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1847

Betts, Sarah

THE
UTILITY

OF THE

“UTERINE SUPPORTER,”

AS INVENTED BY

MRS. JAMES BETTS,

OF PHILADELPHIA,

IN THE CURE OF PROLAPSUS UTERI, &c. &c.

CONTAINED IN VARIOUS TESTIMONIALS OF EMINENT PROFESSORS
AND PRACTITIONERS, OF PHILADELPHIA, NEW YORK,
VIRGINIA, ST. LOUIS, &c, AND IN A LECTURE
BY WILLIAM HARRIS, M. D.,
OF PHILADELPHIA.

ALSO, A LETTER TO A DISTINGUISHED PHYSICIAN OF PHILADELPHIA.

FIFTH EDITION, WITH ADDITIONS.

PHILADELPHIA:

MRS. JAMES BETTS,

North East corner of Eleventh and Walnut streets.

1847.

MRS. JAMES BETTS' UTERINE SUPPORTERS,
N. E. corner of Eleventh and Walnut Sts., Philadelphia,
ORIGINAL INVENTOR AND SOLE PROPRIETOR.

To Physicians, Ladies and Druggists.

MRS. BETT'S most respectfully communicates the continued success, and increasing demand for her Uterine Supporters; they are now very generally adopted by Physicians as the most successful medium of relief for the distressing malady for which they were invented, of any offered to the public.

The evil results attending the use of Pessaries, are obviated by the application of her Supporter, and the patient is enabled, in a short period, to resume her domestic concerns and duties; and the long confinement to the Sick Chamber, with all its attendant distressing consequences, rendered unnecessary.

20,000 Ladies are now using them with the greatest ease, comfort and advantage.

CAUTION.

PLEASE OBSERVE—That unprincipled counterfeiters are putting off various wretched imitations of her invention, as the genuine Supporter of Mrs. Betts, and imposing on unwary purchasers a spurious article. It is also sometimes attempted to foist them off with the addition of the name of an eminent Professor of Philadelphia, the better to deceive the Profession and the public. Be sure to see that her Signature and Residence are attached to each Supporter.

Mrs. B. refers with pleasure to eminent Medical Professors of all the schools in Philadelphia, and to celebrated Professors and Physicians in other cities of the United States.

Mrs. Betts offers the following.

The fine Supporter for Ladies, adapted to the various dimensions of Patient, \$8 00

An entire new Supporter for SUMMER use, for Ladies requiring the use of a very cool, light and transparent article; weight only from 2 oz. to 3 oz., and possessing all the important requisites, \$7 00

A very strong and durable Supporter with all the latest improvements in its arrangement, (for poor patients.) \$5 00

The above are subject to a very liberal discount to sell again, when three or more are taken.

Authorized Agents.

Philadelphia, G. W. Carpenter, & Co.	Columbia, S. C., Toland & Curtis.
" E. & C. Yarnall & Co.	Winnboro, S. C., Dr. J. N. Smith.
" C. Ellis & Co.	Mobile, Haviland, Blair & Co.
" Frederick Brown.	Natchez, McPheeters & Co.
" Cuthbert & Wetherill.	Memphis, Tenn., J. C. Macintosh.
" Maris & Co.	Nashville, Tenn., Dr. J. H. Ewen.
" C. Schaffer.	Milton, N. C., Dr. J. R. Callum.
" T. W. Dyott & Sons.	Alexandria, Va., W. Stabler & Brother
" F. Klett & Co.	Charlestown Va., Dr. Straith.
New York, Haviland, Keese & Co.	Albany, N. Y., F. Phelps.
" J. Milhau, 183 Broadway.	Ripley, Miss., Dr. J. B. Ellis.
Baltimore, Mackenzie & Co.	Galena, Ill., Dr. Johnson.
N. Orleans, G. N. Morison, Magazin st.	Washington, D. C., McClay & Cle-
St. Louis, McCloud & Wheaton.	ments.
Pittsburgh, Dr. Thorn, Market st.	Boston, Mass., William Brown.
Cincinnati, J. & C. Reakirt.	Springfield, Mass., Dr. Wm. W. Bliss,
Lexington, Ky., Dr. J. S. Wilson & Co.	Troy, N. Y., G. W. Bull, River st.
Charleston, S. C., Drs. P. M. Cohen & Co.	Havre de Grace, Md., A. W. Davis.
E. Fenderich, Pittsburg.	J. A. Perry, Druggist, Manchester, N. H.
Dr. Wm. S. Meiere, Salmonville, Ga.	J. V. McKinney, Fayetteville, Tenn.

To procure a Supporter.

Take the measure round the body at the top of the hip bones, and send the number of inches, and it can be forwarded by mail or rail road.

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PART I.

Caution to Purchasers of the Uterine Supporter.

Mrs. Betts respectfully cautions medical gentlemen and ladies against imposition by the substitution of various counterfeits; they can be detected immediately by observing that the genuine uterine supporter has her name in her own hand writing, affixed to each in a circle of letter press. Counterfeits are offered in various parts of the United States—and ladies are peculiarly liable to imposition. Very frequently ladies call and show her the paltry and deleterious substitute which they have purchased for her supporter. Those reputable establishments whose names are contained in her publications can be depended on, and Mrs. B. respectfully suggests that her friends should obtain the supporter through either of those mediums, or direct from her establishment, Eleventh and Walnut Sts., Philadelphia, Penn.

A variety of persons, male and female, are making up a wretched imitation; they are destitute of all the most essential requirements of an uterine supporter, and are doing an immense injury to females—such persons being altogether destitute of the necessary anatomical knowledge of the human body.

Many of *those sapient* individuals, have made the uterine support to take place just below the waist—and have suspended it by straps over the shoulders. I have found many ladies wearing them hind part before, and it is a very common occurrence to find it upside down.

It is to be regretted that ladies do not see their own true interests; and by getting an instrument that will either cure or effectually relieve, and the cost of which will be but a small charge over the price of the counterfeit, will be the cheapest policy in the end.

A corset maker at the upper part of Broadway, N. Y., has made a poor attempt at counterfeiting my uterine supporter; it is imperfect, and wretchedly put up. She offers it “as the best thing out.” It is certainly one of the worst I ever met with: six dollars!!! is wanted for it—it is not worth six cents! A man is travelling through the West offering a counterfeit of my supporter, to which he appends the name of a valued Professor of Philadelphia. Many persons have suffered by his imposition; his name and description will shortly be published through the United States as a caution. If those *impostors* would bring out a supporter of their own invention, I would with pleasure welcome them to a fair and honorable competition, but while they mutilate, imitate, cut up, and destroy my inventions, and put them off on the public as mine and sometimes as those of an eminent Professor, common justice to myself, ladies and physicians, call for an exposure of their unprincipled conduct. If they understand what they are about, let them *invent something new!!!*

☞ Please to take the measure at the top of the hip bone, round the body, and send the number of inches.

TO LADIES SUFFERING.

The Supporter was originally invented by myself when laying on a bed of affliction, from a similar complaint to that which it is so successful in curing.

Having had a great number of patients sent by Medical gentlemen to be provided with the “Supporters,” opportunities of forming inferences and conclusions from a vast variety of cases, have presented themselves, from all parts of the United States, in addition to many who have been recommended by private friends.

I have heard from many hundred ladies, an account of their sufferings, including cause, stages, treatment, &c.—their various mental, as well as bodily afflictions, arising not only from the organic displacement itself, but yet more from the placing, replacing, removing, &c., the various pessaries ordered from time to time, prior to my Supporter having been obtained. It is indeed to be

deeply regretted that the pessary is yet tenaciously persevered with, in spite of its repeated and continued failure.

It is with much sorrow I have witnessed the great amount of misery among the fairest portion of created beings, from the extensive prevalence of this weakness, which is much beyond any calculation I had ever formed, previous to my knowledge of the fact, and it is a cause of much heart-felt pleasure to me, independent of all other considerations, that an apparatus has at length been discovered, which so fully meets the object in view, viz. : its removal or great mitigation.

Candour compels me to announce as my conclusion, resulting from the above named extensive experience, that, to the ill-judged (however well meant) use of the Pessary may be ascribed the diseased state of the uterus, as well as leucorrhœa, irritation, &c. Independent of the pain, inconvenience, &c., attending the wearing of the Pessary, there is a feeling extremely hostile in a delicate female mind, to the introduction by a medical attendant, of that invention, which difficulty is entirely obviated by wearing the Supporter.

The friends of the Pessary have never yet discovered any form or modification of it that has proved satisfactory, either to the patient or even to themselves, else why the continual change of shape and material? and I always found that cases were attended with much more difficulty where the Pessary had been introduced than otherwise.

Can any thing be gained by wearing of the *Pessary*, which cannot be accomplished by the *Supporter*—supposing feelings of female delicacy can be overcome? My experience prompts me, conscientiously, to reply in the negative.

But if asked, whether any thing can be gained by wearing the *Supporter*, which could not equally be obtained by the *Pessary*? My answer is emphatically, *much*—and I will point proudly to the hundreds of grateful females who are continually calling on me, with the most ardent expressions of acknowledgment, after enduring the greatest mental and bodily prostration and anguish from the opposite treatment; many once single young ladies, now happy mothers, many married ladies, with increased families.

