

Medical Observations and Inquiries.

*Of the Management proper at the
Cessation of the Menses. By John Fother-
gill, M. D. F. R. S.*

To the MEDICAL SOCIETY in London.

GENTLEMEN,

THERE is a period in the life of females to which, for the most part, they are taught to look with some degree of anxiety ; as a period on which depends their enjoying a good or bad state of health during the residue of their lives.

The various and absurd opinions relative to the ceasing of the menstrual discharge, and its consequences, propagated through successive ages, have tended to embitter the hours of many a sensible woman. Nor have these mistaken notions been confined to them only ; they have occupied the minds of such who ought to have been better informed : some practitioners, in other respects able and judicious, if they have not favoured these erroneous and terrifying notions, seem not to have endea-

voured to correct, with the diligence and humanity which an object like this requires.

The design of this Essay is to contribute my mite towards so necessary a purpose; to assist in removing these groundless apprehensions, and to substitute a reasonable confidence, that, with very little aid, Nature is sufficient to provide for her own security on this occasion.

You must forget for a moment that I am submitting these remarks to the judgment of a society, every member of which, perhaps, is as capable of this work, and some much better than myself. I am writing to many sensible young men in the profession of physic, who, though they may have applied themselves to the general study and practice of our profession with diligence and success, may not yet, perhaps, know where to look for such information on this subject as may be sufficient to satisfy themselves and their patients, what management is proper when the menses are about to cease.

To propose a regimen that shall suit all the different cases that may occur, would require a volume. To give some general direction is all I propose, without entering into a minute description of the commencement, progress, and termination of the menses. I must suppose every thing of this kind is already known, and that the single question is, what conduct, what management is necessary to be observed when the menses are about to cease, by the patient who consults her physician on the occasion. We are now sensible that the menstrual discharge is not what it was too long and too generally believed to be by many of the sex, an evacuation of peccant matter and morbid humour, sometimes acrimonious and malignant, whose retention never fails to be extremely injurious, from its noxious qualities, to the constitution. What opinion the ancients entertained concerning it I need not repeat to you: That its malignancy was such as to affect even inanimate bodies. But these fables are wholly disbelieved, except by some of those who ought to

to be undeceived in a matter that so much concerns them.

It is now well known, and the sex cannot be too generally apprized of it, that the menstrual discharge possesses no such injurious or malignant properties; that it is solely a redundancy of that pure, vital blood which animates the whole frame of a healthy person; and that its retention is by no means attended, in general, with effects that are not as easily removed as any disorder to which they are subject.

That some acrimonious, morbid humours may be discharged together with the menses, when any such exist, is not improbable. So it happens likewise to men subject to the piles, or other preternatural excretions.

Women who have unhappily imbibed that prejudice, are naturally alarmed at the consequences they apprehend must ensue from such a change in their constitution; and the more strongly they are prepossessed with a belief, that by this channel has been regularly discharged whatever had a tendency to produce diseases, the more they

M 2

are

are terrified with apprehensions of some of the worst complaints : and, indeed, it is not seldom that by such anxiety, they bring on disorders that are not easily removed, attributing them to the cause we are speaking of, whilst they principally originate from anxiety.

For the most part the menstrual discharge, as has been mentioned, proceeds from a redundancy of good and healthy blood : this redundancy is formed for the most necessary purposes ; continues whilst this necessity subsists, and ceases when, according to the constitution of the female frame, it is no longer required.

The powers communicated to the human system, generally expressed by the term Nature, are such as spontaneously bring about this cessation. The provision for the menses ceases, an extra quantity of blood is not generated, and the vessels provided for its regular discharge by degrees collapse, and in general all this proceeds without any the least interruption to the health of the subject in which this alteration happens. Here it might not be improper to mention

mention at what time this alteration first begins, and the general period of its cessation. These circumstances, however, may be found elsewhere so amply treated of, as to render it as unnecessary as it is foreign to my present design.

There are great numbers of women in whom the menstrual discharge ceases, without their perceiving any alteration in their usual health. There are some who, from being invalids during a part of the season which is appropriated to menstruation, find themselves by degrees recovering health and vigour, to which they have been strangers during that period when this discharge leaves them entirely. Very tender, delicate, relaxed habits subject to copious discharges, are often much benefited by the cessation. All, however, are not so fortunate. Some alterations frequently supervene, that render assistance necessary.

