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 occurrence, 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 “unfavourable event,” seem to attain a degree of morbidity 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 “Hystera and Spurious Pregnancy,” brought forward by Dr. Keiller. The patient, laboured 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 hystera, and acid eruptions, the catamens 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 Cesarian section was proposed as the only means of relief, but the unqualified practitioner 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 called this classed as “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’Ferrall, of Dublin, whose 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 suppression. Menstruation ceased in the cases which had been noticed, but scantily, and sometimes catamenia were wanting for several months.

Dr. Montgomery, * who has paid so much attention to this subject, gives a case of a case of spurious pregnancy. In this case 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 five 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 one of several children; the lady laboured considerably more 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. The abdomen was soft and very turgid, there was no menses, the uterus had been removed. 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. For the first time the patient was really labouring. For the first time the patient was really labouring. For the first time the patient was really labouring. For the first time the patient was really labouring.

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, and account of a tendency to convulsions. On the 15th of the month she felt very sick, and 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 antipathy and desires regarding articles of diet 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 the month she was not well, and was very severe, and, as in 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 in labour rather late in life. After a period 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—say, 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."

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, as noticed by Dr. Churchill, mentions cases of women 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 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 areola 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's 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.)
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(Continued from p. 362.)

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 fetus. 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 mammas,
morning sickness, and all the other symptoms necessary to
decieve 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-
From the symptoms she described, I was enabled to assure her that the bleeding arose from hemorrhoids. 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, I informed her 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 practice. My attendance then ceased until the 10th of July, when I was called on to visit her. She was then suffering from diarrhea of a few days' duration, with a rapid, feeble pulse, and red tongue. She had evidently lost much flesh since she was in April, accompanied with weakness, and her respiration; 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 dyspepsia, with palpitation of the heart. There was decided dulness on the right side on percussion in the clavicular and subclavium regions, and the stethoscope applied over the supra-scapular 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 harrassed course. Chalk mixture with opium so quickly removed the diarrhea, 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 hemoptysis set in on the 15th 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. Hemoptysis appeared on the 6th and 7th of August also. She was then 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 spuas, and even then not equal to what is noticed in the slower and more common form of this dread disease. Hectic symptoms increased rapidly, with oedema of the legs, and apoplectic ulceration of the tongue and mouth, with change of voice, not perfectly aphonic, and in swallowing, showing the extension of the apoplectic 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 some time attending, consulted me for an attack of haemorrhage, informing me at the same time that she was pregnant, and feared the haemorrhage 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.
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 copulence than of the circumscibed tumour, the outline of which is sometimes so well defined in pregnancy. At mid-day she takes a glass of wine, which relieves her 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 more 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 enb/File point 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 a bath, now rises early, and never appears to work to her next menstrual 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 chothes, through which it seems to penetrate more, and it is lighter in color. A blue pill, and some magnum and rhubarb, is proscribed occasionally.

April 12th.—I to-day notice that part of the areola, outside the narrow ring mentioned above, but instead of a rose or red color, it is a white and more or less extended 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 circle there is a growth of feathers, as blue as those on the face, 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 thin 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; eating moderately.

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,) menstrae again appeared, not only two days ago, but much thicker; flowed away, and the blood was bloody, and the urine very watery, and saturates the clothes 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, and a day or two after menstruation; but on a day or two afterwards; areola still white, the brown ring not increased; appetite bad during menstrual discharge, but the retching is then altogether relieved. Sometimes takes three or four parts 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. Breasts almost full at the same time, and abdomen full, in a day or two afterwards; areola still white, the brown ring not increased; appetite bad during menstrual discharge, but the retching is then altogether relieved. Sometimes takes three or four parts 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.

31st.—Assuming, in my opinion, a darker tint about the nipples; abdomen firmer to the feel; breasts enlarging. Now fancies pickles, gooseberries, and many different things; peevish; has sometimes felt a quick shooting pain in right iliac region.

