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Review

On the Classification and Forms of Insanity, by HENRY
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Introduction.

In my first lecture on the nomenclature of varieties of insanity I dwelt upon those phraseologies which have already been in use. The first of these was the old well known classification, which was grounded on the physical temperament, and conduct of the patient; and which confined itself very much to the question, whether he was violent, low spirited, or silly. Mania, melancholia, and dementia, being applied to these states; monomania and moral insanity, arising in after years as auxiliary to these terms, and being a refinement on the idiosyncracies of various cases. The second phraseology was one which Dr. Noble has developed, if not originated; it dwelt upon the *metaphysical* position of diseased mind, discarding the consideration of conduct and temperament. It tells us which part or faculty of the mind is diseased; it contains, in short, a geographical sketch of the mind and its diseases, and gives us some ideas of the exact position of each case in the history of diseased mind. Emotional, notional, and intelligential insanity are the chief terms of this vocabulary. I stated my belief that a consideration of both of these histories, the physical and the metaphysical, the state of the conduct and temperament, as well as a history of the part of the mind diseased, were necessary, for a terminology which should represent a fair history of the varieties of diseased mind; and I proposed to compile a nomenclature of the varieties of the disease, constructed from the conjoint consideration of these two histories.

I would here repeat an example of the three metaphysical

forms of insanity given above: Three insane persons obstinately refuse food; one of them is so miserable that he wishes to die, and does it purposely; a second thinks his food is poisoned, or that if he eats he will burst; a third is so raving and incoherent, that he knows not whether he eats or not, or is but in stupor. The distinction is obvious and often very important.

In studying then the history of diseased mind, I recognise three great divisions of what must be termed, for the present, a metaphysical nature; namely, diseased emotions, diseased notions, and diseased intelligence; but I also recognise two great distinctions of a simply physical nature, namely, excited nervous action and depressed nervous action. Among the insane emotional, notional, and intelligential phenomena, each and all of them evince these two physical states of nervous action. I propose, therefore, to make the following table of three columns. The first may be called the metaphysical column, the second the physical, and the third will consist of that classification of insane varieties which I would offer to the consideration and criticisms of those interested in insane phenomena. We must divide the insane according to this twofold rule; for if we are content with the consideration of one set of symptoms without the other, we fall into one of those dilemmas which I have already described as characterizing phraseology hitherto.

The table then which I would propose is as follows:

Metaphysical Symptoms.	Physical Symptoms.	Phraseology.
Emotional Insanity.	Nervous Exaltation	Exmentia, (a compound of the <i>Latin</i> Greek <i>ex</i>)
	Nervous Depression	Dysmentia (a compound of the Greek <i>das</i>)
Notional Insanity, or Simple Delusions.	Nervous Exaltation	Monomania
	Nervous Depression	Monomelancholia
Intelligential Insanity, or Incoherence	Nervous Exaltation	Mania
	Nervous Depression	{ Melancholia Incoherencia Acute Dementia
Insanity complicated with Motor Derangement	Insanity combined with Convulsions	{ Epileptic Insanity Hysterical Insanity
	Insanity combined with Cataleptoid Symptoms	Cataleptoid Insanity
	Insanity combined with Paralysis.	Paralytic Insanity

I wd. alter this hybrid term to Trismentia.

In treating of mind and its diseases, I would always guard against two errors into which many fall. The one (not much in vogue now), is an inclination to esteem mental alienation a spiritual matter, independent of organic change; the other, an inclination to see nothing in either mental disease or the mind itself but varying modes of cerebral function. The first has the great name of Abercrombie among its supporters. He says (p. 254), "Attempts have been made to refer insanity to disease of the bodily organs, but hitherto without much success." I would say to such an one, if you find no difficulty in recognizing the physical origin of drunkenness, why need you in the case of insanity? The fact, that in the one case the immediate agent is visible, and the other is invisible as the product of mal-assimilation, &c., can be nothing to you who have studied the hidden sources of disease; while the facts that a narcotic can change thought, and over-exertion of mind can produce headache, must convince you of the intimate union of mind and matter; and that nerve substance is the instrument and channel of the mind. Such a consideration need cause no distress to the Christian mind, if he rightly views the position of the body in the economy of his nature. There is nothing vile in the body, to him who believes that it is to be consecrated together with his mind to a life of holiness. When St. Paul draws the antagonistic position between the works of the flesh and of the spirit, he does not refer to that distinction which we intend by the words physical and metaphysical, but rather to the distinction between the use and abuse of our faculties. Thus, when he opposes hatred to love, he refers to two mental states, each affected by the physical frame, and requiring physical organization for their manifestation in this life.

With respect to the other error I spoke of, I am not about to enter on a dissertation on the nature of mind, but I must say, that the opinion that mind (the moral agent, the will which guides as it chooses) is nothing more than a function of the brain, appears to be, on the lowest consideration, an insufficient theory, unphilosophical, and requiring more credulity than any belief in spiritual agencies. Explain this theory as good men may, let them argue that they only mean mind in this life, it would, I believe, always lead to a dangerous pantheism, and never receive the consent of mankind. The belief of all ages, the world wide belief, the belief worthy of one who can appreciate his own Divine image is, that the mind is the special emanation of its Divine Creator, capable of holding immediate communion with Him, and occupying the body, or the sensorium (as we technically

call it) as a temporary abode; that this sensorium is capable of being the channel and instrument of the mind, and is the medium through which its manifestations are made, but that its imperfections cloud, and sometimes obliterate for a time its light. The facts that cerebral organization and mental power bear a fixed relation to each other, and that the mental principle grows and develops with its physical tenement, do not invalidate this theory, but rather point to the harmony in the works of the Creator, and His providential adoption of the spiritual principle to the body it is to inhabit. This belief is held by the learned and the good, and I know it has the sanction of the highest physiological authority. I wish to make this emphatic declaration, that whatever I may say hereafter of diseased mind, I refer to disease of the instrument of mind, not of mind itself. Madness is imperfect action, and belongs to a system subject to decay. I feel this caution to be the more necessary, in that the object of our solicitude having lost moral liberty, and being the victim of his mind, presents us continually with a picture where the lowest faculties, and those most intimately connected with simple nervous impressions, have taken the reins from the highest, and sensations have usurped the places of reason and conscience.

