

ON
SPURIOUS PREGNANCY.

ILLUSTRATED BY CASES.

By W. BURKE RYAN, M.B. Lond.

THOSE who labour under spurious pregnancy have frequently, and to an extraordinary degree, many of the symptoms of true pregnancy, and so fully convinced are they of the latter event, and so fondly do they cherish the idea that it is so, that when the time for explanation arrives, and when the painful announcement of their mistake has to be made to them, they often receive it with the utmost amount of incredulity. They can calculate and rehearse with great accuracy the symptoms attending the pregnant state, they know their own symptoms in every respect correspond, their souls cherish the thought too fondly, and they look forward with too much fear to the blank in their existence which disappointment must leave, to yield without a terrible struggle to conviction on the point. Those particularly who have never had a child look forward with feelings of shame to the time when those congratulations which their appearance makes friends and relatives so abundantly pour forth may be turned into a matter of ridicule at their expense; but in all cases, as well of those who have not previously had children, as of those who have had, such occurrences, both to husband and wife, are ever attended with anxious expectations and painful solicitude. The whole matter is involved in mystery.

In favour of medical practitioners, in cases such as these, it must ever be remembered that they are not called upon at the commencement for their opinion, or to decide any point of doubt; on the contrary, generally speaking, the simple (supposed) fact of pregnancy is announced to them by the lady or her friends, their services are bespoken for the expected accouchement, there appears no necessity for asking questions on the one side, nor desire to have them asked on the other, and it may be that only when, time being up, and bringing forth nothing, and doubt and alarm begin to be allied with expectation in the patient's mind, a medical opinion is sought for, and even then not always easily given, and when given unfavourably, not always believed, so disinclined are the patients in those cases to think that "Hope told a flattering tale." Grieved for his patient, the medical attendant deeply shares her embarrassment and her disappointment.

The time known as the "turn of life" is the period usually of spurious pregnancy. Irregular menstruation most commonly attends this period, many head and stomach affections arise, and the ovaries, which I believe chiefly involved in this "untoward event," seem to attain a degree of morbid irritability, which lights up the symptoms that follow; but it is not confined to this period, and amongst the four cases which I shall relate, three of them briefly, and the fourth more in detail, I shall instance one, a patient of about forty-five, a grandmother,

and the mother of twelve children, another of a lady of twenty-one, the third of a lady about thirty-five, and the mother of several children, and the fourth of a lady about forty at the time of her marriage.

A very interesting discussion lately took place at the Medico-Chirurgical Society of Edinburgh, on a case of "Hysteria and Spurious Pregnancy," brought forward by Dr. Keiller. The patient, labouring under undoubted hysteria, was believed by non-medical neighbours to be pregnant and in labour, the poor girl being frightened into the belief of the assertion, although she had had no connexion with any person. Her age was nearly twenty. Nine months before she had uterine derangement, with hysteria, and acid eructations, the catamenia being suppressed. Even in infancy she had enlarged abdomen. She was believed to be many days in labour, her screams disturbing the neighbourhood, and the Cæsarian section was proposed as the only means of relief, by the unqualified practitioner who attended her. Dr. Keiller could find no uterine tumour, and the mammary signs were wanting. The abdomen was enlarged, and tender to the touch. Here I do not consider the *signs of pregnancy* sufficient to have this classed as a "spurious" case, and besides I am doubtful regarding the occurrence of spurious pregnancy where coitus has not taken place.

For the diagnosis of these cases, the limits of this paper will only allow me to say, and, indeed, it is only necessary to say, that it is to be formed by strict attention to all the signs of pregnancy; but for one great aid to it I must again refer to this discussion, as with this patient Drs. Keiller and Simpson used chloroform with the most satisfactory results, the abdomen becoming quite flat, and the diagnosis being thus rendered easy. Dr. Simpson mentions other cases in which he had tried chloroform with like success, and mention was made of an essay on "Abdominal Tympany" by Mr. More O'Ferral, of Dublin, where chloroform was used in the diagnosis of such cases.

Dr. Simpson had seen several analogous instances of spurious pregnancy terminating in spurious parturition. In one case there was ovaritis and suppuration. Menstruation *did occur* in the cases which had been noticed, but scanty, and sometimes catamenia were wanting for several months.

