

Chapter 9 — Venereal Diseases

from the 1938 edition of *The Sex Life Before and After Marriage* (a.k.a. *Living a Sane Sex Life*)
by
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Sources for Chapter 9, in the order in which they first appear

- (1) Millard S. **Everett**, Ph.D., *The Hygiene of Marriage: A Detailed Consideration of Sex and Marriage* (New York: The Vanguard Press, 1932)
- (2) William S. Sadler, M.D., F.A.C.S., ***The Essentials of Healthful Living*** (New York: The Macmillan Company, 1925)
- (3) William J. **Fielding**, *Sex and the Love-Life* (New York: Dodd, Mead & Company, 1927)
- (4) Albert Edward **Wiggam**, *The Fruit of the Family Tree* (Indianapolis: The Bobbs-Merrill Company, 1924)

Key

- (a) **Green** indicates where a source author (other than Sadler) first appears, or where he/she reappears.
- (b) **Magenta** indicates an earlier Sadler book.
- (c) **Yellow** highlights most parallelisms.
- (d) **Tan** highlights parallelisms not occurring on the same row, or parallelisms separated by yellowed parallelisms.
- (e) An underlined word or words indicates where the source and Sadler pointedly differ from each other.
- (f) **Pink** indicates passages where the Sadlers specifically share their own experiences, opinions, advice, etc.

- (g) **Light blue** indicates passages which strongly resemble something in the Urantia Book, or which allude to the Urantia phenomenon.
- (h) **Red** indicates either an obvious error on the Sadlers' part, brought about, in some cases, by miscopying or misinterpreting their source, or an obvious inconsistency brought about by the Sadlers' use of an earlier Sadler text.
- (i) **Gold** highlights key words or themes which will be discussed in the analysis of the chapter.

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21 April 2013

Work-in-progress Version 7 nov. 2011
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 Revised 21 April 2013

IV: VENEREAL DISEASES (Everett 55)

[PREAMBLE] (Everett 55)

The venereal diseases are so called because of their association with venery (Latin *venereus*, pertaining to Venus), or sexual intercourse.

To the various fictitious explanations as to how an infection was acquired the physician lends a politely listening but incredulous ear, knowing that among adults not one case in ten thousand is caught otherwise than by intercourse with a diseased person (Ev 55).

[contd] There are three venereal diseases: Gonorrhoea; Chancroid, or Soft Chancre; and Syphilis (Ev 55).

XLVI: THE PREVENTION OF SEX DISORDERS (*The Essentials of Healthful Living* 395)

THE GREAT BLACK PLAGUE (*The Essentials of Healthful Living* 396)

It is estimated that there are 4,000,000 persons in the United States who have had syphilis some time in their past lives. It has been stated on good authority that eight out of every ten men in New York have had gonorrhoea, and that three out of every five married women have acquired the disease in some degree as the result of its prevalence among the male population.

IX — VENEREAL DISEASES

9:0.1 Venereal diseases get their name from their association with venery, sexual intercourse.

To the patient's various fictitious explanations as to how an infection was acquired, the physician listens politely but without confidence, knowing that not once in ten thousand times is a person infected except by intercourse with someone who is diseased.

There are three venereal diseases: gonorrhoea, chancroid, or soft chancre, and syphilis.

9:0.2 It is thought by authorities that 4,000,000 persons in the United States have had syphilis some time in their lives, that eight out of every ten men in New York have had gonorrhoea, and that three out of every five married women have acquired it because of its prevalence among the male population.

SOURCE

Surgeons and gynecologists estimate that 70 per cent of operations done on the female pelvis are the result of gonorrheal infections, and that 80 per cent of the deaths from infection and inflammation of the female generative organs are the result of this same disease (*EHL 397*).

[contd] Other authorities estimate that about 50 per cent of the sterility of both men and women is caused by gonorrheal infection.

It is believed that about 10 per cent of our blindness, and about 75 per cent of the blindness of the new-born, are due to this disease (*EHL 397*).

[contd] Taking the country as a whole, students of this subject have arrived at the opinion that about one man in ten in the United States has syphilis; whereas, only about one woman in fifty is infected with this disease (*EHL 397*).

[More than one-half million men, women, and children in the United States become infected with syphilis every year, many of them innocently (Health Commissioner Herman N. Bundesen, Chicago Board of Health Letter, 1937, cited in *Chicago's War on Syphilis, 1937-46* [1995], by Suzanne Poirier).]

