ADDRESS

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BY

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ADDRESS.

GENTLEMEN OF THE MEDICAL SOCIETY OF PENNSYLVANIA:

The mind of man, to which he owes his supremacy as head of created beings, has ever been a mystery. Philosophers have speculated and theorized to account for its mode of action, and the various powers which it manifests; but, having pursued a wrong course in their investigations, they reached no clear and satisfactory conclusions. In consonance with the confused views entertained on the proper exercise of the mental powers in health were the speculations promulgated in reference to their disordered action. But within a comparatively recent period a truer course of investigation has been adopted, and some hope may be entertained of arriving at more enlightened and rational opinions. Careful observation of the mental functions, and true philosophic reasonings on the facts and legitimate inferences and deductions from those facts have only been attempted within a recent period, and by this course alone may we hope to establish such a mental philosophy as will guide us in our investigations into disordered action. In examining into disordered conditions of the mind, we must not allow the false lights of fancy to lead us from the true path, but, keeping truth constantly before us as a guiding star, allow each faculty of our minds that true balance and exercise which will conduct us to a true judgment in any particular case. The progress in the knowledge of mental disorders has been commensurate with the great advance which has attended the science of medicine generally. With the greater attention to physiology and the allied branches, men have given more careful study to those parts of the bodily organization which are concerned in mental manifestations. No question now arises that "the brain is the minister of the understanding," and that to its disordered condition are to be traced the deranged manifestations of mind. It is useless in this presence to attempt to cite proofs of a fact which all educated men now admit.

The reciprocal influence of bodily disorders on mental manifestations is also so fully admitted that no time need be spent in attempting to elucidate their true relations. The morbid feelings excited by disorders of the stomach, the liver, the kidneys, and particularly certain diseases of the nervous system, are daily before the mind of the profession, and need only be alluded to to produce a strong conviction in the minds of all who have witnessed them how great must be their agency in the production of mental derangement. Insanity is as clearly a disorder to be treated by all the appliances of medical art and science as any disease of the lungs and stomach. The metaphysics of the subject must be left to those who have an inclination to pursue that branch of scientific inquiry, but to us who are called to deal with the practical, and to rectify disordered or diseased conditions, the first inquiry must be, to what is the condition before us, in any particular case, to be referred?

A careful and minute inquiry into the previous condition and character of the individual, his mental state and its peculiarities, the history of his parents, and, as far as may be traced, of his ancestors, in their peculiar mental and moral traits, will tend to throw a strong light on the character of the disorder to be treated. No one professes to doubt the influence of hereditary predisposition in the transmission of various bodily disorders; but sufficient attention has not been given to tracing out the influence of peculiarities of thought or feelings, of moral character and the various passions and affections of the parents on the offspring. If we give credence to the researches which, of late years, have established the connection between idiocy and imbecility, and the indulgence of the parents in intoxicating drinks, and we cannot deny their force nor their correctness, we must be prepared to admit that a certain degree of mental perversity and obliquity in the offspring is clearly to be referred to some violation of natural law in the parents; and the more attentively the subject is examined and reflected on, the less will men be able to escape the conclusion that there exists, what may be called, for want of a better term, an insane predisposition to disorders of the mental and moral powers; and, as all admit a strumous diathesis, why may not the same kind of arguments which prove that be applied to the proof of the other? True; the strumous diathesis shows itself in a more palpable bodily constitution, but will any one who has for years been

