

## **On hypochondriasis, and other forms of nervous disease / by H. Hunt.**

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10

# ON HYPOCHONDRIASIS,

AND OTHER FORMS OF NERVOUS DISEASE.

BY H. HUNT, M.D.

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## INTRODUCTION.

It is my design, in the following observations, to treat of the causes of hypochondriasis, and of other nervous diseases, and to endeavour to show that, although the stomach, liver, and other organs may be concerned in the production of them, they are so but remotely, and that the direct *exciting* cause is a morbid condition of the blood. The exact chemical nature of the noxious principle from which that morbid condition proceeds, I do not pretend to explain.

As my subject is very obscure and difficult, I have found it necessary to describe very minutely the nature and symptoms of the malady,—the physiology of the various organs of animal life,—the causes that impede and modify their action,—their *modus operandi*, etc., so minutely, indeed, as to incur the risk of being charged with bringing forward, and dwelling too much on, what is generally known, and, perhaps, better understood by others than myself; but I could not explain my meaning and object in a sufficiently clear manner without this arrangement; I have endeavoured, however, to be as concise as possible.

I wish to express my obligation to the Works of the late Drs. A. Combe, Prout, Prichard, and others, for the assistance they have afforded me in elucidating my subject, and in proving the correctness of the theory which I have ventured to propound, *i.e.*, that hypochondriasis is caused by the *direct* influence on the brain and nervous system of some noxious matter in the blood.

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Few diseases are the source of so much bodily suffering and so much mental distress as those in which the nervous system is especially implicated. Few diseases occasion more perplexity to the medical adviser, or require greater tact, firmness, and discretion in their management.

Among the causes which contribute to this difficulty, we may enumerate the following:—The infinite variety of the symptoms, which often have relation to other forms of dis-



ease; the fact, that the effects of the disease are commonly felt at a distance from its true seat; the absence of pain and uneasy sensations in the part or organ diseased; the rapid and frequent changes in the locality and character of the symptoms, and many other circumstances unnecessary to be specified here, but which will be considered in the course of this inquiry.

Perplexing and confusing as these various phenomena appear, at first sight, to be, yet a careful investigation of them will not fail to dispel much of the obscurity which envelopes them, and to show that they possess some characters in common,—characters which will tend to throw light on their nature, and lead to the discovery of their origin.

Every form of nervous disease is generally distinguished by some prominent feature, more or less constant and peculiar to itself: for instance, neuralgia, by pain of a specific kind; by the transition of the pain from one locality to another; and, as I have before observed, by the freedom of the painful part from disease, and by the absence of suffering in the part or organ diseased, and in which the pain, in fact, originates.

The peculiar characteristics of hypochondriasis are, a desponding habit of mind, lowness of spirits, and an excessive anxiety and alarm on the subject of every bodily ailment, however trifling. But as these are, with some modifications, characteristic of a species of insanity, melancholia, it is necessary to state at the outset that I look upon and propose to treat hypochondriasis as a malady entirely separate and distinct from insanity. The following appear to be the main differences between these two diseases; viz., whilst melancholia is principally, if not purely, an affection of the mind, the morbid feelings of the hypochondriac arise from bodily disorder; they, therefore, have a real existence, and his fears lead him to apprehend the cause of the feelings to be of a more serious character than is actually the case. These disordered sensations are the constant object of his attention and anxious solicitude; he attributes the most trifling derangements of health, the slightest unpleasant feelings to some important disease, which, if not arrested, (and of this he entertains but little hope,) will terminate in some fearful and fatal manner. At the same time he is apprehensive that he will be considered fanciful, and that his ailments will be thought imaginary, because his health is apparently good.

The catalogue of his miseries is endless; if encouraged by sympathy, he will describe as minutely as he observes them, every trifling change in his bodily feelings. He fears that each and all of them are pregnant with future, if not present danger. He is most anxious for relief; and, what is peculiar to the hypochondriac, he eagerly welcomes every new remedy, whether it be at the suggestion of the regular physician, or of the empiric, or the equally dangerous recommendations of the non-medical friend; whilst he listens



to and adopts the advice of all in succession, he perseveres with none. This peculiarity in hypochondriacs is as striking as the opposite one in hysterical subjects; the confidence the latter place in their medical adviser and his remedies is steadfast and unbounded, whilst the former are a prey to doubt and distrust.

The hypochondriac continues in possession of his reason; the sufferings he describes, although exaggerated, are really experienced. He thinks and converses on all other subjects but those connected with the state of his bodily health, rationally and with cheerfulness. The melancholic, on the contrary, views all things through a medium of gloom and despondency.

Lastly, "the feelings and affections of the hypochondriac are not in that perverted and unnatural state which is one of the characteristics of madness in all its forms." (a)

The hypochondriac, although dejected, is ever anxious for relief, and regards with interest the means of attaining it; whilst the melancholic sinks into apathy and indolence, and is with difficulty roused to make the least exertion to obtain that or any other object; his future is wrapt in cheerless, hopeless gloom.

Such are the important distinctions between the mental condition of the hypochondriac and the melancholic.

There is usually one very striking feature in this disease, viz., the manifest difference between the physical symptoms of the sufferer and the exaggerated importance which his alarm imparts to them; they bear no relation to each other in amount. From the absence of prominent physical symptoms there may often be some difficulty in discovering the nature of the bodily malady; yet a careful examination will seldom fail in ultimately detecting it. The first interview is frequently embarrassing to the patient; he is generally nervously anxious to describe his feelings, and to convince his medical adviser that he is really ill, and that it is not a fanciful malady; but he fears he will not be believed. He endeavours to explain his morbid sensations and general illness; but after various attempts he usually fails, and concludes by saying that "he is really ill, but cannot tell what ails him, or how to describe it." However, a practised eye will generally detect unequivocal evidence of physical disease even in the countenance and aspect of the patient.

In the first place, the hypochondriac has an unhealthy aspect; there is a dull, leaden hue, not the sallow or yellow colour resulting from obstructed bile alone, or that peculiar appearance which denotes organic or malignant disease; there is a want of clearness in the complexion which is visible in the skin, but more especially so in the conjunctiva. The skin of the whole face has a peculiar dingy, almost dirty appearance; sometimes this is only seen in patches on the



forehead, round the eyes or lips, on the cheek near the ear, with clear skin in the intervals. In general there is not much emaciation; the muscular development does not indicate weakness, although one of the great sources of complaint is loss of strength; it is a lack of energy or diminished nervous rather than muscular power. The tongue is usually coated, but not universally so, excepting at the back part; the pulse is commonly slow and languid, as if the heart propelled the blood forward with feebleness, and it often beats irregularly. The appetite is usually impaired, and if much food is eaten, symptoms of oppression and indigestion soon follow the meal. The eyes are dull and without lustre, and large tortuous vessels are often seen scattered over the conjunctiva, betraying a sluggish and impeded circulation. Uneasy, rather painful sensations are felt in the head; also a feeling of dulness and stupidity, a want of quickness of perception and clearness in thinking, which unfit the hypochondriac for mental, as the want of energy incapacitates him for bodily exertion. Generally, pains and indescribable sensations are complained of in the stomach and abdomen, sometimes of an extraordinary or even ludicrous description.<sup>(a)</sup> Also faintness and a sensation of sinking, as of dying. Various wandering pains of a neuralgic character are felt in the limbs and along the course of the principal nerves. Each day brings its peculiar miseries, which are generally most severe early in the morning; later in the day they usually diminish, indeed, occasionally during the excitement of the evening, so entirely cease as to induce a hope, if not a belief, in the mind of the patient that his malady has entirely left him,—an impression which is cruelly dissipated by a return of its symptoms in the morning in all their wonted severity. Sleeplessness is often a distressing accompaniment to hypochondriasis; the sufferer lies tossing about all night, or until towards morning, when he may, perhaps, fall off into a disturbed and unrefreshing slumber to awake in misery. This sleeplessness is so much dreaded, that bed is shunned; but the later the hour the patient retires, the more restless and wretched is he while in it, and the langour and weariness of the succeeding day is proportionately increased. Yet, with all this complication of wretched feelings, how often do we hear their source ascribed to a mere delusion of the mind or fancy of the patient; and find those, perhaps, nearest and dearest to him asserting that he might conquer them by exertion or energy, if he could only be persuaded to make the attempt, as if such torments would be courted or endured in order to excite sympathy and interest, or for any more unworthy purposes. Little can the strong, hale man understand the amount of misery resulting from shattered nerves and oppressed vital

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(a) One gentleman, after endeavouring in vain to depict his feelings, described the sensation in the stomach as a "smoky pain."



action, which can induce the unhappy sufferer to prefer the pains of tic (a) or the tortures of stone (b) as a relief from this worse agony of the mind.

To return, however, to the symptoms of the physical part of the malady. If the secretions be examined, clear indications of a disordered action will generally be traced; the skin will be found harsh and dry, or, if any perspiration be secreted, it is only partial, and of unhealthy and unnatural quality. The bowels are commonly irregular in the performance of their functions; more inclined to constipation than the opposite state, but sometimes confined or relaxed alternately. The evacuations are generally unnatural, either denoting an entire absence, or a vitiated state of bile; and the fæces are occasionally covered by a large quantity of mucus. At other times, though the evacuations may have been unhealthy, they have again become natural, showing a return of the action of the liver and other secreting organs sufficient to prevent an increase of the malady, but not to free the system from the previous accumulation of morbid matter, which, under the influence of the various causes to be considered hereafter, had been retained in the system. The urine is perhaps the secretion which most frequently indicates the first deviation from health. On examination, it will seldom be found in a natural state; and there is one peculiarity attending it in this as in other forms of so-called nervous disease, namely, the frequent and sudden alternations in its appearance and quality. The urine which is passed first in the morning may be of a high specific gravity, deep-coloured, acid, and loaded with lateritious sediment. A "fit of horrors," or of nervous excitement coming on, the urine next passed will be pale, limpid, of a low specific gravity, and neutral; again, the next portion secreted may be high-coloured, or perhaps of a natural quality; but with all these changes, there is generally some predominant quality, showing the special diathesis of the system in each case, which should always arrest the attention of the medical adviser, as the knowledge it affords is often of value in determining, or rather modifying, the treatment.

Such is the physical condition of the hypochondriac in the early stages of the malady, under its most SIMPLE form, *i. e.*, before it becomes complicated with local or organic disease; a condition which manifestly indicates its *general* nature, and points to a diseased state of the *WHOLE* system, and more especially of the *circulatory fluids*; an opinion which will derive further confirmation from a consideration

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(a) A gentleman consulted me last spring, who was suffering intensely from neuralgic pain in his cheek and lip, also from hypochondriasis. He entreated me, if I could only cure one disorder, to relieve the latter, as the pains of the former were far more easily borne than the wretchedness of his mental malady.

(b) A case of a gentleman is on record, who gladly welcomed the tortures of stone, as they invariably relieved the hypochondriasis with which it alternated.



of the causes that produce it, of the various phenomena which arise during its course, and of the effect of remedies upon it.

Before I describe the various local disorders that are incidental to hypochondriasis, I propose to consider the causes of the disease, as they will go far towards determining whether the opinion of its general nature be correct or not. A clear understanding once established on this point, the treatment of the malady will be materially simplified.

### CAUSES.

An inquiry into the habits and circumstances of life of the hypochondriac, previously to the accession of the disease, will often remove much of the obscurity in which the nature and causes of it are enveloped. A correct previous history will generally show that the patient has been subjected to the morbid influence of a combination of circumstances adverse to health,—circumstances which will always tend to the disturbance of some of those various vital processes, on the due performance of which the preservation of the health, as well of the mind as of the body, depends. They arise from two separate and distinct sources: one of a moral nature, the other physical. The moral causes act injuriously on the body through the agency of the mind; the physical agents operate more directly as impediments to the natural performance of the *functions* of the *various viscera* by the action of which HEALTHY BLOOD is prepared for the renovation of the animal machine, and the EFFETE MATTERS are *removed* from the system. The primary result of the operation of both is the *disordered condition* of the *body* already described; the second, consequent on this *derangement* of the *body*, is the affection of the mind, the disease under consideration,—hypochondriasis. The moral causes of hypochondriasis include all emotions of the mind of a painful nature, such as long-continued anxiety, care, grief, disappointments, from whatever source arising; intense and unremitting application of the mental powers, especially when directed to one object, and at the sacrifice of the necessary exercise of the body, and sufficient sleep.

Experience proves, that vehement mental emotions are capable of interrupting the vital actions of the body so completely as to destroy life instantaneously; it may, therefore, be reasonably inferred that disturbance of the mind of a less powerful nature may be able to impede proportionably the due performance of those vital processes; and since such processes cannot be interrupted without producing an injurious effect on the system, it follows, as a necessary sequence, that disorder will be the result; that long-continued influence of such disorder will produce a corresponding amount of illness: and that it will be of slow or quick growth, according to the circumstances affecting each case, and the peculiar physical organization of each individual.



A question of much interest arises as to the *modus operandi* of these causes on the body, in producing the effect of deranging the vital processes and inducing disease: a question well worthy of consideration, as a correct reply will afford great insight into the nature of the consequent disorders, and possibly indicate the surest means of prevention and cure.

There can be no doubt, that the mind exercises a direct influence over all the bodily functions; that a certain amount of nervous stimulus is necessary for their due performance; that changes in the quality and amount of this stimulus are capable of modifying them; therefore, whatever causes a diminution, alteration, or suspension of this nervous influence must necessarily diminish, derange, or arrest these important actions, and disorder the whole body. We all know, that pleasing excitement occasions a corresponding activity in every organ, and consequently facilitates the performance of their several duties; and, on the contrary, that a state of nervous depression impairs their tone and impedes their action.

