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Contributors

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DISCOURSE ON THE INFLUENCE OF DISEASES ON THE INTELLECTUAL AND MORAL POWERS



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THE INTELLECTUAL AND MORAL POWERS,

DELIVERED AS AN

INTRODUCTORY LECTURE

AT THE

COLLEGE OF PHYSICIANS AND SURGEONS,

IN THE CITY OF NEW-YORK,

October 30th, 1848.

BY JOSEPH MATHER SMITH, M. D., Professor of the Theory and Practice of Physic, and Clinical Medicure.

NEW-YORK: DANIEL ADEE, PRINTER, 107 FULTON-STREET.

1848.



DEAR SIR :-

New- York, Nov. 2d, 1848.

At a meeting of the Students of the College of Physicians and Surgeons, held on Wednesday morning, Nov. 1st., the undersigned were appointed a committee to ten. er you the thanks of the class for the able introductory discourse pronounced by you on Monday evening, and to request a copy of the same for publication.

We are, sir, yours with great respect,

J. M. CLEAVELAND, B. L. BUDD, H. GOMEZ, A. H. JACKSON, C. M. ALLIN.

Professor J. M. SMITH,

GENTLEMEN :---

New-York, Nov. 20th, 1848.

Your note, informing me that at a meeting of the Students of the College of Physicians and Surgeons, you were appointed a committee to request a copy of my Lecture delivered at the opening of the College, for publication, I duly received. Not anticipating that the Lecture would have been deemed worthy of such an expression of approbation, I have hesitated in complying with the request. Being desirous, however, of contributing every thing in my power to advance the knowledge, and gratify the wishes of the class, I have concluded to revise the discourse at my earliest convenience, and place it at the disposal of the committee.

> With great respect, I am, gentlemen, your ob't. serv't.,

> > JOSEPH M. SMITH.

Messys. J. M. CLEAVELAND, B. L. BUDD, H. GOMEZ, A. H. JACKSON, C. M. Allin.

DISCOURSE.

GENTLEMEN :

The occasion of opening the present, or forty-second session of this College, forms a new epoch in its history. A new feature is to be imparted to its character, by extending the courses of instruction and adding to the Faculty a Professor of Physiology and Pathology. In thus enlarging the means and reforming the plan of collegiate instruction in medicine, the Trustees and Faculty have manifested the determination to elevate the standard of medical education. In this effort they are supported by their own convictions of right, and by the recommendations of the American Medical Association. In conformity with these changes additional zeal and exertion will be expected from the teachers; and here, there is no hesitation in giving the assurance that love of ease will not be permitted to interfere with their devotion to the instruction of their pupils.

In introducing the courses of instruction at this time before a mixed auditory, I feel myself called upon to discourse on some topic, connected with medicine, which may be treated, for the most part, without an array of the technicalities and principles of the science. As one of this kind, and hence as appropriate to the occasion, I have selected for remark the conditions of the mind in various diseases. I am aware that in announcing a theme so extensive in its details, it may occur to you that the limits of an introductory lecture will not allow of anything more than a partial or synoptical view of it. Further than this no attempt will be made to enlarge on the subject.

In order to exhibit the phenomena of the mind in disease, in their distinctive and diversified forms, it may be well, in the first place, to advert to our mental constitution; and, in doing so, let it be premised, that we regard the mind as essentially immaterial in its nature, and endowed with the property of existence, independent of the body; and yet, as connected with the organism, so long as it holds an immediate relation with temporal things, being manifested and influenced by the instrumentality of the brain. Avoiding the question whether the cerebral apparatus is a single organ, having an individuality of function, or a congeries or plurality of organs, each having a special function, we shall consider the mental faculties under the forms recognised by the generality of writers on psychological science.

As a preliminary, then, to our main design, it is to be observed that the powers of the human mind are divided into two classes, to wit, first, the INTELLECTUAL, and secondly, the MORAL.

The intellectual powers comprise the faculties of perception, attention, memory, reflection, imagination, and judgment or reason; and have for their objects the cognizance of intuitive truth, and the acquisition of a knowledge of the qualities, analogies, and relations of things. Their higher exercises are displayed in the examination and comparison of particular facts, and in deducing from them general truths or ultimate principles. They enable us to reflect on the events of the past, contemplate the occurrences of the present, and meditate on the probabilities and certainties of the future.

The moral powers are equally well characterised. They are certain conditions of the mind, usually denominated the moral affections, feelings, or faculties. They manifest themselves in various degrees of intensity, under the forms of desire and aversion, hope and fear, joy and sorrow, and in the active movements of the will and the conscience. They are the source of our mental sensibilities and sympathies, and on them depend our mental happiness and misery. They are the chief determining motives of our actions; and hence they constitute the most important part of our mental being.

But though the intellectual and moral powers are different in their nature and character, they are, nevertheless, closely associated; and, indeed, like the animal and organic functions of the body, are inseparably united. In a sound and well regulated mind, both classes of powers act in beautiful harmony and coincidence. In each department there is a supreme power, reason in the intellectual, and conscience in the moral.* These presiding principles accomplish their offices in modes totally dissimilar. While reason, in order to arrive at truth, labors through a series of logical deductions, conscience intuitively distinguishes right from wrong, and instantly announces it. In its processes of investigation, reason is liable to wander from the truth, being led astray by false premises and erroneous interpretations of phenomena, and hence is not a guide in which we can always repose with confidence. It is not so with the operations of conscience. When enlightened and rightly exercised, its decisions are infallible, and from them

* See Philosophy of the Motal Feelings, by John Abercrombie, M. D.

the mind seeks no appeal. From the correct action of these two leading principles of the mind, spring results which elevate our species far above the lower animals. From the exercise of reason man discovers evidences of design and utility in the works of nature; and hence he infers the existence of a wise, almighty, and beneficent Creator. From the stirrings of his conscience are evolved the sentiments of religion and moral responsibility. And all this, on due examination and reflection, he finds accordant with divine revelation. In performing their appropriate functions, conscience indicates the pathway of duty, and reason urges the propriety, and displays the advantages of pursuing it.