Positive danger attends the wearing of Pessaries.—This was my conviction from long experience, the result of careful observation. It has been fearfully demonstrated to me in many cases, that have come under my notice in nearly ten thousand instances, which I have personally seen. I would wish to be understood, as not only confirming the facts as mentioned by Doctors Blundell, Moreau, Professor Jackson, and Dr. Harris, in every particular, but also to mention important and lamentable facts in addition thereto, viz. :—those of nervous debility—brought on by the nature of the treatment pursued; the suffering of the patient—and almost hopelessness of a final restoration to health. My own experience in this matter, will, no doubt, be confirmed by many Medical gentlemen in Philadelphia, &c.

The symptoms of *Prolapsus Uteri*, are also fully explained by extracts from Professor Samuel Jackson's and Dr. Wm. Harris' Clinical Lectures delivered in Philadelphia.

This complaint I have frequently found has been the medium of extraordinary treatment to young and interesting, as well as ladies in a more advanced period of life, single, as well as married. Omitting what is in my opinion unfit to appear in print—I will merely mention the using of Caustic every day, for *alleged* ulceration—the confinement to bed for long periods, even months, and finally the use of the Pessary. Then the announcement of a perfect cure, But this cure amounted to this, that the sufferer was really worse than ever! and was finally obliged to have recourse to Medical gentlemen of conscience and of principle; who, by the application of my invention, have restored the patient (so far as a shattered and debilitated constitution was susceptible of restoration) to comfort. Many Ladies have had their sufferings prolonged by

this and other modes of treatment, for years—some seven years, some even ten years, and many, very many are yet suffering, who could be soon relieved by the Supporter.

Ladies very frequently call on me, and inform me of their long suffering, and of their prostrated general health. They say “Our Medical advisers do not understand our weakness, or the cause of our sufferings.” I correct them—I say, “Madam, they understand your malady, but you have unfortunately happened to fall under the care of a Physician who has his prejudices enlisted in favor of the old method of treating this complaint, viz.—by the Pessary, and it is therefore not surprising that you should have that opinion, as you judge from your own feelings and from what you have unhappily suffered.”

Many Ladies of Philadelphia call on me, after paying visits to distant places, viz.: Washington, Virginia, Baltimore, New York, Pittsburgh, Saratoga, Boston, &c. &c. and say, “I am surprised at having been recommended your Supporter by Ladies and Medical gentlemen when at a distance from home! I have been suffering for years in Philadelphia, and could never obtain any relief—why did not my Physician advise it?” Thus the Physician loses the confidence of the family.

In such cases I have mostly spoken in extenuation of the Medical attendant, and have endeavoured to account for its not having been ordered in various ways. Sometimes I have even advised Ladies to mention the Supporter to the Physician, and call again on me. The result has been that I have frequently never seen the Lady again; and she continues a sufferer even to the present time. Sometimes I have to complain of a want of candour. Ladies have been fitted by me, and the change for the better has been almost immediate; the substitution of my Supporter for the Pessary, making an astonishing improvement in the general health, and being visible to every one; but yet they do not acknowledge the source, not even to the Physician, and he is kept in error, and is encouraged to proceed in his old mode of treatment, to the manifest injury of those under him.

A Lady called on me very recently, to introduce a friend:—she said, “I have found your Supporter of the greatest advantage to me. I have now worn it upwards of two years, and have two fine living healthy children. I was never before able to go my time, and had had nine abortions, and began to despair of ever recovering my strength.”

Some few Medical Practitioners, place particular stress on the ulcerated state of the Uterus, but I appeal to the experience and judgment of the Faculty in general in this instance, with full confidence. My position is, that ulceration of the Uterus is of rare occurrence; in my own experience, I rarely meet with it. I have seen at least fifty ladies who have been under the care of a gentleman of large practice, and they all have said, “we have been treated for ulceration of the womb; for polypus of the womb;—we have had lunar caustic applied almost daily—and what we have gone through, we shudder to repeat, and now our cases have become aggravated by long confinement and general debility.” Ladies may rest assured that the ulcerated state of the womb is not prevalent; it exists only, as one to two hundred, or thereabouts. The majority of cases which I meet with, are those of simple displacement, caused by relaxation of the system and, by the pressure of the *viscera* on the womb—my Supporter will benefit all such cases.

Counterfeits of my Uterine Supporter, are offered by a notorious firm in this city, and much injury has been done by them; two cases this week, one lady of Baltimore, who had her sufferings aggravated by its application—and finally called on me personally, when I discovered the imposition. Men who have not ability sufficient to procure an honest subsistence, by their own industry, but must pirate upon the discoveries of others, should be treated with universal indignation. Besides, life itself is endangered by their spurious imitations, and the trifling saving is a mere deceit, and who in their senses would pur-

chase a counterfeit? Please observe, my Supporters are all marked with my own hand writing—all others are impositions.

Prolapsus uteri, is often occasioned by the fashionable system of tight lacing, and the wearing of the French corsets, with a view to procure an unnaturally small and tapering waist. I cannot too seriously caution young and married ladies against this fashionable folly, It is too often also occasioned by using the erect posture too soon after an accouchement, and various other causes, without due regard to future health; I think no lady should leave her room in less than a month, which is the time poor women are allowed in even the poor houses in Great Britain.

The method of taking the dimensions, is to measure the lady round the body on the top or little below the hip bone, and the number of inches will be the correct size.

My earnest advice is to consult an eminent physician on the first appearance of this weakness.

My Supporter could never have attained its present position of usefulness and popularity, but for the kind and disinterested patronage (in the first instance) of Professor SAMUEL JACKSON, of the University of Pennsylvania, and subsequently by many eminent professional gentlemen, whose disinterested patronage I am equally proud to acknowledge.

It is a pleasing task to me to take a retrospective view of the progress of my Uterine Supporter, from its beginning to the present time. It had the combined force of prejudices, and, I may say, of the passions of some persons arrayed against it; but now, after a few years of peaceful struggling—after pursuing the even tenor of its way, disregarding minor opposition, it has been enabled to take the very first rank amongst the instruments of its class, and can be proudly pointed to as the very best of all. I mean by this that it is more successful than any other in use; and that it is adapted to an infinitely greater number of cases than any other.

Thus eminent Professors of the schools, in this city, have had the pleasure of seeing this instrument, fostered as it was almost exclusively by *one* or *two* of that enlightened body, (in its early day,) *now* connected with professional practice, from one extremity of the United States to the other; certainly from Maine to Louisiana, and from Pennsylvania to the Far West, to which may be added Canada.

As to those who would sell a counterfeit of my invention, thus adding to the sufferings of ladies for the sole object of money making, they are entirely too low for notice. Ladies and Medical Gentlemen, of course, would not soil their hands with any thing so base, but, for the sake of those who are liable to imposition, I would merely repeat my caution, to observe that each genuine instrument has my name and residence, (to counterfeit which is felony) and those not having it may be recognized as *spurious*.

At this moment in Philadelphia, its native city, its popularity is very great, and its celebrity is commensurate with its success. It has had more extensive notice from the very eminent Medical Professors and Lecturers in the different Medical Colleges, than at any preceding period, in their lectures delivered before most numerous classes of enlightened young men from all parts of the United States of America.

A medical practitioner asked me a short time since, whether I did not think it high time the profession had adopted a better method of treating this weakness, than by the old method. I replied, certainly, sir; after having used the wretched invention of Hipocrates for about TWO THOUSAND YEARS, I think the time has certainly arrived, when the march of intellect ought to be tried in favor of a better medium of relief, for ladies suffering from this weakness!!!

I am, with much respect,
N. E. corner of Eleventh and Walnut Streets.
Philadelphia, March 4th, 1846.

SARAH BETTS.

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Extract from Dr. Wm. Harris' Clinical Lecture upon Prolapsus Uteri

"Symptoms of Prolapsus.—When in the erect position, the patient complains of an aching in the back, or a dragging sensation about the loins; a sense of weight about the lower part of the vagina, as if something were falling through—irritation of the bladder, and a frequent desire to make water; a bearing-down sensation; pains in the hips and thighs, and often a fulness and sense of weight about the anus, and if much standing or long walks aggravate all these symptoms, and a few hours in the recumbent posture either mitigate or cause them to subside, she has good reason to suspect she is afflicted with Prolapsus Uteri."

ON THE BAD EFFECTS AND DANGERS OF PESSARIES.

Extract from page 13. of a Work on Obstetric Medicine, by JAMES BLUNDELL, M. D.—late Professor of Obstetric Medicine, at Guy's Hospital, London.

"The following, (says Dr. Blundell,) are some of the most important, viz: obstruction of the bladder; obstruction of the rectum; bruises; inflammation; ulceration; thickenings; insomuch that the very walking of the patient becomes painful to her. Sometimes the rectum has been laid open by ulceration into the *Vagina*. I once saw a case in which a very large Pessary had been introduced, and the rectum opened in consequence; the woman died—(I had almost said happily) and thus became relieved of her misery."

An Extract from DR. WM. HARRIS' Clinical Lecture published in the 2d Vol. of the Medical Examiner, page 326, Philadelphia.

"The Pessary produces irritation of the *vagina* and *leucorrhœa*; irritation of the mouth and neck of the womb, and sometimes causes a schirrous or cancerous condition of that organ. It also affects the rectum, producing constipation, stricture or hæmorrhoids.

