A treatise on nervous diseases : in which are introduced some observations on the structure and functions of the nervous system; and such an investigation of the symptoms and causes of these diseases as may lead to a rational and successful method of cure / by Sayer Walker, M. D. of the Royal College of Physicians, London: physician in ordinary to the city of London Lying-in-Hospital; and one of the physicians to the City Dispensary.

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173

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from the Author

A

TREATISE

ON

NERVOUS DISEASES;

IN WHICH ARE INTRODUCED

SOME OBSERVATIONS

ON THE

STRUCTURE AND FUNCTIONS

OF THE

NERVOUS SYSTEM;

AND SUCH AN INVESTIGATION OF THE

SYMPTOMS AND CAUSES OF THESE DISEASES

AS MAY LEAD TO A

RATIONAL AND SUCCESSFUL

METHOD OF CURE.

By SAYER WALKER, M. D.

Of the Royal College of Physicians, London;
Physician in Ordinary to the City of London Lying-in-Hospital;
And one of the Physicians to the City Dispensary.

Vivere nec recte nec suaviter. Haud quia grando
Contuderit vites, oleamque momorderit æstus;
Nec quia longinquis armentum ægrotet in arvis
Sed quia mente minus validus ———

* * * * *

Fidis offendar medicis, irascar amicis. HORAT.

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Street, Borough.

1796

TO

WILLIAM SAUNDERS, M. D.

Fellow of the College of Physicians,

OF THE

Royal Societies of London and Edinburgh;

AND

Senior Physician to Guy's Hospital.

DEAR SIR,

THE high medical character which you have long supported, places you beyond the reach of any encomium which this address can convey. When I asked permission,

therefore, to affix your name to this Treatiſe, I did not aim at paying a compliment to you; but rather embraced the opportunity afforded myſelf, of expreſſing my grateful recollection of the advantages I enjoyed, many years ago, under your public medical inſtruction, as well as of the numerous teſtimonies of your friendſhip which I have ſince received.

To the flattering encouragement you have been pleaſed to give to this attempt, it is owing that I now preſume to preſent theſe pages to the view of the Public.

That you may long continue to occupy the ſtation you now hold, with ſo much honour to yourſelf and advantage to the public, is the ſincere wiſh of,

Dear Sir,

Your moſt obedient humble Servant,

SAYER WALKER.

CHARTER HOUSE SQUARE,
November 3, 1796.

PREFACE.

THE diviſion of diſeaſes into acute and chronic, has obtained very generally amongſt medical writers. The former of theſe terms has been applied to thoſe diſeaſes which are attended with a degree of violence and danger, and haſten rapidly to a termination; the latter has been uſed to diſtinguiſh thoſe, which, being more ſlow in their progreſs, and much leſs dangerous in their immediate conſequences, may be protracted to a very uncertain duration; and, if neglected, or improperly

treated, may accompany the patient through life. The diſeaſes treated of in the following pages, have been generally ranked amongſt thoſe which have been termed chronic. Dr. Sydenham has obſerved, that "as fevers, with their attendants, "conſtitute two-thirds of the diſeaſes to "which mankind are ſubject, upon com-"paring them with the whole tribe of "chronic diſtempers; ſo hyſteric diſor-"ders, or, at leaſt, ſuch as are ſo called, "make up half the remaining third part."

Diſeaſes, therefore, which ſo often occur, and the frequency of which has increaſed ſince the time of Sydenham, muſt have occupied a very conſiderable ſhare of the attention of medical men. Though not accompanied with immediate danger, they are frequently ſo tedious and trouble-

ſome, as to call loudly upon us for their removal or relief.

The ſymptoms which are enumerated in theſe pages, have been very generally denominated *nervous*. Whether the term be proper in this excluſive application of it, or whether it might not, with equal propriety, be applied to every diſeaſe, has been queſtioned by ſome writers. In the following treatiſe it has been uſed, however, in the common and popular acceptation, as applied to thoſe various ſymptoms, and thoſe affections of the ſenſitive and moving powers, which cannot be attributed to fever or any manifeſt local diſeaſe.

Diſorders of this claſs, being attributed to debility, have, very generally, been treated by cordials and ſtimulants, many

of which have accordingly acquired the appellation of *nervous medicines;* but the more narrowly we inquire into the circumſtances of conſtitution and habit, of diet and the mode of life, with which theſe diſeaſes are connected, the more we ſhall be convinced of the neceſſity of varying the mode of treatment. As it is difficult to arrange and claſs the various ſymptoms, which, taken in the aggregate, conſtitute the different diſeaſes; ſo we cannot expect to find, under any particular claſs of medicines, a remedy which will be equally proper in every inſtance in which they occur. Theſe diſeaſes muſt certainly be ranked amongſt thoſe, for which no ſpecific is yet diſcovered; and it is only by oppoſing various ſymptoms as they occur, and by producing a change in the

general habit, that any permanent advantage can be obtained.

If it had been the author's deſign to treat ſyſtematically of thoſe diſeaſes, which are claſſed under Spaſmi and Debilitates by Sauvages, or under Neuroſes by Dr. Cullen, he might have availed himſelf of the mode of arrangement adopted by theſe celebrated noſologiſts: but as it was not his deſign to treat particularly and diſtinctly of hyſteria, hypochondriaſis, or dyſpepſia; of apoplexy, paralyſis, or epilepſy; but of ſymptoms which are more nearly or more remotely connected with each of them; ſo, obſerving that theſe ſymptoms occur in patients, who have never been viſited by a diſtinct paroxyſm of either of theſe diſeaſes, it became neceſſary to give a general hiſtory of them, in the manner in

which they moſt uſually occur, and without any regard to a particular noſological arrangement.

After ſome remarks on the ſtructure and functions of the nervous ſyſtem, a large detail is given of ſenſations deſcribed by the patient, or ſymptoms which have occurred to the notice of the practitioner. Theſe are arranged under the different functions which are affected by them; and the morbid ſtate of the circulating, reſpiratory, and other actions of the ſyſtem, as influenced by theſe diſeaſes, is pointed out. The *ſubjects* moſt liable to the influence of theſe complaints, from ſome peculiarity of temperament, are deſcribed; and in connexion with this, ſome of the *cauſes*, which operate more immediately or more

remotely in the production of the diſeaſes, are enumerated.

In treating of the *method of cure*, the attention is firſt directed to the general circumſtances under which the diſeaſe appears, or with which it may be more immediately connected; and afterwards the more particular mode of obviating urgent ſymptoms is pointed out, and ſuch an attention to regimen and diet is recommended, as may conſpire, with the uſe of proper medicines, gradually to conduct the patient to the enjoyment of health and vigour.

If perſons, ſuffering under the influence of any of theſe diſeaſes, are diverted from an improper dependence upon noſtrums and fancied ſpecifics, and directed to ſeek the aid of medicine under a judicious and

well-regulated exhibition of it; if an erroneous practice is corrected, or a ſafe and ſucceſsful one is farther eſtabliſhed; if diſeaſes, acknowledged to be ſome of the moſt afflictive, are, in any degree, alleviated; an important end will be anſwered by the publication of theſe pages. With the hope of this, the author ſubmits them to the peruſal of the candid public.

CONTENTS.

CHAP. IV.

CHAP. V.

CHAP. VI.

CHAP. I.

ON THE STRUCTURE AND FUNCTIONS OF THE NERVOUS SYSTEM.

AS an introduction to the hiſtory and cure of the diſeaſes, which are treated of in the following pages, it may be proper to take ſome notice of the ſtructure and functions of thoſe organs, with which they are ſuppoſed to be particularly connected.

The nervous ſyſtem conſiſts of the cerebrum, cerebellum, medulla oblongata,

medulla ſpinalis, and the nerves; the laſt of which are bundles of denſe inelaſtic fibres proceeding from ſome part of the cerebrum, cerebellum, medulla oblongata, or medulla ſpinalis, and diſtributed through almoſt every part of the body.

The ſubſtance of which the nerves are compoſed is ſimilar to that which forms the different parts of the brain, whence they proceed; ſo that they may be conſidered as continuations of that organ. That different opinions ſhould be entertained concerning their matter or form, and that many conjectures, or hypotheſes, ſhould exiſt, reſpecting their ultimate ſtructure, is not ſurpriſing. By ſome, they have been deſcribed as conſiſting entirely of the medullary ſubſtance of the brain; whilſt, by others, they have been repre-

ſented as partaking of the cortical, or cineritious. Dr. Monro obſerves that, as the exterior part of the cerebrum is cortical or cineritious, ſo this ſubſtance is not confined to that part, but is interſperſed through the interior and medullary parts; and that the ſame intermixture of cortical and medullary matter exiſts throughout the whole ſyſtem of the nerves: ſo that, inſtead of medullary filaments, they are, ſtrictly ſpeaking, a compound of medullary and cortical matter; though the quantity of the former by far exceeds that of the latter.

To this general rule, however, there are ſome exceptions, particularly in the optic nerve, and in the portio mollis of the auditory nerves; the white colour of which ſeems to indicate that they do not

contain any intermixture of the cineritious matter.

The nerves are deſcribed by anatomiſts as bundles of medullary fibres or filaments. When they firſt proceed from the place of their origin, whether in the brain, medulla oblongata, or medulla ſpinalis, they appear in a large and connected maſs, which is called their trunk; but they are afterwards divided into ſmaller bundles, or faſciculi, and again divide and ſubdivide almoſt infinitely. Some phyſiologiſts have ſuppoſed, however, that notwithſtanding their connected appearance, in ſome part of their courſe, every nerve, from its extremity to its origin, maintains a diſtinct ſtructure, though too minute for ocular detection. The reaſon for this conjecture is the neceſſity for ſuch a ſtructure, in

order to convey diſtinct ſenſations. The ſize of the nerves is different in different parts of the ſyſtem, nor do they decreaſe in ſize, as might be ſuppoſed, in their paſſage from the trunk to the extremity.

So difficult is it to aſcertain, even by the help of the microſcope, the preciſe ſtructure of theſe organs, that anatomiſts of equal reputation for accuracy of obſervation, and fidelity of repreſentation, have differed in the accounts which they have given of this matter. By ſome, they have been repreſented as hollow tubes, adapted to the conveyance of a fluid; by others, they have been deſcribed as ſolid fibres, more adapted to act by tremor or vibration. Fontana, at one time, conſidered theſe fibres as compoſed of cylinders, with bands twined around them, in a ſpiral

direction; but afterwards, upon the ſuſpicion of ſome optical deception, he attempted a more accurate inveſtigation, which led to the concluſion that their direction was that of parallel winding fibres.

The teguments, or coverings, by which the nerves are inveſted, have excited the attention of anatomiſts; and it has been pretty generally ſuppoſed, that they derive a covering from the different membranes of the brain. Their trunks moſt authors have conſidered as covered both by the dura mater and pia mater: to the nerves or funiculi proceeding from theſe trunks, they have aſſigned a continuation of the pia mater as a covering; but ſome, amongſt whom Zinn and Haller may be reckoned, have doubted whether the dura mater has been continued beyond the trunks. To

ſupply the place of this, they have ſuppoſed a denſe cellular ſubſtance, as an external covering to the branches of nerves. Dr. Monro, obſerving that the texture and colour of this covering ſo nearly agrees with thoſe of the dura mater, thinks it not ſo clear or certain that it is not the ſame; but, whether it be the dura mater, or ſome cellular ſubſtance, he thinks that not only the trunks of the nerves, but alſo the ſmaller cords, particularly thoſe which terminate in muſcles, have a ſimilar coat, and within this the thin vaſcular pia mater.

The neceſſary connexion of the nerves with the brain, or the dependance of the former upon the latter, is a ſubject which has divided the opinions of anatomiſts.

The connexion of theſe, indeed, is acknowledged: where a brain exiſts, nerves will be found proceeding from it; and by many, if not by the largeſt number of anatomiſts and phyſiologiſts, the nerves have been conſidered as deriving their origin and influence from the brain. But upon recollecting that the brain in different animals does not bear the ſame proportion to the number or bulk of the nerves, and that in ſome animals the aggregate maſs of the nerves is much greater than in others, where the brain is much larger; it becomes a queſtion, whether the production of the nerves ſhould be attributed to the brain, or whether the former may not be conſidered as equally neceſſary to the exiſtence of the latter, as the latter to the exiſtence of the former.

As a farther ſupport to this reaſoning, it ſhould be remembered, that in ſome infants, where hardly any brain could be diſcovered, the ſpinal marrow and nerves have been nearly, if not quite, as perfect as in other inſtances, where the brain has been complete.

Dr. Baillie, in his Morbid Anatomy,* obſerves, that "The brain is ſubject to "great variety from original monſtrous "formation. A great part of what is "uſually called the cerebrum is ſometimes "wanting, while the cerebellum and the "medulla ſpinalis are entire; ſometimes "there is hardly any veſtige of either the "cerebrum or cerebellum, and the me-"dulla ſpinalis is very much diminiſhed "in ſize; at other times there is a total

* Page 313.

" want of the brain, and there is no ap-
" pearance of the medulla ſpinalis." In this caſe the Doctor obſerves, " one ſhould " expect a want of nerves through the " whole body. It is, however, not ſo; " nerves are found diſtributed in the com-" mon way, through the limbs, and the " dorſal nerves can be ſeen ariſing from a " membrane ſomewhat reſembling the " dura mater in the canal behind the ver-" tebræ." Facts of this kind, together with reaſonings founded on other circumſtances, have led ſome anatomiſts, and particularly Dr. Monro, to conclude not only that nerves may exiſt without a brain, but that their energy and influence are leſs dependent upon it than has generally been ſuppoſed, and that theſe are derived from the pia mater and its veſſels.

At the ſame time they acknowledge that we can feel and act with our muſcles, only, when the brain and the nerves of the different organs are connected together.

Another fact reſpecting the formation and ſtructure of nerves, which deſerves our attention, is the reproduction of them. This ſubject has for ſome time been litigated by anatomiſts and phyſiologiſts, and has lately been revived by my ingenious friend Dr. Haighton, who, diſcouraged by the contrariety of opinions, which have obtained amongſt thoſe who have depended upon anatomical examination, " determined (as he expreſſes it), to de- " cline an appeal ſo undeciſive, and to " ſubmit his inquiries to a teſt leſs doubt- " ful and fallacious, and as ſuch a teſt " was not to be found within the pale of

" anatomy, he reſolved to try whether " the reſources of phyſiology could not " furniſh him with what he wiſhed." The reſult of the experiments made on the occaſion ſeems to me, as well as to the author, to afford a proof that nerves are not only capable of being united, but that the new-formed ſubſtance is really and properly nerve.

After theſe few remarks on the ſtructure and origin of nerves, we may proceed to ſome obſervations on their functions. The preciſe mode in which theſe organs perform their office ſtill remains among thoſe arcana of nature which we are not permitted fully to diſcover. As a great variety of opinions has obtained amongſt anatomiſts with reſpect to their ſtructure, though this may be ſuppoſed to be the object of our

ſenſes, it is no wonder that ſome difference of opinion ſhould ariſe reſpecting the manner in which their various functions are performed. When the brain was ſuppoſed to be a large gland, and the nerves to be hollow and tubular, and to act as ſo many ducts to a ſecretory organ, through which were derived the nervous fluid or animal ſpirits, as they were called, it was natural to attribute the influence of nerves to this fluid circulating through them. Dr. Hartley, rejecting this ſyſtem, has very ingeniouſly endeavoured to ſupport the opinion of the different phenomena attributed to nervous energy being cauſed by vibration, which he ſuppoſes to be excited and propagated partly by a very ſubtle and elaſtic fluid called æther.

Some later obſervations and experiments have led philoſophers and phyſiologiſts to a new theory of nervous energy, in which it is conſidered as bearing a conſiderable reſemblance to the electric fluid, or, perhaps, poſſeſſing the ſame powers and properties, though under a different name.

Profeſſor Galvani, and Dr. Valli, tried a number of experiments, which ſeemed to point out a connexion, or reſemblance, if not an identity, between nervous influence and what they term animal electricity.

The hint firſt ſuggeſted on this ſubject was occaſioned by an accidental circumſtance. Profeſſor Galvani, at Bologna, obſerved that very lively movements were excited in the legs of a frog, which he was diſſecting, and one of the nerves of

which he touched, whilſt ſome ſparks were drawn from the prime conductor of an electrical machine. He farther diſcovered, that ſimilar effects were produced by atmoſpheric electricity, drawn by a conductor placed on the roof of his houſe, to which were attached other conductors, connected with the nerves of the animal on which he made the experiments.

Dr. Valli, by the reſult of a number of experiments, was led to the concluſion, that the various functions of the nerves are produced by ſomething in the animal ſyſtem, which bears a near reſemblance to the electric fluid. He thinks, that what has been called nervous energy might, with equal propriety, be denominated animal electricity. As a proof that the nervous fluid, or energy, and the electric

are the ſame, he obſerves that the ſame ſubſtances conduct both of them, and that a ſimilar velocity is obſerved in their reſpective influence. As phyſiologiſts have acknowledged the exiſtence of three different powers in the muſcles; contractibility, irritability, and nervous force; ſo he aſſerts that theſe may be explained on the principle of animal electricity.

Dr. Fowler, deſirous of aſcertaining whether the influence diſcovered by Galvani, can be referred to any known law of nature, or is to be conſidered as a newly diſcovered one, inſtituted a number of experiments, in the courſe of which he was led to queſtion the truth of the hypotheſis adopted by Galvani and Volta. After many experiments, he diſcovered that he could not excite the appearances which

they had deſcribed, by any ſubſtance, whether ſolid or fluid, except the metals; and that the contact of different metals was in every caſe neceſſary to the effect. The Doctor therefore concludes that, ſtrong as the analogy is which this influence bears to electricity, conſiderable doubt muſt remain reſpecting their identity. In the ſcale of electrical conductors, charcoal, he obſerves, holds a higher place than the fluids of animal bodies: but of the influence in queſtion he diſcovered, that animal fluids are the beſt conductors, and never found that it paſſed through charcoal.

Dr. Monro, in his experiments on the nervous ſyſtem, made chiefly with a view of determining the nature and effects of animal electricity, diſcovered, that in form-

ing a circle, by means of the part of a living animal, and two metals in contact with each other, if a nerve make a part of the circle, the muſcle in which the nerve terminates is convulſed: the effects are the ſame, though the dead parts of animals, or pure water, make part of the circle; or when the animal and metals are inſulated: but if any part of the circle is compoſed of glaſs, or ſealing-wax, the muſcles are not convulſed: nor are convulſions excited, unleſs the metals are in contact with each other, and both of them in contact with the animal ſubſtance, or water, making part of the circle.

From theſe experiments, in connexion with others, he thinks it natural to obſerve a reſemblance between the fluid put in motion and the electric fluid. From far-

ther experiments, however, he concludes, that though the fluid be electrical, or bear a very near reſemblance to it, yet this fluid, and the nervous fluid or energy, are not the ſame; that this acts merely as a ſtimulus to the nervous energy; and that, therefore, theſe experiments have pointed out a new mode of exciting the nervous energy, without throwing any direct light on the nature of it.