Experience also proves, that sudden and intensely painful mental emotion will temporarily, and to a certain extent, paralyse the brain and nerves, and, as I have before observed, will sometimes destroy persons of feeble powers of life. But though the effect will not be so great on the more robust individual, it will prevent the generation of the requisite supply of nervous stimulus; consequently, every part of the body will participate in this semi-palsied condition, so that all its functions will be imperfectly performed or partially suspended.

Thus, from this want of nervous energy, the heart failing to propel the blood with sufficient force, the circulation through the brain becomes languid, perhaps almost entirely arrested; hence the sudden giddiness, weakness, and faintness, and the other well-known symptoms of suspended nervous action. I have adduced this example, as these effects of suspended nervous action are visible externally; but similar and equally pernicious results, though internal and invisible, are produced on the other important organs of animal life; the stomach, liver, pancreas, the immense extent of secreting surface of mucous membrane and skin suffering alike from the absence of nervous stimulus, cease to perform their duties perfectly, and thus contribute to the general disorder.

An inquiry as to the action of the other causes of hypochondriasis, such as intense mental exertion, immoderate exercise producing exhaustion, indolent and luxurious habits of life, protracted lactation, &c., will show that, although they act in a different manner on the animal economy, the effect produced is the same.

I have already stated, that a certain amount of nervous stimulus is requisite to insure a healthy and natural per-



formance of all the vital functions. I must now add, that in health an additional supply of it is always directed to an organ under active exertion; as the amount generated is limited, it follows that, if an excess be given to one organ, the other parts of the body must be deprived of their usual proportion. This loss of the nervous energy, however, is not felt whilst they remain in a state of inaction or quiescence, for it is not then required; but, supposing, whilst the nervous stimulus is concentrated on one—the brain for example—that a necessity for action were to arise in another set of organs, their functions must be necessarily imperfectly performed from the want of it. This is not only true, but of frequent occurrence, especially in the case of the digestive organs, and is a fertile source of dyspepsia. Hence, the frequency of indigestion in studious and literary men. The injury resulting from it is further increased by the circumstance, that as the system is exhausted by the excessive exercise of the brain, an attempt is generally made to replenish it by an increased quantity of food and stimulating drinks, in ignorance or forgetfulness of the fact, that the body is not nourished by what is eaten, but by what is digested. Thus, whilst an undue amount of labour is apportioned to the digestive organs, they are deprived of part of their power of performing it. Indigestion and all those other consequences, which it is my purpose to explain, must be the result.

Among the many other causes which tend to diminish the due supply of the nervous stimulus necessary to health, we may place the following. The sudden transition from habits of mental and bodily activity to those of ease and indolence, which we sometimes find to be the case in those who have realised a fortune in trade or by professions. The mortality observable in soldiers on returning from an active campaign to a life of indolence, apathy, and indulgence, is another example of the danger of a sudden alteration in the habits of life, especially from activity and privation, to indolence and plenty. The listlessness, lack of energy, and absence of interest in any pursuit, which we may frequently observe in persons of affluent or easy circumstances. The influence which low, damp, relaxing, or malarious climates, exercise on those residing in them. Indulgence in a luxurious, indolent, or vicious mode of life. Again, on the other hand, habits of solitary bodily labour, without mental excitement, as in the case of the prisoner, and, according to Dr. Prichard, of the agricultural labourer; or of sedentary employment, as that of the artizan; long-continued labour in impure atmospheres, as in close, ill-ventilated manufactories; a poor, innutritious diet; an excessive use of warm diluents; in short, all the innumerable combinations of circumstances—the luxuries of the wealthy, or the necessities of the poor—act alike in this respect; they tend to depress the nervous system, and check the generation of



the nervous stimulus, on the due amount of which, as I have attempted to show, the perfect action of every part depends. As this want of nervous stimulus impairs healthy digestion and assimilation of new materials, it also prevents the excretion or removal of excrementitious matters from the system,—a function almost equally, if not more important than the others, for the interruption of it is more quickly felt than the suspension of nutrition. As it is to the interruption of this function that I principally attribute the production of hypochondriasis, I propose to consider it at some length. I shall also endeavour to show, that the blood is the part first affected by it, thus forming the connecting link between the primary disorder of the secreting organs on the one hand, and the secondary, whether local or general, physical or mental, on the other. No fact in medicine, has been more fully established, than that the retention in the system of matter, which ought to be removed from it, is a certain cause of disease, in some cases even of speedy death. For example, the complete cessation of the action of the kidneys, as in suppression of urine, is quickly and invariably followed by drowsiness, coma, and death. Also, the imperfect action of them through an alteration in their structure, causing only a partial retention of urea, and other deleterious principles, explains a variety of disordered action before inexplicable, and is an evidence of the same fact, which it is impossible to controvert.

The following evidence, relating to the effect of disease and disordered function of the kidney on the urine and blood, appears to be quite conclusive on this point. Quoting Dr. Christison, Dr. Prout writes, at p. 142 of the third Edition of his work on Stomach and Urinary Diseases, that, “In the earlier stages of the disease (Bright’s disease of the kidney), the absolute weight of the other solid ingredients in the urine (on the separation of the albuminous matters) passed in twenty-four hours is very deficient. In the latter stages the deficiency is still more remarkable, so that the solid ingredients voided in a given time sinks to a fifth, even to a twelfth of the healthy average; of them, the lithates are most strikingly deficient, and next to them, urea and saline matters.”

Here, then, we have positive evidence of the absence of various matters from the urine. The following is almost equally conclusive testimony, that, when absent from the urine, they exist in the blood; for Dr. Prout further observes, on the same authority, “that urea is found in the blood at an advanced period of the disease in greater or less proportion, and sometimes in remarkable quantity.”

As another proof of the deterioration of the blood through a failure of the normal action of the kidneys, I may again cite Dr. Prout, who remarks at p. 161 of the same work, that, “in the progress of the disease, the relative proportions of the different ingredients in the blood seem to un-



dergo some changes. In the first place, as the proportions of albuminous and saline matters *diminish in the urine*, they apparently *increase in the blood*." It may, perhaps, be justly remarked, that the result of these researches only applies to the secerning apparatus of the kidney, when damaged by organic disease. If, however, we may assume, that the description given by the same author of the functions of the kidney be correct, we shall see that a temporary suspension or interruption of them will produce similar effects as does organic disease on the urine, and consequently on the blood.

The functions of the kidneys are various: they eliminate from the blood the superfluous matters which may have been introduced into it, as well as those which are the product of the destructive assimilation. They have also another and a very important function, named by him "the disorganizing," by which they are enabled to disorganise various matters existing in the blood, and to recombine them into new substances, and thus prepare them for removal, as the albuminous into the lithate of ammonia. He also states, that this last function can be temporarily interrupted by various causes, "by an inflammatory condition of these organs, an attack of fever, by a state of pregnancy, by certain drugs; lastly, by violent mental emotions, under the operation of all which the urine has been proved to be albuminous."

If, then, one function of an organ can be thus temporarily suspended by extraneous causes, I think we may fairly assume, that other functions of the same organ may possibly be interrupted through the influence of the same or other causes. And though the presumption that the other secreting organs obey, under similar circumstances, the same laws, rests only on analogy, it is neither contradicted by reason nor facts.

All the arguments I have used in reference to the effect of organic disease and diminished nervous energy, and other exciting causes of disorder on the kidney, apply with equal force to the liver, mucous membrane, and skin; for they are all under the same nervous influence, and perform very similar functions.

To substantiate this analogy between the functions of these secreting organs and the kidney, I will consider, in the first place, the liver in health, disorder, and disease.

The importance which attaches to the perfect performance of the general duties of this viscus, is proved by the size of it, and its special,—*i. e.*, its separating function,—by the peculiar arrangement of the portal system. The blood upon which it has to operate has been much deteriorated in quality by having been deprived of many of its materials, and, according to Dr. Prout, of a "portion of its vitality," in the fulfilment of its duty; and has received in return much effete and excrementitious matter resulting from the destruc-



tive assimilation, and also many impurities absorbed from the intestinal canal; altogether causing it to be more contaminated than any other portion of the blood supplied to an organ of secretion. The liver, like the kidney, is an excreting as well as a secreting organ.

It possesses, also, the faculty of separating effete and excrementitious matters from the blood, and of re-combining them into new forms, as from some of its materials the kidney produces urine, from others the liver forms bile.

Although we have not the same conclusive chemical proof of the presence of the elementary constituents of bile in the blood, when the action of the liver is suspended, as we have in the case of the torpid or diseased kidney, yet there can be no doubt that they must be retained in it. This is shown by the consideration of the effect on the liver of some of the causes which have the power of arresting the functions of the kidney. A gentleman, while in good health, received sudden intelligence that a considerable amount of his property had been destroyed by fire; the shock on the system produced a sensation of faintness and debility, which was followed by general *malaise*, throbbing head-ache, nausea, loss of appetite, occasional cold sweats, and sleeplessness. A diarrhœa soon followed, with an increase of the general disorder. On examination, the alvine discharges resembled white clay mingled with water, showing an entire absence of the colouring matter of bile; and, as they were not secreted, we may presume that the other constituents of it were, if not altogether absent, at least deficient. His countenance presented the peculiar dark and dingy aspect, and other indications I have described as diagnostic of impurity of that fluid, showing that they were retained in it. I may add, that this gentleman subsequently fell into a state of hypochondriasis, and was not relieved until the liver and other secreting organs had been stimulated to increased action, when they removed from the system the impurities which depressed it.

Although in organic disease of the liver a sufficient portion of it may remain perfect to secrete enough bile to prevent any alteration in the appearance of the alvine discharges, yet the aspect of the patient will clearly attest the presence of noxious matters in the blood, showing that the damaged apparatus of secretion is not able to eliminate the whole of them from it.

Again: if we take into consideration the effect of the same causes on the mucous membrane and skin, we shall find further evidence of the correctness of this analogy. Every medical man must have experienced in his own person the discomfort of heated skin, suppressed perspiration, and other symptoms of what is called febrile excitement arising from over-exertion, loss of rest, especially if anxiety about the welfare of his patient is superadded to his exhaustion.



With all these morbid phenomena before us, all resulting either from mental emotion or physical causes, which primarily act upon the nervous system, and secondarily on the organs of secretion, we can scarcely refrain from drawing the following conclusions:—

1. That the effect of these causes falling on the brain and nerves is a torpor of them.

2. That the functions of the various viscera are consequently temporarily interrupted or suspended.

3. That the effete, excrementitious and other matter, which the welfare of the system requires to be removed, are not eliminated from the blood.

4. That the presence of these matters contaminates that fluid, deteriorates its quality, and renders it not only unfitted for its ulterior purposes, in the animal economy, but also a fruitful source of disease.

I must, however, here remark, that, in the preceding observations, I allude exclusively to the retention in the system or the constituents of the various secretions in an uncombined state; of the materials from which the secretions are formed, and not of the secretions themselves; a distinction of some importance, both as regards the different effects, *i.e.*, the different morbid actions or diseases they produce, and as affording an explanation of many morbid phenomena arising from the circulation of them, otherwise not very intelligible. At the same time, I by no means wish to be understood as under-rating the prejudicial effect on the animal economy of a retention of the perfectly formed secretions; they undoubtedly excite many very serious derangements of health, but of a different nature from those caused by the presence of their uncombined elements.

The next question is of great importance. Does the circulation of these noxious matters in the blood produce hypochondriasis?

A concise summary of the effects, as they arise from the causes I have enumerated, will, perhaps, facilitate the answer; I will therefore give it.

The first perceptible effect of care, anxiety, or over-exertion, &c., on the human system, is a torpor of the nervous system, loss of appetite, and sleeplessness. A dry, parched state of the tongue and fauces next succeeds, and a sensation of heat and dryness in the stomach,—not the burning sensation from the presence of acid or acrid matters, but as if the lining membrane of that organ had been scorched and dried. This state is accompanied by a feeling of weakness and sinking at the præcordia, which seeks relief from stimulants, and by thirst, which calls for cooling drinks, but with a loathing of food. (a)

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(a) The relief that is afforded by stimulants, such as cold brandy and water, or brandy with the effervescing waters, frequently causes an indulgence in those pernicious drinks, in no case more decidedly pernicious than in this. The comfort and relief from them are very transient, and, in pro-



The state of the stomach I have described seldom exists many days without a corresponding sensation in the head; not pain or headache, but a feeling of general discomfort and internal heat apparently in the substance of the brain itself, which dulls its faculties and impairs its energies. All the vital processes in succession appear to be arrested; the skin becomes dry and parched, the tongue and fauces have been so from the commencement, indicating a similar condition of the mucous lining of the digestive canal, which, together with the liver, cease to perform their functions; bile is not formed, the other secretions are withheld, the bowels cease to act, they become costive. The kidneys alone are active, but they only separate the more watery parts from the blood; the urine secreted at first being generally pale, plentiful, and neutral, and of a low specific gravity, in property little else than water. The countenance soon betokens the disorder of the system, the lines of anxiety and care in the face betray the inward struggles of the feelings; the dark areola around the orbits, the dull, dark, unhealthy appearance of the skin attest the retention of morbid matters in the blood. The pains and aching of the joints and nerves foretell the coming illness; the *anxietas præcordiorum*, the peculiar sensation of anxiety felt in that region, foreshadows the distressing nature of the approaching mental malady; the lurking elements of disease, the innate predisposition to disorder, are no longer kept under control by the vigour of health; they either start up as it were into life spontaneously, or only require some exposure to cold, some act of imprudence, some common exciting cause, to set them in action, and general disease is the consequence.