Dr. Montgomery,* who has paid so much attention to this subject, gives a case of a lady, about forty-eight, in whom the catamenia had been suppressed for two years, who assured him that she had quickened six months before, but did not subsequently increase in size, nor had she any of the usual signs of pregnancy. Another case of a lady, about fifty, to whom he was called in "hot haste," under the belief that she was many hours in labour of so severe a kind as to make her fear delivery before his arrival, in which opinion she was strengthened by that of an experienced nurse. This lady was mother of several children, with the last of which, about two years before, Dr. Montgomery had attended her, and he had been engaged for the present expected illness, and just for the period at which he had been sent for. The abdomen was soft and puffy; there was no uterine tumour; she was not pregnant. For the first three months of her supposed pregnancy, the menses were suppressed, but afterwards returned at irregular intervals; internal motions were felt up to the time of labour. Instances of a conviction of pregnancy having lasted for a great length of time—years, are recorded.

Dr. Montgomery gives the details of two cases; the first by M. Klein, of Stuttgart, the second by Dr. Labatt. The first patient was hysterical, aged forty-three, and had thirteen children, considering herself again pregnant after an interval of five years. Catamenia suppressed, and she fixed a certain day for her labour, always having been enabled previously to name the time. On account of a tendency to convulsions, she was in the habit of being bled during former pregnancies; the same necessity existed in the present case, and in both the blood showed inflammatory appearances. She had the same antipathies and desires regarding articles of diet as during her former pregnancies. The abdomen increased in size, but the menses appeared from time to time. Toward the end of her time she had bearing down and tenesmus. On the 15th of May—the day she expected them—pains began, became severe, and, as in her former labours, were attended with convulsions. On examination, she was declared not to be pregnant. She recovered, and remained in good health. In Dr. Labatt's case the lady married rather late in life. After years without conception, the catamenia were suppressed. She increased in size, believed herself pregnant, and was attacked by pains at the expected time, when her medical attendant was sent for and remained with her under the conviction that she was in labour. Instrumental delivery was contemplated at the

* Signs of Pregnancy, ed. 1837, p. 169—"Spurious Pregnancy."

end of forty-eight hours' pain, until Dr. Labatt arrived and pronounced the patient not pregnant.

"I had occasion," says Van Swieten, as quoted by Dr. Montgomery, and speaking of imagined pregnancy, "to see this happen to a lady of distinction, the mother of fourteen children, who for eight years had ceased to conceive, and now firmly believed herself to be with child, having again felt all the uneasy symptoms which she had experienced so many times before—*nam, she was highly offended at all who dared to entertain the least doubt of it.* Her abdomen, gradually increasing for five months, went afterwards down in the same gradual way; and she lived several years after in very good health. She was so much ashamed, however, of having thus been deceived, that afraid of being laughed at by all her acquaintance, she kept the house for a whole year together."

Dr. Fothergill,* as noticed by Dr. Churchill, alludes to some of these cases happening generally to women marrying late in life—viz., between thirty and forty, as well as to women who had been long married and had children, and who several years after the cessation of the menses labour under such symptoms as make them suspect pregnancy; and says that the like complaint happens occasionally to single women about the age of forty, or near the time when the menstrual evacuation ought to stop.

Dr. Ramsbotham† alludes to such cases, remarking—"It seems scarcely credible that a woman could be so far deceived as to mistake an unimpregnated uterus for an impregnated one, and to continue in that error; and yet this is now and then the case, even in women who have had a family." In the following page he says, in alluding to such cases, "from some cause other than pregnancy, *the menses become interrupted,*" and that certain signs of pregnancy supervene.

Dr. Robert Lee‡ mentions some cases without going minutely into symptoms. In one, a married lady, in March, 1842, informed him that she was pregnant. Having three times examined the patient, and at intervals of several days, and at last in consultation, in order more completely to investigate the case, he gave an opinion against the existence of pregnancy. She retired to the country; and being seized with acute pain, a surgeon of great eminence was requested to see her, and on the following day her husband waited on Dr. Lee to say that premature labour was about to take place, and politely advised caution in his future opinions. In less than a month retention of urine and vomiting took place, the patient died, and malignant ovarian disease was found to exist; but no pregnancy. Another, in which a married woman was supposed not only to be pregnant, but in labour, the pain having arisen from hypertrophy and inflammation of the liver.