Dr. Wells, in a paper read before the Royal Society, containing obſervations on an influence which excites the muſcles of animals to contract, declares his difference in opinion with Dr. Fowler, reſpecting the neceſſity of two metals being employed in order to produce motion; and farther aſſerts, that when two metals are uſed, the muſcle and its nerve do not furniſh

any thing more than any other moiſt ſubſtance. This point, which M. Volta aſſerted, Dr. Wells undertook to prove, and, from many experiments made with this view, he draws the concluſion, that animals act by their moiſture alone, in giving origin to that influence by which muſcular action is excited.

Dr. Wells expreſſes ſome ſurprize, that none of thoſe philoſophers, who contend for the identity of this influence, and the electric fluid, have ſuſpected that the only very good dry conductor of the latter, which we know, except the metals, viz. charcoal, poſſeſſes, like them, the power of conducting the former.

In two particular inſtances, Dr. Wells differs in opinion with Dr. Fowler, as well as in the general concluſion which he

draws. He declares that he has frequently ſeen muſcular action produced, not only by a ſingle metal, but likewiſe by charcoal alone; and he remarks, that Dr. Fowler muſt have been particularly unfortunate with reſpect to the charcoal he employed, ſince all the pieces he tried were found to conduct this influence.

The analogy between this influence on muſcular action and electricity ſeems pretty generally acknowledged; but, after all that has been diſcovered on this curious ſubject, it muſt ſtill remain a queſtion, whether the effects produced are to be attributed to extraneous electricity, which, by ſtimulating the nerves, excites their functions; or whether they ariſe from the deſtruction and reſtoration of the equilibrium of the electric fluid poſſeſſed by

the animal, and which will juſtify the term—animal electricity.

Notwithſtanding the obſcurity in which this ſubject is involved, and the difficulty which attends our inquiry into the manner in which the nerves perform their office, that certain effects are produced, and that certain actions, or functions, are performed, experience teſtifies; and what are the laws by which theſe functions are regulated, is an important object of inquiry. It may be obſerved, in general, that the office of the nerves is ſo important and extenſive, that it is more nearly, or more remotely, connected with every part, and with every function of the ſyſtem; growth, ſanguification, circulation,

ſecretion, abſorption, nutrition, reſpiration, ſenſation, and motion, are, ſome of them in a higher, and others in a lower degree, dependent upon the nerves. It is, however, with ſenſation and motion that they are more particularly connected. Some phyſiologiſts have inſiſted much upon the immediate dependence which nutrition has upon the nervous energy. Obſerving that thoſe parts of the animal frame which have been deprived of this energy, or where it is enjoyed only in a partial and limited degree, are, generally, in a ſtate of emaciation, they have attributed the loſs of ſubſtance to the imperfect action or energy of the nerves of that part. That paralytic limbs are frequently leſſened in their ſize muſt be acknowledged as certain; but this effect is to be attributed

more immediately to the ſtate of the circulating ſyſtem. It is well known that muſcles are enlarged by an increaſed flow of red blood into them, and, conſequently, the diminiſhed action of veſſels may occaſion a diminution of ſize; but, whilſt we conſider this as the immediate cauſe, we may attribute ſomething to the ſtate of the nervous ſyſtem. We know that motion contributes to the ſtrength and enlargement of the parts employed: the want of nervous energy, therefore, whilſt it diminiſhes motion and affects the blood veſſels, may prove a more remote cauſe of a defect in the ſize and ſtrength of any part of the ſyſtem. The nerves, then, may be conſidered as acting only a ſecondary part, in the buſineſs of nutrition; whilſt more immediate and

primary action is attributed to the blood veſſels.

With more juſtice and propriety may ſenſation be attributed to nervous influence. That this depends upon the preſence of nerves would admit of very clear proof, were it neceſſary to adduce any; ſince it is well known that wherever a nerve is injured, a diminution, or loſs of ſenſation in that part, is the conſequence. Moreover, ſenſation depends upon the communication being kept up between the nerves and the brain, ſince all the parts below that where the nerve is injured become inſenſible, in proportion to the degree of injury; whilſt the parts above this læſion of the nerve, and the connexion of which with the brain is ſtill continued, remain unaffected. Senſation

is the moſt general and extenſive effect of nervous influence. This exiſts wherever there are nerves that have communication with the brain; whereas motion is produced only in thoſe parts where muſcle is preſent. The laws by which ſenſation is regulated, are numerous and important. The organs, which are the medium of ſenſation, are very different, and require different ſtimuli to excite them. Light is the proper ſtimulus of the optic nerve; whilſt air is the medium through which the auditory nerve is acted upon.

Senſations not only differ in proportion to the force or ſtrength of impreſſion upon the organ, but depend alſo upon the quickneſs or ſlowneſs of it. A weight may be placed upon the hand, or upon any other part of the body, without

producing ſenſation, in any conſiderable degree; but the ſame weight dropt upon it from ſome diſtance, and ſo producing a quickneſs of impreſſion, would increaſe the degree of ſenſation. On the other hand, a certain duration of impreſſion is neceſſary to a diſtinct ſenſation. Objects may paſs ſo rapidly as not to be diſtinctly ſeen, and different ſounds may be produced in ſo quick a ſucceſſion, as not to produce a diſtinct ſenſation of any of them.

Some exertion of the mind ſeems neceſſary to the production of ſenſation. An object may be preſented to view without our ſeeing it, or we may be within the reach of ſome vibration ſufficient to excite the ſenſation of hearing, but our attention may be ſo far engaged, by ſome

other object, as not to be affected by it. A clock may ſtrike, or the key of a harpſichord may be moved, in a room where we are ſitting, without exciting the uſual ſenſations, if our attention is much occupied.

Senſibility, or a ſuſceptibility of impreſſion, may exiſt in different degrees, and may be affected by a great variety of cauſes; ſo that the ſame ſtimulus will have a very different effect. The frequency of its uſe will often leſſen its influence, and not only a repetition of it, but alſo an increaſe of its power, becomes neceſſary to produce the uſual effect.

The eye, which has been, for ſome time, accuſtomed to a ſtrong light, upon ſuddenly retiring into a room leſs illuminated, almoſt loſes its power of ſeeing;

and the ear, which has been impreſſed by ſtrong vibrations, loſes, by degrees, its ſenſibility to common ſounds. To the palate which has been regaled by high-ſeaſoned food, that which is ſimple appears very inſipid. This variation of ſenſibility, whether above or below a certain ſtandard, becomes a ſource of diſeaſe, as we ſhall have occaſion to remark in the courſe of this treatiſe.

Motion is another effect of nervous energy. The influence of nerves in producing motion, or action, is generally acknowledged; but many opinions have obtained reſpecting the manner in which they operate, and the degree of influence they poſſeſs. It has been maintained by ſome that the muſcles poſſeſs a power of contraction originally inherent, and to-

tally independent of the nerves. Dr. Fordyce conſiders muſcular motion as original, and thinks nervous energy unneceſſary: he conſiders motion as the effect of attraction, which he calls the attraction of life, and which, in different degrees, produces tone, action, or ſpaſm. Dr. Blane aſſerts, that the nerves do not beſtow irritability, but only modify it. On the other hand, Dr. Cullen, and ſome other phyſiologiſts, conſider nerves as of ſo much importance to motion, that they refer muſcular action entirely to them. They conſider the muſcular fibres, which are the immediate organs of motion, as the continuation of nerves. Dr. Cullen obſerves, Phyſiol. ſect. 92. "That the "inherent power, or the contraction de- "pendent upon it, can be excited by

" certain applications made either to the " muſcles themſelves, or to the nerves " connected with them; and, in either " caſe, the effects of ſuch applications are " ſo exactly the ſame as to allow us to " conclude, that the matter in the nerves, " and in the muſcular fibres, is of the " ſame kind." From this and other conſiderations, the Doctor thinks it probable, that the muſcular fibres are a continuation of the medullary ſubſtance of the brain and nerves.

The manner in which nerves act in producing motion, has been the ſubject of much conjecture, and different hypotheſes have been formed: but, after all, the preciſe anatomical ſtructure, and the modus operandi of nerves, ſtill remain among the numerous deſiderata of ſcience.

Muſcular action has been diſtinguiſhed into the voluntary, involuntary, and mixed. The firſt of theſe terms deſcribes all thoſe motions or actions, which are entirely under the direction of the will; and which may be increaſed, diminiſhed, or ſuſpended, at pleaſure: the ſecond deſcribes all thoſe which are entirely out of our power, viz. the action of the heart and arteries: the third, or mixed motion, refers to thoſe actions of the ſyſtem, which go on without our attention or exertion, but over which we have ſome power to accelerate or retard them, and even to produce a temporary ſuſpenſion of them. Thus the action of the reſpiratory organs, though it proceeds without any exertion of the mind, yet is ſo far under the controul of the will, that it can be altered or

ſuſpended; we can ceaſe to breathe, or we can breathe with more quickneſs and force.* According to the opinion of ſome phyſiologiſts, however, all motions, whether voluntary or involuntary, are to be referred ultimately to the influence of mind. "May we not conclude," ſays Dr. Whytt, "that the contraction of the "heart, which is both vital and involun-

* Dr. Darwin obſerves, that "Thoſe muſcular motions, "that are excited by perpetual irritation, are, nevertheleſs, occaſionally excitable by the ſenſations of pleaſure "or pain, or by volition, as appears by the palpitation of "the heart from fear, the increaſed ſecretion of ſaliva at "the ſight of agreeable food, and the glow on the ſkin of "thoſe who are aſhamed. There is an inſtance told, in "the Philoſophical Tranſactions, of a man, who could, "for a time, ſtop the motion of his heart when he pleaſed; "and Mr. D. has often told me, he could ſo far increaſe "the periſtaltic motion of his bowels, by voluntary efforts, "as to produce an evacuation, by ſtool, at any time in "half an hour." *Zoonomia, vol.* 1. *p.* 39.

" tary, is ultimately to be referred to the " ſentient principle." He afterwards adds, " What has been ſaid of the motion of " the heart, as proceeding from the mind, " is equally applicable to the periſtaltic " motions of the ſtomach and inteſtines, " and to the reſt of the vital or involun- " tary motions." Page 143.

Whilſt it has long been known that motion and irritability are affected by various external cauſes, it has lately been obſerved, as a general law, that every thing which increaſes the quantity of oxygene, in organized bodies, increaſes, at the ſame time, their irritability. On this ſubject the writings of Dr. Darwin, Dr. Beddoes, and others, together with Medical Extracts, by a Friend to Improvements, may be conſulted.

The nerves have very properly been conſidered as the organs of ſympathy. By this, we mean a diſpoſition of the ſyſtem to be affected in ſome particular part, by a cauſe primarily operating upon ſome diſtant part.

This ſympathy extends itſelf to ſenſation and motion. Various are the phenomena which ſerve to illuſtrate and confirm the exiſtence of ſuch a principle in the animal frame. Pain, by whatever means induced, and to whatever part of the body the cauſe of it be applied, affects the whole ſyſtem; and its preſence is announced, ſometimes by the diſtortions of the countenance, at other times by the general ſtate of the cutaneous veſſels, the ſecretion of which is conſiderably increaſed: in ſome caſes it is attended with

convulſive tremors; in others by ſtricture and ſpaſm. Sympathy is, in ſome inſtances, more particularly, occaſioned by a vicinity of parts. Thus we find that an organ, which is ſituated in the neighbourhood of another, partakes of the pain and injury by which that organ is affected. An inflammation of the liver, or an obſtruction of its ducts by a calculus, will excite uneaſy ſenſations in the ſtomach, and, for the moſt part, will produce active vomiting; on the other hand, by producing ſome particular action of the ſtomach, ſome morbid affections of the liver, and its appendages, may be relieved. By producing nauſea and vomiting, a more copious flow of bile may be promoted, or the diſcharge of a calculus facilitated. This is one of thoſe inſtances in which

one of the conſequences of a diſeaſe proves the means of its own cure. The pain excited by the paſſage of a calculus will produce that nauſea and vomiting, which in return may, as we have ſeen, promote the expulſion of the offending cauſe. The reciprocal action of the bladder and the rectum on each other ſerves alſo to exemplify that ſympathy which ariſes from vicinity of parts. Teneſmus will often produce ſome particular affections at the neck of the bladder, either cauſing obſtruction and ſtrangury, or, by perpetual irritation, promoting the too frequent diſcharge of the urine; on the other hand, a retention of urine, until the bladder becomes diſtended, will communicate a ſtimulus to the rectum, and bring forward a more quick diſcharge of fæces. This ſym-

pathy, however, is not confined to parts in the vicinity of thoſe primarily affected, but is found to exiſt between more diſtant parts of the ſyſtem. The head is often affected by ſomething exiſting in a part very remote from it. How often is pain in the head occaſioned by ſome cauſe ſeated in different parts of the alimentary canal; and how eaſily is it removed by a diſcharge of the offending matter from the bowels? Cold and damp feet will, in ſome perſons, almoſt immediately, produce a fit of the cholic. A very intimate connexion and ſympathy exiſt betwixt the uterus and the mammæ. At a certain time of life, when ſome new action in the former ſyſtem commences, the latter evidently partake of the effects of this action; their change of ſize and form,

their turgeſcence and enlargement, are ſtriking inſtances of this kind. At a more advanced period, when impregnation of the ulterus takes place, a new action is produced in the ſecretory ſyſtem of the breaſt.

The ſtomach is an organ, perhaps, of more extenſive ſympathy than any other. There is hardly any part of the frame which does not ſhare its painful or its pleaſurable ſenſations. Not only with parts in the vicinity of this organ, as the liver and its ducts, which have already been mentioned, but with others more remote; with the kidney, with the ureters, with the bladder, with the extremity of the rectum, with the uterus, and with every part of the ſurface of the body, does the ſtomach ſympathize; more particularly

with the head, though a diſtant part of the ſyſtem, does this organ ſympathize.*

Theſe ſympathies, as we have obſerved, have been very generally referred to the nerves as their ſource; but very different opinions have been formed, and various hypotheſes have been framed, whereby to explain the manner in which they are produced. The derivation of different

* Mr. Hunter obſerves, that "Univerſal ſympathy ſeems "to be the firſt effect of irritation, and, in general, ap- "pears as ſuch in thoſe whoſe local and partial ſenſation "and irritability are not yet formed; for, in ſuch ſub- "jects, when one part is irritated, the whole ſympathizes, "and general convulſions enſue. But afterwards, each "part, acting in ſome degree for itſelf, acquires its own "peculiarities; ſo that as a child advances in age the "power of ſympathy is more partial: and in adults who "cut their teeth, we almoſt always find the pain, and "other ſymptoms, confined to the part, or only local ſym- "pathy taking place, ſuch as a ſwelling of the ſide of the "face." *Hunter on the Teeth, Part* ii. *p.* 117.

nerves from the ſame trunk, or ſome connexion like the anaſtomoſis of blood veſſels, or ſome junction of nervous filaments, forming a plexus, might be ſuppoſed ſufficient to account for theſe phenomena. But, though there is ſuch a connexion in ſome of the nerves going to organs, betwixt which a ſympathy has been found to exiſt, yet the effect is not to be aſcribed to ſuch a cauſe; ſince there is as intimate a connexion, in many parts, where no ſuch ſympathy is known to exiſt. Ganglia have been ſuppoſed to form a connecting medium, ſufficient to account for the ſympathy of different nerves. Dr. Monro, however, aſſigns a more important office to them, as different ſources of nervous energy, which, he obſerves, ſeems to account for the larger number of them being

found in nerves going to thoſe organs, which are of principal importance, as the heart and inteſtinal canal.

On this ſubject ſome phyſiologiſts have propoſed the query;—Whether, as different nerves are ſupplied by branches of the ſame artery, their ſympathy may not depend upon the irritation and reaction of their accompanying blood-veſſels. The extent of ſympathy between different organs may, probably, be beſt referred to the proportional number of connexions, which their nerves have with the brain and ſpinal marrow.

This leads us to obſerve the ſympathy, which exiſts, not only betwixt different parts of the body, but betwixt the body and the mind. That ſuch a ſympathy does exiſt, a little attention muſt convince

us. That the mind derives information through the medium of bodily ſenſes, is univerſally known; and that, in return, impreſſions are made upon different organs, or actions excited in them by different paſſions of the mind, is equally certain. Fear will produce different actions in the heart and arteries: if ſlowly produced, it will abate the velocity and ſtrength of the heart's contraction; if it be ſuddenly produced, it will be followed by a hurried and irregular circulation, and by palpitations of the heart. The reſpiratory functions will alſo be affected by the ſame cauſe, and quick breathing will follow any ſudden fright. Epilepſies have been induced by ſudden terror, and theſe often prove the moſt difficult to cure. Diarrhœas are often oc-

caſioned by an exceſs of fear, and a copious flow of pale urine is not unfrequently produced by the ſame cauſe. The ſight of blood flowing from the arm, has produced ſyncope in the by-ſtander; and the being preſent at ſome hyſteric or convulſive paroxyſm, has produced ſimilar affections, in ſome delicate habits. The report of ſome unpleaſant circumſtance that has taken place, or, as it is uſually termed, a piece of bad news, will have an almoſt immediate effect upon the ſtate of the ſtomach; and a perſon, ſitting down to his dinner with a good appetite, will hereby be prevented from enjoying it. If the ſame report arrive after dinner, it will have a more injurious effect, by preventing the proper digeſtion of the food taken into the ſtomach.

Such are the effects of thoſe which are called the depreſſing paſſions—fear and grief. The exciting paſſions produce equally remarkable effects upon the animal frame. Joy will quicken the circulation, and will promote appetite and digeſtion: when it is moderate, its effects are grateful; but, when exceſſive, they are ſometimes alarming; delirium, mania, and even death, have, ſometimes, been the conſequences.

Anger excites violent actions in the frame, and produces more ſudden miſchief than any other of the paſſions. Great diſtention of the veſſels of the brain producing pain in the head, hemorrhagy, epilepſy, and apoplexy, have been the conſequence of this paſſion immoderately indulged.

Hope, perhaps, is the moſt innocent, if not the moſt ſalutary, of the paſſions. This is more permanent in its effects, and it is generally attended with regularity in the different functions of the body; the circulation, the ſecretions, the digeſtion, the abſorption, and excretions, go on equally and pleaſantly: body and mind correſpond in acknowledging the pleaſure and advantage derived from the indulgence of hope.

Theſe are ſome few amongſt the numerous inſtances which might be adduced of a ſympathy between body and mind. Theſe ſympathies are conducted through the medium of the ſenſorium commune; the brain and nerves, as the organs by which the communication between body and mind ſubſiſt, muſt be conſidered as

producing the phenomena we have now deſcribed.

The general ſympathies exiſting in the ſyſtem are, undoubtedly, a wiſe proviſion for promoting moſt beneficial effects. This connexion between diſtant organs of the body, affords an opportunity of ſending relief to ſome parts, which are out of our immediate reach.

To ſome important organs we have no immediate acceſs: to the brain, to the liver, to the kidneys and bladder, we can not find a direct path; but muſt be contented to act upon them through the medium of other organs.