The distinctive peculiarities of the intellectual and moral faculties are conspicuously exhibited in the diversity of character which arises from their union in unequal degrees of strength and correctness of action. This diversity is attributable in part to the varieties of physical temperament, but chiefly to a partial and defective education. Reason and conscience, each in its department, are the last - of the mental powers fully developed. In the lowest degree of untutored nature, as in infancy, neither power appears to be unfolded. Whether there are instances in which one of them may be totally inactive, and the other in healthful operation, is a question of curious interest.* However this may be, no fact is more obvious, than that the intellectual faculties may possess vigor of the highest order, evinced by splendid achievements in literature, science, and the arts, and yet the moral powers be not merely undisciplined, but deeply depraved and vicious. And so on the other hand, the moral faculties may be highly ac-

* See Dr. Rush's Inquiry into the Influence of Physical Causes upon the Moal Faculty. tive, and steadily regulated by the dictates of an enlightened conscience, while the intellect remains, for the most part, uncultivated, and the faculty of reason is but feebly exercised. But such discordance of the two classes of mental powers, are by no means common. In most persons, both classes are so far unfolded and regulated as to yield sufficient intelligence to conduct the ordinary pursuits of life, and sufficient virtue to answer the requisitions of honor and justice, between man and man.

With this sketch of the intellectual and moral constitution of the human mind, let us inquire in what manner its economy is affected by disease.

It is evident that a distinct notion of the termination of life cannot be formed without a certain amount of intelligence. The inferior animals appear to be destitute of the requisite powers of observation, and reason, to acquire such intelligence; but man, an observing, reflecting and reasoning being, soon learns the truth, that his body must sooner or later, yield to decay and dissolution. The knowledge of this important truth is attained exclusively by the intellectual powers; but the mere knowledge of the fact, apart from the moral feelings, occasions no pain or uneasiness. In this view, death is no more alarming or interesting than any other event. It is in the other department of our mental constitution. namely, the moral, that the idea of death excites disturbance. So intimately and indissolubly are the functions of the two classes of faculties connected, that a movement in one of them produces a movement in the other ; and accordingly, in most instances, no sooner is the idea of death and its certainty deeply impressed on the intellect, than it sympathetically strikes deep among the moral affections, and there excites, with other feelings, the

fearful emotion so forcibly implied to in the phrase, "Death is the king of terrors."

But though such is the mode in which the knowledge and apprehension of death arise in the mind, it is not in every individual of our species that the knowledge exists, or the apprehension occurs. Such ignorance and absence of fear prevail in the earliest or infantile period of life, and in certain conditions of the mind at a later age. To know nothing of dissolution, would be desirable, were there no momentous consequences after it. The abstract idea of death is, doubtless, for wise and beneficen't reasons, concealed from the lower animals. The fact, however, that life must end, is familiar to every human mind that is fully and soundly developed; and hence the apprehension of death is felt and acknowledged, varying in degree from slight alarm on the one hand, up to terrific emotion on the other. The circumstances in which the mind is thus variously affected, in view of the event we are contemplating, are worthy of attentive remark.

In persons of mature age, and in perfect health, who are in circumstances free from apparent danger, the feelings are seldom disturbed by the thought that they must pay the debt of nature. It is in sickness and incidents of peril that death demands attention, and claims the tribute of our fears. But in such situations, there are not unfrequently circumstances which repress apprehension, or entirely dispel it. In diseases, the mind is often as much altered from its ordinary condition, as the body is from its normal state. Commonly, both the intellectual and moral powers are affected, though sometimes very unequally. In acute diseases, the former are generally blunted, deranged, or prostrated. They are incapable of any protracted and profound processes of thought. Self confidence is destroyed; and judgments requiring but slight efforts of reason, are formed with indecision and doubt. The imagination is sometimes restless, ungovernable, and occasionally extraordinarily vivid and excursive. The memory is more or less impaired, though it sometimes recalls ideas, scenes and events which had long been forgotten.

While such are some of the intellectual phenomena, the moral affections have often an ascendency which they seldom display in health. Among those of the most frequent occurrence are anxiety, despondency, impatience, irascibility, kindliness of disposition, and affectionate tenderness. The conscience is quickened, active, and searching; regrets and contritions spring up; and these, with the fear of death and future retribution, elicit resolves of reform and devotion to the interests of religion. Sometimes the conscience causes little or no alarm, being pure and tranquil in view of the past, and this, conjoined with elevated devotional feelings, occasions, amidst the anguish of disease, a high degree of serenity. In some instances the moral principle is obtuse, and its movements, in reference to the former course of actions, sluggish or powerless. It is also observable that in some forms of disease the religious affections, which are strong and unwavering in health, are occasionally so enfeebled, or suspended, as to leave the individual in a state of indifference to the future, or to sink into doubt and despair. Sometimes, too, the moral feelings are so perverted as to cause the patient to utter profanities and obscenities which are totally at variance with the general purity of his thoughts and words.

But there is another moral feeling which is especially active in disease—one that more constantly attends upon every variety and stage of sickness, than any other. It is hope, "the most vital movement mortals feel." In health this passion bears up the mind under the corroding cares and trials of life, and sustains it in achieving exterprises that reach to

" Earth's loneliest bounds, and ocean's wildest shore."

With effective power it resists the fatal assaults of disease. In sickness it exerts an antagonistic force to the depressing passions, and weakens the moral forces that tend to the destruction of life. It is, as the poet Cowley says, the sick man's health.

Usually, hope continues to support the mind until the accession of the moribund state. But sometimes, when the suffering is great, or has been of long duration, or when life is embittered by misfortunes, or rendered irksome and miserable by sensual satieties, and sometimes, also, when there is a firm and unvarying belief that the soul is secure in its prospect of happiness, hope ceases to favor the solution of disease, and is often succeeded by a fervent desire for death. In this state of mind, patients sometimes safely pass the critical states of disease, and not unfrequently, when the fact is announced to them, they manifest disappointment and regret.