* "It is often difficult," says Dr. Gooch, (Diseases of Women,) "to tell whether the darkened colour of the areola exists or not in cases of eight completion." Dr. Montgomery (Cyclopedia of Practical Midwifery) considers it one of the areola of all other signs the most liable to be mistaken. 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 weakness, and a sensation of heat and dryness in her mouth and lips. Catamenia usually thus ushered in. Before marriage she suffered much pain during the time, but never since. 15th.—Swelling much diminished, to nearly one half. Swelling,—Bleeding, but, on examination, the womb cannot be felt through the abdominal parietes. The protrusion of strength frequently comes on with a feeling of great sickness, and these are at once relieved by eating meat and drinking, 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 much of the appearance of pregnancy, but more unequivocal signs of pregnancy should have slighted. Often, it says, and a torpid and 'pathetic' appearance, and soft and flaccid breasts of dropical 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 inexactness 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 caused by the veins, and should be read over much of the areola. Vaginal examination objected to.

20th and 24th.—Severe epistaxis on each of these days. Before the salivatory discharge comes on she feels very low, and can scarcely stand on her legs. Dr. Simpson says:—"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 salivatory discharge proceeds. She frequently says she thinks she has no stomach, inanal to as much of 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 hair on the breast have much enlarged, both as to length and thickness.

26th.—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 6th, (Monday.)—Monthly illness came on, and continued until Friday morning. She cannot now take ale, as she used to, nor has she as much appetite. In place of her usual appetite, she now finds it serviceable; it affects her head, even a glassful. From this time everything vanished, suddenly and unexpectedly, even as it came."

"And is the careless 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. For in the case 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 bowel, gives an inward sensation, which is mistaken for the child. With many symptoms of pregnancy, there is also an anxiety to believe it as a test of youthfulness. He gives two cases in unimportant circumstances, where symptoms of pregnancy followed coitus, 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 dyspepsia, and happens chiefly to women of advanced years, and in such, in their own and midwife's opinion, feel the child move from the customary time to the usual time of delivery."

Dr. Simpson notes how often phenomena of spurious pregnancy have been observed amongst domestic animals, as well as in our own species. If, after the delivery of a spurious pregnancy, the young is killed, or givne 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, and the female, after the offspring were born, showed no symptoms 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 dog, the cat, the rabbit, and the hare, and concludes by saying, after this, that there is no distinct sexual system 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 pale, sickly, sickly 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 periodic pains strongly resembling those of labour. He remarks that it is by means of symptoms of this nature that it is so often seen in women of advanced age, having met with it in a young woman who had children both before and afterwads.

Ramsbotham allies as a cause of such symptoms to a disordered ovary, to the want of the fatty matter of 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 opinion of 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, and who came one day to Dr. Ramsbotham, and 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. He believes the pains and the other symptoms to be the result of 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, and undergoes no change whatever. When these symptoms are present, that time alone can solve the doubts they raise. The catamenia are suppressed, the breasts are tumbled, and there is pain in the back."

Dr. Kaye 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 flux and tympanitic distension.

Dr. Forthgill says "the general turgescence, although depending primarily on retention of the nesceses," (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, Insean, and the bursting of the Graafian vesicle, and the escape of the ovule during menstruation in the human female; but although it may matter the organism, unless the fleshy tubes are considered 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 veneral estrum, and that such "spurious pregnancy" ever occur without the intervention of the male, it must be in animals in such a state of furoor, and not where the position is so equal as in the human female; and well, indeed, is it for society, that the virgins preserving their virtue, if at all liable to such, they have no such symptoms. Were such symptoms in their every minute to occur in the virgin as we can trace them in the married woman, unless in such cases "spurious pregnancy" were an

* Diseases of Women, p. 235.


† Transactions of the Sydenham Society, 1846.
acknowledged and recognised fact, how her reputation must
suffer and her heart feel crushed, and how must she feel to-
wards 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 un-
equal 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 Chausssier, with others; and I believe, that
although the full intention of Nature be not carried out, a cer-
tain 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 ful-
ness 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 physi-
ologist, 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.