Thus there appear to be several distinct grades from health to disease, which are in perfect accordance with the four preceding deductions; and to them I may now add a fifth, viz., that the effect of the circulation of these morbid matters on the brain and nerves, and through them on the mind, is the anxiety and depression of spirits constituting the disease under consideration—hypochondriasis. It also affords a ready explanation of the various morbid phenomena observable in that disease, viz., the apparent debility and general want of energy, the feebleness and irregularity in the action of the heart and pulse, and the dulness of the intellectual faculties,—of which the difficulty and labour experienced in thinking or making any mental exertion whatever furnishes us with sufficient evidence,—all resulting from the *absence of the natural stimulus healthy blood affords to the brain and heart*. To this morbid condition of the blood, the dingy, unhealthy appearance of the complexion and the other physical symptoms of hypochondriasis I have described may be attributed. The blood

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portion as they are freely indulged in, they aggravate this unnatural and unhealthy state of the stomach, and add to the desire and apparent necessity for them.



being unhealthy, the digestive organs oppressed, and the nervous stimulus absent, healthy digestion is impossible. The neglect of muscular exertion, from deficient nervous energy, prevents the waste of the materials of the body; therefore no supply is required; hence the continued want of appetite after the moral causes have ceased to act; thus imperfect materials are supplied to the already injured or imperfect machinery of digestion and assimilation, and one cause of disorder produces others, which again re-act on the first, and increase all. Congestion of the various viscera soon takes place; local disease at length arises, which adds to the complication of the general malady.

This view of the subject derives confirmation from the observation of the means used by nature for relieving the system of this accumulation of morbid matter, the loaded organs of their state of congestion, and the mind of the weight that oppressed it. I allude to what were formerly called "critical discharges,"—critical illnesses which, as their operation is favourable or the contrary, cure the disease or destroy the patient. As a familiar instance, I may mention those violent efforts of nature termed "bilious attacks." How often do we see individuals whose physical powers and mental energies have been so completely overwhelmed by the combined effect of a congested liver and a poisoned state of the blood, as to threaten a fatal termination, yet recover in a surprisingly sudden manner on the evacuation of immense quantities of dark green bile and other vitiated secretions. Not only has the energy of body in these cases been restored by the removal of the cause which oppressed it, but the mind has been lightened at the same time of a load of care equal in amount to the physical burden. This relief is sometimes the effect of the unaided or spontaneous efforts of nature; sometimes of the skilful application of appropriate remedies.

Since writing these remarks on the relief afforded by bilious attacks, I have met with a singular confirmation of their truthfulness in the following case:—

The Hon. W. S., aged 40, consulted me on the 30th July, 1850. He was suffering under many of the symptoms described in this Paper. He told me that formerly he was liable to violent bilious attacks, which invariably relieved him of all his ailments; but during the last few years they had ceased to recur, and since their cessation he has scarcely ever been well, always suffering more or less from a general malaise of body, and an irritability and despondency of mind.

In the same manner as the whole system is disordered and oppressed by the retention of urea in suppression of urine, we find the functions of the brain annulled by the circulation through it of black unoxxygenised blood in cases of temporary asphyxia. Here the causes are sufficiently obvious; but it by no means follows, that because in other cases,—as the one under consideration,—we are unable to see,



understand, and explain the mysterious workings of the latent agents which affect the body, and the mind through the body, that none exist. We too clearly perceive how imperfectly the functions of physical life are performed with imperfect materials, *i. e.*, unhealthy blood,—how the mental faculties are deranged and obscured by the same cause, how both mind and body are at once relieved by the removal of the physical ailment, to admit the existence of a doubt of the intimate connexion between the disordered physical and mental state of the hypochondriac, and the dependence of one on the other.

A further illustration of the degree to which the mind, as well as the body, may be disordered, and their functions impeded, where the blood is impregnated with any principle capable of exercising a powerful influence over them, is afforded by the operation of anæsthetic agents on the nervous system. We have long known that the inhalation of nitrous-oxyde gas exhilarates and intoxicates, but have only recently learned how completely both mental and physical powers are overwhelmed by the action of chloroform. These remarkable phenomena taken in conjunction with the examples above cited, of the effect of poisoned blood on the animal economy, appear to me to be strongly confirmatory, if not conclusive, of the correctness of the theory propounded in this inquiry, *viz.*, that the peculiar state of mind in hypochondriasis arises from and depends on the admixture of some deleterious principle in the blood, from whatever source it may have been derived, (whether it be a product of mal-assimilation or the retention of some excrementitious matter in the system, perhaps in some new state of chemical combination at present unknown to us;) especially as we have strong grounds for believing that the commencement of the mental part of the malady is coeval with the physical, and the physical with those causes which, I have endeavoured to show, produce this unnatural state of the blood. If additional proof be required it is afforded by the converse. In proportion as the blood is purified, the symptoms of physical disease diminish and the mind resumes its normal sway.

Whether this alteration in the blood is owing to the production of some *materies morbi sui generis*, such as there is reason to believe exists in other and somewhat analogous diseases, *i. e.* lithic acid in gout, lactic acid in rheumatism, or both combined in rheumatic gout,<sup>(a)</sup> I will not venture to speculate. But whatever may be the chemical nature of this matter in hypochondriasis, there is sufficient evidence to warrant the presumption that the cause of the mental disorder is uniform. For it is proved that, however the physical

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(a) I have adopted the terms lithic acid and lactic acid as the most convenient for defining the special states of the system in which these acids are found in the urine, and their constituents in the blood, and as indicative of a gouty and rheumatic diathesis.



symptoms may vary, under whatever changes of character the physical malady itself may appear, or on whatever part the morbid action of the poison may be concentrated, the disordered condition of the mind remains unchanged. There is the same despondency, the same incapacity for mental exertion, the same anxiety about the health; and to adopt a suggestion of Dr. Holland's, whilst treating of the *materies morbi* of gout, "this uniformity" (in the mental condition of the hypochondriac) "can scarcely be explained but by identity of physical cause."

The relation which hypochondriasis bears to gout, rheumatism, neuralgia, and other cognate disorders, and the fact that they are often met with in conjunction, may be thought by some to militate against the notion of its cause being uniform; yet a closer inquiry into all the circumstances of these complicated cases will show that this objection is more specious than valid, and that this diversity of effect (the simultaneous occurrence of other diseases with hypochondriasis) is the result, not of identity, but of an association of remote causes. It is generally admitted that when the system is surcharged with acid and other deleterious products of mal-assimilation, or of imperfect excretion, it is rendered obnoxious to the influence of causes of disease against which it would be proof in a state of health. The nature of the disease depending on the predisposition of the individual,—the pre-existing tendency to generate one or another kind of *materies morbi*, either lithic or lactic acid, or both, or perhaps some other poison.

There are also sufficient grounds for the belief in the possibility of the generation, or at least the co-existence of *materies morbi* of more than one sort under the circumstances I have described; and, consequently, of the co-existence of various diseases. In confirmation of this view of the matter, we have the well-known fact, that all diseases in malarious districts are more or less modified by the malarious poison in seasons when it is very rife, and that it becomes necessary to modify the treatment by the addition of anti-malarious remedies. Also, the modification of various diseases by the gouty virus, and the necessity of adding to the other remedies those which exert specific action on that disease, in order to cure them, may be cited as another example of this association. The gouty and malarious poisons are each a principle *sui generis*, each producing disease of a specific nature, gout or ague; and as these exist in association with other diseases, they afford strong presumptive evidence in favour of the point I wish to prove,—that elements of different diseases may co-exist without being identical. As these elements are remote causes of disease, and as their physical properties vary, so the diseases they produce must also vary.

Thus, a plausible explanation is afforded of the fact, that, though the *remote* causes of rheumatism and other kindred



maladies are different, they may be roused into activity by the *same exciting* cause.

Let us assume that hypochondriasis, as I have attempted to show, is essentially a malady of the whole system, in the propagation of which the circulating fluids are more especially implicated; that anxiety and mental emotions of a painful nature, loss of rest, over-exertion of mind or body, and whatever causes a suspension or interruption of the vital processes in general, and of the secreting and excreting organs in particular, are among the chief causes of it; as every individual is exposed, at some period of life, to the injurious influence of those causes, we have a satisfactory explanation of the fact, that hypochondriasis is found in persons of every kind of diathesis, in every grade of society, and in every variety of constitution; and we can thus also see how it happens, that individuals already labouring under some organic disease may also be affected with it. Experience also proves, what would be generally anticipated, that those causes operate in a different ratio on different persons. Hence it happens, that, while those who are of a delicate and feeble constitution, natural or acquired, fall into a state of hypochondriasis, others of a more robust nature, though equally exposed to the influence of the same causes, escape altogether unhurt, or are so little affected, that any temporary ailment thus induced will either disappear simultaneously with the causes which produced it, or be easily removed by appropriate remedies.

This view of the general nature of the malady affords, also, a satisfactory solution of a difficulty, which would otherwise appear to be inexplicable, namely, the infinite variety in the morbid sensations and symptoms experienced and described by the hypochondriac.

The whole system being disordered, every part of it must necessarily participate in the disorder; and, as it generally happens that one particular organ or part of the mechanism of the body is more prone to disorder than others, either from accidents or previous disease, those organs or parts will naturally yield to the morbid influence of the general malady more readily, and in a greater degree, than the more sound parts; and the most prominent local symptoms will necessarily vary and have reference to the organ on which the morbid action is most strongly concentrated, and will manifest a character peculiar to it.

This hypothesis is supported by the phenomena exhibited by other analogous diseases. In whatever form hysteria manifests itself, no doubt can exist that the whole system is in an unnatural condition; but the part specially affected is determined by some accidental circumstance, in which case, the symptoms will be such as belong to disorder of that particular part. We have the highest authority for asserting, that the symptoms of local hysterical affections, either of internal organs or external parts, are so similar to those of



organic disease, that they can be with difficulty distinguished.

The following cases, among others, have fallen under my own observation:—A young woman, Miss B., of an hysterical habit, slightly bruised her knee; in a short time the joint became swollen and painful, indeed, exquisitely sensitive to the slightest touch, causing a degree of suffering far exceeding in severity the pain which would have been caused by actual disease. While this affection of the knee continued, all other hysterical symptoms ceased, but returned as soon as the knee was cured. Another young woman, under similar circumstances, slightly bruised her right breast, which immediately became exceedingly painful and much swollen, without any defined lump or tumour in it; after suffering severely for more than a year, the breast was amputated, in spite of every remonstrance on my part, her medical attendant acting under the impression of its being cancer. The wound was scarcely healed when the other breast became spontaneously and similarly affected. In this state it continued for some time, the morbid action was then transferred elsewhere, and resisted all local treatment until her general health was restored; but no sooner was this accomplished than all these local hysterical affections ceased.

Gout, like hysteria, affords additional proof of the position, that the localization of morbid action may be influenced by accidental, though not always apparent causes.

An individual, full of the virus of gout, happens to strain his ankle or bruise his toe; gouty inflammation is the consequence, or, in other words, he is attacked with a fit of gout to the relief of the constitutional malaise. Another person, similarly circumstanced, exposes himself to the influence of a raw cold easterly wind—bronchitis succeeds, which will altogether resist the usual treatment, and obstinately persist until colchicum, or some remedy appropriate to gout, be added to it.

In 1841 I was consulted for the first time by Mr. H., aged 68, who had been attacked with bronchitis after exposure to cold, which usually readily yielded to the ordinary treatment; this attack, however, resisted all the remedies I recommended, until I was incidentally informed that he was also liable to gout; I immediately added twenty minims of the *vinum colchici* to each dose of his medicine, which completely relieved him in forty eight hours. I might quote a multitude of similar examples of this form of bronchitis, but this modification of it by gout is too generally admitted to make it necessary. As in hysteria, so in gout, when it is misplaced, *i.e.*, when it attacks internal organs, though the symptoms may be ambiguous, they will always show a great similarity to those which characterize other diseases of the part, even when their nature is organic; of this the following case affords an illustration:—An elderly gentleman, by whom I was often



consulted, and whose health I had especial reason for closely and anxiously watching, would often express alarm at the extremely irregular action of his heart; his pulse would beat in the most frightfully irregular manner; his breathing would be short and embarrassed, and he would complain of a singular feeling of oppression in the region of his heart, which threatened speedy dissolution; his legs would, at the same time, swell and be œdematous; in short, there was every indication of serious disease in the organs of circulation and respiration; when suddenly he would be attacked with gout in the extremities, to the immediate relief of all his alarming symptoms. It is right to state, that there was some imperfection in the valves of the heart, which caused a regular intermission in the pulse at every third beat, and he was unable to walk up hill without shortness of breath, so that, although the gouty poison could not be regarded as the original and sole source of the alarming state I have described, the danger was very much increased by it. Occasionally, an attack of hypochondriasis would be the antecedent of gout, which, in turn, would be relieved by the paroxysm of gout in the hand or foot.

As hypochondriasis may in like manner be complicated with local diseases, either existing previously, occurring simultaneously, or subsequently, a careful consideration of the history of the patient and his disease, as well as an equally cautious examination of the various symptoms, will be necessary to arrive at a correct diagnosis; and much discrimination and some firmness will also be required to prevent falling into a not uncommon error of directing our attention too exclusively to the local malady, on which hypochondriacs are so prone to dwell, at the risk of neglecting the general constitutional disorder, on which possibly it may almost entirely depend.

With these observations I shall conclude my consideration of the general nature of hypochondriasis, and proceed to that of its general treatment.

### DIET.

Having shown how injuriously the circulation of unhealthy blood operates, both on the health of body and mind, and the necessity that exists of removing from the system the noxious matters which contaminate it, the importance of the next step will be obvious, viz., the replenishing the body with blood of the purest quality, the true object of diet and dietetic measures.

Observing, however, that the attention both of the physician and patient is generally too exclusively given, when the question of diet comes before them, to the quality and quantity of the food, I propose to consider separately the various accessories to digestion included in the terms diet and dietetics.

I wish it to be understood that in using these terms, I shall



consider them to include air, exercise, bathing, friction clothing, regulation of the meals, both as to quality and quantity, a due regard moreover being had to the age, constitution, and habits of the patient, and every other circumstance which may exert an influence over the digestive process. My remarks on them must, however, from the nature of this essay, be brief and general.