Another of a woman long married, and barren, whose abdomen enlarged, and who thought she felt most distinctly the movements of the child. The menstruation was regular. A medical gentleman, after using the stethoscope, and having, as he thought, heard the fetal heart beating, declared her near the full period of pregnancy. Six weeks passed, no labour came on, and the abdomen began to diminish. Four months passed, and in her anxiety that she might be pregnant, she still believed she was so, and that she felt the movements. Dr. Lee examined her: the uterus was unimpregnated.

Again: a lady who was anxious to have a family thought she was seven months pregnant, and engaged Dr. Lee to attend during her confinement. She menstruated regularly. She thought the child often moved within her. The abdomen was large; the mammae were enlarged, the areolae large and dark. For months she cherished the hope that she was pregnant. She was not so.

"I have seen," adds Dr. Lee, "several cases of hysterical tympanitis simulating pregnancy."

Dr. Rigby§ gives a case where a woman, the mother of two children, went into the Lying-in Hospital, under the impression that labour had actually commenced. The catamenia had ceased about nine months previously, and the abdomen was considerably enlarged. She was not pregnant.

(To be continued.)

* Transactions of the Sydenham Society, 1840, p. 514.

† Observations in Midwifery. Edit. 1832, p. 387.

‡ Lectures on the Theory and Practice of Midwifery. Edit. 1844, p. 167.

§ Library of Medicine, vol. vi. p. 59.

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(Continued from p. 382.)

I WILL now detail my own cases:—

CASE 1.—In 1841, I was engaged to attend Mrs. J— (Warwickshire) in her accouchement. She had previously had eleven children, and her eldest daughter (whom I attended during her confinement) was married a year afterwards. When I called on her, she appeared as large as at the full period of utero-gestation, breasts similarly enlarged, bodily health in the best condition, and spirits in the highest flow. I took my leave, asking few questions, and treating the engagement as a matter of course. I called occasionally for some time after the period named for my attendance, and the patient was much surprised at her miscalculation, having been generally, previously, pretty correct. I waited patiently for two months after the period mentioned, but no labour coming on, it was evident the woman was not pregnant. She got quite ashamed of the neighbours coming to inquire what she was about in delaying the event so long, and asking if she intended taking “a second round of it” —a phrase used in that part of the country when a woman goes much beyond her calculation.

In June, 1844, she informed me, that in about twelve months from the period of her imagined conception, she was taken ill with severe pains, simulating labour, and that a large substance, dark, like liver, and large as an after-birth, came away, with a considerable quantity of fluid. This I did not see.

Since that time she has never menstruated. During the period of her supposed pregnancy she frequently, as she thought, felt the movements of the fœtus. She had baby-linen, “and all appurtenances,” prepared.

In this case, there was gradual increase of size to the full extent, suppressed catamenia, enlargement of the mammae, morning sickness, and all the other symptoms necessary to deceive a woman of intelligence, and the mother of so many children.

CASE 2.—On the 25th of February, 1849, I received a note from Mons. V—, a French gentleman. On calling, I found he had been married about nine months to an English lady, aged twenty-one, and he wished me to attend her in her con-