Amongst these alterations, the most frequent are such as arise from a redundancy of blood and immoderate discharges from various causes.

About the time when this change is to happen, or not long after, many persons find the disorders to which they have heretofore been subject, more frequent and more troublesome. Some are afflicted with the well-known symptoms of plethora, heat, flushings, restless nights, troublesome dreams, and unequal spirits; others are attacked with inflammations of the bowels, or other internal parts, spasmodic affections of various parts, stiffness in the limbs, swelled ancles, with pain and inflammation, the piles, and other effects of plenitude. In these cases it seems as if the organs, which were instituted with a design of providing the natural surplus, continued to produce this effect, whilst the size of the vessels destined to discharge it, was diminished, or they were collapsed entirely.

This case is opposite to the former; in that the organs of excretion continued to execute their functions, and actually discharged a portion of blood from the common mass, whilst those organs which are formed to provide a surplus in enfeebled habits, were only capable of maintaining the

the necessary stock. And on the disparity in the operations of these two different organs, in fact, depend most of the complaints incident to the sex at this particular period. In some the provision ceases before any change is produced in the excretory vessels. In others the excretory vessels become unfit for their office, whilst the organs for accumulating blood continue to be efficacious.

From this view of the subject, it will be less difficult for the practitioner to form a judgment of what is fit to be done on various emergencies: it will be easy to discover how far evacuations are likely to avail; and when other means become necessary. Those of full plethoric habits, accustomed to copious evacuations, will find great relief by bleeding frequently in moderate quantities, keeping the bowels lax, and moderating their diet. They are, for the most part, attacked about the time of menstruation with sudden flushing heats, succeeded by instantaneous sweats, continuing for a few seconds, then going off for a short time, and again recurring many times

in the day ; they are worst after eating, in a room much heated, in large assemblies, in bed, attended with restlessness and frightful dreams. These gradually abate for a few weeks, and as the period approaches again, come on, and so successively, for a year or two, or more, terminating sometimes in large immoderate fluxes ; sometimes in apoplexies, palsies, and other diseases arising from plenitude.

If such are advised to lose four, five, or six ounces of blood, at the distance of two, three, or four months, just as the vehemence of the symptoms require, every thing of this may be happily prevented ; and as the occasion for bleeding daily decreases, its repetition may be put off to longer intervals,

It happens frequently, that some circumstances attend the patients, which induce practitioners to omit this operation, or at least induce the patients to object to it in such a manner as to get it postponed. They allege they are subject to nervous complaints ; they never could bear bleeding ; it always hurt them, and the like,

But

But with a full, hard pulse, great heat, and the other symptoms described, one need not fear the increase of any such complaints; on the contrary, as they proceed so evidently from plenitude, they seldom fail to give way to moderate and repeated evacuations.

It is not unusual in such cases to be informed that the patient has swelled ankles; and that bleeding would inevitably, at that time of life, bring on a dropsy. But if this fulness appears to be hard, inflamed, and painful, as is most commonly the case in some degree, the lancet and some gentle laxative will scarcely fail of removing, instead of aggravating, the complaint; and recourse may be had to the same remedies, if the like complaints recur.

There is another circumstance often happens at this period, sometimes owing to the neglect of evacuations at a proper time, sometimes to the use of improper medicines, sometimes to the peculiar constitution of the patient; I mean an immoderate flux of the menses, which often requires the utmost

most care in its restraint and future regulation.

For the most part this happens to women of sanguine habits, living well, accustomed to copious evacuations, or to the general effects of plenitude.

If, in such constitutions, the evacuations are not very considerable, their health is often interrupted, either by frequent inflammations of the tonsils, and other glandular parts, or they have the rheumatism, erysipelas, or the piles; if in these habits the menses cease very suddenly, they are either exposed to the complaints above mentioned, more frequently, and to a more violent degree, or to repeated and excessive floodings. A little attention to these circumstances will often point out the means of effectual prevention. But if it does happen, it seems much more prudent to restrain the flux by gentle laxatives, cooling medicines, rest, anodynes, a most sparing diet, and this not too liquid, than by very copious bleeding, and astringents of any kind.

