

THE SEXUAL SPHERE IN WOMAN.

A. W. IVES, M. D.,
Detroit, Mich.

A firm conviction that the medical profession generally, and to an extent, even psychiatrists, fail to appreciate the real importance of the dominating force of the sexual sphere in woman, especially as an etiologic factor in certain psychoses, has prompted the writing of this paper.

Appended will be epitomized reports of seven cases, three terminating fatally, which during the last ten years have fallen under my observation, and which are believed to be illustrative of the subject in hand.

The two most powerful instincts in all animals, including man, are the instincts for food, and for sexual congress; the former, absolutely necessary for the preservation of the individual, solely egoistic, the other, equally necessary for the preservation of the species, and therefore largely altruistic. Any species where these two instincts were not all powerful would have ceased to exist; or, put conversely, any race which has persisted, has done so because both these instincts have been so strong that they would be satisfied with necessary frequency, at any cost. From the standpoint of evolution, these two forces are the very oldest, and because of this the most insistent.

In all vertebrate life, sexually speaking, the male is the aggressor, the female is passive, from every standpoint, receptive. This passivity of the female is, however, as Marro puts it, the passivity of a magnet, which in its apparent immobility, is drawing the iron towards it; an intense energy lies back of this, an energy directed, though frequently unconsciously, towards the object to be obtained.

In its incipency, sexual appetite in woman tends to be diffused and unconscious; manifests itself as a vague desire, a want of affection, and does not, as a rule, develop locally till after coitus; in fact, the young unspoiled girl has not the slightest consciousness of her needs; her sexual desires, however powerful they may be, do not normally correspond to a desire for coitus at all. As has been said: "A youth naturally grows into a man, a maiden must be kissed into a woman."

If we are to form a fair and just and healthy judgment; if we are, ourselves, to understand the sexual question from a physical, psychical, and social standpoint, we cannot overlook or disregard this profound and fundamental difference, or imagine it can ever be effaced. Only in recent years, has this problem been faced and brought before the medical student or practitioner. It seems to be the consensus of opinion that the sexual control in men is situated in lower cerebral centers than in women, in whom it is found in the higher brain; thus, while the sexual appetite powerfully affects the male mind, it plays a much less important role than in the female; in her, it is much less easily separated from other instincts, sentiments, and the intellectual life in general. In man, though more powerful generally, it is also more transient, dominating to a much lesser extent his psychological life. This is why it is so much more

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difficult for the woman who has fallen to return to better ways, even when her original quality was not bad.

The uselessness of the discussion as to whether man or woman is the more intellectual is seen again in the question as to whether man or woman is the more sensual; in both instances, they are different; if, as is generally conceded, however, she is less sensual, she certainly is more sexual, and more dependent, generally, on sexual satisfaction for her emotional and mental equilibrium. Forel says: "The entire sexual sphere in woman occupies a great part of her cerebral activities, which are at the same time, the condition of her true happiness; when these portions of her brain are not brought into action, her physical and emotional development is interfered with, and not infrequently, upset. In woman, the entire visceral system reacts, if not with more intensity, certainly in a more general manner, to all sexual impressions: they dominate her life, if not as sexual emotions, properly so called, at least as related emotions, closely dependent on the reproductive instinct. Man's sexual appetite is much more promiscuous than woman's: he, normally, is more or less attracted by every young and healthy and comely woman; this is by no means, the case with normal woman. She is also naturally much more constant than man from a sexual point of view. A man may be drawn towards a woman, from a sexual standpoint, who has little or nothing in common with him intellectually or ethically, and at the same time, may be a fond husband to a woman towards whom he has little sexual inclination. This condition is very rare with woman; she needs from man, tenderness, love, and a firm support; she frequently feels that she can renounce the sexual embrace more easily than relinquish the above mentioned requisites, though in doing so she may, unknown to herself, bring on symptoms of various psychoses. As already mentioned, woman's sexual impulse, while probably less intense, is larger and more diffused than is the case with man where, as is physiologically necessary, it is focused on the genital organ. Because of this wide diffusion of the sexual impulse and the emotions in woman, its effects are noticeable in both her physical and psychical nature, and the inter-relationship of the two is generally not appreciated, either by the woman, or by her physician: for instance, the great prevalence in women, especially unmarried women, of the religious emotional state of storm and stress, is largely due, in all probability, to the unemployed sexual impulse; yet seldom is this fact recognized. Initial coitus much more profoundly and fundamentally affects woman than man; cases are by no means rare where complete ignorance of the newly married woman regarding sexual relationship, combined with almost equally complete failure on the part of the young husband to appreciate this ignorance, has transformed the exalted love of a young girl into profound disgust, if not for her husband, at least more or less permanently for sexual congress, and to a greater or lesser extent unbalanced her nervously and ruined their married life, all of which need not have been, had there been some reasonable comprehension by each of the sexual feelings and nature of the other; for the young husband, with the kindest and tenderest sentiments, is not infrequently woefully at sea regarding the unawakened sexual feelings of his pure young wife.