In some forms of disease, and particularly such as are local and malignant, and which do not early disturb the general functions, but slowly undermine the powers of the constitution, the influence of hope is variable. Some individuals, in these circumstances, when convinced of the fatal nature of their maladies, become, for the most part, resigned to their destiny. In cases of this kind, the mind may be serene in the waking state, though death is the prevailing theme of meditation; but often, in dreaming, the thought of dissolution is absent, and the imagination pictures scenes of health and enjoyment. Such mental visions may prove the occasions of extremely distressing emotions; for in passing from the slumbering to the waking state, there is a remembrance of them, with a feeling of refreshment, derived from sleep. In these transient moments, there is a forgetfulness of the deadly nature of the malady, and a revival of hope; but no sooner are the reflective faculties fully aroused than the illusion vanishes, and the truth that death is near, flashes through the mind, and for a season, overwhelms it with despondency.

In some diseases, the effect of hope is illusory, removing fear and giving promise of certain recovery. In all cases, its recuperative influence happily coincides with the vis medicatrix naturæ. Of the sanative power of hope, physicians avail themselves in their management of the sick, and there is reason to believe that life is often preserved by cherishing and supporting it.

Allied to hope, in its remedial operation, but more energetic in its action on the body, is the influence of the imagination, excited by faith in the curative efficacy of the means employed for the removal of disease. It is a curious and remarkable fact, that the mind may act so powerfully on a part, or the whole body, as to produce in it the most astoning effects. The phenomena arising from this mental influence, are observable in producing diseases, and also in correcting morbid conditions. But in order to readily effect the salutary changes, two things are necessary, namely, first, a peculiar mental temperament, a credulous, imaginative, or superstitious cast of mind; and secondly, the use of some agent or appliance, which the patient is made to regard as possessing the power of producing the effect it is desired to accomplish. When the temperament now referred to does not naturally exist, it is difficult, if not impossible, to excite the remedial power of the imagination, or excite

faith in the efficacy of a therapeutic prescription. To a certain extent, however, the mental disposition in question obtains in most persons; and in sickness, it is frequently exalted to a high degree, insomuch that faith in the vaunted nostrums of charlatans, and certain popular remedies, is easily established. In this way, it is believed, that inert topical applications are sometimes the indirect means of obviating or removing local diseases; and that certain drops, pills, and powders, of no salutary properties, or, at least, of no adaptation to the diseases in which they are prescribed, contribute to the cure of general disorders. When the garrison at Breda, in 1625, was on the point of surrendering, on account of its force being weakened by the prevalence of scurvy, the Prince of Orange ordered a few phials of sham medicine to be conveyed into the fortress, and distributed in doses of a few drops among the patients, as an infallible specific. The effects were wonderful. "Such as had not moved their limbs for a month, were seen walking in the streets, sound, straight and whole. Many, who declared that they had been rendered worse by all former remedies, recovered in a few days, to their inexpressible joy." Perkins cured certain diseases by metallic tractors; and Dr. Haygarth of Bath, and Mr. Smith of Bristol, in order to ascertain whether the cures were effected by the tractors or by the power of the mind, applied in similar cases, with ceremonious gravity, instruments made of wood, and painted to resemble the metallic tractors, and found the results to be equally favorable. It is through the power of the mind that charms, incantations, and amulets produce their sanative effects. That the benefits which sometimes follow the use of homeopathic remedies are the consequences of the dietetic and regimenal treatment to

which patients are subjected, and of the influence of the imagination, has been proved by numerous and satisfactory experiments.

The peculiar disposition of the mind, of which we are speaking, is not confined to the low and illiterate; it is met with in the higher and cultivated classes of society; though at present it is less prevalent than in former and more superstitious ages. "Pericles," says Plutarch, "showed to a friend who came to visit him in his sickness, an amulet which the women had hung about his neck."

But though we are prone to ridicule and condemn the use of means which have no direct physiological action on the body, it is a question of interest, no less than of curious inquiry, whether the active remedies, appropriately and skilfully applied, do not in many cases, exert their curative power as forcibly through the medium of the mind, as they do immediately on the corporeal frame. That such is sometimes the fact, and further, that the imagination cooperating with faith, is sometimes the sole efficient cause of recovery, when active remedies are employed, it is as reasonable to suppose, as to admit that a remedy of no power, can, in the mode above mentioned, effect a cure; for, there is obviously nothing in the *modus operandi* of an efficient medicinal agent which can interfere with the remedial action of the mind.

Such are some of the mental phenomena observable in diseases. The causes to which they are principally referable, are the diversified forms of disease connected with differences of age, sex, temperament, profession, habits of life, and religious faith or creed. In analyzing particular cases, most of these causes are found to have an influence on the mind; and hence an idea may be formed of the extent of inquiry which would be necessary to determine the number and variety of mental conditions in sickness; and especially of exhibiting the slighter shades of difference between them. The most we shall attempt, on the present occasion, is to notice some of the more common intellectual and moral phenomena which have their origin in, and which in some degree, aid in distinguishing diseases.

That the state of the mind in many diseases depends more upon the nature and seat of the malady than upon any other cause, is evident to the most superficial observer. This fact is clearly exhibited in the more common disorders of the body; and particularly in those of the *head*, *thorax*, and *abdomen*, and such as constitute the class of *essential fevers*. These divisions of diseases are severally attended by mental phenomena somewhat characteristic; and each division has its varieties, as we shall now proceed to show.