finement, expected about the 11th of April. The patient was in an adjoining room, but did not make her appearance. I saw her the following week in presence of her husband. On the first time of seeing her very little conversation took place. I merely learned that she had increased considerably in size, that her breasts had much enlarged, that she had morning sickness, capricious appetites and tastes, and that she was, in fact, pregnant. She menstruated regularly. I called a few times, almost formally, and saw the lady in presence of her husband. She complained of no ills, and did not therefore require me to administer to any disease. I did not think it likely from appearances that this lady was so near parturition as she supposed, and, being about to leave town for a week, I called to inform her, but found both herself and her husband quite impressed with the belief that she should certainly be confined on the week I intended to leave. I was therefore obliged to remain in town. The nurse called on me on the 12th of April. The lady did not consider herself in labour, but she had got much less during the last few days, and was now in bed. On inspection of the mammæ, I ventured to hint that she was not pregnant, and, on further examination, assured her that such was the position of affairs. She made no reply, seemed timid and sorrowful, and just then her husband entered, whose consternation when he learned the state of things was unfeigned. He left the room half distracted. I found considerable tympanitic abdominal swelling, with enlarged breasts, but no areolar darkening, moisture, nor protuberant follicles. From the 12th to the 26th of April she took biborate with carbonate of soda and digitalis, squills, and other diuretics. My attendance then ceased until the 16th of July, when I was called on to visit her. She was then suffering from diarrhoea of a few days' duration, with a rapid, feeble pulse, and red tongue. She had evidently lost much flesh since I saw her in April, accompanied with weakness and perspirations; her appetite, too, had failed her; there was occasional sickness of stomach, and she had cough, but not sufficient to attract her attention much. She had also experienced occasional dyspnoea, with palpitation of the heart. There was decided dulness on the right side on percussion in the clavicular and subclavian regions, and the stethoscope applied over the supra-spinous fossa detected small crepitation. The breathing was coarse, and the expiration more prolonged and distinct than usual. The voice, too, was unusually resonant, and the vocal vibration more than on the opposite side in the same regions. These signs, with the exception of the small crepitation, existed on the left side in a less degree. There was a slight hectic blush, and a little, but very little, tenderness over the right iliac region on deep pressure. I made up my mind that it was a case of tubercular formation, and likely, it was to be feared, to be a rapid one—one of those cases of dyspeptic or acute phthisis that run a very hurried course. Chalk mixture with opium so quickly removed the diarrhoea, that I thought it prudent the day following to give as a refrigerant half-drachm doses of sulphate of magnesia, with dilute sulphuric acid. I was the more confirmed in my diagnosis as hæmoptysis set in on the 18th of July, which was stopped by five-grain doses of diacetate of lead, and did not appear again until the 30th. Owing to her former good health, I could scarcely get the family to view the matter in so serious a light as I thought desirable to place it; but as I pressed for a second opinion, and they wished me to name a gentleman, Dr. Copland was called in, who agreed with me as to the diagnosis, and as to the probable tendency of the case. Hæmoptysis appeared on the 6th and 7th of August also.

She was now removed to her father's house at C—, where I attended her. There was irritative cough, but not until the last any considerable amount of sputa, and even then nothing equal to what is noticed in the slower and more common form of this dread disease. Hectic symptoms increased rapidly, with œdema of the legs, and aphthous ulceration of the tongue and mouth, with change of voice, not perfectly aphonic, and pain in swallowing, showing the extension of the aphthous affection towards the larynx. The catamenia had not appeared for three months; the emaciation and exhaustion became extreme; she was literally in this short period, without a murmur of impatience, reduced to a skeleton; and in nine weeks from the time I was called to see her, and when symptoms of phthisis were first suspected, she breathed her last.

CASE 3.—About the 9th of March, 1852, Mrs. —, the wife of an officer in the army, whose family I had been for a time attending, consulted me for an attack of hæmorrhage, informing me at the same time that she was pregnant, and feared the hæmorrhage was uterine, as she was seized with what was considered such during her previous pregnancy, and for which she had to lie on a couch during a long period.

From the symptoms she described, I was enabled to assure her that the bleeding arose from hæmorrhoids. It was soon suppressed by appropriate treatment. This lady, aged about thirty-five, was the mother of several children, and having considerable dread of the parturient throes, she and her husband had long previously determined that, in case of another pregnancy, she should call "upon the services of a medical gentleman who on all occasions used chloroform;" and her husband, on the 18th of April, on the point of leaving home for a period of eleven months gave me intimation to this effect. The subject of pregnancy was therefore, under these circumstances, of course not mentioned. The shock of his departure severely affected her, causing depression even to syncope, and when I was called in the evening I found her in a state of extreme exhaustion, with severe vomiting. This was the more to be feared, as she seldom found herself inclined to take sufficient nourishment. She had travelled much. There was now considerable increase of size, the more apparent as the lady was of a spare habit of body,—such as might be expected about the fifth month of pregnancy. I prescribed for her on the 21st of April, and after that did not see her for six or seven months, presuming that long before that period her delivery had taken place. On meeting her about this time, she informed me that she had not been pregnant, and I believe no doubt on the subject presented itself to the mind of the gentleman under whose care she placed herself, until, or after the full time had arrived; and even then, after the necessary inquiries, it was found desirable to obtain the opinion of a physician of the highest eminence, in London, in that department of medicine, who pronounced that there was no pregnancy. I wrote lately to this lady, requesting her to furnish me with particulars as to the symptoms, but she had not courage to revert to them. Her husband, about four months since informed me that after fatigue she was then threatened with a miscarriage; if so, this would be an instance where the female became pregnant after having laboured under the symptoms of "spurious pregnancy."