There

There is another kind of habit to which such immoderate discharges are too familiar. To persons of very irritable constitutions, and at the same time not remarkably plethoric. If in such constitutions the menses go off very suddenly, it happens sometimes that the impetus of the blood on the uterine system produces a violent hemorrhage that enfeebles extremely at the time, and as it increases the irritability of that part of the system in particular, subjects the patient to very frequent and expensive relapses.

In these cases, bleeding would undoubtedly increase the disease. Medicines that allay irritation, anodynes, quiet, a moderate cordial, as wine, and a light nutritive diet, at once take off the cause, and enable the patient to support the expence with the less difficulty.

It has happened that a regular intermittent has been attended with a regular and immoderate flux. In seasons when autumnal intermittents are frequent, such circumstances will now and then happen to patients who have suffered considerable loss
about

about the time of cessation. In such cases, the bark given, with the same freedom as in curing the ague, safely cures both the flux and the intermittent.

Sometimes these immoderate fluxes proceed from some irritating cause resident in the uterus or the parts contiguous to it. And amongst these none is more common than that deposition of acrimony which precedes a cancer of the parts.

In such cases the most apposite remedies are often ineffectual. The flux is attended with pain and heat darting across the pubes, from hip to hip, and down to the middle of the thigh. Large clots of blood are frequently discharged, that give exquisite pain in passing, and at the same time the flux is increased by the stimulus.

It is not uncommon in such cases to see the bark administered very freely, and I am afraid to no good purpose. Indeed it requires the hand of a master to give this medicine properly in uterine discharges. In cases of plenitude it is injurious; it seems to be so likewise in this case just described. In such as proceed from mere debility

bility and relaxation, it may stand a much better chance of being useful ; but it is to be feared, that incipient, schirrous, and other obstructions have been much aggravated by the injudicious exhibition to restrain a discharge which depended on causes not in the power of this great medicine to subdue.

To enter into all the particulars that attend this event will be unnecessary. Permit me, however, to make some remarks upon the kind of purgatives that are much in use upon these occasions, and to some of which there are very just objections.

An opinion generally prevails among the sex, that purgatives are particularly necessary at this juncture ; and is assented to by the generality of practitioners, who, had they made a proper choice, would have acted more prudently. Various preparations of aloes, the *tinctura sacra*, *pil ruffi*, *elixir proprietatis*, and other compositions of this kind are recommended, from one to another, as proper purgatives to be used on the cessation of the menses.

But

But if we reflect a little upon the known effects of this drug, in all its preparations, we shall find it almost uniformly producing the piles, if taken long together, and in considerable doses.

From its effect in stimulating the hemorrhoidal veins and contiguous parts, it has long been adopted as the basis of most medicines exhibited with a view to promote the menstrual discharge in young females, where it does not appear at the usual time, or in a proper quantity, and often with success. It can scarcely then be rational to give that medicine, which is found to be efficacious from its power of irritating the hemorrhoidal and contiguous vessels, and determining the blood with a due degree of force on the uterus, to produce the menses, at a time when we are endeavouring to abate this impetus, rather than increase it: in short, it seems highly absurd to make use of those medicines when the menses are about to cease, and ought so to do, which are given to provoke and promote this evacuation. Instead, therefore, of countenancing

5

tenancing a practice which is not only unreasonable in theory, but injurious in practice, every convenient opportunity ought to be embraced, to expose and correct a popular error, than which perhaps there are few in the circle of medicine that are more mischievous.

Repeated instances have occurred to me, of grievous inconveniences arising from these heating medicines; the piles, stranguery, immoderate discharges of the menses, racking pains in the loins, representing labour-pains, and other similar complaints.

There are many persons, it is true, who cannot easily bear the more cooling purgatives; very tender, delicate habits are mostly affected by them: but it is not difficult to contrive cathartics, neither heating like the aloes, and other gummy, resinous medicines, nor yet chilling as the salts. Rhubarb, senna, magnesia, sulphur medicines, small doses of jalap, and various combinations of them, will supply sufficient variety to the prescriber and the patient.

It

It will be of more efficacy in curing of complaints arising from the causes we are treating of, to contrive some easy method of preventing costiveness, than to be dealing often and freely with purgatives of any kind. It happens in some constitutions, that the menstrual discharge is protracted much beyond the usual period of its cessation in others. Whilst it proceeds regularly, comes at the proper time, and in due quantity, the patient in the mean time perceiving no inconvenience, no perceptions of declining health, suffers it to keep its course, without attempting to restrain it. Should the health in general suffer by it, the same means that succeed in lessening immoderate discharges, may properly be applied in this case.

