

## THE EFFECTS OF THE WATERS OF EMS IN DISEASES OF WOMEN.

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THE well-known alkaline, muriatic, gaseous, thermal waters of Ems have for many centuries past been resorted to by a great number of women suffering from diseases peculiar to their sex; and every year the number of such is increasing who gratefully remember the benefit received from a course of waters. The action of the waters is the result of the collective effects of the alkaline and saline remedies, as well as of carbonic acid. The high temperature also forms a noticeable feature. Pointing out the effects, I may say that these waters remove congestion, reduce the products of inflammation, diminish the increased secretion of the mucous membrane, and soothe nervous excitability. This being said, I will enumerate in few lines the diseases of women in which these waters can be recommended.

*Amenorrhœa.*—I must exclude from the treatment with Ems waters all cases in which this malady is caused by anæmia or congenital malformation; and I have only been successful in cases in which the non-appearance, irregularity, or suppression of the menstrual flux was caused by abdominal plethora, internal congestion, sexual excess, or by mental shock and exposure to damp and cold.

*Menorrhagia.*—When the catamenia are abnormally increased or prolonged through the existence of granular degeneration of the kidneys and albuminuria, or by abdominal plethora, uterine and ovarian congestion and irritation, or by imperfect involution after delivery, the Ems waters have proved to be of excellent service; but when the cause of over-abundant or over-frequent menstrual flux is found in general debility, organic disease, hæmorrhagic diathesis, or in the presence of tumours, I must abstain from their recommendation.

*Dysmenorrhœa.*—Not a small number of the different forms of this affection—as congestive, neuralgic, membranous, gouty, and rheumatic—have been benefited at this place;

also the regular appearance of uterine pain, during the intermenstrual period, I have successfully treated in several cases.

*Vaginismus.*—The vulva is the seat of this pain, which often makes married life a misery. The bladder is not unfrequently very irritable, and pain in the back (coccygodynia) is complained of. Soothing baths and warm internal douches have done much benefit in some cases; while in others I have inserted a glass speculum during the bath, which not only permitted the gentle access of mineral water, but also acted as a kind of dilator. Unmarried ladies suffering from this complaint, particularly from a very irritable bladder, I treat with baths and spinal douches.

*Eczema and Pruritus vulvæ.*—I have had under my care a considerable number of patients with these troublesome affections. Some derived decided benefit, whilst others obtained no relief.

*Vaginitis chronica.*—Our springs reduce the swelling of the lining membrane of the vagina and of the glands imbedded within, and consequently check the discharge and irritation.

*Catarrhus uteri.*—A gelatine or matter-like discharge, frequently very offensive, flows from the os uteri, and is often tinged with blood, which comes from erosions or ulcers of the neck. As the mucous membrane of the womb and its glands are the seat of this discharge, it is easily understood that the Ems waters act beneficially.

*Hypertrophia uteri.*—The Ems waters reduce the enlargement of the womb when it is of a simple character; but they fail to give any improvement in cases in which the enlargement depends upon the presence of tumours, polypi, or cancer. The simple enlargement mostly originates from deficient involution after confinement or miscarriage; it may be total or partial. A further cause is intemperate sexual intercourse, and not unfrequently we see a kind of genuine hypertrophy in women who live in childless marriage. In three cases out of fifteen, where the enlargement of the womb appeared in women who had not had children, conception has followed a repeated course of Ems water.

*Misplacement of womb.*—In misplacements caused by either total or partial enlargement of the womb, or by inflammation of and effusion into the appendages, the resorbent and diuretic properties of our springs have been frequently of service in reducing enlargement and effusion.

*Pelvic abscess.*—After cessation of the acute symptoms of pelvic cellulitis, thickening, swelling, and discharge remain for a long time; and here a repeated course of the waters of this place I can honestly recommend, because they sustain resorption, and diminish the discharge which pours from the fistulous communications between the cavity of the abscess and the bladder, or vagina, or rectum.

*Pelvic hæmatocele.*—I have had two cases sent to me, one by Dr. Oldham, the other by the late Sir James Simpson. In both there was considerable swelling, an irritable bladder, dysmenorrhœa, and the womb nearly horizontally retroverted. In both cases I observed a rapid decrease of these symptoms during the course of waters.

*Sterility.*—Pretty nearly all the diseases of the genital organs of the female sex mentioned above are more or less liable either to prevent conception, or to produce miscarriage and premature confinement; but there are a few more causes of sterility existing which can be altered by a thorough course of Ems waters. In not a small number of young married, but childless women, who look pale, are thin, and have a delicate frame, the womb is imperfectly developed; the examining finger finds a small and hard cervix; the sound shows the womb to be of below the normal size, and slightly anteverted; the menstrual flux is mostly scanty, frequently irregular; and sexual appetite is wanting. Short baths of a moderately cool temperature, a gentle but warm and short uterine douche with Ems waters, followed by a course of iron waters at a chalybeate watering-place, have done much towards the development of the womb and the appearance of sexual desire, as well as to the improvement of general health. Quite differently-looking is another class of also sterile women. These are strong and fat, mostly fair-haired, and have a delicate skin, but they have scanty menstruation, frequently irregular, and without sexual desire; all abdominal organs are very sluggish. The examination detects nothing abnormal. In such cases a very hot strong douche, of at least fifteen minutes, is required to stimulate the sexual organs; while

protracted warm baths, and the internal use of the alkaline Ems with the aperient Püllna waters, acts well against abdominal torpor, and reduces the accumulated fat.

In concluding my little sketch, I beg to describe the case of a lady patient, who was under my care two years ago. She was a healthy-looking lady, of a gouty family, married five years, but never pregnant, and was sent to Ems because she was much troubled with acidity. The urine deposited a good deal of red sand. I tested the uterine secretion, and found this also to be very acid. After a long course of water the acidity of urine had diminished and the red sand had entirely disappeared; the uterine secretion, also, had become alkaline. The lady became pregnant after having left Ems, and has since given birth to a healthy child.

As experiments have proved that spermatozoa die quickly in an acid fluid, while in an alkaline one they continue to live for several days, it would perhaps be indicated to test the uterine secretion of such sterile women in whom the examination can detect no cause for their not conceiving.