(To be continued.)

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(Concluded from p. 430.)

CASE 4.—Mrs. —, aged forty, married in October, 1843; of a spare habit of body; generally for years past, of delicate health, which she attributes to fatigue consequent on attending a sick brother during a long illness. She has laboured under a relaxed state of the uvula and fauces, and been leeches, blistered, &c., which perpetuated this state of things, and of which she was subsequently cured by astringents and stimulant gargles with tonics. Her stomach has been generally out of order, her tongue loaded. The first six or eight weeks of her marriage she laboured under a kind of hard, dry, barking cough in the morning, which had been habitual. Previous to marriage she was also affected by varicose veins of the right leg, easily observable when she wore a silk stocking, which she therefore avoided. From these she suffered considerable pain if she walked any distance, and used a bandage for them. Breasts flaccid and very small.

On or about February 12, 1844, four months and nine days after marriage, she observed considerable abdominal swelling, which prevented her stooping in superintending the laying-out of some flower-beds. On examination, I found the abdomen as large as it usually is at about the fourth month of pregnancy. The catamenia had continued up to this time. It struck me as possibly being a case of dropsy supervening on pregnancy, menstruation occurring simultaneously, and I was unwilling to prescribe until the next monthly period, which came a fortnight afterwards, bringing the menstrual flow as usual. The breasts were a little enlarged and painful to the touch. The abdominal swelling was not uniform, being much larger about the right iliac region than any other part: this raised a fear of ovarian dropsy of the right side.

There was no particular areola observable, as the colour of the disc seemed like that of the remainder of the breast; but surrounding the nipple was a ring rather dark, a line and a half in breadth. Ordered powders of bicarbonate and bionate of soda with rhubarb night and morning, and, to relieve great lowness of spirits and weakness, a mixture of aromatic spirit of ammonia, four drachms; compound tincture of cinnamon, four drachms; infusion of calomba, a pound and a half: mixed. The sound on percussion was quite tympanitic over the right iliac region. The powders affected the bowels, and the mixture relieved the other symptoms. Having continued the powders during six days, all symptoms were alleviated, and the swelling much reduced. Her skin, which before marriage was dry, is now moist, and a general fulness and plumpness pervades the whole body, with an unusually, for her, healthy feel of the dermoid system. There are dark rings or marks beneath the eyes.

March 20th.—The breasts enlarging; the abdomen is gradually enlarging; the ring round the nipple getting darker; blue veins also observed traversing the breasts, which were not previously noticeable. She formerly used butter, which she now dislikes. Ale, which she could never before use, she now *must have* for supper—can drink two glasses, of a strong home-brewed kind, without any injurious effect, which much surprises her, and is quite ashamed of her powers in this way. She also takes her wine, and thinks she should die of lowness if she did not take these good things. Cheese, which before always disagreed with her, and which therefore she seldom ate, she now likes, and partakes of heartily and with impunity; she likes and eats plentifully of beef. No morning sickness. Though the abdo-

men enlarges, there is no distinct hardness; indeed, when she lies on her back, though the swelling is pretty hard, it appears more that of corpulence than of the circumscribed tumour, the outline of which is sometimes so well defined in pregnancy. At midday she takes a glass of wine, which relieves a sort of "sinking." *The varicose veins of the leg are fast disappearing;* they can in a place or two be felt, and scarcely felt, through a thin stocking, and she can now walk without being affected by the pain of her leg. She looks five years younger; and her friends and visitors, as well as her mother, who herself had six children, are all satisfied of her pregnancy; and although I am myself much inclined to the same opinion at times, yet I still have very strong doubts, and refuse to pronounce for pregnancy. The *embonpoint* is very considerable—quite a contrast to her former appearance. Her *morning cough has for some time left her;* and she who was before marriage always in the habit of taking physic, takes very little now. I looked forward anxiously to her next monthly illness, which commenced on the 26th of March, and lasted the usual time. Her illnesses, the last three times, came on a day or two before the expiration of the fourth week, and she remarks that the flux, although as profuse, has not the consistency of former discharges; of this I satisfied myself from its appearance on the cloths, through which it seems to penetrate more, and it is lighter in colour. A blue pill, and some magnesia and rhubarb, is prescribed occasionally.