Extract from 295th page of the "Traite Practique des Accouchemens," by DR. MOREAU, Professor of Midwifery and of the Diseases of Women and Children, at the Faculty of Medicine at Paris, and accoucheur to her Royal Highness, the Duchess of Orleans.

"The learned professor here relates a case of *recto vaginal fistula*; i. e. an opening between the vagina and rectum, caused by wearing a Pessary; in this case the *fæces* passed out of the vagina. Another case, in which the Pessary produced ulceration, fungous excrescences, and hæmorrhage. Another case, in which the Pessary had caused, by ulceration, an opening both into the bladder and the rectum. A fourth case, in which the Pessary had, by ulceration worked its way into the rectum."

Dr. Moreau has abandoned the use of the Pessary and introduced the Supporter into his Hospital and private practice.

"A large number of cases of either simple inflammation of the Cervix, or engorgement of the uterus, which result in ulceration, or hypertrophy, arise from neglect, and too often from the irritation produced by the improper use of Pessaries and other means for the cure of simple prolapse, proceeding from relaxation of the Uterine supports."—*Review of Bennett's "Treatise on Inflammation &c. of the Uterus."* Page 101 *Medical Examiner, Philadelphia 1847.*

Extracts from the Medical Examiner, Editorial, of February 24th, 1844. By Professor Huston, of Jefferson Medical College.

A subscriber has sent us for insertion in the Examiner, a translation of some remarks on the evils resulting from the use of pessaries contained in the work on midwifery, by Prof. Moreau. We have not space for the paper at present—nor do we deem its publication necessary; inasmuch, as the substance of it may be found in Churchill and several other modern authors in the English

language ;—and besides, it is not denied by any respectable physician of the present day, that much mischief may, and occasionally does result from the use of that instrument. The question, however, is not whether the *improper* use of the instrument may be productive of injury, but whether it may not be dispensed with altogether, at least in a majority of the cases in which it is employed by respectable practitioners. Nearly twenty years have elapsed since we have adopted the affirmative side of this question, and time and observation have only strengthened our conviction, that the cases to which it is *properly adapted* are EXCEEDINGLY RARE.

“Except when the prolapse of the uterus is so great that the organ falls without the *sphincter vagina*, or, where there is recto, or vesico-vaginal hernia, we can hardly conceive of a condition of the parts requiring the use of this mechanical means—a means most offensive to the *moral feelings* of the female, and at variance with cleanliness and personal comfort.”

The following are the objections to the use of the pessary by Dr. Hamilton, long the distinguished Professor of Midwifery, in the University of Edinburg ; they are sufficiently intelligible without note or comment.

Firstly.—They can only act as palliatives, whatever may be the degree of the disease.

Secondly.—They necessarily keep up a continual irritation in the passage, and of course excite a mucous discharge in the vagina.

Thirdly.—Unless properly adapted they make injurious pressure on the contents of the pelvis.

Fourthly.—If not frequently taken out and cleaned, they become encrusted with a calcareous matter, which proves highly irritating. ¶

Fifthly.—They subject the patient to the charge of a *medical attendant for se!*

And lastly.—Cases from time to time occur, where from the laceration of the perineum, &c., no ordinary pessary can be retained !

Extracts from Prof. Moreau's work on Midwifery, page 294—French Edition.

“Yet spite of all precautions it sometimes happens, that the pessary contracts a disagreeable odour, that it is covered with incrustations, composed of condensed mucous, and of a peculiar kind of calcareous deposit.

“Rousset has reported the case of a female, whom he considered affected with inflammation of the bladder, or of the womb, who was cured by the expulsion of some pieces of putrified cork, the remains of a pessary which had been worn 18 years!!!

“In 1810 a female came to the Hotel Dieu at Paris to solicit medical assistance. She had received injury from wearing a pessary of box-wood, or cup and ball pessary, which she had worn fifteen years, and from which the stem had been long separated. She had suffered severe pains in the hypogastric region. Dupuytren having made an examination, found the portion of the pessary remaining in the vagina, had worn and perforated the recto-vaginal partitions in such a palpable manner, that a portion of its circle could be clearly seen in the rectum, and another part had penetrated the bladder. It being impossible to withdraw this foreign substance in its entire state from either of the three organs into which it had introduced itself, he had recourse to a pair of nippers (expressly made for the purpose,) which he introduced—thus taking hold of the socket of the pessary and broke it all abroad, removing the fragments, some by the anus and some by the vagina.”

Moreau also mentions a case in the practice of Janin, of a female, who had worn the pessary (*Bilboquet*) of ivory. She neglected it, and thirteen years afterwards he was again consulted and found her entirely prostrated, by the difficulty and pain she suffered in urinating or passing the other evacuations of nature. On examination, he found in the *rectum*, more than half the bed of

the pessary; it had penetrated there after having destroyed a portion of the recto-vaginal partitions.

The ulcerations were enlarged and forced open, so as to permit the pessary to pass from the vagina. During the above time, the excrement had passed by the vagina in large quantities, but afterwards they appeared to take their natural course. It is spoken of as having been a most painful, difficult and distressing case.

*A case in which a glass Pessary broke within the body, while worn by a lady.
Recorded by Dr. W., in the Boston Med. and Surg. Journal.*

“January 14th, 1846. I was called early this morning to visit Miss R. E. The patient is a maiden lady of about forty, and has been troubled for several years with prolapsas uteri, and for a long time has been obliged to wear a pessary. Those used have generally been of the gumelastic kind, which after being worn for two or three months, it was necessary to remove to cleanse, as the secretions, which gather about them, become too irritating to bear. On this account, after attending to the removal and introduction of the instrument several times, I recommended the use of the glass pessary as less irritating, less liable to collect the secretions, and more durable.

On enquiry, I found that the pessary had broken, that while standing at the window, doing nothing; she heard a noise, and that every effort since had caused pain. On examination I found it broken indeed, into a great number of pieces; parts of the periphery were *in situ*, and all the parts were at the upper part of the vagina. I found I had an unenviable task before me—the extraction of these sharp angular and pointed pieces of glass from the vagina. I had some doubt as to the feasibility of the operation, and some apprehension for the result. After two hours and a half of most diligent and most careful manipulations, I succeeded in extracting every vestige of the glass. The number of pieces extracted was fifty, of all shapes and angles.

The inference from the above is very plain, that there is danger attending the use of glass pessaries. In future in my own practice I think I shall not employ them, so long as others can be obtained. W.”

Note to the above by Mrs. Belts.

There are also other inferences which cannot be less appropriately drawn, viz: Whether the whole class of instruments called Pessaries, are not injurious and dangerous, and therefore improper to be employed in cases of Uterine displacements. It is not denied that gum elastic pessaries cause much irritation from the secretions and incrustations, which accumulate around them, and if not frequently removed, and replaced, a corroding of the partitions between the vagina and rectum will certainly take place; causing all the dreadful effects noticed by Moreau, Blundel, Dr. Wm. Harris, Philadelphia; Dr. Churchill, Dr. Hamilton of Edinboro; Prof. Huston, Philadelphia, &c. &c. The same may be said of other pessaries, constructed of box-wood, ivory, cork, or even of the precious metals. There is in fact no security in any one of the above, unless continually subject to the annoyance and indelicacy of frequent removal of the pessary, and its replacement; and ladies are apt to neglect attention to this important matter because of the inconvenience attending doing so. My Supporters have been before the Medical profession about twelve years, and I only regret that Dr. W., and many other Physicians who continue to use the pessaries, had not used my apparatus in cases similar to that here reported, where its good effects would have been immediately apparent, and the feelings of ladies and physicians been spared the trials attending them. It would have been decidedly better for all parties. The worst cases I ever met with are those which have been previously treated by pessaries, and the longer subjected to that treatment the worse the patients become; the *mind as well as the body*, becomes diseased; and this from the long and anxious state of suspense and seclusion to which ladies are subject under that treatment. The loss that fami-

lies suffer while the mother is kept for months in a recumbent position, cannot be appreciated unless by families who have suffered that deprivation. Young ladies too, deprived of exercise and its invigorating effects become listless, apathetic, and finally consumptive. I am fully satisfied that if ladies were properly supported, by a lifting up and supporting of the abdominal viscera, in delicate and relaxed constitutions, that consumption might be stayed, and in many cases, (say thousands) prevented altogether. S. B. April 1847.

PART II.

Testimonials.

From Samuel Jackson, M. D., Professor of the Institute of Medicine, in the University of Pennsylvania.

"Some years past, Mrs. Betts, at my suggestion, made an instrument for giving support to the abdomen and perineum, which I have continued to employ from that time, in my practice, with most decided advantage.

It frequently happens that the tone of the abdominal muscles is lost and they become relaxed. The large and weighty packet of the intestines, losing, in consequence, their support, gravitate on the pelvic viscera, pressing on the uterus, and sometimes deranging its position; the liver and other viscera follow the intestines, sink downwards, and drag on their ligaments. Lesions will result from this condition; there is a most exhausting sense of emptiness and dragging felt in the superior position of the abdomen, and a feeling of weight and pressure in the lower, attended with pain in the back. The patient cannot stand erect, exercise or walk, without inconvenience or suffering. There is often disability for any kind of exertion.

Artificial support of the abdomen remedies more or less effectually this train of disorders and rarely fails to abate the most uncomfortable of the symptoms.

