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"For many fortunate discoveries in medicine, and for the detection of numerous errors, the world is indebted to the rapid circulation of Monthly Journals; and there never existed any work to which the Faculty in EUROPE and AMERICA were under deeper obligations than to the Medical and Physical Journal of London, now forming a long, but an invaluable, series."—RUSK.

*For the London Medical and Physical Journal.*

*On a successful Mode of Treating Puerperal Fever; by  
Dr. S. SHATH, of Dunstone, near Kingsbridge, Devon.*

HAVING followed a mode of practice in the Puerperal Fever, for more than forty years past, with the greatest possible success, and conceiving it to be a plan not universally known, I think that it will be found worthy of a place in your most useful and extensive publication; and I trust that every practitioner will find it equally successful, if the *modus operandi* is strictly attended to.

As I am writing to gentlemen of the profession, I need not say any thing of the nature of the disorder or its symptoms, but shall immediately proceed to the method, in as clear and concise a manner as possible.

When called to a patient labouring under puerperal fever, or in childbed, with the abdomen tense and sore, I immediately pass into the uterus (*mea manu*) an injection composed of eight ounces of equal parts of warm milk and water, with half an ounce of moist sugar dissolved in it; and soon after let a pint of warm milk and water, with an ounce of sugar and an ounce of butter or oil, be injected into the rectum; both of which should be repeated four or five times in twenty-four hours, unless the complaints entirely subside. The abdomen is also fomented with warm water, and then the following liniment rubbed in all over the abdomen and *labia pudendi*, three or four times in twenty-four hours.

R. Digitalis pulv. ℥j  
Tinct. Digital. ℥ij.  
Ol. Oliv. Opt. ℥ss.  
Adipis Suiillæ ʒvi. fiat Linimentum.

To inject the uterus, you should be provided with a tube of the same size and perforated in the same manner as a common catheter, but not less than seven or eight inches in

length. I have twice found the uterus situated so high as to require a longer tube, for which purpose I have used a male catheter straitened. The tube being introduced in the uterus, and your injection put into a bladder with a small pipe fixed to it, properly adjusted to the tube, you join them together, and gently press it into the uterus, having a sponge at the os externum to receive it as it returns, in order to avoid wetting the bed.

With regard to medicines, I have always found it necessary to give calomel and pulvis antimonialis in small doses, frequently repeated, and the saline draughts, with the addition of the tinct. digitalis, which contributes greatly to its effect in abating fever; and when the patient is in much pain, or distressed for want of sleep, I give the tincture or extract of hyocyamus, which I find in general preferable to opium.

I was led to this practice by a case mentioned in Laz. Riverius, p. 486, chap. 24, de Morbis Acutis Puerperarum. Fracifurt, ann. 1659.

“Contingit etiam in nonnullis orificium uteri statim a partu adeo constringi, ut detentus intra uterum sanguis subito grumescens, et putrefactus sævissima inducat symptomata, cumque nulla arte exitus ei parari possit, præsentaneam mortem inferat. Refert tamen Harvæus loco citato historiam mulieris a se curatæ cum tali affectu laboraret. Pudendi labra tumida erant, et fervida; orificium uteri durum, et clausum, ipse vero instrumento ferreo immisso per vim aliquantulum aperuit ut injectionem per siphunculum admitteret; indeque grumescens, ater foetidusque sanguis ad libras aliquot effluxit, cum presenti ægræ levamine.”

It was some years after I had begun to inject the uterus and rectum that Mauriceau's Midwifery, printed Paris 1715, fell into my hands, and there I see that he advises the same method. There are cases mentioned in the 2d vol. which fully confirm its utility; and, if it doth not trespass too much on your pages, should thank you for inserting the following extract:

“On lui donnera aussi des clysteres qui puissent attirer les humeurs en bas; et on lui etuvera les parties basses d'une decoction émolliente et aperitive, faite avec les mauves, parietaire, camomille, melilot, racines d'asperges, et la graine de lin; de laquelle decoction on pourra aussi faire injection dans la matrice.” Vol. i. p. 418.

