AN INAUGURAL DISSERTATION
ON
The Signs of Pregnancy

SUBMITTED TO THE
PRESIDENT, BOARD OF TRUSTEES, AND MEDICAL FACULTY
OF THE
University of Nashville,
FOR THE DEGREE OF
DOCTOR OF MEDICINE.

BY

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OF

Kentucky

March 1857

W. T. BERRY & CO.,
BOOKSELLERS AND STATIONERS,
NASHVILLE, TENN.
To

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Medical Department
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University of Nashville.
These pages are respectfully inscribed by
The Author.
The Signs of Pregnancy

As medical men it frequently becomes our duty to decide this era in the lives of females, both married and unmarried. It is therefore necessary that this subject be fully and thoroughly studied by every practitioner. We should ever be slow in giving an opinion where the signs are not fully prominent, or to our satisfaction but slightly indicative; and where the future happiness of our patient is dependent on our decision. It also becomes necessary in the administration of our remedies to know whether our patient be pregnant, as the action of medicines are then modified.
The Signs of Pregnancy are generally divided into Rational, and Sensible. In the first class, or Rational, are to be found the general effects produced on the system, such as increased frequency of the pulse, increased plasticity of the Blood, rapidity of respiration, the general increase in the Secretory functions; and those varying phenomenon which give rise to so many changes in her normal condition. These are all of little value taken alone, but have their bearings when found and taken in conjunction with others of the more prominent signs. And they should thus be viewed.
Suppression of the Catamenia, has been viewed from time immemorial, as a most valuable sign, but considered alone, would prove a most fallacious one, as it is well known that this suppression, often occurs from other causes than that of Pregnancy. Yet in females who have menstruated regularly, a suppression of the same would deserve more notice, provided there was no evidence of a suppression from other exposure. Again we find instances where this function has been regularly performed during the entire term of Return Gestation.
Nausea, and morning sickness, when found in conjunction with other signs have some bearing. The function of the salivary glands are found to be increased, and an abnormal quantity of saliva is being constantly discharged. "Sensible signs" changes which take place in the mammmary gland, aid in making out the case, other symptoms connected, but alone proves little, as this change may take place from other causes. Those changes take place about the second month. The gland enlarges, the nipple projects, and becomes more erectile, and assumes a deeper
The areola will be changed from a pink to a deep brown. The subcutaneous glands become enlarged, causing an uneven appearance around the nipple. These changes are most perceptible in first pregnancies, as the deep brown tinge rarely ever gives way after once being fully formed.

Enlargement of the abdomen, although a constant attendant on the pregnant state, cannot not be viewed at all times as unimportant, as it often occurs from other causes, which will be presently noticed. During the first weeks of gestation, the uterus descends lower into the pelvis,
owing to its increased gravity.
and if the Pelvis be roomy, does
not rise up into the abdomen
until the third or commencement
of the fourth month. Thus
we observe a gradual increase
in the tumours from below
upwards, thus giving us a good
diagnostic point of discrimination
between pregnancy and Ascites.
As before stated, this condition
Abdominal enlargement—may
arise from diseases, such as
Ascites, diseases of the Bowels,
Uterine, or other Abdominal Tu
mours. We may readily diagnosis
between pregnancy and Ascites,
by placing the patient in the
different accumbent postures.
If it be an accumulation of water the most dependent part will be occupied by it, whereas in pregnancy such modification is not produced by posture; that is the whole of the abdominal cavity will not be occupied on as complete a level as in ascites. Which fact percussion will clearly reveal.

Modifications in the neck of the womb may be classified among other signs, and aid us in diagnosing the pregnant state. In the non-pregnant state this portion of the organ, is about one and a half inches in length, and of firm fibrous texture.
Soon after pregnancy takes place, this firmness gradually gives way, and the parts become soft and pulpy. The neck becomes somewhat enlarged as well as soft to the touch. This softening takes place gradually, from below upwards, and by the sixth month one half of the neck has undergone softening, and by the first of the ninth month this process has extended the whole length of the Cervix. The Cervix, in point of situation, is found to vary during the term of gestation. In the early stage of pregnancy it will be found low down, and inclined to the Symphysis Pubis. During the latter stage, one finds it thrown back...
into the hollow of the Sacrum. The os uteri, will not be so readily felt as in the early stage, as it is far back in the hollow of the Sacrum, and often inclines slightly upwards. Darkestling, is among the first of the unequivocal signs of pregnancy. It will be observed to take place at about the 16th week, though it may be noticed sooner, or later, than this period. It has been observed to take place at three months. Again, as late as six months. We are liable to be deceived in examining for this sign, by mistaking some movement, or, contraction of the abdominal muscles, or excised peristaltic movement of the
intestines, or rapid passage of fluid through them. For making an examination to ascertain this fact correctly, the contents of the bowels should be removed, the patient placed recumbent, with the abdominal muscles relaxed. The hand, after being immersed in cold water, applied on the abdomen, which will cause the fluid to move; if it be viable, which movement, will be readily conveyed to the hand through the abdominal parietes.

Ballottement, when directly felt, is considered a proof positive of the existence of a fluid in excess.
in the erect posture. Introduce the finger for vaginas, and place it on a portion of the body of the uterus, while with the other hand feel the uterine tumour externally. The finger that is introduced should not be placed on the neck of the uterus, but on a portion of the body anterior to the neck. As the desired sensation will not be so readily transmitted by the neck, owing to its greater density, by suddenly pressing the uterus with the finger in fact, a sensation will be experienced of something having acceded from it, which will in moment or two fall back on it.
The jerk of the finger upon the marine body opposite the point occupied by the fœtus, causes it to float upwards in the Lig. nor Ann. its own weight enables it again to descend. This test is most valuable during the fifth or sixth months. Pulsation of the Fœtal Heart is a positive Sign of the existence of a fœtus in utero. This Sign is not audible during the first months of Pregnancy, owing to the feebleness of the heart's action. It is first observable during the fourth or fifth months. Even then its distinctness will be modified by the amount of Lignor.
Annin’s Strength of the Forts, its position, and the thickness of the abdominal parietes of the Mother.

We are enabled by observing this sign closely to detect twin pregnancy. And by closely observing the pulsation during parturition indications would present enabling us to judge as to the necessity of a speedy delivery by artificial means.

It will be seen from a perusal of the above enumerated signs that there is only one, the presence of which would, in any case justify us in pronouncing that pregnancy positively existed, and that one is the pulsation.
of the fatal heart. From the former signs and symptoms noticed in wounds have evidence sufficiently strong to guard us in our management of a case applying for advice, but not sufficient to justify us in pronouncing unhesitatingly and thus commit ourselves, and forever blast the prospects, hopes, and future happiness of an innocent female.

Syr. B. Johnson

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