conversant with the insane be willing to deny that similar disordered manifestations of the nervous system are not clearly to be traced in certain individuals or families? There can be no question of the greater prevalence of disorders of the nervous system within the last half century. With the greater disposition to these disorders, there has been found a gradual deterioration in the healthy condition and power of the nervous apparatus in the families of those who have suffered from various diseases clearly unmistakably nervous. This weakness of this part of the system makes it more readily subject to disease, and predisposes the individual to attacks from causes which would not influence a more robust constitution. In the same way, where insanity has once prevailed in either branch of the family, there is a greater likelihood to the return of this disease than where nothing of the kind has at any time existed. If to the liability to nervous disorders be added the hereditary predisposition to mental disorders by previous manifestations, or by marriage between parties subject to one or both of these characters, a condition of affairs is effected very favorable to the production, on the slightest provocation, of some disorder of the mind. To those who have seen much of the insane no class presents more interesting subjects of study than those who possess what may be termed an insane temperament. With their natural character is mingled a disordered element, which renders them the wonder of their neighbors, the annoyance of their friends, and the dread and terror of their own families. Very commonly they are exceedingly nervous and irascible, are given to extreme, or even moderate, peculiarities of thought and feeling, look upon every subject in a different light from the generality of their neighbors, entertain absurd and often unfounded prejudices, are prone to do things in a manner different from every one else, certain intellectual power may be brighter and more striking in their manifestations, their moral powers may be weakened or perverted so that they are incessantly rendering themselves liable to remarks by their actions, their singular exhibition of traits of character, or their open defiance of certain rules and principles. Some sickness or disease has, in some period of their lives, given a morbid bent to certain feelings, affections, or passions, which no future training or management appears able to conform to the healthy growth of other parts. With an average, or more than an average, amount of shrewdness and tact in their business and capacity for conducting their affairs, is blended a morbid perversity of will and an irregular action of mind which leads them to the assertion of the most extravagant

notions, the commission of the most singular acts, and, at times, the perpetration of the most unnatural crimes. At one period they are morose, gloomy, and disposed to avoid every one and shut themselves up in gloomy seclusion; then they are impulsive, cherish the most bitter and unfounded likes and dislikes, indulge in most fearful bursts of passion without adequate cause or provocation, and, having once taken offence at the most trivial circumstance, they dwell on it, brood over it, and magnify it until it becomes part of their disordered nature.

Penurious or prodigal, boastful or taciturn, fearfully profane or austerely religious, everything by turns and nothing long, they live in the community a mystery to all until some fearful outbreak brings them under the cognizance of the law, which too often fails to recognize the connection of their crime with the disordered condition of their mind, and because they do not evince the legal and technical delusions, or the utter confusion of mind so commonly associated with mental disorders, they receive the full penalty of the offence claimed by the statute. In such persons an inquiry into their previous history will reveal some disposition to disorders of the brain or nervous system, or some definite outbreak of mental disorder in some earlier member of the family by whom it has been transmitted to those who exhibit this peculiar mental constitution. It should be the duty of the medical profession to endeavor to convince the community at large of the great importance of treating all such cases as those laboring under a disorder of the mental powers, which should claim their sympathy and indulgence, and not their scorn and reprobation; and also when such persons come before a court of justice to take the scientific view of their condition and give such information as to their true state as will lead to their receiving enlightened treatment, in place of what is too often meted out to them, the vengeance of impulse and prejudice. Insanity has too often been looked upon as a branch of medical science peculiarly difficult to diagnosticate, but with certain plain principles in the mind, and with the same application to the study of any case which would be given to any other intricate disease, every one can distinguish without special difficulty the great majority of the cases which ordinarily occur. Cases unquestionably arise which baffle the most experienced, but so do they in the investigation of every other disease, though this should not discourage any one from the diligent prosecution of the study. The first principle to be always borne in mind is that the individual, who is the subject of study and investigation, must be carefully compared with himself. The peculiar state exhibited at the time of the examination must be compared as accurately as possible with what the individual was known to be in full mental health. No imaginary standard must be set up to which every case is to be brought and judged, but the supposed diseased condition must be investigated in the light which may be derived from a diligent scrutiny into the state existing before the present peculiarities of thought, feeling, action, or conduct, were observed. In this manner where full information can be had, and, as a general rule, it can be obtained, an idea may be formed how far the state of mind under examination may or may not be a departure from healthy normal action.

Inquiry into the previous mode of life, the general condition of the bodily system, the occupation or want of occupation, the connection by blood or marriage of the ancestors, and the previous existence of any mental infirmity or peculiar nervous affection, will tend to strengthen or invalidate the conclusion which may be formed.

Careful attention must be given not to confound causes with effects in tracing out the existence of insanity. Like every disease, the period of incubation may be of longer or shorter duration, from a few weeks to a long term of years; and the extreme difficulty of ascertaining the peculiar mental manifestations of any individual, adds greatly to the danger of confusion in such cases. In this way it is too often the case that relatives will assign as causes what are really and truly merely effects, and very diligent inquiry may be able to trace back a disorder which is looked upon as very recent to a period of months, or may be years, as in the celebrated case of Pinel, where the insanity had been gradually coming on for fifteen years.