"Although not common, psychoses resulting from the shock of the nuptial night are by no means rare. This unhappy introduction is often the cause of the sexual frigidity not infrequently found in woman; for very careful examination of the case leaves no reason to conclude that the sexual impulse is lacking in normal woman. Absence of sexual feeling in woman is pathologic. Accepting this and recognizing further the great role played by sexuality on the brain of woman, rendering her so largely the slave of her instincts and habits, the question naturally arises, as to the results of continued sexual abstinence on the mental and emotional sphere of the fully matured woman. There is in both sexes, as a result of continued sexual abstinence, an accumulation of nerve energy, manifesting itself as sexual desire, or at times, in woman, in some psychical equivalent, as religious enthusiasm, exalted sympathy, desire for kisses or caresses, causing in them a vague, though misunderstood sexual pleasure; this latter condition is not normally experienced in man. These emotional and idealizing tendencies reach a degree of intensity at about the age of thirty, which is sometimes irresistible. This was noticed over forty years ago by Antsie, who remarked: "In woman especially a certain restless hyperactivity of the mind and perhaps of the body also, seems to be the unconscious resentment of the neglect of the sexual function." "Such women," says he, "have kept themselves free from abuse of all kinds at the expense of a perpetual and almost fierce activity of mind and muscle. There can be no doubt that many cases of anemia, dyspepsia, hysteria and neurasthenia are due to this conscious or unconscious irritation, kept up by an unsatisfied sexual want."

Freund, a careful student along these lines, considers the nervousity among women today largely due to the injurious action on the sexual life of that repression of natural instincts, on which our civilization is built. He has very clearly stated the subject as follows: "We possess the aptitude of sublimating and transforming our sexual activities into other activities of a psychically related but non-sexual character; this process can not, however, be carried out to an unlimited extent, any more than can the conversion of heat into mechanical force in our machines; a certain amount of direct sexual satisfaction in order to produce the finest results, is, for most organizations, indispensable, and the renunciation of this individually varying amount is punished by manifestations which we are bound to regard as morbid. This process of subjugation of the sexual instinct through sublimation, that is by directing the psychical forces into higher channels, may succeed in some cases, but the majority of women, and indeed men, become neurotic, or otherwise come to grief. Some, by their organization can easily accept it, for others it involves the most serious psychic sacrifices. If, as is said, this struggle steels the character and enlarges the esthetic and ethical side of life for a favored few, with the majority, it does so at the expense of the available physical vigor of the individual, often reducing a joyous and energetic nature to a worn-out and dejected one."

The proper understanding of these sexual differences is of great importance in the compensation of the psychologic characteristics by which women differ from men. It is impossible to believe, even were

no proof available, that the exercise or non-exercise of so vastly important a function can make no difference to the organism generally. The sexual emotions, which have never been definitely aroused, tend, in the healthy woman, to be diffused and unconscious, as is often the sexual impulse itself, while in those sexually aroused, and gratified, the result of continence tends to be acute and conscious.

Balls Headley, in Albutt and Playfairs System of Gynecology, writes: "My views are founded on a really special gynecological practice of twenty years, during which I have collected careful records of over 7,000 cases. I find normal woman sexually well formed, and her sexual feelings require satisfaction; if normal use be withheld, evils ensue; * * * bearing this in mind, * * * the mode of occurrence and of progress of disease grows in the physician's mind, and there is no more occasion for bewilderment, than to the mathematician studying conic sections." He asks: "Has a crowd of unassociated diseases fallen, as through a sieve, on woman, or have these affections almost necessarily ensued from the circumstances of her unnatural surroundings?" By this he says the means the abnormal conditions that civilization has imposed on her.

Asylums reveal to us in the form of repulsive caricatures all gradations and variations of feminine sexual life. Insanity tends to remove the artificial inhibitory influences that rule in ordinary life and that are imposed by civilization, and as mental alienation is due to irritation of the higher brain, certainly much more controlled by the sexual impulse in woman than in man, we would expect to find, as Nacke says, that the sexual manifestations among insane men is much more of a reflex or purely spinal character, onanism, for example, while in woman it is more cerebral in type and chiefly exhibited in erotic gestures, lascivious conversation, and at times the most violent sexual excesses. The eroticism shown in the female wards of an asylum is as well recognized as is the general apathy and sexual indifference observed in the male wards. This is not alone due to the fact that most asylums have male physicians, for the women doctors in the asylum at Zurich can pass, they say, with impunity in the male wards, while in the female wards they cause nearly as much excitement as do the male physicians.