In no disorder can the mind be changed from its ordinary state, if the functions of the brain be not disturbed; for this organ is the immediate instrument of intellect and moral feeling. As to the kind of change which the mind undergoes, much depends, not only upon the nature of the cerebral disturbance, but upon the manner in which it arises, whether primarily or secondarily. Disease of the brain which is secondary or sympathetic of disease of some other part of the body, is usually comparatively mild, and generally transient and variable. It may, however, by long continuance or extraordinary severity, arising from great susceptibility of the brain to sympathetic irritation, assume the character of a primary or idiopathic affection of that organ; and when this happens, the mind of course undergoes corresponding changes. The diagnosis of such cases is determined by their early history. Moreover, it is important to remark that in many diseases in which there are considerable variations of the mind from its normal state, there is no appreciable organic alteration of the brain, but merely what is termed functional derangement.

With regard to primary or idiopathic diseases of the head, there are no two of them that present precisely the same train of symptoms, or the same mental conditions. The phenomena by which they are manifested consist of lesions of sensation, motion, and mind. To the last of these we shall confine our attention.

In sudden and fatal seizures of apoplexy, there is, to all appearance, an instantaneous prostration of the intellectual and moral powers. In the language of nosology, there is a total loss of sense and voluntary motion. If, in the slighter attacks, there is any consciousness, it is probably attended with an indistinct perception of surrounding things, with perhaps a sense of impending danger, and a strong disposition to sleep. In every pathological variety of this disease, the mind is manifestly incapable of strong emotion, and recovery is rarely accompanied with any recollection of what had taken place during the attack.

A similar state of mind occurs during the paroxysms of epilepsy. In this disease, however, there is sometimes a premonitory stage, in which the mental faculties are singularly affected. The patient, besides being frequently uneasy, irascible, or melancholy, is sometimes instantly thrown into a fit upon the starting up before him of a spectre, the appearance of which is always a sure harbinger of a paroxysm. "Dr. Gregory," says Abercrombie, "used to mention in his lectures a gentleman liable to epileptic fits, in whom the paroxysm was generally preceded by the appearance of an old woman in a red cloak, who seemed to come up to him and strike him on the head with her crutch; at that instant he fell down in the fit."

The same general impairment of the mind usually occurs in the severe forms of palsy, as hemiplegia, though commonly in a less degree than in the diseases just mentioned. The intellectual faculties are frequently entirely prostrated; and often, when partially active, and the disease is protracted, are liable to become fatuitous. The memory, especially, suffers; recent events rapidly pass into oblivion; but what is worthy of notice, occurrences and objects, long forgotten, are sometimes recalled in all their original freshness. Such of the moral powers as remain excitable, particularly in chronic cases, are those which induce fretfulness, weeping, and childishness. Instances of paralysis, however, are sometimes met with, in which there is no apparent diminution of intelligence.

In other forms of cerebral disease, the phenomena are in many respects different. Instead of there being an extinction or imbecility of the mental faculties, there is a morbid activity of them. Thus, in those acute inflammations of the brain, described under the terms of phrenitis, cerebretis, meningitis, and arachnitis, lesion of the mind is more common than either lesion of sensation or motion, appearing sometimes in a mild form, and at other times in wild aberrations of reason and furious outbreaks of passion. In the earlier period of these dangerous diseases, the deviations of the mind from its sound state, appears to consist in a simple confusion of thought and apprehension of phrenzy. After passing this period, the mental operations run into delirious excitement, and at length, diminishing in energy, are merged in the stupor that attends the close of life. But though such is the usual course of fatal inflammations of the brain, it sometimes happens that

there are moments of correct action of the mind—lucid intervals, which give hopes of recovery. There are cases, also, in which, in the last stage, even to the extreme verge of life, a degree of intelligence remains, no less surprising than curious to the pathologist who examines after death the extent of the organic ravages which the disease has produced in the head.

The permanent changes produced in the mind of those who recover from inflammation and injuries of the brain, are often exceedingly grave in their character. But sometimes it is otherwise. In some instances the mental powers are greatly enlarged and invigorated. We are told that a son of Dr. Priestly, whose intellect was naturally feeble, fell from the window of a two story house and fractured his skull. From this time his intellect became greatly improved. A similar result occurred in the case "of a young man of naturally very limited intelligence, who lost to the amount of two tea-spoonsful of brain by a pistol-shot, besides considerable quantities which were discharged at several subsequent dressings. He lived for two years after this occurrence, with his intellect vastly improved."* Though inflammation of the brain in children is extremely liable to permanently impair the mind, yet cases occur in which no such consequence is observable, and in some of which there is reason to believe that the influence of the disease is to invigorate the intellect. It is related of the celebrated botanist, De Candolle, that "in his seventh year he suffered from an attack of acute hydrocephalus, but fortunately conquered a disease so often fatal to childhood, or which in other cases so frequently leaves behind a feebleness of the mental powers. But the youth and man, with his well or-

4 Sewali's Examination of Phrenelogy, p. 76.

ganized head, fitted for the most difficult processes of thought, suffered no further ill effects from this distressing malady."*

There is another group of diseases of the brain, distinguished by the general term of Insanity. Differing essentially from the comatose and inflammatory maladies already noticed, in not being usually attended by evident symptoms of vascular disorder, they present peculiarities which render their nature exceedingly obscure. In many cases the only morbid phenomenon observable, is simple derangement of the mind.

The forms in which insanity appears, are so numerous and diversified, that no investigation, however industriously pursued, can furnish a full and just description of them. In every case there is a unique individuality of character, which must be studied by itself. There are, however, certain general forms of the disease which may be classified; and to a notice of these we shall limit our attention.

The varieties of mental lesion which constitute the class of insane disorders, are properly divided into two kinds, namely: first, MORAL INSANITY, and secondly, INTELLEC-TUAL INSANITY.

Under the head of moral insanity are comprehended all conditions of the mind which consist in morbid alterations of the natural disposition, habits, and affections or feelings, without any decided hallucination or marked disorder of the intellectual faculties.