Cases are on record where the insanity was sudden and explosive, and passed away as rapidly as it came, but there was clearly in such cases some bodily disease or disorder giving rise to such sudden and violent excitement.

These are the very rare cases in medical experience, and are not to be taken as guides or examples of what must ordinarily be looked for or expected. All cases must be subjected to the same rigorous scrutiny which would be given to any other bodily disorder where the cause was obscure, and such jealous care will often be rewarded by the discovery of conditions which will materially aid in the proper treatment of the disorder and its more prompt restoration.

Attention must also be given to the great influence of moral causes in the production of physical disorders, and while we would not assign an undue importance to either physical or moral causes separately, it is a matter of very great moment to bear in mind that a moral cause acting steadily for many weeks or months will gradually undermine the health, and bring on such a state of physical disorder as will require the utmost efforts of the physician to remove. The extreme difficulty of ascertaining the true state of the case in many instances should lead to more than usual diligence in the investigation, for the reason that the existence of a cause tending to produce extreme sleeplessness or some analogous condition will baffle all the medical appliances which may be brought to bear upon the case. A removal from accustomed scenes, a change in certain matters in the household, or the introduction of some new occupation or pursuit to give another direction to the thoughts, may do more towards restoring the long lost and much to be desired sleep than any medicine in the pharmacopæia.

No one who will examine the tables of the cause of insanity in the reports of any of the hospitals for the Insane, will fail to be struck with the inaccuracy and incompleteness of those tables, derived as they are in the great majority of cases from the accounts of friends or relations, who have given little thought and attention to the matter, and who often seek to hide the true cause by the assignment of some other, or a total denial of any knowledge on the subject.

It is earnestly to be desired that the members of the medical profession to whose care nearly all the cases of insanity are primarily given, would institute a more careful inquiry into the history of each case, not only for their own benefit and satisfaction as a mental exercise and gratification, but in order to enable those to whom they are frequently so anxious to consign them to have a better knowledge of what they have to contend with and to correct. Too often the medical man thinks his duty discharged when he has recommended that the patient be sent to some hospital, forgetting that the physician, to whose care he thus consigns the patient, has not the means and opportunity of obtaining that minute knowledge of the causes which must have fallen to the lot of the physician under whose observation the individual may have been in health as well as in disease; and it must also be considered that friends are not so willing to impart facts of prime importance in relation to family matters to utter strangers as to those to whom they have intrusted the medical care of themselves or their families. Every physician in charge of a hospital for the insane will testify that he has often been led astray temporarily, or left to grope his way out to the clear light and understanding of a case, by the insufficiency of the history given of any particular case when placed under his charge, while his own efforts would have been lightened, and the restoration of the patient have been more promptly effected by light and information which might have been thrown upon the case by the original attending physician.

Insanity is often at the commencement, and most generally in its course, essentially an asthenic disorder, requiring careful medical and hygienic treatment, but not necessarily requiring active stimulation. Success depends as much in the majority of cases upon the proper attention to nutrition and other hygienic considerations as upon the administration of various articles of the materia medica; and it is because of the inability or unwillingness to carry forward properly such a course in a family who cannot or will not give attention to those measures, that it becomes necessary to place the patient in a hospital for the insane, where the habit of regularity in all things is enforced by precept and example, and it becomes easier to fall in with the current than to go contrary to it. Medical treatment is unquestionably in most cases very much needed, and that treatment is directed to the removal of existing disorders, and the building up of the system by careful attention to all those matters which tend to impart vigor and elasticity to a frame debilitated by disordered functions and inattention to the proper wants of the economy. These measures may be briefly indicated to be the administration of such medicines as will give tone to the nervous system, by producing sleep and increasing the nutritive functions, plain substantial diet regularly served, regular hours of rest, bathing, exercise in the open air whenever practicable and as much as is prudent and proper, and a diversion of the mind from self by any means which will effect that object in the most pleasant and agreeable manner.