To ſome parts of the lungs, to the ſtomach, to the inteſtinal canal, we have an opportunity of applying our remedies in a more immediate and direct manner; and

theſe, together with the ſkin, ſpread a very wide and extenſive ſuperficies, upon which either diſeaſes or remedies may operate. Whilſt, therefore, from this circumſtance, we have to lament that diſeaſes, ariſing from external cauſes, have ſo extenſive a range over the ſyſtem; we may be thankful, that the ſphere of influence which medicine enjoys is not more contracted.

To that organ in particular, whoſe ſympathies with other parts, we have obſerved, is moſt of all extenſive, we have the moſt direct and immediate acceſs. To the ſtomach, the means of recruiting the frame and preſerving health, as well as of obviating and curing diſeaſe are, in general, more immediately applied; and to the actions of this organ, the moſt re-

mote, as well as the nearer, parts of the ſyſtem, are indebted for their pleaſurable ſenſations, and the capacity for continuing the important functions which they perform in the ſyſtem.

CHAP. II.

On the SYMPTOMS *of Diſeaſes uſually called* NERVOUS.

AFTER the few foregoing anatomical and phyſiological obſervations, we ſhall proceed to give ſome hiſtory of the ſymptoms, by which the diſeaſes treated of are to be diſtinguiſhed.

The ſymptoms of theſe diſeaſes are, indeed, ſo various, and ſo complicated, that it is difficult to determine with what particulars to begin our deſcription of them.

They affect, more or leſs, every part of the body, ſo that it is not eaſy to refer to any particular ſpot as the ſeat of them. They very generally commence, or firſt diſcover themſelves, by a conſiderable degree of reſtleſſneſs, or uneaſineſs. The patient obſerves a change in his general feelings, which he cannot very well deſcribe; but he is ſenſible that he does not enjoy his uſual health. Neither his buſineſs nor his pleaſures are purſued with the ſame degree of ſpirit, and, conſequently, not with the ſame degree of ſatisfaction as uſed to attend them. When he begins more particularly to obſerve his ſenſations, and the ſeat of his complaint, he generally diſcovers a ſenſe of uneaſineſs and diſtention about the præcordia. He will ſometimes deſcribe a

tightneſs and obſtruction in that region; and, at other times, a ſenſe of weight and fulneſs.

This may be partly owing to flatulence, which is a pretty conſtant ſymptom in theſe diſeaſes. A quantity of wind is generated or collected in the ſtomach of ſuch patients, which occaſions an uneaſineſs not always eaſy to be removed. This, ſometimes, produces a diſtention which may be perceived externally, and, to remove which, ſome means ſhould be immediately employed: it is often attended with borborygmi in the ſtomach and bowels, a ſymptom, which, though ſoon relieved, is very apt to return.

Patients of this deſcription are very ſubject to acidity in the primæ viæ, attended by what they deſcribe as four riſings in

the throat, with a ſenſe of heat and pungency about the region of the glottis: this provokes a tickling cough, that proves very troubleſome, and is always accompanied with pain and heat in the ſtomach, known by the name of heart-burn. All theſe ſymptoms are indications of a weakened ſtate of that organ, which, indeed, is very common to ſuch perſons, and, as we ſhall have occaſion hereafter to obſerve, is very materially concerned in the production of theſe diſeaſes.

We need not wonder, therefore, at that irregularity of appetite for food, which is ſo obſervable in perſons ſubject to nervous diſeaſes. We ſhall find ſome of this deſcription, at times, loathing the ſight of food, or elſe very nice and whimſical in the choice of it. They reject every thing

but what is particularly agreeable to their palate at the moment, and, when indulged with it, they eat a few morſels with apparent eagerneſs, but ſoon expreſs diſguſt, and retire from a half-finiſhed meal. Other patients are altogether as much in the other extreme: they are continually deſirous of food, and eat, with a degree of greedineſs, of all that is ſet before them; and finding ſome preſent relief from taking food, they are apt to proceed, not only beyond what nature requires, but even beyond what appetite demands.

The extremes now mentioned are obſerved not only in different patients, but, at different periods, in the ſame patient; the appetite for food in ſuch perſons being as various as poſſible, and, whilſt, at one time, it is difficult to prevail upon them

to eat what is neceſſary or proper, it is as difficult at another, to keep them within the bounds of temperance and moderation.

It is farther obſervable amongſt perſons of this deſcription, that they are frequently more diſpoſed to eat at the cloſe than at the beginning of the day; a ſupper is to them a more pleaſant meal than a breakfaſt or a dinner. This is indeed connected with another circumſtance, to which it may probably be aſcribed as a cauſe, that perſons under the influence of the diſeaſes now deſcribed, find their general ſenſations more pleaſant in the latter, than in the former periods of the day. With all the irregularity in the appetite for food, and in the indulgence of it, as now deſcribed, it is no wonder that the ſtomach is uneaſy, and that this organ becomes

the ſeat of a troubleſome and obſtinate malady.

In theſe caſes we have frequently a ſlight ſickneſs, or nauſea, which does not always amount to ſuch a degree as to produce vomiting; but frequently returning, keeps the patient in an almoſt conſtant ſtate of uneaſineſs. When the ſtomach is, however, ſo far excited as to produce vomiting, a viſcid kind of mucus is thrown up, ſimilar to what is raiſed on other occaſions by an act of coughing, and this is ſometimes accompanied with an evacuation of green matter.

This diſpoſition to vomit is often much greater, whilſt the ſtomach is empty, than ſoon after the taking of food; ſo that this ſymptom ſeems to ariſe more from its irritable ſtate, than from any thing ungrate-

ful in its contents. The other parts of the alimentary canal are alſo much affected during the prevalence of nervous ſymptoms. The ſtate of the inteſtines is various and irregular. Coſtiveneſs is a common attendant upon this diſeaſe. The patient will often paſs through ſeveral days without any inteſtinal evacuation, and it is ſometimes difficult, even with the uſe of eccoprotic remedies to keep up a regular diſcharge of fæces. But a different ſtate is ſometimes obſerved; a troubleſome diarrhœa will ſupervene, which is not a little alarming to the patient and his friends, as they are ready to attribute all the lowneſs and weakneſs, which he feels, to this cauſe.

Theſe different ſtates of the bowels, in different perſons, or in different periods

of the diſeaſe, may, in ſome meaſure, be accounted for by what we have mentioned of the irregularity of the appetite for food. If but little food be taken into the ſtomach, the portion of fæces paſſing down the inteſtine muſt be comparatively ſmall; and, conſequently, that organ is deprived of its natural and proper ſtimulus. The mechanical ſtimulus of the inteſtine is in proportion to the quantity ſent down, in a given time, from the ſtomach; and though other circumſtances may ſupply the want of this, which I call the proper mechanical ſtimulus of the inteſtines, yet the more uſual and healthy action upon theſe organs is produced by the proper quantity of fæces paſſing through them; and a deficiency of their action is often to be referred to the want

of this. On the other hand, when the appetite has been keen, and a larger quantity of food has been taken into the ſtomach than that organ could properly digeſt; a portion of it will be ſent down into the inteſtine, in a crude ſtate, and well adapted to excite ſome irregular action on that organ; and to produce a diarrhœa.

The ſtate of the circulating ſyſtem is, alſo, much affected in theſe diſeaſes. We are not now treating of what is called a nervous fever, in which the ſtate of the circulation, as indicated by the pulſe, forms a prominent feature of the diſeaſe; but of ſome tranſient febrile affections, and ſome irregularities of circulation, to which patients, during the influence of nervous diſeaſes, are very liable. The pulſe will, ſometimes, exceed the number of ſtrokes

uſual in a ſtate of perfect health; whilſt, at other times, it will fall ſhort of that number. In ſome patients it will be found pretty full and ſtrong, though, for the moſt part, it will aſſume the character of debility and irregularity. It is not eaſy, indeed, to fix upon a diſtinct character, as it will be found to change its appearance very frequently. A variety of circumſtances will affect the action of the heart and arteries, even when in a ſtate of perfect health. Exerciſe, the taking of food, eſpecially if this be accompanied by a cheerful glaſs, will occaſion a temporary variation in the ſtate of the pulſe.

As under the influence of theſe circumſtances the pulſe will be accelerated, ſo there are others, to which we are per-

petually liable, that will retard it. Grief and anxiety will, ſometimes, have this effect. But if the circulation, in a healthy frame, is liable to theſe changes, we may ſuppoſe them more frequent in that ſtate of the conſtitution which we are now deſcribing.

In this ſtate the pulſe is peculiarly liable to be affected by ſlight cauſes. By ſome external circumſtances, which are adapted more immediately to affect either the body or the mind, this effect will be produced. Exerciſe and diet, which we have ſeen are capable of affecting a change in a firm conſtitution, will have a more ſtriking influence on one reduced by a diſeaſe, the peculiar characteriſtic of which is a morbid degree of mobility.

An intermitting pulſe is not an unfrequent ſymptom, and I have ſometimes obſerved that the artery loſes a ſtroke pretty regularly after a certain number of pulſations. But, though weak, irregular, and intermitting pulſation is the more ſtriking character of the circulating function in theſe patients, you will ſometimes obſerve a full and ſteady pulſe, rather inclining to a morbid flowneſs. This has uſually been conſidered as an indication of ſome affection of the head, and has, ſometimes, been the forerunner of the more alarming and dangerous nervous affections. It, however, may be viewed as an indication of ſome oppreſſion on the ſyſtem, for which, as will be ſeen when the cure of this diſeaſe is treated of, ſome particular remedies are neceſſary.

Another ſymptom, dependent upon the circulating ſyſtem, and which is not uncommon in theſe complaints, is, a palpitation of the heart. This affection, to which all perſons are more or leſs ſubject on ſome occaſions, is more frequently and more eaſily produced in thoſe who are ſubject to other nervous ſymptoms. In many caſes it may be conſidered as an idiopathic diſeaſe; but, in the preſent inſtance, it muſt be referred to the general irritability of the ſyſtem, and particularly of the organ in queſtion: and when it occurs only occaſionally, and can be traced to ſome particular external circumſtance, it is no ſign of organic læſion, but only of temporary derangement of function.

Whilſt treating of the deranged functions of the circulating ſyſtem, we may

take notice of ſyncope as another ſymptom of nervous affection. A ſudden paleneſs of countenance, loſs of ſtrength, and a temporary ſuſpenſion or diminution of vital action, will ſometimes take place after any extraordinary exerciſe or exertion; or, at other times, will be occaſioned by ſome ſudden ſurpriſe. Theſe cauſes, indeed, will produce ſome hyſteric affections, in ſuch ſubjects, more frequently than fainting; the latter, however, is ſometimes the conſequence. The brain and nerves, by their influence, regulate the movements of the heart, and this organ has a reciprocal influence upon the brain and nerves: ſo that the hyſteric paſſion, as it has been called, and ſyncope, though diſtinct affections, are very nearly

allied, and may often ſtand in the relation of cauſe and effect.

In nervous patients, the head will often prove the ſeat of pain and uneaſineſs. When we conſider the near relation between the brain and nerves, we need not wonder that every part, in the vicinity of the former, ſhould participate in the diſeaſes we are conſidering. Patients are, therefore, frequently referring to their head as the ſeat of various unpleaſant ſenſations; ſometimes they complain of that pain which is diſtinguiſhed by the term head-ach: this is often affected by the leaſt motion, and a perfect ſtillneſs is neceſſary to prevent an aggravation of this ſymptom.

That ſpaſmodic affection, which has been called clavus hyſtericus, is oftentimes

very troubleſome. The patient feels a weight or ſtricture on ſome portion of the muſcles of the cranium, as if a particular part were preſſed upon; or the ſtricture is more general, and reſembles the ſenſation of a cord tightly bound around the head. Sometimes, the pain is chiefly on one ſide of the head, which is alſo affected with a degree of numbneſs; at another time, it is in the forehead, between the eye-brows, and one or both of the eyes are affected.

Beſides theſe, there are other affections of the head which are ſtill more troubleſome, and more alarming to the patient. Giddineſs is not an unfrequent attendant on ſuch other ſymptoms, as we have deſcribed. At one time, objects around ſeem to move in a circular direction; at ano-

ther, the perpendicular poſition of them is inverted, and every thing appears turned topſy-turvy.

On ſome occaſions, objects will appear double, whilſt, at others, viſion is ſo indiſtinct, that no object is perfectly defined in its form or ſituation.

I have heard ſome deſcribe a ſenſation as if they were lifted up towards the ceiling; whilſt others have told me, that, whilſt walking acroſs the room, they have ſeemed to be walking upon feathers.

The late Mr. John Hunter, who was ſubject to occaſional returns of nervous affections, in one attack of this kind, beſides the common ſenſation of vertiginous motion, had the peculiar idea of being ſuſpended in the air: at the ſame time, if he turned his head upon the pillow, it ap-

peared to be moving to ſome diſtance with great velocity.

Sometimes the confuſion of the ſenſes is ſo general, that hardly any objects excite their uſual ſenſation. The hearing is ſuddenly affected, and the tinnitus aurium, or ſinging in the ears, is ſometimes followed, or alternated, by a deafneſs of ſome continuance.

The ſenſe of feeling is often interrupted; ſenſatio formicationis occurs, and is attended with tranſient numbneſs in ſome of the muſcles. Convulſive twitches are obſerved in different parts of the face; the eye-lid, the muſcles of the cheek, or the lips, will be affected by an alternate contraction and relaxation. Theſe tranſient convulſions will, at different times, affect every muſcle of the body; and, in

ſome patients, a partial or general tremor is obſerved as an almoſt conſtant ſymptom.

An interrupted or diſturbed ſtate of ſleep is frequently very troubleſome. In ſome very irritable habits, and particularly amongſt the ſtudious and ſedentary, watchfulneſs is a very common complaint. Or if ſleep is not interrupted, it is ſo much diſturbed by frightful dreams, incubus, or other occaſions of reſtleſſneſs, that, inſtead of being refreſhed, the patient awakes rather fatigued and harraſſed; and, as the natural conſequence of this, he feels, laſſitude and dejection of ſpirits through the whole of the ſucceeding day.

The reſpiratory functions are alſo affected in this diſeaſe. The nervous or ſpaſmodic aſthma may be conſidered as a

diſtinct diſeaſe, and is often idiopathic: but ſome ſlight degree of this affection of the lungs, is alſo attendant upon other nervous ſymptoms. The ſtate of the breathing will be affected by thoſe irregularities in the circulation, which have already been taken notice of; but, independent of theſe, ſome difficulty of reſpiration will occur, which may, probably, be referred to an irritable ſtate of the bronchial ſyſtem.

As an affection of the reſpiratory organs, we may mention a hiccough, which ſometimes proves a very troubleſome ſymptom to nervous patients; and, in ſome caſes, has continued for a conſiderable length of time.

The different ſecretions are, oftentimes, much affected in this diſeaſe. The ſe-

cretion on the ſkin will be irregular and partial: ſometimes there will be a ſenſe of heat and dryneſs, particularly in the hands and feet; at other times an increaſed degree of perſpiration. This irregularity may be attributed to what we before obſerved, reſpecting the ſtate of the circulating ſyſtem.

The urinary ſecretion is often particularly affected in this diſeaſe; a copious diſcharge of pale urine is, indeed, an almoſt conſtant ſymptom in an hyſteric paroxyſm, inſomuch, that by many noſologiſts, it is introduced into the definition of the diſeaſe. But this ſymptom frequently attends other kinds of nervous affection. When the ſtate of the ſpirits is affected by any circumſtance, or when the mind becomes anxious on any occaſion, there is generally

a copious diſcharge of pale urine. Sudden ſurprize, or fright, will affect the urinary diſcharge in different ways: ſometimes an increaſed and ſudden flow of urine is the conſequence; but, at other times, there is a long interval between the diſcharges, which may be owing either to a diminiſhed ſecretion, or to a long retention in the bladder. This retention is ſometimes attended with pain, owing to ſome affection of the ſphincter inducing ſtrangury.

The ſtate of the menſes is, alſo, ſometimes much affected, during the prevalence of nervous diſorders.

It has been uſual to attribute many nervous affections to the irregularity of the menſtrual diſcharge; and, probably, there may be ſome reaſon for this; but it is as certain that the uterine ſyſtem is af-

fected by the general ſtate of the patient's health; and thus in this, as well as in ſome other inſtances, the cauſe and effect change place.

That the uterine ſyſtem ſhould partake of the derangement of other functions, with which it has ſo near a ſympathy, is not ſurprizing; and we accordingly find that, on the one hand, a ſuppreſſion, or on the other, an immoderate flow of menſes is ſometimes the conſequence of thoſe other diſorders of the ſyſtem which have been mentioned.

We ſhall now proceed to deſcribe ſome affections of the mind, which are connected with theſe diſeaſes, and ſymptomatic of them.

The judgment is ſometimes very materially affected. The patient forms very improper apprehenſions concerning his own ſituation: he ſuppoſes danger where none exiſts, and forebodes conſequences the moſt dreadful that can be imagined. Not only concerning the ſtate of his perſon, but alſo of his circumſtances, he is often very apprehenſive, though with as little reaſon. I have known ſeveral perſons, even at the time that they were ſurrounded with affluence, tormented with the idea of coming to penury, and of dying in a jail.

In very high degrees of theſe nervous affections, the imagination has been wonderfully affected; perſons ſuppoſing themſelves converted into ſtones and ſtatues, into images of china and glaſs, and fear-

ful of moving, leſt they ſhould be broken to pieces. Some have conceived of themſelves as ſo much enlarged in bulk as to be unable to enter a carriage or a room; whilſt others, carrying about an immenſe maſs of fleſh, have fancied themſelves reduced to a ſtate of emaciation.

The memory and recollection have ſometimes ſuffered by a long ſeries of nervous maladies. There has been, ſometimes, ſuch a temporary ſuſpenſion of recollection, that perſons have forgotten where they have been, or whither they have been going, and have not been able to recollect the names of perſons with whom they are very familiar, or of places that they are conſtantly viſiting. A conſciouſneſs of this naturally produces an agitation of mind, which tends to increaſe

the evil; and, under theſe circumſtances, every attempt to recover the recollection only produces more confuſion and perplexity.

A want of reſolution is a very frequent infirmity in ſuch perſons. The ſtate of the mind, in this inſtance, anſwers to that of the body; it is ſo eaſily moved, that it does not long continue in any one direction. Eaſily rouſed to action, the man ſets off with great eagerneſs in the proſecution of any ſcheme; he overlooks every difficulty, and, in the fulleſt confidence of ſucceſs, anticipates, very early in the buſineſs, all the advantages that can accrue from it: but the firſt diſcouragement that ariſes, diſſipates his reſolution, and, before the ſcheme is half accompliſhed, he relinquiſhes the purſuit.

The different paſſions of theſe perſons are as irregular and uncertain as their other powers.