June 8, 1816.

We feel highly obliged to so experienced and respectable a practitioner for the above article; and shall be further thankful for any pointed histories which his case-book may furnish.—EDIT.

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served in kittens: at first the irides are of a bluish colour, the pupil circular, and the central annulus scarcely perceivable; gradually the pupil becomes elliptical, the peripheral annulus almost entirely disappears, and a light-coloured central annulus, of an appearance resembling satin, occupies its place.—Having mentioned the ellipticity of the pupil in cats, I cannot forbear mentioning also the great utility of this shape of the pupil in these animals. As it is very necessary for them to see objects in small degrees of light, their pupils have the greatest possible range of contraction; and this is effected, not by an additional irritability of the iris, but by the direction of its fibres only, which fibres are thereby allowed to act more effectually in diminishing the aperture of the iris, inasmuch as the circumference of an oval bears a greater proportion to its area than the circumference of a circle does to the space it circumscribes.

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*For the London Medical and Physical Journal.*

*Cases of Relief from Injections into the Uterus; by Dr. SHATH.*

AS you expressed a wish for some cases in which the injection of the uterus, &c. had proved serviceable, the three cases following, I trust, show sufficiently the good effect which it had. Having met with a case in the obstetric line since my last, which, I think, does not frequently occur, it is at your service, if you consider it worth notice.

CASE I.—March 23d, 1816.—Was called to Mrs. A—, of P—, at her full time for her first child. She was taken with great rigor; had been very sick, with frequent lax and foetid stools; had cough and almost constant pain in the abdomen. Examined *per vaginam*, and found the os internum open about the breadth of a shilling, but rigid: gave her gr. xxv tinct. opii in a draught, after which she fell into a gentle slumber, and the diarrhoea ceased. In about six hours after, natural labour-pains came on; and she was brought to bed, in four hours after, of a stout strong child.

24th.—Every thing well, except a troublesome cough, for which she took the following mixture:

R. Tinct. Opii gr. xij.  
— Hyocyam. ʒj.  
Kali ppt. gr. xij.  
Ol. Amygdal ʒij.  
Aq. ʒvij.  
Syr. ʒij. M. capt. Coch. duo ter ia die.

26th.—Cough better; the milk secreted in a proper quantity, but the breasts tender; the bowels confined, with some degree of thirst; lochia moderate; pulso 80 in a minute.

R. Submur. Hyd. gr. iv.  
 Pulv. Jal. gr. xij.  
 Conf. Senæ ʒij. f. Bol. No. quatuor capt. unum 8va  
 quaque hora si opus fuerit.

27th.—Had proper lax stools, and every thing going on well.

30th.—Called to her late at night: found her with great soreness in the abdomen; frequent very lax offensive stools; very great thirst, with pain in the head. My house being at a distance, I could not get my apparatus for injecting the uterus that night, but ordered a clyster of milk, water, sugar, and butter, to be thrown up immediately; and to take a bolus with one grain of calomel in it, and a saline draught, with ten drops of Tr. Digitalis, to be repeated every four hours.

31st.—Early in the morning, found the abdomen considerably more swollen, and exceedingly tender, the pain in her head much increased, and frequent watery fœtid stools. Pulse 130. Had every thing ready to inject the uterus, and introduced the tube, when immediately such a gush of fœtid air was ejected as to fill the room with the scent, soon after it was injected; and she expressed great satisfaction for the ease it had given her. The milk enema was also thrown up, the abdomen fomented, and the digitalis liniment applied. In the evening, the pain, swelling, and tenderness, were very much abated; but the fever continued. Pulse 130; a dry heat; a flushed countenance; the breasts and nipples became very tender, and but little milk could be got, either by the child or nurse; great pain in the head, and not perfectly collected.