In some of its lighter forms or phases, this kind of madness is frequently met in our intercourse with the world. It is encountered in the domestic circle, in the saloons of gayety and fashion, in the thoroughfares of trade and in

^{*} American Journal of Science and Arts, Vol. xliv.

the halls of the exchange. Indeed, so common are the cases to which the definition of this species of insanity is applicable, that the number is not small of those of whom it can be said, though they have not been subjected to the action of a writ, *de lunatico inquirendo*, that they have at all times enjoyed the blessing *mens sana in corpore sano*.

But moral insanity frequently appears in graver forms, exhibiting a great variety of character. Sometimes it shows itself in the abandonment of ordinary habits and pursuits; in carelessness of one's own affairs, with random indulgence in follies and gross sensualities. Sometimes it is seen in the form of ardent devotion to a succession of projects, each suddenly conceived and embraced, with, it is believed, the certain prospect of rapidly amassing wealth, or advancing in honor and happiness-and each as suddenly given up in disgust. In some cases there is an uncontrollable disposition to merriment, boisterous hilarity, and sportive and mischievous conduct towards others. Occasionally the more striking phenomena are inflated pride, exquisite vanity, and contempt of ordinary things. Frequently it assumes the character of melancholy or deep gloom, attended with fondness for solitude, and forebodings of evil when all around and in prospect is inviting and joyous. A form not uncommon displays itself in an unaccountable partiality for particular persons, and a dislike of the nearest and dearest friends, with a disposition to revile and injure them. The more serious varieties are those in which there is a suicidal propensity, or a feeling of necessity to commit some dreadful crime-for example, to destroy a certain individual, perhaps a relative, as a tender and beloved child-an act, the execution of which, the reasoning power strongly opposes, and the conscience prevents by awakening the feeling of horror. These restraining forces, however, are not always sufficient to curb the strong propensity. Sometimes, as if urged irresistibly by some demoniac influence, the fatal deed is perpetrated; and instant relief from the burning passion is obtained; the homicide feels that a part of his destiny is fulfilled, and hence an emotion of satisfaction spreads over his mind. But such relief is not always durable; regret and remorse may succeed, and rankle long and deep in the soul.

Within the limits of moral derangement, may, perhaps, not improperly, be included some of the remarkable eccentricities and obliquities of human character. Such of these as are not usually regarded as disease, as well as some of them that are so, are among the favorite themes of the dramatist. The ordinary movements of the mind are too tame and monotonous to give interest and animation to his scenes. It is from the excitements and perversions of the moral affections that he derives materials for his spirited creations; and he is regarded as the abler author, whose graphic delineations of character come nearest to truth, without exceeding it; and he the better actor, whose representations most closely counterfeit, while they "o'erstep not the modesty of nature."

Moral insanity has a strong tendency to unsettle and derange the reasoning powers; and hence it not unfrequently, if not always, precedes intellectual insanity. Of this form of madness there are three species, namely, *Mania*, *Monomania*, and *Dementia*.

In mania the rational powers are generally deranged. There is sometimes great incoherence and rapidity of thought and utterance. The reasoning faculty is bewildered; no single subject long engages the attention. Occasionally the intellect is occupied in acute and logical arguments in relation to things which, for the most part, have no existence but in the imagination. Frequently the mind is thrown into furious ravings, and the body into violent and convulsive movements.

In recoveries from mania the intellectual powers are often left in an enfeebled or prostrate state. But the converse of this is sometimes observed. Dr. Pliny Earle says, "It is worthy of remark, that an enlarged mental capacity, with greater activity of intellect, sometimes supervenes upon or accompanies a recovery from insanity;" and he adds, "several cases of the kind have come under our observation, and others are reported by Drs. Brigham and Kirkbride."*

In the second species, or *monomania*, the phenomena are widely different. The mental derangement is partial. The same train of thought habitually engages the mind; and though there is a fixed hallucination on a single subject, on all, or most other matters, the reasoning power acts with correctness. The hallucinations which are classed under this head are strikingly various in character. Sometimes they appear to be of an agreeable kind, though more commonly they are attended with moroseness, misanthropy, anxiety, or alarm, amounting sometimes to despair.

The attack, as just remarked, is frequently consecutive to derangement of the moral feelings. Dejection of spirits, and melancholy broodings, manifestly in many instances owing to derangement of the health, generally exists for some time prior to the disorder of the understanding. Embarrassed in its free exercise by disordered moral and physical feelings, the intellect loses its discriminating power, and fixing itself on something, accidentally but forcibly suggested by the imagination, as a matter of reality, dwells

* American Journal of the Medical Sciences, No. X., April, 1843.

upon it with unremitting attention. The insane idea may relate to the patient's physical condition, as his personal identity; he may fancy himself a king or person of dignity, and as such, exact homage or deference from all around him; or transformed into some inanimate substance, of a kind, perhaps, which is fragile, or easily injured. He may believe there is something, as an animal, within him, which is torturing and slowly destroying him. "A man, mentioned by Pinel," says Abercrombie, "who had become insane during the French revolution, imagined that he had been guillotined; that the judges had changed their mind after the sentence was executed, and had ordered his head to be put on again; and that the person entrusted with this duty had made a mistake, and put a wrong head upon him." The illusion may relate to the patient's pecuniary affairs, or to his worldly prospects-to some matter of conscience, as some imaginary crime, or some real but triffing immorality in his former life, which he magnifies and views in false and distorted relations. It may relate to duties which he fancies are imposed upon him, such as to reform the age, or remodel the system of society. Whether real or imaginary crime is more productive of monomania, is a question which seems not to admit of debate. A writer remarks that in his own experience, "for every one instance of remorse or repentance for real guilt, leading to monomania, there are fifty imaginary ones."* Monomania may appear in an intermittent form-the illusion occurring sometimes in a quotidian or tertian type. Not unfrequently the mental distress is so protracted and overwhelming that life becomes a burden, and is ended by suicide.