[contd] Pusey thinks that 5 per cent of men and 1 per cent of women of this country are syphilitic—about 3 per cent of the entire population (*EHL 397*).

[contd] We know that 80 or 85 per cent of American prostitutes have syphilis at some time (*EHL 397*).

9: LIVING A SANE SEX LIFE

According to surgeons and gynecologists, 70 per cent of the operations done on the female pelvis are necessitated by gonorrheal infections, and 80 per cent of the deaths due to infection and inflammation of the female generative organs are chargeable to this disease.

9:0.3 About 50 per cent of the sterility of both men and women is thought to be caused by gonorrheal infection.

It is believed that about 10 per cent of blind persons have gonorrhea to thank for their handicap and that about three-quarters of the blindness of the new-born is due to this disease.

9:0.4 Careful students of venereal diseases think that, taking this county as a whole, about one man in ten has syphilis, while only one woman in fifty is so infected.

More than one-half million men, women, and children in the United States become infected with syphilis every year.

9:0.5 It is Pusey's opinion that 5 per cent of men and 1 per cent of women in the United States are syphilitic—about 3 per cent of the entire population.

9:0.6 Eighty or 85 per cent of American prostitutes have syphilis at some time.

SOURCE

[contd] While we do not know the exact number of deaths due to venereal infection—because of the fact that the death certificates do not state these facts, but attribute death to some other complication or associated disorder—it is safe to say that more people **die** each year from venereal infections in the United States than from tuberculosis.

One authority estimates two and one-half times as many (*EHL* 397).

[contd] It is probable that at any time about 5,000,000 men and women are suffering with some stage of gonorrhoeal infection in this country (*EHL* 397-98).

[contd] In the United States Army the rate of syphilis is probably not over 5 per cent, or one case in every twenty men, at the present time (*EHL* 398).

[contd] On the average, syphilis shortens life four or five years. In 25,000 insurance risks, life was shortened five and one-half years (*EHL* 398).

GONORRHEA (*The Essentials of Healthful Living* 398)

[contd] Gonorrhoea is an infection of any mucous membrane by the gonococcus microbe. It may involve the eye and the joints as well as the sex organs.

It is nearly always contracted during sex relations.

9: LIVING A SANE SEX LIFE

9:0.7 Because of the failure of physicians to recite all the facts on death certificates, the exact number of deaths due to venereal infection is unknown, but we are quite within the truth in saying that more people **die** every year from these infections in the United States than from tuberculosis.¹

One authority estimates two and one-half times as many.

9:0.8 Probably some 5,000,000 men and women in the United States suffer from some stage of gonorrhoeal infection all the time.

9:0.9 The syphilis rate in the **United States** is probably not over 5 per cent at the present time.

9:0.10 Taking the population as a whole, syphilis shortens life four or five years. The average life in 25,000 insurance risks was shortened five and one-half years.

1. GONORRHEA

9:1.1 Gonorrhoea, an infection of the mucous membrane by the gonococcus microbe, may involve the eyes and the joints as well as the sex organs.

It is practically always contracted during sex relations.

SOURCE

This germ many times invades the blood and may result in producing heart disease and rheumatism, and when it affects the eye, it sometimes results in blindness, particularly in the case of the new-born babe (*EHL* 398).

[contd] This infection usually comes on five or six days after exposure, and the early symptoms consist in painful urination accompanied by a whitish discharge.

The disease in some cases runs a short acute course for a few weeks, and in others it becomes chronic, infecting more deeply seated organs, like the prostate gland in the male, or the fallopian tubes in the female, in which case it runs a course for months or even years (*EHL* 398).

[contd] It is this chronic form in the male that makes so much trouble in the case of marriage and results in infecting so many innocent wives, leading to mutilating surgical operations, and thus, in many cases, making it impossible for the young wife to become a mother.

Sterility is therefore one of the serious consequences of gonorrheal infection.

In this way, as well as by producing stricture and in numerous other ways, do these venereal infections cripple for life

and though gonorrhoea does not often result in death, it is a great destroyer of health, happiness and fertility (*EHL* 398).

9: LIVING A SANE SEX LIFE

The germ often enters the blood and produces heart disease or rheumatism; gonorrheal infection of the eye sometimes causes blindness, especially in the new-born.

