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ON TOPICAL APPLICATIONS TO THE CERVIX UTERI IN SYMPATHETIC VOMITING OF PREGNANCY.

[Read before the Norfolk District Medical Society, and communicated, by vote of the Society, to the Boston Medical and Surgical Journal.]

BY E. D. MILLER, M.D., DORCHESTER.

I WOULD ask the attention of the Society, for a few moments, to a report of some cases of sympathetic vomiting of pregnancy treated by topical applications to the neck of the womb.

As I wish to direct your attention more particularly to the morbid condition of the uterine organs, and the results following topical applications, I shall omit the general treatment adopted by myself, or at the suggestion of eminent counsel, and also the symptoms, excepting those indicating the severity of the affection and its rebelliousness to treatment. Should the facts and principles, as shown in these cases, be confirmed by future observation, they will establish a more rational and philosophical treatment than is now recognized by the profession.

CASE I.—Mrs. S., a young woman of good constitution, was married in November, 1855. Had her courses on the 18th of December, and began to be troubled with nausea the last of January, 1856. The first vomiting occurred in the evening of February 5th, and went on increasing, so that by the 27th of the month she vomited six and seven times a day, and was confined most of the time to the sofa. The 3d of March, kept her bed. Up to the 23d of the month, a period of nearly three weeks, the vomiting was constant and uncontrollable, rejecting all nourishment, and inducing a degree of exhaustion that almost precluded the hope of a favorable termination, even by bringing on abortion.

It was now proposed to make a direct examination of the uterine organs, though neither the previous history of the patient nor her present symptoms (aside from the vomiting) indicated local disease. On examining digitally, I found the vagina relaxed, cervix voluminous, *very tender* and retroverted. By the speculum—vagina much more florid than is usual in the first months of pregnancy. Cervix enlarged, very much congested, of a deep mahogany color.

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The exhausted condition of the patient forbidding depletion, I decided to paint *freely* the cervix and upper part of the vagina with the ethereal tincture of iodine,* having frequently seen the good results of it in inflammatory states of the cervix under other circumstances. The better to test the effect of the iodine, other remedies were discontinued. The first application was made on the 23d of March. The next day the vomiting was less, and the iodine was again applied. The 25th, found the patient so comfortable that the application was omitted. 26th, applied the iodine, the vomiting being only occasional. It soon ceased entirely, and so rapidly did she regain her strength, that on the 10th of April she came down to dinner.

From this time she had no further trouble, and was safely confined on the 13th of September.

CASE II.—March 19th, 1856, I was called to Mrs. K., a young and healthy woman, three months advanced in her first pregnancy. She had been troubled for some time with nausea and vomiting, which of late had so much reduced her that she was forced to keep her bed. I had been trying various remedies, the failure of one giving place to another equally as powerless, when the result of the preceding case led me to propose a direct examination of the uterine organs, which revealed a similar condition to the previous case, but less strongly marked. Internal remedies were discontinued, and the cervix and upper portion of the vagina *freely* painted with the iodine. Two or three applications were followed by entire relief.

This case might have been self-limited, though I saw no reason why, in time, it might not have proved as obstinate as the first.

CASE III.—March 13th, 1856, I saw, in consultation with Dr. Holmes, of Milton, Mrs. G., who was suffering from the same affection. Some twelve days subsequently I addressed a note to Dr. H., briefly stating the result of the two cases in which the topical application of iodine had been made, and suggesting a trial of it in the case of Mrs. G. I will read the reply of Dr. Holmes to my request for a brief history of the case. You will notice his allusion to another case in 1858.

Milton, May 17, 1859.

DEAR DOCTOR,—In answer to your request, I send you a brief sketch of the two cases of sympathetic vomiting, in which the topical application of the ethereal tincture of iodine was followed by complete relief. I saw Mrs. G. on February 9th, 1856, about the sixth week of her first pregnancy; she had constant vomiting, after taking solids or liquids, and much prostration. These symptoms continued, and increased in severity, six weeks, the last three of which she attempted no nourishment by the mouth. At this time, in consultation with a

* R. Iodine, from half a drachm to a drachm; sulphuric ether, one ounce. Mix. I have used this form of iodine for more than ten years. Many of the Society, as well as other members of the profession to whom I have communicated the recipe, can attest to the vast superiority of the ethereal over the tinctures of iodine, in various inflammatory affections, and especially in erysipelas.

gentleman who is considered among the best authorities in the State, hydrocyanic acid and abortion were advised. Her extreme prostration rendered the latter an almost hopeless resort, and at the time of the adoption of the former I heard and acted upon your suggestion of the application of iodine to the cervix uteri. Relief followed so rapidly that in three days the stomach bore nourishment well, and no further trouble of the kind occurred afterward. I regret the use of the acid at the same time with the local application, as I have good reason to believe the sudden alleviation of symptoms was due to the latter.