To insure the object we have in view, viz., the formation of healthy blood, various qualifications are necessary. In the first place there must be healthy digestion, and this is impossible unless the apparatus of digestion be in a healthy condition, and the materials, the food supplied to the animal machine, be of the purest quality, and given in proper quantity and at regular intervals.

It has been already shown, that in hypochondriasis the digestive organs are invariably disordered; therefore, before we can expect any improvement in the performance of their functions, they must be put into a more healthy state. The medical treatment being especially directed to the attainment of this object, I need not now further dwell on it, but proceed to the consideration of the other part of the subject, viz., diet and dietetics, prefacing my observations by a few remarks on appetite.

The question may be fairly asked, what is meant by the term appetite? We may *consider appetite* (I mean hunger, the desire for food in a *perfectly healthy person*) *to be the expressive, though silent, exponent of the wants of the system; the language of the stomach, in short, which may be regarded as the interpreter of the requirements of the body.* This may appear a far-fetched definition of appetite, but the correctness of it is borne out by the consideration of its kindred sensation or desire, thirst, especially under disease.

"The experiments of Orfila and other physiologists," remarks Dr. Holland, "have shown the connexion between thirst and the proportion of water present in the blood, by the relief given to this sensation from the injection of different fluids into the veins."(a)

In the same page I find the following passage, which bears so strongly on the subject, that I am tempted to quote it at length. "In that intense thirst passing into the febrile state, which follows the long privation of liquids, and appears to be the most vehement of all appetites, there is every reason to suppose that these feelings are the results of changes in the blood itself, depending on the altered proportion of its fluid and solid parts, and affecting the vascular system to its most minute extremities." If, then, thirst depends on the altered state of the blood,—on the deficiency of its watery particles,—we may reasonably infer that *natural* appetite is created by a general deficiency of all the materials of the body, which are wasted or dissipated by the exercise of its

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(a) Dr. H. Holland's Medical Notes and Reflections, p. 320.



various organs and parts, whilst obeying all those natural laws by which health is sustained, but to which fashion and our present artificial modes of life are in constant antagonism.

Striking illustrations of the correctness of this definition of appetite are afforded by disease. In scrofulous enlargement of the mesenteric glands, and obstructions of the thoracic duct, though the digestive organs may perform their part of the process of digestion, termed chylification, sufficiently well, the chyle is, in a great measure, intercepted in the lacteals; and due nourishment of the body being thus effectually prevented, the whole body rapidly wastes away, and quickly bears the appearance of starvation; yet the appetite continues, in many cases, not only perfect, but more than ordinarily good; the food is often enjoyed with the zest of health, and digestion is performed not unfrequently without any indication of dyspepsia.

But this language of the stomach not only serves to announce the *general* requirements of the system, it is also capable, as experience proves, of expressing any *particular or special* want, and of exciting a desire, or longing, for the kind of food containing those elements in which the system may be at the time deficient. This is observed both in health and disease. The sailor having been deprived of fruit and vegetables for many months, will, on reaching land, evince an inordinate craving for them, and consume an almost incredible quantity, until his system has been replenished with the elements they afford, and when that is effected the craving ceases. The practical physician sees this inordinate appetite for particular kinds of food too often in disease to make it necessary for me to adduce any examples in confirmation of the assertion.

I may add, that this appetite should never be disregarded by the medical attendant, as it *may* indicate a necessity for, or want of, some particular kind of aliment, and its gratification may be beneficial to the patient; although judgment and discretion will be required in such cases, not only to regulate the quantity of the desired food, but to ascertain whether this great craving for any particular kind simply announces a natural want, or is the result of an unhealthy action in the stomach.

The importance of *healthy* appetite cannot be over-rated; the nourishment of the body depends on it; for without it, the necessary quantity of food will not be taken into the stomach; therefore our dietetic measures should be directed to its restoration as our primary object.

To assist in the selection of the proper means to effect this with certainty and facility, we must bear in mind the causes which concurred to destroy it, 1st. *the action of the secreting and excreting organs* (which may be considered those of waste) *having been interrupted, there is little or no expenditure of the materials of the body, consequently little supply is*



*required, and the appetite is therefore impaired or lost* ; 2nd. it may be further attributable to the impurity of the blood, which, not affording the natural stimulus to the secernents of the gastric juice, or to the stomach, the absence of its natural sensation, *i. e.*, appetite, will necessarily follow.

The effect of medicinal treatment tends to confirm both views of the subject. It will be seen, that its *modus operandi* is to excite excretion, by which expenditure is created, and the blood at the same time purified ; thus, healthy action of the stomach will be restored, and supply be required, and in other words appetite will be renewed.

Although I must be satisfied with making these general observations on natural appetite, I may be allowed to mention, for the purpose of exposing their injurious effects, the means commonly practised for its recovery, than which, in many cases, nothing can be more injudicious or improper. I allude to the employment of stimulating medicines, exciting beverages, and tempting viands ; which, though they may occasionally be proper, and sometimes succeed for a time, it will be at the expense of increasing disorder, injuring and weakening the powers of the stomach, besides incurring the risk of producing repletion.

It would be foreign to my purpose to enter into further disquisition on this subject, or on the causes of depraved or deficient appetite arising from local disease of the stomach.

I will now proceed to make some separate remarks on the dietetic measures which specially bear on the subject of my paper.

## EXERCISE AND AIR.

“ The human frame is so constituted, that the vital powers unexcited by motion, grow gradually languid ; as their vigour fails, the bodily functions are imperfectly performed, and obstructions generated. From obstructions proceed disease, and those pains of the body and despondency of mind which render life a burden to ourselves and a source of misery to our friends.”

Exercise duly apportioned, on the contrary, conduces to health, by acting as a stimulus to every vital action. By exercise, the muscular system is strengthened, and the nervous kept free from undue irritability. By it all the secreting organs are stimulated to an increased activity, the organs themselves kept free and pervious, the blood purified by the elimination of deleterious matters. Exercise, by accelerating the circulation, and by quickening respiration, exposes the blood more frequently to the purifying influence of the air in its passage through the lungs. All these important actions, receiving simultaneously an increased impetus from exercise, cause a greater expenditure of old materials and create a necessity for new, thus contributing in a high degree to insure appetite, and to the maintenance of the vigour and health of the body and elasticity of mind.



The beneficial effects of exercise are much enhanced when taken in the open air. In proportion to the purity of it, so is the benefit increased. Pure air cleanses the blood, by separating the carbonaceous matters from it, and gives vigour and life to it by supplying it with oxygen ; but impure air contaminates it further by imparting to it the noxious matters with which it is itself impregnated. Hence the necessity and importance of selecting for exercise the most open, airy situations and furthest removed from all contaminating principles. Fresh, open, mountain air, is, as a general rule, the most healthful ; and the air that most nearly approaches it in quality the better. The salubrity of fresh sea air is well known. Some constitutions are benefited by the first, some by the second, and all by an occasional change from one to the other.

The very different effect produced by exercise in high, open ground, and in low, secluded, ill-ventilated valleys, is very remarkable. If two persons of equal strength and of the same degree of muscular development and nervous energy, set out for the purpose of taking exercise, one selecting the high, open country, the other, low, close valleys, the former will be enabled to bear a continuance of active exercise which would quite overpower the latter. He will increase in energy and activity at every step he takes ; he will return fresh and exhilarated, with an appetite prepared to enjoy, and powers of the stomach strengthened and enabled to digest his food, which will be followed by sound and refreshing sleep. While the second will be seen crawling along, scarcely able to draw one leg after the other, and, on reaching home, he will feel weary and exhausted, spiritless and oppressed, weak and sinking, yet without the slightest inclination for food, or powers of digesting it, if he had. This may be considered rather a highly-coloured statement, but it is a faithful description of what I have often witnessed in others, and, to a certain extent, have experienced in my own person. The increased strength and renewed vigour of the first can only be explained by the stimulus the purified blood affords the nervous system, and the weariness and oppression to the enervating effects of the deleterious exhalations, always more or less abundant in deep valleys, which had been imbibed by the second.

To derive all the benefit exercise can confer, and to avoid the injurious effects it can produce, it must be regulated, both as to time and extent, so as to be commensurate with the strength of each individual. Walking and horse-exercise are the best, but they should not be taken in excess, *i. e.*, should not produce exhaustion. Exercise should never be allowed to interfere with the process of digestion. I have already observed how exhaustion of the nervous energy impedes digestion,—therefore, a certain time must be allowed to rest and recruit the strength previous to the prin-



cial meals, and during the progress of digestion; but moderate exercise after that process is completed, or towards the termination of it, generally proves advantageous. However, whilst precaution is requisite to avoid exhaustion, we must discriminate between the feelings of listlessness arising from want of energy and oppressed vital powers, and those of real fatigue from exertion. This precaution is especially necessary in persons of previous indolent or sedentary habits.

If possible, the hypochondriac should avoid the solitary and sauntering walk; he should have some object of interest, some settled purpose in view, which he should always make a point of attaining. Every individual must have observed the increased activity and energy in his own person, whilst in the pursuit of some important or pleasurable object, and the fatigue induced by the listless, uninteresting, constitutional walk, as it is called. The former imparts vigour and health to the system, while the latter serves only to increase the torpor of the nervous, and the depression of the whole system.

#### FRICITION, BATHING, &c.

The importance attached to the maintenance of a free action of the skin has been already noticed. There are few remedies more useful than friction, though none more neglected. Friction of the whole surface daily, and sponging it with cold water, vinegar, or salt and water every morning, the use of the shower bath throughout the year, an occasional tepid bath, are of infinite value, in not only removing impurities from the surface, but in exciting an increased action of the cutaneous vessels, by which they will throw off from the blood many deleterious matters, and also prevent an undue accumulation of blood in internal parts, and thus assist in the re-establishment and maintenance of health. These measures, however they may compensate for the want of exercise in the open air, must be considered as auxiliaries only, and by no means as substitutes for it.

The frequent change of the inner clothing is also very desirable, as well for the comfort imparted to the feelings of the person as for the prevention of the injurious effect which would result from the re-absorption of the various matters thrown off by perspiration. The clothing should be sufficient to retain a requisite degree of warmth on the surface of the body, to secure the same object for which friction is recommended, viz., an active cutaneous circulation, to enable the cutaneous vessels to perform their functions, and to prevent, as I have already said, a loaded and congested state of the internal viscera. The clothing worn next the skin should be of flannel, or of some woollen texture, especially in the ever-changing climate of England. But in avoiding the evils which would arise from deficient clothing, the opposite extreme must be guarded against with equal jealousy by in-



valids and hypochondriacs. The oppression and injury accruing from immoderate clothing exceeds what may be anticipated, and occur much more frequently than is generally supposed. Perhaps I may be considered as dwelling too much on these apparently trifling details; but the experienced medical man will bear testimony to the necessity of attention to them, for it is scarcely credible to what an absurd extent some invalids heap garment on garment from fear of cold, or some equally ridiculous fancy. Indeed, some examples of this propensity have occurred in my own practice, which I will not relate, almost fearing they would be considered untrue.

Hypochondriacs should also avoid the oppression and relaxing effect of hot feather beds, of excess of clothing at night, and ill-ventilated bed-rooms; a fire in a bed-room is far preferable to many blankets; both produce warmth, the former by imparting heat, the latter by retaining it; but in retaining it, the escape of noxious exhalations is also prevented.

Early and regular hours are of much importance, both in rising from and retiring to bed. The early walk seldom fails to create an appetite and assist digestion. It is of less consequence to insist on the hour for retiring; for the invalid who rises, walks early, and takes sufficient exercise during the day, is generally glad to seek rest at a proper season.

In the selection of food, we must always remember that the structures of the body are composed of various kinds of elementary matter, therefore it is essential that the diet should contain all the elements of which the body is formed, in order to secure the perfect nutrition of it.

As the digestive organs of hypochondriacs are always more or less disordered, we should select for them the most digestible food, and, as the nature of the disorder varies in different individuals, we must regulate the quality as well as the quantity of it to meet the peculiarities of each case.

The advantages of a properly and judiciously regulated diet is generally acknowledged, and nearly as generally neglected. Simple as is the expression, "attention to diet," few subjects are less understood, even in relation to health, much less in reference to disease. It is true, that many persons have their own peculiar systems; one recommends the exclusive use of bread and meat; a second, a diet almost exclusively of vegetable; a third, one of milk, and so on; each appropriate to certain conditions of the body, but equally inapplicable to other states of it. Yet the same system will be often recommended for every disease, especially by non-professional persons.

Another and a frequent source of error arises from the belief, that, if a certain quantity of food, whatever may be its quality, is consumed, the body must be nourished; hence it is that we often see, even among affluence and plenty, ill-fed, badly-nourished, in fact, half-starved children, a prey



to diseases of defective nutrition. Moreover, I continually find it a difficult task to convince parents, that a child may be as effectually starved although a sufficient quantity of food is eaten, if such food be defective in the essential elements of nourishment, as it will be from a deficient quantity of wholesome food; and a yet more difficult duty to make them understand, that it is vain to expect from medicine alone what can only be obtained by a judicious admixture of dietetic with our medicinal remedies. The agriculturist may as well expect an abundant crop of healthy corn from ground which contains only nourishment enough for briars as that we can have healthy blood, strong bone, firm muscle, and sinew produced from food defective in the natural constituent elements of those important parts of the animal machine. If we were to imitate the rearer and trainer of animals in the management of (*i. e.*, dieting and exercising) our children, a large proportion of the diseases to which we are liable from infancy to old age, would cease as completely as the scurvy from our ships. Unfortunately, this is little thought of, much less practised. Instead of endeavouring to preserve health by such means, and to restore it when lost, by the aid of appropriate dietetic with our medicinal remedies, all fly at once to drugs alone, as if it were not better to cut off the supply which furnishes the elements of disease than to remove it by calomel, &c., or to expect on the other hand, that bark and steel (valuable as these remedies are) will supply the want of beef and bread.