9:1.2 Gonorrhoea usually develops four to six days subsequent to exposure, the early symptoms consisting in painful urination accompanied by a whitish discharge.

The disease may run an acute course for a few weeks, or it may become chronic and infect such deeply seated organs as the prostate gland of the male and the fallopian tubes of the female; these chronic forms may persist for months or even years.

9:1.3 Men having the chronic form infect thousands of innocent women, their wives, who must often submit to mutilating surgical operations, which often result in sterility.

This is one of the serious consequences of gonorrheal infection.

This is only one of the various ways in which venereal infections cripple men and women for life.

Gonorrhoea does not often cause death, but it is an arch enemy of health, happiness, and fertility.

IV: VENEREAL DISEASES (Everett 55)

GONORRHEA (Everett 55)

An infected prostate gland requires prolonged treatment. It is a focus of infection from which there may arise numerous systemic illnesses including arthritis (rheumatism) and heart disease (Ev 56).

No case of gonorrhea can be cured while infection remains in the prostate, because every ejaculation of semen means reinfection of the urethra.

Infection of the seminal vesicles is not less serious than an infected prostate.

An infected testicle is an extremely painful thing and frequently causes long periods of disability.

Even uncomplicated gonorrhea limited to the anterior urethra may cause an exceedingly painful type of arthritis (Ev 56).

In women, a gonorrheal infection ... may be limited to the external genital organs. Here the germs which are received from the penis are rubbed into the openings of the two female lubricating glands (the glands of Bartholin) ... Then the urethra and bladder become infected.... If the infection ascends into the vagina, the bacteria next lodge in the deep-seated glands of the cervix ... The infection, if not treated, usually does not stop here but ascends through the cavity of the uterus to the tubes (Ev 56-57).

9:1.4 Infection of the prostate gland requires prolonged treatment; from this focus of infection numerous systemic illnesses, such as arthritis (rheumatism) and heart disease, develop.

Gonorrhea cannot be cured so long as the prostate is infected because every ejaculation of semen reinfects the urethra.

Infection of the seminal vesicles is just as serious as an infected prostate.

Such a testicle is very painful and frequently results in long periods of disability.

An extremely painful type of arthritis may result from an uncomplicated gonorrhea limited to the interior urethra.

9:1.5 In women the infection begins in the vagina and spreads to adjacent organs, including the urethra, the glands of Bartholin, the cervix, the uterine mucosa, and the fallopian tubes.

XIII: VENEREAL DISEASES (Fielding 250)

GONORRHEA (Fielding 251)

When the Fallopian tubes become infected, pus forms as a result of the inflammation.... When the collection of pus seals both ends of the tubes, forming “pus tubes,” a chronic inflammation usually ensues which may require an operation to remove the diseased parts (F 257).

IV: VENEREAL DISEASES (Everett 55)

GONORRHEA (Everett 55)

The treatment of gonorrhoea must be begun early and persisted in for long periods if a cure is to be effected.

It should at all times be prescribed and supervised by a competent physician, preferably a specialist in genito-urinary diseases.

In no case should it be left to the dubious judgment of a druggist who “prescribes” remedies (invariably the wrong ones), or an advertising quack whose only aim is to secure his patient’s money (Ev 58).

A cessation of discharge does not mean a cure,

and no one is justified in believing himself cured until several tests have shown that he no longer harbors the gonococcus, or other bacteria, in any part of the genital tract (Ev 58-59).

An infected fallopian tube—in common parlance a “pus tube”—is a painful and dangerous complication and frequently necessitates surgery.

9:1.6 Gonorrhoea can be cured only by early and persistent treatment over long periods of time.

Such treatment should always be supervised by a competent physician, preferably by a genitourinary specialist.

It should never be left to the judgment of a druggist who “prescribes” remedies (invariably the wrong ones) or to an advertising quack.

A patient is not necessarily cured when the discharge ceases.

Whether or not one is cured can only be determined by a succession of tests which show that the genital tract is free from the gonococcus and other bacteria.

XIII: VENEREAL DISEASES (Fielding 250)

GONORRHEA (Fielding 251)

[See F 255.]

In cases of [the milder] kind, however, when the disease may be said to be latent, the woman is quite capable of infecting others. While she does not suffer herself, she is a “carrier” and may give a virulent case of gonorrhea to anyone whom she infects, either in sexual congress or by spreading the germs on bed-clothes, sponges, towels, syringes, etc. (F 256).