Fear is the moſt predominant of theſe. An habitual dejection of mind, or what is called lowneſs of ſpirits, is one of the prominent features of the diſeaſe; and this, ſometimes, exiſts in ſo conſiderable a degree, as to render life a burden. In this ſituation the patient becomes liſtleſs and inattentive to every thing around him; he is abſtracted from every thing but himſelf, and dwells, without remiſſion, in a thoughtfulneſs about his own ſituation. Inſtead of being pleaſed or amuſed with what uſed to afford him ſatisfaction, he feels an indifference to it, and becomes ſo faſtidious as to be diſguſted with every thing that occurs. A peeviſhneſs enſues

as the conſequence of this, which will ſometimes generate another paſſion, and he is rouſed to anger and reſentment by very ſlight cauſes.

Theſe paſſions, indeed, are not conſtant; for there are ſome who, though at times very much depreſſed, have, at other times, a ſtate of ſpirits that proceeds to the other extreme. They are pleaſed and delighted by what is as trifling as that which excited their dejection or reſentment. This mutability and ficklenefs, or ſudden change of temper and manner, is very commonly expreſſed by perſons under the influence of the hypochondriacal diſeaſe. The moveable ſtate of mind, in ſome caſes, bears a ſtriking reſemblance to what has before been deſcribed as affecting the animal frame. Fear and joy,

hope and deſpair, deſire and indifference, alternate with each other, oftentimes, in very quick ſucceſſion; ſo that the ſenſation and action become as variable and inconſtant as can be imagined.

This may ſerve as a deſcription of the leading ſymptoms of the diſeaſe under conſideration.

It is neceſſary, however, to remark, that all theſe ſymptoms are not experienced by the ſame perſon; or, if in the courſe of the diſeaſe, which may ſometimes continue for a conſiderable time, he ſhould become acquainted with each of them, they do not all attack him nearly at the ſame time. So very variable and Proteus-like are their appearances, that there is hardly a ſenſation, of which the animal

frame is ſuſceptible, which it does not, at ſome time or other, produce.

We have not given a particular hiſtory of thoſe diſeaſes which have been ranked by noſologiſts in the claſs of nervous diſeaſes, and which are known by the name of hyſteria, St. Vitus's dance, epilepſy, catalepſy, palſy, or apoplexy; though with ſome one or other of theſe the ſymptoms, which have been enumerated, have often been connected. Theſe ſymptoms have, ſometimes, been obſerved to trouble the patient, previouſly to an attack of thoſe diſeaſes, and they have ſometimes ſucceeded them, and have been conſidered as the conſequence of them. But it muſt be recollected that many of theſe ſymptoms have attended ſome patients for

ſeveral years, without terminating in either of thoſe diſeaſes. The hyſteria, to which females are frequently ſubject, ſeems particularly connected with theſe ſymptoms; but they do not always accompany each other. There are many patients, who are continually complaining of ſome of thoſe ſenſations which have been deſcribed, who have never been viſited by an hyſteric paroxyſm; and, on the other hand, there have been many who are occaſionally ſubject to what are called hyſteric fits, who have, in the interval of paroxyſms, been free from the ſymptoms we have enumerated.

Epilepſy has, ſometimes, been preceded or followed by ſome of the ſenſations referred to; but this diſeaſe has, alſo, been troubleſome to patients who, during the

intervals of it, have enjoyed tolerable health and ſpirits.

Dr. John Jebb mentions a very curious inſtance of catalepſy, which was preceded and followed by a variety of nervous affections.

The ſubject of this diſeaſe was a young lady, whom, after being afflicted for ſome months, the Doctor was deſired to viſit; and whom he found employed in netting and paſſing the needle through the meſh, in which poſition, he informs us, "She "became rigid, exhibiting, in a very "pleaſing form, a figure of death-like "ſleep, beyond the power of art to imi-"tate, or of imagination to conceive. In "about half an hour after his arrival, the "ſtatue-like appearance being yet unal-"tered, ſhe ſang three plaintive ſongs, in

" a tone of voice moſt elegantly ex-
" preſſive, and with ſuch affecting modu-
" lation, as evidently pointed out that
" ſome powerful paſſion of the mind was
" concerned in the production of her diſ-
" order. In a few minutes afterwards
" ſhe ſighed deeply, the ſpaſm in her
" limbs was immediately relaxed, a ge-
" neral tremor followed, and, ſoon after,
" ſhe ſo far recovered, as to be able to
" enter into a detail of her ſymptoms."

Palſy and apoplexy have been placed in the claſs of nervous diſeaſes, and theſe may be connected with the ſymptoms we have deſcribed, or be totally independent of them. Apoplexy has ſometimes made a gradual approach, and there have been many ſlight attacks of giddineſs, and other nervous ſymptoms, before a direct fit has

been produced; but I have known it occur frequently in perſons of the higheſt health, and who have enjoyed an uninterrupted flow of good ſpirits. The ſame remarks will apply, with equal juſtice, to what has been called a ſtroke of the palſy.

When theſe nervous ſymptoms occur early in life, and recur pretty frequently, they generally wear more of the form of an idiopathic, than a ſymptomatic diſeaſe: they may accompany the patient through life; but do not ſo often terminate in apoplexy or palſy, as when they occur, for the firſt time, later in life, and near to the period when theſe diſeaſes uſually prove fatal.

Dr. Falconer, in ſome obſervations on palſy, *Memoirs of the Medical Society of London*, *vol.* ii. *p.* 205, remarks, that many

perſons whom he had known, that were long troubled with giddineſs, temporary numbneſs, confuſion of ideas, convulſive ſtartings, and involuntary contraction of muſcles, and for whom he feared that they would ſuffer an attack of the paralytic kind, never were ſo attacked. He mentions one gentleman in particular, who, for twenty years, was in expectation of dying of a paralytic ſtroke, but who was then living and very hearty at the age of eighty.

The St. Vitus's dance bears a near reſemblance to thoſe affections which we have deſcribed, and is ſometimes accompanied by them; but, in other patients, who are affected by high degrees of this convulſive diſeaſe, where the motions and geſticulations are violent and ridiculous in

the extreme, the ſtate of general health and ſpirits has been good, and they have felt much leſs for themſelves than their ſurrounding friends have felt for them.

Upon a review of the hiſtory of theſe diſeaſes, it is very natural to obſerve under what a variety of ſhapes they appear, and under what a variety of circumſtances they occur: but this will occaſion the leſs ſurpriſe when we proceed, in the next chapter, to mention the ſubjects of theſe diſeaſes, and when it will appear that perſons of very different general temperament and habit have been liable to them.

CHAP. III.

On the SUBJECTS *of* NERVOUS DISEASES; *or the Perſons who, by original Temperament and ſubſequent Habits, are moſt liable to their Attack.*

IN many inſtances we can diſcover a predispoſition to ſome particular diſeaſe, long before it actually exiſts. To ſome ſpecies of diſeaſe we ſuppoſe various perſons liable, not merely becauſe parents have been ſubject to them, but becauſe we diſcover a particular diſpoſition to be affected by thoſe cauſes which are likely to pro-

duce them. In very early life, the diſpoſition to phthiſis pulmonalis may be diſcovered by an attenion to the form of the cheſt, to the length of the neck, and ſome other circumſtances in the general fabric. A diſpoſition to ſtrumous complaints may be ſeen in the delicate covering of the integuments, and the beautiful ramification of cutaneous veſſels.

In ſome, the largeneſs of muſcle indicates the temperament of ſtrength; whilſt the more lax and delicate ſtructure of others, as plainly intimates that of debility. There are ſome diſeaſes to which the male ſex is moſt liable, whilſt there are others which more commonly afflict the female. But the diſeaſes we have been deſcribing may be found in both ſexes, and in all temperaments.

But it is to be obſerved, that though neither of the ſexes, nor any particular temperament, is free from the attacks of theſe diſeaſes, yet it ſeems to be more particularly the lot of women to bear the train of evils we have enumerated. The delicacy of frame peculiar to them, together with thoſe habits to which the ſex is more prone, gives room to expect that they ſhould be more frequently the ſubjects of them.*

* "Quod attinet mulieres, morbo hyſterico præ aliis ſubjectas & obnoxias; notari meretur, non omnes cujuſcunque ætatis, temperamenti, ac vitæ inſtituti id genus morbi pati: ſed præcipue virgines ſenſibilioris et tenerioris naturæ, ante menſium primam eruptionem, viro maturas, item viduas juniores, & fæminas conjugatas, ſanguinis & ſucci plenas, ſine prole tamen viventes, frequentius atque gravius illo devexari." *Hoffmannus de Malo hyſterico, Chap.* v. *Sect.* viii.

Next to them, thoſe of the other ſex, who approach the neareſt to the temperament of females, are moſt liable to them. The ſlender muſcle, the fair ſkin, the light hair, the irritable temperament, ſeem to characterize the patient moſt prediſpoſed to theſe nervous affections. But it muſt be remembered, that ſome of the ſymptoms which have been deſcribed, are felt by thoſe who are robuſt and athletic.

Dr. Sydenham remarked, that as very few women were entirely free from theſe diſeaſes: ſo ſeveral men, alſo, were afflicted with them.

It has been matter of controverſy among pathologiſts, whether the hyſteric paſſion is to be found amongſt men: it has been common to divide the two diſeaſes called hypochondriaſis and hyſteria, between the

ſexes, aſſigning the former to the male, and the latter to the female. The propriety of this can only be determined by the definition which is given of the different diſeaſes, or by the number and kind of ſymptoms which are enumerated, as forming the aggregate of each. If it be agreed to refer hyſteria, either in whole or in part, to cauſes which can only exiſt in the female, this muſt, at once, ſettle the controverſy; and this ſeems ſo far to have been adopted, as that in common language, it is more uſual to ſpeak of ſimilar ſymptoms as hyſterical when they afflict women, and as hypochondriacal when men are viſited with them. It muſt be acknowledged, that the hyſterical paroxyſm is very unuſual in men; many of the ſymptoms, however, which precede or

accompany this, are in common to both ſexes. As in the hiſtory of ſymptoms we have deſcribed thoſe, which, anomalous and irregular as they are, generally attend upon diſeaſes commonly called nervous, without confining ourſelves to any particular order or genus, under the claſs neuroſes, we may, perhaps, be juſtified in conſidering both ſexes as the ſubjects of the diſeaſes we are ſpeaking of.

So various are the ſymptoms which we have deſcribed, that they may be ſuppoſed to be connected with every temperament, and with every habit of life. It may be proper, however, to obſerve, that theſe complaints uſually attend a ſedentary life. The want of ſufficient exerciſe tends to enervate the body, and expoſes the perſon to all thoſe diſeaſes, which depend upon

too great delicacy and ſenſibility of the moving fibre. There is one deſcription of men who are more liable to theſe complaints than others—the learned and ſtudious. Beſides the inconvenience of a ſedentary life, theſe men have to combat the conſequence of deep thought and cloſe reflexion; by an exceſs of which, it is well known, the powers of the mind are weakened. In this inſtance, therefore, there are two cauſes operating, the one more immediately on the animal, and the other on the mental frame, which have a wonderful ſympathy with each other, and conſpire in the production of the diſeaſes in queſtion.

Theſe diſeaſes have been ſuppoſed more frequently to attack the rich than the poor. So far as the mind is concerned in the

production of them, it might be ſuppoſed that the freedom from anxiety and diſtreſs, which the rich enjoy, might ſecure them from their influence; but, when we conſider that the mind is often much more affected by imaginary than by real evils, it is at once accounted for why thoſe ſymptoms, which are connected with the ſtate of the mind, ſhould fall to their lot. But though this obſervation, as a general one, is verified by experience, yet it does not always apply.

Theſe diſeaſes are not the excluſive evil of the rich: they viſit the cottage as well as the manſion, and, unhappily, in ſome inſtances, tend to aggravate that diſtreſs, of which, perhaps, they are the more immediate conſequence.

Whilſt luxury and inactivity may introduce the malady into the circles of the rich and ſtudious, ſo hard labour, with a ſlender diet, joined to great anxiety reſpecting a comfortable proviſion, may produce it amongſt thoſe of a different claſs.

CHAP. IV.

Some Remarks on the TERMINATION *of Nervous Diſeaſes: together with ſome Obſervations on the* DIAGNOSIS, *or Series of Symptoms which diſtinguiſh theſe Diſeaſes from others, to which they bear ſome reſemblance.*

THE diſeaſes which we have deſcribed, do not terminate very ſpeedily. You can not, as in acute diſeaſe, look forward to a ſpeedy criſis; but muſt expect, that ſymptoms will abate, or become aggravated, ſeveral times, during their continuance.

Where, indeed, theſe ſymptoms are complicated with ſome other diſeaſe, and eſpecially if this ſhould be of a claſs which ſpeedily arrives at ſome termination, we may expect that theſe troubleſome ſymptoms will vaniſh with it. Theſe diſeaſes may, on the other hand, ſometimes terminate in ſome other, which, though not more difficult to be borne, may prove more fatal to life. During a long continuance of theſe affections which have been deſcribed, ſome important organ is affected, and the patient is placed in a dangerous ſituation.

The ſtomach, as we have ſeen, is an organ of very extenſive ſympathy; and, if this ſhould partake of this general affection of the ſyſtem; if the appetite ſhould be impaired, and a neceſſary quan-

tity of chyle ſhould not be formed, emaciation and atrophy may be the conſequence. The liver alſo may feel the conſequences of theſe nervous affections, either directly and immediately, or through the medium of the ſtomach, of whoſe affections it may partake from the circumſtance of vicinity. Whether affections of this organ, however, ſtand in the relation of cauſe or effect in this diſeaſe, if any derangement of ſtructure take place, much miſchief may enſue, and place the patient in circumſtances of conſiderable danger.

Whilſt we are mentioning ſome other diſeaſes, to which they may lead, it may not be improper to introduce ſome remarks on the mode of diſtinguiſhing thoſe diſeaſes, which are called nervous, from ſome others which they may reſemble. In

ſome inſtances the diſtinction is very clear and well marked: but, as there is ſo great a variety of ſymptoms, it may well be ſuppoſed that ſome of theſe ſhould be connected with other diſeaſes; and this circumſtance may be productive of ſome difficulty in forming a diagnoſis.

It has been obſerved that there is a ſenſe in which every diſeaſe may be called nervous. In an animated machine every action muſt have ſome relation to the ſentient and moving powers, or, in other words, all diſeaſes muſt be attributed to ſome morbid ſenſation or morbid action; and, as the nervous ſyſtem is the ſeat of ſenſation and the ſource of action, for this reaſon diſeaſes of every ſpecies may be called nervous. But noſologiſts have agreed to uſe the term in a more confined ſenſe,

and to reſtrict it to thoſe complaints which are connected with a certain ſet of ſenſations, though theſe may be found more or leſs aſſociated with diſeaſes known by a different name.

Similar ſenſations may be experienced by the patient, and ſimilar ſymptoms may riſe to the view of the phyſician, which owe their exiſtence to a very different cauſe. The action of ſome organ may be interrupted, and the conſequence of this interruption may be immediately felt; but it may not be ſo eaſy immediately to aſſign the cauſe.

If I am told that a patient has fainted, I am at no loſs to determine, even before I ſee him, that the proper functions of the heart are ſuſpended; but I muſt be acquainted with ſome concomitant ſymp-

toms before I can form a judgment to what this ſuſpenſion of action is to be attributed. This ſymptom takes place in very different ſtates of the organ. It is ſometimes a ſign of inflammation, and, at other times, is occaſioned by a defect of nervous energy: ſome injury to the ſtructure of the heart may give riſe to it, or merely ſome interruption of its action. A palpitation of the heart, which is conſidered as another nervous ſymptom, may ariſe from different cauſes. This, as in the other caſe, may be owing to ſome affection of the organ, whilſt its ſtructure remains perfect and entire: ſome paſſions of the mind occaſioning an irregularity of circulation, may produce it; or the heart may be in a ſtate of morbid irritability, which may give occaſion to this irregu-

larity of action, whilſt only common cauſes are operating. In this caſe we may be allowed to conſider the diſeaſe as nervous. But we muſt remember, that ſome injury to the ſtructure may produce the ſame effects. An aneuriſm of the aorta, a polypous concretion, or any other cauſe preventing the free evacuations of the ventricles, may produce the effect.

Some affections of the reſpiratory organs may, alſo, take place, and be conſidered as merely ſymptomatic of nervous irritability. Upon this ground a ſpecies of aſthma is diſtinguiſhed, by the title of the nervous or ſpaſmodic aſthma. This, as we have obſerved, is a diſtinct diſeaſe: but there are ſome inſtances of a tranſient dyſpnœa, which may be ranked amongſt thoſe numerous ſymptoms that have been

denominated nervous. But what has been attributed to this ſource has, ſometimes, been found to ariſe from a more ſerious and fatal cauſe. Some effuſion upon the cheſt, which has been gradual in its effects, has produced the ſymptom referred to, and a patient, whoſe friends flattered him with the idea of his diſeaſe ariſing from ſome nervous irritation, has at length died of hydrops pectoris.

We have obſerved that a very copious diſcharge of urine is a very uſual ſymptom of nervous complaints. If the patient has heard much of diabetes, as a dangerous, and, ſometimes, a fatal diſeaſe, eſpecially if he can refer to ſome inſtance, amongſt his particular friends, where it has terminated in this manner, he is very apt to attribute the ſymptom he obſerves

to the ſame cauſe. This alarm may often be unneceſſary. This ſymptom, as we have ſeen, is a very common, indeed an almoſt conſtant, concomitant of nervous complaints. But frequent as this affection of the urinary ſyſtem may be, in compariſon of the primary and idiopathic diſeaſe, it certainly demands attention, and it will ſometimes exerciſe the judgment of the practitioner to form a diſtinction between the two caſes.

Theſe inſtances ſhew, that, though in many caſes, the nature of the diſeaſe is very clearly marked, it will require ſome caution that we do not under the general terms of nervous and hyſterical, hypochondriacal and ſpaſmodic, include ſome diſeaſe, which, though not more afflictive to

the patient, may place him in circumſtances by far more threatening.

There is one general mode of judging and diſtinguiſhing in theſe caſes. If either of the ſymptoms, which we have juſt mentioned, ſhould appear alone; if it ſhould not be preceded or accompanied by others uſually called nervous, we may refer it to ſome diſeaſed ſtate of the organ concerned, and not to the general ſtate of the ſyſtem. If, therefore, fainting or palpitation occur, whilſt the patient is free from other ſymptoms of debility or irritation; if, at the ſame time, there ſhould be frequent pain, or a ſenſe of weight and uneaſineſs about the region of the heart, we ſhould think it of the firſt conſequence to inquire after ſome more local and ſpecific cauſe of theſe ſenſations.

Debility, or proſtration of ſtrength, whilſt it may be ſymptomatic of ſome nervous diſeaſe, is frequently to be referred to ſome other cauſe; and it is of the firſt importance to diſcover this, leſt the miſtake lead to a practice which muſt aggravate rather than relieve the ſymptoms.

Thoſe weakneſſes, chillineſſes, and uncomfortable ſenſations, for which friends ſo frequently recommend an additional glaſs of wine after dinner, or ſomething nouriſhing and cordial, are often the forerunners of a bad fever; and this plan, adopted for the relief of theſe ſuppoſed nervous weakneſſes, tends only to aggravate the real diſeaſe.