Certain forms of mental disorder come so prominently before the physician in the regular practice of his profession, that it may not be amiss to make special reference to them, in order to enable the practitioner more readily to detect them, and to avoid errors which might arise from confounding them with diseases requiring essentially different treatment. Acute mania may be confounded with some of the acute inflammatory affections of the brain, or with delirium tremens, but a careful reference to certain particulars will lead to a correct diagnosis. In acute mania, no unusual heat of the scalp will be found, no pungent burning so unpleasant to the touch, no special fever or great excitement of the whole arterial system, but, on the contrary, the skin will have a tendency to dryness, often cool, the restlessness will be of a type far different from the excessive jactitation in acute inflammatory affections, the pulse

will be more natural and rarely much accelerated, and in particular the eyes will be free from that intense glitter and fierce expression so very characteristic of inflammation of the brain, the countenance will be more variable and free from that fixed expression of anguish and distress so noted and so constant in all the forms of high inflammation of any of the cerebral organs. From delirium tremens it may be distinguished by the knowledge of the previous course of life of the individual, and by the essentially different forms of the delusions.

But there is one form of disease which is so peculiar that it might readily be confounded with infla mation, and its prompt diagnosis is extremely important, as the course of treatment to be pursued must be decided on promptly and carried out energetically, or death will soon close the scene. This is that affection known to American alienists as "Bell's disease," from its first accurate description by that able and accomplished physician, Dr. Luther V. Bell, and called by English writers, "typhomania." In this there is excessive restlessness, incessant loquacity, the most remarkable incoherence of thought and expression (tireless babbling as it is expressed by the French), the pulse is rapid, weak, and very compressible, so as almost to be stopped, the skin is cool and also the scalp, and as a general rule dry, except after violent exertion, and often even then, the tongue and mouth very dry from the incessant talking, and the attention can scarcely be attracted long enough to obtain an answer to any question. In ordinary cases of acute mania, or in inflammatory disorders, the attention may be arrested so long as to obtain answers to questions, or to change the current of thought, but in this it seems as if the individual was so impelled to give utterance to the words that crowd his mind that he had not time to stop for any purpose. The resemblance of this condition to the symptoms of acute meningitis or cerebritis as laid down in the books will mislead any one who will not give earnest heed to its peculiar diagnostic symptoms, the freedom from all feverish heat, the peculiar weakness and softness of the pulse, and the physical state of depression of the whole system. The treatment is the direct reverse of any inflammation, so that the demand for a distinct and clear diagnosis is much more imperative. This disorder requires very judicious stimulation and food, promptly and regularly given, and careful watching of the effects. With cautious, well-directed stimulation, the pulse will diminish in frequency and increase in volume, the excessive restlessness will abate, and the extreme loquacity gradually disappear, and in a few days the patient looks up with an expression of countenance the direct

reverse of that in which he was first seen, and calm, gentle sleep gives hope for the future.

The necessity of eaution in diagnosis and prognosis is taught by other forms of the disorder which have disappointed the expectations and set at naught the calculations of many experienced physicians. The first is that form known as recurrent mania. An individual labors under high maniacal excitement with great boisterousness of manner and language, is mischievous, destructive, and fearfully violent in denunciation. Under the influence of a gentle purgative, and some opiate or sedative treatment and careful watching, the excitement passes off in a few days, and the patient seems to be himself again, and you are congratulating yourself, and probably the family and friends, that the disease has been so readily cured, and you are astounded when you are again called, in a short time, to find your patient in a great excitement, probably greater than before. Herein lies the great peculiarity of this disorder, the high excitement disappearing in a few days, or at most weeks, a period of apparently entire restoration and healthy exercise of the mental powers, and in a shorter or longer period, a return of the excitement continuing longer, in all probability, than at first. The striking point in this disease is the interval of apparent soundness in the mental condition, varying from one or two weeks to several months, but always pursuing the same uniform course and sometimes ending after one or two such attacks in restoration, or degenerating into that form termed paroxysmal mania in which the excitement returns every month or every two months. and is the most intractable form of the disorder to be met with. continuing in this form often during the life of the patient, or ending in hopeless dementia.