The characters of the third variety of intellectual in-

* Med. Chirurg. Review, No. 21, p. 168.

sanity, or dementia, or fatuity as it is sometimes called, are also well marked. In this the mind is crowded with ideas which have no rational connection, and which are every moment changing. There is no command of the power of attention, and consequently there is no reflection; in most cases the perceptive faculty is deeply impaired. This form of mental lesion may arise primarily from causes which fall rapidly and with overpowering force upon the mind. Thus, two brothers standing side by side in battle, one is struck down dead, and the other is instantly seized with dementia. But more frequently dementia is consequent to chronic mania, epilepsy, paralysis, and fever complicated with inflammation of the brain.

Dementia has been identified with idiocy; but some modern pathologists have made a broad and just distinction between them. Dementia occurs when the mind has been developed and in healthful action; idiocy, on the contrary, is a congenital incapacity of the intellectual and moral powers, owing to defective organization of the brain; and hence a person in this condition can no more be regarded as diseased than one born with a deformed arm or leg.

Besides the lesions of mind which have been described, there is another of so frequent occurrence that we cannot avoid giving it a passing notice. I allude to delirium tremens. Arising usually from a specific cause, namely, alcoholic drinks, which produce peculiar effects on the brain and nervous system, its phenomena are remarkably uniform and well characterised. The intellectual and moral powers are all of them thrown into a state of morbid excitement and confusion. The more remarkable hallucinations occur in the imagination as it exists in relation with the organ of vision; and hence they are accompanied by spectral illusions. Like the phantasms described by the writers on apparitions and demonology, the images in the mind's eye are distinct, and remain sufficiently long to be contemplated with attention. Sometimes they assume forms and attitudes that amuse the patient. Thus, they may appear as fairies in a dance, on the floor of his apartment, the shapes and costumes of which he regards with curious attention and pleasurable emotions. More commonly the illusions are of an alarming and fearful character. Sometimes the patient imagines he is sought for by the officers of justice, to answer for some heinous offence, of which he declares he is innocent; he believes that a plot is formed to rob and murder him, or that he is the object of signal vengeance. Occasionally he is annoyed by rats and insects, or terrified by hideous serpents and monsters. Sometimes he is surrounded by devils, each plying some device to torment him. In a word, in no other disease is the mind so fraught with horrible images-so lacerated, tortured, and agonized. Well does it deserve the expressive popular appellation of "the horrors." The furies in tormenting Orestes could inflict no severer sufferings.

From these general observations on the conditions of the intellectual and moral powers in disorders of the brain, we proceed to remark that the mind in certain maladies of the *chest*, present some phenomena which are deserving of notice.

Usually, in these diseases, the mental faculties suffer no other disturbance than such as attends ordinary febrile excitement. Delirium sometimes occurs; but it is occasional and transient, depending commonly on peculiarities of temperament and exacerbations of the symptomatic fever, a circumstance which in general is sufficient to distinguish it from the mental disorder arising from a primitive disease of the brain. Should the sympathetic irritation of the brain, however, produce a serious injury of that organ,—a lesion that becomes fixed and independent of the thoracic complaint, the mind will of course undergo the same deviations from its sound state which occur in idiopathic cerebral affections.

In the later periods of acute inflammations of the lungs, heart, and pericardium, the mind often betrays much anxiety and confused emotion; and as the last hours of life pass away, and the aeration of the blood becomes more and more defective, the sensorial power gradually fails, and the mind sinks into inaction or hebetude.

It is observed by Dr. James Jackson of Boston, in his beautiful memoir of his son, that "the integrity of the mind is much oftener maintained to the last moments of life, in diseases of the thorax, both in acute and chronic, than in those of the abdomen. It is," he says, "not rare to find patients under pneumonitis and phthisis, rising in bed and even getting up out of bed in the full possession of their minds, within the last hour of life." And he adds, "It is in such cases that we often hear those calm and interesting discourses, upon their own situation and in regard to the affairs of their friends, from patients, who are fully aware how few are the minutes which remain for them in this world."*

* According to M. Grisolle, delirium in pneumonia " is of importance, not only because it may arise from different causes, offering opposite indications, but also because it may, in some cases, give rise to the belief in the existence of a cerebral disease, when in fact the affection is seated in the lungs. And the necessity of a complete examination of the organs is shown by the fact, that where this has been neglected, it has not uncommonly happened that persons have been carried to lunatic establishments on account of a temporary mania, developed during the acute stage or the resolution of pneumonia.

A third part of such cases manifest themselves in persons addicted to drinking; and it has been said that pneumonia of the apex especially gives rise to this symptom; but of 27 patients exhibiting delirium, M. Grisolle has found the apex

In some of the chronic forms of the same diseases, and particularly when dropsical effusions have taken place in the cavities of the chest, producing orthopnœa and a feeling of impending suffocation, the physical sufferings absorb the attention of the patient, and not unfrequently, when they are long protracted, occasion a strong desire for death. We know of few examples of human malady which more painfully excites the sympathy of a sensitive bystander, than the sufferings here alluded to, especially when they occur in a person of refined and cultivated intellect, and of deep religious feeling. Chronic organic disorders of the heart and large vessels, though they may not, when stationary or tardy in their progress, impair the soundness and vigor of the mind, are often attended with great depression of spirits, timidity, frightful dreams, and tremulous apprehensions of sudden death.

But there is no disease of the thorax so uniformly attended by the same intellectual and moral phenomena as consumption. This disorder, which in some countries destroys one fifth or sixth of the population, differs essentially in its nature from all other diseases of the chest; and what is remarkable, among its characteristics, is a state of the mind rarely observed in any other malady, namely, *a delusive hope of recovery*. This feature of the complaint is regarded by an eminent pathologist, Dr. Good, as distinctly pathognomonic, and as such, it enters into his definition of the disease.