The apparatus of Mrs. Betts is well adapted to accomplish this purpose. I have been enabled to give prompt relief, in many distressing cases, by its application. I have no hesitation in recommending it to the Medical Profession, as an effectual means, in the class of cases to which it is applicable."

Philadelphia, Dec., 13, 1842.

From T. D. Müller, M. D., Professor in Jefferson Medical College.

"Dear Madam—It affords me much pleasure to state that I have repeatedly employed your Supporter in prolapsus uteri, and with the most decided benefit. I have no question of its value, as a remedy for the complaint, for the relief of which it has been invented."

Philadelphia, Dec. 11, 1842.

From Wm. Harris, M. D., Lecturer on Obstetrics, &c., Philadelphia.

"Radical cures have been made repeatedly, after every other means have failed to afford relief.

Ladies affected with procidentia uteri, who were unable to leave their chambers without great suffering, found such immediate relief from the application of the Supporter, that in a few days they were able to pay morning visits on foot.

One of the worst cases I have ever seen, was completely cured in a little more than a year, and some less formidable have been relieved in from three to six months. I recommend this instrument cordially to the medical profession, believing it to be one of the greatest improvements of modern times."

Philadelphia, Feb. 24, 1843.

From Samuel McClelland, M. D., Prof. of Midwifery and diseases of women and children in Pennsylvania Medical College.

"I found Mrs. Betts' Supporter the very best instrument of the kind, I have ever yet met with, in the whole of my professional experience.

I have recommended it, and will continue to do so, as the most successful

of its class, in cases of uterine displacements. Make reference to me as to its merits." Philadelphia, May 5.

From Dr. R. W. Royster, Powhattan Co., Va.

"The success which I have met with during the last twelve months, in the treatment of the most aggravated cases of prolapsus uteri, with Mrs. Betts' uterine Supporter, induces me to give preference to it, over all instruments that have been suggested, for the treatment of that most distressing malady."

"P. S. I do also assure you I have had under treatment during the past twelve months, some of the most aggravated cases, that bade defiance to all the different modes of practice; the use of the different shaped pessaries, which have contributed not a little to render the cases more complicated, by producing irritation of the vagina, os tinæ, and the consequences of pressure on the rectum." Feb. 6, 1843.

Clinique at the College of Phys. and Surgs., New York, April 22, 1842.

"Professor Gilman made some judicious remarks on the treatment of prolapsus uteri. He condemned, in toto, the use of the pessary, and recommended the Supporter introduced by Mrs. Betts. April 22, 1842.

Ballimore, April 11, 1844.

I have carefully examined the application of the "uterine supporter" invented by Mrs. Betts, and find in it every thing to praise and nothing to blame. Ten ladies of this city, who have made use of it at my suggestion, have found it quite comfortable and superior to those made in Paris, or in this country; and it is with pleasure, that I approve of its application in all cases of uterine prolapsus. P. CHATARD, sr., M. D.

Letter from Professor Samuel Jackson of the University of Pa.

"The abdominal and the perineal Supporters made by Mrs. Betts of this city, I can recommend to the medical profession, and to others, after several years experience of their use.

These instruments are adapted to remedy the inconvenience depending on a sinking down of the uterus, and its compression, from the incumbent weight of the abdominal viscera pressing into the pelvis from a relaxation of the abdominal muscles. In this state of the organ, exercise is attended with so much pain and other sufferings as to be difficult or impossible.

Mrs. Betts is a lady of intelligence, education, probity, and excellent manners. The greatest confidence can be placed in her.

SAMUEL JACKSON, M. D.

Professor of the Institute of Medicine in the University of Pa.
Philadelphia, Feb. 26, 1842.

From Drs. Carmichael and Mills, Richmond, Va. To Mrs. Betts.

All accounts which we have received concerning your Supporters, have been most favorable, and in our own practice they have been very successful. Richmond, Va., August 6th, 1844.

To Professor Parker, New York, from Professor T. D. Müller, of the Jefferson Medical College, Philadelphia.

"Mrs. Betts has for some years past been entirely employed in the manufacture of an instrument for prolapsus uteri, which, in my own practice, and that of many of my friends, has been of immense service to the subjects of that severe disease."

From the New York Lancet, April 16, p. 249.

"We have recently had an opportunity of examining the uterine supporter introduced a few years ago by Mrs. Betts, of Philadelphia, and we can very cordially add our favorable opinion of its merits, to the almost unanimous expression of approbation which the invention has received, from our professional

brethren, in the city of brotherly love, where it has been heretofore more extensively introduced into practice than in this place. We have no hesitation in saying, that in a great many cases of prolapsus uteri, this simple apparatus will be found infinitely preferable to the pessary, against the use of which, there is, in the minds of most females, a strong, and often insurmountable prejudice, and which is at best, in our opinion, a very indifferent contrivance. Mrs. Betts' apparatus is perfectly simple, can be applied without the least difficulty, occasions no inconvenience, and certainly effects, to a very great extent, the important purposes of its invention. Mrs. Betts intends making periodical visits to this city, for the purpose of disposing of, and applying her Supporters, and we have great pleasure in recommending our brethren here to avail themselves of her invaluable assistance, in the treatment of a numerous and most interesting class of sufferers."

From a New York paper.

MRS. BETTS' ABDOMINAL SUPPORTER.

Mrs. Betts, of Philadelphia, the celebrated inventress of the Abdominal Supporters, has arrived in this city, and may be seen at the Astor House.

Her invention has received the unanimous approbation of the most distinguished members of the Faculty, and is rapidly acquiring the most extensive reputation amongst the interesting class of sufferers, for the promotion of whose comfort it is intended.

Professors Delafield, Francis, Stevens, Rogers, Parker, Gilman, the editor of the Lancet, and all our most eminent Physicians unite in recommending Mrs. Betts' invention to public approbation. Of course it must succeed.

Certificates from St. Louis, Missouri.

"I take great pleasure in recommending 'Mrs. Betts' Uterine Abdominal Supporter' as quite superior to any other now in use. From its mechanism and mode of action, I am decidedly of the belief that it is an instrument admirably calculated to fulfil the object for which it was invented. I have employed them in my practice, and feel well satisfied as to their practical utility.

ROBERT P. CHASE, M. D."

"I have for several years past used Mrs. Betts' Utero Abdominal Supporter, and have found it most admirably adapted to most cases of the troublesome affection for which it was invented.

S. GRATZ MOSES, M. D."

"For some time past I have used Mrs. Betts' Utero Abdominal Supporter, and from my experience, I can recommend it as the best adapted apparatus for the purpose for which it is intended of which I have any knowledge.

J. W. HALL, M. D."

"I have repeatedly advised the application of Mrs. Betts' Uterine Supporter, and it affords me much pleasure in observing its effects, to offer my testimony to its value, in the complaints for the relief of which it was invented.

R. P. SIMMONS, M. D."

"I cordially coincide with the above testimony of Dr. Simmons.

E. F. MACDONOUGH, M. D."

"I have recommended Mrs. Betts' Abdominal Uterine Supporters, and from the relief afforded, I am prepared to say that they answer the purposes for which they are intended better than any other mechanical means of relief.

H. AUGUSTUS PROUT, M. D."

"I cheerfully subscribe to the above testimony of Dr. Prout.

H. VAN STUDDIFORD, M. D."

Extract of a letter from J. K. Sappington, M. D., Havre de Grace, M. D.

"As to my testimonial of the efficacy of your instrument in the treatment of Prolapsus Uteri, if I could add any to its superior claims in my opinion, over

all other means yet recommended, I would have no hesitation to send it, at any time you may request it; and I may also add, that in the medical treatment of Chronic Diarrhœa, Chronic Dysentery, Prolapsus Ani, and to prevent Ovarian Dropsy, great benefit would be derived from the judicious application of your Supporter.

September 10, 1846.

Ripley, Miss., Nov. 22, 1846.

MY DEAR MADAM—"I have disposed of four out of the six Supporters you sent me, and have no doubt I can do better another year. They have answered the purpose in every case that I have applied them to; I would like you to send me eight more of assorted sizes."

Very respectfully, your obedient servant,

J. B. ELLIS, M. D.

It is hoped that enough has been shown to evince the excellence of the Supporter, and its adaptation to the objects in view; conscious, herself, of its good effects, by its lightness, the ease with which it may be worn, and the renovating effects produced when on, its having raised many ladies almost from the grave, to perfect health, the inventress trusts she will be excused in not adding more on this occasion, from the great mass of testimony in her possession.

Mrs. Betts wishes to communicate the success which has attended its application in severe cases of Chronic Diarrhœa. She will be happy to give reference in this particular.

CIRCULAR.—TO THE MEDICAL PROFESSION, AND TO THE MEDICAL JOURNALS OF THE UNITED STATES.

On Counterfeits of Mrs. Betts' Supporter.

I respectfully ask your attention for one moment. My Uterine Supporter is now standing very high in favor with medical gentlemen and the public, and you have forwarded me various orders for it at different times.

Its extensive reputation has induced a firm in this city, bearing the *cognomen* of Wiegand & Snowden, to disgrace themselves by counterfeiting, and offering it for sale as mine, and this they had the audacity to offer to myself personally, at their own shop, where I happened to call yesterday.