Still another form is that termed by the French folic circulaire, but first clearly and accurately described by that very able and distinguished writer on the Jurisprudence of Insanity, Dr. Isaac Ray. "Its characteristic feature is that of excitement alternating with depression, the two conditions varying considerably in different cases, in point of intensity, and also—as well as the intervening interval—in point of duration. The general traits of the first mentioned condition are an unusual flow of spirits, great self-confidence, sanguine anticipations of the future, restlessness both of body and mind, and untiring loquacity. Usually these traits are only strong enough at first to modify the ordinary character of the individual, without raising the slightest suspicion, and not uncommonly giving the impression that the person has been indulging too freely in drink. Sooner or later, they become more strikingly

developed, and exert an unmistakable influence upon the conduct and discourse. He engages in enterprises, moral, social, or commercial, either manifestly beyond his means, or in one way or another inappropriate to his condition. Especially is he bent on speculation, and nothing comes amiss capable of gratifying this passion. Whether it be a farm or a ship, a mill-privilege or a city lot, a parcel of trumpery jewelry, or the odds and ends of a twopenny auction, he is equally ready to buy, and equally sanguine of getting a good bargain. He is constantly yielding to some new fancy, and ardently prosecuting some of the countless schemes that swarm in his teeming brain. He frequents company either above or below his own grade, while, perhaps, he amazes and mortifies his friends by the levity of his manners, if not the laxity of his morals. His movements are abrupt, rapid, and unseasonable. He is fond of taking long journeys, and horseflesh suffers under his hands. He sleeps much less than he usually does, and is fond of being up at night roaming about the house or neighborhood. He is always ready with plausible reasons for his strangest conduct sufficient to silence, if not to satisfy, any troublesome inquirer, while his discourse is entirely free from delusion, or obvious incoherence. With all this there is generally an utter disregard of the feelings of others, an imperious and even tyrannical deportment towards those who are dependent upon him, and a disposition to trample upon all domestic conveniences and proprieties. The slightest attempt to restrain or control his movements, or even to administer advice, is met by the fiercest hostility, and any intimation of mental infirmity provokes his hottest wrath.

To this the state of depression presents a complete contrast, every trait here mentioned being replaced by its opposite. Seldom speaking except when spoken to, and apparently absorbed in his own gloomy reflections, he is silent and quiet in the midst of company, and, as if overwhelmed by a sense of inability, he reluctantly engages in any occupation beyond the most ordinary routine, and often is scarcely persuaded to perform the most necessary duties. All nature without and within him is shrouded in gloom, a terrible evil seems to be impending over him, the future reveals not a single gleam of hope, and were he called on to lay down his life, he would hardly hesitate to obey. His conduct during the excited state is now viewed in its true light, and is the subject of bitter reflections. He wonders that he should have done such things, and, in some instances, begs his friends to keep him in future from similar exhibitions by seasonable measures of restraint. With the mental dejection, there is often some bodily ailment, and he loses both flesh

and strength. Either this or a total paralysis of the will may keep him in bed much of the time, and incapacitate him for the slightest effort. In point of duration the two states are generally equal as compared with each other in the same case, though varying in different cases, from one month to a couple of years. In point of severity, too, they are subject to the same rule. The interval between these two conditions, when the individual appears to be perfectly rational and natural, also presents the same kind of uniformity, in the same case, and the same kind of diversity in different cases. In many, and perhaps the majority of cases, it has no appreciable duration as a distinct condition, the periods of excitement and depression passing into each other, with scarcely an interval between."

Much has been said of the peculiar appearance of the eye in the insane, and in no symptom are people more positive than in this, but like every other exclusive symptom it is exceedingly deceptive and unreliable. There is, however, an entire change in the whole countenance of the individual so striking that in many cases the whole aspect of the person is changed, and in this change the eye bears its part and adds to the peculiarity. On what exactly this change of expression in the countenance depends might be difficult to state, but it is clear that, as in health, the emotions, passions, and feelings are indicated by the peculiar expression of the features, except in some impassive beings who never manifest any emotion; and as joy, hope, love, fear, distrust, or aversion will vary the expression, so may the different disordered manifestations be imaged forth in the same way.

Another form of mental disorder may claim a few words from the importance not so much of its diagnosis as of properly directing its treatment. No cases are more perplexing than those attended with great depression and delusions which seem to take away all hope and courage, and cast the individual into the very abyss of despair. These cases require all the tact, energy, and perseverance of the physician, and claim, at the same time, all the sympathies of his heart, the best directed efforts of his skill, and the full exercise of his mental powers. In most of those cases will be added the strong temptation to suicide, and to avert this no watchfulness can be too strict. In all such cases with an habitual tendency to depression of spirits, even in health, will be associated some morbid affection to the removal of which all the applications of medical and hygienic science must be directed.