In the incipient period of the pulmonary affection there is generally more or less anxiety respecting its tendency to

affected in 9, the base in 14, and the middle lobe in 4; and MM. Andral and Briquet have made similar observations. It may, however, be stated, that double pneumonia is more likely to give rise to delirium than single."—British and Foreign Med. Chirurg. Review, No. IV., pp. 539, 540, from L'Union Medicale, No. 9.

run on to confirmed phthisis; and if hemorrhage from the lungs occur, the alarm is greatly increased; but after frequent repetitions of the hemorrhage, and as soon as the pathological changes in the lungs have gone to the point of breaking down the structure of these organs, and the constitution is brought fully under the influence of the malady, the mind acquires a character in a high degree pecu-The reasoning faculty remains, for the most part, liar. unimpaired, being, in many cases, capable of vigorous exercise in matters of literature and science; the imagination is active, and sometimes more brilliant than in health. The moral affections shine out with unwonted lustre; and hope, though often dampened, allows no ordinary occurrence, no discouragement, no deterioration of symptoms to obscure the prospect of recovery ; it sustains its ascendency in the mind amid the ravages of pulmonary disorganization, and the exhausting paroxysms of hectic. Nothing can break the delusion but an extremity of suffering or the agony of death.

The cases of consumption in which an opposite state of mind obtains, are generally complicated with a morbidly irritable nervous system, and a disordered condition of the digestive organs. In such cases despondency may prevail; but ordinarily something like a neutral state is observed neither great alarm on the one hand nor exalted hope on the other. In most instances of complicated phthisis, however, the moral feelings, whatever may be their general tenor, are variable. Where despondency is the prevailing feeling, hope occasionally breaks forth with cheering brightness; and where despondency and hope appear to be in equilibrium they nevertheless are often observed to alternately preponderate. It is in the purely unmixed form of phthisis, that a writer on the subject remarks, quoting and changing a word in the line of a poet, .

"Hope springs eternal in the hectic breast."

The inquiry is here naturally suggested, whether hope, as a sanative power, is not evolved and strengthened in proportion to the proclivity of certain hectic diseases, to terminate fatally? That such is the case seems probable, from the facts observed in various hectic diseases, and particularly in consumption, the most certainly fatal of all such diseases, and one in which the passion in question is more exalted and more irrepressible than in any other disorder. So great is its power, that there is reason to believe, that, in phthisis, it often protracts life much beyond the period which the disorganized state of the lungs would otherwise admit. Moreover, may it not sometimes, when conjoined with some other passion of an exciting and sustaining character, act with curative energy?

Passing from the conditions of the mind in thoracic diseases, let us notice those which attend upon disorders of the abdomen. The sympathy existing between most of the digestive organs and the sensorium is so strong and readily excited, that irritation of a certain kind occurring in the former, is rapidly transmitted to the latter, and vice versa. If the disorder be primary in the digestive apparatus, it sympathetically excites a morbid state of the brain, and this by a reflex action aggravates the original affection. These facts are in general more strikingly manifested in the chronic than in the acute diseases of the abdomen. Those of the *acute* kind, as peritonitis, gastritis, enteritis, hepatitis, &c., are seldom attended by any remarkable intellectual or moral phenomena. Delirium may occur; but it is usually of the kind procured by simple febrile excitement. When such inflammations terminate fatally, the mind often retains much of its healthful energy to the last moments of life, enabling the patient to realize the near approach of death, and to reflect on the momentous interests connected with the solemnity of entering into another state of being.

It is chiefly in the *chronic* affections of the abdomen. and particularly in gastric and hepatic derangements, that the mind especially suffers. The more common mental phenomena arising from these disorders, are anxiety, despondency, gloomy superstition, disposition to magnify trifling symptoms into dangerous and fatal maladies, apprehensions of loss of reason and of sudden death, and total dislike for all those things which in health were sources of enjoyment. These phenomena, when existing in a high degree, especially in persons of the melancholic temperament, constitute that form of disease denominated hypochondriasis-a disease closely allied to, if not a variety of, monomania-the only difference between them consisting in the mind of the patient, in the former, being morbidly concerned about his physical condition, and in the latter, being deluded on certain subjects foreign to his health.

To these observations it is important to add, that some of the more formidable instances, not only of moral but of intellectual insanity, though immediately depending upon organic or functional lesions within the cranium, have their *fons et origo* in derangements of the abdominal viscera. From the same sources, also, connected frequently with disorder of the uterine functions, spring some of the curious and protean forms of hysteria.

The conditions of the mind in *fevers*, strictly so called, are almost of every variety. Generally these diseases pre-
sent certain symptoms which are common to them all; and among those more uniformly present, are such as indicate disturbance of the functions of the brain. A simple incapacity of the mind to act with its accustomed clearness and steadiness is the only phenomenon that occurs in ordinary mild attacks; but between this and the other extreme of total abolition of intelligence in coma, are many grades of mental activity and varieties of aberration.

In intermittent fever, usually the least dangerous of febrile diseases, the intellect rarely suffers beyond a slight diminution of its healthful stability and vigour, though cases sometimes occur in which, during the hot stage, the patient becomes extremely restless, impatient, and delirious; "the time," as Dr. Fordyce remarks, "passed through seems infinitely long," and no assurance, that the paroxysm will soon end favorably, can calm his perturbation. "Every one," says Dr. Sewall, "who has observed cases of intermittent fever, must have been struck with the increased vigor and activity of the mind during the hot stage of the disease. Men of very ordinary capacity while under its influence, often rise to a degree of strength and boldness of conception, and brilliancy of expression truly astonishing."