When the menses are about to go off, for the most part they appear irregularly, both in time and quantity; once in a fortnight, three, five, or six weeks, sometimes very sparingly, at other times in immoderate quantities.

Great losses of this kind are often prevented by taking away four or five ounces of blood, a few days after the first menstrual

strual suppression. This prevents the accumulated blood from rushing with force upon the uterine vessels at the ensuing period, and producing pain or a too copious hemorrhage. By degrees the occasion for such artificial evacuation diminishes, and the patient's health becomes firmly established.

An opinion in favour of issues at this period of life has occupied the minds of many patients ; some with the hopes of preventing all future evils capable of proceeding from this cause ; others with the terror of carrying about with them for life a drain which they think of with extreme disgust. Perhaps the use of these outlets deserve some consideration. When a patient has in early life been subject to cutaneous eruptions, sore eyes, glandular swellings, or other obvious marks of morbid humour subsisting in the constitution, and all which may have disappeared about the time the menses became regular, if no invincible opposition is made to it, a drain is now certainly advisable, and may prevent many inconveniencies.

VOL. V.

N

Should

Should any cutaneous foulnesses, any ulcerations, any fugitive pains of the cancerous or rheumatic kind, hardnesses in the breast, or other parts, be evident, all such complaints would probably be in part relieved by issues. But when none of these circumstances appear, or have appeared, it seems scarce reasonable either to propose or permit a certain inconveniency, to call it by no harsher a term, in order to cure a disease that has no existence.

It is necessary to enjoin, in many cases, a most strict attention to diet and exercise, to the full and plethorick especially. Meat suppers should be avoided as much as possible, and likewise much animal food, by those who are liable to immoderate evacuations. If they could subsist two or three days in a week on pudding, vegetables, and things prepared from them, such a method would contribute greatly to prevent not only these copious discharges, but various accidents that arise from plenitude, such as palsies, apoplexies, fevers, and inflammations. Their liquors should be regulated likewise by a similar scale.

I

They

They should avoid all heating exercise, frequenting large assemblies or hot close rooms, near the approach of the usual period. In the intervals, exercise will be extremely necessary.

It will not be altogether foreign to this subject, to mention two cases which now and then occur in practice, and sometimes cost both the patient and physician some perplexity.

A woman enjoying very good health, sometimes is seized with a total suppression of the menses, much sooner than they ought to disappear, perhaps soon after thirty years of age. A fever, surprise, anxiety, sudden and violent cold, especially if it happens at the time, will put a total stop to the discharge.

For many months, sometimes a year or two, she feels very little effect upon her health by this suppression, perhaps grows plump, and seems disposed to corpulency; by degrees, however, she perceives herself not to be so well as usual; she is liable to colds, inflammations of the tonsils, erysipelatous eruptions, rheumatisms, but most

commonly severe affections of the bowels, either inflammatory, bilious, or spasmodic; one or other of these return frequently, and often violently, in six weeks, two months, or longer, but at no very regular periods; and in this manner continue to harass the constitution (if the person survives the severe attacks of the colic or other disorders incident to this state) till about the time when the menses should cease spontaneously.

An attention to the cause of these disorders supplies us with a natural and efficacious remedy. Substitute at convenient distances artificial evacuations, instead of the natural one that is suppressed, and, if possible, previous to the disorders to which the suppression has given rise; bleeding in small quantities two or three times a year; moderate purgatives frequently exhibited, and, particularly, attention to their diet, which ought to be moderate and mild. At the first sensations of sickness, or great heat and restlessness, or pains beginning to affect the stomach or bowels, or any of those symptoms which have usually been the fore-

forerunners of the disorders above mentioned, then is the season for preventing those difficulties which arise from this preternatural suppression.

Another case likewise sometimes occurs in practice, which it may not perhaps be improper to mention.

Women of an apparently healthy, sanguine constitution, disposed to corpulency, using little exercise, accustomed to live plentifully, perceive a sudden suppression of the menses, at a time of life when there is reason to expect many years continuance; from thirty-five years of age and upwards; in a little time they grow full, the belly seems to swell, with tensive pains, pain in the breast, some enlargement of them likewise, some little sickness in the mornings, dislike to particular foods, and other symptoms similar to those of pregnancy; and married women are so fully satisfied of it, as to believe themselves in this situation, and that they actually perceive the motions of the child.