Physiology points further than to the general truth that brain *as a whole* is the instrument of the mind *as a whole*, and gives us good reason to believe that the great faculties, the emotions, the sensations, and the intelligence, have distinguishable ganglia, sensoria, or spheres of action. In the distinction which I make above between notional and intelligent insanity, I do not suppose that intelligent does not continue notional, or that a notion is not an intellectual act; but I wish to discern clearly between delusion on one or more points and general incoherence. It should be borne in mind that the more rudimentary faculties are often involved in the injury that affects the higher, thus if the notions are wrong, we generally find that the emotions suffer also.

I would now divide the subject into the three following heads:

I. I would say a few words on each of the columns in the preceding table.

II. I propose to give an historical sketch of the various progressive steps from perfect soundness of mind to complete madness.

III. I would apply cases from a large number which I have in hand in the elucidation of these progressive steps.

I. First then, with regard to the second column. I have so frequently dwelt upon irritable excess of action and deficiency of action, as but two consequences (differing in degree, but tending in one direction) of loss of nervous tone or equilibrium; that I need but allude to it here most briefly. That a morbid excess of action is but a step short of depression of action is provable in many ways. If we take an example from that part of the nervous system which is devoted to the special senses, we find that phantoms and blindness, tinnitus aurium, and deafness, succeed each other, according to the degree of injury to the nerve substance. In the motor system, convulsion and paralysis follow a similar law; and in the system of the true sensorium, we have but to note the varying effects of such a poison as alcohol on the mind; a little causes excitement, a little more torpor.

Now, madness is to be characterized very much by the results of too much, and too little. Mental phenomena are extravagant or deficient, or both at once; and to those who study the disease, it is quite apparent, that what is required for cure is to restore this lost equilibrium. On this head, however, I would refer to my former lecture.

Secondly, with regard to the first column, I would have it understood, that I believe it is a right thing to esteem emotional insanity rudimentary to notional, and notional to intelligent. In laying this down as the rule, I do not mean to say that all cases of more complete insanity must have passed through the more rudimentary forms (as I shall shew hereafter); but if we take notice, we shall find, that while many do pass through these progressive stages, this gradual journey is remarkably in accordance with the analytical history of the mind. By this I mean, that I believe it to be a generally recognized thing among metaphysicians, that *so far as mental phenomena depend on a person's own experience*, and not on the testimony of others, ideas are acts in advance of sensations and emotions, and that the acts of the intelligence, such as the memory, the reason, and the will, are acts in advance of sensations, emotions, and ideas; or, perhaps I had better say, that these faculties are the means by which we retain or compare past impressions, and that all these form the data on which we arrive at resolutions for the future.

A good opportunity is presented to us for watching the dependence of the higher faculties on the lower, or rather, I would say, their sequence from the more rudimentary to the more elaborated faculties of the mind, when we watch the progressive effects of some narcotic, such as alcohol or chloro-

form. Let us mark the gradual influence of chloroform on the mind, as the more rapid, and therefore the more remarkable agent. The person placed *gradually* under its influence will give an account which is very much to the effect, that his emotions are first affected, while his notions and intellect remain clear and unaffected; that he then passes through a period of delusion, which runs on into incoherence and final extinction of mental activity. Thus he says, that he feels at first, a sense of great happiness and peace steal over him; he is translated into Elysium, while he knows that he is still in this world, and is aware of all that is going on around him. The fact, that under the influence of chloroform sensations are pleasant, and that under that morbid influence which causes insanity, sensations are unpleasant, is a matter of little importance to the present question; indeed, however great the difference between comfort and discomfort is to the individual's own experience, the distinction in a scientific point of view becomes as unreal as that between heat and cold, to those who know, that what we term pleasure and pain are states that arise from but varying degrees of the same thing. But to continue, this sensational and emotional delight advances by degrees into the regions of phantasy, the external world recedes more and more, the emotions become embodied into ideal existences, the dream has begun, and the patient fancies himself in the presence of things and persons which have no real objective existence. By degrees these images rapidly succeed each other and without any order, all connection or sequence is lost, and the patient has really passed into the stages of ideal and intelligential insanity. It would be nugatory to argue with the person who would say that this chloroform case is not insanity; for to all intents and purposes it is as much unsoundness of mind, though temporary and from an obvious cause, as the more lasting forms which arise from internal and more hidden causes. The circumstance, that in the one case the injurious agent operating on nervous substance is visible and derived directly from without, and that in the other the injurious agency operates indirectly through mal-assimilation, depraved nutrition, or some such cause is hidden and difficult of solution, compels no real difference in our view of the case.

Now sensation is evidently a more rudimentary faculty of the mind than emotion; and it may be asked, why do you begin with emotional insanity? why not commence with sensational insanity, in a history which professes to trace diseased mental manifestations in an historical manner? The obvious answer is, that while in one sense sensation is a

rudimentary faculty of the mind, yet in another it may be said to hold a middle ground between mind and matter. What is a sensation? It consists of two parts, namely, a physical nervous change first occurring, which is appreciated immediately by the mind, and usually attended with either pleasure or pain. It has been customary to call the physical part of sensation an impression, and the mental an act of perception; which act of perception is more or less intense according to the degree of attention directed to it. Many sensations consist almost entirely of the physical part; the attention being directed to other matters, the mind is so very slightly aware of the change which has occurred, that unless some additional circumstances should call the attention to it, it would not even be stored in the memory. A common example of this occurs when a man is absorbed in a book; a clock strikes, and he does not consciously recognise its sound; but some one coming in a minute afterwards asks him the hour, and he is sensible, for the first time, of the number of strokes or vibrations, which have impinged on his auditory nerve.