A diet sufficient to maintain life, all the other natural laws being observed, is simple and palpable enough; but I question very much, whether in reference to the production, prevention, and cure of disease, we understand the effect and operation of different articles of diet, as well as we do that of our medicinal remedies; at all events, I may state, without much fear of contradiction, that we seldom exercise the same degree of care, judgment, and discretion in our application of them.

We are sufficiently conversant with the effect of a general superabundance and deficiency of food in the production of certain classes of disease. We see the influence an excess of food exercises in the generation of inflammatory and other disorders of plethora in the affluent and luxurious, and in those persons, butchers for example, who live almost exclusively on highly azotized food. The maladies of the poor and needy make known to us the effect of a deficiency of food. The remedial agency of a restricted diet in relieving those of the first class, and of a generous and nutritious one in curing the second, removes all doubt, if any could exist, on the subject. To descend more into detail, limited as our knowledge is of the special effect on the constitution of an excess, or the contrary, of any particular article of diet, there is a sufficient number of established facts on record to show the importance of the subject.



Scurvy is a striking example of a disease resulting from a deprivation of some particular element afforded by vegetables and fruits, and of the value of diet in the treatment and cure of it. We know that some persons cannot venture to take a glass of wine without paying the penalty of the transgression in a fit of gout; others, again, are obliged to refrain almost entirely from animal food,—indeed from all kinds of the more highly azotized,—for the same reason. We are all acquainted with the impracticability of retarding the progress of diabetic diseases, whilst the patient will not refrain from food containing saccharine matter: also the difficulty of correcting the state of the system known as the oxalic acid diathesis, unless the same kind of food is forbidden.

An interesting example of the cure by diet is related by Dr. Blackall, of Exeter, as having been witnessed by his friend Mr. Johnson, on board of an Indiaman, off Canton:—"Towards the conclusion of the voyage, the sailors had been attacked with dropsical swellings, coming on suddenly, and without those signs which are thought strictly to characterise scurvy,—sponginess of gums and petechiæ. This attack could be attributed to nothing but the use of damaged rice, to an allowance of which they had been unfortunately reduced. On their arrival in port, the principal improvement in their diet was well-fermented bread, which operated as an active diuretic within twenty-four hours after they had begun its use. No doubt remained in the minds of any of the sick what it was that performed the cure. Those who preferred the native vegetable acids did not obtain the same immediate benefit." Although in this case the quality of the rice might have contributed, in part, to the production of the disease; much of it, I think, might be as correctly attributed to the deficiency of nourishment, from the "short allowance," and the cure as much to the nourishment afforded by the bread as to its diuretic effect.

These examples are sufficient to cause a regret, that we have not more recorded facts in the shape of well-regulated tables, to show how different articles of food, and a superabundance or deficiency of any particular kind, tend to produce certain diseases, and how others act as remedial agents and cure them. Could we supply this want in our knowledge, we should be, perhaps, able to remove (as nature often does unknown to us) many diseases by simple and mild dietetic remedies—remedies which cure some diseases by correcting, others, by supplying the absent element to the blood; others, again, by exciting an increased action in the secreting organs, and thus cause a removal of noxious matters from the system, instead of resorting to those chemical and mineral compounds, on which we now so exclusively rely. If this principle could be well and thoroughly worked out and established, it would probably lead to a beautiful and most desirable simplicity of treatment



and cure. Although little can be done by any single person, yet the aggregation of facts from individual observers would at length not only give us the knowledge we now require, but would tend to explain many doubts, to reconcile many apparent anomalies, and to afford an insight, hitherto rather "desired than expected," into the nature of the various conditions of the blood and secretions, and as a natural consequence, into the causes and nature of many disordered actions now but imperfectly understood. As I propose to treat of the principal modifications of hypochondriasis separately, the kind of food most proper for each variety will be best considered at the same time. I shall, therefore, limit my present remarks to those general rules which are more or less applicable to all. I may first observe, that it is very important that our instructions for the guidance of hypochondriacs should be most simple, so as to be easily and readily followed, that the patient may be persuaded to disregard all minute maxims and observances on which they are so prone to dwell. They only tend to produce an increased vigilance to discover any unpleasant feelings that may arise during digestion, and which their apprehension tends greatly to create. Everything that will divert the attention of these invalids from themselves during the process of digestion will contribute greatly to facilitate the proper performance of that function ; it is, therefore, advisable that he should rather incur the risk of slightly transgressing the bounds of prudence, in eating and drinking in cheerful society, than by taking the more prudent meal in solitude.(a)

"Most stomachs are able to digest a little of almost any kind of food, but not much of the most digestible. What sits easy on the stomach, and produces no inconvenience, may be presumed to be properly digested and wholesome as regards that individual."(b) Moderation in eating, then, is of great moment, and, to insure it, food should be eaten slowly and masticated thoroughly. Eating should be discontinued at a point short of uneasy repletion. If these rules be strictly attended to, and digestion be not interfered with by active exercise of mind or body, the stomach will generally perform its duty thoroughly, and prepare the food in a proper manner for the subsequent processes of assimilation.

Experience also proves, "that crowding the meals in too rapid succession, especially of animal food, is productive of great injury to the stomach," for that organ requires rest after exertion as does every other part of the body. Sufficient length of time, therefore, should be allowed to elapse after a meal, to insure rest and the perfect digestion of it before another is eaten ; a rule frequently infringed (from the

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(a) Maxims well expressed by Dr. Holland, in his *Notes and Reflections*.

(b) Prout.



sensation of sinking at the stomach, which is so common in hypochondriacs), at the expense of preventing appetite and producing indigestion.

In considering the quantity and quality of food, we must remember, that the strength of the patient must be supported by a sufficiently nutritious diet, which must be modified to meet the necessities of each case. It is also a judicious plan to vary the nature of the aliment occasionally, blending vegetable and animal food, but varying the proportions of one kind or the other, as circumstances may make necessary; at all times taking care to avoid those kinds which are well known to be difficult of digestion,—such as salted and prepared meats, and crude, especially raw, vegetables, &c. The propriety or necessity of allowing some stimulus is always a difficult question to answer. In the early stages of hypochondriasis, whilst the nervous system is depressed, a moderate quantity of stimulus may be safely taken, and with great advantage.

We must be guided in our decision, in each case, by the individual temperament and previous habits of the patient, remembering always that it is a powerful agent,—that whilst a moderate quantity, habitually taken, may be beneficial to some constitutions, it is equally injurious to others. The remark as to the necessity of some stimulant is peculiarly applicable to those persons who have been in the habit of indulging in wine or other stimulating beverages; for, if they are suddenly and wholly deprived of it, uneasy sensations will be experienced in the stomach, indicating an imperfect performance of its functions. But stimulants should not be taken excepting with the principal meals, as it is wrong to stimulate that organ when it has no task to perform, and no more should be taken than is sufficient to enable it to fulfil its duties.

If hypochondriacs seek proper advice at an early period of the malady, whilst it is still uncomplicated, relief can often be given quickly and without difficulty; but unfortunately the disease is generally so increased by neglect, more firmly rooted by mismanagement, and has become complicated with congestion before any systematic remedial measures are brought to bear upon it; that the favourable opportunity of affording speedy relief is often lost. Yet the treatment of its most simple form may be considered with advantage before I describe the various complications of its later stages. This arrangement will have some advantage even in the future consideration of the management of the more complicated cases. As the general system is invariably disordered, due regard must always be had to the constitutional treatment, although modifications of it will necessarily be required, as well as a variation in the local remedies to adapt them to the peculiarities of each case. After what has been written I need scarcely repeat, what however must ever be borne in mind, that hypochondriasis is



a malady of the body,—that the morbid sensations, although much exaggerated by the patient, have a real existence.

The unhappy state of his mind makes it imperative that the hypochondriac should be treated with much kindness and forbearance, combined with firmness. In order that a habit of obedience may be early induced, I generally explain to him the cause and nature of his malady, and the object sought to be effected by the remedial measures. This practice has also the further advantage of impressing his reason with the necessity of strictly following out the method of treatment, and of paying equally strict attention to the various adjuncts to medicine comprised under the term dietetics, and of convincing him how vain must be his hope of relief from medicine, while he habitually infringes those natural laws which cannot be infringed with impunity.

Considering the theory of the disease which I have ventured to suggest, it necessarily follows that the principle to be kept in view in the medical treatment, is to remove from the system the materies morbi, whatever that may be, and to correct the anormal state of the blood. This can be best effected by exciting an increased action in the secreting organs, by which we shall get rid of the impurities with which it has been loaded. I am convinced, that the practitioner who steadily pursues this as his chief object, will treat the disorder most easily and most successfully. Notwithstanding the apparent importance of the local disorder, while proper attention and appropriate measures are adopted to relieve it, our chief reliance must be placed on that course of treatment which will act on the general system through the secreting organs; and here I would remark, that, in working out the principle laid down, the immense surface of mucous membrane may fairly claim an equal degree of importance with the liver, kidneys, etc., which usually attract the greatest share of attention.

The medical attendant should not be deterred from the use of sufficiently active remedies, or those which are usually considered depleting, by the apparent debility of the patient; for there are few more fruitful sources of error in practice than that of regarding want of energy as an evidence of mere debility,—a term often incorrectly and indiscriminately applied to several different species of disordered action. In this disease it doubtless arises in part from a congested state of the chylopoietic viscera; but, as I have before observed, probably in a much greater degree from the want of the natural stimulus healthy blood supplies to the nervous and muscular systems. In proportion as the influence of this natural stimulus is restored by the purification of the blood, and the relief of the congestion, lassitude will diminish, and body and mind will recover their wonted energy.

A correct and minute history of the patient's ordinary occupations, habits, and external circumstances should, if possible, be acquired, to ascertain if there is, or has been



any moral cause of a depressing nature ; whether there has been any change in his mode of life, such as from activity to idleness, either of mind or body, or if he has been exposed to the influence of any physical cause of depression. A knowledge of these apparently trivial matters will lead to a clearer understanding of the case, by laying open more minutely the cause of the malady, and assist the judgment in the selection of appropriate remedies for its cure.

### MEDICAL TREATMENT.

In accordance with my view of the disease, the attention of the medical adviser will naturally be directed, in the selection of his remedies, to those which will either remove the contaminating matter from the blood, as deobstruents and purgatives, or correct them, as alteratives.

It is necessary, however, that I should advert, in the first place, to the necessity of inquiring into the state of the bowels *in every case* ; as in hypochondriasis, they are usually much constipated. They must be thoroughly unloaded before we commence any regular plan of treatment.

In the treatment of a malady presenting such varieties in its origin, nature, and progress, it is obvious that much discrimination will be required, even when consulted during its earlier stages, in deciding on the course to be adopted or pursued. Remedies, the best adapted for the relief of patients in whom hypochondriasis has arisen from moral causes, while in the vigour of health, may be wholly unsuitable for those who have been reduced to the same morbid condition by depressing causes of a physical nature, and whose systems are already in an impoverished or debilitated state. Deobstruents and aperients may be necessary for both, but while the former class will require to be freely unloaded, and placed on a reduced scale of diet, the latter must be allowed generous and nutritious food, the nervous system, at the same time, being stimulated by wine and medical cordials. We must, therefore, endeavour to ascertain, as clearly as we can, the causes and exact nature of the disordered action in each case.

If, on examination, we find *that the malady has only existed a short time*, and there is no evidence of congestion of any of the viscera, we may, after having unloaded the bowels, immediately apply our remedies to excite an increased action in the several secreting organs ; taking care, that, in endeavouring to unload and cleanse the system, we avoid the irritating effects of the more powerful and drastic medicines. *Those medicines should, therefore, be selected which permit a sufficiently long and steady persistence in their use, and which may be exhibited in a form likely to facilitate their absorption into the system ; where, by altering the state of the blood, at the same time that they act upon the bowels, they will exercise a direct and simultaneous influence over the secretions of the skin, the kidneys, and the mucous membrane, and*



*bring about the desired object, the improvement in the quality of the circulating fluids, by removing the noxious matters from them.*

Such a remedy we have in the saline aperients combined with other salts, which, when given in conjunction with mild mercurials, prove very effective remedies in some forms of hypochondriasis. They unload and cleanse without inducing that extreme debility and irritation of the intestines which it is so desirable to avoid.

I have given various combinations of saline aperients, and have found, as a general rule, the sulphates the most efficacious, either the sulphate of magnesia, soda, or potash, and on the whole, the sulphate of magnesia, combined with the bicarbonate of soda, the most certain and effectual in its operation.

It is manifest that they are not applicable to every case, but there are certain indications which especially point to their use, and, "when rightly employed, they will be found, in the strictest sense, aperient, diuretic, as well as laxative; indeed, they will promote all the secretions." We shall find one of the clearest indications for their use in the state of the urine; when that secretion is high coloured and loaded with lateritious sediment; when the skin is dry, and especially if it be, at the same time, hot, with a white or furred tongue, these salts operate very beneficially in every way. Their beneficial action is much increased by the previous exhibition over night of some mild mercurial, care being taken that it should not enter the system so as to affect the gums. It should be administered with the sole object of exciting action in the secreting organs. When given with this intention, it rarely fails to accelerate the cure very materially.

When the bowels are obstinate, it is often necessary to combine the mercurial, in whatever form we may employ it, with the ext. colocynth co., ext. aloes aquosi, or pil. rhœi comp., but it is advisable to give the mercurial alone if possible. Nothing will, however, so well illustrate points of practice as examples; I will, therefore, narrate two or three cases which have been treated by these medicines. They are examples of hypochondriasis in its most simple form, in which the whole system was suffering from a retention of effete matter, without alteration of structure or manifest congestion of any of the important viscera, and occurred in persons whose stamina had not been undermined by previous disease or intemperate habits of any kind.