9:1.7 Gonorrhea in women is more difficult to treat than in men for the reason that many of the infected parts are inaccessible, so that local treatment cannot be applied to them.

Under lengthy treatment the acute stage passes,

but the disease may remain latent indefinitely and may be transmitted, even though there are few or no symptoms of active infection.

2. SYPHILISXLVI: THE PREVENTION OF SEX DISORDERS (*The Essentials of Healthful Living* 395)SYPHILIS (*The Essentials of Healthful Living* 395)

[contd] Syphilis is a disease caused by a small animal parasite called the spirocheta pallida,

and while this whole volume might be filled with the description of the symptoms and sorry results of syphilis, the following summary by Stokes is right to the point: (EHL 399) [See 9:2.7 for Stokes’s summary.]

9:2.1 Spirocheta pallida, a minute animal parasite, is the cause of syphilis.

A volume could be devoted to a description of the symptoms and tragic results of this disease,

but the following brief description will serve our present purpose.

IV: VENEREAL DISEASES (Everett 55)

SYPHILIS (Everett 59)

The typical course of the disease is about as follows: In from eight to forty days after exposure there appears, usually on the external genitals, a tiny, scarcely noticeable vesicle which grows with much thickening and hardening of the skin.

As time passes, the center of the sore turns into a brownish mass and sloughs out, leavening a shallow ulcer.

The involved area is strikingly hard, but not painful.

It may become quite extensive and persist for a long period, but eventually it disappears, leaving a scar.

This lesion is the chancre (often called hard chancre to differentiate it from chancroid), and its appearance marks the primary stage of syphilis.

It may occur within the urethra in men, in which case it may be small and escape detection (Ev 59).

9:2.2 The first indication that one has been infected with syphilis is the appearance, somewhere between eight and forty days after exposure, of a vesicle, so small as hardly to be noticed, on the external genitals; this vesicle begins to grow with much thickening and hardening of the skin.

The center of this sore turns brown in color and sloughs out, leaving a shallow ulcer.

There is no particular pain, but the area is very hard.

While it may spread and persist for a long time, it finally disappears, but leaves a scar.

This is known as the hard chancre; its appearance marks the primary stage of syphilis.

This lesion sometimes comes within the urethra of the male, in which event it may be too small to be noticed.

SOURCE

[Compare Ev 59-60.]

This stage is characterized by a variety of signs and symptoms which indicate that the spirochetes have been spread throughout the body by the blood and have multiplied in certain areas on the skin and mucous membranes (Ev 59-60).

The blood, however, at this stage will usually give a positive Wasserman or Kahn test (Ev 60).

[contd] A tertiary stage appears later, sometimes after an interval as long as twenty years, during which time the individual may believe himself cured.

During this stage characteristic lesions, known as gummas, form and result in extensive destruction of tissue.

They may appear anywhere. Obviously they are more dangerous to life if they involve any of the vital organs.

The liver is frequently affected.

9: LIVING A SANE SEX LIFE

9:2.3 Eight to ten weeks after the infection the secondary stage begins, often before the chancre heals. The characteristic feature of this stage is a rash which may assume a great variety of forms, but usually appears as ham-colored spots on the chest, subsequently spreading over the body and frequently involving the mucous membranes, particularly those of the mouth and throat. Fever, headache, and muscular pains are among the symptoms of this stage. When this rash fades, which it usually does, it leaves no mark except a temporary darkening of the skin it has affected.

By the time the second stage is reached, the blood has carried the spirochetes throughout the body, and they have multiplied in certain areas of the skin and mucous membranes.

A positive Wassermann reaction is usually first given by the blood during this stage.

9:2.4 The third or tertiary stage may not develop for many years, the patient in the meantime believing himself cured.

This stage is characterized by lesions known as gummas, which destroy tissue extensively.

While they may appear anywhere, they are of course most dangerous to life when they involve a vital organ.

The liver is often affected.

SOURCE

Sometimes the wall of the aorta is so weakened by syphilitic tissue changes that it bulges to many times its normal diameter. In this condition it is very prone to sudden rupture, and, when this occurs, death follows immediately (Ev 60).

[contd] Involvement of the nervous system is frequently spoken of as a fourth stage.

If the spinal cord is involved, the condition called *tabes dorsalis* (locomotor ataxia) follows.

If the brain is the site of the attack, a type of insanity known as general paresis, or *dementia paralytica* (commonly called “softening of the brain”), ensues.