Now though sensations are thus through perception and attention connected with the mind, their relation to the mind is essentially so slight, that they may become, to a great degree, objective rather than subjective phenomena: in other words, the mind can handle them, in a great degree, as things external to itself. An emotion, on the other hand, though often connected with sensation, and springing out of it, is so much a part of the mind, that a man's happiness or anger may be said to lose its emotional character, when he can manage it as he would a thing external to himself. While, therefore, I would say that a person suffering from depraved emotion, is of unsound mind, a person who is the victim of depraved sensation is not. The whole difference between illusion and delusion is grounded on this distinction: an illusion being an act of depraved sense, which the mind analyzes and does not acquiesce in; delusion is an imaginary existence, so entirely of mental origin, that the mind cannot but recognize it as a part of itself, and believe in it. But an example is better than any abstract reasoning. I will, therefore, give as an illustration of the fact, that diseased sensation may exist without essentially affecting the mind, a well-known scientific person. This person suffered from spectral illusion. He would see a skull on his dissecting-table, on entering the theatre. Sometimes the skull was there, sometimes it was not; but his eye told him it was there always. His mind,

however was free; and he said, I cannot trust my sense of sight, I will try another sense, and feel if it is there. This was usually enough, the grosser touch of the finger would correct the more subtle, but in this case diseased touch of the retina. On one occasion, however, his special senses failed him generally, and yet his mind remained clear. He was about to step into his bed, when he heard a voice address him from his bed-head: he looked there, and observed a figure. He was convinced it was an illusion. He approached it with his candle, and felt a touch on his arm; still he was satisfied that all this was owing to the morbid action of his senses, that the sound was not that of a real voice, or the sight that of a real figure, or the sense of touch anything more than a convulsive twitch of the muscles of his arm. He continued to approach the figure, and as he approached, it receded. He followed it down stairs, and when in the hall his mind became so affected, that he fell into a swoon. Now, this man's mind was clear, until his emotions caused him to swoon away. He did not trust his senses, he believed the conclusions of his reason more. Had he, however, become so overwhelmed by this apparition that the whole tone of his mind was altered afterwards; had he said, I believe that this phantom has no real existence; but had he at the same time been so upset by the circumstance that he could no longer control his thoughts, that he gave way to deep dejection, and that life became unendurable in consequence; it would not be necessary to wait for a distinct delusion, to pronounce that he had entered the regions of unsound mind. His position, in short, would have been that which I have recognized as dysmentia in the preceding table.

Emotional insanity is, then, the first stage of unsoundness of mind, in a philosophical point of view. How is it in practical life? As I have already said, we do not always find insane phenomena beginning with the emotional form, and passing on progressively to delusion and incoherence. We cannot, in a vast number of cases, observe any halt at these stages. This difficulty I will account for immediately. But let me say, that I think the more accurately we observe the first stages of insane phenomena, the more we *shall* recognize a period when the emotions, feelings, affections, (or whatever term we will) are affected alone. I know that since my attention has been drawn to this matter, the more apparent this becomes. I could not, however, pretend to say that in many cases any notable halt is made at the early stages. The patient frequently leaps as it were from the ground of perfect sanity

to some advanced position in the road towards complete mental alienation. For instance, when acute mania suddenly accrues. I know also that these active cases generally spring back again to the ground of sanity, more rapidly than those which pursue the more progressive course. But this consideration would not deter me from adopting the progressive history of the disease as the normal one; for there are many modes of accounting for this irregularity, and the arguments in favor of adopting the progressive view are greater than those against it. Among these modes, one is that the mind may pass through the earlier stages, in many cases where we do not observe them at these stages, on account of the rapidity of the disease; and like the electric shock, which cannot be observed at any stage of its journey, before it is seen at its terminus, insanity presents itself to us as complete. It may be, again, that the evil falls like a cloud upon the whole mind at once: in very many cases, however, we must acknowledge that the evil takes a retrograde course from the higher faculties to the lower. As in the imbecility of old age, where loss of memory, loss of resolution and judgment, generally precede loss in ideas, or any depravity in the emotions.

But, even if I were willing to acknowledge that the exceptions may be more frequent than the rule, in such a Protean disease, I should not incline to give up the progressive, as the normal history of insanity. Without such a history, we have no means of tracing a connection between the various phases of this disease. Our view of it becomes as incoherent as the thoughts of our patients. By keeping the progressive theory in view, we gain not only a sight of what is presented to the sufferer in the stage of the disease where he may happen to be, but we also get a good idea of whereabouts in the mental history this stage is: in other words, we not only can mark his present symptoms, but we can gain some idea of his antecedents and prospects. It has been recently observed by one, who is not aware how entirely insanity is now regarded by medical men as a disease consequent on physical infirmity. "I wish that these doctors would shew us something of the connection between mental disease and physical ailment;" and I hope that what I may now write will aid such an one in tracing the connection.

Thirdly, I must add a few words of apology for the terms of the third column of the preceding table. The terms *dysmentia* and *cataleptoid insanity*, or that peculiar state of torpor and insensibility manifested in many melancholic cases, were discussed in my last lecture, and met with approbation. The

only new term, therefore, is *exmentia*; by which term I would indicate emotional insanity of an exalted, rather than a depressed character. This form of disease is very often connected with an advanced form, viz., paralytic insanity; so that much care is required in its application. It is also by no means so common as *dysmentia*. I feel it, however, so important to recognize emotional insanity, (separate from and *short* of the more intellectual forms of the disease,) that I must devise a term for this affection under the exalted, as well as the depressed type. I have known *exmentia*, or simple emotional excitement, alternate with periods of depression, and yet for many months the disease went no further, no delusion occurring, and yet there was great anxiety as to the care of the patient. The victims of these incipient forms can reason well enough, and see the impropriety of injuring themselves. The common observer would declare them to be of sound mind, but repeated attempts at self-destruction, the marked changes in mental character, in the conduct, the physiognomy, &c. compel us to recognise unsoundness.

It will be observed, that notwithstanding my remarks on a former occasion, I have kept the term *mania* in the preceding table. The truth is, it is in such constant use, and the arguments against it are so much more against the abuse of this term than its use, that I feel compelled to keep it. By *incoherentia*, I allude to a form of intelligential insanity, which evinces neither the violence of *mania*, nor the loss of memory and fatuity of acute *dementia*. There is a considerable class of patients who are simply rambling and incoherent.