In *remittent* and most other kinds of fevers which are protracted for many days, the mind is variously, and often profoundly affected. Uneasy sensations, producing restlessness, jactitation, and watchfulness, are the principal distressing phenomena. In the milder forms, the disease runs its course without occasioning any decided lesion of the reasoning power, or change in the moral feelings. Sometimes, however, during the exacerbations, the mind is thrown into great disorder; delirium occurs, and sometimes perverseness of disposition, impatience, obstinacy, dissatisfaction with every thing offered as means of relief, and rejection of the kind assiduities of friends and physicians. The sleep, instead of being sound, is a dreaming state, the same ideas, or confusion of images and incidents continue, sometimes for hours, to harrass the mind. Occasionally the patient is perplexed by an equivocal consciousness of his personal identity, or possessed with the notion of the certain fatality of his case. In some instances, besides occasional delirium, there are great timidity, tenderness of conscience, contrition for past actions, and alarm for the future; and, at the same time, expressions of affection and thankfulness to those engaged in ministering to their necessities and comfort. In other cases, the tenor of the mind is more uniform, being, for the most part, tranquil, and though liable to variations of feeling, is upon the whole happy and resigned. Frequently in the last stage of typhus and of some other fevers, the lesion of the brain is so considerable, that patients lie on their backs in a halfwaking, somnolent or comatose state. In these conditions, the mental powers are deeply deranged and prostrated. The delirious muttering, catching at imaginary objects in the air, and picking and drawing the bed-clothes, betray the confusion and illusory conceptions of the mind. The moribund state is marked by still greater exhaustion, and the patient dies unconscious of his last moments. It but rarely happens in the fevers we have mentioned, that the closing scene is attended with sufficient intelligence and physical power to give tokens of recognition of surrounding friends.

But there is one species of fever in which the mental phenomena are so different from those that occur in the more common kinds of febrile disease, that an adequate idea of them can scarcely be formed without a practical acquaintance with the disorder. I refer to yellow fever. Though it is not within the design of the present discourse to give the pathological history of any one disease, I may here remark that the opinion, once so generally entertained, that yellow fever is but a higher grade of bilious remittent fever, is now for just reasons regarded as erroneous. Several of the phenomena that combine to give a distinctive character to yellow fever, are in a high degree peculiar; and of these there is no one that more strongly attracts the attention of the physician, than the singular preservation of the functions of relation. Attended from the beginning by peculiar, as well as by many of the symptoms common to other fevers, the disease runs through the stage of excitement in three or four days, and then sinks into a profound. collapse of the organic or vital functions, leaving the mind and voluntary powers comparatively unimpaired. Not unfrequently patients, pulseless at the wrist, with deadly coldness of the extremities, and making no complaint but of morbid sensibility of the stomach, rise from their beds, and though somewhat embarrassed in their movements, and obtuse in thought, converse with their friends, write letters, speak of their business, and not only imagine themselves convalescent, but by their intelligence and actions lead those around them to believe that they are so. Examples of this kind are called walking cases; and the sudden and unexpected occurrence of death in such deceptive appearances of recovery, astonish every one not apprised of the fact that the disease in this form is most malignant and most fatal. Sometimes the collapse is attended by different symptoms, at one time ending mortally in a paroxysm. of delirium, and at another in coma.

An examination similar to the foregoing might be extended to the conditions of the mind in various other diseases; but as the time allotted to this discourse is exhausted, I can only add that a full exposition of the subject would comprehend much that is interesting in relation to the mental phenomena of diseases which are modified by the differences of age, sex, temperament, profession, and certain other general causes to which we have before alluded.

GENTLEMEN STUDENTS OF MEDICINE:

I doubt not you will agree with me, that sufficient has been said to render it obvious that a medical education should embrace a knowledge of the philosophy of the human mind. We have seen that the intellectual and moral powers are subject to disturbance and derangement from bodily diseases; and that, though the mind is essentially immaterial and immortal, when certain of its faculties are excited, they powerfully affect the corporeal frame, producing effects which are salutary or morbid. Engaged as the student is, for the most part, in acquiring a knowledge of the physical signs, anatomical characters and treatment of diseases, he is prone to neglect, in ordinary cases, the concomitant mental phenomena. Now this should not be so. He should know that to allay anxieties, repress alarms, quell the angry passions, subdue obstinacy, divert the imagination, reinstate the reasoning power, and elevate the drooping and desponding spirit, is frequently as necessary to the cure of a patient, as to correct the disordered organic functions; and that often as much knowledge and skill are wanted to accomplish the former as the latter.

In looking around on the moral world, nothing is more observable than the fact that some individuals exercise a vastly greater influence over their fellow men than others. Such a moral power, varying in degree, is seen in action on every side; and every where its agency is productive of

good or evil. When it exists as a vigorous principle in the character of a physician, it gives him an influence, as a practitioner, which no amount of simple medical learning can bestow. In the general practice of medicine minds are encountered which act independently, and which are accustomed to rule. To manage such minds in disease, and especially in circumstances of danger and alarm, requires a knowledge of the various and best modes of approaching them-of acquiring their confidence, and of bringing them under moral subjection. There are few in the class of junior physicians that do not feel embarrassment when treating those whom they are conscious are their equals or superiors in the quality we have in view. Where is the young physician or surgeon, and the question might be asked in respect to many that are older, who could make an important prescription or perform a surgical operation for one of the intellectual and moral qualities of Napoleon or Sir Walter Scott, with the same coolness that he would for a hospital patient? It sometimes happens that patients, distinguished for their elevation and decision of character, are aware of the embarrassed feelings of their medical attendants; and not unfrequently endeavor to relieve them by encouraging expressions. Dr. Johnson, addressing the surgeon who was engaged in scarifying his dropsical legs, said, "Deeper, deeper, I want length of life, and you are afraid of giving me pain, which I do not value." In this expression, however, it has been thought he was more influenced by the fear of death than a desire to remove the fear of the operator. Washington in his last illness, observing the person who was called as a bleeder, to be agitated, said with difficulty, "Don't be afraid;" and Philip II. of Spain exclaimed to his physicians, "Are you afraid to take a few drops of blood from a man who has made it flow in rivers ?"

I have indulged in these concluding reflections, in the hope that they may induce those who resort to this University for medical instruction, to study the operations of the mind in health and disease; and so to discipline their own intellectual and moral powers, that they may be prepared, not only to exert a salutary control over the sick of every rank and character, but with self-possession, founded on competent knowledge and conscious moral integrity, to take a commanding position in society, and thereby sustain the dignity of their profession, and enlarge the circle of their usefulness.









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