It is characterized by a false sense of well-being, blurred speech, delusions of grandeur, etc., and it culminates in the retrogression of the mind to the level of an animal (Ev 60-61).

IV: WHAT EDUCATION TELLS (Wiggam 63)

People often say that syphilis is inherited and the sins of the father in this case visited upon the child. This is one instance where the father’s sin is visited upon the children, but *not by heredity* (W 68).

In order to designate syphilis and such things as physical injuries and defects in physiological functions sometimes present in new-born babes, the word “congenital” is now used, which means “born with” as distinguished from true hereditary defects which are due to defects in the germ-cells themselves (W 69).

9: LIVING A SANE SEX LIFE

The wall of the aorta may be so weakened by syphilitic changes that its normal diameter is greatly increased; this usually results in sudden rupture, which causes immediate death.

9:2.5 The fourth stage is marked by involvement of the nervous system.

When the spinal cord is affected, *tabes dorsalis*, locomotor ataxia, follows.

General paresis, or *dementia paralytica*, softening of the brain, occurs when the infection attacks the brain.

The symptoms of this condition are: a false sense of well-being, blurred speech, delusions of grandeur, etc.; the mind gradually degenerates to the low level of that of an animal.

9:2.6 Contrary to popular belief, neither syphilis nor any other disease for that matter, is *hereditary*.

It is *congenital* when the child of a syphilitic mother is infected during birth.

SOURCE

Of course the [infected] mother is usually entirely innocent and often shows no symptom of the disease. But the child is **foredoomed** to this frightful infection which often kills it or wrecks it for life (W 69).

XLVI: THE PREVENTION OF SEX DISORDERS (*The Essentials of Healthful Living* 395)

SYPHILIS (*The Essentials of Healthful Living* 399)

[contd from 9:2.1] Summing up briefly the main points to bear in mind about the course of syphilis—

there is a time, at the very beginning of the disease, even after the first sore appears, when the condition is still at or near the place where it entered the body.

At this time it can be permanently cured by quick recognition and thorough treatment.

There are no fixed characteristics of the early stages of the disease, and it often escapes attention entirely or is regarded as a trifle.

The symptoms that follow the spread of the disease over the body may be severe or mild, but they seldom endanger life, and again often escape notice, leaving the victim a danger to other people from relapses about which he may know nothing whatever.

9: LIVING A SANE SEX LIFE

A child so terribly handicapped is **doomed** to ill-health throughout its usually short life.

9:2.7 **Stokes** briefly sums up the principal points to be borne in mind about syphilis as follows:

For a little while, in the very earliest stage of the disease, even after the appearance of the first sore, the condition is still centered at or near its point of entry into the body.

If it is discovered at this time, it can be permanently cured by prompt and thorough treatment.

The early stages of syphilis are so lacking in characteristic symptoms that it often escapes attention entirely or is regarded as minor matter.

The symptoms accompanying the spread of the disease in the body may be severe or mild, but they are very rarely dangerous and may be so insignificant as to escape notice; the victim, meantime, for some years is a menace to others from relapses of which he may not be aware.

9:2.8 Late syphilis, which attacks those whose earlier symptoms were not recognized or were insufficiently treated, is the serious phase of the disease.

SOURCE

Late syphilis of the skin and bones, disfiguring and horrible to look at, is less dangerous than the hidden syphilis of the blood vessels, the nerves, and the internal organs, which, under cover of a whole skin and apparent health, maims and destroys its victims.

Locomotor ataxia and softening of the brain, early apoplexy, blindness and deafness, paralysis, chronic fatal kidney and liver disease, heart failure, hardening of the blood vessels early in life, with sudden or lingering death from any of these causes are among the ways in which syphilis destroys innocent and guilty alike.

And yet, for all its destructive power, it is one of the easiest diseases to hold in check, and if intelligently treated at almost any but the last stages, can, in the great majority of cases, be kept from endangering life (*EHL* 111-113).

OTHER VENEREAL DISEASES (*The Essentials of Healthful Living* 402)

[contd] Soft chancre, in contradistinction to the chancre which constitutes the initial lesion of syphilis, is a semi-filth disease of microbic origin, associated with and affecting the sexual organs.

It is not always easy for the novice to differentiate between this local and apparently harmless chancre and the initial lesion of syphilis, but the experienced physician will always be able to make such a diagnosis.

