generally agree in describing strictures under three forms — the spasmodic, the inflammatory, and the permanent.

SPASMODIC STRICTURE,

Not associated with inflammation, is a rare disease. Various causes are said to give rise to this kind of stricture; it may proceed from exposure to cold and damp, or excess in drinking wine or spirits. It may also be caused by cantharides, whether taken by the mouth or absorbed from blister applied to the skin. Retaining the urine too long in the bladder, irritation of distant parts, or even an irritated state of mind, will occasionally influence the nervous system to such a degree as to produce spasmodic stricture of the urethra.

The symptoms are sudden retention of the

urine—that is to say, the patient finds himself unable to pass his water, although he has a great desire, and makes repeated straining efforts to do so. If not relieved at an early period, fever sets in, and the most dangerous results may ensue from the bursting of the lower end of the urethra or bladder. Relief should be obtained at once from one thoroughly used to passing a catheter, and the urine be drawn off. Strict attention should be paid to the patient's health for several days afterward. As an instance of how spasmodic stricture may occur, I would mention the case of a gentleman who had sat very long at a card-table, and who delayed relieving himself at the proper moment; on rising, he found himself unable to urinate; an instrument was introduced and the water evacuated; slight fever set in the day afterward, but in a short time he was perfectly well.

INFLAMMATORY STRICTURE

Is caused by a lessening of the calibre of the urethra through the swelling of its mucous membrane. The most severe cases that have come under my observation have arisen from the improper use of caustic injections.

PERMANENT STRICTURE

Is a contraction of the urethra, caused by chronic inflammation, and in the majority of cases is the result of gleet or frequent attacks of gonorrhea. At first a small portion of the mucous membrane, perhaps only an eighth of an inch in extent, becomes thickened and deprived of its usual elasticity; this is conveniently termed a "point of stricture," because two or more such points may exist in the same urethra. It frequently happens that persons, either from ignorance or inattention, are affected with stricture for a considerable length of time without their knowledge. But, as the disorder gains ground, the symptoms become sufficiently urgent to attract the patient's attention, and convince him of the nature of his ailment. In what may be called the first stage, the patient finds that he wants to make water oftener than usual, and that he has an uneasy sensation in the crotch after doing so; he also notices that a few drops remain in the urethra, and gradually dribble from him, and his linen becomes slightly wetted. The next circumstance observable is the division of the stream, the reason of

which is, that the urethra is in an uneven state from the irregular swelling that surrounds it, and consequently the urine is thrown with an inequality of force against its different sides; sometimes the stream splits into two, becoming forked; sometimes it is spiral; at other times it forms as it were a thin sheath. Itching of the end of the penis and gleety discharge are common concomitants, especially if the stricture is situated near the bladder.

If the disease proceeds to its second stage, the bladder becomes irritable, obliging the patient to rise in the night to void his urine. A man in health will sleep for seven, eight, or nine hours without being obliged to empty his bladder, but when he has a stricture, he may feel an uneasiness after four or five hours, and frequently in much less time even than this. Finally, if the complaint is permitted to continue, the constitution suffers, inflammation sets in and is diffused, the bladder and kidneys become diseased; the complexion becomes wan; the appetite fails, and there is great languor and depression of spirits, accompanied by aching and weakness in the back; the patient complains of chills and flushes, and the urine is of an unhealthy de-

scription. He is liable to attacks of spasm, with complete retention, and during one of these the urethra may ulcerate or burst, giving rise to urinary abscess, or to extravasation of urine, and death is the result.

In treating stricture the general state of health must be vigorously attended to, but a cure can only be effected by mechanical means, and these are three—Absorption by pressure, Cauterization, and Cutting.

Cauterization is now very seldom resorted to, because, if mismanaged, it produces inflammation, retention of urine, hemorrhage, abscess, and any other conceivable mischief. The puncturing or cutting procedure should only be resorted to in the most extreme cases, but the operation, when necessary, can be performed with perfect safety.

Absorption by pressure is the only proper or justifiable way to treat stricture in ninety-nine cases out of a hundred, where the stricture is permeable. A cure is always certain when the case is managed by a skillful surgeon, and that without giving pain. No one without thorough instruction should attempt to pass an instrument, for fear of making a false passage.

GRAVEL.

GRAVEL and stone are the terms applied to concretions formed in the kidneys and bladder, by a morbid deposition from the urine. This fluid, when in a healthy state, contains in solution, at least, twelve different ingredients. Of these, some belong to the class of acids; others are alkaline or earthy substances. Now, in certain morbid conditions of the system, the urine undergoes changes within the body, and some of these ingredients accumulate until they are no longer held in solution, but are deposited in a solid form in the kidneys and bladder.