R. Submur. Hyd. gr. iv.  
 Pulv. Antimon. gr. viij.  
 Conf. Ros. Canin. q. s. f. Bol. No. quatuor capt.  
 unum 4ta quaq. hora cum Haust. seq.

R. Kali ppt.  
 Acid. Citric ʒā gr. xv.  
 Tr. Digit. gr. x.  
 Syr. ʒss.  
 Aq. ʒx. f. Haustus.

April 1st, 9 A. M.—Had slept a little, and the head much more composed. P. 100; had several stools, which were less offensive; the lochia moderate; the swelling of the abdomen nearly gone, but still very tender; the breasts tumid, and the nipples very sore, and very little milk; had micturated freely, and a perspiration all over the body. Injected the uterus, and ordered the clyster, fomentation, and lini-

ment to be repeated once in eight hours. The bolus and draught to be taken every four hours.

2d.—Still gradually growing better, except the breasts and nipples. Bowels in a moderate state; lochia regular, and of a good colour; pulse 100; a gentle perspiration all over the body. The boluses and draughts to be taken once in six hours; the injection, &c. morning and evening.

3d.—Still gradually growing better. Pulse 90. To proceed as directed yesterday.

4th.—Still in a mending state. Pulse 90. Boluses and draughts to be taken once in eight hours; the injection, &c. once in the day.

5th.—Still mending. The bowels being confined, gave the following, and omitted the boluses and draughts:

R. Pulv. Rhei. Magnes.  $\bar{a}\bar{a}$  gr. xiiij.  
Ol. Fœnicul. gr. ij.  
Sacch. ʒss.  
Aq. ʒx. f. Laxativ.

6th.—Reported to be better.

7th.—Free from fever; the bowels confined—a laxative ut supra cum additione Pulv. Jalapii gr. vj, with which she had two motions, after which she recovered as fast as could be expected; but, the milk being in so small a quantity, and the nipples so sore, a nurse was necessary for the child.

I shall here take notice, that during the whole course of the disorder I always give my patient freely of a mucilage of the wild clary seed (i. e.) *Salvia Verbeneca*, which is not only grateful to the palate, but also tends to abate the inflammation, by its soft bland quality. It is made in the following manner:

R. Sem. *Salviæ Verbenecæ* ʒij.  
Aq. ferventis ʒiv. macera per horas duas, tunc adde  
Syr. Rhoeados ʒij. & bene misce.  
Capt. Coch. j. subinde.

CASE II.—Mrs. L—, of I— House, was brought to bed of a daughter, Nov. 6, 1815, her second child,—an easy natural labour. Every thing remained well until the 10th, when she was taken with a rigor, great pain in the head, and nausea, constant retching, although she brought up but very little; bowels lax, and stools smell very offensive; lochia in a moderate quantity, but smells very foetid; the abdomen much swollen, and very tender at the lower part. I saw her about ten A. M. about six hours after the rigor came on; her pulse then 130, a great colour in her face, a dry heat all over her body, her milk in a proper quantity, and micturated freely. Injected the uterus with milk, water, and sugar.

The os internum was low, much dilated, but a great heat in the vagina. An enema was likewise thrown up, the abdomen fomented, and anointed with the digitalis liniment. I remained with her about an hour, when she expressed herself much relieved in the abdomen; but the pain in her head was equally as distressing as before. Ordered her to take the following:

- R. Submur. Hyd. gr. vj.  
 Pulv. Antimon. gr. viij.  
 Conf. Rosæ Gal. q. s. f. Boli No. quatuor capt. unum  
 6ta quaq. horâ cum quart. part. Misturarum sequentium statu effervescentiæ.  
 R. Acid. Citric ʒiss.  
 Aq. ʒiv.  
 Syr. Rhæad. ʒij. sign. Mistura Febrifuga.  
 R. Potas. Sub. Carbon. ʒiss.  
 Th. Digital. gr. xxx.  
 Aq. ʒij. sign. Mistura Salina.