Another case, similar in all respects, occurred to me in 1858, in which the application of the iodine to the cervix and vagina was followed by complete relief, and no other remedies were used.

Very truly yours, C. C. HOLMES.

E. D. Miller, M.D., Dorchester.

CASE IV.—September 14th, 1858, I was called to Mrs. B., a delicate and slender woman, two and a half months advanced in her first pregnancy. The nausea and vomiting were almost constant, night and day; had existed with considerable severity for two or three weeks. Continuing to prove rebellious to treatment, I made a direct exploration of the uterine organs, which revealed the cervix tender to the touch, congested and hypertrophied. The iodine was applied as in the preceding cases, on the 17th, and again on the 22d, 24th, 27th and 30th of September, when the vomiting had entirely ceased. She rallied slowly, and I continued my visits until the 16th of October. On the 30th of October she aborted, after a fatiguing day in the city.

Since writing the above, I learn that this patient conceived again last March, and had a similar attack of nausea and vomiting, which did not yield until her physician (into whose neighborhood she had moved) adopted a local treatment.

CASE V.—March 28th, 1859, I visited Mrs. G., in consultation with Dr. Aten, of Dedham. I condense from the report of the case kindly furnished by Dr. Aten, at my request.

"Mrs. G., three months advanced in her second pregnancy, sent for me in the night of the 22d of March. Had vomited quite frequently for six weeks preceding, and for the past three days almost constantly. Was greatly exhausted, restless, and unable to retain the simplest nourishment. On the 26th, I called Dr. Stimson in consultation. Afterward I administered the nitrate of silver, as recommended by Dr. Channing, of Boston, in a recent number of the Boston Medical and Surgical Journal. Abortion now seemed to be the only alternative, but fearing that, in her extremely exhausted condition, it would prove fatal, I called you to advise with me as to its practicability. It ought to be mentioned, that for eleven days the patient took no nourishment by the mouth. The only temporary relief was from injections of half-grain doses of morphia."

A history of Mrs. G.'s case indicated uterine disease previous

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to conception. A vaginal examination revealed inflammation, hypertrophy, and ulceration of the cervix and cervical canal. The morphia was discontinued, the ulcerated surface cauterized with the solid nitrate of silver, and the whole cervix and upper part of the vagina *freely* painted with the ethereal tincture of iodine.

The first application was made at 10, A.M., on the 28th of March, and no vomiting occurred till 9, P.M., and only three times until 10, A.M., the following day. Under the daily application of the iodine the vomiting rapidly decreased, and at the end of a week had ceased entirely. She was now able to eat and sleep, and soon regained her strength.

REMARKS.—Comment may perhaps seem unnecessary; still I cannot avoid calling your attention to the practical bearing of the facts elicited.

In looking over the uterine history of these patients, we find but one presenting symptoms of previous local disease. They were, with one exception, primiparæ. In all, there was well-defined inflammation of the cervix, though not equally marked. Does not this fact, taken in connection with the rapid subsidence of the vomiting under the free topical application of iodine, after the failure of other remedies, demonstrate conclusively the *morbid condition of the cervix to be the true proximate cause of the severe and uncontrollable vomiting?* The physiological state of pregnancy becomes changed, by the morbid action of the cervix, into a pathological condition. If this be so, it follows, as a matter of course, that the condition of the uterine organs should be *early* ascertained by a direct exploration, as the basis of treatment. If no lesion exist, the cause of the vomiting must be sought for elsewhere; but if, on the contrary, morbid action is found to be going on, it must be combated by local means, whether they be leeches, anodyne ointment, or the ethereal tincture of iodine, not omitting such general treatment as the state of the patient may require.

NOTICE OF A CASE OF ENURESIS, WITH A DETAIL OF THE TREATMENT, AND REMARKS.

BY EDWARD JENNER COXE, M.D., VISITING PHYSICIAN, CHARITY HOSPITAL, NEW ORLEANS.

[Communicated for the Boston Medical and Surgical Journal.]

INCONTINENCE of urine, most frequently the result of disease, does occasionally present itself as a bad habit, for it may be overcome, rarely it is true, by judicious personal correction, conjoined with the precautions of limiting the quantity of fluid previously to going to bed, and arousing the child to pass the urine a few hours after having been in bed. When existing as a real disease, or the most urgent symptom, it may proceed from various causes, the most common of which are, irritation, or inflammation of the mucous