I wish, sir, to caution you against this base counterfeit, as the sufferings of the patients must, and will be increased and prolonged by its use, as it is defective in many of the important requisites of my Supporter, and so worthless is it, that unless the fraud is practised of calling it by my name, it would not sell at all.

Two cases of imposition have this week come to my knowledge, by the arrival of a lady from Baltimore, and who was supplied with the counterfeit; it had some resemblance to mine in mere appearance, but its effect was disastrous—it increased all her bad feelings and added to, instead of diminishing them!! She was supplied by me with the original, and she was much relieved immediately. Another case, was that of a lady who had been supplied with it, and finding its effect bad, had loaned it to a friend, both of whom came to me to explain the circumstance, and thus discovered the fraud. Such is the conduct of these persons, who thus deprive persons of their money, by counterfeiting my inventions, and me of the reputation derived from my Supporter, passing off a dangerous and injurious substitute.

I have also reason to believe that it has been circulated in the city of Wilmington and its vicinity.

That man must be low indeed in the scale of morals, who would stoop so low as to plunder a lady of her property or business—such a man is too degraded and base for the notice of honorable persons, and is worthy only your contempt.

Since the above was written, and which has been very extensively circula-

ted in the way of caution to purchasers, the reputation of my Supporter has much increased; ten thousand ladies have had it applied with the greatest benefit to them, and to the great gratification of the medical gentlemen ordering it. Wiegand & Snowden now sell it as "Doctor Hamilton's Supporter," thus covering the counterfeit with an assumed name, though they artfully put (Betts') in brackets, to let persons know that it is, in point of fact, the same counterfeit they before sold as mine. This thing is a very dangerous imposition; it has been attended with the worst effects. Be sure to see that each instrument has her name, "*Sarah Betts*," and residence, Eleventh and Walnut streets, Philadelphia, attached.

Proofs of the above statement are in my possession.

S. BETTS.

October 22, 1845.

My friends will much oblige me by informing me where a counterfeit is on sale, and transmitting the intelligence by mail; it will be thankfully received.

A LETTER TO
A DISTINGUISHED PHYSICIAN OF PHILADELPHIA.
ON PESSARIES AND THE UTERINE SUPPORTER.

BY MRS. JAMES BETTS, of Philadelphia.

SIR,—On Friday the 22d ult., Dr. ———, (who is a very gentlemanly man) called at my residence for the purpose of asking for the loan of my Uterine Supporter, with the object, as stated, of showing it to the Medical Class. My respect for the members of the profession always induces me to do with pleasure all in my power to assist their views, in the great object of relieving suffering, or to advance their interests. I sent my supporter to Doctor ———'s office, willingly and cheerfully. I afterwards discovered by a Medical Student that it was borrowed for the purpose of enabling you to make various remarks upon it; and through it also upon the numerous and eminent Medical gentlemen, who patronize my Supporter, impressing your class (or endeavoring to do so) with the impossibility of its being an efficient instrument in any hands of its relieving prolapsus uteri. You might have been excused in this if you had ever giving my Supporter a sufficient trial, testing its efficacy or non-efficacy, in the purpose to which it is applied—but as you have never made trial of even ONE, in any solitary instance, you must have drawn largely upon the supposed gullibility of your audience and their credulity, to expatiate upon, and endeavor to destroy the reputation of an instrument of which you have never made a solitary trial. Can your opinion of that Supporter be worth anything; can it be of any weight compared with that of eminent medical practitioners, who have constantly and successfully used it for seven years in their daily practice? Is it not presumptuous in you, to endeavor, (for after all it will amount to only that) to subvert the testimony of gentlemen at the head of the profession, many of them eminent when you were an obscure man, scarcely acquainted with the rudiments of your profession. You have said, Sir, that you suppose the public must decide the question. Sir, the public will decide, but not in favor of the pessary. I know, sir, that this is an effort to put down my Supporter and its adherents, because you know that it is rapidly increasing in public favor, and that the public favor shown to my Supporter goes against the pessary, an instrument which, allow me to tell you, has nearly run its race.

The treatment of Prolapsus Uteri by the pessary is offensive to female delicacy. In my experience I find an invincible repugnance on the part of ladies to its use, and they escape from it at the earliest possible moment. It is, they say, "treatment the most offensive and indecent; it leads to the final abandonment of those sentiments of female delicacy which are the chief ornament of our sex. It is a mode of treatment which we are unable to make our fathers,

husband and brothers acquainted with in all its offensive particulars." The exposure attendant on the treatment, the degradation which a lady of modesty feels after it, the wounded feelings, the depressed mind, her fears of loss of character, of self-esteem, and by possibility of the esteem of others—a danger (near or remote, as it may be) of real demoralization in youth or inexperience, —are some of the moral evils attendant on the use of pessaries, and ought to induce a man of Christian principles, or even of moral habits, to pause in the use of an instrument like the pessary, and to adopt any other, in preference to it, particularly a more successful one: and you will recollect the French adage, "*C'est le premier pas qui coule.*" And humanity will dictate the importance of this view of the subject. Due regard ought to be paid to the various mental, as well as physical sufferings of females, "arising not only from the organic displacement itself, but yet more, from the placing, replacing, removing, &c., the various pessaries ordered from time to time, prior to my Supporter having been obtained." (Vide my address to Ladies, page 1.)

I have been repeatedly urged by ladies to make my Supporter more known to the public. I had always been anxious to keep it exclusively as an adjunct to professional practice, because it was with repugnance that I contemplated treating this affection on my own account. It was for this reason that I have always avoided public advertisements in the ordinary manner by daily journals.

It has not been my wish to deprive medical gentlemen of the pecuniary rewards of the profession, (particularly the profession of Philadelphia, to whom I am under many obligations.) I positively deny assertions to the contrary, defying any man to point out an instance in which I can be fairly charged with any such thing. The prejudiced, the malignant, the obtuse may *assert* it, but the man of honor and reputation will not dare to do so, because he knows that veracity will be sacrificed thereby. I consider my duty terminated by the application of my Supporter; never can it be said that I ever charged one dollar for advice. The brilliant success and reputation of my Supporter has been sufficient to enable me to confine myself to making, selling, and applying it; this is all I wish to do.

It is true that hundreds of ladies have been to me and said, "Mrs. Eetts, I have called on you to get relieved from my sufferings, if possible; I am worn out with protracted illness; my family is losing the benefit of my services; I have worn different pessaries, but none of them reach my case or do me any good. Dr. ——— has attended me a long time." My reply is this, I feel very confident, madam, that my Supporter will very much benefit you; it has reached a thousand similar cases before, but there is a necessity for candor, and it is due to you and myself to say, that it will fail in the hands of the gentleman you have named, (as it may be) because he does not understand the principles on which it acts, or any thing at all about its operation; besides he is hostile to aught else besides pessaries. It will relieve you in the hands of a physician who is favourable to this new mode of treating your complaint, therefore change your physician. Some of its most violent opponents have never yet tried it, in a solitary instance; I am sorry to say it, but so it is, they do not and cannot understand it, and more than all, they suffer their prejudices to get the better of their judgment. The lady then applies to another physician, dismisses the previous one, I get merely paid for my Supporter, and the successful physician reaps the reward to which he is entitled.

I wish, Sir, to be entirely respectful to you in this communication, but there is something more than pride of station or of office, to be consulted at this time. You have pre-conceived notions and opinions. I have eminent station, high talent, great names, in both hemispheres in my favor. I have (and which is more to me than all besides) the voice of conscience and humanity—to mitigate female suffering, to shorten the period of pain, to raise up the prostrate sufferer is my object, and it is accomplished by my Supporter. You as a man occupying an important station should rejoice at such a result; but what do we hear—the praises of your horse shoe or sleigh pessary!

I trust you will excuse me, but at this time I feel impelled to come forward as a friend to my sex, the welfare of whom ought to be dear to me, and on those who are our natural protectors it is more incumbent. My respect to you as a medical gentleman, holding an important office, (and I desire to pay every respect,) must be limited in its extent; you have no blame that can attach to me, as I merely vindicate myself, whom you have injured by an attack on my invention. Sir, I know the feelings of ladies on this subject; there is a great and growing dislike and invincible repugnance to the use of the pessary in any form. I am sure, Sir, that you never will experience pleasure, profit or success in the use of your horse shoe or sleigh pessary, which you now extol, and which I have now before me, and I am free to confess (knowing something of its effect on one of my patients) that I would rather a child of mine should continue to suffer than that she should endure the torture of that instrument.

Ladies suffering by the pessary know well the advantage of my Supporter; they are acquainted with the cure of other females, their friends and relatives, by it; they see them out and about: they are anxious to get it. They say, oh, why cannot "I be allowed to try Mrs. Betts' Supporter, it will I know do me good." They pine for it; all their respect for their medical attendant will not be sufficient to compensate for, or induce them to submit to a continuance of pessary treatment any longer, therefore, the practice of the adherents of the pessary will become so irksome to them, by its continued ill success and their growing unpopularity with their own patients, that it must be consigned to the "*tomb of the Capulets*."