To diſtinguiſh amongſt the many affections of the lungs, and to know to what cauſe to refer particular ſymptoms,

will require the ſame attention to all concomitant circumſtances. The inſtance we have already mentioned of effuſion on the cheſt, which has been miſtaken for nervous affection, is generally accompanied by ſome ſymptoms of anaſarca. The legs are much ſwelled in the evening, and, in the morning, the tumour extends itſelf to the face, and the ſuperior extremities; a ſmall quantity of urine is diſcharged, the patient finds his breathing much affected by an horizontal poſture, and, in the courſe of the night, he is frequently awakened by a ſenſe of ſuffocation, or of palpitation of the heart. Theſe ſymptoms ſufficiently diſtinguiſh the diſeaſe; but as theſe do not occur all at one time, nor are any of them ſo evident at firſt, it may be ſome time before a decided diagnoſis can be

formed. The diabetes may, after ſome time at leaſt, be diſtinguiſhed from the copious flow of urine in hyſterical patients, by the continuation of it day after day, in a nearly equal quantity; whereas, in the other inſtance, it is only occaſional and temporary. The urine, in the one caſe, is limpid and taſteleſs; in the other it is ſometimes of a yellowiſh green colour, and of a ſweet taſte. The diabetes is generally attended with a great degree of thirſt, and a diminiſhed ſecretion on the ſkin. Theſe circumſtances, duly attended to, will generally enable us to diſtinguiſh the two diſeaſes.

The irregular gout frequently ſhews itſelf by ſymptoms ſimilar to ſome which have been deſcribed, particularly to thoſe connected with dyſpepſia. It will in this

caſe be comparatively eaſy to form our diagnoſis; as the gouty diatheſis is, in general, very ſtrongly marked by preceding paroxyſms, before the diſeaſe aſſumes this anomalous appearance.

CHAP. V.

On the VARIOUS CAUSES operating in the PRODUCTION of NERVOUS DISEASES.

IT may now be proper to point out ſome of the cauſes which may produce the diſeaſes we are treating of.

This part of pathology is, in every caſe, the moſt difficult of inveſtigation; but the difficulty is peculiarly great in the preſent inſtance. The diſeaſes we have been deſcribing are ſo various in their forms and appearances, and exiſt under ſo

many circumſtances of conſtitution and habits of life, as to increaſe the difficulty of aſſigning to them any particular cauſe. There is one ſource of information which we poſſeſs in other caſes, of which we are deprived in this; that which ariſes from diſſection after death. The organs ſuppoſed to be the ſeat of theſe diſeaſes, are ſo minute and intricate in their ſtructure, that they elude the ſcrutiny of the moſt curious. All theſe are circumſtances which render it difficult to explore the cauſes of thoſe phenomena which have been referred to.

We ſhall attempt, however, by the aſſiſtance of experience and analogy, to point out ſome circumſtances which are uſually connected with theſe ſymptoms, and which may lead us to form ſome con-

jecture, at leaſt, concerning the more remote, if not the immediate or proximate cauſe of theſe diſeaſes. We have already anticipated, in a conſideration of the ſubjects of theſe diſeaſes, what might be ſaid on the prediſponent cauſe of them, as particularly connected with temperament. That the original form and conſtitution of the patient will have conſiderable influence in the production of theſe diſeaſes, there is no reaſon to doubt. This has its effect in other maladies, and, as we have already obſerved, from the general form and ſtructure, and from appearances on the ſurface, an intelligent phyſician is able to form a very probable conjecture reſpecting the diſeaſes to which the ſubject may in future life be expoſed. The diſeaſes now under conſideration do not depend upon any

general form, or ſtructure of the frame; but are to be found in connexion with very different exterior forms: ſtill, however, we may ſuppoſe that there is ſomething in the original compoſition and ſtructure of the moving fibre, which, though too nice for ocular inſpection, may have a conſiderable effect in giving a predispoſition to theſe diſeaſes. Thus, in popular language, it may be ſaid, that the perſon is born with a bad ſet of nerves.

With the prediſponent cauſes, however, we know that ſome occaſional cauſes muſt conſpire in order to produce the diſeaſe: and concerning the exiſtence and operation of theſe, we can, perhaps, ſpeak with more clearneſs and ſatisfaction. Theſe are, indeed, very numerous. With reſpect to thoſe paroxyſms, which approach very

ſuddenly, and retire as ſuddenly, we may remark, that they are, in general, to be attributed to ſome cauſes, which, like the effects they produce, are ſudden and tranſient. Syncope will, ſometimes, be produced in a very ſudden manner, by the ſight of ſome unpleaſant object, or by the relation of ſome unpleaſant tale, in which, perhaps, the party is much intereſted. The eye or the ear may be the avenue at which the enemy enters. A palpitation of the heart may be occaſioned by a ſudden fright, or ſurprize, in whatever manner produced; or an hyſteric paroxyſm may be induced by ſimilar means. Epilepſy has occurred alſo from the ſame accidents, in perſons liable to the diſeaſe. But we have deſcribed thoſe anomalous ſymptoms and ſenſations, which do not amount to

any particular and diſtinct paroxyſm; and we are inquiring into the occaſional cauſe of theſe. Now, though, as we have ſeen, theſe are various and irregular, and even very diſſimilar; yet thoſe exciting cauſes, which will produce any of theſe ſymptoms and ſenſations, at one time, or in one perſon, will, at other times, or in other perſons, produce the reſt.

At the firſt view, theſe might be ſuppoſed, all of them, to ariſe from ſome cauſe operating originally upon the head; eſpecially thoſe affections of the ſight and hearing which we have deſcribed, together with that giddineſs and confuſion which are ſometimes produced. As the nerves proceed from the brain, it might be ſuppoſed that all the irregularities of their functions ſhould be excited and produced

by ſome cauſe operating within the cavity of the cranium. How far this may be true, we ſhall have occaſion to inquire, when we take ſome notice of the proximate cauſe. For ſome more remote and occaſional cauſes, however, we muſt look to a different ſource; and, it is probable, we may find moſt of theſe operating, in the firſt inſtance, on different parts of the primæ viæ: for it is in this part of the ſyſtem, I apprehend, that we ſhall diſcover the ſource of many of theſe unpleaſant ſenſations which we have deſcribed. We ſhall not be ſurprized at this, when we conſider that the convolutions of the alimentary canal, its length being five times that of the whole body, gives a larger extent of ſurface than could have been imagined from a mere inſpection of the

ſpace they occupy, and, conſequently, that they ſpread a very broad mark for the ſhafts of diſeaſe: it may be remarked alſo, that the whole internal ſurface of this canal has a communication with the external air, that it is the paſſage through different parts of which all the aliment taken into the body paſſes, and muſt, conſequently, be very liable to be acted upon by any thing that is unpleaſant or noxious. It may be ſaid, indeed, that this is not a reaſon for its being conſidered as the ſource of nervous, any more than of any other diſeaſes; and I believe, upon ſtrict inquiry, we ſhall find that, in many diſeaſes, the ſtate of this tube has, at leaſt, a very conſiderable, though a remote, influence. But we may remark farther, that the large number of nerves, which are diſtributed upon this

viſcus, furniſh a particular reaſon for their being connected with the diſeaſes in queſtion. The intercoſtal nerves, and par vagum, which are ſpread over different parts of this canal, have their origin within the cranium; to which circumſtance we may, probably, attribute the ſympathy ſubſiſting between this part of the ſyſtem and the head, which is the ſeat of many of the ſenſations that have been deſcribed.

From theſe conſiderations, therefore, we might draw an argument, à priori, that theſe diſeaſes depend very much on the ſtate of the alimentary canal.

But a more concluſive argument may be founded on a matter of fact; and, from the experience of that influence which a morbid ſtate of the inteſtines has, in ſome inſtances, we may conclude, on the

principles of analogy, that it is concerned in other inſtances. We know that convulſions in children are frequently occaſioned by ſomething unpleaſant, either in the ſtomach or inteſtines. Improper and indigeſtible food, or even that which is proper, taken in too large quantity, irritates the tender coats of their inteſtines, and produces, not only uneaſineſs and pain in the part affected, but alſo convulſive twitches, or more ſerious convulſive paroxyſms, which, in ſome caſes, prove fatal. In adults, alſo, ſimilar conſequences have ariſen from the ſame cauſes. Not only is a common head-ach the conſequence of indigeſtion in the ſtomach, or of an accumulation of fæces in the inteſtinal canal; but alſo indiſtinct viſion, tranſient

giddineſs, and other ſymptoms, have been connected with them.

Flatulence is both a ſymptom and an occaſional cauſe. Air diſtending the ſtomach, or any part of the alimentary tube, will have an effect ſimilar to that of more ſolid contents. This will irritate the coats of the ſtomach, and produce uneaſy ſenſations in different parts of the frame. Dr. Whytt informs us, "that he frequently "felt a plain connexion between wind in "the primæ viæ, and pains in his leg and "feet; and the uneaſy ſenſation ſome-"times coming and going between theſe "parts." Worms, which have their reſidence in different parts of this canal, have often been the occaſional cauſe of the unpleaſant ſymptoms we have deſcribed. This is particularly true in the caſe of

children. The ſlight convulſions, or more ſerious ſymptoms amounting to fits of epilepſy, are often connected with the preſence of theſe animals.

A collection of viſcid mucus, occaſioned by an increaſed ſecretion from the glands, may be concerned in the production of unpleaſant ſymptoms; and this, whether with or without worms, may ſo affect the coats of the inteſtines, as to produce ſome morbid effects there; and, through this medium, may affect the whole ſyſtem. Dr. Whytt aſſures us, that "he has had "ſome patients who, from viſcid phlegm "in their ſtomach, were affected with a "ſlight delirium, and had their eyes like "thoſe of people in liquor."

A ſtate of fulneſs, or of inanition, may be conſidered as an occaſional cauſe of

theſe diſeaſes. That nervous ſymptoms have their origin in debility, has been pretty generally ſuppoſed; and, conſequently, that inanition, ariſing either from a want of appetite, and of that nouriſhment which is neceſſary to recruit the conſtant waſte going on in the ſyſtem, or from ſome profuſe evacuations, has been generally acknowledged. Different hæmorrhagis, therefore, whether naſal, hæmorrhoidal, or menſtrual, have given riſe to theſe complaints. Exceſſive evacuations, are, undoubtedly, a very ſtriking cauſe of direct debility: the countenance and general habit of ſome nervous patients, plainly indicates the impoveriſhed ſtate of the ſyſtem. But it is neceſſary for us to remember, that many of the ſymptoms are connected with a plethoric ſtate of the

vaſcular ſyſtem. If we attend to the general temperament of patients labouring under theſe complaints, we ſhall frequently find about them marks of fulneſs and diſtention. Hyſteric paroxyſms occur as frequently amongſt girls of a plethoric habit, as amongſt thoſe of a pale and cachectic appearance. Hypochondriaſm, alſo, often occurs in men of corpulence, who indulge themſelves very freely in the luxuries of the table. The temporary ſuſpenſion of unpleaſant ſenſations, during the influence of a hearty meal and a cheerful glaſs, has ſometimes tempted them to exceed, not only the bounds of prudence, but even of appetite; ſo that they have retained, and even increaſed, their bulk, whilſt they have been conſidered as valetudinarians. Now the diſtention of the vaſcular ſyſtem,

which frequently occurs in theſe conſtitutions, may prove both a prediſponent and occaſional cauſe of the diſeaſe. Veſſels in this ſtate acquire higher degrees of ſenſibility, and are more eaſily acted upon; and this, conſequently, expoſes to the recurrence of nervous ſymptoms.

The ſuppreſſion of accuſtomed evacuations promoting the effect juſt ſtated, may, therefore, be conſidered as one of the occaſional cauſes of theſe diſeaſes. Where hæmorrhoidal diſcharges have been for ſome time habitual, but from bad management, or ſome accident, have been checked, the patient has often ſuffered by the introduction of various unpleaſant ſymptoms: loſs of ſtrength and ſpirits, depraved appetite, nauſea, and giddineſs, have been the conſequence. An interruption of the

menſtrual diſcharge has alſo, ſometimes, produced the ſame effects.

To many of the nervous ſymptoms, women, in the different ſtages of pregnancy, are liable. In theſe inſtances they muſt be attributed to a peculiar degree of uterine irritability, or to the preſſure of the gravid uterus interrupting the functions of the circulating and nervous ſyſtems.

Not only in the quantity, but alſo in the quality of the circulating fluids, ſome pathologiſts have found an occaſional cauſe of theſe complaints. A taint, or morbid matter in the blood, has been ſaid to produce many ſymptoms of a nervous kind. This taint has been aſcribed to ſcurvy or ſcrophula. That theſe complaints have, ſometimes, ſucceeded the diſappearance of

ſome cutaneous eruptions, there can be no doubt; and it is equally certain that, in ſome inſtances, the return of ſuch appearances on the ſkin has been attended with a relief of ſymptoms: but more modern pathology refers this phenomenon to a change of action in the moving powers of the ſyſtem, rather than to a morbid ſtate of the fluids.

The ſtate of the hepatic ſyſtem will, undoubtedly, have conſiderable influence in the production of theſe diſeaſes. Dr. Saunders, in his Treatiſe on Diſeaſes of the Liver, page 129, obſerves, "It frequently "occurs that bile is ſecreted in too ſmall "a quantity, as in hypochondriacal com- "plaints, and in chloroſis; in which diſ- "eaſes an unuſual degree of torpor takes "place, expreſſed, in one caſe, by de-

" jection and deſpair; in the other by in-
" activity and languor."

The too free uſe of ſpirituous liquors is, undoubtedly, a fruitful ſource of the diſeaſes we have been deſcribing. The temporary pleaſure which theſe produce, or that elevation of ſpirits which they occaſion, has been a ſtrong temptation to the uſe of them. But, though the immediate effects are ſo grateful, the remote conſequences are dreadful. Debility and tremor, impotence and dejection, may very frequently be referred to this practice as their original cauſe.

Amongſt the numerous occaſional cauſes of this diſeaſe, we muſt not omit to mention the paſſions of the mind. We have already, in our enumeration of ſymptoms, conſidered the influence which the mind

has on theſe diſeaſes, owing to its ſympathy with the animal frame: but though the ſufferings of the mind may be attributed to its connexion with the body, it will be proper to recollect the reciprocal influence of the former upon the latter. In this diſeaſe we may conſider both body and mind as becoming, in their turn, agent and patient. Some of the mental affections are more apt to produce thoſe ſenſations which have been deſcribed than others are; but there are not any of them which, when indulged to exceſs, may not prove an occaſion of them. Grief and anxiety are very copious ſources of them. Loſſes and diſappointments of various kinds, have produced a ſtate of mind, which has been followed by long continued hypochondriacal affections. Violent

fits of anger have produced very alarming effects on the conſtitution: tremors and convulſions, which have proved fatal, have ſometimes been the conſequence. A fit of rage has been ſometimes ſucceeded immediately by a fit of epilepſy or apoplexy. The more pleaſing paſſions of joy and love, when indulged to an exceſs, are alſo injurious to the frame. Sudden tranſports of joy have produced unhappy effects. In epileptic patients, the hearing of ſome good news, in which they were particularly intereſted, has brought on a paroxyſm; and, in the caſe of the lady quoted from Dr. Jebb's works, love ſeems to have had a conſiderable influence in the production of catalepſy. The latter paſſions, however, when moderately indulged, are certainly not adverſe, but highly friendly,

to the conſtitution of nervous patients. To promote the exerciſe of theſe is a principal indication in the cure of ſome ſpecies of theſe complaints. Till we can diſpel groundleſs fears and introduce hope; till we can diſperſe gloom and melancholy, and introduce joy; till we can divert the patient's attention from himſelf, and produce an attention to ſome other object; we can ſeldom hope for a removal of the diſeaſe.

To ſpeak of the proximate cauſe of theſe diſeaſes, with any ſatisfaction, is, as we have before obſerved, no eaſy taſk. In many caſes we are aſſiſted in this inquiry by an inſpection of the ſtate of the organs affected. By this means, eſpecially in ſome acute caſes, conſiderable light is thrown upon the nature and cauſe of the

diſeaſe. Where, by inflammation, or other cauſes, parts have been injured in their ſtructure, the knife of the anatomiſt diſcloſes this, and enables us to account for the ſymptoms which have attended, or rather which have conſtituted, the diſeaſe. The nerves being conſidered as the ſeat of thoſe diſeaſes, which derive their name from them, it might be expected that the cauſe of them ſhould be diſcovered in the ſtructure and form of the nervous ſyſtem. Very little, however, do we know concerning the preciſe ſtructure of theſe parts; nor, by an inſpection after death, can we diſcover any thing in the ſtate of theſe organs, which tends to explain the preceding ſymptoms. Dr. Baillie, in his Morbid Anatomy, page 312, obſerves, "It "rarely happens that any of the nerves

" within the cavity of the cranium appear " diſeaſed."

As anatomy, therefore, offers us ſo little aſſiſtance in this caſe, we muſt make the beſt uſe of the light afforded us, by ſome reaſonings on the nature of ſymptoms, and the circumſtances under which they occur, together with what we can diſcover of the operation of the remote cauſes. Dr. Cullen, in treating on hyſteria, which is a ſpecies of nervous diſeaſe, frequently occurring, obſerves, that " The chief part " of the proximate cauſe is a mobility of " the ſyſtem, depending generally upon " its plethoric ſtate :" and he obſerves, afterwards, that " Whether this diſeaſe " ever ariſes from a mobility of the ſyſ- " tem, independent of any plethoric ſtate " of it, I cannot poſitively determine ; but

" in many caſes that have ſubſiſted for " ſome time, it is evident that a ſenſi- " bility, and, conſequently, a mobility, " are acquired, which often appear when " neither a general plethora can be ſup- " poſed to ſubſiſt, nor an occaſional tur- " geſcence to have happened."

The ſtate of the uterine ſyſtem to which the Doctor probably refers, has been conſidered as extended to different parts of the frame, in ſome other nervous diſeaſes, and has been aſſigned as a cauſe for the occurrence of more general ſymptoms. A too great delicacy and ſenſibility of the nervous ſyſtem has been frequently aſſigned as the moſt common occaſion of theſe diſeaſes; but, perhaps, the moſt *general* cauſe to which they can be aſcribed, is an IRREGULARITY *in the functions of the*

nervous ſyſtem. If we take this as our genus, we may, under this, rank the ſeveral ſpecies of quick and ſlow action, of ſtrong and weak action, of more or leſs acute ſenſation; each of which is connected with the different phenomena that have been mentioned. We have obſerved that this irregularity has been diſcovered in the different functions of digeſtion, circulation, ſecretion, the periſtaltic motion of the inteſtines, and the different actions of the muſcles, voluntary and involuntary; and to this we may, probably, refer all that variety of unpleaſant ſenſations, of which the patient ſo frequently complains, and which ſo ſtrongly characterizes theſe diſeaſes.

CHAP. VI.

On the METHOD *of* CURE.