*Case 1.*—Miss S. M., a lady about forty years of age, of strong mind and robust body, passed several months of 1849 in anxiously nursing her mother, her only relative, in an illness which terminated in her death. Her rest was greatly disturbed during the latter part of this period. She was subsequently left alone in a large, gloomy house, and restricted from entering into society. A well-regulated mind enabled



her to sustain the loss of her parent as she ought, yet in spite of every effort she became anxious and nervous about trifles, looking always on the dark side of the picture, a habit quite foreign to her previous character. Her health soon began to fail; she lost her energy and strength; she became restless at night; she loathed her food; her bowels, previously regular, became obstinately costive: her legs, which were always a little puffed at night, became greatly swollen from varicose veins. To restore her health she took for some time calomel and very strong aperient medicine, which operated powerfully, and weakened her without affording relief. She consulted me early in June, 1850. I found, in addition to the symptoms I have described, her tongue foul and swollen, showing the impressions of the teeth; her pulse feeble and slow; her countenance dingy, with a dark areola round her eyes; the conjunctiva dull, with a tinge of yellow, with large tortuous vessels ramifying over it; her bowels were never relieved without medicine; her urine, when feeling nervous and depressed, was pale and plentiful, at other times high-coloured and scanty, and occasionally turbid. I prescribed for her pil. hydrarg. gr. v.; pil. rhæi. comp., gr. v.; Ft. pil. ij. quaque nocte ad tres vices sumend.; magnesiæ sulphæ, ʒi.; potassæ nitras., gr. v.; potassæ bicarbonatis, ʒj. Ft. pulv. to be taken every morning dissolved in a large tumbler of tepid water. These medicines operated once or twice freely, without pain or inconvenience, and brought away depraved secretions, but the stools were not of the watery character usually resulting from salts. At the end of a week she wrote me that she was much relieved in every respect. But she continued the same plan for a month, omitting the pil. rhæi comp.; her bowels continued to be acted on quite as freely as when she took it. At the expiration of three weeks she felt so well in mind and body that it was with difficulty I could persuade her to persevere with her remedies, which certain indications showed me was advisable, if not absolutely necessary. This case is a good example both of the uselessness of the usual mode of administering remedies as aperients, and the beneficial result of using them as deobstruents. She remarked, that mild as the medicines I had prescribed were, their effect was even more powerful than the calomel and black doses she had previously taken.

*Case 2.*—Mr. H. H., aged 69, came to London in the autumn of 1849, in a very wretched state of spirits, and with his bodily health considerably disordered, which he attributed to disappointments, pecuniary losses, low rents, &c. He had been ill for three months, and as the disorder of his health increased from week to week, his prospects, though not really worse, appeared to be more and more gloomy. When in health his character had been always an active and energetic one; but, since this attack, he has spent his time brooding over his difficulties, hopeless and miserable, and fully persuaded



that his health was irretrievably disordered, and his end approaching. He complained of slight headache, that his head was confused, and his intellects stupified; his complexion was dark and dingy, with a slight tinge of yellow on the conjunctiva; his tongue was covered with a brownish fur; his pulse beat slowly and rather irregularly; his bowels were irregular, with a tendency to occasional diarrhœa. The evacuations from the bowels were very acrid, and occasioned considerable distress in their passage through the intestines, and great soreness, almost amounting to excoriation at the lower extremity of the bowel; but he remarked that he always felt relieved in every way after three or four evacuations. There was considerable uneasiness in the stomach and bowels from flatulence, and he suffered considerable pain in the course of the sciatic nerve. The urine was high-coloured and deposited much lithate of ammonia. I prescribed for him the following medicine:—

℞ Pil. hydrargyri, gr. iv.; extract. lactucæ, gr. ij. Ft. pil., quaque nocte sumend. c. 4ta parte misturæ sequent.

℞ Liquor calcis., ℥ij.; syr. simplicis, ℥j.; Tinct. zinziberis, ℥ij.; aqua pimento, ℥iv. Ft. mist.

℞ Magnesiæ sulphas., ℥ij.; magnesiæ carb., ℥j.; infus. caryophyllorum, ℥ij.; Ft. haustus, quaque mane sumend.; superbibendo aquæ tepidæ, lb. ss.

I was induced to prescribe the alkaline earths from the acrid nature of the intestinal secretions.

This medicine briskly purged him, removing much dark, offensive matter, and so quickly relieved him, that at the expiration of a week I could not avoid smiling at the sudden and complete change which had taken place in the view he took of his affairs and health, everything began to look bright and prosperous. He pursued this plan of treatment for a fortnight, by which time the secretions had become natural and healthy. The mercurial was from that period taken twice a week, and the following mixture was substituted for the saline aperient:—

℞ Decoct. aloes comp., ℥ij.; liq. calcis, ℥ij.; aqua pimento, ℥ij. Ft. mist. capt. 4tem partem quaque nocte.

His health and spirits steadily improved, and at the end of a month he had quite recovered.

*Case 3.*—Mr. G. H., aged 43, had been an active and successful merchant, and having realised a fortune early in life, had been enabled to retire from business. He had been occasionally subject to attacks of hypochondriasis, brought on by over-fatigue and anxiety, but had generally enjoyed good health while he was engaged in business. Soon after his retirement from active life, he perceived his health decline, he lost much of his energy and activity, and became more subject to depression of spirits; he also suffered from slight attacks of gout, and severely from neuralgia in the second and third branches of the fifth pair of nerves supplying the right cheek. He consulted me in the spring of 1849,



having been suffering severely from the neuralgic pain in the cheek and lip for several months, which almost prevented mastication and articulation. He had some slight sensations of gout in his toe, but his principal cause of complaint was a dreadful depression of spirits; he declared he was so wretched and miserable from this cause, that he would gladly bear the acute pain in the cheek for ever, if he could only be relieved of his mental malady.

His tongue was much furred; his skin dry and harsh; his bowels rather confined; and his urine high-coloured, and loaded with the lithate of ammonia. He had little appetite, and was unable to masticate from the pain in the lip and cheek, which was much increased towards night; his pulse beat slowly and feebly. His complexion exhibited the dirty, dingy appearance I have attempted to depict, but without any tinge of yellow in the conjunctiva. He had been treated for the neuralgia by steel, quinine, and arsenic, (persevering in the last medicine for a very considerable time,) his medical attendant believing that all his ailments arose from debility.

I directed him to take the following medicine:

℞ Pil. hydrarg., gr. iv.; ext. acet. colchici, gr. ij.; ext. colocynth. comp., gr. iv. Ft. pil. ij., quaque nocte sumend.

℞ Magnesiae sulphatis, ʒij.; inf. caryophyllorum, ʒvi.; potassae bicarb., ʒss.; vin. sem. colchici ʒss. Ft. mist. capt. dimid quaque mane et meridie superbibendo. Aquae tepidae. lbss.

The use of wine, sugar, potatoes, and food containing starch, was forbidden; but I allowed him a generous diet in other respects, and gave him permission to drink a limited quantity of weak brandy-and-water, and strictly enjoined the necessity of active exercise.

The medicine acted briskly on his bowels, and soon freed his urine from the sediment. In three days all sensations of gout had disappeared; the neuralgic affection of the lip had so far diminished as to allow of his speaking and masticating his food carefully without any increase of pain, and the complexion had become much more clear; but the most striking change, was the disappearance of his mental depression—he was now as full of hope as he had previously been desponding.

I now slightly altered the medicinal part of his treatment, directing him to take the pills every week for three nights in succession, and the following powder every morning, dissolved in a large tumbler of tepid or cold water:

℞ Magnesiae sulphatis, ʒij.; potassae nitratis, gr. v.; potassae bicarb., ʒi. Ft. pulv.

still urging upon him the necessity of active walking exercise in the open air for an hour before breakfast, immediately after taking the medicine.

He steadily persevered in this plan of treatment, with some trifling modification, for six weeks; at the expiration



of that time he was perfectly recovered. He has since, by my advice, gone to Australia, the scene of his former labours, as I consider it a matter of much importance, that, in every case, after the system has been thoroughly freed from all morbid matter, the individual should pass a considerable time in the purest air, and, if possible, in the pursuit of some object of interest, which may call into active exercise the powers both of mind and body.

It is necessary, however, to remark, that although, as a general rule, the use of saline aperients is indicated by certain appearances in the urine, the presence of the lateritious sediment, &c., and that it is contra-indicated by the opposite condition of that secretion,—*i. e.*, a plentiful discharge of pale, limpid, watery urine,—exceptions to it are sometimes met with in practice. The cases to which I allude, notwithstanding that the system is greatly contaminated by the presence of morbid matter, and the liver and other chylopoietic viscera are much congested, the urine may exhibit this watery character; and (what especially deserves notice) it will continue to be secreted of this quality until the hepatic and general systems have been, to a certain extent, unloaded by appropriate remedies, and not until that has been accomplished will the lateritious sediment appear in the urine. In such cases, it may be advisable to defer prescribing these salts until the various viscera have been somewhat relieved by other measures, or until the lateritious sediment has appeared in the urine, when they may be prescribed with more certainty that their action will prove beneficial. However, their administration, under these circumstances, will be better considered when the treatment of abdominal congestion is discussed.

It not unfrequently occurs, that the bowels participate in the general torpor of the system, and are acted on with great difficulty. In such cases I have found that no advantage is gained by increasing the dose or strength of the purgative medicines. On the contrary, they appear to worry and irritate in proportion as their strength is increased without operating more effectually. Our object can be better accomplished by diminishing and combining with it some warm stimulating remedy. For this purpose the *infus. armoraciæ comp.* added to the aperient will often render it more effective. Again, when the large intestine is greatly distended by wind, the operation of purgative medicines is much impeded. Under these circumstances the *pil. galbani comp.*, combined with the mercurial, or with extract. colocynth, or turpentine, used as an enema, will prove efficacious auxiliaries.

I need not dwell longer on this part of the subject, excepting to remark, that it must always be remembered, that the object to be attained by the use of the stronger purgatives is only preparatory and not simply to unload the bowels, but principally to relieve the torpid viscera, and to fit them for the DEOBSTRUENT action of the saline aperients, on which our



chief reliance is to be placed for exciting an increased action in all the secernents of the body, by which the system is to be relieved and the blood cleansed from all deleterious matter.

Therefore, when these stronger remedies have succeeded in rousing the torpid viscera to increased activity, they should be discontinued and the salines substituted for them, in moderate doses largely diluted, from one drachm to two of the sulphate of magnesia, and a scruple of the bicarbonate of soda, dissolved in ten or twelve ounces of tepid water; half of this should be taken daily as soon as the patient is out of bed, and the remainder when dressed; he should then take an active walk before his breakfast. If it produce very liquid, or watery stools, the quantity of the sulphate should be diminished. These medicines will, by this mode of administration, be absorbed into the blood, and will be carried to every part of the body, and permeate the most minute structures, and in passing through them will remove the elements of disease, and thus restore the patient's body to health and relieve his mind of the load that oppressed it.

The usual effect of this treatment is, to remove from the system large quantities of dark-coloured offensive matter; but it occasionally happens that the evacuations from the bowels do not, for the first few days, greatly deviate in quality from health, and it is not until after several successive doses have been taken, that the secreting organs begin to separate the unhealthy matter to which I have alluded. It is very important to bear this in mind; otherwise, both patient and medical adviser may be prematurely discouraged at the nonappearance of unhealthy secretions, and lose all confidence in the treatment. We must be guided in our management by the quality rather than by the number of the evacuations, and must persevere steadily, though cautiously, with the treatment, until we observe that the various secretions have become natural and healthy.

It may not be amiss, likewise, to advert to the possibility, nay, the great probability, that exists of a temporary increase in all the unpleasant symptoms of the disease at the commencement of the treatment, when the remedies are exciting and stimulating the different organs, but have not yet attained their full influence over them. According to my experience, there are no cases in which the relief ultimately afforded by the treatment is more complete and satisfactory. An occasional dose of the pil. hydrarg., and sometimes of a grain or two of calomel are, under these circumstances, required; they will greatly assist the operation of the salines, and in relieving the general feelings they have tended to create. There are many cases of hypochondriasis, however, even its most simple form, in which they are inadmissible.

In persons who are in that condition which the late Dr. Prout termed the oxalic acid diathesis, the propriety of their



use may be doubtful. In connexion with this habit of body, hypochondriasis assumes a more serious character, often approaching limits which only just separate it from insanity, indeed not very uncommonly terminating in it; I shall therefore reserve my observations on the treatment of this aggravated form of the malady for a future chapter.(a) The use of saline aperients is to be avoided in the treatment of hypochondriasis, in subjects whose powers of life are naturally feeble or have been exhausted by disease. In cases which require the assistance of purgative medicines, but in which the saline aperients are not applicable, we must select those which, whilst they will operate effectually, will not distress or irritate. A combination of active purgatives with mild aperients will often answer our purpose well, when either of the two separately would fail together; the first by irritating, and the second being deficient in strength. The mercurial may be combined with the ext. col. comp. or some other preparation and given at night, and a mild aperient in the morning, or the morning aperient may be added to some bitter infusion. It is unnecessary that I should specify the formulæ to be employed more minutely. They must be selected and modified according to the judgment of the practitioner to suit the peculiarities of each case, and in almost every case they should be well diluted.

On the other hand, persons of naturally delicate or feeble constitutions, will require to be managed with proportionate care and delicacy. To those who have not had experience in the management of such cases, the mildness of the treatment necessary may appear trifling and inefficient; yet any other would prove injurious and often dangerous.

If such persons need a course of mercurials and purgatives, the mildest kinds must be selected, such as small doses of the hyd. c. cretâ, guarded with some mild sedative, as the ext. lactucæ, or hyoscyami, and given one, two, or three nights in succession, or every alternate night, or less often, as circumstances may require, and to be carried off by the mildest aperients. I may be allowed to remark, that the operation of purgatives, as the infusion of senna with a bitter infusion, is rendered more certain and mild, also more effective, if largely diluted, by the draught being added to a tumbler-full of tepid water.

