

III.

Case of Malconformation in the Genitals, with an Engraving. By Mr JOHN SMITH SODEN, Member of the Royal College of Surgeons, London.

THE organs of generation have always excited attention, apporionate to their importance in the animal economy. To the savage, the voluptuary and the philosopher, they form a subject of equal interest. When Omai was in Dr Hunter's museum, he was very inquisitive concerning the hymen; and, I believe, more polished, and better informed visitors, frequently manifest a similar curiosity.

In malformations of the genitals, the physiologist has found a theme for much ingenious speculation; and, though deviations from the ordinary arrangement of these parts do not often lead to practical improvement in the medical art, yet they tend to enlarge our knowledge of laws which govern the human system, and teach us to admire the wisdom employed by nature, in correcting those errors, or accidents, which may have impeded her usual course of operation. Considerable information has been accumulated in this Journal. Extraordinary cases are recorded by Mr Cooper, and Mr Coates; a very learned and entertaining essay has issued from the pen of Dr Duncan junior; and some valuable and judicious remarks are blended with the review of Professor Ackermann's work on hermaphrodites.

To add to the facts already collected, an instance that recently fell under my notice, is the intention of the present paper.

As the subject of the following case bears the name, and appears in the attire of a female, I shall speak of her in that character; though it will be evident, that she ought to be considered as belonging to the opposite sex.

Sarah L—e, aged 24, a thin spare person, extremely awkward in her figure and gait, with masculine features, manly voice, and a strong beard, has flat breasts, and straight hips like a man, and hair upon her body and thighs.

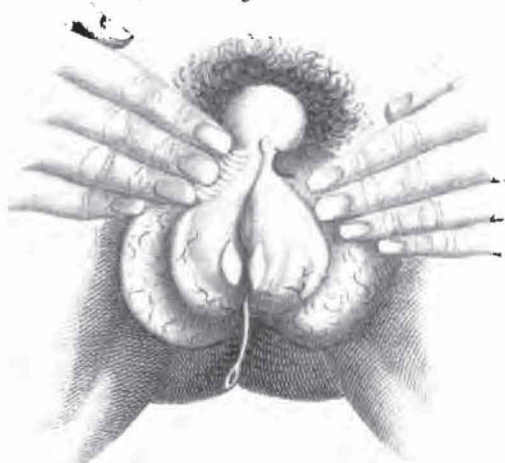
A brief description of the annexed plate, will convey a clear idea of the peculiarities in the sexual organs. My friend, Dr Terry, an eminent physician in this place, and Mr Hodgson, an ingenious pupil of Mr Freer, surgeon, of Birmingham, were present

MR SODEN'S CASE

Fig. 1.



Fig. 2.



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at the examination. The latter gentleman was so obliging as to take the drawings.

The first figure shews a clitoris, or imperforated penis, and scrotum containing testicles.

The penis is about two inches long, and a depression upon the glans marks the place where the urethra generally opens. The testes are somewhat less than common. The scrotum is divided, and bears a resemblance to labia.

In the second figure, the penis is lifted up as high as a strong and short frænum will permit, and the labia, or sides of the scrotum are separated.

Within the labia, are observed small protuberances, resembling nymphæ; and between them the meatus urinarius. A probe passed easily into the bladder, as is represented in the plate. The rapha perinæi is conspicuous, and commences at the termination of the frænum. The fossa navicularis is deeper than usual from the fourchette being more forward. Within the fossa, and concealed by the fourchette, that it cannot be seen in the plate, is a blind aperture, with a small excrescence at its entrance, something like a caruncula myrtiformis. This opening deserves not the name of vagina, though it occupies the situation. It admitted the end of the probe with difficulty, and would not receive more than half an inch of it. The excrescence was painful, and bled upon being touched by the probe.

This person, as will be supposed, has never menstruated, nor suffered inconvenience on that account. She is shy in conversing upon her sexual appetite, and disclaims all partiality for either sex. Her passions, probably, are not very strong; but, from intelligence gained from one of her female friends, I have no doubt that she sometimes evinces desire for a woman; though the frænum, I think, is too contracted to allow of complete erection.

She is attacked periodically with asthma; but her general health enables her to pursue the occupation of a servant, in which capacity she resides in this city.

Upon a superficial view of the genitals, it appears impossible, that she ever could have been considered as a girl; but, I suppose, at her birth the testes had not descended from the abdomen, the empty scrotum looked like tumefied labia, the imperforated penis resembled an enlarged clitoris, and the urine flowing from between the labia, no suspicion of ambiguous sex was entertained by her parents or friends.

The term hermaphrodite, which has frequently been applied to these cases, is not so generally used by medical writers as formerly. It is believed, that no real hermaphrodite, or a person possessing the organs, propensities, and powers of both sexes, ever

existed. In the most complicated instances, some characteristic mark has been sufficiently predominant to enable the accurate observer to ascertain the gender, though the confusion and intermixture of the parts have caused nurses and others to commit curious mistakes. Ferrein, in a memoir on hermaphrodites,* relates two histories of peculiar organization in females, in which the persons were baptised and educated as boys.

Dr Duncan attributes that arrangement which takes place where there is a deficiency of the urinary bladder, to an imperious urethra. This hypothesis is simple, and ingenious, and affords a solution of some of the phenomena in the *lusus* which I have described. It will be readily supposed, that an imperious urethra would be succeeded by an orifice in the perineum; but, there is no immediate connection between this circumstance, and the striking resemblance of the scrotum to labia, the imitation of nymphæ, and the aperture in the situation of the vagina.

The inconveniencies arising from these observations of nature, unfortunately cannot be remedied by medical skill. Where the urethra was continued to the glans, every attempt to heal the deficiency in perinæo was ineffectual under the direction of the late Mr John Hunter. Mr Hunter, indeed, proves, that an imperfect penis is not incompatible with procreation; but, the impregnation was effected in a manner so singular, that the experiment is not likely to be often repeated.

As the fact is curious, I shall conclude this communication with Mr Home's account of it.

“In a case in which the canal was continued to the external orifice at the glans penis, the deficiency of the urethra behind the scrotum was so great, that every attempt to close the aperture necessarily left in perinæo proved ineffectual, and under these circumstances the person married. When he had connexion, the emission was complete, which proved that the testicles were perfect; but the semen always passed out at the perineum.

“The late Mr Hunter was consulted, to remedy, if possible, this inconvenience, and enable the person to beget children. After the failure of several modes of treatment which were adopted, Mr Hunter suggested the following experiment: He advised that the husband should be prepared with a syringe fitted for the purpose, previously warmed; and that immediately after the emission had taken place, it should be taken up by the syringe, and injected into the vagina, while the female organs were still under the influence of the coitus, and in the proper state for receiving the semen.”

* *Memoires de l'Academie Royale des Sciences de Paris, Année 1767.*

This experiment was actually made, and the wife proved with child. Upon a subject of this kind, it is proper to speak with caution; but, from all the attending circumstances, no doubt was entertained by Mr Hunter, or the husband, that the impregnation was entirely the effect of the experiment*.

Coventry, Aug. 1st, 1807.