In late years a form of mental disorder has attracted very general attention, to which it seems proper in this place to refer in general

terms: the general paralysis of the insane, or, as now called, general paresis. A great deal has been written within the last few years on this disorder, and to those who feel inclined to pursue the study more fully, the many articles in the English, French, and German Psychiatric Journals, may be recommended. One or two points only need be noticed here. The disease is characterized by delusions of immense wealth or unbounded possessions, with a peculiar impediment, or hesitation, or stammering in talking, among the very earliest symptoms, and also an irregular contraction of the pupils of the eyes, and an unequal movement of the lower extremities, often from the very first, though only to be recognized by very strict examination. The disease is confined almost exclusively to males, very few cases among females having been reported. Much dispute has arisen on the etiology of the disease, but it may be referred, as a general rule, to excessive indulgence, and to various circumstances which tend to deprave the physical constitution, and from these conditions may be inferred the almost utter hopelessness of the disease.

The general principles of treatment in different mental disorders will be modified by peculiarities in the constitution of the individual, and the condition which may be presented at the time. These general principles are divided into two classes, medical and moral, and to a proper combination of these two, all success in the management of the insane must be attributed. The essentially chronic character of most mental disorders requires great patience and perseverance on the part of the physician, notwithstanding the constant discouragements to be met with, and the pleas to be trying some new remedy, and the truth must be steadily inculcated, that a speedy restoration must not be looked for, but that chronic disorders can only be cured by steady perseverance in that course which has been found most serviceable in such cases.

As would be inferred from the asthenic character of the disorder, an unusual tendency to constipation exists in nearly all cases, varying from the mildest to the most intractable form, which must be met and managed, not so much by violent medicines, which only add to the mischief, but by a judicious combination of medicines, food, exercise, and the inculcation of regular habits. The great sleeplessness so characteristic of insanity must also be overcome in the same way, not by a routine treatment of sedative medicines, or one medicine in particular, but by such diversity of mental and bodily exertion as will bring on that moderate degree of fatigue which will induce sleep. A general tonic treatment will also be indicated to brace up the debilitated nervous system, and add

strength and energy to the enfeebled powers, and this can usually be effected by the regular exhibition of the different preparations of iron and such vegetable tonics as may be found most useful. conjoined with such sedatives as may aid in carrying forward the object to be attained. But our efforts must not be directed to medical care alone, since as the disorder has, in the great majority of cases, been induced by irregular habits and modes of life, we must endeavor to correct these, and bring the individual back to that regular and systematic exercise and manner of life, which will enable all the functions to exert their proper influence, and have their proper action and development. For this purpose hygienic measures must be resorted to and regularly and systematically carried out. Meals at regular hours of good, plain, well-cooked, and easily-digested food, exercise of different kinds, in-door and outdoor, bathing, the enforcement of regular periods for retiring at night and rising in the morning, and whatever else of this nature may aid in the object to be sought. But even these will not entirely fulfil the desired end. Dr. Samuel Johnson, in his character of the insane astronomer, has shown the influence of too great absorption of the mental powers by one engrossing pursuit, and the relief and restoration obtained from the extravagant fancies and delusions by a variety of agreeable and entertaining objects and conversation. On this principle the moral treatment of the insane is founded. To furnish every means by pleasant and varied reading, games of different kinds, illustrations of physical science, employment in every way in which the individual can be induced to engage, the direction of the attention to objects of interest and curiosity by exhibitions of the magic lantern, and, in fine, anything which will tend to arouse the latent energies, attract the different feelings or interest the mental faculties pleasantly and profitably, all are among the class of things included under the general term, moral treatment. One individual may be reached by one method, another must be approached by a different course, but the aim must be so to combine all the resources which can be made available for the grand purpose towards which all should tend, the restoration of the mental faculties to their normal condition.