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(a) Indeed, until lately, I have considered that saline aperients were inadmissible in the treatment of dyspepsia in persons of the oxalic acid diathesis; but some remarkable cases have occurred to me since this part of my paper was written, which have tended to alter my opinion on this point; but I require further experience to satisfy myself on this point of practice.



## HYPOCHONDRIASIS COMPLICATED WITH A TORPID OR CONGESTED LIVER.

The plan of treatment I have just described refers only to hypochondriasis in persons who were previously in good health, in whom the causes of the disease had ceased to operate; whose strength and vital energies had not been impaired; and in whom the general disease was not complicated with any serious amount of local congestion.

These favourable circumstances existed in the cases I have detailed, and explain the facility and rapidity with which they were relieved. But, we are often consulted by hypochondriacs in whom the converse of these conditions exists. The original causes may still continue to exert their baneful influence. The disease, from neglect or mismanagement, may have proceeded unchecked, until the viscera generally, and the liver in particular, have become seriously and even dangerously congested, and the strength of the patient has given way under the combined effects of these untoward circumstances.

I shall now proceed to the consideration of this more serious form of the complaint, which will necessarily require a corresponding modification of treatment, more especially directing my attention to those remedies and general management on which we must chiefly rely for the removal of congestions or obstructions in the liver and other viscera. As the relief of these morbid conditions must be our primary object, a few prefatory observations on the manner in which they may probably originate, will not, I trust, be deemed irrelevant.

In the natural condition of a secreting organ, a current of blood is constantly, though, perhaps irregularly flowing into its vessels. If the function of secretion be properly performed, and there is no obstruction in the efferent veins, this current will pass as freely out of it; partly in the form of blood and partly in the form of secretion, both together being equal to the amount of blood which had flowed to it. The supply and waste being thus balanced, the organ will remain in a healthy state, as far as its circulation is concerned. But if the efferent veins be obstructed it is manifest that an unnatural turgescence of all the veins behind the obstruction will ensue; may we not infer, therefore, that, if secretion be arrested, that portion of blood which, in a healthy state of the organ, ought to have been converted into secretion, and have passed off by the ducts, will be retained in the vessels that supply the secreting apparatus, and thus produce a state of turgescence similar to that arising from direct obstruction in the veins themselves. If this inference be well founded, it will necessarily follow that secretion can scarcely be impeded, even for a short period, without producing an unusual fulness of the vessels of the part. The



obstruction having once commenced, as long as it remains this turgescence, this ponding back of the blood, will steadily increase, until the whole organ has become completely engorged; in other words, a state of congestion be the result. Following up this view of the subject, it is probable that, in recent cases, arrested secretion is productive of no more serious consequence than a preternatural fulness of the vessels, which will recover their normal state on the re-establishment of that function; in many cases, however, not without some violent natural effort, attended by more or less general disorder or illness, of which a bilious attack is a familiar example; or it may be relieved by art, through the agency of medicines adapted to that purpose. Without entering into any speculation on the various mechanical changes which must result from a long continuance of such an unnatural condition of these delicate but important parts, we may fairly assume that a great accumulation of blood, (and it must be remembered unhealthy blood, blood loaded with various kinds of morbid matter,) cannot long gorge and distend the minute vessels of an organ without at length damaging their structure and injuring the delicate apparatus of secretion; injury likely to be followed by inflammation and its consequences, which, unless counteracted by adequate remedial measures, will terminate in organic disease, or diorganisation of the natural structure of the viscus.

Now, in a practical point of view, I wish more especially to fix the attention of my reader on an intermediate condition of the liver and portal system—a condition between that in which there is simply a temporary fulness of its vessels, (before much, if any injury has been inflicted,) which can be relieved by a few active calomel purges, or by the treatment I have described in the preceding papers and that degree of congestion which has produced a palpable enlargement of the liver, to be detected by manual examination. It is of the utmost importance that this stage of congestion should not be overlooked, otherwise the opportunity of relieving effectually the suffering viscus may be altogether lost.

To avoid all risk of being misunderstood, I repeat, that the state of the liver under consideration is one in which, though congestion may have existed a considerable time, and changes in the structure of the organ may have, to a slight extent, taken place, yet no great injury or damage has been done; at any rate, none that may not be repaired. It must, however, be remembered, that the effect of congestion of the liver is not limited to that organ; it will gradually extend to the whole of the portal system; and not only will the veins proceeding from the stomach and intestines—the mesenteric—become gorged, but those of equal if not greater importance, which commence in the mucous membrane, where the arteries of that tissue terminate, will participate in the congestion. Whether we consider the immense num-



ber of these vessels, the vast extent of surface through which they ramify, or the vital functions performed by that delicate apparatus (which this state of turgescence of the efferent vessels must necessarily tend to embarrass and obstruct,) it would appear that this portion of the system in connexion with hepatic congestion has not received the attention due to it. It would seem, from the absence of notice, that when congested, these two extremities of the portal system have been considered independent of each other; whilst in reality they are only parts of the same system, suffering alike from the same disordered condition, produced by the same causes.

Difficult as it undoubtedly is to detect this morbid condition of the liver with any degree of certainty, there are yet some symptoms which, taken in conjunction with the history of the case, will afford us valuable assistance in forming a correct diagnosis, although, from their want of prominence, they often escape notice. Thus, where no enlargement of the organ can be detected externally, and no great pain but only uneasiness is produced by pressure, the patient complains, in addition to the symptoms of malaise, of a sensation of a general fulness of the abdomen, of load, and occasionally of tightness or stricture in the region of the liver, more especially in the situation of the left lobe, which sensations, he distinctly affirms, are not relieved by the operation of even active purgatives, powerfully as those medicines may have operated on the bowels; they seem to have passed by, and to have left the source of the mischief untouched and unrelieved.

That these sensations do not arise from flatulence, is evident from the absence of distension.

That the cause is permanent, is made clear by their remaining constant and unvarying.

If not soon relieved, they steadily, and sometimes rapidly increase, so as to become almost unbearable; yet it is not so much acute pain which is complained of, as a distressing sense of weight, mingled with a feeling of tightness, exciting the fear that something will burst internally.

More commonly these local symptoms continue for a length of time without much alteration or augmentation, creating great local discomfort and uneasiness. The general health gets more and more deranged; the countenance gradually assumes a more unhealthy aspect; the patient's strength and buoyancy of spirits decrease; the state of his secretions varies, sometimes indicating disorder, and at other times evincing in their appearance at least no great deviation from health; as if a sufficient portion of the discerning apparatus remained in a natural state, and carried on the functions sufficiently well to sustain life, but not to maintain health; in this manner preventing the accumulation of matter beyond a certain degree, which, if wholly retained, as in the case of the complete suppression of



urine, would be destructive of life. The suddenness with which these local symptoms sometimes subside on the torpid liver being excited to increased action—to pour out a large flow of bile, the immediate general relief consequent upon the subsidence of the symptoms, and perfect recovery of health, which subsequently ensues under judicious management, seem to me to prove incontestably, that they are caused by an unnatural distension of the vessels of the liver, (and what is true of the liver is equally so of other organs,) and that no great injury has resulted from even a long continuance of this unnatural state of the viscus.

To illustrate my position more clearly, I will narrate a striking example of this morbid condition.

A middle-aged gentleman, actively engaged in business, became entangled in pecuniary difficulties, and depressed by other causes of anxiety. He was soon afterwards observed to become desponding, and to lose his activity and energy; his countenance, hitherto healthy, began to look pale, dark, and sallow; he visibly decreased in flesh; his appetite declined, and his nights were sleepless. He found that his bowels, heretofore regular, required assistance from medicine; in short, that general disorder of the system which I have described rapidly supervened. After some time, in addition to his general symptoms, he complained of an uneasiness and discomfort at the pit of the stomach, inclining rather to the right side. Still he pursued his usual avocations, but as an irksome duty,—no longer finding in them a source of pleasurable excitement. He informed me that, in spite of various kinds of treatment, his local and general illness had steadily increased and his strength diminished in a corresponding ratio. At length he became so completely prostrated that he could not raise himself in bed, and his life was considered to be in jeopardy. The uneasiness in the region of the liver was aggravated to a degree almost insupportable. He felt as if something would give way in his stomach, and was convinced that the extreme oppression under which he laboured would destroy him unless it could be relieved. At this period of the disease his bowels were easily acted upon; his urine, though passed in small quantities, was pale, and exhibited nothing unnatural in appearance, nor could any morbid change be detected in it on examination. Of this I was assured by the late Dr. Prout, who saw the case at this juncture.

A change in the treatment was then made, and small doses of calomel were directed to be given every four hours, with the intention of bringing the system under its influence; but before the second dose was taken he suddenly felt relieved from all his local distress. He described the relief as similar in effect to that which he once experienced on the introduction of a catheter when he was suffering from retention of urine, with great distention of the bladder. Almost



immediately afterwards he was attacked with sickness, and vomited a very large quantity of dark green offensive fluid. In the course of a few hours a diarrhœa set in, and he passed a still larger quantity of black fetid matter. He was quite relieved by this occurrence, and, under a course of medical treatment, always most important in such cases to remove entirely the whole obstruction, he recovered his former good state of health and elasticity of spirits, after rather a tedious convalescence.

The study of such a case, from the earliest derangement of health to the acme of disease, is highly instructive. Its course may fairly, I think, be traced through the following gradations. Anxiety of mind, in the first instance, depressed his nervous system, destroyed his appetite, extinguished animal spirits, and arrested secretion. The retention of deleterious matters contaminated his blood and produced general malaise of body and despondency of mind; the turgescence of the portal system first caused uneasiness; then, to use his own expression, a load, and sensation of stricture and of painful distention, yet without any external local evidence of such a condition. The relief so suddenly experienced, followed by the evacuations of morbid matter with which, doubtless, the portal vessels had been gorged; the resumption of active secretion under the influence of medicine, and the final restoration to health, form a regular succession of phenomena in perfect accordance with the order of changes which we should, from *à priori* reasoning, expect to take place under such circumstances. This is, I am ready to admit, a severe and striking case; but by the study of such an one we are able to understand those which are less strongly marked. What happened here in an extreme degree may, and I believe does occur, to a greater or less extent, in all cases of a similar nature; so that, whenever this disorder arises in persons previously in good health, and especially from causes of a mental nature, we may safely infer, that there exists at least an unnatural fulness of the vessels, commencing immediately behind the minute secerning apparatus; although not sufficient to produce a palpable enlargement of the organ. I am the more anxious to establish the correctness of the explanation above advanced, of the pathological condition of the organs of secretion during this intermediate stage of the disease, having frequently, in doubtful cases, drawn from it most valuable indications to guide me in their management. In fact, should the general plan of treatment detailed in the last paper disappoint my expectations, I should lose no time in modifying it, by adopting such measures as will remove, in the first place, the obstruction in the secerning vessels, and restore them to a condition that will enable them again to perform their functions properly. This having been accomplished, we may then treat the case generally as if no obstruction had ever existed.



There is also another symptom indicative of congestion, which deserves especial notice, inasmuch as it often leads the attention and judgment of the medical attendant astray. I allude to continued and obstinate sickness and vomiting, which, when unattended by any marked evidence of obstruction in the liver, is frequently considered to arise from mere irritability of stomach, and is erroneously and ineffectually treated with effervescing salines, prussic acid, and other sedatives; whereas, the cause being more deeply seated in the liver, it can only be tranquillised by remedies calculated to act more immediately upon that organ.

The following is an instance of this complication. A respectable middle-aged woman, who had been reduced to an ill state of health and great debility by anxiety of mind, but in whom the real nature of her ailments was not indicated by any prominent symptoms, complained of constant nausea, and frequently vomited without ejecting anything but a little watery fluid from her stomach. She had been subjected to a variety of treatment, and had taken without avail all the remedies usually employed to allay sickness and irritability of stomach. She came under my care only two days before she died, when her life was evidently in great danger from the exhaustion occasioned by the perpetual sickness and retching under which she had so long suffered; yet no very decided symptoms of hepatic congestion were present. She complained, it is true, of uneasiness in that region, increased on pressure; but no unusual fullness could be discovered by manual examination. Her bowels were regular, or easily kept open; her urine was not unnatural in quality; her tongue was slightly furred; her complexion was dark and dingy; the conjunctiva slightly yellow. I gave her three grains of calomel alone, and repeated it twice afterwards, and endeavoured to support her with stimulants, chiefly brandy and water. After the second dose, the stomach became tranquil, and the vomiting ceased, and on the next day she became completely jaundiced, and her urine loaded with bile; she sank, however, the day afterwards.

On examining the body, her liver was found to be much congested, with no other morbid appearance to account for her illness and death. Since that time, now many years ago, I have often met with similar cases; but, being more correctly treated, the sickness has been soon allayed, and the patients have recovered.

A strong corroboration of the view I have taken of the state of the organs of secretion, and of the necessity of removing all obstruction arising from congestion, is afforded by the effects occasionally experienced by patients at the commencement of a course of saline aperients, before their action upon the various secreting organs is fully established; viz., the febrile excitement, great disturbance of the system, headache, etc. I have already mentioned symptoms which



are well known to those who have undergone this treatment at the natural springs, and which are confidently expected and considered as a favourable omen. The explanation appears to be obvious. These stimulating salts having been absorbed into the circulation, would, in a healthy and pervious condition of the organs of secretion, speedily pass off again by the natural outlets; but if they are gorged, if the more minute vessels are plugged up, or temporarily obstructed, as I conceive them to be in congestion, a large portion of these salts will probably be retained in the system, stimulating the viscera to the performance of their functions, whilst the damaged condition of their machinery effectually prevents it; the consequence must necessarily be, a preternatural excitement of the whole body, not always unattended with danger.

If, then, after a full examination of the symptoms and state of the patient, we have reason to believe, that, in addition to the general disorder of the system and the contamination of the blood, the liver or any other important viscus labours under congestion, we should, after unloading the bowels, immediately apply our remedies to remove it.