Let me here meet a few objections which may be raised against this classification generally.

One objection which may be raised against the table which I have given is, that it may be said to be too clear in its distinctions, and exaggerated; that insanity is not in nature so clearly defined, that the outlines are less distinct and its coloring more blended. This argument must, I think, prevail against all systematic classifications. But I am willing to acknowledge the force of this argument in full, and yet to retain this programme. For I believe that before any true picture of insanity can be appreciated by the student, much has to be both learnt and unlearnt; many outlines have to be made and afterwards obliterated; many colors exaggerated at first and afterwards toned down. If we hope to depict insanity without this doing and undoing, without exaggerating every little hook for the memory; if we attempt to blot in nature upon our canvass, we run a great hazard of producing

a picture without shape and without interest; we should find our varieties assuming the appearance of a tame generality; and while seeking to copy nature's inimitable blending of color and form, we should produce a pointless and uninteresting picture. I feel satisfied that we must have a systematic method in reaching the goal at which we aim; we must have theories and prejudices before we can really appreciate truth. Is not this the case with the artist of material nature, who has to depict what is tangible by his senses and fixed for his observation? Has not he to learn a method by which he exaggerates outlines and colors? Has he not to frame a skeleton of his own (which nature would repudiate could she speak) before he can produce a picture which can at all represent the fineness of her forms and the delicacy of her tints? And if this is the case with one whose art is so simple, and whose instrument is as powerful as the brush, how much more must be required by him who would sketch forcibly the face of mental nature, whose expression can only be caught by attentive watching, fixed by a retentive memory, and represented to others by an instrument as feeble as words.

Another objection which may be very rightly raised (if not explained) is, that the same cases are continually changing their aspect; that they are like dissolving views, so that you may find one day one scene, another day another, and a third day a mixture of the two; mania, melancholia, and dementia succeed each other in such endless varieties in the same case; nay, exist *so coincidentally*, that it is impossible to classify. When you find violent excitement and deep distress, or violence and imbecility combined, what are you to do? In such circumstances we can of course only classify a case as to its *present* history, and we must single out its most prominent and permanent characteristics for the basis of our name. Moreover when all the three metaphysical forms exist together, when the patient is miserable, full of delusions, and incoherent, we should, of course, take the more complete characteristic for the guide to our classification, and let it cover all those of a less developed insanity. The incoherent are, of course, full of delusions, and the emotions are generally depraved; such a term as mania therefore will cover all; we should only use the terms of the less developed forms when more advanced symptoms do not exist.

A third argument which may be raised by one conversant with insane minds, but inclined to take a cursory view, would be, that these classes hold no sort of proportion (numerically speaking) to each other; that some of them are so rarely

seen as hardly to deserve naming, exmentia for example; while others, such as monomelancholia, seem to be the only class of any important magnitude. He may say, "the practical truth is, that you go into a ward and see a number of melancholy persons with one or more delusions, they are, perhaps, enlivened here and there with a case of maniacal excitement." My answer is, that I do not presume that numerically they hold any relative proportion to each other, but this does not make analysis of cases the less important. It is very easy to say, I care not for this subtle analysis! persons are mad altogether! or sane altogether! But it should always be remembered, that there is a wide difference between that prudent inclination to synthesis which in practical life a man of experience arrives at, and that vague inclination to generalize which a superficial and scanty observer is inclined to adopt.

Fourthly, it may be observed that there is no provision made by this table for the varieties of intermittent, remittent, and continuous disease. It would be endless to mix up this question of continuance with the question of form of disease; suffice it to say, that every form may be either intermittent, remittent, or continuous. I would also make a somewhat similar observation as to the question of acute or chronic. All three forms may be either temporary or persistent. Perhaps it would be the best plan to say that the table here given is intended to represent active disease alone. For when cases become chronic, they lose very much of these distinctive characteristics. Our interest, moreover, is not so much in marking the various forms of shipwreck, which may be heaped upon the shore from whence there is no return, as in watching the vessel while it holds together, and is susceptible of remedy.

II. *An historical sketch of mental phenomena from perfect health to complete unsoundness.*

I propose now to trace the mind through the varying conditions of disease, and to make as clear as I can anything which indicates the course of this journey. Before I come to the history of unsound mind, I propose to give a brief sketch of healthy mind in the two conditions of physical refreshment and physical exhaustion of its nervous instrument the brain. And I do this for two reasons: first, that by this means we shall best get on to the track by which we are to trace every form of insanity; and, secondly, that while the mind has moral liberty, or in other words, is healthy, it can speak for itself, and tell us something of the phases of mental and phy-

sical suffering which it goes through. In the case of the insane we must trust very much to the hypothesis of doctors; the patient is the victim of impressions, he can no longer view them objectively; but the sane can speak for himself. He can say, though I am suffering from intense discomfort, though my senses play me false, though I feel a difficulty in controlling my thoughts, still I know that the external world is the same as it ever was, the medium of my own mind is the only thing at fault.

I propose, therefore, to comment upon the following states.

1. The healthy mind in a sound and refreshed body.
2. The healthy mind in an exhausted or diseased body.
3. The diseased mind suffering from emotional insanity.
4. The diseased mind suffering from notional insanity.
5. The diseased mind suffering from complete or intellectual insanity.

In tracing these stages of mental phenomena, I will suppose the individual whose steps I am following, to be of what is called an irritable temperament. This is very important, because the irritable diathesis experiences changes and peculiarities, of which the firmer constitution knows nothing. There is a large class of persons whose nervous system is so sound and perfect in its working, that they are not even aware of what you mean when you speak of high and low spirits; it seems to them all romance and nonsense. These minds, when they break down, frequently give way suddenly; they for the most part become quite incoherent, but they do not progressively descend the scale of steps which I shall now speak of. Their fall reminds one of the sudden and overwhelming calamity which brings down the bird of strong wing, to struggle helplessly on the earth. Nothing impeded his flight towards the horizon of his hopes while power remained, he was far above all the impediments to flight which things on the earth might offer, but when he falls the power of movement is gone altogether. The vicissitudes of the irritable diathesis resemble the flight of that bird which is easily beaten down by any change which may occur, though at times he may soar higher than even his stronger brother. Sometimes he is in Elysium; sometimes low and drooping, and drags heavily along the earth. He learns all states by his experience, so that while he labours under these disadvantages, he has this advantage, that amid these vicissitudes he learns in his ascent and descent the pictures of life, which more or less permanently surround the minds of firmer constitutions.