The intensity of the sexual impulse is much more likely to vary from day to day, and from week to week, and the same greater variability is noted when we compare the whole life cycle of woman with that of man, the stress of early womanhood when the reproductive functions are in fullest activity, and of late womanhood, when they are ceasing, produce profound organic disturbances, psychic as well as physical, which are not paralleled in the life of man. Marro's tables covering 2,000 cases in the Turin asylum, in which the age of the first appearance of insanity was known, shows very delicately and clearly the great variability in the cycle of woman's life as compared with man's. At the age of twenty the curve in both sexes runs equal, from that age onward, the curve in man proceeds in a gradual and equable manner with only the slightest oscillation, on to old age, but in woman the curve is extremely irregular, it remains high during all the years from twenty to thirty, then it falls rapidly below the masculine curve, rising again considerably above his level during the

climacteric years from forty to fifty, after which the curves of the two sexes remain fairly close together till the end of life. The general tendency of this difference in sexual life and impulse is to show a greater range of variation in the life of woman than in man, fairly uniform, on the whole, in men generally, and in the same man throughout life, it varies widely between woman and woman and in the same woman, in different periods of her life. Many alienists have independently noted the tendency to nervous and psychic disorders during the great climax of woman's sexual emotions, that is, between twenty-five and thirty years; at this time its primitive force often dominates her whole nature. Much more noticeable is this in virgin woman. Prostitutes almost never suffer from neurasthenia or hysteria, notwithstanding the excesses of all kinds in their unhappy lives. Women bear sexual excesses much better than men.

Notwithstanding the truth of the axiomatic statement, that the fundamental expressions of life, under normal conditions, bring only physical vigor, intellectual sanity, and emotional pacification; in spite of the fact that the physician might feel certain that in certain selected cases extra conjugal coitus would benefit his patient, both physically and psychically, he must ever consider that he is likewise guardian of her morality, that under modern conditions sexual relations are forever denied to the unmarried woman, he cannot recommend it any more than he can advise a hungry man to steal, the decrees of civilization are contrary to the primitive natural instincts, and though at times very difficult to conform to, though he knows that, from a physical standpoint alone, the same act cannot become good or bad because performed in or out of wedlock, almost never would he be justified in advising transgression of the moral code, as such transgression practically always spells disaster for the girl, tends to violate the sanctity of the home, and is harmful to the community as a whole.

Ella Wheeler Wilcox says: "Sorrowing virtue is more ashamed of its woe than unhappy sin, because the world has tears for the latter and only ridicule for the former."

Reports of Cases.

Case 1—Jewess, age 19; well nourished and educated; family history not obtainable; has lived with, and helped her aunt during the last six years; is very religious, retiring, and fond of reading, going very little in men's society, occasionally to the theater with her sister; her aunt says she is a regular home girl. Three years ago she had an attack resembling hysteria, lasting two or three weeks, but was not sent away. One year ago for similar condition she was sent to St. Mary's Hospital, where she had to be restrained, her language and movements being decidedly sensuous and erotic; she was sent to the County Asylum, and discharged, cured after a few weeks, remaining well till her present third attack. Three weeks ago, she went to work in an overall factory, worked five days and quit of her own accord, becoming noticeably restless. Two days before coming to the hospital she attended a wedding and danced considerably. Next morning she was much more restless, and impudent, refusing to eat, or dress; she tore her night gown and the bed clothes, and was again taken to St. Mary's Hospital, where she had to be re-

strained; she shouted and thrashed around under the restraining sheet, tearing her night gown and the sheet to shreds. She was much more excited when the doctors entered the room, the presence of a young orderly, especially, arousing her to the most lascivious movements. She shouted: "Come to me, take me away," holding her arms out to him, and once grabbing and drawing him to her, passionately kissed him, showing every sign of amorous intoxication. She was again sent to the County Asylum.

Case 2—Creole, age 17, born in the West Indies, was brought to St Mary's Hospital in condition of restless excitement, which became so pronounced that she had to be restrained; she was given bromides, chloral, hyoscin, etc., with but little effect. She refused finally to eat or take medicine; her movements and language were obscene and incessant but gradually ceased from sheer weakness; death ensued on the sixth day. The death certificate was signed by the house physician. "exhaustion neurosis." The woman for whom she had worked as domestic, described her as ladylike and respectful, and as a good and virtuous girl.

Case 3—German, aged 29, married. I could obtain no family history and can only state that on November 16th, 1910, at midnight, she walked into St. Mary's Hospital, complaining of feeling weak; she was very restless; pulse, temperature and respiration normal; she became progressively more restless and noisy, keeping up lascivious movements and language continually day and night, despite large doses of the recognized sedatives; she became progressively weaker, till on the eighth day after entering the hospital, apparently not a very sick woman, she died.