A lady very recently called on me from a northern state, by desire of her physician, in that city, an accoucheur of the very first eminence. After her arrival she called on a relative in this city and a fellow sufferer in the same complaint; she stated that she had been directed by her medical attendant to get Mrs. Betts' Supporter. "Oh pray do not do so," said the Philadelphia lady, "for *my doctor* assures me it cannot do any good." The other lady answered, I have such full confidence in the recommendation of my own medical attendant that although I do not know any thing of Mrs. Betts' Supporter, I will get it at any rate. The lady being fitted with my Supporter received such benefit, that although she had been scarcely able to walk at all for three years, was shortly able to walk a square or two, and is now at this time able to walk a mile and a half, and the same distance back again, to visit me. The Philadelphia lady is still suffering with the pessary, but is as dissatisfied with it, as she is with her doctor, and will get rid of them both as soon as possible. She complains of being deceived and imposed upon. This is the way in which the treatment recoils back again on its friends; it is an almost every day occurrence. Is it *politic* even to continue it?

I am free to confess that the respect which I owe you prevents my addressing much more to you, than this short letter can contain; but (*encore un coup*,) as you are known never to have employed my Supporter, not even *once*, are you acting with propriety in saying any thing at all about it? Are you justified in attempting to raise prejudices in the minds of others against it? As you have had no experience in its use, you ought at all events to remain quiescent.

I would respectfully also caution you against the effect of your remarks upon the medical students themselves. Sir, my respect to the medical profession is so great, I wish to caution you against *any* delusion that you may be laboring under which will operate disastrously in the "long run." Candor is always best, and particularly on this occasion. Young gentlemen coming to this city for medical education, particularly those of them who form your class in the ———, will have other views than those of yours on this subject; they are naturally of an enquiring disposition; they will not embrace the view that you present to them, if a more popular and a better method of treatment is taught by others. The bias of education may do something, but reason and

experience will do much more. They are independent in thought as well as action—they will not be tied down by dogmas and paradoxes—they are men of intellect, and highly educated; at least most of them are so. After graduation, if not before, they discern that this is a question of absorbing interest to them, in their practice, and as brothers, relatives or friends. They look back to their professors' instructions—they are unsatisfactory,—a rival in practice succeeds admirably with the supporter,—he drawls along with the pessary, and finds he makes no progress, while his competitor reaches the goal of success in triumph. He then says, I find now that I was misled by my instructor; and the result is disappointment, perhaps disgust,—you may give it the name of the “abominable,”—you may style it the “abhorred,” but abuse, you know, sir, is not argument. When your students know that the pessary will not cure displacement of the uterus, and that my uterine supporter will do so, they will know what your assertions are really worth.

With all due respect, sir, I would submit that the greatest friends to my uterine supporter are those medical gentlemen who are best acquainted with it; and who have become as tired of the pessary, after long trial, as it is possible for you to feel warm in its support, and have at length totally discarded it as a worthless and inefficient concern. They have tried it in every shape and form for a number of years.

A medical gentleman of longer standing, greater talent, and higher eminence than yourself, told me repeatedly that he had given them all a thorough trial, in all their various shapes and phases, but never one with a satisfactory result. I myself have seen at least six thousand ladies with this weakness, and I solemnly declare that I never heard one out of the whole number speak well of the pessary. I am, sir, competent to speak to you in this matter: my large experience gives me a right to do so, and your attack on my Supporter warrants my doing so. Perhaps there is not another individual in this city who could speak to you with the same freedom, and at the same time, I hope, with the greatest respect and consideration for your position and talents.

Other medical gentlemen of eminence tell me that after using the pessary for twenty years in practice they have utterly abandoned it. An aged gentleman of a southern city says he has been for forty-five years in practice, has narrowly watched, and always found them unsatisfactory—giving a vast deal of trouble and pain; he now uses my Supporter altogether; his practice is among the highest families. Another of thirty years practice told me almost the same words. A young friend of my own, who graduated only a few years ago, in the ————, said, “I attended Dr. ——— class; he strongly advocated the use of the pessary, and I must say my bias was in its favour. At the same time in the summer course in Locust street, Mrs. Betts' Supporter was warmly spoken of as an excellent instrument; determined, however, in favour of the pessary, I gave it employment, and the result was disappointment both to myself and patient; there was so much inflammation and general prostration, such tilting over, such falling through, that I was very glad to have done with it, and now I send my patients to get fitted, Mrs. Betts, by you.”

A lady from a distant city came here to receive the advice of Dr. ———. She was persuaded by another lady to get Dr. ———. She said the former gentleman will lay you in bed for months, perhaps six, or even twelve, as he did Mrs. so and so; and finally, by using the pessary, make you worse than ever. Dr. ——— uses the improved method; he is very successful, and a very eminent man. The result was the Doctor ordered her my Supporter, and in one week the lady was able to reach home perfectly well.

My respect to the ladies of this community compels me to speak with the openness and candour befitting the occasion, at the same time, I trust, with due consideration to you as a physician. You may, sir, lay to yourself a kind of “flattering unction,” that your position ensures to you a certain, ready, and

tacit acquiescence in your opinions. You never were more deceived. Medical men in distant places are offended with the treatment their patients receive in this way. I have been told over and over again by ladies, "Mrs. Betts. I regret to say this is not my first visit to this city: I have been treated before by Dr. —; he sent me home with the pessary; I never was benefitted in the least by its use; it has been a source of sorrow to me; my Doctor at home was very angry at being treated in this manner. You might have had all this done for you at home, said he, and have saved your fatigue and money; but go on again and apply to Dr. —, who employs Mrs. Betts' Supporter."

A lady of great wealth, of another city, who has just returned from Paris, informs me that the Paris physicians never employ a pessary now. She came home with a Supporter of a peculiar construction, which she removed to give place to mine. I have, Dr. —, public opinion on my side; you will find it very hard to work up hill your sleigh pessary; you will require a very strong team, and most likely locomotive power will not get it along against the opposing force.

The pessary is unpopular, unsuccessful,—my Supporter is in full tide of successful operation; but it is yet in its infancy; when the veil which conceals it is drawn aside,—when it is more fully known than at present, the pessary will be in complete oblivion.

As to the mode of treatment by the pessary I have a few words to offer.

The lifting up the uterus by the pessary, is insufficient to conquer the complaint. There is a pressure at the fundus, bearing it down, and the viscera around and above it, by their weight, keep it from recovering its position. A general support to the abdomen is necessary, and is the desideratum. Thus an opportunity is afforded for the recuperative energies of the abdominal viscera to commence their work with success. A mere application of the pessary to the vagina, I humbly conceive, sir, will do little or nothing,—it will merely cause a flattening, if I may so term it, of the shape of the womb, which you know is pearshaped; a weight pressing on its top and another at its extremity, it appears to my view, must be attended with bad effects. The tone of the uterus cannot be restored by any such process. It is said also, restore the tone of the vagina. How can the tone of the vagina be restored while it is distended by an instrument like the pessary?

The lady is ordered, however, to keep in the recumbent position; possibly to lie in bed; during this time by tonics and tonic injections, you endeavor to restore tone to the system; to reduce inflammation and to replace the prolapsed organ; this being accomplished, and the patient feeling relieved, then the pessary is introduced—she attempts to rise, the pain is intense—the weight of the viscera pressing as before on the uterus brings back all her bad feelings, and it is exceedingly difficult to walk or stand erect; then commences a train of medical treatment, which scarcely ever ceases, and the unhappy lady is a melancholy instance of pain and suffering, and the usual train of nervous diseases follow, and other disorders, as described by eminent medical men.

If not trespassing too much on your attention, sir, allow me to add the view I take of the improved mode. A lady having prolapsus uteri, and being ready for the application of my Supporter, has it applied, and she feels immediately a delightful change: the heavy, dragging, bearing-down pains are immediately mitigated; she is as it were, entirely a changed woman; she walks with ease, attends to her domestic duties, and speedily the parts recover their position. The taking off the pressure on the uterus is the cause of this great change, combined with the moderate and gentle pressure of the perineum, by the perineal pad. No time is lost; a rapid and perfect cure in general takes place.*

My wish is to be perfectly explicit, and to be understood. I have, sir, en-

*I speak of my supporter. I cannot answer for counterfeits, of which there are various. Wiegand & Co., of this city, have made and sold a counterfeit of my supporter, the effect of which has been serious.

deavored all in my power to preserve a good understanding—a fair, candid mode of procedure. My respect to you has caused me considerable pecuniary loss. Many of your patients have called on me expressly to get fitted with the supporter, of course without your knowledge; I have told them I did not like to interfere between Doctor and patient. I would feel gratified by your being again spoken to before I fitted them. This will not be construed as wishing to deprive medical men of their emoluments, of which I have been accused!

Before I conclude, Dr. ———, allow me to speak as to the practice in this branch, in other places. In New York, in the Crosby Street School, your mode of treatment is exploded—the learned professor of your branch recommends MY SUPPORTER as the very best instrument to employ; and a young southern gentleman in the University of Pennsylvania at present, in attending the last summer class, in July, informed me of it. The great majority of medical men in Baltimore are in favour of its application, and employ it in their practice, if I may judge by its increasing sales. I must conclude it is growing in favor in every part of the United States. On the other side of the Atlantic, you know, sir, that all the eminent men are against the use of the pessary. Prof. James Blundell, M. D., of Guy's, London, in his work on Obstetric Medicine, thus speaks of it. Page 13. "The following (says the Dr.) are some of the more important bad effects. Obstruction of the bladder, obstruction of the rectum, bruises, inflammation, ulceration, thickening, insomuch that the very walking of the patient becomes painful to her. Sometimes the rectum has been laid open by ulceration into the vagina. I once saw a case in which a very large pessary had been introduced, the rectum opened, in consequence, the woman died, (I had almost said happily,) and thus became relieved of her misery." Any one possessed of any knowledge of Dr. Blundell, or of Guy's, will acknowledge this to be authority of the first order.