Same day, six in the evening.—Nausea lessened; pain in the head not relieved; p. 120; soreness in the abdomen still very considerable. Injected the uterus again; enema, fomentation, and liniment to be continued.

11th, 9 A. M.—Had slept three or four hours in the night; the head much relieved; a gentle perspiration all over the body; stools frequent, but not so offensive; the abdomen not so much swollen, nor so sore; p. 100. Injected the uterus again; the os internum not so hot, and, being situated so low and open, gave directions to the midwife, who was present, how to pass the injection into the uterus, and ordered it to be repeated once in eight hours, enema, &c. or oftener, in case the pain or soreness in the abdomen should increase. The boluses and mixtures to be continued as before.

12th, nine A. M.—Better in every respect; pulso 90; had slept three or four hours; the abdomen not so tender; stools frequent and fetid. The uterus injected but once that day, but the enema, &c. repeated once in eight hours.

13th.—Reported to be better.

14th.—Found her free from all complaints, except the pain in her head, but that was not constant; bowels free; stools not offensive.

17th.—Was sent for again. The soreness and swelling in the abdomen returned; lochia stopped; bowels confined; pulso 120, and very weak; the pain in the head distressing, and talking very flighty. Immediately injected the uterus, and what was discharged was so fetid as to annoy all in the room. The enema, fomentation, &c. also used; but, not

being much relieved, the uterus was injected again in three hours after, which gave great relief; ordered it to be repeated every six hours. The following was also given:

R. Submur. Hyd. Pulv. Antim. Camphor. āā gr. iv.  
 Conf. Rosæ q. s. f. Bol. No. quatuor sexta quaq,  
 horā sumend. cu Haust. seq.  
 R. Potas. subcarbon. Acid. Citric āā gr. xv.  
 Aq. 3x.  
 Æther. Nit. Spirit gr. xx.  
 Syr. 3℥s. f. Haustus.

18th.—Better in every respect; pulse 100; bowels free; lochia returned.

19th.—Reported to be better. Injection, &c. to be continued.

20th.—Found her tolerable. Head free from pain; pulse 90; bowels free; lochia returned, little colour, and not offensive; bolus and draught to be taken but once in eight hours.

21st.—Reported to be comfortable; and that she began to call for food.

25th.—Found her free from fever, but very weak. Pulse 70; skin moist; bowels regular. She then began to take the Decoct. Cinchon. and soon recovered.

It is to be remarked, the milk was secreted in a proper quantity during the whole course of the fever.

CASE III.—Was called to see Mrs. P—, June 15th, 1815. It was represented to me that she had an easy and natural labour on the 15th, and every thing went on well till the 17th, at night, when she began to complain of considerable pain in the abdomen, pain in her head, was very thirsty, and had passed a very troublesome night. I found the abdomen much swollen, and very tender; the body constive; lochia in small quantity; skin dry and hot; had micturated freely; pulse 110. Injected the uterus immediately; soon after an enema was thrown up, the abdomen fomented and anointed, and gave her the following;

R. Submur. Hyd. gr. iv.  
 Pulv. Antimon. gr. viij.  
 Conf. Senæ ʒij. f. Bol. No. quatuor capt. unum sexta quaq. horā superbibend haust. infusionis Melissæ.

Saw her again in the evening; the pain and soreness in the abdomen considerably abated; had three lax stools; the head much better. Injected the uterus again, and ordered every thing to be continued as in the morning.

19th.—Better in every respect: stools frequent; lochia moderate, and not offensive; p. 100. Injected the uterus; enema, &c. to be continued.

20th.—Had a good night, and appeared to be perfectly relieved.

22d.—Every thing going on well.

It is to be observed, that I always pass the injection into the uterus the first time myself; and, if the os internum is low and open, and a midwife is present, or a nurse of sufficient adroitness, I give them instructions how to manage it, but with this particular injunction, never to press it on if it meets with any obstruction; but, when the tube enters the uterus, it generally passes on two or three inches without meeting the least resistance, and then the bladder, with the injection in it, is to be joined to the tube, and pressed up.

