No. 896,409. PATENTED AUG. 18, 1908.

G. C. McMURTRY.

ANTISEPTIC CONE.

APPLICATION FILED JUNE 26, 1907.

Fig. 1.

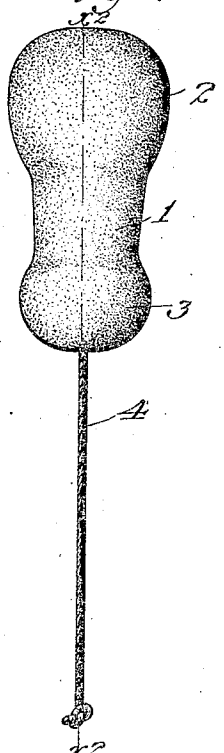


Fig. 2.

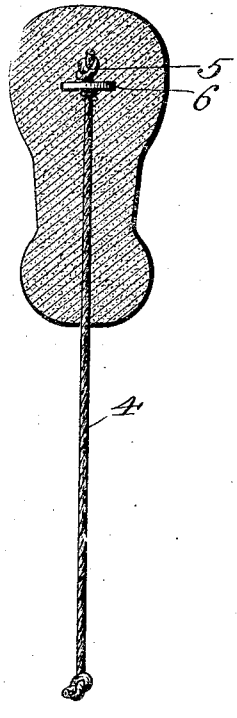


Fig. 3.

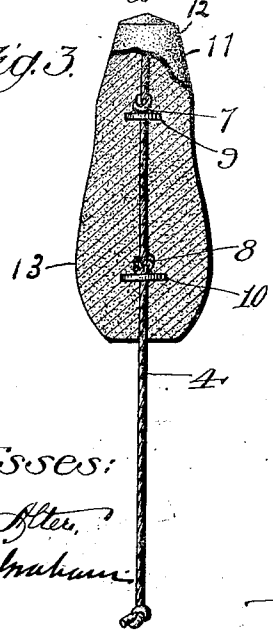
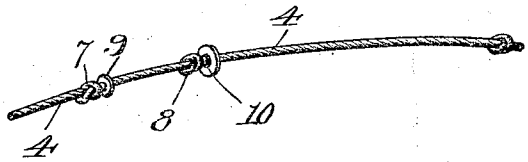


Fig. 4.



Witnesses:

Lutz & Alter.

Frank A. Graham.

By

Inventor.

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His Attorneys.

UNITED STATES PATENT OFFICE.

GEORGE C. McMURTRY, OF LOS ANGELES, CALIFORNIA, ASSIGNOR TO ANTISEPTIC CONE CO., OF LOS ANGELES, CALIFORNIA, A CORPORATION OF CALIFORNIA.

ANTISEPTIC CONE.

No. 896,409. Specification of Letters Patent. Patented Aug. 18, 1908.

Application filed June 26, 1907. Serial No. 380,945.

To all whom it may concern:

Be it known that I, GEORGE C. McMURTRY, a citizen of the United States, residing at Los Angeles, in the county of Los Angeles and State of California, have invented a new and useful Antiseptic Cone, of which the following is a specification.

This invention relates to an antiseptic cone for the treatment of vaginal or rectal diseases or disorders, and one object of the invention is to enable the cone to be readily removed when desired.

Another object is to prevent softening from the inside of the compound of which the cone is composed.

Other objects and advantages will be brought out in the following description.

The accompanying drawings illustrate the invention, and referring thereto, Figure 1 is a side elevation of the vaginal cone. Fig. 2 is a cross section on line X^2—X^2 Fig. 1. Fig. 3 is a sectional view similar to Fig. 2, bu illustrates the rectal cone. Fig. 4 is a perspective of the cord and retaining disks removed from the cone.

The vaginal cone shown in Figs. 1 and 2 comprises a pear shaped body 1, circular in cross section, having an enlargement 2 at its upper end and a smaller enlargement 3 at its lower end, the body being homogeneous and composed of a soluble compound of ichthyol, boracic acid, and other efficacious antiseptics. A cord 4 extends axially into the center of the body 1 and is provided at its upper end with a knot 5, there being a perforated disk 6 below the knot 5, which disk is located concentrically in the body and serves to anchor the cord in the body of the cone. The cord is filled with beeswax to render it water proof to prevent the cord acting as a wick to draw any liquid or excretions up into the center of the cone and cause the cone to soften at the center around the anchor. Thus the center of the cone cannot soften and loosen from its firm anchorage. This form of cone is made to fit the vagina and when it is inserted it opens all the folds of the vagina so that when drawn out it brings out the poisonous and unclean excretions and leaves a soothing, cleansing antiseptic coating in the vagina which destroys all germs and restores the parts to a healthy condition. The cone is readily withdrawn by means of the cord, when desired, thereby permitting of its subsequent use. The cone being soluble, will in time reduce in size as from repeated use, but the cord at all times is firmly held in position as the center of the cone does not soften.

The rectal cone shown in Fig. 3 is shaped to fit the rectum and may be composed of the same substance as the vaginal cone. This cone is also circular in cross section but has its upper end tapering as shown at 11, and preferably pointed as shown at 12, for permitting it to be more readily inserted. The lower end is larger than the upper end as shown at 13, and preferably terminates abruptly to permit of its being retained more easily after being inserted. In this form the cord 4 is shown as being provided with knots 7 and 8, there being a perforated disk 9 below the knot 8, which disks serve as anchors for the cord, giving the cone a firmer construction and also serving as a double anchorage for the cord. The upper end of the cord extends above the disk 9 as shown at 14 which adds rigidity to the tapering end of the cone, and especially when the same becomes reduced in size from repeated use. But in each form of cone one of the disks is located near the upper end so that in withdrawing the cone there will be no danger of the cord being pulled out of the mass and thus leaving the cone inside. The rectal cone when inserted acts both as a dilator and medicator being doubly efficacious as dilation is as well recognized as medication to be a most efficient remedial treatment for constipation and other rectal diseases or disorders.

What I claim is:

1. An antiseptic cone, circular in cross section and comprising a soluble, homogeneous mass of medicinal ingredients, a perforated disk embedded concentrically therein near the upper end, and a cord through said perforation and extending axially through the cone to and projecting from the lower end, said cord being provided with a knot which engages with the upper face of said disk.

2. An antiseptic cone, circular in cross section and comprising a soluble, homogeneous mass of medicinal ingredients, the upper end of the cone being tapering and pointed at its tip, a perforated disk embedded concentrically within the cone near the upper end, and a knotted cord through said disk and extending axially through the cone to and projecting from the lower end, the knot resting on top of the disk and a portion of the cord above

the knot projecting upward toward the upper end.

3. An elongated antiseptic cone, circular in cross section and comprising a soluble, homogeneous mass of medicinal ingredients, the upper end of the cone being tapering and pointed at its upper end, and the lower end being larger than the upper end and terminating abruptly, two perforated disks embedded concentrically within the cone at a distance from each other, and a knotted waterproof cord through the disks and extending axially through the cone to and projecting from one end, the knots of the cord engaging with the upper faces of said disks.

In testimony whereof, I have hereunto set my hand at Los Angeles Cal. this 19th day of June 1907.

GEORGE C. McMURTRY.

In presence of—

GEORGE T. HACKLEY,

FRANK L. A. GRAHAM.