You also know, Dr. ———, that Prof. Moreau, of the Faculty of Medicine, at Paris, and Physician to her Royal Highness the Dutchess of Orleans, and Prof. of Midwifery and the diseases of women and children, has the following passage on page 295, of his "*Traite pratique des accouchements*." He relates a case of recto vaginal fistula, i. e., an opening between the vagina and rectum, caused by wearing a pessary: in this case the fæces passed out of the vagina. Another case, in which the pessary produced ulceration, fungous excrescences, and hemorrhage. Another case, in which the pessary had caused by ulceration, an opening, both into the bladder and rectum. A fourth case, in which the pessary worked its way into the rectum.

Dr. Moreau has therefore abandoned the use of the pessary, and introduced the Supporter into his hospital and private practice.

This is the "*modus operandi*," Dr. ———, of the pessary; you may blame your brethren of this city for discarding its use; but if they cannot see the propriety of employing it any more, they will be justified and commended for discarding it, by the force of reasoning and fact. You may say in poetical language—but ineffectually,

"It has no faults, or I no faults discern,"
"It's beauty all, or all blindness I."

In this city, the chief seat of Medical Science in the United States, the great majority of medical men are opposed to it—men of the very first authority. The reputation of this city is to a certain extent in jeopardy—many southern ladies, I well know, go to New York for treatment, because there it is well known the pessary is not employed; and here it is known that some men of standing are its advocates.

Finally, sir, permit me to allude to one circumstance:—On Friday the 22d inst., you alluded to a case of retroversion of the uterus, caused, as you were pleased to say, by my Supporter. This, of course, you know was not your own patient, because you know no patient of yours ever used my Supporter. It must have been a consultation case. You said after three years wearing it; you did not of course, watch the patient during the three years wearing it—

therefore, at what precise time the displacement occurred, (a very important circumstance,) is not stated. Do you know that the uterus was not retroverted at the time, or even before my supporter was obtained? It may have taken place during its removal, for most ladies remove it occasionally, as is known; removing it and applying it again, as it suits their pleasure or convenience.

It is well known that retroversion arises in most cases from the distension of the bladder during pregnancy, by sudden emotion of the mind, &c., &c., &c. Dr. Gregoire, of Paris, about the middle of the last century, first called the attention of the faculty to it. Through his means Dr. Wm. Hunter, of London, also directed his attention to retroversions of the uterus. He states a case of distended bladder, from which he, with the catheter, by the assistance of Mr. Walter Wall, drew 7 or 8 quarts of water. And this distension produced retroversion of the uterus, (Vide Med. Observations, vol. 4.) You know also that a number of cases of retroversion occur where the pelvis is capacious and the fundus of the uterus falls low down into the pelvis, so that the os uteri is pushed against the neck of the bladder, preventing thereby, the free egress of water—and of course, giving the bladder a disposition to distend.—(Vide Dr. Hunter's Work.)

Dr. Denman (Introduction to Midwifery) also imputes retroversion to distended bladder, "either by the reserve of women in a superior rank of life, or by the restraint of those in inferior stations; neglecting or being prevented from attending the calls of nature."

Dr. Merriman admits the theory to be correct; he adds, (at page 18,) though over distension of the bladder be considered as the principle cause of retroversion, and though "it is hardly possible that complete retroversion should take place, unless the bladder be so over distended, yet great emotion of the mind, or exertion of the body, may give that *shock* to the distended bladder which is sufficient to retrovert the womb."

You know also, sir, that it occurs in the early periods after delivery; because, observes Dr. Merriman, "the contraction which the organ has undergone has reduced its size, and renders it fit to undergo such a displacement; also, when the uterus is in a diseased condition, it is very liable to retroversion."

Dr. Merriman relates the case of Mrs. F., of Wellbeck street, Cavendish Square, London,—a case of retroversion during pregnancy, caused by sudden emotion of the mind on hearing of the death of a near relative. "She was terrified and much affected; she expressed herself as feeling her whole inside turned upside down."

Dr. Wm. Harris, of this city, observes "that the causes of retroversion are a preternaturally large pelvis, and over distended bladder, violent vomiting, great physical exertions, blows, falls, &c." (Vide Med. Examiner, Vol. ii., page 347.)

Let us then for one moment, ask each other, on which side lies the balance of testimony, with you or with me? 'Tis very true, I am an unimportant individual, and not to be placed on the same level with Dr. ———. "It is most true"—but yet my influence is considerable. But if the veriest worm should cross our path, we might let it pass uninjured; but, being a female, I am more entitled to courtesy on that account, and persecution to me will be looked upon with disgust.*

*The list of physicians in London, favourable to the Uterine Supporter, contains, among many others, the names of

Sir Astley Cooper,	Sir James Clark,	Sir B. Brodie,
Dr. T. Watson,	Dr. Holland,	Dr. Cape,
Dr. Bloxham.	Dr. Ryan,	Dr. Conquest,
Dr. James Blundell,	Dr. H. Davis,	Dr. D. Davis,
Dr. Chowne,	Dr. Rigby,	Dr. Saml. Ashwell,
Dr. F. H. Ramsbotham,	Dr. Robert Lee,	Dr. Sweatnan.
And in Paris.		
Dr. Moreau,	Dr. Velpeau,	Dr. Pau Dubois,
Dr. Marjolin, &c., &c., &c.		

I beg to add, with every respect to your important station, that I entirely differ from your views as to the result of wearing my Supporter in the case you allude to. It is a suspicious-looking sort of thing—a poor resource to fly to, to aid a sinking cause. It is remarkable and worthy of attention that this comes from Dr. ———, known to be the most active opponent the improved treatment has met with, perhaps, in America. Therefore the charge is vitiated by the prejudiced source from whence it springs; it deprives the charge of its power.

You could not, sir, if you would, produce retroversion by my Supporter.

It is worthy of notice that Dr. ———, who never himself employed it, has yet been able to present such an allegation; it carries contradiction on its face. Your motives and objects are clearly discernible, and will be duly appreciated by the enlightened body of which you are a member.

It will, I trust, sir, be out of your power to impede the use of my Supporter. The attempt to do so, in my opinion, will be deemed a last resort—a poor kind of *Ratio ultima Regum*.

Philadelphia, Dec. 26th, 1843.

SARAH BETTS,
Eleventh and Walnut Streets.

From the Medical Examiner, No, 13, Vol. I., New Series. Philadelphia, March 26th, 1842.

ON THE "UTERINE SUPPORTER."

BY WM. HARRIS, M. D.

A Lecture upon Prolapsus Uteri, which I delivered at the Medical Institute, in the spring of 1839, was published in the May number of the Medical Examiner of the same year; and since that time the advantages and disadvantages of the *uterine supporter* have been freely discussed, and its usefulness extensively tested.

Like every new improvement, the SUPPORTER met with formidable opposition, even from gentlemen of elevated standing in the profession, but it slowly crept into favor, and its superiority is now almost universally acknowledged. More than a hundred medical gentlemen in this city, among whom are Professors in each of the four Medical Schools, have tried it on their patients afflicted with prolapsus uteri, and are testifying to its great advantages over every other apparatus employed by the profession; and more than a thousand females, either radically cured, or materially benefitted, are earnestly recommending it to their fellow sufferers.

With whom the idea of an external uterine supporter originated is uncertain; I apprehend, however, that the honor is due to the late Dr. Dewees, whose labors have contributed so much to enlarge the boundaries of obstetrical science, and to adorn the history of the earliest and most celebrated medical institution of our country, that he well deserves the appellation of the *Father of American Obstetrics*.

While attending one of his lectures, in the University of Pennsylvania, upon prolapsus uteri, I heard him remark that the pessary occasioned, in some females, so much uterine and vaginal irritation, and consequent, leucorrhœa, that they were obliged to discontinue the use of it, and that he hoped an instrument would some day be invented that would restore the displaced organ, by making external pressure upon the abdomen and perineum. This remark, perhaps through some medical student, reached the ear of Dr. Hull of New York, and induced him to bring forward the first uterine supporter that was ever presented to the public. Subsequently a great variety of supporters were invented, by different persons, in various parts of the United States, the best of which by Mrs. Betts, a well educated and accomplished lady, a native London, now residing in Philadelphia. Mrs. Betts invented the apparatus for her own case, which, under the care of Professor Jackson, was conducted to such

a successful issue, that she was induced afterwards to offer the instrument to the medical profession. In the last three years, I have tried her supporter in my own practice, and in consultation, on upwards of fifty females, with great success, in some producing radical cures, and in others great comfort, so that I feel constrained to give it my cordial recommendation.

The time required to perform a radical cure by the supporter, varies from three to eighteen months, in most cases one year.

A lady of this city, 38 years of age, afflicted with procidentia uteri, consulted me in her case about three years since. She remarked that she had worn pessaries of various kinds for a length of time, all of which produced great irritation and leucorrhœa, and that she ascribed to this cause an abortion that she had had a few weeks before. She said this misfortune had caused her deep sorrow, having but one child, and that she was determined never again to submit to the introduction of a pessary. Besides the depression of her spirits, her general health was very feeble, and the only exercise she attempted to take, was to walk down three or four steps, from her chamber to the dining room to eat, her meals.