April 12th.—I to-day notice that part of the areola, *outside the narrow ring* mentioned above, but instead of a rose or darker colour, it is *whiter and more delicate*, with a silvery appearance, and stretched out, as it were, by the subjacent fulness, more than the surrounding skin.* The narrow circle alluded to is also darker, and spreads in one direction. Within the disk is a growth of four or five hairs, of considerable length and thickness, not before observed. From my not pronouncing for pregnancy, she at this time seemed much alarmed lest she might labour under some abdominal disease, of which she had heard so much.

18th.—Four days since she was attacked with profuse *ptyalism, the salivation lasting two days.* Yesterday and the day before she took a glass of strong ale before twelve o'clock, "which would have killed her a year ago." The salivation returned yesterday evening, followed by severe retching. Severe retching this morning; vomited a glairy fluid of intensely sour smell; the circle increasing and darkening round the nipple, but the outer part of the areola is whiter than the other part of the breast. Although the retching comes on so violently, she does not vomit the ale taken shortly before. Feels occasionally very peevish and fretful; bowels open daily; eats ravenously.

29th.—I have, since the last date, frequently noticed the floating as if of mucus in the urine; *salivation to-day and yesterday.* On Monday last, (22nd,) menses again appeared, lasting only two days; not so deep a colour as usual, more watery, and saturates the cloths more. Size of abdomen sometimes much smaller than at other times. I cannot detect the womb through the abdominal walls. Breasts get softer and smaller at the monthly period, and again increase and harden in a day or two afterwards; areolæ still white, the brown ring not increased: appetite bad during menstrual discharge, but the retching is then altogether relieved. Sometimes takes three half-pints of ale daily, without affecting her head; "feels a greediness in eating never before experienced, and even while eating could cry from peevishness;" has taken a strong desire for sausages; has sometimes felt a quick shooting pain in right iliac region.

May 19th.—Monthly illness commenced to-day; little if any alteration in areola; abdomen tympanitic, and much enlarged within the last eight hours, since menses made their appearance; almost fainted at an evening party, and had to leave the room—never before affected so. On applying the ear to the abdomen, and at the same time moving the bowels, a gurgling sound was heard; stomach, as usual, very little affected during the catamenia. Repeat the powders and stimulant mixture.

31st.—Assuming, in my opinion, a darker tint around the nipples; abdomen firmer to the feel; breasts enlarging. Now fancies pickles, gooseberries, and many different things; peevish; cannot do without ale; feels quite sinking and faint if she do not take it as well as meat.

June 14th.—Catamenia commenced and lasted from Friday

* "It is often difficult," says Dr. Gooch, (Diseases of Women,) "to tell whether the darkened colour of the areola exists or not in persons of light complexion." Dr. Montgomery (Cyclopedia of Practical Midwifery) considers colour of the areola of all other signs the most liable to uncertainty; and Dr. Rigby (Library of Medicine, vol. ii.) agrees with him that it is one upon which we cannot depend with any great certainty.

morning to Saturday night, thin and watery. A day previous to her illness complained much of weariness, suffering under great prostration of strength, and severe pain in her back and hips. Catamenia usually thus ushered in. Before marriage she suffered much pain *during the time*, but never since.

18th.—Swelling much diminished, to nearly one half.

