

‘Venereal infertility and the infection of women and children, 1880-1913’

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INFERTILITY IN HISTORY, SCIENCE AND
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‘It is certainly true that in a large number of cases the wife does not show any of the early signs of acquired syphilis. The first indication of her infection is very often ... an early miscarriage.... Those ... in themselves would be no evidence ... but bye-the-bye she has a miscarriage ... at the sixth or seventh month, and that is a very suggestive incident. She may have some more of those miscarriages ... and then probably she brings forth a live child. That ... child ... is generally atrophic and ill-formed, and of very low vitality. Now, a few of these cases have been examined pathologically, and ... in some of them most extensive indications of syphilis have been found.... Since we have had examinations, and since the discovery of the organism specially characteristic of syphilis ... we have found that in a child such as I have described the interior of the body is swarming with *spirochætes*. It is a more virulent source for cultivating that organism than any acquired case could be.... A child such as I have described generally dies.’

- Sir Thomas Barlow

Royal Commission on Venereal Disease, qq. 6388-89.

‘Women who have gonorrhoea may become pregnant. It is, therefore, not an absolute preventative of fertility; it is an obvious condition that can coincide with pregnancy. If pregnancy has occurred between parents with damaged tissues, then it must have an effect upon the offspring, and racial deterioration be the result.’

- Sir Victor Horsley

Royal Commission on Venereal Disease, q. 11294.

Kassowitz's Law

Gradual diminution in the severity of congenital transmission between a mother and foetus. It is a pattern beginning with miscarriages, followed by stillbirths, neonatal deaths, unhealthy but living children and finally the birth of healthy children.

‘The usual history is with complete sterility, miscarriages, or abortions, stillbirths, children dying in infancy of convulsions, marasmus, meningitis or hydrocephalus; then there may follow children who are apparently healthy, but who in later life develop *syphilis hereditaria tarda*, manifested often by interstitial keratitis, nerve deafness, bone, skin and visceral lesions.’

- Frederick Mott

Local Government Board Report on Venereal Diseases, PP 1913 XXXII Cd 7029, p. 10.

Sterility was 'commonly the result of some structural lesion, malformation ... certain morbid constitutional conditions, as well as ... other causes such as sexual incongruity or irrespondence of a moral rather than of a physical kind.'

- Thomas More Madden, obstetric physician
British Medical Journal (21 April 1888), p. 844

‘We always recommend the mother to go to the hospital for treatment. Now we always have both the foetus examined, which is perhaps the easiest, quickest and most conclusive way; and also, if the foetus should show *spirochætes*, we have a Wassermann reaction done for the mother. In that case the mother attends and is either treated in the outpatients department or, if she can be admitted, she is. But we really have not beds enough to admit people for salvarsan treatment.’

-Dr Florence Willey

Royal Commission on Venereal Disease, q. 11651.

‘Over fifty per cent of the inflammatory pelvic troubles so often met with in young married women [were] due to gonococcal infection by the husband.... It is a matter of great regret ... - ... a shame to our profession - that so many men are told that they are free from all infection and are given permission to marry before any systematic, thorough and scientific examination has been made on which such an opinion can be logically based.’

- H. Wansey Bayly

British Medical Journal (14 March 1914), p. 584.

'I was called in some few weeks since to a case of threatening abortion.... The patient – a wreck of a young woman – told a history of early marriage, succeeded by three abortions in rapid succession, a child which from her description was typical, two subsequent abortions, and after an interval of eight months the present threatening one.... I was penning my mercurial prescription, when a slight noise in a distant corner of the room attracted my attention.... I stopped short my prescribing and looked down on the bulging head and thin hair, the sunken nose ... and dull, joyless eyes.... It was borne in on me that in that mother's womb lay a child like that ... [that] Nature, abhorrent, was striving to cast off.... Do we well when we combat Nature in her effort to abort so monstrous a "degenerate"? Will somebody advise me if I did well in this case when I withheld mercury and left Nature to the promptings of her conscience, instead of abetting a crime so great as that of the birth of such a child as laid its dull misshapen head against my knee that morning?'

- Arabella Kenealy

British Medical Journal (14 September 1895), p. 682.