I procured for her a uterine supporter, and after it was applied and properly adjusted, she felt so comfortable and strong, that it being Sunday morning, she decided to walk with her husband to church, and, returning home little fatigued, she went again in the afternoon. By the use of the supporter, chalybeates and exercise in the open air, on foot and in a carriage, she improved so rapidly that after one year her health was established and her procidentia cured; and now she is able to attend to all her usual avocations, without the incumbrance of a supporter. Nevertheless, as a prophylactic measure, when she expects to walk for three or four hours, shopping, or making morning calls, she puts it on. She is now one of the most healthy and efficient ladies in Philadelphia.

Another lady, about six weeks after her confinement, fell down stairs, by which a prolapsus uteri was produced. Being sent for immediately, I ordered her to bed, where she was confined three days, at the end of which time Mrs. Betts applied a supporter, which in three months effected a radical cure. A number of other cases, under my care, were radically cured, after a great variety of pessaries had been tried in vain by the most skilful physicians.

For my success in the treatment of these cases, I am much indebted to the assistance of the inventor of the apparatus. I now cause her to apply it to all my patients laboring under the complaint, unless objections are made, so that she can alter and adjust it to each female's particular shape. Without this precaution, the instrument will not give so comfortable a support to the patient and a cure will not be so rapidly or effectually accomplished.

Again: the perineal pad, when first applied, sometimes produces great irritation of the skin, and unpleasant heat in the soft parts; when this is the case, I cause the pad to be removed for a few days, and instead of it, to have applied under the perineal strap, a soft folded napkin; and this substitution of the napkin for the pad is always necessary during the menstrual period, or what sometimes answers equally well, to roll the napkin round the pad, to prevent it from being soiled. Females, indeed, that are very particular, wear a piece of old linen or muslin around the pad always, that it may be kept clean. Mrs. Betts' supporter has been introduced into practice in New York, and in various other parts of the United States, and the testimony in its favor, from all quarters, is unequivocal.

I have found the supporter to be, also, an effectual preventive of *habitual* abortion. Some females of leuco-phlegmatic temperament, great nervous irritability and feeble health, are subject to habitual abortion, which ordinarily takes place during the early months of pregnancy. At the return of every menstrual period, regular periodical uterine pains come on, threatening a premature delivery. Such cases, under proper management, may be conducted

safely to the full period, and the accoucheur have the pleasure of presenting to the anxious mother a living child, as the reward of her repeated sufferings.

As soon as the threatening pains come on, direct the patient to go immediately to bed, order dry cups to be applied over the sacrum, sometimes scarifying two, or four, so as to take away from two to four ounces of blood, according to circumstances, administering at the same time an anodyne enema, consisting of two ounces of flaxseed tea, or of a thin solution of starch, and from forty to a hundred drops of laudanum, according to the urgency of the symptoms, and the capacity of the patient to bear narcotics. The foot posts of the bedsteads should be raised, at the same time, about six inches, by placing blocks of wood under them, so that the womb may be thrown upward, and points of irritation, thereby, be removed. This treatment, in a few hours, will put a stop to the threatening symptoms, but the patient must not be allowed to rise from her bed under two or three days, as the erect posture is apt to produce a relapse. Before she rises from her bed, a supporter should be carefully applied, which will give her great comfort, and enable her with safety to attend to her usual avocations.

Some authors recommend that patients, under such circumstances, should be kept in bed throughout the whole period of gestation; but such practice cannot be too much condemned, as in almost every instance it injures or destroys the female's health. Pregnant females that suffer from prolapsus uteri during the three first months of gestation, but at no other period, have also derived great comfort from wearing the supporter.

For a description of this apparatus, and the manner in which it is applied, I refer the reader to the 329th page of the Medical Examiner, vol. 2d. Every medical gentleman, however, from a glance at the apparatus, would at once comprehend the manner in which it should be applied. Mrs. Betts' last improvement, which she calls her *laced supporter*, is decidedly the best.

Notwithstanding the success that has attended the use of the supporter in Philadelphia, there are still a few medical gentlemen, who occupy an enviable position in the profession, that resist the introduction of this apparatus in their respective circles of practice. They object to its use because, as they allege, the pressure by the broad pad or belt over the hypogastric region, must force the intestines downwards against the pelvic viscera, and thereby increase, instead of removing the disease. If this be true, it is a valid objection, and the supporter ought to be laid aside. Let the facts decide. The axis of the pelvis is not parallel with the axis of the body, but strikes off from it at an angle of forty-five degrees. The centre of gravity being, therefore, in the direction of the axis of the body, the weight of the intestines must fall upon the symphysis pubis and upon the parietes of the abdomen, especially if the female has borne children, and is consequently a little corpulent. Now it must be admitted, that if the pressure by the supporter were backwards and downwards, the intestines would be crowded upon the fundus uteri, and the displacement be consequently increased; but as the force which it exerts is upwards and backwards, exactly in the direction of the plane of the superior strait of the pelvis, or at right angles with its axis, I contend that it completely removes the weight of the intestines from the pelvic viscera, and that the uterus has consequently a tendency to rise to its natural position through the contractile power of its ligaments.

This objection then, being, as I apprehend, completely removed, I proceed to examine another, which is, that the *perineal pad*, supported by the strap that passes between the limbs, does not raise the uterus sufficiently high to restore it to its primitive situation, and that a radical cure can therefore never be effected. As those gentlemen who condemn the supporter maintain that the pessary is better calculated to restore the displacement under discussion, I shall consider this opinion first.

Pessaries are made of various materials, and of different shapes, but the flat circular pessary and the spherical pessary, made of glass or silver gilt, are the

kinds most in use in Philadelphia. The flat pessary is about half an inch in thickness, and two inches in diameter; in introducing and adjusting which, it is recommended that it be placed in the vagina upon its edge, with the convex surface towards the rectum, and parallel with it, the upper edge in the cul de sac at the upper end of the vagina, and behind the posterior lip of the os uteri, and the lower edge resting upon the perineum or floor of the pelvis, near the point of the os coccygis. It is maintained that the pessary thus adjusted will raise the uterus its whole breadth, nearly two inches, and thus sustain it until the ligaments that support the uterus have time to contract and recover their primitive tonicity, and a radical cure thus be accomplished. This is very plausible in theory, but difficult to reduce to practice.

If we commence at the posterior part of the superior strait of the pelvis, and pass along the hollow of the sacrum and coccyx, and the floor of the pelvis, up to the top of the symphysis pubis, we shall describe an arch amounting to nearly a semicircle. Now it is known that a weight capable of sliding upon a curved surface, will not rest until it reaches the lowest position; consequently, if a pessary be placed in the vagina parallel with the rectum, while the patient is lying upon her back, it will remain in that position so long as she retains the recumbent posture; but as soon as she assumes the erect attitude, the pessary will slide down and rest with its convex surface parallel with the perineum; and now the thickness of the pessary, half an inch, is all that interposes between the os uteri and floor of the pelvis. The uterus is therefore, only raised half an inch higher in the vagina than it was before the pessary was introduced, and if instead of the flat circular, the oblong or oval ring pessary were used, after it slides down, the os and cervix uteri would pass through it, rest upon the perineum, and therefore not be elevated at all. The globular pessary would answer a better purpose, if the mouth of the womb would rest upon the top of the sphere—but as it will slip behind or before the spherical pessary, it is very inefficient.

Besides, if the pessary is found to answer effectually the purpose for which it is designed, why such an interminable change in its shape and dimensions? Now if it can be demonstrated that the *perineal pad and strap* of the supporter is capable of raising the uterus more than half an inch, and retaining it there permanently, as much will be accomplished by the supporter as can be done by the pessary, and the patient have the advantage of using an apparatus that is less irritating, and less offensive to her sense of delicacy.

To prove this will not be difficult. The distance from the point of the os coccygis on the arch of the pubis is four inches and a half, which is filled up by very elastic soft parts, that extend in the antero-posterior direction, not in a straight line, but curved downwards, so that the centre of the convexity projects at least one inch below a straight line. Now it requires no great stretch of the imagination to suppose that the convexity of the perineum could be pressed up by the pad to a straight line, nor is it difficult to conceive that by gradually shortening the perineal strap, the pressure might in time be so increased as to raise these parts one inch above the straight line, thereby raising the uterus two inches, which is more than can be accomplished by the pessary, even if it could kept upon its edge, and parallel with the rectum.

The principle on which the Supporter acts in restoring the prolapsed uterus to its natural position, may be better understood by stating that the direction of the vagina is backwards and upwards, a little above the horizontal line, and that the perineal pad, by pressing the lower against the upper side of this canal, would prevent the uterus from descending, if applied as it ought to be, before the patient rises from her bed.

Again, if the uterus be low down in the vagina, that organ being somewhat of a conical shape, and the apex downwards, the pressing of the two sides of the vagina together, would make the womb rise.

Such are the views which I entertain with regard to the use of the supporter in cases of prolapsed womb; and I have the satisfaction to know that I hold these opinions in common with a large majority of the medical profession, in and around Philadelphia.

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