22nd.—Large as before; but, on careful examination, the womb cannot be felt through the abdominal parietes. The prostration of strength frequently comes on with a feeling of great sickness, and these are at once relieved by eating meat and taking ale or porter, after which she gives expression to the warmest gratitude for the relief experienced from these unpleasant symptoms. She still fears she labours under disease. The case certainly puts on much of the appearance of pregnancy, but more unequivocal signs of pregnancy should have shown by this time; and although the "pale, sickly, and cachectic" appearance, and soft and flaccid breasts of dropsical patients are here absent, thus aiding the diagnosis of pregnancy, still is there against it the backwardness of the areolar signs, the want of increase of moisture and prominence of the glandular follicles, the non-appearance of the deepened shade or apparently raised surface of the areola, the persistence of the catamenia, the indefiniteness of the tumour, the retching not occurring on rising in the morning. The line noticed by Dr. Montgomery is here *well marked*, running from the umbilicus towards the pubis. The rings at the base of the nipples are now about one-sixth of an inch wide, and of such a colour as might be expected by this time to have spread over much of the areola. Vaginal examination objected to.

20th and 24th.—*Severe ptyalism* on each of these days. Before the salival discharge comes on she feels very low, and can scarce describe the kind of illness. To use her own words, "It is not in her stomach; it is as if she were half dead, as if no life were in her." This is relieved as the salival discharge proceeds. She frequently says she thinks she has no stomach, inasmuch as after eating and drinking most heartily she feels as if she had taken nothing, and as if she could digest any substance—a thing quite unprecedented with her. The hairs on the breasts have much enlarged, both as to length and thickness.

25th.—*Salivation all this day.*

July 9th.—Catamenia appeared, and remained the usual time, (four days.) From this time all sickness of stomach vanished. Of course my opinion is quite made up against pregnancy, yet here have been a most extraordinary collection of symptoms.

August 5th, (Monday.)—Monthly illness came on, and continued until *Friday morning*. She cannot now take ale, as she was wont, nor has she the longing for it, nor does she think it serviceable; it affects her head, even a glassful. From this time everything vanished, suddenly and unexpectedly, even as it came—

"And like the baseless fabric of a vision,
Left not a wreck behind!"

To what, then, are we to attribute the extraordinary combination of symptoms we sometimes meet with? To ovarian irritation, or that, followed or accompanied by inflammation of a subacute character? I allude particularly to those cases of what might be called an ovarian erethism, and in which occur no absolute disease apart from the uterus, such as the liver, &c., but in which, from the first to the last symptom, the health of the female, as in the last of the cases I have noticed, is improved immensely—where, as in that case, she who before had long been ailing and unhealthy, then appeared plump and healthy, as if years had been taken from her age. This patient menstruated regularly during the subsequent five years.

Dr. Gooch* says "there is a torpid state of the uterus, with a flatulent state of the intestines: this is most liable to occur near fifty years of age, when the uterus is about discontinuing its function." The abdomen becomes distended with a flatulent tumour, and the air moving about the bowels gives an inward sensation, which is mistaken for the child. With many symptoms of pregnancy, there is also an anxiety to believe in it as a test of youthfulness. He gives two cases in unmarried females, where symptoms of pregnancy followed coition, but where pregnancy did not exist.

Sydenham, as quoted by Dr. Montgomery, says of this complaint, "it proceeds from flatus, and besides a swelling causes the signs of pregnancy, and happens chiefly to widows, or women that did not marry till they were advanced in years, and such, in their own and midwife's opinion, feel the child move from the customary time to the usual time of delivery," &c.

* Diseases of Women, p. 225.

Dr. Simpson* notes how often phenomena of spurious pregnancy have been observed amongst domestic animals, as well after unsuccessful sexual intercourse, in which I can well imagine it, as after seasons of heat, in which there was no sexual intercourse, and of which I feel that more proof may be desirable. In some of these, phenomena of pregnancy went on to the full term, milk being secreted by the mammæ, with other phenomena of the puerperal state. Dr. Simpson is there reported to have brought forward many facts showing the frequency with which phenomena of spurious pregnancy take place in the human female, and concludes by saying that, as in the virgin state among the lower animals, so do we find them in the unmarried female, "giving rise to symptoms which have hitherto defied any nosological arrangement."

"Spurious pregnancy," says Dr. Montgomery,† is usually observed about the turn of life. The abdominal enlargement progressively increases, partly from deposition of fat in the integuments and in the omentum, but still more from distension of the intestines by flatus, which, passing from one to the other, communicates a sensation like that produced by the motions of a fetus. The delusion is rendered complete, and almost assumes the character of reality by the occurrence of periodical pains strongly resembling those of labour." He remarks that it is by no means confined to the period usually known as a *certain age*, having met with it in a young woman who had children both before and afterwards.