The Refreshed Mind.

In analysing mind at all we cannot but recognize two very distinct influences which affect its construction. By the one, I mean the influence of present sense, and its effect on the emotions; this is frequently termed the spirits, temper, &c. By the second, I mean the influence of habits learnt from the voice of experience, observation, reason, religion, or some other external agency. The distinction, between what I may term this inherent nature and this acquired nature, is at all times obvious and of importance, but it is particularly so in tracing the progress of mind from sanity to insanity, as I shall presently shew.

The inherent nature is represented by the terms instinct, impulse, temperament, disposition, spirits. Let us take the good old term, spirits: if we analyse this we shall find it is composed of the conjoint action of our present sensations, and emotions which arise from the state of the present sense. As I proceed in tracing the accession of mental unsoundness, I shall have occasion to draw particular attention to that class of nervous impressions which is most intimately connected with pure mental acts, and which has not, in my opinion, as yet been sufficiently recognized: which is not perceived by what is ordinarily termed common sensation the special senses or muscular sense, but by the perception of the state of our *inner man* (if I may be excused the expression), and for which I propose to adopt the term *functional sense*. Now, the state of this *functional sense* plays a most important part in the history of incipient insanity. The acquired nature becomes, through the power of habit, a second self, but it never becomes so essentially self as the inherent nature; and I think that the more we watch the peculiarities of mind when going astray, the more we shall see the importance of distinguishing between this inherent nature and this acquired nature.

But there is a part of the inherent nature which is so distinct from the history of present sense (though it always influences it), that it deserves to be called a separate and distinct principle; and that is the original scheme, model, or character of the mind. That stamp or impress on the mind which we carry about with us from the first moment of individual existence, a good deal of which is hereditary, and all of it congenital. As we trace the passage of mind through health and disease, we must bear in mind the working of this influence, as a principle essentially connected with the inherent present nature, and yet antecedent to it. Let me then, for

the present, recognize these three influences as distinct from each other; and I will term them *our original nature, our inherent nature, and our acquired nature.*

Mind may be said to be acting most healthily, when these three influences combine in acting most healthily. That is, when the mind is originally and congenitally elastic and healthy; when habits have been such as to exercise, rather than injure this original elasticity; and above all, when the present spirits are vigorous and the *functional sense* comfortable. An example assists so much the elucidation of an abstract idea, that perhaps I may be excused if I refer again to the one contained in a preceding paragraph. Suppose our subject was motion, not mind, and we wished to find out the extent of a bird's powers of flight. I would compare then the spirits and present sense, to the strength and health of the bird; the congenital predisposition, to the body or scheme of the bird which has to be carried; and the force of habits, to the habits of the bird's life. Thus, where the present power is strongest, where its exercise has been most healthful, and where the body or scheme of the bird is most suited for flight, there we expect to find flight in its full perfection.

I would have it understood, that what I am about to say of the position of the mind, has not so much reference to its power or dimensions, its endurance and subtlety, as to the *healthiness of its action for the time being.* I want now to draw the greatest contrast that I can to the diseased mind. If I were called upon to point out one characteristic more comprehensively and rudimentally indicative of unsoundness of mind, than any other, I should say it was the loss of elasticity. This loss is to be observed in the very earliest stages of morbid mind. It is betokened by an inability of will to turn from one subject to another. To use a metaphor again, the action of this characteristic resembles the steps of a fly through glue. The mind cannot move freely, moral liberty is impaired. This is the first sign of the presence of that chain which so hampers our inner man in its contest with the outer world, that ultimately we become the victim instead of the master of our circumstances. When this is experienced, we are far on our road to dysmentia. Want of elasticity then being the characteristic of unsound mind, I consider elasticity the characteristic of sound mind.

I would now, therefore, offer a sketch of mental action in its most healthy form. I will suppose a person, the scheme of whose mind is constitutionally elastic, whose mind has been exercised in healthy habits, whose present sense or

spirits are vigorous and comfortable, starting upon some congenial work in the morning, after being refreshed by sleep and food. Ideas intuitively roll across the field of the mind in rapid and pleasant succession. These ideas combine without any recognisable exertion, almost spontaneously, so that our power of comparing, or reason, seems to have everything peculiarly in its proper place for the commencement of its operations, and the path of thought becomes an easy one. Compare this with what happens when the spring of the mind is lost; ideas are few, tedious, and appear to stagnate, not to combine easily, and reason finds a rugged road.

It is wonderful how keenly and freshly we can excogitate when the physical instrument of mind is elastic and free; difficulties clear away, or rather we are on so high a pedestal that we see over the boundaries which usually obstruct our view. It is a somewhat unfortunate circumstance that this degree of elasticity of mind is usually experienced when the body is in healthful exercise, when fresh air is playing around us, and when we consequently have no means at hand to mark down or fix the conclusions at which we have arrived. A good memory becomes, then, a most important agent in stereotyping our thoughts; but even with this advantage, we must ever bear in mind that no drawing from memory is equal to the sketch direct from what is before us. If we attempt to write down our conclusions, we should produce after all, but a conventional picture; the finer parts have evaporated, and there is but little added to the old residuum of the mind. These happy periods of excogitation are consigned, therefore, to the lot of never appearing, and thence springs the old proverb, that "an author's best thoughts never appear."