WE ſhall now proceed to take into conſideration the manner in which the cure of theſe diſeaſes is to be conducted. But before we enter upon the particular conſideration of this part of the ſubject, it may be proper to make a few preliminary obſervations.

It may be remarked, that theſe diſeaſes have, very frequently, been conſidered as incurable; and, when many ineffectual attempts have been made to remove them,

both patient and phyſician have been ſo diſcouraged, as to give over any farther effort towards a cure. That there are diſeaſes, not of this claſs only, but of every other, which have baffled the moſt vigorous and judicious endeavours for their removal, muſt be acknowledged. Too many are there which may be quoted as the opprobria medicorum; and thoſe ſymptoms, which we have deſcribed, have, perhaps, been productive of more trouble and mortification than any other. It ought not, however, in any particular inſtance, too ſoon to be taken for granted, that theſe complaints are beyond the reach of the medical art; ſince this concluſion will naturally tend to weaken the hope and expectation of the patient, and to check the exertions of his phyſicians. It may

be more proper to inquire whether the too frequent failure of ſucceſs in the treatment of theſe complaints can be accounted for.

This may, perhaps, be attributed, in part, to the ill-grounded expectation of cure from the uſe of ſome particular medicine, which is conſidered as a ſpecific, and, in the uſe of which, a removal of the diſeaſe is ſuppoſed to be almoſt certain. But beſides a conviction which the judicious practitioner muſt feel, that the number of ſpecific medicines is very ſmall indeed, every one muſt be aware that theſe diſeaſes, which aſſume ſo many forms, and may be aſcribed to ſo many cauſes, are leaſt of all likely to be relieved in this way. There is certainly no one article in the materia medica, even amongſt thoſe which

have been moſt celebrated under the title of nervous medicines, which deſerves to be conſidered as a ſpecific, much leſs as an infallible medicine, in theſe diſeaſes. We ſhall have occaſion to obſerve, in the courſe of theſe pages, that it is not in the uſe of any one medicine, nor of all the medicines of the ſame claſs, that any relief, much leſs that a total removal of the diſeaſe, can be expected. It is not merely in the uſe of nervines and cordials, of antiſpaſmodics, of ſtimulants, or tonics, that we can hope for ſucceſs; but in a judicious attention to circumſtances, which occur to our notice in the ſtudy and treatment of different caſes. But for want of knowing or conſidering this, the patient is diſappointed, if ſucceſs does not attend the firſt effort, or if a few draughts or

pills do not remove every ſymptom, and leave him in the poſſeſſion of perfect health.

This leads us to remark another circumſtance which enables us to account for the frequent failure in our attempts to cure theſe diſeaſes; which is the want of perſeverance on the part of the patient in ſome of thoſe plans of cure which may be preſcribed to him. As diſeaſes of the chronic kind often approach in a ſlow and inſidious manner; ſo it is only in a gradual manner that we can hope to oppoſe or overcome the prevailing ſymptoms. The plan of cure often involves in it a conſiderable attention to regimen and diet; it requires of the patient a total change of habit; all which ſuppoſes more fortitude and reſolution than is always to be ex-

pected. It is too common for patients vainly to expect to be cured, without making any ſacrifice on their part; or, if they ſubmit to ſwallow a few nauſeous medicines, they think they have done all that can be reaſonably expected, and that health is hardly worth accepting upon ſuch ſevere terms: or, if prevailed upon, for a ſhort time, to ſubmit to the preſcribed regimen, if after this a perfect cure is not obtained, they give up the caſe as loſt, and diſcover more patience in ſubmitting to their malady, than courage and reſolution in oppoſing it. Theſe are difficulties which the phyſician has to combat, and which muſt often prove inſurmountable, becauſe the patient does not cooperate with him in the conflict.

As we refuſe to acknowledge that theſe diſeaſes are, in their own nature, incurable, and are certain that, at leaſt, they may be mitigated, it is certainly highly proper farther to inquire what is the moſt rational and judicious plan of treatment.

It was remarked by Dr. Sydenham, that in moſt chronical diſeaſes, thoſe medicines which ſtrengthen and enrich the blood (provided their heat be not owing to vinous ſpirit) do moſt ſervice: and in his Treatiſe on Hyſteric Diſeaſes, he obſerves, that the curative indication is that which directs the ſtrengthening of the blood. Dr. Wallis, in a note on this paſſage, very properly obſerves, that, "Sydenham's mode of reaſoning on this "ſubject muſt be erroneous; for we find "that very often hyſteric patients have

" the craſis of the blood in a much firmer " ſtate than many who are not afflicted " with this complaint." Of the propriety of this remark of Dr. Wallis, the author of the following pages, is fully convinced; and the mode of treatment recommended by him, will be found to correſpond more with the practice than with the theory of Dr. Sydenham.

On this part of the ſubject it may be proper, firſt, to direct our attention to ſome *general* plan of cure; after which it will be more eaſy to ſettle the mode of of treating *particular ſymptoms*, or affections, that may occur.

I. In attempting the cure of nervous diſeaſes, I think it is of conſiderable importance to attend to the *general temperament or conſtitution of the patient*. We have obſerved that nervous diſeaſes have generally been ſuppoſed to be particularly connected with the ſanguineous temperament. That irritability to which they have been aſcribed, is often indicated by the fine ſkin, the blue eye, the flaxen hair, and the large and full blood-veſſel. But, though with this appearance we have a number of the nervous ſymptoms, yet we have ſeen others connected with a very different one. The hypochondriaſis, in particular, is often connected with a very different appearance: the dark iris, the ſwarthy complexion, and black hair, are frequently concomitant circumſtances. But

in other temperaments, the ſame diſeaſe is alſo to be found. Theſe different conſtitutions will ſometimes be blended together, or, what is peculiar to one, will be found connecting itſelf with the others. The ſanguineous temperament will ſometimes be found united with great corpulence; at other times, with a thin and ſlender habit; ſometimes with a large and round muſcle, at others with a ſmaller one; and theſe varieties may be obſerved in the other conſtitutions which have been mentioned.

It appears, therefore, to be of ſome conſequence nicely to diſcriminate between theſe appearances, and to adapt our mode of cure accordingly. For inſtance, if a phyſician were conſulted by a patient who, notwithſtanding a loud complaint of languor and weakneſs, and all the long train

of ſymptoms uſually deſcribed on theſe occaſions, diſcovered, by his countenance, a conſiderable degree of what is called health; if there were ſigns of fulneſs, expreſſed by a florid colour in the face, and this not appearing and diſappearing in tranſient fluſhes, but more fixed and permanent; if, at the ſame time, the pulſe were full, and rather ſlow than quick; if there appeared to be ſome weight and oppreſſion about the præcordia, would he not conſider theſe as marks of fulneſs and diſtention of the vaſcular ſyſtem, and propoſe to himſelf the queſtion, whether the cure, in this inſtance, ſhould not commence with ſome evacuation of the ſyſtem. A very general prejudice, indeed, prevails amongſt patients of this deſcription, againſt this mode of treatment. They imagine that

every increaſed evacuation tends to weaken and depreſs; and, therefore, hardly any thing can give them a ſtronger ſuſpicion of your not underſtanding their caſe, than a propoſal of this kind. It is not an eaſy thing to perſuade them that you can increaſe their ſtrength by reducing their bulk; or that you can convey a cordial at the point of a lancet. They think that there is a better way of giving ſtrength and ſpirits. But the ſkilful phyſician knows how difficult it is for organs to perform their functions, whilſt the ſyſtem is loaded and oppreſſed. He knows that, as there is ſuch a thing as indirect debility, ſo there is an indirect mode of giving ſtrength. Under theſe circumſtances, after having determined upon the neceſſity of reducing the quantity of circulating fluids,

it becomes a queſtion of ſome conſequence, in what manner this ſhall be effected.

The moſt direct and ſpeedy method of emptying the ſyſtem is by venæſection. By opening a vein, you reduce the quantity of fluids more in a few minutes, than you can in a few hours or days, by any other method. At the firſt view, therefore, this may appear to be the moſt proper ſtep to be taken, when the ſyſtem is oppreſſed, and a plan of depletion is to be adopted. There are, undoubtedly, circumſtances in which this plan would be highly proper, if not abſolutely neceſſary. If we foreſee any miſchief likely to ariſe from diſtention of the veſſels of any particular organ; if, by the irregularity of circulation, which, as we have ſeen, ſometimes takes place, this organ is much oppreſſed; if its func-

tions are likely to be conſiderably interrupted; more eſpecially if its ſtructure is in danger; to remove the apprehenſion of this by the diſcharge of a few ounces of blood, is a very neceſſary practice. Which of the different modes employed for this purpoſe is the moſt proper, muſt be determined by the particular circumſtances under which it becomes neceſſary. If, together with ſome topical congeſtion in the head, in the lungs, or in any other organ, there ſeems to be a general plethora, the opening of a vein in the arm will moſt effectually liberate the ſyſtem. The quantity of blood to be removed muſt be determined by the urgency of ſymptoms; and whether the neceſſary quantity ſhall be removed at once, or divided betwixt two or three bleedings, will, probably, be

beſt determined by the ſuddenneſs or ſlowneſs with which the congeſtion or accumulation appears to have been formed. If this has been very ſudden, as ſudden a removal of it may be neceſſary: whereas if it appear, upon inquiry, that the ſymptoms which it has produced have occurred gradually, a more gradual reduction of it may anſwer the purpoſe, and thus the inconvenience of a ſudden depletion may be avoided. This may not be an improper place to remark, that though venæſection be the moſt ſpeedy method of relieving plethora, the conſequences of it are not the moſt permanent; and, farther, that with the greater diſpatch this is effected, the leſs permanent are its conſequences. Very ſudden depletion, by weakening the tone of the veſſels, gives occaſion to diſ-

tention of their coats, and thus may conduce to the production of the very inconvenience which it is intended to remove. In all cafes of inflammation, therefore, the more fudden the evacuation the better. This fudden depletion may produce fainting, and may give a fpeedy check to a rapid and dangerous inflammation. But, in the inftances we are now referring to, and where fulnefs, rather than inflammation, exifts, this fudden evacuation would be highly improper: on the contrary, it is probable, that the more gradually it is produced the better; as this will give time for the veffels to accommodate themfelves to their contents, and lefs reduction of ftrength at prefent, or diftention of vafcular fyftem in future, may be expected. But, if inftead of this

general and habitual plethora, there has occurred ſome occaſional congeſtion in a particular organ, it may be proper, in this caſe, to inſtitute a topical, rather than a general, plan of evacuation. The cupping-glaſs, or leeches, may anſwer our purpoſe, and the part affected may be relieved by theſe means, without producing the debility, which may follow upon a more general evacuation. Caſes frequently occur, where, though there be no ſign of general fulneſs, there has been ſome ſudden determination to the head, producing pain and uneaſineſs, or a ſenſe of weight and oppreſſion, which is much relieved by the topical evacuation of cupping or leeches.

Beſides the loſs of blood, in either of the methods already ſuggeſted, there are

other means by which the conſtitution, in ſimilar circumſtances, may be relieved. The uſe of cathartic medicines is another effectual mode of reducing plethora. This is not ſo ſudden, but it is, probably, in many caſes, a more efficacious mode of relieving a general fulneſs of the ſyſtem than that of bleeding. It has been remarked, that after large evacuations of the inteſtines, whether by natural or artificial means, the ſigns of depletion have laſted much longer than when a moderate quantity of blood has been removed. The inteſtinal canal expoſing a large ſurface, the ſtimulus of a cathartic medicine produces a ſmall increaſe of ſecretion from different parts, which, in the whole, amounts to ſomething conſiderable; but which the conſtitution, from the gradual

manner in which it takes place, does not feel ſo ſenſibly. This operation, therefore, may be ſoon repeated, without the danger of weakening the habit; and the good effects of a conſiderable reduction of plethora are produced, without the inconvenience too often experienced by the loſs of blood. Where the ſymptoms are not very urgent; where the diminution of plethora is not immediately neceſſary; where a few hours or days may paſs without any particular danger to the conſtitution; I ſhould prefer the more gradual operation of a cathartic remedy, to the more ſudden depletion by venæſection. What article of the Materia Medica will be moſt proper, in any particular caſe, may be taken notice of when we come to treat more particularly of the cure.

It may be proper to remark farther, that to aſſiſt in promoting the plan we are now deſcribing, ſome attention to diet will be neceſſary: ſome diminution in the quantity of animal food, and the uſe of thoſe articles of diet which are leſs nutritious, will be an excellent auxiliary to our general plan for relieving theſe ſymptoms.

But let us ſuppoſe that the patient applying for aſſiſtance, is diſtinguiſhed by ſome ſtate of conſtitution juſt the reverſe of that which we have deſcribed. Let us ſuppoſe, that inſtead of ſymptoms of plethora and diſtention, inſtead of a full and oppreſſed pulſe, he ſhould have a ſmall languid and quick pulſe; that inſtead of a very florid and turgid countenance, he ſhould have rather a pale or ſallow appearance upon the ſkin; this would indi-

cate ſome very different mode of treating the diſeaſe. If with lowneſs of ſpirits, frequent tremors, ſudden faintneſs and languor, and the whole tribe of nervous ſymptoms, we ſhould find there has been a want of appetite, and conſequently no exceſſes have been committed at the table; if evacuations of different kinds, inſtead of being diminiſhed, have been increaſed; under all theſe circumſtances a different courſe of medicine, and a very different plan of diet and regimen would, undoubtedly, be neceſſary. To ſuch a ſtate of conſtitution, the treatment juſt mentioned, as applicable to fulneſs and oppreſſion, would be highly injurious. What the medicines particularly adapted to the ſymptoms occurring under theſe circum-

ſtances are, we ſhall have occaſion hereafter to obſerve.

II. We ſhall now proceed to remark, that beſides an attention to general temperament, it will be neceſſary to obſerve the *occaſional circumſtances under which the diſeaſe has made its approach.* Numerous and various as the ſymptoms of theſe diſeaſes are, we may well ſuppoſe that the cauſes of them will not be very few, and we aceordingly find that they make their appearance in connexion with a variety of changes occaſionally induced upon the habit. It is of conſequence, therefore, to inform ourſelves of the ſtate and condition of the patient at the time when he firſt obſerved the particular ſen-

ſations and affections which he deſcribes. We ſhall find that theſe, ſometimes, occur under circumſtances that operate immediately upon the body; but, at other times, under thoſe which more immediately affect the mind. As ſome ſymptoms which conſtitute the diſeaſe are corporeal, and others mental; ſo to theſe different ſources we are ſometimes to look for its cauſes. Very conſiderable evacuations, particularly by the lancet, have produced that ſtate of the ſyſtem which has proved the occaſional cauſe of theſe complaints. I have known ſeveral inſtances of perſons, who, being under the neceſſity of loſing a large quantity of blood, in order to reduce an active inflammation, have recovered their ſtrength very ſlowly, and have experienced high

degrees of hyſterical or hypochondriacal affections for a long time.

If nervous ſymptoms, therefore, ſhould occur after very conſiderable evacuations, either natural or artificial; if paleneſs of the countenance and general emaciation ſhould indicate a reduced ſtate of the ſyſtem; it will be proper to reſtore the ſtrength of the patient by a nutritious diet, and by ſuch an attention to general regimen, as will conſpire, with other means, to recruit the vigour of the frame. The change which we here attempt ſhould, however, be gradual. In this ſituation, a patient is often induced, by the ſolicitation of friends, to take a larger quantity of food than would be proper even in a time of health, and when the digeſting organs are equal to the taſk impoſed upon them.

In the preſent caſe, deſirable as it is to repair the waſte which the conſtitution has ſuffered, we are to remember that this can only be done through the medium of a well-regulated digeſtion. The recruit of fleſh and ſtrength does not depend upon the quantity of food received into the ſtomach, but upon what is properly digeſted; for if the quantity taken in be too great, this organ, inſtead of being rouſed to a healthy action, is oppreſſed, and, conſequently, cannot perform its common functions. It is to be remembered that the ſtomach has partaken of the general debility of the frame, and that whilſt its aſſiſtance is abſolutely neceſſary to repair the other parts of the machine, an attention to its own recovery is of the firſt importance. In this ſtate of the digeſtive

organs a very ſmall quantity of food ſhould be taken at one time, and this often repeated. That food, alſo, which is moſt eaſily digeſted, and from which the greateſt quantity of chyle can be derived, with the leaſt exertion on the part of the organs concerned, is the moſt proper.

In connexion with this plan of diet, gentle exerciſe is to be uſed. All fatigue is cautiouſly to be avoided, and, conſequently, that ſort of exerciſe is to be preferred, which can be uſed with leaſt exertion on the part of the patient. Riding is, therefore, to be preferred to walking. Exerciſe on horſeback is the moſt effectual: but if this cannot be obtained without conſiderable inconvenience, the uſe of a carriage muſt be ſubſtituted.

Under theſe circumſtances, medicines which give tone and vigour to the ſyſtem are to be adminiſtered. As we have repeatedly obſerved, the ſtomach is the organ, through the medium of which vitality and ſtrength are to be communicated to other parts of the ſyſtem; and for this reaſon, we muſt make choice of thoſe medicines which will excite the healthy action of that organ.

With a view to this, the various bitters may be preſcribed. Flor. chamæm. or inf. gent. comp. may be taken with advantage. Theſe are generally uſeful by exciting appetite, and thus encouraging the patient to take in a proper quantity of food, and by enabling the ſtomach properly to diſpoſe of what is received. I have ſometimes employed quaſſia amara with advan-

tage, in a weakened tone of the ſtomach. Dr. Lettſom, in Memoirs of Medical Society, informs us, that in a number of inſtances of hyſteria and nervous debility, he had found it ſingularly uſeful. The cortex is alſo highly uſeful under theſe circumſtances. This may be uſed in various forms, as may ſeem moſt expedient. When the ſtomach is very weak and irritable, a light infuſion may, perhaps, be preferable to any other form. When the ſtomach is, by degrees, reconciled to this medicine, it may be given in decoction, and, perhaps, afterwards in the form of powder. Chalybeate remedies, in different forms, will alſo promote the general indication of reſtoring tone and vigour to the ſyſtem. This claſs of remedies is often uſeful, particularly in thoſe caſes where profuſe eva-

cuations have produced a pallid countenance, and other marks of conſiderable debility.

In our inquiries into the circumſtances under which the diſeaſes now treated of have made their attack, we ſhall ſometimes find that they have ſucceeded a fever, by which the ſtrength of the patient has been much reduced.

The ſymptoms which we have deſcribed ſucceed to typhus or nervous fever, more commonly than to any other. In this ſpecies of fever you have conſiderable derangement of the nervous functions, expreſſed by great irritability, depreſſion of ſpirits, apprehenſion of danger, and every ſymptom which can indicate that the mind ſympathizes with the animal frame. But theſe ſymptoms may ſometimes follow

thoſe fevers, which, in the beginning, are attended with ſigns of inflammation, but which, in their courſe, degenerate into the low and nervous type. Sydenham was aware of the tendency which the evacuations, neceſſary in ſome fevers, had to produce the hyſteric diſeaſe. He mentions inſtances which occurred in his own practice; and, favourable as he was to the antiphlogiſtic plan of cure, he did not ſcruple to attribute ſome ſubſequent occurrences in nervous and irritable habits to this cauſe. We ſometimes obſerve a fatuity ſucceeding long continued nervous fevers, which goes off in proportion as the ſtrength returns. Whatever be the ſymptoms, whether they relate particularly to the ſtate of the body or of the mind, if they have occurred ſoon after the attack

of theſe fevers, they may, probably, be referred to them as their ſource.