The pathology of mental disorders cannot yet be said to have been settled in a satisfactory manner, or even so as to claim a partial assent to its truth. It is true certain diseased manifestations have been found in those dying from different forms of mental disorders, but there has been no special condition recognized which could be said to be significant of any particular disease. It is perhaps not surprising that in a disease where the symptoms are more those of disordered function than of diseased action, this condition should be so uncertain, and so little positively settled on a basis as fixed as in diseases of the lungs. While we may not be able as yet to trace any special difference in the diseased condition of the brain in mania, or in melancholia, yet we must hope that the investigations, which are now going forward in the hands of earnest pathologists, will produce some definite and satisfactory result.

The researches of Lockhart, Clarke, and others, in the minute anatomy of the brain, point out the source to which we must look for our knowledge on these points, and should those researches be verified and confirmed by subsequent investigators in the same field, we may earnestly hope that a way may be opened which will lead us through the mazy labyrinth in which we have for long years been groping out into the clear field of scientific truth and positive knowledge in mental disorders.

Many interesting points in mental medicine cannot now be discussed, but it seems proper to state distinctly the views on some disputed subjects, held by those whose long experience and acknowledged ability in this particular branch of our profession entitle their opinions to be received with deference and respect; and the most knotty of these points, and that on which most misapprehension prevails, is that of the so-called moral insanity.

The mind of man is acknowledged by all who have treated of the subject to be formed of two different classes of powers or faculties: the intellectual, comprising the memory, the judgment, the imagination, and the reason; and the moral, classed as the affections, passions, emotions, etc., and that the proper healthy action of mind. and its true and regular development is found, when these powers are carefully and thoroughly trained and kept in due subordination, so that the intellectual shall not be advanced at the expense of the moral, nor the moral be cultivated to the neglect of the intellectual. All will admit that this distinction is not so carefully observed in practice as it should be; but it is too often the case that the intellectual are highly and urgently stimulated, while the moral are left in the background, or attain undue, unnatural prominence, by neglect to educate them properly; and the more baleful passions gain the ascendency and control, and direct the individual. No one will for a moment deny that the intellectual powers by themselves may, at any time, become disordered, while the moral powers may not appear to be in the least disturbed; but this is not the usual result. In the same way we can readily imagine that the moral, emotional, or affective powers (for each of these terms is used to express the condition referred to) may also become disordered, so that the individual will be guided to an entirely different line of conduct from what he was previously accustomed to pursue, and the intellectual faculties may not appear to be involved. But the rule to be observed in deciding on these cases is the same as that previously laid down in reference to the general diagnosis of insanity, that the individual must be compared with himself as he was in a previously healthy state, and not with some imaginary moral standard set up by the person making the examination.

A man has always led a correct, moral life, has been honest and truthful in all his relations, has been scrupulously exact in his dealings with his fellows, kind and indulgent in his family, pleasant and agreeable as a neighbor, and in all the various relations of life has been considered correct and honorable.

Such a man is attacked with some fever, or experiences some reverse of fortune, which so acts on him as to injure his health, and it is perceived before long that he has become irascible and quarrelsome, that he no longer attends to his duties as a husband, a father, or a neighbor as he had done, that he is not careful to observe that decorum in the family of which previously he had been such a strict exacter, that he engages in foolish and improper enterprises and speculations, that he no longer observes that honor and scrupulous regard to truth which he had before exhibited, that, in a word, his whole conduct and manner are the precise reverse of what he was before: while at the same time his conversation betrays no incoherence in his ideas, he gives utterance to no foolish expressions or delusions, but is sharp, shrewd, and apparently very exact in most of his business arrangements.

Will any one deny that here is not a disordered condition of the moral powers with no observable derangement of the intellectual? and if the moral powers may be and frequently are thus disordered, have we not an insanity of the moral powers as fully developed as in others we have an insanity of the intellectual? It is to be carefully observed that this condition is not a steady growth from bad to worse, from a bad life and depraved habits to one much worse, but it is a total change of the whole conduct and character, that the man is as much the opposite of his former self in all his moral relations as it is possible for him to be, and that he now manifests traits of character and a course of conduct which no one who knew him before would ever have believed him capable of exhibiting. No evidence of delusion or other impairment of the intellectual faculties can be clearly discerned, unless we take it as an evidence of intellectual weakness that the man cannot see the exceeding incongruity between his present course of conduct and that which for-