The salts, which form the depositions, are chiefly of two classes, depending on two distinct states of the constitution, with which they are respectively associated. In the first class, which is by far the most common, the lithic, or uric acid, and lithates form the deposit which is called, in popular language, *red gravel*, whether it appear in the form of sand or distinct concretions. In the second class, the deposition consists of the phosphatic salts. This species of the disorder is known under the denomination of *white gravel.*

In the great majority of cases, urinary concretions and calculi are formed in the kidney. The calculous matter is either deposited in the form of sand, which passes off without giving much pain or inconvenience, or it assumes the form of small stones, which may remain in the kidney during a longer or shorter period; these, after a time, either escape from the kidney into the ureter, or tube which conveys the urine to the bladder, and cause the most severe pain (fit of the gravel) during their passage to the latter organ; or they may remain permanently in the kidney, and attain a considerable size. Sometimes they produce inflammation, which may terminate in abscess of the kidney; or they may cause chronic disease and wasting of the organ.

The passing of red sand or gravel is preceded, during a considerable length of time, by a copious deposition from the urine, of a tawny, reddish-brown, or brick-dust color, or of a more or less vivid pink hue.

Few subjects in medical science are involved in greater obscurity than the formation of gravel. But the testimony of all the best medical men who have particularly attended to this disorder, concur in showing that red

gravel is more frequently met with in persons of sedentary habits, who indulge in eating animal and other kinds of highly nutritious food, and drink freely of wine and other strong liquors.

All authors who have written on this subject have noticed the connection which exists between gravel, rheumatism, and gout. These diseases, in numerous instances, appear to derive their origin from the same source.

Although the urine may continue for a long time to deposit a red-colored sediment without the general health appearing to suffer, yet the individual should be on his guard, for this state of the urine indicates an unhealthy state of the system, and if not checked, will be sure, sooner or later, to terminate in the formation of gravel. This, as we have already mentioned, may be the source of very distressing and even dangerous disorders, or give rise to *stone in the bladder*.

The individual, therefore, should take warning from these premonitory symptoms, and adopt the necessary measures to avert evils of so formidable a character.

STONE IN THE BLADDER

ARISES, in the great majority of cases, from a portion of gravel being deposited and gradually increasing in size. Occasionally the nucleus of the stone consists of a clot of blood, or a foreign body which has accidentally got into the bladder, such as the broken end of a catheter, or a portion of a bougie.

The symptoms of stone are—irritability of the bladder; frequent irresistible desire to make water; occasional sudden stoppage of the stream of water during micturition, from the stone falling on the orifice of the urethra, the stream probably flowing again if the patient throws himself on his hands and knees; occasional pain at the neck of the bladder, usually severest after micturition; pain in the glans penis. If the patient be a child, he is always attempting to alleviate pain by pulling at the foreskin, which becomes elongated. But none of the above symptoms must be depended on alone. The existence of the stone must be evident to the surgeon by his ear and fingers; this is accomplished by the introduction of a smooth steel, sound into the

bladder, and if there is a stone, it will be heard to strike, and felt to grate it.

Palliative treatment may occasionally be of great benefit to those afflicted with stone; and the stone may, when its composition permits, be dissolved by injections. No certainty of cure, however, can be promised by any other means than that of extraction. This may be accomplished in two ways—the first is *lithotripsy*, removal by crushing into small atoms. The second is *lithotomy*, which consists in making an incision into the bladder sufficiently large to allow the surgeon to lay hold of the stone with forceps, and extract it entire. My experience would lead me to advise the operation of lithotomy in almost all cases of stone. If an anæsthetic is taken, of course no pain is felt. The operation can be performed in a few seconds, and the stone is at once got rid of.

SYPHILIS.

This term comprises all diseases resulting from a certain virus.

Primary Symptoms. — After one or two days' incubation of the virus, the pustule forms, and the ulcer is established about the sixth day. It is first attended with redness, itching, and heat; then a vesicle appears, becomes purulent, breaks, and an ulcer is formed. If the virus touches an abrasion, the sore may appear at once.

Bubo is an inflamed lymphatic vessel or gland leading from a venereal ulcer. Buboes vary in the rapidity of their development. Some are termed acute, others chronic; the former hastening to suppuration, whilst the latter are indolent.

Constitutional Symptoms. — These are secondary and tertiary.

The secondary symptoms follow the primary, usually during the second month; consisting chiefly of general eruption, affection of the throat, fever, change of complexion, dryness of hair, rheumatic pains in shoulder and knee, headache. Secondary symptoms are transmissible from mother to child.