It will be proper, therefore, to inquire how far any organ may be particularly affected in theſe caſes. The head is chiefly affected in thoſe low fevers which are ſo frequent in the preſent day. As accumulation or congeſtion takes place, in ſome inſtances, during the prevalence of this fever, ſo the conſequences of it may remain after the fever has ceaſed. This may therefore require our particular attention. If there ſhould ſtill remain ſome ſigns of determination to the brain, the veſſels of which have not recovered their ſtrength or capacity of acting properly on their contents, or of preventing an undue quantity of fluid being accumulated in them, it may be neceſſary, whilſt ſupporting

the ſtrength of the ſyſtem, ſtill to guard againſt any farther congeſtion in thoſe veſſels. During this ſtate of things, therefore, that diet and thoſe medicines ſhould be avoided which have a tendency to promote or direct the circulation towards the head. Small evacuations by a leech or two, now and then, applied to the temples, is not at all inconſiſtent with the uſe of tonic and aſtringent medicines, which may be adminiſtered for the removal of general debility. In ſuch a caſe the leſs ſtimulating tonics may be better than cordials or opiates, both of which have a tendency to direct the circulation towards thoſe parts, in which we are now ſuppoſing an accumulation to exiſt.

III. We proceed to obſerve that, in the general plan of cure, it will be neceſſary to pay very particular attention to the *ſtate of the whole alimentary canal.* In our recital of ſymptoms, we had occaſion to take notice of many which have their ſeat in theſe organs; and, in enumerating the exciting cauſes, we had occaſion to make the ſame reference: it is highly proper, therefore, that in attending to the removal of theſe ſymptoms, we ſhould keep our eye upon this part of the ſyſtem.

The firſt object of inquiry, on theſe occaſions, will be the ſtate of inteſtinal evacuation. Conſidering the relation which the inteſtinal functions have to every ſtate of the ſyſtem, it is of great importance to attend to them in every diſeaſe, which we are called upon to treat; but the more

particular influence which they ſeem to have in the preſent caſe, renders it peculiarly important, and neceſſary that an early inquiry ſhould be made into the ſtate of them. If there has been a deficiency of ſtools, and we ſuppoſe that the bowels are loaded with fæces, it will be proper immediately to promote their diſcharge, by ſome eccoprotic remedy. It will not be of much conſequence, in the firſt inſtance, what particular article of the Materia Medica we make uſe of for this purpoſe, but, as we proceed to conſider the more permanent and habitual ſtate of the primæ viæ, we ſhall have occaſion to treat this matter with more diſcrimination. Having thus ſecured the removal of accumulated fæces, we ſhall

have time to attend more particularly to every part of the alimentary canal.

We may then proceed, in the firſt place, to explore the ſtate of the ſtomach as an important part of it. Here it will be neceſſary to inquire into the ſtate both of the appetite and digeſtion. Theſe, it may generally be expected, will correſpond with each other: where the powers of digeſtion are ſtrong and vigorous, we may naturally expect that the appetite will be good; and we may alſo ſuppoſe, that when the appetite is keen, the digeſtion cannot be very deficient. The latter hypotheſis, however, is not always well founded. It is not fair to conclude, that whatever the appetite demands, the ſtomach will eaſily digeſt; for this would be, in other words, to declare that we cannot eat too much of

that food which is particularly grateful to the palate. It is very remarkable, that perſons under the influence of nervous diſeaſes, and whoſe digeſtive organs are much out of order, have oftentimes a very keen appetite, and may be ſaid rather to devour than to eat. Patients of this deſcription ſometimes find ſome ſymptoms aggravated during an empty ſtate of the ſtomach, and, on the contrary, find, that after a full meal theſe are relieved; this, therefore, may account for that earneſt deſire of food which they ſometimes diſcover, and which, perhaps, they ſwallow without much reliſh; or we may attribute this deſire to a morbid ſtate of the gaſtric ſecretion, which may excite an unnatural appetite.

But though this ſtate of appetite may ſometimes exiſt, yet we ſhall find, at other times, a deficient appetite, a loathing of food, and a very material defect in the digeſtive functions. In this ſtate of the ſtomach it has been a common practice to empty it by a gentle emetic. Where we ſuſpect that there is an accumulation of indigeſtible food, or that the ſtomach may be loaded with viſcid mucus; when the foulneſs of the tongue, ſome oppreſſion about the region of the ſtomach, or ſome ſlight degree of nauſea indicates ſuch a ſtate to exiſt, an emetic may do good. But it is neceſſary to remark, that it is not every attempt to retch that is to be conſidered as an indication of a foul ſtomach; for I have known patients in this ſituation very much diſpoſed to retching, where

nothing has been removed from the ſtomach, and where this action has been excited merely by the irritable ſtate of that organ. The exhibition of emetics is to be employed with caution, as the action excited by them is certainly an unnatural one. Uſeful and neceſſary as they may be on ſome occaſions, the very frequent repetition of them, in ordinary caſes, muſt prove injurious to the ſtomach, and muſt certainly increaſe that irritability, the effect of which, in ſome inſtances, we wiſh to avoid or remove. Even in thoſe caſes, where there is an accumulation of indigeſtible materials, if the more natural action can be promoted, and this load carried downwards, inſtead of being diſcharged by the mouth, it is certainly a more proper mode of removing it. Thoſe

medicines, therefore, which will promote that action of the ſtomach, by which its contents are ſent over the pylorus into the duodenum, will anſwer our purpoſe in theſe caſes. A few grains of calomel, accompanied with pulv. rhei. vel ſcammon. will ſometimes have a good effect: the laſt of theſe remedies, when accompanied with calomel, ſeems to begin its action in the ſuperior parts of the alimentary tube, and will greatly aſſiſt the ſtomach, in directing its contents into the moſt natural and proper channel.

After the ſtomach has been thus relieved of its contents, it will be proper to recruit its vigour by medicines of the aſtringent and tonic claſs. It may not be improper to begin with the bitter remedies, of which

the vegetable kingdom affords a variety. Theſe ſubſtances generally prove efficacious by conſtringing the animal fibre; and in debility of the ſtomach, in loſs of appetite, or indigeſtion, they are generally found very uſeful. Flor. chamæm. gentiana. card. benedict. are all of this kind; the two former, however, are chiefly approved in preſent practice. The cortex claims a conſiderable ſhare of attention on theſe occaſions. In this celebrated remedy we have bitterneſs and aſtringency ſo happily united, as to promiſe conſiderable advantage from the uſe of it. This remedy has for ſo long a time ſupported its reputation, that it has excited conſiderable chymical and pharmaceutical attention to the diſcovery of its cõmponent parts, and of its medical properties: and likewiſe to

aſcertain the comparative value of its different ſpecies.*

In addition to the uſe of the cortex, or after this is laid aſide, it may be very proper to introduce a chalybeate remedy. Various forms of this are preſented to us, in the choice of which we may be directed by the circumſtances under which we adminiſter them. Chalybeate preparations will ſometimes prove offenſive to the ſtomach, and, at other times, produce ſome

* The ſmall quilled bark, of a pale cinnamon colour, was, for a long time, generally thought to exceed all others. Several years ago the red bark was brought into notice, and acquired conſiderable reputation, from a publication by Dr. Saunders. A new ſpecies, under the name of yellow bark, has lately been uſed, in conſequence of an inquiry into its medical efficacy, by Dr. Relph; and, from the reſpectable manner in which it was introduced, and the good effects attending the uſe of it, is at preſent held in conſiderable eſtimation.

irritation on the bowels; for which reaſon it may be neceſſary to change the form, or to combine this remedy with ſome article that may reconcile the ſtomach to the uſe of it. Rubig. ferri, ferr. vitriolat. vin. ferri, tinct. ferri muriat. the different chalybeate waters, are forms out of which we may ſelect ſuch as will beſt anſwer our purpoſe. The ſtomach will ſometimes receive this medicine better in a ſolid than in a liquid form. In this mode of exhibition its effect upon the ſtomach is more gradual, and, conſequently, leſs liable to produce naufea. Rubig. ferri, or ferr. vitr. may be united with extr. cinch. or extr. gent. in the form of pills, which often prove a very pleaſant and very efficacious remedy. Ferr. vitriolat. united with pulv. radic. colomb. may be given in

the form of powder, with good effect, in ſome dyſpeptic caſes. A few drops of the tinct. ferri muriat. in a glaſs of warm water, taken in a morning faſting, I conſider as a very uſeful medicine. A ſmall glaſs of Spa or Pyrmont water, may be drunk, for ſome time, with conſiderable advantage. The uſe of Bath waters has alſo been attended with very good effects; and, in ſome caſes, the Cheltenham water has been recommended. The form of exhibition, however, muſt be left to the judgment and taſte of the practitioner, in particular caſes. The variety is advantageous, as it affords an opportunity of changing the form, which, for obvious reaſons, is ſometimes highly neceſſary. The moderate uſe of aromatics may be allowed alſo in theſe caſes; and they may

be occaſionally united with different aſtringent and tonic remedies, which will render the reception and retention of the latter by the ſtomach more eaſy, as well as promote their action upon that organ.

But beſides the ſtomach, the other parts of the alimentary canal will demand our attention. We have already ſeen that there is a peculiar connexion between theſe organs and the nervous ſyſtem, and have obſerved the connexion between thoſe ſymptoms which have been deſcribed, and a morbid ſtate of the inteſtinal canal. It is very fair, therefore, to conclude, even without the patient's referring to any particular ſenſation in his bowels, that they may have a more near, or more remote, concern in the diſeaſe. He will, ſometimes, however, direct your attention to

this quarter, by complaining of tranſient pains, ſome ſenſe of diſtention and flatulence, or ſome ſpaſmodic twitches in thoſe parts. The ſtate of the bowels with reſpect to ſtools, will alſo furniſh information, and direct our practice.

We have already obſerved the neceſſity of emptying the bowels of any accumulated fæces: but we now refer to the habitual rather than the occaſional ſtate of the inteſtines. Let us ſuppoſe then that a coſtive ſtate of the bowels has been habitual to the patient, that, inſtead of having a ſtool every twenty-four hours, he has frequently paſſed three or four days without one: in this caſe, beſides emptying the inteſtines of their contents, it will be neceſſary to employ ſome means for the removal of this torpid ſtate of them. It will be proper,

therefore, to ſelect thoſe articles from the cathartic claſs of remedies, for an immediate evacuation of the fæces, which continue their action for ſome time. The aloetic purges have frequently anſwered this purpoſe. Pilul ex aloë cum myrrha, has been uſed with advantage on theſe occaſions. Oleaginous medicines, alſo, have ſometimes been obſerved to correct habitual coſtiveneſs. Ol. ricini has been particularly uſeful in ſome obſtinate caſes of this kind.

But though this ſtate of the inteſtines is very commonly connected with nervous ſymptoms, we have ſometimes a directly oppoſite one to contend with. A diarrhœa will prove very troubleſome. This may take place under different circumſtances, and ariſe from different cauſes. This

ſymptom, whether it occurs in the diſeaſes we are now treating of, or on any other occaſion, deſerves conſiderable attention on the part of the practitioner, in order to determine whether it ariſes from ſome acrid matter thrown upon the bowels, or from a weak and irritable ſtate of the organ. In nervous diſeaſes, irritability is a prominent feature; and it may be ſuppoſed that the inteſtines partake of this diſpoſition, together with other parts of the ſyſtem: but there is ſome danger in forming this opinion too ſoon, in particular inſtances, as it may lead to an injurious practice of applying the aſtringent and tonic remedy; and thus of reſtraining what ought to be diſcharged. When ſtools have been preceded by pain in the bowels, to which they afford ſome relief; if they

are fœtid, or have an unnatural colour, and appearance; to reſtrain them is not only unneceſſary but improper: they are not only not to be reſtrained, but are to be encouraged.

This may be a proper place to introduce what appears to me to be of conſiderable importance on this ſubject—the neceſſity of guarding againſt a miſtake, into which the patient, eſpecially, will be liable to fall; namely, that it is neceſſary very ſoon to reſtrain, if not entirely to prevent, theſe diſcharges, as they have a tendency to weaken the frame and aggravate the nervous ſymptoms.

The opinion, too commonly adopted on this ſubject, is, that the ſymptoms of languor and dejection can only give way to a nouriſhing and cordial plan; that the

ſtrength muſt be ſupported, and the ſpirits raiſed, by every thing that is warm and ſtimulating; and that every evacuation, as tending to counteract this plan, muſt be avoided. We have ſeen how near a ſympathy there is between the inteſtinal canal and the whole nervous ſyſtem, and to what a variety of cauſes, which have their ſeat in theſe organs, the different ſymptoms may be traced. To accumulated fæces, to ſcybalæ, to worms, to any thing irritating the coats of the inteſtines, the moſt alarming nervous ſymptoms may ſometimes be attributed. Recollecting this circumſtance, therefore, where the affection of the bowels, to which we have been referring, occurs; when a diarrhœa is connected with the diſeaſe in queſtion; it is not to be taken for granted, too haſ-

tily, that this may prove injurious, or that it may not prove beneficial. There is frequent occaſion to obſerve how much miſchief has ariſen from too ſudden a check of ſuch diſcharges, when they have come on ſpontaneouſly.

There is alſo a circumſtance which deſerves particular notice, becauſe it is very apt to lead into a miſtake on this ſubject. It is no uncommon thing to hear perſons complaining of the increaſed number of their ſtools, and expreſſing their apprehenſion of the danger conſequent upon this great evacuation from the ſyſtem; whereas, upon inquiry, it is found that the diſcharge, though very frequent, has been ſo ſmall as hardly, when taken in the aggregate, to amount to more than the uſual and neceſſary quantity. If this

matter be nicely inveſtigated, it will be found to be rather a frequent deſire of going to ſtool than any conſiderable diſcharge from the inteſtine. This ſymptom is, I believe, frequently owing to fæces detained in ſome higher parts of the canal, and which, by their irritation, acting by ſympathy on other parts, have produced this frequent teneſmus, and the ſlight diſcharges we have been referring to. Under theſe circumſtances, I have known inſtances of a hardened ſtool coming down, which has given conſiderable pain in the diſcharge, and which has occaſioned wonderful ſurprize in the patient, who thought every thing which the inteſtine could contain muſt long before have come away. This affords a pretty clear proof that teneſmus, ariſing from the acrid nature of

a ſmall diſcharge, and which has been promoted by a morbid irritation on ſome part of the tube, has been ſometimes miſtaken for a diarrhœa. Whilſt this cauſe is operating, the patient may have a variety of nervous ſymptoms, which he attributes to the debilitating effects of the diſcharge from his bowels, but which might be, with more propriety, attributed not to what is diſcharged, but to what is ſtill detained. This, I apprehend, is a caſe in which it is not only improper to check any farther diſcharge by aſtringents, but where it is neceſſary, by ſome active remedies, to promote it.

We have already obſerved, that different articles of the cathartic claſs act on different parts of the inteſtinal canal, and with different degrees of force. Aloetic

cathartics are obſerved to ſuſpend their action, in great meaſure, during their paſſage through the alimentary canal, till they arrive at the rectum. There ſeems, therefore, to be ſome objection to the uſe of them in this caſe, as they would only increaſe the irritation, which is already troubleſome, and leave the cauſe of the diſeaſe ſtill behind. There are other articles of this claſs whoſe action commences much higher, and are, on this account, adapted to promote the periſtaltic motion of the ſmaller inteſtines, and bring down from them any collected fæces, or any other morbid and irritating matter. The ſaline purges act very briſkly, but, whilſt they promote conſiderable diſcharges, they ſometimes paſs over any collected maſs, or ſcybalæ, which lie in their way. Under

theſe circumſtances, therefore, it will be neceſſary to employ thoſe medicines, the effects of which commence pretty early, and which keep up the action of every part through which they paſs. Calomel anſwers our purpoſe on theſe occaſions, and this, connected with ſome other purgative, will generally have a very good effect. This may be united in the form of a powder, or pills, with a few grains of pulv. jalapii, pulv. ſcammon. or pulv. rhei.

Let us ſuppoſe that, during the operation of theſe remedies, the ſymptom ſhould ſeem to be, in ſome degree, aggravated, it will be improper for us to conclude that the patient is hereby injured; and though he may not at firſt be perſuaded that any advantage can ariſe from this plan of treat-

ment, he may be afterwards convinced of its utility. In fevers of the typhous kind, even when the patient's ſtrength has been much exhauſted, a ſpontaneous diſcharge from the bowels has ſometimes proved highly ſalutary. It might be ſuppoſed that this ſhould, at leaſt for a time, have increaſed the ſymptoms of languor and debility; inſtead of which, I have known the pulſe riſe, and the ſtrength and ſpirits increaſe after very conſiderable diſcharges.

If I were to attempt an explanation of ſuch a phenomenon, I might remark, that as every ſymptom of languor and debility is expreſſed, during the action of any nauſeating ſubſtance on the ſtomach, which is ſpeedily relieved by the emptying of the ſtomach; ſo the inteſtine, which has a ſympathy with the general ſyſtem, ſimilar

in kind, though not in degree, to that of the ſtomach, may have ſuch an action produced upon it by its contents, as ſhall affect the ſyſtem in a ſimilar manner. The languor and debility may be promoted by ſuch means, and a diſcharge from the inteſtines may remove theſe ſymptoms in a manner ſimilar to what we know takes place on an evacuation from the ſtomach.

I have inſiſted the longer upon this part of the curative plan, as I think it has been very frequently overlooked; and as I am perſuaded that a prejudice on the part of the patient, or his friends, will ſometimes throw a difficulty in the way of the practitioner.

But that we may not be ſuppoſed to conſider theſe diſcharges from the bowels as what are always to be wiſhed for, or en-

couraged, we ſhall proceed to remark, that a diarrhœa is ſometimes to be conſidered as a morbid ſymptom, and, as ſuch, by every proper method, to be reſtrained and corrected. When the diſcharges are of the colliquative kind; when they appear to depend upon a weak and irritable ſtate of the inteſtine; when the diſcharge is accompanied by increaſing languor; when the appetite fails; and when the ſymptoms of the original diſorder are aggravated, rather than alleviated, we may conſider the diarrhœa as an additional morbid ſymptom, and treat it accordingly, by thoſe medicines which give tone to the inteſtine, and relieve this and other parts of the ſyſtem.

IV. Another general indication in our plan of cure is, *to reduce the irregular actions of the moving ſyſtem nearer to a ſteady and healthy ſtandard.* The reader will remember that we referred to this IRREGULARITY *of action* in the moving ſyſtem, as a *general* cauſe, and as including under it the more *particular* cauſes of irritability and torpor, of too weak and too ſtrong, and of too quick and too ſlow an action in the ſyſtem, with which the diſeaſes referred to are frequently attended.