9: LIVING A SANE SEX LIFE

Late syphilis of the skin and bones, disfiguring and horrible as it is, is less dangerous to life than that of the blood vessels, the nerves, and the internal organs, which destroys its victims under cover of a whole skin and apparent health.

Locomotor ataxia and softening of the brain, early apoplexy, blindness and deafness, paralysis, chronic kidney and liver disease, heart failure, hardening of the blood vessels early in life, with sudden and lingering death from any of these causes, are some of the results of this terrible disease which destroys innocent and guilty alike.

But notwithstanding its horrible consequences, syphilis is one of the easiest diseases to control; and more than this, if it is scientifically treated in almost any but the final stages, in the great majority of cases it can be kept from endangering life.

OTHER VENEREAL DISEASES

9:3.1 There sometimes attacks the sexual organs a semi-filth disease due to microbes, which is known as soft chancre in contradistinction to the chancre of the initial lesion of syphilis.

While this apparently harmless chancre very closely resembles the initial lesion of syphilis, an experienced physician can always differentiate between them.

SOURCE

This disease is purely local and leaves no known constitutional after effects.

It has led many of its victims to fear that they had syphilis, and to spend unnecessary worry, time, and money in being treated for a disease they never had (*EHL* 402).

[contd] Much of the prostatic trouble of old men and the so-called “female complaints” of women owe their origin to venereal infections, while of course many instances are due to perfectly natural causes—to age in the case of prostatic enlargement—and are in no way connected with these diseases of sex misbehavior (*EHL* 402).

[contd] Many cases of so-called “female complaint”—if they are not more or less imaginary—owe their existence directly or indirectly to the performance of abortions.

One authority, not long since, estimated that one-half of all pregnancies in the United States were terminated by abortion, while another physician estimates that there are between 50,000 and 75,000 abortions performed each year in Chicago (*EHL* 402-03).

THE PREVENTION OF VENEREAL DISEASE (*The Essentials of Healthful Living* 403)

[contd] Of all the problems of preventive medicine there is none that has probably produced so much discussion and resulted in so much heated argument as the question of the prevention and control of venereal disorders.

9: LIVING A SANE SEX LIFE

Soft chancre is purely local and leaves no known constitutional after-effects.

Many of its victims have feared they had syphilis and have unnecessarily spent time and money in being treated for it.

9:3.2 The prostatic trouble of elderly men and the “female complaints” of women are often due to venereal infections, although of course many cases, particularly of prostatic enlargement, are due to perfectly natural causes and are in no way connected with diseases caused by sexual missteps.

9:3.3 Many bona fide “female complaints” are directly or indirectly caused by abortions.

One authority has estimated that one-half of all pregnancies in the United States are terminated by abortion, while another has expressed the opinion that there are between 50,000 and 75,000 abortions performed each year in Chicago alone.

THE PREVENTION OF VENEREAL DISEASE

9:4.1 The prevention and control of venereal disorders have probably provoked more discussion than any other problem of preventive medicine.

SOURCE

In our large cities some believe in segregating prostitutes in the red light district; others believe in breaking up these segregated districts and scattering the prostitutes throughout the city, and it is certainly out of the question in a work of this sort to undertake to discuss or settle these mooted questions of public policy and sanitary procedure (*EHL* 403).

[contd] We are more concerned at this time with the prevention of disease in the individual,

and in this connection I will say that it is my belief that the venereal problem will never be solved until we train our youth, particularly our sons, to look at this matter in the proper light, and to understand that they can grow up to manhood and keep themselves free from those practices which constitute exposure to venereal infection (*EHL* 403).

Instruction of our youth should extend not only to the maintenance of ideals, to the practice of self-control, to those warnings of the dire consequences of venereal infection, and to the dangers of illegitimate pregnancies, but should also appeal to the young man to keep himself clean and healthy to become the head of a future family, and the father of strong and robust children.

In brief, the young man should be taught that he is a trustee of the stream of life, the germ plasm of the race, and that he should in every way possible keep himself a fit channel to pass it on unharmed and untainted as the life-bearing stream to succeeding generations (*EHL* 404).

9: LIVING A SANE SEX LIFE

Some authorities advocate the segregation of prostitutes in the red-light districts of our large cities; others recommend the breaking up of these segregated districts and the scattering of prostitutes throughout the cities, but it is impossible in a work of this sort to undertake to discuss these mooted questions of public policy.