CASE IV.—June 18th, 1816, was called to Mrs. T—, of S—, about seven months advanced in pregnancy. She was very large, had made but a very small quantity of water for the last month, but a constant desire to micturate. Introduced the catheter, and not more than a spoonful of urine was in the bladder. Threw up an enema, which, in about an hour after, was brought off, and a great quantity of fæces with it. She was exceedingly uneasy; a great tightness over the abdomen, with a very great oppression in breathing. Examined per vagina, but could not discover the os uteri, and, as she had no sleep the night before, gave her gr. xx ℞. Opii in a draught, and left her.

19th, ten A. M.—Had brought up the draught which was given last evening soon after it was taken, passed a very uneasy night, and, not having had a stool since the operation of the clyster, gave her the following:

℞. Infus. Senæ ʒx.

Mannæ Kali Tartaris. ʒā ʒij.

℞. Aromat. gr. xx, f. Laxativ.

This operated in about four hours after it was taken; but it did not alleviate her distress from the load and difficulty of breathing.

20th, ten A. M.—Every thing growing worse. She could not be in any position but on her knees, with the belly resting on the bed. Examined again, and could not discover the os uteri with certainty.

21st, ten A. M.—Every complaint worse. The abdomen become of an enormous size, and the most variegated colour; very shining, and of an œdematous feel. Could not find the os uteri when she was in bed, but, the rectum being full of fæces, threw up a clyster, which soon came away, and the fæces with it. Her pulse was so quick and weak as not to be numbered. I was apprehensive that she would soon expire, or, at the least, that the uterus would soon rupture: therefore, so soon as she was moved off from



the night-stool, when in an erect position, I again endeavoured to find the os uteri, but could not, until I introduced my hand into the vagina, when I found it very high up; backward, and inclining to the left side. Having before apprised her of my intention to draw off the water, if I could with safety, I pressed a tube into the os uteri, and through the membranes, when the water began immediately to come through it, and not a drop by the side, which enabled me, in a very gradual manner, to draw off thirty beer pints of a fluid smelling more like urine than liquor amnii. She was very faint, notwithstanding that I stopped the tube very often, and had a wide bandage round the abdomen, to be drawn tight as the water was evacuated. She remained in a swooning state, with great pain in her head, for three hours, when, after taking a cup or two of coffee, she requested to be assisted to get up to make water, and made at least four ounces, saying that she was relieved beyond conception. Her pulse was then become much more firm and slow; and, in about two hours after, she was delivered of a small weak child, which lived about half an hour.

On barely reading the above case, perhaps you may be surprised at the manner of my proceeding, but I was led to suppose the cause from which all these preternatural appearances proceeded by having attended her in a very similar case before.

On the 19th of July, 1815, she being then unknown to me, I was unexpectedly sent for to her, after that she had been in labour twenty-four hours. I inquired of the midwife what she supposed the case to be, who said that she could not say, only that she had never met with the like before, as when she lay on the bed, nothing was to be felt like a child; and that she was larger than any woman she ever was with, although thin, and of a small stature. On examining, found the os internum fully dilated, the membranes loose in the vagina; and, when the pain came on, which was violent, the membranes were fully distended, strong, and reaching to the os externum. I concluded that she was with twins, and a wrong presentation; but she was strong, and in good spirits, particularly when I told her that I hoped soon to be able to relieve her; and, as soon as I conveniently could, I ruptured (or rather cut) the membranes. Such a gush of water immediately rushed out, as to cover the whole floor, and I could not feel any child: however, in about ten minutes, a pain came on, which brought down a small child (the nates presenting); and the next pain brought it into the world. It never seemed to breathe; therefore did not cut the funis till the placenta came away, which was in less than

a quarter of an hour after. The placenta was larger than usual, and the membranes stronger than any I ever met with before.

*Dunstone, near Kingsbridge,*  
*August 19, 1816.*