A morbid *irritability* being connected both with plethora and inanition, an attention to this difference of circumſtances will be neceſſary in our attempts to remove it. It will be neceſſary here to refer to what was ſuggeſted reſpecting an attention to temperament, in our entering upon

the plan of cure. We may obſerve that in this irritable ſtate of the habit very ſudden evacuations are to be avoided. By the appearance of fulneſs in the vaſcular ſyſtem, we might be induced to think that a copious bleeding would relieve, but experience proves that ſuch perſons do not bear the lancet ſo well as others of a different temperament. Where this irritability, however, is accompanied with ſigns of conſiderable plenitude of veſſels, it may be proper to reduce this; but this reduction ſhould be effected rather in a ſlow and gradual manner, than by any very active means. An attention to diet will alſo be neceſſary, and moderate abſtinence will prove a ſure, though a ſlow, mode of emptying the ſyſtem; and the very ſlow alteration, which it produces, is

better borne than that which is more ſudden and ſenſible. Cathartic remedies may be taken from amongſt thoſe which will keep up a gradual, rather than a quick diſcharge from the inteſtine. The ſaline purgative may be leſs proper than the reſinous or gummy reſinous. But as we have irritability connected with fulneſs, we muſt attend, not only to the evacuant, but alſo to the tonic plan of cure. After the operation of any cathartic remedy, or even during its operation, we may preſcribe either the cortex or ſome chalybeate remedy. Theſe may ſometimes be given ſeparately, and ſometimes may be united. They may alſo be alternated by ſome article from the claſs of bitters. By theſe means we may recover the tone, and abate that irritability of the ſyſtem, which we are ſuppoſing to be a

principal occaſional cauſe of the ſymptoms enumerated.

Sometimes, however, we may obſerve an oppoſite ſtate of the ſyſtem, and diſcover ſigns of diminiſhed irritability. Now as in the caſe of increaſed irritability, we have obſerved, that it may exiſt under different general ſtates of conſtitution; ſo, in the preſent caſe, we may have torpor and inſenſibility connected with different temperaments. This is often ſeen in perſons of a very full and corpulent habit. This ſtate naturally diſpoſes to thoſe modes of life which tend to increaſe the evil. Indolence is very natural to ſuch perſons. Motion is ſo much leſs pleaſant to them than to thoſe of a different make, that it is no wonder if it be frequently avoided, to the detriment of the health. Theſe

perſons are liable to become heavy and drowſy, and can hardly ſit down in their chair without falling aſleep. In others, alſo, of a different make, and who are characterized rather by ſymptoms of inanition than of plethora, there is often great torpor or inſenſibility to common ſtimuli. This is the ſituation of the hypochondriac, who is dull, thoughtful, and timid; whoſe body and mind are equally incapable of being rouſed into action by any ordinary means, and the motions of which are very ſlow and ſteady. Now, whether this ſtate of body and mind occur in the more corpulent or the more emaciated and delicate, it will require a treatment different from that, in which there is a ſuſceptibility of very ſlight impreſſion.

Beſides an attention to the different circumſtances under which this ſtate of body and mind may occur, which will of courſe regulate the degree of evacuation, and means of depletion, it will be neceſſary to awaken the moving powers to more briſk and lively exertion. In this caſe we want an increaſe of action, rather than of tone. Unleſs this torpor be connected with a dyſpeptic ſtate of the ſtomach, it will be leſs neceſſary to employ cortex or chalybeate medicines than in the caſe of irritability. Stimulants are preferable to tonics, and the more diffuſible ones are preferable to thoſe which are more topical.

As the ſtate of the mind is, in general, much concerned with this ſtate of the animal functions, it will require an attention to this part of the ſyſtem; and the

mental ſtimuli, as we ſhall have occaſion hereafter to obſerve, will be of as much conſequence as thoſe which are to be derived from our pharmacopeia.

Having thus taken a view of the general indications of cure in theſe diſeaſes, we may take notice of ſome *particular ſymptoms* which occur in the courſe of them, and for which it will be neceſſary to preſcribe ſome palliative remedies.

In a diſeaſe ſo irregular and anomalous, we may expect to meet with a great variety of ſymptoms, occurring on different occaſions. We may mention, in the firſt place, one of very frequent occurrence—*Flatulence and diſtention about the præcor-*

dia, with eructations or a diſcharge of air by the mouth. This will ſometimes occur when the patient has faſted too long; though it likewiſe occurs after a hearty meal. The moſt immediate relief of this ſymptom is derived from the taking of ſome warm aromatic remedy, either in the form of powder or tincture; ginger, cardamoms, pulv. arom. or a tincture made from theſe, will, generally, afford temporary relief from this ſymptom. Warm water alone is a very good remedy, or it may be impregnated with a little ſpirit. This may be particularly uſeful, if this ſymptom occurs after a hearty meal too haſtily taken in, and which is not eaſily digeſted. In ſuch a caſe, I am perſuaded that a little warm water will prove the moſt effectual relief, by promoting digeſ-

tion, as well as diſperſing flatus. Aſafœtida, in different forms, likewiſe, affords relief in ſome caſes of troubleſome flatulence. This, together with the warm and aromatic remedies juſt mentioned, are, perhaps, moſt proper, where flatulence ariſes rather from emptineſs than from fulneſs of the ſtomach.

Pain in the head is another very frequent ſymptom in nervous caſes. This may ariſe from various cauſes, and will conſequently require various modes of treatment. This pain often ariſes from the ſtate of the ſtomach and inteſtines juſt deſcribed. Flatulence and indigeſtion are very frequent ſources of thoſe affections of the head of which ſuch patients complain, particularly where the pain is confined to one ſide of the head; as in the

hemicrania it has been frequently found that a diſordered ſtate of the ſtomach has been connected with it. Clavus hyſtericus may, perhaps, be referred to the ſame cauſe. For a cure of the complaint, under theſe circumſtances, we muſt refer to the method preſcribed for the removal of morbid affections of the alimentary canal. This is an inſtance, however, in which ſome palliative remedy becomes highly neceſſary. Some article of the antiſpaſmodic claſs may be uſed with advantage. Liquor corn. cerv. ſpir. ammon. comp. vel fœtid. ſp. æth. vitr. comp. tinct. valer. volat. tinct. caſtorei, may any, or all, of them be employed. The application of æther to the forehead, by the palm of the hand, will ſometimes produce relief. Sternutatories have alſo been employed with

ſucceſs. Common ſnuff, to thoſe who are not in the habit of taking it, or pulv. fol. aſari. will anſwer the purpoſe. When the pain proves obſtinate, and continues for ſome time, or where it recurs very frequently, a bliſter in the nape of the neck, or behind the ears, has been found the moſt effectual remedy. During this affection of the head, the different extremities become cold, and in order to remove this ſymptom the application of heat, in ſome form, or the recovery of the action of the veſſels by friction, or ſome other means, will be very neceſſary. When the pain in the head returns, as it ſometimes will, with ſome regularity at a certain period, either every day or every other day, it is very proper to treat it as any other intermittent. In this caſe cortex,

ſometimes alone, or, at other times, in combination with ſome other article of the Materia Medica, according to circumſtances, will prove an effectual remedy.

Frequent tremors and *convulſive motions* form another ſymptom which demands our attention. We have ſeen that nervous patients are eaſily thrown into trembling and agitations, by any ſudden noiſe, or any thing which occaſions ſurprize or apprehenſion; and ſometimes theſe will occur without any evident cauſe. To ſome ſlight cordial, as a palliative remedy, it is natural to have recourſe; a glaſs of wine, or of brandy and water, may anſwer the purpoſe. Reſt and compoſure, for a ſhort time, without any other means, will often be ſufficient; or a ſleep of half an hour, if it can be obtained, will be a very plea-

ſant mode of getting rid of the ſenſation. When this ſymptom becomes habitual, and is accompanied with ſigns of general debility, if, at the ſame time, there be no indication of topical congeſtion, cold or ſea bathing will often prove an uſeful remedy.

Theſe convulſive motions will ſometimes terminate in an hyſteric paroxyſm, for the removal of which ſome means are to be employed. During the fit, it is generally difficult, and ſometimes impoſſible, to convey any thing by the mouth; the application, therefore, of ſomething of the volatile kind, to the noſe, is generally practiſed, till the patient is ſo far recovered as to be able to ſwallow, when a few drops of ſpirit of hartſhorn, ſal volatile, or tincture of aſafœtida, are generally

adminiſtered. But if the fit continue longer than uſual, and the patient's mouth be ſtill cloſed, ſo that you cannot get any thing into the ſtomach, it may be proper to throw up a clyſter, with ſome antiſpaſmodic article in it. This is the beſt ſuccedaneum for pouring any thing into the ſtomach. As, during the paroxyſm, the extremities are generally cold, particularly the lower extremities, it is very proper to recover the heat of them, and thus reſtore an equable circulation. Friction with the hand, or a piece of flannel, will ſometimes anſwer the purpoſe; turning the feet towards the fire, or if the patient is in bed, applying bottles of warm water to them, will reſtore the circulation of the part, and relieve the ſymptoms. If this prove effectual to recover the patient

ſufficiently to ſwallow ſomething, then the uſe of ſome antiſpaſmodic remedy will be very proper. After the fit is over, the return of it is to be prevented; and, as patients are ſometimes apt to paſs from one fit into another, it will be neceſſary to guard againſt this recurrence of the diſeaſe. Perhaps nothing will be more likely to prevent this, than to encourage a few hours of comfortable ſleep. With a view to this, alſo, if there be no particular contra-indication, the exhibition of a few drops of tinct. op. may have a good effect, and the patient will awake out of a ſound ſleep, refreſhed and comfortable, and eſcape the inconvenience of another paroxyſm for ſome time.

Palpitation of the heart, is a ſymptom which ſometimes demands our attention.

We have obſerved that this may ſometimes be the effect of ſome injury done to the ſtructure of the organ. Polypi in the heart, or in the large veſſels connected with it, oſſified valves, oſſifications of portions of the veſſels near the heart, or other cauſes of a ſimilar nature, may exiſt, in which caſes palpitation muſt be conſidered rather as an idiopathic diſeaſe than as a ſymptom: but when it occurs in connexion with other nervous affections, we may attribute it to ſome peculiar irritability of the organ, and muſt attempt its relief by thoſe medicines which will correct this ſtate of it. If we can diſcover that the patient has been expoſed to any particular fatigue, we may hope that reſt will prove a ſufficient remedy; if any ſurprize or hurry of mind has pro-

duced the ſymptom, compoſure of ſpirits will be attended with a removal of it. Should it be neceſſary, however, to uſe any medicine, we muſt have recourſe to volatiles, antiſpaſmodics, and opiates. Spir. corn. cerv. tinct. caſtorei. or muſk, in different forms, may be uſeful; to either of which may be added a few drops of tinct. op. Spir. æth. vitr. comp. in miſt. camph. ſometimes proves a very uſeful antiſpaſmodic, and affords a quick relief of this ſymptom, for the more permanent cure of which there muſt be a careful avoiding of all the occaſional cauſes of its recurrence.

Together with this attention to the ſtate of the corporeal functions, it will be ne-

ceſſary to pay ſome regard to the ſtate of the mind, which, we have ſeen, is often very nearly concerned with theſe diſeaſes. It is of ſome conſequence to obſerve at what time the patient firſt diſcovered ſymptoms of lowneſs and dejection; whether theſe appeared after other nervous ſymptoms, or preceded them. By attending to this circumſtance, we ſhall be able to determine whether the ſtate of the body is to be attributed to that of the mind, or the latter to the former. It is well known that any unpleaſant affection of the mind, long continued, will have a very conſiderable influence on the ſtate of the animal frame, and more particularly on the nervous ſyſtem. On the other hand, it is equally true that different diſeaſed ſtates of the animal function will be productive

of ſome affections of the mind. If, therefore, we can diſcover to which of theſe ſources different ſymptoms are to be traced, we ſhall have a more clear indication of cure. If we can trace different ſymptoms of hypochondriaſm to dyſpepſia, or ſome morbid affections of the alimentary canal, or to the ſtate of the hepatic ſyſtem, the mode of treating theſe ſymptoms, before preſcribed, may be adopted. But if we diſcover that the mind has been originally affected by ſome external cauſe; if any unpleaſant circumſtances have occurred to occaſion anxiety or diſtreſs, and theſe have been ſucceeded by ſettled dejection of mind, though accompanied with the uſual attendants of nervous affections that originate in the corporeal functions, we muſt ſtill direct our attention to the mind

as well as to the body. Under theſe circumſtances we may with propriety recommend that patience and reſignation which often form an excellent remedy both for body and mind.* In perfect conſiſtency with this advice, however, we may attempt to divert the mind from thoſe ſubjects which have proved the original ſource of its uneaſineſs. In order to this we muſt endeavour, as much as poſſible, to prevent the recurrence of thoſe circumſtances, which, by their aſſociation with the original cauſe of the uneaſineſs, may ſerve to revive the recollection of it. The mind is ſo conſtituted as to receive many

* "In hiſce morbis propinanda eſt non Galeni ſed Socratis medicina; non illa è pharmacopolarum officinis, ſed e ſcholis ſapientium haurienda." *Vide Sir George Baker's Treatiſe de Animi affect.*

of its pains, and many of its pleaſures, through the medium of aſſociation. There is a mental as well as a corporeal ſympathy. To the fond mother, who has lately been bereaved of her darling child, the ſight of other children, eſpecially of thoſe who have been the companions of the deceaſed, revives the unpleaſant remembrance of her loſs. And to every one, the ſight or recollection of a place, which has been the ſcene of ſome unfortunate tranſaction, tends to revive the unpleaſant ſenſations which it excited, and obliges us, in a degree at leaſt, to ſuffer again the pain which we at firſt felt.

If the patient diſcovers particular ſolicitude about the ſtate of his own health; if he imagines himſelf in conſiderable danger from ſome ſymptoms, which, however

troubleſome, his phyſician knows not to be attended with any hazard of life; it will be very proper to correct his imagination by reaſon and argument. It is neceſſary, however, to remark, that in this ſtate of ſpirits, all attempts to correct his imagination, by banter and ridicule, will prove uſeleſs. It is in vain to tell him that he is free from diſeaſe, or that nothing more is wanting to the enjoyment of perfect health than to believe, what every body elſe knows, that he is very well. Such attempts will either produce a miſtruſt of your judgment in his caſe, or elſe, which is of worſe conſequence, will lead him to conclude, that his ſenſations are ſuch as no other perſon has ever experienced, and that, therefore, no remedy for them has yet been diſcovered. On the other

hand, whilſt you aſſure him that his life is not in danger, that the diſeaſe is rather troubleſome than threatening; whilſt you can refer him to many other inſtances of a ſimilar kind, from which a complete recovery has been obtained; you hold out to him ſome ground of hope, and may induce him to believe, that as others have emerged from circumſtances equally diſtreſſing, he may add to the number of thoſe who have triumphed over a diſeaſe, which he has been ready to conſider as invincible.

When we entered upon the conſideration of the curative plan, we remarked, that one reaſon why complaints of the nervous kind are not more frequently removed, is, that patients have ſeldom reſolution to perſevere ſufficiently long in any

means of relief which are preſcribed to them. To recollect this, is of peculiar importance in that ſtate of the diſeaſe which we are now conſidering. It will be neceſſary for us to inform our patient, that an *effectual* cure may be obtained; but a *ſpeedy* one is not to be hoped for. If, for want of proper acquaintance with this circumſtance, he ſhould flatter himſelf with the hope of relief from the few firſt medicines he takes, or from a ſhort continuance of any diet or regimen that may be recommended, he will be ſo diſcouraged as, probably, to diſcard all hopes of ever being relieved. It is better for him, therefore, by degrees, to be informed that he is not to be diſcouraged by a few ineffectual efforts to relieve him; but is to remember that, oftentimes, the more gra-

dual and progreſſive the cure, the more certain and permanent it will prove. Theſe repreſentations may be conſidered as ſo many different medicines adminiſtered to the mind.

In theſe mental affections, mental ſtimuli are the ſpecific. To avoid, therefore, the influence of depreſſing paſſions, and to encourage the contrary or exciting ones, is of great importance. Grief, fear, and terror, are amongſt the former; whereas deſire, hope, and joy, may be ranked with the latter. To engage the mind in the purſuit of ſome pleaſant object, which, though at ſome diſtance, is not quite out of his reach, will be a likely method of calling into exerciſe the two former of the exciting paſſions: and we know that deſire, when accompanied with hope, is the moſt

pleaſing and uſeful paſſion. Joy may be ſometimes excited with advantage; but as this is the ſtrongeſt and moſt diffuſible ſtimulus of the mental kind, it is more proper for ſhort and occaſional, than for conſtant and habitual, uſe. In this reſpect, the mental reſemble the corporeal ſtimuli, for the more violent excitement they produce, the ſooner does their effect ceaſe. The more calm and ſedate paſſions of deſire, hope, and love, are more durable in their continuance, as well as more uſeful in their preſent conſequences and effects.

To engage the patient in ſome purſuit, either of buſineſs or pleaſure, will be of material ſervice. Whilſt it is neceſſary to prevent too cloſe an attention of mind, and whilſt it is proper for him to live very much at his eaſe, it is equally im-

proper for him to be taken off from all buſineſs or employment. A moderate attention to his uſual occupation, perhaps, will be more proper than any other engagement. But, if you can trace his preſent ſtate of ſpirits to ſome anxieties, occaſioned by his uſual buſineſs, it will then be adviſeable to remove him to ſome ſituation at a diſtance from the ſcene where unpleaſant circumſtances have occurred. In this view, places of public reſort, at a diſtance from the metropolis, are often very convenient retreats for men of buſineſs, who, by too cloſe attention, have weakened the mind, and have brought on thoſe nervous complaints, which are ſometimes ſo troubleſome and obſtinate. Exerciſe in this ſituation of the health, is, undoubtedly, highly neceſſary, and that ſpe-

cies of it which will produce or require ſome exertion of mind, as well as give motion to the body, will be the moſt proper.

Whilſt we are thus preſcribing to the mind, we muſt not neglect the regulation of the corporeal functions. The body and mind, in theſe caſes, act and re-act upon each other, ſo that in order to relieve either, we muſt attend to them both. Of the method of relieving thoſe ſymptoms, which are connected with ſuch a ſtate of mind, we have already treated in different parts of this work, and to theſe directions we muſt refer.

Thus, by a ſteady attention to well directed means, by a judicious union of remedies, corporeal and mental, both body and mind may be relieved; and the here-

tofore deſponding patient be reſtored to a capability of attending to his accuſtomed occupation, and of enjoying his uſual comforts and amuſements in the ſociety of his friends.

FINIS.

ERRATA.

Page 7, *Line* 5, *for* agrees, *read* agree.
46, 7, *for* equally, *read* equably.
47, 5, *for* moſt, *read* the moſt.
71, 8, *for* independent, *read* independently.
125, 10, *for* hæmorrhagis, *read* hæmorrhagies.