Tertiary Symptoms. — The periosteum and bones are affected by a chronic inflammatory process; suppuration, caries, and death of the bone result; also, stiff joints, tubercular formations of the skin, and condylomatous tumors, destruction of the gums and cheeks, deafness and blindness, are also among the consequences.

Some of the worst cases of deformities of the face that the author has ever seen, have been caused by the improper treatment of syphilis, and the rash use of mercury.

THE WHITES,

Or Leucorrhea, is an unnatural discharge from the mucous membrane of the vagina and womb. The discharge is far from being always white, as the term applied to the disease would lead us to suppose; it presents various shades of color, and degrees of transparency and consistency, according to the cause of, and continuance of the irritation. It is the most common of all female disorders, and the results arising from it are very far more serious than commonly imagined —deterioration of the blood, and ulceration of

the lungs or consumption, owing to an absorption of the matter into the system, being a frequent consequence. Besides this, domestic unhappiness is often caused from the fact that the male urethra is liable to inflammation through contact with leucorrheal matter. This accident has very frequently been the foundation of unjust aspersion of character.

The disease may occur from displacement of the womb, bladder, and other causes.

Constitutional treatment alone is ineffective. It is absolutely necessary that the extent of the injury should be ascertained. When of a chronic character, this disease requires time and patience to eradicate.

SEMINAL WEAKNESS AND IMPOTENCE.

The serious and distressing malady commonly known as seminal weakness, spermatorrhea, or partial impotence, may originate from a variety of causes, and it will affect, in a more or less marked degree, the mind as well as the physique. There may be an original weakness and want of development of the genital organs.

After a severe and tedious illness, the gen-

itals may remain incapable of performing their functions long after health is restored. In other respects, certain diseases are always attended with a diminution, and sometimes with a loss of sexual power, especially diabetes, diseases of the kidney, some forms of dyspepsia, and the latter stages of most chronic diseases, and the excessive use of tobacco and alcoholic drinks.

When impotence arises from excessive venery, or by the practice of self-pollution, the symptoms, or rather the disastrous effects, are more particularly marked. The sexual organs become weak and irritable, and the least excitement, the friction of the clothes, or even a lascivious thought, brings on an imperfect erection, followed immediately by the discharge of a thin fluid. The erection is so imperfect, and followed so soon by the discharge, that the patient is quite incompetent for sexual connection; and the frequent abundant losses of seminal fluid, together with the patient's consciousness of his own imperfection, bring on a most miserable state of bodily weakness and mental despondency.

The prostate gland may be inflamed, (pros-

tatitis,) and give rise to preternatural irritation. This gland is about the size of an ordinary Spanish chestnut, and generates a special fluid of its own; it is situated at the base of the bladder, and is pierced by the urethra and the seminal ejaculatory ducts; it can, therefore, be readily imagined how inflammation may be diffused from one point of the generative apparatus to another; and this condition of the parts at the origin of the seminal ducts tends greatly to keep up an excessive secretion, and to promote the action by which it is expelled.

A vast number of cases of impotence have come under my treatment. It would be of no service to illustrate this article with one or two cases out of so large a number, as, in the majority, the cause has been different, and the time of endurance and other particulars have varied in each. Patients, of all ages, have applied to me, as well as the guardians of youth, and I think it worthy of remark, that these persons have, almost without exception, been previously under the charge of either professionals or amateurs whose knowledge of anatomy and surgery, judging by

the results of their interference, has not been very profound.

The treatment I have found most efficacious, in conjunction with attention to the general health, are applications to the diseased surface. These can only be made by instruments passed within the urethra. They give no pain when skillfully applied, but may be made to do considerable damage in the hands of the uninstructed. Perhaps the most frequent cases of impotence that present themselves are those of middle aged men, who, from various causes, have their nervous system affected. By proper treatment they will certainly be cured.

144 LEXINGTON AVE., N. Y.

NOTICE!

I desire to correct the common error that the cure of surgical disease is necessarily dependent on the use of the knife. It is quite the reverse; in most cases cutting is unnecessary. Surgical disease is generally defined from ordinary disease by being cognizant to the sight or touch, for example; affections of the skin and portions of the mucous membrane, are visible. Strictures, are recognized by touch, and a large number of ailments and deformities by both.

I am, continually treating, with perfect success persons residing in every State of the Union and in foreign countries, by correspondence, and in many cases it is unnecessary that I should see them to effect a radical cure; as in cases of disease of the rectum and genito-urinary organs, including stricture, syphilis, impotence, and many affections of the nervous system.

HENRY A. DANIELS, M. D.,

144 Lexington Ave., N. Y.

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