One very interesting phenomenon at such times of mental refreshment is, the sense of increased spiritual aspiration which now occurs. Our capacity for love towards man and God seems to increase. It seems strange that a state so dependent as this on physical exhilaration should end in this way, and yet we cannot ignore it. When I come to speak of one of the earliest forms of mental alienation, I shall have to shew how frequently moral depravity arises as physical and mental vigour departs. There are many ways of accounting for this, as I shall show when I touch upon dysmentia.

But to continue, we may realize the history of mental elasticity and its dependence on physical causes in a very striking way, if we go out of a close hot room into the outer air; scales

seem to fall from our eyes ; illumination takes the place of ennui ; we wonder at the difficulty, the suspiciousness, the ill-will we felt. But now, every thing seems easy and plain, and the mind instinctively goes upwards, poetry becomes the natural vehicle of thought ; and all this is produced by the fresh air. Oxygen, thickly growing ideas, firm resolve, hope, faith, love, happiness, and life, seem wonderfully connected. Malaria, stagnation of mind, suspicion, despair, hatred, and death, have their connection also. Surely when minds are free, our talents and our responsibilities rise so in proportion, that a great work now only balances the smallest effort made, while the cross of suffering is upon us.

While the mind is elastic and free, its possessor feels like the owner of a treasure house, the rooms and shelves of which are well and carefully kept by its master, every thing is in its right place, so that he can go when he pleases and find what he wants ; the key of this treasury is safely in his possession, and he is free to labour or to rest. Perhaps I would rather say that the distress of him who loses this state of health, reminds one very much of the amazement of him who would find his treasury broken in upon, and all that he cared for in such a state of destruction and confusion that he can find nothing. A helpless restless amazement is the peculiar characteristic of many cases of incipient insanity.

There are certain states of existence where the mind appears to be peculiarly fresh and vigorous : I will advert to a few of them again, stating that I am not now speaking of what is usually meant by the term mental power, but mental health. One is manifested by the man who is sufficiently clothed and fed, but who lives a great deal in the open air. What one reads of the mental vigour of the hunters in the prairies is very striking ; the satisfaction in his life, the glow of his spirits, and (so far as this limited world admits it) the keenness of his mental powers is, as far as we can judge, far superior to anything we ever experience. Another state of peculiar mental freshness is that of early youth ; the brilliance of mental phenomena at this time seems peculiarly to resemble the brilliance of the face of nature in the early dawn. The earliest period of life (of which we get no information,) may be said to resemble the grey dawn, where the forms of things around heave in a mysterious manner before the spectator ; nought is clearly defined, everything is mysterious. But there comes a period after this of peculiar brilliance and beauty, when the sun has just arisen ; all objects have a vivid reality, an intensity of colour and

outline compared with which the phenomena of mid-day appear to be encompassed by a heavy atmosphere; the clouds are gorgeous, the heath side is golden, the mind of the spectator is keenly alive to impressions, wonderfully in tune with the beautiful everywhere; perhaps too sensitively alive: but the sensations produced, as well as the objects producing them are such as can never be acquired in mid-day. The mental phenomena of early youth have not only an analogy to, but partake of this freshness and keenness; everything is viewed through a rosy medium. If it were not for the reminiscences of childhood, we should know nothing of that emotion which colours alone can excite. Colours, tastes, scents, everything that comes to us through the medium of the senses, have a clearness and reality and force about them at this time, which would indicate a more than usual amount of mental freedom and keenness. There is one other state when mental action appears peculiarly to grow and acquire freedom and force, if not enlargement, and that is when we have a happy facility for, and opportunity of *expressing* ourselves. This is a subject on which I hope to enlarge at another time; I will, therefore, here only briefly indicate what I mean. Take for example, the influence of that readiest and therefore, best expressor of mind, rhetoric; if the orator narrowly observes himself, he will often find that his thoughts *grow* in freedom and vigour with his power of expression, his words do not merely represent and back his thoughts; but they actuate, intensify, and free his thoughts; an inspiration, as it is termed, is felt as the sound of his own voice tells him that his mind is revealing itself. A good deal of this is, I believe, to be explained on the theory, that an act is the proper culminating point of a thought; action facilitated, thought enlarges; action repressed, thoughts become stunted. It may be said probably that that nervous energy employed in thinking finds its happiest exit through those nervous channels employed in muscular movement: however this may be, we know well how muscular movement is the instinctive result of mental suffering or exertion; when sensation is distressed, we draw up our fingers and toes, when the emotions are distressed, we walk about the room; when the intellect has been hard pressed we go out for "a constitutional." A game at foot-ball is the best medicine for hours of study. It is needless to dwell on this old story, the instances are innumerable where physical action frees mental action; why should a child scream when in pain; why should we feel

inclined to talk to ourselves when in grief; why should we say, only let me do something active and I shall be better; if there were not truth in this theory?

But I have said more than that action is the proper vent for thought, I have suggested that expression makes thought itself more easy; that the orator feels increase of mental power as his expressive power increases, and the best explanation which I have for this, is that while body and mind are so incorporated as they are in this life, they seem to act as one force.

Before I conclude this lecture, let me say a few words on what I have called above "functional sense." The more we see of the incipient stages of insanity, and the more we watch that track by which the sane mind becomes insane, the more sensible we must become that a feeling of indescribable distress is in many cases a prominent feature of approaching disease. What is this distress? You see the patient unlike the healthy man, in the fact that every minute is marked by discomfort, restlessness, and irresolution; instead of comfort, serenity, and fixedness of purpose. When you see a man in this state you cannot call it mental disease, for the mind is clear; the emotions even, though affected, are not changed; he loves as he did; he does not lose all hope; he does not covet death. You say to the patient, Are you suffering bodily pain? No! Is there any cause for mental distress? No? What is it then? Oh! I can't say, I feel in low spirits? I *feel* uncomfortable! Everything seems different from what it did! I see everything through a medium of distress! We say the system is out of order; he is whimsical; he is hypochondriacal; he is bilious; he is nervous; or some other phrase which means everything, and defines nothing. Now the avenue by which this state of conscious comfort or distress (which is recognized as neither of physical nor moral origin by the patient), requires a name, and when this name has been approved of, we must give it its due place in the catalogue of the senses. And as I find that the condition of this sense is essentially dependent on the state of the functions of the great organs of the body, the stomach and liver especially; though the skin, blood, kidneys, lungs, heart, and brain itself, have a great share in producing it; I propose to name it the functional sense.