This circumstance happens most commonly to those women who have been

N 3

married

married rather late in life, viz. between thirty and forty. Their inexperience leads them to take up with the opinions of those about them, and they are sometimes not undeceived till the time of gestation is much exceeded.

Women also who have been long married and had children, several years after the menses stop, suddenly they grow bigger, suspect pregnancy, and treat themselves accordingly; abstaining from exercise, eat what their appetites, often craving and depraved, require, till they have exceeded their reckoning, so long as to be sure they have been mistaken.

The like complaint happens now and then likewise to single women about the age of forty, or near the time when this evacuation ought to stop. The belly grows large, they become unweildy, their legs swell, and the apprehension of a dropfy brings on a variety of complaints. The hemorrhoids are commonly the attendants of all these subjects. Sometimes one may trace out some probable causes from which this preternatural state may probably be derived,

derived, but not always clearly. The proper treatment is, however, not difficult to discover. The general turgescence, though it proceeds primarily from a retention of the menses, does not appear to be confined to the uterine vessels alone; all the venous system of the lower belly is affected; the lymphatics also, in consequence of the general oppression. The legs often swell, the piles are almost always troublesome; the patients are generally costive, the urine in small quantities and often discharged, and all the thinner secretions diminished. Yet the countenance and appearance of the whole habit denote a general plenitude, but very different from the bloated body of an hydropic. Repeated bleeding in small quantities always gives relief. Sulphur and magnesia, or other easy laxatives given constantly, prevent the piles, and keep the belly gently open. Regular exercise on horseback, or in a carriage, is quite necessary to effect a cure, which is for the most part slow and tedious, but in general certain. Purgatives approaching to the drastic kind are often injurious, and so are copious evacuations

184 *Medical Observations and Inquiries,*

by bleeding, though small ones are essentially necessary. Their diet should be light, but not too liquid. By means like these the general fullness gradually subsides; they seldom have any return of the menses, except now and then some slight intimations.

Permit me to mention another case, which, though it does not absolutely relate to the present subject, is not quite foreign to it. Nothing, perhaps, is more excruciating to the patients, nor in common more difficult to cure, than painful menstruation; it impairs their health at present, and seems to render them less prolific in future; To the sufferers it is a most serious evil. By the following short process I have been happy enough to relieve several: Let the patient have by her a few pills, consisting of *extr. theb. gr. j.* each, made soft with a little of any kind of conserve. She is to take one of these pills the moment she finds the pain attending this discharge coming on. A pill may be taken every hour till the pain goes off; they seldom require more than two of these pills; one is often sufficient,

ficient, if given early; and it ought to be a constant rule observed in administering anodynes, to give them, when they are plainly indicated, early. It requires much less of an opiate to obviate pain than to quiet it when acute.

Let the patient keep either in or upon the bed, at least in a recumbent posture; let her drink moderately of any diluting liquor, any of the herb teas, weak whey, thin broth, or what else her constitution may particularly require.

When the time is past, a course of chalybeate bitters, in small doses, may be continued till within a few days of the return; and the belly should be kept open by some proper laxative; two or three grains of *cathart. extract.* with half the quantity of *calx antimonii illota*, taken every night, will often succeed perfectly well. The anodyne must still be in readiness to take when the pain comes on, and to be taken to such a quantity as to mitigate the pain, let the dose be what it may.

This excruciating pain seems to be spasmodic, and to proceed from the extreme
↓ irritability

irritability of the uterine system : The blood naturally determined hither, in order to its being discharged, by distending the very irritable vessels, occasions the spasm ; this produces a constriction of the vessels ; they become impervious, and the misus to the discharge continuing, the pain becomes exquisite and general, till the patient, worn out with the struggle, is debilitated and sunk ; the fluids are then dismissed, some ease succeeds, but the patient is often so reduced as not to recover her usual strength before she has another conflict to undergo.

The *fluor albus* is frequently the consequence of this struggle, and it would seem as if the *uterus* itself was so far a sufferer as to be rendered by degrees less fit for fecundation. I think it has been observed by other physicians, as well as myself, that few of those who have suffered much in the manner here described, have borne children.