



MEDICAL CLASSICS

The Sims Speculum

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(Condensed from *Bulletin Sloan Hospital Women*, September 1957)

IN 1845 J. Marion Sims, a young American surgeon who insisted on washing his hands thoroughly before operating, began his experiments on the now legendary slaves, Anarcha, Betsy, and Lucy, victims of vesico-vaginal fistulas. After repeated, fruitless attempts, about 40 in number, to cure these wretched creatures, Sims ultimately succeeded with the aid of silver sutures and the improved exposure provided by the knee-chest position and a vaginal speculum now named for him.

The speculum designed by Sims was fashioned initially from a pewter spoon. Although neither original with him nor extraordinary, it is still known as the *Sims speculum*.

When introduced and held properly, he explained in 1852, it causes no pain whatever. It is well enough to have 2 or 3 of different sizes, so as to be prepared for any case. The one ordinarily used by me is about 2½" from . . . where it supports the sphincter, to its terminal extremity. . . . Its concavity . . . serves to reflect a strong light down on the vaginovesical septum, the seat of fistula. Its breadth . . . is about ⅞ths of an inch, widening a little as it approaches the end, making it somewhat in the shape of a duck's bill. The handle is made strong and unyielding, because a considerable degree of leverage has to be

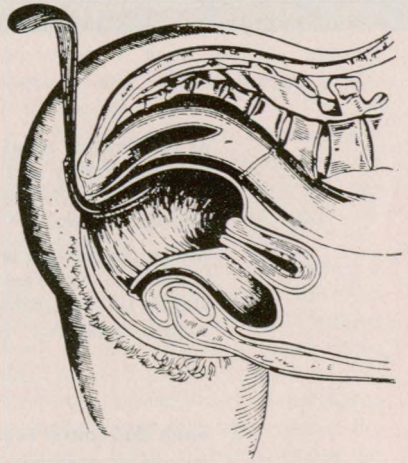
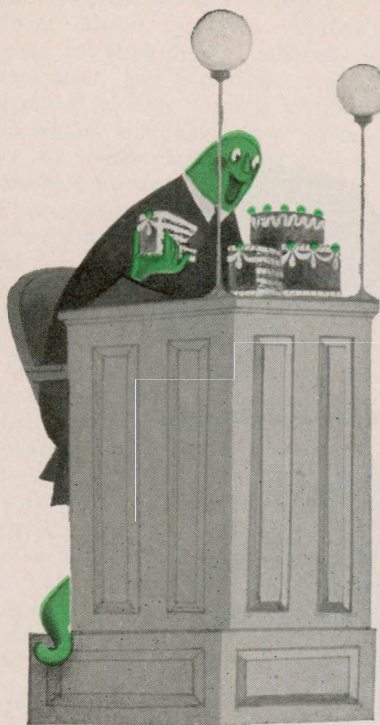


Illustration from Sims' paper, showing his vaginal speculum in place, with the patient in the knee-chest position (*American Journal Medical Sciences*, Jan. 1852).

exercised by it. The curve . . . being cushioned to prevent its hurting the forefinger, fits accurately over it. The whole instrument is made of German silver, the concavity being highly polished for reflecting the light. . . .

These simple instruments [including a small spatula retractor], with this position and a good light, are all that are necessary for obtaining an accurate view of the parts. If the vagina and outlet are ordinarily capacious, a good strong northern light, of a clear day, from a large solitary window, is all-



When
Temptation
puts him
on trial...

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sufficient. But if this canal has been narrowed by cicatrices after extensive sloughs, or from other causes, then sunlight is absolutely necessary for every stage of the operation from first to last. For this purpose, a small table is placed near a window admitting the sunlight. An assistant, sitting by, adjusts on the table a glass . . . some 8 or 10" in diameter, so as to throw the rays of light into the vagina, which, passing to the right of the operator, and striking the concave surface of the bright speculum, are reflected down on the anterior vaginal paries, making everything perfectly distinct.

Although Sims was to receive credit for this speculum, an almost identical instrument of polished silver had already been used in fistula repairs by von Metzler.

James Marion Sims, the first of 8 children and "the father of American gynecology," was born in Hanging Rock, Lancaster County, South Carolina, January 25, 1813. As a boy he aspired to become a clerk in the village general store, but instead entered the College of South Carolina, under the urging of his parents and to bolster his qualifications for the affections of Theresa, daughter of Dr. Bartlett Jones, the community's leading physician. Sims, whose father was in constant debt to the Joneses, failed to win their approval as a companion for their daughter, but she finally became Sims' wife nonetheless, serving as a bastion of support to him throughout the turbulent years of his later life.

He began the study of medicine in the office of Dr. G. Churchill Jones, in Lancaster, S. C., enrolled in the Medical College of Charleston 2 years later, and ultimately transferred to Jefferson Medical College in Phila-

delphia, where he graduated in 1835. Returning to Lancaster, he entered practice at age 22, but soon moved to Mount Meigs, Alabama. Another move, to Montgomery, followed 5 years later, and here Sims rapidly developed a large surgical practice, successfully performing new operations for clubfoot and strabismus, and beginning his work toward the cure of vesicovaginal fistula. Seeking relief from the dysentery that had plagued him for several years and seriously undermined his health, he moved with his wife and 6 children to New York in 1853.

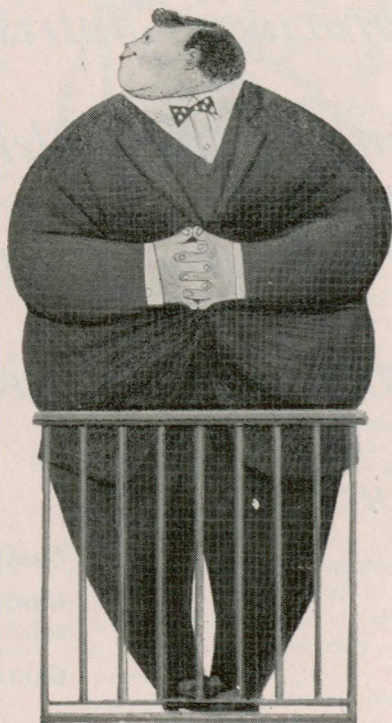
His name now well known as a result of his published success in fistula repair, Sims set out to establish a gynecological hospital, the first of its kind in America. He succeeded in 1855 in founding a small hospital for women at 83 Madison Avenue, the forerunner of the famous Woman's Hospital of the State of New York. He served as Surgeon-in-Chief to this institution, where he attained great renown, until 1862, when he took up residence in Europe, dividing his time between London and Paris for the next 6 years and accumulating honors and wealth.

In 1871, Sims returned to New York and resumed his activities at the Woman's Hospital. He soon became embroiled in controversy with the hospital's board of managers over their policy of refusing admission to cancer cases and was finally forced to resign in 1874. Eloquent in his appeal for medical facilities for patients suffering from cancer, Sims lost little time in establishing a separate hospital, which has gradually evolved into the present Memorial Center for Cancer and Allied Diseases.

He died on November 13, 1883.

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