I would place this sense in the mental history, between that which we usually understand by the terms common sensation and mental emotion, for it is more inti-

mately connected with the mind than the senses of the general external surfaces, and its phenomena becomes so confused with the phenomena of mind itself, that it is very often very difficult to discern between this functional sense and the emotion it produces. For example, even when the mind is fully awake we may often perceive a feeling of unhappiness creep over us; we are conscious that we are unhappy. Then, perhaps, comes a pang in the stomach, a relief from flatulence, and we are at ease again. This may seem a ridiculous mode of expressing one's self, but it is graphic and strictly true. This is shewn much more markedly when the mind is not exercising its full powers; when vitality is low, and perception imperfect; in other words, when we are dreaming this functional distress is generally converted into unhappiness. It is well-known how a little dyspepsia becomes the tragedy of a dream. Pinel says that all insanity arises from chilopoietic disturbance, and the more we consider the symptoms and progress of this disease, the truth and force of this observation becomes the more apparent. But disease beginning in the lungs will suffice to produce distress in the functional sense; non-aerated blood will do what non-depurated blood will do. If the respiratory organs are kept in confined and stifling air, the emotions and gradually the ideas become distressing, ailing, and on the road towards disease; if pure fresh air is substituted, they instantly revive.

It might be said, that the sense of the state of our inner man is a well recognised one, it is a part of common sensation. It may be said, these dim and uncertain phenomena, which are called comfort and discomfort, if they were produced and intensified will become pleasure and pain! What need is there of a new name? Now I well know that the very instance which I have given, viz., that of the influence of flatus is a good example of what I put into my adversary's mouth. A little flatus will produce a dim sense of distress and consequent unhappiness; and (the cause not known) the term bad spirits is applied to the sensational distress. Increase this flatulence and a local pain arises quite definite and certain, and we hear no more of the spirits, but of the body being in pain. But though we may be able to trace the connection between these two states, I think that to all appearance they are so different to the subject of them, that they require a different naming. The subject of the one says, I suffer no pain, only depression; the healthful man again says, that he is not conscious of pleasurable

sensation when the functions are acting rightly ; he only feels freedom, elasticity, perhaps he may say comfort. The relative proportion of work given to the sympathetic and cerebro-spinal systems in the two cases of a nervous depression and pain may be very different : (this I would leave to a better physiologist to determine) but even if it could be proved that the nervous channel of perception was the same in both cases, it would not render the less necessary a due and distinct recognition of this "functional sense." Muscular sense is not, I presume, to be accurately distinguished from common sensation, and yet Sir Charles Bell did good service in distinguishing this peculiar sense by which we appreciate weight and resistance. Indeed (if we take a comprehensive view) all the senses may be called but modifications of touch ; in seeing, certainly we are conscious of contact with the reflection of the object, and not the object itself ; and in hearing, the air is interposed between the object causing the shock and the auditory nerve, but all are in one way or other but a part of one system which receives impressions, afterwards to be conveyed to the sensorium.

My great object in naming this sense, is that it might assist in enabling a sufferer to distinguish what it is he is suffering from. For when he suffers distinct pain he can say, this is a state of things which my mind *can* view objectively ;—there is the pain, here is my mind ; I will not allow the one to be subjective to the other, I will master mere pain and rise above it. But when men feel the indescribable distress consequent on functional disarrangement ; in whatever degree it may come, whether as ache, discomfort, a sense of lassitude, a sense of ennui, or a sense only of utterly indescribable trouble, (and these are varying steps from pain to unhappiness, from the physical to the mental), it would require a well informed and powerful mind to rise above the present suffering, to hold it at arms length, and say, I know you to be only a distress of my poor suffering body, you shall not touch my mind ; and I believe it would assist such a mind in such a struggle to have this sense duly recognised and distinguished. The dim indescribable mode of operation of this sense is so mysterious, so not to be touched or localized, and yet so overwhelming that it instantly is identical with the semblance of the invisible or metaphysical world, and becomes confused with the mental. By all means let us do what we can to throw a strong light on the scene where dim sensations and the emotions

they occasion meet ; let us perceive as accurately as we can, the boundaries of the two ; those who witness the mysterious distress in incipient insanity will well know the necessity for this.

I have endeavoured to make a table of nervous acts, or rather I may term them, with the exception of the first head, *nervo-mental acts* ; and to locate this functional sense between ordinary common sensation and emotion. I will give it here, as it may elucidate my view of the history of this sense. And I hope it will always be borne in mind by those who may criticise me as too much inclined to define and localize, that I am urged to it by the constant contemplation of distress, which without such outlines, become mysterious and difficult of solution.

I.

*Varieties of Nervous Changes or Acts**Where exemplified*

Nervous changes, essentially physical and with which mind has little or no concern	In the organic or vegetable life of man
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II.

Nervous changes which the mind can appreciate and influence, but usually does not	In the involuntary muscular system
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III.

Nervous changes which the mind generally appreciates and influences, but which are clearly external to the mind of the person suffering them, and objective	In special senses. The muscular sense and ordinary common sensation
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IV.

Nervous changes which the mind so appreciates and influences that they are with difficulty discerned from changes of purely mental origin	The functional sense
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V.

Nervous changes consequent upon mental changes, and thus purely of mental origin	The sense of the emotions, the ideas, and the intelligential acts, &c.
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The functional sense will from this table be clearly seen to be but a subtle physical state, often mistaken for a state of mental origin.