Dr. Ramsbotham‡ alludes as a cause of such symptoms to a diseased ovarium, to a deposit of fatty matters in the omentum, to a deranged alimentary canal, adding, "Yet, occasionally, after the closest investigation, after the most minute inquiry into all the symptoms, no positive fact can be elicited to warrant the suspicion of any organic disease." He gives the case of a lady, turned forty, mother of a family, who supposed herself pregnant, and who at a certain time was attended by her medical man, a vaginal discharge, accompanied with pain, having come on. Two months elapsed after this without a child making its appearance, the lady still feeling convinced she was pregnant, and, in addition to her own medical attendant's opinion, finding it desirable to have that of Dr. Ramsbotham.

Dr. Simpson thinks the malady connected with the ovary. He could not ascertain the nature of the abdominal swelling in these cases, and thinks the diaphragm the chief agent in it. The chloroform relieves this and the other muscles from the influence of reflex action. He adds that some of these cases could scarcely be placed under the heading of "hysteria."

"The name of simulated pregnancy has been given to some cases of hysteria, in which the abdomen enlarges gradually, sickness occurs, and so many signs of an impregnated uterus are present, that time alone can solve the doubts they raise. The catamenia are suppressed, the breasts are tumid, and there is pain in the back."§

Mr. Tate says of these cases:—"In what this enlargement consists I am utterly ignorant; that it is not merely a mere accumulation in the colon I know; that it is substantial I am equally sure." It is, we apprehend, a mixed state of vascular fulness and tympanitic distention.

Dr. Fothergill|| says "the general turgescence, although depending primarily on retention of the menses," (which retention, I may remark, is far from being uniform in these affections.) "in the countenance and appearance of the whole habit, denote a general plenitude, but very different from the bloated body of an hydropic."

The analogy may be said to hold good between the eggs produced by insects, birds, and fishes, without the intervention of the male, but in that case, as observed by Harvey, infecund, and the bursting of the Graafian vesicle, and the escape of the ovulæ during menstruation in the human female; but although in the latter the orgasm and the nervous excitement is considerable at the menstrual periods, yet we must recollect how different it is to that fearful and maddening revulsion which takes place in quadrupeds during the venereal æstrum, and that should "spurious pregnancy" ever occur without the intervention of the male, it must be in animals in such a state of furor, and not where the passion is so equable as in the human female; and well, indeed, is it for society, that the virgin female, if at all liable, is not so liable as the married woman to such symptoms. Were such symptoms in their every minutiae to occur in the virgin as we can trace them in the married woman, unless in such cases "spurious pregnancy" were an

* Monthly Journal of Medical Science, 1850, vol. ii. p. 90.

† Signs and Symptoms of Pregnancy. Ed. 1837, p. 169.

‡ Op. cit.

§ Cyclopædia of Practical Medicine. Art., Hysteria, by Dr. Conolly.

|| Transactions of the Sydenham Society, 1840.

acknowledged and recognised fact, how her reputation must suffer and her heart feel crushed, and how must she feel towards the erring judge of her cause, that

“Man to man so oft unjust,
Is always so to woman?”

I believe in almost all these cases, either from climacteric, as in case 1, or premature decay, as in case 2, the ovaries are in the position of being susceptible of an *impression* during the marital congress, when the orgasm is extreme and the nervous system is strung to the highest pitch, but that they are unequal to, and sink beneath, the effort subsequently required to carry out the intentions of Nature, even while the Fallopian tubes become erect, and as usual seize the ovaria, as observed by Dumas and Chaussier, with others; and I believe, that although the full intention of Nature be not carried out, a certain impression is made and remains, and that, as if favouring the doctrine of absorption, the female constitution is frequently altered in such cases, a healthy appearance and vascular fulness taking place. I believe that in the unmixed form of “spurious pregnancy,” ovarian irritation is predominant, and that the subject offers a fine field to the labours of the physiologist, beautifully showing forth a series of reflex nervous actions, to be worked out upon that system to which Dr. Marshall Hall has given alike a simplicity and a perfection.

Bayswater, May, 1855.