Purgatives are ill-adapted to accomplish this object, because they rapidly pass through the bowels. We must, therefore, chiefly rely on the class of medicines termed deobstruents, among which the various preparations of mercury are the most effective. Their deobstruent action, however, as with all medicines of this class, will mainly depend upon the manner in which they are administered, and as this is a practical point of considerable importance, I shall proceed to offer some remarks thereon.

If deobstruents, either mercurials, salines, or any other, be given in large doses, or in combination with purgatives, they will be also hurried too rapidly through the intestines, to allow them time to act as deobstruents.

The patient may be weakened by their use, but is not always relieved. On the other hand, when they do not so immediately purge, but are absorbed into the circulation, their influence is brought to bear more immediately upon the congested part, the stimulus is applied to the loaded vessels and embarrassed apparatus of secretion, the obstruction is removed, the function of secretion is restored, and the organ gradually recovers its healthy tone. Purging being then induced, the effete matter which had been retained in the system is effectually carried off.

The rule, therefore, by which we should be guided in the treatment of the morbid condition under consideration, is to give our remedies in such doses and in such a manner as to insure, or at any rate to favour their operation in the way described above. If attention be not paid to this principle, we ought not to be surprised should they fail in perfectly accomplishing the purpose for which they were exhibited.

In treating abdominal congestion, especially of the liver,



it is obvious, that if, before we enter upon a course of deobstruent medicines, we can by any means directly relieve the portal vessels, we shall greatly facilitate their operation. Now it happens that hæmorrhoids, or at least a fullness and swelling of the hæmorrhoidal vessels are frequent concomitants of abdominal and hepatic congestion, and the spontaneous bleeding, which often ensues from the state of these vessels, to the great relief of the patient, appears to indicate the readiest mode of attaining this object. A few leeches may be applied to the anus with the happiest results. Abstraction of blood in this way will sometimes diminish in a marked manner the sensation of uneasiness and tightness in the region of the liver. If necessary, their application may be repeated.

The medical adviser must be guided in his choice of the most appropriate deobstruent, (selecting the mildest that will cure,) and in its administration, both as to quantity and method of giving it, by the circumstances of each case. Assuming that the patient possesses the average strength of constitution, mercury is beyond all doubt the most efficacious, and of it the *pilula hydrargyri c. cicuta*, (a) *pil. hydrargyri*, or calomel separately, or the latter combined together, will be found the best preparations. If, however, he should not have been in the habit of taking mercurial medicines, either the *hydrargyrum c. cretâ*, or very small doses of the first preparation will be sufficiently active; but if the symptoms are urgent, if there be heat of skin, and especially if any irritability of stomach exist, and the patient has been accustomed to the stimulus of mercury, calomel alone is beyond all comparison the best form in which we can give it. It tranquillises the stomach, it operates more powerfully on the liver, and it also relieves the heat and fever, by inducing a relaxation of the whole system, which is soon followed by an increase of all the secretions. The best practice to pursue in cases of passive congestion is to give two, three, or more doses of the mercurial, previous to the administration of a purgative. Much advantage may often be derived by exhibiting at the same time some alkaline medicine, either the *liquor potassæ*, or the bicarbonate of soda.

Should there be any febrile action present, the citrate of ammonia or potash with a sixth or fourth of a grain of tartar emetic at a dose may be substituted for them. After two, or more doses of the deobstruent medicines have been taken, an active purgative should be given. Sometimes the combined effect of these medicines is at once very great: they bring away large quantities of depraved secretion; but more commonly, although they may produce many stools, the quantity evacuated will at first be trifling, and the patient may complain of the irritation occasioned by the medicines

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(a) An old but valuable preparation.



without deriving any corresponding amount of relief. And, as I have before remarked, in such a case the evacuations may not present any very unhealthy appearance.

The practitioner should not be deterred by such a negative result from persisting in this plan of treatment. He should give in this case the deobstruent alone for a few days before the purgative is repeated, combined, if necessary, with a mild sedative, as the hyoscyamus or extract. lactucæ, to prevent as much as possible the irritation it might otherwise occasion. Unless the congestion has been of long standing and the structure of the minute vessels has been injured, four grains of the pil. hyd. c. cicuta with one of calomel given every night, or at the most twice a day, with a brisk aperient every second or third morning, will generally remove any moderate degree of obstruction in the course of a few days. The increased effect of the medicines on the bowels will intimate when this has taken place; numerous copious stools will then be passed, even on the days when the aperient is not taken. I may here remark, in reference to the use of deobstruents and purgatives, that since the same dose which was barely sufficient for breaking down the obstruction, may prove too powerful when that obstruction is removed, it should be diminished as soon as a copious flow of bile and other secretions has been established, or at least regulated in such a manner as to keep up a free discharge without creating distress or causing exhaustion. The evacuations, which had not been previously very unhealthy, will now generally be found exceedingly depraved, offensive, and dark, sometimes black. In a recent case, under this treatment, although offensive from the first, they were not altered in their appearance until calomel alone was substituted for the pil. hyd., which the lady had taken daily for a fortnight, and then the evacuations became literally black, as if composed entirely of chimney-soot and water mixed into a paste, after which many of the unpleasant symptoms subsided.

It happens occasionally, that the obstruction will not yield to this treatment until the breath or the gums give evidence that the system is affected by the medicine. It is especially necessary to push the treatment to this extent in those cases in which some degree of inflammation has been induced in the deep-seated structures of the viscera, occasioning, perhaps, a partial obliteration of the vessels. In such, the addition of small doses of emetic tartar will often facilitate the operation of the mercury.

But cases which require that the mercury should be carried thus far, are exceptions to the general rule in hypochondriasis, and ptyalism should be avoided, if possible, since the presence of that mineral in the system, in a greater quantity than is absolutely necessary to effect the object in view, will alone tend greatly to deteriorate the condition of the blood, and, in many constitutions, will be sufficient of



itself to induce an attack of despondency. Some cases of this nature have fallen under my own notice. At the same time, therefore, that I advocate a judicious employment of this powerful remedy, I am fully sensible of the mischief occasioned by an indiscriminate and excessive use of it. This will, I hope, be made evident, when hypochondriasis arising from other causes than those now treated of is under consideration.

When it is thought expedient to bring the system under this higher degree of mercurial action, it is better to give the medicine in small doses, and to repeat them more frequently, taking care that they also do not run off too quickly by the bowels; yet watching the effect with a jealous eye, so that we may lessen the quantity, or discontinue it altogether, as soon as we have effected our object.

Occasionally, when there is great torpor of the system, the application of a stimulating liniment or a blister over the region of the liver appears to rouse the oppressed viscus into action, and assist the medicinal part of the treatment.

If the saline treatment be adopted in the commencement, either alone or in conjunction with mercury, we cannot follow a better plan than that pursued at the mineral spas,—namely, to give whatever combination of salts we may think most advisable, in small doses, much diluted, and on an empty stomach. Should much general disturbance be created by the saline treatment, it will be advisable to postpone the further employment of it until the obstruction has been more completely removed; and if there should be any objection to a repetition of the use of mercury, the iodide of potassium, combined with the liquor potassæ, will often succeed in removing any remnant of the obstructing deposit that the mercury had left. An occasional brisk aperient should be given during the exhibition of the iodine, such as the pil. hyd. and ext. colocynth comp., or a scruple of jalap,—a dose that will not only empty the bowels, but will, at the same time, excite a free action in the liver and the other abdominal viscera.

Having, I hope, explained, with sufficient clearness, my view of the nature of congestion, and given a general sketch of the treatment necessary for its removal, (a) I will not enter into any further detail, either as to any modification of the plan of treatment I have described, or of the various formulæ which the experience of medical men may suggest. For example, the nitro-muriatic acid may be prescribed with advantage, especially after mercury has removed the obstruction, or when the use of that mineral is contra-indicated. The taraxacum also often exerts a powerful influence in exciting an increased action of the liver, and when the alvine discharges are black.

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(a) The reader must still remember, that I have as yet only considered the disease in persons of otherwise unbroken health.



The balsam copaibia, or *sp. terebenth.* in small doses, will greatly conduce to the relief of the oppressed viscera; but my object is rather to suggest a more precise application of remedies than any new combination of them; neither will I repeat the measures which should be adopted (when the obstruction has been removed) to restore the system to health, as the disease will then have been brought into the condition I described in my former papers, and may be treated in a similar manner.

I may, perhaps, be allowed here to make a passing remark on the suspension of secretions generally. Whilst great obstruction or much congestion exists in one of the more important viscera,—the liver for instance,—we know how futile are the attempts to excite the cutaneous vessels, or the kidneys, by remedies commonly termed diaphoretic or diuretic, or to alter the condition of the urine, excepting by acting directly on the congested viscus. Every experienced practitioner must almost daily meet with persons whose skin is harsh and dry, and wholly devoid of perspiration, yet in whom it is impossible directly to excite that secretion,—indeed, on whom diaphoretic medicines never fail to increase the general malaise, to produce heat and irritability, if not febrile action,—yet, when all hope of success has ceased, and the treatment has been successfully directed to the removal of the hepatic congestion, we find that not only is a free flow of bile induced, but the skin becomes soft and moist, the condition of the urine altered, the secretions of the mucous membranes re-established, as evinced by the altered condition of the mouth and fauces. In females the functions of the uterus, when disordered, are alike often restored by the relief or cure of the organ more especially suffering.

### ACCESSORY TREATMENT.

While we are carrying out the general plan of treatment I have described, various circumstances may arise which deserve attention. Although they may not be of great importance in themselves, they may occasion much discomfort, pain, and alarm to the patient.

It occasionally happens, after the functions of the various organs have been restored to a more natural state, that the patient's stamina has been impaired and his strength reduced, so that the exhibition of tonics becomes necessary. It is, however, advisable to prevent the reduction of the patient's strength, if possible; and this can be often effected by combining some tonic with the purgatives as soon as the secretions begin to improve, and subsequently by tonics alone. But the exhibition of tonics is a matter of delicacy. If given too soon, or in too large doses, they interrupt the cure. The choice of the tonic requires to be made with judgment. The mineral acids alone



or combined with some bitter, are, perhaps, the best suited to persons of sound stamina ; while steel is the more appropriate remedy for persons of a vitiated habit, whose pale, sallow complexion indicates the want of red blood, as well as other morbid states of it.

Much anxiety and uneasiness are often created by the acrid nature of the secretions ; and patients describe the sensations they experience from this source very vividly. They will tell you that they feel as if molten lead were passing through their intestines ; that the external orifice and parts adjacent are excoriated ; that each evacuation is attended by tenesmus, and a feeling as if the bowels were imperfectly relieved ; that sharp pinching pains are felt in various parts of the abdomen, especially in the course of the large intestine, and a distressing feeling of heat or burning in the centre of the abdomen around the umbilicus ; the whole abdomen is also often greatly distended with flatus, sometimes only at one part, as at the caput coli, the transverse arch, or sigmoid flexure ; in such cases, the distension is accompanied with considerable and fixed pain, which induces the fear, indeed, a settled conviction, on the part of the patient, of the existence of some serious local disease. The action of the nervous system is sometimes perverted in a different manner : instead of the patient complaining of pain and uneasy sensations, he describes his feeling to have become blunted and obtuse—even lost ; that the bowels appear to be palsied, and that he is almost unconscious of their existence ; and that he has lost the power of assisting himself by the exercise of the abdominal muscles when they require to be relieved. Other patients complain of an emptiness, and a sensation of sinking at the pit of the stomach, which creates great alarm, for they feel as if they were dying. Others will describe themselves as suffering from many of these disordered sensations simultaneously, and hurry from the description of one set of symptoms to another, returning to the first before they have half finished describing the second ; and it will often require some tact to confine the patient's attention to the main points of his malady, and to get anything like clear and definite answers to questions. For the relief of the sensations arising from the acrid nature of the secretions, the alkaline earths will be found very efficacious ; magnesia or lime-water given in conjunction with some carminative or aromatic water. These alkaline earths are to be preferred to the preparations of potash or soda, as they are not carried off by the kidneys ; but by passing through the whole length of intestinal canal, they absorb and neutralize the acids almost always present in the intestines in these cases. By neutralising, they prevent the re-absorption of those matters into the system, and thereby also prevent many of the troublesome and painful (secondary) phenomena, which might otherwise be occasioned by their presence in the blood.

If the abdomen should be greatly distended with wind,



turpentine enemata, or the fetid gums, may be given with advantage; friction of the spine, as well as of the abdomen, with a stimulating liniment, passing the hand in the course of the colon, with long sweeps rather than by a circumscribed rubbing, which is the more common practice.

Under such circumstances, fluid nourishment should be avoided; the warm spicy preparations of food, as currey, are to be preferred. The same remedies may also be used with benefit, when the action of the nervous system appears to be partially palsied; but, as I have before remarked, all these symptoms must be considered as effects of the general cause, and these remedies as auxiliaries entirely secondary to the general treatment.

The medical adviser who attends to and relieves these painful effects of the general malady will also be the most successful in gaining and retaining the confidence of his patient,—points of no trifling importance, where so much depends on the degree of control he may be able to exercise over them.

But whilst the whole system, as well mind as body, of the hypochondriac, is made wretched and miserable by the circulation of this poisoned blood, some parts seem to suffer more severely from it than others. The brain and nerves in one case, the heart in a second, the mucous membranes in a third; and sometimes in each instance to such an extent as not only to engross entirely the mind of the patient, but to attract so much attention as to mislead even the medical adviser; no organ or set of organs suffer more frequently, or more severely, than the digestive, producing, when the morbid matter or virus is concentrated on them, the most inveterate form of indigestion, and its almost endless train of miseries, amongst which heartburn of the severest kind is the most frequent, constant, and distressing. My observations, however, on these two disorders, must be deferred to my next communication.

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