As a good example of the intimate union between distress of the functional sense and distressing emotion, let me mention the following. A young gentleman said to me some time ago, "I have never known what it was to feel happy, *i.e.* in spirits !" His circumstances were all happy ; his mind had

the best of all supports, in that he peculiarly realized the aid of religion. It was evident to me that what he meant was that he had never felt comfortable, *i. e.* a pleasant condition of functional life. His system had always been far from vigorous. As health improved, his spirits rose. But it seems almost useless to mention what occurs so frequently. I mention it because the state of his mind which was doubting though faithful, anxious though hopeful, suspicious though loving, struck me as a very interesting struggle between what I have termed the inherent and the acquired nature; as well as a striking case of mistaking what was of physical origin for something wholly mental. Many cases of nervousness, or diseased nervous sense (nervous sense being a part of functional sense), would receive much elucidation if this functional sense were duly distinguished and localized. Nervousness is often only an instinctive consciousness of inability in the system to carry out certain acts, which require voluntary nervous and muscular action as their channel of expression. The person suffering from it, feels that his purely mental powers are equal to the thing in hand; he is not conscious of any palpably physical cause to prevent his doing anything he wishes, and yet he knows he cannot act freely. The thoughtful mind is not content with saying I am nervous, it wishes to analyse this feeling and find out what it is. I will take the case of the nervous stammerer as one of the best examples I know of what nervousness will do. This man wishes to express his thoughts; his words are ready, as far as mind can make them so. But mind is unlike a physical force (which manifests itself as soon as it is generated), in that it requires the due agency of another force to express itself, that is, nervous and muscular force; and these, in the case of the stammerer, are not obedient to the mental force. The anatomist would tell you that the form of the organs of speech is perfect; that the muscular system is probably healthy; but the physiologist finds out that the evil is in the nervous system, which is unable at all times through local infirmity to guide the muscles in exact accordance with the will. Anxiety increases this inability for the physical forces (probably at all times hardly equal to the mental commands), are now as it were, over-whelmed by *morbid excess* of mental force; in other words, an excessive desire to speak. This is the mode by which spasmodic speech comes on. But this is not the point I am aiming at; the point is, that the stammerer feels he can speak well and clearly at one

time, and he does speak well and clearly; at another he feels he cannot, and he cannot. This *feeling* is the guide to his real power, and my question is, what is this feeling? whence does it arise? We may call it an instinctive feeling, but this is not explanatory; it really is an impression on the nervous system of its own state, appreciated by the mind, and by which a knowledge of the state of our inner man is gained. This impression of the organic state and this appreciation by the mind I would stereotype by a name and call it "functional sense." It is vain to say it is purely mental, because what I am speaking of includes the impression which informs the mind. The impression of power comes first, the full mental appreciation of that, is second; you might as well call tinnitus aurium mental. It is true that in some cases a mental act may be the source of this impression of power, as where some more than usually ennobling emotion has excited the system, and given it unwonted energy: as for example, the stammerer may be stimulated by an unwonted sense of indignation at seeing cruelty exercised towards another, and in the excitement so occasioned he may dash past all the ordinary checks and find thus a power which surprises him; but this is not what I am speaking of, for this alludes to an exciting cause not to the thing itself; what I am speaking of is, that a man rises one morning as calmly as he does on another, and with no external exciting cause, he is conscious of a greater power to express himself: it is purely physical, he feels a glow, he feels a power; it is the feeling of his inner man, the state of his functional being, which really occasions it all. But then this change so instantly affects his emotions, that except he analyses his feelings carefully, which under such circumstances he is very little likely to do, he only comes to the conclusion that he is in good spirits. I have had it said to me by one whose authority in physiology I submit to, that the sense of power, or the loss of it, is really very much a sense of the state of one's blood, and I sympathize with such an observation; but as the formation, assimilation, and maintenance of the condition of the blood, is only one of the many functions of the body; and as we can continually trace this sense to the functions of special organs, the term functional sense as being comprehensive, commends itself the more to my mind. Hunger and thirst would form a part of the functional sense, though of a somewhat grosser nature; and the consideration of the indescribable and undefinable nature of these sensations may put us on the track of much

of that functional sense, which is still more undefinable and mysterious, and therefore, more confused with the immaterial and mental.

But before I conclude, I would once more draw attention to my special reason for feeling the necessity of recognising this sense more accurately than has hitherto been the case. It is that in those cases of insanity which go through slow and progressive steps, where the mind is gradually passing from the elasticity of health into the first stage of insanity, (which I term *Dysmentia*) we very frequently observe distress in this functional sense as the first thing which fixes our attention. The patient begins to feel an aching or restlessness, he is inclined to wander about, and cannot sit still, he begins to wake early in the morning and lies awake, he says all his thoughts are distressing at this time; this aching is convertible into unhappiness and dread, (especially when vital power) is low, and thus between sleeping and waking, a horror comes over him. He dresses himself, cold water refreshes him, he comes down a new man; a little work destroys his elasticity, restlessness comes on again, irresolution, and yet a wonderful and paradoxical resistance of the will of others. The most determinate answer you can get in the matter of physical suffering is, I feel restless and aching. Soon the pleasant storehouse of his mind is broken in upon by the strong hand of disease; it has disarranged all that order which the master so much valued; all is confusion, a sense of unutterable exposure and helplessness comes over the mind. But I am entering on what belongs to another picture, viz.; the consideration of the mind in disease.

In my next lecture I propose to treat, first of *Exmentia* and *Dysmentia* as manifested by intolerable temper, evidently resulting from disease; great distress tending to suicide; cases of violence and excitement, leading to extravagant conduct, but all without any particular delusion being developed; strong and indescribable propensities to what is wrong; hysterical extravagances, &c., &c.; in short, cases of unsoundness of mind where the intellect appears to be intact, and the emotions only perverted. Those who have had the care of a large number of lunatics must know of many such cases,—let me only add that what a man says is by no means the only indication of the state of the mind; the conduct, the aspect, are in truth more subtle tests; indeed, it is right not to rest satisfied by any protestations of words till the looks have evinced sanity;

words can be assumed, looks are not so easily assumed, or at least maintained; words, conduct, and expressions of countenances, are various modes by which mind expresses itself; but the looks are more close to the mind than the words. A mad look, therefore, (though almost undescribable to the uninitiated) is never to be overlooked or passed by. Now the conduct and the physiognomy are remarkably indicative of the incipient forms of insanity.

(To be continued.)