Case 4—Married woman aged 30; family history negative; mother of one healthy eight-year-old boy; had always enjoyed good health till last illness. After a rather severe attack of bronchitis, she complained of vaginal discharge, which proved to be gonorrheal in character. Examination of the husband showed him to be suffering from both gonorrhea and syphilis, which, he said, he had contracted three months before, while away at a convention. Because of his condition and hers, sexual abstinence had been practiced for some time; I first saw her in a condition of maniacal delirium, she had not slept for several nights; to the horror of her mother, husband, and son, she was using most obscene and sensuous language, and going through most lascivious movements; at one time she professed the deepest love, at the next the most intense hatred for her husband; she was given large amounts of sedative drugs with but little effect, it seemed impossible to quiet her. After four days in this condition, her pulse, temperature, and respiration, running very high, she died, apparently from exhaustion. Her husband says she was an intensely passionate woman.

Case 5—Young Woman of 34, brought by her husband to my office in 1910, in condition of maniacal excitement, talking incessantly and disconnectedly, moving about the room, tossing her hands in the air, dancing, slapping her knee, etc., etc. In spite of these actions, she had an air of culture and refinement. She was sent to Oak Grove Sanatorium, where she became violent, but was discharged, cured, after nine months, remaining so to date. Her hus-

band says that because of the undeveloped condition of her sexual organs, coitus was never accomplished and seldom attempted. He says further, that while very affectionate, she is neither very religious nor very sensual. Just preceding the above-mentioned attack, she had been receiving electrical treatment for the development of her sexual organs at an institution of questionable reputation.

Case 6—Married woman of 36, physically and mentally sound, well educated and refined; family history negative; was married at the age of 18, for 17 years never became pregnant; sexual appetite was strong in both herself and husband, so strong, in fact, in the latter, as to produce premature orgasm, accompanied or immediately followed by a state of somnolence almost resembling a swoon, thus never bringing sexual satisfaction to his wife. After several years of married life, patient began to suffer from slight hysterical attacks preceding each menstrual period. These attacks were accompanied by purging, vomiting, and gastric pain, continuing till the function was fully established, after which she would be perfectly well till the next period, only to repeat the experience. As the years passed this condition became progressively worse, her suffering became intense, till her condition became critical. She consulted New York specialists, and spent six months in a large and well-known sanatorium in the east. The opinion of the eastern experts coincided with the advice given in Detroit, that motherhood and sexual satisfaction would probably bring relief. Fearing to lose his wife, in final desperation, a consultation of the husband, wife, and her mother, determined on the heroic, self-sacrificing course of providing a sexual mate of known character and physical health, with the predicted result that the intermenstrual crisis ceased, and after about four months the wife became pregnant, gave birth to a healthy boy, and has remained well and happy ever since.

Case 7—Convent-bred girl of 18, of negative family history, except that mother was nervous. First saw her five years ago at the Red Cross Hospital, this city, where, in spite of being under a restraining sheet, she was tossing her nude body violently about the bed, talking obscenely, making faces at those present in the room, and exhibiting the most sensuous movements. Her sister, who was present, was naturally much worried and grieved at her condition, which, she said, she utterly failed to understand, as patient had always been of a modest, retiring disposition, and, when not at school, had been called a stay-at-home; she had had several similar, though much milder attacks, and was always somewhat restless preceding her menses. Sedatives were given, and after two weeks she became practically normal. The sister was told that if patient could be happily married, attacks would probably cease, when to the surprise of the two physicians present, she remarked: "If you mean sexual intercourse, I can see that she gets that." She was of course told that illicit intercourse was not intended, that the final results of such a course would certainly be worse than her present condition, to which she replied: "I am a trained nurse living in another city, with a home of my own, and know just what I am saying. I would rather have happen to my sister what I suggest, than have her go to an insane asylum; if she becomes pregnant, I'll shield her

and adopt the baby." Suffice it to say, that an unhappily married man of forty, whom the sister had nursed through typhoid fever, was chosen. He cared for her sexually and otherwise for over three years, during which time she was perfectly well, though not happy, because she felt she was not doing right, and besides, she said, she loved her provider and wanted to marry him. Consideration, however, on his part for his eighteen-year-old daughter deterred him from applying for a divorce and marrying his ward. After three and a half years of this life, she became engaged to, and married a young German, her provider furnishing her with a suitable trousseau and over \$300 in money. He now regrets that he did not so arrange things that he could have lawfully married and kept her. She continues well and has never become pregnant.

In closing, I would say that I have, in the article proper, drawn freely from the works of Havelock Ellis, Forel, Kisch, and other well-known writers along these lines.