Our concern is with the prevention of these diseases in the individual.

It is our belief that the venereal-disease problem will never be solved until young people, particularly young men, are taught the truth that they can grow up to virile manhood and still keep themselves free from practices which necessitate exposure to venereal infection.

9:4.2 The instruction of our sons and daughters should not only extend to the maintenance of ideals, to the practice of self-control, to warnings of the dire consequences of venereal infection and of the dangers of illegitimate pregnancies, but it should also appeal to the young man to keep himself clean and strong so that he may become the worthy head of a future family and the respected father of healthy and robust children.

Young men should be taught that they are trustees of the stream of life, the germ plasm of the race, and that they should keep themselves fit to pass it on unharmed and untainted to succeeding generations.

IV: VENEREAL DISEASES (Everett 55)

PREVENTION OF VENEREAL DISEASES
(Everett 61)*Preventive Measures for Men* (Everett 61)

[contd] There are various ways by which the venereal diseases can be prevented with almost complete certainty.

A condom used during intercourse will give a fair degree of protection, provided it does not burst.

The condom is objected to, however, because it dulls sensation to some extent. Moreover, it does not protect the pubic region, the scrotum, or the thighs, all of which may be sites of entry of spirochetes.

When a condom has been used, the external genitals and all adjacent parts should be thoroughly washed as promptly as possible after intercourse. Ordinary soap and water is an efficient germicide, though tincture of green soap or mercuric iodide soap would be better.

In the army a 1/1000 solution of bichloric of mercury was used, but it probably is inferior to a soapy solution of mercuric iodide (Ev 61).

[contd] If no condom has been used, not only the washing as discussed in the preceding paragraph should be done, but in addition, particular pains should be taken to cleanse the area around the opening of the urethra, the head of the penis, and the foreskin.

9:4.3 Among the different ways of preventing venereal diseases is the following:

A condom used during intercourse is fair protection if it does not burst.

Objections to the condom are the fact that it somewhat dulls sensation and does not protect the pubic region, the scrotum, or the thighs, and these areas may all be sites for the entry of spirochetes.

If a condom is used, the external genitalia and the adjoining parts should be carefully washed after intercourse with ordinary soap and water, although tincture of green soap or mercuric iodide soap is more effective.

In the United States army a 1/1000 solution of bichloride of mercury has been employed, but this is probably not so effective as a soapy solution of mercuric iodide.

9:4.4 In the absence of a condom the same careful washing should be done as when it is used, but special attention should be given to the thorough cleansing of the area around the opening of the urethra, the head of the penis, and the foreskin.

SOURCE

When thorough washing has been done, the bladder should be emptied. A 2 per cent solution of protargol is then injected into the urethra and retained for five minutes, when it is allowed to drain out.

A 30 per cent calomel ointment is next applied to the penis and rubbed in very thoroughly.

Last of all, a lump of calomel ointment, the size of a navy bean, is placed within the urethra and allowed to remain. The penis is wrapped in toilet paper or any convenient covering.

The urine should not be passed for four hours.

These measures, if applied within two or three hours after intercourse, have a high degree of efficiency in prevention of disease (Ev 61-62).

Preventive Measures for Women (Everett 62)

[contd] Prompt use of a soapy douche containing 2 per cent lysol following intercourse is recommended as the best preventive against venereal infection ordinarily available for women (Ev 62).

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After this washing, the bladder should be emptied and a 2 per cent solution of protargol injected into the urethra and retained for five minutes, after which it should be allowed to drain out.

Following this a 30 per cent calomel ointment should be applied to the penis and rubbed in very thoroughly.

To conclude the protective measures calomel ointment the size of a navy bean should be put in the urethra and left there, the penis being wrapped in something to prevent soiling the clothing.

The urine should be retained for four hours.

If this program is carefully carried out within two or three hours after intercourse, it has been found highly efficient in preventing disease.

9:4.5 The best preventive against infection ordinarily available for women is a soapy douche containing 2 per cent of lysol, which should be taken immediately after intercourse.

1. [It may surprise some to know that while tuberculosis claims 1,000,000 every year, **considerably more than that number (one authority estimating it at two and a half times more) annually contract venereal diseases—of one sort or another** (William S. Sadler, M.D., F.A.C.S., *Race Decadence: An Examination of the Causes of Racial Degeneracy in the United States* (1922), p. 124.)