

**ENLARGEMENT OF THE
PROSTATE, ITS TREATMENT
AND RADICAL CURE**

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Enlargement of the prostate, its treatment and radical cure by C. Mansell Moullin

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ENLARGEMENT OF THE PROSTATE

ITS

TREATMENT AND RADICAL CURE

BY

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PREFACE TO THE THIRD EDITION.

IN the five years that have elapsed since the last edition of this work was published, the surgical treatment of enlargement of the prostate has continued to make good progress. Wider experience has amply confirmed the opinions which I expressed then with regard to the relative value of the methods that were advocated; and now, I think, there are few who will fail to agree with me, that the pain and inflammation which used to occur in the course of this complaint with such frequency were often as much the result of the treatment as of the disease. It can no longer be doubted that enlargement of the prostate, in a very large proportion of instances, is perfectly capable of being cured, without undue risk, if only the consequences that follow from the indiscriminate use of catheters have not already inflicted irreparable injury upon the patient's bladder and kidneys.

C. MANSELL MOULLIN.

69 Wimpole Street, W.

PREFACE TO THE FIRST EDITION.

Two years ago, in the Hunterian Lectures delivered at the Royal College of Surgeons, I pointed out that, in striking contrast to the great advance made by surgery in other directions, there had been but little progress of late in the treatment of enlargement of the prostate. Operation with a view to permanent cure was still regarded as upon its trial, and the catheter was looked upon as almost the sole means for obtaining relief.

Since then much has been accomplished. New methods have been devised. Wider experience has confirmed the opinion I expressed as to the merits of more active measures than those usually adopted. The old view as to the purely sexual character of the prostate, which had been almost forgotten and which I supported strongly, has gained ground again, and, in its turn, has led to the discovery of other methods; and now it is not too much to say that perfect relief can be assured even in the most advanced stages of the disorder. Further improvements no doubt will follow; but it has seemed to me that the time has come when that which has been done already might profitably be gathered together and recorded.

I am aware that in many respects the conclusions I have ventured to express differ materially from those still current. It will be thought, for example, that I have laid undue stress upon the evils that attend the habitual employment of catheters. But the very considerable opportunities I have enjoyed of studying the course of prostatic disease under the most varied conditions have left in my mind no doubt as to the comparative merits of the different methods that I have tried to describe impartially.

CONTENTS.

CHAPTER I.

THE NORMAL STRUCTURE AND FUNCTION OF THE PROSTATE.

Size and Weight—Relations—General Structure—The Median Lobe—Blood Supply—Minute Anatomy—The Prostatic Urethra—The Veru Montanum—The Prostatic Utricle—Henle's Muscle—The Development of the Prostate—Its Function—The Caput Gallinaginis, and the Relation of the Prostate to the Sphincter of the Bladder *Pages 1—19*

CHAPTER II.

THE ENLARGED PROSTATE.

Histology—Rate of Growth—Prostatic Tumours—Physical Characters—Varieties of Enlargement—Influence upon the Urethra—Frequency with which Enlargement Occurs—Frequency with which the Different Portions are Enlarged *Pages 20—33*

CHAPTER III.

THE CAUSES OF PROSTATIC ENLARGEMENT.

The Time of Life at which the Enlargement Begins—The Analogy between Fibroid Tumours of the Uterus and Enlargement of the Prostate—The Connection between General Atheroma and Enlargement of the Prostate—The Theory of Compensative Hypertrophy—A Possible Solution in the Relation between the Prostate and the Testes. *Pages 34—49*

CHAPTER IV.

THE EFFECTS OF ENLARGEMENT OF THE PROSTATE.

- The Effect upon the Bladder—The Increase in the Amount of Work—
Congestion of the Prostatic Plexus—Irritability of the Bladder—The
Influence of Age, and of Cystitis—The Effect of the Enlargement upon
the Kidneys *Pages 50—65*

CHAPTER V.

THE SYMPTOMS OF PROSTATIC ENLARGEMENT.

- Decrease in the Force of the Stream—Difficulty in Starting—Dribbling
at the End—Intermittent Micturition—Residual Urine—Overflow—
Involuntary Escape of Urine—Incontinence—Retention—Increased
Frequency of Micturition—Impairment of Sexual Power—Pain—
Rectal Symptomis—Alteration in the Character of the Urine—Influence
on Health *Pages 66—80*

CHAPTER VI.

DIAGNOSIS.

- The Condition of the Prostate—Rectal Examination—Urethral Examina-
tion—The Length of the Prostatic Urethra—Its Direction—The Shape
of the Orifice—The State of the Bladder—The Amount of Residual
Urine—The Tone of the Muscular Coat—The Condition of the Mucous
Membrane—The Character of the Urine—The Condition of the
Kidneys *Pages 81—100*

CHAPTER VII.

THE GENERAL TREATMENT OF ENLARGEMENT OF THE
PROSTATE.*Pages 101—106*

CHAPTER VIII.

THE LOCAL TREATMENT OF ENLARGEMENT OF THE PROSTATE.

Palliative Measures: the Maintenance of the Urethra—The Prevention of Retention and of Residual Urine—The Prevention of Irritability of the Bladder and Cystitis *Pages 107—130*

CHAPTER IX.

THE LOCAL TREATMENT OF ENLARGEMENT OF THE PROSTATE.

Its Complication—Cystitis—Retention—Hæmaturia and Calculus
Pages 131—151

CHAPTER X.

THE RADICAL TREATMENT OF ENLARGEMENT OF THE PROSTATE. PARTIAL PROSTATECTOMY.

Pages 152—175

CHAPTER XI.

THE EFFECT UPON ENLARGEMENT OF THE PROSTATE OF ORCHIDECTOMY AND OF OPERATIONS UPON THE STRUCTURES CONTAINED IN THE SPERMATIC CORD

Pages 176—199