merly rendered him so much honored and respected by a large circle of friends and acquaintances. In truth, no one can discern any true delusion in such cases in their earlier stages, though such delusions may arise in course of time; but we are not justified in claiming the existence of such to establish a theory: but we must regard the case in the light we have at the particular time we are examining it, or are called to give testimony on it in a court of justice. We will thus be led to admit distinctly a disorder of the moral powers, which may be called moral, emotional, or affective insanity, as the views of the person may dictate. Our clear duty as medical men, seeking only the truth, is to take the facts of the case as we find them, and decide in accordance with those facts and the best information on the subject we can obtain. We cannot be justified, and do our duty conscientiously to the community and to ourselves, if we allow any special theory to turn us from the true course indicated, and yield to prejudice or clamor.

But it is urged there is a large class of cases manifesting a disposition to various misdemeanors and violations of the law from homicide to larceny, from the penalties of which it is sought to relieve the individual by the plea of insanity, and thus open a way to excuse all who have committed crime. The abuse of any good thing is no argument against its proper and legitimate use, and thus the abuses of the plea of insanity are no valid reason for the rejection of what rational medicine and sound philosophy alike dictate to exist, and require to be treated as disease. There are undoubtedly cases which seem not to manifest any mental disorder. but where the whole life and conduct is a series of moral disorders and incongruities. In these cases, traceable by rigidly strict and diligent examination to some physical disease or disorder, shown by the peculiarities of conduct and character, there will almost invariably be found some morbid irritation, some arrest of development or improper indulgence in some vice, some want of the economy which will be evidence of the disordered condition of some organ, the healthy action of which is necessary to the proper exercise of the moral or mental powers, or the result of a proper insane temperament.

The great difficulty is in obtaining proper information in relation to the previous history and character of such cases, which will lead to the formation of a correct judgment, for they are too often looked upon as simply depraved, and no attention given to the examination of those states by which the true condition of the individual may be clearly and distinctly ascertained. Our duty is unquestionably to vindicate the majesty of the law, and maintain it

in the proper exercise of all its powers; but that does not forbid, but rather demands of us to give earnest heed to the careful and accurate examination of all those cases where pleas of insanity are presented, that the truth may be fully elicited, and justice done by the punishment of those who are really guilty, and the prompt medical hygienic treatment of those who are suffering from some disordered bodily organ, or are the prey of some appetite which they need proper assistance to enable them to overcome.

In this connection it may not be amiss to urge upon the members of the profession extreme caution and reserve when called upon to testify in court in cases of insanity. It is too often the case that counsel will endeavor to confuse the medical witness, and to draw him into an argument on some disputed point, or to give an opinion on some supposed case, particularly on the subject of moral insanity. The true practice in all such cases is to refuse to go beyond the plain facts of the case, and to avoid all argument or discussion which is attempted only to place the witness in a false position, and invalidate his testimony, and in taking this position the medical man will be sustained by the court.

It is important for every medical man to impress upon all those with whom he may be called upon to consult or to advise, the great necessity of early treatment in the first stages of mental disorders. Not that it is absolutely necessary that every case should be sent at once to some hospital, but that in the great majority of cases such a resort is the best means for promoting the restoration of the patient; and, when once placed under such treatment, to allow them to remain until the physician pronounces them fully restored. In at least three-fourths of all cases placed under treatment in hospitals within the first six months of the outbreak of the disorder, restoration may be confidently expected; all delays beyond that period are fraught with danger; and after two years very few cases ever entirely recover. And in regard to the continuance of sound mental health after restoration, it may be safely asserted that, with proper care and caution to avoid exciting causes, the majority will continue in the enjoyment of those faculties with which they have been endowed.

In the arrangement of the studies of those from whom the ranks of the profession are to be recruited too little attention has been given to the subject of mental disorders, and it is time that our medical schools should supply this desideratum, by providing for a full course of lectures on mental disorders and the jurisprudence of insanity.

No one can feel too grateful to an overruling Providence for the

continued and uninterrupted use of all his mental powers, and it should be the earnest effort of every one so to order his own course of life, and to aid others to direct theirs that he and they may at all times be prepared to render their full tribute of gratitude and praise to Him from whom all these and all other blessing have been derived, and to whom they must render an account for the right improvement of all He has intrusted to their keeping.